



I. REVIEW DETAILS

New Request? Yes No (Prior HPO Project Number:)

Project / Property Name:

Location: County: Municipality: Multiple:

Street Address:

Block: Lot: Latitude: Longitude:

Review Type: (Check all that apply)

Section 106: Initiation Identification Assess Effects Resolve Adverse Effects Mitigation

NJ Register Project Authorization

National Register: Preliminary App. COE Request Draft Nom. Revised Draft Nom. Other

DEP Review: FWW CAFRA UW/WD SRP Other

Technical Assistance

Other (Please Describe):

Description:

II. CONTACT DETAILS

Name:

Organization:

Mailing Address:

City/State/Zip: / /

Phone: Email:

III. ATTACHMENTS

Check all that apply:

Please email this form and PDF attachments to: NJHPO@dep.nj.gov

IMPORTANT: There is a maximum email size limit of 25 MB to the NJHPO email account. If supporting documentation exceeds 25 MB, check the box below to request a temporary OneDrive upload link.

REQUEST UPLOAD LINK:

Please refrain from submitting duplicate hard copy documentation when using this form. Some processes may require follow-up submission of hard copy originals; HPO will notify the requestor when applicable.

- Cover Letter or Transmittal Memo (Required)
Detailed Description/Scope of Work
Location Map
Forms (Nomination, NJ Register Review, ITC, etc.)
Site/Project Plans
Project Specifications
Digital Images
Reports
Other (Please describe):

All attachments should be in PDF format.

IV. ADDITIONAL COMMENTS

Additional comments area



INSTRUCTIONS

Please fill out review requests on the Email Submittal Form with as much detail as possible as it pertains to your situation and request type. All submittals will be processed in the order in which they are received, and in most cases you will be notified via email of the assigned HPO Project Number and OneDrive link (if requested). Detailed instructions for each section of the form are provided below.

I. REVIEW DETAILS

- **New Request:** Check YES to indicate that this is a new submittal to HPO or NO if this a continuation of a review previously submitted to HPO.
- **Prior HPO Project Number:** Include the prior HPO Project Number, if known.
- **Project/Property Name:** Provide the name of the project or property for which this submission is being made.
- **Location:** Provide the physical location of the project or property for which this submission is being made.
 - **County:** Primary NJ County in which the project or property is located.
 - **Municipality:** Primary NJ Municipality in which the project or property is located.
 - **Multiple:** Check to indicate when the project or property is located in multiple municipalities and list the additional locations in the Description below.
 - **Street Address:** Physical street address for the project or property.
 - **Block/Lot:** Primary tax parcel identifier; List additional tax parcels in the Description below.
 - **Latitude/Longitude:** For cases where Street Address and/or Block/Lot do not provide sufficient detail about the physical location, include the latitude and longitude coordinates for the location.
- **Review Type:** Check to indicate the review type(s) and sub-type(s) for which submission is being made. Check all that apply:
 - **Section 106:** Federal undertakings pursuant to the National Historic Preservation Act. Check also the appropriate phase(s) of Section 106 that apply to the current submission: Initiation, Identification, Assess Effects, Resolve Adverse Effects.
 - **NJ Register Project Authorization:** State, County, or Local undertakings pursuant to the NJ Register of Historic Places Act.
 - **National Register:** Documentation for nomination of historic resources to the NJ and National Registers of Historic Places. Check also the type of documentation being submitted: Preliminary Application, COE Request, Draft Nomination, Revised Draft Nomination, Other (specify below).
 - **DEP Review:** Comment requests for various DEP programs. Check also the applicable program type: FWW, CAFRA, UW/WD, SRP, Other (specify below).
 - **Technical Assistance:** General requests for information or guidance on any aspect of historic preservation.
 - **Other:** All other submissions. Please provide details in the Description below.
- **Description:** Provide a detailed description of the activity for which submission is being made and/or description of the documentation being submitted.



INSTRUCTIONS

II. CONTACT DETAILS

- **Name:** Name of the primary contact regarding this submission.
- **Organization:** Organization name represented by the primary contact.
- **Mailing Address:** Postal address for the primary contact.
- **City / State / Zip:** Postal city, state, and zip code for the primary contact.
- **Phone:** Daytime phone number for the primary contact.
- **Email:** Email address for the primary contact. *Note that all communication regarding this submission will be sent to this email address.*

III. ATTACHMENTS

- **Check all that apply:** Indicate the type(s) supporting documentation attached to this Email Submittal Form.
 - Attachments are required as they apply to your particular situation and submission type.
 - All attachments should be in PDF format except as required by specific provisions of a particular review type.
- **Request Upload Link:** Check to request a temporary OneDrive upload link for attachments that exceed a total of 25 MB collectively. You will be notified via email at the address provided when the upload link is activated. This link will only be accessible until your upload is completed.

IV. ADDITIONAL COMMENTS

- Please add any additional comments, questions, or specific details regarding this submission which will assist HPO staff in processing your request.