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#### STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

Check # 2859

Date of Notification (	1)					Building Ov		rator (2)	2000				AC-7-	
04_/22	/13					AL DIOCES	E		Project of	772 -	1	25	83	
/ /	/ 				Street Ad		СТ				49	5		
Agencies Notified EPA	Type of No	otifica Initial				RRY STRE		201:	APR 2					-
☐ EPA DEP	<u> </u>	Amer				NJ 07102			WILL S	З Д	Min	. 5.0		
☑ DOH			ndment #		Name of 0			Ann	Telepho	ne Nı	ımbei	40		
☑ DOL '				justification	DEBRA P	ERRY		30			V*			
		Canc	ellation		OIL ITY IN	FODMATIO	NI.		LIDE	17.71	+417	UH.		
				F/	ACILITY IN	FORMATIO	'N		Ε.		. v G			
Name of Facility Who		ent is	Taking I	Place (3)		Type of Fa	cility (4)			3				
ST. JOHN'S CHURCH	1						School (K	(-12)						
Street Address						1 1	0.7	er 8 (Other	than K-1	2)				
118 SUMMIT AVENU	E							, private &						
								mes, etc.)						
City (5)	County (6)	)		County Code	(7)	Square Fe		# Of Floor		Bui	lding	Age		
JERSEY CITY	HUDSON						00 +	being dem		+		150	+	
						VACANT -			onsticut			100		
Name of Monitoring	Firm Hired	by BI	dg. Own	er (8)	ASCM NO				****	_		*		
									500					
AET								RVICES IN	C.					
Street Address						Street Add	iress							d
907 Doolittle Drive City, State, Zip Code						32 Williams	Parkway							10
Bridgewater, NJ 0880						City, State					-			
Project Mngr. For Mo		irm		Telephone Nu	mber	1								
Eric Houseknecth				908-218-1108		EAST HAN		IJ 07936						
Sheduled Start Date	. ,	Sche	18 Maria 19 Maria 19 19 19 19 19 19 19 19 19 19 19 19 19	etetion Date (1		Telephone	Number		License	Num	ber			/
05_//06	/13	-	_05/	/	13	973-77	2 3660		0.090		00	860		
Occupancy Status D	uring Ahat	ement	t (Check	Only 1)		Name of O		itor			00	000		
Facility C	losed/Vaca	ted Du	uring Ent	ire Period of				RVICES IN	C.					
Abatemer						Street Add	Iress							
				ormal Facility		20 14 511	<b>5</b> 1							
	escribe:					32 Williams City, State								
Other - De	escribe:			<del></del>		EAST HAN								
Scope of Work (Che	ck All That	Apply	1)								,			
C 5	22		П	Denovation		Full Conta	inmont wi	th Negative	Droceur					
☐ Demolitio			$\checkmark$	Renovation		Mini - Enc		ui Negauve	riessui					
□ ≥160 sf or					H	Glovebag		)						
	_				V	Non-Exem	pted (*) an	nd Non-Fria	ble Proce	dure				
					Descript				Abatama	nt Tu				
Location o Asbestos Cont		10	ls cation	٨٠	Descript bestos - C			-	Abateme R	1	-	E	ļΕ	
Aspestos Como	anning	1000000	rmally	· ·	Material	1/2		Amount	E	R		N	N	
TO BE ABAT	<u>red</u>	777	Jsed		e., therma	systems		(Specify	M	E		С	С	
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(13)			Main-	or	other misc	ellaneous)			V A	A		P S	o s	
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ROOF				ROOF FLASH	NG			3000 SF 100 SF	V	-	4		-	
REAR 1ST STORY		141		ROOF FELT				100 SF	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-		-		_
Name of Registered	Waste Harr	ler		NJDEP Waste	Cubic	Name of R	egistered	Landfill						
LVI DEMOLITION	Tradic Hau			Hauler ID No.		GROWS /								
					of Waste									
City, State					Disposal	City. State		15 174			10	101	196	
EAST HANOVER, NJ	81				Date	MORRISVI	LLE, PA							
Completed by (Drint	or Tunal	-		Title		-	Signature			-		Date		
Completed by (Print	or type)			Title		\	) ature	7	(	477		<b>-</b> 410		
JOHN FOLSOM				Project Manage	er	1	7/1004	int	EL S	17	2	04	4/22/1	3

### State of New Jersey

### Notification of Asbestos Abatement

Check 42858

Date of Notification (1)	2000	Name of Building Owner/Operator (2)	)
Duite of Administration (1)	April 22, 2013	Princeton University	2012
Agencies Notified [X] EPA	Type Notification	Street Address PO Box 2158	2013 APR 23 AM 10: 50
[ ] DEP	Notification	City, State, Zip Code Princeton NJ 08543	1995 Hall Same
[X] DOL	[] Emergency Notification	N 60	Telephone Number
[X] DOH	w/Justification	Name of Contact	Telephone Number
[ ] DCA	[X] Amended Notification #7 Cancellation	Robert Ortega	1

[X] DOH	W	//Justificati	ion		Name of Contact		1 elepno	one Num	ber		
[] DCA	, N	Amended lotification	ı #7		Robert Ortega		1				
	Can	cellation		4000							
		0	FAC	II ITY IN	FORMATION						
Name of Facility Where Abateme	ent is Taking	Place (3)	170	ALIT I III	CAMPITION	Type of Facili	ty (4)				
Hibben & Magie Apar	tment Co	mplex				[ ] Sub [X] Oth	ool (K-12 chapter 8 ( er (i.e., pri ildings, hor	Other that vate & co	n K-12) mmercial,		
Street Address		T 100 17				Square Fee		Floors	Bldg.	Age	
50 Faculty Road						160,000	8		50		
City (5) Princeton	County (6 Mercer	5)			y Code (7) Use Only)	Current Use Student Ho		if being	demolisi	ned)	
Name of Monitoring Firm Hired by	y Building		ASCM No	1	Name of Abatement Con	tractor (9)					
Owner (8) ATC Associates					LVI Demolition Service	es, Inc.					
Street Address		rs I		-	Street Address		- 1				
3 Terri Lane Suite 4					32 Williams Parkway		. 1				
City, State, Zip Code					City, State, Zip Code				31	1	
Burlington NJ					East Hanover, NJ 07	936				1,210,000	
Project Manager for Monitoring Fi	rm	Teleph	none Numbe	er	Telephone Number		License N	umber			
Mike Keehn		609-40	9-0400		973-884-8682			008	60	, ř.	
Scheduled Start Date (10)	Sched. Co	mpletion	Date (11)		Name of OSHA Monitor						
10/1/2012 Month / Day / Year	5/15/2013 Month /		ar		RATMIR ILAZAROV						
Occupancy Status During Abatemed [X] Facility Closed/Vacant During [] Abatement Performed Outside	Entire Period	of Abatem	ent		Street Address 32 Williams Parkway						
[ ] Occupied [] Hours – Describe:					City, State, Zip Code						
[] Other - Describe:					East Hanover NJ 0793	6			V 11		
Scope of Work (Check all that approximate [X]Demolition [ $\ge 3$ sf or $\ge 3$ lf		denovation		[X] [X]	Il Containment with Negati Mini-Enclosure Blove Bag Procedure & "W Non-Friable Procedure		A				
[X]≥ 160 sf or ≥ 260 lf		Is Loca	ition	[7]	von-Friable Frocedure			Abatem	ent Type		
Location of Asbestos-Containing Material (ACM) (13)		Norma Use Sole By Ma tenan Custoo Staff (	d ly ain- ce/ dial 12)	Asl (i.e., ther surfa	Description of bestos-Containing Material (ACM) mal systems, insulation, cing, VAT, or other miscellaneous)	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 E	
Building Exterior		X		Mastic		20,000 SF	X				
Throughout Structure		X	Tu N	Pipe Insula		2000 LF	X				
EXTERIOR PIPE TRENCH EXTERIOR		X		PIPE INSU TRANSITE		550 LF 200 LF	X	1			
				entre make		Assessment of the second		1611	1 1		
Name of Registered Waste Hauler LVI Demolition Services, Inc.		NJDEP W 20859		Cubic Yard Of Waste	ls	Name of Regi			ania		
City, State				Disposal D	ate	City, State			00		
East Hanover, NJ 07936 Completed By (Print or Type)		Title		3/1/2012 Signature		Morrisville,	Pa				
	0_0			- Billion		1					
Ed King		Presiden	t	10		April 22, 2013					



Date of Notification (1) 04/20/2013				Name JOSI	of Building	Owner/Operato			#- 24h		2.	
IT FPA	Type Notificatio	on ·	+		Address EETHOV	EN AVE.		PR 23 AM	): 5c			
DEP DOL	Initial   Amended   Amendme   Emergence			City, S WAS	tate, Zip Co HINGTO	ode N N.J. 07882		-IČĚKĚKA	diponii Perina			-
DOH DCA	justification Cancellation	n)	ig 		of Contact PH PHI	ГΑ		Telephone	Numbe	r		
Name of Facility Where Ab	patement is Tak	ing Place	(3)	FAC	CILITY INFO	ORMATION	Type of Facilit					
PRIVATE HOUSE		10.00		117			School (H					
30 BEETHOVEN AVI	E. 1	4		8 1			Subchapi	ter 8 (Other than I	(-12) ercial b	ullding	js, ho	mes
City (5) WASHINGTON N.J. (	07882						Square Feet 1,800 SF	# of Floors 2 STORIE	-6 ]		Age	
County (6)				County (STATE	Code (7)			Prior if being demo	H0000		YEA	IRS
Name of Monitoring Firm H	ired by Building	g Owner (8	3)	ASC	M No.	Name	of Abatement C	ontractor (9)		-		
Street Address						SHA	RON QUALIT	TY CONSTRU	CTIO	NLL	C.	77
		200					AN ORDEN	PL.				
City, State, Zip Code			=1_			City, S	tate, Zip Code KENSACK N	1.07004				
Project Manager for Monitor	ring Firm			Telepho	ne No.		ione No.	.J. 07601	Ma	-		
Start Date (10)		Schadu	led Co	mpleties	Date (11)		708- 4270	01135				
04/30/2013		05/01/	2013		Date (11)		of OSHA Monito RO - PROBI					
Occupancy Status During A						Street	Address	<del></del>			-	
Facility Closed/Vacated Abatement Performed	d During Entire Outside of Nori	Period of mal Facilit	Abater y Hour	ment 's			IBERTY STF	REET				
Other - Describe:							UCHEN N.J.	08840				
≥3 sf or ≥3 if ≥160 sf or ≥260 if	наг Арргу)	grandowly	Renova Demoli			×	Glovebag Pro				re	
1			Locat Norma					7		Abat	emen	t
Location of Asbestos-Containing Mai	terial (ACM)	Use	ed Sole	ely by	Asbesto	Description of Containing Ma	aterial (ACM)	Amount	-	T	ype	Г
TO BE ABATE In Facility	<u>D</u>		todial 8		(i.e. ti	nermal systems surfacing, VAT	insulation, , or	(Specify SF or LF)	Removal	Repair	Encar	End
(13)		Yes	No	TNA	× 11 0	other miscellane	eous)	•	loval	pair	Encapsulate	Enclosure
BASEMEN <sup>-</sup>			X	1,021	Du	ct Paper Insu	ulation	120 sqft	×		(0)	
				1								
							- 8		+-			
lame of Registered Waste H				JDEP Wa		Cubic Yards	Name of	Registered Landfi	1			-
	NSTRUCTI	ON LLC		lauler ID 1 0033697		of Waste TDB	1	VA ENTERPR		NC.		
						Disposal Date	City, State			-		
HARON QUALITY CO ity, State ACKENSACK N.J. 07 ompleted by	601				100	TBD	WAYNE	SBURG, OH	0			

### MO#20613925080

MAY 11

Agencies Notified	Date of Notification (1)	41			Name	of Buildin	g Owner/Operator (2				970		
Caldwell, NJ 07006	04	20 / 13	3		Stanle	y Mayro	wetz	2012 -					
Caldwell, NJ 07006	Agencies Notified	Type Notification						- MARR	22				
Caldwell, NJ 07006					8 Bro	okside A	venue	2	-0 A 10:5n	e e			
Cancellation					City, S	State, Zip (	Code			5			
Stanley Mayrowetz	600,000			,	Caldw	ell, NJ 0	7006	6 L/M	L. Ohlani				
Stanley Mayrowctz   FACILITY INFORMATION   Name of Facility Where Abatement is Taking Place (3)   Private house   Street Address   Street Ad			ioidaiiiş	,	Name	of Contac	t		Telephone Numb	er			
Second   County (6)		☐ Cancellation		4	Stanle	y Mayro	wetz		1 41				
School (K-12)   School (K-12)   School (K-12)   Street Address   Street									and the same and				
School (K-12)   School (K-12)   School (K-12)   Street Address   Street	Name of Facility Where A	batement is Takin	g Place	(3)				Type of Facility	(4)	-	-		-
Street Address													
Street Address	CONTRACTOR OF THE PERSON NAMED IN CONTRA		1 100								11 to		
Caldwell, NJ 07006	8 Brookside Avenue									ial bu	ııldıng	IS.	
Cauthy (6)   County (7) (5)   County (7) (5)   County (8)   County (		**************************************								BI	dq. A	qe	
County (6)  Essex Name of Monitoring Firm Hired by Building Owner (8)  ASCM No.  Name of Abatement Contractor (9)  Gr Tech LLC  Street Address  S76 Valley Rd #283  City, State, Zip Code  Wayne, NJ 07470  Project Manager for Monitoring Firm  Telephone No.  Stenduled Completion Date (11)  04 / 29 / 13								2.00004					
Name of Monitoring Firm Hired by Building Owner (8)			-		Coun	ty Code (7)	(STATE USE ONLY)	Current Use (P	rior if being demolish	ned)			
Name of Monitoring Firm Hired by Building Owner (8)	Essex				11 0								
Street Address		Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9	)) :	-			
Street Address								- 34					
City, State, Zip Code  Wayne, NJ 07470  Project Manager for Monitoring Firm  Telephone No.  Telephone No.  973-638-1777  01127  Name of OSHA Monitor  Envirovision Consultants, Inc  Steed Address  Street Address  20-21 Wagaraw Road, Bldg. # 35 E  City, State, Zip Code  Wayne, NJ 07470  104 / 29 / 13  04 / 30 / 13  Cocupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement  AM	Street Address												
City, State, Zip Code  Wayne, NJ 07470  Project Manager for Monitoring Firm  Telephone No.  Telephone No.  973-638-1777  01127  Name of OSHA Monitor  Envirovision Consultants, Inc  Steed Address  Street Address  20-21 Wagaraw Road, Bldg. # 35 E  City, State, Zip Code  Wayne, NJ 07470  104 / 29 / 13  04 / 30 / 13  Cocupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement  AM							576 Valley Rd #	1283					
Wayne, NJ 07470  Project Manager for Monitoring Firm  Telephone No. Telephone No. 973-638-1777 01127  Name of OSHA Monitor  Cocupancy Status During Abatement (Check only one)  Start Date (10) 04 / 29 / 13 04 / 30 / 13  Cocupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement AM- PM/ PM AM  Scope of Work (Check all that apply)  Scope of Work (Check al	City, State, Zip Code						The state of the s				X22		
Telephone No.   Telephone N													
973-638-1777   01127	Project Manager for Moni	toring Firm		Tele	phone	No			License No				
Start Date (10)					,								
Occupancy Status During Abatement (Check only one)	Start Date (10)	Sche	duled C	comple	tion Da	ite (11)		Monitor	01127				
Occupancy Status During Abatement (Check only one)    Street Address													
Facility Closed/Vacated During Entire Period of Abatement   Abatement   Performed Outside of Normal Facility Hours - Describe   Time of Abatement: AM- PM/ PM_ AM   AM   PM/ PM_ AM   AM   PM/ PM_ AM   City, State, Zip Code   Fair Lawn, NJ 07410								nsultants,Inc			ere and comme		
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:  AM-  PM/ PM PM AM  City, State, Zip Code Fair Lawn, NJ 07410  Clean up and decontamination Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*	24427				ment				44.0				
Time of Abatement: AM- PM/ PM_ AM Fair Lawn, NJ 07410  Scope of Work (Check all that apply)  Scope of Work (						scribe			35 E				
Scope of Work (Check all that apply)    Scope of Work (Check all that apply)   Scope of Work (And Non-Friable Procedure   Abatement Type   Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)   Scope of Work (ACM)   Amount (Specify SiF or LF)   Scope of Work (Specify SiF or LF)   Scope of W	Time of Abatement: _	AMF					The control of the co						
Second   S	Scope of Work (Check all	that apply)					The second secon		nation		78.1		
Saf or >3 If   Saf or >3 If   Saf or >3 If   Saf or >2 160 sf or >260 lf   Saf or >2 60 lf   Saf or		triat apply)					-						
Non-Exempted (*) and Non-Friable Procedure	>3 sf or >3 lf						Mini-End	losure					
Secretion of Asbestos-Containing Material (ACM)   Used Solely by Maintenance / Custodial Staff? (12)   Yes   No   N/A	≥ 160 st or ≥260 if		∐ D∈	emolitic	n		Gloveba Non-Eye	g Procedure	on-Friable Procedure	2			
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Per No N/A  Basement  Normally Used Solely by Maintenance Custodial Staff? (12)  Yes No N/A  Pipe insulation  Normally Used Solely by Maintenance Custodial Staff? (12)  Yes No N/A  Pipe insulation  Normally Used Solely by Maintenance Custodial Staff? (12)  Yes No N/A  Pipe insulation  Normally Used Solely by Maintenance Custodial Staff? (12)  Yes No N/A  Pipe insulation  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation (i.e., thermal systems insu			T 1	e I noat	ion	1		impled ( ) and it	T Table 1 Toccuur				
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Yes No N/A  Pipe insulation  Name of Registered Waste Hauler  Outside Solely by Maintenance/ Custodial Staff? (12)  Name of Registered Waste Hauler  Outside Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Pipe insulation  NUDEP Waste Hauler ID No. Cubic Yards of Waste Outside Staff (Name of Registered Landfill)  T.R.R.F. Inc  Outside Solely by Maintenance/ (Specify SIF or LF)  Name of Registered Waste Hauler  NUDEP Waste Hauler ID No. Cubic Yards of Waste Outside Staff (Name of Registered Landfill)  T.R.R.F. Inc  Outside Solely by Maintenance/ (Specify SIF or LF)  Name of Registered Landfill  T.R.R.F. Inc  Outside Solely by Maintenance/ (Specify SIF or LF)  No. N/A  Pipe insulation  TBD  Tullytown, PA	Location	of					Description of	of .			-	T -	T
Comparison of Registered Waste Hauler   NJDEP Waste Hauler   D No.   Cubic Yards of Waste   Name of Registered Landfill   City, State   Disposal Date   City, State   Ci	Asbestos-Containing N	Material (ACM)					stos Containing Ma	terial (ACM)	Amount	Re	Re	Enc	Enc
Comparison of Registered Waste Hauler   NJDEP Waste Hauler   D No.   Cubic Yards of Waste   Name of Registered Landfill   City, State   Disposal Date   City, State   Ci						(i.e				l ou	pa.	aps	los
Yes   No   N/A		У	-		J.G., .				SIF or LF)	<u>a</u>		ula	ure
Basement Pipe insulation 85 LF	(3.57)		Yes	No	N/A	1	other impochane	.003)				ē	
Name of Registered Waste Hauler  NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Landfill  Gr Tech LLC  City. State  Wayne, NJ 07470  TBD  Tullytown, PA	Dacamant					Dia-	ulation	The same	05.1.5	ואו			
Name of Registered Waste Hauler  NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Landfill  Gr Tech LLC  City. State  Wayne, NJ 07470  TBD  Tullytown, PA	basement		12-	-		Pipe ins	ulation	994(11-0)	85 LF	(2)		Ш	
Name of Registered Waste Hauler  NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Landfill  Gr Tech LLC  O033785  TBD  T.R.R.F. Inc  Disposal Date  City, State  Wayne, NJ 07470  TBD  Tullytown, PA				Ш	Ш								
Gr Tech LLC 0033785 TBD T.R.R.F. Inc City. State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA													
Gr Tech LLC 0033785 TBD T.R.R.F. Inc City. State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA								***************************************			Ī		In
Gr Tech LLC 0033785 TBD T.R.R.F. Inc City. State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA	Name of Registered Wast	e Hauler	14.	Nii	)FP Wast	Hauter ID No	Cuhic Yards of Most	Name of Dan	stered Landfill				L
City. State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA	=	- Hudioi		- 1									
Wayne, NJ 07470 TBD Tullytown, PA				(	003378	35		A THE PROPERTY OF THE PROPERTY OF THE PARTY					
- A Line Company	. 10, 10 11 2-						Disposal Date						
					i ju,		A	Tullytown, F	PA	5		170	ii y
Completed By (Print or Type) Title Signature Date	Completed By (Print or Ty	pe) Titi	е				Signature	1 1	Dat	е			
N.Jevtic Owner 04/20/2013		Ow	ner				1/200	nc we	04/2	20/20	)13		

### State of New Jersey

### NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

April 19, 2013  Agencies Notified Type of Notification Street Addr	Sage General Contracting (2)									
[ X ] EPA [ ] Initial Notification	645 Mizzen Avenue									
[ ] DEP [ ] Amended Notification City, State,	Zip Code Beachwood, NJ 08722									
[ ] DCA justification) Name of Co	ontact Telephone Number Jack Fernandez									
FACILITY INI	FORMATION									
Name of Facility Where Abatement is Taking Place (3) Residence	Type of Facility (4)  [ ] School (k-12)									
Street Address 605 Bayview Drive	Subchapter 8 (other than k12)  [ X ] Other (i.e., private & commercial buildings, homes, etc.)									
City County (6) County Cod (STATE US	e (7) Square feet # of Floors Bldg. Age									
Toms River Ocean	Current Use (Prior if being demolshed) Residence									
Name of Monitoring Firm Hired by Building Owner (8)  N/A  ASCM No.	Name of Abatement Contractor (9)  Guardian Contracting, Inc.									
Street Address	Street Address 1889 Route 9, Unit 61									
City, State, Zip Code	City, State, Zip Code Toms River, New Jersey 08755-1271									
Project Manager for Monitoring Firm Telephone Number	Telephone Number License Number 732-349-9932 00624									
Scheduled Start Date (10) Scheduled Completion Date (11) 4/19/13 4/22/13	E.M.S.L. Analytical									
Occupancy Status During Abatement (Check only one)  [ X ] Facility Closed/Vacated During Entire Period of Abatement  Abatement Performed Outside of Normal Facility Hours	Street Address 1056 Stelton Road									
Other – Describe	City, State, Zip Code Piscataway, New Jersey 08854									
Scope of Work (Check all that apply)	Full Containment with Negative Pressure     Mini-Enclosure									
[ ] $>3$ sf or $\ge 3$ lf [ ] Renovation [x] $\ge 160$ sf or $\ge 260$ lf [x] Demolition	Glovebag Procedure X Non-Exempted (*) and Non-Friable Procedure									
	Abatement Type									
Is Location Location of Normally used	Description of Asbestos-Containing Amount R E E N N									
Asbestos-Containing Material (ACM) Solely by	Material (ACM) (Specify SF M P C C									
TO BE ABATED Maintenance/Custodial staff	(i.e., thermal systems or LF) O A A L O I P O									
in facility Staff (13) (12)	VAT, or VRSSS									
	other miscellaneous)									
YES NO N/A	L E E									
Exterior X Asbesto:	s siding 1250 sf X									
	ubic Yards of Waste Name of Registered Landfill									
Name of Registered Waste Hauler NJDEP Waste Hauler ID No.   C										
Guardian Contracting, Inc. 20223	3 T.R.R.F.									
	3 T.R.R.F.  City, State Tullytown, Pennsylvania									

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

Check #3

Date of Notification (1)			1	Name of	Building Owner	perator (2)			20.		-	
	4-20-1	13			BREOR	Y C	· LL		13	100	-25 05	
Agencies Notified	Type Notification		-m - an - 2	Street Ac	7		gar out grant and s		# W	4/7	22	( # - T
D EPA	Initial ☐ Amended	arr		City Stat	te, Zip Code	U.E	lawa	ne Dais	<u>C </u>	1 1	¥(.,	25
DOL	Amendment #	only.	2 4 50	V ) 44 7 11		ick	しい	0872	2	A		,
⊅ DOH	<ul> <li>Emergency (ir justification)</li> </ul>	cluding	1		Contact		100	Telephone Num	-	77	251	753
□ DCA	□ Cancellation			M: $k$	le Tass	116		0				<u>-∠</u> _24.7
Name of Facility Where	Abatament is Taking	Place (3)		FACIL	ITY INFORMATI	ON	pe of Facility (					-
	anily ]			10		1.2	¥.					
Street Address	_ ′ ~			7				8 (Other than K-12) private & commercial		ings,	home	es.
(ib) (f)	Barry C	JRIVE				Ca	etc.)	# of Floors	To	de A		
	Hawkin	7		The state of the s	08050		uare Feet	# of Floors		dg. A	ge † 1	
County (6)			.   (	STATE U	Code (7) ISE ONLY)	- 5	Single f	or if being demolished		11.	15	
Name of Monitoring Firm	Hired by Building O			ASCM	No.	Name of A	batement Con	tractor (9)			In	R
Street Address	30x 33	7-				Street Add		and U			20 4 4	_ Sap
City, State, Zip Code	2.124	A/.7	-	20	533	City State	, Zip Code	· 100	0	06	: 2	2
Project Manager for Mo		14 0		Telephor		Telephone		License No	5		U	
	chenkea		10	P09	758-3365	609 75	8-336	SOC	)	רנ	1	
Start Date (10) May /	2013	Schedule		3	2013	400 00000000000000000000000000000000000	SHA Monitor PC Tec	hnologies	$\mathcal{I}$	ic.		
Occupancy Status Durin	ig Abatement (Check	Only On	e)			Street Add	iress					1.
Facility Closed/Vac							1. BOX	33 F			- 1	
☐ Abatement Perform ☐ Other – Describe:	ned Outside of Norma	ai Facility	Hours	u 119			, Zip Code	11		~ ~	~	
Scope of Work (Check A						14000	Egypt	NJC	0-	53	ے۔	
≥3 sf or ≥3 lf     ≥160 sf or ≥260 lf	iii mary ppiyy	□ R 128< □	enova				Full Containme	ent with Negative Pr	essu	е		
2100 \$1 01 2200 11			Ciriona	011		. 🗆	Glovebag Prod	cedure		21		
		T					Non-Exempted	d (*) and Non-Friable	e Pro		ement	
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Locatio Asbestos-Containing		Use	d Sole	ly by	Asbestos Con	scription of taining Mate	rial (ACM)	Amount			m	
TO BE AE	BATED	D 24	intenar todial S		(i.e. therma	I systems in:	sulation,	(Specify	Re	Z)	Encapsulate	Enc
In Fac (13)		000	(12)			icing, VAT, c miscellaneoi		SF or LF)	Remova	Repair	nsd	Enclosure
(10)		Yes	No	N/A			1.5		a	,	ate	9
					F. 3	<u> </u>		100 65	k			
Ground lee	بد ا	-	X		Floor		:	100 SF				
exterior				×	Siding	Shing	les	800 SF	x			-
						1.0						
Name of Registered Wa	ste Hauler			JDEP W		Yards	Name of	Registered Landfill		-	. 50%	
EPC Tec	hnologies	}	H	auler ID	00	4		e Managen	いか	4.0	F.F	W
City, State New E	0	NJ			4 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3-13	City, Stat	isville P	A	Parent.	75 G	4
Completed by	711	Title		4		Signature	250	Dat	e 4/_	20	-1	3
Steve Sche	in Ker	1 Mile	Sid	ent	1 P. C	Mesos	0 Date	ah	1	20	- (	1

E OF SERVEY NOTIFICATION (Pursuant

Actor of Now Jorday
NOTIFICATION OF ASSESTED ABAYEMENT
(Pursuant to NIAC 5:50 and 12:120)

2813 APR 23 APR 10: 50

Incide Notification  EPA II Infital		<b>5</b>	arcot Ad	1; tan 35	Demo Cutt	er I	give	(Pa) Ro	* C	17	<u>. (</u>
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no of Facility Where Alexament is Taking	Dines (2)		FACIL	ITY INFORMAT	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	1	MIVERAF	PRI	ME	D	
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138/140 BROOK	<u> </u>	TR	ee t			btc.)				1-0	
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unity (8)	42		County C	odo (7)	Curro	nt Use (Pric	or if being damale	hed)	8		
Monmouth				ESE ONLY)	- D.	eplex	Resident	-ial	D	مرد (	lin
me of Monitoding Firm Hired by Building C	wner (0)	<b>3</b>	ASCM	No	Name of Aba	tement Cor	Lhooler	ins	L	7.0	
eet Address	त्र			***************************************	Street Addro	Ross	332	3	- 1		F.Sh
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ort Date (10)	Schodul	ed Con	piccon I	Date (11)	Name of OS	A Monitor		-		-	
4-19-13			0-1	3			hnologies	. 1	nc		357
cupancy Status During Abatement (Check 2 Facility Closed/Vacated During Entire P		rece.	nnt.		Street Addre		337				
Abatement Performed Outside of Norm	al Facility	Hour	IO114		City, State, 2	p Code	<del></del>		-		
Other - Decurbe			-		New	Egypt	NJ	08:	3.3	3	
ope of Work (Chock All That Apply)		· .v									
2 23 of or 23 if 2180 of or 2280 if		lanova Domolit			Min	ni-Enclosur vebag Prod				n.	
	- 1 is	Locati	on				11 11 11 11	1	Abato	ment	
Location of	1 1	Normal d Sulc	y .		eacription of			-	Ту	pe	<b>"</b> -
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	inteneral:	ico/		ntaining Materia Al tydioms Insul		Amount (Specify	20	,	m R	2
in Facility (13)	Cuo	todio) 8 (1.2)	الشار		acing, VAT, or miscellaneous)		SF or LF)	Remov	Repai	Encapsul	CHANGE
	Yes	No	N/A		modelandowy	7= "		1 20	-	120	0
Basement AReas	4	140,	1421	D	Insula		160	X			-
DASEMENT HUCKE	-X	-	-	Tape 1	L7544 LA	207	160	1	-		-
	-							-			-
	+		-					-	-		1
mo of Registered Weste Hauler			N 43OL		ic Yards	Name of	Registered Landt	1	2 1.		1
EPC Technologies	e ' .	- 1	170	No. of the second secon	facto 2	Wast	e Manage	mr.	t	e F	2
	7	-	1 & showing			4		100			
Mew Egypt  Moderatory  Moderat	NJ				- 22-13	City, Stat	خعبزالو	PA			

ASB-41 (R-06-00)

\* Do not use this form for asbestos licensura exempled activities

Check the

Data of Natification (1)		- 1	Nome of	Building Owner	Onosohos //	2)		2	9-		- , -
Date of Notification (1) 4-18-	13	1	Name of	Building Owner/	Operator (	Miche	Ile ZI	ho	3	0,4	
Agencies Notified Type Notification			Street A	ddress 40	Mi	ele. F				752	2
☐ EPA 📜 📜 Initial 💲 ☐ Amended	1 AC 30			te, Zip Code	-	TANK THE PARTY OF	。			0.6 J	(4)
	nt # y (including		Nama at	Contact	)um	mit	The Company of the St.	79	0		
DOH justification		2.1			Thac	>	Telephone Num	ber			-
Name of Facility Where Abatement is Tal	ring Place (3)			LITY INFORMAT	ION	• •	0	: -			
Single Family	Deve		19			Type of Facility (  School (K-1					
Street Address	<b>.</b>		1			□ Subchapter	8 (Other than K-12)		dinas	home	se.
40 Miele	Place		- 1.4			etc.) Square Feet	# of Floors		ldg. A		
	NJ	0	790	01		oquare r cet	Z			) t	-
County (6)			County (	Code (7) USE ONLY)		Current Use (Pri	or if being demolished		١	11	,
Name of Monitoring Firm Hired by Buildin	g Owner (8)	نا	ASCN	enterocytocomin eleman	Name o	f Abatement Cor	tactor (9)	- v	)wx	· III	15
EPC Technol				NA	E	PC Te	chnolog	ie	5,	In	2
Street Address	137				Street A	ddress 0. Box	333				3
City, State, Zip Code		10	00	E22		ate, Zip Code	- 114		06	- 9	
New Egypt	NO		98	333	Ne	W Egy	pt NU	U	9	)5	5
Project Manager for Monitbridge Firm	4	- 1	Telephoi	ne No. <b>758-</b> 3365	100	ine No. 336	License No	5.5	19	4	
Start Date (10)	Scheduled	Com	pletion I	Date (11)	Name o	f OSHA Monitor	,		P P	-	10.5
Occupancy Status During Abatement (Ch	unck Only One		0-	13	Street A	LPC Tec	hnologies	T	nc		
Facility Closed/Vacated During Entir			ent	*		O. Box	337				
☐ Abatement Performed Outside of No					City, Sta	ate, Zip Code	The second				
Scope of Work (Check All That Apply)					[Ve	w Egypt	NJC	183	5.3	3_	
□ ≥3 sf or ≥3 lf	□ Re	enovat	tion			Full Containm	ent with Negative Pr	ressu	re		
≥160 sf or ≥260 lf	De De	emoliti	on			Mini-Enclosure Glovebag Pro					
						Non-Exempte	d (*) and Non-Friabl	e Pro	-	e ement	
Landing		ocation or mall		_	escription (	,				ре	
Location of Asbestos-Containing Material (ACM)		Sole		Asbestos Co	ntaining Ma	aterial (ACM)	Amount	71	1130	m'	m
TO BE ABATED In Facility	Custo	dial S (12)	Staff?	surf	acing, VAT		(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	V I		L N//A	other	miscellane	ous)		val	1	ulate	ure
	Yes	No	N/A	Cidi	CL	10	1000 00	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			-
Exterior		+	X	DICHAS	Sn	ngles	1000 SF	X	-		
		-									
Name of Registered Waste Hauler			JDEP W		c Yards	1	Registered Landfill		1	1	
EPC Technologi	es	H	auler ID		aste 6	Wast	e Manager	nda	+ 0	F F	A
City, State				Disp	osal Date	City, Stat	e	A		÷.	
New Egypt	NJ Title		1.435	4'	Signature	) Morn	A Dat	e			. 5
Steve Schenker	Pizes	side	ent		Ste	co) Sch	che 6	1-	18	·- l	13

40 mick

Date of Notification	(1) 4/4/13		0 17				Owner / Operat		2) 2/	13 APO		9	-	
Agencies Notified  EPA	Type Notific	cation		Stree	et Addr	ess	Street			113 APR 23 A	110:5	<i>D</i>		7
DEP DOL DOH DCA	☐ Eme	al ended R#1-4/19 ergency cellation	9/13	Trer Nam	State of Control of Co	NJ 08 ontact	638			Kristini T	/////// Telepho	4:	lumb	įer
				5243005		C4000000000000000000000000000000000000	ORMATION					-	V- 11	- 1
Name of Facility W Trenton Central Street Address 400 Chambers S	HS	nent is Taking F	Place (	3)	CILIT		Type of Fac School Subcha	(K-1 apter i.e. p	2) NON SU 8 (Other the rivate & cor	nmercial buildin			etc.)	
0:4-75)		10. 1.00	10		0 1	/\	Square Fee		# of Flo	ors	3ldg. Ag			
City (5) Trenton		County (6) Mercer	Co	ounty	Code	(7)	70,00 Current Use School		or if being d	emolished)	iv.	60+		- 1
Name of Monitoring Environmental C			ner (8)		ASC	CM No	Name of Ab Bristol En			ACCOUNT OF THE PARTY OF THE PAR	1000			
Street Address 120 North Warre City, State & Zip Co							Street Address 1123 Beav City, State 8	er S			-			
Trenton, NJ 0801				1000			Bristol, PA			- Property			-	
Project Manager for Jim Frisbee	Monitoring	Firm			e Numl 4200	ber	Telephone N (215)788-6	Vuml		License N 00509	lumber			
Scheduled Start Da 4/17/13		Scheduled Co			ate (11) OLD)		Name of OS Bristol Env			ıc.				
	sed/Vacated	<b>During Entire F</b>	eriod	of Ab			Street Addre	ess er S	treet		1	- 32		-
Describe:	4:00 PM to	Outside of Norm  1:30 AM  Abatement	al Ho	urs –	7am to	o 3pm	City, State & Bristol, PA							
Scope of Work (Che	f	pply)			novatio		A		Mini-End Glove B	stainment with N closure ag Procedures empted and Nor				
	ocation of	+10 - 114 - 1 - 1		Loca		100	Descriptio			Amount	Ab			
Mat TO E	tos-Containir erial (ACM) BE ABATED n Facility (13)	ng	S Main	olely tenar	nce or Staff?		Asbestos-Cor Material (A (i.e., thermal s insulation, surfa or other miscel	ACM) syste icing	ems , VAT	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclsoure
C-112		7.72		П			Nail Cre	210	11	280 SF	$\pm$			П
A-215	30 m		H	Ħ	H		Nail Cre		3 3	420 SF			H	H
A Thairtain						ry, eller	Access of the second		-		一百	n	Ħ	П
r primary reva		the decrees to				T part or	variation and the second							
		Environment of					A MOTORNEY CO.							
Name of Registered				Ha	JDEP V auler ID 3706		Cubic Yards of Waste 1 Cu Yd	1	me of Regi	stered Landfill				
City, State Bristol, PA							Disposal Date	Cit	y, State orrisville,				10. +	
Completed By (Print Gino Pizzigon		a and the second	i i i i		le roject anage		Signature Lino Peg	· Se	gone	1884 - 302	Date 4/4/	13	8	

Date of Notification		70.14		$\neg$	Nan	ne c	f Bu	ilding (	Owner / Opera	ator	(2)	JAR	723 AH				
Aganaiga Matified	4/4/13				Tre	nto	n B	oard o	of Education	n			Co Ro				
Agencies Notified EPA	Type Notifi	cation		- 1			Addre						11.	10: 5	4		
DEP	☐ Initi	al							Street		t ·	4/1/	82 J	(%)	0		
DOL7364		ended						Zip C					4:7. 7				
Ø DOH 5988	☐ Eme	ergency						ntact	36				1	-7/			0
☐ DCA		cellation		- 1					ollins				1	eleph	one i	vum	oe <sup>g</sup>
					F	ACI	LIT	Y INF	ORMATION		-						
Name of Facility WI	here Abaten	nent is Taking F	Place	e (3	3)				Type of Fa	cility	(4)					-	-
Trenton Central	HS										12) NON S	UB-CHA	APTER 8				
Street Address				ig.	ent-Yello						r 8 (Other t						
400 Chambers St	treet										private & co			s, hor	nes,	etc.)	
MILL BARM									Square Fee		# of F			dg. A			
City (5)		County (6)	15	Co	unty	Co	de (7	7)	70,00	00	5.00	3			60-		
Trenton		Mercer							Current Use		ior if being	demolis	hed)				-
			-19				1		School		3 - 1 - 1 Z						
Name of Monitoring Environmental C	Firm Hired	by Building Ow	ner	(8)	r,	1	ASC	M No.	Name of Ab						7		
Street Address	Officetion				4			01	Bristol En		onmental,	Inc.					75
120 North Warrer	Street								Street Addr		Street						
City, State & Zip Co. Trenton, NJ 0801			Sign :				rein-	A CONTRACTOR	City, State &	& Zip	Code						
Project Manager for	Monitoring I	Firm	Te	lep	hon	e N	umbe	er	Telephone			1	icense Nu	ımher			
Jim Frisbee			60	9-3	392	420	00		(215)788-6				00509	arribor			
Scheduled Start Dat	e (10)	Scheduled Cor				ate	(11)		Name of OS								-
4/17/13					/13				Bristol En		nmental	Inc.					
Occupancy Status D	od//acated	ment (Check of During Entire P	nly (	one	()				Street Addre						- 7		
		utside of Norm							1123 Beav							200	
Describe:	A-OO DIM to	1.20 ARA	aı r	JOU	ırs –	· /a	n to	3pm	City, State 8								
Facility Occu								60 38	Bristol, PA	4 19	007						
Scope of Work (Che								-	- W	-	1 1 1	-			-		
	ung an an									Г	Full Co	ntainme	nt with Ne	gative	Pres	ssure	
≥3 sf or ≥3 lf			$\times$	1	Re	nov	ation	1		X		nclosure					
≥160 sf ≥260	) If			]	De	mol	ition					Bag Pro	cedures				
		19,11			T-						Non-Ex	empted	and Non-	Friable	e Pro	cedu	re
	cation of				oca				Description			1	mount			ent T	
	s-Containin rial (ACM)	g	No		ally		ed		Asbestos-Co				pecify				
	E ABATED	There has the	Ma		lely enar		or		Material (A (i.e., thermal:			SF	or LF)	70	_	E	Ū,
	Facility				dial				sulation, surfa					Removal	Repair	aps	CIS
	(13)				(12)		1		or other miscel			7-12		Val	=	Encapsulate	Enclsoure
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alatal Fundamen	mial las						ID!	F-8	f Waste						11/1	3	
Bristol Environme	ntai, inc.	The service of the	15.		18	706	)		Cu Yd		ROWS La	ndfill	Per te page de	44	4	1.40	177
ity, State	en commente la	, 137 ( )	77.7		-19.				isposal Date		y, State	20					- 1+
Bristol, PA		CONTRACTOR OF STREET	ΑÜ	144	1		11.		/19/13	M	orrisville,	PA	stantin.	No.	114		41116
ompleted By (Print of	or Type)				Titl		-4	S	ignature	2		. 1		Date			No.
Sino Pizzigoni					No. of the last	oje			Hus F	in	SIAN A	. /	N I	4/4/1	13		
	2232 33		-		IAIS	ına	ger	1	my me	11	1 /	17	,				

### Check# 1624

MAY 11

Date of Notification (1)			1	Name (	of Building	Owner/Operato	or (2)		A =		-		
04	19 / 13		5	Sandy	Lee	20	123	100					
Agencies Notified  EPA  DOLWD	Type Notification  ☑ Initial  ☐ Amended			Street 105 M	Address elrose Ave tate, Zip Co	Jue		IPR 23 AM	10: 5 <sub>0</sub>				
DHSS DCA (NJAC 5:23-8)	Amendment #_  Emergency (indigustification)	cluding			esex, NJ 0 of Contact	8846		-105 / 6	Telephone Number	er			
	Cancellation			Sandy	Lee								
				FAC	ILITY IN	FORMATION							
Name of Facility Where A	batement is Taking	Place	(3)					Type of Facility					
Private house								Subchapter 8	?) 3 (Other than K-1 2)				
Street Address								Other (i.e., p	rivate and commerci	al bu	lding	S.	
405 Melrose Avenue								homes, etc.)		LDI	1 - A		
City (5)	35							Square Feet	# of Floors	BIG	dg. Ag	je	
Middlesex, NJ 08846				Count	v Codo (7) (	STATE USE ONL	VI	Current Hea (Pr	ior if being demolish	ed)		7	
County (6)				Court	y code (1) (	STATE OSE ONE	.1)	Current Ose (F)	or it being demonstr	cuj			
Middlesex Name of Monitoring Firm	Hired by Building (	wner (	8) [	ASCM	No.	Name of Ahat	eme	nt Contractor (9)			-		
Name of Monkoring Firm	Timed by ballating c		,	-LOOM		Gr Tech LLC		in Contractor (5)					
Street Address						Street Address							
Street Address						576 Valley R		283					
City. State, Zip Code													
Only. Glate, Elp Gode					- 1	City, State, Zi Wayne, NJ 0							
Project Manager for Mon	itoring Firm		Tele	phone	No.	Telephone No		16.78	License No.		******		-
						973-638-177	7		01127				-
Start Date (10)	Sched	duled C	omplet	ion Da		Name of OSH		onitor				-	
04 1 28 /	13(	)4' /	_ 29		13	Envirovision	Cor	nsultants Inc					
Occupancy Status During	Abatement (Check	k only o	ne)			Street Addres						-	
☐ Facility Closed/Vacate				ment	10.00	20-21 Wagar	aw l	Road, Bldg .#	35 E				
Abatement Performed Time of Abatement:_	Outside of Normal	Facility		s - Des	cribe AM	City, State, Zi Fair Lawn, N	р Со	ode			#	2.	
Scope of Work (Check al	I that apply)	<b>⊠</b> Ra	novati	on.	,4%	Full (	Cont	and decontamir ainment with Ne osure		k W			
_ ≥ 160 sf or ≥260 lf		De	molitic	on -		Glove	ebag	Procedure	on-Friable Procedure	9	1.		
			Locat Norma							Ab	atem	ent T	ype
Location Asbestos-Containing TO BE ABA IN Facili (13)	Material (ACM) ATED	Use Ma	d Sole intena todial (12)	ly by nce/	Asbes (i.e	Description of the containing of the containing of the containing of the contact	Matems in	terial (ACM) nsulation, or	Amount (Specify SIF or LF)	Removal	Repair	Encapsulate	Enclosure
	1.00	Yes	No	N/A									-
Basement				$\boxtimes$	Pipe insu	ılation			105 LF	X			
	North Mark	In	in.		Page 199								
	+ 500 m = 500	10	İ						170.12	П	П	$\overline{\Box}$	
				-									
	CONTRACTOR THE SECTION	14	AL:	DED Mont	e Hauler ID No.	Cubic Vordo of I	Most	e Name of Regi	stored Landfill	Ш	Ш	Ц	إلطا
Name of Registered Was	ste Hauler		12411				vvasu		stered Landini				
Gr Tech LLC			(	003378	85	TBD		T.R.R.F. Inc					
City, State						Disposal Date		City, State					
Wayne, NJ 07470		T. XAT	37.0			TBD	A	Tullytown, P		44.5			
Completed By (Print or T	ype) Titi	le				Signature	18	the Ale	Dat				
N.Jevtic	Ow	ner -					100	14.0 A	04/	19/20	)13		267



Check No. N/A - PA NY & NJ

					The second second				-						
Date of Notification (1)		417		A CONTRACTOR		ng Owner/Operator	(2) 201	PAPR 23 AM							
April 04, 2013	Tunn	Notification			Address			MFR 23			-	¥	-		
Agency Notified	Type I	Notification				minal Bouleva		A.A.	117:5						
<b>⊠</b> EPA	☐ Initi						ara .	71000	100						
DOL Material in State Ray 10 2004	⊠ Am	ended endment # <b>01</b>		100000000000000000000000000000000000000	tate, Zip		1944	4108254	1400						
E 502	□ Em	ergency (including			of Conta	NJ 07002-5014		Telephone Ni	mbor.			- 0			
☑ DOH ☑ DCA		tification) ncellation		100,001,00,000	n Woodruff										
Z DCA	LI Cai	icenation						II_	-	_					
			(0)	FACI	LITY INI	FORMATION	I =	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>							
Name of Facility Where			(3)				Type of Facility	(4)				. 61			
Kinder-Morgen B	uilding				☐ School (K-12)										
Street Address								3 (Other than K-1 ivate & commerc		nas.	93				
188 Calcutta Stre	et						homes, etc.)			-					
City (5)							Square Feet	# of Floors	Bldg.	. Age	9				
Port Newark, NJ	07114-3	3304			1		2	40	+/-						
County (6)			11000			7) (STATE USE	or if being demo	lished)							
Essex				ONLY)											
Name of Monitoring Fir	m Hired b	y Building Owner	ASC	CM No.		- 17.53									
WcCabe Environme	ental Se	rvices, L.L.C.	00	118											
Street Address	- Autorita	English Alberta			Street Address  223 Randolph Avenue										
464 Valley Brook	Avenu	е		-											
City, State, Zip Code	1 11	I was the			City, State, Zip Code							, TI			
Lyndhurst, NJ 07071-1998						Clifton, NJ	07011								
Project Manager for Monitoring Firm Telephone					11.	Telephone No.	The Hilliam	License No.							
Ellen McCabe						973-478-468	31	00120							
Start Date (10)		Scheduled Com	pletion	Date (11)	5-1-1	Name of OSHA	Monitor	FA (22 Y 2							
April 29, 2013		June 30, 20	13			McCabe En	vironmental S	Services, L.L	.C.						
Occupancy Status Duri	ng Abater	ment (Check only	one)			Street Address	+ 1, 40,	1-1-1					-545		
☑ Facility Closed/Vaca	ted Durin	n Entire Period of	Abatem	ent		464 Valley E	Brook Avenue	•	. H H			1			
☐ Abatement Performe						City, State, Zip	Code	, 74, 5,1 538	10.8	, 84					
☐ Other - Describe:					-,	Lyndhurst,	NJ 07071-199	8							
Scope of Work (Check	all that ap	ply)				□ Full	Containment with	Negative Press	ıre						
≥ 3 sf or ≥ 3 If				100000000000000000000000000000000000000	ovation	☐ Mini	-Enclosure								
<b>⊠</b> ≥ 160 sf or ≥ 260 lf				☐ Dem	olition	☐ Glov	rebag Procedure -Exempted (*) and	l Non-Friable Pro	cedure						
						Z Non	Exclinated ( ) diff	1 Non 1 Habit I I	Jocquie	A	bate	eme	nt		
				cation mally							Ту	ре	_		
	ion of	-1 (A CRA)	Used S	olely by		Description		112730			W. 50	L			
Asbestos-Contain	ng Mater	iai (ACNI)		enance/ codial		estos Containing M e., thermal systems		Amount (Specify		R	70	Encapsulate	Enclosure		
IN Fa	cility			aff?		surfacing, VA	T, or	SF or LF		Removal	Repair	Sde	sol		
(1	(13) (12)					other miscellan	eous)			val	3	late	ure		
		- carrow 14	res N	NO N/A	11.12										
GC Bathroom		. V glazzeni	res	X	Cera	mic Tile Mastic	& wall mastic	, <u>a</u>	48 sq fi	tX			Г		
Locker Room				X	VAT		1-1-1-1-1-1		44 sq ft	tΧ					
Storage Room 1	8. 2	1. 1. 1.		X	VAT	PERSONAL PROPERTY.	Fig. 12 State of the said	4	45 sq ft	t X		V.			
Outside Work		10.43.89	77.7	X	20 4 504 750	ow & AC Caulking	a & 1 louver	145 LF &							
Name of Registered Wa	aste Haul	er	NJDE	P Waste F	.01	Cubic Yards of	Name of Regis				_		- 2		
B&N&K Restorati			ID No.			Waste		No di massi e refe							
Jimmy Byrne Tru		er Barbara	1269	95 / 5007	/1	20		nterprises, Ir	ic.			1-1	Å.		
City, State	- 7				20-2-00-00-0 10-2-00-0	Disposal Date	City, State		17	3	7	die.			
Clifton, NJ 07011 / Bronx, NY						5/3/13 //						× 2	(24)		
Completed by	***	Title	2 00 EW	A	10000	Signature	1 4		Date		70.0				
Aleksandar Kurid	za	Vice-Presid	ent			Jun	-/		4/19/	201	3				

Mint raftu State of New Jorgey NOTIFICATION OF ABBESTOD ADATEMENT DOL - 10 DAY (Furguant to NJAC 8:00 and 12:120) Date of Notification (1) Nume of Building Owner/Operator (2) 4/18/2013 METRO RAHWAY URBAN RENEWAL. Agencies Notified Typo Notification Street Address 111 MAGEE AVENUE EPA FIRMS Amonded City State, Zip Code DEP 卤 APPROVED DOI Amondment # LAVALLETTE, NJ 08738 X Emorgency (Including: DOH Name of Contact Justification) Tolophono Number SHANE SORRANO DCA Concellation FACILITY INFORMATION Name of Facility Where Abetement is Taking Place (3) Type of Facility (4) ABANDONED HOUSE School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes. 1442 CAMPBELL STREET oto.) Clty (5) Sautre Foot #cf Floor Bldg. Ago RAHWAY 131 3,000 50+ Coursy (6) Cuttant Uso (Prior if being demolished) County Codo (Y) UNION Name of Monttoring Firm Hirod by Eucliding Owner (8) ASCM No. Name of Abstement Contractor (8) WHITMAN COMPANIES 00110 TWO BROTHERS CONTRACTING Street Address Street Address 7 PLEASANT HILL ROAD 250 RUTHERFORD BLVD. City State, Zip Codo City. State, Zip Code CRANBURY, NJ 08512 CLIFTON, NJ 07014 Project Manager for Monitoring Firm Tolophone No. Telephone No. I censo No KEVIN LOVELY 973-956-8700 732-390-5858 00494 Start Date (10) Schodulad Completion Date (11) Name of OBHA Monitor 4/20/2013 4/27/2013 SAME AS (9) ABOVE Occupancy Status During Abatament (Gheck Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Rormal Facility Rodre Other - December VACANT City, Stato, Zip Cade Scope of Work (Chack All That Apply) ≥3 of or ≥3 H X Renovation Full Containment with Nagativo Pressure 2160 af ar 3200 If Domolition Mini-Enclosure Clovobag Procedure Non-Exampled (\*) and Non-Prisple Procedura Abatement le Location Туре Normally Ucod Solely by Location of Description of Autocoo Containing Material (ACM) Appeator-Confaining Material (ACM) Arhaunt Maintenance/ TO BE ABATED (Le. thermal systems insulation, (Specify Ramoval Cuctodial Staff? In Facility curtacing, VAT, or SF or LF) (12)(13) other miscelleneous) NA You Na BASEMENT X PIPE INSULATION 150 LF X (WRAP & CUT) 15T FL & 2ND FL BEDROOM. X VAT 650 SF X 2ND FL KITCHEN Name of Registered Woots Houser NJDEP Wasta Cubio Yarde Namo of Registered Landfill Hauter ID No. of Waste WASTE MANAGEMENT G.R.O.W 8 TWO BROTHERS CONTRACTING 18743 3 City. State Disposal Date City, Stato CLIFTON, NJ. 4/27/2013 MORRISVILLE, PA

ACB-41 (R-08-08)

VIVECA RAMOS

Completed by

Date

4/18/2013

THIO

SECRETARY

Bignettre

<sup>&</sup>quot;Do not use this form for acherdos licensure exempted activities.

Date of Notification (1) 4/18/2013					Owner/Operat NAY URBA		IEWAL, LI	LC 2 , 19 /1/2	723				
Agencies Notified Type Noti			Street Ad 111 MA		VENUE			4//		11/19	(D: 5	in	
DOL Ame	nded ndment#		City, Stat		ode , NJ 08735	1			44		**/),	C'	
X DOH justif	rgency (including lication) cellation		Name of SHANE		RANO			Telephone N	umber	Ų.	** / <sub>2</sub>	=	
			FACIL	ITY INFO	ORMATION								
Name of Facility Where Abatement ABANDONED HOUSE Street Address 1442 CAMPBELL STREET	is Taking Place (3	3)		Type of Facility (4)  School (K-12)  Subchapter 8 (Other than hother (i.e. private & comme						dings	, hom	es,	
City (5) RAHWAY							etc.) ire Feet 10	# of Floors	1.00	3ldg. 50+	Age		
County (6) UNION		-	County C		)	Curre	ent Use (Prid	or if being demoli	shed)				
Name of Monitoring Firm Hired by E WHITMAN COMPANIES	Building Owner (8)		ASCM 00110				atement Cor	tractor (9)	ING				
Street Address 7 PLEASANT HILL ROAD						et Addre	ss HERFOR	D BLVD.					
City, State, Zip Code	City, State, Zip Code CRANBURY, NJ 08512						, State, Zip Code LIFTON, NJ 07014						
Project Manager for Monitoring Firm KEVIN LOVELY		Telephor			phone N 3-956-		License 00494						
Start Date (10) 4/20/2013	Schedule 4/27/20		mpletion D	Date (11)	The second second		HA Monitor S (9) ABO	VE					
Occupancy Status During Abateme				-	-	et Addre		19					
Facility Closed/Vacated During Abatement Performed Outside Other – Describe: VACANT	: Entire Period of <i>i</i>	Abate	ement		City	, State, 2	Zip Code			TA HEAT	7 T	- 7	
Scope of Work (Check All That App	ly)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X F	Renov Demo				Mi GI	ni-Enclosure				ire		
	le.	s Loca	ation	-						Aba	temer	nt	
Location of Asbestos-Containing Material (A TO BE ABATED In Facility	ACM) Use	Norm ed So ainten	ally lely by lance/ I Staff?		Descript stos Containin thermal syste surfacing, other misce	g Materia ems insu VAT, or	lation,	Amount (Specify SF or LF)	Remova	Repair	ype Encapsulate	Enclosure	
(13)	Yes	No	N/A		Other misoc	ilancous			2		late	re	
BASEMENT		X			PIPE INSU	LATIO	N	150 LF	X	1		0.00	
				eru/s	(WRAP 8	CUT)	7				i /ht		
1ST FL & 2ND FL BEDRO	ST FL & 2ND FL BEDROOM, X		VA.	T.		650 SF	X						
2ND FL KITCHEN			2104.00	i varen			1 1 1 1				- 7		
Name of Registered Waste Hauler TWO BROTHERS CONTRA	CTING		NJDEP W Hauler ID 18743		Cubic Yard of Waste	S		Registered Land E MANAGEM		G.R.	O.W	ı,S.	
City, State CLIFTON, NJ	The parties		a serberda k	an hore	Disposal D 4/27/2013		City, Star	te RISVILLE, PA	35	100			
Completed by VIVECA RAMOS	Title SEC	CRE	TARY		Signa	ture	net	by	Date 4/18/2	2013			

of Emercency Notification of State of Man

## (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)	7/10		Na	me of Buildi	ng Owner/Operate	(0)	1/1/	· 6			10
711	7/13			E 113	43E Th	Or (2) (30)	٤ .	150	0.		
Agencies Notified	Type Notificati	on ,	Str	eet Address	0.7770000000000000000000000000000000000				1/2	12	2.
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□ DOL ✓	Amendmen	t#		State, Zip		10	7.0		17	100	=
DOH T	Emergency justification	(including		ne of Conta	La BE	1	0-7		0	1	90
DCA '	☐ Cancellation	·	677		5222-	2	Telephone Nu	mber		-	
			- I		FORMATION						_
Name of Facility Where	Abatement is Tal	ing Place (	3) ,	-++	- STORPHION	Type of Facili	ty (4)	100		0 *	1500-2
MABLE H	o (nez	Sch	001	++	5	School (K-					
65	50 B	2V . 1	0 1	Λ		☐ Subchapte	E 8 (Other than K.	12)			
City (5)	1 /	1	=	170	<u> </u>	1 1011103, 611	private & commerco.)	cial bu	uilding:	s,	
	2A bet	L,				Square Feet	# of Floors		Bldg.	\ge	
County (6)	- 1	-	Co	unty Code (	7) (STATE	Current I Ise /5	Prior If being demo				_
Name of Mantena F	ION		_ US	E ONLY)				isned	)		
Name of Monitoring Firm (8)	ASSO C	Owner	ASCA	4 No.	Name of Abater	ment Contractor (	9)			_	=
Street Address	17350 C	- COL	100	2012		or sez	2 4 Son	>			
300 Gna.	ad Aus				Street Address	630	1004		100		
City, State, Zip Code	1 007				City, State, Zip (	Code	5 Na 21				
Enchuod	0d NJ			:	Pater	son, n	JI O	15	00		
Project Manager for Mon	Nitoring Firm		elephone		Telephone No.		License No.		_	_	_
Start Date (10)		eduled Con		6708	973.34		DOLO	20	02	-1	
4/20/13	14		13	ate (11)	Name of OSHA		me				
Occupancy Status During	g Abatement (Ch	eck only on	e).	7	Street Address	- 21	41116				
Facility Closed/Vacate	d During Entire P	eriod of Ab	atement			100					
Abatement Performed  Other - Describe:	Outside of Norm	al Facility H	ours		City, State, Zip C	ode				_	=
Scope of Work (Check al	I that apply)										
		### · ·			Full Con	ntainment with Ne	gative Pressure	>			
23 St or ≥3 if	The second of the second	Rénov			Mini-End	closure	3000011003016				
			1 50		Non-Exe	empted (*) and No	n-Friable Procedu	re '	1		
		Is Loca Norma	ally		- 1			1	Abater		$\neg$
Location of Asbestos-Containing Ma		Used So Mainten	lely by		Description of		No. of the last		Тур	8	
TO BE ABATE		Custo	dial	(i.e., t	s Containing Mate hermal systems in	erial (ACM)	Amount (Specify	-		œ l	m
IN Facility (13)		Staff			surfacing, VAT,	or	SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes N			- Tio Tiao Containe Co	۵) .		oval	1	sulat	Buns
1 St Flour	chase		1							•	
Rm 226	CNAX		10		ipe In	nsul	30 LF	X			
Repair 1	A		X	- Ke	pair P	laster	10 SF		X		
THE PAINT OF		- 1 - 1 - 1 - 1	1	-	•	10/4/4	12 SF		X		
Name of Registered Wast	e Hauler		NUDEP V	Vaste T	Cubic Yards	I Name of Da				1	
Eastern (	Jaste.		Hauter ID		of Waste	Name of Regis		0	- I	i	
City, State	Λ				Disposal Date	City, State	Toper	i U	. اد	1	_
Freehold	l NJ				4/16/13	Inperi	rid PA	+			
Completed By	Title	2			Signature	7	Date 4	110	7		=
rnail Gra	0	4ry				1	7	111	1./1	5	_
arawa 1							THE RESERVE THE PERSON NAMED IN COLUMN	-	- Company	-	_

Date of Notification (1) 4/18/2013 Check #2401	4			Building ( Region			(2) Z	913 A,	og 23 M	110			
Agencies Notified Type Notification			Street Ad 225 Wi	ddress illiamsor	n Stree	et	Å.				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
EPA Initial Amended Amendment #				te, Zip Co eth, NJ (		3100-100-120		ez [	ICER III	$G^{'}$	UL.	(1	
□ DOH	iciuaing	- 1	Name of William	Contact Strana	han			Te	elephone Num	ber	1		
			FACII	LITY INFO	RMATI	ON		7.45			177		
Name of Facility Where Abatement is Taking Trinitas Regional Medical Center	Place (3)				70 V		Type of Facility  School (K-	12)	her than K-12)				
Street Address 225 Williamson Street							Other (i.e. etc.)	private	& commercia	l build	_		98,
City (5) Elizabeth, NJ 07202		02					Square Feet 60,000	8	of Floors	6	ldg. A 6+	ge	
County (6) UNION			County C	Code (7) ISE ONLY)			Current Use (Pi Hospital	ior if be	eing demolishe	ed)			
Name of Monitoring Firm Hired by Building O Omega Environmental	wner (8)		ASCM	No.			of Abatement Co ervices Corp						
Street Address 280 Hyuler Street			V-1				Address 9th Street		4.1				
City, State, Zip Code South Hackensack, NJ 07806							tate, Zip Code enberg, NJ 07	093	10 10 10 10 10 10 10 10 10 10 10 10 10 1				4
Project Manager for Monitoring Firm			Telephor 201-48	ne No. 19-8700			one No. 295-1700		License No 01074	).			
	Scheduled 4/19/20		npletion (	Date (11)			of OSHA Monito e as above	r			2-0800		
Occupancy Status During Abatement (Check	Only One	)		- 1 - 1		Street	Address	5	1.5				
Facility Closed/Vacated During Entire Post Abatement Performed Outside of Norma Other – Describe: Starting at 6:00 PM						City, S	tate, Zip Code		10.00	3		P004-9-00	
Scope of Work (Check All That Apply)	-							-76		Y			
≥3 sf or ≥3 if ≥160 sf or ≥260 if		nova molit				×	Mini-Enclosu Glovebag Pro	re ocedur					
	1		-				Non-Exemple	ea (*) a	ind Non-Friabl	PIO	100	10000	t
	177.5	ocati ormal								Abater Typ			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	Sole tena	ly by nce/		tos Con therma surfa		Material (ACM) s insulation, T, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Basement-Mechanical Room-N.Bld	* x		Alberta		1, 1	Elbows	and the second	MF	6 LF	x .	100		i i
				100							-	_	-
		-	UDEDIA		Loubin	Vende	. Nome o	1 Danie	tered Landfill	L_	l		1
Name of Registered Waste Hauler Freehold Carting		H	IJDEP W lauler ID 5939		of Wa	: Yards iste			agement				
City, State PO Box 5010					Dispo tbd	sal Date			andfill, PA				i sell
Completed by Gina Salvador	Title Office	Mar	nager			Signature	Chua	8-	Dat 4/1	te 18/20	)13		



Date of Notification (1) 4-19-2013							Operator ( wal LLC	2) <i>20</i>	13/10	P 5.	18					
Agencies Notified	Type Notification			Street Ad 744 Bro		Suite	406			P 23 M	/(); <u>;</u>	50				
DEP DOL	Amended Amendment			City, Stat Newark		LICENSTON COL										
DOH DCA	Emergency ( justification) Cancellation	including		Name of Moses					Te	lephone Nur	nber		. 0	11		
				FACIL	ITY INFO	DRMAT						diameter of				
Name of Facility When		g Place (3)	)					Type of Facility	(4)							
Commercial Build	ling.					8.7		School (K-			10 Table 11					
Street Address										ner than K-12 & commerci		linas	home	29		
744 Broad St.								etc.)			ar bunc	90				
City (5)								Square Feet	323	of Floors	100.000	ldg. A	ge			
Newark NJ.								566400	10		8	0+				
County (6) Essex		**************************************		County C		)		Current Use (Pri	or if be	ing demolish	ned)					
Name of Monitoring Fi	irm Hired by Building (	Owner (8)		ASCM	No.		Name o	f Abatement Co	ntracto	r (9)	1100			. Yes		
							Greer	Environmen	tal Se	ervices. LL	C.					
Street Address		-		1			Street A	Address								
							235 V	235 Viriginia Ave.								
City, State, Zip Code								ity, State, Zip Code Iersey City NJ. 07304								
Project Manager for M	Project Manager for Monitoring Firm						Telepho 201-3	one No. 33-8855		License N 01174	0.					
Start Date (10)	ed Co	mpletion E	Date (11)			of OSHA Monitor	-		-							
4-29-2013		6-10-20			( )		Bioter	ra Solutions.								
Occupancy Status Du	ring Abatement (Chec	k Only On	e)			75 1	Street A	Address	78.		-	-				
Access 1	acated During Entire I			mont			P.O.B	ox 1224								
Abatement Perfo	rmed Outside of Norm From 6pm to 4am						223	ate, Zip Code NJ. 08841.								
Scope of Work (Check	k All That Apply)					-										
≥3 sf or ≥3 lf × ≥160 sf or ≥260 l	f		enov emol				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				e			
		le	Loca	tion	0.38							Abatement				
Locat	tion of	10000	lorma	385500 C		De	escription	of				T	pe	_		
Asbestos-Contain TO BE	and Material (ACM)  ABATED  acility  3)	Mai Cust	intena odial (12)	Staff?		tos Con therma surfa	taining M	aterial (ACM) insulation, 「, or	0.1	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
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Sub-ba	sement		X		A STATE OF THE STA		#2 Insul		100	100SF.	x	-	100	1		
Sub-ba	sement		Х			Boiler	#3 Insul	ation.	3	100SF.	x					
		VI			11-11-1				100	1 1 1 1 1						
Name of Registered V	Vaste Hauler		- 1	NJDEP W	aste	Cubic	Yards	Name of	Regis	tered Landfil		<u></u>	L			
Tri-state Transfer	Hauler ID 2A456		of Wa		The state of the s	1973	erprises.									
City, State Bronx New York.			- /				sal Date -2013	City, Sta Wynes		Ohio.				40		
Completed by Tiffany Nunez		Title Office	e Ma	nager.			Signature				ate -19-2	013.				

Agencies Notified Typ  EPA  DEP  DOL	e Notification					VDALL KING	_								
X DEP				ANGEL RANDALL KING  Street Address 1530 -MORRIS DRIVE											
	Amended Amendment				tate, Zip	Code .J. 07205			& LILE	NS H	17	OL.			
DOH DCA	Emergency justification) Cancellation		ig		of Contac	t DALL KING				one Nun			-		
Name of Facility van and it				FAC	ILITY IN	FORMATION			-						
Name of Facility Where Abate PRIVATE HOUSE	ment is Takin	g Place	(3)				T	ype of Facility	(4)						
Street Address 1530 MORRIS DRIVE								School (K. Subchapte Other (i.e.	-12) er 8 (Other th private & co	nan K-12	) I bu	ildina	e hor	mee	
City (5) HILLSIDE N.J. 07205								etc.) quare Feet 2,000	# of Flo	ors	T	Bldg.	Age		
County (6)				County (STATE	Code (7)	y) .	C	urrent Use (P			- 1	92 y	ears	-	
Name of Monitoring Firm Hired N/A	by Building (	Owner (8	3)	ASCI		Na	me of	Abatement Co	ontractor (9)	- 1-1-1-1				- 1-1	
Street Address	* 0 1 2 0 3 2 0 1		125 0				eet Ad	N QUALIT	Y CONST	RUCT	101	1 LLC	0.		
		M. Be						ORDEN F	PL.						
City, State, Zip Code	1 2 7 2 4							, Zip Code NSACK N.	J. 07601		31			<u> </u>	
Project Manager for Monitoring		Telepho	ne No.		ephone 1-708	No. 3-4270	License No. 01135								
Start Date (10) 04/29/20/3		19	mpletion 201	Contraction of the Contraction o	** SECOND		SHA Monitor R TECHNO		ABOF	CAT	ORI	FS	. 10		
Occupancy Status During Abat						Stre	et Ado	lress .			-				
Facility Closed/Vacated D Abatement Performed Out	uring Entire P	eriod of	Abater	ment				DAKBRIDG	E DR. SU	ITE. B.				11	
Other – Describe:			, , , , ,	-				, Zip Code ATAN VA. 2	23139						
Scope of Work (Check All That	Apply)										-		-	-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	Full Containm Mini-Enclosure Glovebag Prod	e cedure						
A THE OWNER OF THE PARTY OF THE		1	Locati	ion T				Non-Exempted	d (*) and Non	-Friable		0.01/25/1992			
Location of		1	Normal	lly		Description	on of						ement pe		
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							t mail						-		
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ame of Registered Waste Haul HARON QUALITY CONS		N LLC	H	JDEP Wa auler ID N		Cubic Yards of Waste			Registered La		IN	<u> </u>			
	i gaja		100	100001		TBD Disposal Date	е	City, State		-	. IIV	J.		10 40	
ity, State ACKENSACK N.J. 0760	1				on the same	TBD			SBURG, C	21110	7.3				