



## Maine Department of Environmental Protection

### Voluntary Response Action Program Application

Please complete this application to request technical assistance from the Voluntary Response Action Program (VRAP), pursuant to 38 M.R.S. § 342(15) and 38 M.R.S. § 343(E).

Please read and follow the VRAP application instructions found on the Department's website prior to submitting your application, supporting documents, and application fee:

<https://www.maine.gov/dep/spills/vrap/appsub.html>

Direct any question to the VRAP Program Manager listed on the website.

#### General Site Information

Site Name:

Street Address:

City or Town:

Tax Map(s) and Lot(s) #:

Lat/Long Coordinates (decimal degree format):

Total Acreage of Property (all parcels):

#### Property Description Recorded at Registry of Deeds

County: Book(s) and Page(s):

#### Applicant Information

Applicant/Organization\*:

Contact Person: Title:

Address:

City: State: Zip:

Phone: E-mail:

## **Additional Applicant Information (if multiple applicants)**

Applicant/Organization\*:

Contact Person:

Title:

Address:

City:

State:

Zip:

Phone:

E-mail:

Applicant/Organization\*:

Contact Person:

Title:

Address:

City:

State:

Zip:

Phone:

E-mail:

\* The VRAP applicant(s) are the individual(s) or organization(s) that will be the recipient of any applicable administrative or liability assurances provided by VRAP. These entities may be different than the current property owner. The VRAP applicant is also responsible for payment of fees for Department review and oversight costs. Please see the Department's website for VRAP application guidance and for additional information on application fees and process: <https://www.maine.gov/dep/spills/vrap/appsub.html>

## **Current property owner (also add contact info if different than applicant)**

Organization/Name:

Contact Person:

Title:

Address:

City:

State:

Zip:

Phone:

E-mail:

## **Involvement with other regulatory programs**

Yes

None known

If yes, list the program/contact person from the Department:

**Contact person(s)**

**Please list the name(s) of your current environmental consultant and legal counsel.**

**Consultant:** \_\_\_\_\_ of \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Attorney:** \_\_\_\_\_ of \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**As applicant(s), agent(s) that may act on my behalf (list, if any):**

\_\_\_\_\_ of \_\_\_\_\_

\_\_\_\_\_ of \_\_\_\_\_

\_\_\_\_\_ of \_\_\_\_\_

\_\_\_\_\_ of \_\_\_\_\_

## Certification

I hereby make a request of VRAP to assist me and the company/organization I represent in determining whether the above-described property has been the site of a release or threatened release of a hazardous substance, hazardous waste, hazardous matter, special waste, pollutant or contaminant, including petroleum products or by-products. I understand this assistance may include the review of agency records and files, and review and approval of my investigation plans and reports as well as remedial action plans and implementation.

I am aware that the property listed in this application will be placed on the Division of Remediation's Sites List Database that is located on the Department's website, and that any documents I submit to the Department are publicly available through their file room. I am also aware that VRAP, at its discretion, may contact municipal officials regarding investigation and/or remedial actions at sites participating in the program.

Printed name:

Title:

Signature:

Date:

### **\*\*\*Note: For Properties with Petroleum Discharges from USTs or ASTs\*\***

If your property has petroleum discharges (or potential discharges) related to an underground storage tank (UST) or aboveground storage tank (AST) facility, **please also sign the following:**

I hereby agree to comply with 38 M.R.S. § 568(A)(4) which includes the submittal of work plans, budgets, and schedules to the Department for review and approval. I also agree to keep a detailed record of all costs associated with the investigation and cleanup of petroleum discharges at the property, and will submit estimates of past costs to investigate and cleanup petroleum discharges at the property that have been incurred prior to making this application.

Printed name:

Title:

Signature:

Date:

**Please** be sure to submit the following with your signed application; see website for more information <https://www.maine.gov/dep/spills/vrap/appsub.html>:

- Cover letter
- Public/private well survey
- VRAP public communication matrix determination
- VRAP application fee and supporting documentation
- Electronic copies of supporting reports and list of supporting reports
- Electronic Data Deliverables (EDDs) for recent analytic data
- Site location figure and simplified site figure (for use in final certification)