



New Jersey Department of Environmental Protection
Site Remediation Program

REMEDIAL INVESTIGATION REPORT FORM

Non-LSRP (Existing Cases) 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, Chromate Site 207 and Chromate Site 121)

List all AKAs: _____

Street Address: See Attachment A

Municipality: Jersey City (Township, Borough or City)

County: Hudson Zip Code: 07304

Program Interest (PI) Number(s): Berry Lane Park - G000003012 Case Tracking Number(s): not applicable

Chromate Site 207- G000044579; Chromate Site 121 - G000008738
Date Remediation Initiated Pursuant to N.J.A.C. 7:26C-2.2 or 2.3(b): 11/15/2010

State Plane Coordinates for a central location at the site: Easting: 611722 Northing: 684549

Municipal Block(s) and Lot(s):

Block # see Attachment A Lot # _____ Block # _____ Lot # _____

Block # _____ Lot # _____ Block # _____ Lot # _____

Block # _____ Lot # _____ Block # _____ Lot # _____

Block # _____ Lot # _____ Block # _____ Lot # _____

SECTION B. REQUIRED SUBMITTALS

	Not Applicable	Included in this Submission	Previously Submitted	Date of Submission	Date of Revised Submission
Annual Remediation Fee Reporting Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Immediate Environmental Concern Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
IEC Engineered System Response Action Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Vapor Concern Mitigation Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
LNAPL Interim Remedial Measure Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Preliminary Assessment Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Receptor Evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	08/25/2011	
Site Investigation Report	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	02/28/2011	
Remedial Investigation/Remedial Action Work Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Remedial Action Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Response Action Outcome Report	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Alternative Soil Remediation Standard Application	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Case Inventory Document	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Permit Application – list:	<input checked="" 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"/>		
	<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"/>		

SECTION C. SITE USE

Current Site Use (check all that apply)

- Industrial
- Residential
- Commercial
- School or child care
- Other _____
- Agricultural
- Park or recreational use
- Vacant
- Government

Intended Future Site Use, if known (check all that apply)

- Industrial
- Residential
- Commercial
- School or child care
- Park or recreational use
- Vacant
- Government
- Future site use unknown

SECTION D. PUBLIC FUNDS

Did the remediation utilize public funds? Yes No

- If "Yes," check applicable:
- UST Grant
 - HDSRF Grant
 - Spill Fund
 - UST Loan
 - HDSRF Loan
 - Schools Development Authority
 - Brownfield Reimbursement Program
 - Landfill Reimbursement Program

SECTION E. SCOPE OF THE REMEDIAL INVESTIGATION REPORT

- Area(s) of Concern Only (If submitted for specific AOC(s))
- Entire Site (based on a completed and submitted Preliminary Assessment/Site Investigation)

Is the Remedial Investigation complete? Yes No

Provide date: _____

Number of contaminated AOCs 3

SECTION F. SITE CONDITIONS

1. Check each media-type and highest concentration of contamination currently present above any applicable standards/criteria at the time of remedial investigation:

	Soil in ppm				GW = Ground Water in ppb				SW = Surface Water in ppb				Sed = Sediment in ppm			
	Soil ppm	GW ppb	SW ppb	Sed ppm	Soil ppm	GW ppb	SW ppb	Sed ppm	Soil ppm	GW ppb	SW ppb	Sed ppm	Soil ppm	GW ppb	SW ppb	Sed ppm
*VOCs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	100-1,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	>1,000	
*SVOCs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	100-1,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	>1,000	
*PAHs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10-100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	>100	
*Metals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	100-1,000	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	>1,000	
PCBs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10-100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	>100	
*Pesticides	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	>10	
Dioxin (ppb)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<1 ppb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-10 ppb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	>10 ppb	
Chromium	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	100-1,000	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	>1,000	
Mercury	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<100	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	100-1,000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	>1,000	
Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<10	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10-100	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	>100	
TPHC	<input type="checkbox"/>			<input type="checkbox"/>	<1,700	<input type="checkbox"/>			<input type="checkbox"/>	1,700-5,100	<input type="checkbox"/>			<input type="checkbox"/>	>5,100	

2. For any contaminant group (*) checked above, identify the compound/element with the highest concentration over its applicable remediation standard:

GW-Tetrachloroethene _____ S - Aluminum / GW - Sodium GW - Dieldrin _____

3. Were the laboratory reporting minimum detection limits below applicable remediation standards/criteria required for the site? Yes No

4. Are any of the following conditions currently present? (check all that apply)

Ground water:

- Contaminated ground water in the overburden aquifer
- Contaminated ground water in a confined aquifer
- Contaminated ground water in the bedrock aquifer
- Contaminated ground water in multiple aquifer units
- Multiple distinct ground water plumes
- Contaminated ground water migrating off-site
- Background ground water contamination
- Contaminated ground water discharging to surface water
- Residual or free product
- Radionuclides

Soil:

- On-site discharge(s) impacting soil off-site
- Chromate Production Waste
- Munitions and explosives of concern
- Contaminated soil in the saturated zone
- Historic pesticide impacts to soil
- Residual or free product
- Radionuclides
- Historic Fill
- Soil contamination due to naturally occurring background conditions

SECTION G. APPLICABLE REMEDIATION STANDARDS

Indicate the Remediation Standards used for all compounds (check all that apply)

- Default (check all that apply below)
 - Direct Contact Impact to Ground Water Soil Screening Levels Ecological Screening Levels
 - Alternate Remediation Standards for the Ingestion/Dermal Pathway
 - Alternate Remediation Standards for the Inhalation Pathway
 - Site Specific Standards for the Impact to Ground Water Pathway (check all that apply)
 - Soil-Water Partitioning Equation SPLP Sesoil Sesoil/AT123D
 - DAF Modification Immobile Chemicals List Soil and Ground Water Analytical Data Evaluation
 - Ecological Remediation Goals

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 H. BACKGROUND CONDITIONS

Did the RI demonstrate via a background investigation, outside the influence of on-site AOCs and operational areas, that:

1. all or any part of the ground water contamination is migrating onto this site per N.J.A.C. 7:26E-3.7(g)?..... Yes No NA
2. soil contamination is naturally occurring per N.J.A.C. 7:26E-3.10..... Yes No NA

SECTION I. ALTERNATIVE STANDARD / DEVIATIONS Not Applicable

Alternative remediation standard

If proposing an alternative remediation standard pursuant to N.J.A.C. 7:26D-7.4, check here and attach the Alternative Soil Remediation Standard Application Form as an addendum.

A site-specific screening level was developed for the evaluation of the VI pathway Yes No

Deviation from regulations

If the Licensed Site Remediation Professional has varied from the Technical Rules, provide the citation(s) from which the remediation varied and the page(s) in the attached document where the rationale for the deviation is provided.

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

SECTION J. HISTORIC FILL

1. The presence of historic fill is supported by (check all that apply):

- Boring logs Test Pits Trenches Aerial Photos NJDEP Mapped Areas
- No historic fill identified at the site. If none, skip to K. below.

2. How was the historic fill characterized pursuant to N.J.A.C. 7:26E-4.6? (check all that apply)
- Samples were collected outside areas potentially impacted by on-site operations (i.e., AOC(s))
- Contaminant levels in Table 4.2 at N.J.A.C. 7:26E-4.6
3. Are any other AOCs (i.e., location of discharge and any contaminants that may have migrated from that area) located within the defined boundaries of the historic fill? Yes No
- If "No," skip to K. below
4. Have the same contaminant type(s) (e.g., lead, arsenic, and/or benzo(a)pyrene, etc.) characterized as being present in the historic fill been **sampled for** as a contaminant of concern at these co-located AOCs? Yes No

SECTION K. GROUND WATER TRIGGER

Was a ground water investigation conducted at all AOCs where a ground water investigation was triggered pursuant to N.J.A.C. 7:26E-3.7 and 4.4(a)? Yes No NA

SECTION L. GROUND WATER REMEDIAL INVESTIGATION INFORMATION

1. Are contaminants present with a specific gravity less than that of water? Yes No
- If "Yes," answer question 1a.
- 1a. Were any monitor wells installed in unconfined aquifers in which the water table is higher than the top of the well screen? Yes No
- If "Yes," identify the affected wells. _____
2. Are contaminants present with a specific gravity greater than that of water? Yes No
- If "Yes," answer question 2a.
- 2a. Were multiple depth discrete ground water samples collected in a vertical profile at each ground water sampling location where dense contaminants were suspected? Yes No
3. Is ground water in the bedrock aquifer contaminated? ^{Unknown} Yes No
- If "Yes," answer questions 3a and 3b.
- 3a. Were bedrock cores collected? Yes No
- 3b. Were geophysical logging methods conducted to characterize the bedrock aquifer pursuant to N.J.A.C. 7:26E-4.4(g)5? Yes No

SECTION M. LABORATORY DATA

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. Comments:

SECTION N. MISCELLANEOUS

- 1. Were any regulated USTs identified during the course of the RI that were not previously known?..... Yes No
If "Yes," list tank size, contents and registration number(s). _____

- 1a. If "Yes," to item N.1. above and if these USTs were Federally Regulated, was the source/cause of release identified on a Confirmed Discharge Notification form? Yes No
If "No," complete and submit a revised Confirmed Discharge Notification form.
- 2. Were additional Areas of Concern identified during the RI?..... Yes No
If "Yes," identify AOC: _____
- 3. Identify Remedial Measures (RMs) conducted during the RI (check all that apply):
 - Soil excavation
 - Potable water supply treatment or replacement
 - Hydraulic containment of source area
 - Soil vapor extraction
 - Enhanced fluid recovery (EFR)
 - Other(s), specify: _____
 - UST closure
 - Free product recovery
 - Vapor intrusion mitigation
 - No RMs were conducted during the RI
- 4. Did the remedial investigation include sampling to characterize any on-site contaminated media for either on-site or off-site reuse? Yes No
- 5. Has clean fill has been brought onto the site?..... Yes No
If yes, has it been analyzed? Yes No
- 6. Has new information (material facts, data or other information) been generated during the RI that corrects or contradicts information, or changes conclusions from, previously submitted reports or information? Yes No
If "Yes," explain: _____
- 7. Have past deficiencies/notice of deficiencies been addressed in this submittal? *Not Applicable* Yes No

SECTION O. 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: Robert Representative Last Name: Antonicello

Title: Executive Director

Phone Number: (201) 547-5810 Ext: _____ Fax: _____

Mailing Address: 30 Montgomery Street, Suite 900

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

Email Address: antonicellorob@jcnj.org

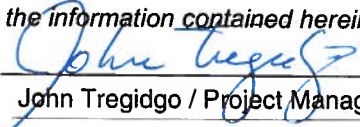
This certification shall be signed by the person responsible for conducting the remediation who is submitting this notification in accordance with Administrative Requirements for the Remediation of Contaminated Sites rule at N.J.A.C. 7:26C-1.5(a).

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: 1/19/12

Name/Title: Robert Antonicello/Executive Director **No Changes Since Last Submittal**

SECTION P. NON-LSRP SITE REMEDIATION PROFESSIONAL STATEMENT

First Name: <u>John</u>	Last Name: <u>Tregidgo</u>	
Phone Number: <u>(201) 217-9200</u>	Ext: <u>240</u>	Fax: <u>(201) 217-9607</u>
Mailing Address: <u>371 Warren Street</u>		
City/Town: <u>Jersey City</u>	State: <u>New Jersey</u>	Zip Code: <u>07303</u>
Email Address: <u>jtregidgo@dresdnerrobin.com</u>		
<i>I believe that the information contained herein, and including all attached documents, is true, accurate and complete.</i>		
Signature: 	Date: <u>1/18/2012</u>	
Name/Title: <u>John Tregidgo / Project Manager</u>	No Changes Since Last Submittal <input checked="" type="checkbox"/>	
Company Name: <u>Dresdner Robin</u>		

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

ATTACHMENT A

<u>Address</u>	<u>Block</u>	<u>Lot</u>	<u>Property ID/Name</u>
65 Woodward Ave.	2040	D3	Property # 1 (65 Woodward Ave.)
948 Garfield Ave.	1948	40	Property # 2 (948 Garfield Ave.)
970, 972, 974, 976, 978, 980 and 984 Garfield Ave.	1948	25B, 26, 28, 29, 31 and 32	Property # 3 (City of Jersey City)
958, 960, 964 and 966 Garfield Ave.	1948	34, 35 and 36A	Property # 4 (Garfield Junk Yard) also known as Chromium Site 121
942, 944 and 946 Garfield Ave.	1948	4B, 25C, 41A and 42A	Property # 5 (Hit or Miss) with a portion also known as Chromium Site 207
968 Garfield Ave.	1948	33	Property # 6 (MAOK)
990 Garfield Ave.	1948	24A	Property # 7 (Purple Fish)
1000 Garfield Ave.	1948	21 D	Property # 8 (1000 Garfield Ave.)
75 Woodward Ave.	2040	D2	Property # 9 (75 Woodward Ave.)
1 Berry Road	2040 and 2057	EDUP, E1/G1, J1, K, H, APL and 16	Property # 10 (Finch Oil)
125 Woodward Street	2040	C16 and C18	Property # 12 (Woodward Metals)