STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION AND ENERGY
SITE REMEDIATION PROGRAM

INITIAL QUESTIONNAIRE/ MEMORANDUM OF AGREEMENT APPLICATION

The purpose of this application is two fold: 1) to evaluate whether or not remedial activities are necessary at the subject Site; and 2) if applicable, to enter into a Memorandum of Agreement (MOA) with the New Jersey Department of Environmental Protection and Energy. The MOA will allow the Department to provide the applicant with oversight of remedial activities.

Answer all questions in Part I. If you answer "yes" to questions H, I, or J of PART I, please complete Part II. If you have any questions when completing this form, it is recommended that you contact the Department's, Bureau of Field Operations/Site Assessment Section, at (609) 584-4280 between the hours of 8:30 AM and 4:30 PM for assistance.

PLEASE TYPE OR PRINT

DATE 1/9/95

PART I

A. Site Name Society Hill at University Heights III
Street Address Corner of Matthews and Churchman Streets
State New Jersey Zip Code 07101
Municipality Newark County Essex
Tax Block and Lot Number(s) Block 408; Lot 30
Latitude 40° 44' 30" Longitude 74° 11' 06"
Acreage .25
Geographic Boundaries None
EPA ID # (if applicable) Not Applicable

B. Current Property Owner(s)
Name(s) K. Hovnanian at Newark Ubran Renewal Corporation III, Inc.
Firm "See above" Attn: Robert M. Schwartz, Esq. Telephone # 201/272-0088
Street Address 65 Jackson Drive
State New Jersey Zip Code 07016-1191
Municipality Cranford

C. Current Business Operator(s)
Name(s) SAME AS ITEM B ABOVE
Firm _____ Telephone # _____
Street Address _____
State _____ Zip Code _____
Municipality _____

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D. Current Business Owner(s) (if different than question Part I B. or C.)

Name(s) _____

Firm _____ Telephone # _____

Street Address _____

State _____ Zip Code _____

Municipality _____

E. Current Property Use:

Residential	____	Agricultural	____
Industrial	____	Undeveloped	x
Commercial	____	Other	____

F. Provide the information requested below on the previous owners of the site and the entities who operated at the site.

Name	Owner or Operator	From	To
K. Hovnanian Companies	Owner	1993	Present
City of Newark	Owner	Unknown	Late 1993

G. For those former Owner(s) and/or Operator(s) identified above (in paragraph PART I F.), give a brief discussion of all operations at the site, including but not limited to types of operations, materials used, waste generated, and waste disposal techniques.

Former owners of the property utilized the parcel for residential purposes. The City of Newark purchased the properties and razed the residential structures. The only hazardous material known to be used and stored on-site was #2 heating oil to fuel the former residence. It was stored in a UST (Underground Storage Tank).

H. Are there currently, or have there ever been any hazardous substances as defined by N.J.A.C. 7:1E-1 et seq., used, generated, treated, stored, disposed or discharged at the site?

Yes x ____ No ____ Please refer to Park I, Item G and Part II, Item H.

I. Are there currently, or have there ever been any hazardous wastes as defined by N.J.A.C. 7:26-8 et seq., used, generated, treated, stored, disposed or discharged at the site?

Yes ____ No x

J. Are there currently, or have there ever been, any above or below ground storage tanks at the site?

Yes x ____ No ____

MEMORANDUM OF AGREEMENT APPLICATION
PART II

Please answer all the following site specific questions completely and accurately. Attach separate paper if necessary and refer to corresponding numbers below. Please type or print all information clearly.

A. Who is requesting this MOA?

Name K. Hovnanian at Newark Urban Renewal Corporation III, Inc.
Affiliation Owner
Address 65 Jackson Drive
City/Town Cranford
State NJ Zip Code 07016-1191
State of Incorporation New Jersey

B. Who will be executing this MOA? (if different than PART II A.)

Name Mr. Robert D. Jackson, Area President
Affiliation K. Hovnanian Companies - University Heights III/C&E
Address 65 Jackson Drive
City/Town Cranford
State NJ Zip Code 07016-1191
State of Incorporation New Jersey Corp. status Private

C. Select which phase(s) of the remediation process are to be performed pursuant to the MOA being requested.

[ ] PA/SI [ ] Remedial Action Workplan
[ ] RI Work Plan [x] Remedial Action Report
[ ] RI Report [ ] Other

D. Who will be the contact for all matters of this application?

Name James M. Clabby Title Project Manager
Affiliation J M Sorge Inc. (Consultant)
Address 50 County Line Road
City/Town Somerville
State NJ Zip Code 08876
Phone 908/218-0066

E. What are the current operations at the site?
Current operations at the site include the FUTURE construction of condominiums in the area formerly occupied by residential dwellings.

F. What are the intended future uses of the site?
Residential dwellings.

KHOV005366

G. Describe briefly the major types of contaminants found at the site and what media they affect.

Petroleum hydrocarbons (#2 heating oil) were identified in the soil.

H. Describe in detail how the contamination came to exist at the site. For example, were there past spills, landfill operations, industrial septic systems, USTs, deposition of fill material, etc.?

The contamination at this site was identified following the removal of a non-regulated 1,000-gallon heating oil underground storage tank.

I. List any civil/criminal actions taken against the owner/operator, managers or officials associated with the site for violations of any environmental laws or statutes.

Check here if no violations or alleged violation [X]
Date of action _____
Section of law or statute violated _____
Type of enforcement action _____
Description of the violation _____

How was the violation or alleged violation resolved?

J. List all permits currently held by the applicant for the site. (NJPDES, RCRA, etc.)

There are currently no environmental permits held for this site.

CERTIFICATIONS

N.J.A.C. 7:26C-1.2 et seq.

Any person making a submission to the Department required by this chapter, shall include the following signatures and notarized certification, for each submittal, pursuant to A and B below. Additionally, the certifications shall indicate the case name and address, case number, type of documents submitted (e.g. MOA application) for each submittal.

CASE NAME: K. Hovnanian - University Heights/C&E (Tank T408-6) CASE NUMBER: 94-12-01-1135-25

CASE ADDRESS: Corner of Matthews and Churchman Streets
Newark, NJ 07101

A. The following certification shall be signed by the highest ranking individual with overall legal responsibility for implementing the remediation of a site, but shall not include contractors or consultants:

"I certify under penalty of law that the information provided in this document 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."

Printed Name Robert D. Jackson Title Area President

Signature _____ Date January 13, 1995

Notary Signature _____ Date January 13, 1995

DEBORAH A. SWEENEY
A Notary Public of New Jersey
My Commission Expires Dec. 6, 1999

B. The following certification shall be signed by:

1. For a corporation, by a principal executive officer of at least the level of vice president;
2. For a partnership or sole proprietorship, by a general partner or the proprietor, respectively, or;
3. For a municipality, State, Federal or other public agency, by either a principal executive officer or ranking elected official.
4. For persons other than 1 through 3 above, by the person with legal responsibility for the site.

"I certify under penalty of law that I have personally examined and am familiar with the information submitted herein and all attached documents, and that based on my inquires of those individuals immediately responsible for obtaining the information, 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 statue, I am personally liable for the penalties."

Printed Name Robert D. Jackson Title Area President

Signature _____ Date January 13, 1995

Notary Signature _____ Date January 13, 1995

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