(K# 2623

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

Date of Notification (1) 4/10/15			1	ame of E	Building O	wner/O	perator	(2)				-						
Agencies Notified	Type Notification			Street Address								A.D.	1	F.	II.			
	Command of the Comman		1	16 Ocean Ave												- 1		
× EPA × DEP	X Initial Amended		City, State, Zip Code									7						
X DEP X DOL	Amendment #		Manasquan, NJ 08736															
	Emergency (ir	cluding		Name of Contact Telepho								ho Number						
DOH DCA	justification) Cancellation		1	like		reseptio Number												
					ITY INFO	DRATI	OM.	~				-						
Name of Facility Where	Abatement is Taking	Place (3)		PAGIL	it info	NINIPE I II	UN	Type	of Facility (4	)		-		-	-			
Stiles Residence		. ,																
Street Address									School (K-12 Subchapter l		er th:	(-12)						
16 Ocean Ave								x	Other (i.e. pr					lings,	home	es,		
City (5)		-							etc.) e Feet	T # of	Flor		1 B	dg. A	ne .			
Manasquan								2100		1	1 100		6	200	ge			
County (6)			Co	ounty Co	odo (7)				nt Use (Prio	1.	- d	olishe						
Monmoth					SE ONLY)				ience	i ii beii	ig a	MSHE	iu)					
Name of Monitoring Fin	n Hired by Building O	wner (8)	4	ASCM	No.		Name	The state of the s		tractor	(9)	-				-		
	, , , , , , , , ,	(-)		ASCM No. Name of Abatement Contra Ace Insulation Co., Ir							(0)							
Street Address								Addres				-			*****			
									se Road									
City, State, Zip Code								State, Zi										
Oity, Otato, Zip Oode							100000000000000000000000000000000000000	E4400	k, N.J. 07	722								
Project Manager for Mo	nitorina Firm		TTe						phone No.   Lic					c ie No.				
Project Manager for Monitoring Firm				1					2-294-1757 00									
Start Date (10)		Scheduled	Compl						ame of OSHA Monitor									
4/13/15	i i	4/17/15	oomp.	OUOII D	uto (11)	1	Ivanio	0, 00,	ir wonto									
Occupancy Status Duri	ng Abatement (Check	Only One)	-				Street	Addres	s			-						
	7.	150																
Abatement Perform	cated During Entire Pe ned Outside of Norma	l Facility H	itemer ours	nt			City S	State 7i	p Code			-						
× Other – Describe:						_	Only, C	, Luito, Li	p oodc									
Scope of Work (Check	All That Apply)						-					-	_					
[remail		П о					Γ	7	01-1									
≥3 sf or ≥3 lf   ≥160 sf or ≥260 lf		distribution .	ovation nolition						Containme i-Enclosure		Nei	ve Pr	essu	re				
		1	1011101					Glo	vebag Proc	edure								
							5	1 Nor	n-Exempted	(*) an	d No	riable		cedur				
		2070/03/03	cation	200					1						ement pe			
Locatio							Description of s Containing Material (ACM) hermal systems insulation,							1				
Asbestos-Containin TO BE Al		Maint									Amou (Spec		70		En	m		
In Facility			Custodial Staff?			Staff? surfacing, V.			AT, or		orl		em	Repair	Encapsulate	nclo		
(13	)	(12)				other n	niscella	aneous)					Removal	ᆲ	sule	Enclosure		
		Yes 1	No	NVA					}				-	}	6			
outdo	ors		_	х			siding			2	100		х					
			-	-			9							-	-	-		
			1															
Name of Registered Wa	aste Hauler			DEP Wa			Yards		Name of I	Registe	ered	ndfill		L		-		
Ace Insulation Co.,			28852350	uler ID I	No.	of Was	ste		Chrins									
			120	086		3 Diana	and Dark											
City, State	areev					4/17/	sal Date	-	City, State									
Colts Neck, New Je	sisey	Title							Easton,	, FA		Def						
Completed by Bree McGuire		Title Secreta	any T	reserii	rer	15	ignatur Lij					Dat	e 10/1:	5				
Diee McGuile		Cocrete	~. y '	. casul			19		Y			7/	. 0/ 1					

# (K# 2424)

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

Location of Asbestos-Containing Material TO BE ABATED In Facility (13)  outdoor house and gard	age	Used Main Custo	NJDI	ASDE (i.e	cubic Ya of Waste 2  Disposal 4/29/15	ning Ma ystems in ng, VAT, scellaned ding	terial (ACM) nsulation, or ous)		ifili Date	Removal	Repair	Encapsulate	Enclosure			
Start Date (10) 4/22/15  Occupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outside Other – Describe: 7am-7pm  Scope of Work (Check All That April 23 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material TO BE ABATED In Facility (13)	age	Used Main Custo	NJDI Haul	ASDE (i.e	cubic Ya of Waste 2	ning Ma ystems in ng, VAT, scellaned ding	Name of R	(Specifical Sir or Line 1100 s			Repair	Encapsulate	Enclosure			
Start Date (10) 4/22/15  Occupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outside Other – Describe: 7am-7pm  Scope of Work (Check All That April 23 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material TO BE ABATED In Facility (13)		Used Main Custo	itenance dial Stat (12)	e/ Asbe ff? (i.e	stos Contai e. thermal s surfacir other mis	ning Ma ystems in ng, VAT, scellaned	terial (ACM) nsulation, or	(Specif SF or L			Repair	Encapsulate	Enclosure			
Start Date (10) 4/22/15  Occupancy Status During Abatem Facilify Closed/Vacated During Abatement Performed Outside Other – Describe: 7am-7pm  Scope of Work (Check All That April 23 sf or ≥3 if ≥160 sf or ≥260 if  Location of Asbestos-Containing Material TO BE ABATED In Facility (13)		Used Main Custo	itenance dial Stat (12)	e/ Asbe ff? (i.e	stos Contai e. thermal s surfacir other mis	ning Ma ystems in ng, VAT, scellaned	terial (ACM) nsulation, or	(Specif SF or L			Repair	Encapsulate	Enclosure			
Start Date (10)  4/22/15  Occupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outside Other – Describe: 7am-7pm  Scope of Work (Check All That April 23 sf or ≥3 if ≥160 sf or ≥260 if  Location of Asbestos-Containing Material TO BE ABATED In Facility (13)		Used Main Custo	itenance dial Stat (12)	e/ Asbe ff? (i.e	stos Contai e. thermal s surfacir other mis	ning Ma ystems in ng, VAT, scellaned	terial (ACM) nsulation, or	(Specif SF or L		Removal	Repair	Encapsulate	Enclosure			
Start Date (10)  4/22/15  Occupancy Status During Abatem  Facility Closed/Vacated During Abatement Performed Outsid Other – Describe: 7am-7pm  Scope of Work (Check All That Apple 23 sf or ≥3 lf  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material TO BE ABATED In Facility	(ACM)	Used Main Custo	itenance dial Stat (12)	e/ Asbe	stos Contai thermal s surfacir	ning Ma ystems i	terial (ACM) nsulation, or	(Specif		Removal	Repair	Encapsula	Enclosure			
Start Date (10)  4/22/15  Occupancy Status During Abatem Facility Closed/Vacated Durin Abatement Performed Outsid Other – Describe: 7am-7pm  Scope of Work (Check All That Ap ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of	(ACSA)		Solely I	by .	Desc	ription o	f		- 1		1					
Start Date (10)  4/22/15  Occupancy Status During Abatem Facility Closed/Vacated Durin Abatement Performed Outsid Other – Describe: 7am-7pm  Scope of Work (Check All That Ap	Location of Norm  Ashestos Containing Meterial (ACM)  Used St				on by Description of						Abate	e ement /pe				
Start Date (10) 4/22/15 Occupancy Status During Abatem Facility Closed/Vacated During Abatement Performed Outsid Other – Describe: 7am-7pm	oply)		enovatio emolition													
Start Date (10) 4/22/15	ng Entire F de of Norm	Period of Al	hatamar	nt	L	Street A	ddress									
A31 3000 S-00000000000000000000000000000000	4/22/15 4/29/15				)	Name o	f OSHA Monitor					Adlina	-			
Drojoot Monogou for Maril 1					Telephone No.						e No. 9					
City, State, Zip Code						City, Sta	ontrose Road ate, Zip Code Neck, N.J. 07		_			-				
Street Address	7			Ace Insulation Co., Inc. Street Address												
Name of Monitoring Firm Hired b	y Building	Owner (8)		ASCM No.		Name o	ge									
County (6) Monmouth			(5	county Code (7	[h]	Current Use (Prior if being o Vacated house and ga				olished)						
City (5) Neptune	eptune				etc.) Square Feet # of F							Bldg. Age				
Street Address 3029 West BangsAve							School (K-Subchapte  Other (i.e.	12) er 8 (Other ti private & co	K-1		ildina	s hon	200			
Name of Facility Where Abatem VB Heritage LLC property	ent is Takir	ng Place (3	3)	PACILITY	VFORMATI	ON	Type of Facility	(4)								
□ DCA □ Ĉ	DCA Cancellation					Name of Contact Doug FACILITY INFORMATION										
	mendmen mergency	(including	$ \lfloor$	Long Branc	h, New J	Kin	La									
I≚ DEP □ A	nitial Amended			City, State, Zip	· ·											
	775000000000000000000000000000000000000					Street Address 1026 Ocean Ave										
Date of Notification (1) 4/13/15				Name of Build VB Heritage	ing Owner/O	Operator	(2)		W to the	0-2- X						

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

014005949

D&S Proj. #: 2015-121

ASB-41

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

Date of Notification (1)	III	lame of Bui	ilding Owr	er/Operator (2	)								
0  4  /0  9  / 1  5		john & m	ary ann p	3.0									
Agencies Notified   Type Notifica   EPA   Initial	tion	treet Addre	ess			97							
DEP Amended		66 ball ro	oad										
Amendment #	:   0	ity, State, 2	Zip Code										
DOL Emergency		mt. lakes	s, nj 070										
DOH (including justification)	N	ame of Cor	ntact	Telepho	Number								
☐ DCA ☐ Cancellatio	n	john & r	nary ann	pendleton									
			FAC	ILITY INFORM	MOITAN								
Name of facility where abatement	is taking pla	ace (3)					Type of Facility	)	·				
john & mary ann pendleton							Scho	(K - 12	50 		0.221		
Street Address							☐ Subc	oter 8 (			-12)		
							Bldgs	lomes,		Jiolai			
66 ball road							Square Feet	of Floo	ors	BI	dg. A	.ge	
City (5)	Cour	nty (6)				nty Code (7) te use only)							
mt. lakes	MC	RRIS			(Sta	te use only)	Current Use (	e ( or if being demolished)					
Name of Monitoring Firm Hired by				ASCM No.	-	Name of Abatement	Contractor (9)						
e compression i consessione e consession i consession i consessione e consession e consession e consession e c	-					D & S RESTOR	ATION INC						
Street Address					-	Street Address	ATTION, INC.						
						20 California A	ve.						
City, State, Zip Code						City, State, Zip Code		46					
2 <u></u>						Paterson, NJ 07	503						
Project Manager for Monitoring Firm	n	Ph	one Numb	er		Telephone Number		License					
						973-345-8020			01169				
Start Date (10)	Sched	I. Completic	on Date (1	1)		Name of OSHA Mon							
04/20/15	05/14	1/15				D & S Restorati	on, Inc.						
Occupancy Status During Abateme						20 California Av	/eniie						
Facility closed/vacated during Abatement performed outside						City, State, Zip Code	chac						
Describe: NORMAL I	HOURS	* .	- 1		-	Paterson, NJ 07	503						
Scope of Work (check all that appl		*		-			Full Containment	negative	e press	ure			
	Renovatio	n ·	A - 60		.8		Mini-enclosure	, oga, r	, proce	, a. o			
≥160 sf or ≥260 lf	Demolition			*			Glovebag proced	1		3			
		n normally u	used solel	vI		. Ц	Non-Exempted (	nd Non	-friable	Proc	E	1	
Location of asbestos-containing	by mainte	enance/cust		1	on of a	sbestos-containing	Amount		e	е	n	E	
material (acm) to be	staff(12)		T	material		spesies containing	(Specify	or	m o	p a	c	n c	
abated in facility (13)	Yes	No	N/A				LF)		v e	i	р	L	
BASEMENT		X		PIPE INSU	JLATI	ON	230 1 ft	-	×			$\vdash$	
												盲	
Registered Waste Hauler		EP Hauler II		ubic Yards of	Waste	Name of Registered		2022					
D & S RESTORATION, INC.	135		Disposal D	4 yds	-	TULLYTOWN,	KESOURCE R	COVE	ΚY				
City, State PATERSON, NJ 07503			04/21/1			City, State TULLYTOWN,	РА						
Completed by (Print or Type)	Title			Signature		TOLLI TO WIN,	***	Date		-			
BOGDAN JOLDZIC	PRESID	ENT						04/09	/ 2015	i			

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

rx605947

D&S Proj. #: 2015-120

### State of NJ

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

Date of Notification (1)	Name o	Name of Building Owner/Operator (2)															
Agencies Notified   Type Notificat	ion	CITY OF ELIZABETH															
☐ EPA Initial	Street A	ddress					21			111							
DEP Amended		'INFIELD PL	LAZA					-									
DOL Amendment #:		ate, Zip Code										30-70					
Emergency		ZABETH, NJ		Service Service													
justification)	Name of	f Contact	Telepho	Number													
DCA Cancellation	ANT	THONY BAT	TITTA														
		FAC	ILITY INFORM	ATION	V		•										
Name of facility where abatement i	s taking place (3)					$\top$	Type of Facility										
CITY OF ELIZABETH			ăi				Scho	(K - 12 oter 8 (0		han k	(-12)						
Street Address						7	Other	rivate/C	comme		,						
50 WINFIELD PLAZA						11	Bldgs	omes,			I-I 1						
City (5)	County (6)			Cou	inty Code (7)	-	Square Feet	of Floo	rs	В	ldg. A	age					
, (e)					ite use only)	11	Current Use (I	r if beir	na den	nolish	ed)						
ELIZABETH,	UNION						Carroni CCO (i	I or if being demolished)									
Name of Monitoring Firm Hired by	Bldg. Owner (8)		ASCM No.	$\neg$	Name of Abatem	ent Co	ontractor (9)										
TANDM ASSOCIATES			N/A		D & S REST	ORA'	TION, INC.										
Street Address					Street Address												
265 INDUSTRIAL WAY WE	EST				20 California												
City, State, Zip Code					City, State, Zip Co	ode			16								
EATONTOWN, NJ 07724			·	_	Paterson, NJ		)3										
Project Manager for Monitoring Firm	1	Phone Numb	er		Telephone Numb			icense		er							
KEVIN BURNS		732-671-64	7.000		973-345-80			1169	_								
Start Date (10)	Sched. Com	oletion Date (11	1)		Name of OSHA Monitor D & S Restoration, Inc.												
04/22/15	04/24/15				Street Address	Tatioi	i, mc.		_								
Occupancy Status During Abatemer	nt (Check only one	e)			20 California	Aver	nue										
Facility closed/vacated during					City, State, Zip Co												
Abatement performed outside Describe:		hours-			) X3												
Other-Describe: AFTER HOU	JRS 5:00 PM			_	Paterson, NJ	0750	)3										
Scope of Work (check all that apply	y)					Fu	II Containment	egative	press	ure							
$\boxtimes$ >3 sf or >3 lf	Renovation						ni-enclosure										
≥160 sf or ≥260 lf	Demolition						ovebag procedu on-Exempted (*	nd Non-	friable	proc	edure	2					
Location of	Is location norm		1				T		R	R	E	T					
asbestos-containing	by maintenance staff(12)	/custodial			sbestos-containing	g	Amount	1202	e m	e p	n	E n					
material (acm) to be abated in facility (13)	Yes No	o N/A	material (	ACM)			(Specify LF)	or	0	a	a	C					
AND THE SECOND S	100	IN/A			- 21122			_	v e	l r	р	_					
BSMNT STAIRWELL STORAGE RM					ON/DEBRIS		9 L FT										
BASEMENT TELEPHONE RM IN G-8			PIPE INSU	LATI	ON (WRAP&C	UT)	2 L FT					10					
											Ш						
									4	ᆜ	닏	11					
Registered Waste Hauler	NJDEP Hau	ulor ID# 1.C	ubic Yards of V	Vasto	Name of Registe	rod I	andfill	-	.[]	Ш	Ш						
D & S RESTORATION, INC.	13506		yds.	*431C	TULLYTOW			OVER	RY								
City, State		Disposal D			City, State	V 11110-00											
PATERSON, NJ 07503		04/23/1:			TULLYTOW	VN, P	A										
Completed by (Print or Type) BOGDAN JOLDZIC	Title		Signature					Date	100:-								
ASB-41	PRESIDENT  Do not use this f	orm for ashesto	s licensure eve	emnter	d activities			04/08	/2015								
ON 11 1-14 1	- 0 1101 400 11110 1	orrest to a dobboott	O HOURIDAILO GAG	- INDICE	a adultitiod.												