Contractor Environmental Review Completion Form

Agency Name ____NJ Department of Community Affairs (DCA) CDBG-DR Program _Neighborhood and Community Revitalization Program Application ID Number _ NCR39812_____ Applicant Name __Atlantic Capes Fisheries, Inc. (Business/Corporate Name) Project Location __117-301 Channel Drive (Address) _____Point Pleasant Beach (Municipality)___Ocean___(County) ____166, 9; 173, 1; 173, 2; 172, 1; 172, 5; 172, 5.01; 166, 10; 171, 9; and 173, 2.01____(Block, Lot)

I certify that I have reviewed this Environmental Review Record for completeness and quality of forms and documentation.

Dewberry, Senior Planner_

____Lawrence I. Smith_____

Title

Date

Name

2-01P

_2/18/2015

Signature