



New Jersey Department of Environmental Protection  
Contaminated Site Remediation and Redevelopment

**GROUND WATER REMEDIAL ACTION PROTECTIVENESS/  
BIENNIAL CERTIFICATION 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): \_\_\_\_\_  
Ground Water Remedial Action Permit (RAP) Number: \_\_\_\_\_

**SECTION B. FEES**

☐ Ground Water Remedial Action Protectiveness/Biennial Certification Form for a Ground Water RAP .....(No Fee)  
Have all outstanding Ground Water RAP annual fees been paid? ..... ☐ Yes ☐ No

☐ Post-NFA Cases (Sites without a Ground Water RAP): Ground Water Remedial Action Protectiveness/Biennial Certification Form

**Note:** A Ground Water RAP Initial Application is required to be submitted with this form. Please see the Compliance Notice: Post-NFA cases requiring remedial action permits, which includes the fee breakdown:  
[https://www.nj.gov/dep/srp/enforcement/post\\_nfa\\_compliance\\_notice.pdf](https://www.nj.gov/dep/srp/enforcement/post_nfa_compliance_notice.pdf)

	Effective on or Before June 30, 2024	Effective July 1, 2024
MNA -	\$6,100	\$6,715
Active System-	\$6,320	\$6,935

**SECTION C. FEE BILLING CONTACT PERSON**

☐ Changed Since Last Submission of the Ground Water Remedial Action Protectiveness/Biennial Certification Form  
Date of RAP Contact Information Change Form Submission: \_\_\_\_\_

Business Name: \_\_\_\_\_  
First Name of Contact: \_\_\_\_\_ Last Name of Contact: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**SECTION D. PERSON(S) RESPONSIBLE FOR CONDUCTING THE REMEDIATION**

- Has the mailing address changed for the Person(s) Responsible for Conducting the Remediation that is currently listed on the Ground Water RAP for the site? ..... ☐ Yes ☐ No  
If "Yes", provide the date of the Ground Water RAP Modification Application submission: .....
- Has the Contact Person/Information changed since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form? ..... ☐ Yes ☐ No  
If "Yes", provide the date of the RAP Contact Information Change Form submission: .....

## SECTION E. CURRENT OWNER(S) OF THE SITE

1. Has the Property Owner changed from what is currently listed on the Ground Water RAP for the site? ☐ Yes ☐ No  
If "Yes", provide the date of the RAP Transfer/Change of Property  
Ownership Application submission: .....
2. Has the mailing address changed for the Property Owner that is currently listed  
on the Ground Water RAP for the site? ..... ☐ Yes ☐ No  
If "Yes", provide the date of the Ground Water RAP Modification Application submission: .....
3. Has the Contact Person/Information changed since the last submittal of the Ground Water Remedial Action  
Protectiveness/Biennial Certification Form? ..... ☐ Yes ☐ No  
If "Yes", provide the date of the RAP Contact Information Change Form submission: .....

## SECTION F. ATTACHED DOCUMENTS

Attach electronic copies of the following documents in an email to [srp\\_submissions@dep.nj.gov](mailto:srp_submissions@dep.nj.gov)\*: (Check all that apply)

\*See instructions for how to handle submissions associated with a Post-NFA Case.

- ☐ Ground Water Remedial Action Protectiveness/Biennial Certification Form using the current form on the NJDEP Website (Required).
- ☐ A summary of the ground water sampling results by monitoring well in tabular format to this form, including all historical ground water sampling data associated with the Ground Water RAP (Required).
- ☐ The last four ground water contour maps completed for the site, which includes the extent of the CEA/WRA, monitoring well and AOC locations on it, and the direction of ground water flow at the site (Required).
- ☐ All well inspection reports/logs that have been completed since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form (Required).
- ☐ The results of the required updated well search to this form, including a scaled map and a table indicating which wells were previously evaluated (Required).
- ☐ The field sampling sheets since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form (Required).
- ☐ A table summarizing the monitoring well construction details (below ground surface (bgs)) for all the monitoring wells associated with the Ground Water RAP (Required).
- ☐ A contaminant concentration table that compares the GWQS changes and order of magnitude analysis associated with the Ground Water RAP (Required).
- ☐ The Contaminants of Emerging Concern (CECs) evaluation completed associated with the Ground Water RAP (Required).
- ☐ A summary of the Technical Impracticability (TI) Determination and a 5-year evaluation, if applicable.
- ☐ A current Tax Map of the property if the block and lot has changed for the CEA/WRA, if applicable.
- ☐ The vapor intrusion sampling results, including a scaled site map indicating the location of all structures investigated for vapor intrusion, if applicable.
- ☐ Any vapor intrusion sampling results as required from the Operation, Maintenance, & Monitoring (OMM) Plan for the vapor intrusion engineering control(s)/mitigation system(s) for the permit, including the NJDEP Vapor Intrusion Mitigation Monitoring and Maintenance Checklist. Provide a scaled site map that clearly identifies the building(s) and/or structure(s) with the vapor intrusion engineering control(s)/mitigation system(s) in place (e.g., active or passive), including the address and block and lot of each impacted property.
- ☐ Any vapor intrusion sampling results as required from the Vapor Intrusion (VI) Long-Term Monitoring (LTM) Plan for the permit, if applicable. Provide a scaled site map that clearly identifies the building(s) and/or structure(s) with the VI LTM Plan or the VI Change in Use Evaluation Plan, including the address and block and lot of each impacted property.
- ☐ The summary of the inspection and a scale site map clearly identifying the buildings with Indeterminate Vapor Intrusion Pathway status, including the address and block/lot of each building, if applicable.
- ☐ The completed Remediation Cost Review and RFS/FA Form with a detailed cost estimate, if applicable.

- ☐ The homeowner or condominium association's annual budget that includes funds for the operation, maintenance, and monitoring of the engineering control(s) associated with the Ground Water RAP, if applicable.
- ☐ The annual statements confirming the value of the Financial Assurance Instrument, if applicable.

## SECTION G. REMEDIAL ACTION AND CEA/WRA INFORMATION

### 1. Type of Ground Water Remediation

#### a. ☐ Monitored Natural Attenuation

- 1) Has ground water sampling been conducted at the site since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form? ..... ☐ Yes ☐ No

If "Yes", attach a summary of the ground water sampling results by monitoring well in tabular format to this form, including all historical ground water sampling data for the site.

- 2) Has ground water sampling been conducted in accordance with the Ground Water Monitoring Plan for the site? ..... ☐ Yes ☐ No

If "No", provide justification for deviating from the Ground Water Monitoring Plan and attach additional documentation if needed:

- 3) Do the results of the ground water sampling demonstrate that contaminant concentrations have decreased to or below the applicable Ground Water Quality Standards for two ground water sampling events accounting for seasonal fluctuation at the site pursuant to N.J.A.C. 7:26C-7.9(f)? ..... ☐ Yes ☐ No ☐ N/A

If "Yes", then submit a Ground Water RAP Termination Application and skip the rest of this section.

- 4) Is there still a decreasing trend of contaminant concentrations in the ground water? ..... ☐ Yes ☐ No

If "No", provide the date of Ground Water RAP Modification submission or the justification supporting the protectiveness of the ground water remedial action in Section L below: .....

- 5) Is the **behavior** of the ground water contaminant plume considered to be shrinking or stable? ..... ☐ Yes ☐ No

If "Yes", check off only one of the following: ☐ Shrinking ☐ Stable

If "No", provide the date of Ground Water RAP Modification submission or the justification supporting the protectiveness of the ground water remedial action in Section L below: .....

- 6) Is the ground water plume reaching the sentinel wells or sentinel monitoring points? ..... ☐ Yes ☐ No

If "Yes", provide the date of Ground Water RAP Modification submission with the required additional ground water delineation data: .....

- 7) Is MNA still the appropriate ground water remedial action for the site? ..... ☐ Yes ☐ No

If "No", provide an explanation:

b. ☐ **Active Remediation**

Provide the type of remediation: \_\_\_\_\_

- 1) Has ground water sampling been conducted at the site since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form? ..... ☐ Yes ☐ No

If "**Yes**", attach a summary of the ground water sampling results by monitoring well in tabular format to this form, including all historical ground water sampling data for the site.

- 2) Has ground water sampling been conducted in accordance with the Ground Water Monitoring Plan for the site? ..... ☐ Yes ☐ No

If "**No**", provide justification for deviating from the Ground Water Monitoring Plan and attach additional documentation if needed:

- 3) Do the results of the ground water sampling demonstrate that contaminant concentrations have decreased to or below the applicable Ground Water Quality Standards for two ground water sampling events accounting for seasonal fluctuation at the site pursuant to N.J.A.C. 7:26C-7.9(f)? ..... ☐ Yes ☐ No ☐ N/A

If "**Yes**", then submit a Ground Water RAP Termination Application and skip the rest of this section.

- 4) Is there still a decreasing trend of contaminant concentrations in the ground water? ..... ☐ Yes ☐ No

If "**No**", provide the date of Ground Water RAP Modification submission or the justification supporting the protectiveness of the ground water remedial action in Section L below: \_\_\_\_\_

- 5) Is the **behavior** of the ground water contaminant plume considered to be shrinking or stable? ..... ☐ Yes ☐ No

If "**Yes**", check off only one of the following: ☐ Shrinking ☐ Stable

If "**No**", provide the date of Ground Water RAP Modification submission or the justification supporting the protectiveness of the ground water remedial action in Section L below: \_\_\_\_\_

- 6) Is the ground water plume reaching the sentinel wells or sentinel monitoring points? ..... ☐ Yes ☐ No

If "**Yes**", provide the date of Ground Water RAP Modification submission with the required additional ground water delineation data: \_\_\_\_\_

- 7) Is the ground water remedial action performing as designed? ..... ☐ Yes ☐ No

If "**No**", provide an explanation:

- 8) Has the active ground water treatment system been shutdown for longer than 48-hours since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form? ..... ☐ Yes ☐ No ☐ N/A

If "**Yes**", provide an explanation for the shutdown, including the duration of the shutdown and whether or not the shutdown rendered the Remedial Action not protective of public health, safety and of the environment:

2. Has a Technical Impracticability (TI) Determination been approved? ..... ☐ Yes ☐ No  
 If "Yes", please provide the date of the TI Approval Letter from the Department: .....  
**Attach** a summary of the TI Determination and a 5-year evaluation, if applicable.
3. Since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form, has any ground water contamination been determined to have migrated onto the site/property from an off-site source that is not included in the Ground Water RAP? ..... ☐ Yes ☐ No  
 If "Yes", provide the communication center number that was received when called into the Hotline and a discussion of the issue below.  
 Hotline Communication Center Number: .....  
 Discussion: .....
4. Has the ground water flow direction changed at the site such that the sentinel well(s) is no longer downgradient and protective of all receptors? ..... ☐ Yes ☐ No  
 If "Yes", provide the date of Ground Water RAP Modification submission with the required additional ground water delineation data: .....
5. Has the CEA/WRA been revised for any reason that did not require conducting additional remediation? ..... ☐ Yes ☐ No  
 If "Yes", provide the date of Ground Water RAP Modification submission: .....
6. Did the Municipal Block and Lot number(s) of the CEA/WRA change since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form? ..... ☐ Yes ☐ No  
 If "Yes", attach a current Tax Map of the property and list the former and new Municipal Block and Lot numbers of the CEA/WRA below:  
 Former Municipal Block and Lot Number(s): .....  
 New Municipal Block and Lot Number(s): .....
7. Did you provide hard copies of this form to the municipal and county clerks for each municipality and county in which the CEA/WRA is located; the local, county and regional health department for each municipality and county in which the CEA/WRA is located; each current owner of the site; each current operator of the site; each current property owner within the footprint of the CEA/WRA; the Pinelands Commission or the Highlands Commission, as applicable? ..... ☐ Yes ☐ No
8. Have any monitoring wells associated with the CEA/WRA been damaged, vandalized, repaired, replaced, decommissioned, or could not be located? ..... ☐ Yes ☐ No  
 If "Yes", describe what occurred and attach additional documentation as necessary (i.e., maintenance and evaluation logs for all the monitoring wells, a copy of any Well Abandonment Report(s), construction specifications for each new/replacement well, documentation that the Bureau of Water Allocation and Well Permitting was contacted for any monitoring wells that could not be located, etc.): .....

9. Has a replacement monitoring well(s) been installed since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form? ..... ☐ Yes ☐ No

If "Yes", was the replacement well installed within 10 feet of the former well location? ..... ☐ Yes ☐ No

If "No", then either:

Provide the justification supporting the protectiveness of the ground water remedial action in Section L below

or

Provide the date of the Ground Water RAP Modification Application submission:.....

**Attach** the construction specifications for each new well.

10. Since the Ground Water RAP was issued, did the comparison conducted pursuant to N.J.A.C. 7:26C-7.9(b)2 require the submission of a Ground Water RAP Modification Application? ..... ☐ Yes ☐ No

If "Yes", provide the date of Ground Water RAP Modification Application Submission:.....

11. Did the comparison conducted above reveal a change in the Ground Water Quality Standards? ..... ☐ Yes ☐ No

If "Yes", did the Ground Water Quality Standards change by an order of magnitude? ..... ☐ Yes ☐ No

If "Yes", does the change require a modification of the Ground Water RAP? ..... ☐ Yes ☐ No

If "Yes", provide the date of Ground Water RAP Modification Application Submission:.....

**Attach** a contaminant concentration table that compares the GWQS changes and order of magnitude analysis.

**Contaminants of Emerging Concern (CECs):** The permittee(s) is required to evaluate whether there is the potential that the compounds listed below may have been manufactured, used, handled, stored, disposed or discharged at the AOC(s) associated with the Ground Water RAP. Evaluation does not mean analysis. Evaluation means using your professional judgement to determine if the compounds are potential contaminants of concern at the AOC(s) associated with the Ground Water RAP. The evaluation of these compounds should be the same as any other compound. Additional information on CECs can be found at <https://dep.nj.gov/srp/emerging-contaminants/>.

12. Is 1,4-dioxane a potential contaminant of concern at the AOC(s) associated with the Ground Water RAP and does it require further remedial investigation? ..... ☐ Yes ☐ No

13. Is perchlorate a potential contaminant of concern at the AOC(s) associated with the Ground Water RAP and does it require further remedial investigation? ..... ☐ Yes ☐ No

14. Are per- and polyfluoroalkyl substances (PFAS), including but not limited to perfluorononanoic acid (PFNA), perfluorooctanoic acid (PFOA), and perfluorooctane sulfonic acid (PFOS) potential contaminants of concern at the AOC(s) associated with the Ground Water RAP and does it require further remedial investigation? ..... ☐ Yes ☐ No

15. Is 1,2,3-trichloropropane (1,2,3-TCP) a potential contaminant of concern at the AOC(s) associated with the Ground Water RAP and does it require further remedial investigation? ..... ☐ Yes ☐ No

**Attach** the results of the required emerging CECs evaluation:

If "Yes" to any of the questions 12 to 15 above, then provide a discussion of how this issue is being addressed:

## SECTION H. SITE USE, CHANGES, AND DISTURBANCES

1. Indicate current site use:

- |                                      |  |   |                                       |
|--------------------------------------|--|---|---------------------------------------|
| <input type="checkbox"/> Industrial  | <input type="checkbox"/> Child Care Facility | <input type="checkbox"/> Park or Recreational Use | <input type="checkbox"/> Solar Panels |
| <input type="checkbox"/> Residential | <input type="checkbox"/> Hospital            | <input type="checkbox"/> Vacant                   | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Commercial  | <input type="checkbox"/> Landfill            | <input type="checkbox"/> Government Facility      |                                       |
| <input type="checkbox"/> School      | <input type="checkbox"/> Agricultural        | <input type="checkbox"/> Road/Right of Way        |                                       |

2. Has the site use(s) changed since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form? ..... ☐ Yes ☐ No

3. Have site use changes occurred or disturbances of the land, such as installation of a detention basin, taken place that has rendered the ground water remedial action not protective of public health, safety and of the environment? ☐ Yes ☐ No

If "Yes", provide the date of the Ground Water RAP Modification Application submission:..... \_\_\_\_\_

## SECTION I. CURRENT OR PLANNED WATER USE WITHIN THE WELL SEARCH AREA

1. Water use within the CEA/WRA when CEA/WRA was established (check all that apply)

- ☐ Potable
- ☐ Well Head Protection Area
  - ☐ Tier 1 ☐ Tier 2 ☐ Tier 3
- ☐ Irrigation
- ☐ Industrial
- ☐ Geothermal
- ☐ Not Applicable

2. Current water use within the CEA/WRA Boundaries (check all that apply)

- ☐ Potable
- ☐ Well Head Protection Area
  - ☐ Tier 1 ☐ Tier 2 ☐ Tier 3
- ☐ Irrigation
- ☐ Industrial
- ☐ Geothermal
- ☐ Not Applicable

3. Are there any planned changes in water use for the aquifers in which the CEA/WRA is located since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form? ..... ☐ Yes ☐ No

Check all the sources that were evaluated to determine planned changes in water use:

- ☐ Municipal Master Plans
- ☐ Zoning Plans
- ☐ Local water purveyor plans and planning data pertaining to the existence of water lines and proposed future installation of water lines, wells or well fields
- ☐ Local and County ordinances restricting installation of potable wells
- ☐ Local and County boards of health
- ☐ Local planning officials

4. Have any changes in water use altered the areal extent or the duration of the CEA/WRA?..... ☐ Yes ☐ No

5. Has the required well search identified any wells installed within one mile up-gradient, side-gradient, and down-gradient of the CEA/WRA since the last submittal of the Ground Water Remedial Action Protectiveness/Biennial Certification Form? ..... ☐ Yes ☐ No

Attach the results of the required updated well search to this form, including a scaled map and a table indicating which wells were previously evaluated.

If "Yes", check all that apply:

- |                                     |                                     |  |                                     |
|-------------------------------------|-------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Potable    | <input type="checkbox"/> Industrial | <input type="checkbox"/> Community Supply Well     | <input type="checkbox"/> Irrigation |
| <input type="checkbox"/> Geothermal | <input type="checkbox"/> Production | <input type="checkbox"/> Non-Community Supply Well |                                     |

If you checked one of the above, was it necessary to sample the well pursuant to N.J.A.C. 7:26 E-1.14?..... ☐ Yes ☐ No

6. Did or will the actual or planned changes reported in items 1-5 above render the remedial action that includes the CEA/WRA not protective of public health, safety and of the environment? ..... ☐ Yes ☐ No
- If "Yes", provide the date of the Ground Water RAP Modification Application submission: ..... \_\_\_\_\_
7. Are any Point of Entry Treatment (POET) water systems currently installed at any buildings as a result of this ground water contamination? (If a POET water system was installed, but not required for the remediation, check "No") ..... ☐ Yes ☐ No
- If "Yes", attach the ground water sampling results and provide a discussion of this issue below:

**Note:** A Ground Water RAP Modification Application should be submitted if the POET water system was installed as a result of ground water contamination and it is not included in the Ground Water RAP for the site.

#### SECTION J. VAPOR INTRUSION

1. Are compounds of potential vapor intrusion concern included in the CEA/WRA? ..... ☐ Yes ☐ No
- If "Yes", then complete this section; otherwise proceed to the next section
2. Based on the most recent data available or ground water data collected for the Ground Water Remedial Action Protectiveness/Biennial Certification Form, are any contaminants of concern currently above the Vapor Intrusion Ground Water Screening Levels that require a vapor intrusion investigation pursuant to N.J.A.C. 7:26E-1.15? ..... ☐ Yes ☐ No
- If "Yes", attach a table with the vapor intrusion sampling results, a scaled site map indicating the location of all structures investigated for vapor intrusion, and provide a discussion of those results below or provide a written explanation with the reasons for not evaluating the vapor intrusion pathway.
3. Were there any changes in property use for the site or surrounding properties that required a vapor intrusion investigation pursuant to N.J.A.C. 7:26C-7.9(b)7? ..... ☐ Yes ☐ No
- If "Yes", attach a table with the vapor intrusion sampling results, a scaled site map indicating the location of all structures investigated for vapor intrusion, and provide a discussion of those results below or provide a written explanation with the reasons for not evaluating the vapor intrusion pathway:



4. Have any vapor intrusion engineering controls/mitigation systems been installed as a result of this ground water contamination? (If a system was installed, but not required for the remediation (i.e., there is not a complete VI pathway requiring the system), check "No") ..... ☐ Yes ☐ No

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

- ☐ Sub-Slab Depressurization System  
☐ Subsurface Ventilation System  
☐ Soil Vapor Extraction System  
☐ HVAC Positive Pressure  
☐ Other (specify): \_\_\_\_\_

**Attach** any vapor intrusion sampling results as required from the OMM Plan for the vapor intrusion engineering control(s)/mitigation system(s) for the permit, including the NJDEP Vapor Intrusion Mitigation Monitoring and Maintenance Checklist. Provide a scaled site map that clearly identifies the building(s) and/or structure(s) with the vapor intrusion engineering control(s)/mitigation system(s) in place, including the address and block and lot of each impacted property.

**Note:** A Ground Water RAP Modification Application should be submitted if the vapor intrusion engineering controls/mitigation systems is not included in the Ground Water RAP for the site.

5. Is there sub-slab soil gas (SSSG) contamination above the NJDEP's Soil Gas Screening Levels (SGSLs) beneath any buildings that require a VI Long-Term Monitoring (LTM) Plan or a VI Change in Use Evaluation Plan, or both? ..... ☐ Yes ☐ No

If "Yes", check all that apply and answer the question below:

- ☐ SSSG > SGSL and  $\leq 10X$  NJDEP SGSL (VI LTM Plan pursuant to Table 6-2 of the VIT Guidance)  
☐ SSSG >  $10X$  NJDEP SGSL (VI LTM Plan pursuant to Table 6-2 of the VIT Guidance)  
☐ SSSG > NJDEP Residential SGSL for Non-Residential Structure (VI Change in Use Evaluation Plan)

Have annual inspections been completed to determine if building conditions have changed and/or there has been a change in the use? ..... ☐ Yes ☐ No

**Attach** a summary of the building inspections and/or any vapor intrusion sampling results as required from the VI LTM Plan or the VI Change in Use Evaluation Plan for the permit. Provide a scaled site map that clearly identifies the building(s) and/or structure(s) with the VI LTM Plan or the VI Change in Use Evaluation Plan, including the address and block and lot of each impacted property.

**Note:** A Ground Water RAP Modification Application should be submitted if the VI LTM Plan or the VI Change in Use Evaluation Plan is not included in the Ground Water RAP for the site.

6. Are there any buildings with an Indeterminate Vapor Intrusion Pathway status? ..... ☐ Yes ☐ No

If "Yes", have annual inspections been completed to determine if there has been a change in the use? ..... ☐ Yes ☐ No

**Attach** a summary of the inspections and a scale site map clearly identifying the buildings with Indeterminate Vapor Intrusion Pathway status, including the address and block/lot of each building.

**Note:** A Ground Water RAP Modification Application should be submitted if the Indeterminate Vapor Intrusion Pathway status is not included in the Ground Water RAP for the site.

## SECTION K. FINANCIAL ASSURANCE

1. Does the remedial action include a ground water or vapor intrusion engineering control? ..... ☐ Yes ☐ No

If "No", proceed to the next section.

2. Is Financial Assurance required for the site? ..... ☐ Yes ☐ No

If "Yes", attach a completed Remediation Cost Review and RFS/FA Form with a detailed cost estimate.

3. If the Financial Assurance Instrument is a Line of Credit, Remediation Trust Fund, Surety Bond, or Environmental Insurance Policy, have annual statements confirming the value of the Financial Assurance Instrument been submitted pursuant to the permit schedule? ..... ☐ Yes ☐ No
- If “**No**”, attach the annual statements confirming the value of the Financial Assurance Instrument.
4. If the current owner of the site is either a homeowner association or a condominium association, have copies of the annual budget that includes funds for the operation, maintenance, and monitoring of the engineering control(s) at the site been submitted pursuant to the permit schedule? ..... ☐ Yes ☐ No
- If “**No**”, attach copies of the association’s annual budget that includes funds for the operation, maintenance, and monitoring of the engineering control(s) at the site.

#### SECTION L. OTHER INFORMATION PROVIDED

List any other pertinent information to support the Ground Water Remedial Action Protectiveness/Biennial Certification Form. This section should include a discussion of any new information or ground water data as it relates to the protectiveness of the ground water remedial action for the site.

**SECTION M. PERSON WITH PRIMARY CONTACT FOR PERMIT COMPLIANCE / PERSON RESPONSIBLE FOR MONITORING THE PROTECTIVENESS OF THE REMEDIAL ACTION INFORMATION AND CERTIFICATION**

Affiliation/Name of Organization: \_\_\_\_\_

Representative First Name: \_\_\_\_\_ Representative Last Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

This certification shall be signed by the person with primary contact for permit compliance/person responsible for monitoring the protectiveness of the remedial action in accordance with the 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.*

*I also understand that engineering and institutional controls must be evaluated and maintained to ensure they remain protective of public health and safety and the environment.*

*Based upon the information provided herein, I hereby certify that the remedial action(s) implemented at the site that includes engineering and/or institutional controls remains protective of public health and safety and the environment.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name/Title: \_\_\_\_\_

Completed forms should be emailed to [srp\\_submissions@dep.nj.gov](mailto:srp_submissions@dep.nj.gov)\*.

- \* All Ground Water Remedial Action Protectiveness/Biennial Certification forms associated with a Post-NFA Case must continue to be submitted on a CD by mail with the accompanying fee to the following address:

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

## SECTION N. 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: \_\_\_\_\_