
U.S. EPA REGION 2 - BROWNFIELDS QUALITY ASSURANCE PROJECT PLAN APPROVAL FORM

PROJECT INFORMATION

Quality Assurance Officer: _____

Project Officer: _____

Title of Quality Assurance
Project Plan: _____

Assistance Agreement or
Contract #: _____

QA File Number: _____

REGIONAL QA MANAGER OR DELEGATED APPROVER

Approved

Conditionally
Approved*

* Conditional Approval may be provided when there are unresolved comments that do not impact the data collection or the quality of the data and where the project has a small window of opportunity to collect such data. Conditional Approval expires 30 days from the signature date. If updated quality documentation (QD) is not provided by the expiration date or another due date is not agreed upon by EPA, then the QD will be considered delinquent.

Comments:

Signature EPA QA Officer

Signature EPA PO or Project lead

REVIEW SUMMARY:

A review was conducted on the above referenced Quality Assurance Project Plan. The subject QAPP was reviewed for conformance with the [EPA Requirements for Quality Assurance Project Plans](#) (EPA QA/R-5), EPA/240/B-01/003, March 2001; USEPA Region 2 Guidance for the Development of QAPPs for Environmental Monitoring Projects, April 2004 and other EPA QAPP guidance documents as appropriate.

This approval form documents EPA's decision of approval or conditional approval* for the aforementioned QAPP. After the QAPP is approved by EPA via this approval form, obtain the required signatures from your organization on the QAPP Title/Signature page. Send the signed QAPP to the EPA Project Officer and others on the QAPP distribution list within the timeframe stipulated in the AA terms and conditions.