CHECK#: 8128

Date of Notification (1)			IN	lame of E	Building Own	ner/Operato	or (2)	2012			17-00			
	8/13				Ray	Napa	OL	ITANO TO	PP.	AH 12	H		-	adament and
Agencies Notified	Type Notification		8	treet Add				Asset	ž.	AMIS				-
□ ÆPA	☑ Initial		L		625	BLO	NOM	FIERD AU	E	''	. (1)			
DEP '	☐ Amended	ι	C	City, State	e, Zip Code	(		- L	1/3	4.5				
☑ DOL	Amendment  Emergency (		·L	arra di managana ana	NUTL	W. N	.5	07110	· 14.	SINGAR	<u>01                                    </u>		-	
⊠ DOH	justification)	modung	1	lame of 0		, .			Telep	hone Nur	nber	_		
□ DCA	☐ Cancellation		L		an No		16							
,				FACIL	ITYINFORI	VIATION		Time of English (A	1	-				
Name of Facility Where A	4						- 1	Type of Facility (4						
	NapoLITA	<u> </u>						□ School (K-12 □ Subchapter 8		than K-12	)			
Street Address	2 7							Other (i.e. pr	ivate & c	commercia	il build	ings, I	home	s,
	BLOOM FIEL	D AUE						etc.)						
City (5)							1	Square Feet		Floors	P	Idg. A		
NUTL	eu						1	1400	1	•		30	1	
County (6)	- 2			County Co				Current Use (Prio		demoiisn	ea)			
Essec			1,			75.		PESIC						
Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCN	No.			of Abatement Cont C Contracting Inc		,				
				L										
Street Address						1000000	50KH71C07	Address owell Road						
			-					- Toda						
City, State, Zip Code								ate, Zip Code Rock, NJ 07452						
Project Manager for Moni	toring Firm			Teleph	one No.	Tele	epho	one No.	T	License N	0.			
6								262-5841		00156	Was and the same			
Start Date (10) 4   9   13		Scheduled	Com		ate (11)			of OSHA Monitor ga Environmental	Service	s Inc.				
		-	-	1.7	- Calamina	_						-		
Occupancy Status Durin	g Abatement (Che Ited During Entire I	ck Unly Une) Period of Abal	teme	ent				Address uyer Street						
☐ Abatement Performe	d Outside of Norm	al Facility Ho	urs					ate, Zip Code						
☐ Other - Describe:			-		AM - 1. W 1. W.	-   Ha	ickei	nsack, NJ 07606						
Scope of Work (Check A	Il That Apply)													
☑ ≥3 sf or ≥3 lf		☑ Rend	ovati	on				Full Containmen	nt with N	egative P	ressure	<b>3</b>		
□ ≥160 sf or ≥260 lf		☐ Dem	olitio	n				Mini-Enclosure						
								Glovebag Proce Non-Exempted	eoure (*) and N	lon-Friabl	e Proc	edure		
		Т		T		Name of the Owner, where	-	1		AND DESCRIPTIONS OF THE PARTY O	T		emen	t
		11	ocatio rmall	S 2 2 2		Descript					_	T	ype	
Location Asbestos-Containing		Used \$	Solel	y by	Asbestos			Naterial (ACM)	Ar	nount			ш	
TO BE AB	ATED	Maint Custod		10707152011	(i.e. th	emal syste				pecify or LF)	墨	8	152	흥
In Facil (13)		1 1975 TATAL TATAL	12)			surfacing, other miscel			Si	OI LI')	Remova	Repair	Encapsulate	Enclo sure
(13)		V I		T 33/2							=		8	m m
		Yes	No	N/A							+-	-	<u> </u>	-
Busomont				/	D	UCT IN	SU	LATION	170	) St	-	1	_	_
	3					100			amina Tauran			_		
											-	_	_	_
			LM	JDEP Wa	oto 1	Cubic Yards	-	Name of I	Register	ed Landfill				
Name of Registered Was	ste riauler		H	auler ID N	1	of Waste	3							
Rovic Transport			2	20785		1				m Landfill	Corp.	454		
City, State, Zip Code Riverdale, NJ 07457	V. Teller					Disposal Da		City, State Bethlehe			1 As		1	
Completed by		Title				Signat	ture	/		▶D:	ate ,		-	-
JOSEPH VOCA	-110A	7. (2-) (2-) (3-)	FRE	ation	5	09.9	F.	Voratien	8	17	3/2	18/	13	
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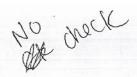
### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1)		1			Name of Build	ding Owner/	Operator (2)	2013 APR	-2 AM/2	
March 29, 2013					Buckeye Parti	ners L.P.		4 4	& Ald .	
Agencies Notified		Notification	Туре		Street Addres			4255	11/2	: ûp
				×(				& / /	9.794	.0.
(X) EPA	(	(X) Initial N		tion	9999 Hamilton			4/17	$\frac{1/(4nT)}{(3/2)^2}$	771
( ) DEP (X) DOL		( ) Amende ( ) Cancelle		tion	City, State, Zi	<u>p Code</u>			" WG"	UĮ.
(X) DOH		( ) cancen			Breinigsville, I	PA 18031				
( ) DCA					Name of Cont	act		Tel. Numb		
X III I F Y F 2 F 1					Robert Orisch	ak				
				FACILITY II	NFORMATION	(4)				
Name of Facility Where A	batement is T	aking Place (	<u>3)</u>		Type of Facilit ( ) School (K-					
Buckeye - Perth Amboy	Terminal				( ) Subchapte		nan K-12)			
Street Address	Cirimai	111			(X) Other (i.e.	private & co	ommercial bld	gs., homes,	etc.	
<u>January and a second a second and a second </u>					97					
380 Maurer Road					Sq. Feet_NA	4 of	Floors_Tanl	k & Pipe	Rack De	emo
<u>City (5)</u>	County (6)		County C (State Us			E)				
Perth Amboy	Middlesex		(State O	se Only)	Bldg. Age Current Use (	50+ years	domolished):	Pofinon		# I may be
		Ournor (9)	ASCM N	10	Current use (	prior ii beiriç	Name of Co			
Name of Monitoring Firm	Hirea by Blag	. Owner (o)	ASCIVITY	<u>io.</u>			Ivaine or oo	Titlactor (5)		
NA			.0				Brandenburg	g Industrial	Service Con	npany
Street Address					Street Addres	S			et de	
					0047.0-11	D :-				
a: a: 7: a l					2217 Spillmar City State, Zip					
City, State, Zip Code					City State, Zip	Code				
					Bethlehem, Pe	ennsylvania	18015			
Project Manager for Moni	toring Firm	Telephone	Number		Telephone Nu			License N	umber	
								parameter resultation		
					(610) 691-180			L		
Scheduled Start Date (10		Scheduled	Completion	Date (11)	Name of OSH	A Monitor				
April 12, 2013 (Demo Onl	y)	May 10, 20	is (penio (	Offig)	NA :	Nile .				
Occupancy Status During	Abatement (	Check only or	e)		Street Addres	s				11
(X) Facility Closed/Vacate	ed During Enti	re Period of A	batement			- I				
( ) Abatement Performed	Outside of N	ormal Facility	Hours -							\1
- "					City, State, Zi	p Code				
Describe										
Other - Abatement perfor	med by other	s; Demo Notif	ication Onl	У						
Source of Work (Check a		1.0		- 10-						
554155 51 115111 (5 1 1 1 1 1 1 1 1 1 1 1 1										
	ovation				200   5 4 014)	/ Adinon De	-: /-OF OF	-10 LE AC	MA)	
( ) Large Proj. (>160 SF	or >260 LF AC	CM) ( ) SM Pi	oj. (>25<1) Mini-Enclo	60 SF or >10 <2	lovebag Procedu		oj. (<25 SF or	< 10 LF AC	IVI)	
( ) Full Containment with Location of Asbestos-	Negative Pre	ation Normall		Description o			Specify SF or	LF) A	batement Ty	pe
Containing Material (ACM		by Maint./Cu	stodial	thermal syste	ms insulation,			and the second		
Facility (13)	Staff?	(12)		surfacing, VA	T, or other				om Bon	Engan Englas
	YES	NO	NA_	miscell.)		-	- lezza	- R	em. Rep.	Encap Enclos
						-				+
				-		-				1
					10.81.2		1 2 2110			
Name of Reg. Waste Hau	ıler	NJDEP Wa	ste Hauler	ID#	Cubic Yards o	of Waste	1 1 1 1 m	Name of F	Reg. Landfill	
Trainio of frog. Franto Flat				2				10-44 + 11 1		
	V I								1 011 01	
City, State				74-34		- 1	Disp. Date		City, Sta	<u>te</u>
	A.				n 4				K-107 H 1	
Completed by /Driet or To	(ne)	Title			Signature /		Satisfied in a	Date	-	
Completed by (Print or Ty	(he)	<u>Title</u>			I Signature	1	The state of the s	<u></u> .		
Jennifer Strobel		Contract Ad	Iministrato	r	1301	M		March 29,	2013	
	01 17				100	- 0				
			1			10, 10, 1				

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414

Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00



#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1) March 28, 2013					Name of Buildi ICL Performan Street Address 500 Roosevelt	ng Owner/C	Dperator (2)	P-2		Sw		
Agencies Notified		Notification '	Туре		Street Address		9.0	7	4/1/12			
					500 D	A	p 97		16	CO	40	
(X) EPA		( ) Initial No			City State Zin	Codo	- 4	7				
( ) DEP		(x) Amended ( ) Cancelle		on	City, State, Zip	Code		SMET	11/14	72		
(X) DOL		( ) Caricelle	u		Carteret, NJ 0	7008		3 34	10 1	4.		
(X) DOH ( ) DCA					Name of Conta			Tel Nu	mher			
() DOA					Jim Sengebus		10 12 P					
			- 12	FACILITY IN	FORMATION		E 000 II 4	100	1		40	
Name of Facility Where Abar	tement is Ta	aking Place (3	3)		Type of Facility	(4)	21					
Hame of Falling Times		- 1	7		( ) School (K-1	12)	HPCS-WEST					
ICL Performance Products L	P				( ) Subchapter	8 (other th	an K-12)		4-			
Street Address	N	201			(X) Other (i.e.	private & co	mmercial blog	s., nom	es, etc.			
	4.0						9 4	2				
500 Roosevelt Avenue					Sq. Feet 53	,136_ # of	Floors	3	-11			
<u>City (5)</u>	County (6)		County C									
	Middlesex		(State Us	e Only)	Bldg. Age	67 years	-1 II - b IV -	Manufe	oturina.			
ountorot.					Current Use (p	rior if being	Name of Cor	tractor	(O)			-
Name of Monitoring Firm Hir	ed by Bldg.	Owner (8)	ASCM No	<u>0.</u>		2010 000	Name of Cor	iliacioi	9)			11.00
							Brandenburg	Industr	ial Serv	ce Com	pany	
None	one treet Address						2.4	ii.				
Street Address		Street Address							100			
		2217 Spillman	Drive									
City, State, Zip Code		City State, Zip	Code									
City, State, Zip Code	1					1						
				1	Bethlehem, Pe	ennsylvania	18015		-			
Project Manager for Monitor	ing Firm	Telephone I	Number		Telephone Nu	mber		License	e Numb	er		- 1
1.0/00,					A CONTRACTOR OF STATE		72 (8)	00704				
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		4			(610) 691-180	0		00721			134343	
Scheduled Start Date (10)		Scheduled (		Date (11)	Name of OSH	A Monitor						
November 26, 2012		December 2	20, 2012,		D de abour 1	ndustrial Co	nuina Compan	v				
100 100	10000				Brandenburg I		ervice Compan	у				
Occupancy Status During Al	patement (C	heck only on	<u>e)</u>		Street Address	2						
(X) Facility Closed/Vacated	During Entil	e Period of A	Datement		2217 Spillman	Drive						
( ) Abatement Performed O	utside of No	offilal Facility	riouis -		City, State, Zin							
Describe					Oity, Otato, Zit	7 0000						
Describe												
Other - Demo will be perfor	med from 12	2/03/12 thoug	h 04/12/13		Bethlehem, Pe	ennsylvania	18015			- 1		
Source of Work (Check all the												
<u> </u>												
(X) Demolition () Renov	ation						1 /-OF OF	-10 LE	A CRA)			
(X) Large Proj. (>160 SF or	>260 LF AC	CM) ( ) SM Pi	roj. (>25<10	60 SF or >10 <2	60 LF ACM) (	) Minor Pr	0]. (<25 SF 01	VIO LF	ACIVI)			
( ) Full Containment with N	egative Pre	ssure ()	Mini-Enclo	Description of	ovebag Procedur	Amount (	Specify SF or	LF)	Abate	ment Ty	pe	
Location of Asbestos-		ation Normally by Maint./Cus	y Usea etodial	thermal syster	ns insulation	Amount (	opening of of	/			1000	
Containing Material (ACM) in	n Solely Staff?		olulai	surfacing, VA		11.4		P. III	100		200	
Facility (13)	YES	NO NO	NA	miscell.)					Rem.	Rep.	Encap	Enclose
Bldg. 1,4 & 7	1.20		X	Floor Tile (no	n-friable)	715 5			Х			
Bldg. 1 & 4 Roof			X	Roof Mastic (		13,880 5	SF.	1	X	47		
Bldg 1 & 4			X	Transite Pane	I (non-friable)	46 5	SF	lw =	X			-
Bldg 1 d 4			X	Brake Shoes		5.5	SF		X			
Name of Reg. Waste Hauler		NJDEP Wa	ste Hauler	ID#	Cubic Yards o	f Waste	Tax and and	Name	of Reg.	Landfill		
		U.J.						0.00	WC .			* _
Freehold Cartage, Inc.		15939		1 1 1 = 2 2 =	65	400.0	CALLET STREET		.W.S., I		4.01	
		14					Dian Date	(vvaste	Manag	ement) City, Sta	to	
City, State		111-12-11					Disp. Date		7	Jily, Ola	ile.	
		* - 0	900				December 3	2012		/orrisvil	le. PA	
Freehold, NJ					Signature A		December 3	Date			-1	
Completed by (Print or Type) Title					Signature	+ N	***					
Jannifor Ctrobal		Contract Ac	ministrator		1 \ \ /\$	K N	20 174 21 12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	03/28/	13	1.		
Jennifer Strobel	the second was	CONTRACT AC	arininati atti		1//	100	i ind					M. of
				A THE STREET	-111	0	CONTRACTOR OF	- E				

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414

Telephone 609-984-6620

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D&S Proj. #: 2013			nt to NJAC	#1 / · ·		1 6	Tur Health & Sen	ior Service	S		
pate of Notification (1)  10 13 1/12 16 1/11 13    Gencies Notification	Name of Building TOM MINDI Birest Address	Owner/	Operator (2)	APR.	2 AN 12	Daton	(signature)	20			
☐ EPA ☐ Initial ☐ Amended ☐ Amended ☐ Amendment #k ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	66 OVERLO City, State, Zip C	ode		- 1.701	Wallia in	<i>t</i> / {.		E-LABOR STOPP LATER STOPP STOP	(		
DCA Emergency (Including justification)  Cancellation	MONTCLA Name of Contact TOM MINI		07042				Telephone Nun	nber			
L. Cancellation	11 ,2 3,12	1010 10 12 17 17 17	ITY INFORM	ATION		A CONTRACTOR OF THE PARTY OF TH		1			
Name of facility where abatement is tak  TOM MINDEN  Street Address	ing place (3)					Тура	of Facility (4) School (K- Subchapter Other (Priva	8 (Other th		12)	17
66 OVERLOOK ROAD						Sal	Bldgs./i-lom		Bld	g. Ag	je ·
City (5)	County (6)				(Code (7) use only)	-	rrent Use (Prior II		ollshe	d)	· :
MONTCLAIR Name of Monitoring Firm Hired by Bidg Street Address	ESSEX . Owner (8)		ASCM No.		iame of Abatem D & S REST breat Address 20 Californi	ORATIO			-uzvir		- 224
Project Manager for Monitoring Firm		e Númbe		1	lty, State, Zip G Paterson, N elephone Numl 973-345-8 Jame of OSHA	J 07503 per 020	Ціс	anse Num 01169			-
Start Date (10) 03/27/13	Sched, Completion   04/24/13	Dat <b>e (11</b>	)		D & S Rest	oration, I	nc				-
Decupancy Status During Abatement (C Facility closed/vacated during ent Abatement performed outside of Describe: NORMAL HOL	heck only one) lire period of abateme normal facility hours-	int.		-	20 Californi lty, State, Zip O Paterson, N	Code	,			· ;	fe
Scope of Work (check all that apply)	enovation emolition					Mint-	containment wine enclosure abag procedure Exempted (*) and		e proc	edure	9
asbestos-containing by material (acm) to be	location normally used y maintenance/custod laff(12)	ed solely ilal N/A		tion of as (ACM)	bestos-çontainl	ng	Amount (Specify SF o	v e	Repair	in cap	
Besoment/IST FLOOR .			PIPE INS	ULATIO	DM		18 L FT				
									眉		
Registered Waste Habier D & S RESTORATION, INC. City, State		sposal C		Waste	City, State	WN, RES	OURCE RECO	OVERY	170.7	- 10	•
PATERSON, NI: 07503 Completed by (Print of Type)	itle RESIDENT	03/28/1	3 Signature		TULLYTO	WN, PA	1	Date 03/26/13		1	

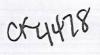
ASB-41

Queros   Volified   Spa   Positional   Pos	Data of National (4)	I Name of Bu	Iding Owner	r/Operator (2)		20)	1210.		Circles .				
Name of facility where abatement is taking place (3)	Date of Notification (1)		- 1	ropolator (2)			JAPA.	-8 AL					
Name of facility where abatement is taking place (3)	Agencies Notified Type Notifical						F.S.	F(j )	12:00				
Name of facility where abatement is taking place (3)		66 OVE	RLOOK R	OAD		€,	ilin.	100	7 ~		ť.		
Name of facility where abatement is taking place (3)	I I DEP I						2011,3	HOTHI.	HO1.				
Name of facility where abatement is taking place (3)	M DOI		-	07042									
DCA	DOH (including	Name of Cor		07012			, 1						
Caracterisation   FACILITY INFORMATION	justification	TOMAN	INDENI										
Name of facility where abatement is taking place (3)  TOM MINDEN  Street Address  66 OVERLOOK ROAD  City (5)  County (8)  ESSEX  Name of Monitoring Firm Hired by Bidg. Owner (8)  Street Address  City, State, Zip Code  Street Address  City, State, Zip Code  Paterson, NJ 07503  Start Date (10)  32/27/13  Occupancy Status During Abatement (Check only one)  Facility dosed/wcated during entire period of abatement. Describe-Desc	Cancellation	n   IOM M				<del></del>					_		
Street Address  66 OVERLOOK ROAD  City (5) County Code (7) (State use only)  MONTCLAIR ESSEX  Name of Monitoring Firm Hired by Bidg. Owner (8)  Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Phone Number  Paterson, NJ 07503  Pate			FACIL	LITY INFORMA	TION		1 10	1 25 0	-				
Subchapter 8 (Other than K-12) Subchapter 8 (Other (Private/Commercial Subchapter) Square Feet   # of Floors   Bidg. Age Current Use (Prior if being demolished)  Name of Abatement Contractor (8) D & S RESTORATION, INC. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503  Telephone Number   973-345-8020   01169  Name of OSHA Monitor D & S Restoration, Inc. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503  Telephone Number   973-345-8020   01169  Name of OSHA Monitor D & S Restoration, Inc. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503  Telephone Number   973-345-8020   01169  Name of OSHA Monitor D & S Restoration, Inc. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503  Telephone Number   973-345-8020   01169  Name of OSHA Monitor D & S Restoration, Inc. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503  Telephone Number   973-345-8020   01169  Non-Excepted (*) and Non-friable procedure Non-Exc	Name of facility where abatement	is taking place (3)				. 7	Type	of Facility	(4) ool (K - 12)				
Street Address 66 OVERLOOK ROAD City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Current Use (Prior if being demolished)  Name of Monitoring Firm Hired by Bidg. Owner (8)  Name of Monitoring Firm Hired by Bidg. Owner (8)  Name of Monitoring Firm Hired by Bidg. Owner (8)  Name of Abatement Contractor (9) D & S RESTORATION, INC.  Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503  Start Date (10) Society Code, Competion Date (11) D & S RESTORATION, INC.  Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503  Start Date (10) Start Date (10) Society Code, Competion Date (11) D & S Restoration, Inc. Street Address 20 California Ave. City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 California Avenue City, State, Zip Code Paterson, NJ 07503  Society Address 20 Califor	TOM MINDEN							=		her th	an K	-12)	
Square Feet		<del></del>					1						
City (5)  MONTCLAIR  ESSEX  Name of Montoring Firm Hired by Bidg. Owner (8)  Street Address  City, State, Zip Code  City, State, Zip Code  City, State, Zip Code  Street Address  20 California Ave.  City, State, Zip Code  Street Address  20 California Ave.  City, State, Zip Code  Paterson, NJ 07503  Telephone Number  Project Manager for Monitoring Firm  Phone Number  Street Address  20 California Ave.  City, State, Zip Code  Paterson, NJ 07503  Telephone Number  Project Manager for Monitoring Firm  Phone Number  Paterson, NJ 07503  Telephone Number  Paterson					100						DI	da A	
MONTCLAIR    Second Completed by Bidg. Owner (8)   ASCM No.		L County (6)					Squa	are Feet	# of Floor	5	DI	ug. A	Je
MONTCLAIR  Name of Monitoring Firm Hired by Bidg. Owner (6)  ASCM No.    Name of Abatement Contractor (9)	City (5)	County (6)					Curr	ent Lise (	Prior if being	dem	olishe	ed)	
Name of Monitoring Firm Hired by Bidg. Owner (8)  Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Phone Number  Project Manager for Monitoring Firm  Phone Number  Start Date (10)  3/27/13  O4/24/13  Occupancy Status During Abatement (Check only one)  Facility closed/vacated during entire period of abatement.  Abatement performed outside of normal facility hours-  Describe:  Other-Describe:  Other-De	MONTCLAIR	ESSEX			,		Guil	JII. 036 (	. Hor it boilt	, 40111			
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20 California Ave.						D & S RESTOR	RATION	I, INC.					
City, State, Zip Code Paterson, NJ 07503  Telephone Number  Start Date (10)	Street Address				7	Street Address	106 a		The second second		1.000		
Project Manager for Monitoring Firm    Phone Number   Phone Number						20 California A	Ave.						
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O3/27/13 Occupancy Status During Abatement (Check only one)  ☐ Facility closed/vacated during entire period of abatement. ☐ Abatement performed outside of normal facility hours- Describe: ☐ Other-Describe: ☐ Normal Hours  Scope of Work (check all that apply) ☐ ≥160 sf or ≥260 lf ☐ Demolition  Location of asbestos-containing material (acm) to be abated in facility (13)  Basement/IST FLOOR  Basement/IST FLOOR  PIPE INSULATION  Registered Waste Hauler D & S RESTORATION, INC.  Disposal Date	Start Date (10)	Sched. Completi	on Date (11	)				<b>.</b>					
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Abatement performed outside of normal facility hours-Describe:   NORMAL HOURS   Paterson, NJ 07503				Company of the Compan		20 California A	venue						
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D DOL	Amended Amendment #3 D Emergency (included)			City, Si	LIN	CROST ,	NJ	07738	16			
<b>™</b> DOH	justification)	unig		Name	of Conta	ct		T +-11		1	Ŧ,	1
Ø DCA	☐ Cancellation		3	1	PER	RY NOE	•			-		
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lame of Monitoring Firm	Hired by Building Own	ner AS	SCM No.		Name of Abates	ment Contractor (				-	7
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Decupancy Status During  Description  Location  Asbestos-Containing  TO BE AB  IN Faci  (13)	Abalement (Check or d During Entire Period Outside of Normal Faces of Normal Faces of the Ababas (ACM)  Material (ACM)  ATED  Ithius and the Action of the Material (ACM)	Is Lo Non Used S Mainte Cust St. (1	Recation mally colely by mance/ lodial aff?	enovation emolition  Asbes	Street Address  City, State, Zip (  Full   Minimal Glov   Non-  Description   Stos Containing Management of the miscellane   Non-  Cubic Yards of Waste	Code  Containment with Enclosure ebag Procedure Exempted (*) and alternal (ACM) insulation, or eous)	Amount (Specify SF or LF)	cedure	Removal	Тур	<u>pe</u>
Decupancy Status During  Pacility Closed/Vacate Abatement Performed Other - Describe: FA  Cope of Work (Check all  ≥ 3 sf or ≥ 3 lf  ≥ 160 sf or ≥ 260 lf  Location Asbestos-Containing TO BE AB IN Faci (13)	Abalement (Check or d During Entire Period Outside of Normal Faces of Normal Faces of the Ababas (ACM)  Material (ACM)  ATED  Ithius and the Action of the Material (ACM)	Is Lo Non Used S Mainte Cust St. (1	Recation mally colely by mance/ lodial aff?	enovation emolition  Asbes	Street Address  City, State, Zip (  Full   Mini-	Code  Containment with Enclosure ebag Procedure Exempted (*) and alternal (ACM) insulation, or eous)	Amount (Specify SF or LF)	cedure	Removal	Тур	oe.
Decupancy Status During  Pacility Closed/Vacate Abatement Performed Other - Describe: FA  cope of Work (Check all  ≥ 3 sf or ≥ 3 lf  ≥ 160 sf or ≥ 260 lf  Location Asbestos-Containing TO BE AB IN Faci (13)    ST. FLOOR	Abalement (Check or d During Entire Period Outside of Normal Face Pariod I that apply)  The of Material (ACM)  ATED  Hauler  ARTING / ACC	Is Lo Non Used S Mainte Cust St. (1	Recation mally colely by mance/ lodial aff?	enovation emolition  Asbes	Street Address  City, State, Zip (  Full   Minimal Glov   Non-  Description stos Containing M., thermal systems surfacing, VAT other miscellane  Cubic Yards of Waste  So #  Disposal Date	Code  Containment with Enclosure ebag Procedure Exempted (*) and alerial (ACM) insulation, or eous)  Name of Regist CROWS.  City, State	Amount (Specify SF or LF)	cedure	Removal	Typ	pe
Decupancy Status During  Pacility Closed/Vacate Abatement Performed Other - Describe: FActope of Work (Check all  ≥ 3 sf or ≥ 3 lf  ≥ 160 sf or ≥ 260 lf  Location Asbestos-Containing TO BE AB IN Faci (13)    ST. FLOOR	Abalement (Check or d During Entire Period Outside of Normal Face Pariod I that apply)  The of Material (ACM)  ATED  Hauler  ARTING / ACC	Is Lo Non Used S Mainte Cust St. (1	Recation mally colely by mance/ lodial aff?	enovation emolition  Asbes	Street Address  City, State, Zip (  Full   Minimal Glov   Non-  Description stos Containing M., thermal systems surfacing, VAT other miscellane  Cubic Yards of Waste  So #  Disposal Date	Code  Containment with Enclosure ebag Procedure Exempted (*) and alerial (ACM) insulation, or eous)  Name of Regist CROWS.  City, State	Amount (Specify SF or LF)	cedure	Removal	Typ	oe .



Date of Notification (1) 03/25/2013						ner/Operator ment Corp.			- to 1.1				
Agencies Notified	Type Notification			reet Addi 7 Bayai	ress rd Stree	t	- 2	1013 APR -	Z AM 12: 61	)			
× EPA × DEP × DOL	Initial Amended Amendment #		N	ew Bru		NJ 08901	, Š	SSESTO & LIC	SIGNIRO FNSIMS Telephone Num				
X DOH X DCA	justification) Cancellation		100	ame of Coel Bar					relephone Null	Det			
				FACILI	TY INFOR	RMATION							
Name of Facility Where						-	_	of Facility (4)					
Fire Museum & Co	offill fullity Center						X	School (K-12) Subchapter 8	(Other than K-12	)			- 1
81 Remsen Ave.							Ō	Other (i.e. privetc.)	vate & commercia	al buildi	ngs, h	omes	5,
City (5) New Brunswick							Squa	are Feet	# of Floors	Blo	lg. Ag	е	
County (6) Middlesex	47 ,			ounty Co			Curr	ent Use (Prior	if being demolish	ed)			
Name of Monitoring Fir	rm Hired by Building (	Owner (8)		ASCM I	No.			atement Contr	actor (9)		75		
DAI Environmenta	al Services			0012			Co.						_
Street Address 300 Grand Ave.						208		et Ave.					
City, State, Zip Code Englewood, NJ 0	7631							Zip Code IJ 07011					
	Englewood, NJ 07631  Troject Manager for Monitoring Firm  Steven Jaraczewski						hone 1	No. 8828	License N 00704	lo.			
Start Date (10) 04/08/2013	-,	Scheduled 04/13/20		pletion D	ate (11)		of OS	SHA Monitor . Inc.		et u			
Occupancy Status Du	ring Abatement (Che	ck Only One)	)			Stree	t Addr	ess	2 1 1 1 1 1				
× Facility Closed/V Abatement Perfo	acated During Entire ormed Outside of Norr	Period of Ab	atem	ent		City,	State,	Zip Code					
Scope of Work (Check			×	and Markey and a									
≥3 sf or ≥3 lf x ≥160 sf or ≥260	lf		novat					Mini-Enclosure Glovebag Proc	edure			9	
			-		1			Non-Exempted	(*) and Non-Fria			ement	t
			ocati ormal			Description	on of			_	Ty	ре	
Asbestos-Contain TO BE In F	ution of hing Material (ACM) ABATED acility 13)	Custo	ntena odial S (12)	nce/ Staff?		tos Containing thermal syste surfacing, \ other miscell	Mater ms ins /AT, o	ulation, r	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A		TSI		-	500 LF	×			
	r Room	X				TSI			100SF	×			1
	r Room	X			10570	VAT		-	60 SF	x		-	
2nd	Floor		X		1 122	VA			00 01	-	-		
Name of Registered Newark Carting I			1	J NJDEP W Hauler ID 5409	Vaste No.	Cubic Yards of Waste 20y		GROW	2 - 1 1 2	fill			
City, State Newark, NJ			3.14			Disposal Da	ate	City, Stat Morrisv	ville, PA	μ.,			
Completed by Voytek Roszkow	ski	Title Presi	dent	Wall is		Signat	urle -	Costo	1	Date 03/25/	201	3	

#### State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #:

2013-65

Check # 5834

Date of Notification (1)	Nam	e of Building Ov	wner/Operator (2	2) 20	13 APR - 2 :: 16						
0 13 1/12 16 1/11 13	Pa	ul Yanicak			L ~ /	$a_0$		-			
Agencies Notified   Type Notificati	, 11	t Address Belmohr St	root.	-						ε	
DEP Initial	100				& LICE AND				_		
DOL Amendr		State, Zip Code elleville, NJ (				(3)					
X DOH	Name	of Contact				Telephor	ne Numbe	r ·			
☐ DCA ☐ Cancella	ition P	aul Yanicak						_	_		
4		FA	CILITY INFOR	MATION	. 4						
Name of facility where abatement is	s taking place	(3)				Type of Facility	(4) of (K - 12)				
Paul Yanicak				-		pared .	apter 8 (0		han k	(-12)	
Street Address							(Private/C		ercia!		
59 Belmohr Street							/Homes, e # of Floo		В	ldg. A	Age
City (5)	County (	6)		10.000000000000000000000000000000000000	ty Code (7)				_		
Belleville	Essex			(State	e use only)	Current Use (P residential	rior if beir	ng den	nolish	ied)	
Name of Monitoring Firm Hired by 8	3ldg. Owner (8	)	ASCM No.	1	Name of Abatement Co	ontractor (9)					202 10 10 10 10
N/A					B & G Restoratio	n, Inc.					
Street Address			-L		Street Address 105 Ryerson Ro	ad					
City, State, Zip Code					City, State, Zip Code				_		CAL HOUSE
Oity, State, 21p Gode					Lincoln Park, N.	J 07035					
Project Manager for Monitoring Firm		Phone Nur	mber		(973)696-6869		License 00	Num 0378	oer		
Scheduled Start Date (10)	Sched. Co	ompletion Date	(11)	[	Name of OSHA Monito					a magina sees	
04/05/2013	04/06/2	2013		1	B & G Restoratio	n, inc.					
Occupancy Status During Abatemen	t (Check only	one)			105 Ryerson Roa	ad					
Facility closed/vacated during				16	City, State, Zip Code			6028 9	asi.	78	2022
Abatement performed outside Describe:	of normal facil	ity hours-			Lineala Dark N. I.	7025					
Other-Describe:				$- \bot$	LincolnPark, NJ (	11035					1.
Scope of Work (check all that apply											
	Renovation			Valentini Valentini	Il Containment w/negat	ive pressure		******			
>3 sf or >3 lf	≥160 sf or ≥26			X M	ni-enclosure	. 4	Non-fi		огосе	dure	
Location of	Is location no by maintenar	rmally used sole			30.00			e	R	E n	E
asbestos-containing material to be	staff(12)	oc/custoulai	<ul> <li>Descript</li> <li>material</li> </ul>	tion of as	bestos-containing	Amount (Specify S	F or	m	р	C	n
abated in facility (13)	Yes	No N/A		(ACIVI)		ĹĖ)		v e	i r	a p	Ľ
boiler room		X	pipe insu	lation		6 If		X			口
boiler room		X	pipe			9 lf		1111	ᆜ	X	닏
elec panel rm/storage room		X		lation/p	ipe insulation	15 lf / 3 lf		X	ᆜ	빌	님
laundry room		X	pipe		1 1 1 1 1	8 If			ᆜ	X	쁜
laundry room		, X	pipe insu		10 11	3 lf		X	Ц	Ц.	
Registered Waste Hauler B & G Restoration, Inc.	NJDEP I 195	lauler ID# 63	Cubic Yards of 1	vvaste	Name of Registered La Tullytown Re	esource & Re	covery	Cent	er_		
City, State Lincoln Park, NJ		Disposal 04	Date 4/06/2013		City, State Tullytown, PA		AW -				-/W
Completed by (Print or Type)	Title Secretary/T	reasurer	Signature	<u> </u>	Gordana Luna		Date 03/	26/20	013		

CK 6823

**MAY 11** 

Date of Notification (1)				Name o	f Building	Owner/Operator (2	2)		Vi.			
03 / _	28 / 13			Build	ding 66 -	Owner/Operator (2 Phillipsburg As  Drive. Suite 11	sociates	1 443				
Agencies Notified	Type Notification		-	Street A	Address		77.11	2 AM 12		i.		
⊠ EPA	Initial     Initial			222	Cameror	Drive, Suite 11	0 8 3 20 - 10-70		3	//		
☑ DOLWD	☐ Amended	£ .		City, St	ate, Zip C	ode (	& LIC	or Christian				ć
☑ DHSS	Amendment #_	di edia a		Phill	ipsburg,	NJ 08865	~ L/L	ENSINATUL				
☐ DCA (NJAC 5:23-8)	☐ Emergency (inc justification)	auding		Name o	of Contact			Telephone Numb	er			
(143/10/3.20-0)	☐ Cancellation			Dave	Zimme	rman			_			
				FAC	ILITY IN	FORMATION		2	-			9
Name of Facility Where	hatement is Taking	Place	(3)	170			Type of Facility (	4)				
Building 66 - Phillip							School (K-12)	)				
Street Address	,obarg common						Subchapter 8	(Other than K-12) ivate and commer	cial bui	ldinas	3	
Center Street							homes, etc.)	ivate and commer	olai bai	9	1	
City (5)							Square Feet	# of Floors	Bld	g. Ag	е	
Phillipsburg, NJ							3000	1	5	0		
County (6)				Count	v Code (7	(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Warren					, <b>,</b>	,						
Name of Monitoring Firm	Hired by Building C	wner (	8)	ASCM N	No.	Name of Abateme	ent Contractor (9)		786			
AET	Timed by building c	, which (	,	0002		Alliance Envi	ironmental Sys	tems				
Street Address		-			7.1	Street Address				4		
28 N. Pennell Road						550 East Unio	on Street					
City, State, Zip Code				-37192		City, State, Zip Co						
Media, PA 19063						West Cheste						
Project Manager for Mor	itoring Firm		Tele	phone h	No.	Telephone No.		License No.				
Eric Housekenech			1	00) 969		610-701-9000	)	00508				
		luled C	100	tion Dat		Name of OSHA N						
Start Date (10)					13	AET	- 1				i	
						Street Address			-			
Occupancy Status Durin				ment		28 N. Pennel	l Road					
☐ Facility Closed/Vacat     ☐ Abatement Performe	d Outside of Normal	Facilit	v Hou	rs - Des	cribe	City, State, Zip C						
Time of Abatement:	7:00AMPM/	3:30P	M	AM		Media, PA 19						
		100	25-27			Wiedla, 174 10					-	-1000
Scope of Work (Check a	ii that apply)					☐ Full Con	tainment with Neg	gative Pressure				
≥3 sf or ≥3 lf			novat			☐ Mini-End	closure g Procedure					
≥160 sf or ≥260 lf		∐ De	molitic	on		☐ Non-Exe	empted (*) and No	n-Friable Procedu	re			
		Is	Loca	tion	I					atem	ent T	ype
Location	n of		Norma	liy		Description	of		Z	ZD.	Щ	Щ
Asbestos-Containing	Material (ACM)		ed Sol		Asbe	estos Containing Ma	aterial (ACM)	Amount (Specify	Remova	Repair	cap	l clo
TO BE AB		100000		Staff?	(1.6	e., thermal systems surfacing, VAT		SF or LF)	oval	-	Encapsulate	Enclosure
IN Faci (13)			(12)			other miscellane					ate	1
		Yes	No	N/A	7. 1.		- E				-	-
Office Space	THE STATE OF			$\boxtimes$	Floor T	Tile		1800 SF	$\boxtimes$			
	1000 C				Mastic	7- 7	4 2 2 3	1800 SF				
Office Space		-	-	-	mastio			- 1 141		П		
4.1									ᆜᆜ	ᆜ	1	+-
											Ш	E
Name of Registered Wa	ste Hauler	1		NJDEP		Cubic Yards of	Name of Regi	stered Landfill	1000			
N.E.T.S.			i	Hauler II		Waste 5	BFI Imper	ial				
				18947		Disposal Date	City, State			30+H		
City, State Hazelton, PA						TBD	Imperial, I	PA		1		1
	T	0				1	1/1/		ate /	/_	0	1
							4	- Lander	4	7	4/	1
John Heemer	3 1	suma	IOF				V		10	-0	11	/
Completed By (Print or John Heemer  ASB-41 MAY 11		Estima		this form	ı for asbes	Signature exempted stos licensure exempted	1		ate	20	9/	1

Nother

Date of Notification (1) 03/26/2013			Name of B William		wner/Opera tz	ator (2)		2013 APD - Z				
Agencies Notified Type Notification			Street Ad						· AM			20.00
EPA Initial			418 Ca	rter Stre	eet			1900	1717/	5: 0	1)	
DEP Amended Amendment #			City, State Canaar					& LICEN!		12791	9	Ę
Emergency (in justification)  DCA  Emergency (in justification)  Cancellation	cluding		Name of William					Telephone Nur	mber;	7.		
			FACIL	ITY INFO	RMATION							
Name of Facility Where Abatement is Taking	Place (3)					Ty	pe of Facility (4	)				
Private Residence	2000						School (K-12	2)				
Street Address 8 West Road						×		3 (Other than K-12 ivate & commerci	2) al build	ings,	home	s,
City (5) West Orange					X 2 4	S	quare Feet	# of Floors	BI	dg. A	ge	
County (6) Essex			County C			- C	urrent Use (Prio	r if being demolish	ned)		E .	KE .
Name of Monitoring Firm Hired by Building Ox Sky Environmental	wner (8)		ASCM	No.	17.1		Abatement Cont wski Corpora					
Street Address 140 Boulevard					50.8	reet Ad	dress atchung Ave			1.		
City, State, Zip Code Mountain Lakes					Ci	ty, Stat	e, Zip Code Orange NJ					
Project Manager for Monitoring Firm		T	Telephon		Te	elephon		License N 01171	lo.			
Leonid Shereshevsky			1 (e) (-1,1e) (-1,1e)					01171	700			
04/04/2013	04/04/20	013	mpletion D	ate (11)			OSHA Monitor				1	
Occupancy Status During Abatement (Check	Only One	9)			St	reet Ad	dress					
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	eriod of Al I Facility	bater Hour	ment s		Ci	ty, Stat	e, Zip Code					
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoli				×	Mini-Enclosure Glovebag Proc				a	
					- V-1	اسا	Non-Exempled	( ) and Non-i ha	T	Abate		t
		Local orma	1000								ре	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Used Mair	i Sole	ely by ance/ Staff?			stems ir g, VAT,	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Pagement		1000	-		pipe ins	eulatio	n l	150LF	x	2 4	+ 10	-
Basement		X		-	hihe ii is	Juidil		TOOLI		-17-11	1	
15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7 1				1 12	23A 11 11		-10			
						at Prog					1 0	-
Name of Registered Waste Hauler	1	NJDEP W	aste	Cubic Yaı	rds	Name of I	Registered Landfi		10.15		L	
Kielczewski Corporation		Hauler ID		of Waste			oga Landfill					
City, State West Orange NJ		NA EL PO		Disposal	Date	City, State Morgan	town PA					
Completed by Slawomir Kielczewski	Title Presid	dent			Sign	ature 1917	rewsli	~	ate 3/26/2	2013	1	¥

Date of Notification (1	3/28/13	12.11		Name	of Buildin	g Owner/Operator	r (2) Rich Hubb	le APR		74 25.		635
Agencies Notified	Type Notification			Street	Address		346 N. 4th A	ve.	12	60	,	
EPA DEP DOL	Initial Amended Amendment #			City, S	tate, Zip C		hland Park, N	1000	h e	No.		1
M DOH DCA	☐ Emergency (in justification) ☐ Cancellation	ncluding		Name	of Contac		indical dist, 1	Telephone Numb	)Ar			
<u>.</u>	Ken S			FAC		ORMATION				1	100	
Name of Facility When	e Abatement is Takir	g Place	(3)				Type of Facility	(4)				
	Res	idence	)				School (K-1	2) 8 (Other than K-12	)			
Street Address	346 N.	4th A	ve.				Other (i.e., phomes, etc	orivate & commercia .)	al build	0.00		
City (5)	II:-blood D	aula NI	τ Λς	2004			Square Feet 2000	# of Floors	BI	dg. A 7	7	
County (6)	Highland P	ark, IV	J 08	Cour	ity Code (	7) (STATE		rior if being demolis Residence	hed)			
Name of Monitoring Fi	Middlesex	Owner	=	ASCM	-	Name of Abater	ment Contractor (9			-		
(8)	MECS							mental Service	es, In	c.		
Street Address	PO Box 34	1				Street Address		Box 322				
City, State, Zip Code			_			City, State, Zip (		NII 00501				
	Crosswicks, NJ	08515	1000				Allentow	n, NJ 08501		_		
Project Manager for M	lonitoring Firm Weisgarber Jr.			phone   9) 29	No. 8-4070	Telephone No. (609) 2	59-9688	The state of the s	0493	3		
Start Date (10)		duled Co	_			Name of OSHA						=
4/29/13		4	/30/	13			: N	IECS	*		1	_
Occupancy Status Du	177			i de la compa		Street Address		Box 341				
☐ Facility Closed/Vac	ned Outside of Norma	al Facility				City, State, Zip	Code					_
Other - Describe:		1					Crosswic	ks, NJ 08515				-
Scope of Work (Chec ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	k all that apply)		novati molitic			☐ Mini-Er	ontainment with Ne nclosure pag Procedure xempted (*) and N	egative Pressure on-Friable Procedu	re		11	
12 0	1.		ocatio						P	bate Typ		
Locatio		Used	Solel	y by		Description of			-	.,,,		Г
Asbestos-Containin TO BE AF IN Fac (13	BATED ility	Cu	itenan istodia staff? (12) No	Versent III	(i.e.,	tos Containing Ma thermal systems surfacing, VAT other miscellane	insulation, Γ, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Licioadia
Baser	nent	res	NO	×	Th	ermal Pipe In	nsulation	30 lf	×		- 6	
Buser	HOIL											
				7.5					-			
Name of Registered V	Vaste Hauler			JDEP V		Cubic Yards of Waste	Name of Reg	istered Landfill				
	nmental Servic	es Inc.	_ [	182	292	1 CU		T.R.R.F., I	nc.		_	5
City, State	Allentown,	NI				Disposal Date 4/30/13	City, State	Tullytown,	PA			
Completed By	Allentown,					Signature	F++	Date		COLD MARKET		
Mahlon E. S			ojec	t Mar	nager	1////	/		3/28	3/13		

ASB-41 MAR 00

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

CK 2381

Date of Notification (1)		1	Name of	Building	Owner/C	Operator (2)		2012		1.	* (3)	4
Agencies Notified Type Notification		1	Street An	dress	11		۸.	2013 APR	7 .			-3/
EPA Initial			40	100	AA	DLEY	KD	454	- 41	112	an	
DEP Amended		(	City, Stat	te, Zip Co	de . /	111		1987	200	20	r.C.	Ċ
DOL Amendment		-	So	Contact	_ P.	LAINT	ELD,	VJ-10.7	108	0	<u> </u>	
DOH justification)  DCA Cancellation		1	vame of	Contact	Ti	ACHUI	-					-
X DCA Cancellation				ITY INFO								
Name of Facility Where Abatement is Takin	ng Place (3)				ř.	Тур	e of Facility (	4)	22011			- "
P5E+G							School (K-1		2)			
Street Address	T 1	.,,	196				Other (i.e. p	8 (Other than K-12 orivate & commerci	2) al build	dings,	home	es,
341 MT. PLEASA City (5) WEST ORANGE	NI A	16				1	etc.) are Feet	# of Floors		ldg. A		
City (5)						Squ	N/A	N/A		W/,		
County (6)	:	1	County C	Code (7)		Cur		or if being demolish		0//	<i></i>	
ESSEX		1	STATE	SE ONLY				H STAT.	201		9.5%	
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.		Name of Ab	atement Cor	ntractor (9)				
ENVIRONMENTAL TACTICS			0045	5		UNIQUE	SYSTEM	S OF AMERICA	A INC			70.00
Street Address 64 BROAD STREET						Street Addr	ess TEHEAD /					
City, State, Zip Code	<del></del>	-				City, State,				<del>)</del>		_
MATAWAN, NJ 07747	,				1 100		RIVER, N.	08882				
Project Manager for Monitoring Firm TOM GEIGER			Telephor 732-29	ne No. 10-2217		Telephone 732-432-		License N 01111	lo.		8	
Start Date (10)	Scheduled	Com	pletion [	Date (11)			SHA Monitor	0.05.445010				
4/12/13	4/1	2	113					S OF AMERICA	4 INC	,. 		•
Occupancy Status During Abatement (Che	ck Only One	)				Street Addr	ess TEHEAD /	AVE			•	
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	mal Facility I	atem Hours	ent			City, State,						
Other - Describe: <u>ou7 boo</u>	62	_				SOUTH	RIVER, N.	J 08882				
Scope of Work (Check All That Apply)	<b>-</b>		•				eta 1					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	The second second	nova					ull Containm Iini-Enclosur	ent with Negative I	ressu	re		
	<u> </u>					L G	Slovebag Pro	cedure	olo Deo	a.d		
							ion-Exempte	d (*) and Non-Friat	DIE Pro	037127	emen	
	70	ocational	2.4		р.						ре	
Location of Asbestos-Containing Material (ACM)	Used	Sole	ly by		tos Con	scription of taining Materi		Amount		W	m	_
TO BE ABATED	Custo	tenar		(i.e.		systems insucing, VAT, or		(Specify SF or LF)	Ren	Re	ncap	Enclosure
In Facility (13)		(12)		-	other	miscellaneous	5)	Of Of Lif	Remova	Repair	Encapsulate	osur
	Yes	No	N/A	A. 3					-	1	te	(O)
OUTSIDE		X		TR	A5,7	E Pipi	,NE	15 LF	X		11	
									-			
				- 5	16	Yest Line	I N	Deciatored Lands		1-17		
Name of Registered Waste Hauler WASTE MANAGEMENT		Н	JDEP W auler ID		of Wa		GROW	Registered Landfill				
THE RESIDENCE OF THE PARTY OF T			1125			20						
City, State ELIZABETH, NJ					Dispo	sal Date 15/13	City, Stat	SVILLE, PA		3		9
Completed by	Title			Total Se	1 5	Signature		. Da	ate /2	-	1	•
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D&S Froj. #: 0013

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Date of Notification					r/Operator (2)		2013 APR - 2	AM 12: CO					
0 3 /12 7 Agencies Notified	Type Notification		ERRY L	702000 00									<u> </u>
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☐ DEP	Amended Amendment #:	11 -	y, State, Z		OAD			1.10					
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RIDGEWOO Name of Monitori			GEN		ASCM No.	<u> </u>	Name of Abatement	Contractor (9)			_	-	
Name of Monitor	ng i mii imed by i	blug. Owner	(0)		ASCIVI NO.		D & S RESTOR						
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City, State, Zip Co	de						City, State, Zip Code					32	
Oity, Giato, Esp oo					- 7	- 11	Paterson, NJ 0	7503					
Project Manager f	or Monitoring Firm		Ph	one Numb	er		Telephone Number		Licens	se Numb	er		
							973-345-8020	)		01169			
Start Date (10)		ISched.	Completio	on Date (1	1)		Name of OSHA Mor						
							D & S Restorat	tion, Inc.					
04/10/13 Occupancy Status	During Abotomor	04/24					Street Address	-					
	ed/vacated during			ment.			20 California A City, State, Zip Code			2,44		HO.	
Abatement	performed outside						ony, orace, zip cour				ż	411.7	
Describe:	ribe: NORMAL I	HOURS					Paterson, NJ 0	7503		4			
	check all that appl							Full Containment	w/negati	ve press	ure		
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>160 sf or	>260 If □	Demolition					×	Glovebag proced Non-Exempted (		n-friable	proce	edure	
	<del></del>	Is location	normally	used solely	yl .					R	R	Е	E
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				ID# 12	Cubic Yards of	Wasta	Name of Registere	d Landfill			Ш	Ш	
	Hauler RATION, INC.		P Hauler 06		1 YD	vvaste	TULLYTOWN	, RESOURCE I	RECOVI	ERY			
City, State	NI 07502		*	Disposal I 04/11/		7	City, State TULLYTOWN	J PA				H	
PATERSON, Completed by (Pr		Title		<u>-</u>	Signature		1 TOEBT TOWN	1, 222	Date				
BOGDAN JO	LDZIC	PRESID	ENT <sup>(</sup>			3			03/2	7/13			. \$
100.44				for asbest	os licensure e	xempted	activities.						

D&S Proj. #: 2013

Date of Notification	7 / 1 3	N	ARY G	RANT	r/Operator (2)		20ij Al	R-2 min	60				
Agencies Notified EPA DEP	Initial Amended	1	35 LIND	Y LANE			6 L	TOS COMITA	ÜL.				
<b>⊠</b> DOL	Amendment #:		y, State, Z LINCRO		7738				1.50				
<b>⊠</b> DOH	(including justification)	Nat	me of Conf		7730			Telepho	ne Numbe	r		-	
☐ DCA	Cancellation		MARY (	GRANT	400								
		THAT I		FACI	LITY INFORM	ATION				a 1.			5
Name of facility	where abatement i	s taking plac	e (3)					Type of Facility					
MARY GRA	NT		- /					Subc	ol (K - 12)	Other th		-12)	
Street Address	T AND	August 42						Bldgs	(Private/C	etc.	************	de A	
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LINCROFT			, (°) NMOUTH	ł			e use only)	Current Use (	Prior if beir	ng dem	olishe	ed)	
	ring Firm Hired by				ASCM No.	-11	Name of Abatemen	Contractor (9)					
						_	D & S RESTOR	ATION, INC.					
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City, State, Zip C	ode		Jre.				Paterson, NJ 0						į,
Project Manager	for Monitoring Firm		I Pho	one Numb	er		Telephone Number	7303	License	Numb	er	-	•
1 Toject Manager	for Monitoring 1 in			ono mamo			973-345-8020	)		1169			
Start Date (10)		Sched.	Completio	n Date (11	)	-	Name of OSHA Mo						
04/12/13		04/22/	13				D & S Restorar	ion, Inc.					
	s During Abateme					-	20 California A	venue					
Abatement	sed/vacated during t performed outside	of normal fa					City, State, Zip Code					¥ 1	1
the state of the s	cribe: NORMAL I					<u> </u>	Paterson, NJ 0	Full Containment	/====tive				_
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≥160 sf or		Is location	normally	sed solely		-	L	Non-Exempted (	) and ivon	R	Proc	E	
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material (a abated in f	cm) to be facility (13)		No	NI/A	material (	ACM)		(Specify LF)	SF or	o v	a	a	C
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Registered Waste			P Hauler II		ubic Yards of V	Vaste	Name of Registere	d Landfill	ECOVE	ov.			
D & S RESTO	DRATION, INC.	1350		Disposal D	YD	0.03.01	TULLYTOWN City, State		ECOVE	<b>\1</b>	-		
PATERSON,	NJ 07503		* *	04/15/1			TULLYTOWN	, PA					
Completed by (P BOGDAN JC	OLDZIC	Title PRESIDE		ŧ	Signature				Date 03/27	/13			
ASB-41		* Do not use	this form f	or asbesto	s licensure ex	empted	activities.						

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D&S Proj. #: 2013

ASB-41

Date of Notification	2 (1)	Name of	Building Own	ner/Operator (2)		2017 100						
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Agencies Notified	Type Notification			IND DEE		** ) /y   p	- (4)	,				
☐ EPA	Initial Amended	45 GI	ORGIAN (	COURT		& LIC	$\mathcal{E}_{\mathbf{i}}(\Omega_{\mathbf{k}})_{K(0)}$					
DEP	Amendment #:		te, Zip Code	COURT		<u> </u>	130					
□ DOL	Emergency	_	ABETH, N	I 07205								
<b>⋈</b> DOH	(including	Name of		01203			Telepho	ne Numbe	r			
☐ DCA	justification)	ANT	ra e edu	ADD DEE			1					
	Cancellation	ANI	ΓA & EDW	ARD DEE					_	_		
			FAC	CILITY INFORM	ATION				47. —			
Name of facility w	here abatement is t	aking place (3)					Type of Facility	(4) ol (K - 12)				
ANITA & ED	WARD DEE							hapter 8 (0		an K	12)	
Street Address								(Private/C			,	
								./Homes,		DI	J A	
45 GEORGIA	N COURT	I Camata (C)					Square Feet	# of Floo	ors	В	dg. A	ge
City (5)		County (6)			100 CH 400 C	nty Code (7) e use only)	Current Use (	Prior if heir	ng dem	olishe	d)	
ELIZABETH		UNION			(0.0.	,	Cullent Ose (	TIOI II DOI	ig dem	Jiionic	,	
	ing Firm Hired by Bl	dg. Owner (8)		ASCM No.		Name of Abatemen	t Contractor (9)			7		
T T					_]]	D & S RESTOR	RATION, INC.					
Street Address					ᆔ	Street Address						
						20 California A	Ave.					
City, State, Zip Co	ode					City, State, Zip Code	Э					
		1				Paterson, NJ 0						1
Project Manager f	or Monitoring Firm	11	Phone Num	nber		Telephone Number		License		er		
						973-345-802			01169		_	
Start Date (10)		Sched. Com	pletion Date (	11)		D & S Restora						
04/08/13		04/26/13				Street Address	tion, nic.			_		
The state of the s	During Abatement		9)			20 California A	venue					
	ed/vacated during e					City, State, Zip Cod						
Abatement	performed outside o											
Describe:  Other-Describe:	cribe: _NORMAL HC	URS				Paterson, NJ 0	7503					
	check all that apply)						Full Containment	w/negative	e press	ure		
$\ge 3 \text{ sf or } >3$	If 🖂 I	Renovation					Mini-enclosure	rueur -				
☐ >160 sf or 3	>260 If	Demolition				P P	Glovebag proced Non-Exempted (		-friable	proc	edure	9
	<del></del>	Is location norm	ally used sole	ely	_			7.0"	R	R	E	E
Location of asbestos-c	ontaining	by maintenance staff(12)	/custodial	Descripti	on of a	sbestos-containing	Amount	OF	e m	е	n	n
material (a	cm) to be		T	- material	(ACM)		(Specify LF)	SF or	0	a	а	L
avaleu iii la	active (10)	Yes N	o N/A					, d	ė	r	р	
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Registered Waste	Hauler RATION, INC.	NJDEP Ha 13506	uler ID#	Cubic Yards of 2 YDS	vvaste	Name of Registere	ed Landfill I, RESOURCE F	ECOVE	RY			
City, State	Tarrion, Inc.		Disposa			City, State				13.5		
PATERSON,	ที่มี 07503		04/09			TULLYTOW	V, PA	faul II.	I.		) i	
Completed by (Pr	rint or Type)	Title	1 -	Signature				Date				-7-11
BOGDAN JO		PRESIDENT					<u> </u>	03/25	0/13			
ΔSR-41	*	Do not use this	form for asbe	stos licensure ex	empte	activities.						

D&S Proj. #: 2013

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Date of Notificatio						r/Operator (2)		2013	APR	-2 -1	٥. ٨				* *
Agencies Notified					JN.	ERAL HOM	E			!!	$\leq (0)$				
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☐ DEP		1		Zip Code	Section 1	TOR ROTH				10				-	
<b>⊠</b> DOL	Amendment #:														
	Emergency (including			EDGE,	MJ		-			LTalanha	no Mumbe		-	780	
M DOH	justification)	Na	me of Co	ntact	3					relepho	ne Numbe	=			
DCA	☐ Cancellation		CLAIR	E BEAU	JG	ARD									
19		- 4		FA	CIL	ITY INFORM	ATION								
Name of facility w	vhere abatement is	s taking place	ce (3)						Тур	e of Facility					
BEAUGARD	FUNERAL HO	ME									ol (K - 12 hapter 8 (		nan k	(-12)	
Street Address											(Private/0		rcial		
869 KINDER	KAMACK ROA	AD	100 an						So	uare Feet	# of Floo		В	ldg. A	ge
City (5)	Jan Carlotte	Coun	ty (6)		_		Cour	nty Code (7)							
		47.4						e use only)	Cı	urrent Use (I	Prior if bei	ng den	olish	ed)	
RIVER EDG			GEN		_	1001111-		Name of Abatement	Contr	ractor (0)					
Name of Monitor	ing Firm Hired by I	Blag. Owner	(8)			ASCM No.									
					_			D & S RESTOR	RATIO	ON, INC.					
Street Address								Street Address							
- te-u								20 California A							
City, State, Zip Co	de							City, State, Zip Code	9						
	1			1				Paterson, NJ 0	7503						
Project Manager f	or Monitoring Firm		P	hone Nun	nbe	er		Telephone Number			Licens	e Numl	er		
								973-345-8020	)			01169			
Start Date (10)		Sched	Complet	ion Date (	(11)	)	-1	Name of OSHA Mor					-		
8 7		100000000						D & S Restorat	tion, I	nc.					
04/11/13		04/26					_	Street Address							
Occupancy Status								20 California A		3	1 - 1 - 1	1-4	- 1 -	- 19	2.4
Abatement	ed/vacated during performed outside							City, State, Zip Code	9						
Describe:_	NORMAL E	IOURS						Paterson, NJ 0	7503					18 n	
	ribe: <u>NORMAL</u> F							Taterson, 145 0					eller web		
	check all that appl	у)								Containment enclosure	w/negativ	e press	ure		
$\ge 3$ sf or $>3$	lf 🖂	Renovatio	n							enciosure ebag proced	ure				
≥160 sf or 2	260 If	Demolition						P		Exempted (*		-friable	proc	edure	)
		Is location	normally	used sol	ely		30, 7				7	R	R	E	1
Location of asbestos-co		by mainte				The second of the second	on of a	sbestos-containing		Amount		e m	e	n	l E
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abated in fa	acility (13)	Yes	No	N/A		100				LF)		V	i	p	L
					_	DIDE INCL	TATI	OM		80 L FT		e	1		
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Basement			LX			BAKE HEA	TINC	9 PIPES(RECLEA	IN)	130 L FT		井	片	M	#
												44	Щ	H	낻
													Ш		
Registered Waste	Hauler		P Hauler	ID#		ubic Yards of V	Vaste	Name of Registere	d Land	Ifill	77742		W.	1	Wit.
D & S RESTO	RATION, INC.	135			1	YDS		TULLYTOWN	, RES	OURCE R	ECOVE	RY	10/16/2		
City, State	-			Disposa				City, State	1	D. State Control	***				(211)
PATERSON,	NJ 07503			04/12	2/13	3	0_	TULLYTOWN	I, PA		* *				
Completed by (Pr		Title		15 E	Ī	Signature	13.				Date				
BOGDAN JO		PRESID	ENT			É				2.2	03/26	/13			
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71/18			* +		Har 2	6 2013 10:06am	. 10	U1/U	]]		
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buo. Lelin. Ward			in the second	e de la company	No. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10		-	4	OF PIG	-5	
te of Notification (1)	11	Building Owner/O				Date: SZ	(signature)	1	26	1	,
0  3  /12  6  /11  3		ON BROSCIO	u <b>š</b> 013 APR	7 000			- The state of the				EG.
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Amended	488 R	DGEWOOD R	OAD	ENSING	1. 1.	· · · · · · · · · · · · · · · · · · ·	(				
Amendment #		Lewood, Nj		rending			:				-
SZ DOH (Including	Name of					Telephone N	imber	1.40			461
DCA justification)	BRIN	TON BROSCI	ous								-
III carronaura		FACILIT	Y INFORMATIO	NC							
lame of facility where abatement to	s taking place (3)	i i			T	ype of Facility (4) School (F	( - 12)				
			Territoria.			Subchapt	er 8 (Olhei	than	K-12	)	
BRINTON BROSCIOUS Street Address		1		1		Other (Pri	vete/Comm	nerch	al		
		1					of Floors	T	Bldg.	Age	7
488 RIDGEWOOD ROAD	County (6)			County Code	(7)				alanel \		_
City (5)			(	State use onl	A), ;	Current Use (Prior	it being or	HON 18	#16C)	1	i
MARLEWOOD	ESSEX CHARACTER		ASCM No.	Name of	Abstement Co	ntractor (9)					Transfer of the last of the la
ame of Monitoring Firm Fired by	Blog. Owner (a)		ACCIVITION			TON, INC.				:- d.A4	
treat Address		ع احجاد		Street A				**			
					alifornia Ave. le, Zip Code	<u> </u>		-		7	-
ity, State, Zip Code					rson, NJ 0750	03					
Project Manager for Monitoring Fire	m	Phone Numbe	r	Telepho	ne Number	-	License No		Г		
(Diect Mansdal to Mouround : **	"				3-345-8020		011	9			+
Start Date (10)	Sched, Con	pletion Date (11)			OSHA Monto S Restoration						
03/27/13	04/16/13				ddress	iles automobiles com f. 19	A			. 1	
Occupancy Status During Abatem	The same of the sa	18):			alifornia Ave	nue					_
Fedility closedwacated durin	no entire period of	abatement.		City, Sta	ate, Zip Code					1	
Abatement performed outside Describe:  Other Describs: NORMAL	36 DI UOITTEI IACIII	A Hodio.		- Pate	erson, NJ 075	03					-
				- 11 -	F	uli Containment wh	negative p	resst.	re	1	
Scope of Work (check all that ap			144 - 124 - 134 - 1		X.	lini-enclosure Novebag procedure	,				Ť
	Demolition			1-200-200-200-200-200-200-200-200-200-20		Von-Exempted (*)	nd Non-fr				_
Location of	is location not by maintenan	mally used solely				Amount	1200 2	R	R	E)	F
aspestos-containing material (acm) to be	staff(12)	Devocations	Description material (A	n of asbestos VCM)	-containing	(Specify Si	For	m o	P	a	
abated in facility (13)	Yes	No N/A						8		p	
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								d			t
							s jagdage				11
REGISORE WORK TRUIS	NUDEPI		ubic Yards of V	Vaste Name	of Registered	Landfill RESOURCE RE	COVER	Y		177	-
D E S RESTORATION, IN	C. 13506	Disposal I	1 YD		State					Ţ.	
CIN, Sam PATERSON, NJ 4 07503		03/28/1	13		LLYTOWN,	PA	Test	-CFT-CF			-
Congligation (Printor 1998)	Title		Signature	1	41		Date 03/26/	13	1		
BOGDAN IGLDZIC	PRESIDEN	ls form for asbas	leo Braingure ax	empted activi	ties.						

D&S Proj. #: 2013

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Date of Notification	1 (1)	Name of B	uilding Owne	er/Operator (2)			400	1-2.	1110		1,000		
10 13 1/12 16	1/1/3	BRINT	ON BROSO	CIOUS		A.	1		18:01	)			
Agencies Notified	Type Notificatio						411	初念					
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DOL	Emergency		EWOOD, 1	NJ 07040					91				
<b>⋈</b> DOH	(including	Name of C						Telepho	ne Numbe	r		-	
☐ DCA	justification)	DDIN	ON BROS	CIOUS				1					
	Cancellation	DKIN			ATION			No.				-	
77 135			FAC	ILITY INFORM	ATION		Type	of Facility	(4)				
Name of facility w	here abatement is	taking place (3)					llype		ool (K - 12	)			
BRINTON BR	OSCIOUS		T -			Marine ten Marinetti		Subo	hapter 8 (	Other th	an K-	12)	
Street Address					Heavy			Othe      Othe     Othe      Othe	r (Private/0 s./Homes,	Comme	cial		
488 RIDGEW	OOD POAD						Sai	are Feet	# of Floo		Blo	lg. Ag	ge
City (5)	OOD ROAD	County (6)			Cour	nty Code (7)							
City (5)						e use only)	Cu	rrent Use (	Prior if bei	ng dem	olishe	d)	, .
MAPLEWOO	DD .	ESSEX					<u> </u>						
Name of Monitori	ng Firm Hired by B	ldg. Owner (8)		ASCM No.		Name of Abatemer	nt Contra	ctor (9)					
						D & S RESTO	RATIO	N, INC.					
Street Address						Street Address	Alexander and the second	de de la company					
	101					20 California			-		-		
City, State, Zip Co	de					City, State, Zip Cod							
	- 1	-	1			Paterson, NJ			1	e Numb	0.5		
Project Manager f	or Monitoring Firm		Phone Numl	ber		Telephone Number 973-345-802				e Numb 01169	er		
						Name of OSHA Mo				01107		_	
Start Date (10)		Sched. Compl	etion Date (1	1)		D & S Restora		ıc.					
03/27/13		04/16/13			5.	Street Address						100	
	During Abatemen					20 California	Avenue						
☐ Facility clos	ed/vacated during	entire period of ab	atement.			City, State, Zip Coo	de	1000					
Abatement	performed outside	of normal facility h	ours-										
Describe: M Other-Describe:	ribe: NORMAL H	OURS				Paterson, NJ	07503				1		
	check all that apply				57 1000			ontainmen	t w/negativ	e press	ure		
		Renovation				<u> </u>		enclosure bag proced	d				
≥160 sf or 3		Demolition						Exempted		n-friable	proce	edure	
		Is location norma	lly used sole	ly						R	R	Ε	Е
Location of asbestos-c		by maintenance/	custodial		tion of a	sbestos-containing	W. 18.	Amoun		m	e p	n	n
material (ad	cm) to be	staff(12)	- 1	- materia	I (ACM)			(Specify	y 3F 0I	0	a	а	L
abated in fa	acility (13)	Yes No	N/A							е	j.	р	_
GARAGE		X		DUCT IN	SULA	TION	2	0 SQ FT	D 1		Ш		빝
0.110.102		1000000								ᆜᆜ	ᆜ		븯
	a proper decision				2002/00/5	A TOTAL CONTROL OF	A CONTRACTOR				ᆜ		님
1 200 1 20 10					\$ 1.1 Y		4472144				Ш		닏
							100		7.835		Ш	Ш	
Registered Waste	Hauler	NJDEP Hau 13506	ler ID#	Cubic Yards of 1 YD	f Waste	Name of Register TULLYTOW	red Land N. RES	OURCE	RECOVE	RY			
	RATION, INC.		Disposal			City, State	A CHARLES	1. 17. 11. 15.	WELL WITH THE	WI PERM	. 75 ID. 1	(T) 9 (I)	2441
City, State PATERSON,	NJ 07503		03/28/		Ve Pari	TULLYTOW	N, PA	413/475	11.3				
Completed by (Pr		Title	- 1	Signature					Date	C/12			
BOGDAN JO	LDZIC	PRESIDENT							03/2	0/13			
ACD 44		Do not use this fo	rm for asbes	stos licensure e	exempte	d activities.							

#### State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #: 2013-68

Check# 5837

Date of Notification	· (1)	I I N	of Double	ling Owns	r/Operator (2)								
		Name	of Bullo	artolozz	rioperatoritzi	APR	-Z AN 12: 00			141			
10   3   /   2   9			iiiiei L	Jai (OlOZZ						-		_	
Agencies Notified EPA	100	1	Address		. Salar	101	DS CONTROL	c e				í	
☐ DEP	<b>▼</b> Initial			po Road		& Li	CERTING						
X DOL	☐ Amendm	The second secon	State, Zij ompton		NJ 07444								
X DOH		Name	of Conta	act				Telephone	Number			3,	
☐ DCA	Cancellat	ion Je	ennifer	Bartoloz	zi	TOTAL MARK							
				FACIL	ITY INFORM	ATION			D				
Name of facility w	here abatement is	taking place (	3)					Type of Facility (4					
Jennifer Bart	olozzi								pter 8 (Other	tha	ın K-	12)	
Street Address								Other (F	rivate/Comn	nero	cial		
41 Ramapo	Road					. ,			of Floors	T	Bld	g. Ag	е
City (5)	<del></del>	County (	6)			Cour	ity Code (7)						
	ains, NJ 07444	Morris				(Stat	e use only)	Current Use (Pri	or if being de	emo	lished	d)	
11 10 10 10 10 10 10 10 10 10 10 10 10 1	ng Firm Hired by B			<del></del> 7	ASCM No.	П	Name of Abatement C			-		-	_
Name of Monton	N/A	nag. Omno. (e	,		100		B & G Restoration	on. Inc.					
Street Address							Street Address						
Street Address							105 Ryerson Ro	oad					
City, State, Zip Co	de						City, State, Zip Code Lincoln Park, N	J 07035					
Project Manager fo	or Monitoring Firm		I Pho	ne Numb	er		Telephone Number	and the mil	License Nu		er .		
Project Manager N	or Morntoning 1 min						(973)696-6869		0037	8			
Scheduled Start D	ate (10)	Sched. Co	ompletion	n Date (11	)	-	Name of OSHA Monit B & G Restorati						
04/09/2013		04/10/2	2013				Street Address	on, mo.			-		
Occupancy Status	During Abatemen	t (Check only	one)				105 Ryerson Ro	oad	0.0		4		
Facility close	ed/vacated during	entire period o	of abater	nent.			City, State, Zip Code						
Abatement   Describe:	performed outside	of normal faci	lity hours	S-			LincolnPark, NJ	07035					
Other-Desc	ribe:					- 1	LINCOIN AIX, 140			_			
	check all that apply	)	*				41		Glovebag		andı	ro	
☐ Demolition	X	Renovation					ull Containment w/neg		Glovebag     Non-friab	**********			
$\times$ >3 sf or >3	If 🔲 :	≥160 sf or ≥26				X	fini-enclosure		I TAOIT-III AD		R	E	
Location of		Is location no by maintena	ormally unce/cust	ised solely odial				Amount	e		е	n	E n
asbestos-co material to		staff(12)			Descript material		sbestos-containing	(Specify S	For o	1	pa	c	C
abated in fa		Yes	No	N/A				LF)	v e	- 1	i r	p	L
basement boil	er room			X	pipe insu	lation		9 lf	[2	_			믬
basement clos	set A & B			×	pipe insu			6 lf & 4 lf	[2	_	믬	부	붜
laundry room				X	pipe insu		VAT	20 lf / 10		_		님	片
basement mai	n room			X	pipe insu			45 lf	<u>X</u>	-		부	믬
1st fl dining rm	a & bathroom			X	pipe insu			21 lf		1	ш	Ц	ш
Registered Waste B & G Restor	Hauler		Hauler II 563		ubic Yards of	Waste		Resource & Re	covery Ce	ento	er		
City, State Lincoln Park,		and the		Disposal Dis	ate /10/2013		City, State Tullytown,	PA					
Completed by (Pr		Title			Signature		Gordana Luna		Date	10		14	
Gordana Lur		Secretary/	Treasu	irer			Gordana Zuna	1. 1	03/29	120	173		

### State of NJ

B & G proj. #:

2013-67

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

Check # 5836

Date of Notification	n (1)	Nar	me of Build	ding Owne	er/Operator (2)	201	3 APR - 2 AM	151 00					2 0	
0 13 1/12 19			ara Wes	st				e trans						
Agencies Notified EPA	Type Notification	11000	eet Addres 29 Howla		le .	j.	e LIGENSI	116	t					
☑ DEP	Amendme		, State, Zi West Ca		NJ 07006						33 <b>4</b> 55 VI			
M DOH		Nar	ne of Cont	act					Telepho	ne Numb	er		1 4	2
☐ DCA	Cancellat	ion    _	Tara We	est										_
	1.1.1.1			FACI	LITY INFORM	MATION								
Name of facility w	here abatement is	taking plac	e (3)	***				Туре	of Facility	(4) ol (K - 12	2)			
Tara West								5 L	Subc	hapter 8	Other th		12)	
Street Address					7					r (Private/ s./Homes,		cial		
29 Howland	Circle				14 P	- XX		Squ	are Feet	# of Flo		Blo	lg. Ag	е
City (5)	-	County	y (6)			10000000	nty Code (7)	-		Dring if ho	ing dom	oliche	d)	
West Caldw	ell, NJ 07006	Esse	ex			(Sta	te use only)		rent Use ( idential	Prior if be	ing aem	Olistie	:u)	
Name of Monitori	ng Firm Hired by B	ldg. Owner	(8)		ASCM No.	1	Name of Abatemen	t Contra	ctor (9)		10 m			
A STATE OF THE STA	N/A						B & G Restora	ation, Ir	IC.					
Street Address							Street Address 105 Ryerson	Road						
City, State, Zip Co	de			<del></del>			City, State, Zip Code Lincoln Park		035					
Project Manager f	or Monitoring Firm		Pho	one Numb	er		Telephone Number (973)696-68				se Numb 00378	er		
		Cahad	Completio	n Date (1:	1)	_	Name of OSHA Mo							
Scheduled Start D		0400000000		II Date (1	1)		B & G Restora	ation, I	nc.					
04/08/2013	During Abatement	0.000.000.000	9/2013				Street Address 105 Ryerson	Road						
Facility clos	ed/vacated during of performed outside	entire perio	d of abater	ment.		_	City, State, Zip Cod	le	35					
Scope of Work (c	check all that apply	) Renovation	1			X i	Full Containment w/n	negative	oressure	Glov	ebag pr	oced	ıre	
$\square > 3 \text{ sf or } > 3$	If 🗶	≥160 sf or ≥	260 If				Mini-enclosure		- 1911	☐ Nor	-friable	-		
Location of asbestos-comaterial to	ontaining	Is location by mainter staff(12)	normally unance/cust	used solel todial	1	tion of a	asbestos-containing		Amount (Specify		e m	Repa	n c a	E n c
abated in fa		Yes	No	N/A	materia	, (, 10)		100	LF)	Q Pe	v e	i	p	L
lower level				X	floor tile	& mas	stic	+: -: -	470 sf		X			H
											+	H	片	H
- 125 F. T 40527 . T								1 5 4 9	un autra		一片		百	Ī
	and the second					-				12.17.00				
Registered Waste B & G Restor	Hauler ation, Inc.		P Hauler I 9563		Cubic Yards o	f Waste	Tullytow	ed Landf n Resc	ill ource & l	Recove	y Cen	ter		- 1
City, State Lincoln Park	NJ			Disposal I 04	Date 1/10/2013		City, State Tullytowr	n, PA				erent Hi		13
Completed by (Progordana Lur	rint or Type)	Title Secretar	y/Treasu	urer	Signature	ţ.	Gordana Luna		*	Date	3/29/2	013		N.

### State of NJ

B & G proj. #:

2013-66

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

Check # 5838

Date of Notification		- 11	ame of Build		er/Operator (2)	2013 APR	Z AM 12: 60				
Agencies Notified EPA		n St	reet Addres 378 Fore	s	ue	7 7476.577	TS COMERGE				í
DEP DOL	☐ Amendme		ty, State, Zi Glen Rid		07028			-			
DOH DCA	☐ Cancellati	1	me of Cont Cynthia		)		Telephor	e Number			30
	la .				LITY INFORM	ATION					
Name of facility v	where abatement is	taking pla	ce (3)				Type of Facility				
Cynthia Salz							_ Subch	ol (K - 12) apter 8 (Other			
Street Address 378 Forest A	Avenue						Bldgs.	(Private/Comm /Homes, etc. # of Floors	G	ildg. A	ge
City (5)		Coun	ty (6)			County Code (7)	=   Square reet	# 011 10013		g	J-
Glen Ridge	, NJ 07028	Ess				(State use only)	Current Use (P	rior if being de	molisi	ned)	
Name of Monitor	ing Firm Hired by B N/A	ldg. Owne	r (8)		ASCM No.	Name of Abatem B & G Resto	nent Contractor (9)				
Street Address						Street Address 105 Ryerso					
City, State, Zip Co	ode					City, State, Zip C	ode ark, NJ 07035				
Project Manager	for Monitoring Firm		Pho	one Numb	er	Telephone Numb (973)696-		License Nun 00378			
Scheduled Start I	Date (10)	Sched	. Completio	n Date (1	1)	Name of OSHA		52 (In	3		
04/10/2013			1/2013	13		Street Address	oration, Inc.				
Occupancy Status	s During Abatement	(Check o	nly one)			105 Ryerso	on Road	n 1			Hg h
Facility clos Abatement Describe:	sed/vacated during e performed outside o	entire perion	od of abater facility hours	ment. s-		City, State, Zip C	code k, NJ 07035				
Other-Desc						-   = Emodificant	1,110 07000				-
Scope of Work ( Demolition  3 sf or >3		Renovation 160 sf or		report i		Full Containment	w/negative pressure	Glovebag			
Location of asbestos-comaterial to	containing		n normally usenance/cust			on of asbestos-containir (ACM)	(Specify	SF or o	e p	E n c a	E n c
abated in fa		Yes	No	N/A			LF)	v e	i r	р	L
basement				X	pipe insul	ation	17 lf	X	F	品	H
									占	岩	片
						February St. 1933-19	C-A1-A-11		T	甘	Ī
						10.700					
Registered Waste B & G Restor	Hauler ration, Inc.		EP Hauler II 19563	(SE-2)	Subic Yards of 1/2	Tullyto	tered Landfill own Resource & R	ecovery Ce	nter	1, 17	
City, State Lincoln Park	. NJ			Disposal I 04	Date -/11/2013	City, State Tullyto	wn, PA	TARREST C			
Completed by (P Gordana Lur	rint or Type)	Title Secreta	ry/Treasu	ırer	Signature	Gordana Lui	na	Date 03/29/	2013		Y.

1303-4621 Check #5099

Date of Notification	(1) 3/29/13			Nan	ne c	of Build	ing (	Owner / Opera rgy Coติที่สำ	tor (2)	9 AM 14	ίρ .				100
Agencies Notified EPA	Type Notifica			10 I	eet /	on P	s <mark>lace</mark>	- Building A							
DEP DOL DOH		nded# gency		Mo	rris	ate & Z town, of Conta	NJ	ode <b>07960</b>	& LIC	CENSING		Telepho	ne l	lumi	hor
☐ DCA		ellation				Jone					4	ТСІСРІІС	nic i	voii i	
					AC	ILITY	INF	ORMATION		/					_
Name of Facility W JCP&L/FirstEner Street Address	here Abateme <b>'gy</b>	ent is Taking I	Place	(3)				Type of Fac	(K-12)		K-12)				
175 Center Stree	t			*				Other (	i.e. priv	ate & comm	ercial buildin	-		etc.)	
City (5)		County (6)	10	ount	· Co	ndo (7)		Square Fee	et	# of Floors		3ldg. Ag			
Landing		Morris		ounty	y Cc	ode (7)				if being dem	olished)		50-	•	72
Name of Monitoring  1 Source Safety		y Building Ow	ner (8	3)		ASCM	No.	Name of Ab AbateTecl	ateme	nt Contractor	(9)				-
Street Address 140 South Village City, State & Zip Co Exton, PA 19341	e Ave. Suite	130	- 17 E		-1	tract.	7 - 12a	Street Address PO Box 25 City, State 8	ess 5 & Zip C	ode	Strik dan period				
	Monitoring F	irm	100-7000	phor		lumber		Telephone I 609-265-2	Numbe		License N	Number 0052	99		
Scheduled Start Da 4/8/13	te (10)	Scheduled Co	mplet		ate			Name of OS EMSL Ana	SHA Mo			0002		-	
Facility Clos Abatement	heduled Start Date (10) 4/8/13 Scupancy Status During Abatement (Check only Facility Closed/Vacated During Entire Per							Street Addre 108 Haddo City, State 8	on Ave	ode					
	upied During	The state of the s	97. 10					Westmont	i, NJ 0	8108	10000				
<ul><li>≥3 sf or ≥3 l</li><li>≥160 sf ≥26</li></ul>	f					vation dition				Mini-Enclos Glove Bag	nment with N sure Procedures oted and Nor	(wrap &	cut)		
	ocation of		Is	Loca	ation	n		Description		THOM Exemp	Amount			2. V. (41.2KI)	Гуре
Mat TO E	os-Containing erial (ACM) BE ABATED Teacility (13)		Mai	mally Solely ntena todia (12	y by ance I Sta	e or		Asbestos-Co Material (A (i.e., thermal isulation, surfa or other misce	ACM) system acing, \	is /AT	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
			Yes		1	V/A		0. 0.101 111000		.0)		<u>a</u>		late	-Tre
Hallway		1.1.	Н					Floor tile &	Masti	С	786 SF				
			Н	H					Harrie		M1	님	Η	H	H
	ri de la companya de											TH	Ħ	H	H
							g***						回		
Name of Registered	Waste Haule	r	Ш		laule	er ID N		Cubic Yards of Waste	Nam	e of Register	ed Landfill				
AbateTech, Inc.			R	1	8750		12		RF Landfill	Mary Strike Strike	6/ 17	test 13			
City, State Lumberton, NJ		Maria Maria Augusta						Disposal Date 4/12/13		State ytown, PA		×			
Completed By (Print Gwen Trumbetti	or Type)				itle pps	s. Coor	d.	Signature	M			Date 3/29	/13	İ	9.4

Date of Netification (1)	40		Nam	ne of Build	ding Owner/Operator	(2)	\$ \$ 27 287 Comment		(3. 2)		
3 / 28 /	13		W	est-War	d Pharmeceutical	UIJAPR -5	Job # 1303-4620	Che	ck#	5098	3
Agencies Notified Type Notifi  ☐ EPA ☐ Initial ☐ DOLWD ☐ Amende			2	Esterbro	ook Lane	\$355700 r	-mi - 40				
☑ DHSS Amendr	ment #	_	- 1000	State, Zi	p Code II, NJ 08034	& LICEN	SING NUL				
DCA Emerge justifica	ency (includi	ng	1	e of Cont			Tolombana Niver			-	
Cancell			100	nris Wal			Telephone Num	per			
						- n - 100					
Name of Facility Where Abatement is	Taldes Dis	- (0)		CILITY	INFORMATION						
West-Ward Pharmaceuticals	raking Plac	e (3)				Type of Facility  School (K-1	(2)				
Street Address						Subchapter	8 (Other than K-12 private and comme	)	wildir		
2 Esterbrook Lane				+	1. 19	homes, etc		Ciai	unun	igs,	
City (5)			15.11	- Fill III		Square Feet	# of Floors	E	Bldg.	Age	
Cherry Hill											
County (6) Camden			Cou	inty Code	(7)(STATE USE ONLY)	Current Use (P	rior if being demolis	hed)			
Name of Monitoring Firm Hired by Bui	Idina Owner	(8)	ASCM	1 No	Name of Abateme		N		1000	5,84	4
1 Source Safety & Health	iding Cwilci	(0)	AGGIV	TNO.	AbateTech, I		"				
Street Address					Street Address	nc.				- 2	
140 South Village Ave., Suite	130					DO Day 25					
City, State, Zip Code		_			30 Maple Ave						
Exton, PA 19341					City, State, Zip Co						
Project Manager for Monitoring Firm		To	elephone	No	Lumberton, No.	4J U0U40	I tree and tr				
Brian Hovendon		- 1	610-52		609-265-2107		License No. 00529				
	Scheduled (	10000			Name of OSHA M		00529		_		200
4 / 8 / 13	4		*		EMSL Analyti						
Occupancy Status During Abatement (					Street Address	4 1 5		10.25		A 4-1-	
☐ Facility Closed/Vacated During Ent			tement		108 Haddon A	\vo					
☐ Abatement Performed Outside of N	ormal Facili	ty Ho	urs - Des	scribe	City, State, Zip Co				-	-	
Time of Abatement:AM	PM/	P	VI	_AM	Westmont, N.						
Scope of Work (Check all that apply)				1			Maria Spiritaria a pro-	e Chart	10 to	i i i	
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	⊠ Re □ De				☐ Mini-Encl ☐ Glovebag	Procedure	gative Pressure on-Friable Procedure	9			
		s Loc		e de la constante de la consta	feat one of the said	o jesto di		At	atem	ent T	ype
Location of Asbestos-Containing Material (ACN	1 1 2021	Norm	lally lely by		Description of			R	Z	ш	т
TO BE ABATED	" Ma	ainter	ance/		estos Containing Mat e., thermal systems in		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility	Cus	todia (12	I Staff?		surfacing, VAT,	or	SF or LF)	Val	-	nsc	sur
(13)	Yes	No	1		other miscellaneo	ous)				ate	Ф
Old Catch & Feed Area Area 1				Floor t	ile & Mastic		180 SF				
Old Catch & Feed Area Area 1				Floort	ile & Mastic (NF)		75 SF	Ø			
							racino katalia a de la mara				
					Service Services and the services of the servi	514514524	n day ing mana day mana a sa		П		П
Name of Registered Waste Hauler AbateTech, Inc.			NJDEP \ Hauler II	No.	Cubic Yards of Waste	Name of Regis			Q A	+ 1	
City, State			18750		8 Disposal Date	City, State		en en		111	- 1 - 5
Lumberton, NJ			4.41-1		4/12/13	Tullytown,	DΛ				
Completed By (Print or Type)	Title					ranytown,	er en l'en en al p	_ 1			
Gwendolyn Trumbetti	Operati	one	Coordi	nator	Signature	nit	Date	1	20	de	2
SR-41	operati	5113	Joolul	.iatoi	1 4	IWI		3/	4.0	11	ノ

ASB-41 MAY 11

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Noneck

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

1104-4289 Check#

Date of Notification	(1) 3/28/13			Na	ame	of Bu	uilding	Owner / Opera	ator &	DAPP	-7 64.					
Agencies Notified	Type Notific	ation		Ct	ous	Addr	Autno	rity of Gloud	ceste	r County	LINE	00			- 2	
⊠ EPA	Type Ivoline	ation		10.000				n Blvd.		Euron.	15 page.					
☐ DEP	☐ Initia		(				& Zip			97 (27 (30 ± 1) 1. 18 (1 + 12)	<del>(2.00NT</del> RI	71			-	
☑ DOL		nded #3					NJ 0			se rit	CENSING	- 1,				
☑ DOH		rgency					ontact	3000				TT	eleph	nne l	Num	hor
DCA		ellation		2000000			udma	ın		ata G		110	лерти	JIIC I	vuiii	DGI
		1/2/2	2 0					ORMATION				-1-			-	
Name of Facility Wh	nere Abatem	ent is Taking	Place		- /1	JILI I	1 1141	Type of Fa	-	'A\				_		-
Colonial park Ap		9		(-)				School						100		
Street Address					1				276, 1819	8 (Other th	han K-12)					
401 South Everg	reen Ave.										mmercial build	dinas	, hon	ies.	etc.)	
								Square Fe		# of FI			ig. Ag		,	_
City (5)		County (6)	C	oun	ty C	ode (	(7)			*			35			
Woodbury		GLE						Current Us	e (Pri	or if being	demolished)					
								Offices		or in boiling	acmononcaj					
Name of Monitoring	Firm Hired b	v Building Ov	mer (8	3)	_	ASC	M No		hatem	ent Contra	actor (0)		112			
Health & Safety S		,	(0	,		1.00	/11/11/0	AbateTec			actor (9)					
Street Address						-		Street Add		•			-		_	
318 12 <sup>th</sup> Street								PO Box 2								1.9
City, State & Zip Co	de			5.17.0		1.00		City, State		Code	11. 1. N. 1. N. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	15	400			
	mmonton, NJ 08037 ject Manager for Monitoring Firm							Lumberto								13
	ject Manager for Monitoring Firm							Telephone	Numb	er	License	e Nu	mber			
Jim Proctor	n Proctor							609-265-2	107	on the same	To		0052	29		
	m Proctor heduled Start Date (10) Scheduled Com 1/30/12							Name of O					14	- 167		
Occupancy Status D	uring Abotor	nont (Chook 9	4/3			_		EMSL Ana		aı						
Facility Close	ed/Vacated [	During Entire	Period	of A	Δha	temer	at	Street Addr								
		itside of Norn				torrior		City, State		2012				-		-
Describe:	onomica ot	itolac of North	iai ric	Juis				1. (1.00)								
Facility Occu	ipied During	Abatement						Westmon	t, NJ	08108						
Scope of Work (Che			-			9 60						***				
								oran par seri Generali di ∗e re		Full Co	ntainment with	Neg	gative	Pre	ssure	9
≥3 sf or ≥3 lf			$\boxtimes$	R	Rend	vatio	n				closure					
≥160 sf ≥260	) If			D	em	olition	1			Glove E	Bag Procedure	s				7.
									$\overline{\boxtimes}$	Non-Ex	empted and N	on-F	riable	Pro	cedu	ire :
	cation of			Loc				Description			Amount		Aba	tem	ent T	уре
	s-Containing		Non					Asbestos-Co		ng	(Specify					Ť.
	erial (ACM) E ABATED		Mair	olel				Material (/ (i.e., thermal		ne	SF or LF	)	en	_	ᄪ	ற
	Facility		Cust					insulation, surf					Removal	Repair	Encapsulate	Enclosure
	(13)		Juon	(12				or other misce					<u>m</u>	ar.	sule	sur
			Yes	No		N/A			9-						ਰਿ	0
Throughout (135)	Kitchens	a Today (Action set As		E	]	X		Floor tile &	Mas	tic	20,250 SF total- 15					
Throughout (10) \	arious Loc	ations			]		100	Floor tile &	Mas	tic	4,350 SF total-43	5 SF				
		for the fire			] [		$e^{(e^{i})} \in$			4-17-	PS. 10044011	3 -	П	П	П	П
											ordin van daarde		H	Ħ	Ħ	H
ngawa a sa waka sa ka	aran ja maan ja maan ja maa aran ka maa aran ka maa aran ka ka maa aran ka maa aran ka maa aran ka maa aran ka						Jan Co	sera Citta III		THE MES		11/1		Ħ	Ħ	Ħ.
								gardag ligh	V.1	1 11				Ħ	Ħ	H
Name of Registered	e of Registered Waste Hauler							Cubic Yards	Na	me of Reg	istered Landfil		Tel Vivi			1 3 20 1
AbataTaab Inc			77.5	1		ler ID	1.0000000000000000000000000000000000000	of Waste								
AbateTech, Inc	- 10 A		Hetth	E.	P.	18750	0.00 45 11	20	-	RF Land	rill	1.3	27.74		أيية	12
City, State  _umberton, NJ						4		Disposal Date 4/30/13		/, State Ilytown, I	DΛ					
Completed By (Print	or Type)	1	1	I-r	itle			1	Ju	nytown, I	r <del>A</del>	I-	and god.		-1	75
Swen Trumbetti	or type)			- 1		s. Co		Signature		2			Date 1/28/1	2		
				1	- PP	J. 00	J.u.	$\sim$	M	\(C_{\text{\color}}\)		3	- ZOI I	,		- 2

### State of New Jersey 1206-4508 NOTIFICATION OF ASBESTOS ABATEMENT Check # (Pursuant to N.J.A.C. 8:60 and 12:120)

1206-4508

Date of Notification (1)		Man	o of P	ilding	Owner / Operate	2013	APP 8	18,			6- 1
3/28/13					unity Health C	centers Inc	1PR-2 min				
Agencies Notified Type Notification			et Addr		unity ricultin C	cintors, into,	or.	- GO	-		
⊠ EPA		- FORTSERS	Broad			6	7188 6000				
☐ DEP ☐ Initial			State		Code		- IGENSINA	UL.	-		
DOL Amended	¥1		vark, N				1.00				
DOH ☐ Emergency		Nam	e of Co	ontact			T	elepho	ne N	lumb	er
☐ DCA ☐ Cancellatio	n	Bus	iness	Offic	е						
	-	F	ACILIT	VINE	ORMATION	1000		1 - 1			
Name of Facility Where Abatement is 3	Taking Place		VOILII	1 1141	Type of Faci	lity (4)	777 1977	- 1	1 <	1	-
Newark Community Health Cente		(0)			School						
Street Address	7 1 1 1 1 1 1					pter 8 (Other tha	n K-12)				
741 Broadway						e. private & com		s. hom	es.	etc.)	
					Square Feet			dg. Ag			
City (5) Coun	ty (6)	County	Code	(7)				-33			
Newark Esse	2000				Current Use	(Prior if being de	emolished)				
	â .		Ye		Health Cer		monorica		, At		
Name of Monitoring Firm Hired by Build	ling Owner (	8)	TASC	CM No		atement Contrac	tor (0)	1	12.00	VI.	100
Environmental Connection, Inc.	mig owner (	0,	1	JIVI IVO	AbateTech		101 (9)				65 W
Street Address					Street Addre				-		-
120 North Warren Street	Set in an action		10-14-H	Lineare	PO Box 25						
City, State & Zip Code					City, State &				1 1		
Trenton, NJ 08608				7.		, NJ 08048					
Project Manager for Monitoring Firm			e Numl	ber	Telephone N	lumber	License Nu	mber			W 1/3
Ryan Broadwater			4200	1964	609-265-21	VII. CO. CO. CO. CO. CO. CO. CO. CO. CO. CO	All Comments	0052	29		
Scheduled Start Date (10) Scheduled Start Date (10)	uled Complet	tion Da 30/13		)	Name of OS EMSL Anal						
Occupancy Status During Abatement (			-		Street Addre		T-100 - 100		500		•
Facility Closed/Vacated During			oateme	nt	108 Haddo						
Abatement Performed Outside					City, State &				-		
Describe:					Westmont,						
Facility Occupied During Abate	ment					110 00 100					
Scope of Work (Check all that apply)	The second	-1-11		17.7		1000000		STREET,			
Hukas St. Carlotte						Full Cont	ainment with Ne	gative	Pres	sure	:
≥3 sf or ≥3 lf	$\boxtimes$	Re	novatio	on .		Mini-Enc	losure				
≥160 sf ≥260 If		De	molitio	n		The second secon	g Procedures				
March And Paragraphy and Province	100						mpted and Non-		2 Tr. 1 Va 250	- CHO. (-81)	7-11/2
Location of		s Loca		150 10	Descriptio		Amount	Aba	item	ent T	ype
Asbestos-Containing Material (ACM)		rmally Solely			Asbestos-Cor Material (A	100200 (CO)	(Specify SF or LF)				
TO BE ABATED			nce or		(i.e., thermal s		Si Oi Li )	R	145	Encapsulate	Ш
in Facility			Staff?		insulation, surfac	cing, VAT		Remova	Repair	ap	Clo
(13)		(12)		- Mari	or other miscell	aneous)		ova	ai-	sula	Enclosure
Dhoos 2 First 8 Consul Flore	Yes	No	N/A	D.	Li i a		4 000 05			ē	CD
Phase 3 First & Second Floor Phase 1 North Bldg.		$\vdash$	M	-	ble Layer floor		4,600 SF	N 1			
Phase 1 North Bldg.		무		Dou	ble Layer Floor		1,220 SF			H	님
Phase 1 North Bldg.		+님			Roof De	SCORE COLORS	1,600 SF		H	H	H
		111		D.	Roof Flash		100 SF		H	님	片
Phase 2 Cellar/Basement Level		11		Dou	ble Layer Floor		2,100 SF				닏
Phase 2 Cellar/Basement Level	1	11		e de la	Wall Mounte		72 SF				
Phase 2 Cellar/Basement Level		111			Pipe Insula		235 LF				
Name of Registered Waste Hauler		1 2 2 2	JDEP V			Name of Regis	tered Landfill			*	
AbateTech, Inc.		TI C	auler ID 1875	F - F	of Waste	TRRF Landfi					
City, State		- 1	1010	-	Disposal Date	City, State		1 9 12 8 11 10 10	0.00		- id
Lumberton, NJ		. Silver		e - 1 - 1	4/30/13	Tullytown, P.	Δ -				-
Completed By (Print or Type)	A 1 1 1 1 1 1	Tit	tle	- <	Signature	7	1100	Date	2		
Gwen Trumbetti			ffice Co	oord.		11	st. Page 1	3/28	/13		

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## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

1208-4536 CHECK #

Date of Notification (1)		Nar	ne of	Building	Owner / Operat	tor (2) 20	13 APR ZA				
Agencies Notified Type Notification					New Jersey			114			
EPA Type Notification	34 1		eet Ad Box			A.	47 cm. 77-	• (	Q.		
□ DEP □ Initial		-		e & Zip	Code		Ge / John School			- 100	
DOL Amended #7				4J 086			" LICENESS!	1110			
□ DOH □ Emergency		Nar	ne of (	Contact	20		T	elepho	no N	lumb	or
DCA Cancellation				Rado				elebin	111111		- .∸!
		F	ACIL	ITY IN	FORMATION						
Name of Facility Where Abatement is Taking	Place	(3)			Type of Fac	ility (4)		1 0 1	0 16	1	
The College of New Jersey					School						
Street Address		17	100		☐ Subcha	pter 8 (Other tha	an K-12)				
2000 Pennington Road					Other (i	.e. private & cor	nmercial building	s, hon	nes, e	etc.)	
		entranto A	77.5	+-15	Square Feet	t # of Flo	ors BI	dg. Ag	e		
City (5) County (6)	C	ount	y Code	e (7)		W 42 1					
Ewing Mercer					Current Use	(Prior if being d	emolished)		-		1.0
	- 1-				Building						
Name of Monitoring Firm Hired by Building C	wner (	3)	AS	SCM No		atement Contrac	ctor (9)		7		
TTI Environmental					AbateTech						
Street Address	14				Street Addre					-	
1253 North Church Street		- 11	1		30 Maple A	lve					
City, State & Zip Code		-3		100	City, State &	Zip Code					
Moorestown, NJ 08057	No.	Mar.	41.5			n, NJ 08048					
Project Manager for Monitoring Firm  Jim Guilardi			e Nur		Telephone N 609-265-21		License Nu	mber 0052	29		
Scheduled Start Date (10) Scheduled C	2.5	ion D		1)	Name of OS EMSL Ana						
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire	only o	ne)		-33-	Street Addre	ss					•
			batem	ent	107 Haddo						
Abatement Performed Outside of Nor Describe:	mai H	ours			City, State &						
					Westmont,	NJ 08108					
Facility Occupied During Abatement Scope of Work (Check all that apply)		-						20.1.			100
ocope of work (offeck all that apply)						□ Full Con	toinment with Na	aativa	Dese		
≥3 sf or ≥3 lf	$\boxtimes$	Re	enovat	ion			tainment with Ne	gauve	Pies	sure	į.
≥160 sf ≥260 lf	H		emoliti				ag Procedures		998		
	ш		JII IOII LI	OII			empted and Non-	Eriable	Dro	20411	
Location of	Is	Loca	ation	T	Descriptio		Amount	Aba			
Asbestos-Containing			Used		Asbestos-Cor		(Specify	ADa	itemi	erit i	ype
Material (ACM)		Solely		-	Material (A		SF or LF)			ш	
TO BE ABATED			nce o	and the same of	(i.e., thermal s			Rer	Z.	nca	nc
in Facility	Cus		Staff	?	insulation, surfa			Remova	Repair	Encapsulate	Enclosure
(13)	Yes	(12 No			or other miscell	laneous)		<u>n</u>	7	late	9
Manholes #3 & #4					Pipe Insula	-tion	46015	M			
Exterior Trench	H	+H			Pipe Insula		160 LF		H	H	H
Norsworthy Basement	H	+H					84 LF				H
Norsworthy Basement		H			e Insulation (	Committee of the Commit	10 LF		님	H	님
Norsworthly Dasement	+H	H		PI	e Insulation (	giove bag)	8 LF		님	H	
n transferrance programme and the control of the co		H							Ш	Ш	
Name of Registered Waste Hauler		I L	IDED	10/	0.1:36	IN CD		اللا		Ш	Ш
Name of Registered Waste Hauler				D No.	Cubic Yards of Waste	Name of Regis	stered Landfill				
AbateTech, Inc.		0.00	8750	D NO.	15	T.R.R.F. Lan	dfill				
City, State				243	Disposal Date	City, State				93-10	4
Lumberton, NJ					4/30/13	Tullytown, P	Α				11.
Completed By (Print or Type)	K 1	Ti	tle	1000	Signature	A		Date			- 4
Gwen Trumbetti				Coord.	Con	NI		3/28	/13		

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**MAY 11** 

## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)	0-					ng Owner/Operator		1 1 200 000				
3 /	25 /	13		Jo	oseph Ro	driguez	2012 200 1.	Job # 1303-461	2 Ch	eck	#	
Agencies Notified  ☑ EPA ☑ DOLWD	Type Notific ☐ Initial ☑ Amended		t	24	et Address 11 21 <sup>st</sup> Av	renue ,	2013 APR -	AN = 60	1111	-		
☑ DHSS ☐ DCA	Amendm  ☐ Emergen	ent # <u>1</u>	na.		State, Zip aterson, I	Code	& LICEN!	Normal				
(NJAC 5:23-8)	justificati		19	Nam	ne of Conta	ct		Telephone Nun	nber			Dectors
	☐ Cancellat	tion		Jo	seph Ro	driguez					3	
	#	200		F	ACILITY	NFORMATION					-	
Name of Facility Where A	batement is T	Taking Plac	e (3)				Type of Facility	(4)		-		-
Exxon Facility #313							School (K-12					
Street Address		The State of	el le		. 1 1 1 1 1 1		☐ Subchapter	8 (Other than K-1)		er er		
241 21st Avenue							Other (i.e., p     homes, etc.)	rivate and comme	ercial b	ouildir	ıgs,	
City (5)			-				Square Feet	# of Floors	F	Bldg. /	Ane	-
Paterson							04444.01.001	# OI 1 10013	1.	nag. i	ige	
County (6)				Cou	inty Code (	7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)			-
Passaic			- H		,	, Monne out onely	Exterior Car		sileu)			
Name of Monitoring Firm I	Hired by Build	ding Owner	(8)	ASCN	No.	Name of Abatem	ent Contractor (9)					
Kleinfelder	1000					AbateTech, I	March and a second and a second age of					
Street Address	Wilder Et	, - L		17.5	T. Car	Street Address			-		y 37	
3 AAA Drive First Fl	oor					30 Maple Ave	e. PO Box 25					- 10
City, State, Zip Code	1.1.		-	H 2 1 1 1	article of the	City, State, Zip Co		1-11-1				
Hamilton, NJ 08691						Lumberton, I					-	
Project Manager for Monito	oring Firm	- 1	LIE	elephone	No.	Telephone No.	and the second of	License No.	5. 0. 1	3.70	191	17
Reinaldo Aponte				215-25	1	609-265-2107		00529				
Start Date (10)	5	cheduled C			,	Name of OSHA M	lonitor		-			-
3 /26 / _				12 /		EMSL Analyt						
Occupancy Status During	Abatement (C	Check only	one)		/	Street Address	The second second			W117	-	
☐ Facility Closed/Vacated	During Entire	e Period of	Aba	tement		108 Haddon A	Δve					
☐ Abatement Performed (	Outside of No	imal Facilit	y Ho	urs - De	scribe	City, State, Zip Co					17	
Time of Abatement:	AM	_PM/	_P	VI	_AM	Westmont, N.	선정하다는 그런 ^^ 기급이 내다					
Scope of Work (Check all t	that apply)		1,411			j stoomong tu	3 00 100				-6	- 1
⊠ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		□ Re				☐ Mini-Encl	ainment with Neg losure g Procedure mpted (*) and Nor		re			
STATE OF STATE				ation	# 15 d.			ria logi per li	Ab	atem	ent T	ype
Location of Asbestos-Containing M		100000	Norm	lally lelv by	A-b-	Description of			Z.	Z)	ш	Im
TO BE ABAT	ED	Ma	inter	nance/		stos Containing Mat ., thermal systems i		Amount (Specify	Remova	Repair	Encapsulate	nclo
IN Facility (13)		Cus	todia (12	I Staff?		surfacing, VAT,	or	SF or LF)	Val	-	Sul	Enclosure
(13)	44.7	Yes	No			other miscellaned	ous)				ate	
Throughout Canopy Ro	oof				Roof Fl	ashing		8 SF				Ī
	1736					pegalit i der				П	П	П
										П	П	П
	132 114	·						i grapi i minarek alambaga kil 1915 - Marshall Alambaga				
Name of Registered Waste AbateTech, Inc.	Hauler		14	NJDEP V Hauler II		Cubic Yards of Waste	Name of Registe		₽ <b>U</b> Jefe			
				18750		2	Imperial Lar	nafill		11.7		
City, State		11.44				Disposal Date	City, State					
Lumberton, NJ						4/12/13	11 Boggs R	d., Imperial PA	1512	6	100	
Completed By (Print or Type Gwendolyn Trumbetti		Title Operation	ons	Coordi	nator	Signature	On *	Dat	e 3/2	5	112	3
SB 41				107 5 5			XIVUI	2007 124	710		11-	-

\* Do not use this form for asbestos licensure exempted activities.

Long

## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

1303-4618 Check #

Date of Notification (1) 3/25/13		F16995,0600		f Build		Owner / Operato	r (2)	571.44		40	4	3/425	
Agencies Notified Type Notifica		Stre	eet A <b>iste</b> e	ddres	s Prin	ceton Univers	sity E.	A. MacN	lillan Bldg.		1	0	
☐ DEP ☐ Initial ☐ Amer	nded #1			te & I			) - ' ;			G	4		
□ DOH □ Emer	gency	Nan	ne of	f Con	tact	- Marin	97 1	The state of the s	Te	elenho	ne N	ımbe	er
☐ DCA ☐ Cand	ellation	Rol	bert	Orte	go, l	P.E.						_	
			ACI	LITY	INF	ORMATION							
Name of Facility Where Abateme Princeton University Engin Street Address			)				K-12) oter 8 (	Other thar					
41 Olden Street						Other (i.e		te & com	nercial buildings	s, hom dg. Ag		tc.)	
City (5)	County (6)	Count	y Co	de (7	)								H No.
Princeton	Mercer					Current Use ( Building	(Prior i	f being de	molished)	4			
Name of Monitoring Firm Hired b Pennoni Associates, Inc.	y Building Owner	(8)	,	ASCN	ΛNo.	Name of Aba AbateTech,		t Contract	or (9)	45.43	(16.17)		
Street Address 515 Grove Street Suite 1B			17			Street Addres PO Box 25		i separat	- 10				i de
City, State & Zip Code  Haddon Heights, NJ 08035					in the	City, State & Lumberton	, NJ 0	8048					
Project Manager for Monitoring F Alan Lloyd		lephor 6-547				Telephone No 609-265-210			License Nu	mber 0052	9	3310	
Scheduled Start Date (10) 4/2/13	Scheduled Comple 4	etion [ 1/9/13		(11)		Name of OSH EMSL Analy		nitor					
Occupancy Status During Abater Facility Closed/Vacated I			Abate	ement		Street Addres	ss		Talk Hay His May 1997				
Abatement Performed O Describe: 3:30 PM to 12	utside_of Normal I					City, State & : Westmont,	Zip Co	de					
Facility Occupied During Scope of Work (Check all that ap			504 %	ma yi	Heliotan Military		Total						
\[ \geq 23 \text{ sf or ≥3 lf} \] \[ \geq 2160 \text{ sf ≥260 lf}	,,,, [2] [2]			vation olition				Mini-Encl Glove Ba	ainment with Ne osure g Procedures npted and Non-				
Location of		Is Loc	ation	n		Description	n of		Amount	Aba		-	
Asbestos-Containin Material (ACM) <u>TO BE ABATED</u> in Facility (13)	g N	ormall Solel ainten ustodia (12	ly Us ly by ance al Sta 2)	e or	ì	Asbestos-Con Material (A (i.e., thermal s nsulation, surfac or other miscell	CM) systems cing, V	s AT	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Rooms B217/219			1		4/15	Floor tile & I	Mastic	A COLUMN	580 SF total				
					3/5	11-12-1-1-1-1					H	님	H
		$\exists \vdash$	100	H						H	H	H	H
							74		1) (1) - 1 (1) (2) - 1 (8) - 1	捐	Ħ	Ħ	Ħ
Name of Registered Waste Haul	er	the state of the s		EP W er ID		Cubic Yards of Waste	Nam	e of Regis	tered Landfill			Ш	
AbateTech, Inc.			. 1	18750	)	12	1500000	F Landfi	H determine				
City, State Lumberton, NJ			1	1 7		Disposal Date 4/9/13		State ytown, P	A				
Completed By (Print or Type) Gwen Trumbetti			Title Opps	s. Co		Signature	it			Date 3/25	/13	2.	

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## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

1301-4594 Check #

Data of Natification	(4)		T	NI	- ( D	11.11	0		2012 100					
Date of Notification	3/25/13			Name	14° 6	ilaing	Owner / Opera	tor	(2) JAPR	Ps.				
Agencies Notified	Type Notific	eation			Addre		Prison	25	11.	AM : GO		- 0	-	- 1
EPA	Type Notific	ation		Rout		255			Har Stor	2.6				
□ DEP	Initia	1			State 8	2 7in (	Code .		the Live	Station.				
□ DOL		ended #2			burg,				, or W.	1107 111				
☑ DOH		ergency			of Co		0321		Service of the		Telepho	no N	umh	or
DCA		cellation			Leib						I Later and the second			-
						The said				- 1			-	_
					CILIT	Y INF	ORMATION					100		
Name of Facility W							Type of Fac							
Bayside State Pr	rison, @ Ar	icora -Spruc	e Hall			7	School							
Street Address							Bearing .		er 8 (Other than				*: :2:	
301 Spring Gard	en Rd.							_	private & com		-		etc.)	
		92.5				L W.	Square Fee	et :	# of Floor	's E	Bldg. Ag	le .		
City (5)		County (6)	Co	unty (	Code (	7)		, 5	1-21					
Hammonton		Atlantic					Current Use	e (P	rior if being de	molished)				
		Tay Is					Courtyard	l Ve	estibule					
Name of Monitoring	Firm Hired	by Building Ow	ner (8)		ASC	M No	. Name of Ab	oate	ment Contract	or (9)				
Ahera Consultan		,			005	7	AbateTecl							
Street Address	- 14.10					- 11	Street Addr	ess			-	9		0.0
PO Box 385						100	PO Box 2	5						
City, State & Zip Co	ode					7 g/A.	City, State 8	& Z	ip Code	The state of		p.O.s.	e la	
Oceanville, NJ 0	8231				Lumberto	n, l	NJ 08048							
Project Manager for	r Monitoring	hone	Numb	per	Telephone I	Nur	nber	License N	lumber		-			
John Smoyer		652-	1833		609-265-2	107			0052	29	- 1	No.		
	nn Smoyer neduled Start Date (10)   Scheduled Completion						Name of OS	SHA	Monitor					
2/20/13	3	<i>.</i> .	4/30	/13			EMSL Ana	alyí	ical		Section or area			
Occupancy Status I							Street Addre	ess						
Facility Clos	sed/Vacated	During Entire I	Period (	of Aba	ateme	nt	108 Haddo	on	Ave.	4 4 4				4.4
Abatement	Performed C	utside of Norm	nal Hou	urs –			City, State 8	& Z	ip Code					-
Describe:							Westmont	t, N	J 08108					
Facility Occ	upied During	Abatement					en in Taylor ya				77.7			
Scope of Work (Che	eck all that a	pply)	d sets "	1 1156		100		1	Table 10 May		and the same			
							A September 1			ainment with N	legative	Pres	sure	
≥3 sf or ≥3 l	f		$\boxtimes$	Ren	ovatio	n			Mini-Encl	osure				
≥160 sf ≥26	0 If			Den	nolition	n i			Glove Ba	g Procedures				
									Non-Exer	npted and Nor	n-Friable	e Pro	cedu	re
L.	ocation of		Isl	Locat	ion		Description	ion	of	Amount	Ab	atem	ent T	уре
	tos-Containir	ng		nally l			Asbestos-Co			(Specify				
	erial (ACM)			olely I			Material (			SF or LF)	70	1 1/14	En	ш
	BE ABATED		Maint				(i.e., thermal				Remova	Repair	Encapsulate	Enclosure
	n Facility		Custo	(12)	Staff?		insulation, surfa or other misce				OVE	air	sul	Insc
	(13)		Yes	No	N/A	1 1 8	of other misce	eliai	leous)		=		ate	ø
0			103			Acc	oustical Spray-on C	Cailie	na Insulation	00.05	M			
Courtyard Vestib	ule		111	+		AUC	Addition opiny-on C		.g modiation	80 SF			H	H
	Jag Berne		141			87.00		7.					H	님
1971 of 1,767 (1971)	1 10 10 10				Ш	The state	Markette The					님		닏
	To the second				Ш			1				Ц		닏
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Name of Registered	Waste Hau	ler	N PLAN	THE RESERVE TO			Cubic Yards		Name of Regist	tered Landfill				
				Ha	uler ID		of Waste							
AbateTech, Inc.	the section			7.	1875	0	4		TRRF Landfil				200	Mr.
City, State	Maria de la composición dela composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición de la composición dela composición del composición dela	78964	No.		-5 Mar.		Disposal Date		City, State					
Lumberton, NJ	ACCEPT NO.		1	40 (310)	734 E.	Charles and	4/30/13)		Tullytown, P	Α				
Completed By (Prin	t or Type)			Titl			Signature	7	1		Date			
<b>Gwen Trumbe</b>	tti			Of	fice		AND THE STATE OF T	-	11		3/25	113		
	7	and the second second		Co	ord.		CAL	1	V					

# State of New Jersey 1111-4409 NOTIFICATION OF ASBESTOS ABATEMENT Check #5040 (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification	(1) 3/28/13			Nam	e of Bu	ilding	Owner / Opera	tor	(2)	a rai	n Contro	£ 70	2	2	· V	
Agencies Notified EPA	Type Notific	cation		Stree	et Addr	ess	attionty- 0-5 v	a a i Ci	ening Fit	Jyrai	Contrac	1 C		3	Ez.	
□ DEP     □ DOL	☐ Initia	William San Markey	100	A STATE OF THE STA	State 8							- 7	172		.1.	
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	ended #2					IJ 07095				. 7.0		1	je e	5,	2
□ DOH □ DCA		ergency cellation			e of Co							Tel	enhío	ne N	lumb	jér
II DOM	L Can	cenation		Dan	Crum	1		-				-		-		
					CILIT	Y INI	ORMATION		4							
Name of Facility W  NJ Turnpike Inte			Place (3	3)			Type of Fac	l (K-	12)				, Tae		ta T	
Street Address	7-31								r 8 (Other t							
Brick Yard Road	@ Turnpik	re Intersection	n				Other (		private & c # of F		ercial buildir				etc.)	
City (5)		County (6)	Co	untv	Code	(7)	- Square Fee	÷ι	# 01 F	10018	Name (48)	Blag	ı. Ag	е		
Cranbury Twp.		Middlesex	110		Oudc (	(,)	Current Use	2 (P	rior if being	dem	olished)		-			_
Grandary rup.		MiddleScx	1.0	0.			Exterior	· ()	nor ii being	ucin	olisticaj					
Name of Monitoring	Firm Hired b	by Building Ow	ner (8)	terri.	IAS(	CM No		oate	ment Contr	actor	(9)			7-11		
McCabe Environ		, ,	, ,				AbateTech			40.0.	(0)					
Street Address					100	Ð ;	Street Addre				F 100					
49 Orient Way		E E ES	1 1 1 1			4	PO Box 25	-								
City, State & Zip Co Rutherford, NJ 0			- 4 - 4	14/10/14			City, State 8									
Project Manager for		Firm	Tolon	hone	e Numb	hor	Lumberto				II					-
John Chiavello	Wormorning i		201-4			bei	Telephone 1 609-265-2				License N		ber 0 <b>052</b>	Q		
Scheduled Start Da	te (10)	Scheduled Cor				)	Name of OS		and the same of the same of			_		_	_	
3/18/13			4/30	/13	, ,		EMSL Ana									
Occupancy Status I	During Abate sed/Vacated	ment (Check o During Entire F	nly one	e) of Ab	ateme	nt	Street Addre		) vo						1 11	
		utside of Norm					City, State 8			_		12.25				
Describe:	11PM-7:30 upied-During	AM )					Westmont									
Scope of Work (Che						75								7.7	-	
									] Fùll C	ontair	ment with N	Vega	ative	Pres	sure	<b>)</b>
≥3 sf or ≥3 l	•		$\boxtimes$		novatio	653			] Mini-E							
≥160 sf ≥26	O If			Der	molition	n					Procedures			(t) (t)	10	
1,	ocation of		la I				.5	$\succeq$	_	xemp	ted and No	n-Fr	-			-
	os-Containin	a		-ocat	Used		Asbestos-Co				Amount (Specify		Aba	tem	ent I	уре
Mat	erial (ACM)	3		olely			Material (A				SF or LF)				Ш	
	BE ABATED				nce or		(i.e., thermal:				P-12	1	Ren	Re	cap	nc.
II II	Facility (13)			(12)	Staff?		insulation, surfa or other miscel						Remova	Repair	Encapsulate	Enclosure
	(10)		Yes	No	N/A		or other misce	liaii	eous)				=		ate	9
Exterior		40000		П	Ø		Transite Co	ond	luit	1	950 LF	1	M	П	П	П
Exterior			Ħ	Ħ	X		Drain T			1,	10 SF			H	Ħ	H
			T	Ħ	П	- 72				1		1	H	Ħ	H	H
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						J. 49										
Name of Registered	Waste Haul	er					Cubic Yards	N	ame of Re	gi <b>st</b> er	ed Landfill	407	4 8 1	SERVE NO.	4	
Freehold Cartage	Inc	17 - Will 20 55 W		Ha	uler ID		of Waste		D 0 184 0		J.C.II		14.4			
City, State	, 1116.	No.			1593	9	Biomanal Data	1233	R.O.W.S	Lan	atili					
Freehold, NJ							Disposal Date 4/30/13		ity, State I <b>orrisville</b>	DA						- 10
Completed By (Print	or Type)	- 3		Titl	0		Signature	16	OTTISVITE	, FA		In	ate		- <	
Gwen Trumbe				65000	fice		Oignature )	100	1				аце <b>/28</b> /	12	10(43)	
	1			1 110000	ord.		CX	n			*	3				

#### EDS13-011

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

Page 1 of 1

Check # 1526

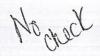
Date of Notification (1) 3-26-2013					Owner/Opera ic School	ator (2)	2013 APR.	*	* ***	3	. 1		
Agencies Notified Type Notification			Street Ad				140 Eq. (1)	Linin					
EPA Initial Amended Amendment		_		te, Zip Co eld, NJ (			* Cick	SWIN	00				-
□ DOH     □ DCA     □ DCA     □ Emergency (     □ justification)     □ Cancellation	including		Name of Harold		1 at 1			Telèphon	é Nur	nber	3		
	51 10		FACIL	LITY INFO	RMATION	1-					7) <del>.</del> 		1
Name of Facility Where Abatement is Taking Plainfield High School	g Place (3						se of Facility (4 School (K-12	)					
Street Address 950 Park Avenue					i i	×	Subchapter 8 Other (i.e. pri etc.)	ivate & com	merci	al build			es,
City (5) Plainfield		1			-		are Feet 5000	# of Floor	S		ldg. <i>A</i> <b>0</b> +	ge	
County (6) Union			County C (STATE U	ode (7) ISE ONLY)	10 2	Cur	rent Use (Prior	if being der	nolish	ned)		14 T	
Name of Monitoring Firm Hired by Building ( TTI Environmental Inc	Owner (8)		ASCM 00003			ame of Ab	p, Inc	ractor (9)				. 9 %	
Street Address 1253 North Church St						reet Addr 40 Ham	ess burg Turnp	ike			12		
City, State, Zip Code Moorestown, NJ 08057					1 000000		Zip Code gdale, NJ 07	7403					
Project Manager for Monitoring Firm Mary Ellen Leotta			Telephor 856-84	ne No. 0-8800		elephone 201)710		Licer 010	nse N 84	0.			
Start Date (10) 3-29-2013	Schedule 4-2-201		npletion [	Date (11)	1 335	me of O	SHA Monitor p, Inc						
Occupancy Status During Abatement (Chec	k Only On	e)		-	Str	reet Addr	ess					-1	
Facility Closed/Vacated During Entire F	Period of A	baten	nent		14	40 Ham	burg Turnp	ike			- 1		
Abatement Performed Outside of Norm Other – Describe:							Zip Code gdale, NJ 07	7403					
Scope of Work (Check All That Apply)					150 100			Te 11					
≥3 sf or ≥3 if ≥160 sf or ≥260 if	-	enova emolit				×	ull Containmer Ini-Enclosure Glovebag Proce Ion-Exempted	edure				۵	
	le le	Locat	ion				ion-Exempled	( ) and Iven	THE			ement	
Location of	l N	orma	ly		Descrip	otion of					Ту	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Mai	d Sole ntena odial ( (12)	nce/		tos Containir thermal syst surfacing, other misce	ng Materi tems insu , VAT, or	ulation,	Amount (Specify SF or LF	,	Removal	Repair	Encapsulate	Enclosure
8 == = = =	Yes	No	N/A						1860			Ф	
Classroom 163		X		P	ipe Fitting	Insulat	tion	35 LF		X			
Classroom 164	1 2	X		P	ipe Fitting	Insulat	tion	30 LF	gle .	Х			
Classroom 165		X		P	ipe Fitting	Insulat	tion	24 LF		X			
Name of Registered Waste Hauler		TA	JDEP W	aste	Cubic Yard	de	Name of R	egistered La	andfill				E
GL Group, Inc			lauler ID 033034	No.	of Waste TBD		Grows	09.010,04 2.					
City, State Bloomingdale, NJ	41.10				Disposal D TBD	Date	City, State Morrisvill						
Completed by Michael B Solakov	P.M.				Signa	ature	pie file		3-:	te 26-20	)13		

Date of Notification (1)				Name	of Building (	Owner/Operator (2	2)	<b>9</b>				
	27 /	13		Mr.	Joseph So	cerra 2013 AF	R -5 m	Job # 1303-1737	r: Ch	k. #3	069	
Agencies Notified  EPA	Type Notificatio	on		Street 491	Address Orchard (	Circle & 5 % Code de & L	18- <b>2-111</b> :	00		,		
☑ DOLWD ☑ DHSS	Amendment	t #		City, S	state, Zip Co	de & [	ICENSTILL	(UL				
DCA	☐ Emergency					341	0.00	Talaahana Numbe		<u> </u>		-
(NJAC 5:23-8)	justification)  Cancellation				of Contact John Cafi	ero, Axis Build	ers	Telephone Number	er			
				FAC	CILITY INF	ORMATION			-	-		
Name of Facility Where	Abatement is Tak	cing Place	(3)	170	JILIT I IIVI	ORWATION	Type of Facility	(4)				
Residential Proper					34,		School (K-12	) 3 (Other than K-12)				
Street Address 8 West 13 <sup>th</sup> Street							Other (i.e., pones, etc.)	rivate and commerc	ial bu	ilding	s,	
City (5)							Square Feet	# of Floors	Blo	lg. Ag	je	
North Beach Have	n					4 2 75	900 SF	1	4	15		
County (6)			*5	Coun	nty Code (7)(	STATE USE ONLY)	Current Use (Pr	ior if being demolish	ed)			
Ocean				1 35			Apartment I	Building				
Name of Monitoring Firm	n Hired by Buildin	g Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
NA						Asbestos an	d Mold Service	s, Corp.				
Street Address		-11-4				Street Address 3859 Sylon B	oulevard					
City, State, Zip Code						City, State, Zip Co					4	4
Project Manager for Mon	nitoring Firm		Tele	phone	No.	Telephone No. 609-702-0400		License No.				
Start Date (10)	Scl	heduled C	omple	tion Da	ite (11)	Name of OSHA N			7			_
4 / 11 /	13	_ 4 /	_1′	1_ / _	13	<b>EMSL</b> Analyt	ical, Inc.					
Occupancy Status Durin	ng Abatement (Ch	neck only	one)	-		Street Address	7 7		180		9	
□ Facility Closed/Vaca				ment		200 U.S. Rou	te 130 North					
Abatement Performe						City, State, Zip C						
Scope of Work (Check a	all that apply)						- 2.8 654.9				-	-
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		⊠ Re				☐ Mini-End	g Procedure	gative Pressure on-Friable Procedure	e			
			Loca						Ab	atem	ent T	уре
Locatio Asbestos-Containing TO BE AB IN Fac (13)	g Material (ACM) BATED ility	Use Ma	aintena	ely by ance/ Staff?		Description of tos Containing Ma thermal systems surfacing, VAT other miscelland	insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								-
Exterior (Garage)				$\boxtimes$	Transite	Siding		190 SF				
	L. a.							e facility				
	- 1 1, 40, 100											
The second section					1710.43	THE STATE OF THE S						
Name of Registered Wa			13.	NJDEP I	00000000000000000000000000000000000000	Cubic Yards of Waste	Name of Regi					
Horizon Disposal,	Inc.			22612	CONTRACTOR OF THE PARTY OF THE	3	GROWS L	andfill				100
City, State Trenton, NJ				¥1		Disposal Date	City, State  Morrisville	e, PA 19067				
Completed By (Print or	Tyne)	Title				Signature	1	Da	te.	s 1	1 4	_
Kimberly A. Trum		Office	Coor	dinato	r	934	V		3 2	7/1	3	

ASB-41 MAY 11

Date of Notification (1)	27 /	13		Nam To	e of Build wnship	ing Owner/Operator of Commercial	(2) PR - 5	/ Job # 1303-17	36: C	hk.	¥307	0
Agencies Notified ☐ EPA ☑ DOLWD	Type Notific  ☑ Initial  ☐ Amende		THE STATE OF THE S	Stree	et Address 68 Main	Street 4350.	108.74	(i)				
☑ DHSS	Amendm	nent #		1	State, Zip	Code :	-ICENSING!	W.				
DCA	☐ Emerger		ng				3 4					
(NJAC 5:23-8)	justificat  Cancella	50			e of Conta			Telephone Num	ber			
	LI Cancella	uion .		IVIS	s. Pamei	a Humphries, CF	0	1.				
		200		FA	CILITY	NFORMATION						
Name of Facility Where A Robbinstown Scho		Taking Plac	ce (3)				Type of Facility  ☐ School (K-12)	200	¥ 150		2	
Street Address 1628 Main Street	mar .							8 (Other than K-12 crivate and comme		uildir	gs,	
City (5)							Square Feet	# of Floors	TP	ildg. /	Ane.	
Port Norris							939	2		185		
County (6)  Cumberland				Cou	nty Code	(7)(STATE USE ONLY)		ior if being demolis	shed)			
Name of Monitoring Firm	Hired by Buil	ding Owne	(8)	ASCM	l No	Name of Abatem	ent Contractor (9)					
NA		and owner	(0)	71001	1140.		id Mold Service					
Street Address		5 0	,	٠.,		Street Address	iu Molu Service	ss, corp.		-	-	
						3859 Sylon B	Poulovard					
City, State, Zip Code						City, State, Zip C	ode	Property of the second				
					100	Hainesport,	NJ 08036					
Project Manager for Mon	itoring Firm		Te	lephone	No.	Telephone No. 609-702-0406	)	License No. 00862		116		
Start Date (10)4 /10 /		Scheduled 4		letion Da 10 /		Name of OSHA N EMSL Analys			42		1	
Occupancy Status During	Abatement (	Check only	one)			Street Address						
☐ Facility Closed/Vacate				ement		200 U.S. Rou	to 130 North					
☐ Abatement Performed	Outside of No	ormal Facil	ty Ho	urs - Des	scribe	City, State, Zip C	20000 100000000000000000000000000000000				111	
Time of Abatement: _	AM	PM/	P	/I	_AM	Cinnaminson						
Scope of Work (Check all	I that apply)					Cilinaliiiisoi	I, NJ 00077	The second of				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			enova emoli			☐ Mini-End	g Procedure	pative Pressure n-Friable Procedur	e ·			
			s Loc		1.5				At	atem	ent T	уре
Location Asbestos-Containing I			Norm ed Sc	lally lely by	A	Description of	of .			_	I	
TO BE ABA		M	ainter	ance/	ASD (i	estos Containing Ma e., thermal systems	insulation	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facilit	ty	Cus	stodia (12	I Staff?		surfacing, VAT	, or	SF or LF)	Va	=	nso	Sur
(13)		Yes	No	1		other miscellane	ous)				late	Ф
Exterior					Shingl	e Siding	100,000	300 SF			П	
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Anna Harrisana	8.		П							1		-
			7		Lia .		2		부	닏		
Name of Desirt	- 11- 1											
Name of Registered Wast Horizon Disposal, Ir				NJDEP \ Hauler II  22612	No.	Cubic Yards of Waste	Name of Regist			1100		11
City, State		1.11	150			Disposal Date	City, State			-		
Trenton, NJ						4/12/13	Morrisville,	PA 19067		1		
Completed By (Print or Ty	rpe)	Title	F. 3			Signature		Dat	-		1 22	
Kimberly A. Trumbe			Coor	dinator				Dai	3-2	7-	13	

ASB-41 MAY 11 \* Do not use this form for asbestos licensure exempted activities.



Date of Notification (1)			Name of	Building	Owner/Opera	tor (2)		THE MAN		Living.		
March 28, 2013		1	Viasant	, LLC					1 1	44		
Agencies Notified Type Notification	**		Street A	ddress	101 51	- 1	21	113 APR -2 "		fee .		
⊠ EPA □ Initial			105 Ch	esley Di	r.			7-2 4	i			
DEP Amended	1 (		City, Sta	ite, Zip Co	ode (			ore. A mar		ÛQ		
DOL Amendment #		- [	Media, I	PA 1906	63		100	& 11,50 m				
DOH justification)	icidaling		Name of	Contact				Télephone Nu	mber	U -		
DCA Cancellation			PM					_				
Name of Facility Where Abatement is Taking	Place (2	`	FACI	LITY INF	ORMATION	Tw	e of Facility	(4)				
The control of the co	riace (3	)				Ty	ST TO THE	1007				
Former Yates Foil Street Address						$\dashv H$	School (K-	12) r 8 (Other than K-1	2)			
								private & commerc		dings	, home	es,
88 Rte 130 South					<u> </u>		etc.)	# of Floors	- 1 -	Ida	100	
City (5)					7	Squ	uare Feet	# 01 F1001S	,	Bldg.	age	4 10
Bordentown, NJ County (6)			County (	Code (7)		Cu	ront Heo (Pri	or if being demolis	hed)			-
				USE ONLY	)	Cui	Tent Use (Fil		ileu)			
Burlington  Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	1 No	l Na	me of A	batement Cor	empty				
	Wilet (o)		0021				K Group, L	er recommendation of the second				
AET, Inc. Street Address		-	0021			eet Add		.LC	iz II			
907 Doolittle Drive			1 B		N 10 110 1100000		s HWY N,	STE 200				15 p.
City, State, Zip Code				3-1 - 30V			Zip Code	01L 203		-		
Bridgewater, NJ 08807						ART I DE CONTRARA	II, NJ 0803	Δ				
Project Manager for Monitoring Firm			Telepho	ne No.		ephone		License N	No.			
Eric Houseknecht			(908) 21	18-1108	· · · · · · · · · · · · · · · · · · ·		- 5000	00781				
	Schedule			Date (11)	-	,	SHA Monitor		-			
2/21/13	,		12/31/1	3	The	MAC	K Group, L	LC.				
Occupancy Status During Abatement (Check	Only Or				A CHARLEST AND A STATE OF THE PARTY OF THE P	eet Add				16		
Facility Closed/Vacated During Entire P	eriod of	Abate	ment		150	0 King	s HWY N,	STE 209				ga i
Abatement Performed Outside of Norma					Cit	y, State,	Zip Code					-
Other - Describe:					- Che	erry Hi	II, NJ 0803	4				72.
Scope of Work (Check All That Apply)	.77						A 41 01				. 7	
≥3 sf or ≥3 lf	- · [-] - F	Renov	ation		cos ejo-s-o		ull Containm	ent with Negative	Pressu	re		
≥160 sf or ≥260 lf		Demol	ition	100			Mini-Enclosure Glovebag Pro					
								(*) and Non-Friable	e Proce	dure		1.50
	Is	Loca	tion	mb parti	TV mestern	111					emen	1 7
Location of	1	Norma	ılly	190	Descrip	tion of		the minimum	2 1	T	уре	
Asbestos-Containing Material (ACM)		d Sol	ely by		stos Containin	ng Mater		Amount	12:15	50.1	m	_
TO BE ABATED In Facility	A		Staff?	(i.e	thermal syst surfacing,			(Specify SF or LF)	Rer	Z.	Encapsulate	Enclosure
(13)	180	(12)		1 1	other misce			or or Ery	Remova	Repair	Sul	osui
		100							a	7	ate	œ.
The second second second	Yes	No	N/A				7			-	Table 1	
see attached		$\Delta$	No. of		see atta	ached		see attached		<u> </u>	-	
	vTern							1 1 1				
A CONTRACT CONTRACT OF THE CON		1		114 = 14					141			
						771.			199	100		
Name of Registered Waste Hauler		10	NJ DEP W	/aste	Cubic Yard	ls	Name of	Registered Landfil				
		100	Hauler ID		of Waste							ti j
Freehold / Newark Carting / Rovic	******		450	09	ТВ		VI TO STATE OF THE	land Co./ BFI /	GRO	WS	/ TRI	RF
City, State					Disposal D		City, Stat					Vi sea
Freehold / Newark / Riverdale, NJ			312.17		12/31		Newburg	g / Imperial / M		ille,	PA	7.77
Completed by	Title			4	Signa	ture//	11	1 - 1 - 100	ate		107	
Mike Cooper	Presid	lent			1	11/		3/2	28/13			

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)	400			Name o	of Building	g Owner/O	perato	r (2)		2013 APP	4	7,		
Febru	uary 12, 2013			Viasan	t, LLC					JAPA			1.	
Agencies Notified	Type Notification	10000		Street A	Address				- 4	10,	2		(Sa)	
⊠ EPA	Initial			105 Ch	esley D	Or.				26.77	1	11.	Total States	
DEP	Amended	í		City, St	ate, Zip C	ode			(	14/2/8			00	pi 85
DOL	Amendment a			Media,	PA 190	063				10/1/	-4	Ž'n.		
DOH .	justification)	ricidumg		Name o	of Contact		n'		T	elephone Nu	mber	110	<i>i</i>	
DCA .	Cancellation			PM								-		
		-		FAC	ILITY INF	FORMATIC	N							
Name of Facility Where	Abatement is Taking	Place (	3)					Type of Faci	lity (4)					
Former Yates Foil		1.4				<u> </u>		School						
Street Address										her than K-1		Idinas	: hom	05
88 Rte 130 South				30			7.5	etc.)	i.c. piivate	a commerc	iai bui	lulliga	, 110111	cs,
City (5)								Square Feet	#	of Floors		Bldg.	Age	
Bordentown, NJ					1 Table 1									
County (6)	ST R VIEW II				Code (7)			Current Use	(Prior if b	eing demolis	hed)			
Burlington				SIAIR	USE ONLY	7		a. 15 H	Wana la .	empty				
Name of Monitoring Fire	m Hired by Building C	wner (8	)	ASC	M No.	150	Name	of Abatement	Contracto	or (9)		7 101	4.1	118
AET, Inc.		1 3 4 7	1869	0021		20 2	The N	ACK Group	p, LLC					
Street Address				i in di	(U-Vac	- V	Stree	Address	1 1 4 6					
907 Doolittle Drive		- 127	. " !!		4 7 11 V 15 1		1500	Kings HWY	N, STE	209			- 80	
City, State, Zip Code			1.	501			City,	State, Zip Code	Э					
Bridgewater, NJ 088	307	Del Conc		k news	4 . 4 . 1	(	Cherr	y Hill, NJ 08	3034					
Project Manager for Mo	nitoring Firm			Telepho	ne No.		Telep	hone No.	Total Land	License N	10.		- 200	
Eric Houseknecht				(908)2	18-1108	3 (	(973)	759 - 5000		00781				
Start Date (10)		Schedul	led Co	ompletion	Date (11)	)	Name	of OSHA Mor	itor					71
. 2/21/1	3	100	w es 0	3/31/1	3	3 JF N	The N	ACK Group	o, LLC.					
Occupancy Status Duris	ng Abatement (Check	Only O	ne)		10.00		Street	Address	4.1.		111.75			
Facility Closed/Va	cated During Entire P	eriod of	Abate	ement		5 1 1	1500	Kings HWY	N, STE	209				
Abatement Perform Other - Describe:	med Outside of Norma	al Facility	y Hou	rs			City, S	State, Zip Code	)					
Other - Describe.	12			7.77	1000000		Cherr	y Hill, NJ 08	3034	42				
Scope of Work (Check /	All That Apply)	Falls.		130 3		Saw, E		1000				- 1		
≥3 sf or ≥3 lf	competition and co		Renov	ation	10000	are reserved	*	Full Conta	inment wi	th Negative	Pressu	ıre		
≥160 sf or ≥260 lf			Demo	lition .				Mini-Enclo	sure					
								X Glovebag Non-Exem	¥ 300 00 00 00 00 00 00 00 00 00 00 00 00		Proce	dura		
	proposit from even		- L			Ter site		Non-Exem	pied ( ) an	d Non-i Habit	1000		emen	<b>+</b> -7
Francisco S. M.		100	s Loca Norma										уре	•
Locatio Asbestos-Containing		Use	ed So	lely by	Ashes		cription	n of Material (ACM)		Amount		3 - 3		
TO BE AE	BATED			ance/ Staff?				s insulation,		(Specify	Z.	71	Enc	m
In Fac (13)	52.0	Ous	(12		- En 1487	surfaci other mi			S	F or LF)	Remova	Repair	aps	Enclosure
(10,	hard and the	-	Γ -			other in	iscella	neous)			val	=	Encapsulate	иre
		Yes	No	N/A		2 1 1 1 1	4.5	2 K 1 1 1 1		4.2			TO.	
see atta	ched		X			see a	attacl	ned	see	attached	X		- 5	
			-	`							1			
		-		+	10000		+		-		-		1	
				i in si			1, 111							
							b 10					180 8		-
Name of Registered Wa	iste Hauler		A T T A S T T A	NJ DEP W		Cubic Y		Name	of Regist	ered Landfill	7 3.	VI TOR		1277
Establish (Name at C				Hauler ID		of Wast								10.5
Freehold / Newark C	arting / Rovic			450	J9	The second second	TBD		A Part of the Part	Co./ BFI /	GRO	VVS	/ IRI	۲F
City, State	Discourable All				Department	Disposa		City,				1-0		
Freehold / Newark /	Riverdale, NJ	Title	11.594	1.75			31/13		ourg / Im	perial / Mo		ılle,	PA	
Completed by		Title				Sig	mature	11/1		4 1 1 2 2	ate			
Mike Cooper		Presid	dent					/	_	2/1	2/13		10	

CX 125

	2-
	10/2
	300
-	490

Date of Notification (1)	3 / 28 / 2013					g Owner/Operator ( er National	200	ZAN	1	All			
Agencies Notified  EPA  DOLWD	Type Notification Initial Amended			500	t Address Water				0	2		757	
■ DHSS □ DCA	Amendment #			Jac		e, FL 32202		707	01			4	
(NJAC 5:23-8)	justification)		155.115	12,000,000	of Contac n Gron	nnert, Facilities Proj. Mgr							
				FA	CILITY IN	IFORMATION							
Name of Facility Where CSX Intermode Street Address				's Mod	dular Bu	uilding	Type of Facility (4)  School (K-12)  Subchapter 8 (Other than K-12)  Other (i.e., private and commercial buildings,						
26 Pennsylvania	a Avenue						homes, etc.)	ivate and comme	iciai bi	JIIQII I	<b>J</b> S,		
City (5) Kearny				7.5		Square Feet # of Floors Blo					ge		
County (6) Hudson				Cour	nty Code (7	)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)				
Name of Monitoring Fire	m Hired by Building	Owner (	8)	ASCM	No.	Name of Abateme	ent Contractor (9)		-	07			
Shaw Environm	ental, Inc.		100	1 / 8		Prism Resp							
Street Address 128 S. Tryon St	reet - Interstat	e To	we	r		Street Address 102 Techno							
City, State, Zip Code					1 - 7	City, State, Zip Co						-	
Charlotta, NC 2	8202					Export, PA 15632							
Project Manager for Mo			Te	lephone	No.	Telephone No.		License No.	-			11.0	
Roy Stancil			70	04-33	1-6334	724-325-333	30	01121					
Start Date (10)		luled C		letion Da		Name of OSHA M					1		
4 / 15	/ 2013 4	′	17	/ .	2013_	Shaw Envi	ronmental,	Inc.	24		24		
Occupancy Status Durin						Street Address							
■ Facility Closed/Vaca  □ Abatement Performe Time of Abatement:		Facility	Ho!	urs - Des	cribe AM	128 South T City, State, Zip Co	ode	Interstate	owe	r		-	
					<u> </u>	Charlotte, N	C 28202						
Scope of Work (Check :  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	*Abatement prior to	Re De demolit	molit	ion		☐ Mini-Enc	TO 100 100 100 100 100 100 100 100 100 10		ге		8		
				ation			20 6		Ab	atem	ent T	ype	
Locatio Asbestos-Containing TO BE AB IN Fac (13)	g Material (ACM) BATED ility	Use Ma	inten	lely by ance/ I Staff?		Description o stos Containing Ma ., thermal systems i surfacing, VAT, other miscellane	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A	lia .						(D		
Roc	of			×	- VIII. VIII.	Roofing		800 SF	×				
Exterior of S	Structure			×	Glazing	Compound fro	m Windows	9 SF	×				
Throug	hout			×		Pipe Insulati	on	80 LF	×				
Throug	hout			×	00000	VAT		12 SF	×				
Name of Registered Wa	ste Hauler			NJDEP \ Hauler II SW1724	AND THE RESERVE OF THE PARTY OF	Cubic Yards of Waste	Name of Regist Grand Ce	ered Landfill entral Sanit	ary	Lai	ndfi	II	
City, State  Camden, New					31	Disposal Date 4/17/2013	City, State Penn Arg					-	
Completed By (Print or Type)  Jessica Busch  Title  Administ					Supp	10: 1	sica Bi	7 15	ate /28/2	201	3	G.	

Date of Notification (1)		-	Man	ne of Build	ling Owner/Operator	(2)	10/3 ADD.	10.51		-				
	2013		1,000	Schneider National, Inc. ZAM - TO										
Agencies Notified Type Notifi ☐ EPA ☐ Initial	•	1.	0.0000000000000000000000000000000000000	et Addres O Wate	r Street		8 Lm.	V.		\U				
DOLWD Amend	ed ment # 2			State, Zij	Code ille, FL 32202		- 77	Mill	3756	77.				
	ency (includ	ing		e of Cont		·	Telephone Nu	mher						
(NJAC 5:23-8) justifica					nnert, Facilitie	es Proj. Mgr		IIIDGI .	1					
					INFORMATION						33			
Name of Facility Where Abatement is	Taking Pla	ce (3)				Type of Facility	(4)	15						
CSX Intermodel - Schnei	der Nati	onal	's Mo	dular E	Building	School (K-1		0)						
Street Address							8 (Other than K-1 orivate and comm		ouildii	ngs,				
26 Pennsylvania Avenue					1	homes, etc.	# of Floors	- 11	3ldg.	^~~				
City (5) Kearny						Square Feet 8000	1	2	25+	ge				
County (6) Hudson			Cou	inty Code	(T)(STATE USE ONLY)	Current Use (Pi Industrial	rior if being demo	lished)		na i i				
Name of Monitoring Firm Hired by Bui		r (8)	ASCA	l No.	- Children months Minner	nent Contractor (9	)				-			
Shaw Environmental, Inc.			1		Prism Resp	onse, Inc.								
Street Address	T			Street Address										
128 S. Tryon Street - Inte	rstate 1	owe			102 Technology Lane City, State, Zip Code									
City, State, Zip Code Charlotta, NC 28202					Export, PA 15632									
Project Manager for Monitoring Firm		Te	lephone	No.	Telephone No.		License No.			1 20				
Roy Stancil		1000		1-6334		30	01121							
Start Date (10) 4 / 1 / 2013	Scheduled 4	Compl / 3		ate (11) 2013	Name of OSHA	Monitor ironmental	. Inc.			28				
Occupancy Status During Abatement (	Check only	one)			Street Address		dank, kanal			-				
Facility Closed/Vacated During Enti	·		ement		128 South	Γryon Street	, Interstate	Towe	er					
Abatement Performed Outside of N Time of Abatement:AM	ormal Facil PM/	ity Hou PN	ırs - De: I	scribe AM	City, State, Zip C Charlotte, N				G/BR	3				
Scope of Work (Check all that apply)							(4 1 1	-						
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> <li>*Abatement</li> </ul>		enova emoliti lition by	ion		☐ Mini-End	tainment with Neg closure g Procedure empted (*) and No		ire						
		s Loca						At	atem	ent T	ype			
Location of Asbestos-Containing Material (ACM	n Us	Norma ed Sol		Ach	Description of estos Containing Ma		Amount	Ren	Repair	E	Enc			
TO BE ABATED	" M	ainten			e., thermal systems	insulation,	(Specify	Removal	pair	Encapsulate	Enclosure			
IN Facility (13)	Cu	(12)			surfacing, VAT other miscellane		SF or LF)	=		ulate	re			
(10)	Yes	No	N/A							Ф				
Roof			×		Roofing		800 SF	×						
Exterior of Structure			×	Glazin	g Compound fro	om Windows	9 SF	×						
					And Service in									
Name of Registered Waste Hauler		F	JDEP \ lauler IC		Cubic Yards of Waste	Name of Regist	ered Landfill entral Sanit	arv	l ar	dfi	1			
Waste Management	1 1 1 1	S	W1724		Disposal Date	City, State								
City, State Camden, New Jersey					4/3/2013 Penn Argyl, PA									
Completed By (Print or Type)			Signature	. 0	Da	NEW COLUMN		_	5					
Jessica Busch	Admin	istra	ative	Supp	ort low	1 attion	1/1 3/	15/2	201	3				

Date of Notification (1)	25 / 201	3	moseur.	Sch	neide	owner/Operator (2)  r National	, Inc.	IPR-Z AH	. [	0				
Agencies Notified ☐ EPA	Type Notification	17/1		500	Address Water		ξέ		i(0	<i>l</i> .				
■ DOLWD	Amended Amendment #	1		City, S	State, Zip C	sonville, FL 32202								
■ DHSS □ DCA	☐ Emergency (ir		9											
(NJAC 5:23-8)	justification)			Name	of Contact	nert, Facilities		Tolophone		į.				
	Cancellation						3110]. 111			-				
				FA	CILITY IN	FORMATION	Type of Facility (	4)			-			
Name of Facility Where CSX Intermodel	- Schneider I	g Place Vatio	(3) nal's	Mod	dular Bu	uilding	☐ School (K-12) ☐ Subchapter 8 (Other than K-12)							
Street Address 26 Pennsylvania	a Avenue						homes, etc.)	Other (i.e., private and commercial buildings, homes, etc.)						
City (5) Kearny							Square Feet 8000	# of Floors	2	5+	ge			
County (6) Hudson				Cour	nty Code (7	(STATE USE ONLY)	Industrial	or if being demolis	nea)					
Name of Monitoring Firm Shaw Environm		Owner	(8)	ASCM	No.	Prism Respo			1	100 200				
Street Address					A-1 - 1 - 1 - 1 - 1	Street Address								
128 S. Tryon St	reet - Interstat	te To	wer			102 Techno						-		
City, State, Zip Code						City, State, Zip Code								
Charlotta, NC 28	3202					Export, PA	15632	11.				_		
Project Manager for Mo Roy Stancil			70		1-6334	Telephone No. 724-325-333	(7) (S)	License No. 01121						
Start Date (10)	Sched			tion Da		Name of OSHA M Shaw Envi		Inc.				5		
Occupancy Status Durir	ng Abatement (Chec	k only	one)	6,11		Street Address		T						
■ Facility Closed/Vaca	ted During Entire Pe	riod of I Facilit	Abate y Hou	rs - Des	cribe	128 South T City, State, Zip Co		Interstate T	owe	<u> </u>				
Time of Abatement:	AMP	M/	PM-	+	AM	Charlotte, N	C 28202	or version						
Scope of Work (Check a	all that apply)							ath is Dragging						
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			enovat emolitic			☐ Mini-Enc	Procedure							
E 2100 31 01 2200 11	*Abatement prior t	o demoli	tion by	others.		☐ Non-Exe	mpted (*) and Nor	n-Friable Procedur		atem	ont T	vna		
Locatio Asbestos-Containing TO BE AB IN Fact (13)	n Material (ACM) NATED Ility	Use	Norma Norma ed Sole intena todial (12)	ally ely by ance/ Staff?	Asbe (i.e	Description of stos Containing Ma , thermal systems surfacing, VAT other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
	s La frança de la graca	Yes	No	N/A					1			-		
Roo	f			x		Roofing	100-1	800 SF	×					
Exterior of S	Structure			×	Glazing	Compound fro	om vvindows	9 SF	+	무	][	-		
										Ш	ᆜ	<u>_</u>		
			П			hi barbed								
Name of Registered Wa	ste Hauler		IN	JDEP I	Waste	Cubic Yards of	Name of Regist	tered Landfill		77				
Waste Manage				lauler II W1724	O No.	Waste Data	Grand Co	entral Sanita	ary	Lar	ıdti	11		
City, State Camden, New	Jersev					Disposal Date 3/20/20/13	Penn Arg							
Completed By (Print or	Type) Title		-			Signature	. /)	Dat		20.1	^	-		
Jessica Busch		dmir	istr	ative	Supp	ort less	seak ye	JCR 21	25/2	201	3			

ASB-41 MAY 11

\* Do not use this form for asbestos licensure exempted activities.

Date of Notification (1) 2 / 2	5 / 20	13		Pursuant to NJAC 8:60 and 5:16)  Name of Building Owner/Operator (2)  Schneider National, Inc.										
						- 1-89	I, Inc.		117.5	6	,			
Agencies Notified  EPA	Type Notificaţio	on		000000	et Address O Water	5	C.	1/200						
■ DOLWD	Amended	4			, State, Zip			11.37	100	U).		-		
■ DHSS	Amendment  Emergency		ng.			le, FL 32202			()	i				
☐ DCA (NJAC 5:23-8)	justification)		ıg		ne of Contac		Fig. 1	Telephone Nu	mber			-		
	☐ Cancellation	1		Rya	an Gron	nert, Facilitie	es Proj. Mg			_	(05.11			
1 2	The state			F/	ACILITY IN	NFORMATION						200		
Name of Facility Where A CSX Intermodel -				0 M	dular Di	uildina	Type of Facility  ☐ School (K-12							
Street Address	Scrinelaer	Ivau	Jilai	SIVIO	dulai Di	ulluling	Subchapter 8	(Other than K-1						
26 Pennsylvania /	Avenue						Other (i.e., p homes, etc.)	rivate and comm	ercial	buildi	ngs,			
City (5)	Worldo			-		<del>dilana dia</del>	Square Feet	# of Floors	- 11	3ldg.	Age	_		
Kearny							8000	1	- 24	25+	•			
County (6)	The second	77		Cou	inty Code (7	7)(STATE USE ONLY)		or if being demol	ished)	-	111	9		
Hudson							Industrial				14.			
Name of Monitoring Firm F Shaw Environmer		Owner	(8)	ASCN	No.	Prism Resp	ent Contractor (9)	*						
Street Address	ital, IIIC.					Street Address	orise, inc.			-		_		
128 S. Tryon Stre	et - Intersta	ate To	wer			102 Techno	ology Lane							
City, State, Zip Code	111101010				-	City, State, Zip C								
Charlotta, NC 282	02					Export, PA	15632	4 1 1 2 20 2						
Project Manager for Monito Roy Stancil	oring Firm		10000	ephone 4-33	No. 1-6334	Telephone No. 724-325-33	30	License No. 01121		nie ż				
Start Date (10) 3 / 18 / 2	2013 Sche		Comple 20		ate (11) 2013	Name of OSHA N	<sup>Monitor</sup> ironmental,	Inc.						
Occupancy Status During A	batement (Che	ck only	one)			Street Address						-		
Facility Closed/Vacated	(1 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.						Tryon Street,	Interstate 7	Towe	er				
Abatement Performed C Time of Abatement:				rs - Des		City, State, Zip C Charlotte, N								
cope of Work (Check all the	nat apply)				3160	□ Full Con	tainment with Nega	ativo Proceuro		E		_		
] ≥3 sf or ≥3 lf I ≥160 sf or ≥260 lf	*Abatement prior	□ De	enovate emolition by	on		☐ Mini-End			ra					
	Abatement prior		Loca		F	□ 1401-EXE	Impled ( ) and Non	-i habie i focedu	T	atem	ent 7			
Location of			Norma	lly		Description of		El Caryon word	-	-	_	j		
Asbestos-Containing Ma TO BE ABATE			d Sole intena			tos Containing Ma , thermal systems		Amount (Specify	Remova	Repair	Encapsulate			
IN Facility	<u>.u</u>	Cus	todial	Staff?	(1.0.	surfacing, VAT	or	SF or LF)	<u>\sigma</u>	7	Sula			
(13)		Yes	(12) No	N/A		other miscellane	ous)				ë			
Roof				x		Roofing		800 SF	×			1		
Exterior of Stru	cture			x.	Glazing	Compound fro	m Windows	9 SF	×			1		
Exterior of our			П						П			1		
				П		1		<del></del>	1	П	П	1		
me of Registered Waste	Hauler	1	I N	JDEP V	Vaste	Cubic Yards of	Name of Registe	red Landfill	1:-	اللا		1		
/aste Managem			H	auler IC V1724		Waste	Grand Ce		ary	Lar	dfi	I		
y, State	1 100 1176		130	11/24		Disposal Date	City, State	PA S		*		-		
amden, New Je	rsey		Pa	15	1000, 11	3/20/20/13	Penn Argy	I, PA						
mpleted By (Print or Type	a series of the	е		ar er		Signature	0	↑ Da		-				
				tive	A COMPANY OF STREET WAY AND ADDRESS.					201	0			

\* Do not use this form for asbestos licensure exempted activities.

MAY 11

Courtesy to EPA Region II

## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 2 / 15	, 2013		Schneider National, Inc.									
Agencies Notified Type N	otification <sub>{</sub>	-	Sti	reet Addres		4 375 [	- 181	- [	D-			
	ended endment# ergency (inclu	ıdina	Cit	y, State, Zip			LICENSING	<del>(HÜ</del>	i.		= 0	
(NJAC 5:23-8) justi	fication) cellation	ding	120000	me of Conta	<sub>act</sub> nnert, Faciliti	es Proj. Mgr	Telephone Nu	ımber				
		11.5	F	ACILITY	INFORMATION				20			
Name of Facility Where Abatemer CSX Intermodel - Schn Street Address 26 Pennsylvania Avenu	eider Na			odular E	Building		2) 8 (Other than K- orivate and comm		build	ings,		
City (5) Kearny						Square Feet 8000	# of Floors		Bldg. 25+		a x	
County (6) Hudson		1	Co	ounty Code	(T)(STATE USE ONLY)		rior if being demo					
Name of Monitoring Firm Hired by Shaw Environmental, Ir		ner (8)	ASC	M No.	Prism Resp	nent Contractor (9 conse, Inc.						
Street Address 128 S. Tryon Street - In	terstate	Towe	r		Street Address 102 Techno							
City, State, Zip Code Charlotta, NC 28202					City, State, Zip C Export, PA							
Project Manager for Monitoring Firm Roy Stancil	n	1 30.00	elephon	ie No. 3 <b>1-633</b> 4	Telephone No. 724-325-33	30	License No. 01121					
Start Date (10)	Scheduled				Name of OSHA							
2 / 25 / 2013	1 2	/ 27		2013	Shaw Env	ironmental	, Inc.					
Occupancy Status During Abateme					Street Address	Ot t	Internations :	T			1385.7	
■ Facility Closed/Vacated During B Abatement Performed Outside of Time of Abatement:AM	f Normal Fac	ility Ho	urs - De	escribe _AM	City, State, Zip C Charlotte, N		, interstate	IOW	<u>=</u>			
Scope of Work (Check all that apply	')	-									-	
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> <li>*Abatem</li> </ul>		Renova Demolition by	tion		☐ Mini-End	tainment with Neg closure g Procedure empted (*) and Nor		ıre				
		Is Loca	ation	T				Al	batem	ent T	уре	
Location of Asbestos-Containing Material (A TO BE ABATED IN Facility (13)	N N	Norm sed So Mainten ustodia (12	lely by ance/ Staff?		Description of stos Containing Ma ., thermal systems surfacing, VAT, other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
	Yes	s No	-	0-1-1-1	ale a	1		-	_			
Roof	·   [		×		Roofing		800 SF	×		Ш		
Exterior of Structure		I P	x	Glazing	Compound fro	om Windows	9 SF	×				
								닏		Ш		
							11		Ш		Ш	
Name of Registered Waste Hauler Waste Management		1	NJDEP Hauler I W1724	STATE OF THE PARTY	Cubic Yards of Waste		ntral Sanit	ary	Lar	ıdfil	1	
Camden, New Jersey					Disposal Date 2/27/20/13	Penn Argy	/I, PA		A .			
Completed By (Print or Type) Jessica Busch	Title Admir	nistra	ative	Suppo	Signature ort	ca Bus	ch. 21	te 15/2	201	3		

ASB-41 = MAY 11

\* Do not use this form for asbestos licensure exempted activities.

State of New Jersey 10001568 NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification (1) Name of Building Owner/Operator (2) 215 1/1 ERMING Agencies Notified Type Notification EPA SOUTH [X]Initial Notification (X) DEP MDOL [ ]Amended Notification [X] DOH Telephone [ ]Cancellation [ ]DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Place []School (K-12)
[]Subchapter 8 (Other than K-12)
[X]Other (i.e., private & commercial buildings, homes, etc.)
e Feet | # of Floors | Bldg. Age Street Address Square Feet 4000 County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) nim OFFICES Name of Monitoring Firm Hired by Building Contractor Owner (8) Street Address Street Address City, State, Zip Code City, State, Zip MYCEN Project Manager for Monitoring Firm | Telephone Number Telephone Number License Number (210100 Scheduled Start Date (10) Name of OSHA Monitor Sched.Completion Date (11) Facility Closed/Vacated During Entire Period of Abatement [ ]Abatement Performed Outside of Normal Facility Zip Code Hours - Describe: []Other - Describe:

Scope of Work (Check all that apply)

]Demolition [ ]>3 sf or ≥3 lf D()∑160 sf or ≥260 lf Renovation

|Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Friable Procedure

Abatement Type Is Location ENCLO Normally Description of Asbestos-Containing Location of Asbestos-Containing
Material (ACM)
TO BE ABATED
in Facility Used Amount MOV REPAI (Specify SF or Solely Material (ACM) by Main-(i.e., thermal systems
insulation, surfacing, VAT,
 or other miscellaneous) tenance/ LF) S (13)Custodial À Staff(12) R Yes No N/A no of 100051 Cubic Yards Name of Registered Landfill

Name of Registered Waste Hauler

Hauler ID No.

of Waste

Disposal Date

City.

235 61563 M

ASB-41 JUN 95

76113

							200						
Date of Notification (1)			Name of	Building O	wner/Operator		TO BELVE	- ~					
March 28, 2013		100		Benckise	r	2017	PR-2-111	* 117					
Agencies Notified Type Notification		- 1	Street Ac			13 /	アアークーク						
EPA   Initial			99 U.S					- QQ					
DEP ( Amended				te, Zip Cod			11/10/31						
DOL Amendment #				ough NJ	08844	e L	105,2547)	:Ot					
DOH justification)				Contact			TelephoneNu	mber					
DCA Cancellation		S		Grum	at in F	19					,		
Name of Facility Whose Abstament is Taking	Place (2	1	FACI	LITY INFO	RMATION	Type of Facility (	4)		_	+	-		
Name of Facility Where Abatement is Taking	Place (3	,											
Reckitt Benckiser			-3.31	N N		School (K-1	2) 8 (Other than K-1	2)					
Street Address						Other (i.e. p	rivate & commerci	al buil	dings	, home	es,		
799 U.S. 206			- 1			etc.)	518.5						
City (5)						Square Feet	# of Floors	E	Bldg. /	Age			
Hillsborough NJ 08844				THE STATE OF									
County (6)			County C			Current Use (Price	or if being demolis	hed)					
Somerset			(SIAIE C	ISE ONLY)		als *	Pharmaceuti	cal	etra				
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.	Name	of Abatement Cor	tractor (9)						
Pennoni Associates Inc.					The N	MACK Group, L	LC		20-2	1			
Street Address	- 1-, 1/				Stree	t Address							
515 Grove St, Suite 1B			- 1 1		1500	Kings HWY N,	STE 209	11					
City, State, Zip Code		rudings.		City,	City, State, Zip Code								
Haddon Heights, NJ 08035					Cherr	erry Hill, NJ 08034							
Project Manager for Monitoring Firm	-		Telephor	ne No.	Telep	hone No:	License N	10.					
R. Alan Lloyd, CIH, CSP		8	56-547	-0505	(973)	759 - 5000	00781						
	Schedul	ed Con	pletion I	Date (11)		of OSHA Monitor	77 7 7		-6	11 = 5			
4/8/13	7		4/8/14		The N	ACK Group, L	LC.						
Occupancy Status During Abatement (Check	Only Or	ne)				t Address				NI T			
Facility Closed/Vacated During Entire P	eriod of	Δhaten	ent		1500	Kings HWY N,	STE 209						
Abatement Performed Outside of Norma						State, Zip Code			2				
Other - Describe:					- Cherr	y Hill, NJ 0803	4						
Scope of Work (Check All That Apply)	121						The Salary of						
≥3 sf or ≥3 If	X .	Renova	tion			Eull Containm	ent with Negative	Pressu	re				
≥160 sf or ≥260 lf	Statement	Demolit				Mini-Enclosure							
						Glovebag Pro-	cedure (*) and Non-Friable	o Proce	dura				
	1		a mark	- 22		Non-Exempled	( ) and Non-i habi	11000		temen	t		
		Locati							77.000.000.000	уре			
Location of Asbestos-Containing Material (ACM)		Normal ed Sole		1 ab a a t	Descriptio				100		100		
TO BE ABATED	1,500	intena			thermal systen	Material (ACM)	Amount (Specify	D	7	Encapsulate	En		
In Facility	Cus	todial 5 (12)	Staff?		surfacing, V	AT, or	SF or LF)	Remova	Repair	aps	Enclosure		
(13)		(12)	100		other miscella	aneous)	14 A 44	Ova	<u>a</u> .	ulat	ure		
	Yes	No	N/A			x 3			+ -	œ.			
Outlie Assessment to the Office Asses	163	V	INIA	т	ransite Fum	no Hood	40 s/f	X					
Quality Assurance Lab Office Area		$\triangle$		1	ransile ruii	е пооц	40.5/1	-	-		1		
	-5							-		-	-		
		18				14							
	15-35	4-74-	16/19/19	7 - 7 - 7			Mark Tool	J ( = 1		1,111	T I K		
Name of Registered Waste Hauler		L	J DEP W	Vaste T	Cubic Yards	Name of	Registered Landfi	1		5 7			
ivanie di ivegistereu vvaste fiaurei			lauler ID		of Waste						(See )		
Freehold / Newark Carting / Rovic		1	450	09	0.4	Cumber	land Co./ BFI /	GRC	)WS	/TR	RF		
City, State		7.1	A-COMP		Disposal Date	e City, Stat	e						
Freehold / Newark / Riverdale, NJ	1000	1		1 77 . 15	4/8/14	1 Newburg	g / Imperial / M	orris	/ille,	PA			
Completed by Title				F. 1727		ignature Date					54		
Mike Cooper	dent			Ment	3/28/13								

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

## NOTIFICATION OF ASBESTOS ABATEMENT//3 APP

Date of Notification (1)		Name of Building Owner/Operato (2)											
	3/20	/2013			Waldwick I			-	ĵo			- 1	
Agencies Notified		Notification	Туре		Street Addres	SS (	150 00		4				
X EPA		Initial			155 Summ	it Avenu	e KASAA	TROW	• 50				
X DEP			ed #		City, State, Z		- 4/37	÷				-	
X DOL		Emerge	ency (inclu		Waldwick,		3	# · ·			- 0		
. ▼ DOH		justifica	tion)		Name of Con	ASSESSED VI		IJOLN	ımbor		-		
X DCA		Cancell	ation		Mr. John R							*	
Name of Facility Where Abar	tement is T	aking Place (	3/	FACILITY II	Type of Facili	ty (4)							
Waldwick High School		aking riace (.	3)			ty (4)							
Street Address	100				School (K-12)								
					Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, homes, etc.)								
155 Wyckoff Avenue	County (6)		I County	Code (7)									
	County (6)			Jse Only)									
	Bergen												
Name of Monitoring Firm Him			ASCM	NO.	Name of Cont								
	stchester Environmental LLC 00127						ation						
Street Address 307 N. Walnut Street					Street Addres	<del>-</del>							
					135-137 Mo		/e				-		
City, State, Zip Code West Chester, PA 19380					City Sfate, ZipCode								
					Paterson, N								
Project Manager for Monitoring Firm Telephone Number					Telephone Nu			Licens	e Numb	er	Ju.,-3.		
Matt Abraham		610-431-7			973-742-50	030		00809	9	10.10			
Scheduled Start Date (10)		Scheduled (		n Date (11)	Name of OSH	A Monitor		1700	77		N a T		
4/05/2013		04/12/201			MTM Metro	Corpora	ation						
Occupancy Status During Ab	atement (C	heck only on	e)		Street Addres	S						71	
					135-137 McBride Ave								
Facility Closed/Vacated	During En	tire Period of	Abatemen	t	City, State, Zip Code								
Abatement Performed (	Outside of N	Normal Facility	y Hours										
Other-Describe:					Paterson, NJ 07501								
Source of Work (Check all the	at apply)												
> 3 sf or > 3 lf	×	Renovation		X Full	Containment wi	th Negative	Pressure	X Mir	i-Enclos	sure			
> 160 sf or > 260 lf		Demolition						X Glo	vehan F	Procedu	Έ.		
	_	,			n-Exempted(*) &	Non-Friabi	e Procedure	[V] C10	vcbag i	Toccuu	C		
Location of Asbestos- Containing Material (ACM) in	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ation Normally by Maint./Cus		Description of thermal system		Amount	(Specify SF or	LF)	Abater	nent Ty	oe_		
Facility (13)	Staff?	(12)		surfacing, VAT				1.54			64.5		
Boiler Room	YES	NO	N/A	miscell.)		120			Rem.	Rep.		Enclose	
Boiler Room	-	X		Boiler breeching Pipe fittings		264SF 95If		-	×	14.	×	+	
Boiler Room		X	9	HT.WTR Heater exc	tank	275SF			X		×		
Name of Reg. Waste Hauler	Name of Reg. Waste Hauler NJDEP Waste Hauler ID #							Name	of Reg. L	andfill			
MTM Metro Corporation		Cubic Yards of 30	- 1.4		Tullytow		Lanulli						
MTM Metro Corporation 26552  City, State							Disp. Date			ity, Sta	Δ		
Paterson, NJ						14.0	4/12/2013			ıllytown	The state of the s		
Completed by (Print or Type)		Title			Signature			Date				4.1	
Elizabeth Maslarkov	20/46	Business Adn	ninistrator		Elizabeth	Masla	irkov	3/26/201	3				
Business Administrator					0. 0.0000								

No Meck
Motification (1)

Date of Notification (1) 12-14-12		Name of Building Owner/Operator (2) Dupont Nemours Company  Street Address Rt 130 South  City State 7in Code							17			-	
Agencies Notified	Notification Type		Street Ad Rt 130 S		1		1836	11-5	12:	Gp)	1	722	
☑ DEP ☑ DOL	Amended Amendment 1 Emergency (Incl	udina	City, Star Deepwat			t .	E 1	ICENSIN	1,40	71.			
☑ DOH ☐ DCA	Justification)  Cancellation	duling	Name of Richard					Telepho	ne Nu	mber		)	
			FACI	LITY I	NFORM	ATION							
Name of Facility Where A Chamber Works Plant	batement is Taking P	Place (3)		× 16			Type of Facility (4)						
Street Address Rt 130 South							□ School (K-12) □ Subchapter 8 (other than K-12) □ Other (i.e. private & commercial buildings, homes, etc.						i,
City (5) Deepwater							Square Feet		ors	ВІ	dg.	Age	е
County (6) Salem					unty Co SE ONLY	de (7) (STATE ()	Current Use	(prior if being	demo	lished	1)		ete j
Name of Monitoring Firm Harvard Environmer		r (8)	ASCM N	0.	100000000000000000000000000000000000000	of Contractor (9) ity Environmen	tal				3		
Street Address 761 Pulaski Hwy					Address New Churchma								
City, State, Zip Code Bear, De		7		New	ate, Zip Code Castle, DE 197	720				3			
Wesly Morrison	Project Manager for Monitoring Firm Telep Wesly Morrison 302-					one Number 322-8946		License 00578	Numb	er			
Scheduled Start Date (10 1-2-13	Scheduled ( 6-30-13	Completion	n Date (11	)	200000000000000000000000000000000000000	of OSHA Monitor ty Environmen	tal (	12-003A)	2				ě
Occupancy Status During						Address New Churchma	ns Road		7			75.5	
<ul> <li>✓ Facility Closed/Vacate</li> <li>✓ Abatement Performed</li> <li>✓ Other – Describe: Und</li> </ul>	Outside of Normal Fa				City, S	tate, Zip Code Castle, DE 197							
Scope of Work (Check all  ≥ 3 sf or ≥ 3 lf  ≥ 160 sf or ≥ 260 lf	that apply)		<u> </u>		ovation olition	<ul><li>☐ Mini-Enclo</li><li>☑ Glovebag I</li></ul>				e			
			Is Locatio						1)	A	bate Ty	eme pe	ent
Locati Asbestos-Containi <u>TO BE A</u> IN Facili		Normally sed Solely flaintenand Custodia Staff? (12)	by ce/		Description stos Containing Ma a thermal systems surfacing, VAT other miscelland	aterial (ACM) insulation, r, or	Amou (Speci SF or L	fy	Removal	Repair	Encapsulate	Enclosure	
Thermal Systems Thermal Systems						nal coverings throu nal coverings throu		22000LF 2000SF		X	X	Х	112
Floor Tile /Mastic			JDEP Was	oto Li-		tile and mastic thro	7	1800SF		Х			
S&J Transport.	No. 3217	ste na	uler	Cubic Yards of Waste >30	Constoga	eg. Landfill							
City, State Woodstown, NJ						Disposal Date TBD	City, State Morgantow	n, PA					
Completed by Evelyn Walsh				Signature									