



# COUNTY SANITATION DISTRICTS OF LOS ANGELES COUNTY

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GRACE ROBINSON HYDE  
Chief Engineer and General Manager

January 11, 2019

Mr. Daniel K. Zogaib, Project Manager  
Brownfields and Environmental Restoration Program  
Department of Toxic Substances Control  
5796 Corporate Avenue  
Cypress, CA 90630

Dear Mr. Zogaib:

### **Workplan for the Third Five-Year Review of the Palos Verdes Landfill**

Enclosed for your review, please find the *Workplan for the Third Five-Year Review of the Palos Verdes Landfill*. This workplan was prepared pursuant to the Operation and Maintenance Agreement dated December 23, 1998 between the County Sanitation Districts of Los Angeles County and the California Environmental Protection Agency, Department of Toxic Substances Control (DTSC).

This workplan has been prepared in accordance with the United States Environmental Protection Agency's (USEPA) Comprehensive Five-Year Review Guidance. If you have any questions regarding this transmittal, please contact the undersigned at (562) 908-4288, extension 2826.

Very truly yours,

Kristen M. Ruffell  
Project Coordinator and Project Engineer  
Technical Services Department

KMR:RC:ch  
Enclosure

cc: Mr. Emad Yemut, DTSC

DOC# 4848062

**Workplan for the Third Five-Year Review  
of the Palos Verdes Landfill  
Rolling Hills Estates, California**

January 2019

Prepared by:

County Sanitation Districts of Los Angeles County  
1955 Workman Mill Road  
Whittier, CA 90601

**Table of Contents**

1. INTRODUCTION ..... 1

2. FACILITY OVERVIEW ..... 1

3. FIVE-YEAR REVIEW PROCESS..... 2

4. REFERENCE DOCUMENTS..... 3

5. SUMMARY ..... 3

6. REFERENCES ..... 4

**List of Figures**

- Figure 1 Site Location Map
- Figure 2 Site Layout
- Figure 3 Location of Groundwater Extraction Wells

**List of Appendices**

- Appendix A Five-Year Review Site Inspection Checklist
- Appendix B Five-Year Review Summary Form

## **1. INTRODUCTION**

The Operation and Maintenance (O&M) Agreement (DTSC, 1998) between the County Sanitation Districts of Los Angeles County (Sanitation Districts) and the Department of Toxic Substances (DTSC) for the Palos Verdes Landfill (site, PVLf) requires the Sanitation Districts conduct a review and reevaluation of the remedial actions at the site every five years. The requirement is consistent with Section 121 of the Federal Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), as amended by the Superfund Amendments and Reauthorization Act (SARA), which subject remedial actions that result in hazardous substances, pollutants, or contaminants remaining at a site to a Five-Year Review. DTSC is the primary regulatory agency overseeing the implementation and the performance review of these remedial activities at the PVLf.

While the PVLf is not regulated under CERCLA and is not a Superfund site, five-year reviews for the site are performed in general accordance with provisions of CERCLA and the National Contingency Plan (NCP) at the direction of the DTSC. The first Five-Year Review for the PVLf was completed and approved by DTSC on November 4, 2009 (DTSC, 2009). The second Five-Year Review for the site was completed and approved by DTSC on January 6, 2015 (DTSC, 2015). In 2019, the Sanitation Districts will perform a third Five-Year Review of the site. The review will be conducted based on the United States Environmental Protection Agency's (USEPA) Comprehensive Five-Year Review Guidance (USEPA, 2001).

In accordance with the review guidance, the purpose of the Five-Year Review is to evaluate the implementation and performance of remedial actions at the PVLf to determine if the implemented remedy continues to be protective of human health and the environment and whether remedial action objectives are being fulfilled.

## **2. FACILITY OVERVIEW**

The PVLf is located at 25706 Hawthorne Boulevard, Rolling Hills Estates, Los Angeles County, California (Figure 1) and covers approximately 291 acres. About 83 acres of the site are operated by the County of Los Angeles Department of Parks and Recreation as the South Coast Botanic Garden; 35 acres are operated by the City of Rolling Hills Estates as Ernie Howlett Park; and the remaining 173 acres, referred to as the Main Site, are operated by the Sanitation Districts with limited access to the public (Figure 2).

From the early 1900s until the 1950s, much of the area covered by the PVLf was operated as a diatomite mine. In 1952, Ben K. Kazarian and Sons (BKK) began landfill operations in the area now developed into the South Coast Botanic Garden. In May 1957, the Sanitation Districts acquired the landfill from BKK and assumed landfill operations. The Sanitation Districts expanded the landfill and operated the facility until December 1980 when the landfill reached design capacity. A portion of the facility was permitted to receive hazardous waste and approximately 3 to 4 percent of the waste received at the landfill was considered hazardous. The types of hazardous waste accepted

were primarily liquid wastes that included: acid wastes, solvents, alkaline wastes, tetraethyl lead sludge, chemical toilet wastes, hazardous tank bottoms, contaminated soil and sand, brine, pesticides, and other hazardous wastes (primarily refinery, oil field, and oil terminal wastes) (Sanitation Districts, 1997).

The Sanitation Districts have been performing groundwater monitoring and reporting analytical results since 1964. Groundwater contamination was first discovered in the northern corner of the Main Site in 1984. A remedial investigation and feasibility study (Sanitation Districts, 1995a and 1995b, respectively) were performed and identified affected groundwater onsite and offsite along Hawthorne and Crenshaw Boulevards. The remedial investigation report concluded that the constituents of concern in groundwater were arsenic and landfill-related volatile organic compounds. In an effort to control groundwater contamination, the Sanitation Districts operate groundwater extraction wells and treatment systems to mitigate affected groundwater. Currently, a total of 18 extraction wells have been installed to pump affected groundwater (Figure 3) from the PVLf. Extraction wells E01 through E13, E17, and E18 are part of a subsurface cement-bentonite barrier system installed to control affected groundwater near Hawthorne Boulevard. Extraction wells E14, E15, and E16 were installed to control affected groundwater near Crenshaw Boulevard.

The first Five-Year Review of the remedial actions for the PVLf was completed and approved by DTSC on November 4, 2009. The review found that the environmental control systems in place (landfill soil cover, gas collection/control system for surface air and subsurface gas, groundwater containment system, industrial wastewater, and stormwater, etc.) are effective and that the site is safe and well maintained. A second Five-Year Review of the site, which was completed and approved by DTSC on January 6, 2015, found that environmental control systems continue to be protective of human health and the environment. As a result, no additional remedial measures were recommended.

### **3. FIVE-YEAR REVIEW PROCESS**

The third Five-Year Review for the PVLf will be conducted based on the guidelines provided by the USEPA Comprehensive Five-Year Review Guidance, report number EPA 540-R-01-007. The Five-Year Review Inspection Checklist and Review Summary Form, as provided in the Comprehensive Five-Year Review Guidance and presented in Appendices A and B, will guide the review process to ensure that all pertinent information is gathered for evaluation.

In accordance with the guidelines, the purpose of this Five-Year Review is to evaluate the implementation and performance of remedial actions at the PVLf in order to determine if the implemented remedy is protective of human health and the environment and whether remedial action objectives are being fulfilled since the last Five-Year Review. This Five-Year Review will include the review of all relevant site O&M data and documents, interviews with site staff, and a thorough inspection of the environmental control systems. The findings and conclusions of the Five-Year Review, including

recommendations, follow-up actions to address any issues identified, and protectiveness determinations, will be presented in a report with all data and information necessary to support the findings and conclusions. The draft report for the third Five-Year Review will be submitted to DTSC approximately 90 days from workplan approval.

#### **4. REFERENCE DOCUMENTS**

Routine sampling and monitoring data for groundwater, surface air, subsurface gas, stormwater, and industrial wastewater will be compiled for review and reevaluation. These include: groundwater monitoring reports submitted to DTSC, routine reports for surface air and subsurface gas submitted to the South Coast Air Quality Management District; quarterly and annual site inspection reports performed in accordance with the site's Storm Water Pollution Prevention Plan; annual stormwater reports submitted to the Regional Water Quality Control Board; and industrial wastewater monitoring reports submitted in accordance with the Sanitation Districts' discharge requirements will be used to aid the Five-Year Review process by providing a basis for drawing conclusions about the success of the implemented remediation techniques. It should be noted that the Regional Water Quality Control Board approved the Notice of Termination of coverage under the General Permit for Stormwater Discharges Associated with Industrial Activity for the site on July 24, 2015. Therefore, sampling and monitoring data for stormwater will not extend beyond that date. The Sanitation Districts have most sampling and monitoring data available in electronic format in a database. This database will be queried to extract the pertinent data for this review.

The second Five-Year Review for the PVLFF reviewed monitoring data through December 2013. This third Five-Year review will evaluate all relevant site operation and maintenance information including sampling and monitoring data collected since the last Five-Year review (between January 2014 and December 2018).

#### **5. SUMMARY**

The Sanitation Districts have prepared this workplan for the upcoming Five-Year Review that will review and reevaluate the implementation and performance of remedial actions at the PVLFF. Guidance provided by the USEPA in the Five-Year Review's Site Inspection Checklist (Appendix A) and Review Summary (Appendix B) will be followed to complete the Five-Year Review. The draft Five-Year Review Report will be submitted to the DTSC approximately 90 days from workplan approval.

**6. REFERENCES**

Department of Toxic Substances Control, 1998, Operation and Maintenance Agreement, Palos Verdes Landfill Main Site, Rolling Hills Estates, California, December (DTSC, 1998).

Department of Toxic Substances Control, 2009, Palos Verdes Landfill Five-Year Review, November (DTSC, 2009).

Department of Toxic Substances Control, 2015, Palos Verdes Landfill Second Five-Year Review, January (DTSC, 2015).

U.S. Environmental Protection Agency, 2001, Comprehensive Five-Year Review Guidance, June (USEPA, 2001)

County Sanitation Districts of Los Angeles County, 1997, Operation and Maintenance Plan for Remedial Action, Palos Verdes Landfill, April (Sanitation Districts, 1997).

County Sanitation Districts of Los Angeles County, 1995, Remedial Investigation Report for the Palos Verdes Landfill, June (Sanitation Districts, 1995a).

County Sanitation Districts of Los Angeles County, 1995, Feasibility Study Report for the Palos Verdes Landfill, June (Sanitation Districts, 1995b).

## **FIGURES**

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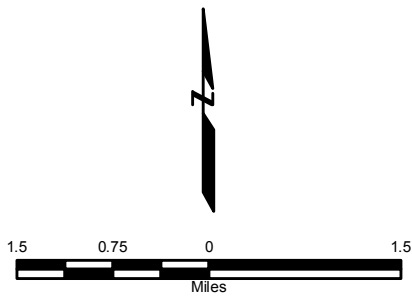
Note: Base map from ESRI Streetmap (2002).

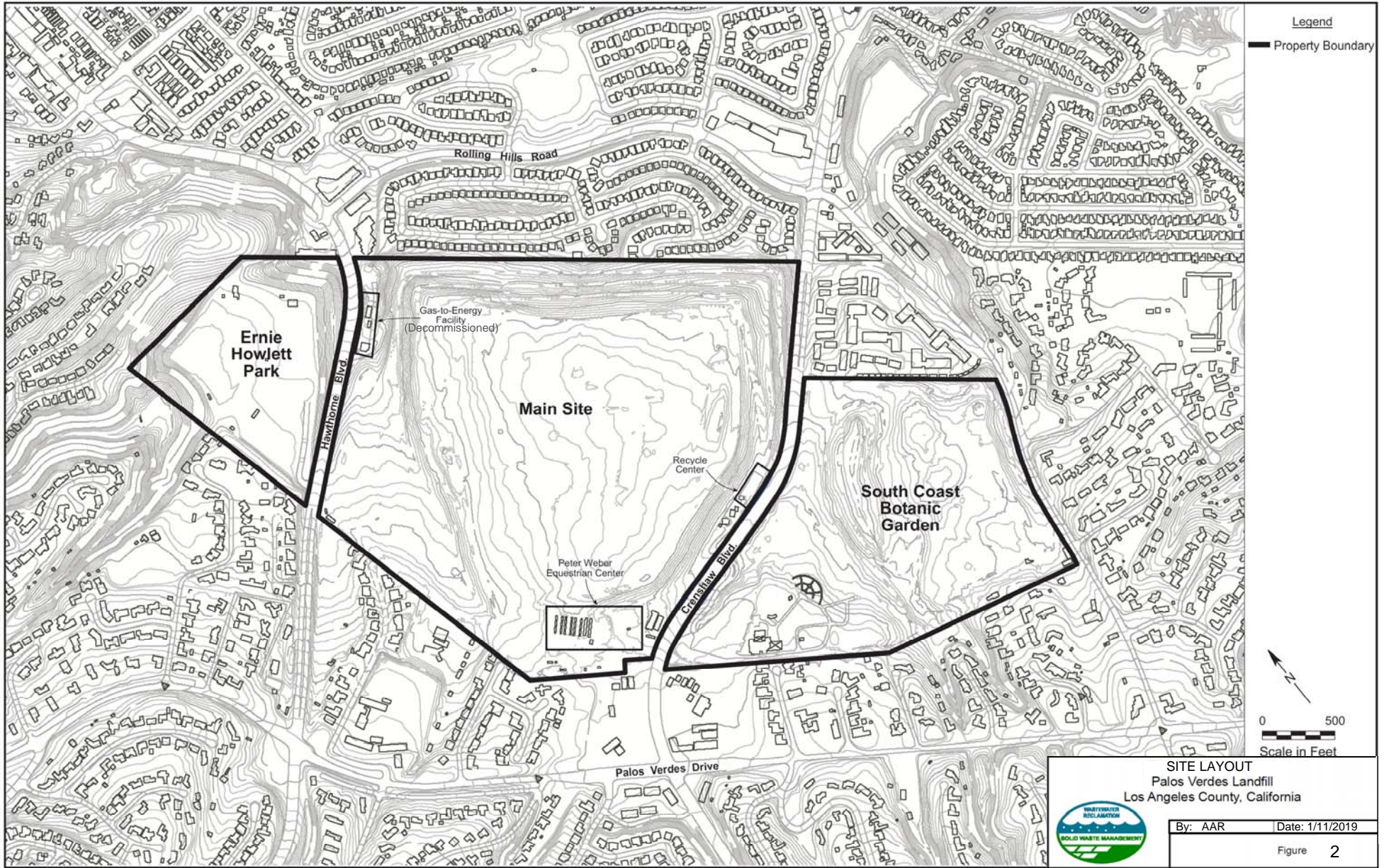
**SITE LOCATION MAP**  
**Palos Verdes Landfill**  
**Los Angeles County, California**

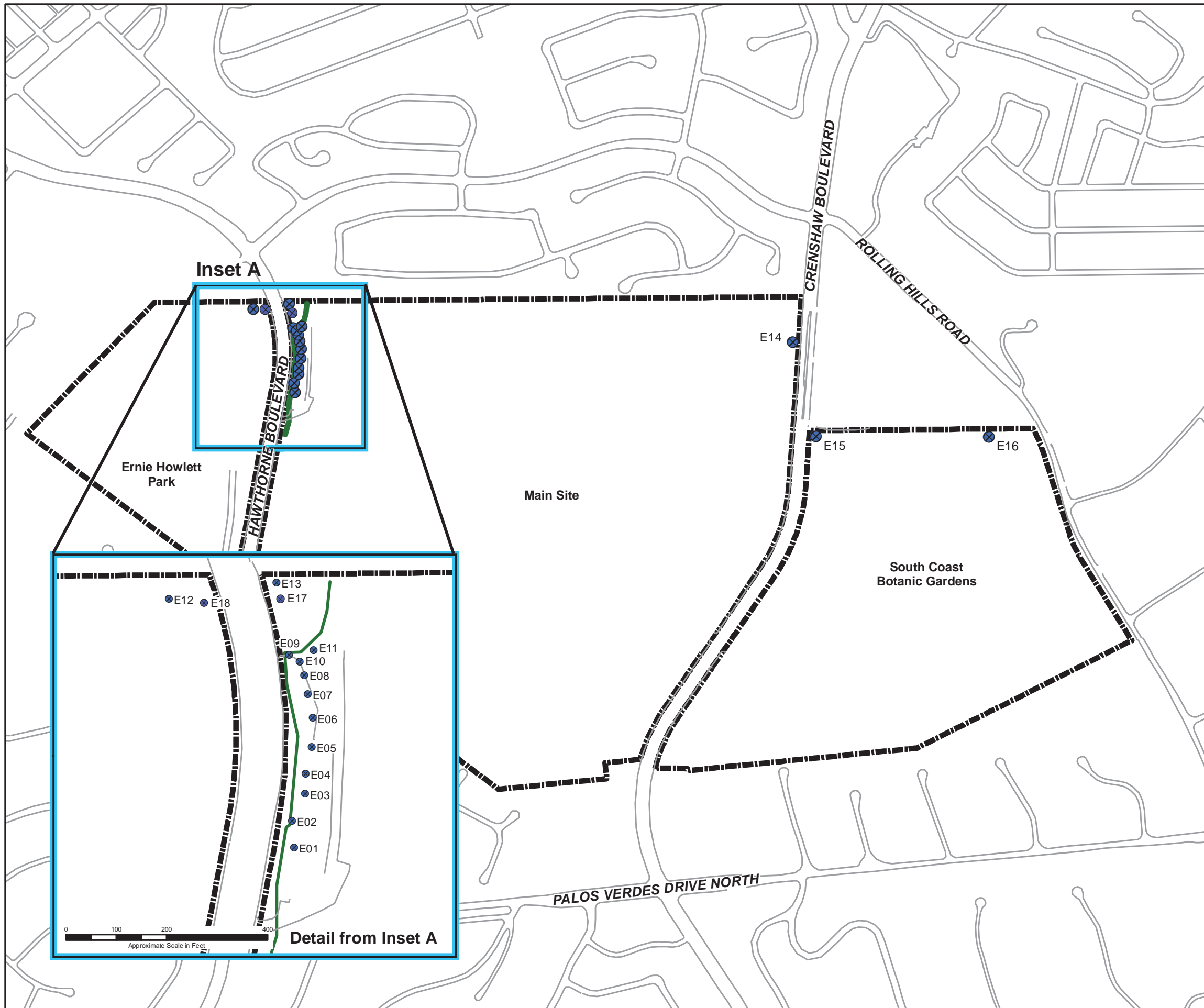


By: AAR	Date: 1/11/2019
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Figure **1**

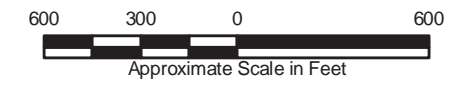






**Explanation**

-  Extraction well
-  Subsurface barrier
-  Property boundary



Base map provided by County Sanitation Districts of Los Angeles County (2pv100802.dgn).

**LOCATION OF GROUNDWATER EXTRACTION WELLS  
Palos Verdes Landfill  
Los Angeles County, California**



By: AAR Date: 1/11/2019

**APPENDIX A**  
**FIVE-YEAR REVIEW SITE INSPECTION CHECKLIST**

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## Five-Year Review Site Inspection Checklist

### Purpose of the Checklist

The site inspection checklist provides a useful method for collecting important information during the site inspection portion of the five-year review. The checklist serves as a reminder of what information should be gathered and provides the means of checking off information obtained and reviewed, or information not available or applicable. The checklist is divided into sections as follows:

- I. Site Information
- II. Interviews
- III. On-site Documents & Records Verified
- IV. O&M Costs
- V. Access and Institutional Controls
- VI. General Site Conditions
- VII. Landfill Covers
- VIII. Vertical Barrier Walls
- IX. Groundwater/Surface Water Remedies
- X. Other Remedies
- XI. Overall Observations

Some data and information identified in the checklist may or may not be available at the site depending on how the site is managed. Sampling results, costs, and maintenance reports may be kept on site or may be kept in the offices of the contractor or at State offices. In cases where the information is not kept at the site, the item should not be checked as “not applicable,” but rather it should be obtained from the office or agency where it is maintained. If this is known in advance, it may be possible to obtain the information before the site inspection.

This checklist was developed by EPA and the U.S. Army Corps of Engineers (USACE). It focuses on the two most common types of remedies that are subject to five-year reviews: landfill covers, and groundwater pump and treat remedies. Sections of the checklist are also provided for some other remedies. The sections on general site conditions would be applicable to a wider variety of remedies. The checklist should be modified to suit your needs when inspecting other types of remedies, as appropriate.

The checklist may be completed and attached to the Five-Year Review report to document site status. Please note that the checklist is not meant to be completely definitive or restrictive; additional information may be supplemented if the reviewer deems necessary. Also note that actual site conditions should be documented with photographs whenever possible.

## Using the Checklist for Types of Remedies

The checklist has sections designed to capture information concerning the main types of remedies which are found at sites requiring five-year reviews. These remedies are landfill covers (Section VII of the checklist) and groundwater and surface water remedies (Section IX of the checklist). The primary elements and appurtenances for these remedies are listed in sections which can be checked off as the facility is inspected. The opportunity is also provided to note site conditions, write comments on the facilities, and attach any additional pertinent information. If a site includes remedies beyond these, such as soil vapor extraction or soil landfarming, the information should be gathered in a similar manner and attached to the checklist.

## Considering Operation and Maintenance Costs

Unexpectedly widely varying or unexpectedly high O&M costs may be early indicators of remedy problems. For this reason, it is important to obtain a record of the original O&M cost estimate and of annual O&M costs during the years for which costs incurred are available. Section IV of the checklist provides a place for documenting annual costs and for commenting on unanticipated or unusually high O&M costs. A more detailed categorization of costs may be attached to the checklist if available. Examples of categories of O&M costs are listed below.

Operating Labor - This includes all wages, salaries, training, overhead, and fringe benefits associated with the labor needed for operation of the facilities and equipment associated with the remedial actions.

Maintenance Equipment and Materials - This includes the costs for equipment, parts, and other materials required to perform routine maintenance of facilities and equipment associated with a remedial action.

Maintenance Labor - This includes the costs for labor required to perform routine maintenance of facilities and for equipment associated with a remedial action.

Auxiliary Materials and Energy - This includes items such as chemicals and utilities which can include electricity, telephone, natural gas, water, and fuel. Auxiliary materials include other expendable materials such as chemicals used during plant operations.

Purchased Services - This includes items such as sampling costs, laboratory fees, and other professional services for which the need can be predicted.

Administrative Costs - This includes all costs associated with administration of O&M not included under other categories, such as labor overhead.

Insurance, Taxes and Licenses - This includes items such as liability and sudden and accidental insurance, real estate taxes on purchased land or right-of-way, licensing fees for certain technologies, and permit renewal and reporting costs.

Other Costs - This includes all other items which do not fit into any of the above categories.

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Please note that "O&M" is referred to throughout this checklist. At sites where Long-Term Response Actions are in progress, O&M activities may be referred to as "system operations" since these sites are not considered to be in the O&M phase while being remediated under the Superfund program.

## Five-Year Review Site Inspection Checklist (Template)

(Working document for site inspection. Information may be completed by hand and attached to the Five-Year Review report as supporting documentation of site status. "N/A" refers to "not applicable.")

<b>I. SITE INFORMATION</b>			
<b>Site name:</b>	<b>Date of inspection:</b>		
<b>Location and Region:</b>	<b>EPA ID:</b>		
<b>Agency, office, or company leading the five-year review:</b>	<b>Weather/temperature:</b>		
<b>Remedy Includes:</b> (Check all that apply) <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Landfill cover/containment  <input type="checkbox"/> Access controls  <input type="checkbox"/> Institutional controls  <input type="checkbox"/> Groundwater pump and treatment  <input type="checkbox"/> Surface water collection and treatment  <input type="checkbox"/> Other _____            _____         </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Monitored natural attenuation  <input type="checkbox"/> Groundwater containment  <input type="checkbox"/> Vertical barrier walls         </td> </tr> </table>		<input type="checkbox"/> Landfill cover/containment <input type="checkbox"/> Access controls <input type="checkbox"/> Institutional controls <input type="checkbox"/> Groundwater pump and treatment <input type="checkbox"/> Surface water collection and treatment <input type="checkbox"/> Other _____ _____	<input type="checkbox"/> Monitored natural attenuation <input type="checkbox"/> Groundwater containment <input type="checkbox"/> Vertical barrier walls
<input type="checkbox"/> Landfill cover/containment <input type="checkbox"/> Access controls <input type="checkbox"/> Institutional controls <input type="checkbox"/> Groundwater pump and treatment <input type="checkbox"/> Surface water collection and treatment <input type="checkbox"/> Other _____ _____	<input type="checkbox"/> Monitored natural attenuation <input type="checkbox"/> Groundwater containment <input type="checkbox"/> Vertical barrier walls		
<b>Attachments:</b> <input type="checkbox"/> Inspection team roster attached <input type="checkbox"/> Site map attached			
<b>II. INTERVIEWS</b> (Check all that apply)			
<b>1. O&amp;M site manager</b> _____                      _____                      _____ <div style="display: flex; justify-content: space-between; width: 100%;"> <span>Name</span> <span>Title</span> <span>Date</span> </div> Interviewed <input type="checkbox"/> at site <input type="checkbox"/> at office <input type="checkbox"/> by phone    Phone no. _____ Problems, suggestions; <input type="checkbox"/> Report attached _____ _____			
<b>2. O&amp;M staff</b> _____                      _____                      _____ <div style="display: flex; justify-content: space-between; width: 100%;"> <span>Name</span> <span>Title</span> <span>Date</span> </div> Interviewed <input type="checkbox"/> at site <input type="checkbox"/> at office <input type="checkbox"/> by phone    Phone no. _____ Problems, suggestions; <input type="checkbox"/> Report attached _____ _____			



<b>III. ON-SITE DOCUMENTS &amp; RECORDS VERIFIED</b> (Check all that apply)			
1.	<b>O&amp;M Documents</b> <input type="checkbox"/> O&M manual <input type="checkbox"/> As-built drawings <input type="checkbox"/> Maintenance logs Remarks _____ _____	<input type="checkbox"/> Readily available <input type="checkbox"/> Readily available <input type="checkbox"/> Readily available	<input type="checkbox"/> Up to date <input type="checkbox"/> Up to date <input type="checkbox"/> Up to date <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A
2.	<b>Site-Specific Health and Safety Plan</b> <input type="checkbox"/> Contingency plan/emergency response plan Remarks _____ _____	<input type="checkbox"/> Readily available <input type="checkbox"/> Readily available	<input type="checkbox"/> Up to date <input type="checkbox"/> Up to date <input type="checkbox"/> N/A <input type="checkbox"/> N/A
3.	<b>O&amp;M and OSHA Training Records</b> Remarks _____ _____	<input type="checkbox"/> Readily available	<input type="checkbox"/> Up to date <input type="checkbox"/> N/A
4.	<b>Permits and Service Agreements</b> <input type="checkbox"/> Air discharge permit <input type="checkbox"/> Effluent discharge <input type="checkbox"/> Waste disposal, POTW <input type="checkbox"/> Other permits _____ Remarks _____ _____	<input type="checkbox"/> Readily available <input type="checkbox"/> Readily available <input type="checkbox"/> Readily available <input type="checkbox"/> Readily available	<input type="checkbox"/> Up to date <input type="checkbox"/> Up to date <input type="checkbox"/> Up to date <input type="checkbox"/> Up to date <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A
5.	<b>Gas Generation Records</b> Remarks _____ _____	<input type="checkbox"/> Readily available	<input type="checkbox"/> Up to date <input type="checkbox"/> N/A
6.	<b>Settlement Monument Records</b> Remarks _____ _____	<input type="checkbox"/> Readily available	<input type="checkbox"/> Up to date <input type="checkbox"/> N/A
7.	<b>Groundwater Monitoring Records</b> Remarks _____ _____	<input type="checkbox"/> Readily available	<input type="checkbox"/> Up to date <input type="checkbox"/> N/A
8.	<b>Leachate Extraction Records</b> Remarks _____ _____	<input type="checkbox"/> Readily available	<input type="checkbox"/> Up to date <input type="checkbox"/> N/A
9.	<b>Discharge Compliance Records</b> <input type="checkbox"/> Air <input type="checkbox"/> Water (effluent) Remarks _____ _____	<input type="checkbox"/> Readily available <input type="checkbox"/> Readily available	<input type="checkbox"/> Up to date <input type="checkbox"/> Up to date <input type="checkbox"/> N/A <input type="checkbox"/> N/A
10.	<b>Daily Access/Security Logs</b> Remarks _____ _____	<input type="checkbox"/> Readily available	<input type="checkbox"/> Up to date <input type="checkbox"/> N/A

**IV. O&M COSTS****1. O&M Organization**

- State in-house                       Contractor for State  
 PRP in-house                         Contractor for PRP  
 Federal Facility in-house         Contractor for Federal Facility  
 Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**2. O&M Cost Records**

- Readily available             Up to date  
 Funding mechanism/agreement in place  
 Original O&M cost estimate \_\_\_\_\_  Breakdown attached

Total annual cost by year for review period if available

From _____	To _____	_____	<input type="checkbox"/> Breakdown attached
Date	Date	Total cost	
From _____	To _____	_____	<input type="checkbox"/> Breakdown attached
Date	Date	Total cost	
From _____	To _____	_____	<input type="checkbox"/> Breakdown attached
Date	Date	Total cost	
From _____	To _____	_____	<input type="checkbox"/> Breakdown attached
Date	Date	Total cost	
From _____	To _____	_____	<input type="checkbox"/> Breakdown attached
Date	Date	Total cost	

**3. Unanticipated or Unusually High O&M Costs During Review Period**

Describe costs and reasons: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**V. ACCESS AND INSTITUTIONAL CONTROLS**  Applicable  N/A**A. Fencing**

1. **Fencing damaged**             Location shown on site map     Gates secured             N/A  
 Remarks \_\_\_\_\_  
 \_\_\_\_\_

**B. Other Access Restrictions**

1. **Signs and other security measures**             Location shown on site map     N/A  
 Remarks \_\_\_\_\_  
 \_\_\_\_\_

**C. Institutional Controls (ICs)****1. Implementation and enforcement**

Site conditions imply ICs not properly implemented  Yes  No  N/A  
 Site conditions imply ICs not being fully enforced  Yes  No  N/A

Type of monitoring (e.g., self-reporting, drive by) \_\_\_\_\_

Frequency \_\_\_\_\_

Responsible party/agency \_\_\_\_\_

Contact \_\_\_\_\_

Name

Title

Date

Phone no.

Reporting is up-to-date  Yes  No  N/A

Reports are verified by the lead agency  Yes  No  N/A

Specific requirements in deed or decision documents have been met  Yes  No  N/A

Violations have been reported  Yes  No  N/A

Other problems or suggestions:  Report attached

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

**2. Adequacy** ICs are adequate ICs are inadequate N/A

Remarks \_\_\_\_\_

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

**D. General****1. Vandalism/trespassing**  Location shown on site map  No vandalism evident

Remarks \_\_\_\_\_

\_\_\_\_\_

**2. Land use changes on site**  N/A

Remarks \_\_\_\_\_

\_\_\_\_\_

**3. Land use changes off site**  N/A

Remarks \_\_\_\_\_

\_\_\_\_\_

**VI. GENERAL SITE CONDITIONS****A. Roads** Applicable N/A**1. Roads damaged** Location shown on site map Roads adequate N/A

Remarks \_\_\_\_\_

\_\_\_\_\_

<b>B. Other Site Conditions</b>			
Remarks _____ _____ _____ _____ _____			
<b>VII. LANDFILL COVERS</b> <input type="checkbox"/> Applicable <input type="checkbox"/> N/A			
<b>A. Landfill Surface</b>			
1.	<b>Settlement</b> (Low spots) Areal extent _____ Depth _____ Remarks _____ _____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> Settlement not evident	
2.	<b>Cracks</b> Lengths _____    Widths _____    Depths _____ Remarks _____ _____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> Cracking not evident	
3.	<b>Erosion</b> Areal extent _____ Depth _____ Remarks _____ _____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> Erosion not evident	
4.	<b>Holes</b> Areal extent _____ Depth _____ Remarks _____ _____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> Holes not evident	
5.	<b>Vegetative Cover</b> <input type="checkbox"/> Trees/Shrubs (indicate size and locations on a diagram) Remarks _____ _____	<input type="checkbox"/> Grass <input type="checkbox"/> Cover properly established <input type="checkbox"/> No signs of stress	
6.	<b>Alternative Cover (armored rock, concrete, etc.)</b> Remarks _____ _____	<input type="checkbox"/> N/A	
7.	<b>Bulges</b> Areal extent _____ Height _____ Remarks _____ _____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> Bulges not evident	

8.	<b>Wet Areas/Water Damage</b> <input type="checkbox"/> Wet areas <input type="checkbox"/> Ponding <input type="checkbox"/> Seeps <input type="checkbox"/> Soft subgrade Remarks_____	<input type="checkbox"/> Wet areas/water damage not evident <input type="checkbox"/> Location shown on site map <input type="checkbox"/> Location shown on site map <input type="checkbox"/> Location shown on site map <input type="checkbox"/> Location shown on site map Areal extent_____ Areal extent_____ Areal extent_____ Areal extent_____
9.	<b>Slope Instability</b> Areal extent_____ Remarks_____	<input type="checkbox"/> Slides <input type="checkbox"/> Location shown on site map <input type="checkbox"/> No evidence of slope instability
<b>B. Benches</b> <input type="checkbox"/> Applicable <input type="checkbox"/> N/A (Horizontally constructed mounds of earth placed across a steep landfill side slope to interrupt the slope in order to slow down the velocity of surface runoff and intercept and convey the runoff to a lined channel.)		
1.	<b>Flows Bypass Bench</b> Remarks_____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> N/A or okay
2.	<b>Bench Breached</b> Remarks_____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> N/A or okay
3.	<b>Bench Overtopped</b> Remarks_____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> N/A or okay
<b>C. Letdown Channels</b> <input type="checkbox"/> Applicable <input type="checkbox"/> N/A (Channel lined with erosion control mats, riprap, grout bags, or gabions that descend down the steep side slope of the cover and will allow the runoff water collected by the benches to move off of the landfill cover without creating erosion gullies.)		
1.	<b>Settlement</b> Areal extent_____ Remarks_____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> No evidence of settlement Depth_____
2.	<b>Material Degradation</b> Material type_____ Remarks_____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> No evidence of degradation Areal extent_____
3.	<b>Erosion</b> Areal extent_____ Remarks_____	<input type="checkbox"/> Location shown on site map <input type="checkbox"/> No evidence of erosion Depth_____

4.	<b>Undercutting</b>	<input type="checkbox"/> Location shown on site map	<input type="checkbox"/> No evidence of undercutting
	Areal extent _____	Depth _____	
	Remarks _____ _____		
5.	<b>Obstructions</b>	Type _____	<input type="checkbox"/> No obstructions
	<input type="checkbox"/> Location shown on site map	Areal extent _____	
	Size _____		
	Remarks _____ _____		
6.	<b>Excessive Vegetative Growth</b>	Type _____	
	<input type="checkbox"/> No evidence of excessive growth		
	<input type="checkbox"/> Vegetation in channels does not obstruct flow		
	<input type="checkbox"/> Location shown on site map	Areal extent _____	
	Remarks _____ _____		
<b>D. Cover Penetrations</b> <input type="checkbox"/> Applicable <input type="checkbox"/> N/A			
1.	<b>Gas Vents</b>	<input type="checkbox"/> Active	<input type="checkbox"/> Passive
	<input type="checkbox"/> Properly secured/locked	<input type="checkbox"/> Functioning	<input type="checkbox"/> Routinely sampled <input type="checkbox"/> Good condition
	<input type="checkbox"/> Evidence of leakage at penetration		<input type="checkbox"/> Needs Maintenance
	<input type="checkbox"/> N/A		
	Remarks _____ _____		
2.	<b>Gas Monitoring Probes</b>	<input type="checkbox"/> Properly secured/locked	<input type="checkbox"/> Functioning <input type="checkbox"/> Routinely sampled <input type="checkbox"/> Good condition
	<input type="checkbox"/> Evidence of leakage at penetration		<input type="checkbox"/> Needs Maintenance <input type="checkbox"/> N/A
	Remarks _____ _____		
3.	<b>Monitoring Wells</b> (within surface area of landfill)	<input type="checkbox"/> Properly secured/locked	<input type="checkbox"/> Functioning <input type="checkbox"/> Routinely sampled <input type="checkbox"/> Good condition
	<input type="checkbox"/> Evidence of leakage at penetration		<input type="checkbox"/> Needs Maintenance <input type="checkbox"/> N/A
	Remarks _____ _____		
4.	<b>Leachate Extraction Wells</b>	<input type="checkbox"/> Properly secured/locked	<input type="checkbox"/> Functioning <input type="checkbox"/> Routinely sampled <input type="checkbox"/> Good condition
	<input type="checkbox"/> Evidence of leakage at penetration		<input type="checkbox"/> Needs Maintenance <input type="checkbox"/> N/A
	Remarks _____ _____		
5.	<b>Settlement Monuments</b>	<input type="checkbox"/> Located	<input type="checkbox"/> Routinely surveyed <input type="checkbox"/> N/A
	Remarks _____ _____		



<b>E. Gas Collection and Treatment</b> <input type="checkbox"/> Applicable <input type="checkbox"/> N/A		
1.	<b>Gas Treatment Facilities</b> <input type="checkbox"/> Flaring <input type="checkbox"/> Thermal destruction <input type="checkbox"/> Collection for reuse <input type="checkbox"/> Good condition <input type="checkbox"/> Needs Maintenance Remarks _____ _____	
2.	<b>Gas Collection Wells, Manifolds and Piping</b> <input type="checkbox"/> Good condition <input type="checkbox"/> Needs Maintenance Remarks _____ _____	
3.	<b>Gas Monitoring Facilities</b> ( <i>e.g.</i> , gas monitoring of adjacent homes or buildings) <input type="checkbox"/> Good condition <input type="checkbox"/> Needs Maintenance <input type="checkbox"/> N/A Remarks _____ _____	
<b>F. Cover Drainage Layer</b> <input type="checkbox"/> Applicable <input type="checkbox"/> N/A		
1.	<b>Outlet Pipes Inspected</b> <input type="checkbox"/> Functioning <input type="checkbox"/> N/A Remarks _____ _____	
2.	<b>Outlet Rock Inspected</b> <input type="checkbox"/> Functioning <input type="checkbox"/> N/A Remarks _____ _____	
<b>G. Detention/Sedimentation Ponds</b> <input type="checkbox"/> Applicable <input type="checkbox"/> N/A		
1.	<b>Siltation</b> Areal extent _____      Depth _____ <input type="checkbox"/> N/A <input type="checkbox"/> Siltation not evident Remarks _____ _____	
2.	<b>Erosion</b> Areal extent _____      Depth _____ <input type="checkbox"/> Erosion not evident Remarks _____ _____	
3.	<b>Outlet Works</b> <input type="checkbox"/> Functioning <input type="checkbox"/> N/A Remarks _____ _____	
4.	<b>Dam</b> <input type="checkbox"/> Functioning <input type="checkbox"/> N/A Remarks _____ _____	

<b>H. Retaining Walls</b>		<input type="checkbox"/> Applicable	<input type="checkbox"/> N/A
1.	<b>Deformations</b>	<input type="checkbox"/> Location shown on site map	<input type="checkbox"/> Deformation not evident
	Horizontal displacement_____	Vertical displacement_____	
	Rotational displacement_____		
	Remarks_____		
	_____		
2.	<b>Degradation</b>	<input type="checkbox"/> Location shown on site map	<input type="checkbox"/> Degradation not evident
	Remarks_____		
	_____		
<b>I. Perimeter Ditches/Off-Site Discharge</b>		<input type="checkbox"/> Applicable	<input type="checkbox"/> N/A
1.	<b>Siltation</b>	<input type="checkbox"/> Location shown on site map	<input type="checkbox"/> Siltation not evident
	Areal extent_____	Depth_____	
	Remarks_____		
	_____		
2.	<b>Vegetative Growth</b>	<input type="checkbox"/> Location shown on site map	<input type="checkbox"/> N/A
	<input type="checkbox"/> Vegetation does not impede flow		
	Areal extent_____	Type_____	
	Remarks_____		
	_____		
3.	<b>Erosion</b>	<input type="checkbox"/> Location shown on site map	<input type="checkbox"/> Erosion not evident
	Areal extent_____	Depth_____	
	Remarks_____		
	_____		
4.	<b>Discharge Structure</b>	<input type="checkbox"/> Functioning	<input type="checkbox"/> N/A
	Remarks_____		
	_____		
<b>VIII. VERTICAL BARRIER WALLS</b>		<input type="checkbox"/> Applicable	<input type="checkbox"/> N/A
1.	<b>Settlement</b>	<input type="checkbox"/> Location shown on site map	<input type="checkbox"/> Settlement not evident
	Areal extent_____	Depth_____	
	Remarks_____		
	_____		
2.	<b>Performance Monitoring</b>	Type of monitoring_____	
	<input type="checkbox"/> Performance not monitored		
	Frequency_____	<input type="checkbox"/> Evidence of breaching	
	Head differential_____		
	Remarks_____		
	_____		

<b>IX. GROUNDWATER/SURFACE WATER REMEDIES</b> <input type="checkbox"/> Applicable <input type="checkbox"/> N/A	
<b>A. Groundwater Extraction Wells, Pumps, and Pipelines</b> <input type="checkbox"/> Applicable <input type="checkbox"/> N/A	
1.	<b>Pumps, Wellhead Plumbing, and Electrical</b> <input type="checkbox"/> Good condition <input type="checkbox"/> All required wells properly operating <input type="checkbox"/> Needs Maintenance <input type="checkbox"/> N/A Remarks _____ _____ _____
2.	<b>Extraction System Pipelines, Valves, Valve Boxes, and Other Appurtenances</b> <input type="checkbox"/> Good condition <input type="checkbox"/> Needs Maintenance Remarks _____ _____
3.	<b>Spare Parts and Equipment</b> <input type="checkbox"/> Readily available <input type="checkbox"/> Good condition <input type="checkbox"/> Requires upgrade <input type="checkbox"/> Needs to be provided Remarks _____ _____
<b>B. Surface Water Collection Structures, Pumps, and Pipelines</b> <input type="checkbox"/> Applicable <input type="checkbox"/> N/A	
1.	<b>Collection Structures, Pumps, and Electrical</b> <input type="checkbox"/> Good condition <input type="checkbox"/> Needs Maintenance Remarks _____ _____
2.	<b>Surface Water Collection System Pipelines, Valves, Valve Boxes, and Other Appurtenances</b> <input type="checkbox"/> Good condition <input type="checkbox"/> Needs Maintenance Remarks _____ _____
3.	<b>Spare Parts and Equipment</b> <input type="checkbox"/> Readily available <input type="checkbox"/> Good condition <input type="checkbox"/> Requires upgrade <input type="checkbox"/> Needs to be provided Remarks _____ _____

<b>C. Treatment System</b>		<input type="checkbox"/> Applicable	<input type="checkbox"/> N/A
1.	<b>Treatment Train</b> (Check components that apply)	<input type="checkbox"/> Metals removal	<input type="checkbox"/> Oil/water separation
		<input type="checkbox"/> Air stripping	<input type="checkbox"/> Carbon adsorbers
		<input type="checkbox"/> Filters	<input type="checkbox"/> Bioremediation
		<input type="checkbox"/> Additive (e.g., chelation agent, flocculent) _____	
		<input type="checkbox"/> Others _____	
		<input type="checkbox"/> Good condition	<input type="checkbox"/> Needs Maintenance
		<input type="checkbox"/> Sampling ports properly marked and functional	
		<input type="checkbox"/> Sampling/maintenance log displayed and up to date	
		<input type="checkbox"/> Equipment properly identified	
		<input type="checkbox"/> Quantity of groundwater treated annually _____	
		<input type="checkbox"/> Quantity of surface water treated annually _____	
	Remarks	_____	
	_____	_____	
2.	<b>Electrical Enclosures and Panels</b> (properly rated and functional)	<input type="checkbox"/> N/A	<input type="checkbox"/> Good condition
		<input type="checkbox"/> Needs Maintenance	
	Remarks	_____	
	_____	_____	
3.	<b>Tanks, Vaults, Storage Vessels</b>	<input type="checkbox"/> N/A	<input type="checkbox"/> Good condition
		<input type="checkbox"/> Proper secondary containment	<input type="checkbox"/> Needs Maintenance
	Remarks	_____	
	_____	_____	
4.	<b>Discharge Structure and Appurtenances</b>	<input type="checkbox"/> N/A	<input type="checkbox"/> Good condition
		<input type="checkbox"/> Needs Maintenance	
	Remarks	_____	
	_____	_____	
5.	<b>Treatment Building(s)</b>	<input type="checkbox"/> N/A	<input type="checkbox"/> Good condition (esp. roof and doorways)
		<input type="checkbox"/> Needs repair	
		<input type="checkbox"/> Chemicals and equipment properly stored	
	Remarks	_____	
	_____	_____	
6.	<b>Monitoring Wells</b> (pump and treatment remedy)	<input type="checkbox"/> Properly secured/locked	<input type="checkbox"/> Functioning
		<input type="checkbox"/> Routinely sampled	<input type="checkbox"/> Good condition
		<input type="checkbox"/> All required wells located	<input type="checkbox"/> Needs Maintenance
		<input type="checkbox"/> N/A	
	Remarks	_____	
	_____	_____	
<b>D. Monitoring Data</b>			
1.	Monitoring Data	<input type="checkbox"/> Is routinely submitted on time	<input type="checkbox"/> Is of acceptable quality
2.	Monitoring data suggests:	<input type="checkbox"/> Groundwater plume is effectively contained	<input type="checkbox"/> Contaminant concentrations are declining



**C. Early Indicators of Potential Remedy Problems**

Describe issues and observations such as unexpected changes in the cost or scope of O&M or a high frequency of unscheduled repairs, that suggest that the protectiveness of the remedy may be compromised in the future.

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**D. Opportunities for Optimization**

Describe possible opportunities for optimization in monitoring tasks or the operation of the remedy.

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**APPENDIX B**  
**FIVE-YEAR REVIEW SUMMARY FORM**

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## Five-Year Review Summary Form

### SITE IDENTIFICATION

**Site Name:**

**EPA ID:** [Click here to enter text.](#)

**Region:** Choose an item.

**State:** Enter state abbreviation.

**City/County:** Enter City/County

### SITE STATUS

**NPL Status:** Choose an item.

**Multiple OUs?**

Choose an item.

**Has the site achieved construction completion?**

Choose an item.

### REVIEW STATUS

**Lead agency:** Choose an item.

**If "Other Federal Agency" was selected above, enter Agency name:** [Click here to enter text.](#)

**Author name (Federal or State Project Manager):** [Click here to enter text.](#)

**Author affiliation:** [Click here to enter text.](#)

**Review period:** [Click here to enter start date.](#) - [Click here to enter end date.](#)

**Date of site inspection:**

**Type of review:** Choose an item.

**Review number:** Choose an item.

**Triggering action date:** [Click here to enter date.](#)

**Due date (*five years after triggering action date*):** [Click here to enter date.](#)



### Five-Year Review Summary Form (continued)

The table below is for the purpose of the summary form and associated data entry and does not replace the two tables required in Section VIII and IX by the FYR guidance. Instead, data entry in this section should match information in Section VII and IX of the FYR report.

#### Issues/Recommendations

<b>OU(s) without Issues/Recommendations Identified in the Five-Year Review:</b>
Click here to enter text.

#### Issues and Recommendations Identified in the Five-Year Review:

<b>OU(s):</b> Click here to enter text.	<b>Issue Category:</b> Choose an item.			
	<b>Issue:</b> Click here to enter text.			
	<b>Recommendation:</b> Click here to enter text.			
<b>Affect Current Protectiveness</b>	<b>Affect Future Protectiveness</b>	<b>Implementing Party</b>	<b>Oversight Party</b>	<b>Milestone Date</b>
Choose an item.	Choose an item.	Choose an item.	Choose an item.	Enter date.

To add additional issues/recommendations here, copy and paste the above table as many times as necessary to document all issues/recommendations identified in the FYR report.

#### Protectiveness Statement(s)

*Include each individual OU protectiveness determination and statement. If you need to add more protectiveness determinations and statements for additional OUs, copy and paste the table below as many times as necessary to complete for each OU evaluated in the FYR report.*

<b>Operable Unit:</b> Click here to enter text.	<b>Protectiveness Determination:</b> Choose an item.	<b>Addendum Due Date (if applicable):</b> Click here to enter date.
<b>Protectiveness Statement:</b> Click here to enter text.		

#### Sitewide Protectiveness Statement (if applicable)

<i>For sites that have achieved construction completion, enter a sitewide protectiveness determination and statement.</i>	
<b>Protectiveness Determination:</b> Choose an item.	<b>Addendum Due Date (if applicable):</b> Click here to enter date.
<b>Protectiveness Statement:</b> Click here to enter text.	