

NOTICE OF INTENT TO REMEDIATE

Act 1995-2 requires four general information items to be included in the NIR: the general location, listing of contaminants, intended use of property, and proposed remediation measures. In addition, indicate the standard(s) to be obtained (if known) and attach a scaled site map (if available).

Property Name Shenango Coke Plant

Former Name(s) / AKA _____

Address / Location 200 Neville Rd

City Pittsburgh Zip Code 15225

Municipality(s) Neville County(ies) Allegheny

Latitude 40 ° (deg). 29 ' (min) 47 " (sec) Longitude 80 ° (deg). 4 ' (min) 35 " (sec)

Horizontal Collection Method _____

Horizontal Reference Datum _____ Reference Point _____

Wish to participate in the DEP/EPA MOA. Contact the Land Recycling Program Manager at landrecycling@pa.gov for details.

EPA ID#, if known _____

DEP ID#(s), if known _____

(i.e., eFACTS site ID#, storage tank facility ID#, water quality permit #, watershed permit, air quality permit #, etc.)

Date Release Occurred (if known) _____

Provide a brief description of the site contamination in plain language (e.g. fuel oil spill, historical chemical industrial area contamination), the names of any know primary contaminants to be addressed, and the intended future use of the property.

The Site is a former coke plant in operation from the early 1900's until early in 2016. Historical operations at the site have resulted in some releases of volatile and semi-volatile organic compounds that have impacted soil and groundwater. The future use is unknown, but will likely remain industrial in nature.

Provide a general description of proposed remediation measures.

The anticipated remediation measures will likely include removal of remaining waste materials, cleaning of various concrete pads and trenches, removal of recyclable by-products and placement of a protective cover over areas of the Site to prevent contact with existing soils. Engineering and institutional controls will be implemented in the form of an environmental covenant.

Remediation Standard(s) planned (if known at this time):

- | | | |
|---|--|---|
| <input type="checkbox"/> Unknown at this time | <input type="checkbox"/> Soil | <input type="checkbox"/> Groundwater |
| <input type="checkbox"/> Background Contaminants: | <input type="checkbox"/> Soil | <input type="checkbox"/> Groundwater |
| <input type="checkbox"/> Statewide Health - Residential Contaminants: | <input type="checkbox"/> Soil | <input type="checkbox"/> Groundwater |
| <input type="checkbox"/> Statewide Health – Non-Residential Contaminants: | <input type="checkbox"/> Soil | <input type="checkbox"/> Groundwater |
| <input checked="" type="checkbox"/> Site Specific Contaminants: | <input checked="" type="checkbox"/> Soil | <input checked="" type="checkbox"/> Groundwater |
| <input type="checkbox"/> Special Industrial Area* Contaminants: | <input type="checkbox"/> Soil | <input type="checkbox"/> Groundwater |

*NOTE: Specific standard or Special Industrial Area require a 30-day municipal comment period

Remediator / Property Owner / Consultant. Complete the form below for each recipient obtaining a release of liability upon approval of the final report. Attach additional sheets as necessary.

Remediator		
Contact Person/Title	<u>Ronald Burnette / Director of Operations</u>	eFACTS Client ID* _____
Relationship to Site	<u>owner's representative</u>	Client Type* _____
(e.g. owner, remediator, participant in cleanup, consultant, etc.)		
Phone Number	<u>313 297-4258</u>	Email Address <u>ronald.burnette@dteenergy.com</u>
Company Name	<u>Shenango, LLC</u>	EIN or Federal ID # _____
Address (street, city, state, zip) <u>414 South Main St, Ann Arbor, MI 48104</u>		

Property Owner		
Contact Person/Title	<u>Ronald Burnette / Director of Operations</u>	eFACTS Client ID* _____
Relationship to Site	<u>owner's representative</u>	Client Type* _____
(e.g. owner, remediator, participant in cleanup, consultant, etc.)		
Phone Number	<u>313 297-4258</u>	Email Address <u>ronald.burnette@dteenergy.com</u>
Company Name	<u>Shenango, LLC</u>	EIN or Federal ID # _____
Address (street, city, state, zip) <u>414 South Main St, Ann Arbor, MI 48104</u>		

Consultant		
Contact Person/Title	<u>Martin Knuth</u>	eFACTS Client ID* _____
Relationship to Site	<u>consultant</u>	Client Type* _____
(e.g. owner, remediator, participant in cleanup, consultant, etc.)		
Phone Number	<u>412 429-2324</u>	Email Address <u>mknuth@cecinc.com</u>
Company Name	<u>Civil & Envir Consultants, inc</u>	EIN or Federal ID # _____
Address (street, city, state, zip) <u>333 Baldwin Rd, Pittsburgh, PA 15205</u>		

*Include eFACTS Client ID (if known) – “Client Types” below:

- | | | |
|--------------------------|-------------------------------|---------------------|
| Association/Organization | Limited Liability company | Partnership-General |
| Authority | Limited Liability Partnership | Partnership-Limited |
| County | Municipality | School District |
| Estate/Trust | Non-Pennsylvania Government | Sole Proprietorship |
| Federal Agency | Other (Non-Government) | State Agency |
| Individual | Pennsylvania Corporation | |

Preparer of Notice of Intent to Remediate		
Name	<u>Martin Knuth</u>	Title <u>Vice President</u>
Phone Number	<u>412 429-2324</u>	Email Address <u>mknuth@cecinc.com</u>
Company Name	<u>Civil & Envir Consultants, Inc</u>	eFACTS Client ID _____
Address (street, city, state, zip) <u>333 Baldwin Rd, Pittsburgh, Pa 15205</u>		