

Initial Site Assessment (ISA) Checklist

Project Name:
Federal Number:
State Number: ___

Date: ___
Reviewer: ___

1. Project Features:

New R/W _____ Excavation _____ Relocate Utilities _____

2. Review of Existing Information (Check Sources used)

DES Files <input type="checkbox"/>	Sanborn Insurance Maps <input type="checkbox"/>
Local Officials <input type="checkbox"/>	Aerial Photos (List Dates) <input type="checkbox"/>
Fire Department <input type="checkbox"/>	Chain of Title (R/W) <input type="checkbox"/>
Land Owners/Interviews <input type="checkbox"/>	Other ___

Does the review of existing information indicate the presence or potential presence of hazardous materials? (If yes, identify, locate and explain.)

3. Field Review of Project Area (attach photos, if taken).

Setting (Undeveloped/Rural/Urban) ___.

Land Uses (Industrial, Commercial, Residential, Agricultural, Forested):

Current Predominant Land Uses ___

Previous Predominant Land Uses ___

Associated Land Uses ___

Adjacent Land Uses ___

Storage Structures (Observed or Suspected)

Underground Tanks	___	Drums	___
Surface Tanks	___	Basins	___
Transformers	___	Landfills	___
Sumps	___	Others	___
Ponds	___		

Contamination

Surface Staining	___	Vegetation Damage	___
Oil Sheen	___	Dead Fauna	___
Odors	___	Other	___
		None	___

Potential Asbestos Containing Materials*

Buildings	___	Serpentine	___
Sprayed-On Fireproofing	___	Pipe Wrap	___
Acoustical Plaster	___	Friable Tape	___
Fill Material	___	None	___

Does the field review indicate the presence or potential presence of hazardous materials? (If yes, identify, locate, and explain.)

*** The Bureau of Right-of-Way should be notified when buildings possibly containing asbestos are to be taken or moved.**