



## REMEDIAL SERVICES BRANCH ANNUAL REPORT

State Form 57108 (R2 / 08/24)

### INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

OFFICE OF LAND QUALITY

REMEDIAL SERVICES BRANCH

Submit report to: Program e-Submission folder and  
project manager

**Purpose:** For the Voluntary Remediation Program (VRP), this Annual Report form satisfies Indiana Code (IC) 13-25-5-15, *Voluntary remediation work plan; implementation; reports*, for making regular reports to the commissioner concerning the remediation and Paragraph 20, *Progress Reports* of the current Voluntary Remediation Agreement (VRA). The purpose of progress reports is to assure IDEM that (a) work is progressing in line with the schedule provided in the VRA and the approved Remediation Work Plan (RWP), and (b) completion of the project can be reasonably assured on the scheduled date. If IDEM determines that the Applicant has not made good faith efforts to execute the VRA or fails to maintain the schedule in the RWP, VRP can withdraw from the VRA and terminate the project.

For the State Cleanup Program (SCP), this Annual Report form satisfies the requirement for annual reporting of project progress under the Scope of Work (SOW), contained in the Notice of Liability and Information Request letter (NL Letter). This form does not take the place of the need for submittal of other work plans and reports, which are required per the SOW, contained in the NL Letter and which are necessary to document the completion of site characterization and implementation of remedial actions under IC 13-25-4-9(a) and IC 13-24-1-2.

**Due Date:** January 31, annually, until site achieves closure (receives Covenant Not to Sue from VRP or No Further Action letter from SCP). Information submitted is for the prior calendar year.

Project Identification		Current Information	
Program	<input type="checkbox"/> Voluntary Remediation	<input type="checkbox"/> State Cleanup	
Site program number			
Site name			
Site address			
Submitter's name			
Submitter's email address			
Current site owner(s) name			
Current site owner(s) address			
Current site owner(s) email			
Current site owner(s) phone number			
Responsible party/Applicant name, address, email and phone number (if different than current owner)			
Any other IDEM programs and program number			
Consultant or Representation for the Applicant(s)			
Project Background			
Current site use (Brief)			
Any significant change in surrounding site use			
Current project stage (site characterization, active remediation, post-remedial monitoring, plume stability monitoring, etc.)			
Release-related chemical(s)			
Off-site contamination (yes or no)			
Potentially completed pathways			

**Delineation Status**

Identify the status of contaminant delineation in each medium as "On-going" or "Completed." If on-going, specify data gaps and a projected completion date. If marked completed on this form, include VFC # of document demonstrating evidence of completed delineation.

Soil/Sediment	<input type="checkbox"/> On-going <input type="checkbox"/> Complete	
Groundwater	<input type="checkbox"/> On-going <input type="checkbox"/> Complete	
Vapor	<input type="checkbox"/> On-going <input type="checkbox"/> Complete	
Preferential pathways	<input type="checkbox"/> On-going <input type="checkbox"/> Complete	
Ecological assessment	<input type="checkbox"/> On-going <input type="checkbox"/> Complete	

**Schedules**

Schedule of all field work previous year	
Proposed field schedule for coming year	
Proposed schedule for document submittals in coming year	
Items proposed but not completed in the past year	
Schedule with next steps for the coming year ( <i>more investigation, develop RWP, suspend active remediation, etc.</i> )	
Expected timeline to closure	

**Operating Systems**

Description of any systems that operated during the year ( <i>Remediation or vapor mitigation</i> )	
Down time	
Still operable or that could be operable	
Expected life	

**Institutional Control Development**

Verify that draft ERC has been reviewed by IDEM ( <i>Following IDEM-approval, on- and off-site ERCs must be recorded prior to submittal of RCR</i> )	
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**Administrative Record**

List of the documents, including VFC numbers, documenting current status of site characterizations and/or remedial actions.	
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I, \_\_\_\_\_, certify that this document and all attachments were prepared  
(*Print or Type Name of Submitter*)

under my direction or supervision by qualified personnel. Based on my inquiry of the persons who gathered the information, it is, to the best of my knowledge, true, accurate, and complete. I further certify that I am authorized to submit this information.

\_\_\_\_\_  
*Submitter's signature or designated representative*

\_\_\_\_\_  
*Date (month, day, year)*