



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

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PROPERTY PROFILE FORM—Brownfields

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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?
- | | |
|--|---|
| <input type="checkbox"/> Assessment | <input type="checkbox"/> Section 128(a) – State and Tribal Response |
| <input type="checkbox"/> Revolving Loan Fund | <input type="checkbox"/> Multipurpose Grant |
| <input type="checkbox"/> Cleanup | <input type="checkbox"/> 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?
- | | | |
|--|------------------------------------|-------------------------------|
| <input type="checkbox"/> Hazardous Substance | <input type="checkbox"/> Petroleum | <input type="checkbox"/> Both |
|--|------------------------------------|-------------------------------|

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

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

- 6a. Property Name: _____
- 6b. Property Alias: _____
7. Property Owner:
- | | |
|--|----------------------------------|
| <input type="checkbox"/> Government (Tribal, State, Local) | <input type="checkbox"/> 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 (Use 00.000000 decimal degree format): _____
- 12b. Longitude (Use -000.000000 decimal 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)

Activity Funded	Start Date	Completion Date	Source of Funding (enter one source of funding per line; do not include funding received prior to the award of this EPA CA)						Name of Entity Providing Funds	Amount of Funding Expended on this Activity
			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):

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

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):

- Cover Technologies (e.g., Capping)
- Immobilization Process (e.g., Encapsulation, In-Situ Solidification)
- Engineered Barriers (e.g., Slurry Walls, Sheet)
- Security (e.g., Guard, Fences)
- 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):

For this collection of information is estimated to be one hour per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates at Section 128(a) State/Tribal

<input type="checkbox"/> Multipurpose	_____	<input type="checkbox"/> Cost Share	_____	<input type="checkbox"/> Program Income	_____
<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.

- | | | | |
|--------------------------------------|-------------|----|-------------------|
| <input type="checkbox"/> 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	_____		_____