



**KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
BUREAU OF ENVIRONMENTAL REMEDIATION**



**VOLUNTARY CLEANUP AND PROPERTY REDEVELOPMENT
PROGRAM**

—APPLICATION TO PARTICIPATE—

INTRODUCTION

Effective July 1, 1997, the State of Kansas issued new laws establishing the **Voluntary Cleanup and Property Redevelopment Act**, K.S.A. 65-34,161 *et seq.* The Voluntary Cleanup and Property Redevelopment Program, referred to as the “**VCPRP**”, has been developed by the Kansas Department of Health and Environment (KDHE) to implement K.S.A. 65-34,161 *et seq.* This application package (application form and instructions) provides the necessary direction for application to the VCPRP.

APPLICATION AND INFORMATION SUBMITTED

The completed application and information submitted with the application will be used by KDHE to determine an applying property’s eligibility for participation in the VCPRP. ***Please be sure to include a map with the application that clearly depicts the property boundaries.***

APPLICATION FEE

In accordance with K.S.A. 65-34,161 *et seq.*, a non-refundable application fee of \$200 must be submitted with the VCPRP Application Form. It is very important that this fee be submitted with the application; otherwise, the application will be returned to the applicant as incomplete.

*Make checks payable to: **Kansas Department of Health and Environment VCPRP***

WHERE TO SEND APPLICATION

Send completed application, supporting information, and the \$200 application fee to:

**VCPRP Coordinator
Kansas Department of Health and Environment
Bureau of Environmental Remediation
1000 SW Jackson, Suite 410
Topeka, Kansas 66612-1367**

KDHE REVIEW AND RESPONSE TO AN APPLICATION

KDHE has **60 days** from receipt of a complete application to determine a property’s eligibility for participation in the VCPRP. Incomplete applications may be returned to the applicant with specific identification of incomplete items. The applicant has 30 days to submit a revised and/or completed application to KDHE. If the application is complete upon resubmittal, KDHE will finish its review and provide the eligibility determination to the applicant. If the application is still not complete upon resubmittal, KDHE will deny and return the application to the applicant; if the applicant still wishes to participate in the VCPRP, the applicant will be required to reapply and include another \$200 application fee. **It is very important to ensure an application is completed in accordance with the instructions the first time!**

QUESTIONS ON ELIGIBILITY AND/OR COMPLETING THE APPLICATION

Call the VCPRP Coordinator at (785)296-8064.

APPLICATION INSTRUCTIONS

SECTION I	PROPERTY INFORMATION
Name	Provide a name for the property. The name may be based on an owner's name, current or historical operations, or the general location of the property.
Property Location	Provide a street address of the property. Also include the legal description of the property and/or a tax lot number, if one exists, which identifies the property. Tax lot numbers may be obtained from the city or county tax appraiser's office. Include a map that clearly depicts the property boundaries.
Historical Use	Provide a complete and specific description of the historical use of the property. An example would be: <i>agricultural, farmed land (until 1978); industrial, producing wood furniture (1978 to 1990); industrial, machine shop and metal plating (1990 to 1994); industrial, automotive parts fabrication (1994 to 1996).</i>
Current Use	Describe current activities at the property. An example: <i>"No current activities. Last operation at facility ceased in 1996."</i>
Future Use	If known, describe the intended future use of the property.
Surrounding Land Use	Check all boxes describing the land use in the area surrounding and immediately adjacent to the property.
SECTION II	APPLICANT INFORMATION
Applicant Name	Provide the name of the person(s) making application to the VCPRP.
Organization/Title	If the applicant is representing an organization, trust, company, or another individual, indicate the name of the organization and the applicant's title as representative.
Contact Information	Provide the applicant's mailing address and direct telephone number; include a fax number if available.
Applicant's Interest	Check all boxes that describe the applicant's interest in or relation to the property.
Owner Information	As stated on the application form, if the applicant is not the owner of the property, identify the property owner and provide the requested information.
SECTION III	NATURE OF POTENTIAL CONTAMINATION
Chemical Products/Wastes On Site	Check box(es) to indicate the general category(s) of chemical products and/or wastes handled, stored or disposed on the property. Check boxes for all categories applicable to the property regardless of whether a category of chemical is considered a potential source for contamination. Check the "Other" box and list any other chemical products or wastes for which descriptors are not provided.
Media Potentially Contaminated	Check the appropriate boxes to indicate the environmental media potentially contaminated at the property; also check a box to indicate whether contamination of a given medium is confirmed or suspected. An example would be a property in an area where shallow ground water is known to be present and there are no nearby surface water courses or drainages; a spill of solvent onto the ground is confirmed.
Source of Contaminants	Check the appropriate boxes to indicate the known or suspected sources for the contamination at the property.
Description of Problem	Provide a brief description of the contamination problem at the property. The description should provide a clear basis for why the subject property is proposed to be addressed through the VCPRP.

APPLICATION INSTRUCTIONS

SECTION III NATURE OF POTENTIAL CONTAMINATION (Continued):

Listing of Contaminant Compounds	Provide a list of contaminants detected at the property, with the maximum concentrations detected, and identify the media in which each contaminant was detected. Attach additional sheets for the list, if necessary, and include laboratory reports for sampling conducted at the property.
Investigative Work Conducted	Check the appropriate box(es) to indicate if environmental investigations have been conducted at the property. If some investigation has been done, check the box(es) indicating the level of investigation conducted to date. Provide the name of the entity that conducted the investigative work.

IMPORTANT! Copies of investigative reports, assessments, analytical results, and/or associated information must be submitted to KDHE with the VCPRP Application Form. If environmental investigations have been conducted, the application will be considered incomplete unless the investigative reports and/or associated information are provided with the application (see Misc. Instructions).

SECTION IV ELIGIBILITY INFORMATION

Please check the appropriate box to answer each of the questions listed in this section.

CERCLA Investigation	Indicate if any investigations have been conducted relative to the property under the auspices of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA), also referred to as Superfund. These investigations are usually conducted by the United States Environmental Protection Agency (EPA), its contractors, or the State of Kansas.
CERCLA/NPL Listing	Indicate if the property, or any portion of the property, has ever been listed or proposed for listing on the National Priorities List (NPL) established under CERCLA. Contaminated sites that have been listed on the NPL are usually referred to as "Superfund Sites".
Enforcement Action	Indicate if the property is currently subject to an enforcement action issued pursuant to city, county, state, or federal environmental laws. Enforcement actions are generally interpreted as orders or civil lawsuits issued by governmental entities requiring action be taken to remedy an issue of non-compliance with environmental laws.
Environmental Orders/Agreements	Indicate if the property is currently subject to an environmental order or agreement (e.g., Consent Order/Agreement, Interim Agreement, Letter Agreement, etc.) with a city, county, state, or federal governmental agency. This particular question does not pertain to permits issued by governmental entities to conduct regulated activities at a property or facility.
RCRA Permit	Indicate if the property has, or has ever had, a RCRA Permit or RCRA Interim Status. If the answer is yes, please provide the requested information including: 1) type of permit, such as a permit for treatment, storage, and/or disposal (active or post closure); 2) EPA Identification Number; 3) the date the permit was issued; and 4) the expiration date of the permit.
Waste Generator	Indicate if there are any past or current activities conducted at the property that required classification as an EPA or Kansas Hazardous Waste Generator. If a facility or operation on the property was or is classified as a hazardous waste generator, enter the applicable identification number where indicated.
Oil & Gas Activities	Indicate whether oil and gas production activities regulated by the Kansas Corporation Commission have been conducted at the property.
Immediate Risk	Respond by indicating if, to the best of your knowledge, contamination at the property poses an immediate risk of harm to human health or the environment.
Potential Impact to Drinking Water Supplies	Indicate if contamination at the property has the potential to impact, or already has impacted, public or private drinking water wells or surface water supply sources such as supply intakes on lakes or streams.

APPLICATION INSTRUCTIONS

MISCELLANEOUS INSTRUCTIONS AND INFORMATION

Please note the following additional information and clarification for submitting the VCPRP application:

- 1) Section II, Applicant Information. If the applicant is not the owner of the property described in Section I, documentation is required with the application verifying that the applicant has access to or control of the property. Documentation can include lease agreements, contracts, or other legal documents indicating the applicant has access to or control of the property, or simply written confirmation from the owner that the applicant has access for purposes of conducting VCPRP activities.
- 2) Section III, Nature of Potential Contamination. As stated in Section III, copies of all investigative reports and sampling data must be submitted with the application. This would strictly apply to sites/properties that are newly identified to KDHE. Regarding existing sites/properties for which reports and sampling data are currently on file with KDHE, the applicant can resubmit the reports and data, or simply attach a listing of documents (document title, date, prepared by, etc.) KDHE is to reference when reviewing the application to determine eligibility.
- 3) Site Maps/Legal Maps. As stated in Section I, a map that clearly identifies property boundaries must be included with the application. KDHE recommends the site map include the entire property, or specific portion intended to be addressed through the VCPRP as KDHE's No Further Action (NFA) determination will only be issued for the property (or specific portion) identified in the application. In addition, KDHE will require that a legal map of the property be submitted prior to issuing a NFA determination. A legal map is considered to be a map, plat, etc., that depicts the legal boundaries of the property for which the NFA will be issued, such as a map prepared by a Registered Land Surveyor. It is not necessary to conduct a legal survey for the purposes of submitting an application; however, the legal map will be required prior to KDHE's issuance of the NFA determination.
- 4) Refund of Remaining Deposit Balance. KDHE must be provided a Federal Tax I.D. number, or a Social Security Number for an individual, prior to refunding the remaining deposit balance upon mutual termination of a Voluntary Agreement. This information is not necessary for the application process, but will be necessary should a refund be required in the future.



**KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
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Application to Participate
**VOLUNTARY CLEANUP AND PROPERTY REDEVELOPMENT
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Application Form Instructions: Please type or print legibly. Incomplete applications and/or applications not accompanied by the required \$200 may be returned to the applicant. If any of the information requested is not applicable, enter "NA" in the blank. **VCPRP Application Form Page 1 of 3**

SECTION I PROPERTY INFORMATION

Property Name (facility or owner name) _____

Property Address _____

City (or Township) _____ County _____ Zip Code _____

Legal Description:

Township _____ South Range _____ (E/W) SectionQuarter(s) _____

Tax Lot # _____ Property Size (in acres) _____

*** Please include a map that clearly depicts the property boundaries (see instructions).**

Briefly describe the historical use of property with corresponding years of operation _____

Current use of property: _____

Future use of property (if known): _____

Land use surrounding property (check most applicable description or combination of descriptions):

Residential Industrial Commercial Agricultural Other (explain) _____

SECTION II APPLICANT INFORMATION

Applicant Name _____ Title _____

Organization _____

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone (___) _____ Fax (___) _____

Applicant's interest in or relation to property (check all that apply):

- Owner of property
- Operates facility on property
- Previous owner of property
- Previously operated facility on property
- Prospective owner of property
- Prospective facility owner or operator on property
- Disposed of contaminants on property
- Legal entity controlling property
- Acquired by default (bankruptcy, tax delinquency, abandonment, or other circumstances)
- Other _____

If Applicant is not the owner of the property, provide the following information:

Owner's Name _____ Organization _____

Owner's Mailing Address _____

City _____ State _____ Zip Code _____

Telephone (___) _____ Fax (___) _____

Kansas Department of Health and Environment
 Bureau of Environmental Remediation
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SECTION III NATURE OF POTENTIAL CONTAMINATION

Chemical products/ wastes present, used, or stored at the property (check all that you are aware of):

- | | | |
|--|--|---|
| <input type="checkbox"/> Solvents/degreasers | <input type="checkbox"/> Pesticides (herbicides, insecticides, etc.) | <input type="checkbox"/> Metals |
| <input type="checkbox"/> Petroleum products | <input type="checkbox"/> Inorganics (salt, soda ash, etc.) | <input type="checkbox"/> PCBs |
| <input type="checkbox"/> Acids/bases | <input type="checkbox"/> Fertilizer | <input type="checkbox"/> Other (list) _____ |
| <input type="checkbox"/> Paint/paint wastes | <input type="checkbox"/> Sludge | _____ |

Media potentially contaminated (check all that apply and indicate if contamination is confirmed or suspected):

- | | | |
|--|------------------------------------|------------------------------------|
| <input type="checkbox"/> Surface Soil | <input type="checkbox"/> Confirmed | <input type="checkbox"/> Suspected |
| <input type="checkbox"/> Subsurface Soil | <input type="checkbox"/> Confirmed | <input type="checkbox"/> Suspected |
| <input type="checkbox"/> Ground Water | <input type="checkbox"/> Confirmed | <input type="checkbox"/> Suspected |
| <input type="checkbox"/> Surface Water | <input type="checkbox"/> Confirmed | <input type="checkbox"/> Suspected |

Known or suspected source(s) of contaminants (check all that apply):

- | | | |
|--|---|--|
| <input type="checkbox"/> Surface spill or discharge | <input type="checkbox"/> Underground tank/piping | <input type="checkbox"/> Lagoons or ponds |
| <input type="checkbox"/> Dumping or burial of waste | <input type="checkbox"/> Above ground tank/piping | <input type="checkbox"/> Seepage Pit or dry well |
| <input type="checkbox"/> Septic tank/lateral field | <input type="checkbox"/> Pipeline release | <input type="checkbox"/> Source not known |
| <input type="checkbox"/> Drums or other storage containers | <input type="checkbox"/> Adjacent property | <input type="checkbox"/> Other (list) _____ |

Briefly describe the contamination problem on the property: _____

List the contaminants, maximum concentrations (if known), and media impacted (if known):

<u>Contaminant(s)</u>	<u>Maximum Concentration (state, or circle units)</u>	<u>Media</u>
_____		(ppb/ppm)

(attach additional sheets if necessary)

Investigative work conducted at the property:

- | | | |
|--|---------------------------------------|-----------------------------|
| Has investigative work been conducted at the property? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Has an environmental audit been conducted? | Phase I <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| | Phase II <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Have other investigations/sampling been conducted? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are water wells or monitoring wells located on the property? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Who conducted the investigation? _____

(Copies of all investigative reports and sampling data must be attached and submitted with application)

Kansas Department of Health and Environment
 Bureau of Environmental Remediation
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SECTION IV ELIGIBILITY INFORMATION

- Yes No Unknown Has a CERCLA investigation been conducted on the property?
- Yes No Unknown Has the property ever been listed, or proposed for listing, on the National Priorities List of Superfund sites established under CERCLA?
- Yes No Unknown Is the property, owner, operator, etc., currently subject to enforcement action issued pursuant to city, county, state, or federal environmental laws?
- Yes No Unknown Is the property currently the subject of environmental orders or agreements with city, county, state, or federal governmental agencies?
- Yes No Unknown Does the property have, or has the property ever had, a RCRA Permit or RCRA Interim Status? If so, provide the following information:

Type (Permit)	Identification Number	Date Issued	Expiration Date

- Yes No Unknown Are or were there activities conducted at the property requiring classification as an EPA or Kansas Hazardous Waste Generator? Provide the Hazardous Waste Generator Identification Number: I.D.# _____
- Yes No Unknown Have activities that are regulated by the Kansas Corporation Commission been conducted at the property?
- Yes No Unknown Does contamination at the property pose an immediate risk of harm to human health or the environment?
- Yes No Unknown Does contamination at the property threaten or impact public or private drinking water wells or surface water used for drinking water supply?

SECTION V APPLICATION TO PARTICIPATE TERMS/APPLICATION SIGNATURE

The undersigned requests technical oversight, guidance and/or assistance from the Kansas Department of Health and Environment (KDHE)/Bureau of Environmental Remediation (BER) with investigation and cleanup of contamination at the property for which this application is being made. A nonrefundable application fee of \$200 is enclosed to cover processing and application review costs incurred by KDHE.

BER shall determine, and notify the undersigned accordingly, if the subject property is eligible for the Voluntary Cleanup and Property Redevelopment Program (VCPRP). If the subject property is determined eligible to participate in the VCPRP, the undersigned shall sign and submit to BER a Voluntary Agreement within 30 days of receiving the Voluntary Agreement from BER. Execution of this application form does not constitute a Voluntary Agreement, and the undersigned shall not be bound to proceed with the voluntary action. By completing and signing this application, the undersigned does not admit or assume liability for investigation or cleanup of the property. The undersigned may terminate this Application for Participation at any time by notifying BER.

The application, attachments and \$200 nonrefundable fee (made payable to the Kansas Department of Health and Environment) should be submitted to:

Voluntary Cleanup Coordinator,
 Remedial Section
 Kansas Department of Health and Environment
 Bureau of Environmental Remediation
 1000 SW Jackson, Suite 410
 Topeka, Kansas 66612-1367

Name: (print or type) _____
Signature _____

Title: _____
Date: _____