



# Non Responsible Party Application for Voluntary Cleanup Contract

## I. Applicant Information

1. Applicant is a:  Single Entity  Co-Entity (*Each Co-Entity must complete items 1-8*)
2. Applicant Type:  Private Individual /Sole Proprietorship  For-profit Business (Corp., Partnership, etc.)  Tax-Exempt Trust/ Corporation/ Organization  Government / Other Public Funded Entity

3. Applicant's Legal Name \_\_\_\_\_

4. Contract Signatures for this Applicant  
a. Authorized Signatory

Name \_\_\_\_\_ Title \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Phone1 \_\_\_\_\_ Phone2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

b. Other Signatories  None

Name	Title	Phone	Email	Signature Required On Contract?
		( ) -		<input type="checkbox"/>
		( ) -		<input type="checkbox"/>
		( ) -		<input type="checkbox"/>

5. Physical Location of Applicant's Headquarters

Street address \_\_\_\_\_ Suite Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

6. Mailing address:  Same as Authorized Signatory Go to question 7

Contact person (if different from Authorized Signatory) \_\_\_\_\_ Title \_\_\_\_\_

Street Number or PO Box \_\_\_\_\_ Phone1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

7. Company Structure Information  Not-applicable (Local Government, Sole Proprietorship, Private Individual) - Go to Question #8

a. Company is Incorporated/ Organized/ Registered in \_\_\_\_\_(state)

b. List all principals, officers, directors, controlling shareholders, or other owners with >5% ownership interest.

*Attach additional pages if needed.*

Name

Name

_____	_____
_____	_____
_____	_____
_____	_____

c. Is the applicant a subsidiary, parent or affiliate of any other business organization not otherwise identified on this form?

Yes  No

d. If yes, identify all affiliations: \_\_\_\_\_

8. Non-Responsible Party Certification

By signature below, it is affirmed that no person or entity identified anywhere above:

- Is a current owner of the property
- Is a Responsible Party for the site
- Is a parent, successor, or subsidiary of any Responsible Party or owner of the property
- Has had any involvement with the property in the past other than activities performed in anticipation of participation in the Voluntary Cleanup Program

Authorized Signatory \_\_\_\_\_

Co Signatories \_\_\_\_\_

**II. Property Information**

9. Location

a. Physical Address \_\_\_\_\_

b. County \_\_\_\_\_ Zip Code \_\_\_\_\_

c.  Property is outside any municipal boundaries       Property is inside the municipal limits of \_\_\_\_\_  
(town/city)

10. List any Companies or Site names by which the Property is known

\_\_\_\_\_  
\_\_\_\_\_

11. Total Size of Property Covered by this Contract \_\_\_\_\_ Acres

12. How many parcels comprise the Property? \_\_\_\_\_

13. Current Zoning (general description)

14. a. Does the property have any above- or below-ground storage tanks?  Yes  No

b. If Yes, provide information on the number and capacity of the tanks, their contents, and whether they will be retained, or closed and/or removed.

15. Parcel Information *Complete the information below for each Parcel (attach additional sheets if needed)*

- a. Tax Map Parcel# \_\_\_\_\_
- b. Acreage \_\_\_\_\_
- c. Current Owner \_\_\_\_\_
- d. Owner Mailing Address \_\_\_\_\_  
\_\_\_\_\_
- e. Contact Person for Access \_\_\_\_\_
- f. Access Person's Phone # \_\_\_\_\_
- g. Is Parcel Currently Vacant?  Yes  No
- h. Buildings on the parcel? (check all that apply)
  - None
  - Demolished/Ruins
  - Intact, To be demolished
  - Intact, To be re-used
- i. Business/facility operations
  - Never Operated on the parcel
  - Not operating since \_\_\_\_\_ (approx date)
  - In operation: nature of the business \_\_\_\_\_

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**III. Property Redevelopment**

16. Describe the intended re-use of the property:  
*(attach additional sheets if necessary)*

17. a. Will the future use include any chemical processes, petroleum or chemical storage and handling, on-site waste disposal, or generate any hazardous substances?  Yes  No  
b. If Yes, identify the substances and discuss steps that will be taken to prevent their release to the environment.

18. Will redevelopment lead to the creation of permanent jobs on the property?  Yes Anticipated Number \_\_\_\_\_  
 No

19. Projected Increase to the Tax Base as a result of this redevelopment: \$ \_\_\_\_\_

20. a. Will there be Intangible benefits from this redevelopment such as:  
 LEED, Earth Craft, EnergyStar, or similar certification of Sustainable Development  
 Creation / Preservation of Green Space on the Property  
 Deconstruction/ Recycling of demolition or building debris  
 Other \_\_\_\_\_

b. Please Describe:

21. Anticipated date of closing or acquiring title to the property \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

22. Redevelopment Certification  
By signature below, the applicant(s) affirm that their proposed use and activities will not knowingly aggravate or contribute to existing contamination or pose significant human health or environmental risks on the property.

\_\_\_\_\_  
Signature(s)

**IV. Project Management And Financial Viability (Co-Entities, refer to instruction sheet)**

23. Environmental Consulting Firm  
 None as of this application date

\_\_\_\_\_  
Company

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Project Contact1 S.C PE/PG Reg. # Phone1 Phone 2 email

\_\_\_\_\_  
Project Contact 2 S.C PE/PG Reg. # Phone1 Phone 2 email

24. Legal Counsel (Optional)

\_\_\_\_\_  
Firm

\_\_\_\_\_  
Attorney

\_\_\_\_\_  
Phone1

\_\_\_\_\_  
Phone 2

\_\_\_\_\_  
Street Number or PO Box

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
email

25. Applicant's Billing Address     Same as Contact person in #6 above    Go to question #26

\_\_\_\_\_  
Financial Contact

\_\_\_\_\_  
Title

\_\_\_\_\_  
Company

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

26. **Financial Viability**

By signature(s) below, the applicant agrees to:

1. Pay the Department's costs upon receipt of invoices for implementing the Voluntary Cleanup Program for this Property, and
2. Provide financial statements, if requested, to document financial viability to conduct the response actions on the Property.

Waiver Requested (*Check Box If applicable*)

The applicant is a Local Government or qualifies as a 501(c) Non-Profit Organization, and requests waiver of some Departmental costs of implementing this contract.

\_\_\_\_\_  
Signatures

**V. Application Completion (The following are required along with this form. Check applicable boxes)**

27. The Legal Description of the Property is attached as a:     Plat Map     Metes and Bounds Text     Both

28. The Phase I Environmental Site Assessment Report is attached as a:

New report completed in the past six months by \_\_\_\_\_  
(Name of Environmental Firm)

Older report updated in the past six months by \_\_\_\_\_  
(Name of Environmental Firm)

29. Environmental sampling data and other reports: (*check one*)

The Applicant is not aware of any environmental testing on the property

The Applicant believes the Department already has all environmental data in its files on: \_\_\_\_\_

The Following reports are attached: \_\_\_\_\_ (Site Name)

Report Date

Report Name

Environmental Firm

_____	_____	_____
_____	_____	_____

30. Mailing addresses of Former Owners, Operators and other Potentially Responsible Parties:(check one)

Enclosed with this Application as an Attachment

Will be submitted along with (or before) the signed contract

31. The applicants attest by signature below that this application is accurate to their best knowledge. Furthermore, the applicants request DHEC evaluate the Property for inclusion in the Brownfields Voluntary Cleanup Program and draft a Non-Responsible Party Contract for the Property.

\_\_\_\_\_  
Signature(s)

**This Section for Department Use Only**

Assigned File Name		
Eligible for NRP Contract	Y	N
Assigned File Number		
Assigned Contract Number		

## APPLICATION INSTRUCTIONS

**General instructions:** The Application should be completed electronically. The application may be may saved with partial information, and reopened at a later time for completion.

The form is largely self-explanatory; however, the following information is further clarification for some questions. Additional assistance is available through the Voluntary Cleanup Program at the toll-free telephone number (866) 576-3432.

**#1. Applicant Information:** Check Sole Entity if the contract will be between DHEC and one party (usually an individual, most partnerships, businesses, government bodies, etc.).

Check Co-Entity if the contract will be between DHEC and multiple parties with no controlling interests over each other (Example: A Public-Private Partnership agreement between a local government and a business to redevelop a site). Each Co-Entity must submit its own copy of page 1 with the information specific to their business/corporate structure, etc.

**#3. Applicant's Legal Name:** Enter the full Legal Name of the party that will be entering the contract. If the party is incorporated as a business or non-profit organization, enter the name as recorded in the Articles of Incorporation/Organization. If the entity is a department or sub-division of a government body, include the name of the controlling government body. If the business will operate under a different name, enter that information in #7.d.

**#4. Contract Signatures:** The "Authorized Signatory" is a person who may legally bind the applicant in contractual matters. Identify any other persons that may sign contracts for the entity.

In some business structures (e.g., General Partnerships, Joint Ventures, etc.) multiple persons are required to sign contracts. If applicable, check the box by those names that must sign the contracts in addition to the Authorized Signatory. The Department will not take further steps to implement a contract until all Required Signatures are affixed.

**#5. Physical Address for Applicant:** The address must be the physical location of the applicant's business or headquarters. A post office box is not sufficient.

**#8. Non-Responsible Party Certification:** Each person identified as an Authorized Signatory and as a Required Signature, if any, should sign the application.

**Co-Entities:** Each Co-Entity should have the Authorized Signatory and all Required Signatures, if any, sign #8 only on the page specific to their organization.

**#9. Property Location:** If no address is assigned, identify the road on which the property is located, and the distance and direction from the nearest identifiable crossroads.

**#10. Property Names:** Enter the name that will be used in correspondence with the Department to refer to the Property, and any other names that may be commonly known to the local community because of past operations on the property.

**#13. Current Zoning:** Describe the zoning in terms such as "high-density residential", "retail", "commercial", and "light industrial" since there is no uniform numerical classification across the state.

**#15. Parcel Information:** Include all information for each parcel that will be acquired. Repeat information may be omitted (i.e., the same person currently owns multiple parcels).

If there are more than six parcels, the application may be saved electronically with different file names for as many times as needed for the number of parcels. Attach printouts of the pages with the additional parcels to the final application.

**#26. Financial Viability:** The Department will charge for oversight costs including time to review file materials and prepare a contract. The applicant is obligated to pay the accrued costs if a contract is successfully negotiated (i.e. signed by the applicant and the Department).

The Department may allow Local Governments and qualified Non Profit Organizations to waive payment of some oversight costs. The Department's decision to waive payment will be determined on a case-specific basis, and may be rescinded after due notice to the parties as specified in the contract.

**#27. Property Legal Description:** A legal description or surveyed Plat map must be included with the application. The Plat Map may be a copy of a survey filed with the county or un-filed copy completed by a SC- licensed Surveyor.

**#28 Phase I Environmental Site Assessment Report:** The Phase I Report should be consistent with the US EPA's "*All Appropriate Inquiries Rule*". The Phase I must be completed within the 6 months prior to the application. Environmental consultants may update older reports as long as the update is less than 6 months old.

Phase I reports paid for by other parties can be submitted, but may be subject to intellectual property claims. Applicants may need permission from the environmental consultants that originated the report before submitting it to the Department.

The US EPA may require another update from Local Governments and Non-Profit Organizations as a condition of receiving Brownfields grant money.

**#30 Mailing Addresses of Potentially Responsible Parties:** All former owners, operators and other PRPs ( Potentially Responsible Parties) should be identified if their affiliation with the Property occurred anytime after the probable contamination.

The last known mailing address of the PRPs or of their registered agent(s) should be provided to the Department; however, the application may be filed before this information is compiled. The Department will not place a contract on Public Notice or execute it until sufficient information is provided to allow the Department to notify the PRPs of the contract.

#### **Filing Mechanics**

The form should be printed out after completion and signed by all persons identified as the "Authorized Signatory" or as "Signature Required". The form should have original signatures for Question #8 on page 1, Question #22 on page 4, and Questions #26 and #31 on page 5.

Co-Entity Applicants should sign Question #8 only on page 1 specific to their organization and on other pages as indicated above.

The completed form and all supporting documentation should be submitted to:

Robert F. Hodges, Jr., PG  
Brownfields Voluntary Cleanup Program  
Bureau of Land and Waste Management, SCDHEC  
2600 Bull Street  
Columbia SC 29201

There is no application fee.