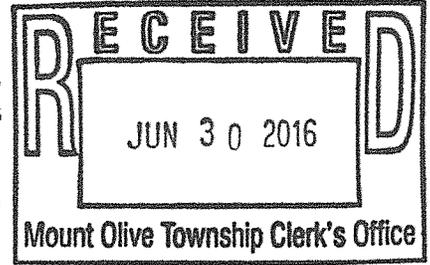


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6/30/16 } CC: Blog.  
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**LETTER OF TRANSMITTAL**

**TO:** Ms. Lisa Lashway  
Mount Olive Township Clerk  
PO Box 450  
Budd Lake, NJ 07828

**DATE:** 6/24/16

**WE ARE SENDING:**

**DESCRIPTION:** Receptor Evaluation and Public Notification

**PREPARED BY:** BL

**REMARKS:**  
Dear Ms. Lashway  
Included in this submittal please find the Receptor Evaluation and Public Notification for the following Site:

Sunrise Cleaners  
100 Route 46  
Mount Olive Twp, NJ 07828  
PI # 017144, Incident # 15-12-03-1219-10

RESPECTFULLY,

Brian Lettini, PG, LSRP  
Senior Project Manager  
JK Environmental Services, LLC.





**New Jersey Department of Environmental Protection**  
**Site Remediation Program**

**PUBLIC NOTIFICATION AND OUTREACH**

Date Stamp  
 (For Department use only)

**SECTION A. SITE LOCATION**

Site Name: Sunrise Cleaners

List all AKAs: The Village Green

Street Address: 100 Route 46

Municipality: Mount Olive (Township, Borough or City)

County: Morris Zip Code: 07828

Mailing Address if different than street address: 1124 East Ridgewood Ave, Suite 101 Ridgewood, NJ 07450

Program Interest (PI) Number(s): 017144

Case Tracking Number(s) for this submission: 15-12-03-1219-10

Date Remediation Initiated Pursuant to N.J.A.C. 7:26C-2: 12/03/2015

State Plane Coordinates for a central location at the site: Easting: 429542 Northing: 748358

Municipal Block(s) and Lot(s):

Block # <u>102</u>	Lot # <u>4</u>	Block # _____	Lot # _____
Block # _____	Lot # _____	Block # _____	Lot # _____
Block # _____	Lot # _____	Block # _____	Lot # _____
Block # _____	Lot # _____	Block # _____	Lot # _____

**SECTION B. NOTIFICATION INFORMATION**

1. Indicate the type of Public Notification:

Initial  Update

2. Public notification was provided via: (Check all that apply)

Sign..... Yes  No

Letter..... Yes  No

Fact sheet..... Yes  No

3. Were materials produced in a language other than English? ..... Yes  No

If "Yes," in what other language was notification prepared? \_\_\_\_\_

4. Were copies provided to municipal clerk, local/county health dept., and local health agency? ..... Yes  No

5. Did you provide an electronic copy of all required submittals? ..... Yes  No

6. Was public notification conducted using an alternate plan and is the rationale for this plan included? ..... Yes  No

7. Was additional public outreach conducted due to the NJDEP's determination of substantial public interest? ..... Yes  No

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

Full Legal Name of the Person Responsible for Conducting the Remediation: SDK Village Green, LLC

Representative First Name: Raman Representative Last Name: Khosla

Title: CFO

Phone Number: (201) 343-5133 Ext: \_\_\_\_\_ Fax: (201) 343-4521

Mailing Address: 1124 East Ridgewood Ave, Suite 101

City/Town: Ridgewood State: NJ Zip Code: 07450

Email Address: rkhosla@sdkapartments.com

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: 6-17-16

Name/Title: Raman Khosla/CFO

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

LSRP ID Number: 628319

First Name: Brian

Last Name: Lettini

Phone Number: (610) 387-6930

Ext: 104

Fax: (484) 351-8446

Mailing Address: PO BOX 509

City/Town: Lafayette Hill

State: PA

Zip Code: 19444

Email Address: blettini@jkenv.com

This statement shall be signed by the LSRP who is submitting this notification in accordance with SRRRA 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*

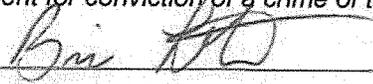
*personally reviewed and accepted all of the referenced remediation presented herein.*

*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: 6/20/16

LSRP Name/Title: Brian Lettini/ Sr. Project Manager

Company Name: JK Environmental Services, LLC

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

**Environmental Investigation/Cleanup  
in Progress at this Site**

**For Further Information, Contact:**

**Mr. Raman Khosla**

**c/o SDK Village Green, LLC**

**(973) 347-0131**

**Licensed Site Remediation Professional:**

**Brian Lettini, LSRP # 628319**

**JK Environmental Services, LLC**

**(610) 387-6930**

**New Jersey Department of Environmental Protection  
Program Interest # 017144**

20

Lottery Tickets

Main Entrance

Lottery Tickets

[Faded text with arrows pointing left and right]

**Environmental Investigation/Cleanup  
in Progress at this Site**

For Further Information, Contact:  
Mr. Raman Khosla  
c/o SOH Village Green, LLC  
(878) 347-0231

Licensed Site Remediation Professional:  
Brian Letton, LSP # 628339  
at Environmental Services, LLC  
(609) 387-6900

New Jersey Department of Environmental Protection  
Program Interest # PJ17144



**New Jersey Department of Environmental Protection  
Site Remediation Program**

**RECEPTOR EVALUATION (RE) FORM**

Date Stamp  
(For Department use only)

**SECTION A. SITE**

Site Name: Sunrise Cleaners

Program Interest (PI) Number(s): 017144

Case Tracking Number(s) for this submission: 15-12-03-1219-10

**This form must be attached to the Cover/Certification Form  
if not submitted through the RIR Online Service**

**Indicate the type of submission:**

Initial RE Submission

Updated RE Submission

Indicate the reason for submission of an updated RE form

Submission of an Immediate Environmental Concern (IEC) source control report;

Submission of a Remedial Investigation Report;

Submission of a Remedial Action Report;

Check if included in updated RE

The known concentration or extent of contamination in any medium has increased;

A new AOC has been identified;

A new receptor is identified;

A new exposure pathway has been identified.

**SECTION B. ON SITE AND SURROUNDING PROPERTY USE**

1. Identify any sensitive populations/uses that are currently on-site or surrounding property usage within 200 feet of the site boundary (check all that apply):

	On-site	Off-site
None of the following .....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Residences or residential property .....	<input type="checkbox"/>	<input type="checkbox"/>
Public or Private Schools grades K-12 .....	<input type="checkbox"/>	<input type="checkbox"/>
Child care centers .....	<input type="checkbox"/>	<input type="checkbox"/>
Public parks, playgrounds or other recreation areas .....	<input type="checkbox"/>	<input type="checkbox"/>
Other sensitive population use(s) Explain _____	<input type="checkbox"/>	<input type="checkbox"/>

If any of the above applies, attach a list of addresses, facility names, type of use, and a map depicting each location relative to the site.

2. Current site uses (check all that apply):

- |   |                                       |   |                                       |
|---|---------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Industrial           | <input type="checkbox"/> Residential  | <input checked="" type="checkbox"/> Commercial    | <input type="checkbox"/> Agricultural |
| <input type="checkbox"/> School or child care | <input type="checkbox"/> Government   | <input type="checkbox"/> Park or recreational use |                                       |
| <input type="checkbox"/> Vacant               | <input type="checkbox"/> Other: _____ |   |                                       |

3. Planned future site uses and off-site use within 200 ft of site boundary (check all that apply):

- |   |                                       |   |                                       |
|---|---------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Industrial           | <input type="checkbox"/> Residential  | <input checked="" type="checkbox"/> Commercial    | <input type="checkbox"/> Agricultural |
| <input type="checkbox"/> School or child care | <input type="checkbox"/> Government   | <input type="checkbox"/> Park or recreational use |                                       |
| <input type="checkbox"/> Vacant               | <input type="checkbox"/> Other: _____ |   |                                       |

Provide a map depicting the location of the proposed changes in land use.

**SECTION C. DESCRIPTION OF CONTAMINATION**

1. Identify if any of the following exist at the site (check all that apply):
- Free product [N.J.A.C. 7:26E-1.8] identified is  LNAPL\* or  DNAPL\*\*. Date identified: \_\_\_\_\_
  - Residual product [N.J.A.C. 7:26E-1.8]
  - Other high concentration source materials not identified above (e.g., buried drums, containers, unsecured friable asbestos)

Explain: \_\_\_\_\_

\* LNAPL – measured thickness of .01 feet or more

\*\*DNAPL – See US EPA DNAPL Overview

2. Soil Migration Pathway
- Has soil contamination been delineated to the applicable Direct Contact Soil Remediation Standard? .....  Yes  No
- Are all soils either below the applicable Direct Contact Criteria or under an institutional control (i.e. deed notice)? .....  Yes  No
3. If this evaluation is submitted with a technical document that includes contaminant summary information, proceed to Section D. Otherwise attach a brief summary of all currently available data and information to be included in the site investigation or remedial investigation report.

**SECTION D. GROUND WATER USE**

1. Has the requirement for ground water sampling been triggered?.....  Yes  No  Unknown  
If "No," proceed to Section F. If "Unknown," explain: \_\_\_\_\_
2. Is Ground water contaminated above the Ground Water Remediation Standards [N.J.A.C.7:9C]?.....  Yes  No  Unknown
- Or  Awaiting laboratory data with the expected due date: \_\_\_\_\_
- If "Yes," provide the date that the laboratory data was available and confirmed contamination above the Ground Water Remediation Standards. Date: \_\_\_\_\_
- If "Unknown," explain: \_\_\_\_\_
- If "No," or awaiting laboratory data proceed to Section F.
3. Has ground water contamination been delineated to the applicable Remediation Standard? .....  Yes  No
4. Has a well search been completed? .....  Yes  No
- Date of most recent or updated well search: \_\_\_\_\_
- Identify if any of the following conditions exist based on the well search [N.J.A.C.7:26E-1.14(a)] (check all that apply):
- Potable wells located within 500 feet from the downgradient edge of the currently known extent of contamination.
  - Potable well located 250 feet upgradient or 500 feet side gradient of the currently known extent of contamination.
  - Ground water contamination is located within a Tier 1 wellhead protection area (WHPA).
5. Is a completed Well Search Spreadsheet or historical well search table attached and has an electronic copy of the spreadsheet been submitted to [srpgis\\_wrs@dep.state.nj.us](mailto:srpgis_wrs@dep.state.nj.us). .....  Yes  No
- If "No," explain: \_\_\_\_\_
6. Are any private potable or irrigation wells located within 1/2 mile of the currently known extent of contamination? .....  Yes  No
- If "Yes," was a door to door survey completed? .....  Yes  No
- If survey was not completed explain: \_\_\_\_\_
7. Has sampling been conducted of  potable well(s) and /or  non-potable use well(s)?.....  Yes  No
- If "No," provide justification then proceed to Section E.

- 8 Has contamination been identified in potable well(s) above Ground Water Remediation Standards that is not suspected to be from the site? (If "Yes," provide justification) .....  Yes  No
- 
- 9 Has contamination been identified in potable well(s) that is above the Ground Water Remediation Standards or Federal Drinking Water Standards? .....  Yes  No
- Provide date laboratory data was received: \_\_\_\_\_
- Or  awaiting laboratory data with the expected due date: \_\_\_\_\_
- If "Yes" for potable well contamination **not attributable to background**, follow the IEC Guidance Document at <http://www.nj.gov/dep/srp/guidance/index.html#iec> for required actions and answer the following:
- Has an engineered system response action been completed on all receptors? .....  Yes  No
- Provide a brief narrative description:
- Date completed: \_\_\_\_\_ NJDEP Case Manager: \_\_\_\_\_
10. Were Non-potable use well(s) sampled and results were above Class II Ground Water Remediation Standards? .....  Yes  No
- Provide date laboratory data was received: \_\_\_\_\_
- Or  awaiting laboratory data with the expected due date: \_\_\_\_\_
11. Has the ground water use evaluation been completed? .....  Yes  No

**SECTION E. VAPOR INTRUSION (VI)**

1. Contaminants present in ground water exceed the Vapor Intrusion Ground Water Screening Levels that trigger a VI evaluation. (see NJDEP Vapor Intrusion Technical Guidance). ...  Yes  No  Unknown
- Or  Awaiting laboratory data and the expected due date: \_\_\_\_\_
- Provide the date that the laboratory data was available and confirmed contamination above the Vapor Intrusion Trigger Levels. Date: \_\_\_\_\_
2. Other existing conditions that trigger a VI evaluation. (see NJDEP Vapor Intrusion Technical Guidance)
- Wet basement or sump containing free product or ground water containing volatile organics
  - Methane generating conditions causing oxygen deficient or explosion concern
  - Other human or safety concern from the VI pathway (i.e. elemental mercury, unsaturated contamination, elevated soil gas or indoor vapor (explain):
- Elevated concentrations of PCE have been identified in sub-slab soil gas and indoor air. Vapor impacts are derived from slightly elevated PCE concentrations in soil.
- If you answered "No," or awaiting laboratory data to Question 1., and did not check any boxes in Question 2, proceed to Section F, "Ecological Receptors", otherwise complete the rest of this section.
3. Has ground water contamination been delineated to the applicable Ground Water Vapor Screening Level? .....  Yes  No
4. Was a site specific screening level, modeling or other alternative approach employed for the VI pathway? .....  Yes  No
5. Identify and locate on a scaled map any buildings/sensitive populations that exist within the following distances from ground water contamination with concentrations above the Vapor Intrusion Ground Water Screening Levels or specific threats (check all that apply):
- 30 feet of petroleum free product or dissolved petroleum hydrocarbon contamination in ground water
  - 100 feet of any non-petroleum free product or any non-petroleum dissolved volatile organic ground water contamination
  - No buildings exist within the specified distances
6. The vapor intrusion pathway is a concern at or adjacent to the site (if "No," attach justification) .....  Yes  No

7. Has soil gas sampling of the building(s) been conducted?.....  Yes  No  N/A  
 If "No," or "N/A," proceed to #12
8. Has indoor air sampling been conducted at the identified building(s)?.....  Yes  No  
 If "No," proceed to #12
9. Has indoor air contamination been identified but not suspected to be from the site?  
 (if "Yes," attach justification) .....  Yes  No
10. Indoor air results were above the NJDEP's Rapid Action Levels. ....  Yes  No

Provide the date that the laboratory data was available. Date: \_\_\_\_\_  
 Or  Awaiting laboratory data with the expected due date: \_\_\_\_\_

**If "Yes" to #10 above, follow the IEC Guidance Document at**  
<http://www.nj.gov/dep/srp/guidance/index.html#iec> **for required actions.**

The IEC engineering system response for control was implemented for all identified structures .....  Yes  No

Date: \_\_\_\_\_ NJDEP Case Manager: \_\_\_\_\_

11. Indoor air sampling was conducted and results were above the NJDEP's Indoor Air Screening Levels but at or below the Rapid Action Levels.....  Yes  No

Provide the date that the laboratory data was available. Date: 12/18/2016  
 Or  Awaiting laboratory data with the expected due date: \_\_\_\_\_

**If "Yes" to #11 above, answer the following:**

Has the Vapor Concern (VC) Response Action Form notifying the NJDEP of the exceedances been submitted? .....  Yes  No  
 Date: 01/06/2016

Has a plan to mitigate and monitor the exposure been submitted? .....  Yes  No  
 Date: 02/18/2016

Has the Mitigation Response Action Report been submitted? .....  Yes  No  
 Date: 06/16/2016

12. Has the vapor intrusion investigation been completed?.....  Yes  No  
 If "No", is the vapor intrusion investigation stepping out as part of the site investigation or remedial investigation. (If "No," attach justification) .....  Yes  No

**SECTION F. ECOLOGICAL RECEPTORS**

1. Has an Ecological Evaluation (EE) has been conducted? [N.J.A.C. 7:26E-1.16] .....  Yes  No  
 Date conducted: 01/11/2016
2. Do the results of an EE trigger a remedial investigation of ecological receptors? [N.J.A.C. 7:26E-4.8].....  Yes  No
3. Has a remedial investigation of ecological receptors been conducted? .....  Yes  No  
 Date conducted: \_\_\_\_\_

4. Provide the following information for any surface water body on or within 200 feet of the site:

Surface Water Body Name	Stream Classification	Antidegradation Designation	Trout Production	Trout Maintenance
			<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"/>

5. Does the site contain any features regulated by the Land Use Regulation Program (LURP)?  
(e.g. wetlands, flood hazard area, tidelands, etc.) .....  Yes  No  
If "Yes," identify the type(s) of features: \_\_\_\_\_

6. Have any formal LURP jurisdiction letters or approvals been issued for the site? .....  Yes  No  
If "Yes," what is the LURP Program Interest (PI) number(s) for the site? \_\_\_\_\_

7. Have any applications for formal LURP jurisdiction letters or approvals been submitted the NJDEP?.....  Yes  No  
If "Yes," what is the LURP Program Interest (PI) number(s) for the site? \_\_\_\_\_

8. Is free product or residual product located within 100 feet from an ecological receptor?.....  Yes  No

9. Does available data indicate an impact on Ecological receptor(s), Surface water, or Sediment?.....  Yes  No  
If "Yes,"

a) Check all that apply:

Ecological receptor(s)     Surface water     Sediment

b) Submit with this evaluation either a technical document that includes contaminant summary information, or a description of the type of contamination, a schedule, and a description of all actions to be taken to mitigate exposure.

Completed forms should be sent to the municipal clerk, designate health department, and:

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



**Legend**

-  200 Foot Buffer

Sources: NJGIN, ESRI

Figure: 1  
 Drawn: MB  
 Checked: BL  
 6/6/2016

RECEPTOR EVALUATION MAP  
 VILLAGE GREEN  
 100 ROUTE 46  
 BUDD LAKE, NEW JERSEY



P.O. Box 509  
 LAFAYETTE HILL, PA 19444  
 610-387-6930