

1/2		N		ATION	OF ASBE to NJAC 8	STOS	ABATE			A.					
Date of Notification (1) 4-03-2013					Building Cleaning				2013	APP		77.			
Agencies Notified	Type Notification		1 2	Street Ac	dress pect St.				d since		9 1/1/1	(): ₄ ,			
DEP DOL	Initial Amended Amendment #_				te, Zip Coo vood NJ		50		47	$c_{\zeta_{A}}^{\circ}$	Syn,	- , 			
☑ DOH DCA	Emergency (inc justification) Cancellation	cluding	1 5	lame of Ben Ra	Contact aabe					Tele	ephone Nu	imber	1		
Name of Facility Manage	Abstament in Taking I	Diago (2)		FACIL	ITY INFO	RMAT	ION	Type	of Facility (4	1)					
Name of Facility Where A	Abatement is Taking F	riace (3)	, 						School (K-1: Subchapter	2)	orthan K	12)			
Street Address 63 Elliott Place								N (Subchapter Other (i.e. p etc.)	rivate 8	commerc	cial build	lings,	home	s,
City (5) Rutherford, NJ 070	70							Squar	e Feet	# of	Floors		ldg. A 0+	ge	
County (6) Bergen					Code (7) ISE ONLY)			Curre	nt Use (Prid	or if bei	ng demolis	shed)			
Name of Monitoring Firm	Hired by Building Ov	vner (8)		ASCM	l No.				tement Con						
Street Address				L				Addres Virgin	ss ia Ave				- 1.2200		
City, State, Zip Code						7			ip Code y NJ. 073	804					
Project Manager for Mor	nitoring Firm			Telephor	ne No.		450000000000000000000000000000000000000	none No 333-8			License 01174	No.			
Start Date (10) 4-4-2013	2.0	chedule 1-5-20		pletion I	Date (11)		200		A Monitor Above						
Occupancy Status Durin	g Abatement (Check	Only On	e)				Street	Addres	SS						
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire Pened Outside of Norma	riod of A I Facility	Abatem Hours	ent		_	City, S	State, Z	ip Code						
Scope of Work (Check A	All That Apply)		-					or the							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renovat Demoliti	1.770.20.33			2	Mir Glo	I Containmoni-Enclosure ovebag Produces n-Exempte	e cedure	· · · · · · · · · · · · · · · · · · ·			e	
			Location											ement rpe	
Locatio Asbestos-Containing TO BE AB In Fact (13)	g Material (ACM) BATED liity	Use Ma	Normall d Solel intenar todial S (12)	y by nce/ staff?	Asbes (i.e.	tos Cor therma surfa	escription ntaining f al system acing, VA miscella	Material is insula AT, or	ation,	(\$	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
B		Yes	No	N/A		Din	e Insula	ntion		1	80LF	x	-		
Basem	nent		Х			Pipi	e ilisuid	211011			OOLI	-			
Name of Registered Wa	ete Hauler		I N	JDEP W	/aste	Cubi	c Yards		Name of	Registe	ered Land	fill			Щ
Tri-State Transfer A			Н	auler ID A456		of W	aste		Minerv	a Ente	erprises.				
City, State Bronx - New York	5 N		•		5-1		osal Date 2013	_	City, Star Wynes		Ohio.				
Completed by Tiffany Nunez.		Title Offic	e Mar	nager.			Signatur	(De	W			Date 4-3-20	13.		

Check # 1470

Date of Notification (1)					Building (Ball	10 500	I HDF	•		
04/04/2013	TE Nego g					TIES	LLC, (ال بار	ODY T CL)KCIĮ	ĻU, E8G	UIKE			
Agencies Notified	Type Notification		1	Street Ad 11 WII	ldress NDERM	IERE D	DRIVE				" AM 10:	30			
DEP DOL	Initial Amended Amendment				e, Zip Co BELL F		22			14	16250	- C			
□ DOH DCA	Emergency (justification) Cancellation	ncluding	- 1	Name of JODY	Contact CURC	CILLO			***************************************	Tel	ephone Nur	nber	1 6		
Name of Facility Where	Ahatement is Taking	Place (3)		FACIL	JTY INFO	DRMATI	ON	Type	of Facility (4	4)					
COMMERCIAL BU		, , , , , , , , , , , , , , , , , , , ,							School (K-1)						
Street Address	201005 0040								Subchapter Other (i.e. p				linas.	home	s.
1730 CLEMENTS I	BRIDGE ROAD								etc.) re Feet		f Floors		ldg. A	_	
City (5) DEPTFORD								11,9		1	11 10013	2	-00-7	gc	
County (6) GLOUCESTER	***************************************	-		County C	ode (7) SE ONLY)				ent Use (Pric MMERCIA				NT		
Name of Monitoring Firm CONNELL GREEN		Owner (8)		ASCM	No.				tement Con D ENVIRO			ERVIO	CES	INC.	
Street Address 904 KINGS ARMS	DRIVE			-				Addre CLEN	ss //S RUN		· · · · · · · · · · · · · · · · · · ·				
City, State, Zip Code DOWNINGTOWN	PA 19335								ip Code HILL NJ	08062	2				
Project Manager for Mor RICK PELLISSIER				Telephon	e No. 2-9363			hone N 304-4			License N 01145	0.			
Start Date (10) 04/15/2013		Scheduled 04/17/20		pletion D)ate (11)		Name	The second second	HA Monitor		1		-		
Occupancy Status Durin	g Abatement (Chec	k Only One)				153,074,751.55	Addre							
Facility Closed/Vac Abatement Perform	ated During Entire F	Period of Al	oatem	ent			1		30 NORTI	1					
Other – Describe:	ed Outside Of NOM	iai racility i	iouis						NSON NJ	0807	77				
Scope of Work (Check A	All That Apply)		1)					_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emoliti	77 77 R 2 C				Mi Gl	III Containmo ni-Enclosure ovebag Proc	9	•	Pressu	re		
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Location Asbestos-Containing	Material (ACM)	Used	Sole	y by	Asbes	tos Cont	scription taining f	Vlateria	I (ACM)	- 33	mount	_		щ	ш
TO BE AB In Faci		Custo	dial S	0.70.7753	(i.e.		cing, VA	AT, or			Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	•	-	(12)				niscella					oval	air	ulate	sure
FIRST FI	OOR	Yes	No	N/A		FLC	OR T	ILE		1	08 SF	X			
FIRST FI				X			ASTI				08 SF	X			
1110111		+													
		+ +	-									1			
Name of Registered Wa	ste Hauler		- 213	JDEP W			Yards		Name of	Registe	ered Landfill	1	1		
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City, State MULLICA HILL NJ							sal Date		City, Stat		Α				
Completed by		Title	FAT		DINIAT		Signatur	e	Mr.	VIII		ate 4/04/2	2012		
RON SWANSON		PROJ	ECI	COOR	RDINAT	OK	1)0	W	V.	W	W/ O	+/U4/	2013	1	
ASB-41 (R-06-08)						(J _{Don}	ot use	this form for	asbes	tos licensur	е ехег	npted	activi	ties.

CK 437.9

Date of Notification (1)		7.00	N	ame of	Building	Owner/Operator	(2) 2012 00	PEG AM 10:				
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Agency Notified Typ	e Notification		S	treet A	ddress			AM 10:	.g C			
DEPA ZI	nitial		1_		52	PAGCE	AUE	17.5	6,			
D DEP	Amended		C	ity, Sta	te, Zip C	ode .	46	5/1/	11			
	Amendment # Emergency (including						NJ . 0	7646	4/			
дгоон	justification)	9	N		Contact			relephone Num	Elet		7	
□ DCA □	Cancellation					seron		1		_		
				FACIL	TTY INFO	RMATION						
Name of Facility Where Abate	ment is Taking Plac	e (3)			•		Type of Facility	(4)				
HR. 290	RROW.			va 54			School (K-12)	2 00			
Street Address				•		:	Subchapter 8	(Other than K-12 wate & commercia) d buildinas			
252 EAG	LE AUS.						homes, etc.)			*		
City (5)				7.0			Square Feet	# of Floors	Bldg. A	2000	•	٠.
HEN MI	FORN						.1800	2	100000000000000000000000000000000000000	C	c 67	AR
County (6)			To	county	Code (7)	(STATE USE	Current Use (Pr	nor if being demol	ished)			
BERG	en .			NLY)	10.0	÷	" Cas	ioen ce	* 5			
Name of Monitoring Firm Hist		T A	SCM I	No.		Name of Abaten	nent Contractor (S					
(8)						Rest R	emoval I	nc				
Street Address			- Marco -			Street Address					>==\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
				*		450 S.	River St					
City, State, Zip Code						City, State, Zip C						
ouy, outro, sup over	∘•					Hacken	sack, N.	J. 07601				
Project Manager for Monitori	na Firm	Tel	lephon	e No.		Telephone No.		License No.	-			
1 Tojour Manager To Manager	•					201-329-	7444 -	00388				
Start Date (10)	Scheduled Co	moletic	on Date	(11)		Name of OSHA	Monitor					
4/19/13	41	201	13	20		Omega En	vironmen	tal Inc				•
Occupancy Status During Ab	atement (Check only	one)				Street Address						
☐ Facility Closed/Vacated D	wine Entire Period o	f A'hote	mont		340	280 Huy						
Abetement Performed Out	side of Normal Facil	ity Hou	encin. Es		,	City, State, Zip (Code		.=			
2 Other - Describe: 747	1 70 5 8 M	ı				South H	lackensac	k, N.J.	0/606			
Scope of Work (Check all the	it apply)					D Fed	Containment will	Negative Pressu	re			
#23 sf or ≥ 3 lf			ړ	a Ren	ovation	2 Vini	-Enclosure		•			
□ ≥ 160 sf or ≥ 260 lf			1	□ Dem	olition	Z Gio	rebag Procedure	d Non-Friable Pro	cedure			
		-			·	. <u>C 16011</u>	-Exemples () dis	2 Holl-t 12200 t to		Aba		
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IN Facility			Staff?	55.0		surfacing, VA	T, or	SF or LF		a par	Dan	180
(13)			(12)			other miscellan	ecus)		15		BIG	9
		Yes	No	N/A						L		
BASEME	ر ا				THER	hal system	HODEL WALL	AOL	F_	4		
- Jia D. St.				-	111313							
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			-	-						T	1	T
Name of Registered Waste	- lauter	MI	DEPV	Vaste I	lautor	Cubic Yards of	Name of Regi	istered Landfill			_	
		ID	No.		radio1	Mesta						
Best Removal	THE	1	710	9		10/20		a Enterpi	TSES			2002.0
City, State	529 WELL WA	0=1	^-			Disposal Date	City, State	burg , Oh	1			
Hackensa	ick, N.J.	076	01			4/20/13	Waynes	Durg, Or	•			
							Control of the last of the las		1 But-			
Completed by J. Maiorano	Title Estim				to 1559	Signature	اصاتمه		Date 41	<	110	λ

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Name of Pecility Where Abstract States by Building Connect Street Address State Date (I) Street Address Street Addr	Date of Notification (1)	2					Owner/Operator	(2) 2012	0.0	ito te-				
DEP Commendation	The same of the sa	Fran NatiSantian					ALDEO	2 7075	980			-		-
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Amendment & December &		CONTROL CONTROL PRINTED AND ADDRESS OF THE PARTY OF THE P		-	321.572			> `		766				
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Name of Pacility Where Absterment to Taking Place (S) ### County Code (No. 12) ### Code (No	9 500	a cenceration									_	-		-
Street Address AT DUKES ST City (6) County (7) County (8) County (9) Cou					FACI	LITY INFO	ORMATION	2	10		-			- 3
Secretary Secr						*		type or racinty	(4)					
A1 DUKES Duke (Re. phrence & commercial buildings, hoteless, etc.) Square (Re. phrence) & of Floors Bidg. Age Square Foot Square F	MIL.	BALDEON			** **					N 42				
A DUKES State				*22	• •			Subchapter	6 (Other than K-12) wate & commercial	building	as.			
County (6) County (and (7) (STATE USE County (b) Co	1 A1 DUK	ES 57.	٠.											10
County (S)	City (5)												٠,	
Rame of Mantament Contractor (8) Rest Removal Inc	KEARN	170						2800	3	8.	5,	70	A	N
Name of Mantament Contractor (8) Rest Removal Inc	County (6)	,		T	County	Code (7)	(STATE USE							
Name of Mantament Contractor (8) Rest Removal Inc	HUDSO							ا درق	ಕ್ಷ ಬಿರ್ಬಂದ	••				
Street Address Street Address 450 S.River St City, State, Zip Code South Hackensack, N.J. 07601 City, State, Zip Code South Hackensack, N.J. 07606 City, State Location of Asbestos-Containing Material (ACM) Abstraction of Asbestos-Containing Material (ACM) Abstraction of Asbestos-Containing Material (ACM) City, State City, State City, State Hackensack, N.J. 07601 City, State Hackensack, N.J. 07601 City, State Hackensack, N.J. 07601 City, State		lame of Monitoring Firm Hired by Building Owner					Name of Abatem	ent Contractor (9)					
Street Address 450 S.River St City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Hackensack, N.J. 07601 Project Manager for Monitoring Firm Telephone No. 201-329-7444 00388 Start Date 100 A 17 13 Scheduled Completion Date (11) A 17 13 Name of OshiA Monitor Omega Environmental Inc Street Address 280 Huyler St City, State, Zip Code South Hackensack, N.J. 07606 State Code of Absterment (Check only one) Lip and Code of Absterment Performed Outside of Normal Facility Hours City State, Zip Code South Hackensack, N.J. 07606 Scope of Work (Check all Stat apply) Associate Containing Material (ACM) Code of Work (Check all Stat apply) Location of Absterment Custodial State Code of Absterment Custodial S	(8)	3)					Best R	emoval I	nc					
City, State, Zip Code City, State, Zip Code Hackensack, N.J. 07601	Street Address											-		
City, State, Zip Code City, State, Zip Code Hackensack, N.J. 07601		treet Address					450 S.	River St						
Hackensack, N.J. 07601 Project Manager for Monitoring Firm Telephone No. 201-329-7444 Name of Registered Waste Hauler Best Removal Inc Telephone No. 201-329-7444 Name of Registered Waste Hauler Best Removal Inc Telephone No. 201-329-7444 Name of Registered Waste Hauler Best Removal Inc Telephone No. 201-329-7444 Name of Registered Waste Hauler Best Removal Inc Telephone No. 201-329-7444 Name of Registered Waste Hauler Best Removal Inc Telephone No. 201-329-7444 Name of Registered Waste Hauler Best Removal Inc Telephone No. 201-329-7444 Name of Registered Waste Hauler Best Removal Inc Telephone No. 201-329-7444 Name of Registered Waste Hauler Best Removal Inc Telephone No. 201-329-7444 Name of Registered Waste Hauler Best Removal Inc Telephone No. 201-329-7444 Name of Registered Waste Hauler Best Removal Inc Telephone No. 201-329-7444 Name of Registered Waste Hauler Box N.J. 07601 Telephone No. 201-329-7444 Name of Registered Waste Hauler Box N.J. 07601 Telephone No. 201-329-7444 Name of Registered Waste Hauler Box N.J. 07601 Telephone No. 201-329-7444 Name of Registered Waste Hauler Box N.J. 07601 Telephone No. 201-329-7444 Name of Registered Waste Hauler Box N.J. 07601 Telephone No. 201-329-7444 Name of Registered Waste Hauler Box N.J. 07601 Telephone No. 201-329-7444 Name of Registered Waste Hauler Box N.J. 07601 Telephone No. 201-329-7444 Telephone No. 201-329-74 Telephone Complete No. 201-329-74 Telephone No. 201-329	City, State, Zip Code													-
Project Manager for Monitoring Firm		**							J. 07601					
Start Date (10) A / 17 / 13 Scheduled Completion Date (11) A / 18 / 3 Occupancy Status During Abatement (Check only one) D-Raciffly Closed/Vacated During Entire Period of Abatement D-Abatement Performed Outside of Normal Facility Hours Street Address 280 Huyler St City, State. Zip Code South Hackensack, N.J. 07606 Sope of Work (Chock all that apply) PS 3 of or ≥ 38 if D≥ 160 of or ≥ 280 if Separation Location of Abatement (ACM) Ababestos-Containing Mintervial (ACM) TO BE ABATED (13) IN Facility (13) Street Address 280 Huyler St City, State. Zip Code South Hackensack, N.J. 07606 South Hackensack, N.J. 07606 Description of Abatement with Negative Pressure PGlovebag Procedure D Non-Everpled (*) and Non-Friable Procedure Report of the rescaled AcMin State Procedure Custodial State City, State St	Project Manager for Mon	iliprina Firm	170	elephon	e No.						-		-	
Start Date (10) A / 13 / 3 Occupancy Status During Abatement (Check only one) Display Status During Enter Period of Abatement Display Status During Material Inc Display Status During Enter Period Of Abatement Display Status During Enter Period Of One Status During Duri			1.					7444 .	00388					
Occupancy Status During Abatement (Check only one) Discribing Abatement (Discribing	Start Date (10)	Scheduled C	omolet	ion Dat	n (11)			THE STATE OF						
Cocupanny Status During Abatement (Check only one)	1 1 1								tal Inc				*	
280 Huyler St 280 Huyler										******			_	
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Scope of Work (Check all that apply) 2							City, State, Zip C	ode						\neg
Scope of Work (Check all that apply) 2	2 Other - Describe: 7	AM TO SVM	many 110						k. N.J. C	760	6			
Astestos Containing Material (ACM) Security Cubic Yards of Waste Hauler Best Removal Inc NJDEP Waste Hauler Best Removal Inc NJDEP Waste Hauler Hackensack, N.J. 07601 Description Description Description Description Description Description of Asbestos Containing Material (ACM) Amount Type Description of Asbestos Containing Material (ACM) Specify SF or LF Description Description Surfacing, VAT. or other miscellaneous Other miscellaneous Description Descr	Scope of Work (Check a	Il that apply)						5,					_	\neg
D≥ 160 sf or ≥ 260 N Demofition Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Specify Spec	Characan			â	12/Dag	a office			Negative Pressure	•				
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Yes No N/A PASE ME N+ NUMBER Removal Inc NUMBER Removal Inc NUMBER Removal Inc NUMBER Removal Inc NUMBER Waste Hauler Hackensack, N.J. 07601 Location of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Abatement Type Removal (ACM) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) For LF) Removal Inc NUMBER Waste Hauler ID No. 17109 Disposal Date Abatement Type Removal (ACM) Amount (Specify SF or LF) Removal Inc NUMBER Waste Hauler United Signature Disposal Date Abatement Type Removal (ACM) Amount (Specify SF or LF) Removal Inc NUMBER Waste Hauler United Signature April 1/13 Date Date														
Location of Asbestos-Containing Matherial (ACM) Used Solely by Maintenance/ Custodial Staff Custodial Custod			,			,	☐ Non-	Exempted (*) an	d Non-Friable Proc	edure				-
Location of Asbestos-Containing Material (ACM) TO BE ASATED LIN Facility (13) Yes No N/A Name of Registered Waste Hauler Best Removal Inc Name of Registered Waste Hauler Hackensack, N.J. 07601 Location of Asbestos Containing Material (ACM) Maintenance/ Custodial Staff: (12) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) Region Registered Landill Waste Visate Waynesburg, Oh Completed by Title		0.50	ls	Locatio	on		940 25	7.7			A			N.
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Name of Registered Waste Hauler Best Removal Inc City, State Hackensack, N.J. 07601 Completed by NJDEP Waste Hauler Cubic Yards of Waste Waste Disposal Date A 19/13 City, State Waynesburg, Oh Completed by Date			Yes	No	-					=		+	-	\dashv
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Completed by Title Signsture Date							Disposal Date	City, State						
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J. Maiorano Estimator ((2)2000 14/5/13							Signature	,			_ 1			
	J. Maiorano	Estin	ato	r			k (1.	المصارحت	9	9/	5/	1;	3	

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Date of Notification (1)	1 -			Name	of Buildin	g Owner/Operator	(2) 2/1/2 a		+			
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Agency Notified	Type Notification			Street	Address		0	4F 10:	30			
CI EPA	.Car fnitial			100		1001	172	f ma	40			
DEP DOL	☐ Amended			City. S	tate, Zio	Code .	the I	MELLEY IN	+D2			
	Amendment #	lina		-16	EANE	ecr. NJ	. 0/60	6 Name	U <u>f.</u>			
E DOH · ·	justification)			200	of Contac			Telephone Num	iber		-	
D DCA	Cancellation			M:	s. 14	NARTOGE			2000000000			
				FACI	LITY INF	ORMATION						
Name of Facility Where					•		Type of Facility	1 (4)				
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Street Address					**	:		8 (Other than K-12 rivate & commercia				
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County (6)				County	Code (7	(STATE USE		rior if being demoli			1.5	
35266	5N		Ī	ONLY)		R	ESIDEN	É			
Name of Monitoring Firm	Hired by Building Own	ner	ASCI	A No.		Name of Abaten	The second secon					
(8)						Best R	emoval 1	nc				
Street Address						Street Address	•					
٠,				•		450 S.	River St	•				
City, State, Zip Code						City, State, Zip C	Code					_
						Hacken	sack, N.	J. 07601				
Project Manager for Mon	atoring Firm	To	elepho	ne No.	٠,	Telephone No.		License No.				
						201-329-	7444 .	00388				
Start Date (10)	Scheduled C					Name of OSHA						
4/18/13) 4	F/19	3/1	3		Omega En	vironmer	ital inc				
Occupancy Status During	g Abatement (Check or	aly one)	,			Street Address	1 0+					
☐ Facility Closed/Vacate				t	196	280 Huy						
Abatement Performed Other – Describe:	Outside of Normal Fac	ality Ho	urs			City, State, Zip C			7.00			
Scope of Work (Check a		<u> </u>		•	٠ ٠	South H	ackensac	k, N.J. (7/600			
	e trat apply)			_		-ETFull (Containment with	Negative Pressure	•			
D≥3 sfor≥3 lf D≥160 sfor≥260 lf				₽ Ren	ovation		Enclosure	_				
GE 100 SI 01 2 200 II				e Dek	TURBUCH		ebag Procedure Exempted (*) an	d Non-Friable Proc	edure			
	*	ls	Local	tion						Abat		nt
Locatio		. 1	Norma	lly					-	 _	/pe	
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Name of Registered Was	te Hauler			Naste H	lauler	Cubic Yards of	Name of Regi	stered Landfill				
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City, State		1-	110		<u></u>	Disposal Date	City, State				_	-
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Completed by	Title			-		Signature	1		Date /	,	-500	
J. Maiorano	Estin	ato	r			T. N	سممصن	ا ه	41	5/1	13	
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

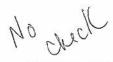
(Pursuant to NJAC 8:60 and 5:16) MO#20613914594

United Natification (1)			Na	me of I	Building O	wner/Operator (2)						
ate of Notification (1)	05 / 13		D	aala A	aula		2013 100					
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gencies Notified	Type Notification		1			Street	€	10. 46	r.			
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DR33	Emergency (inclu	uding			ity, NJ 07	7302		Telephone Numb	er	-		
(NJAC 5:23-8)	justification)			100 FC (100 C) FC (100 C)	Contact		1					- 1
	Cancellation		R	usela A					<u> </u>			\neg
				FACI	LITY INF	ORMATION	T 5 F - allibur /	1)			-	-
Name of Facility Where	Abatement is Taking I	Place (3))			+0	Type of Facility (4					
Private house							School (K-12) Subchapter 8	(Other than K-1 2)				- 9
Street Address							Other (i.e., pr	vate and commer	cial build	ings,		
316 Montgomery Str	eet						homes, etc.)	Turni Florin	Dida	. Age		
City (5)							Square Feet	# of Floors	Diag	. Age	le:	
ersey City, NJ 0730	2								t = d)			
County (6)				County	Code (7) (S	TATE USE ONLY)	Current Use (Pri	or if being demolis	snea)	(2)		
										100		
Hudson Name of Monitoring Fi	rm Hired by Building O	wner (8)	A	SCM N	0.	Name of Abateme	ent Contractor (9)					
110.110 01 11.11					(Gr Tech LLC						
Street Address						Street Address		2012 - 1721 - 1747 H - 175 - 1767 E-7				
Stieet Address						576 Valley Rd	#283				-	
City, State, Zip Code		-	64.111.7			City, State, Zip C						
City, State, Zip Code					,	Wayne, NJ 074	70					
Project Manager for M	onitoring Firm		Teler	hone N		Telephone No.		License No.				
Project Manager for W	dilitoring i iiii		,			973-638-1777		01127				
	School	uled Co	molet	on Date		Name of OSHA	Monitor			20-11119992		
Start Date (10)	/ 13 O											
				'_=		Envirovision Construction Street Address	onsultants, inc			-		
Occupancy Status Du	ring Abatement (Check	only on	ie)				n 1 DII- #	244				
Facility Closed/Vac	cated During Entire Per	riod of A	Dater	nent : - Desc	rihe	City, State, Zip (v Road, Bldg .#	34A		-	200	
☐ Abatement Perform	ned Outside of Normal t:PI	M/	PM_	s - Desc	3.8.6	DESCRIPTION OF THE PROPERTY OF						
						Fair Lawn, NJ	07410 up and decontamii	nation				
Scope of Work (Check	(all that apply)					H Full Co	ntainment with Ne	gative Pressure				
		X Ren	ovatio	on		Mini-Er	nclosure					
2 160 sf or 2260 lf		Den	nolitic	n		Gloveb	ag Procedure cempted (*) and No	on-Eriable Proced	ure			
						☐ Non-EX	tempted () and 14	T Tiable 1 10004		tem	ent Ty	vne
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Loca	tion of		d Sole		Ache	Description stos Containing M		Amount	₽	Rep	Enc	Enclosure
	ing Material (ACM) ABATED		ntena			., thermal system	s insulation,	(Specify	Remova	Repair	aps	losu
	acility	Custo		Staff?		surfacing, VA		SIF or LF)	<u>a</u>		Encapsulate	ē
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Name of Registered	Waste Hauler		NJ	DEP Wast	e Hauler ID No	Cubic Yards of W	aste Name of Reg	istered Landfill				
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Gr Tech LLC City, State				30337		Disposal Date	City, State		1975			
1						TBD	Tullytown,	PA				
Wayne, NJ 07470	\ T=	lo.				Signature			Date			
Completed By (Print	or Type) Tit	ie					' / /	, ,	04/05/2	013		
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ASB-41		-			925 Y28	eras licensure exe	d mathrition					

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MO#20613914605]	NO	TIFIC (i	ursu	ON OF AS	AC 8:60 and	BATEMENT 5:16)	11	Emerger	юу	Not	ifice	tion
Date of Notification (1)				Nar	ne of Buildin	ng/Owner/Opera	(2) AM (1):			,	_		
04/05	(3		Dav	id Kleiner		2. Hi II):	i l	APPERON	e'm			
	on Notification	n			el Address		(F) /2 ()	NJ Dept of H	Calli &	seni	hr's	Armio	100
676	Initial			68 F	ulton Stre	et & H	FREELIN	1-60			<u></u>	OI VH,	es
	Amended Amendment	#		City	State, Zip	Code	- 12-11-1Q	1	(signature				
□ DCA 🔯	Emergency (lno	Wee	hawken, 1	NJ 07086		Date: 4/5	1/2-11	me:	!	1 . 6	34
(NJAC 5;23-8)	justification)			Nan	ne of Conte	ot		Telephon	e Numbe		_		=1
	Cancellation			Dav	id Kleiner								
				F	ACILITY I	NFORMATIO	4			-		_	
Name of Facility Where Abete	ment is Taki	ng Pla	ca (3)		-		Type of Fac	ility (4)				-	·-
Private house							School (K-12)					
Street Address		- 1					Subchar	ter 8 (Other than	K-12)				
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Weehawken, NJ 07086		12 12 12 12 12 12 12 12 12 12 12 12 12 1								-	-di-	-Re	
County (6)				Cot	mly Code (7)	(STATE USE ON	LY) Current Use	(Prior if being d	emolishe	d)			-
Hudson	and the second								-,,,,,,,,,	-1			
Name of Monitoring Firm Hired	g by Bullding	Owne	r (8)	ASC	A No.	Name of Aba	tement Contractor	r (9)		-		_	
Street Address		ĝ.				Gr Tech LL	3						
pusel Vodiesz						Street Addres	9			••••	_		
City, State, Zip Code		~				576 Valley P	d #283						
ony, orace, city code						City, State, Zi	p Coda	"-				-	
Project Manager for Monitoring	Celan				···	Wayne, NJ 0							
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TO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					ate (11)	Name of OSH	A Monitor	01127	_				_
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04 / 06 / 13 Occupancy Status During Abat Facility Closed/Vacated Dur Abatement Performed Outsi Time of Abatement: Scope of Work (Check all that a 3 sf or >3 if 1 150 sf or >250 if Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)	coment (Checking Entire Period of Normal AMPapply)	O4 ck only eriod of Pacific M/ Record D Use Me Cus	one) f Abate fly Hou f	lon on tion tilly staff?	13 scribe AM Asbes (i.e.	Name of OSH Envirovision Street Address 20-21 Wagar City, State, Zit Fair Lawn, N Clean Full C Mint-l Glove Non-s Description stor Containing thermal system surfacing, V other miscelle	A Monitor Consultants, Ind W Road, Bldg Code 107410 To up and decontainment with inclosure bag Procedure Exempted (*) and In off Material (ACM) To insulation, At. or	#34A mination Negetive Pressu Non-Frieble Pro Amount (Specify SIF or LF	cedure		_		-
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O4 / 06 / 13 Occupancy Status During Abat Facility Closed/Vacated Dur Abatement Performed Outsi Time of Abatement: Scope of Work (Check all that a 3 3 sf or >3 lf > 160 sf or >250 lf Asbostos-Containing Materia TO BE ABATED IN Facility (13) Insertion of Registered Waste Hauf Tech LLC	coment (Checking Entire Period of Normal AMPapply)	04 ck only yeriod o o o o o o o o o o o o o o o o o o	one) f Abate fly Hou PM enovate emolific s Loca Norma ed Solial (12) No	ement rs - De lon on tion elly ence/ Staff?	Asbes (I.e.	Name of OSH Envirovision Street Address 20-21 Wagan City, State, Zip Fair Lawn, N Fair Lawn, N Description Surfacing, V other miscelle lation	A Monitor Consultants, Inc. Tw Road, Bldg Code 1 07410 The order of the containment with inclusure bag Procedure exempted (*) and the containment with inclusure bag Procedure exempted (*) and the containment with inclusure of the containment with inclusure of the containment with inclusure of the containment with inclusion of the containment	#34A mination Negetive Pressul Non-Frieble Pro Amount (Specify SIF or LF	cedure		_		-
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O4 / 06 / 13 Decupancy Status During Abat Facility Closed/Vacated Dur Abatement Performed Outsi Time of Abatement: Scope of Work (Check all that a 3 sf or >3 if 2 160 sf or >260 if Location of Asbestes-Containing Materia TO BE ABATED IN Facility (13) Inserting Materia To BE ABATED IN Facility (13) IN Facility (13) IN Facility (13) Inserting Materia To BE ABATED In Facility (13) In Facility (13)	coment (Checking Entire Period of Normal AMPapply)	04 ck only yeriod o o o o o o o o o o o o o o o o o o	one) f Abate fly Hou PM enovate emolific s Loca Norma ed Solial (12) No	ement rs - De lon on tion elly ence/ Staff?	Asbes (I.e.	Name of OSH Envirovision Street Address 20-21 Wagar City, State, Zig Fair Lawn, N Clean Glove Non-E Description Surfacing, V other miscelle lation Cubic Yerds of W TBD Disposal Data	A Monitor Consultants, Inc. Two Road, Bldg Code 1 07410 The procedure standard (ACM) and insulation, Ar, or neous) T.R.R.F. Inc. City, State	# 34A mination Negetive Pressu Non-Frieble Pro Amount (Specify SIF or LE	cedure		_		-
O4 / 06 / 13 Occupancy Status During Abat Facility Closed/Vacated Dur Abatement Performed Outsi Time of Abatement: Scope of Work (Check all that a 3 sf or >3 if 1 160 sf or >260 if Location of Asbestes-Containing Materia TO BE ABATED IN Facility (13) Assement Tech LLC ity, State ayne, NJ 07470	coment (Checoring Entire Periode of Normal AMP apply) al (ACM)	04 ck only eriod o o le Facilitation (Customer Customer	one) f Abate fly Hou PM enovate emolific s Loca Norma ed Solial (12) No	ement rs - De lon on tion elly ence/ Staff?	Asbes (I.e.	Name of OSH Envirovision Street Address 20-21 Wagar City, State, Zig Fair Lawn, N Clean Color Full C Mint- Solid State Containing thermal system surfacing, V other miscelle lation Cubic Yerds of W TBD Disposal Data TBD	A Monitor Consultants, Inc. Two Road, Bldg Code 1 07410 The procedure standard (ACM) and insulation, Ar, or neous) T.R.R.F. Inc. City, State Tullytown,	# 34A mination Negetive Pressu Non-Frieble Pro Amount (Specify SIF or LE	cedura		_		-
O4 / 06 / 13 Occupancy Status During Abat Facility Closed/Vacated Dur Abatement Performed Outsi Time of Abatement: Scope of Work (Check all that a 3 sf or >3 lf 2 160 sf or >260 lf Asbestos-Containing Materia TO BE ABATED IN Facility (13) assement Tech LLC ity, State ayne, NJ 07470 completed by (Print or Type)	toment (Checking Entire Pelide of Normal AMPapply) al (ACM)	04 ok only yeriod o oli Pacific MM Recuss Vasific Cus Yes	one) f Abate fly Hou PM enovate emolific s Loca Norma ed Solial (12) No	ement rs - De lon on tion elly ence/ Staff?	Asbes (I.e.	Name of OSH Envirovision Street Address 20-21 Wagan City, State, Zit Fair Lawn, N Description Street Address City State, Zit Fair Lawn, N Description Clean Surfacing, V Other miscellie Cubic Yerds of W TBD Disposal Date TBD Signature	A Monitor Consultants, India aw Road, Bldg Code 1 07410 To up and decontainment with inclosure bag Procedure Exempted (*) and the standard (ACM) as insulation, AT, or neous) astel Name of Regions, State T.R.R.F. India City, State Tullytown,	# 34A mination Negetive Pressu Non-Frieble Pro Amount (Specify SIF or LE	cedure		_		-
04 / 06 / 13 Occupancy Status During Abat Facility Closed/Vacated Dur Abatement Performed Outsi Time of Abatement: Scope of Work (Check all that a 3 sf or >3 if 2 160 sf or >260 if Location of Asbostos-Containing Materia TO BE ABATED IN Facility	coment (Checoring Entire Periode of Normal AMP apply) al (ACM)	04 ok only yeriod o oli Pacific MM Recuss Vasific Cus Yes	one) f Abate fly Hou PM enovate emolific s Loca Norma ed Solial (12) No	ement rs - De lon on tion elly ence/ Staff?	Asbes (I.e.	Name of OSH Envirovision Street Address 20-21 Wagan City, State, Zit Fair Lawn, N Description Street Address City State, Zit Fair Lawn, N Description Clean Surfacing, V Other miscellie Cubic Yerds of W TBD Disposal Date TBD Signature	A Monitor Consultants, Inc. Two Road, Bldg Code 1 07410 The procedure standard (ACM) and insulation, Ar, or neous) T.R.R.F. Inc. City, State Tullytown,	# 34A mination Negetive Pressu Non-Frieble Pro Amount (Specify SIF or LE	cedura		Repair		-

BAY 11



Check No. N/A - PA NY & NJ

, Ob		(P	ursua	ant to	NJAC	8:60 and 12-1	20)	*					
Date of Notification (1)			- 1	Name o	f Buildin	g Owner/Operator	(2)		1				
April 04, 2013				Pa of	NY &	NJ		2013 APR -9		-			
	ype Notification			Street A	Address			11 R - 9	٥.				8
10 A	A faction			51 Po	rt Terr	ninal Bouleva	rd 🤞		AH IO		/3		
	Initial Amended			City, Sta	ate, Zip (Code		* 12-47 /7 m		3, (
⊠ DOL	Amendment #			Bayo	nne, N	J 07002-5014		& LICERS	WY L	711			
I ☑ DOH	Emergency (includir iustification)	ng		Name o	of Contac	t		Telephone Num	ber,	41.			
	Cancellation			Ken V	Voodr	uff							
				FACIL	ITY INF	ORMATION					Nelto-		5000.0
Name of Facility Where Aba	tement is Taking Pla	ce (3)					Type of Facility	(4)					_
Kinder-Morgen Build		. ,					☐ School (K-12)						
Street Address	9						☐ Subchapter 8	(Other than K-1 2	?)				
188 Calcutta Street						75 BS		vate & commercia	al building	gs,			
							homes, etc.) Square Feet	# of Floors	Bldg.	Age			
City (5)	44 2204						3500	2	40 +				
Port Newark, NJ 071	14-5504		- 1	County	Code (7) (STATE USE		or if being demol					
County (6)				ONLY)	0000 (7	, (STATE OOL	Education	ior ii boing domen	/				
Essex Name of Monitoring Firm H	rod by Building Owns	r	ASCM	No		Name of Abatem	ent Contractor (9)		-	70		
McCabe Environmenta		.	0011				toration Co.,						
	i Services, L.L.C.		0011	0		Street Address	toration co.,	mo.	- 18.05		-	-	_
Street Address	00110					223 Randolp	h Avenue	0.					
464 Valley Brook Av	enue	_				City, State, Zip C							_
City, State, Zip Code	1009					Clifton, NJ 0							
Lyndhurst, NJ 07071 Project Manager for Monito		T	elephon	e No		Telephone No.	7011	License No.				90119	-
Ellen McCabe	nig i iiii	1	201-43		q	973-478-468	1	00120					
Start Date (10)	Scheduled Co					Name of OSHA		00.120				_	200
April 22, 2013	May 31, 20	and Lu		,				Services, L.L.	C.				
Occupancy Status During A)			Street Address							
N 157 S						464 Valley B	rook Avenue						
☑ Facility Closed/Vacated I ☐ Abatement Performed Or	During Entire Period of Itside of Normal Facil	of Aba	tement			City, State, Zip C							
Other - Describe:	isiae of Norman aon	,				Lyndhurst, I	NJ 07071-199	8					
Scope of Work (Check all th	nat apply)												
				⊠ Reno	ovation		Containment with Enclosure	Negative Pressur	re				
				☐ Dem		☐ Glove	ebag Procedure	IN Faiable Dec					
						⊠ Non-	Exempted (*) and	Non-Friable Pro	cedure	A	bate	eme	nt
			S Locati	8.0000								ре	
Location			Normall ed Solel			Description							
Asbestos-Containing	100 m		aintenai	100000000000000000000000000000000000000		stos Containing Ma ., thermal systems		Amount (Specify		Z,	71	inc:	Enclosure
TO BE ABA		,	Custodi Staff?		(1.0	surfacing, VAT		SF or LF)		Removal	Repair	aps	clos
(13)			(12)		ro.	other miscellane	eous)			val	air	Encapsulate	ure
		4.55	T	Г			1						
GC Bathroom		Yes	No	N/A	Cerar	nic Tile Mastic	& wall mastic	4	8 sq ft	X			
Locker Room	-			\Diamond	VAT	mo mo maono			4 sq ft	*			
			1	\Diamond	VAT				5 sq ft	-			
Storage Room 1 & 2				\Diamond	15 15 17 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	w & AC Caulking	& 1 louver	145 LF &		5	1		Г
Outside Work Name of Registered Waste	Hauler	N	JDEP W	Vaste H		Cubic Yards of	Name of Regis		. 00011	<u>/ \</u>	4		Щ.
B&N&K Restoration		ID	No.			Waste	9009						
Jimmy Byrne Trucki		1	2695	/ 5007	1	20	1 ,	nterprises, In	c.				
City, State			- 100 - 100 / 100	- (15.00)		Disposal Date	City, State						
Clifton, NJ 07011 / B	ronx, NY					5/3/13 //	Waynesbu	rg, PA					
Completed by	Title					Signature	111		Date	and and	-0.04		
Aleksandar Kuridza	Vice-Pres	iden	t			you			4/4/2	013	3		

Check No. 21159

			(i ui			0.00 and 12-		to pro-					
Date of Notification (1)				4000		ling Owner/Operator	2000			2	*		
April 04, 2013			2	1	Newark B	oard of Educati	ion	2010 .			177		
Agency Notified	Type Notification				Street Addres	5		2013 APR _	0 .				
⊠ EPA □	☑ Initial			1	2 Cedar S	treet	72.452.45	4	J AM	1/12	de .		
	☐ Amended			C	City, State, Zi	p Code		17.57h			+16	1	
⊠ DOL	Amendment # I Emergency (include)	ding		l	Newark, N	J 07112		& LINE	.40%	En			
⊠ DOH	justification)	ung		N	Name of Con	act		Telephone Nú	mber	. + 1	11		
I DCA □	☐ Cancellation			1	Terry Dunn	Egan, NJSDA P	rogram Officer	.'					
		75-50-0002			FACILITY IN	IFORMATION							
Name of Facility Where Ab	atement is Taking P	lace ((3)				Type of Facility	(4)					
Hawkins Street Elen	20.000 to 1.200 ments 10.000 me							35 B					
Street Address		<u> </u>			***************************************	-	School (K-12	2) B (Other than K-1	2)				
8 Hawkins Street							Other (i.e. pr	rivate & commerci	al buildir	ngs,			
							homes, etc.)	The state of the s					
City (5)						the second	Square Feet	# of Floors	Bldg		9		
Newark, NJ 07105							37,000	3	60	+/-			
County (6)					County Code (NLY)	(7) (STATE USE	Current Use (P	rlor if being demo	lished)				
Essex					INL 1)		Education						
Name of Monitoring Firm H	25 TO 1		ASC	M N	lo.	Name of Abatem	nent Contractor (9	9)					
Brinkerhoff Environ	mental Services	S	00	100	1	B&N&K Res	toration Co.,	Inc.					
Street Address						Street Address							-
1805 Atlantic Avenu	е					223 Randol	oh Avenue						
City, State, Zip Code			+10		10 10 10 10 10 10 10 10 10 10 10 10 10 1	City, State, Zip C					X-12		_
Manasquan, NJ 0873	36					Clifton, NJ 0	7011						
Project Manager for Monitor	ring Firm		Teleph	none	No.	Telephone No.		License No.	17			2000	- 2214
Jason P. Hooper			732-	223	3-2225	973-478-468	1	00120					
Start Date (10)	Scheduled C	Comp	letion [Date	(11)	Name of OSHA	Monitor	1		-			-
June 28, 2013	August 1	5, 2	013			McCabe Env	vironmental S	Services, L.L.	C.				
Occupancy Status During A	batement (Check or	nly or	ie)			Street Address						-	-
M Facility Classed Masseted 5						464 Valley B	Brook Avenue	•					
☐ Facility Closed/Vacated I ☐ Abatement Performed Output ☐ Abatement Performed Out				nt		City, State, Zip C				-			
☐ Other - Describe:			487 8				NJ 07071-199	8					
Scope of Work (Check all th	at apply)		F1-1651110										_
≥ 3 sf or ≥ 3 lf				×	Renovation		Containment with Enclosure	Negative Pressur	e				
≥ 160 sf or ≥ 260 lf				1000	Demolition	☐ Glove	ebag Procedure						
		_				☐ Non-	Exempted (*) and	Non-Friable Pro	edure				
			Is Loc	ation	1 -					Α	bate Ty		nt
Location o	of	111	Norm sed Sc			Description of	of				ı y	pe	\Box
Asbestos-Containing N			/lainter		e/ Asb	estos Containing Ma	aterial (ACM)	Amount				щ	m
TO BE ABAT IN Facility			Custo		(i.	e., thermal systems surfacing, VAT		(Specify SF or LF)		Ren	Re	cap	ncl
(13)			Staf (12			other miscellane	ous)	SF OF LF)		Removal	Repair	Encapsulate	Enclosure
		-	1	, 						a	7	ate	e
		Yes	No.		N/A								
Boiler Room		X			The	rmal Systems I	nsulation		415 LF				
	-1 11			\perp	Boil	er & Breaching	Insulation	7	700 SF	X			
					Trans	ite Panels & Internal E	Boiler Materials		112 LF	X			
Coal Room		X			The	mal Systems I	nsulation		165 LF	-			
Name of Registered Waste		1000		Was	ste Hauler	Cubic Yards of	Name of Regist		The state of the s	Y 1			
B&N&K Restoration		111111111111111111111111111111111111111	D No.	- / -	0074	Waste	8/1:						
Jimmy Byrne Truckir	ng		1209	0/5	50071	40		terprises, Inc	1.				
City, State						Disposal Date	City, State	и					
Clifton, NJ 07011 / Br						08/15/13	/Waynesbur	g, PA					
Completed by	Title		8			Signature			Date				
Aleksandar Kuridza	Vice-Pres	ide	nt			Inn			4/4/20	13			

						Apr	5 2013	03:14pm		PO	01/0	01
Check # 1471	N	OTIFICAT	State of R HON OF AS	lew Jersey 1962/105 / C 8:60 and	BERATE .	SENT	/N.	Dept of	Almoy Health	ROWE & Se	nior s	Print Fo Services
Date of Notification (1) 04/05/2013	**SOMETHING	Nan	te of Buildin	onerio	perator	(2)	- Land		In Sittle	ura)	-	-
Agencies Notifical	ion	50e	et Address 11 UNION	I I ANDIA	ic bo	(2) P APR -9	AHIO	: 36	-	Time	2	15
EPA Initial Amende Amende Amende Emerger	ent #	City.	State, Zlp (Code ON NJ 0	200		301111 201111	:0 <u>;</u>	-			
DON justificati	ch) tion	FRE	e of Contac ED RODI				Te	lephone N	umber	•		
Name of Facility Where Abutement is To DEPATMENT OF PUBLIC WOR	iking Place (3) KS	F/	ACILITY IN	FORMATIC		Type of Facility School (···		-		一
Street Address 1601 UNION LANDING ROAD			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Subschen	Mar & roth	er than K- Licummen	(2) Sal bui	Mings	, han	es,
CINNAMINSON				**************************************		Square Feet 8000	第0	Floors	- 1	Bldg, /	\go	
COUNTY (6) BURLINGTON	THE RESIDENCE AND A	Coun (STAT	ily Code (7) TE USE ONL	ע ע		Current Use (I DEPT, OF	Prior If bei	ng demolis	shed) S			\dashv
Name of Monitoring Firm Hired by Bulldh CONNELL GREENE	ng Owner (8)	AS	CM No.		Name o	Abalement C	ontractor RONME	(9) NTAL S	ERVI	ĆES	INC	
STREET ADDRESS 904 KINGS ARMS DRIVE					Street A							
City, State, Zip Code DOWNINGTOWN PA 19335					City, St.	ite, Zip Code ICA HILL N	J 08062	?			THE ST.	\neg
Project Manager for Monitoring Firm RICK PELLISSIER		Telep 484	hone No. 432-9363		Telepho			License P 01145	la,		-	\neg
Start Date (10) 04/10/2013	Scheduled 04/12/20	Completic	n Date (11)		Name of	OSHA Monin)F					-
Occupancy Status During Abatement (CI	0.50		***************************************	- 1	Street A		TU			-		
Facility Closed/Vacated During Entit Abatement Performed Outside of No Other - Describe: NON FRIABLE M	ormal Facility I	lours:	S	7	City, Sta	ic, Zip Code		7				\dashv
Scope of Work (Check All That Apply)						4414						\dashv
23 sf or ≥3 ff ≥ ≥160 sf or ≥260 ff		novation malition				Full Contain Mini-Enclose Glovebag Pr Non-Exempt	me poedure					-
		ocetion	1		-	5 - 10 1 F - 10 - 10 - 10 - 10 - 10 - 10	T	PAGE A TEST	1	Abate		\neg
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Maint Custor	mally Solely by tenance/ fiol Staff? (12)	Ashes (i.g.	Descrisios Contain thermal sy surfacin other mis	jstems i 19, VAT,	terial (ACM) nsulation, or		nount pacify or LF)	Remava	Rapúz	Ensupsulate	eureopus
VVIII AND	Yes	No N/A							Val	Ą	aliste	en.
LOCKER ROOM		X	-	FLOO	RTIL	E	23	8 \$F	X			
		1										
Name of Registered Waste Hauler ASSURED ENVIRONMENTAL SE	RVICES	NJDEP Mauler I	D No.	Cubic Ya				ed Candill TE IMPE			IDEI	
City, State AULLICA HILL NJ		003489	23	8 Disposal 04/13/2	Date	City, St.	124		a spruL	. e-7117	-1.51"	t-a-lb-a
Completed by RON SWANSON	Title PROJE	CT COC	PRDINAT	/ Sign	orija Palura	10h.	CAA VA	Da	te 1/05/2	013	•	-
ASB-41 (R-18-08)	T www.				Do not u	ese this form th	wayay W w osbesto	(e civit	les.

Check # 1471

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

Date of Notification (1) 04/05/2013					of Building Own					4.5%	A	7 3	>	
Agencies Notified	Type Notification	i		Street A	Address UNION LAN						40,0	۲,,		(); (3)
DEP DOL	Initial Amended Amendmen			City, St	ate, Zip Code AMINSON N							76	i.	- 19 ₀
DOH DCA	Emergency justification Cancellatio)			of Contact O RODI				Те	lephone N	umber			
N				FAC	ILITY INFORM	ATION			_					
Name of Facility Where DEPATMENT OF F)				Type	e of Facility (4 School (K-12	2)					
Street Address 1601 UNION LAND	DING ROAD						X	Subchapter 8 Other (i.e. pr etc.)	3 (Oth ivate	er than K- & commer	12) cial bu	ildings	, hom	es,
City (5) CINNAMINSON						-	Squ 800	are Feet 0	# 0	f Floors		Bldg 30+	Age	
County (6) BURLINGTON		000000			Code (7) USE ONLY)			ent Use (Prior PT. OF PU						
Name of Monitoring Firm CONNELL GREEN		Owner (8)		ASCI	M No.			atement Control D ENVIRO			ERV	ICES	INC	
Street Address 904 KINGS ARMS	DRIVE			- L		Street 570		ess MS RUN			7			
City, State, Zip Code DOWNINGTOWN F	PA 19335							Zip Code NHILL NJ 0	8062	2				
Project Manager for Mon RICK PELLISSIER	nitoring Firm		T	Telepho	one No. 32-9363	Telepi 610-	hone N			License I	No.			
Start Date (10) 04/10/2013		Schedule 04/12/2		npletion	Date (11)	Name		HA Monitor						
Occupancy Status During	a Abatement (Che					Street		ece	-					-
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire	Period of A	bater Hour	s		200 City, S	RT 1: State, 2	30 NORTH Zip Code		NO.				
Scope of Work (Check A		nob nex	1 1011 10	37111120		CINI	MAM	NSON NJ	0807	7				
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Location	of	N	ormal	ly		Description	of						ре	
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		Yes	No	N/A									6	"
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City, State MULLICA HILL NJ						osal Date 18/2013		City, State	L PA	١ .				\dashv
Completed by RON SWANSON		Title PROJ	ECT	COOF	RDINATOR	Signature	OK	Lyxus	DIN		ate 4/05/2	2013		
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/*Do not use this form for asbestos licensure exempted activities.

C/ 201674547919

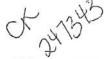
Date of Notification (1) 4/02/13			T		Building Owne	r/Operator	r (2)		(9/3)	PP.	^		€0 1/ 10
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Agencies Notified EPA	Type Notification Initial			Street A 59 Abb	^{ddress} ootsford Ave				~ (4/3)	17.5		41 H	1: 34
EPA DEP DOL	Amended Amendment		_		te, Zip Code k, NJ 07106		8		'\ ,	C.A.	6/4	G A	0),
DOH DCA	Emergency justification) Cancellation	370			Contact rd Reed			Tel	ephone Nur				
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Name of Facility Where house	Abatement is Takir	g Place (3)					Type of Facility (
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City (5) Newark							etc.) Square Feet N/A	# o	f Floors	10000	ildg. A	ge	
County (6) Be(Ger	***			County (Code (7) USE ONLY)		Current Use (Pri	or if be	ing demolisi	ned)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	l No.		of Abatement Cor Abatement, Ir		(9)				
Street Address	reet Address						Address		77				
City State 7in Code						11 F	Rosengren Ave	nue					
	ity, State, Zip Code roject Manager for Monitoring Firm					Toto	wa, NJ 07512		53			is National	
Project Manager for Mor	nitoring Firm			Telepho	ne No.	7.000	hone No. -345-8685		#00675	lo.			
Start Date (10) 4/24/13		Scheduled 4/25/13	Con	npletion I	Date (11)	160 A THE STREET	of OSHA Monitor Abatement, Ir	ıc.					
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X Other – Describe:	Occupied	nair admity r	- Iours				owa, NJ 07512		- 2			**	
Scope of Work (Check A ≥3 sf or ≥3 lf	III That Apply)	Пъ	nova	tion		Г	Full Containm		. Nonativa I				
≥160 sf or ≥260 lf		Professional Contract	molit				Mini-Enclosure Glovebag Pro	e cedure					
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D&S Abatement, Inc). 			auler ID 20996	No. of V	Vaste O			gement o	f PA			
City, State Totowa, NJ			•		Dis _i TBI	oosal Date	City, Stat		4				
Completed by		Title				Signatur	e		1 0 7 5	ite			\dashv
Deanna ดี เห็นรับกัก	1	Project	Ma	anager		Signatur	Mua Killy	lle	4/	02/1	3		

Cr 5/558 2403

Date of Notification (1) 4/02/13 Agencies Notified Type Notification Street Address 465 Fairfield Ave City, State, Zip Code Ridgewood, NJ 07450 Name of Contact Libby Stern FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) house Street Address 465 Fairfield Ave City, State, Zip Code Ridgewood, NJ 07450 Name of Contact Libby Stern FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) N/A County (6) Essex County Code (7) (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) N/A N/A Street Address Street Address Street Address Street Address
DEP Amended Amendment # Emergency (including justification) Cancellation Cancellation Telephone Number
Name of Facility Where Abatement is Taking Place (3) house Street Address 465 Fairfield Ave City (5) Ridgewood County (6) Essex Name of Monitoring Firm Hired by Building Owner (8) N/A Name of Monitoring Firm Hired by Building Owner (8) N/A Name of Abatement, Inc.
Name of Facility Where Abatement is Taking Place (3) house Street Address 465 Fairfield Ave City (5) Ridgewood County (6) Essex N/A N/A County (6) Essex N/A N/A FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, home etc.) Square Feet N/A N/A County Code (7) (STATE USE ONLY) N/A Name of Monitoring Firm Hired by Building Owner (8) N/A Name of Abatement Contractor (9) D&S Abatement, Inc.
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Essex (STATE USE ONLY) — house Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) N/A D&S Abatement, Inc.
N/A D&S Abatement, Inc.
Oli Oct / Mail Oct
11 Rosengren Avenue
City, State, Zip Code City, State, Zip Code Totowa, NJ 07512
Project Manager for Monitoring Firm Telephone No. Telephone No. 973-345-8685 License No. #00675
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor D&S Abatement, Inc.
Occupancy Status During Abatement (Check Only One) Street Address
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Occupied Abatement Performed Outside of Normal Facility Hours Other – Describe: Occupied Totowa, NJ 07512
Scope of Work (Check All That Apply) Totowa, NJ 07512
≥3 sf or ≥3 lf
Abateme
Is Location Normally Description of
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used Solely by Maintenance/ Custodial Staff? (12) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF)
Yes No N/A
basement & crawl space x pipe insulation 78 LF X
Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Weste Management of PA
D&S Abatement, Inc. #20996 TBD Waste Management of PA
City, State Totowa, NJ Disposal Date TBD City, State Tullytown, PA
Completed by Deanna Brkusanin Title Project Manager Signature 4/02/13

ct 35339

Date of Notification (1) 4/02/13			T		of Building			(2)	2	7/3 1	n -			de,		
	I T N. 115		1		cca & So	cott Sh	ultz			14/	77-0)				
Agencies Notified EPA	Type Notification			Street A	Address urrell Av	'e			κ		m -5	AP	10:	30		
× EPA × DEP × DOL	Amended Amendmen	t #	Ī		ate, Zip Co Orange		7079		V.	E L/		iv,	File	1.67		
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Essex					USE ONLY)		hou		OI II DE	ang de	nousn	eu)			
Name of Monitoring Firm N/A	n Hired by Building	Owner (8)	-	ASC	M No.				atement Cor		r (9)	-com unit	torio -			
Street Address		- 201					Street		tement, In	IC.						
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City, State, Zip Code									Zip Code NJ 07512							
Project Manager for Mor	nitoring Firm		T	Telepho	ne No.		Teleph 973-				Lices #00	nse No 675).			
Start Date (10) 4/25/13		Scheduled 4/26/13	Con	npletion	Date (11)		SAN DESCRIPTION		HA Monitor tement, In							
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≥160 sf or ≥260 lf		Designation of the last of the	nolit				×	Mi	ni-Enclosure	•		uver	Coou			
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Completed by		Title		500000000000000000000000000000000000000		S	ignáture		2 1	1		Date				\dashv
Deanna Brkusanin		Project	Ma	nager			1/1	XIII	o h lle	w	_	4/0	2/13			



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Name of Facility Where House	Abatement is Takir	ng Place (3)						Тур	e of Facility (4))			AE-CONE		
Street Address									School (K-12 Subchapter 8		or than V	12)			
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City (5) Harrison			-					Squ	etc.) are Feet	1000000	f Floors		Bldg.	Age	
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Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN	/I No.				atement Contr tement, Inc		(9)				
Street Address				30 Sec. 10			Street	Addre	ess				A		
City, State, Zip Code									ngren Avenu Zip Code	ne					
0.549									NJ 07512		7.5				
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph 973-3				License #0067				-
Start Date (10) 4/22/13		Scheduled 4/23/13	d Cor	npletion	Date (11)				HA Monitor tement, Inc						
Occupancy Status During	g Abatement (Chec	k Only One)				Street				//				
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Completed by (Print or Type)	Title	CTO	D OE		207	IONS S	Signature	1	XA	100		Dat	е	4.	-4	-1	3	

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Jame of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abattement Contractor (9) 17 PAR ENMINONMENTAL. 17 18 18 18 19 19 19 19 19	City (5) Cou				Т			Current Use (Pr	ior if being	demolish	ned)			43	1
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Tolephone Number Stephone	City, State, Zip Code	NEW J	ERSE	EY 07	7083			City, State, Zip C	Code	901					1
Sched State Date (10)	Project Manager for Monitoring Firm					lumber					e Nun	nber			1
Month Day Year Abatement (Check only one) Facility Closed/Wacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code WAPPINGERS FALLS, NEW YORK 10016 WAPPINGERS FALLS, NEW	MICHAEL NEHLSEN									460		143			1
Decupancy Status During Abatement (Check only one) Facility Closed/Nacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code WAPPINGERS FALLS, NEW YORK 10016 City, State, Zip Code City, Sta	4/ 5 /13	1		6		13	/13			AL.					
Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code WAPPINGERS FALLS, NEW YORK 10016	Occupancy Status During Abatement (only o	ne)				Street Address							7
Other - Describe FRIDAY 5PM-1AM, SATURDAY 8AM-4:30 PM City, State, Zip Code Work (Check all that apply) Demolition X							ariba:	1376 ROUTE 9							
Cope of Work (Check all that apply) X Renovation X SSF OR LF Full Containment with Negative Pressure Mini-Encle Glovebag Procedure Non-Friable Procedure N								City, State, Zip C	Code						+
Demolition X >3SF OR LF >160 SF OR 260 LF Location of Asbestos-containing Material (ACM) Material (ACM) TO BE ABATED in Facility (13) ST FLOOR HALLWAY (SW) X SPRAY ON FIREPROOFING A SPRAY ON FIREPROOFING X Mini-Enclot , Glovebag Procedure Non-Friable Procedure Description of Asbestos- Containing Material (ACM) (ie. Thermal systems insulation, surfacing, VAT, or of other miscellaneous) ST FLOOR HALLWAY (SW) X SPRAY ON FIREPROOFING 30 SF X SPRAY ON FIREPROOFING 5 MINERVA ENTERPRISES LLC 8955 MINERVA ROAD S.E. City, State City, Stat							****	W	APPINGER:		, NE	WY	ORK	10016	
Same of Registered Waste Hauler Name of Registered Landfill Name of Registered Landf		(V)	Jana	estion					itive Pressu	re					
Location of Asbestos-containing normally used Solely by Maint/Custodial Staff (12) Yes No N/A ST FLOOR HALLWAY (SW) TO BE ABATED In Facility (13) ST FLOOR HALLWAY (SW) X SPRAY ON FIREPROOFING Amount (Specify Specify S			TOHOT	valiui	•										
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Staff (12) or other miscellaneous) P P P P P P P P P P P P P P P P P P P									Amou	. -					1
Staff (12) or other miscellaneous) P P P P P P P P P P P P P P P P P P P	•					·			1 2000	fv fi		H	NO.	lä l	
Staff (12) or other miscellaneous) P P P P P P P P P P P P P P P P P P P		1				in			900000000	ř) §		Ď F	AP	18	
ST FLOOR HALLWAY (SW) X SPRAY ON FIREPROOFING 30 SF X SPRAY ON FIREPROOFING 30 SF X ACKETTWON, NEW JERSEY 07840 X SPRAY ON FIREPROOFING 30 SF X SPRAY ON FIREPROOFING 30 SF X Mame of Registered Landfill MINERVA ENTERPRISES LLC 8955 MINERVA ROAD S.E. Disposal Date 3029/13-6/13/13 WAYSESBURG, OHIO 44688	in Facility (13)	L					or other miscella	neous)		P]		SUL	S	
larme of Registered Waste Hauler NJDEP Waste NJDEP Waste NJDEP Waste Name of Registered Landfill NJDEP Waste Name of Registered Landfill Minerva Enterprises LLC 8955 Minerva Enterprises LLC 8955 Minerva Road S.E. Disposal Date ACKETTWON, NEW JERSEY 07840 3729/13-6/13/13 WAYTE BURG, OHIO 44688			es	No	N/A				-	-	-	_	<u>.</u>	"	٦
Hauler ID No. 5 MINERVA ENTERPRISES LLC 99 WASHINGTON STREET 22147 S955 MINERVA ROAD S.E. ity, State Disposal Date City, State ACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WAYNESBURG, OHIO 44688	1ST FLOOR HALLWAY (SW)	_	_		X S	PRAY OF	FIREPROOF	1G	30 SF	X					1
Hauler ID No. 5 MINERVA ENTERPRISES LLC 99 WASHINGTON STREET 22147 S955 MINERVA ROAD S.E. ity, State Disposal Date City, State ACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WAYNESBURG, OHIO 44688															
Hauler ID No. 5 MINERVA ENTERPRISES LLC 99 WASHINGTON STREET 22147 S955 MINERVA ROAD S.E. ity, State Disposal Date City, State ACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WAYNESBURG, OHIO 44688								, (Control of the Control of the Con					122		
Hauler ID No. 5 MINERVA ENTERPRISES LLC 99 WASHINGTON STREET 22147 S955 MINERVA ROAD S.E. ity, State Disposal Date City, State ACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WAYNESBURG, OHIO 44688		T	T		LT					T					
Hauler ID No. 5 MINERVA ENTERPRISES LLC 99 WASHINGTON STREET 22147 S955 MINERVA ROAD S.E. ity, State Disposal Date City, State ACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WAYNESBURG, OHIO 44688											\Box]
Hauler ID No. 5 MINERVA ENTERPRISES LLC 99 WASHINGTON STREET 22147 S955 MINERVA ROAD S.E. ity, State Disposal Date City, State ACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WAYNESBURG, OHIO 44688		-	-		-		30		-	-	-	_	-		4
Hauler ID No. 5 MINERVA ENTERPRISES LLC 99 WASHINGTON STREET 22147 S955 MINERVA ROAD S.E. ity, State Disposal Date City, State ACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WAYNESBURG, OHIO 44688		-	-		\vdash				<u> </u>	-	+				1
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Hauler ID No. 5 MINERVA ENTERPRISES LLC 99 WASHINGTON STREET 22147 S955 MINERVA ROAD S.E. ity, State Disposal Date City, State ACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WAYNESBURG, OHIO 44688	*										1				1
99 WASHINGTON STREET 22147 8955 MINERVA ROAD S.E. ity, State Disposal Date City, State ACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WAYNESBURG, OHIO 44688	Name of Registered Waste Hauler					ubic Yard						1			4
Disposal Date City, State ACKETTWON, NEW JERSEY 07840 Disposal Date City, State WAYNESBURG, OHIO 44688		-			22-23-23		5			TC					
ACKETTWON, NEW JERSEY 07840 3/29/13-6/13/13 WAYNESBURG, OHIO 44688	City, State			217/		isposal D	ate	City, State					-		1
ompleted by (Print or Type) Title Signature \(\sum \) \(\text{V} \) Date \(\sum \) - 12	HACKETTWON, NEW JERSEY 07840					/29/13-6/1	3/13	TWAYNESBURG			Quanty.		_		1
ENJAMIN SANCHEZ DIRECTOR OF OPERATIONS	Completed by (Print or Type) BENJAMIN SANCHEZ		TOP	OF	OPERA		Signature			Date	5	-	α	5-13	1

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) NOVARTIS PHARMACUETICALS CORPORATION /13 Street Address Agencies Notified Type Notification 1 HEALTH PLAZA EPA Initial Notification City, State, Zip Code DEP Amended Notification EAST HANOVER, NEW JERSEY 07936 DOL Cancellation DOH On Hold Name of Contact Telephone Number DCA **EMERGENCY NOTIFICATION** PETER GEANNAKOPOULOS FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) NOVARTIS -EAST HANOVER Subchapter 8 (Other than K-12) Other (ie. private & commol. bldgs., homes, etc.) Street Address Square Feet # of Floors 1 HEALTH PLAZA 50,000 4 49 City (5) County Code (7) County (6) Current Use (Prior if being demolished) EAST HAOVER MORRIS (STATE USE ONLY) VACANT Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMAN ENVIRONMENTAL 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1600 ROUTE 22 EAST 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code UNION, NEW JERSEY 07083 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number MICHAEL NEHLSEN 908-688-7800 845-369-7500 460 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 3/ /13 6/ 13 /13 QUALITY ENVIRONMENTAL Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe FRIDAY 5PM-1AM, SATURDAY 8AM-4:30 PM City, State, Zip Code WAPPINGERS FALLS, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclo: >3SF OR LF Glovebag Procedure >160 SF OR 260 LF Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCLOSUR REPAIR ENCAPSU REMOVAL Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A 1ST FLOOR HALLWAY (SW) SPRAY ON FIREPROOFING 30 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill GLOBAL WASTE INDUSTRIES INC. Hauler ID No. 5 MINERVA ENTERPRISES LLC

8955 MINERVA ROAD S.E.

OFTIO 44688

Date

NESBURG

elly, State

WA

699 WASHINGTON STREET

Completed by (Print or Type)

BENJAMIN SANCHEZ

HACKETTWON, NEW JERSEY 07840

City, State

22147

DIRECTOR OF OPERATIONS

Disposal Date

3/29/13-6/13/13

Signature



Date of Notification (1) 4/5/2013		£		Name of LITTLE	Building C	Owner/Opera	ator (2 OF	EDUCATION	W3 A	3.		-		
Agencies Notified	Type Notification			Street Ad	ddress	ORIVE		2) EDUCATION		11-9 AM	1/15			
EPA DEP DOL DOL DOH DCA	Initial Amended Amendment Emergency (justification)	including	-	LITTLE Name of	SILVE Contact	R, NJ 077	739	*	5/1	lephone Num				
☐ DCA	Cancellation				M MUL									
Name of Facility Where A		g Place (3))	FACIL	LITY INFO	RMATION		Type of Facility (2)					
Street Address 95 MARKHAM PLA	CE							Other (i.e. p	8 (Oth orivate	ner than K-12 & commercia	l build	5845545		ıs,
City (5) LITTLE SILVER	# # # # # # # # # # # # # # # # # # #							Square Feet	# 0	of Floors	В	ldg. A	ge	
County (6) MONMOUTH	ice.			County C (STATE U	Code (7) ISE ONLY)	·		Current Use (Pri	or if be	eing demolish	ed)			
Name of Monitoring Firm ENVIRONMENTAL				ASCM	l No.			f Abatement Cor BROTHERS			G			
Street Address 120 NORTH WARF		80				C - C - C - C - C - C - C - C - C - C -		oddress RUTHERFOR	D BL	.VD.				
City, State, Zip Code TRENTON, NJ 086						100,000		ate, Zip Code TON, NJ 070	14					
Project Manager for Mor RICK BEECH				Telephor	ne No. 12-4200		(5)	one No. 956-8700		License No 00494	Э.			
Start Date (10) 3/26/2013		Schedule 4/30/20		npletion (Date (11)	100000		of OSHA Monitor E AS (9) ABC						
Occupancy Status Durin	g Abatement (Ched	k Only On	e)			Str	reet A	Address						
Facility Closed/Vac Abatement Perform Other – Describe:	eated During Entire ned Outside of Norr	Period of <i>P</i> nal Facility	Abaten	nent		Cit	ty, St	ate, Zip Code						
Scope of Work (Check A	All That Apply)		-001125					(* P						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			tenova emolit				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure	9			e	
		T						Trong Entering	_ (/ _				ement	t
			Locati Iormal			Descrip	ntion	of				Ty	ре	
Location Asbestos-Containing <u>TO BE AB</u> In Faci (13)	g Material (ACM) A <u>TED</u> lity	Ma	d Sole intena todial s (12)	nce/			ing Ma stems J, VAT	aterial (ACM) insulation, , or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
EXTER	IOR		X		V	INDOW (CAU	LKING	2	,610 LF	Х			
LXI LI					7/,2			400						
						W-00								
Name of Registered Wa		3		IJDEP W lauler ID 8743		Cubic Yar of Waste 50	rds	A SOUND THE STATE OF		tered Landfill		G.R.(D.W.	S.
City, State CLIFTON, NJ						Disposal 0 4/30/201		City, Sta		LLE, PA				
Completed by VIVECA RAMOS		Title SEC	RET	ARY		Signa	ature	recal	Jan	m 2/	te 5/20	13		

M ≥160 at or £260 If		Jamali	ion		T I	Mini-Enclosu Glovebag Pro Non-Example	550 mm por reservo	blo Pro	cadu	'P	
Location of		Locati			Description of				Abat	omon!	ŧ
Acbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ms	intonor locial s (12)	ngo/		los Containing Mate thornal eyerems in surfacing, VAT, other miscallance	orial (AGM) edation: or	Amount (Spealy SF or LF)	Removal	Repair	Encepsulate	Enclosura
	Yes	No	N/A					-		18	10
EXTERIOR		Х		W	INDOW CAUL	KING	2,610 LF	x			
							-	1			
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING	l	H	JDEF Wa autor ID 1 8743		Cubic Yards of Waste 50		Rogistored Landii E MANAGEME		L). W (L S
CILETON N.I				-	Disposal Data	City, Sta	ISVILLE. PA				

THA

SECRETARY

Date

3/19/2013

VIVECA RAMOS

Completed by

Date of Notification (1) 3/19/2013					f Building E SILVE				UCATION	١	4013APP				
Agencies Notified	Type Notification			Street A	ddress	DRIVE	.				311	9,	ga,		
EPA DEP DOL	Initial Amended Amendment		_		ate, Zip Co E SILVE		07739)			70g	9	- //	16)
DOH DCA	iustification) Cancellation				f Contact AM MUL	LINS				, Tel	ephone Nur	nber	140	7	
				FAC	LITY INFO	ORMAT	ION								
Name of Facility Where MARKHAM PLACE		g Place (3)					×	of Facility (School (K-1	2)					
Street Address 95 MARKHAM PLA	CE								Subchapter Other (i.e. p etc.)				dings,	home	es,
City (5) LITTLE SILVER								Squa	are Feet	#0	f Floors	E	lldg. A	ge	
County (6) MONMOUTH					Code (7) USE ONLY)			Curre	ent Use (Prid	or if be	ng demolish	ned)			
Name of Monitoring Firm ENVIRONMENTAL)	ASCN	/ No.	10.0			atement Cor OTHERS		200	G			
Street Address 120 NORTH WARF	REN STREET							Addre	ss HERFOR	D BLV	/D.	1110-310-7			
City, State, Zip Code TRENTON, NJ 086	08						1 25		Zip Code I, NJ 0701	14					
Project Manager for Mon RICK BEECH				Telepho	ne No. 92-4200		Teleph	none N -956-	lo.		License N 00494	0.		7	
Start Date (10) 3/26/2013		Schedul 4/9/20		mpletion	Date (11)		Name	of OS	HA Monitor S (9) ABO	VE					
Occupancy Status During	g Abatement (Chec	100000000000000000000000000000000000000	2000					Addre							
Facility Closed/Vaca Abatement Perform	ated During Entire	Period of	Abaten				City, S	State, Z	Lip Code				III yu		
Other – Describe:			-												
Scope of Work (Check A	ll That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				×	Mi Gle	II Containme ni-Enclosure ovebag Prod on-Exempted	e cedure				e	
		Is	Locat	ion						. (/			Abate	ement	t
Location			Normal ed Sole				scription					-	١,	Pe	
Asbestos-Containing TO BE ABA In Facili (13)	ATED	Ma Cus	intena todial s (12)	nce/ Staff?		thermal surfa	taining M I system: cing, VA miscellar	s insula T, or	ation,	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
EVTEDI	00	Yes	7,000	N/A	101	UNDO	MONI	II IZIN	10	2.6	24015				
EXTERI	OR		X		VV	יטעאוי	W CAL	JLKIN	NG	2,0	310 LF	X			
	10.70			-								 			
Name of Registered Was	te Hauler		IN	JDEP W	aste	Cubic	Yards		Name of	Registe	red Landfill				
TWO BROTHERS O	CONTRACTING	;		lauler ID 8743	No.	of Wa			entrality-orace.ii		NAGEME	NT G	R.C).W.S	S.
City, State CLIFTON, NJ						Dispos 4/9/2	sal Date		City, State						-0.5%
Completed by VIVECA RAMOS		Title SEC	RETA	ARY		S	Signature J XV	: 124	ruk	lar	Da 3/	te 19/2()13		

^{*} Do not use this form for asbestos licensure exempted activities.

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

		(Pur	suant to	OF ASBESTOS AE NJAC 8:60-7 and 12:	120-7)						-	
Date of Notification (1) 4/5/13	Nan Ne	ne of Buildin	ng Owne	er/Operator (2) artment of Milita	ary Affairs 13 A	D _D	f tra	C	heck a	# 71	01	
Agencies Notified Type of Notification [] EPA [X] Initial		et Address 1 Eggert	s Cros	ssing Road	د در پارل که در در در	71 - 9 100 -	AM 10: 3	د	500000			
[] DEP Notification [X] DOL [] Amended [X] DOH Notification	Lav	, State, Zip wrencev	ille, N	J 08648	- [(CENS)	$\frac{1}{2} \frac{dQ}{dQ}$			3		
[] DCA [] Cancellation		ne of Conta Iliam Mc				elephone .	Number					
			FACILI	TY INFORMATION			_					_
Name of Facility Where Abatement is Ta NJDMVA Headquarters Street Address 101 Eggerts Crossing Road	king Place	(3)			Type of Facility School Subcha Other ((K-12) apter 8 (Ot i.e. private	her than K- and comm	·12) nercial b	uildin	gs,		
	0		10	auntu Cada (7)	Square Feet 20000	# of F	loors	Bldg ~65	. Age)		
City (5) Lawrenceville	County (6 Mercer	7		ounty Code (7) STATE USE ONLY)	Current Use (Pr		demolishe					
Name of Monitoring Firm Hired by Buildi Whitman Companies,		00110	0000	 State of the second control of	nent Contractor (9) Jupiter Enviro		l Service	es Inc	:			
Street Address 7 Pleasant Hill Road	1110.	100110		Street Address	3 Lynn Court	mionica		20, 1110		OH III W		
City, State, Zip Code Cranbury, NJ 08512				City, State, Zip C		NJ 070	35					
Project Manager for Monitoring Firm Kevin Lovely		one Numbe		Telephone Numb				ense Nu)85	52	
		ion Date (1		Name of OSHA	Monitor J & S Environ	mental	Laborat	ories,	LLC	;		
Occupancy Status During Abatement (Ci [] Facility Closed/Vacated During [] Abatement Performed Outside of	heck only o	one) od of Abate		Street Address	2333 Route 22	Secretaries						
Describe: [x] Other – Describe: partially vaca	<u>ınt</u>				Union, NJ 07	083						
Scope of Work (Check all that apply) [] Demolition [x] ≥3 sf or ≥3 lf		[]	Reno	vation	[] Mir [] Glo	i – Enclos vebag Prod			Pressi	ure		
[] ≥160 sf or ≥260 lf	ls Lo	ocation	Γ							ater	nen	it
Location of Asbestos – Containing Material (ACM) TO BE ABATED In Facility	Mainter todial	ally Used ely by nance/Cus Staff (12)		Asbestos Materi (i.e., then insulation, s	ription of - Containing ial (ACM) mal systems surfacing, VAT, iscellaneous)		(Sp	ount ecify or LF)	R E M O V	REPAI	ENCAP	CLO
(13)		No N/A	ļ.,,=				80 SF		A L	R	S U	S U
Corridor alcoves	,	(VAT	and mastic			80 SF		X			
Name of Registered Waste Hauler Jupiter Environmental Service	s Haul	EP Waste er ID No. 782		Cubic Yards Of Waste 1	Name of Regis Minerva La		dfill					
City, State Lincoln Park, NJ		6		Disposal Date 4/26/13	City, State Waynesbu	ra. OH						
Completed By (Print or Type) Pane Repic	Title	ral Mana		Signature	1 2	. 3, 0	1	ate 1/5/13				

40 check

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

Date of Notification (1)			Nam	e of Buildir	g Owner/Operator	(2)	<0/2 1.				
	13		Pri	inceton L	Inivertsity - Office	e of Design a	nd Constructio	ŋ,			
Agencies Notified Type Notifica	ation			t Address				19/	10	-	
			20	0 Elm Dr			# 7 3 5 5 S		10:	in	
☑ DOLWD ☑ Amended	51			State, Zip	Code		- 4/02			C.	
	ent # <u>2-4/4/</u>				NJ 08544		1 / f	14.7	477		
□ DCA □ Emergence (NJAC 5:23-8)		g		of Contac			Training N	· ()	04		
Cancellat			C. Santa	bert Orte			Telephone Nun	nber			
									-		
Name of Facility Where Abatement is T	aking Plac	e (3)	FA	CILITY	FORMATION	Type of Facility	(4)				
Princeton University- Engineer			2			School (K-1					
Street Address	g quu	ungi					8 (Other than K-1)	2)			
Olden St						Other (i.e.,	private and comme		uildin	gs,	
City (5)						homes, etc					
Princeton						Square Feet	# of Floors	В	ldg. A	ge	
			1-								
County (6)			Cou	nty Code (7	(STATE USE ONLY)	Current Use (P	rior if being demol	ished)			
MERCER											
Name of Monitoring Firm Hired by Build	ling Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)				
PENNONI ASSOCIATES INC					BRISTOL EN	VIRONMENTA	L, INC.				
Street Address					Street Address						
515 GROVE STREET					1123 BEAVE	R STREET					
City, State, Zip Code					City, State, Zip Co	ode					
HADDON HEIGHTS, NJ 08035					BRISTOL, PA						
Project Manager for Monitoring Firm		Tele	phone	No	Telephone No.		License No.			000115	25
CRAIG WILSON				-0505	215-788-6040	rs.	00509				
Start Date (10)	cheduled C				Name of OSHA M		00303				
3 / 26 / 13		9				VIRONMENTA	L. INC.				
Occupancy Status During Abatement (C	heck only	one)			Street Address						
☐ Facility Closed/Vacated During Entire			nent		1123 BEAVER	POTDEET					
Abatement Performed Outside of No				cribe							
Time of Abatement:AM	PM/ <u>5:00</u>	PM-1:	00AM		City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all that apply)					2.1.0,02,174						
≥3 sf or ≥3 If	⊠ Da					ainment with Ne	gative Pressure				
\(\text{\geq} \geq 160 \text{ sf or \geq} 260 \text{ lf}		novatio			☐ Mini-Encl						
					☐ Non-Exer	mpted (*) and No	n-Friable Procedu	re			
		Locati						Ab	atem	ent T	vne
Location of		Normal		Acceptance .	Description of						-
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	d Sole	y by ice/		stos Containing Mai		Amount	Remova	Repair	nc	Enclosure
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(13)		(12)			other miscellaned		Or Or Liry	-		Encapsulate	6
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B-21, B-25, B-27, B-429		\boxtimes		Floor Ti	le Sheet Floorin	g	1100 SF				
B-21, B-25, B-27, B-429				MASTIC			750 SF				
									П	П	П
								17			
Name of Registered Waste Hauler			DEP V	Vaste	Cubic Yards of	Name of Regis	tered I andfill				_
BRISTOL ENVIRONMENTAL, INC	C.		uler ID		Waste		. NORTH LAND	EILI			
City, State		1.	18706		Diagonal D. (OKIII LAND				
					Disposal Date	City, State					
BRISTOL, PA 19007						MORRISVI	LLE, PA 19067				
	Title				Signature	1 1.	/ 2 Da	ite /	1.	,	
Brian Scarfiro	Project	Mana	ger		Brian	Scafiro	1 1	4/4	113)	

ASB-41 MAY 11 B 5/3022

^{*} Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)			Na	me of Build	ding Owner/Operato	r (2)			900		_
3/12/	13				Univertsity - Off		and Construction	m	5.85	`9	
Agencies Notified Type Notifica	tion			eet Addres		3	्	/			4
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☑ DOLWD ☑ Amended ☐ DHSS Amendme	22		0.11	y, State, Zi		· ·			40	17	
					, NJ 08544				,	20	1
☑ DCA	y (includ	ing	-	me of Cont							
☐ Cancellation			2000	Robert Or			Telephone Nur	nher			
							and the state of t				
Name of Facility Where Abatement is Ta	king Pla	ce (3)		ACILITY	INFORMATION	T=					
Princeton University- Engineeri	na Ous	drane	alo.			Type of Facility	9707 FG				
Street Address	19 4446	widil	jie			School (K-1	2)				
Olden St						Other (i.e., i	8 (Other than K-1) private and comme	2) arcial	huildi	nac	
City (5)						homes, etc.	.)	, Clai	buildi	nys,	
Princeton						Square Feet	# of Floors	T	Bldg.	Age	-
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County (6)			Co	unty Code	(7)(STATE USE ONLY)	Current Use (P	rior if being demoli	shed	1		_
MERCER						,	3		'		
Name of Monitoring Firm Hired by Buildin	g Owne	r (8)	ASC	M No.	Name of Abatem	ent Contractor (9)	1				_
PENNONI ASSOCIATES INC						IVIRONMENTA					
Street Address					Street Address	· VIIICINIII I A	il., 119C.				
515 GROVE STREET					1123 BEAVE	PETREET					
City, State, Zip Code											
HADDON HEIGHTS, NJ 08035					City, State, Zip C						
Project Manager for Monitoring Firm		Tel	ephone	a No	BRISTOL, PA	19007					
CRAIG WILSON				7-0505	Telephone No.		License No.				
Start Date (10) Scl	ndulad			ate (11)	215-788-6040		00509				
3 / _26_ / 13					Name of OSHA N						
15_ 14_ 15_ 15_ 15_ 15_ 15_ 15_ 15_ 15_ 15_ 15				13	BRISTOL EN	VIRONMENTAI	L, INC.				
Occupancy Status During Abatement (Ch	eck only	one)			Street Address						
Facility Closed/Vacated During Entire	Period o	Abate	ment		1123 BEAVE	RSTREET					
Abatement Performed Outside of Norn Time of Abatement: AM-	nal Facili	ty Hou	rs - De	scribe	City, State, Zip Co	ode				-	_
AS OF MONDAY 4/1		DPIVI-I	.UUAN	10(=1)	BRISTOL, PA						
Scope of Work (Check all that apply)										_	
☐ >3 sf or >3 If	Μn		•202		Full Conf	ainment with Neg	ative Pressure				
≦ ≥160 sf or ≥260 lf		enovat emolitic	non		☐ Mini-Enc	osure					
			J.,		☐ Glovebag	Procedure	n-Friable Procedure				
	l:	Locat	tion	T		ptca () and 1401	- Hable Procedure	_			
Location of		Norma			Description o	. 1		_	atem	ent T	-
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ame of Registered Waste Hauler			JDEP V		Cubic Yards of	Name of Registe	ered Landfill	_			_
그들은 이 교육 경영 경기가 있다. 이 그 집에 되어 되고 있습니다. 그 이 그리고 있는 데 얼마나 되어 가지 않는데 되었다면 하는데		Ha	auler ID	16.7971/07/07/07/07	Waste		NORTH LANDF				
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			18706		Disposal Data	City C4-4-			_	_	_
y, State			18706		Disposal Date	City, State					
BRISTOL ENVIRONMENTAL, INC. ty, State BRISTOL, PA 19007			18706				LE, PA 19067				
ry, State BRISTOL, PA 19007 mpleted By (Print or Type) Titl	e Project		211 213		Signature		Date	7	7/13		

*Do not use this form for asbestos licensure exempted activities. *** ハチド SITE FRTDAV MAPCH 29. 2013

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Cancellation Robert Ortaga Telephone Number Robert Ortaga						1.7	10044				ıg	nali	y (Inciu	fication	iustif	
Robert Ortega FACILITY INFORMATION			mber	none Numbe	Telepho											,
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County (6) MERCER Name of Monitoring Firm Hired by Building Owner (8) PENNONI ASSOCIATES INC Street Address 515 GROVE STREET City, State, Zip Code HADDON HEIGHTS, NJ 08035 Project Manager for Monitoring Firm CRAIG WILSON Street Address Telephone No. CRAIG WILSON Street Address Telephone No. Street Address Telephone No. 215-788-6040 O0509 Start Date (10) 3 / 26 / 13 4 / 5 / 13 BRISTOL, PA 19007 Telephone No. 215-788-6040 O0509 Street Address Time of Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Time of Abatement: 7:00AM-3:30PM/ PM. AM Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Full Containment with Negative Pressure Glovebag Procedure Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Abatement Systems insulation, Surfacing, VAT, or other miscellaneous)	manigo,	-)	homes, etc.)						-				(5)
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Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM/ PM- AM					, INC.	INCHMENTAL,		_			200	v -	ack cal	t (Cho	Abatement	ancy Status During A
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-3:30PM/ PM- AM City, State, Zip Code		_						18		2070707	ile)	y 0	ock UIII) Docker	ntim D	Durine E-	cility Closed/Vacated
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rian Scarfiro Project Manager Brisa Scafino 1 Date 3/12/1							gnature	_					7			이 집에 가장 보면 하는데 그 아니는 그 아이들이 살아 가장 하게 되어 했다.

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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

ursuant to NJAC 8:60-7 and 12:120-7) Check # 7100

Date of Notification (1)	_	N:	ame o	f Building	Owner/	Operator (2)			in the	1 x y = +0	Ch	eck	# 7	100	
	4/2/13	N	lew .	Jersey	Depar	Operator (2) rtment of Milita	ry Affairs	2812	~	W 47 2-1-					
Agencies Notified	Type of Notifica	tion St	treet A	ddress	Cunna	ing Dood		-bid H	rx -9	AM In:	i o				
[] EPA	[] Initial	1	01 E	ggens	Cross	sing Road		San Contract							
[] DEP	Notification [x] Emergency	1 (3)	ity, Sta	ate, Zip C	ode			6.	17.2.3	J. 1 1 300	7				
[X] DOL	[] Amended	L	awre	encevill	e, NJ	08648			100%	Mig	i.,				
[X] DOH	Notification	N	ame o	f Contact					ohone Nun			- 100			
[] DCA	[] Cancellation	1		m McB											
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Name of Facility Where	e Abatement is Ta	king Pla	ce (3)				Type of Fa	icility (4)	12\						A-50000
Sea Girt NGTC] į š	ubchapte	12) r 8 (Other private an	than K-12)	cial h	uildir	ne		
Street Address							[X] [omes, et	c.)	u commen	Liai D	unun	ıyə,		
381 Sea Girt Ave	enue						Square Fe	et	# of Floor	s I	Bldg.	Age			
City (5)		County	2000			inty Code (7)					~50				
Sea Girt		Monm	nouth	1	(ST	ATE USE ONLY)	Offices, tra			nolisnea)					
Name of Monitoring Fin				ASCM No	.	Name of Abatem		1 (4.55)				,			
	Companies,	Inc.		00110			Jupiter En	vironm	ental S	ervices,	Inc	•			2000
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City, State, Zip Code	loau					City, State, Zip C		ure							
Cranbury, NJ 08	512					V.	Lincoln P	ark, N.	07035						
Project Manager for Mo	onitoring Firm	5 - 5 - 5 T - 270 Hz		Number		Telephone Numb		2200		License	e Nur			2	
Kevin Lovely Scheduled Start Date ((10) Saha	10.0454500)-5858 Date (11)		Name of OSHA	973-709-0	J200				- 00)85)	_
4/3/13	(10)	4/8		Date (11)			J&S Env	vironme	ental La	boratori	es,	LLC	;		- 62
Occupancy Status Dur	ing Abatement (C d/Vacated During	heck only	y one)	of Abotom	ont	Street Address	222 David	- 2214	,						
	rformed Outside o					City, State, Zip C	2333 Rout	e zzvv					-	_	_
Descr [v] Other Desc	ribe: ribe: partially vaca	tod					Union, N.	07083	3						
15.4		100										1606319			
Scope of Work (Check	all that apply)						[]		ntainment v	with Negat	ive P	ressi	ıre		
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[x] ≥3 sf or ≥3 lf [] ≥160 sf or ≥26	60 If						Ü		riable Pro						
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In Facil				1		or other m	iscellaneous))				V A	I R	P S	0
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Jupiter Environm	ental Service	-0	uler II 04782	J NO.	U	Waste 1/2	Minerv	a Land	ITIII		*				
City, State						sposal Date	City, Stat		611						
Lincoln Park, NJ					4/	12/13	Wayne	sburg,	OH	Date					
Completed By (Print or	Туре)	Title	oral	Manag	er	Signature	1	_		4/2/					
Pane Repic		Gen	ciai	ivialia	GI .	1 /2				1121			20-52-5		

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

Data of Nationalian (d													
Date of Notification (1	4/2/13					er/Operator (2) artment of Milit	arv Affairs	MA.	. 0.	APPROV	ED.		_
Agencles Notified	Type of Notifi			Address	, - -	arminor or remit	ary / mairs	N. De	PL (7)	Health & &	enior		
[] EPA	(1 Initial		101	Eggert	s Cros	ssing Road		-	WA.)(signature		CV	-
[] DEP	[] Initial Notificati	on					. 6	111 - 3	4/2	1113	9	12/	0
[X] DOL	[x] Emergen	ICV		tate, Zip				Date:	1-1-1-1	1	mo:_	7.4.4	
[X] DOH	[] Amended		Law	rencevi	lle, N.	J 08648			(.)	•			
	Notificati		Name	of Conta	ct			Telephone	Mund	1050			
[] DCA	[] Cancellat			am Mol			<u>.</u>	releprone	Huiss	ACT .			
	1				FACILI	TY INFORMATION							
Name of Facility When Sea Girt NGTC	e Abatement is	Taking Pl	ace (3)		-	Type of Facilli	ty (4) ooi (K-12)					
Street Address							Subc	poi (K-12) chapter 8 (Oti er (i.e. private es, etc.)	hor th	an K-12)	l bulld	ione	
381 Sea Girt Ave	enue						hom	ies, etc.)	- GITU	COMMENCIA	i mano	แเลร	5,
City (5)		I Count	. /¢\		10-	5 d (5)	Square Feet	# of F	loora		dg. Ag]0	
Sea Girt		County		h		ounty Code (7) TATE USE ONLY)	Current Head	Drive if holes	done	→5	0		
		T. Brecowicznecom					Current Use (I Offices, training	nd center	uemo	ousned)			
Name of Monitoring Fig				ASCM N	0.		nent Contractor (9)				******	
VVnitman Street Address	Companies	, Inc.		00110			Jupiter Envir	onmental	Sei	rvices, Ir	10.		
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Olty, State, Zip Code	Oad						3 Lynn Court	t		n Hrw.			
Oranbury, NJ 08:	512		9.			City, State, Zip		. 11.086	. .			W	
roject Manager for Mo		Tala	nhau-	Number		Tolonia	Lincoln Park	K, NJ 0703	35				
Cevin Lovely	Automy Lau			0-5858		Telephone Num	^{ber} 973-709-02(20		License N			
		1 / 434	2071	U-0000	1		34 / KL / (1) [1]	and	1		0	08	52
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Agencies Notified [X] EPA	Date of Notification (1)					Name	of Building				***	20			62.7	٧.
Separation Sep	,e ^c	4/5/2013						Arcad	lian	Construction	, LCC	<010)	100	14	40) -
City, State, Zip Code County (6) Count	Agencies Notified	Type of Notific	ation			Street	Address						11 -	o .	- [-	
City, State, Zip Code City		[] Initia	al Notifica	ation				849 L	inc	oln Street		4		- 4	Vin.	
Red Bank, NJ 07701 X						City.	State. Zip Co	nde				14 J			·0.	30
Name of Facility Where Abatement is Taking Place (3) Residence FACILITY INFORMATION	[X] DOL					,	, _ ,		Banl	k, NJ 07701		4.7	(E)			
Doc Cancellation Jesse Section Jesse Section Jesse Section Jesse Section Jesse	[v] DOU			iciuding		Name	of Contact				Talanha	na Numba		2/10/20	141/4	t
Name of Facility Where Abstrement is Taking Place (3) Residence Street Address 205 Cartagena Drive City County (6) Brick County (7) County (7) County (7) County (8) County (7) County (8) County (8) County (8) County (8) County (8) County (8) County (9) County (9) County (9) County (9) County (9) County (9) County (10) County (10) Brick City Brick County (10) County (10						Name					reiepho	ne Number	-			
Type of Facility (#) Residence Resi	[] DCA					1	2000000									
Street Address	NI OF THE WEST		DI (6		FAC	CILITY	INFORM	ATION								
Street Address 205 Cartagena Drive			g Place (3	5)					T	Type of Facility (4	100°					
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County (6) Cou		~							1	[v]						141
County (e) Cou	205	Cartagena Dri	ive							[x]			ne & c	mmer	ciai bui	idings,
Street Address Stre	City		County	(6)					S	quare feet			Bld	g. Age		
Residence N/A Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Toms River, New Jersey, 08755-1271 Name of OSHA Monitor E.M. S.L. Analytical Street Address Street Address 1056 Stelton Road City, State, Zip Code Piscataway, New Jersey 08854 City, State, Zip Code City, State, Zip Code Piscataway, New Jersey 08854 City, State, Zip Code City, State, Zip Code Piscataway, New Jersey 08854 City, State, Zip Code Piscataway, New Jersey 08854 City, State, Zip Code City, State, Zip Code Piscataway, New Jersey 08854 City, State, Zip Code Piscataway, New Jersey 08854 City, State, Zip Code City, State, Zip Code Piscataway, New Jersey 08854 City, State, Zip Code City, State, Zip Code Piscataway, New Jersey 08854 City, State, Zip Code City, State, Zip Code Piscataway, New Jersey 08854 City, State, Zip Code City, State, Zip Code Piscataway, New Jersey City, State, Zip Code City, State, Zip Code Piscataway, New Jersey City, State, Zip Code City, State, Zip Code City, State, Zip Code Piscataway, New Jersey City, State, Zip Code City, State, Zip Code Piscataway, New Jersey City, State, Zip Code City, State,					-	(STAT	E USE ONL	.Y)				1		71 77E)	50	
Name of Monitoring Firm Hirde by Building Owner (8) N/A Street Address City, State, Zip Code Toms River, New Jersey 08755-1271 Telephone Number 732-349-9932 Scheduled Start Date (10) 4/5/13 Occupancy Status During Abatement (Check only one) [X] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours [] Abatement Performed Outside of Normal Facility Hours Scope of Work (Check all that apply) [] Select Address Street Addre	Brick		Ocean	1	İ			i	C			demolished)			
Street Address Toms River, New Jersey 08755-1271 Toms River, New Jersey 19854 Tolly 19855 Tolly 19854 Tolly 19854 Tolly 19854 Tolly 19854 Tolly 19854 To	Name of Monitoring Firm I	lired by Building	Owner (5)		ASCM	No	Nome of	E A h							
Street Address		_	, Owner (3)		ASCIVI	INO.	Name of	AD			ntracting	Inc			
City, State, Zip Code								Street Ac	ddre		nan Coi	ittacting,	, mc.			-
City, State, Zip Code										1889	Route 9	, Unit 61				
Telephone Number	City, State, Zip Code							City, Star	ite, Z			Notes and				0.1100-10012
Scheduled Start Date (10)	Project Manager for Manite	ring Firm	1 -	Talanhan	a Mussah as			Tr. L. L.			River,				271	
Scheduled Start Date (10) 4/8/13 Occupancy Status During Abatement (Check only one) [x] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours [] Other — Describe Street Address* 1056 Stelton Road City, State, Zip Code Piscataway, New Jersey 08854 Scope of Work (Check all that apply) [] Full Containment with Negative Pressure [] 3 sf or ≥3 lf [] Renovation [] [] Mini-Enclosure [] Mini-Enclosure [] Glovebag Procedure [] Mini-Enclosure [] Glovebag Procedure [] Mini-Enclosure [] Mi	1 Toject Manager for Monte	ning Film		rerephon	e Number								vumber			
A/S/13	Scheduled Start Date (10)			Schedule	d Complet	ion Date	(11)					00024			-	
[X] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours City, State, Zip Code				4/8/						E.M.S	S.L. Ana	lytical				
[] Abatement Performed Outside of Normal Facility Hours								Street Ad	ddres							
City, State, Zip Code										1056	Stelton .	Road				
Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (C			Outside o	i Normai	Facility H	lours		City, Stat	te, Z	Zip Code						
$ \begin{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	[] Other	- Describe								Piscat	away, N	lew Jerse	y 088	54		
$ \begin{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	Scope of Work (Check all the	nat apply)						[]		Full Containme	nt with N	egative Pre	ssure			
[]	1 0	11 37						î î				0541110110	Joure			
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) (13) VAT, or other miscellaneous) Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Nicholas Fernicola Slocation Description of Asbestos-Containing Amount (Specify SF or LF) Name of Registered Masterial (ACM) (i.e., thermal systems or LF) Name of Registered (Specify SF or LF) Name of Registered Masterial (ACM) (i.e., thermal systems or LF) NAM P C C C ON A A L	[] >3 sf	or≥3 lf		[]	Renova	ition		ίi								
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) (13) YES NO N/A Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Is Location Asbestos Description of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) (i.e., thermal systems of Lite, ther	[X] ≥160	sfor≥260 lf		[x]	Demoli	tion		[x]		Non-Exempted	(*) and N	on-Friable	Procedi	ire		
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) (13) YES NO N/A Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Is Location Asbestos Description of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) (i.e., thermal systems of Lite, ther									-10				ī			
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) YES NO N/A Normally used Solely by Maintenance/Custodial insulation, surfacing, (12) YAT, or other miscellaneous) Exterior X Asbestos siding Normally used Solely by Material (ACM) (i.e., thermal systems or LF) VAT, or other miscellaneous) YES NO N/A Exterior X Asbestos siding Normally used Solely by Material (ACM) (i.e., thermal systems or LF) VAT, or other miscellaneous) X A A L U U L R E E E N N N A A L L R E E E N N N A A L L R E E E N N N A A L L R E E E N N N A A L L L R E E E N N N A A L L R E E E N N N A A L L L R E E E N N A A L L L R E E E N N A A L L L R E E E N N A A L L L R E E N N A A L L L R E E E N N A A L L L R E E N N A A L L L R E E N N A A L L L R E E N D O I I D D D D D D D D D D D				T	200			D		c			Abat	ement	Гуре	_
Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) VAT, or other miscellaneous) Name of Registered Waste Hauler Guardian Contracting, Inc. NJDEP Waste Hauler ID No. City, State Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Note of Registered Manager Note of Registered Manager Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler Cubic Yards of Waste Tullytown, Pennsylvania City, State Tullytown, Pennsylvania Date 4/5/2013	Location of	,									Δ,	mount				
TO BE ABATED in facility in facility (13) (13) (13) (14) YES NO N/A Name of Registered Waste Hauler Guardian Contracting, Inc. Name of Registered Waste Hauler To No. Cubic Yards of Waste Name of Registered Landfill T.R.R.F. City, State Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Maintenance/Custodial (i.e., thermal systems in sulation, surfacing, VAT, or other miscellaneous) VAT, or other miscellaneous) VAT, or other miscellaneous) A U U U U U U U U U U U U U U U U U U																733,952
in facility (13) (13) (12) VAT, or other miscellaneous) YES NO N/A Exterior X Asbestos siding Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Title P O V R S S S S U U U U L R E E E Exterior NAME of Registered Landfill T.R.R.F. City, State Tullytown, Pennsylvania Date 4/5/2013													Courses and	120		2000
A L U L R E E Exterior X Asbestos siding 1800 sf X Name of Registered Waste Hauler Guardian Contracting, Inc. City, State Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Texterior Tome Asbestos siding 1800 sf X A L U L R E E City Asbestos siding 1800 sf X Cubic Yards of Waste Name of Registered Landfill T.R.R.F. City, State Tullytown, Pennsylvania Date 4/5/2013							insu			ing,			1.000	100	P	0
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Exterior X Asbestos siding 1800 sf X Shape State		1	VEC	NO	NT/A		othe	er miscella	ineo	ous)					150	10000
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Guardian Contracting, Inc. 20223 3 T.R.R.F. City, State Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Title Project Manager Oisposal Date 4/9/13 Tullytown, Pennsylvania Date 4/5/2013	Exterior			X		Asbe	stos sidin	g			1800) sf	X			
Guardian Contracting, Inc. 20223 3 T.R.R.F. City, State Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Title Project Manager Oisposal Date 4/9/13 Tullytown, Pennsylvania Date 4/5/2013																
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Toms River, New Jersey 4/9/13 Tullytown, Pennsylvania Completed by (Print or Type) Title Signature A/5/2013 Date 4/5/2013		racting, Inc.		2			3									
Completed by (Print or Type) Nicholas Fernicola Title Project Manager Signature 4/5/2013		form Towns								ъ						
Nicholas Fernicola Project Manager Vichot 49 4/5/2013			Title		4/9/13		ure -	I Iullyto	yyn	i, Pennsylvani	a /		Dota		-	
11/4/10/ 72-7				Manag	er	Signal	\\\ : \	-AST		(10			2010/00/00 (201)	2013		
						for ash	estas licen	sure exem	ntod	activities	/					

NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)	de	Name of Buildin	ng Owner/Op	perator (2)	****		-		
April 5, 201	3		Guzz	oerator (2) i Masonry & Pavi 2013 Garfield Avenue	ng CL	10	116	141	
Agencies Notified Type of Notifi	ication	Street Address		——— <i>(UI:</i> 3	APD .	_ 0	1	((
	tial Notification		610 C	Garfield Avenue	"" -9 AL	1.			
	nended Notification	City, State, Zip	Code	- 4 -	F1/ /	11):	12		
	nendment #	City, State, Zip	Toms	River, NJ 08753	Y 1, 2'3" - 1		•		
	nergency (including tification)	N 60 .			176	f(z)H			
I DOM	ncellation	Name of Contac	t k Guzzi		Telephone Numbe	r .		6	
						-		Ŀ	
N. CE W. W.	FA	ACILITY INFOR	MATION						
Name of Facility Where Abatement is Takin Residence	ing Place (3)			Type of Facility (4)					
CONTRACTOR CONTRACTOR				[]	School (k-12)				
Street Address	S 88.0 M			[]	Subchapter 8 (c				
109 East Granad	a Drive			[x]	Other (i.e., priv homes, etc.)	ate & c	omme	rcial bu	ildings,
City	County (6)	County Code (7)		Square feet	# of Floors	Blo	ig. Age		
		(STATE USE ON	LY)	1500 sf	1			60	
Brick	Ocean			Current Use (Prior	f being demolishe	d)			
Name of Monitoring Firm Hired by Buildir	ng Overnor (9)	10000		Reside					
N/A	ig Owller (8)	ASCM No.	Name of	Abatement Contracto		-			
Street Address			Street A		an Contracting	, Inc.			
	A service and the service and		Succession		oute 9, Unit 61				
City, State, Zip Code	×		City, Sta	te, Zip Code	oute 9, ont of	i de la constantina della cons			
Project Monage Co. M. day 1871				Toms I	River, New Jers	ey 08	755-1	1271	
Project Manager for Monitoring Firm	Telephone Number	er		ne Number	License 1				
Scheduled Start Date (10)	Scheduled Compl	etion Data (11)	732-34	9-9932 OSHA Monitor	00624				
4/5/13	4/8/13	etion Date (11)	Name of		L. Analytical				
Occupancy Status During Abatement (Check			Street Ac		L. Analytical				
	ed During Entire Period of A			1056 S	telton Road				
	Outside of Normal Facility	Hours	City Stat	te, Zip Code	500				
Other – Describe			City, Star	22912	way, New Jerse	2V 088	354		
Scope of Work (Check all that apply)			1						
scope of work (check an that apply)			[]		with Negative Pre	ssure			
>3 sf or ≥3 lf	[] Renov	vation	l J	Mini-Enclosure					
[x] ≥160 sf or ≥260 lf	[x] Demo	949983 ¹⁸	[x]	Glovebag Proced	and Non-Friable.	Droad			
			[//]	Tron-Exempted () and Norr-Hable	rioceui	uie		
						Abat	tement	Туре	
Location of	Is Location		Description			R	R	Е	Е
Asbestos-Containing Material (ACM)	Normally used Solely by		bestos-Con		Amount	E	E	N	N
TO BE ABATED	Maintenance/Custodial		Material (A		(Specify SF	M	P	C	С
in facility	Staff	(ulation, sur		or LF)	0	A I	A P	LO
(13)	(12)		VAT, or			V	R	S	S
	MEADURE TO THE TOTAL OF THE	oth	er miscella	neous)		A		U	U
	YES NO N/A					L		L E	R E
Exterior	X	Asbestos sidir	10		1400 sf	X		12	
		1 150 cotos sida	.5		1400 51	Λ			
		+							
Name of Registered Waste Hauler	NIDED W	IDV To ::							
Guardian Contracting, Inc.	NJDEP Waste Hauler 20223		rds of Waste		ed Landfill				
City, State		sal Date	City, Stat	T.R.R.F.			7/1/2		
Toms River, New Jersey	4/9/1			wn, Pennsylvania					
Completed by (Print or Type)	Title	Signature	1 //	/ / Junis Ivania	/	Date			
Nicholas Fernicola	Project Manager	1 VI	hot	+0	1	4/5/1	13		
	*Do not use this form	n for asbestos licen	sure exemp	ted activities.					

NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)	April 5, 2013				Name	of Building	Owner/Ope Disant	rator (2) is Contracting, I	LC ²⁰ /2.			110)
Agencies Notified [x] EPA [] DEP [x] DOL [x] DOH [] DCA	Ame Ame [x] Eme justi	al Notifi ended No endment	otification # including		City, S	Address tate, ZipCo of Contact Frank	313 H	alyard Road Beach, NJ 0875	377	9 47	<u>(4</u>	(V)	
				FAC	ZILITY	INFORM	IATION						17/11/2017
Street Address	batement is Takir idence	177	(3)					Type of Facility (4	School (k-12) Subchapter 8 (o Other (i.e., prive				ldings,
City		Coun	ty (6)		County	Code (7)		Square feet	homes, etc.) # of Floors	Bld	g. Age		
Ocean Beach	. 111					USE ONL	Y)	1000 sf	1			50	
		Ocea	797					Reside	ifbeing demolished ence	1)			
Name of Monitoring Firm N/A		g Owner	(8)		ASCM 1	No.	Name of	Abatement Contract		Ino			
Street Address							Street Ad	dress	ian Contracting				
City, State, Zip Code					il is		City. Stat	1889] e, Zip Code	Route 9, Unit 61				
							= =	Toms	River, New Jers			271	
Project Manager for Monit	oring Firm		Telephone	Number			732-349	e Number 9-9932	License 1 00624	Vumber			
Scheduled Start Date (10) 4/5/13			Scheduled 4/9/1		ion Date	(11)		OSHA Monitor	.L. Analytical	-			
[] Abat	Abatement (Check ity Closed/Vacate ement Performed r – Describe	ed Durin	ie) g Entire Per	iod of Ab			Street Ad City, State	dress 1056 S e, Zip Code	Stelton Road	ey 088	354		
1 1	hat apply) for ≥3 If sf or ≥260 If		[] [x]	Renova Demolit			[] [] [x]	Mini-Enclosure Glovebag Proces	nt with Negative Produce dure *) and Non-Friable		ure	***	
									T	Abat	tement	Туре	
Location o Asbestos-Containing M TO BE ABAT in facility (13)	aterial (ACM)		Is Locatio Normally us Solely by tenance/Cu Staff (12) NO	sed		Asb M (i.e., insu	Description estos-Cont laterial (A0 , thermal syllation, surf VAT, or er miscellar	aining CM) ystems facing,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior			X		Asbe	stos sidinį	g	4000	800 sf	Х			
	re												
Name of Registered Waste I Guardian Con City, State		N	JDEP Wast	e Hauler 1 0223 Disposa		Cubic Yar	ds of Waste	T.R.R.F.	ered Landfill				
Toms River, 1				4/10/1	3			e wn,₁Pennşylvani	a				
Completed by (Print or Type Nicholas Fern		Title Projec	et Manage	er	Signati	ore c	hot	tel		Date 4/5/:	2013		

NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) April 5, 2013				Name of	Building	Owner/Ope Charle			Of 2	14	46	1	
[]	tion I Notificati			Street A	ddress	22 Ele	ano	or Drive	All I	D: 3,)		
[x] DOL Amer	nded Notti ndment # gency (inc			City, Sta	te, ZipCoo		ll P	Park, NJ 08824	Childe	10)			
[] DCA justif	ication) ellation			Name of	Contact Charle	s Avrutik		Te	elephone Number		4		
			FACI	LITY I	NFORM	ATION							
Name of Facility Where Abatement is Taking Residence	g Place (3)				210 72-11		Ту	ype of Facility (4)	School (k-12)		1.12\		
Street Address 115 Saegull Lane								[x]	Subchapter 8 (ot Other (i.e., priva homes, etc.)			ial buil	dings,
City	County	(6)		County C	ode (7) USE ONL	v)	Sc	quare feet	# of Floors	Bldg	g. Age	0	
Ortley Beach	Ocean		'	JIAIC	USE ONL	1)	Cı	1000 sf urrent Use (Prior if Residen	being demolished)		0	U.V.
Name of Monitoring Firm Hired by Building N/A	Owner (8)) .		ASCM N	0.	Name of	Aba	ntement Contractor		Inc.			
Street Address						Street Ad	ldres	SS					
City, State, Zip Code						City, Stat	te. 7.		oute 9, Unit 61			-	
Project Manager for Monitoring Firm	Т	elephone Nu	ımber			Telephon		Toms R	iver, New Jers License N			271	
			XXXXXXXXX			732-34	9-9	932	00624				
Scheduled Start Date (10) 4/5/13		cheduled Co 4/9/13	mpletic	on Date (11)				. Analytical				
Occupancy Status During Abatement (Check			of Aba	tement		Street Ad	ldres		elton Road				
Abatement Performed Other – Describe	Outside of	Normal Fac	ility Ho	urs		City, Stat	te, Z		vay, New Jerse	y 088	54		
Scope of Work (Check all that apply)						[]		Full Containment	with Negative Pre	ssure			
[] >3 sf or ≥3 lf		ſ1 R	enovati	ion		l J		Mini-Enclosure Glovebag Procedu	re				
[x] ≥160 sf or ≥260 lf		5 5 7	emoliti			[x]		Non-Exempted (*)		Procedi	ure		
							0.772			Abat	ement	Туре	
		S Location				Descriptio				R	R	Е	Е
Location of	100000	rmally used Solely by	i			estos-Con Iaterial (A			Amount (Specify SF	E	E P	N	N C
Asbestos-Containing Material (ACM) TO BE ABATED		nance/Cust	odial			, thermal s			or LF)	M O	A	C A	L
in facility		Staff			inst	ılation, sur VAT, o		ing,		v	I R	PS	OS
(13)		(12)			oth	er miscella		ous)		A	***	U	U
	YES	NO 1	N/A				Ţ.			L		L E	R E
Exterior		X		Asbes	stos sidin	g			900 sf	X			
											-		
N CD W IV	1377	DEP Waste I	Inulas I	DNa	Cubia Va	rds of Wast		Name of Register	ed Landfill				
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJ	DEP Waste 1		אנע.	Cubic Ya	uus oi wasi		T.R.R.F.	ca Landini				
City, State			Disposa			City, Sta							
Toms River, New Jersey Completed by (Print or Type)	Title		4/10/1	3 Signate	ıre -	Tullyto	owr	n, Pennsylvania	ĵ	Date			- Tritene
Nicholas Fernicola		Manager		Digitali	Mir	tol		tout		12.55	2013		
2	*Do	not use thi	s form	for asbe	stos licen	sure exem	pted	d activities.				200	

NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)	A:1 5 2012	0			Name	of Building			201	7	- 1-5	1.7		101000
Agencies Notified	April 5, 2013	ation		****	Street	Address		el Galida		PARKING D	144 Mar	15		
[x] EPA [] DEP		al Notif ended N	ication otification		City	State, ZipCo		Mallard S	Street	- /	H 10:	30		
[x] DOL	[X] Eme		(including		City, 3	nate, zipco		on, NJ 08	759	4.40	(190) (190)			
[] DCA	(2 12) 1 89	fication cellation			Name	of Contact Micha	iel Galida	ı	Т	elephone Num	ber			
				FA	CILITY	INFORM	IATION							
Name of Facility Where A	batement is Takir sidence	g Place	(3)					Type of	Facility (4)	School (k-12)				
Street Address 400	8 th Avenue								[] [x]	Subchapter 8 Other (i.e., pr homes, etc.)				ildings,
City		Cour	nty (6)			Code (7) E USE ONL	Y)	Square f	eet 00 sf	# of Floors	В	ldg. Ag	60	
Ortley Beach	1	Oce	an		(- /		Use (Prior it	being demolish	ned)		00	
Name of Monitoring Firm	50	J g Owner	(8)		ASCM I	No.	Name of	Abatemen	Resider t Contractor	(9)			anner E	
N/A Street Address	1				Ĭ.		Street A	ldress	Guardia	n Contractir	ıg, Inc			
City, State, Zip Code		-					City, Sta	te, Zip Coo		oute 9, Unit	61			
Project Manager for Monit	oring Firm		Telephon	e Number				ne Number		Liver, New Jo	ersey (1271	
	oring t tim						732-34	9-9932		0062				
Scheduled Start Date (10) 4/5/13			4/9/		tion Date	(11)	Name of	OSHA Mo		L. Analytical	8			
Occupancy Status During [x] Faci	Abatement (Checl lity Closed/Vacate			riod of A	batement		Street Ac	ldress	1056 St	elton Road				
[] Aba	tement Performed						City, Sta	te, Zip Coo	le					
[] Othe	er – Describe								Piscatav	way, New Je	rsey 0	8854		
Scope of Work (Check all	that apply)						[]		Containment Enclosure	with Negative	Pressure	:		
L 3 0.00000	for≥3 lf		[]	Renov			įį	Glove	bag Procedi					
[x] ≥160) sf or ≥260 lf		[x]	Demol	ition		[x]	Non-l	exempted (*) and Non-Friab				
			Is Locati	on			Descriptio	n of				atemen	T	Τ_
Location of			Normally 1	used		Asb	estos-Con	taining		Amount	RE	R E	E N	E N
Asbestos-Containing M TO BE ABA		Mair	Solely b ntenance/C				faterial (A , thermal s			(Specify SI or LF)	M	PA	CA	C L
in facility			Staff			insu	lation, sur			E 50	O V	I R	P S	OS
(13)			(12)			othe	VAT, o er miscella				A		U	U
		YES	NO	N/A				52			L		L E	R E
Exterior			X		Asbe	stos sidin	g			900 sf	X			
										10 to 10 to			-	
			-	-				-			-	-	+	-
Name of Registered Waste	Hauler		NJDEP Was	ste Hauler	ID No.	Cubic Ya	rds of Wast	e Name	of Register	red Landfill				
Guardian Cor City, State	ntracting, Inc.		2	20223	sal Date	3	City, Sta		R.R.F.					
Toms River,				4/10/	13				nsylvania					
Completed by (Print or Typ Nicholas Fern		Title Proje	ect Manag	ger	Signat	wre \	ind	1		/	Da 4/.	te 5/2013		

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

Initial Friable Notification Check #: 5359

								32					
Date of Notification			IN	ame	of B	uildi	ng Owner/Operati	or (2)		+31		-	
0 4 1/10	14 1/11	131	11	Jaws	ark P	ublic 9	Schools						
Agencies Notified						dress		2013 APR	-9 AMID				
(X)EPA			11		· 2			- 11 11	T9 AMID	: 30			
	[X]Initi		11			treet							
(X) DEP	NOTI	ication		ıty.	Sta	te, Z	ip Code	. 11	10 Lossis	711			
(X) DOT	()Amend	led ication	N	lewa	ark, N	JJ 071	102		CENSILLS!				
(X) DOH			N	ame	of C	ontac	E	Tele	phone Numb	er			
[]DCA	[]Cance	ellation	115)OUO	ılas F	Bland	, Bus. Admin.	1					
			11-	Joug									
Name of Facility Wh	owe Above		25.5	- 51			INFORMATION	Type of Facili					
Manie of Lagitica Mi	tere voeren	Hetir IS I	avin	y Fi	ace	(3)							
Sussex Avenue Scho	ool		160					[]School	apter 8 (Ot	her t	han	K-12	2)
Street Address								[]Other	(i.e., pri	vate	€ 00	mmer	•
307 Sussex Avenue								Square Feet	# of Floor	s B	lag.	Age	
City (5)		Count	у (6)	_		unty Code (7)	45000	3) yea		
						(S	TATE USE ONLY)	Current Use ()	Prior if be	ing d	emol	ishe	d)
Newark, NJ 07107	a. (1)	Essex			SELTE			School	785				
Name of Monitoring Owner (8)	Firm Hired	s by Buil	ding	AS	CM N	0.	Name of Abate	ment Contractor	r (9)				
Whitman Companies	Inc			00	110		Four Strong B	uilders, Inc.					
Whitman Companies	,			100	110		Street Addres	s					
116 Tices Lane, Unit	R-1						180 Sargeant	Avenue					
City. State. Zip Co	de						City, State,	Zip Code					
East Prupowiek N.I.C	0016						Clifton NI 070	12.1025					
East Brunswick, NJ (Monitoria	g Firm	Tele	phon	e Nu	mber	Clifton, NJ 070	ber	Lice	nse i	damul	Ē	
Kevin Lovely		į.	722	200	5858	,	973-614-0377		0080	7			
Scheduled Start Dat	e (10) [S	ched.Com					Name of OSKA		10080			- Q10	
0 4 / 0 5 / Day / Day / Occupancy Status Du	Year	0 41/ Month /	Day	01/1	1 3	<u>}</u>	Four Strong B						
(X) Facility Close of Abatement	d/Vacated	During E	ntir	e Pe	riod		180 Sargeant	Avenue					
[]Abatement Ferf Hours - Descri []Other - Descri	be:	ide of N	orma	l Fa	cili		City. State.						
Scope of Work (Chec	k all that	annlul					Clifton, NJ 070)13					
[]Demoliti []>3 sf or [X]>160 sf	on >3 lf		įΧ]Ren	ovat	ion	[]Mini []Glov	Containment ward containment war containment was containment was contained by the containment was contained with the containment was contained was contained was contained was contained was contained was contained was contained was contained was contained was contained was contained was contained was contained was contained was contained was contained was contained with the contained was contained with the contained was contained was contained with the contained with the contained was contained with the contained was contained	-	e Pre	essu	e	•
				Ĭs						IAhai	eme	11 11	VDA.
Locati Asbestos-C	ontaining		No	cati rmal Used	1y		Descriptio Asbestos-Cont	aining	Amount	R	R	E N C	N
Material TO BE A	(ACM) BATED			olel Mai			Material (A (i.e., thermal		(Specify SF or	M	R E P	P	C I. O S U R
TO BE A in Faci (13	lity		te	nanc	e/	i	nsulation, surf	acing, VAT,	LF)	V	A	S	S
. (20	•		St	aff(12)		or other mast	erraneous)		L	Ř	L	R
Room 108			Yes	No	N/A	-	Tiles and Masti		300 SF	V	-	<u> </u>	E
1100111100			_			FIOOI	Thes and Masin	<u> </u>	300 31				-
	•												<u> </u>
	11				1				1				
	1												
Name of Registered	Waste Haul	er			Was		Cubic Yards	Name of Regis	tered Landf	111			
Carro Otara a Dellata					r ID	No.	of Waste	0.00000					
Four Strong Builders	, Inc.			2609	9		Disposal Date	G.R.O.W.S., In	ic.				
2780							-roboger pare	orel, scare					
Clifton, NJ								Tullytown, PA					= 32
Completed By (Print	or Type)	Title					Signature	-11		ומ	ate	(A) (A)	
Bilyana Kulakovska	2	Office A	dmir	istra	ator		K	de -		1	/4/13	Į.	
ASB-41		1				-				14	-1/10		_
JUN 95													

State of NJ

2013-69 B & G proj. #:

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) Check # 5853

Date of Notification (1)		LLN	mo of Ri	uilding Own	erl	Operator (2)		2812 400						2		
0 4 / 0 5 / 1	131	1.1		Jean-Pie				2013 APR	-9 /	M 10: 5	i ()					
Agencies Notified Type	e Notification		reet Addr		_			The section	On A			- Landing View		-		
□ EPA		11			21/1/0	ood Road		£ 1 11	Sale.	THE	11.					10000000000000000000000000000000000000
D DEP	Initial			Zip Code	_										Sec. 19812	
ĭ DOL □	Amendme			Orange, I	NJ	07079								-		
IN DOH			me of Co	ontact					8	Telepho	ne Nu	ımber				
□ DCA □	Cancellation	on	James	Jean-Pi	err	е								_		
				FAC	CILI	TY INFORMAT	TION									
Name of facility where a	batement is t	aking pla	ce (3)						Туре	of Facility	(4) ool (K	- 12)				
James Jean-Pierre	е											r 8 (Oth			2)	
Street Address									-	M Othe	r (Priv	rate/Connes, etc	nmer	ial		
450 North Ridgew	vood Road							1	Squ	are Feet		f Floors		Bld	g. Ag	e
City (5)			nty (6)		-			nty Code (7)						li-ba	1/	
South Orange, N	1 07070	Fee	sex				(Sta	te use only)		rent Use (sidential	Prior	if being	demo	iisne	2)	
					7	ASCM No.	-	Name of Abatement								
Name of Monitoring Fire	n Hired by Bi	ag. Owne	я (о)		-	ASOM NO.		B & G Restora								
	INA				. -		=	Street Address	11011, 11	10.						
Street Address								105 Ryerson	Road						_	-
City, State, Zip Code				-				City, State, Zip Code		7035						
25.3					_			Lincoln Park,	, 143 0	7035	71	icense I	Numb	er		
Project Manager for Mon	nitoring Firm		1	Phone Num	nbe	г		Telephone Number (973)696-68	69				378			
					7.41		_	Name of OSHA Mo	nitor							
Scheduled Start Date (10	0)			etion Date (11)			B & G Restora	ation, I	nc.						
4/15/2013		_	6/2013					Street Address	Dood							
Occupancy Status Durin	g Abatement	(Check o	only one)					105 Ryerson I						-		
Facility closed/vac	ated during e	entire peri	od of aba	atement. ours-				City, State, Zip Cod	е							
Describe:	ned odisido (), ,,o,,,,,					-	LincolnPark, f	NJ 070	35		0-9-274		-100000000		
Other-Describe:					-											-1
Scope of Work (check							K F	Full Containment w/n	egative	pressure		Gloveb	ag pr	ocedu	ire	
Demolition		Renovation					S. San	Mini-enclosure	•			Non-fr	iable p	roce	dure	
		160 sf or		ly used sole	alv		ш.						R	R	E	E
Location of		by maint	enance/c	ustodial	CIY		n of a	asbestos-containing		Amoun			e m	e	n	n
asbestos-containi material to be		staff(12)			-	material (A				(Specif	y SF	or	O V	a	а	L
abated in facility ((13)	Yes	No	N/A									е	r	р	-
1st & 2nd floor				X	7	insulation t	from	11 radiators		34 sf			X		닏	14
15t & 2110 11001					F									닏	닏	부
													Ш	닏	닏	분
					Ī								닏	닏	닏	11
										icii.				Ш	Ш	
Registered Waste Haule	er Inc	NJE	EP Haule 19563	er ID#	Cı	ubic Yards of V	Vaste	Name of Registere Tullytow	ed Land n Res	mii ource &	Rec	overy	Cen	ter		
B & G Restoration	, 1116.		.0000	Disposa				City, State								
Lincoln Park, NJ)4/	16/2013		Tullytowr			1	Date				
Completed by (Print or Gordana Luna	Type)	Title Secreta	ary/Trea	asurer		Signature		Gordana Luna	;			04/0	5/201	13	e	

Check # 8136

	9		NO.	TIFICAT	State TON OF	of New Je ASBEST	isay 207	SWEWS			Che	ck#	8	136
Deta at Laws				fundi	BUE TO V	NAC 8:60	and 12:13	20) 11 11 -	API IO	-APPRO	h Anger-			along .
Date of Notification (1) 4 /05/1	à			Nan	e of Bul	Iding Own		or (2) NJ	Dept. of	Health &	Mich	v Cons		_
Agencies Notified	Type Notification	iris		54	el Addre	B	A	MGIN EN	HAIC	6 0	AGIIIO	i seri	/ices	
E EPA				Ster	er Addre	90		-10E 195	Harry.	- (şıgnatu			-	-
Z PP B DOL	Amended			City.	State, Z	p Code	<u> 8a</u>	DR DIVE	te: [/.	5/12	Time:	11:0		
	Amendme Emergenc	y fincludin	п	L	Ċ	CLIC LONS	Λ Α	٦.٠٦	0743	36				
DOH DCA	justification Cancellation	2)	4	Nam	e of Con	lact				elephone	Numbe) F	•	
			-		J)ıA	DE S	HEIMA)			VVIII II III.	•	-	
Name of Facility Where A	batement is Tak	ing Place	(E)	F/	WILITY	INFORMA	MOIT		The Cal	****		,		_
Street Address	BBA	DNG	ಸಕಾ	TEING				Type of Fadi			•			
Onest Vanista	00			Alter 100				School Subcha	Mer S (O)	her than H	(-12)			
City (5)	99 6	Baue]	<u>) L.</u>					Other (i.	e, private	& comm	incient be	niiding	s, ho	mes,
	DUKLAND							Square Feat	#	of Floors		Bldg.	Age	
Contrat (p)		-		Count	y Code	77		25,000		_1	- 1		0+	
Berry Of Marie -	· 640·			(STAT	E USE O	NLY)		Current Use (lished)			
Name of Monitoring Firm	lired by Building	Owner (8)	ASC	CM No.		Name	of Abatement t	COMA	meiai				
Stroet Address							A.M	ac Contract	ing Inc.	F(8)				
an old Manida					Virgo - College		Street	Address						
City, State, Zip Code								Lowell Road						
							City, Si	ate, Zip Code Rock, N.J.	N-7 4 E-41					
Project Manager for Monito	dag Firm			Teleph	one No.			ona No.	07452					
Start Date (10)			_ [201-2	262-5841		OD156				
4/8/13	2000	Schedul	ad Co	mpletion	Dale (1	1)	Name o	FOSHA Monito	or	-				
Occupancy Status During /	batement (Chec	t Only Or	5/3	1/13			Ome	ga Environn	iental S	ervices	inc.			
Fucility Closed/Vacate	d Dudan Saller t		11574				Street A							
Findity Closed/Vacate Absternant Performed Other - Describe:	Outside of Norm	ellou of A left Facility	Hour	neni s				luyler Stree	[mine	
								ensack, NJ	07608	*8	M. Serie			
Scope of Work (Check All T	hat Apply)													
_ ≥3 র ি চ≥2 র দ _ ≥180 র চ ≥2 র ম			enove ėmolil					Full Contains Mini-Enclosu Glovebag Pro	ie Dredime					
		ls	മരു	ian				Non-Exemple	eo (°) ano	Non-Fria		Aliate Aliate		
Location of Asbestos-Containing Ma	nation to Refront	Usec	ormali Sole	ly lu hu	1	Da:	iciiption o	F				Ty		Ę
TO BE ABATE	D D	Main Custo	itenaj	nce/	Asb:	estos Cont e. thermal	alning Mar svetema k	terial (ACM)		nount			E)	
in Facility (13)		Depti	(12)	FEEDER C		इधारित	ing, VAT,	or	SF SF	ocally or LF)	Remaval	Repair	dem	
C		Yes.	No	N/A		Chica M	nacenial jer	10.2)			1 2 2	哥	Encapeulate	Endosens
UTILITY RO	ow.	1			<u> </u>					-			æ	
		-		1		Pipe	147200	Cotts	27) LF	1	-		
	ou.			Y		Boicer	INSU	an ory		sr-	1	1		
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ame of Registered Waste N	stiler		ليب								1	-	-	-
lovic Transport			NJ Ha	DEP W	asie No.	Cubic Y		Name of			·1			
ly, State	·			785		O. MATPI	2	IESI P	A Bethle	ehem La	ndfill	Спр		
iy, suus Iverdale, New Jersey (7457					Disposa		City, Stat	9	<u>-</u>	-			\dashv
impleted by		Tille				1 4/0	8/13	Bethlel	iem, PA	18015				1
TOSEPH VOCATURE			Lat	TONS		1500	nature N	V		Dal		-1		7
	· · · · · · · · · · · · · · · · · · ·						4	. Voralu	va .		4/09	113	,	

	2
Check#	8136
2012	

Date of Notification (1)					7.0 0.00 a				4		404	}
4/5/13			Nam	e of Build	ing Owner		or (2)		-	9/5		-5
Agencies Notified Type Notificati	on		Stree	et Address	MILLI	IAM	LOCKW	000	6	<u>.</u>	'n,	
EPA Initial Amended				10000	307 1	VAN	WINKLE	Aue		47,	20,	
DOL Amendment Emergence	nt#_	200		11000	HOLNE	. 1	7 0	7506				*-0
DOH justificatio	n)	ny	Name	of Conta	act	, 10		Telephon	e Numb	er		
Cancellati	on			WILLI	AM (OCKU	JOUR	-				
Name of Facility Where Abatement is Tal	ing Place	(3)	FA	CILITY II	NFORMAT	TON	Type of Facilit	12 (4)		_		
LOCKWGOD							Dated.					
Street Address 307 VAN W	Alres		.1:-		-		☑ Other (i.e	(-12) ter 8 (Other than L private & com	n K-12) mercial b	uildin	as, ho	mes
City (5)	W ROB		06				etc.) Square Feet	# of Floors			Age	
HOWTHOINE							1500	1 2	,		O+	
County (6)			Count	y Code (7	")			Prior if being den	nolished))	UT	
Passaic Name of Monitoring Firm Hired by Building					L1)		e.	SIDMICE				
Street Address	Owner (8)	ASC	CM No.		Name A. M	of Abatément C ac Contracti	ontractor (9)				
					-		Address Lowell Road					
City, State, Zip Code							tate, Zip Code Rock, N.J. (7452				
Project Manager for Monitoring Firm			Teleph	one No.		Teleph	one No. 262-5841	Licens	se No.			
Start Date (10)	Schedu	led Co	mpletion	Date (11	1		of OSHA Monito	0015	00			
Occupancy Status During Abatement (Che		5/11				Ome	ga Environm	ental Service	s Inc.			
Facility Closed/Vacated During Entire			mont		1		Address Huyler Street					
Abatement Performed Outside of Norr Other – Describe:	nal Facilit	y Hour	S			City, Sta	ate, Zip Code ensack, NJ (
Scope of Work (Check All That Apply)						Hack	erisack, NJ C	77000				
≥3 sf or ≥3 lf 1 ≥160 sf or ≥260 lf	Francisco I	Renovi Demali					 Mini-Enclosur Glovebag Pro 	cedure				
	15	Locat	ion	T			Non-exemple	d (*) and Non-Fi	nable Pro		emen	
Location of		Norma d Sole	llv		Desc	ription o	f				/pe	•
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intena lodial s (12)	nce/	Asbes (i.e.	stos Conta . thermal s surfaci	ining Ma ystems i ng, VAT,	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
V. 7	Yes	No	N/A		other mis	scellane	ous)		oval	함	sulate	sure
Basenour			V		PIPE	1250	canon	10518	V	1		
									-			
Inmo of Denishand Marks 1									-			
lame of Registered Waste Hauler Rovic Transport		H	JDEP Wa auler ID I 0785		Cubic Ya of Waste			Registered Land Bethlehem		Cor	[']	
ity, State tiverdale, New Jersey 07457					Disposal	Date	City, State	em, PA 1801	5			
ompleted by Joseph Vocaruw	Title	PRU	FIONS			nature	, 1	10	Date			
	L					4	Vocaliti	00	,			•

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

2013-72 B & G proj. #:

AMENDED START & FINISH DATES

Check # 5854

					_		-	_	The state of the s			20										
Date of Notification (1)		N	ame of l	Building Ow	ner	/Operator (2)			2012 000													
0 4 / 0 5 / 1 13	<u>3 </u>		Myles	Sachs					2013 APF	(- 9_	AM In:	317										
	otification	St	reet Add	dress					å linas	100		· ·										
	nitial		49 Fo	rest Aven	ue				30 R	4.5	THE THE	111										
☐ DEP ☐		C	ity, State	e, Zip Code					Fu. 6	4711	148											
₩ DOL	mendmen	it	Glen	Ridge, NJ	1 0.	7028																
X DOH			ame of C	Contact	-0.00					T	elephone	Numbe	r									
□ DCA □ C	ancellatio	n	Myles	s Sachs																		
				FA	CIL	ITY INFORMA	OITA	N						•								
Name of facility where abate	ement is ta	king pla	ce (3)							Type of	Facility (4 School	4) (K - 12))									
Myles Sachs									11	П		apter 8 (0		an K-	12)							
Street Address					_			_		×	Other (Private/C	comme									
49 Forest Avenue										Square		Homes, e		Blo	lg. Ag	je						
City (5)		Cour	ity (6)				Cor	unt	y Code (7)	**************************************												
Glen Ridge		Ess	ey.				(Sta	ate	use only)	Curren	t Use (Pr	ior if bei	ng dem	olishe	d)							
Name of Monitoring Firm Hir	rad by Did		2002.110/10		7	ASCM No.	-	IN	Name of Abatement C						d)							
Name of Monitoring Pirm Pil		g. Owne	1 (0)			ASCINI NO.		1	B & G Restoration		, ,											
Street Address					_L-		-	3	Street Address	11, 1110.			90									
Street Address									105 Ryerson Ro	ad												
City, State, Zip Code							_	C	ity, State, Zip Code													
Wat = 2000 W 13									Lincoln Park, N	J 0703	5											
Project Manager for Monitoring	ng Firm			Phone Nun	nbe	er		T	elephone Number (973)696-6869			12.000000000000000000000000000000000000	e Numb 0378	er								
0								1	Name of OSHA Monito						_===							
Scheduled Start Date (10)		Sched	. Comp	etion Date ((11))		Ι.	B & G Restoration		re-com.											
4/18/2013		4/20	0/2013		**********	Z. 1942 - 1942 - 1942 - 1942 - 1942 - 1942 - 1942 - 1942 - 1942 - 1942 - 1942 - 1942 - 1942 - 1942 - 1942 - 19		5	Street Address													
Occupancy Status During Ab									105 Ryerson Ro	ad												
Facility closed/vacated	during en	tire peri	od of ab	atement.				C	City, State, Zip Code													
Abatement performed of Describe:	outside of	normal	lacility i	10015-			_		LincolnPark, NJ	07035												
Other-Describe:					_											=						
Scope of Work (check all the							ভা	-	II Containment w/nega	ative pre	eura [T Glove	ebag pr	ocedi	ITE							
Demolition		enovatio					-		ni-enclosure	ative pre-		(50.00)	friable									
☐ > <u>3</u> sf or > <u>3</u> If		60 sf or	100				Ц	IVII	ni-enclosure				TR	R	E	1						
Location of	ls b	s locatio v mainte	n norma enance/	illy used sol custodial	ely				hostos containing		mount		e m	е	n	E n						
asbestos-containing material to be		taff(12)			_	material (bestos-containing		Specify S F)	F or	0	p a	a	C						
abated in facility (13)		Yes	No	N/A							.F)		v e	i	р	L						
garage				X	\neg	pipe insula	ation	n/	thick duct insul	15	If / 280	0 sf	X									
workshop area	T			×	ī	duct insula	ation	1			sf		X									
workshop annex				X		duct insula					00 sf		X									
furnace room				X		duct insula	atior	n		10	00 sf		X	닏	H	岩						
															Ш							
Registered Waste Hauler			EP Hau 19563	ler ID#	Cı	ible Yards of V 7 yards	Waste	е	Name of Registered I Tullytown F	Landfill Resour	ce & Re	ecoven	y Cen	ter	t brog Tanza							
B & G Restoration, Inc	<i>.</i>	_ _	19000	Disposa	I D				City, State													
City, State Lincoln Park, NJ	Ψ.()4/	22/2013		_	Tullytown, F	PA												
Completed by (Print or Type)) [itle	/-	asurer		Signature		9	Gordana Luna			Date 04	4/05/2	013								
/ ordono Luno			I WI I I D		- 1			-						000000000 000 00								

Notification of Aspestos Apatement (Pursuant to NJAC 8:60 and 12:120)

DES Proj. #: 2013		(Langue	SHILL TO LAUNCE		1		APPROVED			
· PLANT A STATE OF THE PARTY OF			101	10,500	1	No Deal of I	lealth & Senio	r Servi	CAS	1
Date of Notification (1) 0 4 / 0 4 / 1 3			r/Operator (2)			4141		71:6	7h	
Agencies Notified Type Notificette	Peter G	AMPER DESCRIPTION OF THE PARTY		<u> </u>	9 Bullon.	Date: 111		25.77		ir,
☐ EPA ☐ initial	1,	st 3rd st	PERT		可用的: 這一	2	7.4			
DEP Amended	Annual Language	, Zip Code	rue ya hi	in the		· ·				
DOL Emergency		NNB, NJ 0	7002	- LILE	Hahig NUL				-	
M DOH (Including	Name of C	The second second				Telephone	Number			
DCA justification)	Peter (BILSON			<u> </u>			- 1116 H		lampror .
Const.	Total Laboratoria	FAC	LITY INFORM	ATION	-		1877			
Name of facility where abatement is	s taking place (3)			Quality States		Type of Fability (4	(K - 12)			13
Peter GILSON						Lund	pter 8 (Other II	han K.	12\	
Street Address							Private/Comme		,,	
		*				Bldgs./l	-lames, etc.		ig. Ag	
21 WEST 3RD STREET	1		The second second second	1 4		Square Feet	if of Floors	DIC	ið. vá	
City (5)	County (6)				Code (7) ise only)	Current Liae (Pr	or if being der	nolishe	d)	
BAYONNE	HUDSON			,		1	!			
Name of Monitoring Firm Hired by	Bidg. Owner (8)		ASCM No.		me of Abatement);
	· ·		Product All Printers and All Printers an		& S RESTORA	ATION, INC.	rin in the	,	,# pro	- 72
Street Address	٠.		8		reot Address	,				11
	CONTRACTOR OF THE PARTY OF THE		1 1-111		20 California Av y, State, Zip Code				de in	7 4
City, State, Zip Goda	•			10"	Paterson, NJ 07					
Project Manager for Monitoring Firm	1	Phone Numi	oer	Te	lephone Number		License Num			7,7
		•			973-345-8020	Annual Control of the	01169)	THE REAL PROPERTY.	
Start Date (10)	Sched, Comp	etion Date (1	1)	100	me of OSHA Mon					
04/13/13	04/26/13		95		D & S Restorati	on, Inc.		***************************************		popular.
Occupancy Status During Abateme	CONTROL COMMENTS			productive.	20 California Av	enue/				
Facility closed/vacated during	entire period of ab	aterrient.		41.	y, State, Zip Code	the same of the sa				
Abatement performed outside Describe:	1.5	iours-	1	-						
Other-Describe: NORMAL				_	Paterson, NJ 07	444	Marie Company			
Scope of Work (check all that app					Transition of the Party of the	Full Containment w Mini-enolosure	Inegative pres	sure		
	Renovation					Glovebag procedu				
≥160 sf or ≥280 lf	Demolition	University and a side		COURT IN		Non-Exempted (*)	and Non-friabl	R Proce	-	<u> </u>
Location of asbestos-containing	ls location norms by maintenance/		-	lan of only	estos-containing '	Amount	е	6	n	E
material (som) to be	staff(12)		- material	(ACM)	salus-contenting	(Specify S	SFor a	p	d a	0
abated in facility (13)	Yes No	N/A				LF)	V e	1	þ	-
Bascment	- X		PIPE INSI	ULATIO	N	58 LFT	×			口
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				AND THE STREET				#	1	H
Registered Waste Hauler	NJDEP Hau	lor ID#	Cubic Yards of	Waste	lame of Registered	Landfill		ابنا	- text	11-1
D& S RESTORATION, INC.	13506	Distract	1 YD	THE RESERVE OF THE PERSON NAMED IN		RESOURCE RI	3COVERY			44-10-
City, State PATERSON, NI 07503	-	Disposal 04/15/			City, State TULLYTOWN	. PA				
Completed by (Print or Type)	Signature			Date						
BOGDAN JOLDZIC	PRESIDENT	The second secon				Transfel de maren en	04/04/13		adjosphical Company	
ASBUMAN I THE TANK I THE	" Do not use this "c	mi for asbes	tos lloensure e	xempted a	ctivities.					

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

D&S Proj. #: 2013

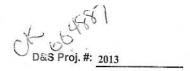
ASR-41

D&S Proj. #:	2013			(Pursi	ua	III IO NJAC	0.00	anu 12	.120)		2013 APR								
Date of Notification (1)	Na	ame of B	uilding Ow	ner	/Operator (2)				64		59 /	11/10						
0 4 / 0 4			Peter G	ILSON				WHAT OF WASHINGTON			17/1		1111	30					
	Type Notification	on St	reet Add	ress							1/02	17.	27%		1.00	10000			
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LI DEP	_ Amendment #: _	Ci	ty, State	, Zip Code															
⊠ DOL ∑	Emergency			NNE, NJ	07	002					and the second second								
DOH ■	(including justification)	Na	me of C	ontact							Telepho	one Nu	mber						
☐ DCA ☐	Cancellation		Peter (GILSON		-					_\								
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Name of facility when	re abatement is	taking plac	ce (3)	Alexander	_					Тур	e of Facility		40)						
Datas CH SON											=	ool (K			on V	12)			
Peter GILSON					_							chapter er (Priva	a constitution			12)			
Street Address											Bldg	s./Hom							
21 WEST 3RD S	TREET									Sc	quare Feet	# of	Floors		Blo	lg. Ag	е		
City (5)		Coun	ty (6)				-	nty Code te use on	59120	_	urrent Use	(Delea '	6 h a ! = -		- daile	d)			
BAYONNE		HUI	DSON				(Sta	ile use on	"y)	'	urrent Use	(Prior ii	rbeing	aemo	onsne	a)			
Name of Monitoring	Firm Hired by E				T	ASCM No.		Name of	f Abatemen	t Cont	ractor (9)								
								D&S	RESTOR	DRATION, INC.									
Street Address								Street A											
							_	- SSETTE -	alifornia A										
City, State, Zip Code									te, Zip Code										
									rson, NJ 0 ne Number	7503		LLic	cense I	dumb	or				
Project Manager for N	Monitoring Firm			Phone Nun	nbe	er			3-345-8020	0		Lic		169	Ci				
				. 5					f OSHA Mo	-									
Start Date (10)		Sched	. Comple	etion Date (11)		D&	S Restora	tion, l	inc.								
04/13/13		04/26						Street A	ddress		10								
Occupancy Status Du									alifornia A		e				_		_		
Facility closed/ Abatement per Describe:	formed outside	of normal f	od of aba	atement. ours-					te, Zip Code										
Other-Describe	: NORMAL H	OURS					-	Pate	rson, NJ 0						_				
Scope of Work (che	ck all that apply	/)								-	Containmen enclosure	it w/neg	gative	oress	ure				
\times >3 sf or >3 lf	\boxtimes	Renovatio	n								enciosure ebag proce	dure							
≥160 sf or ≥26	0 If	Demolition	1] Non-	-Exempted	(*) and	Non-f		_		_		
Location of		Is location by mainte	normal	lly used sol	ely	1					•			R e	R	E n	Е		
asbestos-conta material (acm)		staff(12)	: iaiice/c	usiodiai		Descripti material			containing		Amoun (Specif		r	m o	p a	С	n		
abated in facili		Yes	No	N/A		material	(,)				LF)			v	i	a p	L		
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D & S RESTORA	TION, INC.	135	000	Disposa	_	YD ate		City, S		, ALC	, JORGE			-					
City, State PATERSON, NJ	07503			04/15					LYTOWN	N, PA									
Completed by (Print		Title				Signature		-					ate						
BOGDAN JOLDZIC PRESIDENT * Do not use this form for asbestos licensure exercises.*								7 77 77				10	4/04/	13					
ASR-41	,	Do not us	e this for	rm for asbe	sto	s licensure ex	empte	d activitie	es.										

D&S Proj. #: 2013

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

									21	11-	1 8100												
Date of Notification		11			Operator (2)			ΣU	PigAPR-9	AM 117:	: 20												
Agencies Notified	Type Notification	_	et Addr	E JEFFEI	X Y		, 		-	7 - 7 - 7 - 7 - 7 - 7 - 7		V18		_									
☐ EPA	Initial	11000								& LICENS	1/1/1	Oil											
☐ DEP	Amended				M	ACK ROAL)		_	- 5156125	377	G1, .	_										
☑ DOL	Amendment #:	_		Zip Code																			
Office Andrews	Emergency	_		DALE, N.	J																		
□ DOH	(including justification)	Nan	ne of Co	ontact						Telephor	ie Numi	ber											
☐ DCA	☐ Cancellation		ARLEI	NE JEFFE	ER	Y																	
				FAC	CIL	ITY INFORM	NOITA		_														
Name of facility wh	nere abatement is	taking place	e (3)							Type of Facility	(4) ol (K - 1	12)											
ARLENE JEFF	FRV									=	-	000000	r th	n K.	12)								
Street Address	DICI				_					100000					12)								
													53, ACT-52										
228 KINDERK	KAMACK ROA	AD								Square Feet	# of FI	loors		Blo	lg. A	ge							
City (5)		County	/ (6)					ity Code (7)															
							(Stat	e use only)		Current Use (F	rior if b	pter 8 (Other than K-12) Private/Commercial Homes, etc. F of Floors Bldg. Age or if being demolished) License Number 01169											
HILLSDALE		BER			_				_	1 1 (0)			demolished)										
Name of Monitorin	ng Firm Hired by E	Bldg. Owner	(8)			ASCM No.		Name of Abatement Contractor (9)															
							[D & S RESTORATION, INC.															
Street Address								Street Address															
					20 California A	_	e.				-												
City, State, Zip Coo	de							City, State, Zip Code	9														
								Paterson, NJ 0	_	503					-								
Project Manager fo	r Monitoring Firm		F	Phone Num	nbe	r		Telephone Number			Licer			er									
								973-345-8020	_			011	09	_									
Start Date (10)		Sched.	Comple	tion Date (11)			Name of OSHA Mo															
04/10/12		04/20/	/12					D & S Restora	110	on, Inc.													
04/18/13 Occupancy Status	During Abstamor	04/30/			-			20 California A															
	ed/vacated during			tement				City, State, Zip Code		enue													
	erformed outside							City, State, Zip Cou	6														
Describe:					-			Paterson, NJ 0	7	503													
	ibe: NORMAL H									ull Containment	whoas	tive pr	2000	iro	-	_							
Scope of Work (c								-	=	Mini-enclosure	willega	uve þi	5331	ne.									
>3 sf or >3 lf		Renovation	C					×	_	Glovebag procedu	ure												
≥160 sf or ≥3	260 If	Demolition				- 22/22				Non-Exempted (*			_		dure)							
Location of		Is location	normal	ly used sole	ely								3	R	E	E							
asbestos-co		by mainter staff(12)	lance/c	usiogiai				sbestos-containing		Amount (Specify	SE or	1	n	р	C	n							
material (aci			Nia	NI/A	_	material	(ACM)			LF)	0, 0,		,	a i	a	L							
abatoa iir ia	S, (10)	Yes	No	N/A									9	r	р								
BASEMENT A	ND GARAGE		X			PIPE INSU	ILATI	ON		104 L FT			X										
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	-			7	Ħ							[
Registered Waste			P Haule	er ID#		ubic Yards of	Waste	Name of Registere	ed	Landfill	FOOT	TED 37											
D & S RESTOR		1350)6		-	YD		TULLYTOWN	١, ١	RESOURCE R	ECUV	EKY	-										
City, State				Disposa 04/10			City, State																
PATERSON, NJ 07503 04/19/13						TULLYTOWN, PA																	
Completed by (Prin		Title	- NIT			Signature		04/04/13															
BOGDAN JOI	LDZIC	PRESIDE		m for aska	l	s licensure ex	emnter	Lactivities			1-17												
ASB-41		" Do not use	this for	III for aspe	510	s ilcerisure ex	emplet	activities.															



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

Date of Notification				uilding Owr ARET GU	ner/Operator (2))		20,	19 APA	~0	Mo.				
Agencies Notified	Type Notifica	tion	Street Add		KI					J /	MO.	75			
· EPA		`		AND TO STOCK STOCK AND AND AND AND AND AND AND AND AND AND				-21			1,	U'			
☐ DEP	Amended			LAND A	VENUE			2	Eline	I 4.	A. Pro.				
⋈ DOL	Amendment #	-11	City, State,	Zip Code						19.04	16		800		
_	Emergency				IJ 07079		and the second s							202	
DOH	(including justification))	Name of Co	ontact					T	elepho	ne Numbe	er			
DCA	☐ Cancellatio	11	MARG	ARET G	JRY										
				FAC	ILITY INFORM	IATIO	N					-			
Name of facility wh	nere abatement	is taking pla	ace (3)				A STATE OF THE STA		Type of	Facility	(4)				
MARGARET (GURY										ool (K - 12 hapter 8 (100	han K	12)	
Street Address							***************************************	-	×		r (Private/0			-12)	
100 007 1370									Z		./Homes,		, oldi		
108 ROLAND	AVENUE							_ [Square	Feet	# of Floo	ors	В	ldg. A	ge
City (5)		Cou	nty (6)				unty Code (7)								
SO. ORANGE	,	FG	ODW			(Sta	ate use only)		Curren	t Use (Prior if bei	ng den	nolish	ed)	
Name of Monitorin	Charles and the control of the contr		SEX		1001111	<u> </u>	I NI C NI			(0)					
Name of Monitorin	g riiii niied by	blug. Own	er (0)		ASCM No.		Name of Abaten								
Chanal Address	<u> </u>				-	_	D & S REST	ORA	TION, I	NC.	614.1.				
Street Address							Street Address								
City State 7: 0-1							20 Californi		2.						
City, State, Zip Cod	е						City, State, Zip C								
B T 111						_	Paterson, N.		03						
Project Manager for	r Monitoring Firm	1	P	hone Numb	er		Telephone Numb				License		er		
							973-345-80					1169			
Start Date (10)		Sched	. Complet	ion Date (1	1)		Name of OSHA								
04/15/13		04/30	0/13				D & S Resto	oration	n, Inc.						
Occupancy Status I	During Abatemer					-	505000 10000000000 00	ă.							
	d/vacated during	(-		ement.			20 California		nue						
Abatement pe	erformed outside	of normal	facility hou	irs-			City, State, Zip C	ode							
Describe:	ho: NORMAL F	IOURS				-1	Paterson, N.	T 075	03						
Scope of Work (ch						_	1 atcison, iv.								
>3 sf or >3 lf		• •			5				ill Contai ini-enclos		w/negative	press	ure		
	⊠	Renovation							lovebag p		ure				
≥160 sf or ≥2	60 lf	Demolition	1) and Non-	friable	proce	edure	
Location of			n normally enance/cus	used solely	/							R	R	Е	E
asbestos-con material (acm		staff(12)	mance/cus	Siouiai			sbestos-containing	g		nount	ee or	m	e p	n	n
abated in faci		Yes	No	N/A	material (ACM)			LF	pecify	SF OF	0	a	a	C
		100	140	INA								e e	r	р	_
BASEMENT			$\square X$		PIPE INSU	LAT	ION		160 L	FT					
3 8										1000					
7.,- ·	- No 1														
Registered Waste H			EP Hauler	1100 Marie 1100 Marie	ubic Yards of V	Vaste									-
D & S RESTOR	A HON, INC.	135	06		YDS		TULLYTOW	N, R	ESOUR	CE R	ECOVE	Υ			-
City, State	1 07502			Disposal D 04/17/1			City, State	ONT P							
PATERSON, N.		7:0		04/1//1	Signature		TULLYTOV	VIN, P	A		Date				
Completed by (Print BOGDAN JOLI		Title PRESID	ENT		Oignatule						04/04/	13			
ASR 41				for asbesto	s licensure exe	empte	d activities.				3 1/0-4/	10	-		



ETS JOB # 3915/13					2	Alo con	AMENDM	ENT#2	! •			
Date of Notification (1) 3/21/2013					Operator (2) York & New	Jersey	AM IO: 3	U				
Agencies Notified Type Notification		241 E	Address		236	a Ligh	Jana KO	L				
DEP Initial Not		E	tate & Zip 0 Jersey, NJ		1							
DOL Amended DOH Cancellati			of Contact	01310	-		T	elephone	e Number			
DCA DCA		Mr. Ra	alph Cam	pione				The second secon				
		FAC	CILITY IN	ORM	ATION							
Name of Facility Where Abatement is				Тур	e of Facility (4)							
Terminal B, B-2 Connector Deposition Street Address	artures L	.evel		니님	School (K-12) Subchapter 8 (Other than K	12)					
Newark International Airport, No	work N	1		K	Other (i.e., priv			as home	es. etc.			
Newark International Airport, No	wain, in	J			are Feet	# of Floors		ldg. Age	5, 515.			
City (5) Cou	inty (6)	County C	ode (7)		50+							
Newark Ess	ex			Current Use (Prior if being demolished)								
			-	Airport								
Name of Monitoring Firm Hired by Bu THE PORT AUTHORITY OF NY		ner (8)	ASCM No		ne of Abatemen Contracting		(9)					
Street Address				1.0	Street Address							
241 ERIE STREET, ROOM 236					Clay Street , State & Zip Co	odo		-				
City, State & Zip Code JERSEY CITY, NJ 073100					oklyn, NY 11							
Project Manager for Monitoring Firm		Telephone	Number		phone Number		License N					
MR. RALPH CAMPIONE		973-624-6			-706-6300		00511					
Scheduled Start Date (10) Sche		npletion Date 7/31/2013	e (11)	110 (2000)	ne of OSHA Mo STOR TECH ,							
Occupancy Status During Abatement Facility Closed/Vacated Durin	(Check or	nly one) Period of Aba	tement		et Address 59 JACKSON	AVENUE						
Abatement Performed Outsid				25.0	, State & Zip Co	ode						
Describe: 4/9/2013 -4:00				L.I.	C., NY 11101							
MONDAY - FR	DAY 7:0	0 AM - 12:3	30 AM									
Scope of Work (Check all that apply)			Marine									
Demolition	Renovat	ion			Full Cor	ntainment wit	n Negative P	ressure				
☐ Large Project					Mini-End							
Quantity is ≥ 3 SF or ≥ 3 LF						g Procedure						
Quantity is ≥ 160 SF or ≥ 260	LF ACM				Other:	1	Amount	Aboto	ement Type			
Location of Asbestos-Containing		Is Location Normally U		Asbe	escription of stos-Containing	,	(Specify		fy: Removal,			
Material (ACM)		Solely b		M	aterial (ACM)	Sq	uare Feet or	F	Repair,			
TO BE ABATED		Maintenand			thermal system	3500	near Feet)		osulation or closure)			
in Facility (13)		Custodial S (12)	ιαπ?		on, surfacing, V er miscellaneou				ciosure)			
(1.5)		(/										
Terminal B- B-2 Connector, Dep		NO		FIR	EPROOFING		5,800 SF		emoval			
Terminal B- B-2 Connector, Dep	t. Level	NO			PIPE		1,200 LF	Re	emoval			
N (D) (d) (d)		NUDED W	JDEP Waste Hauler ID # Cu. Yds. of Waste					ered Lan	dfill			
Name of Registered Waste Hauler TRI-STATE TRANSFER		Programment of the street of the	ste Hauler i 2 A-456	U#	120		nerva Ente					
City, State					Disposal Date	City	, State					
Bronx, NY					IBD	/ Wara	ynesburg,	ОН	In .			
Completed By (Print or Type)	Title	Fusanthi		,	Signature	1/			Date 4/5/2013			
Richie Smith	Project	Executive			1/1/	/ / -			7/3/2013			
ASB-41 JUN 95 G4667				6	/							

Date of Notification (1)	Name	of Building C	owner / Operator	(2)11/3 APP	7 20						
4/4/2013	Hess	t Address	on	71 74	FU // // //						
Agencies Notified Type Notification EPA	One	Hess Plaza		264	41	7					
	2000-200	State & Zip Co	nde	« LICEN	(. 700 mg						
□ DEP ☑ Initial □ Amended		dbridge, NJ		LILEA	STOLKOL		55				
	-	of Contact	07000		1	Telephone	Num	ber			
☑ DOH ☐ Emergend ☐ DCA ☐ Cancellati		Philbin			1			•			
		CILITY INFO	DRMATION								
Name of Facility Where Abatement is		OILITT IN	Type of Facilit	v (4)							
Hess Corporation	raking ridoc (c)		School (K								
Street Address				er 8 (Other than	K-12)						
River Road				. private & comm		gs, homes	s, etc.)	,			
			Square Feet	# of Floor		Bldg. Age	-				
Corp: 123 Derousse Avenue	inti (6) County	Code (7)	-								
		Code (1)	Current Hea /	Prior if being der	nolished)			-			
Pennsauken Car	mden		Exterior	Filor ii beirig der	nonsned)						
		1.00		10-1	(0)	-					
Name of Monitoring Firm Hired by Bu	ilding Owner (8)	ASCM No.		ement Contracto							
AET, Inc.			Bristol Environmental, Inc. Street Address								
Street Address			1123 Beave								
28 N. Pennell Road			City, State & Z								
City, State & Zip Code			Bristol, PA								
Media, PA 19063	Telephone	Number	Telephone Nu		License N	Jumber					
Project Manager for Monitoring Firm Dave Turotsy	800-969-		(215)788-604		00509						
	eduled Completion Da		Name of OSH								
4/22/2013	4/25/2013			ronmental Inc							
Occupancy Status During Abatement	(Check only one)		Street Addres	S							
Facility Closed/Vacated Durin	ng Entire Period of Ab	atement	1123 Beave	r Street							
Abatement Performed Outsid			City, State & Z	Zip Code							
Describe: Exterior Removal			Bristol, PA	19007							
Facility Occupied During Aba	tement: 7:00 AM - 3:	:30 PM		1 - 1/2 - 1							
Scope of Work (Check all that apply)											
				K-3	ainment with N	Negative F	ressu	re			
≥3 sf or ≥3 lf	<u> </u>	novation		Mini-Encl							
≥160 sf ≥260 lf	☐ De	molition			g Procedures		_	ž			
	F				npted and No						
Location of	Is Loca	373 ST (327)	Description		Amount	Abat	ement	Type			
Asbestos-Containing	Normally		Asbestos-Cont Material (AC		(Specify SF or LF)		,	n			
Material (ACM)	Solely Maintena		(i.e., thermal sy		Si Oi Li)	Re	מ	Enclosure			
TO BE ABATED in Facility	Custodial	Staff? i	nsulation, surfac	ing. VAT		Remova	Repair	los los			
(13)	(12)		or other miscella			\ <u>a</u>	=	ia la			
	Yes No						,	D			
Condensate tank		☐ Tank I	nsulation		530 SF						
Condensate tank		181-									
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		+++-					FIT	illi			
						一片竹	fit	ili			
		 					計片	十一			
		JDEP Waste	Cubic Yards	Name of Regis	tered Landfill						
Name of Registered Waste Hauler	1000	auler ID No.	of Waste	Ivallie of regis	torea Lanaiiii						
Bristol Environmental, Inc.	- 1	18706	10	GROWS Lan	dfill						
			Disposal Date	City, State							
City, State Bristol, PA			Dioposai Dato	Morrisville, F	A						
Completed By (Print or Type)	T	itle	Signature Date /								
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Gino Pizzigoni	The state of the s	lanager	Gins to	gragon	17	'7	11	16			

Date of Notification	(1)		TI	Name	of Bui	ldina (Owner / Operato	r (2)	2012	7 4 70	27%							
Bate of Hotinoation	4/4/13				of Education	. (-/	ZUIJ APR	~9 - ÂN (Q:										
Agencies Notified	Type Notifica	ation	11 7		Addre					7 AM 10:	311			2000000				
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DEP	Initial				State &				& Lin	ENSTAIR ENSTAIGH	Es.							
⊠ DOL	☐ Amer		-		ton, N		38			40 N/40 T	elenho	no N	umb	05				
☑ DOH ☐ DCA		gency ellation			of Co		ollins			- 11	elemi	II II 10		-1				
		Account this					ORMATION											
Name of Facility W	here Ahateme	ent is Taking P	lace (3		CILII	IINF	Type of Facil	ity (4)										
Trenton Central		ant is Taking I	iacc (c	•)			School (HAPTER 8								
Street Address							Subchap	ter 8	(Other than k	(-12)								
1001 West State	Street						Other (i.e	e. priv	ate & comme	ercial building	s, hom	ies, e	tc.)					
l'							Square Feet		# of Floors	BI	dg. Ag	е						
City (5)		County (6)	Co	unty (Code (7)	70,000		3			60+						
Trenton		Mercer					Current Use	(Prior	if being deme	olished)								
10							School						1					
Name of Monitoring		y Building Ow	ner (8)		ASC	M No.					•							
Environmental C Street Address	onnection						Bristol Env Street Addres		nentai, inc.									
120 North Warre	n Street						1123 Beave	2000 and a second	eet									
City, State & Zip Co	Material Control of the Control of t						City, State &		A120113404-A		1000E							
Trenton, NJ 080		Bristol, PA 19007																
and the state of t	Project Manager for Monitoring Firm Telephone Numb								Telephone Number License Number									
Jim Frisbee	1 (40)	01-11-10-	609-				(215)788-60 Name of OSH		mita.	00509			_					
Scheduled Start Da 4/15/13	25 25 25	Scheduled Cor	mpietic 4/17		te (11)		Bristol Env											
Occupancy Status	All the second s	nent (Check o		ACCUMULATION OF THE PARTY OF TH			Street Addres											
Facility Clo	sed/Vacated [During Entire F	Period	of Aba			1123 Beave											
		utside of Norm	al Ho	urs –	7am to	3pm	City, State &											
	4 PM to 1:3						Bristol, PA	1900	7									
Scope of Work (Ch	cupied During			-														
Scope of Work (Cit	eck all that ap	(Pig)						П	Full Contain	nment with Ne	gative	Pres	sure	,				
≥3 sf or ≥3	lf		\boxtimes	Rer	novatio	n		П	Mini-Enclos	ure								
∑ ≥160 sf ≥26	80 If			Der	nolition	Í.			Glove Bag	Procedures								
								\boxtimes	Non-Exemp	ted and Non-								
	ocation of			Locat			Description			Amount	Aba	atem	ent T	ype				
	tos-Containin terial (ACM)	g		nally l olely l	Used		Asbestos-Con Material (A		9	(Specify SF or LF)			ш					
	BE ABATED				ce or		(i.e., thermal s		s	0. 0. 1. /	Reg	20	Encapsulate	Enclsoure				
	n Facility		Custo		Staff?	i	nsulation, surfac				Remova	Repair	nsd	Soc				
	(13)		V	(12)	N/A		or other miscell	aneou	ıs)		<u> </u>	~	late	<u>a</u>				
RM A-59			Yes	No 🖂	IN/A		Vailcrete Stab	ilizət	ion	384 SF		П	П	П				
KI91 A-59			H		H	!	Naticrete Stabilization 304 3F 🖾 🗌						H	H				
											ᇳ	Ħ	Ħ	H				
											TH	IT	Ī					
			Ħ	П	H													
Name of Registered	d Waste Haule	er					Cubic Yards	Nam	e of Registe	red Landfill	The second							
Printal Environm	nontal Inc			1000000	uler ID 706	No.	of Waste 2 cu yd	GR	OWS Landf	ill								
Bristol Environm City, State	iental, ilic.			10	700		Disposal Date		State									
Bristol, PA	75						4/17/13		risville, PA		<u>1</u> 5							
Completed By (Prin	t or Type)	***************************************		Tit			Signature	0	• ,	1.0	Date							
Gino Pizzigon				- 10000000	oject		Lino 1.	up	ryone	1	4/4/	13						
	Mana Mana							00	0 1		1							



Date of Notification (1	11		- Is	Vlom	o of	Duilding	. 0	vner / Operato	- /2\	2017	er.	* .	- 0			
4/4/13 Trenton I									01 (2)	~ + 4	APR-9	Br.				
Agencies Notified T	ype Notifica	ation				Idress	0.	Luddation		12 12 15		411	7: 3	i)		
☐ EPA	,,					ospect	Sti	reet			979e /		71	(a)		
☐ DEP		I				e & Zip				et.	LICENSI	WT:	200			
☑ DOL	☐ Ame	nded	-	Tren	iton	, NJ 08	638	8			-11.11	MG:	W.			
□ DOH		rgency	Ī	Vam	e of	Contact					15	Tele	pho	ne N	umb	er
☐ DCA	Cano	ellation	1	Vir. E	Eve	rett O.	Co	llins				-	-		200	
				FΔ	CII	ITY INI	FOI	RMATION			D40 NEXT 1 187					(17)
Name of Facility Whe	ere Abateme	ent is Taking P	lace (3					Type of Facil	itv (4)			W. 187		-		
Trenton Central H				•				School (NON SUB-	CHAPTER 8	3				
Street Address			****					☐ Subchap	oter 8 (Other than	K-12)					
400 Chambers Str	eet							Other (i.e	e. priva	ate & comm	ercial buildi	ings,	hom	es, e	etc.)	
								Square Feet		# of Floors	i	Bldg	. Ag	e		
City (5)		County (6)	Co	unty	Cod	le (7)		70,000)		3			60÷		
Trenton		Mercer						Current Use	(Prior i	f being dem	olished)					
								School								
Name of Monitoring F	irm Hired b	y Building Ow	ner (8)		Α	SCM No	٥.	Name of Aba	temen	t Contracto	r (9)					
Environmental Co	nnection							Bristol Env	ironm	ental, Inc						
Street Address								Street Addres								
120 North Warren								1123 Beave								
City, State & Zip Code								City, State &								
Trenton, NJ 08010								Bristol, PA		License Number						
Jim Frisbee	roject Manager for Monitoring Firm Telephor im Frisbee 609-392							Telephone No			00509	Num	ber			
Scheduled Start Date	(10)	Scheduled Cor										-			-	
4/17/13	(10)	Scrieduled Col	4/19		ile (11)		Bristol Env								
Occupancy Status Du	ring Abater	ment (Check o						Street Addres		ontai mo.			-			
		During Entire F			ater	nent		1123 Beave	7,574	et						
47/		utside of Norm					1	City, State &								
Describe: 4								Bristol, PA								
Facility Occup	pied During	Abatement														
Scope of Work (Chec	k all that ap	ply)				20 //2/2/2/										
											nment with	Nega	ative	Pres	sure)
≥3 sf or ≥3 lf			\boxtimes	- 500.70		ation			\boxtimes	Mini-Enclo						
≥160 sf ≥260	lf			Der	molit	tion			Ц		Procedures			Б.		50000
									Ļ	Non-Exem	pted and No	on-r			-	
	ation of s-Containing	a	IS I Norm	ocat		4		Description Asbestos-Con			Amount (Specify	L	ADa	ateme	enti	ype
	ial (ACM)	9		olely		u	,	Material (A			SF or LF)		-		▣	
	ABATED		Maint			or	(i.e., thermal s		3	5	- 1	Ren	₽	Ca	l in
	Facility		Custo			f?		ulation, surfac				- 1	Remova	Repair	Encapsulate	Enclsoure
	(13)		Vaa	(12)	N/	- I	or	other miscella	aneou	5)			<u>a</u>	0.00 m	ate	6
			Yes	No	IV	A					000.05	\rightarrow				 -
C-112				무	+			Nail Crea			280 SF	-	片	\boxtimes	믐	ዙ
A-215	-215						Nail Create 420 SF						4	Η	ዙ	
												\rightarrow	井	井	무	ዙ
						-						-+	Η	井	Η	ዙ
			님	H	1-							-+	Η	Η	Η	H
None of Decistored V	Manta Havile]	JC	ubic Yards	Nome	of Registe	red Landfill			ш	Ш	
Name of Registered V	vaste Haule	3 F		0.000000		ID No.	27	Waste	INAIII	o Negisie	ieu Lanuilli					
Bristol Environme	ntal. Inc.			323733	3706			Cu Yd	GRO	WS Land	Fill					
City, State								isposal Date	City,	State			-			
Bristol, PA						4/19/13 Morrisville, PA										
Completed By (Print or Type) Title						Signature Date										
Gino Pizzigoni	, , , ,				oje	ct	1	4. 0) -	/	. 8	1000	141	13		
- III I ILLIGOIII	ino Pizzigoni						Lino Pizzigoni / 4/4/13									

30315

Date of Notification (1)			Name of Building Owner/Operator (2) Princeton University					2013 APR -9				
04/08/13			Princeton	University				-0/3	100			
Month/Day/Year									"4"	0		
Agency Notified	Type Notification		Street Ad	dress				- 5- 5		AM		
EPA	x Initial		P.O. box 2	William Co.					1770			
DEP	Notif	cation	City, Stat	e, Zip Code				- 7	100			
DCA	Ameno	led	Princeton	NJ 08543					-C4/2	520 Z		
DOH	Notif	cation	Name of C	Contact		193	Telephone Nu	ımber		(?,		
	Cance	lation	Robert O	tego								
			FACILI	TY INFORMAT	ΓΙΟΝ		_		A1104-03 E2 VIII-13			
Name of Facility Where Abate Princeton University Baker	그 이번 회사이라고 없었다면서 전시에 대한 경우 없었다.	ce (3)					(K12)					
Street Address						0.0000	pter 8 (Other (i. e. Private &					
Princeton University - Elm Dri	ive						ings, homes, et		erciai			
Trinceton Chiversity - Din Di							# of Floors	Bldg.	Aga			
City (5)	Count	(6)		County Code	(7)	10000	2	50+	Age			
Princeton		(0)		(STATE USE ONL		Current Use (Pr			D			
375 - 1712 - 1712 - 1713 - 1715				(0.1112 002 0112	-,	University	ioi ii being uei		,			
Name of Monitoring Firm Hire	ed by Building Ow	ner (8)		ASCM No.	Name	of Abatement Con	tractor (9)					
Pennoni Associates Inc				1		iated Specialty Con						
Street Address						Address						
515 Grove Street Suite 1B						Crue Avenue						
City, State, Zip Code Haddon Heights NJ						State, Zip Code Wills, PA 19342						
Project Manager of Monitorin	g Firm		Telephone	Number	Teleph	none Number		Licen	e Numb	er		
Alan Lloyd			856-547-0	505	610-36	64-9622		1103	1			
Scheduled Start Date (10)	S	ched. Con	mpletion Date	(11)	Name	of OSHA Monitor						
04/22/13			04/23/13		Criter	ion Labs						
Month/Day/Year		M	Ionth/Day/Yea	ar	11							
Occupancy Status During Abat					Street	Address						
Facility Closed/Vacated			batement		3370 P	rogresive Drive						
x Abatement Performed	Outside of Normal	Facility			City, S	tate, Zip Code						
Hours - Describe:	8:00 AM - 5:00 PM	Л			Bensal	em PA 19020						
Other - Describe:												
Scope of work (Check all that a	nply)				Ш	Full Containmen	t with Nagative	Procen	P0			
Demolition	PP-37	x	Renovation	n	x	16						
x > 3 sf or > 3 if		1.275			x	Mini - Enclosure Glovebag Proced						
>160 sf or >260 lf					^							
					_	Non-Friable Proc		.,.				
I marking of	I.						Ab	atemen				
Location of Asbestos - Containing	Loca		And the Control of th	ription of				1	E	E		
Material (ACM)	Norm Use	*		os-Containing		Amount		l .	N	N		
TO BE ABATED	Sole		W. C.	rial (ACM) ermal systems		(Specify SF or	10000000	R	C	C		
In Facility	by M						M	E	A	L		
(13)	tenan		100	surfacing, VAT miscellaneous)	,	LF)	0	P	P	0		
(13)	Custo		or other	miscenaneous)			V A	A	S	U		
	Staff	DAGE VAN			- 1	0	L	R	L	R		
	Yes N		1				"	I A	1.	E		
Basement	x	1	pipe insula	tion		9 LF	x					
	+-							-	-			
MAN HARMAN												
					T							
Name of Registered Waste Hau	ler	NJDI	EP Waste	Cubic Yards		Name of Register	ed Landfill					
			er ID No.	of Waste		l ame of register	cu Danum					
Horizon Disposal				2	2 GROWS							
City, State		Disposal Date	ate City, State									
Frenton NJ				As needed	The state of the s							
Completed By (Print or Type)	***************************************		Signature Date 4-8-1									
Mark Goshow		Title Proie	ct Manager	f	Signatu	GIAMM.	1.		Wir.	-17		
		. roje	et manager		111	DU JO	un		10	()		