

Texas Commission on Environmental Quality

CHECKLIST WORKSHEET

PST LPST SITE ASSESSMENT INVESTIGATION

Reg Ent Name : \_\_\_\_\_

Date : \_\_\_\_\_

Add ID \_\_\_\_\_

Investigator Name \_\_\_\_\_

| Item No. | Description                                                              | Answer | Citations | Notes |
|----------|--------------------------------------------------------------------------|--------|-----------|-------|
| 1        | Describe Site conditions (i.e. - # of wells, potential receptors, etc.). |        |           |       |
| 2        | Were soil/water samples collected during the investigation?              |        |           |       |
| 3        | Describe assessment/sampling activities                                  |        |           |       |
| 4        | Additional comments.                                                     |        |           |       |

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