Formerly Utilized Sites Remedial Action Program (FUSRAP)

## ADMINISTRATIVE RECORD

for Niagara Falls Storage Site



## STATEMENT OF CERTIFICATION: NIAGARA FALLS STORAGE SITE VICINITY PROPERTY ASSOCIATED WITH THE FORMER MED/AEC OPERATIONS

The U.S. Department of Energy, Oak Ridge Operations Office, Former Sites Restoration Division, has reviewed and analyzed the radiological data obtained following remedial action at Niagara Falls Storage Site vicinity properties that were contaminated by material similar to that stored at the former Lake Ontario Ordnance Works in Lewiston, New York. Based on this analysis of all data collected, the Department of Energy (DOE) certifies that the following property is in compliance with DOE decontamination criteria and standards.

Property owned by the People of the State of New York, including:

Areas located at the junction of Highways 18 and 104, referred to as Anomaly AA (no deed reference).

This certification of compliance provides assurance that future use of the property will result in no radiological exposure above applicable guidelines established to protect members of the general public or site occupants.

By:

L. K. Price, Director

Former Sites Restoration Division

Oak Ridge Operations Office

U.S. Department of Energy

Date: 2/26/9/

3. Article Addressed to: State of New York Department of Transportation Resident Engineer 500 West Street Lockport, New York 14094  5. Signature 14 ddressee)  8. Addressee's Address (Only if requand fee is paid)	Complete items 1 and/or 2 for additional services.  Complete items 3, and 4a & b.  Print your name and address on the reverse of this form so the return this card to you.  Attach this form to the front of the mailpiece, or on the back is does not permit.  Write "Return Receipt Requested" on the mailpiece below the artis.  The Return Receipt Fee will provide you the signature of the personal care in the pe	1. Addressee's Address icle number. 2. Restricted Delivery
State of New York Department of Transportation Resident Engineer 500 West Street Lockport, New York 14094  5. Signature (Addressee)  8. Addressee's Address (Only if requand fee is paid)	to and the date of delivery.	Consult postmaster for fee.
and fee is paid)	Department of Transportation Resident Engineer 500 West Street	4b. Service Type Registered Insured Cortified COD Express Mail Return Receipt fo
	6. Signature (Agent)	

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL (See Reverse)

	Sent to			
į	State of New York			
	Street and No. 500 West Street			
	P.O., State and ZIP Code Lockport, NY 14094			
	Postage	\$		
	Certified Fee			
	Special Delivery Fee			
	Restricted Delivery Fee			
	Return Receipt showing to whom and Date Delivered			
PS Form 3800, June 1985	Return Receipt showing to whom, Date, and Address of Delivery			
JEIN.	TOTAL Postage and Fees	S		
3800	Postmark or Date			
Ę				
Ţ				
S				