	New Jersey Department of Environmental Protection Site Remediation Program REMEDIAL ACTION REPORT FORM	Date Stam (For Department	•
SE	CTION A. SITE		
Site	e Name: Hudson County Chrome Site 65		
Pro	ogram Interest (PI) Number(s): <u>G000008693</u>		
Cas	se Tracking Number(s) for this submission:		
	This form must be attached to the Cover/Certification	on Form	
SE	CTION B. SCOPE OF REMEDIAL ACTION REPORT		
1.	Does the RAR address: Area(s) of Concern (AOCs) Only Entire Site (Based on a completed and submitted Preliminary Assessment/Site Total number of contaminated AOCs associated with the case: <u>1</u>	Investigation)	
3.	Total number of contaminated AOCs addressed in this submission: 1		
4.	Are there any outstanding contaminated AOCs associated with the case where the reaction has <u>NOT</u> been performed?		🗌 No
5.	Does this RAR address a discharge/release from a federally regulated UST?	🗌 Yes	X No
Wh	nen answering the remaining questions on this form consider only the AOCs add	lressed in this submis	sion.
SE	CTION C. GENERAL		
1.	Does this submission include Remedial Action Permit Application(s) that require Site Program approval? Was a remediation initiated after May 6, 2010, for new construction / change in the u	X Yes	🗌 No
	of the site proposed for the purpose of residential use, use as a licensed child care or use as a school?	enter	🔀 No
	If "Yes," was an unrestricted use or a presumptive remedy implemented?	🗌 Yes	🗌 No
3.	Was an alternative remedy approved by the NJDEP?	🗌 Yes	🗙 No
	If "Yes," provide the date of the approval:		
4.	Has the remediation varied from the Technical Rules?	🗌 Yes	🗙 No
	If "Yes." provide the citation(s) from which the remediation has varied and the page(s attached document where the rationale for the variance is provided.) in the	
	N.J.A.C. 7:26E Page		
	N.J.A.C. 7:26E Page		
	N.J.A.C. 7:26E Page		
5.	Were the laboratory Reporting Limits below applicable remediation standards/screen criteria required for the contaminants of concern for the AOCs addressed in this subr		🗌 No
6.	Have past NJDEP-documented deficiencies been addressed in this submission?	Yes 🗌 No	X N/A
7.	Did the remediation deviate from that proposed in the Remedial Action Workplan?	🗌 Yes	🗙 No
	If "Yes," specify the section/page(s) in the report where the deviation(s) are discussed	d:	
8.	Did the remedial action render the property unusable for future redevelopment or for recreational use (N.J.A.C. 7:26C-6.4(b)?	🏾 Yes	🔀 No

SECTION D. SITE CONDITIONS						
1.	At any time, was there any radiological cont this submission?				🗌 Yes	🗙 No
2.	At any time, did any of the AOCs addressed Unexploded Ordnance (OE/UXO)?					🗙 No
3.	Did the remedial action involve containment	of free product?			🗌 Yes	🗙 No
4.	Has dioxin been detected at levels above N of 50 ppt dioxin TEQ (TCDD Toxicity Equivathis submission?	alence Quotient) ir	n any AOCs addres	sed in	🗌 Yes	🔀 No
5.		e any of the following contaminants <i>ever</i> been detected in sediment above the ogical screening levels at the AOCs addressed in this submission?			🗌 Yes	🗙 No
	If "Yes," check all that apply:					
	Arsenic Dioxin Mer	cury 🗌 PCE	Bs 🗌 Pesticide	es		
6.	Is remediation complete in all affected medi	a at the AOCs ad	dressed in this subr	nission?	🗌 Yes	🗙 No
7.	Did contaminants from the AOCs addressed	d in this submissio	on discharge to surfa	ace water?	🗌 Yes	🗙 No
8.	Did contaminants from the AOCs addressed Sensitive Natural Resource (ESNR)?		0		🗌 Yes	🔀 No
9.	Are any of the following conditions currently	present for the A	OCs addressed in t	his submission?	(check all tha	t apply):
	Groundwater: Contaminated ground water in the overbu Contaminated ground water in a confined Contaminated ground water in the bedrood Contaminated ground water in multiple ad Multiple distinct ground water plumes Contaminated ground water migrating off Natural background ground water contam Contaminated ground water discharging t Environmentally Sensitive Natural Resourd Residual or free product Radionuclides	aquifer k aquifer quifer units site ination o surface water o	 Chromate (Munitions a Contamina Historic pes Residual or Radionuclio r Historic Fill Natural bac Natural bac Remediation 		tion Waste/C concern turated zone soil ove Impact to Direct Contac	OPR
1.	 SECTION E. APPLICABLE REMEDIATION STANDARDS 1. Were Default Remediation Standards used for all contaminants?					
	 Impact to Ground Water Soil Screeni Ecological Screening Levels 	ng Levels				
2.	Has compliance averaging been utilized to determine compliance with the Soil Remediation Standards?			🗙 No		
	If "Yes," check all that apply:	Compliance Averaging Method Utilized				
	Spatially					
	Pathway	Arithmetic Mean	95 Percent UCL	Weighted Average	75 Percent/ 10X Procedure	<u>e</u>
	 Ingestion-Dermal Pathway Inhalation Pathway Impact to Ground Water Pathway 					_

 Has a compliance option been utilized to determine compliance w Pathway? (If "Yes," check all that apply) 	·	🗙 No
 Immobile Compounds Data evaluation for metals and semi-volatiles Data evaluation for volatile organics derived from discharge 	es of petroleum mixtures	
4. Was an interim standard used for a contaminant where a standard	does not exist? Yes	🗙 No
5. Were Alternate Remediation Standards used for the Ingestion/Der	mal Pathway? Yes	🗙 No
6. Were Alternate Remediation Standards used for the Inhalation Pa	thway? 🏾 Yes	🗙 No
Were Site Specific Standards used for the Impact to Ground Wate If "Yes," check all that apply:	r Pathway? 🏼 Yes	🗙 No
Soil-Water Partitioning Equation SPLP Sesc DAF Modification	il 🗌 Sesoil/AT123D	
8. Were Site Specific Ecological Remediation Goals used?	🗌 Yes	🗙 No
9. What is the ground water classification for this site as per N.J.A.C. □ Class I-A X Class II-// □ Class I-PL Pinelands Protection Area □ Class III-// □ Class I-PL Pinelands Preservation Area □ Class III-//	A	
SECTION F. ALTERNATIVE AND CLEAN FILL USE		
1. Was alternative fill used?	☐ Yes	🔀 No
2. Was clean fill used?		X No
3. Was material sent off-site for use as alternative and/or clean fill?	_	X No
If "Yes," specify the section/page in the RAR where it states the S		
alternative and/or clean fill:		
4. Was material sent off-site for use as alternative and/or clean fill at	a non-SRP site? 🏼 Yes	🗙 No
If "Yes," specify the section/page in the RAR where it states the no	Ũ	
alternative and/or clean fill:		
5. Was alternative fill used in excess of the amount required for the r	emedial action? 🏼 Yes	🗙 No
If "Yes," was the NJDEP's preapproval obtained pursuant to N.J.A	.C. 7:26E-5.2(b)3? Yes	🗌 No
SECTION G. REMEDIAL ACTION REPORT INFORMATION		
Soils		
 Did the remedy include a remedial action for soils? If "No," skip to Ground Water 	🛛 Yes	🗌 No
2. Is a restricted use required?	🗙 Yes	🗌 No
If "Yes," indicate the type of restriction being implemented. Notice	in Lieu of Deed Notice; capping	
 If applicable, has consent from all involved property owners been engineering controls)? 		🗌 No
4. Was an engineering control required?		🗌 No
If "Yes," indicate the receptor(s) each engineering control is intend Human Ecological Offsite Impacts	led to protect. (check all that apply)	
Ground Water5. Did the remedy include a remedial action for ground water?		X No
If "No," skip to Ecological		
6. Is a restricted use required for ground water?	Yes	🗌 No

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7.	Is a revised CEA required?	. 🗌 Yes	🗌 No
8.	Do any contaminant levels in ground water currently exceed the vapor intrusion ground water trigger?	. 🗌 Yes	🗌 No
Ecological			
9.	Did the remedy include a remedial action for Environmentally Sensitive Natural Resources (ESNRs)?		🗙 No
	If "No," skip to Indoor Air		
10	. Was post-remedial sampling performed to determine whether contaminant levels currently meet ecological screening levels or ecological remediation goals?	. 🗌 Yes	🗌 No
11	. Did the remedial action require filling of State open waters or wetlands?	. 🗌 Yes	🗌 No
12.	. Have ecological risk-based remediation goals been developed?	. 🗌 Yes	🗌 No
	If "Yes," have the ecological risk-based remediation goals been approved by NJDEP?	. 🗌 Yes	🗌 No
13	. Have Risk Management Decision (RMD) goals been developed?	. 🗌 Yes	🗌 No
	If "Yes," have the RMD goals been approved by NJDEP?	. 🗌 Yes	🗌 No
	Have any vapor intrusion engineering controls/mitigation systems been installed in order to mitigate a vapor condition in a structure? If "Yes," check each type of engineering control that was implemented: Subsurface Depressurization System Subsurface Ventilation System Soil Vapor Extraction System HVAC Positive Pressure Other (specify):	. 🗌 Yes	⊠ No
	CTION H. 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?	X 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		No
3.	How was it determined that the data complied with the QA/QC requirements?		
	∠ Laboratory non-conformance summary/narrative		
	⊠ Laboratory correspondence		
	ISRP review Independent contractor review		
Л	X Other: Data underwent full validation by APTIM (f/k/a CB&I) Has any data been qualified and used?		
4. 5			∐ No ⊠ No
5. 6	Has any data been rejected and used?		
6.	Provide the page number for the "Reliability of Data" section of the report: 6-1		