



**New Jersey Department of Environmental Protection**  
**Site Remediation & Waste Management Program**

**TERMINATION OF DEED NOTICE FORM**

Date Stamp  
 (For Department use only)

**SECTION A. SITE NAME AND LOCATION**

Site Name: \_\_\_\_\_

List All AKAs: \_\_\_\_\_

Street Address: \_\_\_\_\_

Municipality: \_\_\_\_\_ (Township, Borough, or City)

County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Program Interest (PI) Number(s): \_\_\_\_\_

Case Tracking Number(s): \_\_\_\_\_

Municipal Block(s) and Lot(s) of the site/property: \_\_\_\_\_

Is this site a Federal case?.....  Yes  No

If "Yes", indicate the Federal Case Type:

RCRA GPRA 2020  CERCLA/NPL  USDOD  USDOE

Other (explain): \_\_\_\_\_

**SECTION B. TERMINATION OF DEED NOTICE**

**Note:** This termination of Deed Notice request may not be processed until all Remedial Action Permit (RAP) annual fees and the Remedial Action Protectiveness/Biennial-Certification fee (if applicable - Post-No Further Action (NFA) Cases), including any past due fees, have been paid in full.

Reason(s) for Termination of Deed Notice:

- Site Remediated to applicable Soil Remediation Standards
- Compliance Averaging or Alternate Remediation Standard
- Change in Promulgated Soil Remediation Standards
- Change in institutional and/or engineering control
- Subdivision
- Historically Applied Pesticides (HAP) Notice Termination
- Other: \_\_\_\_\_

The hard copy of the original, signed Deed Notice Termination document will be mailed to the Licensed Site Remediation Professional (LSRP) that is identified in Section K (LICENSED SITE REMEDIATION PROFESSIONAL INFORMATION AND STATEMENT) below. **If you want this document returned to someone else** instead, please specify in Section H (OTHER INFORMATION PROVIDED) below.

**SECTION C. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION – CO-PERMITTEE**

Addendum for additional Person Responsible for Conducting the Remediation has been completed.

Affiliation/Name of Organization: \_\_\_\_\_

First Name of Contact: \_\_\_\_\_ Last Name of Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Check the box if the Person Responsible for Conducting the Remediation is the Primary Contact for Permit Compliance

**SECTION D. CURRENT OWNER OF THE SITE – CO-PERMITTEE**

Addendum for additional Owner of the Site has been completed.

Affiliation/Name of Organization: \_\_\_\_\_

First Name of Contact: \_\_\_\_\_ Last Name of Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Check the box if the owner is the Primary Contact for Permit Compliance

**SECTION E. ATTACHED DOCUMENTS**

Attach the following documents:

**Note:** All electronic copies should be provided in Adobe PDF file format on a compact disc (CD).

- Hard and electronic copy of the completed Deed Notice Termination Application using the current form on the NJDEP Website.
- Hard and electronic copy of the cover letter summarizing the request for the Deed Notice termination.
- Hard copy (Original Ink/Signed/Notary) of the Deed Notice Termination document to be filed.

**Note:** For the New Jersey Department of Environmental Protection (NJDEP) signature certification section, leave blanks (\_\_\_\_\_) where the bracketed/italicized information is (i.e., [Month, day, year], [Insert name of person executing document on behalf of the New Jersey Department of Environmental Protection], [insert title], and [title]). Also, leave blank the [month, day, year] for “The Department approved the request by way of letter dated...” in Section 3 of the Model Termination of Deed Notice.

- Electronic copy of the Deed Notice Termination document to be filed.
- Electronic copy of the Filed Deed Notice document that will be terminated with Book & Page Numbers.
- Electronic copy of the Remedial Action Report (RAR) or other documents supporting the termination of the Deed Notice.

**SECTION F. FILED DEED NOTICE INFORMATION (to be terminated)**

**Note:** If more than one DER/Deed Notice for this environmental restriction exists, then complete the Addendum to Section F and include this information in the Model Deed Notice Termination document.

1. Deed Notice filing date: \_\_\_\_\_
2. Name of County Office the Deed Notice was filed in: \_\_\_\_\_
3. Book Number the Deed Notice is filed in: \_\_\_\_\_ Page Numbers: First: \_\_\_\_\_ to Last: \_\_\_\_\_

4. Instrument/Control/File Number(s): \_\_\_\_\_

5. Block(s) and Lot(s) of the restricted area:  
\_\_\_\_\_

**SECTION G. VAPOR INTRUSION SUMMARY**

**Note:** Complete this Section if you are removing a vapor intrusion engineering control/mitigation system from the Deed Notice.

Has sub-slab soil gas and indoor air sampling been conducted in accordance with the Department's most current Vapor Intrusion Technical Guidance document to demonstrate that the vapor intrusion engineering control(s)/mitigation system(s) is no longer required? .....  Yes  No

If **"Yes"**, attach the sub-slab soil gas and indoor air sampling results for each building along with a scaled site map depicting the location of the building, the vapor intrusion engineering control/mitigation system type/design, and the sub-slab soil gas and indoor air sampling locations on it.

If **"No"**, provide the justification for the deviation of this sub-slab soil gas and indoor air sampling requirement in Section H below.

**SECTION H. OTHER INFORMATION PROVIDED**

List any other pertinent information to support the Deed Notice termination.

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

Full Legal Name of the Person Responsible for Conducting the Remediation:

\_\_\_\_\_

Representative First Name: \_\_\_\_\_ Representative Last Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

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: \_\_\_\_\_

Name/Title: \_\_\_\_\_

**SECTION J. CURRENT OWNER OF THE SITE INFORMATION AND CERTIFICATION**

Full Legal Name of the Person who owns the site:

\_\_\_\_\_

Representative First Name: \_\_\_\_\_ Representative Last Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

This certification shall be signed by the person who owns the site and 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: \_\_\_\_\_

Name/Title: \_\_\_\_\_

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

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

LSRP ID Number: \_\_\_\_\_  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Phone Numbers: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Email Address: \_\_\_\_\_

This statement shall be signed by the LSRP who is submitting this notification in accordance with N.J.S.A. 58:10C-14, and N.J.S.A. 58:10B-1.3b(1) and (2).

(1) *I certify, as a Licensed Site Remediation Professional authorized pursuant to N.J.S.A. 58:10C-1 et seq. to conduct business in New Jersey, that for the remediation described in this submission, and all attachments included in this submission, I personally: Managed, supervised, or performed the remediation conducted at this site that is described in this submission, and all attachments included in this submission; and/or periodically reviewed and evaluated the work performed by other persons that forms the basis for the information in this submission; and/or completed the work of another site remediation professional, licensed or not, after having: (1) reviewed all available documentation on which I relied; (2) conducted a site visit and observed the then-current conditions and verified the status of as much of the work as was reasonably observable; and (3) concluded, in the exercise of my independent professional judgment, that there was sufficient information upon which to complete any additional phase of remediation and prepare workplans and reports related thereto.*

(2) *I certify:*

- *That I have read this submission and all attachments to this submission;*
- *That in performing the professional services as the licensed site remediation professional for the entire site or each area of concern, I adhered to the professional conduct standards and requirements governing licensed site remediation professionals provided in N.J.S.A. 58:10C-16;*
- *That the remediation conducted at the entire site or each area of concern, that is described in this submission and all attachments to this submission, was conducted pursuant to and in compliance with the remediation requirements in N.J.S.A. 58:10C-14.c;*
- *That the remediation described in this submission, and all attachments to this submission, was conducted pursuant to and in compliance with the regulations of the Site Remediation Professional Licensing Board at N.J.A.C. 7:26I; and*
- *That the information contained in this submission and all attachments to this submission is true, accurate, and complete.*

(3) *I certify, when this submission includes a response action outcome, that the entire site or each area of concern has been remediated in compliance with all applicable statutes, rules, and regulations and is protective of public health and safety and the environment.*

(4) *I certify that no other person is authorized or able to use any password, encryption method, or electronic signature that the Board or the Department have provided to me.*

(5) *I certify that I understand and acknowledge that:*

- *If I knowingly make a false statement, representation, or certification in any document or information I submit to the Department I may be subject to civil and administrative enforcement pursuant to N.J.S.A. 58:10C-17.a.1(a)through (f) by the Board, including but not limited to license suspension, revocation, or denial of renewal; and*
- *If I purposely, knowingly, or recklessly make a false statement, representation, or certification in any application, form, record, document or other information submitted to the Department or required to be maintained pursuant to the Site Remediation Reform Act, I shall be guilty, upon conviction, of a crime of the third degree and shall, notwithstanding the provisions of subsection b. of N.J.S.2C:43-3, be subject to a fine of not less than \$5,000 nor more than \$75,000 per day of violation, or by imprisonment, or both.*

(6) *I certify that I have read this certification prior to signing, certifying, and making this submission.*

LSRP Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
LSRP Name: \_\_\_\_\_  
Company Name: \_\_\_\_\_

**ADDENDUM A**  
**Additional Persons Responsible for Conducting Remediation**

**ADDENDUM TO SECTION C. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION**

Affiliation/Name of Organization: \_\_\_\_\_  
First Name of Contact: \_\_\_\_\_ Last Name of Contact: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
 Check the box if the Person Responsible for Conducting the Remediation is the Primary Contact for Permit Compliance

**ADDENDUM TO SECTION I. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION INFORMATION AND CERTIFICATION**

Full Legal Name of the Person Responsible for Conducting the Remediation:  
\_\_\_\_\_  
Representative First Name: \_\_\_\_\_ Representative Last Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Email Address: \_\_\_\_\_

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: \_\_\_\_\_  
Name/Title: \_\_\_\_\_

**ADDENDUM B**  
**Additional Property Owners**

**ADDENDUM TO SECTION D. CURRENT OWNER OF THE SITE – CO-PERMITTEE**

Affiliation/Name of Organization: \_\_\_\_\_

First Name of Contact: \_\_\_\_\_ Last Name of Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Check the box if the owner is the Primary Contact for Permit Compliance

**ADDENDUM TO SECTION J. CURRENT OWNER OF THE SITE INFORMATION AND CERTIFICATION**

Full Legal Name of the Person who owns the site:

\_\_\_\_\_

Representative First Name: \_\_\_\_\_ Representative Last Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Municipality: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

This certification shall be signed by the person who owns the site and 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).

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name/Title: \_\_\_\_\_

**ADDENDUM C**  
**Additional Filed Deed Notice Information**

**ADDENDUM TO SECTION F. FILED DEED NOTICE INFORMATION (to be terminated)**

**Note:** Use this Section if more than one DER/Deed Notice for this environmental restriction exists and include this information in the Model Deed Notice Termination document.

1. Deed Notice filing date: \_\_\_\_\_
2. Name of County Office the Deed Notice was filed in: \_\_\_\_\_
3. Book Number the Deed Notice is filed in: \_\_\_\_\_ Page Numbers: First: \_\_\_\_\_ to Last: \_\_\_\_\_
4. Instrument/Control/File Number(s): \_\_\_\_\_
5. Block(s) and Lot(s) of the restricted area: \_\_\_\_\_