



MICHIGAN DEPARTMENT OF ENVIRONMENT,
 GREAT LAKES, AND ENERGY
 Remediation and Redevelopment Division

For EGLE Use Only

Petition Number:

Date/Time Received:

RESPONSE ACTIVITY REVIEW PANEL PETITION COVER SHEET

Authority: Section 20114e and Section 21315(7) of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended (Act 451).

INSTRUCTIONS

Submit this completed form and all supporting documentation (including a copy of the submitted fee) to: Erica Bays, Michigan Department of Environment, Great Lakes, and Energy, Constitution Hall, 525 West Allegan Street, P.O. Box 30426, Lansing, MI 48909-7973.

The petitioner must sign this form and submit a fee (noted below) for the petition to be considered.

- A fee of \$3,500.00 (Response Activity Plans, No Further Action Reports, Request for Certificate of Completion or Documentation of Due Care Compliance under Part 201 of Act 451). **(ASC: Accounting Template 761RRDRARP201)**
- A fee of \$300.00 (for Final Assessment Reports, Closure Reports or Documentation of due Care Compliance under Part 213 of Act 451). **(ASC: Accounting Template 761RRDRARP213)**

Please submit a copy of this completed form with the fee payable to “State of Michigan”: Michigan Department of Environment, Great Lakes, and Energy, Cashier’s Office for EGLE, P.O. Box 30657, Lansing, Michigan 48909-8157

The petitioner must be the person who submitted the plan or report that is in dispute. For questions, please contact Erica Bays, Compliance and Enforcement Section, Remediation and Redevelopment Division, EGLE, P.O. Box 30426, Lansing, Michigan 48909; or 269-350-0080; or BaysE@Michigan.gov.

The petitioner must be the person who submitted the plan or report that is in dispute. The issue(s) in dispute, the relevant facts upon which the dispute is based, factual data, analysis, opinion, and any supporting documentation that the petitioner wishes to be considered must be attached to this form.

PLAN OR REPORT FOR WHICH PETITION IS BEING SUBMITTED

(Example: April 1, 2011, Remedial Investigation Plan or April 7, 2011, No Further Action Report)

SITE INFORMATION

Facility Name: _____

Facility Address: _____

City: _____ State: _____ ZIP Code: _____

CONTACT INFORMATION

Petitioner Name: _____

Contact Person: _____

Contact Phone Number: _____

Contact Email Address: _____

Relationship of Contact Person to Petitioner: _____

PETITIONER SIGNATURE

The undersigned requests an appeal of the decision made by EGLE regarding a technical or scientific provision of the noted document as described in the backup documentation.

Signature of Petitioner

Printed Name of Petitioner

Date

If you need this information in an alternate format, contact EGLE-Accessibility@Michigan.gov or call 800-662-9278.

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This form and its contents are subject to the Freedom of Information Act and may be released to the public.