

**RI Department of Environmental Management
Environmental Land Usage Restriction (ELUR)
Annual Compliance Evaluation Form**
(Please type or print)

Site Name:		Property Owner:	
RIDEM File Number:		Telephone Number of Owner:	
RIDEM Project Manager:		Mailing Address of Owner:	
Site Address:		E-Mail Address of Owner:	
City/Town:		ELUR Recording Date:	
Plat / Lot(s) Numbers:		Inspection Date:	

This Annual Compliance Evaluation Form is not appropriate for use on sites that require the use of any active remediation systems (e.g. active SSDS, ongoing air or groundwater monitoring, etc.) unless explicit, written permission has been granted by the Department.

1. Site Description

- a. Is the ELUR applicable to the entire site?

Yes No

If no, please describe the portion of the property subject to the ELUR:

- b. What does the ELUR restrict? (Select all that apply)

Residential uses
Groundwater
Exposure to site soils
Infiltration of water
Subsurface structures
Other (Please explain): _____

2. Groundwater

- a. Are there any known or observed groundwater wells present?

Yes No

b. Are these well(s) used for drinking water?

Yes No Not applicable

If no, please state what they are used for (e.g. irrigation, cooling, etc.):

c. Are there any environmental monitoring wells present?

Yes No

3. Engineered Controls (e.g. asphalt, concrete, building foundations, landscaped areas, etc.)

a. What are the engineered controls on the site? (Select all that apply)

- Two feet of clean fill
- One foot of clean fill over geotextile liner
- Asphalt (minimum six inches of clean fill and four inches of asphalt)
- Concrete (minimum six inches of clean fill and four inches of concrete)
- Building foundation(s)
- Fence
- Restricted access
- Impermeable cap (to prevent infiltration)
- Passive SSDS
- Vapor barrier
- Other (Please describe): _____

b. Overall condition of the engineered control(s):

Good Non-compliant
Acceptable Not applicable (Sites where only groundwater is restricted)

c. Are there any areas on the property that have broken concrete, cracked asphalt, potholes, eroded landscaping, etc.?

Yes No N/A

If yes:

Please provide a description of the area(s) of concern: _____

Could water infiltrate through these areas into underlying contaminated soils?

Yes No N/A; Infiltration not restricted

When will the area(s) of concern be repaired? _____

- d. Have there been any soil disturbances or excavations into the cap (engineered control) in the last year?

Yes No

If yes:

How large was the area of disturbance? _____

Please provide the reason or cause for disturbance or excavation: _____

Was this disturbance or excavation approved by the Department?

Yes, Date of approval: _____
No
N/A

Was the Soil Management Plan (SMP) properly followed?

Yes No N/A

If no, please explain: _____

Was any soil taken offsite?

Yes No N/A

- e. Within the past year has there been any construction at the property **unauthorized** by the Department?

Yes No

If yes:

Please explain: _____

Did this construction disturb site soils, the existing building or capped surfaces (asphalt, concrete, or landscaped areas)?

Yes No

If yes, please specify: _____

- f. Have there been any subsurface structures (underground storage tanks, below grade foundations, septic systems, storm water systems, French drains, etc.) constructed or installed since the remediation was completed?

Yes No

If yes:

Please explain: _____

Was permission of the Department's Office of LRSMM obtained?

Yes, Date of approval: _____
No

- g. Condition of landscaped areas:

Good Acceptable Non-compliant N/A

- h. Does the cap effectively limit exposure to contaminated subsurface soil?

Yes No N/A

4. Property Use

- a. What is the current use of the property? _____

- b. Are there any residential uses on the property (i.e. houses, apartments or condominiums, etc.) that **were not** previously approved by the Department?

Yes No Residential use is permitted

If yes, please explain: _____

- c. Are there any schools, daycare facilities or recreational facilities on the property that **have not** been approved by the Department?

Yes No Residential use is permitted

If yes, please explain: _____

d. Has the property use changed in any way since the ELUR was recorded?

Yes No

If yes, please explain: _____

5. Fencing (if applicable)

a. Overall condition of the fencing:

Good Acceptable Non-compliant No fence required

b. Does the fencing effectively limit the ELUR area?

Yes No N/A

6. Overall Assessment

Does this site meet the standards imposed in the ELUR?

Compliant Non-compliant

7. Observations, comments, and areas of concern:

8. Please attach photos that document compliance with the ELUR, potential areas of concern, and the current state of the engineered controls.

Certification of Property Owner

I _____ certify to the best of my knowledge that this Annual Compliance Evaluation Form is a complete and an accurate representation of the site and contains all known facts concerning the Environmental Land Use Restriction imposed on the site.

_____ Signature	_____ Owning Company (If applicable)
_____ Printed Name	_____ Title
_____ Date	
_____ Telephone Number	_____ Email Address

Certification of the Inspector (if different than Owner)

I _____ certify to the best of my knowledge that this Annual Compliance Evaluation Form is a complete and accurate representation of the site and contains all known facts concerning the Environmental Land Use Restriction imposed on the site.

_____ Signature	_____ Environmental Company Name
_____ Printed Name	_____ Title
_____ Contact Information (If Applicable)	
_____ Telephone Number	_____ Email Address