

# Contractor Environmental Review Completion Form

Agency Name \_\_\_\_\_ DCA \_\_\_\_\_

CDBG-DR Program \_\_\_\_\_ RREM \_\_\_\_\_

Application ID Number \_\_\_\_\_ RRE0014020MF \_\_\_\_\_

Applicant Name \_\_\_\_\_ Nichelle Leigh Tate \_\_\_\_\_

Project Location \_\_\_\_\_ 205 6<sup>th</sup> Ave, Unit 2, Long Branch, NJ 07740 \_\_\_\_\_ (Address)

\_\_\_\_\_ Long Branch \_\_\_\_\_ (Municipality) \_\_\_\_\_ Monmouth \_\_\_\_\_ (County)

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


\_\_\_\_\_ Program Director \_\_\_\_\_

\_\_\_\_\_ Craig S. Shirk \_\_\_\_\_

Title

Name

\_\_\_\_\_ 01/07/2015 \_\_\_\_\_

  
\_\_\_\_\_

Date

Signature