

QUARTERLY STATUS REPORT: APRIL - JUNE 2016
SWANNANOA DJJDP PROPERTY
SWANNANOA, BUNCOMBE COUNTY, NORTH CAROLINA
IHSB INVENTORY NO. NONCD0002801

PREPARED BY: PETER DRESSEL, PIEDMONT GEOLOGIC
JUNE 20, 2016

Activities Completed During the Reporting Period (January-March 2016)

- Compiled the Proposed Remedial Action Plan, dated April 30, 2016.
- Completed the Remedial Action Plan public notice process (ended June 15, 2016).
- Submitted the following to IHSB:
 - Work Phase Completion Form No. WPC-III.
 - Document Certification Form DC-I.
 - Document Certification Form DC-II.

Activities Expected to be Completed During the Next Reporting Period (July-September 2016)

- Finalization and filing of Declaration of Perpetual Land Use Restriction and Notice of Inactive Hazardous Substance or Waste Disposal Site.
- Development of bidding specifications for site remediation.

Project Schedule

Site work is progressing in a manner to achieve the mandatory work phase completion deadlines set out in 15A NCAC 13C .0302(h).

REC PROGRAM DOCUMENT CERTIFICATION FORM - PAGE 1 OF 2

IHSB SITE NAME SWANNANOA DTDP PROPERTY - NONCD 0002801

DATE & NAME OF DOCUMENT 6-20-16: WORK PHASE COMPLETION FORM WPC III / QUARTERLY STATUS REPORT:

TYPE OF SUBMITTAL (circle all that apply): Report Work plan, Work Phase Comp. Statement Schedule Change APRIL-JUNE 2016

REMEDIATING PARTY DOCUMENT CERTIFICATION STATEMENT (.0306(B)(2))

"I certify under penalty of law that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material and information contained herein is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for willfully submitting false, inaccurate or incomplete information."

William Sessions
Name of Remediating Party

W.D. Sessions 22 JUL 2016
Signature of Remediating Party Date

NOTARIZATION

Nc (Enter State)

GRAVILLCOUNTY

I, GIM R YANCEY, a Notary Public of said County and State, do hereby certify that WILLIAM D. SESSIONS did personally appear and sign before me this day, produced proper identification in the form of DRIVERS LIC, was duly sworn or affirmed, and declared that, to the best of his or her knowledge and belief, after thorough investigation, the information contained in the above certification is true and accurate, and he or she then signed this Certification in my presence.

WITNESS my hand and official seal this 22 day of June 2016

[Signature] (OFFICIAL SEAL)

My commission expires: 6-30-19

IHSB SITE NAME SWANANOA DTIDP PROPERTY - NONCD 0002801
DATE & NAME OF DOCUMENT 6-20-16: WORK PHASE COMPLETION FORM WPC-111 / QUARTERLY STATUS REPORT: APRIL -
TYPE OF SUBMITTAL (circle all that apply): Report Work plan, Work Phase Comp. Statement, Schedule Change JUNE 2016

REGISTERED SITE MANAGER CERTIFICATION OF SIGNATURES

As the Registered Environmental Consultant for the Site for which this filing is made, I certify that the signatures included herewith are genuine and authentic original handwritten signatures and/or true, accurate, and complete copies of the genuine and authentic original handwritten signatures of the persons who purport to sign for this filing. I further certify that I have collected through reliable means the originals and/or copies of said signatures from the persons authorized to sign for this filing who, in fact, signed the originals thereof. Those persons and I understand and agree that any copies of signatures have the same legally binding effect as original handwritten signatures, and I certify that any person for whom I am submitting a copy of their signature has provided me with their express consent to submit said copy. Additionally, I certify that I am authorized to attest to the genuineness and authenticity of the signatures, both originals and any copies, being submitted herewith and that by signing below, I do in fact attest to the genuineness and authenticity of all the signatures, both originals and copies, being submitted for this filing.

PETER J. DRESSEL
Name of Registered Site Manager

Peter J. Dressel
Signature of Registered Site Manager

6-23-2016
Date

REGISTERED SITE MANAGER DOCUMENT CERTIFICATION STATEMENT (.0306(b)(1))

"I certify under penalty of law that I am personally familiar with the information contained in this submittal, including any and all supporting documents accompanying this certification, and that the material and information contained herein is, to the best of my knowledge and belief, true, accurate and complete and complies with the Inactive Hazardous Sites Response Act N.C.G.S. 130A-310, et seq, and the remedial action program Rules 15A NCAC 13C .0300. I am aware that there are significant penalties for willfully submitting false, inaccurate or incomplete information."

PETER J. DRESSEL
Name of Registered Site Manager

Peter J. Dressel
Signature of Registered Site Manager

6-23-2016
Date

NOTARIZATION

North Carolina (Enter State)

Wake COUNTY

I, PAUL F. ROACHE, a Notary Public of said County and State, do hereby certify that PETER J. DRESSEL did personally appear and sign before me this day, produced proper identification in the form of NCIDL 3548757, was duly sworn or affirmed, and declared that, he or she is the duly authorized environmental consultant of the remediating party of the property referenced above and that, to the best of his or her knowledge and belief, after thorough investigation, the information contained in the above certifications is true and accurate, and he or she then signed these Certifications in my presence.

WITNESS my hand and official seal this 23rd day of June, 2016.

Paul F. Roache
Notary Public (signature)

(OFFICIAL SEAL)

My commission expires: Sept. 12, 2016

