

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

FULL LABORATORY DATA DELIVERABLES FORM INSTRUCTIONS

General Instructions

- 1. **Applicability:** This form is required to be completed by a Licensed Site Remediation Professional (LSRP) or a Subsurface Evaluator and submitted to the Department when submitting analytical results for IEC samples, potable well sampling, and indoor air cases pursuant to N.J.A.C. 7:26E-1.11, 1.14 and 1.15 respectively and for polychlorinated dibenzo-p-dioxins/polychlorinated dibenzofurans and for all hexavalent chromium soil samples pursuant to N.J.A.C. 7:26E-2.1.
- 2. **Updates:** The NJDEP may update this form periodically. Please ensure you are using the latest version of this form. Download the latest version of this form from the NJDEP Website: <u>http://www.nj.gov/dep/srp/srra/forms/</u>.
- 3. **Timeframe:** This form shall be submitted each time that the LSRP or Subsurface Evaluator submits the Full Laboratory Data Deliverables pursuant to N.J.A.C. 7:26E.
- 4. **Signatures:** This form must be signed by the person conducting the remediation.

Please make sure you check the appropriate box to indicate if a LSRP or a Subsurface Evaluator is certifying the form. The Subsurface Evaluator option is only for cases associated with unregulated heating oil tanks (UHOT) where you are a NJDEP licensed Subsurface Evaluator and the remediation is for unregulated heating oil tank system(s) and no other areas of concern. Insure that the corresponding signature page is included with the form.

5. 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 A. Site Name and Location

- Site Name: provide the name of the site (i.e., ABC Corporation);
- List all AKAs: Provide all other known names for the site;
- **Street Address:** Provide the street address for the site NOTE: This should be the physical location of the site not be the mailing address;
- **Municipality:** Provide the name of the municipality and indicate if it is a township, a borough, or a city. NOTE: This should be the name of the municipality and not the local name;
- **County:** Provide the name of the county where the site is located;
- Zip code: self explanatory
- **Program Interest (PI) Numbers:** The PI Number is assigned by the Department and can be obtained via the web at http://www.nj.gov/dep/srp/ (DEP DATA MINER REPORTS). If this is a new site with no previous SRP involvement, leave blank.
- **Case Tracking Numbers:** Provide all NJDEP generated site identification numbers (Hotline incident numbers, UST Notice of Intent to Close numbers, ISRA numbers, etc.);

Section B. NJDEP Case Manager

Self explanatory.

Section C. Remedial Phase

Self explanatory.

Section D. Matrix Type and Number of Samples

For further guidance refer to Chapter 2 of the Field Sampling Procedures Manual <u>http://www.state.nj.us/dep/srp/guidance/fspm/pdf/chapter02_all.pdf</u>.

Section E. General

Self explanatory.

Section F. Data Quality Assurance/Quality Control

For further guidance refer to Chapter 2 of the Field Sampling Procedures Manual and the Technical Requirements for Site Remediation 7:26E-2 <u>http://www.state.nj.us/dep/srp/guidance/fspm/pdf/chapter02_all.pdf</u> and <u>http://www.nj.gov/dep/rules/njac7_26e.pdf</u>.

Section G. Person Responsible For Conducting the Remediation Information and Certification

The certification in this section shall be signed and dated by the person responsible for conducting the remediation. The certification in this section shall *not* be signed by the licensed site remediation professional or law firm hired to assist the owner or operator with their compliance obligations. The certification required in this section shall be executed as follows:

- 1. For a corporation or limited liability company, by a principal executive officer of at least the level of vice president; or
- 2. For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- 3. For a municipality, state, Federal or other public agency, by either a principal executive officer or ranking elected official; or
- 4. By a duly authorized representative of the corporation, partnership, sole proprietorship, municipality, state or Federal or other public agency, as applicable. A person is deemed to be a duly authorized representative if the person is authorized in writing by an individual described in 1, 2 or 3 above and the authorization meets the following criteria:
 - i. The authorization specifies either an individual or a position having responsibility for the overall operation of the industrial establishment or activity, such as the position of plant manager, or a superintendent or person of equivalent responsibility (a duly authorized representative may thus be either a named individual or any individual occupying a named position);
 - ii. The written authorization is submitted to the Department along with the certification; and
 - iii. If an authorization is no longer accurate because a different individual or position has responsibility for the overall operation of the industrial establishment or activity, a new authorization satisfying the requirements of this section shall be submitted to the Department prior to or together with any reports, information, or applications to be signed by an authorized representative.
- Provide the full legal name of the person responsible for conducting the remediation;
- Provide the full name of the representative of the person responsible for conducting the remediation, pursuant to N.J.A.C. 7:26C-1. Enter "Same" if the representative is the same person as the person responsible for conducting the remediation;
- Provide the title of the representative of the person responsible for conducting the remediation;
- Provide the telephone number, extension number, and fax number of the representative of the person responsible for conducting the remediation;
- Provide the mailing address, including the city/town, state, and zip code of the representative of the person responsible for conducting the remediation;
- Provide the email address of the representative of the person responsible for conducting the remediation;
- The representative for the person responsible for conducting the remediation shall provide:
 - His/her signature where indicated;
 - His/her name and title (i.e., President, CEO); and
 - The date when the signing occurred.

Section H. Complete the appropriate signature page.

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Licensed Site Remediation Professional Information and Statement

- LSRP ID Number: Provide the Licensed Site Remediation Professional ID Number.
- Provide the name, phone number, email and mailing address (city/town, state, zip code) of the Licensed Site Remediation Professional.
- The certification in this section shall be signed and dated by the Licensed Site Remediation Professional.

Subsurface Evaluator UST Report Certification Form

• The certification in this section shall be signed and dated by the Subsurface Evaluator. Include the evaluator's name, UST certification number, the firm's name, the firm's UST certification number, address (city/town, state, zip code) and telephone number.