



**United States
ENVIRONMENTAL PROTECTION AGENCY
Washington, DC 20460**

OMB Number No. 2050-0192
Expires 01-31-2021

PROPERTY PROFILE FORM—Brownfields

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspect of this collection of information, including suggestions for reducing this burden, to the Environmental Protection Agency, Office of Environmental Information, Code 2822T, Washington, DC 20460; and to the Paperwork Reduction Project, Office of Management and Budget, Washington, DC 20503. DO NOT RETURN your form to either of these addresses. Send your completed form to the address provided by the issuing office.

PART I- PROPERTY INFORMATION

COOPERATIVE AGREEMENT RECIPIENT INFORMATION *(Mandatory for All Cooperative Agreements)*

1. Cooperative Agreement Recipient Name (State/Tribe for Section 128(a) Cooperative Agreements; Requestor for TBAs): _____
2. Cooperative Agreement Number (Not applicable for TBAs): _____

3. What type of cooperative agreement funding is being used for this property?
 Assessment Section 128(a) – State and Tribal Response
 Revolving Loan Fund Multipurpose Grant
 Cleanup TBA (EPA Regions Only)

4. For Assessment, Cleanup, Multipurpose and Revolving Loan Fund cooperative agreements, what type of funding is being used at this property?
 Hazardous Substance Petroleum Both

5a. Indicate if this form is the initial or Updated Form: 5b. If "Updated Form," what's the ACRES Property ID?
 Initial Form Updated Form _____

PROPERTY BACKGROUND INFORMATION *(Mandatory for All Cooperative Agreements)*

6a. Property Name: _____
6b. Property Alias: _____
7. Property Owner:
 Government (Tribal, State, Local) Private
8a. Street Address: _____ 8b. City: _____
8c. County: _____ 8d. State: _____ 8e. ZIP Code: _____
9. Size (in acres): _____ 10. Parcel Number(s): _____

STATE & TRIBAL BROWNFIELDS/VOLUNTARY RESPONSE PROGRAM INFORMATION

11a. Is this property enrolled in a State or Tribal Voluntary Response Program? Yes No
11b. If yes, enter the enrollment date and ID number:
Date of Enrollment: _____ ID Number (if applicable): _____

PROPERTY GEOGRAPHIC INFORMATION *(EPA Brownfields Program, or its contractors, will provide complete latitude/longitude information if cooperative agreement recipients are unable)*

12a. Latitude 12b. Longitude
(Use 00.000000 decimal degree (Use -000.000000 decimal
format): degree format):

PART II- ENVIRONMENTAL ACTIVITIES

ENVIRONMENTAL ASSESSMENT INFORMATION (Mandatory for Assessment Cooperative Agreements, Multipurpose Cooperative Agreements with assessments, State and Tribal Property-Specific Assessments, and TBAs; and, if information is available, for Cleanup and RLF Cooperative Agreements)

Table A – Environmental Assessment Activity (If there are multiple assessments, please use a separate line for each assessment)

Environmental Assessment Detail			Source of Funding <small>(enter one source of funding per line; do not include funding received prior to the award of this EPA CA)</small>						Name of Entity Providing Funds	Amount of Funding Expended on this Activity
Activity Funded	Start Date	Completion Date	This US EPA CA	Other Federal	State/Tribal (exclude §128(a) funds)	Local Gov't	Private/Other	Program Income		
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

13a. Indicate Whether Cleanup is Necessary: Yes No Unknown

(If unknown is selected, update whether cleanup is necessary when a final determination is made)

13b. If Unknown, Select Reason: _____ Other: _____

CONTAMINANTS & MEDIA AFFECTED INFORMATION

Table B - Contaminants and Media Affected (check all that apply) Media can only be selected if a contaminant has been found and/or cleaned up:

Contaminants				Media		
Class of Contaminant	REC*	Found	Cleaned Up	Media	Affected	Cleaned Up
Petroleum/Petroleum Products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Soil	<input type="checkbox"/>	<input type="checkbox"/>
Controlled Substances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air	<input type="checkbox"/>	<input type="checkbox"/>
Asbestos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Surface Water	<input type="checkbox"/>	<input type="checkbox"/>
PCBs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ground Water	<input type="checkbox"/>	<input type="checkbox"/>
Pesticides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Drinking Water	<input type="checkbox"/>	<input type="checkbox"/>
SVOCs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sediments	<input type="checkbox"/>	<input type="checkbox"/>
VOCs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Building Materials	<input type="checkbox"/>	<input type="checkbox"/>
Lead	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Indoor Air	<input type="checkbox"/>	<input type="checkbox"/>
Other Metals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Media Affected	<input type="checkbox"/>	<input type="checkbox"/>
PAHs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Other Contaminants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
No RECs	<input type="checkbox"/>					
No Contaminants		<input type="checkbox"/>				
Insufficient Information		<input type="checkbox"/>				

*REC = Recognized Environmental Conditions. RECs are most commonly identified during a Phase I Assessment as areas of potential concern. For Controlled Recognized Environmental Conditions, do NOT enter corresponding information for pre-existing Engineering & Institutional Controls.

ENVIRONMENTAL CLEANUP INFORMATION (Mandatory for Cleanup, Multipurpose, RLF, and State and Tribal Property-Specific Cooperative Agreements; and, if information is available, for Assessment Cooperative Agreements and Targeted Brownfield Assessments)

14a. Cleanup Activity Start Date: _____ 14b. Cleanup Activity Completion Date: _____

15a. Indicate whether Cleanup/Treatment Technology(ies) were implemented: Yes No Unknown

15b. If Cleanup/Treatment Technology(ies) are required, indicate the category(ies) (check all that apply):

- | | | |
|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Excavation and disposal of soils | <input type="checkbox"/> Removal of materials (tanks and piping, etc.) | Cleanup of structures (removal/abatement of asbestos/lead, PCB caulk, other contaminated building materials, etc...) |
| <input type="checkbox"/> Extraction of contaminants (soil vapor, free product, groundwater, etc.) | <input type="checkbox"/> Reduction of contaminants through Bioremediation/Phytoremediation | |

Additional Cleanup/Treatment Technology(ies) Information:

Address of Data Source (URL if available): _____

16a. Indicate whether Engineering Controls are required (Do not enter engineering controls that are managing Controlled Recognized Environmental Conditions): Yes No Unknown

16b. If Engineering Controls were required, indicate the category (check all that apply):

- | | | |
|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> Cover Technologies (e.g., Capping) | <input type="checkbox"/> Immobilization Process (e.g., Encapsulation, In-Situ Solidification) | <input type="checkbox"/> Engineered Barriers (e.g., Slurry Walls, Sheet) |
| <input type="checkbox"/> Security (e.g., Guard, Fences) | <input type="checkbox"/> Other | |

Additional Engineering Controls Information:

Address of Data Source (URL if available): _____

16c. Indicate whether Engineering Controls in place: Yes No Date: _____

17. Acres Cleaned Up: _____ 18. Number of Cleanup Jobs Leveraged: _____

PART II- ENVIRONMENTAL ACTIVITIES (continued)

19. For EPA Brownfields Funding used, Indicate the type and amount of funding (If any non-EPA Brownfields funding was used (including other types of EPA funding), fill out Table C):

<u>Amount</u>	<u>Amount</u>	<u>Amount</u>
<input type="checkbox"/> Section 128(a) State/Tribal _____		
<input type="checkbox"/> Multipurpose _____	<input type="checkbox"/> Cost Share _____	
<input type="checkbox"/> Cleanup _____	<input type="checkbox"/> Cost Share _____	
<input type="checkbox"/> RLF Loan _____	<input type="checkbox"/> Cost Share _____	<input type="checkbox"/> Program Income _____
Date RLF loan Signed _____	Repayment Period _____	Interest Rate _____
<input type="checkbox"/> RLF Subgrant _____	<input type="checkbox"/> Cost Share _____	<input type="checkbox"/> Program Income _____
Date RLF Subgrant Signed _____		

Table C - Environmental Cleanup Leveraged Funding Detail

Source of Funding (Enter one source of funding per line; do not include funding received prior to the award of this EPA Cooperative Agreement)				Name of Entity Providing Funds	Activity Funded	Amount of Funding Expended on this Activity
Other Federal (Include other EPA sources that are NOT Brownfields funding)	State/Tribal (exclude §128(a) funds)	Local Gov't	Private/Other			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

INSTITUTIONAL CONTROLS INFORMATION (Mandatory for all cooperative agreement types)

20a. Indicate whether Institutional Controls are required: Yes No Unknown

20b. If Institutional Controls were required, indicate the category (check all that apply):

- | | |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Proprietary Controls (e.g., easements, covenants) | <input type="checkbox"/> Governmental Controls (e.g., zoning, building codes, land use restriction) |
| <input type="checkbox"/> Informational Devices (e.g., state registries, deed notices) | <input type="checkbox"/> Enforcement/Permit Tools (e.g., permits, consent decrees) |

Additional Institutional Controls Information:

Address of Data Source (URL if available): _____

20c. Indicate whether Institutional Controls in place: Yes No Date: _____

21. Cleanup Completion Documentation. Select the type of documentation submitted to the EPA Project Officer.

*NFAs or EP Certification may not occur until after Institutional Controls are in place

- | | |
|----------------------------------------------------------------------------------------------------------------|----------------------|
| <input type="checkbox"/> No Further Action Letter Received | Date Received: _____ |
| <input type="checkbox"/> Letter/ Signed Report from an Qualified Professional | Date Received: _____ |
| <input type="checkbox"/> Other forms of documentation (subject to Project Officers approval). Please Describe: | |

PART III- ADDITIONAL PROPERTY INFORMATION

REDEVELOPMENT AND OTHER LEVERAGED ACCOMPLISHMENTS (Mandatory for Assessment, Cleanup, Multipurpose and RLF Cooperative Agreements; and, if information is available, for State and Tribal Property-Specific activities and Targeted Brownfield Assessments)

22a. Redevelopment Start Date: _____ 22b. Redevelopment Completion Date: _____

Table D- Redevelopment Leveraged Funding Detail

Source of Funding (Enter one source of funding per line; do not include funding received prior to the award of this EPA Cooperative Agreement)				Name of Entity Providing Funds	Activity Funded	Amount of Funding Expended on this Activity
Other Federal (Include other EPA sources that are NOT Brownfields funding)	State/Tribal	Local Government	Private/Other			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

23. Number of Redevelopment Jobs Leveraged: _____

24. Redevelopment Land Use (Check all that apply). Indicate the acreage or square footage for each type of redevelopment on the property.

Residential Acres or Square Feet

- Greenspace _____
- Industrial _____
- Commercial _____

ANECDOTAL PROPERTY INFORMATION *(If information is available for all cooperative agreement types)*

25. Property Highlights (Including Property Description, Past Uses, Past Ownership, Current Condition and Future Uses):

26. Predominant Past Use(s) (Check all that apply. If multiple uses, indicate the acreage or square footage for each type of use)

- | | Acres | or | Square Feet |
|--------------------------------------|--------------|-----------|--------------------|
| <input type="checkbox"/> Residential | _____ | | _____ |
| <input type="checkbox"/> Greenspace | _____ | | _____ |
| <input type="checkbox"/> Industrial | _____ | | _____ |
| <input type="checkbox"/> Commercial | _____ | | _____ |