



Minnesota Pollution Control Agency

520 Lafayette Road North  
St. Paul, MN 55155-4194

AHU! mark Koplitz

# Voluntary Brownfields Programs Enrollment Application Form

**Voluntary Investigation and Cleanup (VIC) and  
Petroleum Brownfields Program (PBP)**

612 296-9707

Please complete this form to enroll in either or both of the Minnesota Pollution Control Agency (MPCA) Voluntary Brownfields Programs (*Voluntary Investigation & Cleanup [VIC] and Petroleum Brownfields Program [PBP]*), pursuant to Minn. Stat. § 115B.17, subd. 14 (or the Land Recycling Act of 1992, as amended) and Minn. Stat. § 115C.03, subd. 9. For questions regarding the VIC Program, please call Patrice Jensen at 651-757-2465. For questions regarding the Petroleum Brownfields Program, please call Stacey Hendry-Van Patten at 651-757-2425. The MPCA can also be reached toll free at 1-800-657-3864.

**Mail the completed form to:** Stacey Hendry-Van Patten  
Minnesota Pollution Control Agency  
520 Lafayette Road North  
St. Paul, Minnesota 55155-4194

**\*Fields with an asterisk are mandatory. The application will not be processed if fields are incomplete.**

MPCA site ID number (if known): 3534

**\* Subject Property Information**

Preferred Site Name (≤ 4 words): Cafe Latte  
 Previous Site name (if known): Junction Food & Fuel  
 Address: 5493 Miller Trunk Hwy  
 City (or Township): Hermantown County: St Louis Zip: 55811  
 Public land survey coordinates: Qtr: \_\_\_\_\_ Section: \_\_\_\_\_ Twshp: \_\_\_\_\_ Range: \_\_\_\_\_  
 Approximate property size: \_\_\_\_\_ Phone: \_\_\_\_\_

**\* Applicant Information**

Name: Steve & Sue Pelto Title: CEO / President  
 Organization: MNT Heating & Cooling Phone: (218) 729-1585 Fax: (218) 729-1587  
 Address: 5501 Miller Trunk Hwy E-mail (optional): heatguy@questoffice.net  
 City: Hermantown State: MN Zip: 55811

**\* Please provide one of the following:**

State taxpayer ID#: 1200819 Federal taxpayer ID#: 41-1750297

**Other Parties to be Listed on the Letter(s) Requested Below**

Name: Deb Otto Title: Loan officer  
 Organization: Members Coop Credit Union Phone: 218-625-8825  
 Address: 215 N 40th Ave West E-mail (optional): debotta@membersccu.org  
 City: Duluth State: MN Zip: 55807

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**Current Property Owner** (complete if different from applicant)

Name: Jack Curtis Title: owner  
Organization: Curtis oil Phone: \_\_\_\_\_  
Address: 3113 Miller Trunk Hwy E-mail (optional): \_\_\_\_\_  
City: Duuth State: MN Zip: 55811

**Applicant's Consultant** (List the name of your current environmental consultant, if applicable.)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Organization: \_\_\_\_\_ E-mail (optional): \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Applicant's Attorney** (List the name of your current legal counsel, if applicable.)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Organization: \_\_\_\_\_ E-mail (optional): \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**\* Spatial Data Information Requirement** (VIC only)

Site location point description (select one):  Center of Site  Main/Front Door  Front Gate/Main Entrance  
Latitude/Easting/X coordinate: \_\_\_\_\_  
Longitude/Northing/Y coordinate: \_\_\_\_\_  
Collection method (select one):  GPS-Survey Quality  GPS-Receiver  Interpolation DOQ  
Collection date (enter into text box using format M/D/YYYY): \_\_\_\_\_  
Organization name of who collected spatial data: \_\_\_\_\_  
Organization type of who collected spatial data (select one):  
 City office  State office  Voluntary/Responsible party  
 County office  Indian tribe  
 Consultant  Developer

\*The *Spatial Data Requirements* document located on the MPCA Web site at: <http://www.pca.state.mn.us/programs/spatialdata.html> provides background information and a complete description of the spatial data.

\* **Known or Suspected Contaminant Type** (select all that apply)

- Petroleum only** (PBP) - complete Section A (submit one paper report copy and one copy on CD)
- Non-Petroleum only** (VIC) - complete Section B (submit one paper report copy and one copy on CD)
- Petroleum and Non-Petroleum (Both)** - complete Section's A and B  
(Note: you must submit two paper report copies and two copies on CD of all necessary reports)

**Section A- PBP Assistance/Assurances - Description of applicant's request** (select all that apply)

(See *Guidance Document 5-02 Petroleum Brownfields Program General Information for a detailed description of the following services.*)

- Expedited Review of a petroleum storage tank release site (e.g. leak site) or a petroleum non-tank source
- Technical review of a *DRAP* for a petroleum impacted property (**Note:** need 45 days for Grants)
- Liability Assurance Letters (Minn. Stat. § 115C.03, subd. 9C).
  - General liability Letter.
  - Tank Removal Verification Letter. MPCA ID# \_\_\_\_\_
  - Off-site Tank Release Determination Letter. Suspected source MPCA ID# \_\_\_\_\_
  - File Closure Confirmation Letter. MPCA ID# \_\_\_\_\_

**Section B- VIC Program Assistance/Assurances - Description of applicant's request** (select all that apply)

(See *Guidance Document #1 and #4 MPCA Voluntary Investigation and Cleanup for a detailed description of the following services.*)

- Technical review or third-party review only.
- No Association Determination or Retroactive No Association Determination.
  - For a **No Association Determination** request, please include a Proposed Actions Letter that includes a statement on any association with the property and releases at the property by the party(s) requesting the determination, and a list of the actions the party(s) intend/s to take at the site.
  - For a **Retroactive No Association Determination** request, please include:
    1. A Past Actions Letter that includes a statement on any past association with the property and releases at the property by the party(s) requesting the determination, and a list of the actions the party(s) took at the site; and
    2. An affidavit for each party requesting the determination, including a statement of the signing individual's relation to the party, and a statement that the party did not contribute or associate itself in any manner with the releases to be named in the determination.
- No Action or No Further Action Letter.
- No Action Agreement or Covenant Not to Sue.
- Off-Site Source Determination or Agreement under the Land Recycling Act (Minn. Stat. § 115B.177).
- Certificate of Completion under the Land Recycling Act (Minn. Stat. § 115B.175).

**Attachments to the Application Form**

Please list any reports, maps, or other attachments to this form (use separate page if necessary). **All documents submitted to the MPCA for use in this program are considered public unless otherwise classified by the Minnesota Data Practices Act. Requests to classify documents as non-public must be submitted to the MPCA in writing.**

**\* Certification**

The applicant or other person signing below (Agent):

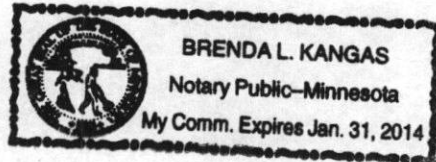
- certifies that the **applicant** has read and is familiar with the information on this form and all attached documents, and that the submitted information is true, accurate and complete to the best of the **applicant's** knowledge;
- hereby asks the MPCA Commissioner for assistance as requested by this application. The **applicant** understands this assistance may include the review of MPCA records and files, and review and approval of investigation plans and reports as well as response action plans and oversight of implementation actions;
- understands that the **applicant** must pay the MPCA Commissioner for the MPCA's costs of providing this assistance under Minn. Stat. § 115B.17 subd. 14. and/or Minn. Stat. § 115C.03 subd. 9. The current fee is \$150.00 per hour. The **applicant** understands that the MPCA Commissioner will send invoices for these costs and that failure to pay the MPCA's costs in a timely manner may result in the MPCA Commissioner taking appropriate administrative or legal action against the **applicant**; and,
- hereby agrees to pay the costs of the MPCA to provide services to the **applicant** as requested in this application. Furthermore, if the form is completed by an Agent of the **applicant**, that person certifies that he/she has the authority to submit this application on behalf of the **applicant** named herein.

Name (print): Steven W Pelto Title: CEO

Signature: [Handwritten Signature] Date: 5/7/09

Subscribed and sworn to before me this:

7 day of May, 2009  
Brenda L Kangas  
Notary Public



To request state assistance or report petroleum or hazardous materials spill call the Minnesota Duty Officer at 1-800-422-0798 or 651-649-5451 (24 hours a day).