



New Jersey Department of Environmental Protection
Site Remediation and Waste Management Program

CHILD CARE CENTER/EDUCATIONAL FACILITY
REMEDATION FORM

Date Stamp
(For Department use only)

SECTION A. SITE NAME AND LOCATION

Site Name: _____
List All AKAs: _____
Street Address: _____
Municipality: _____ (Township, Borough or City)
County: _____ Zip Code: _____
Program Interest (PI) Number(s): _____
Case Tracking Number(s): _____
State Plane Coordinates for a central location at the site: Easting: _____ Northing: _____
Municipal Block(s) and Lot(s) of Child Care Center / Education Facility: _____
Municipal Block(s) and Lot(s) of Off Site Play Area: (If applicable) _____
Department of Children and Families License number: (If applicable) _____

SECTION B. CONTACT INFORMATION

Property Owner Name: _____
Firm Name: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Email Address: _____
Telephone Number: _____

Entity Conducting the Remediation

Contact Name: _____ Contact Phone #: _____

Child Care Center / Educational Facility Operator Name: _____

Firm Name: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Email Address: _____
Telephone Number: _____

Entity Conducting the Remediation

Contact Name: _____ Contact Phone #: _____

SECTION C. SUBMISSION STATUS

1. Indicate facility type and reason for submission:

Child Care Center

A) Reason for submission

Initial License (select one below)

- New Construction
- Completed
- Under construction
- Proposed

Change in Use
(refers to Certificate of Occupancy)

Existing License (select one below)

- Increasing the square footage of an existing facility
- Relocation to another property
- Change in site conditions at an existing facility
(License Renewal)

Education Facility

A) Reason for submission

- Change in use (refers to Certificate of Occupancy)
- Renovation/Increasing the square footage of an existing facility
- New Construction

If new construction triggered submission is the site subject to:

N.J.A.C. 6A 26-7 Executive Order 215? Yes No

N.J.A.C. 6A 26-3 Critical Project Review? Yes No

B) Type of School

- Public or Private School
- Charter School
- Special Education School

2. Indicate if there are any environmental concerns that make the site subject to Madden Legislation.
(check all that apply)

- The site is a known contaminated site;
- The site is suspected to be contaminated or to contain historic fill, or has former agricultural use;
- The site is or was an Industrial Site Recovery Act (ISRA) subject site;
- The site has an applicable Uniform Construction Code (UCC):
 - H** – High Hazard **S** – Storage **B** – Dry Cleaner/Nail Salon
 - M** – Gas Station **F** – Factory/Industrial
- Not applicable

3. Indicate how the Electronic Data Deliverable (EDD) for this submission is being provided to the NJDEP:

- Via Email at srpedd@dep.state.nj.us (attach NJDEP confirmation email); or
- CD (attach to this submission)
- PA only - No EDD

4. Has the HDSRF Child Care Facility Grant Application been previously submitted? Yes No

5. Is the HDSRF Child Care Facility Grant Application being submitted with this application? Yes No

6. Complete the following Submission and Permit Status Table:

	N/A	Included in This Submission	Previously Submitted	Date of Submission	Date of Revised Submission	Date of Previous NJDEP Approval	Date of Document Withdrawal
Alternative Soil Remediation Standard and/or Screening level Application Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Case Inventory Document	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
IEC Engineered System Response Action Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Immediate Environmental Concern Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

LNAPL Interim Remedial Measure Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Preliminary Assessment Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Public Notification Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Receptor Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Remedial Action Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Remedial Investigation/Remedial Action Work Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Response Action Outcome	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Site Investigation Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Technical Impracticability Determination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Vapor Concern Mitigation Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Permit Application – list:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Radionuclide Remedial Investigation Workplan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Radionuclide Remedial Investigation Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Radionuclide Remedial Action Workplan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Radionuclide Remedial Action Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

SECTION D. SITE USE

Current Site Use (check all that apply)

- Industrial
- Residential
- Commercial
- School
- Child Care
- Other: _____
- Agricultural
- Park or recreational use
- Undeveloped
- Government

Other Former Uses (check all that apply)

- Industrial
- Residential
- Commercial
- School
- Child Care
- Other: _____
- Agricultural
- Park or recreational use
- Undeveloped
- Government

SECTION E. PUBLIC FUNDS

Did the remediation utilize public funds?..... Yes No N/A

If "Yes," check applicable:

- UST Grant
- HDSRF Grant
- Spill Fund
- UST Loan
- HDSRF Loan
- Schools Development Authority
- Brownfield Reimbursement Program
- Landfill Reimbursement Program
- HDSRF Grant Reimbursement Program

SECTION F. GENERAL

1. Has the remediation varied from the Technical Rules?..... Yes No

If "Yes," provide the citation(s) from which the remediation has varied and the page(s) in the attached document where the rationale for the variance is provided.

N.J.A.C. 7:26E- _____ Page _____

N.J.A.C. 7:26E- _____ Page _____

N.J.A.C. 7:26E- _____ Page _____

Water Supply

2. Indicate the source of drinking water for the Child Care Center / Education Facility:

- Public Community Water System (CWS); Provide PWSID#: _____
- Private well located on site Non-Transient/Non-Community (NT/NC) Well

If the source of drinking water is anything other than a CWS attach a current (<3 years old) Bureau of Safe Drinking Water (BSDW) Certification Letter.

3. If a private or non-community well, has any drinking water standard (primary or secondary) been exceeded?..... Yes No N/A

If "Yes," answer question 3a through 3c.

a.) List all Contaminant(s) of Concern (COC) and their concentration:

b.) Identify the Regulatory Agencies that have been notified:

- NJDEP NJDOH NJDCF Local Health Department

c.) Has the NJDEP Hotline been called?..... Yes No

If "Yes," provide NJDEP Hotline Incident #: _____

4. Is a BSDW Certification being submitted with this form?..... Yes No

If "Yes," answer question 4a through 4c.

a.) Is the BSDW Certification conditional?..... Yes No

b.) Is there any type of treatment on the well? Yes No

c.) Describe the conditions/treatment type:

5. Is an irrigation well located onsite? Yes No

6. Are there any other permitted or unpermitted wells on the site? Yes No

Play Area (For Child Care Centers only, not Educational Facilities)

7. Is there an outdoor play area(s) associated with the Child Care Center? Yes No

If "No," has the Department of Children and Families confirmed that no play area is required?..... Yes No

8. Is the Child Care Center located within a public school?..... Yes No

If "Yes," provide school name: _____

Address: _____

If No outside play area is associated with the Child Care Center, then proceed to the next section.

9. Are there play area(s) onsite?..... Yes No

10. Are there play area(s) offsite?..... Yes No

If "Yes," answer questions 10a through 10c.

a.) Provide the address of the offsite play area:

Address: _____

b.) Is the offsite play area located on public property, i.e. School, Park, etc?..... Yes No

If "Yes," Provide the Name: _____

If "No,": Was a PA completed for the offsite play area? Yes No

Was a SI completed for the offsite play area? Yes No

c.) Is the offsite play area part of an existing Child Care Center that received a Final Remediation Document (FRD)? Yes No
 If "Yes,": Identify the type of FRD issued: NFA RAO Child Care Approval,
 And provide: Date: _____ PI#: _____

11. Indicate the type of cover on the play area(s): (check all that apply)

- mulch Rubber matting/tile AstroTurf Bare Soil
 grass asphalt/concrete other: _____

12. Have the play area(s) been sampled? Yes No
 If "Yes," were Historic Aerial Photos and/or Sanborn Maps reviewed to verify that play area samples address former site use? Yes No
 13. Are play area(s) impacted by a contaminated Area of Concern (AOC)? Yes No
 If "Yes," has the contaminated AOC been remediated? Yes No

SECTION G. INVESTIGATION INFORMATION

Preliminary Assessment

1. The Child Care Center/Educational Facility occupies the:
 Entire Site Only a portion of the multitenant building (Leasehold) Only a portion of the Lot
2. Are any of the following located within 200 feet of the Child Care Center / Education Facility? If "Yes," provide PI #(s):
 Classification Exception Area (CEA) PI #(s): _____
 Currently Known Extent (CKE) PI #(s): _____
 Underground Storage Tank (UST) site PI #(s): _____
 Industrial Site Recovery Act (ISRA) site PI #(s): _____
 Any other contaminated site PI #(s): _____
3. Did the PA identify any Areas of Concern (AOCs) within the Child Care Center / Education Facility site? Yes No
4. Did the PA identify any AOCs outside the leasehold portion that have a potential to impact the Child Care Center / Education Facility? Yes No
5. Did the PA identify any historic industrial, commercial, or agricultural use at the site dating back to the time the site was naturally vegetated? Yes No
 If "Yes," identify the type of use(s): Industrial, Commercial, Agricultural
6. Based on historical site operations in the PA Report, was Indoor Air sampling recommended to the Child Care Center / Education Facility? Yes No
7. Based on the PA Report, is there suspected contamination at the site? Yes No
 If "Yes," has an SI been conducted? Yes No
 If an SI was conducted, was contamination Identified? Yes No
8. Is the Child Care Center / Education Facility located on a former Underground Storage Tank (UST) site? ... Yes No
 If "Yes," provide all PI #s: _____
9. Is the Child Care Center / Education Facility located on a former ISRA Industrial Establishment or subject to ISRA Applicability? Yes No
 If "Yes," list all SIC/NAIC #s: _____
10. Based on the PA Report, was a Final Remediation Document (FRD) previously issued at this location? Yes No
 If "Yes,": identify the type of FRD issued: NFA RAO Child Care Approval,
 and provide: Date: _____ PI#: _____

Site Investigation

11. Are you proposing an alternative remediation standard pursuant to N.J.A.C. 7:26D-7.4, alternate vapor intrusion screening level, or ecological site specific goal? Yes No

If "Yes," attach the Alternative Remediation Standard and/or Screening Level Application Form as an addendum.

12. Was a site-specific screening level developed for the evaluation of the VI pathway?..... Yes No

Remedial Investigation

13. Is the Remedial Investigation complete for the contaminated AOCs addressed in this submission? Yes No N/A

14. Is the Remedial Investigation complete for all AOCs associated with this case? Yes No N/A

If "Yes," provide date: _____

Unknown Source Investigation

15. Are any Unknown Sources impacting the site? Yes No

If "Yes," answer question 17a and 17b.

a.) List all Contaminant(s) of Concern (COC):

b.) Provide the NJDEP Hotline Incident # for the Unknown Source: _____

SECTION H. MEDIA IMPACTED/REMEDIATED

1. Was a presumptive remedy implemented?..... Yes No N/A

2. Was an alternative remedy pre-approved by the NJDEP?..... Yes No

If Yes" Date of the pre-approval: _____

Soil

3. Soil Remediation Types (*check all that apply*):

- No remedial action required
- Excavation
- Capping / other engineering controls
- Treatment
- Institutional Control
- Other _____

Ground Water

4. Have the Ground Water Quality Standards been met? Yes No N/A

5. Do any contaminant levels in ground water currently exceed the vapor intrusion ground water trigger? Yes No

6. Do groundwater concentrations remain above the Ground Water Quality Standards but concentrations are low and non-decreasing? Yes No N/A

7. Ground Water Remediation Types (*check all that apply*):

- No remedial action required
- Physical Containment
- Pump & Treat
- In-Situ
- Hydraulic Control
- Institutional Control
- Monitored Natural Attenuation
- Other _____

Vapor

8. Has indoor air at the Child Care Center / Education Facility been sampled?..... Yes No

If "Yes," have the results been sent to NJDOH-Indoor Environments Program? Yes No

9. Is an engineering control required in order to mitigate a vapor hazard in the Child Care Center / Education Facility? Yes No

If "Yes," indicate the type of engineering control that was implemented: *(check all that apply)*

- Subsurface Depressurization System
- Subsurface Ventilation System
- Soil Vapor Extraction System
- HVAC Positive Pressure
- Other (specify): _____

General

10. Has radionuclide contamination been addressed in any media? Yes No

SECTION I. APPLICABLE REMEDIATION STANDARDS (Complete only if sampling of soil and/or ground water was conducted)

1. Were Default Remediation Standards used for all contaminants? Yes No
(If "Yes," check all that apply)

- Direct Contact
- Impact to Ground Water Soil Screening Levels
- Ecological Screening Levels

2. Has compliance averaging been utilized to determine compliance with the Soil Remediation Standards? Yes No

If "Yes," check all that apply:

Compliance Averaging Method Utilized

Pathway	Arithmetic Mean	95 Percent UCL	Spatially Weighted Average	75 Percent/ 10X Procedure
<input type="checkbox"/> Ingestion-Dermal Pathway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inhalation Pathway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Impact to Ground Water Pathway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Has a compliance option been utilized to determine compliance with the Impact to Ground Water Pathway? (If "Yes," check all that apply) Yes No

- Immobile Compounds
- Data evaluation for metals and semi-volatiles
- Data evaluation for volatile organics derived from discharges of petroleum mixtures

4. Have Alternative Soil Remediation Standards (ASRS) been utilized for Inhalation and/or Ingestion/Dermal pathways? Yes No

5. Were Site Specific Standards used for the Impact to Ground Water Pathway? Yes No
(If "Yes," check all that apply)

- Soil-Water Partitioning Equation
- SPLP
- Sesoil
- Sesoil/AT123D
- DAF Modification

6. Were Site Specific Ecological Remediation Goals used? Yes No

7. What is the ground water classification for this site as per N.J.A.C. 7:9C? (check all that apply)

- Class I-A
- Class II-A
- Class I-PL Pinelands Protection Area
- Class III-A
- Class I-PL Pinelands Preservation Area
- Class III-B

SECTION J. LABORATORY DATA (Complete only if sampling of soil and/or ground water was conducted)

1. Were all data submitted in the appropriate full and/or reduced formats according to the deliverables defined in N.J.A.C. 7:26E-2?..... Yes No
2. Do all data submitted meet the quality assurance/quality control (QA/QC) requirements incorporated by reference in N.J.A.C. 7:26E-2 for:
sampling..... Yes No
analysis..... Yes No
3. How was it determined that the data complied with the QA/QC requirements?
 Laboratory non-conformance summary/narrative
 Laboratory correspondence
 LSRP review
 Independent contractor review
 Other: _____
4. Has any data been qualified and used?..... Yes No
5. Has any data been rejected and used?..... Yes No
6. Provide the page number for the "Reliability of Data" section of the report: _____

SECTION K. RESPONSE ACTION OUTCOME (complete only if submitting RAO)

1. Indicate the scope of the RAO (Check only 1 box)
 Area(s) of Concern Only
 Entire Site – Child Care Center or Educational Facility
 Child Care Center only (Refer to RAO Guidance Document for license details)
2. Indicate the extent of remediation covered by the RAO (Check only 1 box):
 Unrestricted RAO
 Limited Restricted RAO
 Restricted RAO
3. Total number of contaminated AOCs associated with the Child Care Center/Educational Facility: _____
4. Total number of contaminated AOCs addressed in this submission: _____
5. Are there any outstanding contaminated AOCs associated with the case where an RAO has not been filed?..... Yes No
6. Check all the RAO Notices that were used in the RAO document:
 - a) General Notices
 Well Decommissioning
 Building Interiors Not Addressed
 - b) Child Care Center Notices
 Child Care Center Notices (Use this notice in all Child Care Center RAOs)
 Child Care Center Specific-Multi-Tenant Situations
 - c) Contamination Remaining Onsite
 Regional Natural Background Levels of Contamination
 Existing CEA or Deed Notice
 Soils Only RAO
 Ground Water Contamination Not Yet investigated
 Ground Water Contamination Due to Regional Historic Fill
 Contamination Remaining Onsite Due to Migration from Off-site Source
 Known Onsite Contamination Source Not Yet Remediated
 Less than an Order of Magnitude Remediation Standard Change For A Site With An Approved RAW Prior To A New Remediation Standard
 Less than an Order of Magnitude Remediation Standard Change For A Site With A Final Remediation Document Prior to A New Remediation Standard

RAO Preparation Checks

- 1. Was the RAO issued only to the "Person(s) that conducted the Remediation"? Yes No
- 2. Does the language in the issued RAO document conform to the RAO shell document? Yes No
- 3. Were all the applicable individuals/agencies noted in the shell document copied on the RAO? . Yes No
- 4. Is the scaled site map included with the RAO? Yes No
- 5. Are there electronic copies of all remediation related records included with this submission? Yes No
- 6. If the property owner is the entity conducting the remediation, have all NJDEP fees and outstanding oversight costs been paid?..... Yes No N/A
- 7. Have any identified deficiencies been addressed in this or prior submission?..... Yes No N/A
- 8. Did the remedial action render the property unusable for future redevelopment or recreation use?..... Yes No

SECTION L. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION INFORMATION AND CERTIFICATION

Full Legal Name of the Person Responsible for Conducting the Remediation: _____

Representative First Name: _____ Representative Last Name: _____

Title: _____

Phone Number: _____ Ext: _____ Fax: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Email Address: _____

This certification shall be signed by the person responsible for conducting the remediation who is submitting this notification in accordance with Administrative Requirements for the Remediation of Contaminated Sites rule at N.J.A.C. 7:26C-1.5(a).

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, including all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, to the best of my knowledge, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil penalties for knowingly submitting false, inaccurate or incomplete information and that I am committing a crime of the fourth degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of any statute, I am personally liable for the penalties.

Signature: _____ Date: _____

Name/Title: _____

Company Name: _____

Completed forms should be sent to:

Bureau of Case Assignment & Initial Notice
Site Remediation Program
NJ Department of Environmental Protection
401-05H
PO Box 420
Trenton, NJ 08625-0420

SECTION M. LICENSED SITE REMEDIATION PROFESSIONAL INFORMATION AND STATEMENT

LSRP ID Number: _____
First Name: _____ Last Name: _____
Phone Numbers: _____ Ext.: _____ Fax: _____
Mailing Address: _____
Municipality: _____ State: _____ Zip Code: _____
Email Address: _____

This statement shall be signed by the LSRP who is submitting this notification in accordance with N.J.S.A. 58:10C-14, and N.J.S.A. 58:10B-1.3b(1) and (2).

- (1) *I certify, as a Licensed Site Remediation Professional authorized pursuant to N.J.S.A. 58:10C-1 et seq. to conduct business in New Jersey, that for the remediation described in this submission, and all attachments included in this submission, I personally: Managed, supervised, or performed the remediation conducted at this site that is described in this submission, and all attachments included in this submission; and/or periodically reviewed and evaluated the work performed by other persons that forms the basis for the information in this submission; and/or completed the work of another site remediation professional, licensed or not, after having: (1) reviewed all available documentation on which I relied; (2) conducted a site visit and observed the then-current conditions and verified the status of as much of the work as was reasonably observable; and (3) concluded, in the exercise of my independent professional judgment, that there was sufficient information upon which to complete any additional phase of remediation and prepare workplans and reports related thereto.*
- (2) *I certify:*
- *That I have read this submission and all attachments to this submission;*
 - *That in performing the professional services as the licensed site remediation professional for the entire site or each area of concern, I adhered to the professional conduct standards and requirements governing licensed site remediation professionals provided in N.J.S.A. 58:10C-16;*
 - *That the remediation conducted at the entire site or each area of concern, that is described in this submission and all attachments to this submission, was conducted pursuant to and in compliance with the remediation requirements in N.J.S.A. 58:10C-14.c;*
 - *That the remediation described in this submission, and all attachments to this submission, was conducted pursuant to and in compliance with the regulations of the Site Remediation Professional Licensing Board at N.J.A.C. 7:26I; and*
 - *That the information contained in this submission and all attachments to this submission is true, accurate, and complete.*
- (3) *I certify, when this submission includes a response action outcome, that the entire site or each area of concern has been remediated in compliance with all applicable statutes, rules, and regulations and is protective of public health and safety and the environment.*
- (4) *I certify that no other person is authorized or able to use any password, encryption method, or electronic signature that the Board or the Department have provided to me.*
- (5) *I certify that I understand and acknowledge that:*
- *If I knowingly make a false statement, representation, or certification in any document or information I submit to the Department I may be subject to civil and administrative enforcement pursuant to N.J.S.A. 58:10C-17.a.1(a)through (f) by the Board, including but not limited to license suspension, revocation, or denial of renewal; and*
 - *If I purposely, knowingly, or recklessly make a false statement, representation, or certification in any application, form, record, document or other information submitted to the Department or required to be maintained pursuant to the Site Remediation Reform Act, I shall be guilty, upon conviction, of a crime of the third degree and shall, notwithstanding the provisions of subsection b. of N.J.S.2C:43-3, be subject to a fine of not less than \$5,000 nor more than \$75,000 per day of violation, or by imprisonment, or both.*
- (6) *I certify that I have read this certification prior to signing, certifying, and making this submission.*

LSRP Signature: _____ Date: _____
LSRP Name: _____
Company Name: _____