COVER SHEET
STANDARD OPERATING PROCEDURE

OPERATION TITLE: **DEVELOPMENT OF A SAMPLING AND ANALYSIS PLAN**

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Bill Longfellow		12/20/16
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Department Commissioner:

Paul Mercer		1-3-2017
Print name	*Signature*	*Date*

DISTRIBUTION;

( ) Division of Remediation.....By:_____Date:_____

1.0 APPLICABILITY

This Standard Operating Procedure (SOP) applies to all programs in the Maine Department of Environmental Protection's (MEDEP) Division of Remediation (DR). It is also applicable to all parties that may submit data that will be used by the DEP/DR.

This SOP is not a rule and is not intended to have the force of law, nor does it create or affect any legal rights of any individual, all of which are determined by applicable statutes and law. This SOP does not supersede statutes or rules.

2.0 PURPOSE

The purpose of this document is to describe the MEDEP/DRs requirements for the development of a Sampling and Analysis Plan (SAP). Prior to conducting investigative field work, routine monitoring, post closure sampling or any data gathering project, a SAP will be developed that outlines the goals of the activity and methodology to achieve that goal. A well-developed SAP that is reviewed by all field activity team members should assure that the goals are obtainable, the methodology is consistent, and the data generated will meet the Data Quality Objectives (DQOs) for the project.

3.0 RESPONSIBILITIES

All MEDEP/DR Staff must follow this procedure when performing this task. All Managers and Supervisors are responsible for ensuring that their staff are familiar with and adhere to this procedure. MEDEP/DR staff reviewing data by outside parties are responsible for assuring that the procedure (or an equivalent) was utilized appropriately.

4.0 GUIDELINES AND PROCEDURES

4.1 INTRODUCTION

A SAP may be developed as a narrative document or staff may use the standard sampling and analysis form found as attachment A to this SOP. A SAP will, at a minimum, contain the following elements.

4.2 ASSESSMENT OF EXISTING DATA

The project manager for the site will ensure the review of any existing information on the site. Analytical data will be analyzed for completeness, quality and usability.

4.2.1 Site Reconnaissance

Prior to sampling events, particularly large multi - day events or multi media events, it is recommended that a site reconnaissance be conducted to work out any logistical problems that may arise during sampling. This would include site access issues, physical impediments to sampling, access issues with surface water sampling, etc. Any logistical issues discovered

during the site reconnaissance should be mentioned in the SAP along with recommendations for overcoming these issues.

4.2.2 Conceptual Site Model

The first step in developing any sampling plan is to develop a conceptual site model (CSM). ASTM defines a CSM as "*a written or pictorial representation of an environmental system and the biological, physical and chemical processes that determine the transport of contaminants from, sources through environmental media to environmental receptors within the system*." The CSM is a dynamic tool to be updated as new information becomes available, and therefore it should be amended, as appropriate, after each stage of investigation.

The CSM should be site-specific and take into consideration the following information:

- What are the Contaminants of Concern (COCs) associated with the site?
- How were COCs released into the environment? Where are the sources located? Was the release due to a surface spill of a liquid, a subsurface spill from piping or a tank, improper storage of materials such as chemical soaked filters at a drycleaner, through a floor drain to the subsurface beneath a building, or through a floor drain to a surface location? Is there a non-aqueous phase liquid (NAPL)?
- What are the chemical characteristics that will influence how the COCs will act in the environment? Do they dissolve readily in water? Are they very volatile or less volatile? How much was released? Do they degradein the subsurface?
- How does the geology, preferential pathways, groundwater flow, depth to groundwater, proximity to impermeable surfaces, and chemical attenuation influence contaminant migration?
- Where are the potential receptors and how might contaminants reach them? Have all of the migration pathways been identified? Has future construction been considered?

4.3 TITLE SECTION

The title section of an SAP will contain the name and town of project, the name and title of the person developing the SAP, and the expected date of the field work and field personnel.

4.4 INTRODUCTION

The introduction will state the DQOs which include:

- Goals of the sampling plan;
- End use of data.

4.5 BACKGROUND INFORMATION

A brief explanation of the background of the Site will be presented.

4.6 SITE SPECIFIC HEALTH AND SAFETY PLAN

A Site Specific Health and Safety plan (HASP) will be developed and included with the SAP. The MEDEP/Bureau of Remediation and Waste Management HASP form, which contains the minimum requirements for a HASP, can be found as Attachment B of this SOP.

If below grade sampling is part of the SAP, Dig - Safe must be notified at least 3 working days prior to the sampling event. Sample locations must be marked on the ground prior to calling Dig-Safe.

4.7 SAMPLING METHODOLOGY/EQUIPMENT

A description of the sampling methodology will be included in the SAP. In instances where a MEDEP/DR SOP is available, reference to SOPs by either name or document number is sufficient.

4.8 SAMPLES AND PARAMETERS

4.8.1 Sample Locations

A map showing planned sampling locations shall be included in the sampling plan. If locations are not pre - determined, the method that samples will be chosen and collected (field observations, random, etc.) will be outlined in the SAP. Also outlined will be any composite procedures, if applicable.

This section should also indicate sampling collection priority and order, to assure that the most important samples are obtained, and that sampling is generally done from low areas of contamination to higher levels of contamination. It is recommended that critical samples be collected in duplicate.

4.8.2 Media Sampled

A chart outlining the media collected and sample analysis will be included in the SAP. Generally, the media sampled will be:

- Soil;
- Groundwater (via monitoring wells and residential wells);
- Pore water;
- Soil gas and/or sub-slab soil gas;
- Indoor air;
- Surface Water;
- Sediment;
- Neat waste material.

4.8.3 Analytical Parameters

Parameters will be identified by either laboratory analysis methodology number, or generally accepted name of analysis.

Containers, preservation, and holding times will be as recommended by the laboratory providing analytical services. Special or out of the ordinary containers or preservation should be noted in the SAP.

4.8 FIELD QC SAMPLES

The specific needs for QC samples for the project will be outlined; including, but not limited to:

- Background samples;
- Field duplicates;
- Trip blanks; and
- Equipment blanks

4.9 REPORT GENERATION

A Sampling Event Trip Report (SETR) will be developed for every sampling event (See MEDEP/DR SOP# RWM-DR-013). Staff person responsible for developing the SETR will be stated in the SAP. Data obtained as part of the SAP will be assessed in the final report.

ATTACHMENT A
SAMPLING AND ANALYSIS PLAN FORM

MEDEP DIVISION of REMEDIATION
SAMPLING and ANALYSIS PLAN

SITE NAME:

DATE of SAMPLING:

MEDEP PERSONNEL: (list names, titles and roles such as person responsible for ordering containers and completing trip reports)

OTHER PERSONNEL: (list name affiliation, title and role)

CONCEPTUAL SITE MODEL:
(ASTM defines a CSM as "*a written or pictorial representation of an environmental system and the biological, physical and chemical processes that determine the transport of contaminants from, sources through environmental media to environmental receptors within the system*." The CSM is a dynamic tool to be updated as new information becomes available, and therefore it should be amended, as appropriate, after each stage of investigation.) All active sites in the Division of Remediation should have a CSM. Staff should work with their geologist to develop and update this as necessary. Provide the following information for the site from the CSM.

Hydrogeologic Setting: (prepare a narrative describing what is known about the site-specific geology and hydrology with respect to its effect on contaminant distribution and migration.
Contaminants of Concern: (list contaminants and their chemical properties that will influence how they act in the environment)
Method of Release: (look at all releases)
Migration/Exposure Pathways: (groundwater, soil, surface water and or air)
Receptors: (list potential receptors and describe the risk to the receptor posed by contamination).

EVALUATION OF PREVIOUS DATA and DATA GAP ANALYSIS:
(Review previous data to determine the environmental and physical conditions existing at the site. For example, if wells are present, well diameter and depth to water will govern the type of sampling equipment that is necessary to sample the wells. Other information such as whether it is necessary to filter samples may also be available. If samples were previously collected, were they analyzed for the appropriate parameters? In addition, previous studies may indicate there is a high degree of confidence with data that has been collected in one portion of the site, but not the other. In order to avoid or fill data gaps, all available data should be assessed and compared to the current CSM. This will result in an efficient and complete site assessment.)

SITE RECONNAISSANCE:
(Depending on the objectives of the sampling and the date of the last site visit staff may need to visit the site prior to conducting the sampling. List the date of last site visit or reconnaissance)

INVESTIGATION PURPOSE and DATA QUALITY OBJECTIVES:
(fill out and attach forms for the pathway which will be sampled)

___ Groundwater Sampling
___ Soil Sampling
___ Surface Water/Sediment Sampling
___ Air Sampling

ADDITIONAL ATTACHMENTS:

___Sample SUMMARY OF SITE INVESTIGATION Table- (example attached)
___Sample location map
___Container list
___HASP
___Equipment Checklist
___Previous "flow sheets"

GROUNDWATER SAMPLING:

DQOs:

- □ To determine if contamination onsite has impacted groundwater
- □ To determine if contamination in groundwater poses a risk to receptors
- □ To determine if concentrations of contaminants have changed
- □ To determine if groundwater is discharging to surface water
- □ Other_____

Sample Point:

- □ Existing monitoring wells (list date last sampled, attach previous "flow sheets")
- □ Wells which will be installed (with _____)
- □ Pore water
- □ Residential Wells
- □ Other:_____

Regulatory Standards/Guidelines that will be used for comparison:

- □ MEGs/MCLs
- □ Background

Sample Method:

- □ Low Flow
  - ❒ Peristaltic Pump
  - ❒ Submersible Pump
- □ Other:_____

Field Screening:

- □ pH
- □ eh
- □ conductivity
- □ turbidity
- □ DO
- □ Temperature
- □ Water level
- □ Flow rate
- □ Other:_____

Analytical Method: (list the method and make sure the method meets the objective)

- □ VOCs:
- □ Metals (field filtered for dissolved, unfiltered for total):
- □ Pesticides/Herbicide:
- □ SVOCs:

- Petroleum:
- Other:_____

SOIL SAMPLING:

DQOs:

- To determine if a release of contaminants has occurred
- To determine if contaminants pose a risk to residential/recreational receptors
- To determine if contaminants pose a risk to commercial and/or construction workers
- To determine the lateral and vertical extent of contamination
- Determining disposal criteria
- Other:_____

Regulatory Standard/Guideline:

- RAGs:
- Waste Disposal Criteria:
- Background:
- Other:_____

Sample Method: **(CALL DIG SAFE)**

- Shovel/trowel
- Geoprobe
    - Hand
    - Drill Rig
- Excavator
- Other:_____

Field Screening:

- PID
- FID
- XRF
- Other:_____

Analytical Method: (list the method and make sure the method meets the objective)

- VOCs:
- Metals:
- Pesticides/Herbicide:
- SVOCs:
- Petroleum:
- PCBs:

SURFACE WATER/ SEDIMENT SAMPLING

DQOs:

- To determine if contaminants from the site are discharging to surface water
- To determine the extent of contamination in surface water
- To determine if contamination in the surface water body exceeds regulatory standards
- To determine if contamination in sediments exceeds ecological toxicity criteria
- Other:_____

Media:

- ☐ Surface water
- ☐ Pore water
- ☐ Sediment

Regulatory Standard/Guideline:

- ☐ AWQC
- ☐ SQIRT
- ☐ PEC/TEC
- ☐ Background
- ☐ Other:_____

Sample Methods:

- ☐ Shovel/Trowel
- ☐ Ponar
- ☐ Beta/Kemmerer
- ☐ Peristaltic pump:
- ☐ Other:_____

Field Screening:

- ☐ PID
- ☐ XRF
- ☐ DO
- ☐ Eh
- ☐ pH
- ☐ Conductivity
- ☐ Temperature
- ☐ Other:_____

Analytical Method: (list the method and make sure the method meets the objective)

- ☐ VOCs:
- ☐ Metals:
- ☐ Pesticides/Herbicide:
- ☐ SVOCs:
- ☐ Petroleum:
- ☐ PCBs:
- ☐ Other:_____

AIR SAMPLING

DQOs:

- ☐ To determine if vapors are present in soil gas at levels that pose a threat to receptors.
- ☐ To determine how vapors are migrating from the site.
- ☐ To determine if vapors are present in indoor air at levels that pose a risk to receptors.
- ☐ To determine if landfill gases are present at a site.
- ☐ Other:_____

Sample Point:

- ☐ Soil gas
- ☐ Preferential pathway
- ☐ Subslab

- ☐ Indoor Air
- ☐ Ambient air
- ☐ Other:_____

Regulatory Guideline:

- ☐ Ambient Air Guideline
- ☐ Indoor Air Target
  - ❒ Residential 1 compound
  - ❒ Residential Multiple compounds
  - ❒ Commercial 1 compound
  - ❒ Commercial multiple compounds
  - ❒ Residential sub chronic
  - ❒ Commercial sub chronic
- ☐ Soil Screening level (this assumes an attenuation factor for soil gas to indoor air)
- ☐ Other:_____

Sample Method:

- ☐ Tedlar bag
- ☐ Summa canister
- ☐ Other:_____

Field Screening:

- ☐ PID (ppm or ppb)
- ☐ FID
- ☐ Oxygen (%)
- ☐ Carbon Dioxide (ppm)
- ☐ Hydrogen Sulfide
- ☐ Methane (% LEL)
- ☐ Other:_____

Analytical Method:

- ☐ Mobile lab
- ☐ TO-15
- ☐ TO-17
- ☐ APH
- ☐ Other:_____

ATTACHMENT B
HEALTH AND SAFETY PLAN FORM

DEP Limited Operation Site Safety & Health Plan

SITE INFORMATION			
SITE NAME:		**JOB/FILE/SPILL #**	
SITE LOCATION (ADDRESS):		**TOWN:**	
DIRECTIONS TO SITE:			
WORK OBJECTIVE:			
MAP/DIAGRAM (SKETCH ON LAST PAGE) MUST INCLUDE:	**SITE MAP (DETAIL WHERE THIS PLAN APPLIES** ☐ **WORK ZONES (EXCLUSION, HAZARD REDUCTION, SUPPORT & CLEAN)** ☐ **ESCAPE ROUT FROM WORK AREAS & REFUGE AREA/OFF SITE CHECK IN AREA** ☐ **BASIC SITE TOPOGRAPHY** ☐		
ENVIRONMENTAL CONDITIONS:	**TEMPERATURE:**	**CLOUD COVER**	
	WIND DIRECTION:	**WIND SPEED:**	

EMERGENCY RESPONSE PLAN	
FIELD STAFF TO EXIT SITE IN CASE OF EMERGENCY (NOT RESPOND) ☐	**FIELD STAFF TO RESPOND IN EMERGENCY** ☐

RESPONDING FIRE DEPT:		**TEL #:**	
RESPONDING RESCUE SERVICE:		**TEL #:**	
ON-SITE CONTRACTOR(S):		**TEL #:**	
ON-SITE CONTRACTOR(S):		**TEL #:**	
ON-SITE CONTRACTOR(S):		**TEL #:**	
POLICE:		**TEL #:**	
HOSPITAL:		**TEL #:**	
AMBULANCE SERVICE:		**TEL #:**	
PRIMARY FIRST AID ATTENDANT:		**TEL #:**	

MEDICAL TREATMENT BY DEP STAFF IS LIMITED TO BASIC FIRST AID

RESCUE PERSONNEL (WHILE EXITING AREA, RESCUE PERSONNEL WILL ASSIST OTHERS REQUIRING ASSISTANCE OR AS DESIGNATED IN ATTACHED REQUIRED PERMITS. OTHER RESCUE WILL BE BY OFF-SITE RESCUE SERVICE:	
SITE SAFETY COORDINATOR (RESPONSIBLE TO ACCOUNT FOR PERSONNEL FROM THE SITE AT CHECK-IN AREA; TO COORDINATE ON-SITE EMERGENCY ACTIONS & WITH OFF-SITE RESPONDERS):	

DEP LIMITED OPERATION SITE SAFETY & HEALTH PLAN CONTINUED

SITE SUPERVISOR (RESPONSIBLE TO COORDINATE NON-EMERGENCY ON-SITE ACTIVITIES; TO INITIATE CALL FOR OFF-SITE EMERGENCY PERSONNEL AS APPROPRIATE THROUGH OFF-SITE COMMUNICATION SYSTEM):				
ALARM SYSTEM:	**VOICE** ☐	**3 BLAST AUTO HORN** ☐	**OTHER (SPECIFY):**	
COMMUNICATIONS (ON-SITE):	**WALKIE TALKIE** ☐	**HEADSET RADIO** ☐	**SIGNALS** ☐	
COMMUNICATIONS (OFF-SITE:	**RADIO** ☐	**SITE TEL #:**		

OTHER EMERGENCY TELEPHONE NUMBERS:	
DEP REGIONAL OFFICES:	**AUGUSTA: (207) 287-7800**
	BANGOR: (207) 941-4570
	PORTLAND: (207) 822-6300
	PRESQUE ISLE: (207) 764-0477
	DEP SAFETY DIRECTOR, LINDA DORAN: (207) 287-7867
	NATIONAL RESPONSE CENTER: (800) 424-8802
	POISON CONTROL CENTER: (800) 222-1222

SITE OPERATIONAL RISKS			
CHEMICAL RISKS (ATTACH MSDS):		**CONCENTRATION HAZARD (INCLUDE PEL & LEL):**	
CHEMICAL RISKS (ATTACH MSDS):		**CONCENTRATION HAZARD (INCLUDE PEL & LEL):**	
CHEMICAL RISKS (ATTACH MSDS):		**CONCENTRATION HAZARD (INCLUDE PEL & LEL):**	
CHEMICAL RISKS (ATTACH MSDS):		**CONCENTRATION HAZARD (INCLUDE PEL & LEL):**	

PHYSICAL RISKS				
CONFINED SPACES (ATTACH CONFINED SPACE ENTRY PERMIT OR NON-HAZARD DECLARATION) ☐		**ELECTRICAL HAZARD (LOCK OUT/TAG OUT REQUIRED FOR DEACTIVATED EQUIPMENT; 1O FT FROM HIGH VOLTAGE)** ☐		
TRENCHING/EXCAVATION (ENTRY CONSIDERED CONFINED IF SPACE IS GREATER THAN 4 FT.) ☐		**UTILITIES CONTACTED** ☐	**DIG SAFE CALLED (800) 344-7233** ☐	
HEAVY EQUIPMENT ☐	**DRUM HANDLING/SAMPLING** ☐	**HEAT/COLD** ☐	**ANTICIPATED TEMP RANGE:**	
ELEVATED AREA/FALL HAZARD (GREATER THAN 6 FT) ☐	**NOISE (HEARING PROTECTION REQUIRED IF POSSIBILITY OF OVER 85 DECIBELS)** ☐		**VEHICULAR TRAFFIC** ☐	
OTHER (SPECIFY): ☐				

WORK PRACTICE/ENGINEERING CONTROLS				
AREA/SPACE VENTILATION ☐	**EXPLOSION-PROOF FAN (S)** ☐	**MARK OFF AREA SIGNS/TAPE** ☐		
VEHICULAR CONTROLS ☐	**CONES** ☐	**BARRICADES** ☐	**FLAG PERSON** ☐	
EXCAVATION TRENCH ☐	**SLOPED** ☐	**SHORED** ☐	**BARRICADES** ☐	
SEAL OFF/POLY OFF WORK AREA ☐	**ELECTRICAL** ☐	**LOCK OUT/TAG OUT** ☐	**SHIELD/INSULATE** ☐	**MAINTAIN 10 FT SEPARATION** ☐

DEP LIMITED OPERATION SITE SAFETY & HEALTH PLAN CONTINUED

IGNITION SOURCES SECURED ☐	EQUIPMENT BONDED & GROUNDED ☐	SPARK RESISTANT TOOLS ☐	CLEAN AREA ESTABLISHED FOR EATING/RESTING ☐

SPILL/ACCIDENT CONTROL					
FIRE EXTINGUISHER(S) ☐		TYPE(S):			
CONTAINMENT ☐	SORBENT ☐	OVER-PACK DRUMS ☐	BOOMS ☐	BARRIER MATERIAL ☐	
PREVENTION PROCEDURES (DESCRIBE):					
HAZARD RECOGNITION (DESCRIBE):					

ADDITIONAL SAFETY EQUIPMENT		
FIRST AID KIT ☐	FIRE BLANKET ☐	SAFETY EYEWASH/SHOWER ☐
ESCAPE LADDERS ☐	BODY HARNESS & LIFELINE ☐	TRIPOD WINCH ☐

SITE MONITORING (ATTACH DAILY AIR MONITORING LOGS)							
THERMOMETER ☐	C ☐	CA ☐	P ☐	INTERVAL IF PERIODIC:		ACTION LEVELS:	
HYGROMETER ☐	C ☐	CA ☐	P ☐	INTERVAL IF PERIODIC:		ACTION LEVELS:	
WIND SOCK ☐	C ☐	CA ☐	P ☐	INTERVAL IF PERIODIC:		ACTION LEVELS:	
CGI ☐	C ☐	CA ☐	P ☐	INTERVAL IF PERIODIC:		ACTION LEVELS:	
OXYGEN METER ☐	C ☐	CA ☐	P ☐	INTERVAL IF PERIODIC:		ACTION LEVELS:	
PID (LAMP) ☐	C ☐	CA ☐	P ☐	INTERVAL IF PERIODIC:		ACTION LEVELS:	
FID ☐	C ☐	CA ☐	P ☐	INTERVAL IF PERIODIC:		ACTION LEVELS:	
OTHER (SPECIFY) ☐		C ☐	CA ☐	P ☐	INTERVAL IF PERIODIC:	ACTION LEVELS:	
OTHER (SPECIFY) ☐		C ☐	CA ☐	P ☐	INTERVAL IF PERIODIC:	ACTION LEVELS:	
COLOROMETRIC ☐	TUBE USED:					ACTION LEVELS:	

C = CONTINUOUS CA = CONTINUOUS WITH ALARM P = PERIODIC

PERSONAL PROTECTIVE EQUIPMENT: RESPIRATORY					
TASK(S):		LEVEL:		RESPIRATOR USED (CARTRIDGE & TYPE):	
TASK(S):		LEVEL:		RESPIRATOR USED (CARTRIDGE & TYPE):	
TASK(S):		LEVEL:		RESPIRATOR USED (CARTRIDGE & TYPE):	

PERSONAL PROTECTIVE EQUIPMENT: CHEMICAL PROTECTIVE CLOTHING					
TASK(S):		LEVEL:		CLOTHING USED:	
TASK(S):		LEVEL:		CLOTHING USED:	
TASK(S):		LEVEL:		CLOTHING USED:	

DEP LIMITED OPERATION SITE SAFETY & HEALTH PLAN CONTINUED

PERSONAL PROTECTIVE CLOTHING: GLOVES					
TASK(S):		**INNER (TYPE & MATERIAL):**		**OUTER (TYPE & MATERIAL):**	
TASK(S):		**INNER (TYPE & MATERIAL):**		**OUTER (TYPE & MATERIAL):**	
TASK(S):		**INNER (TYPE & MATERIAL):**		**OUTER (TYPE & MATERIAL):**	
PERSONAL PROTECTIVE EQUIPMENT: BOOTS					
TASK(S):		**INNER (TYPE & MATERIAL):**		**OUTER (TYPE & MATERIAL):**	
TASK(S):		**INNER (TYPE & MATERIAL):**		**OUTER (TYPE & MATERIAL):**	
TASK(S):		**INNER (TYPE & MATERIAL):**		**OUTER (TYPE & MATERIAL):**	

OTHER EQUIPMENT					
TASK(S):		**EQUIPMENT:**		**DESCRIPTION:**	
TASK(S):		**EQUIPMENT:**		**DESCRIPTION:**	

DECONTAMINATION	
PERSONNEL	***PROTOCOL***
BETWEEN TASKS:	
LEAVING SITE:	
EMERGENCY DECONTAMINATION:	
RESPIRATOR	***PROTOCOL***
BETWEEN TASKS:	
FIELD DECONTAMINATION:	
FINAL SANITIZATION:	
PROTECTIVE CLOTHING	***PROTOCOL***
BETWEEN TASKS:	
FIELD DECONTAMINATION:	
FINAL WASH:	
EQUIPMENT	***PROTOCOL***
BETWEEN TASKS:	
FIELD DECONTAMINATION:	
FINAL DECONTAMINATION:	

DEP LIMITED OPERATION SITE SAFETY & HEALTH PLAN CONTINUED

I have read/understand the contents of this plan, supporting material referenced, and have completed field certification to perform tasks as called for in this plan.

SITE SUPERVISOR SIGNATURE:				**DATE:**	
SITE SAFETY COORDINATOR SIGNATURE:				**DATE:**	
OTHER (SPECIFY):		**SIGNATURE:**		**DATE:**	
OTHER (SPECIFY):		**SIGNATURE:**		**DATE:**	
OTHER (SPECIFY):		**SIGNATURE:**		**DATE:**	
OTHER (SPECIFY):		**SIGNATURE:**		**DATE:**	