



STATEWIDE HEALTH STANDARD CHECKLIST

Notice of Intent to Remediate

1. Site name and location information, including latitude and longitude ☐
2. Description of site and intended future use of property ☐
3. Contact information
 - a. Remediator ☐
 - b. Owner ☐
 - c. Consultant ☐
4. Site map ☐

Final Report

1. Transmittal Sheet ☐
2. Notifications
 - a. Public Notice (A copy of the proposed text of the newspaper notice and the anticipated publication date)
 - i. NIR ☐
 - ii. Final Report ☐
 - b. Municipal Notices (A copy of letter to municipality with USPS Certified Mail Receipt)
 - i. NIR ☐
 - ii. Final Report ☐
3. Fees ☐
4. Final Report Summary per on-line format ☐
5. Final Report
 - a. Site name and location information, including municipality, county, and latitude and longitude ☐
 - b. Site Characterization
 - i. Ecological Screen ☐
 - ii. Vapor Screen ☐
 - c. Fate and Transport Modeling ☐
 - d. Remediation ☐
 - e. List of contaminants ☐
 - f. Attainment demonstration
 - i. Residential or Non-residential ☐
 - ii. Non-use aquifer ☐
 - iii. Groundwater ☐
 - iv. Soils ☐
 - v. If applicable
 - (1) Surface water requirements ☐
 - (2) Air Quality requirements ☐
 - g. Narrative of site and remediation
 - i. History of site and land use ☐
 - ii. Use of regulated substances on site ☐
 - iii. Remediation performed ☐
 - iv. Volume of contaminants remediated ☐

- h. Post-remediation care plan ☐
- i. Contact information
 - i. Remediator ☐
 - ii. Owner ☐
 - iii. Consultant ☐
- j. Attachments, including
 - i. Analytical results ☐
 - ii. As applicable:
 - (1) Tables ☐
 - (2) Maps and ☐
 - (3) Figures ☐
- k. Signatures ☐

Preparer Name _____ Preparer Signature _____

Date _____