

Groundwater Monitoring Report Cover Sheet

This cover sheet must be included with all groundwater monitoring reports submitted to the LUST/UST program; It does **not** replace the Groundwater Monitoring Report. Reports submitted with missing or incomplete coversheets will not be processed and may result in non-compliance with RI DEM regulations.

DEM Project Manager:			Groundwater	Groundwater Monitoring Report Submittal Date:			
			Monitoring Pe	eriod: From	tc)	
Prepared For:							
RIDEM LUST #:	EM LUST #: RI DEM UST #:			arty:			
Request for Reimbursement# (if applicable):			E-mail:	mail:			
Facility Name:			Phone Numb	er			
Facility Address:			1	Responsible Party Mailing Address:			
Is this site current	ly regulated by other s) and Case/Permit #(s		Yes No				
Prepared By:							
Company Name:			Contact Name:				
Company Address:			E-mail: Phone Number				
Site History & Chara	acteristics:						
USTs Removed on:		Closure Assessm	nent Submitted on:	S	IR Submitted o	on:	
CAP Activities Began	n on: CAP Activities Ended on: CAP Activities Ongoing?				ing?		
Reports Submitted in th past 12 Months & Dates							
Groundwater Monito	ring Began on:	(Groundwater Classific	ation: GAA	GA GB		
Are any groundwater	wells within 500 feet	used as a potable v	vater source? Yes	No If so	o, how many?		
Surface Water Present	on the Property:	Yes No Sur	face Water Present wi	thin 1,000 feet of	the Property:	Yes No	
Date Last Sampled:	Were	contaminants dete	cted in surface water i	n the past 12 moi	nths? Yes	No Not Sampled	
Potentially Sensitive	Receptors:						

Groundwater Monitoring:

Depth to groundwater range observed during this monitoring period: to ft						
Sampling Frequency Required by DEM: Monthly Quarterly Bi-Annually Annually						
Sampling Frequency Conducted This Period: Monthly Quarterly Bi-Annually Annually						
If these differ, explain why:						
Were there any changes to the quantity of wells sampled during this period? Yes No						
If so, explain why:						
Is there any evidence that off-site migration of contaminants has occurred in the past 12 months? Yes No						
# of Monitoring Wells Present: # of Monitoring Wells Sampled: # of Monitoring Wells with Exceedances:						
Presence of Free Product in Wells in the past 12 months? Yes No						
# of Private/Public Wells Present within 500 ft : # of Private/Public Wells Sampled: # Impacted:						
How often are Public/Private Wells Sampled? Date Last Sampled:						
Does this monitoring report contain recommendations for significant changes to the monitoring plan? Yes No If so, on what page are these recommendations identified?						

Administrative Compliance:

This section is intended to help users review their submissions and ensure all required components of the Groundwater Monitoring Report are included. As a reminder, incomplete submissions will be returned unprocessed and may result in noncompliance determinations.

This Report contains the following Required items:

Sample Chain of Custody Form Laboratory Analytical Output showing MDL, RDL, % recovery of surrogates, and dilution rates

Historic Groundwater Gauging Results Table

Current Groundwater Gauging Results Table

Any Concentrations which exceed Regulatory guidelines are highlighted or in bold text

All concentration units listed as ppb or μ g/L

Any laboratory value which is below the method detection limit is listed as BDL (< detection limit value)

Font size on all tables and figures is 10 Times New Roman or Equivalent

Site Drawing Contain:

□ >50:1 Scale

Groundwater Contours

Contaminant Concentrations

If the report is missing any of the required items, explain why: