

PROJECT EVALUATION FORM

CONTACT INFORMATION:	
Company Name:	Company Contact:
Company Address:	
Contact Phone Number:	Contact Email:
DESIRED REMEDIAL APPROACH:	
☐ In-Situ Chemical Oxidation (ISCO) ☐ Surfactant Application	☐ Ex-Situ Blending ☐ In-Situ Blending
☐ In-Situ Chemical Reduction (ISCR) ☐ Enhanced Bioremediatio	n 🗌 PRB/Barrier Treatment
□ Other	
PLUME DATA:	
Contaminant(s) of concern (e.g. BTEX, PCE)	
Age of Plume Approxim	ate Size of Plume
Site Cleanup Objectives	
Have other remedial methods been used at the site?] No
If yes, please list what and date of last treatment	
Source area dimensions (ft)	
Dissolved plume dimensions (ft)	
Vertical Profile (ft)	
Size of desired treatment area (ft)	
COCs maximum concentrations (mg/L or μg/L)	
COCs average concentrations (mg/L or μg/L)	
Is NAPL present? No Yes If yes, last date measured:	Thickness (inches):
Is contamination present in vadose zone soils? \Box Yes \Box No \Box If y	ves, concentration:
Is contamination present in saturated soils?	ves. concentration:

GEOCHEMICAL PARAMETERS:

Dissolved Oxygen (mg/L)	Oxidation Reduction Potential (mV)
Total Iron (mg/L)	Total Manganese (mg/L)
Dissolved Iron (mg/L)	Dissolved Manganese (mg/L)
Nitrate/Nitrite (mg/L)	Sulfate/Sulfide (mg/L)
Methane (mg/L)	Ethene/Ethane (mg/L)
Alkalinity	На
Chloride	Other

ADDITIONAL DATA: (primarily needed for PRBs/barrier treatments)

Depth to groundwater (ft)		
Annual groundwater fluctuation (ft)		
Soil type(s)		
Gradient and flow direction (ft/ft & direction)		
Porosity (total and effective)(%)		
Hydraulic conductivity (estimated or tested) (ft/day)		
Seepage velocity (ft/day)		
Total organic Carbon (TOC) (mg/kg)		
Bulk density (lbs/yd)		
ADDITIONAL INFORMATION:	INCLUD	ED?
Site Map	☐ Yes	□ No
Tabulated analytical data that includes COCs for monitoring wells of interest	☐ Yes	□ No
Groundwater Contour Map & Plume Map	☐ Yes	□ No
Cross-sections (preferably with COCs concentrations)	☐ Yes	□ No
Boring logs and well construction information (for key wells only)	☐ Yes	□ No
Is an upcoming field event being planned in which some or most of any missing information could be collected?	P ☐ Yes	□ No
When do you need an estimate by?		
Additional Comments		

Please return the form and supporting information to Ken Summerour at ken@edenremediation.com or fax it to 678-635-7380. You may contact us at 678-635-7360 with any questions. Thank you for your interest!