

**ATTACHMENT E**

**FULL LABORATORY DATA DELIVERABLES FORM**



New Jersey Department of Environmental Protection
Site Remediation Program

FULL LABORATORY DATA DELIVERABLES FORM

[X] LSRP [ ] Subsurface Evaluator

Date Stamp
(For Department use only)

SECTION A. SITE NAME AND LOCATION

Site Name: Berry Lane Park (including the former Morris Canal, Chromium Site 121 and Chromium Site 207 (COPR))

List all AKAs:

Street Address: see attached list

Municipality: Jersey City (Township, Boro or City)

County: Hudson Zip Code: 07304

Program Interest (PI) Number(s): 568229 Case Tracking Number(s): 66628 (Chromium Site 121)

SECTION B. NJDEP CASE MANAGER

80621 (Chromium Site 207)

Do you have an assigned Case Manager? [ ] Yes [X] No

If "Yes," please list the Case Manager:

SECTION C. REMEDIAL PHASE

- [ ] Immediate Environmental Concern [ ] Preliminary Assessment Report
[ ] Site Investigation Report [ ] Remedial Investigation/Remedial Action Work Plan
[X] Remedial Action Report [ ] Response Action Outcome

SECTION D. Matrix Type/Analysis and Number of Samples

- [ ] Potable Well Water # of samples: Sampling Date:
Analytical Method(s)
[ ] Indoor Air # of samples: Sampling Date:
Analytical Method
[ ] Polychlorinated dibenzo-p-dioxins/polychlorinated dibenzofurans # of samples: Sampling Date:
Analytical Method
[X] Hexavalent chromium soil sample # of samples: 529 Sampling Date: various
Analytical Method Method 3060 Method 7196A
[ ] Other # of samples: Sampling Date:
Analytical Method
[ ] Other # of samples: Sampling Date:
Analytical Method
[ ] Other # of samples: Sampling Date:
Analytical Method

SECTION E. GENERAL

- 1. Was a full laboratory data deliverables package provided? [X] Yes [ ] No
2. Was a certified laboratory(s) used for the analyses? [X] Yes [ ] No
Provide name of laboratory(s): Integrated Analytical Laboratories
3. Were data summaries provided for all samples? [X] Yes [ ] No
4. Were electronic deliverables submitted? [X] Yes [ ] No
5. For air sample data, were the TO-15 Conversion Tables (hit-lists) provided on disc in the
appropriate Excel format pursuant to the VIG? [ ] Yes [ ] No

**Section F. Data Quality Assurance/Quality Control**

1. Were the appropriate sample preservation requirements met? .....  Yes  No
2. Were appropriate sample holding times (for both extraction/sample preparation and analysis) met? .....  Yes  No  
If "No," provide a brief explanation.

In some cases the hold time for the trip blank or field blanks were exceeded.

E12-09282-015; E12-09485-020; E12-09799-013; E12-10333-022; E12-10497-021; E12-10704-029;  
E12-10759-018; E12-10815-024; E12-11247-008

3. Were the samples diluted? .....  Yes  No  
Indicate the identity of the samples and why.

4. If applicable, did sample dilutions result in elevated reporting limits that exceed applicable standards?..  Yes  No  
If "Yes," list the affected samples.

5. Were any applicable standards exceeded for any samples? .....  Yes  No  
If "Yes," include the number of samples and laboratory sample identification numbers.

6. Were the laboratory reporting limits below the applicable remediation standards/criteria required for the site? .....  Yes  No  
If "No," provide a brief explanation of action taken.

7. Were qualifications noted in the non-conformance summary? .....  Yes  No  
Provide a brief explanation.  
- Trip blank or field blank was analyzed out of hold.  
- the reported mdl result is estimated  
- the reported result is estimated  
- matrix spikes recovery was below method limits

8. Were qualified data used? .....  Yes  No

9. Were rejections noted in the non-conformance summary? .....  Yes  No  
Provide a brief explanation.

- Recoveries for soluble and insoluble spike and the post-spike samples were below method limits in both the initial and re-analyses. Reported non-detect results were rejected, 'R', per NJDEP DV protocol requirements. Samples exhibited reducing or oxidizing matrices, based on the ORP characteristics. Samples within lab packages E12-09862, E13-00226, E13-00438, E13-00745, E13-01344 and a portion of E13-01633 exhibited reducing characteristics which is unlikely to support the presence of hexavalent chromium subsequently this data was judged useable. Samples E13-01633-009, E13-01633-013 and E13-01633-015 exhibiting oxidizing matrices were rejected but are presented solely for informational purposes as the confirmatory sampling within the area of these samples was in excess of NJDEP requirements of one sample every 900 square feet.

10. Were rejected data used? .....  Yes  No

If "Yes," please indicate reasons rejected data were used:

- For Hex Chrome, data were rejected because spike recovery was less than 50%.
- Data were rejected due to missing deliverables.
- Data were rejected but an applicable standard exceedance exists.
- Data were rejected in an early phase of a remediation; however, additional sampling and analysis are scheduled to be performed.
- Other reasons not noted directly above. Explain:

11. Were the quality control criteria associated with the compounds of concern at the site met?.....  Yes  No

12. Were the QC Summary Forms reviewed?.....  Yes  No

13. Surrogate recoveries acceptable.....  Yes  No

14. Internal Standards acceptable.....  Yes  No

15. MS/MSDs acceptable.....  Yes  No

16. Tune summaries acceptable.....  Yes  No

17. Calibration summaries acceptable.....  Yes  No

18. Serial dilutions acceptable.....  Yes  No

19. Inorganic duplicates acceptable.....  Yes  No

20. LCS recovery acceptable.....  Yes  No

21. Other QC acceptable?.....  Yes  No

Provide a brief explanation if applicable:

**SECTION G. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION INFORMATION AND CERTIFICATION**

Full Legal Name of the Person Responsible for Conducting the Remediation: Jersey City Redevelopment Agency

Representative First Name: David Representative Last Name: Donnelly

Title: Executive Director

Phone Number: (201) 761-0821 Ext: NA Fax: \_\_\_\_\_

Mailing Address: 66 York Street, 2nd Floor

City/Town: Jersey City State: New Jersey Zip Code: 07302

Email Address: ddonnelly@jcnj.org

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: 6/15/2016

Name/Title: David Donnelly/Executive Director No Changes Since Last Submittal

**SECTION H. LICENSED SITE REMEDIATION PROFESSIONAL INFORMATION AND STATEMENT**

LSRP ID Number: 585012

First Name: John F. Last Name: Tregidgo

Phone Number: (973) 696-2600 Ext: 348 Fax: (973) 696-1362

Mailing Address: 55 Lane Road, Suite 220

City/Town: Fairfield State: New Jersey Zip Code: 07004

Email Address: jtregidgo@dresdnerrobin.com

This statement shall be signed by the LSRP who is submitting this notification in accordance with SRRA Section 16 d. and Section 30 b.2.

*I certify that I am a Licensed Site Remediation Professional authorized pursuant to N.J.S.A. 58:10C to conduct business in New Jersey. As the Licensed Site Remediation Professional of record for this remediation, I:*

**[SELECT ONE OR BOTH OF THE FOLLOWING AS APPLICABLE]:**

- directly oversaw and supervised all of the referenced remediation, and/or*  
 *personally reviewed and accepted all of the referenced remediation presented herein.*

*I believe that the information contained herein, and including all attached documents, is true, accurate and complete.*

*It is my independent professional judgment and opinion that the remediation conducted at this site, as reflected in this submission to the Department, conforms to, and is consistent with, the remediation requirements in N.J.S.A. 58:10C-14.*

*My conduct and decisions in this matter were made upon the exercise of reasonable care and diligence, and by applying the knowledge and skill ordinarily exercised by licensed site remediation professionals practicing in good standing, in accordance with N.J.S.A. 58:10C-16, in the State of New Jersey at the time I performed these professional services.*

*I am aware pursuant to N.J.S.A. 58:10C-17 that for purposely, knowingly or recklessly submitting false statement, representation or certification in any document or information submitted to the board or Department, etc., that there are significant civil, administrative and criminal penalties, including license revocation or suspension, fines and being punished by imprisonment for conviction of a crime of the third degree.*

LSRP Signature: 

Date: 6/22/2016

LSRP Name/Title: John F. Tregidgo/Senior Project Manager

No Changes Since Last Submittal

Company Name: Dresdner Robin

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