



New Jersey Department of Environmental Protection
Site Remediation Program

**“MAY 7, 2014, REMEDIAL INVESTIGATION COMPLETE”
 SUPPORTING DOCUMENTATION 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): _____ Activity Number(s): _____
 Municipal Block(s) and Lot(s): _____

SECTION B. DOCUMENTATION TYPES

Indicate the type of documentation being provided. *(Check all that apply)*

- No Further Action (NFA) Letter previously issued by NJDEP
- NJDEP letter(s) stating that the remedial investigation was completed
- Previously submitted Remedial Investigation Report(s) that did not receive NJDEP response by May 7, 2012
- The discharge occurred after May 7, 1999
- Discrepancy in discharge location
- Other Supporting Documentation

SECTION C. 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 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: _____

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
 Attn: May 2014 Deadline