Certification of Attainment of Cleanup Levels and No Further Action Required

Site Name: _____

City: _____

Street Address: _____

County: _____

Site Inactive Hazardous Sites ID#: _____

For purposes of this certification, the "site" is defined as the above identified property and any additional area which has become contaminated as a result of hazardous substances or other non-petroleum, non-biological contaminants disposed at that property.

Initial each of the following statements.

I have reviewed all the available environmental records for this site. _____

All known and suspect areas of hazardous substance contamination and any other non-petroleum, non-biological contamination at the Site have been tested in accordance with Appendices A and B of the Inactive Hazardous Sites Program Guidelines for Assessment and Cleanup. For purposes of this certification, "suspect area" means any area of concern that has evidence of a release of contaminants including verbal or written information or records, knowledge of employees or other persons, visual observations, instrument readings, laboratory data, measured product inventory loss information, breached vessels and other forms of evidence. ***(Note: "Suspect areas: do not include areas that are simply storage areas, tanks, or chemical facilities where no evidence or indication of a release is known.)*** _____

The Inactive Hazardous Sites Branch protection of groundwater criteria for soils (reference section 4.1.1.2 of the Inactive Hazardous Sites Program Guidelines for Assessment and Cleanup) have been met. _____

The Inactive Hazardous Sites Branch remediation goals for direct contact for soils (reference section 4.1.1.1 of the Inactive Hazardous Sites Program Guidelines for Assessment and Cleanup) have been met. _____

The Inactive Hazardous Sites Branch remediation goals for groundwater, surface water and sediment (reference sections 4.1.2, 4.1.3, and 4.1.4 of the Inactive Hazardous Sites Program Guidelines for Assessment and Cleanup) have been met. _____

I certify that, to the best of my knowledge, after thorough investigation, the information contained in this certification is true and accurate. _____

Owner and Environmental Consultant for Owner Certification:
After first being duly sworn or affirmed, we [the owner and the owner's designated environmental consultant] each separately state that: I am over the age of eighteen, I am competent to make this certification based on my own knowledge and belief, and to the best of my knowledge and belief, after thorough investigation, the information contained herein is true and accurate.

Owner Signature:
Name of Signatory and Title:
Company:
Date:

STATE OF NORTH CAROLINA
COUNTY OF _____

I, _____, a Notary Public, do hereby certify that _____ personally appeared before me this day, produced proper identification in the form of _____, was duly sworn or affirmed, and declared that he or she is either the owner of the property referenced above or is a duly authorized agent of said owner and that, to the best of his or her knowledge and belief, after thorough investigation, the information contained in the above certification is true and accurate, and he or she then signed this Certification in my presence.

WITNESS my hand and official seal this ___ day of _____, 200__.

_____
Notary Public

My Commission expires: _____

[SEAL]

Environmental Consultant Signature:
Name of Signatory and Title:
Company:
Date:

STATE OF NORTH CAROLINA
COUNTY OF _____

I, _____, a Notary Public, do hereby certify that _____ personally appeared before me this day, produced proper identification in the form of _____, was duly sworn or affirmed, and declared that he or she is the duly authorized environmental consultant of the owner of the property referenced above and that, to the best of his or her knowledge and belief, after thorough investigation, the information contained in the above certification is true and accurate, and he or she then signed this Certification in my presence.

WITNESS my hand and official seal this ___ day of _____, 200__.

_____
Notary Public

My Commission expires: _____

[SEAL]