



## SECTION 128(A) ASSESSMENT APPLICATION FORM

FACILITY/OPERATION INFORMATION				NDEQ ID :		NDEQ PROGRAM ID :							
1	Name:												
2	Facility Phone Number:												
3	NAICS:												
FACILITY/OPERATION LOCATION INFORMATION													
4	Address:												
5	City:				State:	NE	Zip Code:			County:			
6	Legal Description:		¼ of		¼ of		¼ of	Section		Township		Range	
FACILITY/OPERATION MAILING INFORMATION													
7	Address:												
8	City:							State:		Zip Code:			
FACILITY/OPERATION CONTACT INFORMATION													
9	Person:												
10	Phone Number:												
11	Cell Number:												
12	Fax Number:												
13	Email Address:												

14	<b>Certification Statement</b>								
<p>As applicant or an authorized individual representing the applicant (the undersigned), I certify that the foregoing information on this application and accompanying documents, estimates, and other descriptive information are true and accurate to the best of my knowledge and belief.</p>									
<input type="checkbox"/> This form has been completed and reviewed by the person(s) noted and signatures applied below.									
<input type="checkbox"/> In completing this form, the following is understood: <ul style="list-style-type: none"> <li>• I agree to provide all applicable information to properly identify the property of concern.</li> <li>• I have obtained or will assist in obtaining a signed site access agreement by the legal owner of the property of concern.</li> <li>• I will provide truthful and timely responses to inquiries made by NDEQ or its contractors about the property of concern.</li> </ul>									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Typed or Printed Name of Authorized Individual</td> <td>Title</td> </tr> <tr> <td>Signature of Authorized Individual</td> <td>Date</td> </tr> <tr> <td>Typed or Printed Name of Authorized Individual</td> <td>Title</td> </tr> <tr> <td>Signature of Authorized Individual</td> <td>Date</td> </tr> </table>		Typed or Printed Name of Authorized Individual	Title	Signature of Authorized Individual	Date	Typed or Printed Name of Authorized Individual	Title	Signature of Authorized Individual	Date
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**APPLICANT:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_  
**CONTACT PERSON:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_  
**EMAIL:** \_\_\_\_\_

**CURRENT PROPERTY OWNERSHIP:**

IF PROPERTY IS OWNED BY APPLICANT, DID APPLICANT OBTAIN THE PROPERTY THROUGH:  
 FORECLOSURE  PURCHASE  OTHER (SPECIFY): \_\_\_\_\_

DATE PROPERTY OBTAINED: \_\_\_\_\_

IF PROPERTY IS NOT OWNED BY APPLICANT, WILL APPLICANT OBTAIN THE PROPERTY THROUGH:  
 FORECLOSURE  PURCHASE  OTHER (SPECIFY): \_\_\_\_\_

IF PROPERTY IS NOT OWNED BY APPLICANT, HAS APPLICANT OBTAINED PERMISSION TO WORK ON THE SITE AND FOR NDEQ OR NDEQ'S REPRESENTATIVES TO ENTER THE PROPERTY TO CONDUCT SITE ASSESSMENT ACTIVITIES?  
 YES (if yes, attach copy of documentation)  NO

EXPLAIN: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ADDITIONAL PROPERTY LOCATION:**

LATITUDE: \_\_\_\_\_ LONGITUDE: \_\_\_\_\_

(attach legal plat map and/or other map(s) if available)

**PROPERTY ZONING:** \_\_\_\_\_ **TOTAL ACREAGE OF PROPERTY:** \_\_\_\_\_ (attach site map, if available)

<u>PAST PROPERTY USES</u> (type of manufacturing, operation, etc.)	<u>APPROXIMATE DATES</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

<u>BUILDINGS ON PROPERTY</u>	<u>SQUARE FOOTAGE</u>	<u>CONDITION</u> (usable, gutted, razed, etc.)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**DESCRIBE PUBLIC INTEREST AND / OR COMMUNITY INVOLVEMENT IN PROPERTY REUSE PLANNING:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ANTICIPATED FUTURE USE:**     RESIDENTIAL     RECREATIONAL     COMMERCIAL / RETAIL     INDUSTRIAL

OTHER (SPECIFY): \_\_\_\_\_

DESCRIBE APPLICANT'S PROPOSED REUSE PLAN: \_\_\_\_\_

**DESCRIBE ANY FINANCIAL INCENTIVES PLANNED TO SPUR DEVELOPMENT AND/OR CLEANUP AND PROPOSED FUNDING SOURCES** (tax incentives, etc.):

*(NDEQ's Section 128(a) program is for site assessment only; cleanup money is not being offered as part of this program.)*

**IS THERE ANY REASON TO BELIEVE THE PROPERTY IS CONTAMINATED WITH:**     HAZARDOUS SUBSTANCE, POLLUTANT AND/OR CONTAMINANT     PETROLEUM     CONTROLLED SUBSTANCES     MINE-SCARRED LAND?  
 YES (describe below)     NO     UNKNOWN

*(Common examples of hazardous substances include: solvents/degreasers, pesticides, metals (lead, mercury, arsenic, etc.), PCBs, grain fumigants, and paint/paint wastes. Common examples of controlled substances include: methamphetamines, & other illegal drugs)*

**DESCRIBE/LIST SUSPECTED CONTAMINANTS/ENVIRONMENTAL CONCERNS:** \_\_\_\_\_

**IF PROPERTY IS OWNED BY APPLICANT, DID APPLICANT:**

**(1) GENERATE OR DISPOSE OF ANY OF THE CONTAMINANTS?**     YES (describe below)     NO     UNKNOWN

**(2) OWN THE PROPERTY WHEN CONTAMINATION OCCURRED?**     YES (describe below)     NO     UNKNOWN

REGARDLESS OF PROPERTY OWNERSHIP, IS APPLICANT AWARE OF ANY FEDERAL, STATE, OR LOCAL AGENCY INQUIRY OR ORDER REGARDING ANY PARTY'S RESPONSIBILITY FOR CONTAMINATION OR HAZARDOUS WASTE AT THE PROPERTY?

YES (describe below)     NO

BRIEFLY DESCRIBE INVOLVEMENT / ROLE OF AGENCY IN ENFORCEMENT AND / OR OVERSIGHT OF THE INQUIRY OR ORDER: \_\_\_\_\_

**PRIOR PROPERTY/SITE ASSESSMENT ACTIVITIES:**     COMPLETED     NONE     UNKNOWN

DESCRIBE CONCLUSIONS OF PRIOR SITE ASSESSMENT ACTIVITIES (or attach "conclusion" section of report(s)):

IF REPORTS ARE UNAVAILABLE, IDENTIFY CONSULTANT, CLIENT, AND APPROXIMATE DATE OF STUDY:

**PROPERTY/SITE ASSESSMENT NEEDS**

DESCRIBE DIFFICULTIES RELATED TO PERCEIVED CONTAMINATION THAT HAVE HINDERED REUSE OF THE PROPERTY:

**SUBMIT COMPLETED FORMS TO:**

**VCP/Program Coordinator  
Remediation Section  
Nebraska Department of Environmental Quality  
PO Box 98922 -- 1200 N Street, Suite 400  
Lincoln, NE 68509-8922  
Phone: (402) 471-4210  
E-mail: [NDEQ.VCPBrownfields@nebraska.gov](mailto:NDEQ.VCPBrownfields@nebraska.gov)**