

**Instructions for the Initial and Intermediate Site Investigation
and Site Check for a Facility
Reimbursement Worksheet**

General Instructions:

The following identifies the fixed cost allowed per task performed for actions directed by the cabinet. Reimbursable rates include all costs associated with the actions being performed. The rates prescribed in this reimbursement worksheet shall include, but are not limited to, facility visits, scheduling, oversight personnel, labor, equipment and material needed in order to perform the listed actions, per 401 KAR 42:250 "Contractor Cost Outline" (August 2006).

The cabinet shall complete the reimbursement worksheet for all tasks directed for initial and intermediate site investigations and site checks for a facility. The pre-established fixed cost shall be identified by written directive. The amount pre-established shall be considered the final cost for the completion of the written directive. Directives from the cabinet shall include a scope of work that shall not exceed two days of field work.

The "Certification" section of the reimbursement worksheet shall be completed by the applicant. The entire reimbursement worksheet shall be submitted with the required report.

The Miscellaneous Tasks Worksheet shall be completed for the cost of drum transportation and disposal or property access agreements, as directed by the cabinet, if those actions are necessary subsequent to the issuance of a pre-established fixed cost directive.

Reimbursement shall be made based on the pre-established fixed cost as indicated on the reimbursement worksheet minus the applicable entry level amount, unless previously deducted from prior claim payments or if the results from the facility's site check do not confirm contamination.

Reimbursement for pre-established fixed cost is contingent upon a determination by the cabinet's technical review that the report required by written directive is complete and meets the requirements of 401 KAR Chapter 42.

General Information

Agency Interest Number: Type the Agency Interest number.

Completion of Reimbursement Worksheet

1. **Mobilization and Demobilization of Drilling Equipment and Oversight Personnel to the Regulated Facility.** The cabinet shall determine the round trip mileage from the contractor's office to the regulated facility. If the per diem is applicable based on this mileage only one round trip mileage from the office to the facility shall be reimbursed. In this case, an additional 30 miles shall be reimbursed per day for the overnight stay in addition to the applicable per diem. If the cabinet requires the installation of monitoring wells, an additional reimbursement for round trip mileage to sample the wells shall be included. If an initial site survey or an additional site survey is required for a facility, an additional reimbursement for round trip mileage for oversight personnel shall be included.
2. **Per Diem.** The cabinet's reimbursement for per diem costs shall include personnel providing supervisory oversight at the facility (one individual) and meals and lodging for that individual during the course of facility activities requiring more than one day of field work and occurring at a facility greater than 65 miles (one way) from the nearest contractor's office or as directed by the cabinet. Per diem reimbursement shall be limited to one (1) overnight stay per directive from the cabinet. Per diem reimbursement for non supervisory personnel has been integrated into the unit costs established.

3. **Field Equipment.** One day of equipment costs shall be reimbursed for each day in the field as deemed necessary by the cabinet.

One day of Tools of the Trade costs shall be reimbursed for each day in the field as deemed necessary by the cabinet. If the cabinet requires the installation of monitoring wells, an additional day shall be included.
4. **Site Survey for a Facility.** The cabinet shall include reimbursement for a site survey for a facility in the initial directive letter. The cabinet shall reimburse for additional surveys requested in subsequent directive letters for expanded areas beyond those included in the initial site survey. The requirement for a Site Survey shall not apply to Site Check requests for a facility, unless otherwise directed by the cabinet. If an initial site survey or an additional site survey is required, an additional reimbursement for round trip mileage for oversight personnel shall be included.
5. **Installation of PVC Monitoring Wells.** The cabinet shall reimburse for each PVC monitoring well installed per written directive. If the directive specifies that the well be constructed to a depth greater than 30 feet, reimbursement shall include additional costs for each additional foot of constructed monitoring well beyond 30 feet.
6. **Installation of PVC Monitoring Well in Bedrock.** The cabinet shall reimburse for each PVC monitoring well installed in bedrock per written directive. If the directive specifies that the well be constructed to a depth greater than 30 feet, reimbursement shall include additional costs for each additional foot of constructed monitoring well beyond 30 feet.
7. **Installation of Recovery Wells.** The cabinet shall reimburse for each recovery well installed per written directive. If the directive specifies that the well be constructed to a depth greater than 30 feet, reimbursement shall include additional costs for each additional foot of constructed recovery well beyond 30 feet.
8. **Soil Borings.** The cabinet shall reimburse for each soil boring installed per written directive. If the written directive requires that a soil boring be converted to a monitoring well, reimbursement shall be made based on the monitoring well installation cost only.
9. **Installation and Construction of Piezometer or Temporary Monitoring Well.** The cabinet shall reimburse for each piezometer or temporary monitoring well installed per written directive.
10. **Surveying, per Well.** Reimbursement shall include cost for well surveys as indicated on the Reimbursement Cost Worksheet for each additional well installed.
11. **Water Sampling and Well Gauging.** Enter the number of wells or other sampling points (i.e. streams, domestic use wells, springs, seeps) from which samples were collected as directed. If no sampling is required, enter the number of wells gauged as directed. NOTE: If a well is to be sampled, the cost of gauging is included.
12. **Well Decommissioning.** Enter the number of wells decommissioned. This should correspond to the well decommissioning logs submitted to the cabinet. This includes decommissioning of domestic use wells.
13. **Cistern Decommissioning.** Enter the number of cisterns directed for decommissioning.
14. **Laboratory Analysis.** Reimbursement shall be based on the total number of samples requested and the analysis required.
15. **Reporting.** Reimbursement shall be made based on the type of report requested.

Applicant

1. **Name of Owner/Operator.** Enter the name of the applicant that applied to the cabinet for reimbursement.
2. **Mailing Address.** Enter the address of the applicant.
3. **City, State, Zip.** Enter the city, state and zip code of the applicant.
4. **Name of Contact Person and Telephone Number.** Enter the name of the contact person and their telephone number, including area code.
5. **Applicant Signature and Date.** The Applicant or authorized personnel shall sign and date the form.
6. **Title of Applicant/Authorized Representative.** Print the title of applicant or authorized representative.
7. **Certified Contractor Signature and Number.** The Certified Contractor listed for this facility shall sign and include their certification number on the form.
8. **Certified Company Representative Signature and Certified Company Number.** The Certified company representative shall sign and include the company certified number on the form.