

AGENCY OF NATURAL RESOURCES

State of Vermont
Department of Environmental Conservation
Waste Management & Prevention Division
1 National Life Drive – Davis 1
Montpelier, VT 05620-3704
(802) 828-1138

Section 1. General Information

Class I or II groundwater zone;

Residence; or Property boundary

MANAGEMENT OF NON-HAZARDOUS CONTAMINATED SOIL REQUEST FORM July 2021

This form is to be used to assist in the compliance with the Investigation and Remediation of Contaminated Properties Rule (IRule) §35-803. This form takes the place of the ANR Off-site Soil Treatment Form and is to be used for the movement, stockpiling, treatment, or disposal of non-hazardous contaminated soils, both on-site and off-site. This form should be included with Soil Management Plans and Corrective Action Plans, as applicable. DEC Site Manager approval must be received, as signified by signature in Section 4, prior to the initiation of soil management work.

Soil Source Site Name:			
Address:			
Facility ID#:	and/or Spill # :	and/or SMS Site #:	
		or more than 90 days or between December 1 st and April 1 st ?	
Disposal Facility:			
Quantity of Soils:	cubic yards		
Soil Contaminants:			
□ Soil will be live load□ Soil to be temporal□ Soil is Staying On-S	te for Treatment. If yes, complet	orted to disposal facility. If yes, complete entire form.	
Section 2. Soil Stockpi	e Siting Criteria Checklist		
	ole drinking water supplies within upplies are shown to be hydraulic	n 300-foot radius of the Soil Stockpile. This limit may need to b cally down gradient.	
☐ Soil Stockpile is not	Soil Stockpile is not within zone one or two of a groundwater source protection area.		
□ *There are no sens	tive environments within 100 fee	et of the treatment location including, but not limited to:	
	g., stream, river, lake, pond, wetla Illy listed threatened or endangere		

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	Public access to the soil is prohibited through pe	osting no trespassing or other mean	s approved by Secretary.	
		he owner of the soil stockpiling parcel is different from the soil generator, written approval from the landowner that of grants access to the Secretary, has been obtained before stockpiling begins.		
	**The municipality in which the soils will be sto treatment location. If applicable, local permits st attached.			
	ANR Atlas generated Map including the latitude stockpiled. Minimum acceptable accuracy is plu	and longitude of the location in decusion in decusion in decusion and the second second in the second second in the second second in the second secon	cimal degrees where the soil will be	
	etback criteria from sensitive receptors cannot be achieved his is a requirement for off-site stockpiling of soils only.	, please provide written explanation.		
	tion 3. Ownership Information			
Loc	ation of Soil Stockpile	Generator/Owner of Soil/R	esponsible Party	
Str	eet Address	Street Address		
	mpany Name	Company Name		
	ndowner	Owner Name		
Na Lar	ndowner	Owner Name		
	one #	Owner Phone #		
Lar	ndowner			
em	ail	Owner email		
Sec	tion 4. Signature Section			
Re	sponsible Party:			
apı	the party responsible for compliance with the plicable statutes, I hereby certify that the represence.	_		
Name of Owner/Operator Representative (printed)		Company Title		
 Sig	nature	Date		

Management of Non-Hazardous Contaminated Soil Request Form



Management of Non-Hazardous Contaminated Soil Request Form	
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Landowner:

Print Name

Signature of DEC Site Manager

•	location, I hereby give approval to the soil generator to stockpile the soi ocation. In addition, I hereby grant property access to DEC investigators for any reasonable time.
Print Name	
Signature	Date
DEC Site Manager Approval:	

Date of Approval

