PROJECT OVERSIGHT CERTIFICATION

To be signed by all persons, whether DEP employees or not, who are responsible for overseeing any and all work, including laboratory analysis, carried out under the terms of the this Sampling and Analysis Plan.

"I certify that I have read and understand the requirements of this Sampling and Analysis Plan(SAP), and that I am knowledgeable about the requirements of the Quality Assurance Program/Project Plan (QAPP) to which it refers. I certify that I will fulfill all SAP and QAPP requirements. I will assure that all staff, volunteers, etc., for whom I am responsible are familiar with these requirements and competent to carry out their responsibilities."

Name (print)	Position	Date	Signature