Contractor Environmental Review Completion Form

Agency Name ____NJ Department of Community Affairs (DCA) CDBG-DR Program _Reconstruction, Rehabilitation, Elevation and Mitigation Program

Application ID Number _ RRE0035558MF_____

Applicant Name __Sarah Bezar. (Business/Corporate Name)

Project Location __9 Empire Drive (Address)

_____ Egg Harbor Township (Municipality)____Atlantic____(County)

____4220____(Block)____19___(Lot)

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

Dewberry, Senior Planner_

____Lawrence I. Smith_____

Title

Name

2-01p

_12/19/14

Date

Signature