

US EPA ARCHIVE DOCUMENT

BROWNFIELDS ASSESSMENT DEMONSTRATION PILOT COOPERATIVE AGREEMENT

QUARTERLY PROGRESS REPORT

Reporting Period: *(insert time frame)*

Report Number: *(This number should ideally correspond to the number of quarters since the pilot was awarded.)*

Date Submitted: *(Reports are due to be submitted within 30 days of the close of each Federal fiscal quarter)*

Prepared for:
(name, office/department, and address of pilot)

Prepared by:
(name, address, and phone number of person or entity administering the pilot)

Submitted to:

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Brownfields Program	U.S. Environmental Protection Agency
U.S. Environmental Protection Agency Ariel Rios Building (MS-5105)	
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(Mail Code HIO)	Washington, DC 20460
Boston, MA 02114-2023	

1. PROJECT PROGRESS

Progress reported in this section will clearly identify only those activities performed during the reporting period that were undertaken with EPA funds, and will relate EPA-funded activities to the objectives and milestones agreed upon in the pilot workplan.

1.1 Status of Activities During the Reporting Period

Describe the work accomplished during the reporting period. Activities (tasks, subtasks, outputs, objectives, milestones, etc.) agreed upon in the pilot workplan should be listed here in the order in which they appear in the workplan. A description of work accomplished (or ongoing) during the reporting period should follow each activity. You may also summarize the status of each activity from prior reporting periods.

Please also explain in this section any delays or other problems (if any) encountered during this reporting period for each activity, and describe the corrective measures that are planned. Also mention what kind of assistance (such as training or technical support) is needed to address these problems in the future.

1.2 Modifications to the Workplan

Include a description of any modifications to the workplan that were approved during the reporting period. Also mention in this section modifications to the workplan that will be proposed in the next reporting period. If none, please state so. [Please note that mentioning a proposed modification or item requiring approval in the quarterly progress report does not satisfy the requirement for submitting a request to EPA.] *Modifications requiring approval include changes to the budget and the approved scope of work. Other items requiring approval, such as selection of pilot sites, are identified under the terms and conditions of the cooperative agreement.*

1.3 Site-Specific Products

Include a listing of site-specific products completed. Examples include the sampling and analysis plan, quality assurance project plan, site investigation/assessment reports, and remediation plans and designs.

1.4 Other Deliverables/Work Products

List other deliverables or work products completed in the reporting period and provide as attachments. The following are examples of attachments:

- list of properties considered for pilot activities
- community meeting minutes or summaries
- educational brochures
- newspaper articles about the pilot properties or the pilot program
- photographs of properties

2. PROJECT FUNDS EXPENDED

Include tables with details about how much was spent by task and object class. Table 1 summarizes the expenses for the reporting period by task, Table 2 summarizes the overall expenses for the project.

Table 1: Summary of Costs Incurred this Quarter by Task

Object Class	Task 1	Task 2	Task 3	Task 4	Total
Personnel					
Fringe Benefits					
Travel					
Equipment					
Supplies					
Contractual					
Other					
Total					

Table 2: Summary of Costs Incurred for Project

(Enter negative amounts for Cost Incurred Columns. e.g., -10)

Object Class	Current Approved Budget	Costs Incurred This Quarter (Table 1)	Costs Incurred to Date	Total Remaining Funds
Personnel				
Fringe Benefits				
Travel				
Equipment				
Supplies				
Contractual				
Other				
Total				

3. BUDGET AND OVERALL PROJECT STATUS

Include an estimate of the time and funds needed to complete the activities identified in the approved workplan, comparing that estimate with the time and funds remaining, and provide an explanation for any changes. If **overall**, the project is expected to be on target, please state so. For example, individual tasks may be behind schedule, but overall, is the project expected to be completed on time and within budget?

4. SCHEDULE

Submit a revised schedule if changes have occurred.

5. REPORTING ON BROWNFIELDS ACTIVITIES NOT FUNDED BY EPA, AND OTHER MEASURES OF SUCCESS

Pilot recipients are encouraged to report activities undertaken during the reporting period that **were not funded by EPA**, including leveraged activities, if they occurred as part of the pilot's broader Brownfields redevelopment and reuse efforts. Examples can include the following:

- workplan activities funded by the pilot or other sources (non-EPA Brownfields)
- how the Brownfields program or property redevelopment has influenced the local community
- other initiatives such as federal and state zoning and tax incentives in the targeted area
- federal or state empowerment zone/enterprise community designations
- tax incentives
- special tax zones or districts
- travel and meetings

5. MINIMUM REPORTING REQUIREMENTS

In addition to describing the work accomplished during the reporting period, recipients are required to provide information on 14 Key Measures for the Brownfields Assessment Pilots. These 14 Key Measures are defined in OMB Circular 2030-0020 (Note: A copy of this Circular can be obtained from your EPA Project Officer). Attachment 1 can be used to report on these required key measures.

OMB Circular 2030-0020 also describes suggestions for Voluntary Supplemental Information that can be provide in your quarterly progress report. Attachments 2 and 3 provide suggested formats for reporting on some of the voluntary supplemental information. These attachments provide EPA with valuable information on the partnerships formed and funding received by your pilot as well as the site specific accomplishments for each pilot site.

ATTACHMENT 1
BROWNFIELDS ASSESSMENT DEMONSTRATION PILOT
SUGGESTED FORMAT FOR REPORTING REQUIRED KEY MEASURES

(Provide the information requested below for the pilot. This is to be prepared **quarterly** by the Pilot's Project Manager, attached to the Quarterly Progress Report, and sent to Theresa Carroll at Region 1, and Jim Maas at Headquarters).

Pilot Name: _____

Reporting Period: _____ **Date Form Filled Out:** _____

		CUMULATIVE	THIS QUARTER
AP1	Number of Properties Estimated in Brownfields Pilot Jurisdiction		
AP2	Number of Properties Reported to be Contained in Pilot Inventories		
AP3	Number of Properties Reported to be Targeted by Pilot		
AP4	Number of Properties with Brownfields Assessments Started with Pilot Funding		
AP5	Number of Properties with Brownfields Assessment Completed with Pilot Funding		
AP6	Number of Properties with Brownfields Assessment Completed with Other Funding		
AP7	Number of Properties with Brownfields Assessment that Do Not require Cleanups		
AP8	Number of Properties with Brownfields Cleanup Activities Started		
AP9	Number of Properties with Brownfields Cleanup Activities Completed		
AP10	Number of Properties with Brownfields Redevelopment Activities Underway		
AP11	Number of Cleanup/Construction Jobs Leveraged		
AP12	Number of Cleanup Dollars Leveraged		
AP13	Number of Redevelopment Jobs Leveraged		
AP14	Number of redevelopment/Construction Dollars Leveraged		

ATTACHMENT 2
BROWNFIELDS ASSESSMENT DEMONSTRATION PILOT
SUGGESTED FORMAT FOR REPORTING VOLUNTARY KEY MEASURES

(Provide the information requested below for the pilot. This is to be prepared **quarterly** by the Pilot's Project Manager, attached to the Quarterly Progress Report, and sent to Diane Kelley.)

Pilot Name: _____

Reporting Period: _____ **Date Form Filled Out:** _____

		CUMULATIVE	THIS QUARTER
SC 1	Number of Brownfields-related Partnerships with Other Organizations		
SC 1A	Number of Partnerships with other Federal Agencies		
SC 1B	Number of Partnerships with State and Tribal Government Agencies		
SC 1C	Number of Partnerships with local Government Agencies		
SC 1D	Number of Partnerships with Private Entities and non-governmental Organizations		
SC 2	Brownfields-related Initiative Funding Received from other Sources		
SC 2A	Funding Received from Other Federal Agencies		
SC 2B	Funding Received from State and Tribal Government Agencies		
SC 2C	Funding Received from Local Government Agencies		
SC 2D	Funding Received from Private Entities and Non-governmental Organizations		

ATTACHMENT 3
BROWNFIELDS ASSESSMENT DEMONSTRATION PILOT
SUGGESTED FORMAT FOR REPORTING VOLUNTARY SITE PROFILE DATA

Provide the information requested below for each site targeted under the Brownfields pilot program. This form can be voluntarily submitted with the quarterly progress report as site information changes.

Pilot Site Name: _____ Date Form Filled Out: _____

Address: _____

City, State, Zip Code: _____

Zone (Federal EC/EZ, State or Local): _____

Site Acreage: _____

Site Description/History/Ownership: _____

_____ Planned Reuse: _____

_____ Communities/Groups Involvement: _____

PHASE I

Phase I Site Assessment Started: ___No ___Yes Date (Mo/Year): _____

Phase I Site Assessment Completed: ___No ___Yes Date (Mo/Year): _____

Phase I Funded By: GEPA \$ _____

GFederal, GLocal, GState, GPrivate \$ _____

PHASE II

QAPP: ___No ___Yes Date (Mo/Year): _____

Phase II Site Assessment Started: ___No ___Yes Date (Mo/Year): _____

Phase II Site Assessment Completed: ___No ___Yes Date (Mo/Year): _____

Phase II Funded By: GEPA \$ _____

GFederal, GLocal, GState, GPrivate \$ _____

CLEANUP

Is Cleanup Required? ___No ___Yes

Have Site Remedial Plans been Developed? ___No ___Yes

Remedial Plans Funded by: GEPA \$ _____

GFederal, GLocal, GState, GPrivate \$ _____

Cleanup Activities Started: ___No ___Yes Date (Mo/Year): _____

Cleanup Activities Completed: ___No ___Yes Date (Mo/Year): _____

Estimated Cleanup Costs: GFederal, GLocal, GState, GPrivate \$ _____

REDEVELOPMENT

Redevelopment Activities Started: ___No ___Yes Date (Mo/Year): _____

Redevelopment Activities Completed: ___No ___Yes Date (Mo/Year): _____

Estimated Redevelopment Costs: GFederal, GLocal, GState, GPrivate \$ _____

Other Funded Activities: _____
