

**APPLICATION FOR REVIEW OF
 ENVIRONMENTAL DOCUMENTS FOR SITES NOT ENROLLED IN
 EHS' VOLUNTARY REMEDIAL OVERSIGHT PROGRAM**

Applicant (Requestor):

Name: _____
 Applicant Relation to Subject Property (owner/agent/other): _____
 Phone Number: _____
 Email Address: _____
 Street Address: _____
 City, State and Zip Code: _____

Project/Site Location:

Address of Subject Property: _____
 Assessor Parcel Number(s): _____
 Legal Description(s): _____

Property Owner (if different than Applicant).

- The Site is owned by:

Name: _____
 Address: _____

 Phone no.: _____
 Email: _____

Planning Agency Name and Contact Information

Name: _____
 Agency: _____
 Phone no.: _____
 Email: _____

DOCUMENT TYPE

FEE (PER DOCUMENT)

PHASE I ENVIRONMENTAL SITE ASSESSMENT	\$412
OTHER PREDEVELOPMENT DOCUMENTS	\$412
PHASE II ENVIRONMENTAL SITE ASSESSMENT/WORKPLAN	\$619
SOIL/RISK MANAGEMENT PLANS	\$619
REMEDIAL OR CORRECTIVE ACTION REPORTS	\$619

List All Reports Submitted for Review (use additional form if needed)

<u>Report Type</u>	<u>Report Title and Date</u>	<u>Fee (each report)</u>
(1) _____	_____	\$ _____
(2) _____	_____	\$ _____
(3) _____	_____	\$ _____
(4) _____	_____	\$ _____
(5) _____	_____	\$ _____
TOTAL FEE:		\$ _____

APPLICANT SIGNATURES

Signature: _____ Date: _____

Print Name: _____ Title: _____

Signature: _____ Date: _____

Print Name: _____ Title: _____

For Department Use Only		
Fixed Fee Rec'd by: _____	Date: _____	Amt: \$ _____
Credit Card Trans No: _____ (last 4 digits)	Check # _____	Check Date _____
EHS Receipt # _____		