

Contractor Environmental Review Completion Form

Agency Name _____ EDA _____

CDBG-DR Program _____ NCR _____

Application ID Number _____ NCR39440 _____

Applicant Name _____ City of Hoboken _____

Project Location _____ First Street Corridor, Hoboken, NJ 07030 _____ (Address)

_____ Hoboken _____ (Municipality) _____ Hudson _____ (County)

I certify that I have reviewed this Environmental Review Record for completeness and quality of forms and documentation.

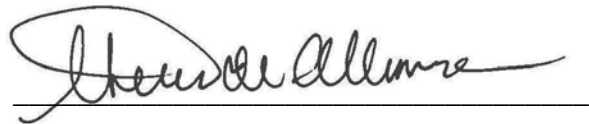
_____ Program Director _____

_____ Theresa A. Albanese _____

Title

Name

_____ 09/22/2014 _____



Date

Signature