

CP-00682-1.01-10/31/88



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION IV

345 COURTLAND STREET  
ATLANTA, GEORGIA 30365

OCT 31 1988

REF: 4WD-SISB/VW

Commander  
Code 115  
Attn: Ms. Nina Johnson  
Atlantic Division  
Naval Engineering Facility Command  
Norfolk, VA 23511-6287

Re: CERCLA Preliminary Assessment  
MCALF Bouge, NC

Dear Commander:

Enclosed please find the Preliminary Assessment (PA) form 2070-2 submitted to and approved by the Environmental Protection Agency (EPA), Region IV for the Crash Crew Training Area (CCTA) Site located on the Marine Corps Auxiliary Landing Field (MCALF) Bouge, North Carolina. Site Inspection (SI) findings for sites having similar waste disposal histories as the CCTA Site have indicated that unlined fire training areas pose a potential for release of hazardous constituents, thereby creating a threat to human health and the environment. For this reason, EPA concurs with the further action recommendation for a SI at the CCTA Site. If you have any further questions concerning this matter, please contact Victor Weeks of the Federal Facilities Unit at (404) 347-5059.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "H. Kirk Lucius".

H. Kirk Lucius, Chief  
Site Investigation and Support Branch  
Waste Management Division

Enclosure

<b>POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION AND PRELIMINARY ASSESSMENT</b>		REGION _____	SITE NUMBER (to be assigned by HQ) _____
NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.			
GEN. Assessor: NC7170090008 CARTERET USMC/CRASH CREW BURN PIT MCALF BUGUE HERBIG, REBECCA, ENV AFF* NC 28557 9194663631		Section III through X as completely as possible before Section II (Preliminary Waste Log File and submit a copy to: U.S. Environmental Protection Agency, EN-335, 401 M St., SW; Washington, DC 20460.	
(for other identifier) _____		E. ZIP CODE _____ F. COUNTY NAME _____	
2. TELEPHONE NUMBER _____		2. TELEPHONE NUMBER _____	
<b>H. TYPE OF OWNERSHIP</b> <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN			
"103-C NOTIFICATION" DATE: 8/10/89 BILL MEYER OR TOM KAROSKI PHONE: 919-733-2178		K. DATE IDENTIFIED (mo., day, & yr.) _____ 2. TELEPHONE NUMBER _____	
<b>II. PRELIMINARY ASSESSMENT (complete this section last)</b>			
<b>A. APPARENT SERIOUSNESS OF PROBLEM</b> <input type="checkbox"/> 1. HIGH <input checked="" type="checkbox"/> 2. MEDIUM <input type="checkbox"/> 3. LOW <input type="checkbox"/> 4. NONE <input type="checkbox"/> 5. UNKNOWN			
<b>B. RECOMMENDATION</b> <input type="checkbox"/> 1. NO ACTION NEEDED (no hazard) <input type="checkbox"/> 2. IMMEDIATE SITE INSPECTION NEEDED a. TENTATIVELY SCHEDULED FOR: _____ b. WILL BE PERFORMED BY: _____ <input checked="" type="checkbox"/> 3. SITE INSPECTION NEEDED a. TENTATIVELY SCHEDULED FOR: _____ b. WILL BE PERFORMED BY: _____ <input type="checkbox"/> 4. SITE INSPECTION NEEDED (low priority)			
<b>C. PREPARER INFORMATION</b> 1. NAME _____    2. TELEPHONE NUMBER _____    3. DATE (mo., day, & yr.) 1/26/83			
<b>III. SITE INFORMATION</b>			
<b>A. SITE STATUS</b> <input type="checkbox"/> 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if intermittently.) <input type="checkbox"/> 2. INACTIVE (Those sites which no longer receive wastes.) <input type="checkbox"/> 3. OTHER (specify: _____) (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)			
<b>B. IS GENERATOR ON SITE?</b> <input type="checkbox"/> 1. NO <input type="checkbox"/> 2. YES (specify generator's four-digit SIC Code): _____			
<b>C. AREA OF SITE (in acres)</b> _____		<b>D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES</b> 1. LATITUDE (deg.-min.-sec.) _____ 2. LONGITUDE (deg.-min.-sec.) _____	
<b>E. ARE THERE BUILDINGS ON THE SITE?</b> <input type="checkbox"/> 1. NO <input type="checkbox"/> 2. YES (specify): _____			

Site Inspection Needed