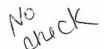
Date of Notification (1) [ 04 ] ( 16] / [ 12 ]			Name of Building Owner/Operator (2)  Hoffmann-LaRoche								
Agencies Notified ( ) EPA	Type Notification () Emergency	U 1/4 SESS	reet Address 40 Kingsland Street	ord organization of the state o				Marine Taller for Jan. Line			
( ) DEP (x ) DOL (x ) DOH	(x ) Initial Notification () Amended		ity, State, Zip Code utley, NJ 07110		AFTI ZO	2012		The second second second			
( ) DCA	Notification ( ) Cancellation	В	ame of Contact ehrami Irani	Ĺ	Telephone Nun	iber o		,			
Name of Facility Where Abatement Building 39  Street Address "same as above"	nt is taking Place (3)	FAI	CILITY INFORMATIO	T { {	ype of Facility (4) } School (K-12) } Subchapter 8 (oth X }Other (i.e.,privat cial buildings, h	e & come	er-				
City (5)	County (6) Essex	A	anty Code (7) ATE USE ONLY)		quare Feet   # of Flourrent use (Prior if be	2	dg. Age				
Name of Monitoring Firm Hired by Owner (8) Owner EHS Dept. or		No.	Name of Abatement	Contractor	boiler house (9) POW/R/SAVE In	c.					
Street Address	((SE West Chans To		Street Address 2	7 West St	reet						
Scheduled Start Date (10) Sche [04]/[30]/[12] [0	29-5649) ed.Completion Date 05]/[11/[ 12 ] *	(11)	City, State, Zip Code Bloomfield Telephone Number (973) 680-0088 Name of OSHA Mor	d, NJ 0700	License Nur	nber 35	7		<del></del>		
Occupancy Status During Abateme  [ ] Facility Closed/Vacated During of Abatement	ing Entire Period		Street Address			2		2	14		
[ ] Abatement Performed Outsic Hours - Describe:		_	City, State, Zip Code								
Scope of Work (Check all that apple [x] Demolition [x] $\geq 3$ sf or $\geq 3$ lf [] $\geq 160$ sf or $\geq 260$ lf		nent wi		[ x ] Mi (x )Glo	ower ni-Enclosure vebag Procedure Friable Procedure						
20 2.00	. Is			9			Abateme		*****		
	Location Used Solely By Maintenance/ Custodial Staff (12)	2.	Description of Asbestos-Containing Material (ACM) (i.e., thermal system insulation, surfacing, V or other miscellaneou	s AT,	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 N C L O S U R		
Boiler #9	Yes No NA	Surfac	e area (penetrations)		100 lf	x			Е		
Boiler # 11			e area top side		20 sf	X.					
Name of Registered Waste Hauler Waste Management	NJDEP Waste F ID No 304597	Hauler	Cubic Yards of Waste		of Registered Landfill		Grand (	Central			
City, State Morrisville PA	The state of the s		Disposal Date	City, S							
Completed By (Print or Type) Sharon Hendee * start and completion dates subject	Title Sec 17	ras		Inch [		Date 4					

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		(3,111.	sugut to	MJAC8	:60 and 12:120)		& F OF	TI FLO	Philipping and	4
Date of Notification (1)	18-12,	4 2 de 2 de	Ol	Δ	Owner/Operator (: BRIDINS	MUA	) E C E	1 1/ [	L. J. J.	
Agencies Notified	Type Motilication		Street	ddross	hrockmo	RTON L	ANGPR	i ghabi	1.55 h	1 1
1XTPA	Initial		700000	ie, Zip C	nde	And the second s	1.6.7	EUIZ		- 1
1 XDIP	Amended Amended		Chy, Sie	1. A	BRIDGE	NZ	5887		•	
CYDOL.	Emergency (inc	luding	Name o	Contact	,					İ
TX DOLL	justification) [7] Cancellation		14thm, O	MA	224	L	The same and property and the great			
[,] DCV	Land to the second second second		130.01	No. Company of Table	ORMATION	S. S	And an address of the second			-
		Olava (3)	7.17.71		an open around at the condition of	Type of Facility (				
Name of Facility Where	Abatement is Taking	. A			Angeles - 100 - 10	School (K-12				
	1045 M	UN	10 - 11 - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1	antyrije <b>t</b> av - Krallet	and a supplied to the superior supplied to the superior s	ChOther (i.e., pr	ivate & commercial	buildings	Æ	
Street Address PA	COSPECT A	1//-		*_0 **** ***********		homes, etc.)	T # of Floors	1 Bldg. /	A PROPERTY AND	
the second transport of the second se		1 2000	er angera approved	ay yang di di di 1949		Square Feet	1 0 1	65		
City (5) 32	1066	April 2 - p - 18 - 18 - 18 - 1		- Jan Street Berry	e oppopulation and a continue to the continue of the continue	Light in the property of the	or if being demolish	ned)		
County (6)	- West G	eran - Meli er in Sues.	USE C	y Code (i SMLV)	7) (STATE	la/ a	Pr- TREATME	in s	1.111	- ::
	= \$3.V	e agraphi salah bilangan kanan da	1		Many of Abaten	Contractor (Q				
Mame of Monitoring Fit	m Hired by Duilding C	wner	ASCM N	l().	A C C	TUSULAT	Lev Cu	10	Ĺ	
(8)	management to the contract of		. Last your		Ormat Addinge					
Street Address	•1.**				95 Mp	NIRONA 1	3.0	4 - 12 - 1 - 1 - 1 - 1 1 - 1 - 1 - 1 - 1 - 1	-95551	
	general generalise to first that the second	a	e process and annual control of the	ga kanning dan pangang ga kanning dan pangang	City, State, Zip C	Corlo ,	e manage			
City, State, Zip Code					COLTS	Necle (V)	0772.2	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
Project Manager for M	gle content Fign	T	dephone f	do.			License No. <u> </u>			
Project Manager for W	4				1731 721	[ 1 1 3 1	1			
Start Date (10)	School	ided Comp	detion Dat	e (11)	Name of OSHA	Monitor	1 cu Tr	<b>.</b>		
111 07-17	1 4	= 5-1	12	Section of the sectio	Street Address	N VILLET	Marie and Services		,	
1 Occupancy Status Dr	ring Abatement (Che	ck only one	r)		Street Address	STRUM R	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )			
1º1 Capille Closed/A/a	rated During Entire Po	giod of Aba	tement						*:	
[ ] Abatement Perform	ned Outside of Norma	Tacinty to	Mus		COLIT	NECLE	<u>vS_22</u>	(2) - to a	1.1.1	1.
[ ] Other - Describe:		A Comment	nang managan menang	part of the second	Spile and Contraction of the Contraction					
Scope of Work (Chec	k all that apply)	00000000000000000000000000000000000000			[] Full Co	ontainment with No aclosure	gauviri rosauri			
3 st or ≥3 lf ≥160 st or ≥260 lf		Benov	ration lition				on-Friable Procedi	uce .		
//≥160 st or ≥260 ll		La Commo			Mon-1	kountea (.) mia ia		741763	tement	
		la Loc Nom							ype	1
Location	nn of	Used Su	olely by		Description stos Containing M	of storial (ACM)	Amount		9	10
Asbestos-Containir	ig Material (ACM)	Mainter		Asbe fi.e	thermal systems	insulation,	(Specify SF or LF)	Remove	8 8	Enclosure
TO BE A	SATER :ility	Sta			surfacing, VA other miscellan	l, or	St th tall	2 1	Capellelle	8.0
(13		(1)	()		Out and and	•			io.	
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				WA	NOW DOOR	eavile	1.70 176	14	1	
The second secon	municipal de la companya de la compa			EXPA	NSION 30	LT.	200 42	1,1		1
- 4 - 5 - 1 - 200 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	e company among disposed with the experience of the company of the			Re		STATUTE OF STREET SIGN	1000 5.2	-	1	
The state of the s	the second secon	1			Contract and Association	and the second s	1.75-37-37-37-3	J., F.		
Name of Registered	Macte Hauler	Lamanha	TRUDER		Cubic Yards		gistered Landfill			
		· En	Hauter II	O No.	of Waste	(aR	0 W 2		i mar	1 400
A service of the second second	SULATION		1.7.0	e division	Disposal Date	, Çily, State	(,	$\rho$	A	
City, State	EIK NIT	13	1)2	L	5-5-1	the state of the s	191000	₩	k*	
Completed By	444 - 45 Thi	Tarasa Mad lo			Signature	la la la	1.1.	18-1	2	
Combined ch	ALL I	003	171 C	1/4	1700	15 ( 1		T() i.	1.74	
Transaction of the second	Consider the second section of the second second	or an analysis of a sector field	and the state of t		. U	tast activities				

		pica Bac. (Pars	ATION OF AS	low Jorsey DESTOS ADATEN C R:60 and 12:120	Man DE		
Date of Modification (1)	4-18-12		300	ing Ovmer/Operator エニーしん(		APR 202	012
Agencies Molified  LEPA LEPA LEPA LEPOIL LEPCA	Type dotilication	( iii. (including )	Street Address 65 City, State, Zip CLL/ Name of Confe	KINGSLA COOK TON A	1212 AVE	ASBESTOS CONTY LICENSING	101.3
			LVCII ILA III	FORMATION	vest een oppen bill	738	
Name of Facility Where 3 200		1		the control of the co	homes, etc.)	) } (Other than K-12 ivote & commerci	al buildings,
	W YORI	(			Square Feet	1 of Floors	Bldg. Age \$5
County (6)	J		County Code USE ONLY)		A/	or it being demole	
Name of Monitoring Fire (8) Street Address	n Hired by Buildin	g Owner 7	ASCM No.	ACE Street Address	nent Contractor (9)	TAN CO	ING
City, State, Zip Code				City, State, Zip C	NICELL NI	erner	
Project Manager for Mo	· .		hone No.	Telephone No.	1757	Liconse No.	<u> </u>
Start Date (10)  L - 27-12  Occupancy Status Duri		neduled Completi - 5-9 neck only one)	ion Date (11) L - /2	Name of OSHA	Monitor MSWWA 170 N	CE IN	٠, ٠,٠
[] Facility Closed/Vacal [] Abatement Performe [] Other - Describe:	lod During Entire I d Quiside of Nour	<sup>J</sup> eriod of Abaten nat Facility Floris		City, State, Zip C	od TRISTS RI	). US 071	772 <b>%</b> -
Scope of Work (Check		William Control	, 1 (1) 1 (2) 1 (3) 1 (4	LEGRAL D	/ V. 1041		
253 st or ≥3 li   2160 st or ≥260 li		Renovation		[ ] Mini-End	aa Procedure	ative Pressure 	re
Location		ls Location Monwelly Used Solely	by	Description of			Abatement
Asbestos-Containing I FO BE ABA' IN Facility (13)	ŒQ	Maintenance Custodial Staff? (12)	e/ Asbe: (i.e.	stos Containing Mot , themat systems it surfacing, VAT, other miscellance	nsulation, or	Amount (Specify SF or LE)	Repair and Repair and
				PIPE		150 LF	
					ere visit out out in the		
Name of Registered War		1 T T T T T T T T T T T T T T T T T T T	DEP Waste der ID No.	Cubic Yards of Waste	Name of Regist	ered Landill	
ARZ INSU City, State Celetis NE	WALLEY C	a ing f	1.48 k.	Disposal Date	BETHL	ENAMPA	RA.
Counteted By State State	رك   ا	K1 15	oun	Stephenological	: Gratil		18.12



Date of Notification (1) 03-30-2012		Name of Building Owner/Operator (2)								3				
Agencies Notified	Type Notification			Street Ac	idress ARK AVE	ENUE			Amm 0			A CONTRACTOR OF THE PERSON OF	Townson.	
☐ DEP ☐ DOL	☐ Initial ☐ Amended Amendment #				te, Zip Co AM PARK		07932		APR 2	0 20	12-		7	
☑ DOH □ DCA	☐ Emergency (i justification) ☐ Cancellation	ncluding		Name of MANNY	Contact DE LA	TORRE		L	/ Tolonbon		êr			
Name of Facility Where	Abatement is Taking	Place (3)		FACIL	ITY INFO	RMATI	ON	Type of Facility	(4)	nd (Fizi				
CLEARVIEW CINEM		(-)						☐ School (K					1.79	
Street Address 350 MILLBURN AV	ENUE				and Designation				er 8 (Other tha . private & com		build	dings,	hom	es,
City (5) MILLBURN								Square Feet 5.000	# of Floor	rs		ldg. A	ge	
County (6) ESSEX	3.			County C (STATE U	Code (7) ISE ONLY)			Current Use (P	rior if being de	molishe	d)			
Name of Monitoring Fir MDG ENVIRONMENT	m Hired by Building C	wner (8)		ASCM	No.			of Abatement C ENVIRONMENT		ES				
Street Address 100 MAPLEWOOD I	DRIVE							Address 2 QUEENS PI	LAZA SOUTH					
City, State, Zip Code MAPLE SHADE, NJ	08052						City, S LONG	tate, Zip Code ISLAND CI	TY, NY 111	01				
Project Manager for Mo	onitoring Firm		T	Telephon 609-76	ne No. 60-1540			one No. 349-0900		nse No. 853			-	
Start Date (10) 04/16/2012		Scheduled 04/26/2			Date (11)			of OSHA Monito			******			
Occupancy Status Duri	ng Abatement (Check	Only One	2)					Address						
IX Abatement Perfor	cated During Entire P med Outside of Norm REMOVE ACPI FR	al Facility I	Hours	3			City, S	ERRINE AVEN	· ·					
Other – Describe: Scope of Work (Check	FACILITY OPENS						SOUT	AMBOY, NJ	08879		-1			
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf	жі ттас Арріу)		enova emoli				N N	Mini-Enclosu Glovebag Pr	ocedure					
		1 1						Non-Exempt	ed (*) and Non	-Friable		Abate		t
Location	on of	No	.ocat orma	lly		Des	scription	of					ре	
Asbestos-Containin TO BE Al In Fac (13	g Material (ACM) BATED cility	Used Main Custo Yes	itena	nce/		tos Cont thermal surfac	aining M	laterial (ACM) s insulation, T, or	Amoun (Specify SF or LF	y	Removal	Repair	Encapsulate	Enclosure
BASEMENT		163	X	I N/A	PIPE	INSUI	ATION	·	300 LF		x	-		
BASEMENT		+-+	Х		DUCT	FLUE			20 SF		х			
	** *** *** *** *** *** *** *** *** ***												0	
112														
Name of Registered Wa	aste Hauler			JDEP W		Cubic		Name o	f Registered La	andfill	- 10	7		
ATC ASSOCIATES				lauler ID I 4644PA			YARDS		ERVA ENTER	PRISE	s			
City, State SHIRLEY, NY 119	67	1576	16				sal Date 5/2012	City, Sta WAYNE	ate ESBURG, OH	44688	3		10 ed 10 ed 10 ed	
Completed by ARIC DOMOZICK	30 -	Title VP BUS	SINE	SS OPE	RATIONS	100000	ignature	64		Date 04/		201:	2	

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

Check #6399

Date of Notification (1	1) April 18, 2012				of Building of America	Owner / Op	perator (	(2)		a) (05-5)		, v	20-	
Agencies Notified	Type Notification	on		Street	Address	Just 14 210 WWW.	j	1. 1. 16	r is sy	Service Service				
□EPA □DEP	EMERGENCY			480 Ho	es Lane		The second second	n) E G		VEN	A CHARLES			
⊠DOL					tate & Zip C		- 1	mi						
⊠рон	Amend Amend	led Iment#		Piscat	away, NJ (	8854		1 III API	R 20	2012	1			
DCA	Cance				of Contact				07.00.00M7	age and a character was the	phon	e Nu	mbe	r
				FA	CILITY IN	FORMA	TION	ASHE	STOS CONTI LICENSING	KUL & T	-			
Name of Facility Whe Bank of America	ere Abatement is	Taking Place	(3)				of Facil	ity (4) (K-12)	an is a commenter		neta-	ŧ.		
Street Address	***************************************							pter 8 (Other th	nan K-12)					
480 Hoes Lane								i.e., private &					tc.)	
City (5)	Ŧ					Squa	re Feet 80,00	Section 19 Section 19	Floors 3	Bldg	. Age	75		
Piscataway					× -	Curre Bank	ent Use	(Prior if being o		)				
County (6) Middlesex		County USE O		(7)										
Name of Monitoring F Arcadis US Inc.	Firm Hired by Bui	Iding Owner (8	3)		ASCM No		e of Aba itech, In	tement Contra	ctor (9)					
Street Address 35 Columbia Road						1450769545	t Addres							
City, State & Zip Cod			200		0			Zip Code			-	1000		
Branchburg, NJ 088 Project Manager for N		-	Tele	phone N	lumber		Egg Ha	arbor, NJ 080		License Numb	er			
Jim Kalafsky			908	-625-690	00	609-2	296-691	5		LIOONIOO ITAINI	0081	7		
Scheduled Start Date April 19, 2		cheduled Con		n Date (1 9, 2012	11)	10000000	e of OSI itech, In	A Monitor						
Occupancy Status Du			ne)		nt	Stree	t Addres	ss						
Abatement F	Performed Outsid	le of Normal I	Hours			City,	State &	Zip Code						
Other – Desc	cribe: upied During Aba	tomont				Little	Egg Ha	arbor, NJ 080	87					
Scope of Work (Chec		tement					-					-		
≥3 sf or ≥ 50 lf >160 sf or >26	5 Y 1 5 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6			tenovatio				Full Containm Mini-Enclosur Glovebag Pro	e -	egative Pressu	ire			
	(30)A)				241			Non-Exempte		on-Friable Pro	cedur	е		
Asbestos-Contai	ation of ining Material (A) ABATED	CM) Sol	ely by	n Norma Mainten ial Staff		Asb	Descript estos-Co Material (	ontaining		unt (Specify F or LF)	Aba	atem	ent T	уре
	Facility (13)					insulat	tion, surf	systems acing, VAT			٦,	_	Enc	щ
						or oth	ner misc	ellaneous)			Remova	Repair	Encapsulate	Enclosure
		Y	es	No	N/A								ate	តិ
Attic				-	X	F	Pipe Insu	ılation	_	6 LF	X			77
			$\dashv$					24.				1000		8
Name of Registered V	Vaste Hauler	19.00	EP W ler ID		Cubic Yar	ds of Wast	te	Name of Reg	gistered Lar	ndfill				
Synatech, Inc. City, State			274	29	<1		***************************************	Grows Land	fill					
					Disposal I	Jale ( )		City, State						
Little Egg Harbor, N. Completed By		Title	-		April 23, 2 Signature	2012	0	Morrisville, I	PA Date					
Diane Aloia		Executive Ad	minist	rator	Signature	ane a	la		April 18.	2012				

Ct as le

### State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-12

Client Project #					1		1 5			
Date of Notification (1) April 16, 2	2012			Name of Building Owner/ RUTGERS, THE ST			ITY OF	ŊĴ	espering to	green o
Agencies Notified  EPA	The State of the S	on Type I Notifica ided Notif		Street Address ENVIRONMENTAL 27 ROAD 1, BLDG						
□DCA  ☑ DOL	justi	fication)	including	City, State, Zip Code PISCATAWAY, NJ	08854			202	012	
☑ DEP- No Longer REQUIRED ☑ DOH	Can	celled		Name of Contact MICHAEL SMITH, E			phone Nu	-	of the same of the	
			FACULTY IN	HEALTH & SAFETY		Do-	nootery,	NSING	1 2	~~3
Name of Facility Where Abatement TRANSACTION MAGAZI			PACILITY IN	Type of Facility (4)  School (K-12)	· .	7-470%	- Secretalization	wani .	. 10	Stranger Stranger av
Street Address LIVINGSTON CAMPUS				Subchapter 8 (other that Street: N/A #					ars	
The state of the s	unty (6) VIIDDLESEX		y Code (7) Use Only)	Current Use (prior if being		particular services		,		
Name of Monitoring Firm Hired by ATC ASSOCIATES	Bldg. Owner (8)	ASCM 0098		Name of Contractor (9)  GREENWOOD ABAT	TEMENT C	ONSL	JLTANT	S, INC.		
Street Address 3 TERRI LANE				Street Address 268 MAIN STREET						
City, State, Zip Code BURLINGTON, NJ 080				City State, ZipCode BUTLER, NJ 07405		4				
Project Manager for Monitoring Firm		e <u>Number</u> 86-8800		<u>Telephone Number</u> 973-492-0477		Licen 0084	ise Numbe	er		
Scheduled Start Date (10) 04/27/12	Schedule 04/30/1		on Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC	).					
Occupancy Status During Abater  Facility Closed/Vacated During  Abatement Performed Outside	g Entire Period o	Abatemer	nt	Street Address 20-21 WARGARAW	ROAD					
Describe Signature - Describe: 4PM TO				City, State, Zip Code  FAIRLAWN, NJ						
Scope of Work (Check all that appl	у)									
<ul> <li>≥ 3 sf or ≥ 3 lf</li> <li>≥ 160 sf or ≥ 26</li> </ul>	0		☑Renovation ☐ Demolition		Full Containn Mini-Enclos Glovebag P Non-Exempt	ure Procedu	ıre			ure
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Norr Solely by Maint. Staff? (12) YES NO			sbestos Containing Material mal systems insulation, surfaci	Amou	nt ify SF	Abatem	ent Type Repair E	50 10	
210 SUITE	X		VAT		1400	SF	X			
		+								
Name of Reg. Waste Hauler See Hauler Below #1 & 2	NJDEP W See Belo	/aste Hauler	r ID#	Cubic Yards of Waste:	20 CY		e of Regist O.W.S.			ill
Hauler #1) Greenwood Abatemen NJDEP # 12561 Hauler #2) Newark Carting, Inc., NJ DEP # 4509			NJ 07405		Disposal Da 04/30/20		1 F 1	City, State 00 New I dd. Morri 9067 15-736-1	Ford M sville,	
Completed by (Print or Type) RAYMOND C. PEDALING	SENIOR MANAGI		СТ	Signature	p	<u>Date</u>	April 1	6, 2012	<u>.</u>	

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

| Name of Building Owner/Operator (2)

Date of Notification	,11 (1)	1			Christine	7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	nec	$\Gamma^2$ $\Omega$	T C	- Constant	Secretario man
4/17/12					CHITISCINE	Religa	1156	<u> 15   </u>	_\//_	E	150
Agencies Notified	Type Notification	st	reet Addres		Place	- Total			-		$H_{\parallel}$
[ ]EPA	[X]Initial Notification	,   _				111	III APR	20	2017	/	11 /
[ ]DEP	[ ]Amended	" Ci	ty, State,		ode , NJ 0700	3		~ ()	ZUIZ	ļļ.	hard f
[X]DOL	Notification				, NO 0700	i	ANT	TO COLUMN	The seasons		- 000
[X]DOH	[ ]EMERGENCY	Na	me of Conta			Telephor	ne Number	PACING POWER	10L &	- market	
[ ]DCA	[]Cancellation		Alan As	511			Total Company of the Control of the Control	~ ·~	THE PERSON NAMED IN	±ewaq <sub>e,0</sub>	etalonesco.
- particular and a second	[ ]Cancerracion		FACIL	ITY IN	FORMATION	***					
Name of Facility Wh	nere Abatement is T	aking	Place (3)			Type of Facil	ity (4)			1 1.50	1
Private						[ ]School	(K-12) oter 8 (Othe	× than	K-1	21	
Street Address						[x]Other (	i.e., priva	ate & c	omme:	c-	
9 Delaware 1	Place				**		ouildings, h	nomes,	etc.		
=		t 16	· ·	Cour	ty Code (7)	Square Feet	# of Floo	ors B	1dg. 85	Age	
City (5) Bloomfield		ty (6)			TE USE ONLY)	2100 Current Use (		aing de		shed	١
			70. 97.			Residence	ce	sing de			
Name of Monitoring Owner (8)	Firm hired by Buil	ding	ASCM No.			ment Contracto					
N/A			67		Street Address		,		-		
Street Address						topher St					
City, State, Zip Co	nde				City, State, 2					***	
0101, 00110,					Montclai	r, NJ 070	42				
Project Manager for	r Monitoring Firm	Telen	phone Number	r	Telephone Numb (973)744			License		ber	
Occupancy Status Du	4/28	/12 Day	nly one)		Name of OSHA N N/A Street Address	Miles					
Hours - Des	erformed Outside o	script	<u>:»</u>	7	City, State, 1	Zip Code					
	cribe: «Other Occup	ancy I	Descript»						-		
Scope of Work (Chec [X]>3 sf or []>160 sf		2776574776	Renovation Demolition		[ ]Mini- [X]Glove	Containment wi Enclosure bag Procedure riable Procedu		e Press	ure		
	_	Tion	Is cation		Description	n 05		Ab	ateme	nt !	Type
Location Asbestos-Co Material TO BE A In Faci	ontaining (ACM) BATED ility )	Non So By ter Cus Staf	Jsed Dlely Main- nance/ todial ff (12) No N/A	ins	Description Asbestos-Content Material ( (i.e., thermal ulation, surfar other miscel	taining ACM) systems acing, VAT,	Amount (Specify SF or LF)	- E	EPAID	N C A P S U L .	NCHOSURE
Garage				Pipe	Insulation	on .	220 lf	Х			
									-	-	-
Name of Registered AZTECH MANA		Hau	EP Waste ler ID No.	10000000	ic Yards Waste 2.0	Name of Regi		ifill		=:	
City, State Montclair, No	J 07042	- <i>'</i>			00sal Date /30/12	City, State Morrisvi	lle, PA	190	67		Vis
Completed By (Print Constantine V	Service of the servic	iden	t		Signature	Moules	Man	Date 4/17			

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Date of Notification (1)	-   N	lame of E	Building Owner/O	perator (2	2) 1 11 11		U		- Carlings	real page
04-17-12		EC	d ward	LK	eus					The decision
Agencies Notified Type Notification	8	174	HOVCS	+ 11.	100 119	APR 20	2012	2	الجلا	1
☐ EPA			e, Zip Code	1 17	III EUI			1		
D DOL Amendment #_		W)e		SPUL	, NJ,	ASBESTOS CO	VTROL.	&		
☐ DOH ☐ Emergency (inc justification)	luding	Vame of	Contact	10	_	1	244	-	7	
□ DCA □ Cancellation		Ed	WOUZCI	Ken	9				±tmau0n2	stations, in
Name of Facility Where Abatement is Taking P	lace (3)	FACIL	ITY INFORMATI	ON	Type of Facility (4)	)				
Tvarie of Laciny Wileto Lacina					☐ School (K-12	)				
Street Address	- 1			,	Subchapter 8 Other (i.e. pri	(Other than K-12) ivate & commercial	buildir	ngs, ho	mes	.
174 Forest Hell	ROL				etc.) Square Feet	# of Floors	- 2	g. Age		$\dashv$
City (5)					1.882 che		100	953		
County (6) Charge		County C			Current Use (Prior	r if being demolishe				
ESSEX COU	vity 1	(STATE U	SE ONLY)							_
Name of Monitoring Firm Hired by Building Ow	ner (8)	ASCM	No.	1 . 1	of Abatement Cont	ractor (9) NISS LLC				
SKY Enveronental	Services.	<u></u>		Street	V ENTEND	1757 775				$\dashv$
Street Address Boulevard.				251		land Ave	3.			
City, State, Zip Code				City, St	ate, Zip Code		00			
ut Lakes. NJ		46	-	100		NJ, 075		· <u> </u>		$\dashv$
Project Manager for Monitoring Firm	6	Telephor			one No.		29			
LEON SHE DEPHENTRY.	cheduled Con		696946 Date (11)		of OSHA Monitor	211 011	OC 1			$\neg$
Start Date (10) 4 - 30 - 2012		- 20								_
Occupancy Status During Abatement (Check	Only One)			Street	Address					
Facility Closed/Vacated During Entire Pe	riod of Abaten	nent		City S	tate, Zip Code	****	77.		500 175	$\dashv$
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	Facility Hours	} 		City, 3	tate, Zip Code					
Scope of Work (Check All That Apply)						15				
	★ Renova	ation			Full Containme	ent with Negative P	ressure	Э		
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	☐ Demolit			15	<ul> <li>Mini-Enclosure</li> <li>Glovebag Prod</li> </ul>	edure				
				E	Non-Exempted	(*) and Non-Friable		edure Abaten	nent	-
	Is Locat		12					Тур		
Location of	Norma Used Sole		Ashestos Co	escription	of Material (ACM)	Amount			m	m
Asbestos-Containing Material (ACM) TO BE ABATED	Maintena Custodial		(i.e. therma	al system	s insulation,	(Specify SF or LF)	Remova	Repair	cap	nclo
In Facility (13)	(12)			miscellar			oval	air	Encapsulate	Enclosure
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					77.7					
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Name of Registered Waste Hauler		NJDEP V		ic Yards	Name of	Registered Landfill		- 3	4	
	C	Hauler ID		lo da	ids Wast	te Mawa	080	4 CN	1	8
UY V Enterposses L		<u> </u>		osal Date	City, Sta	te	017	_		î.a
City State PRION, NEW	Jens	الناع	The state of the s		1 Tulk	y town	Ne	)		-
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O .	(Pursuant t	o NJAC 8:60 and 12:120	)) · [[]]	0.0	20	19		1
Date of Notification (1)		Building Owner/Operator	Inc.	AHH 20	- EU	tie.	- (500	mail
Agencies Notified Type Notification	Street Ad	Idress FAST (i	nedn,	Dent	ANTRÛ ≱NG	1 3		
☐ EPA ☐ DEP ☐ DOL ☐ Amendment #_	City, Stat	e, Zip Code hwoy. A	ac w	ssey (	57	d	5	7:
□ Emergency (Interpretation) □ DCA □ Cancellation	Jer	( ) -4-		1-1.18	•			_
Name of Facility Where Abatement is Taking F		a SCO	Type of Facility (	12)			-	
Street Address 126 Gast Lincul	n Liveni	Š	Other (i.e. petc.)	r 8 (Other than K-12 private & commercia	al build			s,
Ciny (5) Kanwey Que J	usey C	77d55	Square Feet	# of Floors	13	1dg. A 35	ge	-
County (6)		SE ONLY)	of Abatement Cor	or if being demolish	ea)	277	• •	
Name of Monitoring Firm Hired by Building Ow	vner (8) ASCM	101 TOIC	1.1.	N Sen	<u>C</u> )	2	In	<u>_</u>
Street Address 655 West Share	Trail	45		KIVER S	fre	-		
City, State, Zip Code  Conference Company  Project Manager for Monitoring Firm	Telephon	le No. Telepi	elenscek	License No	9	l d	<u> </u>	
William Kerbel	973_7 Scheduled Completion D	39.56.47 Bd	of OSHA Monitor		14	8	V	
514/12	G18112	NA		* *				
Gocupancy Status During Abatement (Check (Ch	riod of Abatement		State, Zip Code			-		3 
Scope of Work (Check All That Apply)			,		-			
☐ ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renovation Demoiltion	i i	<ul><li>Mini-Enclosur</li><li>Glovebag Pro</li></ul>		51		e .	
	Is Location		1 Hour Exemple	a ( ) and real, mass		Abate	ement /pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Normally Used Solely by Maintenance/ Custodial Staff? (12)	Description Asbestos Containing I (i.e. thermal system surfacing, V/ other miscella	Material (ACM) is insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes No N/A	V/		0.=0	1		lo .	-
Blog & and Floor		VAI		Sr2 26	X			
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Name of Registered Waste Hauler	NJDEP W		Name of	Registered Landfill	1	5		
Freehold Castage	Inc Hauler ID		Cyc	coming C	lig	li	Sa	M
City State La Cuis	usey on	Disposal Date	Z City, Sta	Hacerily.	P	فر	1	),
Completed by	Title	Signatur	e mn	Da oz	1/2	10	) .	

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Date of Notification (1)		1		f Building Owner/Operato		1. 1	f 33			
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Agencies Notified Type Notification  I EPA II Initial			Street A	o EASH Ci	neign	Loent	_	<u></u>	CENS	ikii
☐ DEP ☐ Amended	ų	1	City, Sta	e, Zip Code	يك ريان	Seul	5	10	25	5.1
. ☐ Emergency (i			Name o	f Contact		Telephone Nur	nber		•	
☑ DOH justification) □ DCA □ Cancellation		-		my Ratti						
Name of Facility Where Abatement is Taking	Diago (S	1)	FACI	LITYUNFORMATION	Type of Facility					
Name of Pacinty Where Abatement is Taking	70	F	LE	0)80	☐ School (K	Policies II			5 33	
Street Address	1	1		8 500	☐ Subchapte	er 8 (Other than K-12 private & commerci	2) al buil	dinae	home	96
126 Gast Lines	m,	<u>کن</u>	ren	ut	etc.)	<u> </u>				,
City(5)	085	Oi 0	C	7745	Square Feet	# of Floors		31dg. 1	-	
County (6)	<u>109.34</u>	1		Code (7)	_	rior if being demolish			-	
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Name of Monitoring Firm Hired by Building C	wner (8)	h	ASCN	No. Name	of Abatement Co	ontractor (9) N BeW.	0	7	T.	
Street Address ( )	20 14	1			Alletess Address	Chac h	1	-0	-14	
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City, State, Zip Code	. 0 . 7	~	2	City, S	State, Zip Code	L NJ	Ö	76	01	
Project Manager for Monitoring Firm	K.	ر ر	Telepho	ne No. Telep	hone No.	License N	0.			-
1.11. sm Kerbel	·	C	173-	129-5649 1201.	931-031	3 01	14	-8	**************************************	
	- 1 -			Date (11) Name	of OSHA Monito				6	
11812 Occupancy Status During Abatement (Check	Colly Or		۷.		Address					
☐ Facility Closed/Vacated During Entire P			ent	N. 8 3 •	¥:		72	(6)		
Abatement Performed Outside of Normal Other – Describe:	al Facility	Hours		City, S	State, Zip Code		i			
Scope of Work (Check All That Apply)	<del></del> -									
☐ ≥3 sf or ≥3 if ≥160 sf or ≥260 if	. ,	tenova Demotiti			Full Containn Mini-Enclosu Glovebag Pro		ressu	re		
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		Locati		Description					/pe	
Location of Asbestos-Containing Material (ACM)	Use	d Sole	ly by	Asbestos Containing I	Material (ACM)	Amount	_		m.	m
TO BE ABATED In Facility		todial S		(i.e. thermal system surfacing, V/	AT, or	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
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	Yes	No	N/A	\ \ \ -	· · · · · · · · · · · · · · · · · · ·	00		-	"-	$\vdash$
Blog & and Floor				VAT		90226	X	-	_	$\sqcup$
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Name of Registered Waste Hauler	$\overline{\tau}$		auler ID		( cof	Language of Caridilli	70	1	Sa	10 J
theehad CASTA B	ーカ			Disposal Date	City, Sta	itel Viry	1	-	برهار	
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Completed by	Title	0	91	Signatur	· mm	To Ba	te	10	`	$\neg$
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# State of New Jersey MOTEFICATION OF ASBESTOS ABATEMENT (Pursuant to MAC 850 and 12-120)

Date of Noticetion (1)		Marne	of Building	OwnerC	boscator	(2)	111111111111111111111111111111111111111	(0)	10	11:	107	PIT
4-17-2012		II		UKIN			IKIT	- Inner		11.	U	5
Agencies Notified Type Notification			Address			1 1		IDD	6	_ i	· ·	1//
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D DEP D Amended Amended Amendment	_		tate, Zip C							;		
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DON justification)			of Contact HAW		, ′.		1	on ru		10	Ĭ	i
			CILITY DE					1		==		7
Name of Facility Where Abatament is Taking	Place (3)					Type of Facili	h (4)			-		
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36 PRESCOTT AVE	FNUE	-	·		1.	etc.)	•					1
GLENRIDGE		- 10 <sub>0</sub>	. :		/	Square Feet 2 400					Age .	
County (5)		County	Code (7)				Prior if being di		hind)	70	YR	7
ESSEX .		STATE	russ die	n	—.		EUCE		,			-
Name of Monitoring Firm Hired by Building (	Division (S)	ASC	M No			of Abatement C	Contractor (8)			. :		- Indian
Street Address						t Remova	al Inc	<u> </u>				1
Cocci./Audicos			•			Address	2:					
City, State, Zip Code						O South		SE				_
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Project Manager for Monitoring Firm		Teleph	one No.		Teleph	one No.	Lie	nee N	0.	-	<del>`</del>	
Start Dale (10)	Scheduled Co					-329-744		003	88			
4-27-12	4-28					of OSHA Monit ga Envir		1	Ser	vi	-	. !
Occupancy Status During Abatement (Check	Only One)	, / 6	<del></del>			Address		-				+
☐ Facility Closed/Vacated During Entire P	eriod of Abelia	ment			280	Huyler	St.			*	× .	2 m.
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Scope of Work (Check All That Apply)		-:-			Sout	h Hacke	nsack	N	I.	076	606	<u> -</u>
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2 ×160 sf or ×250 lf	☐ Demoi				- 2 - 2	Full Contains Mini-Enclose	nent with Nega te	ibe P	POSSU	FB.		
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Location of	Normal Used Sole	ly		Desc	cription (	of .			_	ħ	рв	Ш
Anheston-Containing Material (ACM) TO BE ASATED		DCB/··	Asbesi	inc Conta Sharmal s	ining Ma assinms	nteriol (ACM) insulation,	Amous		2	_	En	
in Facility (13)	Custodial (12)			surfaci other mi	eg, VAT	, or	SF or LF	) .	Removal	Ropair	adac.	Endosure
	Yes No	N/A		OBIGE IM		Jousy			1	4	Encepeulata	9
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BASEMENT	-	1			NSOC	Hiov		LF			X	
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Name of Registered Waste Hauter												4
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Best Removal Inc.		1710	9	11/2	40	1.Min	erva En	ter	pr	ise	SI	اء
Hackensack, NJ	- 1	7.		Dispose 4-2		City, Sta	esburg,	OÉ	r	,	10	1
Cindra W	Tillo			Sie	ankun.		espurg,	/Dat		<del>-1-</del> -		$\dashv$
R.Veldran	Estima	tor		P.	Velde	гам				7.	12	
						-		1		-	, 0	لب

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ETS JOB # 3802/12 AMENDMENT # 3									
Date of Notification (1)		Name of Building	Owner / O	perator (2)	and the second of the second o				
04/16/2012		Bed, Bath and	Beyond	FEN IE	MFI	∏ // F= F			
Agencies Notified Type Notification EPA	ו	Street Address 650 Liberty Av	enue		, 6 E I	W.C.	A CONTRACTOR OF THE PROPERTY O		
DEP Initial No	tification	City, State & Zip	Code				311		
DOL Amended DOH Cancella	d Notification	Union, NJ 0708			APR 20	2012			
DOH Cancella	tion	Name of Contact		1 1		17	Folonbone Number		
DCA		Mr. John Purce	ell	f 6	ACTECT STATE				
		FACILITY IN	FORMAT	ION	LONG				
Name of Facility Where Abatement i		e (3)		f Facility (4)	DESCRIPTION OF A STATE OF	Set to consum			
Bed, Bath and Beyond Property	y			chool (K-12)					
Street Address					Other than K-1				
							gs, homes, etc.		
650 Liberty Avenue			Square	Feet	# of Floors	В	ldg. Age		
	unty (6)	County Code (7)		00,000	1		50+		
Union Un	ion		Curren	t Use (Prior i	f being demolis	shed)			
			Comn	nmercial Of	fice				
Name of Monitoring Firm Hired by Bu	uilding Owner	(8) ASCM No	o. Name	of Abatemen	t Contractor (9	)			
ATC Associates, Inc.		00098		ontracting	, Inc.				
Street Address	Date of the Control o			Address	20 - 10 2 - 32 U.S. 10 - 3-50	201902-0	1, 24		
1090 King Georges Post Road,	Suite 706			lay Street					
City, State & Zip Code				tate & Zip Co					
Edison, NJ 08837				lyn, NY 112					
Project Manager for Monitoring Firm Pat Sisk	0 (174/00)	elephone Number		one Number		License N			
The state of the s		(32) 771-0051		06-6300	.,		00511		
HOLD		letion Date (11) 2/31/12	100000000000000000000000000000000000000	of OSHA Mor					
Occupancy Status During Abatemen			unionist.	onmental Ta	actics, mc.				
Facility Closed/Vacated During				ad Street					
Abatement Performed Outside	Statement of the second of the second			ate & Zip Co	de				
Describe:		Lome, Frodre		an, NJ 077					
	Area Vacate	d: - Working Hou		an, 100 07 1					
	:00pm - 1:3								
Scope of Work (Check all that apply)				***************************************					
Demolition	2 / <u>12</u> 20 - 30		· I	Full Cont	tainment with h	Vegative P	ressure		
				Mini-Enc		vogativo i	ressure		
Quantity is ≥ 3 SF or ≥ 3 LF	ACM		i i		Procedure				
Quantity is ≥ 160 SF or ≥ 26			İ		Non Friable	Flectric (	ahle		
Location of	T	Is Location	Desc	cription of		mount	Abatement Type		
Asbestos-Containing	N	formally Used		s-Containing	1	Specify	(Specify: Removal,		
Material (ACM)		Solely by		rial (ACM)		re Feet or	Repair,		
TO BE ABATED	4 51 23 31	aintenance or		rmal systems	Line	ar Feet)	Encapsulation or		
in Facility	Cu	ustodial Staff?		surfacing, VA			Enclosure)		
(13)		(12)	or other n	niscellaneous	5)				
1 <sup>st</sup> Floor	- i	No		VAT	100	,000 SF	Removal		
2 <sup>nd</sup> Floor		No		VAT		000 SF	Removal		
2 <sup>nd</sup> Floor		No		nsulation		0 LF	Removal		
Name of Registered Waste Hauler	- INI	DEP Waste Hauler	-	ı. Yds. of Wa			ered Landfill		
Tri State Transfer	143	19551	"	1. 105, 01 vva 3	The state of the s		prises, Inc.		
City, State			. Di	sposal Date	City, S		p. 1000, 1110.		
Bronx, NY			TBD	- 1 CONTROL - 1	nesburg,	ОН			
Completed By (Print or Type)	Title		Si	gnature	. 1		Date		
ROY JOHNSON	PROJECT	EXECUTIVE		73	IN	E	04/16/12		

EMERGENCY ChK#1005.

D	CHEPS	) N	lame of	Building	Ovmer/Oper	ator (2)			W	61	M
Date of Notification (1)		1	551	AIE	OF C	SATT	ERINE		lec	74181	
Agencies Notified Type Notification		S		ddress	BORK	Hi	11 120	APR 20	2012	)	11
DEP Amended  OOL Amendment#	٠.	1	ay, Sta	ite, Zip C	ode:	N.	2 0	7416			S. P. C. S.
DI DOH Emergency (in / justification)	duding	-	tame o	Contac		0		7.			
DCA Cancellation		19	67	DER	TSA.	130	SELA				4
Name of Facility Where Abatement is Taking	Place C	3)	FACE	TUANG	ORMATION	17	ype of Facility (	4}			
		,					] School (K-12) ] Subchapter 8	(Other than K-	12)		
Street Address VALLEY B	200	K	A	Œ		_ 5	Other (i.e., pri homes, etc.)	ivate & commer	1		
City (5)		2.0	)		-	S	quare Feet	# of Floors	В	dg. Age	•
County (6)	<u> </u>	1	Count	y Code (i	) (STATE	- 1.0	urent Use (Fri	or if being demo	(ished)		
NORTH BERSEN		-1	USE		Name of Al		t Contractor (9)	SIDEN			
Name of Monitoring Firm Hired by Building ( (8)	Pesta	_1_	Maria IV		NOUS	Sant Product	10 INC				
Street Address					Street Add	DOX	.814				_
City, State, Zip Code					City. State.	Zip Cod	iDOE	NO.	08:	257	L
Project Manager for Monitoring Firm	-	Telep	hone N	ło.	Telephone	No.	1 13154 4	License No.			
					Name of O	0	x/500	CCZ	<u>100</u>		
Start Date (10) Sche	tuled Co	111	iou nes	5(11)	NOW	TE	ch IN	<u>C:</u>			
Occupancy Status During Abatement (Che	ck only o	ne)			Street Add	tress	118	-			
Facility Closed/Vacated During Enfire Pontage Abatement Performed Outside of Normal	Hou or A d Facility	Hour	neau S		City, State	Zip Coo	( /h/5	ND.	795	257	<u></u>
Other - Describe:					1010	1010	TO E				
Scope of Work (Check all that apply)  N ≥3 sf or ≥3 if	ĭXRe	novati	ion		DI M	Fri-Enck	sure	gative Pressure			
☐ 5160 at 02 5580 lt		mošťo			P.	llovebag Ion-Exer	Procedure npted (*) and N	on-Friable Proc	edure	Abates	ment
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Location of Asbestos-Containing Material (ACM)	Meh	Solei	icef.	Asbe	etos Containi	ption of ing Mate	rial (ACM)	Amount (Specify	1.	, u	Eno
TO BE ABATED IN Facely	5	astodia Staff?		(Le	, themsi sy surfacing other miss	L VAL.	BT	SF or LF)		Repair	Encapsulate
(13)	Yes	(12) No	NYA		Cities ties				- [	=	Ha H
	160	-140									
PRAWISPACE			X	P.P.	- 11/51	NOK	(N)	25 4	=  2	4	$\vdash$
				_					十	+	
Name of Registered Waste Hauter	لسك	1	NUDEP	Waste	Cubic Ya		Name of Reg	ristered Landill			
MOUATECH INC		_	125	O I	of Waste		City State	051	#		
CID BRIDGE NO		195	87		Disposal	江	Phone &	ME	17-	+	
Completed By	路人	`` `		7	5597	of 0	Morred.	/u Da	41	3/11	上
CANOS HMETOA		31		л	-1+	7110	1		1	1	
ASB-41	Do not a	se th	is form	for asbe	stos licensu	re exem	oted activities.				

was a service of the

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

				50-7 and 12:120-7		-	tomo-			
Date of Notification 4/17/12	n (1)	Na		ng Owner/Operator and Kimberly	111 11 1	GEIT	V E			
Agencies Notified	Type Notificat		20 Hick	ory Road	The second secon	APR 2 0 20	112		The second	
[ ]DEP	Notifica []Amended Notifica	Ci	West Or	ip Code ange, NJ 070	)52	ASBESTOS CONTRO	1 0	The state of the s	A COLUMN TO SERVICE SE	
[ ]DCA	[ ]EMERGENCY		Andy Ki			ne Number No.	- 0	C Indian	- Transition	
	[ ]Cancellat	1011	FACILIT	TY INFORMATION			· Jane 190	record is	-0-0 y	,,,
Name of Facility Wh	ere Abatement :	s Taking			Type of Facil	Lity (4)				
Private Street Address					[x]Other	oter 8 (Other (i.e., private	& cc	mme	-	
20 Hickory F	Road				Square Feet	# of Floors		dg.		
City (5)		County (6		County Code (7) (STATE USE ONLY)	2000	2	(	60		
West Orange		Foody			Residen	(Prior if bein Ce	g den	10115	inea)	). 
Name of Monitoring Owner (8) N/A	Firm hired by I	Building	ASCM No.		ment Contracto					
Street Address				Street Addres	stopher St					
City, State, Zip Co	de			City, State, Montclai	Zip Code Lr, NJ 070	142	-			
Project Manager for	Monitoring Fi	m Tele	phone Number	Telephone Num (973) 744			ense 037		oer	
Scheduled Start Dat 4/27/12	4/	28/12	tion Date (1:	Name of OSHA	Monitor					***************************************
Occupancy Status Du [X]Facility Clo	ring Abatement osed/Vacated Du	(Check o	nly one)	Street Addres	s			N.		
of Abatement Pe [ ]Abatement Pe Hours - Desc [ ]other - Desc	erformed Outsid cribe: «OffHours	Descript	±»	City, State,	Zip Code	# 1			0	
Scope of Work (Chec [X]>3 sf or [ ]>160 sf	: <u>≥</u> 3 lf	[x]	Renovation Demolition	[X]Mini- []Glove	Containment ware Enclosure Lebag Procedure Friable Proced		ressu	ıre		
Locatio			Is cation cmally	Description			Aba		ent T	E N
Asbestos-Co Material TO BE AI In Faci (13)	(ACM) BATED lity	So By ter Cus	Jsed blely Main- hance/ todial ff (12) No N/A	Asbestos-Containing Material (ACM)  (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount  E R M E N Y I R R R H I R R R I R R R I R R R I R R R R					C A P S U L	CLOSURE
Garage				ıct Insulati	.on	6 lf	Х			
				parties		-	-	1		-
Name of Registered AZTECH MANAGE		- Hau	EP Waste ler ID No. 040	Cubic Yards of Waste 0.5	Name of Reg	istered Landfi	.11		1	
City, State Montclair, NJ	J 07042		v. 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Disposal Date 4/30/12	City, State Morrisvi	lle, PA	1906	57		
Completed By (Print Constantine V	or Type) Tit	<sub>le</sub> esiden	it	Signature		, /	Date 4/17			

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

2012-76 B & G proj. #: Check # 5185 Date of Notification (1) Name of Building Owner/Operator (2) 0 4 / 1 7 / 1 2 Sharyn Gallatin Type Notification Agencies Notified Street Address ☐ EPA  $\boxtimes$ Initial 303 Birch Parkway DEP City, State, Zip Code Amendment DOL. Wyckoff, NJ 07481 Telephone Number Name of Contact DOH DOH Cancellation Sharyn Gallatin ☐ DCA **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) Sharyn Gallatin Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet 303 Birch Parkway County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) residential Bergen Wyckoff, NJ 07481 Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 0378 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. Street Address 4/27/2012 4/27/2012 Occupancy Status During Abatement (Check only one) 105 Ryerson Road ☑ Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Full Containment w/negative pressure ☐ Demolition Non-friable procedure Mini-enclosure >160 sf or ≥260 lf  $\times$  >3 sf or >3 lf E E Is location normally used solely e n Location of by maintenance/custodial Amount n m Description of asbestos-containing p C asbestos-containing (Specify SF or staff(12) 0 material (ACM) a material to be abated in facility (13) N/A No Yes X 60 lf pipe insulation basement Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler Tullytown Resource & Recovery Center 19563 1 yard B & G Restoration, Inc. Disposal Date City, State City, State Tullytown, PA 4/27/2012 Lincoln Park, NJ 07035 Date Signature Gordana Luna Completed by (Print or Type) Title 4/17/2012

Treasurer

Gordana Luna

### State of New Jorday MOTHRICATION OF ASSESTED ARATEMENT Proposate to NAGE SERVED (2-128)

ch. 3703

Date of Notification (1)			of Building Or			Market Land		Towns, e.g.		- Dec
4-17-2012.		PRO	GRYSS iv	E COMF	DANIESM	ANAGEW	VEN-	Ţ.		E .
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B DOL Amandra	ont#		RONA.		07044	APR	20	. 201	PA	1111
E DOM . Justification	cy (including	Manne	of Contact			Telepho	ne Nu	nber	4	1117
E DOM jubilication in DOA . It Cancelled	ion	P.	IGUNSON	. G		<u></u>	•			
Name of Facility Where Abatement is Ta	Man Place #	FA	CLITY DE OF	EATION			1,200	NUL	de .	
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Street Address	1662				School (K	er 8 (Other for	D 16-15	20	a .	71
23 WEDGEWOOD	DRIVI	-	f		a Other (i.e.	private & con	merci	أيبا أو	dinge,	homer
29 (5)	Dictro				Source Feet	# of Flor	its.	T	idg. A	69
VEROWA					5400	2		- 1		YRS
County (6)		Count	y Code (7)		Current Use (P	nior if being di	molisi	ned)		111
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lamie of Monitoring Firm Hirod by Buildi	ing Charact (S)	AS	CM No		of Abetement Co	antractor (3)			4	
treat Address					t Remova	1 Inc	<u> </u>			
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By, State, Zip Code			<del></del>		tate, Zip Code		36		·	
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reject Manager for Manitaring Firm		Teleph	tone No.	Teleph	hone No.	Lies	noe No	2.		
last Dale (10)	1 Cabachda	10-15	51.00		-329-744	1	038	38		
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Coupancy Status During Abutement (Ch	eck Only On	1 20			Address					
Facility Closed/Vacated During Entir	e Period of A	balament		280	Huyler	St			58	
Abstament Performed Outside of No Other - Describe: 8 Am 5 P	Facility	Hours		City, S	tate, Zip Code	•	-			
cope of Work (Check All That Apply)				Sou	th Hacker	nsack ,	N:J	. (	076	06
] Sacri			• • • • •							
2160 sf or 250 If		novation stollion	1- 1	. 2	Full Contains Mini-Enclosus	ent with Nego a	the Pr	COOL	8	
			5	8	Glovebag Pro	cedure		±.		
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Location of	· Ni	confly		Description	~F .				Typ	
Anhesiae-Containing Maintel (ACM)  ID REABATED		Sciety by	Asbestos	Containing Ma	laterial (ACM)	Ашоцц		-	T	m
in Facility	Cueto	dial Staff?	. 8	emal systems surfacing, VAT	r. or	. (Specify SF or LF		Ren	7	<b>8</b>   <b>8</b>
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	Yes	No NA								5 .9
GILER ROOM !	X	. ;	THERMA	L insuli	ATION	134	SF	X	1	
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Best Removal Inc.		Hander ID	No. of	Waste	•		•			. 1
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Hackensack, NJ					Z Wayne	The state of the s	ОĤ		į.	
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### CK 956

### State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

AC Project # 000-12				2. P					1.15 1		, a		
lient Project #					Name of Building Owner/C	perato	or (2)	Total Commence	ng n	E	160	100	
Date of Notification (1)	2012				RUTGERS, THE ST	ATE	UNIVE	RSIT	YOF	NJ=	111	4	
April 17 Agencies Notified  EPA		Notification □  Motification	otification		Street Address ENVIRONMENTAL H 27 ROAD 1, BLDG 4	IEAL	TH & S	SAFE	TY D	EPT.			
DCA DOL		□ Emerge	ency (in		City, State, Zip Code PISCATAWAY, NJ 0	III U	1 "	11					
☑ DEP- No Longer REQUIR ☑ DOH	ED	□ Cancel		* 1 P 9 *4.7	Name of Contact MICHAEL SMITH, E		lame of the	Telepho	ne Nu	mber	month	1	
					<b>HEALTH &amp; SAFETY</b>	Law methodological	and the second	California de la calegra de la calegra de la calegra de la calegra de la calegra de la calegra de la calegra d	end discount on the		Sept. w.		
				FACILITY INF	ORMATION						-	- 2	
Name of Facility Where Abatem ADMINISTRATIVE SEF	ent is Taki RVICES,	ng Place (3) , BLDG# 3	751		Type of Facility (4) School (K-12) Subchapter 8 (other that	n K-12	)						
Street Address BUSCH CAMPUS				3 7 7	Other (i.e. private & con	nmercia	al building ors: 3	gs, hom Bldg.	es, etc Age:	) 60+ ye	ars		
City (5) PISCATAWAY	County (6)	LESEX		Code (7) Ise Only)	Current Use (prior if being	demo	lished):	ACAE	EMIC	1			
Name of Monitoring Firm Hired ATC ASSOCIATES	by Bldg. O	wner (8)	ASCM N 0098		Name of Contractor (9)  GREENWOOD ABAT	EME	NT CO	NSUL	TAN7	rs, inc	<b>:</b>		
Street Address 3 TERRI LANE		<i>J</i>			Street Address 268 MAIN STREET		Q#						
City, State, Zip Code			<u> </u>		City State, ZipCode BUTLER, NJ 07405								
BURLINGTON, NJ		Telephone N	lumbor		Telephone Number			License	Numb	er			
Project Manager for Monitoring BRIAN KEARNY	Film	609-386	Construction Construction		973-492-0477			00840	)				
Scheduled Start Date (10) 04/27/12		Scheduled 0 04/30/12		n Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC.	D							
Occupancy Status During Ab  Facility Closed/Vacated D	uring Entir	e Period of A	batemen	t	Street Address 20-21 WARGARAW	ROA	D						
□ Abatement Performed Out Describe □ Other – Describe: 5PM		rmal Facility	Hours -		City, State, Zip Code								
MOther - Describe. 3F W	IO JAN				FAIRLAWN, NJ								
Scope of Work (Check all that	apply)			1	200.000		ontainme		Negat	ive Pres	sure		
<ul> <li>□ ≥ 3 sf or ≥</li> <li>□ ≥ 160 sf or</li> </ul>				Renovation Demolition	mark.	Glov	-Enclosu rebag Pr Exempte	ocedur		-Friable	Proce	dure	
Location of Asbestos-Containi Material (ACM) in Facility (13)	Sole	ocation Norma ely by Maint./0 f? (12) S NO	ally Used Custodial	Description of As (ACM) (i.e. then VAT, or other mi	sbestos Containing Material mal systems insulation, surfac scell.)		Amount (Specify or LF)	t	Abate	ment Ty	<u>oe</u>		
106C, 106K	150	X	T	VAT			220 S	F	X				
1					Service of the service of the service of		Marie Parker				4		
		-	1						1				
Name of Reg. Waste Hauler See Hauler Below #1 &	r ID#	Cubic Yards of Waste: 5 CY  Name of Registered Landfill G.R.O.W.S. North Landfill Disposal Date  City, State						Ifill					
Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405 NJDEP # 12561 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 NJ DEP # 4509							oosal Da 30/201			100 Ne Rd. Mc 19067 215-73	w Ford rrisvill	e, Pa	
Completed by (Print or Type) RAYMOND C. PEDALINO SENIOR PROJECT MANAGER					Signature	11.	/_	<u>Date</u>	April	17, 20	12		

### State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

#### GAC Project # 060-11 Client Project #

Cheffi Project#	-27									No. St. Astronomy	Without and Com-		
Date of Notification (1) April 18, 2	2012	8			Name of Building Owner/Ope RUTGERS, THE STA	erator (2) TE UNIV	ERSIT	TY OF	NJ	or an a	-6.4		
Agencies Notified  EPA	1	Notification ⊠Initial N ⊐Amende	Votificat		Street Address ENVIRONMENTAL HE 27 ROAD 1, BLDG 40	ALTH 8	SAFE	ETY D	EPT.	S	Petroline and Pe		
□DCA  ☑ DOL	1	■ Emerg		ncluding	City, State, Zip Code	054	APR	200	ากรก		The term		
DEP- No Longer REQUIRED		justific Cancel <b></b>			PISCATAWAY, NJ 08	554	7-11	C U L	UIZ	Jan J	- I		
X DOH	1.	⊒Cancer	ieu		MICHAEL SMITH, EN	<u>v.</u> L	eestos	CONTR	01 %	-6	Tribulation of the state of the		
				FACILITY IN			LIDE	N31NG			Î		
Name of Facility Where Abatemer OLSON HALL, BLDG# 7		g Place (3)			Type of Facility (4)  School (K-12)	+132gg	I stable Company	anipiaks		Marie Personal Maria	<i>y</i>		
#####################################	225				Subchapter 8 (other than I	(-12)			* * **		en. 2		
Street Address NEWARK CAMPUS					Sq. Feet: N/A # of	ercial buildi				ears			
City (5) Co	unty (6) ESS	EX		Code (7) Use Only)	Current Use (prior if being de			10 C V.L.					
Name of Monitoring Firm Hired by	Bldg. Ow	ner (8)	ASCM		Name of Contractor (9)	1							
ATC ASSOCIATES			0098	1	GREENWOOD ABATE	MENT C	ONSUL	TANT	S, INC	<b>)</b> .			
Street Address 3 TERRI LANE					Street Address 268 MAIN STREET								
City, State, Zip Code BURLINGTON, NJ 08	016				City State, ZipCode BUTLER, NJ 07405								
Project Manager for Monitoring Fir		Telephone N	Number		Telephone Number		License	e Numbe	er				
BRIAN KEARNY		609-386	-8800		973-492-0477		00840	0			1000-00-00		
Scheduled Start Date (10) 05/03/12	-	5cheduled 0 05/07/12	The state of the s	n Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC.								
Occupancy Status During Abate  Facility Closed/Vacated During	g Entire I	Period of A	batemen	t	Street Address 20-21 WARGARAW RO	DAD							
☐ Abatement Performed Outside Describe	e of Norm	nai Facility	Hours -		City, State, Zip Code								
⊠Other – Describe: 5PM - 5A	M				FAIRLAWN, NJ								
Scope of Work (Check all that app	ly)												
∑ ≥ 3 sf or ≥ 3 lf				☑ Renovation ☑ Demolition	☐ Mir	ill Containr ni-Enclosur Blovebag F n-Exempte	re Procedur	re -			ıre		
Location of Asbestos-Containing	Is Loca	tion Normal	lly Used	Description of As	bestos Containing Material	Amoun			ent Typ		110		
Material (ACM) in Facility (13)	Solely I Staff? ( YES	by Maint./Co (12) NO	ustodial NA	(ACM) (i.e. therr VAT, or other mis	nal systems insulation, surfacing, scell.)	(Specif or LF)	fy SF	Remove	Repair	Encap i	<u>Enclose</u>		
Room 101		X		VAT,TRANS	ITE,BENCH TOPS	500 S	F	X	T				
							N			1511			
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Was See Below		rID#	Cubic Yards of Waste: 10	CY		of Regis D.W.S.			ill		
Hauler #1) Greenwood Abatemer NJDEP # 12561 Hauler #2) Newark Carting, Inc., NJ DEP # 4509			Butler, I	NJ 07405		isposal <u>Da</u> 5/07/201		1   1	City, Sta 100 New Rd. Mor 19067 215-736	Ford Nrisville,			
Completed by (Print or Type) RAYMOND C. PEDALING	20000	ENIOR P		т	Signature	/ <	Date A	pril 18	8, 201	2			

Copies To: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney



Date of Notification (1) 3/16/2012		Name of Building Owner/Operator (2) Woodbridge Mall											
Agencies Notified  Type Notification  Property Initial  DEP  Mended  Amendment #				dress oodbridge e, Zip Code		Ü	APR 1	2 0 2012	1	IJ	the property of the second	1	
Emergency (in		- [		ridge NJ.		77,173,000	L- April	Talanhone	Nlum	har	-		
DOH justification)  DCA Cancellation				Bereheik			lih	-			•	e/ij	
Name of Facility Where Abatement is Taking Woodbridge Mall Spaces 1036&108 Street Address 250 Woodbridge Mall			FACIL	ITY INFOR	MATION	1000	e of Facility (4) School (K-12 Subchapter 8 Other (i.e. pri	) (Other than			lings,		es,
City (5) Woodbridge NJ. 07095							etc.) lare Feet 0,500	# of Floors	3	Bi 3:	dg. A	ge	
County (6) Middlesex			County C (STATE U	ode (7) SE ONLY)		Cur	rent Use (Prior	if being den	nolish	ed)			
Name of Monitoring Firm Hired by Building O Criterion Laboratory, Inc.	wner (8)		ASCM	No.		ne of Al zon, Ir	patement Contr	ractor (9)			=		
Street Address 3370 Progress Drive		100		. 4		et Addr 51 Ex	ess ecutive Aver	nue	#				
City, State, Zip Code Bensalem, PA 19020		Wecoes					Zip Code ohia, PA 191	153					
Project Manager for Monitoring Firm Mike Panepresso			Telephon 215 24	ne No. 4 1300x2		ephone 7 284		Licer 0110	nse No 09	).			
	Scheduled May 4,20		npletion D	Date (11)			SHA Monitor Maronski	-					
Occupancy Status During Abatement (Check					1 1 1 1 1 1 1 1 1 1	et Add	ress ecutive Ave	nue					
Facility Closed/Vacated During Entire Postable Abatement Performed Outside of Normal Other – Describe:					City	, State,	Zip Code phia, PA 19			-			
Scope of Work (Check All That Apply)							pilia, 1 1 1 10		-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova molit					Full Containmen Mini-Enclosure Glovebag Proce Non-Exempted	edure				e	
- 1 2	ls L	ocati	ion		Ė			`			Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenai	ly by nce/	(i.e. th	Descript s Containin nermal syste surfacing, other misce	g Mater ems ins VAT, or	ulation,	Amount (Specify SF or LF	,	Removal	Repair	e Encapsulate	Enclosure
Space 1036 Fitting Room Area		Х	1		Mas	tic		800 SF		x			
Space 1082 Sales Area		х			Mas	tic		700 SF	:	x			
						v.							
Name of Registered Waste Hauler Luzon, Inc.		NJDEP Waste Cubic Yards Hauler ID No. of Waste 32587 2			s	Name of R Minerva	Registered La Landfill	andfill		31			
City, State 8451 Executive Avenue, Philadelphi	a, PA 19	-1			Disposal D	ate	City, State Waynes	burg, OH	4468	18			
Completed by Piyush Patel	Title Progra	ım N	Manage	er	Signa	und	H Cath	cO .	Da 3/	te 16/20	)12		1

		ŀ		ICATIO	tate of Ne N OF ASB t to NJAC	ESTOS	ABATE		L branch	Ch	eck#	8.	33	0	
Date of Notification (1) 4–17–12					of Building .nceton					齿	GET	W	E	n	7
Agencies Notified	Type Notification	1		Street	Address MacM						70		11		7
☐ EPA ☐ DEP IX DOL	Initial □ Amended Amendmen			City, St	ate, Zip Co	ode				Al	PR 20	2012			
Ď DOH □ DCA ·	☐ Emergency justification ☐ Cancellatio	)	Ī		of Contact Orteg	a			L	A CONTRACTOR OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON N	Silve Provide				
Name of Facility Many	(b	DI (0		FAC	ILITY INFO	DRMAT	ION	12-		10 Notes 21	Continues descriptions	- Dead			
Name of Facility Where A Vacant Houses	Abatement is Taki	ng Place (3	)						e of Facility					-1400	78 2
Street Address 17,19 & 21 Olde	en Street							D CX		er 8 (Ot	ther than K-1 & commerce		ldings	, hom	nes,
City (5) Princeton								3,3	are Feet 60	2	of Floors		3ldg. / 50yr		
County (6) Mercer					Code (7) USE ONLY)	)		Curr	ent Use (P ant ho	rior if b	eing demolis	hed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.		Name	of Ab	atement Co	ontracto	or (9)				
ATC Associates	, Inc.		- '			2				ironn	mental (	٥.,	Inc.		
Street Address Three Terri Lar	20							t Addre							
City, State, Zip Code	ie								ws Aver Zip Code	iue					
Burlington, NJ	08016						town, I	PA 10	9401						
Project Manager for Moni	toring Firm	-	T	Telepho	ne No.			hone N			License N	lo.			
Mike Keehn					386-880	00	610	)-239	9-9920		0	039	8		
Start Date (10) 4–26–12		Schedule 5-4-1		npletion	Date (11)				HA Monito th Envi		nental C	o.,]	Inc.		
Occupancy Status During  X Facility Closed/Vaca	573		1.53	ont			13/2/2020	Addre	ess ws Aver	nue	## ### ###############################			1	
☐ Abatement Performe ☐ Other – Describe: _	ed Outside of Norr	nal Facility	Hours	iciil		_	City, S	State, Z	Zip Code		9401				
Scope of Work (Check All	That Apply)			30-17-50			1,01								
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>		□ R □x D	enova emolit				E 18	Mi Gl	ni-Enclosu ovebag Pro	re ocedure	th Negative F			e	
			Locati											emen	t
Location			ormall Sole				scription					-	13	ne 	Γ
Asbestos-Containing I <u>TO BE ABA</u> In Facilit (13)	TED	Maintenance/ Custodial Staff? (12)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)								(	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A			4							fe .	
17 Olden Street				х	transi	te f.	lue s	tack	C 1-1	30	LF	х			
19 Olden Street				х	transi	te f	lue s	tack		30	LF	x		-	
21 Olden Street				х	transi	te f	lue s	tack		30	LF	X			
						-	- 000								
Name of Registered Wast Horizon	e Hauler		H	JDEP Wauler ID 21612	No.	Cubic of Was			Name of GROW		ered Landfill	1			

Disposal Date

Signature

5-4-12

Title Vice-President

City, State Trenton, NJ

Completed by Timothy E. Bryan

Date 4-17-12

Morrisville, PA

City, State

# 04-3987

Date of Notification (	1)	= Jol	b #:		Nar	ne of Bu	ilding Owr	ner/Operator	(2)	A COMPANY OF THE PARTY OF THE P	MENESO, S	au/ 4.e. 3		
4/16/12						aview/S/		- IIA	FRE	I W G	1	7		
Agencies Notified	Notificati	on Type				et Addr	and the same of th		The NU L	I II III II.			4	
⊠ EPA	☐ Initial	Nintifia	M		401	South	New York	Bood 1					877	
□ DEP	Amer	Notifica	tion				Zip Code	Road	APH 2	2 0 2012	HJ		<u> </u>	
☑ DOL		endmer	nt# <u>1</u>					lai la	A DITT	- U ZUIZ	·maxa)		1	
□ DOH □ DCA	⊠ Emer	gency (i	ncludin	g		ne of Co		NJ 08205	1	Talast	Ĺ	1	-	
M DCA	☐ Cano	ication)			110	110 01 00	maci	, ,	ASSESTOS	CONTENTELEPH	one N	lumbe	r	
					Jol	nn Petro	olino		1105	NSING			4.	
N					FA	CILITY I	NFORMA	TION	nical calculate (S)	Marca or no			4	
Name of Facility Whe		ent is Ta	aking P	lace (3)				Vegazina .	Type of Fac			4 - 4		
Seaview Country Cla Street Address	ub					1.7			School (F	(-12)				
									Subchap	er 8 (Other than private & (com	1 K-12	?) io! bi	ldinaa	
401 South New York	Road								homes, e	. private & (com tc.)	merc	ai bui	laings	,
City (5)									Square Feet			Bld	g. Age	9
Galloway Township		-							100,000	4		30+		
County (6)					Cou	nty Code	e (7) (ST	ATE	Current Use	(prior if being de	emolis	hed)		
Atlantic	- Almahaman A.		11.11	The Till	USE	ONLY)			Golf Country	Club				
Name of Monitoring F			ng Ow	ner (8)	ASC	ИNo.	Name o	of Contractor		4	HEO.			
Indoor Environment	al Concep	ts		. 8.7	-	V	The Pr	ime Group I	Remediation,	Inc.				
Street Address								Address						
286 Sunset Road								S' Street						
City, State, Zip Code							City, St	ate, Zip Cod	е		-		-	-
Barrington, NJ 0800		(1)	80				Philade	elphia, PA 1	19124					
Project Manager for M	lonitoring F	irm	Telep	hone Nu	umber		Telepho	one Number	11	icense Number				
Mike Menz			856-6	28-6020	)	215-533-3503 00858								
Scheduled Start Date	(10)	Sched	luled C	ompletio	in (11)		Name o	of OSHA Mor		0656				
4/17/12		4/17/1					The Pri	me Group F	Remediation,	nc				
Occupancy Status Du	ring Abater	ment (Ch	neck or	nly one)			Street A		tomediation,	110.		-	-	
☐ Facility Closed/Vac	ated Durin	a Entire	Period	of Abate	ement		4343 'G	' Street						
	ned Outside	e of Non	mal Fa	cility Hou	ırs -		City, Sta	ate, Zip Code	е —		-			
Other – Describe: L	ocation of	work is	in an e	mpty roo	<u>om</u>	7	100000	lphia, PA 1						
Source of Work (Chec	k all that ar	(vlgc					_ · · · · · · · ·	ipina, i A i						
☐ >3 sf or >3 lf		- (-,3)	660	M D	novotion			Пгло		Yhan				
⊠ >160 sf or >260 lf				OPTION OF THE	enovatior emolition			☐ Mini-End		Negative Pressu	ıre			
								⊠ Gloveba	g Procedure					
					_			☐ Non-Exe	empted (*) and	Non-Friable Pro	cedu	re		
		Is	s Locat	ion	1000							Abot	emen	
V		No	rmally	Jsed									ype	·
Location of Asbes Containing Material	11 T. C. C. C. C. C. C. C. C. C. C. C. C. C.		Solely I		A-6-		escription		eur. X	Amount	_	1		т
TO BE ABATE			Custod					laterial (ACN s insulation,		Specify F or LF)			т	
IN Facility			Staff?		(		facing, VA		-	r of Lr)	Removal	Z.	Encapsulate	Enclosure
(13)		15.	. (12)			other	miscellan	eous)			Vou	Repair	psu	los
											<u>a</u>	7	llate	ure.
		Yes	No	N/A										
2 <sup>nd</sup> Floor Room - Rege	ency		X		Pipe F	ittinge			6 LF		V		1	
		in the second	- 1	100	pc 1	·			ULF		- X	-		-
						4.6.1			000/11 6 4 4		1			
Name of Reg. Waste H	auler	10	100000	JDEP W		100000000000000000000000000000000000000	Yards	Name of	Reg. Landfill					
The Prime Group Rem	ediation	Inc.	1.5500	auler ID	#	of Was	ste	Minerva	Landfill(OH E	PA 15-1292)				
City, State			-				sal Date	City, State				-		
Philadelphia, PA					4/18/1		Waynesh					150		
Completed by	Title		1 10	- 1-4			Signature		a. groun	Date	9			
Vincent J. Primavera,	III Pro	ject Mar	nager				(		$\rightarrow$	4/16				
R-//1	·	35,500	-			27		The state of the s		77/10				



### STATE OF NEW JERSEY DEPARTMENT OF LABOR NOTIFICATION OF ASBESTOS ABATEMENT

				Name of Building Owner/Operator (2)									
Date of Notification (1) 4/16/2012				67 Whippany Investors, LEC VE									
	tification Type	<u> </u>		Street Address	ppanij in 190	1010, 1212	>		11				
Agencies Notified No	illication Type	<del>-</del>		49 Bloo	mfield Avenu	ie ann a	0 0010	A COLUMN TO THE PERSON TO THE	1				
(X)EPA (	) Initial N	lotification	on	, , , , ,	(J lul)	Arn Z	U ZUIZ		1 4				
(X) NJDEP	X) Amend	led Certi	ification	City, State, Zip C	Code			anticope and a second					
(X) NJ DOL	) Emerge	ency No	tification			- AMESIOS (	CONTROL &	- Inches					
(X) DOH	(includ	ing justif	fication)	Mounta	in Lakes, N	J 07046	SING	- I	ŕ				
	) Cancel			Name of Contac	<u>:t</u>	Tel Ni	umbor		Š				
				Ross M.	Chomik	b							
CF 111 1011 Ab-d	akina Dlago /	2)	FACILITY	INFORMATION Type of Facility	(4)				NORTO				
Name of Facility Where Abatement is To	aking Flace (	21		( ) School (K-12									
Street Address					8 (other than K-12								
Officer / Iddi-1950				(X) Other (i.e. pr	rivate & commerci	ai bidgs., non	ies, etc.						
67 Whippany Rd				Sq. Feet: 180	.000 # of F	loors 3	Bldg. Age	50					
City (5) County (		County C	ode (7)			_		<del></del>					
Whippany Morris	6	(State Us	e Only)	Current Use (pri	or if being demoli	shed)							
				Name of Contractor (0)									
Name of Monitoring Firm Hired by Bldg.	Owner (8)	ASCM No N/A	<u>).</u>	Name of Contractor (9)  Industrial Safety and Environmental Salutions Inc. (ISES Inc.)									
ISES, Inc.		IN/A		Industrial Safety and Environmental Solutions, Inc. (ISES, Inc.)  Street Address									
Street Address 3300 Hudson Avenue				3300 Hudson Avenue									
				City State, ZipCode									
City, State, Zip Code Union City, NJ 07087					Union City, NJ								
Project Manager for Monitoring Firm	Telephone I	Number		Telephone Num		Licens	se Number						
David Camacho	(201) 325			(201)325-005:		0112	4						
Scheduled Start Date (10)	Scheduled (	Completion	Date (11)	Name of OSHA	Monitor	7.0000 - 10000		11					
12/1/2011	03/31/20	12		ISES, Inc.									
Occupancy Status During Abatement (C ( X ) Facility Closed/Vacated During E	ntire Period o	f Abatemen	t	Street Address 3300 Hudson	Avenue				l l				
( ) Abatement Performed Outside of Describe:	NOITIAI FACIII	ty Hours -		City, State, Zip O Union City, N									
Source of Work (Check all that apply)		5	E-URIDAWERSULE					200					
_ ≥ 3 SF or ≥ 3 LF	Rend			Containment with	Negative Pres		Glove						
分≥ 160 SF or ≥ 260 LF	□ Dem	olition	Mini-l	Enclosure	Non-Exem	pted (*) an	d Non-Fri	able Pro	ceaure				
Lagation of Ashestos Lis Loc	ation Normally	/ Llsed	Description	of ACM (i.e.	Amount (Specify	(SF or LF)	Abatemer	nt Type					
Containing Material (ACM) in Solely	by Maint./Cus		thermal sys	stems insulation,	, , , , ,								
Facility (13) Staff?		NΙΔ	surfacing, \ miscnous.)	VAT, or other			Rem. R	ep. Encap	Enclose				
Building A YES	NO X	NA I	VAT		127,019 SF	-	X	T	T				
Building A	$\frac{\hat{x}}{x}$		Mastic		155,792 SF		X	_					
	<del>  ^</del>		Baseboa	ard alue	7286 LF		X						
Building A			Wall Ca		16,083 LF		X						
Building A	X				6570 LF		x	_	-				
Building A	X			and fittings			x						
Building A	X		TSI air c		2060 SF		AMENI						
	Building A >> WILL NOT BE REMOVED >>>>>> Spray-C				7000 SF			750					
Building A	te panels 13,064 SF X												
Building 11A	X			over concrete	1,006 SQ F		X						
Name of Reg. Waste Hauler	NJDEP Wa 04509	ste Hauler I	D#	Cubic Yards of Waste  Name of Reg. Landfill  County Landfill					4611				
Newark Carting	500 (estimated) Cumberland County Landfil					41111							
City, State	Disp. Date 03/30/2012												
369 Raymond Blvd., Newark, NJ	03/30/2012 Newburg, PA 17242  Signature / Date					-							
Completed by (Print or Type)													
David Camacho Walsh	General	Manage	r	Wid Man 4/16/2012									

<sup>\*\*</sup>Amendment: Spray-on fireproofing 7000 SFT listed above will not be removed by ISES, Inc.

#### STATE OF NEW JERSEY DEPARTMENT OF LABOR NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) 04/16/2012	(			Name of Building Owner/Operator (2) 67 Whippany Investors, LLC								
Agencies Notified	Notification Type	<u>e</u>	O CONTRACTOR OF THE CONTRACTOR	Street Address	11	IFN IS	CE	1 W				
(X) EPA (X) NJDEP (X) NJ DOL (X) DOH	(includ	ded Cert ency No ling justif	ification tification	City, State, Zip  Mount  Name of Conta	Code ain Lakes, N	J 07046 A	imber 2	0_20	7	THE PROPERTY VALUE OF THE PROPERTY OF THE PROP		
( ) DCA	( ) Cance	lea				AS		CONTROL	&			
Name of Facility Where Abatem	nent is Taking Place (*	3)	FACILITY	INFORMATION  Type of Facility	(4)		LICEN	121MB	CONTRACTOR OF STREET	3r		
Commercial Property	Tent is Taking Tiace (	21		( ) School (K-1	2)		Week Colors	AV HY		(in		
Street Address					8 (other than K-12 private & commerci		es. etc.		8.2			
67 Whippany Rd				Sq. Feet: 500			Bldg. A	ge 50				
	County (6) Morris	County C (State Us			rior if being demolis	shed)						
Name of Monitoring Firm Hired ISES, Inc.	by Bldg. Owner (8)	ASCM No N/A	<u>o.</u>	Name of Contra Industrial Sa	actor (9) afety and Enviro	onmental S	olution	ns, Inc.	(ISES,	Inc.)		
Street Address 3300 Hudson Avenue				Street Address 3300 Huds	t- 11					70		
City, State, Zip Code Union City, NJ 07087				City State, Zipo Union City	Code							
Project Manager for Monitoring David Camacho	Firm Telephone I (201) 325			Telephone Nun (201)325-005	(2007) 0 (2003) 1 P	Licens 0112	e Numb	er				
Scheduled Start Date (10)	Scheduled (	Completion	Date (11)	Name of OSHA					N <sup>2</sup>			
01/24/2012	07/30/20	-0.225		ISES, Inc.								
Occupancy Status During Abat ( X ) Facility Closed/Vacated I ( ) Abatement Performed Out	nt	Street Address 3300 Hudson	Avenue	100								
Describe:				City, State, Zip Union City, N								
Source of Work (Check all that  □ ≥ 3 SF or ≥ 3 LF  □≥ 160 SF or ≥ 260 LF	apply) ☐ Rend (文 Dem	ovation olition		Containment with Enclosure	Negative Pres	sure pted (*) and	'⊠∕'Glo d Non-	ove-baç Friable	Proce	edure edure		
Location of Asbestos- Containing Material (ACM) in Facility (13)	Is Location Normally Solely by Maint./Cus Staff? (12) YES NO		thermal sys	of ACM (i.e. tems insulation, /AT, or other	Amount (Specify	SF or LF)	Abater Rem.	nent Tyr	Encap	Enclose		
Building B1 – B2	X	INA	VAT		211,319 SF		X			T		
Building B1 B2	X		Mastic		211,319 SF		Х					
Building B1 – B2	X		Baseboa	ard glue	22,000 LF		Χ					
Building B1 – B2	X		Baseboa	ard	22,000 LF		X					
Building B1 – B2	X	7-14-28	TSI pipe	Insulation	42962 LF		Χ					
Building B1 – B2	X		TSI pipe		587 each		X					
Building B1	X		Tape/Spack	kle over Sheet Rk	5600 SF		Х					
Building B1 – B2	X		Fireproo		38 each		X					
Building B1 – B2	X		Transite		1,299 SF		Χ					
Building B1 – B2	>>>	Window	Caulking	950 each			NOT OVE		SES			
Building B1 – B2		insulation	nt over duct	80 SF		X						
Name of Reg. Waste Hauler Newark Carting	ID#	Cubic Yards of Waste   Name of Reg. Landfill     900 (estimated)   Cumberland County La					Landi	fill				
City, State 369 Raymond Blvd., News	Disp. Date   City, State   Newburg, PA 17242						Y					
Completed by (Print or Type) David Camacho	Title General	Signature 04/16/2012										

STATE OF NEW JERSEY DEPARTMENT OF LABOR NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)	Name of Building Owner/Operator (2)												
04/16/2012					Ralph Affuso								
Agencies Notified	Type of Notification				Street Address								
( ) EPA	(X) In	(X) Initial Notification				551 40 <sup>th</sup> St.  City, State, Zip Code							
(X) NJDEP	( ) Amended				Oity, State, Zip Code								
(X) NJ DOL	Amendment #				Union City, NJ 07087 APR 2 0 2012								
(X) DOH ( ) Emergency (including					Name of Contact Tel. Number								
( ) DCA justification)													
( ) = =	Ralph Affuso  ASBESTIOS CONTROL &												
	Y INFORMATION LICENSING												
Name of Facility Where Abateme	ent is Taking	Place (											
Commercial Property	Type of Facility (4) ( ) School (K-12) ( ) Subchapter 8 (other than K-12)												
Street Address	(X ) Other (i.e. private & commercial bldgs., homes, etc.												
551 40 <sup>th</sup> St.													
		Sq. Feet: 2000 # of Floors 1 Bldg. Age 60											
<u>City (5)</u>	County (6)			County Code (7) (State Use Only)									
	Hudson					se (prior if I	peing demol	ished):					
Union City													
Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. N/A					Name of Contractor (9) ISES, Inc.								
Street Address		4				Street Address							
N/A					3300 Hudson Avenue								
City State Zin Code					City State, ZipCode								
City, State, Zip Code N/A													
				Union City, NJ Telephone Number				License Number					
Project Manager for Monitoring Telephone N			umber										
Firm N/A						(201)325-0055							
Scheduled Start Date (10) Scheduled Completion Date (11)					Name of O	SHA Monitor							
04/27/2012					ISES, Inc.								
Occupancy Status During Abatement (Check only one)					Street Address								
( ) Facility Closed/Vacated During Entire Period of Abatement ( X ) Abatement Performed Outside of Normal Facility Hours –					3300 Hudson Avenue								
5:00pm to 10pm					City, State, Zip Code								
( X ) Other - Describe: Unoccupied during abatement					Union City, NJ 07087								
Source of Work (Check all that apply) ( ) Demolition					( X ) Renovation								
( ) Minor Project (< 25 SF or < 10 LF ACM) ( ) Full Containment with Negative Pressure													
( X ) Small Project ( >25 <16	(	) Mini-Enc											
( ) Large Project (>160 SF	or > 260 L	FACM	1)		( X )		Procedure	. J. N	. D				
1 - 4 - 4 - 1	Deseri			nd Non-Friable			nt Trunc						
Location of Asbestos- Containing Material (ACM) To be Abated in Facility (13)  Is Location Not Solely by Main Custodial St		ation Normally Used			Description of ACM . thermal systems insulation, surfacing,			(Specify SF	Abatement Type				
				(1.6.		er miscellane		or LF)			Encapsulate	m	
									R	٦			
									Remova	Repair	aps	Enclosure	
	V/50	NO	NICA	1					l va	쁰	ulat	l ši	
	YES	NO	N/A					5 100			Φ.		
1 <sup>st</sup> Floor			X	TSIP	ipe Insulation			60 LFT	Х				
			e , ee ee	130				17.01					
Name of Reg. Waste Hauler NJDE			Waste Haule	r ID #	Cubic Yards of Waste		Name of Reg. Landfill						
Vision Transport 22393					1			Cumberland County Landfill					
VISION Transport 22393  City, State Disp.								City, State					
					27/2012			Newburg, PA 17242					
Completed by (Print or Type) Title Sign					ture			Date					
David Camacho Project Supervisor					1/N/	11 dalla	18/	04/16/201	2				
David Calliacilo	110,00	Loup	CI V1301		1NIS	LAMO	7	1 0 1/10/201					