



Proactive by Design

GEOTECHNICAL

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MANAGEMENT

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February 2, 2017  
GZA File No: 01.0171521.52

Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup  
Northeast Regional Office  
205B Lowell Street  
Wilmington, Massachusetts 01887

Re: Release Abatement Measure Plan Second Modification  
Construction-Related Remediation Activities  
(Former) Everett Staging Yard  
1 Horizon Way  
Everett, Massachusetts  
Release Tracking Number (RTN) 3-13341  
Additional RTNs 3-17760 (38 Broadway, Everett, MA) and  
RTN 3-1850 (3 Charlton Street, Everett, MA)

To Whom It May Concern:

GZA GeoEnvironmental, Inc. (GZA), on behalf of Wynn MA, LLC (Wynn MA), has prepared this second Release Abatement Measure Plan Modification (RAM Plan Modification) to revise procedures for air monitoring during the assessment and handling of those soils that contain asbestos during the construction of the Wynn Boston Harbor (formerly known as the Wynn Resort in Everett) at the former Everett Staging Yard Disposal Site (the Site). This second RAM Plan Modification modifies procedures described in the November 16, 2016, Revised RAM Plan Modification.

This second RAM Plan Modification has been prepared in accordance with 310 CMR 40.0444 of the MCP, and with the Limitations in Appendix A. The second RAM Plan Modification will be submitted electronically through MassDEP eDEP online filing system. A copy of the RAM Transmittal Form BWSC-106 is included in Appendix B.

## EXECUTIVE SUMMARY

Construction activities at the Site are being conducted following the provisions in the RAM Plan previously submitted to MassDEP on May 3, 2016, and the Revised RAM Plan Modification submitted on November 16, 2016. This second RAM Plan Modification has been prepared to revise perimeter and interior air sampling for airborne fibers included as part of the Environmental Monitoring Plan presented in the Revised RAM Plan Modification. All other air monitoring requirements established as part of the RAM Plan and Revised RAM Plan Modification, including both perimeter dust monitoring and work-zone monitoring for airborne fibers, will remain in effect during RAM procedures.

## BACKGROUND

The Site is identified by the Massachusetts Department of Environmental Protection (MassDEP) as Release Tracking Number (RTN) 3-13341. A Site Locus Map is presented as Figure 1, and the RAM Project area that will be subject to the provisions of this second RAM Plan Modification is shown on Figure 2.



Construction activities at the Site have been conducted in accordance with the May 3, 2016, RAM Plan and the November 16, 2016, Revised RAM Plan Modification. The May 3 RAM Plan details the Site history, description of releases, Site conditions and surrounding receptors, and RAM implementation. The November 16<sup>th</sup> Revised RAM Plan Modification describes procedures put in place to address asbestos in soil as encountered at the Site. The asbestos, which is encountered sporadically in some Site soils, is associated with demolition debris mixed into fill material in certain areas of the Site. The provisions of these previous Plans will stay in effect during subsequent construction activities at the Site, but will be modified as described in this second RAM Plan Modification.

The assessment of asbestos in currently accessible soil cells is complete. Areas currently inaccessible due to the presence of previously stockpiled soil and the Site's groundwater treatment system will be sampled at a later date. Of the approximately 2,400 soil samples tested for asbestos, approximately 237 samples, representing 112 of the more than 2,000 precharacterization cells, tested positive for asbestos; Of those 112 cells, samples from only 12 cells were reported to contain greater than 1% asbestos. More than 60% of the asbestos-impacted soil characterization cells have already been excavated and disposed of off-Site.

The Site is a Public Involvement Plan (PIP) site under the MCP. As the modifications listed below do not substantially alter or expand the May 3 RAM Plan or November 16 Revised RAM Plan Modification, this submittal is not subject to an additional comment period per Section 40.1405(6)(e)(2) of the MCP.

#### **PERSON ASSUMING RESPONSIBILITY FOR RAM PLAN MODIFICATION**

The entity assuming responsibility for this RAM Plan Modification is Wynn MA, LLC. Information for Wynn MA's contact person is provided below:

Mr. Robert DeSalvio  
President  
Wynn MA, LLC  
101 Station Landing, Suite 2200  
Medford, Massachusetts 02155  
Tel: 857-770-7801

#### **RAM MODIFICATION**

The November 16, 2016, Revised RAM Plan Modification established an environmental monitoring plan to assess the potential for airborne migration of asbestos fibers. Air sampling stations for asbestos sampling were established at the four existing perimeter dust monitoring stations, and at four interior locations as shown on Figure 3. In addition, four sampling stations at each compass direction are established adjacent to each work-zone location where asbestos-impacted soil is disturbed.

Samples from the perimeter, interior and work-zone locations have been collected and analyzed as follows:

- High flow pumps are used to collect air samples with sufficient air volumes to achieve detection limits below 0.010 fibers per cubic centimeter (f/cc). During full workdays, two sets of samples are collected around each location: one set for approximately half of the workday (morning) and a second set of the remainder of the workday (afternoon). Work-zone air samples are appropriately spaced and located proximate to each area where the management of asbestos-containing soil is being performed.
- Samples are analyzed for total airborne fibers, including but not specific to asbestos, using Phase Contrast Microscopy (PCM). Results from the first set of samples are available quickly enough so that corrective actions, if warranted, can be implemented the same workday. Results from the second set are available such that corrective actions, if warranted, can be implemented by the morning of the next workday.



Since the implementation of these air monitoring activities, no perimeter sampling results have exceeded the established action level of 0.010 f/cc. One work zone sample and one interior sample result each exceeded the action level; however, subsequent follow-up testing using transmission electron microscopy (TEM) did not reveal the presence of asbestos fibers in either sample. Air sampling results have been provided on a daily basis to the MassDEP Northeast Regional Office (NERO) Asbestos Program at NERO.asbestos@state.ma.us.

The absence of action level exceedances since implementation of perimeter and interior air sampling almost three months ago confirms that the controls put in place as part of the RAM Plan and Revised RAM Plan modification have been effective at reducing the potential for migration of airborne fibers, and that the airborne migration of fibers is not a significant exposure pathway at the Site. Therefore, this second RAM Plan Modification revises the Environmental Monitoring Plan in the November 16, 2016, Revised RAM Plan Modification by discontinuing the perimeter and interior air sampling for total airborne fibers.

All other air monitoring requirements established as part of the RAM Plan and Revised RAM Plan Modification will remain in effect during RAM procedures. Dust monitoring around the entire perimeter of the Project Area will continue as detailed in the May 3 RAM Plan, and air monitoring for airborne fibers at each work zone location where asbestos-impacted soil is disturbed will continue as detailed in the November 16 Revised RAM Plan Modification.

LSP SEAL AND SIGNATURE (310 CMR 40.0444(1)(G))

The seal and signature of the Licensed Site Professional (LSP) for this second RAM Plan Modification (Lawrence Feldman, LSP #8107) are provided on the attached transmittal form in Appendix B.

If you should require any further information concerning the planned RAM activities, please do not hesitate to contact the undersigned at (781) 278-3700.

Very truly yours,

GZA GEOENVIRONMENTAL, INC.

David E. Leone, LSP  
Associate Principal

Matthew M. Smith, LSP  
Consultant/Reviewer

Lawrence Feldman, LSP  
Senior Principal

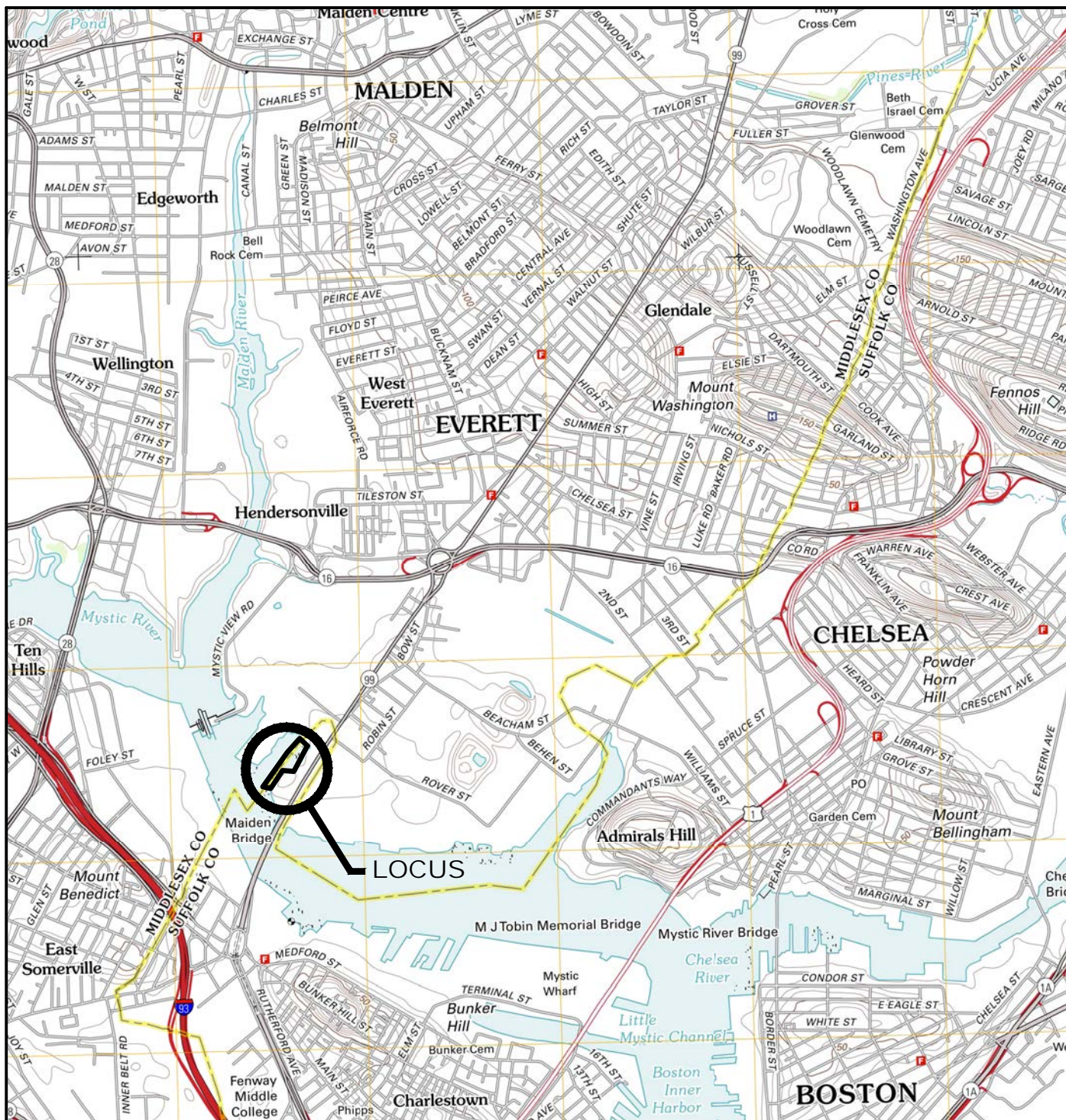
Attachments:

Figure 1	Site Locus
Figure 2	Asbestos Exclusion Zone Figure
Figure 3	Air Monitoring Figure
Appendix A	Limitations
Appendix B	Transmittal Forms BWSC106



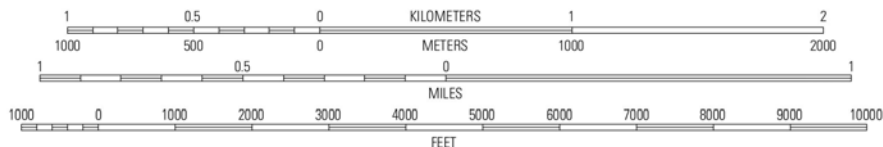
## Figures





UTM GRID AND 2012 MAGNETIC NORTH  
DECLINATION AT CENTER OF SHEET

15° 4' 268 MILS  
1° 23' 25 MILS



CONTOUR INTERVAL 10 FEET  
NORTH AMERICAN VERTICAL DATUM OF 1988

UNLESS SPECIFICALLY STATED BY WRITTEN AGREEMENT, THIS DRAWING IS THE SOLE PROPERTY OF GZA GEOENVIRONMENTAL, INC. (GZA). THE INFORMATION SHOWN ON THE DRAWING IS SOLELY FOR USE BY GZA'S CLIENT OR THE CLIENT'S DESIGNATED REPRESENTATIVE FOR THE SPECIFIC PROJECT AND LOCATION IDENTIFIED ON THE DRAWING. THE DRAWING SHALL NOT BE TRANSFERRED, REUSED, COPIED, OR ALTERED IN ANY MANNER FOR USE AT ANY OTHER LOCATION OR FOR ANY OTHER PURPOSE WITHOUT THE PRIOR WRITTEN CONSENT OF GZA. ANY TRANSFER, REUSE, OR MODIFICATION TO THE DRAWING BY THE CLIENT OR OTHERS, WITHOUT THE PRIOR WRITTEN EXPRESS CONSENT OF GZA, WILL BE AT THE USER'S SOLE RISK AND WITHOUT ANY RISK OR LIABILITY TO GZA.

WYNN EVERETT  
1 HORIZON WAY  
EVERETT, MASSACHUSETTS

PREPARED BY:  
 GZA GeoEnvironmental, Inc.  
Engineers and Scientists  
www.gza.com

PREPARED FOR:  
WYNN MA, LLC

SITE LOCUS MAP

PROJ MGR: DEL	REVIEWED BY: AJR
DESIGNED BY: VKR	DRAWN BY: JJZ
DATE: FEBRUARY, 2016	PROJECT NO. 01.0171521.15

CHECKED BY: LF
SCALE: AS SHOWN
REVISION NO.

FIGURE  
1

SHEET NO. 1 OF 4



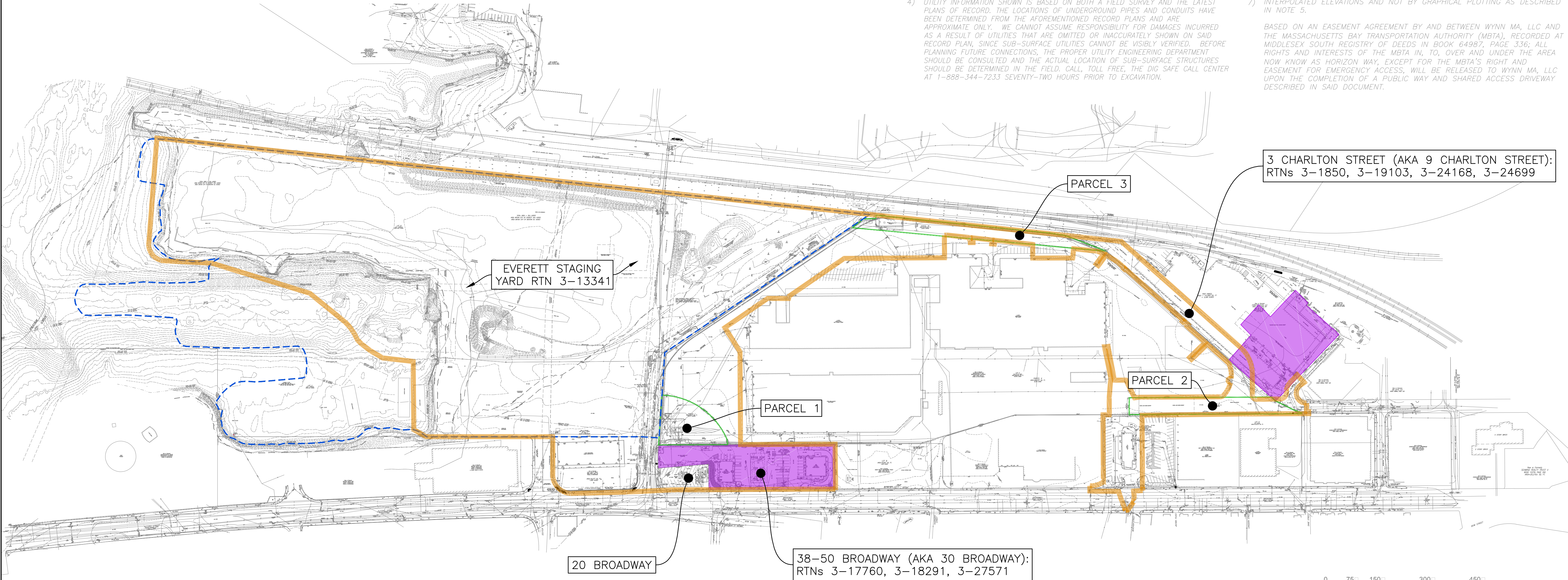
NOTES:

- 1) ELEVATIONS ESTABLISHED BY GPS. TEMPORARY BENCH MARKS SET: TBM-1, X-CUT ON SOUTHERLY MOST FLANGE BOLT OF A HYDRANT, LOCATED AT THE INTERSECTION OF THE NORTHWESTERLY SIDELINE OF ALFORD STREET AND THE SOUTHWESTERLY SIDELINE OF HORIZON WAY (A.K.A CHEMICAL LANE). AS SHOWN HEREON. ELEVATION = 13.38. TBM-2, SPIKE SET, 1 FOOT ABOVE GRADE IN UTILITY POLE, ON THE NORTHEASTERLY SIDE OF HORIZON WAY (A.K.A. CHEMICAL LANE) APPROXIMATELY 135 FEET FROM THE NORTHWESTERLY SIDELINE OF BROADWAY. AS SHOWN HEREON. ELEVATION = 12.54.
- 2) ELEVATIONS REFER TO NORTH AMERICAN VERTICAL DATUM OF 1988 (NAVD88).
- 3) CONTOUR INTERVAL EQUALS ONE (1) FOOT.
- 4) UTILITY INFORMATION SHOWN IS BASED ON BOTH A FIELD SURVEY AND THE LATEST PLANS OF RECORD. THE LOCATIONS OF UNDERGROUND PIPES AND CONDUITS HAVE BEEN DETERMINED FROM THE FOREMENTIONED RECORD PLANS AND ARE APPROXIMATE ONLY. WE CANNOT ASSUME RESPONSIBILITY FOR DAMAGES INCURRED AS A RESULT OF UTILITIES THAT ARE OMITTED OR INACCURATELY SHOWN ON SAID RECORD PLAN, SINCE SUB-SURFACE UTILITIES CANNOT BE VISIBLY VERIFIED. BEFORE PLANNING FUTURE CONNECTIONS, THE PROPER UTILITY ENGINEERING DEPARTMENT SHOULD BE CONSULTED AND THE ACTUAL LOCATION OF SUB-SURFACE STRUCTURES SHOULD BE DETERMINED IN THE FIELD. CALL, TOLL FREE, THE DIG SAFE CALL CENTER AT 1-888-344-7233 SEVENTY-TWO HOURS PRIOR TO EXCAVATION.

- 5) BY GRAPHICAL PLOTTING ONLY, THE PROPERTIES SHOWN HEREON LIE WITHIN A ZONE "AE", AN AREA WITHIN THE 1% ANNUAL CHANCE FLOOD WITH BASE FLOOD ELEVATIONS DETERMINED; A ZONE "X" (SHADED), AN AREA WITHIN THE 0.2% ANNUAL CHANCE FLOOD; AND ZONE "X" (UNSHADED), AN AREA OUTSIDE OF THE 0.2% ANNUAL CHANCE FLOOD, AS SHOWN ON THE FEDERAL EMERGENCY MANAGEMENT AGENCY (F.E.M.A.) FLOOD INSURANCE RATE MAP (F.I.R.M.) FOR SUFFOLK COUNTY, MASSACHUSETTS, MAP NUMBER 25025C0014G, AND COMMUNITY PANEL NUMBER 250286, HAVING AN EFFECTIVE DATE OF SEPTEMBER 25, 2009 AND FLOOD INSURANCE RATE MAP FOR MIDDLESEX COUNTY, MASSACHUSETTS, MAP NUMBER 25017C0439E, AND COMMUNITY PANEL NUMBER 250192, HAVING AN EFFECTIVE DATE OF JUNE 4, 2010.

- 6) BASE FLOOD ELEVATION 9 (NAVD88), ZONE AE, IS SHOWN HEREON VIA INTERPOLATED ELEVATIONS AND NOT BY GRAPHICAL PLOTTING AS DESCRIBED IN NOTE 5.

BASED ON AN EASEMENT AGREEMENT BY AND BETWEEN WYNN MA, LLC AND THE MASSACHUSETTS BAY TRANSPORTATION AUTHORITY (MBTA), RECORDED AT MIDDLESEX SOUTH REGISTRY OF DEEDS IN BOOK 64987, PAGE 336; ALL RIGHTS AND INTERESTS OF THE MBTA IN, TO, OVER AND UNDER THE AREA NOW KNOWN AS HORIZON WAY, EXCEPT FOR THE MBTA'S RIGHT AND EASEMENT FOR EMERGENCY ACCESS, WILL BE RELEASED TO WYNN MA, LLC UPON THE COMPLETION OF A PUBLIC WAY AND SHARED ACCESS DRIVEWAY DESCRIBED IN SAID DOCUMENT.



LEGEND

- |                              |                           |
|------------------------------|---------------------------|
| ⊙ SEWER MANHOLE              | FND FOUND                 |
| ⊙ DRAIN MANHOLE              | ± MORE OR LESS            |
| ⊙ ELECTRIC MANHOLE           | DH DRILL HOLE             |
| ⊙ TELEPHONE MANHOLE          | VGC VERTICAL GRANITE CURB |
| ⊙ CABLE TV MANHOLE           | CLF CHAIN LINK FENCE      |
| ⊙ HYDRANT                    | BIT BITUMINOUS            |
| ⊙ WATER SHUT OFF             | CONC CONCRETE             |
| ⊙ GAS SHUT OFF               | NVP AND VISIBLE PIPES     |
| ⊙ CATCH BASIN                | RAILROAD TRACKS           |
| ⊙ GUY WIRE                   | GUARD RAIL                |
| ⊙ UTILITY POLE               | -X-X- METAL FENCE         |
| ⊙ LIGHT POLE                 | -S- SEWER                 |
| ⊙ ELECTRIC HANDHOLE          | -D- DRAIN                 |
| ⊙ SIGN                       | -W- WATER                 |
| ⊙ FA FIRE ALARM              | -G- GAS                   |
| ⊙ OBSERVATION WELL           | -OHW- OVERHEAD WIRES      |
| ● GATE POST                  | -V-V-V- RETAINING WALL    |
| ■ BOUND FOUND                |                           |
| SB STONE BOUND               |                           |
| CB CONCRETE BOUND            |                           |
| Z INDICATES COMMON OWNERSHIP |                           |
| ♿ HANDICAP RAMP              |                           |

LEGEND

- AUL AREA (APPROXIMATE)
- FORMER EVERETT STAGING YARD DISPOSAL SITE BOUNDARY (RTN 3-13341)
- RAM PROJECT AREA BOUNDARY

NOTES:

1. AULs ARE SHOWN ONLY ON PROPERTIES WITHIN RAM BOUNDARIES; ADDITIONAL AULs EXIST IN THE VICINITY.
2. BASE PLAN FROM FELDMAN PROFESSIONAL LAND SURVEYORS PLAN TITLED "EXISTING CONDITIONS PLAN, BROADWAY (ROUTE 99), EVERETT, MASS." DATED MARCH 20, 2015.

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WYNN EVERETT  
1 HORIZON WAY  
EVERETT, MASSACHUSETTS

PROPERTIES IT IN RAM OUNDAR

PREPARED BY:



GZA GeoEnvironmental, Inc.  
Engineer and Scientist  
gza.com

PREPARED FOR:

WYNN MA, LLC

PROJ MGR: DEL

REVIEWED BY: AJR

CHECKED BY: LF

FIGURE

DESIGNED BY: VKR

DRAWN BY: JJZ

SCALE: AS SHOWN

2

DATE: APRIL, 2016

PROJECT NO.

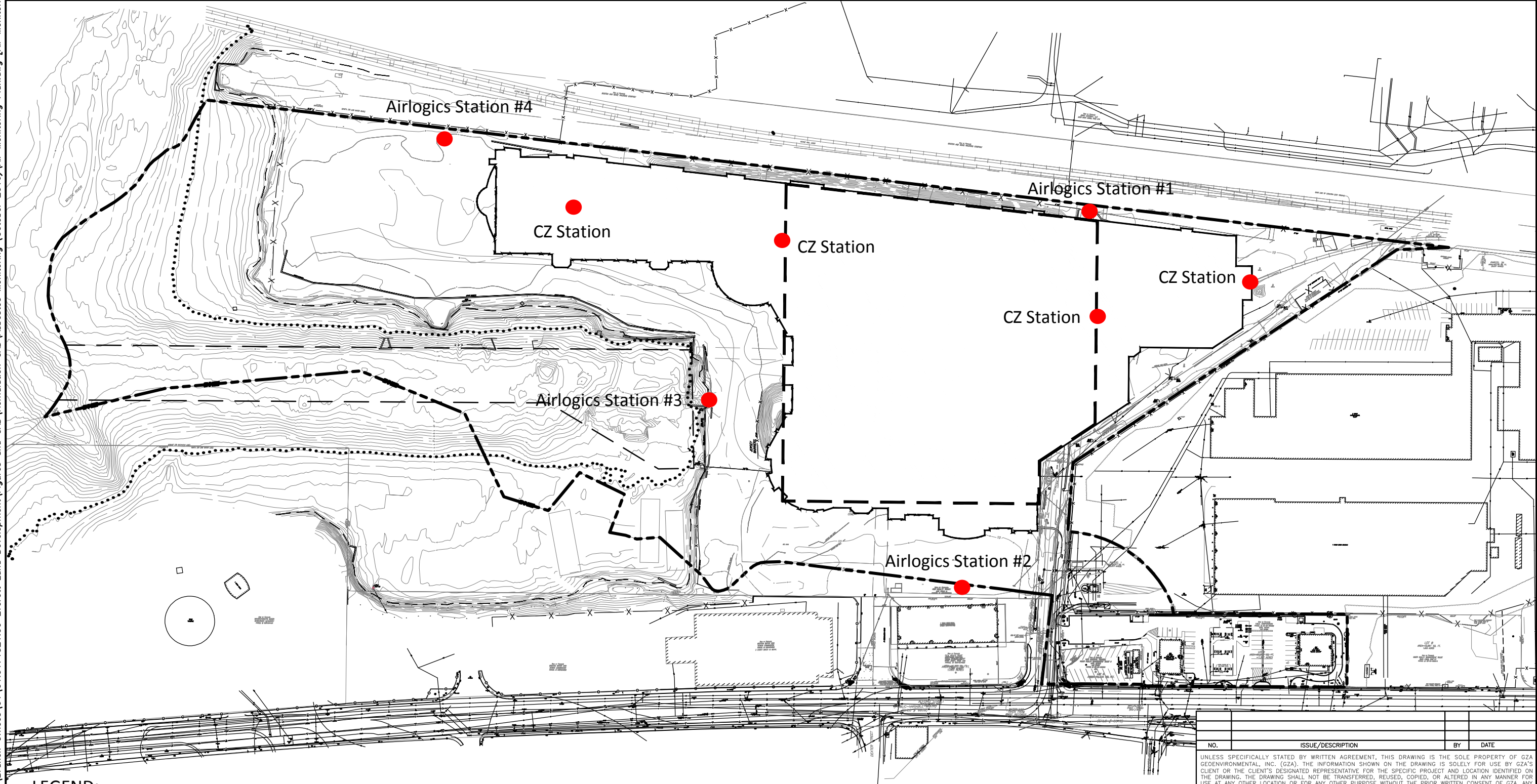
REVISION NO.

01.0171521.15

SHEET NO. 2 OF 4




©2016 - GZA GeoEnvironmental, Inc. GZA-J: Branch Offices\01\01.0171521.00 Everett Land Development\Figures and CAD\Remdiation CAD\Asbestos Monitoring (October 2016)\Air Monitoring Plan.dwg [Air Monitoring] Oct



**LEGEND:**  
● Denotes approximate location of perimeter (Airlogics) or interior construction zone (CZ) air monitoring stations. Sampling for airborne fibers at these locations discontinued under second RAM Plan Modification

**SOURCE:**  
1. THE BASE MAP WAS DEVELOPED FROM ELECTRONIC FILES PROVIDED BY FELDMAN, PROFESSIONAL LAND SURVEYORS ON MARCH 20, 2015, CAD FILE: 14517-EX-DRAFT-3-20-2015.DWG.



NO.	ISSUE/DESCRIPTION	BY	DATE
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CONSTRUCTION PHASE REMEDIATION PROJECT WYNN BOSTON HARBOR EVERETT, MASSACHUSETTS			
PERIMETER AND CONSTRUCTION ZONE AIR MONITORING LOCATIONS			
PREPARED BY:  GZA GeoEnvironmental, Inc.			
PROJ MGR: MMS	REVIEWED BY: MMS	CHECKED BY: MMS	FIGURE 3
DESIGNED BY: MMS	DRAWN BY: JJZ	SCALE: AS SHOWN	
DATE: 10-26-16	PROJECT NO. 01.0171521.52	REVISION NO.	



## **Appendix A – Limitations**





## USE OF REPORT

1. GZA GeoEnvironmental, Inc. (GZA) prepared this report on behalf of, and for the exclusive use of our Client for the stated purpose(s) and location(s) identified in the Proposal for Services and/or Report. Use of this report, in whole or in part, at other locations, or for other purposes, may lead to inappropriate conclusions; and we do not accept any responsibility for the consequences of such use(s). Further, reliance by any party not expressly identified in the agreement, for any use, without our prior written permission, shall be at that party's sole risk, and without any liability to GZA.

## STANDARD OF CARE

2. GZA's findings and conclusions are based on the work conducted as part of the Scope of Services set forth in the Proposal for Services and/or Report and reflect our professional judgment. These findings and conclusions must be considered not as scientific or engineering certainties, but rather as our professional opinions concerning the limited data gathered during the course of our work. Conditions other than described in this report may be found at the subject location(s).
3. GZA's services were performed using the degree of skill and care ordinarily exercised by qualified professionals performing the same type of services, at the same time, under similar conditions, at the same or a similar property. No warranty, expressed or implied, is made. Specifically, GZA does not and cannot represent that the Site contains no hazardous material, oil, or other latent condition beyond that observed by GZA during its study. Additionally, GZA makes no warranty that any response action or recommended action will achieve all of its objectives or that the findings of this study will be upheld by a local, state or federal agency.
4. In conducting our work, GZA relied upon certain information made available by public agencies, Client and/or others. GZA did not attempt to independently verify the accuracy or completeness of that information. Inconsistencies in this information which we have noted, if any, are discussed in the Report.

## SUBSURFACE CONDITIONS

5. The generalized soil profile(s) provided in our Report are based on widely-spaced subsurface explorations and are intended only to convey trends in subsurface conditions. The boundaries between strata are approximate and idealized, and were based on our assessment of subsurface conditions. The composition of strata, and the transitions between strata, may be more variable and more complex than indicated. For more specific information on soil conditions at a specific location refer to the exploration logs. The nature and extent of variations between these explorations may not become evident until further exploration or construction. If variations or other latent conditions then become evident, it will be necessary to reevaluate the conclusions and recommendations of this report.
6. Water level readings have been made, as described in this Report, in and monitoring wells at the specified times and under the stated conditions. These data have been reviewed and interpretations have been made in this report. Fluctuations in the level of the groundwater however occur due to temporal or spatial variations in areal recharge rates, soil heterogeneities, the presence of subsurface utilities, and/or natural or artificially induced perturbations. The observed water table may be other than indicated in the Report.

## COMPLIANCE WITH CODES AND REGULATIONS

7. We used reasonable care in identifying and interpreting applicable codes and regulations necessary to execute our scope of work. These codes and regulations are subject to various, and possibly contradictory, interpretations. Interpretations and compliance with codes and regulations by other parties is beyond our control.



## SCREENING AND ANALYTICAL TESTING

8. GZA collected environmental samples at the locations identified in the Report. These samples were analyzed for the specific parameters identified in the report. Additional constituents, for which analyses were not conducted, may be present in soil, groundwater, surface water, sediment and/or air. Future Site activities and uses may result in a requirement for additional testing.
9. Our interpretation of field screening and laboratory data is presented in the Report. Unless otherwise noted, we relied upon the laboratory's QA/QC program to validate these data.
10. Variations in the types and concentrations of contaminants observed at a given location or time may occur due to release mechanisms, disposal practices, changes in flow paths, and/or the influence of various physical, chemical, biological or radiological processes. Subsequently observed concentrations may be other than indicated in the Report.

## INTERPRETATION OF DATA

11. Our opinions are based on available information as described in the Report, and on our professional judgment. Additional observations made over time, and/or space, may not support the opinions provided in the Report.

## ADDITIONAL INFORMATION

12. In the event that the Client or others authorized to use this report obtain additional information on environmental or hazardous waste issues at the Site not contained in this report, such information shall be brought to GZA's attention forthwith. GZA will evaluate such information and, on the basis of this evaluation, may modify the conclusions stated in this report.

## ADDITIONAL SERVICES

13. GZA recommends that we be retained to provide services during any future investigations, design, implementation activities, construction, and/or property development/ redevelopment at the Site. This will allow us the opportunity to: i) observe conditions and compliance with our design concepts and opinions; ii) allow for changes in the event that conditions are other than anticipated; iii) provide modifications to our design; and iv) assess the consequences of changes in technologies and/or regulations.

## CONCEPTUAL SITE MODEL

14. Our opinions were developed, in part, based upon a comparison of site data to conditions anticipated within our Conceptual Site Model (CSM). The CSM is based on available information, and professional judgment. There are rarely sufficient data to develop a unique CSM. Therefore observations over time, and/or space, may vary from those depicted in the CSM provided in this report. In addition, the CSM should be evaluated and refined (as appropriate) whenever significant new information and/or data is obtained.

## RISK CHARACTERIZATION

15. Our risk evaluation was performed in accordance with generally accepted practices of appropriate Federal and/or state regulatory agencies, and of other consultants undertaking similar studies at the same time, for similar purposes, and under similar circumstances. The findings of the risk evaluation are dependent on the numerous assumptions and uncertainties inherent in the risk characterization process. Sources of the uncertainty may include Site conditions; Site use; the nature, extent, concentration and distribution of contaminants; and the available toxicity and/or health/risk based regulatory information. Consequently, the findings of the risk characterization are not an absolute





characterization of actual risks; but rather serve to highlight potential incremental risks associated with activities indicated in the Report. Actual risks may be other than indicated in the Report.



## **Appendix B – Transmittal Form BWSC106**





Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC 106

RELEASE ABATEMENT MEASURE (RAM)  
TRANSMITTAL FORM

Release Tracking Number

3 - 13341

Pursuant to 310 CMR 40.0444 - 0446 (Subpart D)

A. SITE LOCATION:

1. Site Name/Location Aid: EVERETT STAGING YARD
2. Street Address: 1 HORIZON WAY
3. City/Town: EVERETT 4. Zip Code: 021490000
- ☒ 5. Check here if the disposal site that is the source of the release is Tier Classified. Check the current Tier Classification Category.
- ☐ a. Tier I ☐ b. Tier ID ☒ c. Tier II

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

1. List Submittal Date of Initial RAM Plan (if previously submitted): 5/3/2016  
(mm/dd/yyyy)
- ☐ 2. Submit an **Initial Release Abatement Measure (RAM) Plan**.
- ☐ a. Check here if the RAM is being conducted as part of the construction of a permanent structure. If checked, you must specify what type of permanent structure is to be erected in or in the immediate vicinity of the area where the RAM is to be conducted.
- b. Specify type of permanent structure: (check all that apply) ☐ i. School ☐ ii. Residential ☐ iii. Commercial  
☐ iv. Industrial ☐ v. Other Specify: \_\_\_\_\_
- ☒ 3. Submit a **Modified RAM Plan** of a previously submitted RAM Plan.
- ☐ 4. Submit a **RAM Status Report**.
- ☐ 5. Submit a **Remedial Monitoring Report**. (This report can only be submitted through eDEP, concurrent with a RAM Status Report.)
- a. Type of Report: (check one) ☐ i. Initial Report ☐ ii. Interim Report ☐ iii. Final Report
- b. Frequency of Submittal:
- ☐ i. A Remedial Monitoring Report(s) submitted every six months, concurrent with a RAM Status Report.
- ☐ ii. A Remedial Monitoring Report(s) submitted annually, concurrent with a RAM Status Report.
- c. Number of Remedial Systems and/or Monitoring Programs: \_\_\_\_\_
- A separate BWSC106A, RAM Remedial Monitoring Report, must be filled out for each Remedial System and/or Monitoring Program addressed by this transmittal form.
- ☐ 6. Submit a **RAM Completion Statement**.
- ☐ 7. Submit a **Revised RAM Completion Statement**.
8. Provide Additional RTNs:
- ☒ a. Check here if this RAM Submittal covers additional Release Tracking Numbers (RTNs). RTNs that have been previously linked to a Primary Tier Classified RTN do not need to be listed here. This section is intended to allow a RAM to cover more than one unclassified RTN and not show permanent linkage to a Primary Tier Classified RTN.
- b. Provide the additional Release Tracking Number(s) covered by this RAM Submittal. 3 - 17760 3 - 1850
- ☐ 9. Include in the **RAM Plan** or **Modified RAM Plan** a **Plan for the Application of Remedial Additives** near a sensitive receptor, pursuant to 310 CMR 40.0046(3).

(All sections of this transmittal form must be filled out unless otherwise noted above)



**Massachusetts Department of Environmental Protection**  
*Bureau of Waste Site Cleanup*

**BWSC 106**

**RELEASE ABATEMENT MEASURE (RAM)  
TRANSMITTAL FORM**

Release Tracking Number

3 - 13341

Pursuant to 310 CMR 40.0444 - 0446 (Subpart D)

**C. RELEASE OR THREAT OF RELEASE CONDITIONS THAT WARRANT RAM:**

1. Media Impacted and Receptors Affected: (check all that apply)
- |   |   |   |
|---|---|---|
| <input type="checkbox"/> a. Paved Surface           | <input type="checkbox"/> b. Basement          | <input type="checkbox"/> c. School                    |
| <input type="checkbox"/> d. Public Water Supply     | <input type="checkbox"/> e. Surface Water     | <input type="checkbox"/> f. Zone 2                    |
| <input type="checkbox"/> g. Private Well            | <input type="checkbox"/> h. Residence         | <input checked="" type="checkbox"/> i. Soil           |
| <input checked="" type="checkbox"/> j. Ground Water | <input type="checkbox"/> k. Sediments         | <input type="checkbox"/> l. Wetland                   |
| <input type="checkbox"/> m. Storm Drain             | <input type="checkbox"/> n. Indoor Air        | <input type="checkbox"/> o. Air                       |
| <input type="checkbox"/> p. Soil Gas                | <input type="checkbox"/> q. Sub-Slab Soil Gas | <input type="checkbox"/> r. Critical Exposure Pathway |
| <input type="checkbox"/> s. NAPL                    | <input type="checkbox"/> t. Unknown           |   |
| <input type="checkbox"/> u. Others                  | Specify: _____                                |   |
2. Sources of the Release or TOR: (check all that apply)
- |  |   |                                     |
|--|---|-------------------------------------|
| <input type="checkbox"/> a. Transformer  | <input type="checkbox"/> b. Fuel Tank         | <input type="checkbox"/> c. Pipe    |
| <input type="checkbox"/> d. OHM Delivery | <input type="checkbox"/> e. AST               | <input type="checkbox"/> f. Drums   |
| <input type="checkbox"/> g. Tanker Truck | <input type="checkbox"/> h. Hose              | <input type="checkbox"/> i. Line    |
| <input type="checkbox"/> j. UST          | Describe: _____                               | <input type="checkbox"/> k. Vehicle |
| <input type="checkbox"/> l. Boat/Vessel  |   |                                     |
| <input type="checkbox"/> m. Unknown      | <input checked="" type="checkbox"/> n. Other: | HISTORIC FILL AND MANUFACTURING     |
3. Type of Release or TOR: (check all that apply)
- |  |   |   |                                      |
|--|---|---|--------------------------------------|
| <input type="checkbox"/> a. Dumping      | <input type="checkbox"/> b. Fire              | <input type="checkbox"/> c. AST Removal | <input type="checkbox"/> d. Overfill |
| <input type="checkbox"/> e. Rupture      | <input type="checkbox"/> f. Vehicle Accident  | <input type="checkbox"/> g. Leak        | <input type="checkbox"/> h. Spill    |
| <input type="checkbox"/> i. Test Failure | <input type="checkbox"/> j. TOR Only          |   |                                      |
| <input type="checkbox"/> k. UST Removal  | Describe: _____                               |   |                                      |
| <input type="checkbox"/> l. Unknown      | <input checked="" type="checkbox"/> m. Other: | HISTORIC FILL AND MANUFACTURING         |                                      |
4. Identify Oils and Hazardous Materials Released: (check all that apply)
- |   |   |
|---|---|
| <input checked="" type="checkbox"/> a. Oils         | <input checked="" type="checkbox"/> b. Chlorinated Solvents |
| <input checked="" type="checkbox"/> c. Heavy Metals | <input checked="" type="checkbox"/> d. Others               |
- Specify: PCBS, ASBESTOS-CONTAINING MATERIAL

**D. DESCRIPTION OF RESPONSE ACTIONS:** (check all that apply, for volumes list cumulative amounts)

- |   |   |
|---|---|
| <input type="checkbox"/> 1. Assessment and/or Monitoring Only                 | <input type="checkbox"/> 2. Temporary Covers or Caps                        |
| <input type="checkbox"/> 3. Deployment of Absorbent or Containment Materials  | <input type="checkbox"/> 4. Temporary Water Supplies                        |
| <input type="checkbox"/> 5. Structure Venting System/HVAC Modification System | <input type="checkbox"/> 6. Temporary Evacuation or Relocation of Residents |
| <input type="checkbox"/> 7. Product or NAPL Recovery                          | <input type="checkbox"/> 8. Fencing and Sign Posting                        |
| <input type="checkbox"/> 9. Groundwater Treatment Systems                     | <input type="checkbox"/> 10. Soil Vapor Extraction                          |
| <input type="checkbox"/> 11. Remedial Additives                               | <input type="checkbox"/> 12. Air Sparging                                   |
| <input type="checkbox"/> 13. Active Exposure Pathway Mitigation System        | <input type="checkbox"/> 14. Passive Exposure Pathway Mitigation System     |
| <input type="checkbox"/> 15. Monitored Natural Attenuation                    | <input type="checkbox"/> 16. In-Situ Chemical Oxidation                     |





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**D. DESCRIPTION OF RESPONSE ACTIONS (cont.):** (check all that apply, for volumes list cumulative amounts)

☐ 17. Excavation of Contaminated Soils

<input type="checkbox"/> a. Re-use, Recycling or Treatment	<input type="checkbox"/> i. On Site	Estimated volume in cubic yards	_____
	<input type="checkbox"/> ii. Off Site	Estimated volume in cubic yards	_____
iia. Receiving Facility:	_____	Town:	_____ State: _____
iib. Receiving Facility:	_____	Town:	_____ State: _____
iii. Describe:	_____		

<input type="checkbox"/> b. Store	<input type="checkbox"/> i. On Site	Estimated volume in cubic yards	_____
	<input type="checkbox"/> ii. Off Site	Estimated volume in cubic yards	_____
iia. Receiving Facility:	_____	Town:	_____ State: _____
iib. Receiving Facility:	_____	Town:	_____ State: _____

<input type="checkbox"/> c. Landfill	<input type="checkbox"/> i. Cover	Estimated volume in cubic yards	_____
Receiving Facility:	_____	Town:	_____ State: _____
	<input type="checkbox"/> ii. Disposal	Estimated volume in cubic yards	_____
Receiving Facility:	_____	Town:	_____ State: _____

☐ 18. Removal of Drums, Tanks or Containers:

a. Describe Quantity and Amount: \_\_\_\_\_

b. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

c. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

☐ 19. Removal of Other Contaminated Media:

a. Specify Type and Volume: \_\_\_\_\_

b. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

c. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

☒ 20. Other Response Actions:

Describe: MODIFICATION OF PROCEDURES FOR AIR MONITORING ASSOCIATED WITH HANDLING, TRANSPORT AND DISPOSAL OF SOILS IMPACTED BY ASBESTOS-CONTAINING MATERIAL

☐ 21. Use of Innovative Technologies:

Describe: \_\_\_\_\_



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**E. LSP SIGNATURE AND STAMP :**

I attest under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and 309 CMR 4.03(2), and (iii) the provisions of 309 CMR 4.03(3), to the best of my knowledge, information and belief,

> if Section B of this form indicates that a **Release Abatement Measure Plan** is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (iii) comply(ies) with the identified provisions of all orders, permits, and approvals identified in this submittal;

> if Section B of this form indicates that a **Release Abatement Measure Status Report** and/or **Remedial Monitoring Report** is being submitted, the response action(s) that is (are) the subject of this submittal (i) is (are) being implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (iii) comply (ies) with the identified provisions of all orders, permits, and approvals identified in this submittal;

> if Section B of this form indicates that a **Release Abatement Measure Completion Statement** is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (iii) comply(ies) with the identified provisions of all orders, permits, and approvals identified in this submittal:

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

1. LSP #:	8107		
2. First Name:	LAWRENCE	3. Last Name:	FELDMAN
4. Telephone:	7812783700	5. Ext.:	6. Email:
7. Signature:	LAWRENCE FELDMAN		
8. Date:	2/3/2017	9. LSP Stamp:	
	(mm/dd/yyyy)		





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**F. PERSON UNDERTAKING RAM:**

1. Check all that apply: ☒ a. change in contact name ☐ b. change of address ☐ c. change in the person undertaking response actions
2. Name of Organization: WYNN MA LLC
3. Contact First Name: ROBERT 4. Last Name: DESALVIO
5. Street: 101 STATION LANDING 2ND FLOOR 6. Title: PRESIDENT
7. City/Town: MEDFORD 8. State: MA 9. ZIP Code: 021550000
10. Telephone: 8577707801 11. Ext.:  12. Email:

**G. RELATIONSHIP TO RELEASE OR THREAT OF RELEASE OF PERSON UNDERTAKING RAM:**

☐ Check here to change relationship

- ☒ 1. RP or PRP ☐ a. Owner ☐ b. Operator ☐ c. Generator ☐ d. Transporter  
☒ e. Other RP or PRP Specify: ELIGIBLE OWNER/OPERATOR
- ☐ 2. Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)
- ☐ 3. Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))
- ☐ 4. Any Other Person Undertaking RAM Specify Relationship:

**H. REQUIRED ATTACHMENT AND SUBMITTALS:**

- ☐ 1. Check here if any Remediation Waste, generated as a result of this RAM, will be stored, treated, managed, recycled or reused at the site following submission of the RAM Completion Statement. You must submit a Phase IV Remedy Implementation Plan along with the appropriate transmittal form (BWSC108).
- ☐ 2. Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s) and/or approval(s) issued by DEP or EPA. If the box is checked, you MUST attach a statement identifying the applicable provisions thereof.
- ☐ 3. Check here to certify that the Chief Municipal Officer and the Local Board of Health have been notified of the implementation of a Release Abatement Measure.
- ☐ 4. Check here if any non-updatable information provided on this form is incorrect, e.g. Release Address/Location Aid. Send corrections to [bwsc.edep@state.ma.us](mailto:bwsc.edep@state.ma.us).
- ☐ 5. If a RAM Compliance Fee is required for this RAM, check here to certify that a RAM Compliance Fee was submitted to DEP, P. O. Box 4062, Boston, MA 02211.
- ☒ 6. Check here to certify that the LSP Opinion containing the material facts, data, and other information is attached.





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**I. CERTIFICATION OF PERSON UNDERTAKING RAM:**

1. I, ROBERT DESALVIO, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

2. By: ROBERT DESALVIO 3. Title: PRESIDENT  
(Signature)

4. For: WYNN MA LLC 5. Date: 2/2/2017  
(Name of person or entity recorded in Section F) (mm/dd/yyyy)

☐ 6. Check here if the address of the person providing certification is different from address recorded in Section F.

7. Street: \_\_\_\_\_  
8. City/Town: \_\_\_\_\_ 9. State: \_\_\_\_\_ 10. ZIP Code: \_\_\_\_\_  
11. Telephone: \_\_\_\_\_ 12. Ext.: \_\_\_\_\_ 13. Email: \_\_\_\_\_

**YOU ARE SUBJECT TO AN ANNUAL COMPLIANCE ASSURANCE FEE OF UP TO \$10,000 PER  
BILLABLE YEAR FOR THIS DISPOSAL SITE. YOU MUST LEGIBLY COMPLETE ALL RELEVANT  
SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM,  
YOU MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE**

Date Stamp (DEP USE ONLY:)

Received by DEP on  
2/3/2017 11:31:51 AM