

Annual Report Questions

Starred (*) entries indicate must be filled in.

- 1) Has a site investigation started? * (if no, select no and go to question 3) Yes / No
A) If yes, when? (MM/YY) ___ / ___
- 2) Has the site investigation been completed? Yes / No
A) If yes, when? (MM/YY) ___ / ___
B) If yes, has a letter stating that the site investigation is complete, been received from the State of Wisconsin? Yes / No
- 3) Have clean-up activities started? * (If no, select no and go to question 5) Yes / No
A) If yes, when? (MM/YY) ___ / ___
- 4) Have clean-up activities been completed? Yes / No
A) If yes, when? (MM/YY) ___ / ___
- 5) Has case closure for this site been requested? * Yes / No
A) If yes, when? (MM/YY) ___ / ___
B) If no, estimate the year this site will be closed? (YYYY) _____
- 6) Estimate the additional costs (excluding interest) necessary to close this site from this day forward: * \$ _____
- 7) Submitted by (first and last name): * _____
- 8) Submitter Type (select one): * Owner/RP/Claimant <or> Consultant
- 9) Telephone Number: * _____
- 10) E-mail Address: _____