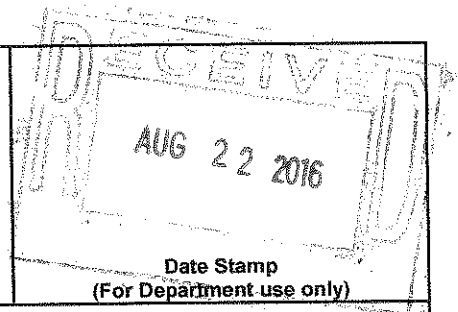




**New Jersey Department of Environmental Protection  
Site Remediation Program**

**REMEDIAL TIMEFRAME NOTIFICATION FORM**

- Extension Request  
 Lengthen Remedial Investigation Report (RIR) Timeframe Notification  
 Contaminated Media Notification



**SECTION A. SITE NAME AND LOCATION**

Site Name: North Brunswick Gulf  
 List all AKAs: \_\_\_\_\_  
 Street Address: 1696 Georges Road Rt 130  
 Municipality: North Brunswick (Township, Borough or City)  
 County: Middlesex Zip Code: 08902  
 Program Interest (PI) Number(s): 010180  
 Case Tracking Number(s) for this submission: 01-08-30-1546-07 01-08-30-1549-55

**SECTION B. NJDEP CASE MANAGER**

Do you have an assigned Case Manager? .....  Yes  No  
 If "Yes," please list the Case Manager: \_\_\_\_\_

**SECTION C. EXTENSION REQUEST**

*(Complete this section only if you are filing an extension request)*

An extension is requested to the regulatory timeframe pursuant to NJAC 7:26C-3.2(b) or the mandatory or site specific timeframe pursuant to NJAC 7:26C-3.5 as follows:

Report Type	Current Regulatory Timeframe	Proposed Regulatory Timeframe**	Current Mandatory or Expedited Site Specific Timeframe	Proposed Mandatory or Expedited Site Specific Timeframe
Initial Receptor Evaluation*				
Preliminary Assessment Report*				
Site Investigation Report*				
Remedial Investigation Report*	03/01/2017	03/01/2019		
Remedial Action Report*				
LNAPL Interim Remedial Measures Report*				
Immediate Environmental Concern Engineered System Response Action Report				
Immediate Environmental Concern Source Control Report*				
Other (write in):				
Other (write in):				
Other (write in):				

\* This report has a mandatory remediation timeframe  
 \*\* This date cannot exceed the mandatory remediation timeframe.

**Note:** Extensions to the regulatory timeframe are deemed approved provided the requirements of N.J.A.C. 7:26C-3.2(b) are met. If these requirements are not met, the NJDEP will notify the requestor in writing the extension is denied.

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

LSRP ID Number: 585751

First Name: Frank

Last Name: Jasiulewicz

Phone Number: (610) 384-2719

Ext: \_\_\_\_\_

Fax: (610) 384-2709

Mailing Address: 119 Shepherds Way

City/Town: Caotesville

State: Pa.

Zip Code: 19320

Email Address: onsitefj@aol.com

This statement shall be signed by the LSRP who is submitting this notification in accordance with SRRA Section 16 d. and Section 30 b.2.

*I certify that I am a Licensed Site Remediation Professional authorized pursuant to N.J.S.A. 58:10C to conduct business in New Jersey. As the Licensed Site Remediation Professional of record for this remediation, I:*

**[SELECT ONE OR BOTH OF THE FOLLOWING AS APPLICABLE]:**

*directly oversaw and supervised all of the referenced remediation, and/or*

*personally reviewed and accepted all of the referenced remediation presented herein.*


*I believe that the information contained herein, and including all attached documents, is true, accurate and complete.*

*It is my independent professional judgment and opinion that the remediation conducted at this site, as reflected in this submission to the Department, conforms to, and is consistent with, the remediation requirements in N.J.S.A. 58:10C-14.*

*My conduct and decisions in this matter were made upon the exercise of reasonable care and diligence, and by applying the knowledge and skill ordinarily exercised by licensed site remediation professionals practicing in good standing, in accordance with N.J.S.A. 58:10C-16, in the State of New Jersey at the time I performed these professional services.*

*I am aware pursuant to N.J.S.A. 58:10C-17 that for purposely, knowingly or recklessly submitting false statement, representation or certification in any document or information submitted to the board or Department, etc., that there are significant civil, administrative and criminal penalties, including license revocation or suspension, fines and being punished by imprisonment for conviction of a crime of the third degree.*

LSRP Signature: \_\_\_\_\_



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

9-9-16

LSRP Name/Title: Frank Jasiulewicz/President

Company Name: On-Site Environmental, Inc.

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