



Brownfields Data Management Tracking Sheet

Assign Site Number <input type="checkbox"/>	Request Date 11/15/2016
Make File Folders <input type="checkbox"/>	Requested By Robertson
Make ACS Entry <input type="checkbox"/>	
Enforcement Check <input type="checkbox"/>	

Site Information

Site Name	Sherman Park - Parcel A		
a/k/a/			
Street Address	400 W Sherman Dr PC 3324 E Michigan		
City	Indpls	County	Marion
BF Site #	4071003	Zip	46201
Applicant/Requestor	City of Indpls-Dept of Metropolitan Development		
Street Address	200 E Washington		
City	Indpls		
County	Marion	Zip	46204
Contact Name	Laura Riga	Phone	()
Project Manager	Concannon		

Date EC Requested:	Due By:	NO	YES
LUST	11-15-16	11-29-16	
VRP			11-17
Site Investigation	D.W.		11-16
State Cleanup			11-15
IRATS database, Hazardous Waste Compliance			11-15
Land Enforcement		11-16	
Emergency Response		11-17	
Hazardous Waste			11-15
IDNR (sensitive environments)	F.C.	11-17	
UST Section			11-15
UST Section			11-17
Air enforcement sections		11-16	

Additional Information

AT 15828

CL Request	x	Sue-please upload to VFC and under Folder	2016 Comfort Ltr Parcel A
SSL Request			
NFA Request			
Funding RLF			
Funding Other			
Pet Determination			
EPA Haz Substance			
EPA Petroleum			
BF Determination			

req 80349-107
 req 80349-108
 req 80349-109

INFORMATION REQUEST - ENFORCEMENT CHECK
CONFIDENTIAL INFORMATION - NOT FOR PUBLIC VIEW

Brownfields Program

Project Manager : Tracy Concaannon

Please be advised that a request for assistance has been received for the following site/applicant:

SITE NAME (S):	Sherman Park - Parcel A
STREET ADDRESS:	600 N Sherman Dr or 3324 E Michigan Indianapolis (Marion) 46201
SITE NUMBER:	4071003
USTPA ID #:	

Your response is needed no later than **November 29, 2016** in order for us to meet our response deadline for determining the site/applicant eligibility. Not meeting the deadline will qualify the applicant by default.

YOUR NAME: **Janet Wolfman**
 YOUR PROGRAM: **Site Investigation**

Do you have any knowledge regarding this site or applicant currently or formerly within your program?
 (Please check by both site name AND address.) YES NO

(If no, stop here, you are done. If yes, please continue with the following.)

Please advise me of any State or Federal involvement with this site/applicant by checking any and all that apply and filling in shaded areas as needed:

<input type="checkbox"/>	Cost recovery (specify: _____)
<input type="checkbox"/>	Citizen(s) suit pending _____
<input type="checkbox"/>	Known Potentially Responsible Parties - (specify: _____)
<input type="checkbox"/>	Enforcement/corrective action is pending/required (specify: _____)
<input type="checkbox"/>	Sensitive species/environments at site (specify: _____)
<input type="checkbox"/>	Site conditions constitute an imminent and substantial threat to public health and/or environment (specify: _____)
<input type="checkbox"/>	Closure (specify: _____)
<input type="checkbox"/>	Permitted/regulator facility (specify: _____)
<input type="checkbox"/>	Regulated UST(s) _____
<input type="checkbox"/>	LUST site (incident #/priority level): _____
<input type="checkbox"/>	Site listed on Commission's Bulletin _____
<input type="checkbox"/>	Site listed in CERCLIS (specify: NO) _____
<input type="checkbox"/>	VRP applicant/participant (specify: _____)
<input type="checkbox"/>	Other (specify: _____)

Additional information/comments (including project manager): **NO ADDRESS IN CERCLIS IS MATCHED WITH SHERMAN OR MICHIGAN STREET ADDRESSES, BUT THERE WAS A SITE IN CERCLIS (NTR&P) AND IN THE NPL THAT WAS WITHIN A COUPLE OF BLOCKS (1/4 MILE) WEST OF THE SHERMAN PARK COMPLEX (PARCELS A, B, D, E, F). ADDITIONALLY, STATE CLEANUP DEALT WITH A SITE AT 600 N. SHERMAN DR. IN AUGUST OF 2003. BUT THERE ARE NO RECORD NOTES ON THAT ADDRESS.**

INFORMATION REQUEST - ENFORCEMENT CHECK
CONFIDENTIAL INFORMATION - NOT FOR PUBLIC VIEW

Brownfields Program

Project Manager : Tracy Conerman

Please be advised that a request for assistance has been received for the following site/applicant:

SITE NAME (S):	Sherman Park - Parcel A
SITE ADDRESS:	600 N Sherman Dr or 3324 E Michigan Indianapolis (Marion) 46201
SITE NUMBER:	4071003
US EPA ID #:	IND006932305 and IN190010488

Your response is needed no later than November 29, 2016 in order for us to meet our response deadline for determining the site/applicant eligibility. Not meeting the deadline will qualify the applicant by default.

YOUR NAME: Yanliia Sharon
 YOUR PROGRAM: Regulatory Reporting Section (hazardous waste program)

Do you have any knowledge regarding this site or applicant currently or formerly within your program?
 (Please check by both site name AND address.) YES NO

(If no, stop here, you are done. If yes, please continue with the following.)

Please advise me of any State or Federal involvement with this site/applicant by checking any and all that apply and filling in shaded areas as needed:

<input type="checkbox"/>	Cost recovery (specify:	
<input type="checkbox"/>	Citizen(s) suit pending	
<input type="checkbox"/>	Known Potentially Responsible Parties - (specify:	
<input type="checkbox"/>	Enforcement/corrective action is pending/required (specify:	
<input type="checkbox"/>	Sensitive species/environments at site (specify:	
<input type="checkbox"/>	Site conditions constitute an imminent and substantial threat to public health and/or environment (specify:	
<input type="checkbox"/>	Closure (specify:	
<input checked="" type="checkbox"/>	Permitted/regulated facility (specify:	This location has 2 EPA ID numbers assigned to it as two independent haz waste generators operated at the same time. Last agent that generated hazardous waste (IN006932305) was Thompson Consumer Electronics Inc. Last compliance evaluation inspection for hazardous waste was in 2004 and did not find any violations. Thompson had 2 enforcement cases for hazardous waste that both were returned to compliance by means of violation letter. No agreed orders adopted for hazardous waste for IND006932305 and IN190010488.
<input type="checkbox"/>	Regulated US1(s)	
<input type="checkbox"/>	LCST # (incident #/priority level:	
<input type="checkbox"/>	Site listed on Commissioner's Bulletin	
<input type="checkbox"/>	Site listed in CERCLIS (specify:	

INFORMATION REQUEST - ENFORCEMENT CHECK
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Brownfields Program Project Manager: Tracy Concurram

Please be advised that a request for assistance has been received for the following site/applicant:

SITE NAME (S):	Sherman Park - Parcel A
SITE ADDRESS:	600 N Sherman Dr or 3321 E Michigan Indianapolis (Marion) 46201
SITE NUMBER:	4071003
US EPA ID #:	

Your response is needed no later than **November 29, 2016** in order for us to meet our response deadline for determining the site/applicant eligibility. Not meeting the deadline will qualify the applicant by default.

YOUR NAME:
 YOUR PROGRAM:

Do you have any knowledge regarding this site or applicant currently or formerly within your program?
 (Please check by both site name AND address.) YES NO
 (If no, stop here, you are done. If yes, please continue with the following.)

Please advise me of any State or Federal involvement with this site/applicant by checking any and all that apply and filling in shaded areas as needed:

<input type="checkbox"/>	Cost recovery (specify: _____)
<input type="checkbox"/>	Citizen(s) suit pending _____
<input type="checkbox"/>	Known Potentially Responsible Parties - (specify: _____)
<input type="checkbox"/>	Enforcement/corrective action is pending/required (specify: _____)
<input type="checkbox"/>	Sensitive species/environments at site (specify: _____)
<input type="checkbox"/>	Site conditions constitute an imminent and substantial threat to public health and/or environment (specify: _____)
<input type="checkbox"/>	Closure (specify: _____)
<input type="checkbox"/>	Permitted/regulated facility (specify: _____)
<input type="checkbox"/>	Regulated UST(s) _____
<input type="checkbox"/>	LUST site (incident #/priority level: _____)
<input type="checkbox"/>	Site Listed on Commissioner's Bulletin _____
<input type="checkbox"/>	Site Listed in CTRCLIS (specify: _____)
<input type="checkbox"/>	VRP applicant/participant (specify: _____)
<input checked="" type="checkbox"/>	Other (specify: SGT Site #0000-00-022 PM Dawn Goveas Last shown activity shows this paid invoice for SCU Oversight 8/26/2016)

Additional information/comments (including project manager):

Overstreet, Sue

From: SICKELS, MIKE
Sent: Tuesday, November 15, 2016 2:52 PM
To: Overstreet, Sue
Subject: RE: Sherman Park - Parcel A

This address is listed in IRATS for Thompson Consumer Electronics, Inc. (f/k/a RCA). They are listed as a generator, "no longer generating hazardous waste", with the EPA ID No. IN0006932305. They are not listed in IRATS as "subject to corrective action". This listing will be the same for the Sherman Park – Parcel B information request, as this distinction was not part of the property when under control of RCA or Thompson.

From: Overstreet, Sue
Sent: Tuesday, November 15, 2016 1:19 PM
To: Beauchamp, Lavern; Walteman, Daniel; Hellmich, Ron; JAWORSKI, MARK; SICKELS, MIKE; JOHNSTON, NANCY; HOPKINS, NAWAL; Wheat, Rose; Bardes, Sandy; Stewart, Angela; RANDOLPH, TONYA; Sheron, Yulia
Subject: Sherman Park - Parcel A

Please complete and return by 11/29/2016.

Thanks

Sue Overstreet
Indiana Brownfields Program
sueoverstreet@ifa.in.gov
317-234-4293

INFORMATION REQUEST - ENFORCEMENT CHECK
CONFIDENTIAL INFORMATION - NOT FOR PUBLIC VIEW

Brownfields Program Project Manager: Tracy Conannon

Please be advised that a request for assistance has been received for the following site/applicant:

SITE NAME (S):	Sherman Park - Parcel A
SITE ADDRESS:	600 N Sherman Dr or 3324 E Michigan Indianapolis (Marion) 46201
SITE NUMBER:	4071003
US EPA ID #:	

Your response is needed no later than **November 29, 2016** in order for us to meet our response deadline for determining the site/applicant eligibility. Not meeting the deadline will qualify the applicant by default.

YOUR NAME: **Nawal Hopkins**
 YOUR PROGRAM: **DEM/UST Section**

Do you have any knowledge regarding this site or applicant currently or formerly within your program?
 (Please check by both site name AND address.) YES NO

(If no, stop here, you are done. If yes, please continue with the following.)

Please advise me of any State or Federal involvement with this site/applicant by checking any and all that apply and filling in shaded areas as needed:

- Cost recovery (specify: _____)
- Citizen(s) suit pending _____
- Known Potentially Responsible Parties - (specify: _____)
- Enforcement/corrective action is pending/required (specify: _____)
- Sensitive species/environments at site (specify: _____)
- Site conditions constitute an imminent and substantial threat to public health and/or environment (specify: _____)
- Closure (specify: _____)
- Permitted/regulated facility (specify: _____)
- Regulated UST(s) _____
- UST site (incident #/priority level: _____)
- Site listed on Commissioner's Bulletin _____
- Site listed in CERCLIS (specify: _____)
- VRF applicant/participant (specify: _____)
- Other (specify: _____)

Additional information/comments (including project manager):
 FTS 8005 - 1 - 8,000 gal Hazardous Petroleum (67-64-1) Permanently Out of Service (removed 12/6/99) - address in DL CERCLIS is 600 N. Sherman Dr. Indianapolis, IN 46201. (Thompson Consumer Electronics)

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Brownfields Program

Project Manager: Tracy Conneron

Please be advised that a request for assistance has been received for the following site/applicant:

SITE NAME (S):	Sherman Park - Parcel A
SITE ADDRESS:	600 N Sherman Dr or 3324 E Michigan Indianapolis (Indiana) 46201
SITE NUMBER:	4071003
US EPA ID #:	

Your response is needed no later than **November 29, 2016** in order for us to meet our response deadline for determining the site/applicant eligibility. Not meeting the deadline will qualify the applicant by default.

YOUR NAME: **Lonya Randolph**
 YOUR PROGRAM: **VRP**

Do you have any knowledge regarding this site or applicant currently or formerly within your program?

(Please check by both site name AND address.) YES NO
 (If no, stop here, you are done. If yes, please continue with the following.)

Please advise me of any State or Federal involvement with this site/applicant by checking any and all that apply and filling in shaded areas as needed:

- Cost recovery (specify: _____)
- Citizen(s) suit pending _____
- Known Potentially Responsible Parties - (specify: _____)
- Enforcement/corrective action is pending/required (specify: _____)
- Sensitive species/environments at site (specify: _____)
- Site conditions constitute an imminent and substantial threat to public health and/or environment (specify: _____)
- Closure (specify: _____)
- Permitted/regulated facility (specify: _____)
- Regulated UST(s) _____
- LUST site (incident #/priority level: _____)
- Site listed on Commissioner's Bulletin _____
- Site listed in CERCLIS (specify: _____)
- VRP applicant/participant (specify: **Site #601003; THAN Harmonis, address 3547 E Michigan, still have Doug Lam noted as PM, last noted in UL CERCLIS monitoring rpt was received**)
- Other (specify: **Site #6020801; Doug Lam is still noted as PM, received annual progress rpt 5/2/14**)

Additional information/comments (including project manager): _____

INFORMATION REQUEST - ENFORCEMENT CHECK
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Branch/Field Program:

Project Manager: Tracy Cencosauca

Please be advised that a request for assistance has been received for the following site/apPLICANT:

SITE NAME (S):	Sherran Park - Parcel A
SITE ADDRESS:	1600N Sherran Dr or 3324 E Michigan Indianapolis (Marion) 46201
SITE NUMBER:	4071003
US EPA ID #:	

Your response is needed no later than **November 29, 2016** in order for us to meet our response deadline for determining the site/apPLICANT eligibility. Not meeting the deadline will qualify the apPLICANT by default.

YOUR NAME: **Angela S. ...**
 YOUR PROGRAM: **USE Branch**

Do you have any knowledge regarding this site or apPLICANT existing or formerly within your program?

(Please check by both site name AND address.)

YES NO

(If no, stop here, you are done. If yes, please continue with the following.)

Please advise me of any State or Federal involvement with this site/apPLICANT by checking any and all that apply and filling in shaded areas as needed:

<input type="checkbox"/>	Cost recovery (specify: _____)
<input type="checkbox"/>	Citizen(s) suit pending _____
<input checked="" type="checkbox"/>	Known Potentially Responsible Parties - (specify: USE Branch)
<input type="checkbox"/>	Auto. enforcement action is pending/required (specify: _____)
<input type="checkbox"/>	Sensitive species/environmental site (specify: _____)
<input type="checkbox"/>	Site conditions constitute an imminent and substantial threat to public health and/or environment. (specify: _____)
<input checked="" type="checkbox"/>	Closure (specify: Location address: 600 N. Sherran, Parcel A, Indianapolis, IN 46201 USE ID: 2003 Site Name: Sherran Consumer Electronics Agency: Permanently Voluntary Phone: 317-246-1901 Class: Storage)
<input type="checkbox"/>	Manufacture/regulator facility (specify: _____)
<input type="checkbox"/>	Regulated US I(s) _____
<input type="checkbox"/>	USEF site (incident #/priority level: _____)
<input type="checkbox"/>	Site listed on Commissioner's Bulletin _____
<input type="checkbox"/>	Site listed in CERCLIS (specify: _____)
<input type="checkbox"/>	VRI applicant/party user (specify: _____)
<input type="checkbox"/>	Other (specify: Records not been found on the site name: Sherran Park)

Additional information/comments (including project manager): _____