

Environmental Engineers, Geologists and Scientists

Tel 847.573.8900 Fax 847.573.8953 Polo Park Business Center 27834 N. Irma Lee Circle Lake Forest, Illinois 60045-5130

March 13, 2019

Mr. Chris Dietrich SER Wastewater Program Wisconsin Department of Natural Resources 2300 North Dr. Martin Luther King, Jr. Drive Milwaukee, Wisconsin 53212-3128

RE: Discharge Monitoring Report for February 2019

WPDES Permit Number WI-0046566-07-0 BRRTS #: 02-41-576336 & 02-41-579429

FID #: 241828620 FIN #: 63340

Sunrise Shopping Center

2410-2424 10th Avenue & 1009 Marquette Avenue

South Milwaukee, Wisconsin 53172

Mr. Chris Dietrich:

Wisconsin Department of Natural Resources (WDNR) granted coverage under WPDES Permit Number WI-0046566-07-0 in a letter dated January 2, 2019, for full-scale chemical injection remedial activities at the above-referenced facility. In the January 2019 letter, WDNR approved continued coverage for the proposed chemical injection of RemOx® (Potassium permanganate). Following the January 2019 approval, 35 injection wells were installed and the gravity feed infiltration "system" was constructed and prepared.

During the month of February 2019, a minimal volume of chemical injection was performed on February 4, 2019. The purpose of the small volume injection was to test the gravity feed system (i.e., evaluation for leakage, verification of infiltration, etc.). No additional injection activities were performed during the month. The full-scale injection, consisting of both gravity feed infiltration to shallow subsurface and pressure injection at depth, is tentatively planned for initiation in March/April 2019.

In order to meet the requirements of Section 2 of the WPDES Permit Number WI-0046566-07-0, DAI Environmental, Inc., (DAI) is submitting this Discharge Monitoring Report (DMR) on behalf of Carol Investment Corporation, owner and Responsible Party for the Sunrise Shopping Center site located in South Milwaukee, Wisconsin. The completed DMR form with all required information for the month of February 2019 is included in Attachment A. The form is signed by Mr. Christopher Cailles of DAI as "Person Completing Form" and as "Authorized Agent" to the "Principal Exec. Officer" of Carol Investment Corporation.

DMRs will continue to be submitted on monthly basis as required, even during months in which no chemical injections activities are performed. After all injections activities are completed and closure with the WDNR RR Program is approved, termination of coverage under the WPDES Permit will be requested using Form 3400-221.

If you have any questions or require additional information in regards to this submission, please contact me at 847-573-8900 extension 580. Thank you for your time.

Sincerely,

DAI Environmental, Inc.

Christopher Cailles, P.E.

Christythe Carlles

Project Engineer

Attachment

cc: Steven Dukatt – Carol Investment Corporation (w/enclosure electronically)

Riley Neuman – WDNR RR Program (w/enclosure electronically)

ATTACHMENT A DISCHARGE MONITORING REPORT AND SIGNATURE AUTHORITY DOCUMENTATION

DISCHARGE MONITORING REPORT FORM - Contaminated Groundwater

PERMITTEE NAME: Sunrise Shopping Center

FIN: 63340

BRRTS #'s: 02-41-576336 & 02-41-579429

SITE ADDRESS: 2410-2424 10th Ave & 1009 Marquette

Ave., South Milwaukee, WI

WPDES PERMIT NO. WI-0046566-07

YEAR: 2019

DMR-In-situ Contaminants Revised 7/2018

Outfall Number	001	
Sample Point Description	Injection Borings	
Parameter Name	RemOx® (potassium permanganate)	
Parameter Units	Gallons	
Sample Date Below (mm/dd/year)		
February 4, 2019	1-gal (IW-23)	
Sample Type	Total	
Frequency of Sampling	Daily	

Unless noted under parameter name, each daily value entered must be the highest value of all sample types analyzed for that day.

Authorized per WISCONSIN STATUTE 283.55

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED IN THIS DOCUMENT AND ALL ATTACHMENTS AND THAT, BASED ON MY INQUIRY OF THOSE AND ALL ATTACHMENTS AND THAT, BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THAT THE INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINES AND IMPRISONMENT, (40 CFR 122.5). I ALSO CERTIFY THAT THE VALUES BEING SUBMITTED ARE THE ACTUAL VALUES FOUND IN THE SAMPLES; NO VALUES HAVE BEEN MODIFIED OR CHANGED IN ANY MANNER. WHEREVER I BELIEVE A VALUE BEING REPORTED IS INACCURATE, I HAVE ADDED AN EXPLANATION INDICATING THE REASONS WHY THE VALUE IS INACCURATE.

PLEASE ATTACH NOTES AND/OR ADDRESS-NAME **CORRECTIONS ON A SEPARATE SHEET**

RETURN REPORT NO LATER THAN: The 15th of the following month after injection, for the remainder of the remediation project.

SEND TO: **ATTN: Chris Dietrich**

2300 N. Dr. Martin Luther King Jr. Drive

Milwaukee, WI 53212-3128

Signature of Person Completing Form

Date

3/13/19

Signature of Principal Exec. Officer or Authorized Agent Title

as authorized representative

Project Engineer 3/13/19