



RELEASE AMENDMENT FORM

3 - 32792

A. RELEASE OR THREAT OF RELEASE LOCATION:

1. Release Name/Location Aid: HAFFNER'S

2. Street Address: 284 WINTER STREET

3. City/Town: HAVERHILL 4. ZIP Code: 018300000

B. THIS FORM IS BEING USED TO: (check all that apply)

1. Date of Response(s): 3/13/2020 Start Time : 10:00 ☒ AM ☐ PM
(mm/dd/yyyy) (hh:mm)

2. Record Field Visits:

- ☐ a. Initial Compliance Field Response – Announced ☐ d. Compliance Field Response – Unannounced
- ☐ b. Initial Compliance Field Response – Unannounced ☐ e. Follow-up or Other Field Response
- ☐ c. Compliance Field Response – Announced ☐ f. Field Response - Direct Oversight

3. Record an Activity:

- ☒ a. Follow-up Office Response ☐ b. Meeting with PRP or PRP Representative

4. Record IRA Activities (also complete Section D, if applicable):

- ☐ a. IRA Assessment Only ☐ e. IRA Written Plan Approved
- ☐ b. IRA Oral Plan Approved ☐ f. IRA Written Plan Denied
- ☐ c. IRA Oral Plan Denied and/or Request for Written Plan ☐ g. Imminent Hazard Termination Approved
- ☐ d. IRA Oral Modified Plan Approved

5. Record IRA Department (IRA-D) Oversight Activities:

- ☐ a. IRA-D Work Started ☐ d. IRA-D Modification Plan Recorded
- ☐ b. IRA-D Assessment Only ☐ e. IRA-D Work Completed
- ☐ c. IRA-D Plan Recorded

6. Record URAM Activities:

- ☐ a. Notice of Intent to Conduct a URAM ☐ c. URAM Notification of a Previously Existing RTN
- ☐ b. URAM Work Started

☒ 7. Correct or Add **Data to WSC Database** otherwise not specified on this form. (Record in Section F)

☐ 8. Identify or Update a **PRP or Other Person Associated with Release** (Fill out Section C)

☐ 9. **Record Other Staff Activities** not specified above. (Record in Section F)



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C. PRP OR OTHER PERSON ASSOCIATED WITH RELEASE:

1. Check all that apply: ☐ a. change in contact name ☐ b. change of address ☐ c. new person associated with release

2. Name of Organization: BOSTON GAS CO D/B/A NATIONAL GRID

3. Contact First Name: AMY A 4. Last Name: WILLOUGHBY

5. Street: 40 SYLVAN RD 6. Title: PROGRAM MANAGER

7. City/Town: WALTHAM 8. State: MA 9. ZIP Code: 024511120

10. Telephone: 7819073651 11. Ext: 12. EMail: amy.willoughby@nationalgrid.com

13. Relationship of Person to Release: ☒ PRP ☐ OTHER c. Type(e.g. Current Owner): Other PRPs

☐ 14. No Person associated with activity specified in Section B.

D. ENTER ORAL RESPONSE ACTION PLAN (if applicable): (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> 1. Assessment and/or Monitoring only | <input type="checkbox"/> 6. Temporary Evacuation or Relocation of Residents |
| <input type="checkbox"/> 2. Temporary Covers or Caps | <input type="checkbox"/> 7. Product or NAPL Recovery |
| <input type="checkbox"/> 3. Deployment of Absorbent or Containment Materials | <input type="checkbox"/> 8. Fencing and Sign Posting |
| <input type="checkbox"/> 4. Temporary Water Supplies | <input type="checkbox"/> 9. Groundwater Treatment Systems |
| <input type="checkbox"/> 5. Structure Venting Systems | <input type="checkbox"/> 10. Soil Vapor Extraction |

☐ 11. Check here if modifying amount of authorized excavated soils:

Amount not to exceed ☐ cubic yards ☐ tons

☐ 12. Other Response Actions

Describe:

E. MassDEP STAFF AND FORM PREPARER:

1. MassDEP Staff: ☒ b. Check here, if Unassigned (or staff name not applicable)

2. Preparer Signature: PAEGAN DEERING 3. Date : 3/13/2020
(mm/dd/yyyy)



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F. DESCRIPTION OF ACTIVITIES RECORDED BY THIS FORM:

THE ATTACHED DEADLINE EXTENSION LETTER IS BEING ISSUED TO EXTEND RESPONSE ACTION DEADLINES.

BASED ON THE TIER CLASSIFICATION DATE LISTED ABOVE, THE DEADLINES FOR CONDUCTING RESPONSE ACTIONS PURSUANT TO 310 CMR 40.0570 ARE RE-ESTABLISHED AS FOLLOWS:

1. A PHASE II COMPREHENSIVE SITE ASSESSMENT, PREPARED PURSUANT TO 310 CMR 40.0835 SHALL BE SUBMITTED TO MASSDEP BY AUGUST 4, 2020;
2. IF APPLICABLE, A PHASE III REMEDIAL ACTION PLAN, PREPARED PURSUANT TO 310 CMR 40.0861, AND A PHASE IV REMEDY IMPLEMENTATION PLAN, PREPARED PURSUANT TO 310 CMR 40.0874, SHALL BE SUBMITTED TO MASSDEP BY AUGUST 4, 2020; AND
3. A PERMANENT SOLUTION STATEMENT OR A TEMPORARY SOLUTION STATEMENT PURSUANT TO 310 CMR 40.1000 OR A REMEDY OPERATION STATUS SUBMITTAL PURSUANT TO 310 CMR 40.0893, SHALL BE SUBMITTED TO MASSDEP BY APRIL 6, 2021 (I.E. WITHIN FIVE YEARS OF THE EFFECTIVE DATE OF THE TIER CLASSIFICATION).

THE ATTACHED LETTER REPLACES THE LETTER ISSUED ON MARCH 10, 2020.

☒ Check here if additional information is provided in an attachment.