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Date of Notification (1) 04/20/12 Ck# 2010 \$200			Tom &	Lynn Sp		perator (2	2)		APP	242	012	And the second second	ACCIOCACIONAL PROPERTY OF THE PROPERTY OF T	
Agencies Notified Type Notification EPA Initial			Street Ad 804 Va	_{Idress} Iley Driv	e		- The second		731 (1	24 6	UIL	Busine	Newspan	
DEP ☐ Amended X DOL _ Amendment				e, Zip Coo dale, Ne		sey 080	83	Selfenting weeks	ASBEST	OS CONTRO CENSING)L &	7	AND TRACTOR OF SAME	
Emergency		T	Name of	Contact				Consideration of	Tele	phone Nur	nber	Thursday of the		
DOH justification Cancellatio		1	Tom S				Homes :	The management		·*.		W.Ordaniero		ì
Name of Facility Mileses Abeliance in Tabi	na Diago (2)		FACIL	ITY INFO	RMATI		Type	f Facility (4	4)				POR SALLA	200
Name of Facility Where Abatement is Taki Residence	ng Flace (5)						s	chool (K-1)	2)	r than K-1	21			12
Street Address 804 Valley Drive							× O et	ther (i.e. p	rivate &	commerci	al buile	9/2000		s,
City (5) Somerdale, New Jersey 08083							Square 20,00		# of 2	Floors	1 (3)	ldg. A 5+	ge	
County (6) Camden	-		County C	code (7) ISE ONLY)	-	1323	Curren Home	it Use (Prid	or if bein	ng demolisi	ned)			
Name of Monitoring Firm Hired by Building Environmental Design Inc.	Owner (8)		ASCM	No.				ement Con oration	tractor	(9)				6
Street Address 5434 Kings Avenue Suite 101	·					Street A 606 M		s le Avenu	ie				-	
City, State, Zip Code Pennsauken, New Jersey 08109					•	City, Sta Wood		Code Park, Ne	w Jers	sey 0742	24			
Project Manager for Monitoring Firm Tim Gromen			Telephor 856-61			Telepho				License N 01104	lo.		,	
Start Date (10) 04/30/12	Scheduled 05/01/12		pletion [Date (11)	E.	그 아무지하다 가장은 여기		A Monitor nmental	Labs				2130	
Occupancy Status During Abatement (Che						Street A		s e 22 Wes						
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe: 8AM Start						City, Sta	ate, Zip			3			D-10-14 = 1	
Scope of Work (Check All That Apply)						Onion	, 1404	Vociocy	0,000					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Proposed.	nova molit				×	Min	Containme i-Enclosure vebag Prod i-Exempted	e cedure				e	
	le l	ocati	00		X		1101	·	2 / / 41.10	,	T	Abat	ement	
Location of	No	ormal	ly		De	escription (of				_	Ty	ре	ı —
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Custo	ntenar dial S (12)	nce/ Staff?	Asbes (i.e.	tos Con therma surfa	ntaining Ma Il systems acing, VAT miscellane	aterial insula , or	(ACM) tion,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								-	-		
Crawl space		X			Dı	uct Boot	S		2	7 SF	Х			-
						14					-	-		1
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			1											<u> </u>
Name of Registered Waste Hauler Lilich Corporation		H	IJDEP W lauler ID 8724		of Wa	c Yards aste		G.R.O.		red Landfi andfill	H			
City, State Woodland Park, New Jersey 0742	4	1.		0 /4	1	osal Date 2/12		City, Stat		ennsylva	nia			
Completed by	Title					0:					ate			
Tatiana Kalenikova	Vice F	resi	dent			Tel	ear	alal	lel	_	4/20/	12		

Date of Notification (1) April 19,2012					f Building Owner e Regional S				Check #	462	71		
Agencies Notified	Type Notification			Street A 93 Wil	ddress low Grove Ro	ad		15 15	V 15	=	-		
EPA DEP DOL	initial Amended Amendmen				ite, Zip Code ong, NJ 0808	3 1	U U APR	2 4	2012	U	1	f	
DOH DCA	Emergency justification) Cancellation		,		Contact Ledden		ASBEST	(hone Nur	nber	i		
				FACI	LITY INFORMA	TION:		ULWSING			1		
Name of Facility Where Lenape High School Street Address		ng Place (3	3)			A _{men}	Type of Facility (School (K-1 Subchapter	12)				!	
235 Hartford Road							Other (i.e. p				dings,	hom	es,
City (5) Medford							Square Feet 21,000	# of F	loors		Bldg. A	ge	
County (6) Burlington				County (Code (7) USE ONLY)		Current Use (Pri High School	or if being	demolish	ned)			
Name of Monitoring Firm Coastal Environme				ASCM	l No.		of Abatement Cor de Environmen						
Street Address PO Box 167		3-					Address Lippincott Av						
City, State, Zip Code Hammonton, NJ 0	8037					City, S	State, Zip Code le Shade, NJ (
Project Manager for Mor Cathy Ledden		· · · · · · · ·	I	Telephor	ne No. 20-9312	Teleph	none No. 755-0099	1	License N	0.			
Start Date (10) June 8, 2012	tart Date (10) Schedule						of OSHA Monitor						
Occupancy Status Durin	ng Abatement (Chec	8					Address						
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire	Period of /	Abaten	nent			Rt. 130 N						
						35.0	aminson, NJ(08077					
Scope of Work (Check A	All That Apply)				**		1						
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		-	enova emolit			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	ecedure				Δ.	
		Is	Locati	ion			2 Non Exemples	4 () and .	torr r ridb	1	Abate	ement	
Location		N	lormal d Sole	lly		escription					Ту	pe	Н
Asbestos-Containing TO BE AB In Facil (13)	ATED lity	Ma Cust	intena odial S (12)	nce/ Staff?	(i.e. therma surfa			(Spe	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
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Room D				N/A N/A	r	loor Tile Mastic	е	420		X			
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ROOM D	-103			N/A	Pipe	Insula	uon	81		Х			
Name of Registered Was	ste Hauler		IN	JDEP W	aste Cubic	Yards	Name of I	Registere	d Landfill				
Free Hold Cartage, I			H	lauler ID I 2253			Grows I						
City, State Mount Holly, New Je	ersey 08060				Dispo	sal Date	City, State Tullytow		4:		24 S		
Completed by William Lynch	9555 S	Title Owne	er		e	Signature	in the	incl	Dat Ap	te oril 19	9, 20	12	

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Date of Notification (1)			Name of	Building Own	er/Operato	r (2)) EGE	[]	0.7		-
4/2/20			PSE	G.	SALEn	n / HOPE CRE	LE G E	11	W	F	PER
Agencies Notified	Type Notification		Street A	ddress		1. 611	4.70		-		11
□ EPA	I I Initial		A110	wou coc	ek N	eck Road	100			#	III
DEP	Amended		City, Sta	te. Zip Code			APR 2	4 20	112	1/1	11
DOL DOL	Amendment		Han	cocks 1	2 indoe	WI OF	2738	-	15	J. France	1
DOH DOH	Emergency (incinainā	Name of	Contact	11100	NJ 108	Telephone Nun	noer_		1	\neg
DCA D/A	Cancellation		Mari	K A For	mer	- Umana			20	-5	1
				LITY INFORM		43.					-
Name of Facility When						Type of Facility (4)	President	4,74		A. C. A. C.
PSEG Sol	em/Hope Cree	ex due	lear			School (K-1	2)				
							8 (Other than K-12	9)			
Allow Coec	K NOCK R	√ .				Other (i.e. p	rivate & commercia	al bulle	dings,	nome	BS,
		-				Square Feet	# of Floors	8	ldg. A	ge	
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County (6)	- 0 70		County (Current Use (Prid	or if being demolish	ed)	-		-
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Name of Monitoring Fi	rm Hired by Building (Owner (8)	ASCM	1 No.	Name	of Abatement Cor	ntractor (9)		,		
A.E.T. II	vc		-		17	NPS	(9.7)				
Street Address			-	W. C.		t Address					
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City, State, Zip Code	<i>mee</i>				City, S	State, Zip Code	011144	1-	etel		
Lima DA	7 1902	2			100000000000000000000000000000000000000	neaster		DA	17	601	1
Project Manager for M	lonitoring Firm		Telephor	ne No.		hone No.	Licensa N				
DAUX TUDA			6/2 2	910111			0	0 8	21		
Start Date (10)	7	Scheduled C	Completion I	Date (11)	Name	of OSHA Monitor		0 0	0	-	-
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Occupancy Status Dur	ring Abatement (Chec	k Only One)				t Address			Builds		
	acated During Entire F		tamont								
Abatement Perfo	rmed Outside of Norm	ral Facility Ho	urs		City, S	State, Zip Code					
Other - Describe	: Active any	. Plant									
Scope of Work (Check	(All That Apply)										-
≥3 sf or ≥3 lf	#44 CCC (CCC)	P Danie	ovation		Г	7 5 6			202		
≥160 sf or ≥260 l	f		olition			Mini-Enclosure	ent with Negative P	10550	c		
		150,000			7	Glovebag Prod					
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<u> </u>			cation							ement pe	
Locat Asbestos-Containi	tion of ing Material (ACM)		nally olely by	Ashastas C	Descriptio		Amount		1		
TO BE A	ABATED	Mainte	nance/			Material (ACM)	Amount (Specify	72	_	Enc	Ф
In Fa	acility	NEXTRACT	al Staff? 2)	su	urfacing. V	AT, or	SF or LF)	Removal	Repair	Encapsulate	Enclosure
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Name of Registered V	Vaste Hauler	<u> </u>	NJDEP V	Vaste Cu	bic Yards	Name of	Registered Landfill	1			-
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City, State				Dis	sposal Date	e City, Stat	e -				
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MOSLA FOR	721	Sup	V		iv.	10.2		1/2.	120	12	
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Date of Notification (1)		Name of	Building Owner	Operator	(2) :	RO	2000	Per proposition to	Dissign. Dis Sil	Separate of	- Mari
4/2/2012		PSE	G <	alen	2/ HOPE	JE, G	EI	M	G	7	7
Agencies Notified Type Notification		Street Ad	Idress	541011	The state of the s	1.	Control of the second	11/	5		1
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DEP Amended DOL Amendment #		The state of the s		210 160	. //		242	2012		11	
DOL Amendment # Emergency (in		Han	cocks B	ridge	NJ	55036			Ham		
✓ DOH justification)		Name of	enanoremon	0	*	Apdete	phone Mun	nber	7	1	
DCA D/A Cancellation		Mark	A FOR	ner	La section	-	The same of the sa		_	-1	
Name of Facility Where Abatement is Taking	Place (3)	FACIL	ITY INFORMA	IION	Type of Facilit	y (4)	19年間的。 1941年	E. L. Sanson	-		
PSEG Solom/ Hope Cree! Street Address	1 1200	lone			School (H				ar ne		į.
Street Address	- person				Subchap	ter 8 (Othe	r than K-12	2)			15 [*]
Allow Coleck Nock Rd	1				Other (i.e	e, private &	commerci	ai bullo	ings,	nome	S,
1					Square Feet	# of	Floors	BI	dg. A	je	
Honorals Bridge NJ								_1_		8	55
County (6)		County C	ode (7) ISE ONLY)		Current Use (F				,		
SAlem					Nuclea	e for	25	901	<u>+</u>		
Name of Monitoring Firm Hired by Building O	wner (8)	ASCM	NO.	4	of Abatement C	ontractor	(9)				
A. E.T. TNC Street Address				AZ	Address						_
				/ 9	66 Colon State, Zip Code	int	201100	1.	4000		
City, State, Zip Code				City, S	State, Zip Code	140	2111-3	C 40	711		10000
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Lima PA 19028 Project Manager for Monitoring Firm		Telephor	ie No.		hone No.		License N				
DAUX TURKY		6008	DING 18				0	08	21		
Start Date (10)	Scheduled Co	ompletion [Date (11)	Name	of OSHA Monit	or					
4/9/2012	201	2			ET						
Occupancy Status During Abatement (Check				Street	Address						
Facility Closed/Vacated During Entire Pe	eriod of Abate	ement		City	State Zie Oode				- 182	100	
Abatement Performed Outside of Norma Other - Describe: Active WWC	Pant	11.5		City, 3	State, Zip Code						
Scope of Work (Check All That Apply)											
≥3 sf or ≥3 If	P Dano	vation		Г	Full Contain	oment with	Magative C	Praeeur	-2		
≥160 sf or ≥260 if	Demo				Mini-Enclos		ivegetive r	159941	c		
				7	Glovebag P Non-Exemp		i Non-Frish	de Pro	nedur:	1	
	Is Loc	ation				1	2 14011-1 1102	1	Abate	Aurenue	10
Location of	Norm			escription	n of				Ту	pe	
Asbestos-Containing Material (ACM)	Used So Mainter	Variable Control of the Control of t	Asbestos Co	ntaining (Material (ACM)	54	mount	_		□	Е.
TO BE ABATED In Facility	Custodia	al Staff?		al system facing, V	ns insulation, AT, or		pecify or LF)	Ren	Repair	tcap	nclo
(13)	(1)	2)		r miscella				Remova	yair	Encapsulate	Enclosure
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Name of Registered Waste Hauler		NJDEP W Hauler ID		ic Yards /aste	Name	of Registe	red Landfil				
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City, State		50	Disg	osal Date	e City, S	State					-00
				V-1725.000							
Completed by	Title			Signatur		7	- Da	ate	,		T.
MOSLA FORM	SUDI	/	a +-	1/	101			4/	2/7	201	2

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

Date of Notification (1)					Building O			(2)		_	FOR	NI A	DAC	HEIC	
04/18/2012				consultante	NATION	AL PA	1111	II AF	P 24	2012	EORG)IA	PAC	ארוכ	
Agencies Notified EPA	Type Notification			Street A 6400 F	ddress POPLAR A	AVE.	100		11 60 1		297	FU	RG	ST.	
DEP DOL	Amended Amendment				ite, Zip Code PHIS, TN		L	ASD	STOS CON LICENSIN	TROL & NE	EWAF	K,	NJ C	710	5
⊠ DOH □ DCA	Emergency justification) Cancellation				f Contact Schumer	r/IP. P	aul Mo	ontney/	GP		an in the second		-		
П вох	L Caricciation				LITY INFOR		THE SHAPE STATES	Warren Sales	e e e		th promote	St. of St.	-		Ty
Name of Facility Where CURTIS SPECIAL		ng Place (3)						_	Facility (4)						
Street Address 404 FRENCHTWO	N ROAD					nin-2003.177;		Su	ochapter 8 ner (i.e. priv	(Other than vate & comn		build	ings,	home	es,
City (5) MILFORD			. 1/18/00/00/00			N.		Square 500,00	Feet	# of Floors	3		dg. A	ge EAR	RS
County (6) HUNTERDON	1	-			Code (7) USE ONLY)					if being den FACTUR		i)			
Name of Monitoring Firm ARCADIS, US	Hired by Building	Owner (8)		ASCN 0001					nent Contr	actor (9) ENTAL, IN	VC				
Street Address 35 COLUMBIA RO	ΔD						Street	Address	TON AV						
City, State, Zip Code							City, St	tate, Zip	Code						
BRANCHBURG, N Project Manager for Mor	nitoring Firm	2 1	T	Telepho	ne No.		3/4-	one No.	R, NY 14	Licen	se No.	_			
Start Date (10)	R	Scheduled		**********	26.1000 Date (11)		ey an essace to a	254.184 of OSHA		0106	88	70.0V	- Daniel 100		
5/16/2011		6/29/201	2				HEAL	AN HT		TY SERV	ICES				
Occupancy Status Durin	8							Address 2TH S	TREET						
Abatement Perform Other – Describe:						_	City, St	tate, Zip	personal strength of the)8037					
Scope of Work (Check A	II That Apply)						1 11/11/11	MOTT						-	
≥3 sf or ≥3 if x ≥160 sf or ≥260 if		-	novat moliti				×	Mini-E Glove	Enclosure bag Proce	t with Negat dure *) and Non-				a.	
		le l	ocatio	on.			-	110111	- Admirada (7 4114 11011	111000			ment	1
Location	n of	No	rmall	y		Desi	cription	of					Ту	ре	
Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) <u>ATED</u> lity	Used Maint Custoo	enar	ice/	(i.e. th	s Conta hermal s	ining M systems ing, VA	laterial (A insulatio T, or		Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
0.83		Yes	No	N/A										ē .	
THROUGHOU	T FACILITY		e -	X		F	PIPE			39500 L	F 2	2			
564						ERMA	L SYS	STEMS		45400 S	F 2	2			
						TRA	ANSIT	E		46300°S	F .				
			-			GALE	BEST	os		28500 S	F				
Name of Registered Was	ste Hauler		CV 1.355216	JDEP Wauler ID	STORY CONTRACTOR OF THE PROPERTY OF THE PROPER	Cubic Y of Wast		1	Name of Re	egistered La	ndfill .				
R&B DEBRIS LLC		*)		J-8001		3500		- V 1		LANDFIL	L				
City, State HAINSPORT, NJ						Disposa VARIC			City State	VILLE, PA	Α .				
Completed by		Title			14.055	Sig	gnatuka	1	1	Λ Λ	Date	10-			
PETER BREEN	197 319 1 1 1 1 1 1	PROJE	:CT	MASN	NAGER		\	1	V	1	4/18	/20	12		

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

Date of Notification (1) 04/18/2012					f Building RNATIO		perator			6/1	GEO	RGIA	PAC	CIFIC	2
Agencies Notified EPA	Type Notification Initial		100	Street A 6400 F	ddress POPLAF	RAVE.		APA :	2 4 2012		/// 29	97 FL	JRG	ST.	
× EPA × DEP × DOL	Amended Amendment				te, Zip Co PHIS, T		.11			Kulturge	NEW	ARK,	NJ (710	5
DOH DCA	Emergency (justification) Cancellation	including		Name of Roger	f Contact Schume	er/IP, I	Paul M	LICEN	CONTROL &	Telent	one Nur	nber			
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Name of Facility Where CURTIS SPECIAL		g Place (3)						☐ s	f Facility (4) chool (K-12)					
Street Address 404 FRENCHTWO	N ROAD							× o	ubchapter 8 ther (i.e. pri c.)	vate & c	ommerci	al buil			es,
City (5) MILFORD								Square 500,0		# of FI 2	oors		oo Y		RS
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Name of Monitoring Firm ARCADIS, US	n Hired by Building (Owner (8)	- 100	ASCN 0001					ement Contr VIRONM						
Street Address 35 COLUMBIA RO	AD							Address LEXINO	GTON A\	/ENUE					
City, State, Zip Code BRANCHBURG, N	J 08876							State, Zip	Code ER, NY 1	4613					
	roject Manager for Monitoring Firm VILLIAM C. MENER						100000000000000000000000000000000000000	none No. 254.18		- N - 288	icense N 1068	0.			
Start Date (10) 5/16/2011	art Date (10) Schedul								A Monitor ND SAFE	TY SE	RVICE	S			
Occupancy Status Durin	ng Abatement (Chec	k Only One)				Street	Address	ī, .						
Facility Closed/Vac	cated During Entire F	Period of Ab	atem	ent			318	12TH S	STREET						
Abatement Perform Other – Describe:	ned Outside of Norm	al Facility h	lours		- Wil	_		state, Zip 1MONT	Code ON, NJ (08037					
Scope of Work (Check A	All That Apply)						52-5								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	nova moliti				×	Mini- Glov	Containmer Enclosure ebag Proce	dure				23	n
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Location Asbestos-Containing TO BE AB In Faci	g Material (ACM) BATED lity	Used Main Custo	Sole! tenar	y by nce/		tos Cont thermal surfac	systems cing, VA	Material (s insulati T, or		Amo (Spe SF or	cify	Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A		othern	niscellar	neous)				val	#	ulate	ure
THROUGHOU'	T FACILITY	1 -		X			VAT			56000	SF	X			
	THROUGHOUT FACILITY					MISCE	LLANI	EOUS		13000	SF.	Х			
1 W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										2				8 .	
Name of Registered War R&B DEBRIS LLC	ste Hauler		H	JDEP Wauler ID J-8001	No.	Cubic of Was			Name of Ro GROWS						
City, State HAINSPORT, NJ	4			12		1	al Date		City, State MORRIS	VILLE,	PA	4.			
Completed by PETER BREEN		Title PROJE	СТ	MASN	IAGER	3	ignatule	11	1		Da	te 18/20)12		
		1		011			1	1771	101	27.8	17/	.0120	. 12	SUPPLIES.	

Agency Notified BERA Controlled Amendment to Emergency (including justification of Controlled Amendment to Emergency (including justification) Name of Contact Charls fine Know from Facility Information Name of Facility Where Adatement is Taking Place (3) Street Address Tab Letand Aue County (6) County (6	Date of Notification (1)	1. 2		- 11			g Owner/Operat			UEIV			\mathbb{H}	-10	7
September Sept	7/	4.30-13					ristino	_	Knou	olton					
Amendment # Department # Depart	Agency Notified				Street Ad	dress	720 1	1		ARD _2 4 20	12	U	11		
DOCK DOCK Demonstration December of Facility Where Abatement is Taking Place (3) Defended Auge Demonstration FACILITY INFORMATION Type of Facility (4) Deschool (K, 12) Descho					City State	7in C		-و ا	and '	40 E 4 20	12	- signal	1		
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ASB-41 Do not use this form for asbestos licensure exempted activities.	Steve Schen				or achoet	os lico	nsura avamnin	t activ	ities .		7-	_		_	_

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Date of Notification (1) 04/19/2012						Owner/Op BOUVIE	THE PROPERTY AND NOT	(2)	AND DESCRIPTIONS OF THE PERSONS OF T	. 0010	1				
Agencies Notified	Type Notification			Street Ad	ldress OWELL	ST			APH 2	4 (012	Established	1	in the same		
EPA DEP DOL	Initial Amended Amendment		_	City, Stat	e, Zip Co		675	L	ASBESTOS - LICEN	ISING		Spirite HEROLESPANISH			
	instification) Cancellation	including	Ī	Name of JOSEP		BOUVIE	R	And a leastly	- Andrews	Telephone	Numb	er.			
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Name of Facility Where a PRIVATE	Abatement is Takin	g Place (3)							chool (K-12)						
Street Address 48 - LOWELL ST.								□ S ⊠ C	ubchapter 8 other (i.e. pri	(Other than		build	ings,	home	s,
City (5) WESTWOOD N	J. 07675							Square	- Contraction of the Contraction	# of Floors	S		dg. A	ge ARS	;
County (6)				County C	Code (7) ISE ONLY)			Currer	nt Use (Prior	if being der	nolishe	4)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	No.				ement Contr QUALITY		UCTI	NC	LLC		
Street Address								Address AN O	s RDEN PL						
City, State, Zip Code								tate, Zip KENS	Code ACK N.J.	07601					
Project Manager for Mor	nitoring Firm			Telephor	ne No.	64		none No 708-42		Licer 011:	nse No. 35				
Start Date (10) 04/30/2012		Schedule 05/01/2			Date (11)				A Monitor RONMEN	TAL SER	VICE	 S			
Occupancy Status Durin	g Abatement (Chec	k Only One	e)					Address							
Facility Closed/Vac Abatement Perform	ned Outside of Norr	Period of A nal Facility	bater Hour	ment 's		-	City, S	State, Zi	o Code						
Other – Describe:							UNIC	N NC	J						
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City, State HACKENSACK N.J	. 07601					Disposa 05/01/		,	City, State BRONX	.N.Y. 104	474				
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Date of Notification (1)			1	lame of I	Building C	Owner/Op	erator (EGEI	W	FR	77			
4-20-2012 Agencies Notified	Type Notification			Street Ad	W. Startes Start		1111		3 1:1		-			
			1000		ew Plac	e								
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Name of Facility Where A House Street Address	Abatement is Takir	g Place (3)				\$ and the		Type of Facility (School (K-1 Subchapter	2)					
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City (5)		-						Square Feet	# of	Floors	В	dg. A	ge	
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Project Manager for Mor n/a			relephon n/a			973-	706-7950		01088	····				
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Other - Describe:						_		oln Park, NJ 0	7035					
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Lincoln Park, NJ 07	U35	Title		-			gnature		(ate			
Completed by Lillie Lazarevich		Secre	tary			J	1	Pager	au .		1/20/2	012		

Fax:

APPROVED NJ Dance Health Senior Services (signature HECKs: 18)

Date of Notification (1) 4-16-12		1	vame of B	uilding Ov	vner/Operator	(2)	100 0		A (A	2			
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City, State, Zio Code	and the second		*			State, Zip							
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Occupancy Status During Abatement (Chec	k Only On	9)			Stree	t Address				ingenia a			
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Other - Describe:	as raceny r	sours.	7/21			kensack, l							
Scope of Work (Check All That Apply)													
□ ≥3 sfor≥3 if	□ Re	novati	ion			ht Full C	ontainme	nt with	Negative Pr	essure	1		
2160 sf or ≥260 if	De De					D Mini-E	inclosure bag Proc	edure	i Non-Friabl				
	· ·		. 1			NO THURST	Designation	( ) 60100	Lentin Hane	1		emen	ą
f		Locali Iornal				un of	1				Ţ	/pe	
Location of Asbestos-Containing Material (ACM)	Use	d Sole	ly by		Description os Containing	Material		E	Amount			πī	571
TO BE ABATED		intenar odlar s	Staff?	(i.e.	thermal system surfacing, V		ion,		(Specify (For LF)	Removal	Repair	den	lick Ek
(13)		(12)			other miscella					OYa.	1	Encapsulate	Enclosura
*	Yes	No	N/A				- 1			1	1	6	-
R00F			X.		Hashi	na		4	7D SF	X			
kitchens			IX	λiı	nul til	P		-	00 SF	X			Г
hasement			ĺ.	STREET, STREET	oide in	Gula.	han		00 LF	X		1	T
19.7	-		文		2101110	71710	,,,,,	-	100 SF	14	-		
Name of Registered Waste Hauler	•	TA	(IDEP W		Cubic Yards		Name of		ered LandSII		1		1
		F	lauler ID I 20785		of Waste	0	1661 04	Roff-1-	hem Landfill	Com			
Rovic Transport  City, State, Zio Code			5h100		Disposal Dat	-	City, Stat			outp.		_	
Riverdale, NJ 07457	N					n	Bethicht						
Completed by	Title				Signatu		1/11	7	ID	ite .	-		
R. McDonald	Presid				17/	1 5351~	-X #	7	1	911	0.12	?	

Check# 2538

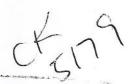
			(Purs	uant to N.J.A.C	C. 8:60-7 and 12:120-7)		and the constraint of the cons	eign mannerilmane a non se a	NEW SHEET WAY
GAC # 2012-327						110	5 P 1	E D DO	
Date of Notification (1)			10000		Name of Building Owner			SIV	EMI
April 20, 2	012		on certain minute.		New Jersey Turn	oike Autho	rity		<u> </u>
Agencies Notified		Notification		5025	Street Address	111 111			#1
EPA DCA		☑ Initial			581 Main Street. P	O Box 504	2APR	2 4 2012	
x DOL		☐ Amend	ed Cert	ification	City, State, Zip Code	1 1		2 1 2012	
X DEP (no longer required	1)	☐ Emerg	gency (	including	Woodbridge, NJ	07095			
x DOH	',	justific	cation)		Name of Contact	1	はいまであれるから	And Number	7
100000000000000000000000000000000000000		☐ Cance	lled		Mark Connors/ C/O AE	COM	- Particular -		
				FACILITY IN	FORMATION	4.6 _{1-7.2} 00	with the same		
Name of Facility Where Abate				Very Street Wilder	Type of Facility (4)	* (4)=-		The sections	Ng.V
NJTPK –Underside o		rence-Co	lumbu	s Rd Bridge	School (K-12)			N = 1	14 14 Nov. 2
Mile Post 48.7 to 50.5	5		111		☐Subchapter 8 (other that				11 da - 07 200 - 340
Street Address					Other (i.e. private &				
NJTPK Florence-Col	umbus F	Road Bridg	ge		Sq. Feet: NA # of	Floors: NA	Bldg. Ag	<u>e:</u> 60 yeaı	rs
City (5)	County (6	)	Count	v Code (7)	+			162	
Township of	Burling			Use Only)	Current Use (prior if beir	ng demolished	): OVER	PASS/BRIDG	3E
Mansfield		,							
Name of Monitoring Firm Hire	d by Blda. (	Owner (8)	ASCM	l No	Name of Contractor (9)				
N/A-Visual Inspectio	n By: Al	ECOM	1.00	710.	rame or contractor (o)				
Inc.	,				GREENWOOD ABA	TEMENT C	ONSUL	TANTS, IN	C.
Street Address			-		Street Address				
30 Knightsbridge Ro	ad. Suite	520			01/001/1000				
					268 MAIN STREET				
City, State, Zip Code	100 M				City State, ZipCode	100.00			
Piscataway, NJ 0885	4				Butler, NJ 07405				
Project Manager for Monitorin	g Firm	Telephone N			Telephone Number		License	Number	
Mark Connors		732-672-	7519						
Cabadulad Start Data (10)		0-1-1-1-1		B ( (4)	973-492-0477		00840		
Scheduled Start Date (10) April 30, 2012		Scheduled ( May, 31,		on Date (11)	Name of OSHA Monitor				
April 30, 2012		iviay, 31,	2012		EMSL inc.				
Occupancy Status During A	batement (	Check only o	ne)	7	Street Address				
Facility Closed/Vacate				ment					
Abatement Performed					1056 Stelton Road				
Describe Over Roa	dway W	ork Hours	: 7pm	-6am	City, State, Zip Code				
<b>During Lane Closure</b>	s - Othe	r Areas of	Work	7am-	Disastana NJ 00	054			
3:30pm ( All areas wi	ll be mu	ltiple shift	s depe	ending on	Piscataway, NJ 08	854			
weather and traffic co	ondition	s. etc.)	•						
		-,,							
Source of Work (Check all tha	t apply)				<u> </u>				
						Full Contai	nment wit	h Negative Pr	ressure
≥ 3 sf or ≥ 3 lf				Renovation		Mini-Enclos			
∑ ≥ 160 sf or ≥ 2				Demolition		Glovebag	Procedure	9	
						Wrap & Cu			
6						Non-Exem	pted (*) a	nd Non-Friab	le Procedure
Location of Asbestos-Containi		cation Normal			bestos Containing Material	Amour	nt A	batement Typ	
Material (ACM) in Facility (13)		y by Maint./Cu ? (12)	istodial	(ACM) (i.e. them VAT, or other mis	nal systems insulation, surfac		y SF	emove Renair	Encap Enclose
	YES		NA	VAT, of other fills	sceii.)	or LF)	1-	Topan	Lineap Choloco
NJTPK, Underside of	F		X	Transite Cor	nduit (under bridge)	1500	IF B	X	
the Florence			X		nduit (underground)	3500		X	
Columbus Rd Bridge				Transite COI	idan (anderground)	0000		-	
Name of Reg. Waste Hauler		NJDEP Was	te Hauler	ID#	100000000000000000000000000000000000000	_	Nomo of	Registered La	and Gill
See Hauler Below # 1 & 2	2	See Below		<u> </u>	Cubic Yards of Waste: 2	U		S Landfill	<u>ITIGTIII</u>
	30							CLANGIIII	
Hauler #1) Greenwood A		nt Consulta	nts, Inc	c. – Butler, NJ 0	7405	Disposal Da		City, Sta	
NJ DEP # 12						May 31, 2	:012	Route 2, Bridgepo	
Hauler #2) MXI Express						filt specific		304-842-	
297 Zimmern			, PA				11		74 - 24 - 24 - 24 - 24 - 24 - 24 - 24 -
Completed by (Print or Type)		<u>itle</u>			Signature		<u>Date</u>		
Raymond C. Pedalino		SENIOR PI		.1	Raymond C. Per	dalino	April 2	20, 2012	

		N		CATION	OF ASB	W Jersey SESTOS AB 8:60 and 1	19.00		(	Y	分井)	70	9	The street	
Date of Notification (1) 4/20/2012				Name of Morgan	25.0	Owner/Ope erties	rator	(2)	180		1 17 5	T State			200
.	Type Notification  Initial			Street Ad 160 Cl		se Road	Manya Str.				# W [8			-	
DEP DOL	Amended Amendment Emergency		- L	7/	Pruss	sia, PA 19	406	Strategy Strategy Strategy	API		4 2012		$\parallel$		
DOH DCA	justification) Cancellation			Name of David			CTRISSIONS		ASPES	7	enhone Nur		- Anna Property		
Name of Facility Where Al Apartment Building Street Address	batement is Takir	ng Place (3)	***	PACIL	III INP	ORMATION	<b>6</b> ,		of Facility ( School (K-1 Subchapter	2) 8 (Oth	er than K-12		Hings	a bom	
76 Market Street City (5) Perth Amboy	V					n e		6	etc.) e Feet		Floors	В	ldg. /		es, ——
County (6) Middlesex		W. N.		County C		n	-		nt Use (Prior		ng demolish	ned)			
Name of Monitoring Firm I n/a Street Address	Hired by Building	Owner (8)		ASCM n/a	No.		Jada		ement Con tracting, s		(9)				
n/a City, State, Zip Code								roy La tate, Zi	ane p Code						
n/a Project Manager for Monit n/a	oring Firm	-	T	Telephon	e No.	T	eleph	one No 706-7		7035	License N	0.			
Start Date (10) 4/30/2012		Scheduled 5/2/201	2	npletion D	ate (11)		Jada	r Con	A Monitor tracting,	LLC					
Occupancy Status During  Facility Closed/Vacat Abatement Performe Other – Describe: 93	ted During Entire d Outside of Norr	Period of Al	batem			C	22 Tr			7025		1			
Scope of Work (Check All ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	That Apply)	State of the last	enova		- 1		×	Full Min Glo	Containme	ent with	Negative P			re	
Location	of	No	ocati	ly		Descri	iption	of						emen /pe	t .
Asbestos-Containing N TO BE ABA In Facilit (13)	Material (ACM) TED	Mair Custo	Sole ntenar odial S (12)	nce/ Staff?		stos Contain thermal sys surfacing other miso	ing M stems g, VA	laterial insula T, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
Baseme	nt	Yes	No	N/A		Asbesto	e Elk			6 5	Ibows	X		0	
Baseme				X	As	bestos Pi			ion		0 LF	8			
						191								-	-
Name of Registered Waste Jadar Contracting, LL			Н	JDEP Wa auler ID N	No.	Cubic Ya of Waste			Name of I		red Landfill Landfill				

City, State City, State Disposal Date TBD Morrisville, PA 19067 Lincoln Park, NJ 07035 Completed by Signature Date Title Secretary 4-20-2012 Lillie Lazarevich

D-1- (N-15- 1- (4)					1 555	(0)		<u>-n:</u>	II 11	10	-24 -2				
Date of Notification (1)	4-20-2012						perator		PAF	7 17					
Agencies Notified	Tyma Natification		-			any LL		1	ECE			M			
Agencies Nouried	Type Notification			Street Ad	odress al Road	1		公	_		11				
EPA DEP	× Initial		-		te, Zip C	7	-H	#	ADD 0	4 0	010	1111			
X DOL	Amended Amendment	#			n, NJ 0		111		APR 2	4 2	012				
	Emergency (i	including	- F		Contact		+	+		Tel	ephone N	umber			
☑ DOH DCA	justification) Cancellation			David	Curtact			L	ASBESTOS	CONTR	1 &	uniber			
<u> </u>	Carlo Calabort			Accountable to	ITY INF	ORMATI	ON		LICEN						
Name of Facility Where	Abatement is Taking	Place (3)	)	TAGI	LITT IN	OKMATI	et.	Тур	e of Facility (	4)	Me.	The same of			
Apartment Building	1					₫ _ლ	K-10		School (K-1						
Street Address					-				Subchapter	8 (Oth	er than K-	12)			
88 Monroe Place									Other (i.e. p etc.)	rivate	& commer	cial buil	dings	, hom	es,
City (5)								Squ	are Feet	T#0	f Floors	E	ildg.	Age	
Bloomfield										7			50+		
County (6)				County C	Code (7)			Cur	rent Use (Pric	or if be	ng demoli	shed)			
Essex					ISE ONLY	)		200000	artment Bu			•			
Name of Monitoring Firm	Hired by Building C	Wner (8)		ASCM	No.		Name	of Al	patement Con	tractor	(9)				
J & S Environment	al						Jada	ar C	ontracting,	LLC					
Street Address	27 - 27 - 100 m - 100 m - 200 <del>- 1</del>			-			Street	Addr	ess	W W.	O Stomphic State				
2333 Rt 22 West					22 T	roy	Lane								
City, State, Zip Code					City, S	State,	Zip Code								
Union, NJ 07083					Linc	oln I	Park, NJ 07	7035							
Project Manager for Mon	itoring Firm			Telephor	ne No.		Teleph	none	No.		License	No.	0.710		
				908-20	06-0773	3	973-	706	-7950		01088				
Start Date (10)		Schedule	d Con	npletion [	Date (11)		Name	of O	SHA Monitor						97 82-4
4-30-2012		5-7-201	12				Jada	ar Co	ontracting,	LLC					
Occupancy Status During	g Abatement (Check	Only One	∍)				Street		7/7/7/6						
Facility Closed/Vac	ated During Entire P	eriod of A	baten	ent			22 T	roy	Lane				******		
Abatement Perform	ed Outside of Norma	al Facility	Hours	•		- 1			Zip Code						
Other – Describe:	9am - Spm						Linc	oln l	Park, NJ 07	7035					
Scope of Work (Check A	Il That Apply)					***************************************	202							and a second	
23 sf or ≥3 lf		× R	enova	tion			X		ull Containme		Negative	Pressu	ге		
≥160 sf or ≥260 lf		☐ De	emolit	ion		· ·	F	- 00	lini-Enclosure Hovebag Proc						
									ion-Exempted		d Non-Fria	able Pro	cedu	re	
		Isl	Locati	on										emen	t
Location	n of	N	ormal	ly		Des	scription	of				-	T	pe	_
Asbestos-Containing	Material (ACM)		i Sole			stos Cont	aining A	//ateri	al (ACM)		mount	-		ĮΨ.	m
TO BE AB/		4. 00.000.00	odial S	0.0000000	(i.e.	. thermal	system: cing, VA				Specify or LF)	Ren	Repair	cag	nol
(13)			(12)			other m				0.	U. L. ,	Removal	pair	Encapsulate	Enclosure
		Yes	No	N/A								=		ite	(Q)
Basement Bo	II D		107	1/		L 4	Din a L			20	00 LF	1.	-	-	+-
		-		14		bestos						X	_		-
Basement Laur	ndry Room			X	As	bestos	Pipe I	nsul	ation	. 2	0 LF	X			
2 disconnected boil	ers (basement)			X		Asbesto	os Insi	ulatio	on	2	50 SF	X		-	
Disconnected water		X	61	Asbesto	os Insi	ulatio	on	20	00 SF	Y					
Name of Registered Was	N	JDEP W		Cubic '			Name of F			il	L				
Jadar Contracting, L	19 200	auler ID 1 033137		of Was	ite		G.R.O.	w.s.	Landfill						
City, State		1187			-		al Date		City, State						
Lincoln Park, NJ				TBD	1.		Morrisy	ille, F	A 19067	7					
Completed by			1.5	ş	ignature	1		1		ate		= 17-2417			
Lillie Lazarevich	etary	7		J.	· 4	Ci	may	7		4/20/2	012				

Date of Notification (1)	# 2207			Owner/Operator		EIV	Eli	1		
	# 2207			ersity Hospita			511	111		
Agencies Notified Type Notificatio	1		t Address 1 Chapel F	Hill Campus		_				
DEP Amended Amendmen	nt #_1		State, Zip Co erry Hill, NJ		TU LI API	R 2 4 2012		1		
□ Emergence     □ justification		Name	e of Contact	- 4	1 - L	Telephone N	umber	1		-
DCA Justilication		Mat	t Underwo	od 1	ASBE	Jacon Ville		1		
		FA	ACILITY INFO	ORMATION			-			
Name of Facility Where Abatement is Tak Kennedy Hospital	ng Place (3)			<b>*</b>	Type of Facility (	2)		2 5.2		
Street Address					Subchapter	8 (Other than K-	12)			
2201 Chapel Hill Campus					Other (i.e. p etc.)	rivate & commer	cial build	dings,	home	es,
City (5)			N.	- months and the	Square Feet	# of Floors		ldg. A	ge	
Cherry Hill, NJ 08002		T 0	t: C-d- (7)		250,000 Current Use (Pric	5		2		
County (6) Camden			ity Code (7) TE USE ONLY,		Hospital	or it being demoi	isried)			
Name of Monitoring Firm Hired by Building Health and Safety Services LLC	Owner (8)	AS	CM No.		of Abatement Cor Services Corpo			8		
Street Address					Address					
318 12th Street				426	69th Street		27/2010/25/202			
City, State, Zip Code Hammonton, NJ 08037					State, Zip Code enberg, NJ 070	93				
Project Manager for Monitoring Firm		1000000	hone No.	Telep	hone No.	License	No.			
Jim Proctor			-704-8850		295-1700	01074	127020000			
Start Date (10) 04/19/2012	04/23/201		on Date (11)		of OSHA Monitor Services Corpo	ration				
Occupancy Status During Abatement (Che	eck Only One)			12-10-10-10-10-10-10-10-10-10-10-10-10-10-	Address					
Facility Closed/Vacated During Entire					69th Street				0.11401650	
Abatement Performed Outside of No Other – Describe: Shift night-4 PM-1	mal Facility Ho 2 PM	urs		1504	State, Zip Code enberg, NJ 070	)93				
Scope of Work (Check All That Apply)										
≥3 sf or ≥3 lf	× Ren	ovation			Full Containme	ent with Negative	Pressu	re		
≥160 sf or ≥260 lf	☐ Dem	olition		2	Mini-Enclosure Glovebag Prod					
			25		gg	d (*) and Non-Fri	able Pro	cedur	е	1
	Is Lo	cation						Abate		
Location of		nally		Description			-	T ' y	ре	
Asbestos-Containing Material (ACM) TO BE ABATED		olely by nance/		tos Containing I thermal system		Amount (Specify	n		En	ш
In Facility	77/312	al Staff? 2)	(1.6.	surfacing, VA	AT, or	SF or LF)	Remova	Repair	caps	Enclosure
(13)			_	other miscella	neous)		oval	air	Encapsulate	sure
Pailer Pages Old Obillar D		lo N/	A	Fittings		30 LF	x	-		
Boiler Room: Old Chiller Pump  Boiler Room: Old Chiller Pump	X			Pipe Insula		40 LF	x			
Bollet Room, Old Chillet Fullip	+^+	-	1	i ipe ilisule	111011	40 LI .	- A			
Name of Registered Waste Hauler			Waste .	Cubic Yards	Name of	Registered Land	fill			
Atlantic Carting		26085	ID No.	of Waste tbd	IESI-Be	thlehem Land	dfill Co	rp		
City, State Wayne, NJ		- 7		Disposal Date		em, PA				
Completed by	Title			Signature	e (a/) /)		Date			
Gina Salvador	Office N	lanage	r	W. C. L. S.	Bluas-		4/19/20	)12		



Date of Notification 4/19/12 Type Notification		Name of Build John Hall	ing Owner	/ Operator (2)	PODE	Prist-two-		
X DEP X Initial Not	d Notification	Street Address 52 S. Main S City, State & Z Cranbury, N Name of Conta John Hall	ip Code J 08512	The second secon	APR 24	2012		ne Number
		FACILITY	INFORM	ATION	Added for Comin	ROL &		
Street Address	lence	(3)		Subchapter 8	(Other than K-1)	2)		v.
52 S. Ma	in Street			Other (i.e., privare Feet	vate & commerc	ial build	ings, hom Bldg. Age	
10 10 10 Na Carlo	unty (6)	County Code (7)	Cur	2000	2 if being demolis	shed)		60
Name of Monitoring Firm Hired by Bu Environmental Tactics, Inc	uilding Owner (	8) ASCM	No. Nar	ne of Abatemer	nt Contractor (9) nt Services, I			
Street Address 64 Broad Street				et Address Schoolhous	e Road			
City, State & Zip Code <b>Matawan, NJ 07747</b>	14		City <b>Mo</b>	, State & Zip Conroe Townsh	ode nip, NJ 08831			
Project Manager for Monitoring Firm  Tom Geiger		ephone Number 2-290-2217		ephone Number 2-605-9062		License	Number 0071	4
Scheduled Start Date (10) Scheduled Start Date (10)	eduled Comple 4/3	tion Date (11) 30/12		ne of OSHA Mo bal Abateme	nitor nt Services, L	LLC		
Occupancy Status During Abatement Facility Closed/Vacated Durin Abatement Performed Outsid X Describe: Area Isolated Other - Describe:	ng Entire Perio le of Normal Fa	d of Abatement acility Hours -	<b>443</b> City	et Address Schoolhous , State & Zip Conroe Townsh	ode			
Large Project  X Quantity is ≥ 3 SF or ≥ 3 LF.  Quantity is ≥ 160 SF or ≥ 260	Renovation ACM 0 LF ACM			Mini-End X Gloveba Other:	g Procedure Enclosure			
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	No Ma	s Location ormally Used Solely by intenance or stodial Staff? (12)	Asbe M (i.e., insulati	escription of estos-Containing aterial (ACM) thermal system on, surfacing, V er miscellaneou	g (Sp Squar s (AT Linea	ecify re Feet or r Feet)	(Specifi Repair, E	ment Type y: Removal, Encapsulatio nclosure)
Basement		N/A	Pi	e Insulation	20	LF	Re	moval
Name of Registered Waste Hauler Freehold Cartage City, State Freehold, NJ	NJI	DEP Waste Haul 18693	er ID#	Cu. Yds. of W 5 Disposal Date 4/30/1	TRRF City, S		stered Lar	ndfill
Completed By (Print or Type)  Dominick Tringali	Title Pres.			Signature Dominick		LOWII, P	a	Date 4/19/12

CK

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120) Name of Building Owner (Operator (2) Date of Notification (1) Malkin 04-18-12 Agencies Notified Type Notification Street Address APR 2 4 2012 47 Sierra Court **EPA** Initial City, State, Zip Code, Amended DEP × DOL Amendment # Hillsdale, NJ 07642 ASBESTOS CONTROL & Emergency (including LICENSING | Telephone Number Name of Contact justification) DOH Albert Feliz Cancellation × DCA **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, X 47 Sierra Court etc.) Square Feet # of Floors Bldg. Age City (5) 2,900 2 42 yrs. Hillsdale County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) County (6) Private Residence Bergen Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Pinnacle Environmental Corp. N/A Street Address Street Address 200 Broad Street City, State, Zip Code City, State, Zip Code Carlstadt, NJ 07072 Telephone No. Telephone No. License No. Project Manager for Monitoring Firm 201-939-6565 00756 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 04-30-12 07-31-12 Even-Air Inc. Street Address Occupancy Status During Abatement (Check Only One) 10-59 Jackson Avenue Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Long Island City, NY 11101 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure Mini-Enclosure Demolition ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Encapsulate Maintenance/ Enclosure (i.e. thermal systems insulation, (Specify Remova TO BE ABATED Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)Yes N/A No VAT 350 SF x Basement X Family Room VAT 500 SF x X Name of Registered Landfill Cubic Yards Name of Registered Waste Hauler NJDEP Waste Hauler ID No. of Waste Minerva Enterprises ATC, Inc. / TriState Transfer (AF-106B) SW2105 TBD Disposal Date City, State City, State TBD Waynesburg, OH 44688 Shirley, NY / Bronx, NY Date Completed by Title Signature 04-18-12 Project Manager Tom Garcia Takl=

										<u> </u>	M	19	
Date of Notification (1) 3/19/2012 Check	¢#2206				Owner/Op s Medic								1
Agencies Notified Type Notification			Street A	ddress entral A	venue	0		APR	2 4 201	2			
EPA Initial Amended Amendment Emergency justification)	(including	_	Newar	te, Zip Co k, NJ 07 Contact	7102				S CONTROL	1707		and the same of th	
DCA Cancellation	1			w Mastii			- military species	and the					7
Name of Facility Where Abatement is Takin Saint Michael's Medical Center	ng Place (3)		FACI	LITY INFO	ORMATIC	ON ,		cility (4) I (K-12) apter 8 (Ot	her than K	12\		المواقع والمواقع	H
Street Address 111 Central Avenue								(i.e. private			dings	hom	es,
City (5) Newark, NJ 07102							Square Fee 160,000	et #	of Floors		8ldg. / '0+	\ge	
County (6) Essex			County (	Code (7) JSE ONLY	,		Current Use Hospital	e (Prior if be	eing demol	shed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN	1 No.			of Abatemen Services Co			20			
Street Address			-	****			Address 69th Street	t					
City, State, Zip Code							state, Zip Coo enberg, NJ						
Project Manager for Monitoring Firm		Telephor	ne No.			none No. 295-1700		License 01074	No.				
Start Date (10) 4/21/12	Schedule 4/28/20		pletion I	Date (11)			of OSHA Mo Services Co		n		9)		
Occupancy Status During Abatement (Cher	ck Only One	e)					Address 69th Street	t					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Starting at 7:00 AM					7	City, S	State, Zip Cod enberg, N.	le					
Scope of Work (Check All That Apply)		_				Guit	enberg, No	01033					_
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	-	enova emoliti				>	Mini-Encl	ainment wi losure g Procedure mpted (*) a	•			·e	
	Is	Locati	on			10.00	=				Abat	emen	t
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility  No Used Main Custo						Naterial (ACN s insulation, T, or		Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
Bldg 'B'-3rd Fl-below Convent			x		Pipe	Insula	ntion		3 LF	x	-	-	
Bidg 'B'-Bathroom- Const Area			x			Insula			60 LF	x		<del>                                     </del>	
Bldg 'B'-Construction Area						Insula			20 LF	x			
				172								1	
Name of Registered Waste Hauler	*		JDEP W		Cubic `		Nam	ne of Regis	tered Land	fill .	1		
Freehold Carting		auler ID 5939	No.	of Was tbd			ste Mana	agement					
City, State PO Box 5010	4				tbd	al Date	Tul	, State lytown, L	andfill				
Completed by Gina Salvador	Title Office	Man	ager	311	Si	ignature	Duel	S		Date 3/19/20	012		-

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 4/20/12 Diane Terhune Agencies Notified Type Notification Street Address 74 Old Chester Road **EPA** Initial City, State, Zip Code DEP Amended APR 2 4 2012 × DOL Amendment # Essex Fells, NJ Emergency (including Name of Contact Telephone Number DOH iustification) DCA Cancellation Diane Terhune ASBESTOS Q **FACILITY INFORMATION** LICENS Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) house School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, X 74 Old Chester Road etc.) City (5) Square Feet # of Floors Bldg. Age Essex Fells 5000 3 50 County (6) County Code (7) Current Use (Prior if being demolished) Essex (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) J & S Environmental ABS Environmental Services, LLC Street Address Street Address 2333 Route 22 W 4 E Gate Drive, PO Box 483 City, State, Zip Code City, State, Zip Code Union NJ 07083 Glenwood, NJ 07418 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Sherrill Gelisomo 908-206-0073 973-764-2276 703 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 4/30/12 6/15/12 Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: monday - saturday 8 am - 5 pm Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf X Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Encapsulate Maintenance/ TO BE ABATED Enclosure (i.e. thermal systems insulation, (Specify Remova Custodial Staff? Repair In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A attic roof rafter insulation 2000 SF X x (excludes soffit & below subfloor) NJDEP Waste Name of Registered Waste Hauler Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Freehold Cartage GROWS N Landfill 15939 50 City, State Disposal Date City, State Freehold NJ TBD Morrisville PA Completed by Title Signature Date

Andrew Scott Higgins

President

4/20/12

		(Pursuant to	NJAC 8: 60-7 and 12: 120-7	ENT	PAG	-	-	-
Date of Notification (1)			ame of Building Owner/Oper	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		W	FI	had a
0 4 / 2 0 /	1 2	P	assaic County Community Co	ollege	1	T.	5	
Agencies Notified Type of Notifical	ion		treet Address	1 1 1 1			-#	
[X] EPA			ne College Blvd	Andreas of the same of the sam	APR 24	2012		
[ ] Initial Noti	lication		ity, State, Zip Code	1 1 20/ 1	7211 2 4	CUIZ	hou	ATTEN I
* *			aterson, NJ 07505	1 1			-	
[X] DOL [X] Amended N			aterson, 143 07303	1	ASBESTOS CONT	ROL &		
[X] DOH [ ] Cancellatio	n	N	ame of Contact	-	Telephone Nui	nber		
[ ] DCA [ ] Emergency	,	В.	. Eagan	A,rs			telitibas in a	
		FACI	LITY INFORMATION				HILLSHED , A	
Name of Facility Where Abatement is Taking Place (	3)			Type of Facility	y (4)		- 1 ,n	
- 10 0					Sahaal (IV 12)			
Passaic County Community College Street Address					School (K-12) Subchapter 8 (Other the	nan K-1	2)	
Street Address					Other (i.e., private & co			
225 Market Street					buildings, homes, etc.)			
City (5) County (6	)	D20 00000	unty Code (7)	Square Feet	# of Floors	I	Bldg. A	ge
	-10	(8)	TATE USE ONLY)	Current Use (P	rior if being demolished)		-	
Paterson Passaic								
Name of Monitoring Firm Hired by Building Owner (	8)	ASCM	Name of Abatem	ent Contractor (9)				
GZA			J.R. Contracting	& Environmental C	onsulting, Inc.			
Street Address		Value constitution	Street Address					
55 Lane Road			1141 Route 23					
			City, State, Zip					
Fairfield NJ 07004			Wayne NJ 0747					
Project Manager for Monitoring Firm	1	phone Numb	The second secon	er	License Number	r		
Benjamin Sallemi		774-3311	973 628-9500		00408			
	luled Completion I	Date (II)	Name of OSHA					
0 4 0 4 / 1 2	0 5 1	6	1 2 Enviro Vision Co					
0 4   0 4 / 1 2   Month / Day / Year	0 5 1 Month / D	6				-		
Occupancy Status During Abatement (Check only one [X] Facility Closed/Vacated During En	0 5 1 Month / D	6	1 2 Enviro Vision Co	onsultants, Inc.	V			
0 4   0 4 / 1 2     Month	0 5 1 Month / D	6	1 2 Enviro Vision Co Year Street Address 20-21 Wagaraw	onsultants, Inc.				
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During Ent  of Abatement  [] Abatement Performed Outside of N  [X] Hours - Describe: 7:00a	0 5 1 Month / D	6	1 2 Enviro Vision Co Year Street Address 20-21 Wagaraw City, State, Zip C	Road, Bldg. #34A				
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During Ent  of Abatement  [] Abatement Performed Outside of N  [X] Hours - Describe:  [] Other - Describe:	Month / D  irre Period  formal Facility	6	1 2 Enviro Vision Co Year Street Address 20-21 Wagaraw	Road, Bldg. #34A				
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During Ent  of Abatement  [] Abatement Performed Outside of N  [X] Hours - Describe:  [] Other - Describe:	0 5 1 Month / D ire Period formal Facility .m 3:30p.m.	6	1 2 Enviro Vision Co Year Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074	Road, Bldg. #34A	nt With Negative Pressur	e		
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During Ent  of Abatement  [] Abatement Performed Outside of N  [X] Hours - Describe:  [] Other - Describe:  Scope of Work (Check all that apply)	0 5 1 Month / D irre Period formal Facility .m 3:30p.m.		Enviro Vision Co Year  Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074	Road, Bldg. #34A Code 110  Full Containme Mini-Enclosure	-	e		
0   4	0 5 1 Month / D irre Period formal Facility .m 3:30p.m.	ay /	Enviro Vision Co   Year   Street Address   20-21 Wagaraw   City, State, Zip Co   Fairlawn NJ 074	Road, Bldg. #34A Code The Full Containme Mini-Enclosure Glovebag Proce	dure			
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During Ent  of Abatement  [] Abatement Performed Outside of N  [X] Hours - Describe:  [] Other - Describe:  Scope of Work (Check all that apply)	0 5 1 Month / D irre Period formal Facility .m 3:30p.m.	ay /	Enviro Vision Co Year  Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074	Road, Bldg. #34A Code The Full Containme Mini-Enclosure Glovebag Proce	-	edure	Abatem	ent T
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0   4	0 5 1 Month / D ire Period formal Facility .m 3:30p.m.	6 Lay / Demolition	Enviro Vision Co   Year   Street Address   20-21 Wagaraw   City, State, Zip Co   Fairlawn NJ 074	Road, Bldg. #34A Code HO Full Containme Mini-Enclosure Glovebag Proce Non Exempted	dure	edure R E	R	_
	0 5 1 Month / D  ormal Facility .m 3:30p.m.	Demolition Renovation Is cation rmally Jsed	Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Containi Material (ACM	Road, Bldg. #34A code 110  Full Containme Mini-Enclosure Glovebag Proce Non Exempted	dure  *) and Non-Friable Proce  Amount (Specify	R E M	R E	E N C A
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement  [] Abatement Performed Outside of N  [X] Hours - Describe:  [] Other - Describe:  Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 if  [X] ≥ 160 sf or ≥ 260 if  Location of Asbestos - Containing Material (ACM)	0 5 1 Month / D  ire Period  formal Facility .m 3:30p.m.	Demolition Renovation	Enviro Vision Co	Road, Bldg. #34A Code 110    Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	dure (*) and Non-Friable Proce	edure R E	R	E N C
	0   5   1   Month	Demolition Renovation Is cation rmally Jsed lely by stenance /	Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Containi Material (ACM (i.e., thermal syste	Road, Bldg. #34A Code   Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	dure  *) and Non-Friable Proce  Amount (Specify	R E M O V A	R E P A	E N C A P S U
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During Enr of Abatement  [] Abatement Performed Outside of N  [X] Hours - Describe:  [] Other - Describe:  Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf  [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED	0   5   1   Month	Demolition Renovation Is cation rmally Jsed lely by thenance / stodial ff (12)	Enviro Vision Co	Road, Bldg. #34A Code   Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	dure  *) and Non-Friable Proce  Amount (Specify	R E M O V	R E P A	E N C A P S
0   4   0   4   1   2     Month	0   5   1   Month	Demolition Renovation Is cation rmally Jsed lely by stenance /	Enviro Vision Co	Road, Bldg. #34A Code   Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	dure  *) and Non-Friable Proce  Amount (Specify	R E M O V A	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement  [] Abatement Performed Outside of N [X] Hours - Describe: [] Other - Describe: Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)	0   5   1   Month	Demolition Renovation  Is cation rmally Jsed ely by thenance / stodial ff (12) No N/A	Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Containi Material (ACM (i.e., thermal syste insulation, surfacin or other miscella	Road, Bldg. #34A Code   Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	Amount (Specify SF or LF)	R E M O V A L	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement  [] Abatement Performed Outside of N [X] Hours - Describe: [] Other - Describe: Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)  First Floor  Mezzanine	0   5   1   Month	Demolition Renovation  Is cation rmally lsed lely by tenance / stodial ff (12) No N/A X	Enviro Vision Co	Road, Bldg. #34A Code   Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	Amount (Specify SF or LF)	R E M O V A L X	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement  [] Abatement Performed Outside of N [X] Hours - Describe: [] Other - Describe:  Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)  First Floor  Mezzanine Basement	0   5   1   Month	Demolition Renovation  Is cation rmally lsed lely by tenance / stodial ff (12) No N/A X X X	Enviro Vision Co Year  Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Contain Material (ACM (i.e., thermal syste insulation, surfacir or other miscella  Linoleum Linoleum VAT	Road, Bldg. #34A Code   Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	Amount (Specify SF or LF)  500 SF 64 SF 10150 SF 8900 SF	R E M O V A L X X X	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement  [] Abatement Performed Outside of N [X] Hours - Describe: [] Other - Describe: [] Other - Describe: Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)  First Floor  Mezzanine  Basement First Floor Mezzanine	0   5   1   Month	Demolition Renovation  Is cation rmally lsed lely by tenance / stodial ff (12) No N/A X X X X X	Enviro Vision Co Year  Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Contain Material (ACM (i.e., thermal syste insulation, surfacir or other miscella  Linoleum Linoleum VAT VAT	Road, Bldg. #34A Code   Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	Amount (Specify SF or LF)  500 SF 64 SF 10150 SF 8900 SF 2140 SF	R E M O V A L X X X X	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement [] Abatement Performed Outside of N [X] Hours - Describe: [] Other - Describe: Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)  First Floor  Mezzanine  Basement First Floor  Mezzanine Second Floor	0   5   1   Month	Demolition Renovation  Is cation rmally Jsed lely by lettenance / stodial ff (12) No N/A  X  X  X  X  X	Enviro Vision Co Year  Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Contain Material (ACM (i.e., thermal syste insulation, surfacir or other miscella  Linoleum Linoleum VAT VAT VAT	Road, Bldg. #34A Code   Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	Amount (Specify SF or LF)  500 SF 64 SF 10150 SF 8900 SF 2140 SF 8750 SF	R E M O V A L X X X X X	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement  [] Abatement Performed Outside of N [X] Hours - Describe: [] Other - Describe: [] Other - Describe: Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)  First Floor  Mezzanine Basement First Floor  Mezzanine Second Floor Basement Second Floor Basement	0   5   1   Month	Demolition Renovation  Is cation rmally Jsed lely by Intenance / Is stodial If (12) In No N/A  X  X  X  X  X  X  X	Enviro Vision Co Year  Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Contain Material (ACM (i.e., thermal syste insulation, surfacir or other miscella  Linoleum Linoleum VAT VAT VAT Pipe insulation	Road, Bldg. #34A Code   Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	Amount (Specify SF or LF)  500 SF 64 SF 10150 SF 8900 SF 2140 SF 8750 SF	R E M O V A L X X X X X X	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement  [] Abatement Performed Outside of N [X] Hours - Describe: [] Other - Describe: [] Other - Describe: Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)  First Floor  Mezzanine Basement First Floor  Mezzanine Second Floor Basement Second Floor Basement	0   5   1   Month	Demolition Renovation  Is cation rmally Jsed lely by lettenance / stodial ff (12) No N/A  X  X  X  X  X	Enviro Vision Co Year  Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Contain Material (ACM (i.e., thermal syste insulation, surfacir or other miscella  Linoleum Linoleum VAT VAT VAT	Road, Bldg. #34A Code   Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted	Amount (Specify SF or LF)  500 SF 64 SF 10150 SF 8900 SF 2140 SF 8750 SF	R E M O V A L X X X X X	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement  [] Abatement Performed Outside of N [X] Hours - Describe: [] Other - Describe: [] Other - Describe: Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)  First Floor  Mezzanine Basement First Floor  Mezzanine Second Floor Basement Basement Basement Basement Basement	0 5 1 Month / D  ire Period  formal Facility .m 3:30p.m.	Demolition Renovation  Is cation rmally Used lely by Internance / Stodial ff (12)  No N/A  X  X  X  X  X  X  X	Enviro Vision Co Year  Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Contain Material (ACM (i.e., thermal syste insulation, surfacir or other miscella  Linoleum Linoleum VAT VAT VAT Pipe insulation Duct insulaton	onsultants, Inc.  Road, Bldg. #34A  Code  100    Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted  ng ) ms  ng, VAT, neous)	Amount (Specify SF or LF)  500 SF 64 SF 10150 SF 8900 SF 2140 SF 8750 SF 500 LF	R E M O V A L X X X X X X	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement  [] Abatement Performed Outside of N [X] Hours - Describe: [] Other - Describe:  Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)  First Floor  Mezzanine Basement First Floor  Mezzanine Second Floor Basement Basement Basement Basement Basement Basement	0 5 1 Month / D  ire Period  formal Facility .m 3:30p.m.  [ ] Lo Noi Cu Sol Main Cu Sta Yes	Demolition Renovation  Is cation rmally Jsed lely by Intenance / Is stodial If (12) In No N/A  X  X  X  X  X  X  X	Enviro Vision Co Year  Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Contain Material (ACM (i.e., thermal syste insulation, surfacir or other miscella  Linoleum Linoleum VAT VAT VAT Pipe insulation	Road, Bldg. #34A  Code    Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted     mg   )   ms   g, VAT,   neous)	Amount (Specify SF or LF)  500 SF 64 SF 10150 SF 8900 SF 2140 SF 8750 SF 500 LF 20 SF	R E M O V A L X X X X X X	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During Ent of Abatement  [] Abatement Performed Outside of N  [X] Hours - Describe: 7:00a  [] Other - Describe: Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf  [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)  First Floor  Mczzanine Basement First Floor Basement	0 5 1 Month / D  ire Period  formal Facility .m 3:30p.m.  [ ] Lo Noi Cu Sol Main Cu Sta Yes	Demolition Renovation  Is cation rmally Jsed lely by ttenance / stodial ff (12)  No N/A  X  X  X  X  X  X  X  X  X  EP Waste	Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Containi Material (ACM (i.e., thermal syste insulation, surfacir or other miscella  Linoleum  Linoleum  VAT  VAT  VAT  Pipe insulation  Duct insulaton  Cubic Yards of Waste	Road, Bldg. #34A  Code    Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted     mg   )   ms   ng, VAT,   neous)	Amount (Specify SF or LF)  500 SF 64 SF 10150 SF 8900 SF 2140 SF 8750 SF 500 LF 20 SF	R E M O V A L X X X X X X	R E P A	E N C A P S U L
Occupancy Status During Abatement (Check only one  [X] Facility Closed/Vacated During En of Abatement [] Abatement Performed Outside of N [X] Hours - Describe: [] Other - Describe: [] Other - Describe: Scope of Work (Check all that apply)  [] ≥ 3 sf or ≥ 3 lf [X] ≥ 160 sf or ≥ 260 lf  Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)  First Floor  Mezzanine Basement First Floor  Mezzanine Second Floor Basement	0 5 1 Month / D  ire Period  formal Facility .m 3:30p.m.  [ ] Lo Noi Cu Sol Main Cu Sta Yes	Demolition Renovation  Is cation rmally Jsed lely by Istenance / Stodial ff (12)  No N/A  X  X  X  X  X  X  EP Waste er ID No.	Street Address 20-21 Wagaraw City, State, Zip C Fairlawn NJ 074  Description of Asbestos-Contain Material (ACM (i.e., thermal syste insulation, surfacir or other miscella  Linoleum Linoleum VAT VAT VAT Pipe insulation Duct insulaton	Road, Bldg. #34A  Code    Full Containme   Mini-Enclosure   Glovebag Proce   Non Exempted     mg   )   ms   g, VAT,   neous)	Amount (Specify SF or LF)  500 SF 64 SF 10150 SF 8900 SF 2140 SF 8750 SF 500 LF 20 SF	R E M O V A L X X X X X X	R E P A	E N C A P S U L

#### State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)			(Pursu		NJAC 8: 60-7 and 12: 120-	Supplement from	6 17 8 88		Triadeles.	7	3
	5 / 1	2			ame of Building Owner/Ope ssaic County Community C		GEIV	[5]	n		
Agencies Notified Type [X] EPA	of Notification				reet Address			11	111		
78 . 07	Initial Notification				ne College Blvd	<u> </u>	APR 24 201	2	U	_	
				Ci	ty, State, Zip Code			-	actor of	TANK PER	
[X] DOL [X]	Amended Notification Amendment # 2	1	- 1	Pa	iterson, NJ 07505	i	ASSESTANCE CONTROL			Section	
[X] DOH []	Cancellation			Na	ame of Contact		Telephone Nu	~		1	
[ ] DCA [X]	Emergency			B.	Eagan	for accommon to the	AND THE SERVICE OF TH	Manage	1040100,7401	3	
•				FACI	LITY INFORMATION	4.	and the second of the second of the second	Maria .			
Name of Facility Where Abatement is Tak	ing Place (3)					Type of Facilit	y (4)	0.15		we -	3.00
Passaic County Community College							0.11/7/ 12)				
Street Address						- 1 1 1	School (K-12) Subchapter 8 (Other	than K-1	2)		
						[x]	Other (i.e., private & c		. 73		
225 Market Street City (5)	County (6)			C	- 1 C - 2 - 2		buildings, homes, etc.)				
Chy (3)	County (6)			1	anty Code (7) ATE USE ONLY)	Square Feet	# of Floors	1	Bldg. A	lge	
				(		Current Use (P	rior if being demolished)	!_			
Paterson  Name of Monitoring Firm Hired by Buildi	Passaic		ASC	N/S	I INome of Abote						
The line by being	ng Owner (0)		ASC	LYR .	Name of Adates	nent Contractor (9)	2.00				
GZA					J.R. Contracting	& Environmental C	onsulting, Inc.				
Street Address		74			Street Address	4-					
55 Lane Road					1141 Route 23						
2					City, State, Zip				33		
Fairfield NJ 07004		1			Wayne NJ 0747						
Project Manager for Monitoring Firm	hone l			ber	License Numb	er					
Benjamin Sallemi Scheduled State Date (10)	74-33 Date (1		973 628-9500 Name of OSHA	Maniton	00408						
0 4 0 4 / 1 Month / Day / Ye	2 0 5	Da	9	L	Enviro Vision C				100		
of Abatement  [ ] Abatement Performed (     [X ] Hours - Describe:     [ ] Other - Describe:  Scope of Work (Check all that apply)	Outside of Normal Fa 7:00a.m 3:30		Demo		City, State, Zip 6 Fairlawn NJ 07	410  ] Full Containme	ent With Negative Pressur	re			
[ ] ≥3 sf or ≥3 lf		******			i						
[X] ≥ 160 sf or ≥ 260 lf					[3	[] Non Exempted	(*) and Non-Friable Proc				
		1	s					-	baten	nent T	
Location of Asbestos - Containing Material (ACM) TO BE ABATED in Facility (13)		No: U Sole Main Cus	mally sed ely by tenance todial f (12)	ce/	Description of Asbestos-Contain Material (ACN (i.e., thermal system insulation, surfaci or other miscella	I) ems ng, VAT,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	N C A P S U L E	N C L O S U R E
First Floor	-			X	Linoleum		500 SF	X			
Mezzanine				X	Linoleum		64 SF	х			
Basement				X	VAT		10150 SF	X			
First Floor Mezzanine				X	VAT		8900 SF	X			
Second Floor				X	VAT		2140 SF 8750 SF	X	$\vdash$		-
				Λ			0/30 SF	- A			
								-			
										-	
Name of Registered Waste Hauler		Haule	P Was	in.	Cubic Yards of Waste		Registered Landfill				
J.R. Contracting & Environmental Consult City, State	ing, Inc.		17819		Disposal Date	G.R.O.V		1.7		-	
Wayne NJ 07470					Disposai Date	City, Sta					
Completed by (Print or Type)	Title		E		Signature	INIOTTISV	Date				
I DV. 1						1		9			
Jerry Bijelonic	Project Manage	r			ICV	<u> </u>		4/5	/2012		

40 Noct

Date of Notification (1) 4–20–12			Name	of Building Owner ckaway Town	Operator	原原原	ENW	昌	120		
	pe Notification		Street	Address		1100		110	1	1	
□ EPA □	Initial		301	Mount Hop	e Ave	nue III AP	R 24 20	112	mary web	1	
□ DEP	Amended 1		City, S	tate, Zip Code	•	144		-	1	+	
□ DOL	Amendment #I Emergency (including			ckaway, NJ	078,60	5	ESTOS CONTRO	11 &	k	9	
Ď DOH	justification)	4	Name	of Contact	1	FIGURE	Telephon	e Numb	er		
DCA - D	Cancellation	8 1		chael Hause					7	/	
Name of Facility Where Abate	ement is Taking Place (	(3)	FAC	ILITY INFORMAT	TION	Type of Facility	(4)		-	- roganities	pole. "
Rockaway Town Squ	are Mall					☐ School (K-	12)				
Street Address				0		☐ Subchapter	8 (Other than	n K-12)			
301 Mount Hope Av	renue					Other (i.e. petc.)	orivate & com	mercial I	ouild	ings, l	homes
City (5)		-	-			Square Feet	# of Floor	2	BI	dg. Ag	10
Rockaway, NJ						150,000	1		4	1 yì	
County (6) Morris				Code (7) USE ONLY)		Current Use (Pri mall	or if being der	nolished	)		
Name of Monitoring Firm Hire	d by Building Owner (8	)	ASC	M No.	Name	of Abatement Cor	ntractor (9)		-	-	-
Environmental Des	erdu				Ply	mouth Envi	ronmenta	1 Co.	, Tr	nc.	
Street Address					Street	Address			/		_
5434 King Avenue,	Suite 101				923	Haws Avenu	ue				
City, State, Zip Code				***	City, S	tate, Zip Code					_
-	8109				Nor	ristown, P	A 19401				
Project Manager for Monitorin	g Firm	17	Telepho			one No.		se No.	-		
Jay MUrray			856-	616-9516	610	-239-9920		003	98		
Start Date (10) 4/16/12	Schedul 4/27	ed Co	mpletion	Date (11)	Name	of OSHA Monitor mouth Envi	ronmenta				
Occupancy Status During Aba							- Constitution	1 00.	1 11	ıc.	
					777-0-35-0-	Address Haws Aveni	10				
☐ Facility Closed/Vacated ☐ Abatement Performed Out	During Entire Period of Automates	Abater	ment		Name of the last		TE				_
Other − Describe: <u>WO</u>	rk area isolat	ed	5			ate, Zip Code ristown, PA	19401				
Scope of Work (Check All Tha	t Apply)								-		
□ ≥3 sf or ≥3 lf		Renova	ation			Full Containme	nt with Negat	ive Pres	sure		
DX ≥160 sf or ≥260 lf		Demoli	tion			Mini-Enclosure			ouio		
						Glovebag Proc Non-Exempted	edure (*) and Non-F	Eriable E	roon	dura	
	le	Locat	ion			T	( ) and Non-i	TIADIE F		batem	nent
Location of		Vorma		Doub					,,	Туре	
Asbestos-Containing Mater	iai (ACIVI)	d Sole		Asbestos Cont	scription a aining Ma		Amount				
TO BE ABATED In Facility		intena todial S		(i.e. thermal	systems	insulation,	(Specify	1 2	0	71	
(13)		(12)		surfac	cing, VAT niscellane	, or	SF or LF)	Nemova	-	Repair	aps
\$ 1.50	- V 1	NI-	L	outer it	nocenario	Jousy		Ya!		₩   }	Encapsulate
Space 1083	Yes	No	N/A	63						_   '	D
space 1005			Х	floor tile	e mast	ic	750 S	F >	2		
			-								
Name of Pogistered West 11		- 1 -									
Name of Registered Waste Hau Newark Carting	H	JDEP W				egistered Lan	dfill	5			
21. 24.1	4	1509	1		IESI			(4. ar-	10 - 200		
City, State Newark, NJ		Dispos 4/27/	al Date	City, State	ehem, PA						
Completed by Title				1	gnature	//	) PA		- 115-6	e- 11	
Completed by Timothy E. Bryan	imothy E. Bryan Vice-Pre					118		Date 4-20	-12	2	
		(O)			1			- 7			4

Date of Notification (1) 4–5–12						g Owner/C			FI	MECK W B	#	- 0	a c	7
	C=					Town S	Squar	e Malt U			_			
Agencies Notified	Type Notification				Address Mount	Норе	Aver	ue)	D 0 4	2012				
□ DEP	☐ Amended			City, S	tate, Zip C	Code		last last AT	R 24	- 2012	Louise	#	1 1	
Ď DOL	Amendment  Emergency			Roc	kaway,	, NJ (	786	5 /					Ė	
Ď DOH	<ul><li>Emergency justification)</li></ul>			Name	of Contact	t .		ASBE	3103 (Te	lephone Ni	imber		,	
□ DCA	☐ Cancellation	1 =		Mic	chael H	Hauser	Į.		TICAN					
Name of Co. 186 - 186		51 (0		FAC	CILITY INF	ORMATI	NC	or or Kon	Section 19 Section 19	erres mis supres	Texas.		*	
Name of Facility Where A Rockaway Town			)					Type of Facility  School (K	1					
Street Address 301 Mount Hope	e Avenue							Subchapt Other (i.e etc.)	er 8 (Oth private	er than K- & commerc	12) cial bui	ldings	s, hon	nes,
City (5) Rockaway, NJ		,						Square Feet 150,000	# 0	f Floors		Bldg. 41	Age	
County (6) Morris				County (STATE	Code (7)	y)		Current Use (P	rior if be	ng demolis	hed)		<u> </u>	
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.	T	Name	of Abatement Co	ontractor	(9)				
Environmental	2.10							mouth Env			70	Tna		
Street Address								Address	LTOIME	encar (	0.,	THE	• -	
5434 King Aver	nue, Suite	101					923	Haws Aver	nue					
City, State, Zip Code				200000000000000000000000000000000000000				tate, Zip Code			-	-		
Pennsauken, NJ	08109					.		ristown, I	PA 19	101				
Project Manager for Moni	toring Firm	T	Telepho	one No.			one No.		License N	lo.	* *			
Jay Murray				856-6	616-95	16	61.0	-239-9920		(	039	8		
Start Date (10) 4/16/12		Schedule 4/20/	d Cor	npletion	Date (11)			of OSHA Monito						
Occupancy Status During	Abatement (Chec	k Only One	e)				Street	Address						
☐ . Facility Closed/Vaca	ted During Entire F	Period of A	haten	nent			923	Haws Aver	nue					
Abatement Performe Other – Describe:	d Outside of Norm	al Facility	Hours	3				ate, Zip Code ristown, I	PA 194	401				
Scope of Work (Check All	That Apply)											_		
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			enova emolit				000	Mini-Enclosus Glovebag Pro	e cedure	207000000000000000000000000000000000000				
		T		·			<u> </u>	Non-Exempte	d (*) and	Non-Friat	le Pro	70,000		
		10900000	_ocati ormal										emen pe	
Location Asbestos-Containing N		Used	Sole	ly by	Ashes		ription	of aterial (ACM)	Δ,	nount		Γ		Г
TO BE ABA In Facility (13)	TED y	Custo	ntenar odial S (12)				ystems ng, VA1	insulation, , or	(S	pecify or LF)	Removal	Repair	Encapsulate	Enclosure
er al in the second		Yes	No	N/A		1.00							е	
Space 1083				х	floor	tile	mast:	ic	750	SF	x			
											1			
							-							
		-									-			
Name of Registered West	Name of Registered Waste Hauler							-	D:-	- 47 - 15-				
100 LOCATION CONTRACTOR (100 LOCATION CONTRACT	0.000000	JDEP Wauler ID	ACTOR OF THE CO.	Cubic Ya	100000000000000000000000000000000000000	Name of	Register	ed Landfill				eca modeli		
Newark Carting						1	1.11	IESI						
City, State Newark, NJ						Disposal		City, Stat	e Lehen	. PA				
Completed by Title							nature	7 2241	7//	, FA Da	te.			
Timothy E. Bryan	-Pr	eside	nt			in 1/	5		-5-1	2				

		(F			8:60 and	2	11171	E C	EIW	E	n		
Date of Notification (1) 04/20/12 Ck# 2020 \$200					Owner/Opard of Ed			The COT	Pres 11 VI	1	-		
Agencies Notified Type Notification  EPA Initial			Street A	Address Illey Roa	ad			APF	3 2 4 2012		IJ		
DEP Amended Amendment Emergency		, [	Monto		w Jersey	y 070·	42	ASBES	STOS CONTROL A	1		The Paris of the P	
DOH justification)  DCA Cancellation			Lenny	of Contact Sapon	aro		(management)		Telephone N	umber		}	
Name of Facility Where Abatement is Takir Nishuane School	g Place (	(3)	FAC	ILITY INF	ORMATIC	ON ®	Type of F	acility (4)		g with the			
Street Address 32 Cedar Avenue							Sub Othe	er (i.e. pri	) 3 (Other than K- ivate & commer		ildings	s, hom	ies,
City (5) Montclair, New Jersey 07042							Square F 20,000		# of Floors	100	Bldg. 55+	Age	
County (6) Essex				Code (7) USE ONLY	n	_	Current U	Jse (Prior	if being demoli	shed)	******		
Name of Monitoring Firm Hired by Building Detail Associates	Owner (8	)	ASCN	M No.			of Abatem Corpora		ractor (9)		2		
Street Address 300 Grand Aveue							Address McBride	Avenue	9				
City, State, Zip Code Englewood, New Jersey 08631		-					tate, Zip C dland Pa		v Jersey 074	24			
Project Manager for Monitoring Firm Tony Valentine			Telepho 201-56	ne No. 69-6708			orle No. 225-8400	)	License 01104	No.			
Start Date (10) 05/05/12	05/06/	12	mpletion	Date (11)			of OSHA N Environn		abs				
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire I	Period of	Abaten	nent				Address Route 2	2 West	<del></del>				-
Abatement Performed Outside of Norm  Other – Describe: 7AM Start	nal Facilit	y Hours	5		[		tate, Zip C n, New J		7083				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 if  ≥160 sf or ≥260 if	- parameters	Renova Demolit				×	Full Co Mini-Er Gloveb	ntainmen nclosure ag Proce	it with Negative			re	
Location of		Locati Normal	lly		Desc	ription	of					emen ype	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintena todial S (12)	nce/		stos Contai	ining M ystems ng, VA	laterial (AC insulation T, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Boiler Room	163	X	INA			TSI		-	8 LF	X	$\vdash$		
					-			-		+	-		
Name of Registered Waste Hauler Lilich Corporation		Н	JDEP W auler ID 3724		Cubic Yaste		1		egistered Landfi .S Landfill	1	1	Total	
City, State Woodland Park, New Jersey 07424			100	-	Disposa 05/07/1			ty, State orrisville	e, Pennsylva	nia		4	
Completed by Tatiana Kalenikova	Presid	dent	1 171		nature	ana	lel.		ate 4/20/	12			

Date of Notification (1	)			Name	e of Build	ing Owner/Operate	(2) E C	BIDIE	diameter and the second				
04/19/2012				Watch	nung Hil	lls Regional High	School	LE IVE	[m]				
Agency Notified	Type Notification				t Address				7// ///				
⊠ EPA	⊠ Initial			108 S	tirling R	load / //	U LU APR	2 1 2012	HH				
C) DEP	☐ Amended			City,	State, Zip	Code	1	2 4 2012					
⊠ DOL	Amendment #	dina		Warre	en, NJ 01	7059		- CONSTRUCTION OF THE PARTY OF	1	58			
⊠ DOH	justification)	unig		Name	of Conta	act	ASBEST		mber				
⊠ DCA	☐ Cancellation			Tim S	itys	140	The same of the sa	-	6	53	1		
				FAC	ILITY IN	FORMATION	ing.	Status de Santagas	American St.	_			
Name of Facility When	re Abatement is Taking P	lace (3	)				Type of Facil	ity (4)		Ţ			
Watchung Hills Reg	ional High School						School (K-	12\	A THE MANAGER	Å.			
Street Address								r 8 (Other than K-1 2	2)				
108 Stirling Road							Other (i.e.	private & commercia	al buildi	ngs,			
City (5)							homes, et Square Feet	# of Floors	Bldg	An	Δ.		
(1700) 14							AND A CHARLES CALLS SHE'S.	# 01110013		9	C		
Warren, NJ 07059 County (6)				Count	ty Code (	7) (STATE USE	20000+ SF	(Pr or if being demol	50+				
				ONLY		1) (STATE 03E			iisnea)				
Somerset	irm Hired by Building Ow	nor T	ASCI	A No		Nome of Abeter	L High	h School					_
	onSultants	(3)		VI INO.		Name of Abater	nent Contractor	(9)					
Street Address	onsultants	l	0057			RICI CORP			-				
						Street Address							
P.O. Box 385 City, State, Zip Code						41 LIBERTY S		···					
15.0 10 15	1 0200					City, State, Zip							
Oceanville, NJ 0823 Project Managerfor M		Т	olonho	one No.	-	PASSAIC, NJ	07055						_
	omtoring Film		17			Telephone No.		License No.					
Domenic D'Errico Start Date (10)	Cahadulad (			2-1833		973-614-1266	NA 11	00838					
	Scheduled (	omple	tion Da	ate (1 1)		Name of OSHA	Monitor						
04/30/2012	06/01/2012 ring Abatement (Check or	nly one	1			RICI CORP				-			
Occupancy Status Dui	ing Abatement (Check of	ny one	)			Street Address	1200						
☐ Facility ClosecNaca	ated During Entire Period	of Aba	temen	it		41 LIBERTY S							
☑ Other - Describe	ed Outside of Normal Fa					City, State, Zip							
Scope of Work (Check	Occupied bom	to	2 pr	3		PASSAIC, NJ	07055						-
No. 100	an that apply)					<b>⊠</b> Full	Containment wi	th Negative Pressur	re				
□ ~: 3 sf or ~: 3 lf □ ~: 1 60 sf or ~: 260 lf					novation molition	19 10 10 10 10 10 10 10 10 10 10 10 10 10	-Enclosure elbag Procedure						
						⊠ Non-	Exempted (*) a	nd Non-Friable Proc	cedure				
		1. 1	s Loca	tion						A	7.7	eme	nt
Loca	ation of		Norma	ally		Description	of.			-	Ty	уре	Г
	ing Material (ACM)	28300	ed Sol		Asbe	stos Containing M		Amount				m	100
	ABATED acility	U 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Custod	lial	(i.e	e., thermal systems		(Specify		Removal	D.	Encapsulate	Enclosure
	13)		Staff' (12)			surfacing, VAT other miscelland		SF or LF)		No.	Repair	nsq	uso
· ·	e ignited		(12)	1						<u>a</u>	=	ate	ē
		Yes	No	N/A									
Large Group Instruct	ion Room Vestibule		x		Glue Do	ot asso. with 1 X 1	Ceiling Tiles	20 SF		x			
Large Group Instruct	ion Room		x			tiles and mastic (beneath ca		1100 SF		X		П	
Large Group Instruct	ion Room	x -			ed Ceiling plaste		4500 SF		X			-	
		12.35		1				.500 5.		-	-	-	1
Name of Registered W	aste Hauler	N.	JDEP V	Waste F	lauler	Cubic Yards of	Name of Reg	stered Landfill		L_			-
			No.			Waste							
RICI CORP		29	051			TBD	G.R.O.W.S.	LANDFILL					
City, State		in the same		0 1		Disposal Date	City, State			-		-	
PASSAIC, NJ			2 - 1 - 2 - 2 - 2			TBD	MORRISVII	LLE, PA					
Completed by	Title			MISSELLINES:	77	Signature /	1		Date	-			15.1
RISTO TRAJKOV	PRESIDEN		1000-00000	- to-25 - 211		de	11	(	04/19/2	012	!		
ASB-41	* Do no	t use th	nis forr	n for as	bestos lic	ensure exempted	activities.						

Fax:

Apr 18 2012 01:49pm P001/001

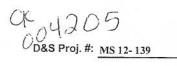
### State of NJ

CHECK NUMBER 004204

D&S Proj. #: MS 12-138

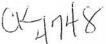
Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

				1.50	- Address	and the state of t	F. Phy	PROVED	- Parlamente			
Date of Notification (1)  [0  4  / 1  8  / 1  2				ner/Operator (2	15	P F I W E	No Pept of Heal	th & Sen	ior Seri	vices		
Agencies Notified   Type Notifi	suffice.	Russell	-		5	5 6 6 6	DAN	1 100	ma	1		
☐ EPA ☑ Initial	- I	Street Addr	<b>955</b> .	1153	1		Date: 4/1/2	1A	1./10	-1	0	
DEP Amended		145 Wes	st End Av	renue	11 /	PR 2 4 2012	Date: 7118	Time	101		1	
Amendmon	#	City, State,	Zip Code	End   En	EM.		1-1-	-	-	-	-	
K Emergen			ille, NJ 0	8876		& IOSTAND SOTOS	_					
DOH (Including justification		lanie of Co	ntect		T	LICENSING	Telepho	one Num	ber			
☐ DCA ☐ Cancellat	ion	Russell	Sterling	Leannin	MANAGEMENT OF THE	and a second sec			~			
			FAC	ILITY INFORM	ATION							
Name of facility where abatemer	it is taking pl	ace (3)	<del></del>			• — Т	Type of Facility	/ (4)				
Private facility							Scho	ool (K t				
Sheet Address								hapter 8 r (Private				1
145 West End Avenue							Bidgs	:./Homes	, etc.		50	
City (5)	I Cou	nty (6)			7 =		Square Feet	# of Flo	pors	Ē	eldg. A	Age
		inty (O)				nty Code (7) e use only)	Compact I base		-	1_		
Somerville		nerset			(		Current Use (	rnor it be	eing de	molisi	red)	
Name of Monitoring Firm Hired b	y Blug. Own	er (6)		ASCM No.		Name of Abatement	Contractor (9)			***		
N/A				-		D&SRESTOR	ATION, INC.					
Street Address						Street Address			-			-
City, State, Zip Code				a and a second		20 California A	ve.					
Oity, State, Alp Code		. :		22/2012/02		City, State, Zip Code						
Project Manager for Monitoring Fig					veneral [	Paterson, NJ 07	503		100586078511111			
LIGIOUS INTERNATION WITH TOUR LINE	m ;	Ph	ione Numb	er		Telephone Number			e Num			
Start Date (10)	~					973-345-8020	1	<del></del>	00159		- ·	
Start Date (10)	Sched	. Completio	n Date (1	1)		Name of OSHA Moni D & S Restoration		98				
04/19/2012	0	4/20/12			1	Street Address	en, me.		*		-	M. 1
Occupancy Status During Abatem	ent (Check o	nly one)				20 California Av	chue					
Facility closed/vecated during Abatement performed outside	g entire period	ad of abato	mont. 8-		1	ity, State, Zip Code						
Describe: NORMAL					-	Dataman MF A7	£02					
Scope of Work (check all that app		*			-11	Paterson, NJ 07:						
⊠ >3 sf or >3 if ⊠		n				THEOREM	Full Containment y Viini-enclosure	w/negativ	è presa	HUTE		
2160 sf or ≥260 if	Demolition					- Command	Slovobag procedu	re .				
		normally u					Van-Exempted (*)		-friable	proc	edure	)
Location of asbestos-containing	py walute	hance/cust	oqial raed aoleij	1		1 20 00000 CO			R	R	E	E
material (acm) to be abated in facility (13)	staff(12)			material (A		estos-containing	Amount (Specify S	SF or	m	p	0	n
document in mainly (15)	Yes	No	NVA				LF)		v	a	a	L
Basement		X		Pipe Insulati	ion		140 LF		8	1	17	
							110 11	nad me			片	#
									#	井	岩	
									-	붜	片	1
20 (10 m)						The reserve		-			H	
egistered Waste Hauter D & S RESTORATION, INC.	NJDE 1350	P Hauler II		the Yards of VV		Name of Registered L		·	البار		1-4	
City, Stato	1330	-	The second secon	CY		TULLYTOWN, R	ESOURCE RE	COVE	₹Y	ll .	0.10	1.00
PATERSON, NJ 07503			16pusal Da 04/20			City, State						
ompleted by (Print or Type)	Title			Signature		TULLYTOWN, F	'A					
BOGDAN JOLDZIC	PRESIDE	NT		Aiditainia				Date	11017-		and the second	
ASB-41	Do not use		r acharine	licangue	watad -	attende a		14	/18/12	-		-



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

				11 11 0				The filth of the city of the section	70 (10) 200 (10 mag k 1)				
Date of Notification	1/1/2		Jeff Chr		ner/Operator (2	2)	ME	CEIV	7 6 6	1			
Agencies Notified		tion	Street Addi	ess		-	TIPA II		1/ 1	111	_		
L EPA	Initial		225 4 -1					100		III			
☐ DEP	Amended			cerman A				APR 2 4 20	<u> 12                                    </u>	111			
☑ DOL	Amendment #	:    '	City, State,	Zip Code			j j		Amenda	ne ^a			
M DOL	Emergency		Ho-ho-	kus, NJ 0	7423		! · i	10010700 00170102A		ALC: N			(9)
□ DOH	(including	.	lame of Co	ntact					ne Numbe	r	_		
□ DCA	justification	)					Salar	CINE ASUMP					
	☐ Cancellatio	n	Jeff Ch	ristensen			September 6	WAR TO THE PARTY OF THE PARTY O					
Proceedings of the Control of the Co				FA	CILITY INFORM	MATION	1			***	a.i	31145-50 2	
Name of facility w	here abatement	is taking pla	ace (3)					Type of Facility	(4) ol (K - 12	`			
Private Resider	nce								hapter 8 (0	50	han k	(-12\	
Street Address				1 1 1				A Commence of the Commence of	(Private/0				
225 A -1									./Homes,		oiui		
235 Ackerman	Avenue							Square Feet	# of Floo	rs	В	Ildg. A	ge
City (5)		Cou	nty (6)				unty Code (7)						
						(Sta	ate use only)	Current Use (F	Prior if bein	ng den	nolish	ned)	
Ho-ho-kus			gen										
Name of Monitoring	ng Firm Hired by	Bldg. Owne	er (8)		ASCM No.		Name of Abatemen	t Contractor (9)					
N/A							D & S RESTOR	RATION, INC.					
Street Address					-	-	Street Address						
							20 California A	.ve					
City, State, Zip Coo	le .					_	City, State, Zip Code			-	_	-	-
, otato, <u>-</u> p oo													
5							Paterson, NJ 0	7503					
Project Manager fo	r Monitoring Firm	1	P	hone Num	ber		Telephone Number		License		2000		
							973-345-8020	)	(	0159			
Start Date (10)		ISched	i. Complet	ion Date (*	11)	_	Name of OSHA Mor	nitor					
				,	,		D & S Restorat	tion, Inc.					
04/28/12			4/28/12				Street Address						
Occupancy Status	During Abateme	nt (Check o	nly one)				20 California A	venue					
	d/vacated during						City, State, Zip Code	2				_	
Abatement pe	erformed outside	of normal	facility hou	rs-			-i,j, -iaio, <u>-i,</u> p						
Describe:  Other-Descri	he NORMAL I	IOURS					Paterson, NJ 0	7503					
							1 aterson, No 0	7303					
Scope of Work (ch		у)					L	Full Containment	w/negative	press	ure		
$\ge 3$ sf or $>3$ If	$\boxtimes$	Renovation	on					Mini-enclosure					
≥160 sf or ≥2	260 If	Demolition	n				×	Glovebag procedu					
		le location	n normally	used sole	hul .		L	Non-Exempted (*)	and Non-		_	1	_
Location of asbestos-cor	atainina		enance/cus							R	R	E	E
material (acn		staff(12)			Descripti	on of a	sbestos-containing	Amount	CE or	m	p	n	n
abated in fac		Yes	No	NUA	- material	(ACM)		(Specify S	SF 01	0	a	a	C
		163	140	N/A						v e	i i	р	-
Garage			X		Pipe Insula	tion		30 LF		×	1		
											7	1	+
				#-	1					분		부	12
										1	Ш	Ш	1
	47-11	2.2.2.31											
Registered Waste F			EP Hauler		Cubic Yards of	Waste	Name of Registered		1	' <del>-</del>			
D & S RESTOR	A HON, INC.	135	006		2CY		TULLYTOWN,	RESOURCE RI	ECOVER	Y		- 040000	
City, State		A 20 A		Disposal		S ACCURATE	City, State	THE TOTAL STREET	-				405
PATERSON, N				05/	3/12		TULLYTOWN	, PA					
Completed by (Print		Title			Signature				Date				
BOGDAN JOL		PRESID							4,	/18/12	2		
ASB-41	,	Do not use	e this form	for asbest	tos licensure ex	empted	d activities.						



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

The second secon								2700.0000000000000000000000000000000000		11 111	
Date of Notification (1)					Name of Build FEINBURG&I	ling Owner/Operator (2) WCBURNEY	APR 2	2 4 20	112	$\mathbb{U}$	
	4/4/201	12				10 11	2	- 7 20	12	cens !	
Agencies Notified		Notification	Type		Street Addres 1874 E. MARI		75/13/200			and the same of th	
(X)EPA		( ) Initial N			City, State, Zi	o Code	1 1/25	guivinu NSING	L&	de.	
() DEP		(X) Amend				The same beautiful to the same	The second second	decrease decrease and the same			
(X) DOL			ment #1		CHERRY	HILL, NJ 08003	Sec. 12. 14.	1	ili was koji su	State .	1
(X) DOH				ing justification)	Name of Cont		Tel N				- 5-
( ) DCA		( ) Cancell	ation		STEPHANIE					1. 49 K	* - 2
				FACILITY IN	IFORMATION			-		35.200	
Name of Facility Where Abat	tement is T	aking Place (	(3)	23	Type of Facilit						
cvs					( ) School (K-						
					( ) Subchapte	r 8 (other than K-12)					
Street Address HOOPER RD & DRUM POIN	UT PD				(X) Other (i.e.	private & commercial blo	igs., non	ies, etc.			
	ounty (6)		County C	Code (7)	Sq. Feet	7500 # of	Floors	2	20		
	CEAN		(State U						32		
BRICK			101010	30 0	Bldg. Age						
						prior if being demolished)	V	ACANT_			
Name of Monitoring Firm VERTEX			ASCM N	lo.	Name of Control	ractor (9) ronmental Systems					
Street Address			1	-	Street Address						100
700 TURNER WAY, SUITE 1	105		<u> </u>		550 East Unio	on Street					
City, State, Zip Code ASTON, PA 19014					City State, Zip West Chester						
Project Manager for Monitori	ng Firm	Telephone	Number	11000	Telephone Nu	mber	Licens	e Numb	er		
DON HEIM		610787040	2		610-701-9000		00508				
Scheduled Start Date (10)		Scheduled	Completion	Date (11)	Name of OSH	A Monitor					
4/23/2012		5/11/2012	Completion	I Date (11)	VERTEX	T WOMEN					
Occupancy Status During Ab	atomont (C	Shook only or	101	4	Street Address						
(X) Facility Closed/Vacated D						WAY, SUITE 105					
( ) Abatement Performed Ou					100 TOTALICA	10,11,00112 100					
					City, State, Zir	Code					
Describe					ASTON, PA 1						
Other -											
Source of Work (Check all the	at apply)										
( ) Danielities ( ) Beneve	tion.										
( ) Demolition ( ) Renova (X) Large Proj. (>160 SF or >	TION	MAN /V \ CNA	Droi />25/	160 SE or >10 <	260 LE ACM)	(X) Minor Proj. (<25 SF	= or <10	LEACM	٨		
() Full Containment with Neg	ative Pres	(X) (X) $(X)$	/lini-Fnclos	ure (X) Glov	vehag Procedure		01 < 10	LI ACIVI	,		
Location of Asbestos-		tion Normally		Description of		Amount (Specify SF or	·LF)	Abater	ment Ty	pe	
Containing Material (ACM) in		by Maint./Cu		thermal system	ns insulation,	, (opening of	/	1.1001101			
Facility (13)	Staff?	(12)		surfacing, VAT	, or other						
	YES	NO	NA	miscell.)				Rem.	Rep.	Encap	Enclose
RESTARAUNT BASEMENT			Х	FLUE PACKIN	NG .	7SF		Х	- (1		
RESTARAUNT EXTERIOR			X	STUCCO		1,344SF		X	-		-
RESTAURANT BASEMENT			X	TRANSITE	TION	6SF		X			
RESTAURANT BASEMENT			X	PIPE INSULA		8LF		X			
RESTAURANT COAT RM	1 4	100	X	VAT&MASTIC		48SF		X			
RESTAURANT ROOF			X	DUCT INSULA	ATION	675SF		X			
RENTAL ROOF RENTAL KITCHEN			X	SHINGLES VAT&MASTIC		240SF 325SF		x			
BEER BLDG EXTERIOR		2 2	x	CAULK		58LF		x			
DEEN DEDG EXTERIOR		4	^	O' IOLI							
Name of Reg. Waste Hauler		NJDEP Was	ste Hauler	ID #\	Cubic Yards of	f Waste	Name	of Reg.	Landfill	- V	
NETC /Minan		17235			Approx 400		DEI Im	norial			132
N.E.T.S. / Miners City, State					Approx. 100	Disp. Date	BFI Im		City, Stat	e	50 TESTER
Oity, Otale			4			Disp. Date		=	, old	=	
Hazelton, PA	all lines	3 % 47 (			. 44 - 47	TBD		Ir	mperial,	, PA	
Completed by (Print or Type)		Title			Signature	0.	Date		250	300	9.1
						Val	414710	040			
DEVIN BLOM		Estimator			bh		4/17/20	012	1100		

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

Telephone 609-984-6620

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

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

Date of Notification (1)	4/4/20	12			Name of Bui FEINBURG	Iding Owner/Open	rator (2) DIEG	ElV	E	
Agencies Notified		Notification	Туре	214 1 1 1 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1	Street Addre	ess			- 11	
		1			1874 E. MAF	RLTON PIKE		0 0 0	112	
(X) EPA		(X) Initial I			City, State, Z	Zip Code	II LI AFI	R 2 4 20	116	-
( ) DEP		( ) Amend	ed Notifica ment #	ation		1 11			400	ĺ
(X) DOH				ding justification)		HILL, NJ 0800	3	- CONTO	01.0	
( ) DCA		( ) Cancell		ding justification)	Name of Cor STEPHANIE	RIPA	Lorali	Mimber NTR	JL O	
N				FACILITY II	NFORMATION		A CONTRACTOR OF THE PARTY OF TH	THE STATE OF THE STATE OF	67.15	
Name of Facility Where Abate CVS	ement is I	aking Place	(3)		Type of Facil					m modely
000					( ) School (K	(-12) ter 8 (other than K	( 40)			
Street Address					(X) Other (i.e.	e. private & comm	(-12) ercial bldge bo	mes etc		
HOOPER RD & DRUM POIN	TRD				(N) Other (I.C	. private & commi	ercial blugs., Ilc	offies, etc.		
	ounty (6)		County	Code (7)	Sq. Feet	7500	# of Floors	2		
	CEAN			Jse Only)	1					
BRICK			1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 10		Bldg. Age		_			
					Current Use	(prior if being den	nolished)	VACANT		
Name of Monitoring Firm VERTEX			ASCM I	No.	Name of Con					
						ronmental System	ns			-
Street Address 700 TURNER WAY, SUITE 10	05				Street Address					
City, State, Zip Code	J5				550 East Uni					
ASTON, PA 19014					City State, Zi West Cheste					
Project Manager for Monitoring	a Firm	Telephone	Number		Telephone N		Llian	an Alemahaa		
DON HEIM	4 1 10111	610787040			610-701-9000		0050	nse Number	f .	
					010-701-5000	•	0050	0		
Scheduled Start Date (10)		Scheduled	Completio	n Date (11)	Name of OSH	HA Monitor		A STATE OF THE STA		
4/18/2012		5/11/2012			VERTEX	o tillomioi				
USA B										
cupancy Status During Aba	tement (C	Check only on	ie)	- 12 12	Street Addres					
, Facility Closed/Vacated Du					700 TURNER	WAY, SUITE 10	<u>5</u>			
( ) Abatement Performed Outs	side of No	rmal Facility	Hours -							
Describe			1		City, State, Zi					
Other -					ASTON, PA 1	9014				
Source of Work (Check all that	annha		-		L					
Source of Work (Check all that	apply)									
( ) Demolition ( ) Renovation	on			-						
(X) Large Proj. (>160 SF or >2	60 LF AC	M) (X ) SM F	Proj. (>25<	<160 SF or >10 <	260 LF ACM)	(X) Minor Proj.	(<25 SF or <10	) LE ACM)		
() Full Containment with Negati	tive Press	sure (X) N	lini-Enclos	sure (X) Glov	vebag Procedure		( 20 0, 0, 10	. L. 7.0,		
Location of Asbestos-	Is Loca	tion Normally	Used	Description of	ACM (i.e.	Amount (Speci	fy SF or LF)	Abatemen	t Type	
Containing Material (ACM) in	Solely h	by Maint./Cus	todial	thermal systen			s •section constitution of the			
Facility (13)		12)		surfacing, VAT	, or other	9.0			100	12 10
DESTABALINT DASEMENT	YES	NO	NA -		0			Rem. Re	p. Encar	o Enclose
RESTARAUNT BASEMENT RESTARAUNT EXTERIOR		-	X	STUCCO	IG .	7SF		X		
RESTAURANT BASEMENT		-	X	TRANSITE		1,344SF		X		
RESTAURANT BASEMENT			x	PIPE INSULAT	TION	6SF 8LF		X		
RESTAURANT COAT RM			X	VAT&MASTIC		48SF		X		
RESTAURANT ROOF	111		X	DUCT INSULA		675SF		x		
RENTAL ROOF			X	SHINGLES		240SF		x		
RENTAL KITCHEN		1	X	VAT&MASTIC		325SF		x		
BEER BLDG EXTERIOR			X	CAULK		58LF		x		
			-	Mark to the grant	1 1 1					
Name of Reg. Waste Hauler		NJDEP Was	te Hauler I	ID #\	Cubic Yards of	f Waste	Name	of Reg. Land	dfill	
	89.0	17235			April Const.	100				
N.E.T.S. / Miners					Approx. 100	20,420,30	BFI Im			
City, State						Disp	. Date	City,	State	Access of the control of
Hazalton DA						TDD				
Hazelton, PA Completed by (Print or Type)		Title			Signalure	TBD		Imper	rial, PA	
Completed by (Fillit of Type)		TILIC			3 Iqualure	//	<u>Date</u>			
EVIN BLOM		Estimator			Dr:	DI	4/4/20	12		

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

Telephone 609-984-6620

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Job #: 1204-1638 Check #: 2659

		Name	of Buildi	ng Owr	ner / Operator (2)	1666		_		
te of Notification (1)		New -	Jersey	Depar	tment of Trans	ortation				
19/12	differentian.	Street	Address				e 4 0010			
CHOICE	tification	P.O. E	30x 600	)		LI APR	2 4 2012	Format P		V - 1 - 2
⊠ EPA	nitial	City, S	state & Z	ip Code	e					
I DEL I DE	Amended	Trent	on, NJ	08625			S CONTROL &	Telephone	Numl	oer
		Name	of Cont	act		ASBESIC	CEASING	reichitotio	7	
	Emergency Cancellation		aul Ko			والمنطوع والمناوي والمناسبة والمتاهد المستطوع والمتاهد	1			
□ DCA □ □ ¹	Cancellation	( CT 272 ( CC			DESATION	a and and the fifth of the con-	pay as a server			
			CILITY	INFO	Type of Facility (					
ame of Facility Where Aba	atement is Taking Pla	ace (3)			School (K-12	2)				
urniture Store					目	o (Othor than	K-12)			
treet Address					Other (i.e. n	rivate & comn	nercial buildin	ngs, homes	, etc.	)
loute 130 & 30					Other (i.e. p	# of Floor	s	Bldg. Age		
oute 130 & 30					Square Feet	Section 1		1930's		
	County (6)	County	Code (7	)	Approx. 5,000	2		1000		
ity (5)	Camden				Current Use (Pri	or if being de	molisileu)			
collingswood	Camden				Vacant		-			
		(0)	IASCI	M No.	Name of Abaten	nent Contract	or (9)			i i
Name of Monitoring Firm H	lired by Building Own	ier (8)	ASCI	VI IVO.	Asbestos and	Mold Servi	ces, Corp.			
lorizon Environmenta	l			785-024//	Street Address		200			
Street Address					3859 Sylon B	vd.				
PO Box 316			- 13		City, State & Zip	Code				
City, State & Zip Code					Hainesport, N	J 08036				
Thorofare, NJ 08086					Telephone Num	ber	License	Number		
Project Manager for Monit	oring Firm	Telephon	e Numb	ег	609-702-0400	· · · · · · · · · · · · · · · · · · ·		00862		_
Dave or Steve Flaniga	n	856-848			Name of OSHA	Monitor				
Scheduled Start Date (10)	Scheduled Co	mpletion D	ate (11)		EMSL Analyt	ical				
=10140	5/4/12				ENISL Allary	ioui	7.			
	Abatement (Check of	only one)		2	Street Address 107 Haddon	Λνο			561333	
Egoility Closed/V2	icated Duning Linus	01.00	bateme	nt	107 Haddolf	n Code				
Facility Closed/Va	med Outside of Norn	nal Hours			City, State & Zi	p Code				
	71104				Westmont, N	7 08100				
Describe: Isolated Area					1					
City I (Check of	I that annly)					7 Full Cor	stainment with	n Negative	Pres	sure
Scope of Work (Check al	I that apply)						ntainment with	n Negative	Pres	sure
Scope of Work (Check al	I that apply)		Renovati	on		Negativ	e Pressure E	nclosure	Press	sure
Scope of Work (Check al	I that apply)		Renovation		]	Negativ Glove B	e Pressure E	nclosure es		
Scope of Work (Check al	I that apply)	3.00			]	Negativ	e Pressure E ag Procedure empted and N	nclosure es Non-Friable	Proc	cedu
Scope of Work (Check al  ≥3 sf or ≥3 lf  ≥160 sf ≥260 lf			emolitic		Description	Negativ Glove B Non-Ex of	e Pressure E ag Procedure empted and N Amoun	nclosure es Non-Friable t Aba		cedu
Scope of Work (Check al  ≥3 sf or ≥3 lf  ≥160 sf ≥260 lf	on of	Is Lo	emolition cation	on T	Description Asbestos-Cont	Negativ Glove B Non-Ex of aining	e Pressure E ag Procedure empted and N Amoun (Specifi	nclosure es Non-Friable t Aba	Proc	ent T
Scope of Work (Check al  ≥3 sf or ≥3 lf  ≥160 sf ≥260 lf  Location  Asbestos-C	on of ontaining	Is Lo	Demolition cation	on T	Description Asbestos-Cont	Negativ Glove E Non-Ex of aining M)	e Pressure E ag Procedure empted and N Amoun	nclosure es Non-Friable t Aba y	Prod	ent T
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Scope of Work (Check al    ≥3 sf or ≥3 lf   ≥160 sf ≥260 lf    Location   Asbestos-C   Material   TO BE Al   in Face	on of ontaining (ACM) BATED sility	Is Lor Normal Sole Mainter Custod	cation lly Used ely by nance or ial Staff	on P	Description Asbestos-Cont Material (AC	Negativ Glove B Non-Ex of aining M) stems ing, VAT	e Pressure E ag Procedure empted and N Amoun (Specifi	nclosure es Non-Friable t Aba y	Prod	cedu
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Scope of Work (Check al    ≥3 sf or ≥3 lf   ≥160 sf ≥260 lf    Location   Asbestos-C   Material   TO BE Al   in Face	on of ontaining (ACM) BATED sility	Is Loc Normal Sole Mainter Custod	cation lly Used ely by nance or ial Staff? 12)	Gray	Description Asbestos-Conte Material (AC (i.e., thermal sy insulation, surfac or other miscella	Negativ Glove E Non-Ex of aining M) stems ing, VAT aneous)	e Pressure E ag Procedure empted and N Amoun (Specif SF or Li	nclosure es Non-Friable t Aba y F) Removal	Prod	ent T
Scope of Work (Check al    ≥3 sf or ≥3 lf   ≥160 sf ≥260 lf    Location     Asbestos-C     Material     TO BE Al     in Fac     (13	on of ontaining (ACM) BATED sility	Is Loc Normal Sole Mainter Custod	cation lly Used ely by nance or ial Staff 12) No N/A	Gray	Description Asbestos-Conte Material (AC (i.e., thermal sy insulation, surfac or other miscella	Negativ Glove E Non-Ex of aining M) stems ing, VAT aneous)	e Pressure E lag Procedure empted and N Amoun (Specifi SF or Li	nclosure es Non-Friable t Aba y F) Removal	Prod	ent T
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Job #: 1204-1637 Check #: 2657

Date of Notification	(1)			Nam	e of B	Building	Owner / Operat	or (2	Company and the Company of	Kada kilaba 🕶 👵	Or - transaction		2000 miles	
3/23/12 Agencies Notified	Type Notific	action		Jew	ish K et Ado	tenaiss	sance CDC	120 1 12		The street of the second	Minutes a	**		
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				FA	CILI	TY INF	ORMATION	$\pm$			1	į.	-	
Name of Facility Wh		ent is Taking P	lace (	3)			Type of Fac	ility (4	4)SBESTOS CO	NTROL &				
Residential Prop	erty						School		Commence of the Party of the Pa	<u> </u>	-			
Street Address								*	8 (Other tha	Section 1997				
298 Sutton Stree	τ						Square Feet		# of Floo	mercial build	All the second second		etc.)	
City (5)		County (6)	TC	Nunty.	Code	(7)	1548	L	2	)IS	Bldg. A	ge		
Perth Amboy		Middlesex	100	Julity	Code	(1)	Current Use	(Pric		amoliched)	92			
reitii Ailiboy		Middlesex					Residentia			emonsneu)				
Name of Monitoring	Firm Hired	by Building Own	er (8)	1	TAS	CM No				tor (9)	-			
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Street Address						10	Street Addre			,p		-		
16 West Elizabet							3859 Sylor							
City, State & Zip Co	y, State & Zip Code nden, NJ 07036						City, State &							
	nden, NJ 07036 nject Manager for Monitoring Firm						Hainespor			Tr				
	oject Manager for Monitoring Firm						Telephone N 609-702-04		er	License	Number 008			
Scheduled Start Dat	te (10)	Scheduled Con			4301	1)	Name of OS		lonitor		000	04		
5/3/12		5/3/12		-,, -,	(	.,	EMSL Ana							
	5/3/12  Decupancy Status During Abatement (Check onl  Facility Closed/Vacated During Entire Pe  Abatement Performed Outside of Normal					ent	Street Addre 107 Haddo City, State & Westmont	n Av	Code					
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	erial (ACM) E ABATED			olely	by ice or		Material (A (i.e., thermal s		me	SF or LF	)   Z	77	Encapsula	ᄪ
	Facility				Staff?		nsulation, surfa				Remova	Repair	aps	Enclsoure
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Name of Registered	Waste Hau	er	Ш		DEP		Cubic Yards	Nar	me of Regis	tered Landfil				
Horizon Disposal				П	226		of Waste 5	GR	ows					
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Trenton, NJ	0 05 th					â.LF	5/4/12		rrisville, F	A				
Completed By (Print Kim Trumbetti			A 2 Pm	Tit A	le d <b>mi</b> i	n.	Signature	_			Date 4/19	/12		

MD 19815486006 Paragon Job#

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

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Date of Notification (1)	Nar	me of Build	ing Owne	er/Operator (2)		Inis		15 11	111			
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Agencies Notified Type Notification		et Address					PR 2 4 201	2 11.	111			
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☐ Amendme	- 11	, State, Zip			-				1			
DOL Amendment# _		Clifton, N.				A.	DESTON CONTRACT	<u> </u>	i			
DOH Emergency (ir		ne of Conta				F	Telephor	e Number	-			
justification)  DCA Cancellati	on    ,	/ . II . E'-				figure	and the second	-	7			
Cancellati	on <u>II I</u>	Celly Fitz				*****		-				
			FACI	LITY INFORM	ATION	· · · · · · · · · · · · · · · · · · ·	T	(4)				
Name of facility where abatement is t	aking place	∋ (3)					Type of Facility	4) I (K - 12)				
Styretown Shopping Center (Ur	it # 6)						☐ Subch	apter 8 (O	ther t	han K	-12)	
Street Address							Other	(Private/C	omme			
202101 C.114		13						Homes, e		- 5	-l A	
1051-Bloomfield Ave.	County	/6\				. 0 1 7		# of Floor 03	S	60	dg. A	ge
City (5)	County	(0)		477		nty Code (7) e use only)	Current Use (P		a don		24/	
Clitton, NJ 07014	Passa	ic			(Otal	5 d55 5////	Shopping Cer		y uen	1011511	eu)	
Name of Monitoring Firm Hired by Bl		76.5	1	ASCM No.		Name of Abatement C						
NΛ	3		- 1			Paragon Contracti	no Inc					
Street Address						Street Address	ng, me.			_		
Sheet Fiburess						590 River Rd.						
City, State, Zip Code						City, State, Zip Code		-	-	Managaran		
						Clifton, NJ 07014	1					
Project Manager for Monitoring Firm		Pho	ne Numb	er		Telephone Number		License	Numb	er		
		The strength				(973) 614-1600		00748				
Scheduled Start Date (10)	ISchool (	Completion	Date (11	<del></del>		Name of OSHA Monitor	or					
Scheduled Start Date (10)	Ochea.	Joinpletion	Date (1	,		Paragon Contract	ing, Inc.					
05 04/2012	05/07/2					Street Address						
Occupancy Status During Abatement	•					590 River Rd.						
☐ Facility closed/vacated during e     ☐ Abatement performed outside o     Describe:						City, State, Zip Code						20
Other-Describe:	1					Clifton, NJ 07014	ļ- <u></u>	223				
Scope of Work (check all that apply)												
Demolition	Renovation				⊠ F	ull Containment w/nega	ative pressure	Glove	ag pr	ocedi	ıre	
☐ >3 sf or >3 lf         ≥	160 sf or ≥2	260 If			· П м	lini-enclosure	⊠ Non-Exen	npted ( " )	Non-f	riable	proce	dure
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material to be	staff(12)			material		become containing	(Specify S	SF or	m o	a	c a	c
abated in facility (13)	Yes	No	N/A				LF)		v e	i .	p	L
Unit = 6			X	VAT			2,510 SF		X			
				SPECIAL STREET, SPECIAL STREET								
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Registered Waste Hauler		Hauler ID	# C	ubic Yards of \	Vaste	Name of Registered I		J - 7.7.			1	
Paragon Contracting, Inc.	2216			5 cyds		Tullytown/GROW	/S .					
City State Clifton, NJ 07014			isposal D TBD	ate		City, State Tullytown, PA						
	Γitle			Signature	10			Date				
	President			7	/	No.		04/20/	2012	W		

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60-7 and 12:120-7) 2012-69 Check # B & G proj. #: Date of Notification (1) Name of Building Owner/Operator (2) 10 |4 |/|2 |0 |/|1 |2 | Edmund Reed Type Notification Agencies Notified Street Address ☐ EPA 160 Hollywood Avenue Initial DEP City, State, Zip Code Amendment DOL Orange, NJ 07050 Telephone Number Name of Contact DOH. LICEN Cancellation DCA Edmund Reed FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) Edmund Reed Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors 160 Hollywood Avenue County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) residential Orange, NJ 07050 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 4/30/2012 4/30/2012 105 Ryerson Road Occupancy Status During Abatement (Check only one) City, State, Zip Code ▼ Facility closed/vacated during entire period of abatement. 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 Renovation Demolition Non-friable procedure Mini-enclosure >160 sf or ≥260 lf  $\times$  >3 sf or >3 lf E E Is location normally used solely е e n Location of Amount by maintenance/custodial n Description of asbestos-containing m C (Specify SF or asbestos-containing staff(12) 0 a material (ACM) a material to be LF) V abated in facility (13) N/A No Yes X 54 lf pipe insulation basement Name of Registered Landfill Cubic Yards of Waste Registered Waste Hauler NJDEP Hauler ID# Tullytown Resource & Recovery Center 19563 1 yard B & G Restoration, Inc. Disposal Date City, State City, State Tullytown, PA 5/1/2012 Lincoln Park, NJ 07035 Date Signature Cordana Luna Completed by (Print or Type) Title 4/20/2012 Treasurer

Gordana Luna

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

2012-67 B & G proj. #: Name of Building Owner/Operator (2) Date of Notification (1) 0 4 1/12 0 / 1 2 Monique & James Jean-Pierre Type Notification Agencies Notified Street Address ☐ EPA 450 N Ridgewood Road X Initial DEP City, State, Zip Code Amendment DOL South Orange, NJ 07079 Telephone Number Name of Contact DOH. LICENS Cancellation James Jean-Pierre ☐ 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) Monique & James Jean-Pierre Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors 450 N Ridgewood Road County Code (7) County (6) Current Use (Prior if being demolished) (State use only) residential South Orange, NJ 07079 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 Project Manager for Monitoring Firm Phone Number 0378 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. Street Address 5/1/2012 5/1/2012 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-Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Glovebag procedure Full Containment w/negative pressure ☐ Demolition X Renovation Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf >3 sf or >3 If Ε Is location normally used solely n Location of by maintenance/custodial Amount n Description of asbestos-containing m p C asbestos-containing (Specify SF or staff(12) material to be material (ACM) а p abated in facility (13) Yes No N/A X 15 lf pipe insulation basement Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler Tullytown Resource & Recovery Center 19563 1/2 yard B & G Restoration, Inc. Disposal Date City, State City, State Tullytown, PA 5/2/12 Lincoln Park, NJ 07035 Date Signature Gordana Luna Title Completed by (Print or Type) 4/20/2012

Gordana Luna

Treasurer

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

2012-80 B & G proj. #: Date of Notification (1) Name of Building Owner/Operator (2) 0 4 / 2 0 / 1 2 Richard Rufener Street Address Agencies Notified _ EPA 104 Lake Drive Initial DEP City, State, Zip Code Amendment DOL Mountain Lakes, NJ 07046 Telephone Number Name of Contact ASBESTOS CONTR DOH LICENSING Cancellation Richard Rufener ☐ 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) Richard Rufener Other (Private/Commercial Bldgs./Homes, etc. Street Address Bldg. Age # of Floors Square Feet 104 Lake Drive County Code (7) County (6) Current Use (Prior if being demolished) (State use only) residential Morris Mountain Lakes, NJ 07046 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 5/2/2012 5/2/2012 105 Ryerson Road Occupancy Status During Abatement (Check only one) ☑ Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Lincoln Park, NJ 07035 Describe: Other-Describe: Scope of Work (check all that apply) ☐ Full Containment w/negative pressure Glovebag procedure Renovation Demolition Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf  $\boxtimes$  >3 sf or >3 lf E is location normally used solely E n Location of Amount by maintenance/custodial m Description of asbestos-containing p C (Specify SF or asbestos-containing C staff(12) 0 a material (ACM) material to be p abated in facility (13) N/A Yes No × 72 sf VAT/Mastic ground floor Name of Registered Landfill Cubic Yards of Waste Registered Waste Hauler NJDEP Hauler ID# Tullytown Resource & Recovery Center 1 1/2 yards 19563 B & G Restoration, Inc. City, State Disposal Date City, State Tullytown, PA 5/3/12 Lincoln Park, NJ 07035

Signature

Completed by (Print or Type)

Gordana Luna

Title

Treasurer

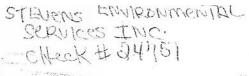
Cordana Luna

Date

4/20/2012



Date of Notification (1) 04/19/2012	)	-			Building Owr d B.O.E.	ner/Operator (2	NEG	EIVE	n			
Agencies Notified	Type Notification		- 1	Street Add	dress t Landis A	lve	Phylips	0.4.0000				
DEP DOL	Amended Amendment Emergency (				e, Zip Code d , NJ 083	360	J L APR	2 4 2012				
DOH DCA	justification)  Cancellation		- 9	Name of 0 Paul Fa	Contact rinaccio	Ĺ	ASBEST LI		ber			
Name of English Miles	re Abatement is Takin	n Diago (2)		FACIL	ITY INFORM		Type of Facility (	Management and the second	NAME OF TAXABLE PARTY.			-
South Vineland S Street Address		y riace (5)			-		School (K-1 Subchapter	2) 8 (Other than K-12				12
2831 S.E. Boulev	ard ard						Other (i.e. p	rivate & commercia	al build	ings,	nome	s,
City (5) Vineland							Square Feet	# of Floors	Bl	dg. A	ge	
County (6) Cumberland				County C STATE U	ode (7) SE ONLY)		Current Use (Prid Vacant	or if being demolish	ed)		•.	
Name of Monitoring F Epic Environmen	irm Hired by Building Ital Services	Owner (8)		ASCM	No.	3.174 (0.00)	f Abatement Cor Company Inc					
Street Address 1930 Brown Rd					1		ddress iaget Ave.					
City, State, Zip Code Newfield NJ 0834	44						ate, Zip Code n NJ 07011					
Project Manager for M Jim Eberts	Aonitoring Firm			Telephon 856-20		Telepho 973-3	one No. 65-4086	License N 0704	0.			-
Start Date (10) 04/30/2012		Scheduled 05/03/2		npletion D	Date (11)		of OSHA Monitor as above					
	uring Abatement (Che			-		Street A	Address					
	/acated During Entire ormed Outside of Non e:					City, St	ate, Zip Code					
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(a) (b)	•.	le	Locat	ion						Abat	emen	t
Loca	ation of	N	orma	lly		Description	of			Ty	/pe	
Asbestos-Contain TO BE In F						s Containing M sermal systems surfacing, VA other miscellan	laterial (ACM) insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
1st	Floor	Yes	No	N/A X		VAT		688 SF	x		-	-
	Boiler Room					Boiler pack	ding	15 SF	x			T
									-	-	-	+
Name of Registered	Waste Hauler	لــــــــــــــــــــــــــــــــــــــ	Ti	NJDEP W	/aste	Cubic Yards	Name o	f Registered Landfi	1		1	1
Newark Carting			Hauler ID 05409	No.	of Waste	GROV	VS					
City, State Newark NJ						Disposal Date		ite ville, PA				- 1
Completed by Voytek Roszkow	ski	Title Presi	dent			Signature	Dako	1	ate 4/19/	2012	2	



Date of Notification (1) 4/19	0/12			Nan	ne of Buildir	g Owner/Operati Jacobus P	or (2) harmaceutical	Company, I	nc.[]	1//	R	
	Type Notification	n		Stre	et Address		P.O. Box 52	90	-	19	15	
DEP DEP	Amended Amendment		_	City,	State, Zip		Princeton, NJ (	LI APR	24	2012		IU)
DOH DCA	Emergency ( justification) Cancellation		ig	Nam	ne of Contac		- 1	Telephone Nur	mber		2	,
				FA		ORMATION	Shipping Shipping	10.00	OING.			=
Name of Facility Where Aba							Type of Facility	(4)	NE VE			apanin
Jacobi	us Pharmac	eutica	al Co	mpai	ny Inc.		School (K-1	8 (Other than K-	12)			
	31 Schalks	Cros	sing	Road	l		Other (i.e., phomes, etc.	orivate & commer )	cial bui	lding:	5,	
City (5)	DI.	1					Square Feet	# of Floors	E	lldg. /	Age	
County (6)	Pla	insbo	ro	I Cor	unty Code (	7) (STATE	Current Use (P	rior if being demo	lished)			_
Midd	lesex	D.			E ONLY)	() (0)///2	- Canoni Goo (i	research la				
Name of Monitoring Firm Hi		Owner		ASCN	I No.		ment Contractor (9					
(8) M	ECS					Street Address	vens Environi	nental Service	ces, I	nc.		_
1 337 M	P.O. Box 34	41				Street Address		30x 322				
City, State, Zip Code						City, State, Zip	Code					
	swicks,NJ	0851.				T-I N-	Allentow	n, NJ 08501				
Project Manager for Monitor William Weis			1	ephone 19) 29	98-4070	Telephone No. (609) 2	59-9688	License No.	0049	3		
Start Date (10)		duled (			ate (11)	Name of OSHA		1	0015			
4/30/12			5/4/	2				ECS				
Occupancy Status During A  Facility Closed/Vacated I				ment		Street Address		30x 341				
☐ Abatement Performed On  ☐ Other - Describe: 7A	utside of Norma	al Facili				City, State, Zip	Code	s, NJ 08515				
Scope of Work (Check all th ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	at apply)		enovat			☐ Mini-Er ☑ Gloveb	ontainment with Neonclosure lag Procedure kempted (*) and No		ıre			
	Special Control of the Control of th	- N	Locatio						P	bate Typ		
Location of Asbestos-Containing Mate TO BE ABATED IN Facility (13)	rial (ACM)	Mair Cr	Solely ntenan ustodia Staff? (12)	ce/		Description of os Containing Ma thermal systems surfacing, VAT other miscellane	insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							(D	
outside storage bu			×		pipe insulat		130 LF	×				
2nd floor Mech.Rm-N			X		pipe insulat	ion	110 LF	×		-		
									+-1	$\dashv$		
Name of Registered Waste H	lauler			JDEP \		Cubic Yards	Name of Regis	tered Landfill			* 1	
Stevens Environmen	Stevens Environmental Services Inc.					of Waste 2 CU		R.R. F. Lan	dfill.			
City, State	IJ		182		Disposal Date 5/4/12	City, State	Tullytown,	PA				
Completed By Mahlon E. Steven	Title		oject	Man	ager	Signature		Date	4/19	/12		

Noched

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

1204-4465 Check #4020

Date of Notification						Owner / Operato	or (2	) - 1,2 1, 24,6	CONTRACTOR OF THE STATE OF THE	g vita			
1 11 22	4/18/12					y University	-		9 F 1 V/	FI	1		
Agencies Notified EPA	Type Notification			t Addı		Daulayard			a La 1 V				
DEP	☐ Initial				& Zip (	Boulevard Code							
□ DOL	Amended #1					07305		III III A	PR 2 4 2012	2	11		
□ DOH	Emergency				ontact		i			elepho	ne N	lumb	er
☐ DCA	☐ Cancellation	A	۱ndr	ew C	hrist			<u> </u>	THE PARTY OF THE PARTY OF THE PARTY.				
			FΔ	CILIT	Y INF	ORMATION	î (	A.S.	LICENSINS	#		4	
Name of Facility W	here Abatement is Taking I	Place (3		OILII	1 1141	Type of Facil	lity (2	1)	PROVINCE OF THEIR	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO PERSON NAMED IN COLUMN TO ADDRESS OF THE PERSON NAMED IN COLU	America		-
NJ City Universi			<b>.</b>			School (			er i verd av begatese anerensisie e			1	
Street Address								3 (Other than					16
2039 Kennedy B	oulevard			1.0		The same of the sa	-		mercial building			etc.)	
- (5)	10	- 1-				Square Feet		# of Floo	rs B	ldg. Ag	е		
City (5)	County (6)	Cor	unty (	Code	(7)								
Jersey City	Hudson					Current Use	(Prio	or if being de	molished)				
N	Fig. 11 D. J. F. O.	(0)		TAG	2111	University							
McCabe Environ	Firm Hired by Building Ow	mer (8)		ASC	CM No	. Name of Aba AbateTech			or (9)			6.	
Street Address	Illelitai	-				Street Addres		•				-	
464 Valley Brook	Ave.					PO Box 25							
City, State & Zip Co	ode					City, State &		Code					
Lyndhurst, NJ 07				1.5		Lumberton			. 14				
Project Manager for	r Monitoring Firm	Telepl			ber	Telephone N		er	License No				
Jim Ruff Scheduled Start Da	te (10) Scheduled Co	201-4	200000000000000000000000000000000000000	10.000	`	609-265-21	7000 (000 (00)			0052	29		
5/15/12		5/25/		te (11	)	Name of OSI EMSL Anal							
	During Abatement (Check of					Street Addres	-	uı					
Facility Clos	sed/Vacated During Entire	Period o	f Aba	ateme	ent	108 Haddor		e.					
The second secon	Performed Outside of Norn	nal Hou	rs			City, State &	Zip (	Code					-
Describe:						Westmont,	NJ	08108					
The second secon	upied During Abatement					SE		7					
Scope of Work (Ch	eck all that apply)							Full Contr	ainment with Ne	aativo	Droc	our	
☐ ≥3 sf or ≥3 l	f	$\square$	Ren	ovatio	on		H	Mini-Encl		gative	1168	sourc	
≥160 sf ≥26		Ħ		nolitio			H		Procedures				
_							$\boxtimes$		npted and Non-	Friable	Pro	cedu	ire
	ocation of		ocati			Description				Aba	atem	ent T	уре
	tos-Containing	Norm				Asbestos-Con		ng	(Specify			_	
	erial (ACM) BE ABATED	Mainte	lely benan			Material (At (i.e., thermal s		ms	SF or LF)	R	ת	Encapsulate	Enclosure
	n Facility	Custo	dial S			insulation, surfac	cing,	VAT		Remova	Repai	apsu	clos
4	(13)		(12)	1 1/4		or other miscell	anec	ous)	25	/a	=	ılate	ure .
			No	N/A									_
Rossey Hall (7) E			<u>H</u>	Н		Floor tile & N	2012000		300 SF total				H
Science Building	(6) Bathrooms		H	ዙ		Floor tile & N	Viasi	tic	564 SF total		H	片	H
		H	H	H	-		555-			廾쒸	H	님	H
		<del>                                      </del>	H	H				F . 1757		H	H	H	H
		HH	H	Н			-			H	H	H	H
Name of Registered	Waste Hauler	101	NJ	DEP \	Naste	Cubic Yards	Nar	me of Regist	ered Landfill				
			На	uler I		of Waste							
AbateTech, Inc.		100		1875	50	12		RF Landfil					
City, State Lumberton, NJ						Disposal Date		, State	b a				
Completed By (Print	or Tuno)		Tial	_		5/25/12	ıuı	llytown, PA		D-1:		14	
Gwen Trumbe			Titl	e fice		Signature				Date	140		
Owen Humbe	Lu ·			ord.	7.2	( ).	1 1			4/18	112		
			100	oi u.		V	V						

### State of New Jersey 1203-4461 Su NOTIFICATION OF ASBESTOS ABATEMENT Check #3945 (Pursuant to N.J.A.C. 8:60 and 12:120)

1203-4461 Sub 8

Date of Notification	ate of Notification (1) 4/17/12							Operator			an e e e					
Agencies Notified	Type Notifica	ation				dress	пр воаг	u oi Euu			F 11	17 6	STATION	)		
EPA	Type Nothice	ation				orris A	ve.			EC	E	W E				
□ DEP	☐ Initia	ıl	-			e & Zip		· ·	174		Control Control					
DOL		nded #1				NJ 070		ŧ.								
	☐ Emer	rgency				Contact	- 24	1	L. Li	APR	242	012 11	elepho	ne N	umbe	er
<ul><li>DOH</li><li>DCA</li></ul>		ellation		Tom	Wi	iggins		1	İ							
				FA	CI	LITY II	IFORMA	TION		ASSES	os garage	1		5-7-000	-	
Name of Facility Wh	ere Abatemer	nt is Taking Place	(3)				Тур	e of Facili	ity (4)	No. of the second	ENSING		1			
Central Five Jeffe	rson School	l- Building #2				no 2000	$\Box\Box$	School (I	K-12).	- marin labbungs	S.G. and S. C.	er itterspræmer, meljer				
Street Address								Subchap	ter 8 (0	Other tha	n K-12)			4		
155 Hilton Avenu	16								e. priva	te & com					.)	
		Ta zas					Squ	are Feet		# of Flo	ors	Ble	dg. Age	9		
City (5)		County (6)	Co	unty C	od	e (7)				1						
Union		Union						rent Use (	Prior i	f being de	emolished	1)				
			(0)					ool	2130071-100		(0)					
Name of Monitoring		y Building Owne	r (8)		P	ASCM N		ne of Abat		Contract	or (9)					
Omega Environm Street Address	lentai			***				et Addres							-	
280 Huyler Stree	+							Maple A								
City, State & Zip Cod								, State & Z		le .						
South Hackensac								nberton								
	ect Manager for Monitoring Firm							phone Nu		, , , ,	Lic	ense Nu	mber	- 1		
Geiser Fajardo	ser Fajardo							9-265-21					0052	29		
Scheduled Start Date	eduled Start Date (10) Scheduled Comp						Nan	ne of OSH	A Moni	itor						
4/16/1			4/27	/12				SL Analy						i le i		
Occupancy Status D				<u> </u>	_			et Addres								
		uring Entire Per			em	ent		Haddoi								
		tside of Normal						, State & Z								
Describe:	4/17 & 4/1 11:30 PM t	18 7AM-3:30,	Dout	oie sn	HIT	s, /AIVI	- we	stmont,	NJ UB.	108						
Facility Occ	upied During															
Scope of Work (Che																
	-	0 0	-						$\boxtimes$	Full Con	tainment	with Neg	gative	Press	ure	
≥3 sf or ≥3 l	f		$\boxtimes$	Ren	iova	ation				Mini-En						
≥160 sf ≥26	0 lf			Den	noli	ition					ag Proced					
	- 11								Ц_	Non-Exe	empted a		-			
				Locati				escription estos-Cont				ount	Ab	atem	ent T	ype
				mally olely l		ea		aterial (A				ecify or LF)				
				itenan		or		thermal s		:	5. 0	1 11 )	Re	20	nca	Enc
				odial S		230000		ion, surfa					Removal	Repair	Encapsulate	Enclosure
				(12)	T		or oth	er miscell	laneou	s)	1.4		<u>a</u>	7	late	ıre
	P = P		Yes	No	N	/A						10.7				
First Floor			<u>H</u>		ĮĻ	4		Weight C				76 SF		Н	H	H
Second Floor			H		+-		Light	Weight C	oncre	te	1,10	)8 SF		H	무	H
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Name of Registered	Ш	NII	DEI	 P Waste	Cubic	Yards of	Name	e of Regis	tered I a	dfill		ш	Ш	ш		
ivallie of Registered				r ID No.	Waste		Ivaille	e of Regis	itereu Lai	idili						
AbateTech, Inc.						8750	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12	TRR	F Landfi	ill				5	
City, State					65	5.00		al Date	City,	State						
umberton, NJ						7		27/12	Tull	ytown, F	PA					
Completed By (Print	mpleted By (Print or Type)				le	VSTIVESC=1	Signat	ure	~^	214			Date			
<b>Gwen Trumbe</b>	tti			Op	ps.	Coord		(	1	VV			4/1	7/1	2	
				-					1 7							

1203-4455 Check #4021

Date of Notification	(1)		1	lame	of B	uildina	Owner / Operato	r (2) (3) (E)	WED				
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Name of Facility Wh	acro Abatama	ent is Taking Di	200 (3		CILI	I Y INF	ORMATION Type of Facil		* Victoria de de Carrero				
PSE&G Exterior	iere Abaterri	ent is raking Fi	ace (S	)			School (						
Street Address					10		Subchap	oter 8 (Other tha	n K-12)				
Devlin Ave. & We	est Broad S	treet							mercial buildings			tc.)	
		•	-			<u> </u>	Square Feet	# of Floo	ors Bld	g. Ag	е		
City (5)		County (6)	Co	unty (	Code	(7)		(5) (1)	F 1 - N				
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Name of Monitoring Health & Safety S		y Building Own	ei (o)		AS	CIVI INO.	AbateTech		101 (9)				
Street Address		******				11 11 11	Street Addres			4-			
318 12 th Street							PO Box 25						
City, State & Zip Co	ty, State & Zip Code ammonton, NJ 08037						City, State & Lumberton						
	ammonton, NJ 08037 roject Manager for Monitoring Firm Te						Telephone N		License Nur	nber	-		
James Proctor							609-265-21			0052	9		
Scheduled Start Da 5/14/12	000000000000000000000000000000000000000	Scheduled Con	pletic		te (11	1)	Name of OSI EMSL Anal						
Occupancy Status I		ment (Check or					Street Address						
		During Entire Po			atem	ent	108 Haddoi						
Abatement	Performed O	utside of Norma	al Hou	ırs			City, State &						
Describe:	0.02						Westmont,	NJ 08108					
	upied During												
Scope of Work (Che	eck all that ap	ppiy)						☐ Full Con	tainment with Neg	ative	Pres	sure	:
≥3 sf or ≥3 l	f		$\boxtimes$	Rer	ovat	ion		Mini-End	closure				
≥160 sf ≥26	0 If			Der	noliti	on			ag Procedures		200	823	
						-	5	Vand .	empted and Non-F Amount		e Pro		
	ocation of tos-Containin	a		Locat			Description Asbestos-Con		(Specify	Aba	lem	ent i	ype
Mat	erial (ACM)	9	S	olely	by		Material (A	CM)	SF or LF)	70		Ē	ш
	BE ABATED	7 7	Main				(i.e., thermal s insulation, surface			Remova	Repair	cap	nclo
	n Facility (13)		Cusio	(12)	Stail:		or other miscell			oval	a:	Encapsulate	Enclosure
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Exterior						E	cterior Transit	e Conduit	1,500 LF	$\boxtimes$			
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			Ш	Н	Щ					H	H	H	H
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Name of Registered	ł Waste Haul	er		N.	IDEP	Waste	Cubic Yards	Name of Regi	stered Landfill	111	Ш	Ш	Ш
		10000		ID No.	of Waste 950	TRRF Landf							
AbateTech, Inc. City, State					101	30	Disposal Date	City, State					
Lumberton, NJ							6/8/12	Tullytown, F	PA				
Completed By (Print or Type)							Signature	a ·		Date			
Gwen Trumbe	tti	5 4		Of	fice (	Coord.	Cru	X .	4- ¹⁰ 11	4/20	/12		

1204-4473 Check #4022

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Caricellation		Jack		227/20		499	. 4	-			
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112 Eisenhower Parkway							ommercial building			etc.)	
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Name of Monitoring Firm Hired by Building Ov	vner (8	)	AS	SCM No		atement Contra	actor (9)				
Health & Safety Services Street Address	400000	and Fin			AbateTech Street Addre	- Arminos					
318 12 th Street					PO Box 25						
City, State & Zip Code					City, State &	Zip Code					
Hammonton, NJ 08037	T= 1					i, NJ 08048					
Project Manager for Monitoring Firm  James Proctor		phone <b>704</b> -			Telephone N 609-265-21		License N	umber 0052	29		
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4/30/12		/12			EMSL Ana		·				
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Describe:					Westmont,						
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Haddon Heights, N	IJ 08035					BRISTOL, PA						
Project Manager for Mon	nitoring Firm		Te	lephone	No.	Telephone No.		License No.				1
Alan Lloyd			1	856-547	-0505	215-788-6040		00509				
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**MAY 11** 

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

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 03 02 / Hackensack University Medical Center 12 Agencies Notified Type Notification Street Address APR 2 4 2012 □ EPA ☑ Initial 20 Prospect Avenue **⊠** DOLWD City, State, Zip Code ☑ DHSS Amendment #3-4/12/12 Hackensack, NJ 07601 ☐ Emergency (including □ DCA Name of Contact Talanhana Nrimhe (NJAC 5:23-8) justification) ☐ Cancellation **Facilities Dept FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Pascack Valley Hospital School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 250 Old Hook Road homes, etc.) City (5) Square Feet # of Floors Bldg. Age Westwood 100,000 3 40+ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Bergen Hospital Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Pennoni Associates Inc. BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 515 Grove Street 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Haddon Heights, NJ 08035 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Alan Lloyd 856-547-0505 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __3__/__13__/__12__ 4 / 20 / 12 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-4:00PM/ BRISTOL, PA 19007 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure Mini-Enclosure ≥160 sf or ≥260 lf □ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Repair Remova Encapsulate Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Throughout П M VAT 45,945 SF  $\bowtie$ Throughout  $\boxtimes$ Mastic 45,945 SF  $\boxtimes$ П П П NJDEP Waste Name of Registered Waste Hauler Cubic Yards of Name of Registered Landfill Hauler ID No. Waste SERVICE TRANSPORT GROUP, INC. MINERVA LANDFILL 20990 350 Cu Yd City, State Disposal Date City, State **NEW CASTLE, DE 19720** 4/13/12 WAYNESBURG, OH 44688 Completed By (Print or Type) Title Signature Gino Pizzigoni Estimator

ASB-41 MAY 11

GI 12 636 * Do not use this form for asbestos licensure exempted activities.

Cl # 2242

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City, State, Zip Code	-		4			1123 BEAVER STREET						
Haddon Heights, NJ 0803						City, State, Zip Co	ode		-			
						BRISTOL, PA 19007						
Project Manager for Monitoring F	-ır <b>m</b>			lephon		Telephone No.		License No.	- 6			_
Alan Lloyd					7-0505	215-788-6040	00509					
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	☐ Cancellation			Fa	acilities D	ept	enderstand en anderstand	4		ion.)	1,000				
					ACILITY I	NFORMATION			-	2 04	£ 2.54				
Name of Facility Where A		ng Place	(3)				Type of Facility	7.0							
Pascack Valley Hos	spital						School (K-1)								
Street Address 250 Old Hook Road							Other (i.e., phomes, etc.	8 (Other than K-12 private and comment )	) cial b	uildin	gs,				
City (5)							Square Feet	# of Floors	В	ldg. A	ge				
Westwood							100,000	3		40+					
County (6) Bergen				Cor	unty Code	(7)(STATE USE ONLY)	Current Use (Pi	rior if being demolis	shed)						
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCI	/ No.	Name of Abateme		)							
Pennoni Associates						The second section of the second section of the second section of the second section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section section s	VIRONMENTA								
Street Address						Street Address	***************************************		_	-					
515 Grove Street					27	1123 BEAVE	R STREET								
City, State, Zip Code						City, State, Zip Co	ode		0						
Haddon Heights, N.	J 08035					BRISTOL, PA 19007									
Project Manager for Moni	toring Firm		Te	elephone	e No.	Telephone No. License No.									
Alan Lloyd					7-0505	215-788-6040 00509									
Start Date (10) "ON / HOLL	Start Date (10) : Scheduled Completion Date (11) 4 / 13 / 12							Name of OSHA Monitor BRISTOL ENVIRONMENTAL, INC.							
Occupancy Status During		ck only o	ne)			Street Address		•							
☐ Facility Closed/Vacate						1123 BEAVER STREET									
☐ Abatement Performed	Outside of Norma	al Facility	Ho	urs - De	scribe	City, State, Zip Co						-			
Time of Abatement: 7:	00AM- <u>4:00</u> PM/	PI	VI	AN	ą.	BRISTOL, PA									
Scope of Work (Check all	that apply)					☐ Full Cont	ainment with Neg	native Pressure							
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>		⊠ Re ☐ De				☐ Mini-Enc ☐ Glovebag	losure procedure	n-Friable Procedur	е						
		100	-	ation					Ab	atem	ent T	уре			
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)  Norma Used Sol Maintena Custodial (12)			olely by nance/		Description o estos Containing Ma e., thermal systems i surfacing, VAT,	terial (ACM) nsulation,	Amount (Specify	Removal	Repair	Encapsulate	Enclosure				
						other miscellane	ous)	SF or LF)	=		ulate	Тe			
Throughout	- K-W	Yes	N	N/A	VAT	A11 a 2 a a a a		45,945 SF							
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Throughout					Mastic	and the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second o		45,945 SF	×						
	San Tribania				/										
					<u> </u>										
Name of Registered Waste SERVICE TRANSPOR		c.		NJDEP Hauler I 2099	D No.	Cubic Yards of Waste 350 Cu Yd	MINERVA I								
City, State  NEW CASTLE, DE 19	720			200		Disposal Date 4/13/12	City, State WAYNESB	URG, OH 44688	- 1			-			
Completed By (Print or Typ	e) Titl	e stimat	or			Signature Line P.		1-1 Dat	e 9/8	1/2					
						vino 1.	Lygone	1-10	10	10					

ASB-41 MAY 11 GI /2036

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

CO# 2026

	_	12	-		nackens	ack University Me	dical Center	ENNA	*	-			
Agencies Notified  ☐ EPA  ☐ DOLWD 5744  ☐ DHSS \$2144					20 Prosp	ss ect Avenue		G I W E	7/				
☑ DHSS \$3/4'	Amendme	nt#			ity, State, Z		4PR	2 4 2012	11	H		_	
(NJAC 5:23-8)	☐ Emergence justification	y (inclu	uding	N	ame of Con	ack, NJ 07601	L		- Lancard				
	☐ Cancellation				Facilities	0708704	ASBESTO:	Telephone N	lumbe	-		_	
		-					LICE	Ny					
Name of Facility Where At	patement is Ta	king P	lace (3	)	PACILITY	INFORMATION	- Children - C	Standards and Sugar	note party and	J.			
Pascack Valley Hosp	pital	_					Type of Facilit			, i	1	_	
Street Address							School (K-	B (Other than K	-12\				
250 Old Hook Road	^						Other (i.e.,	private and com-	mercia	l build	dings		
City (5)							homes, etc	i.)					
Westwood							100,000	# of Floors	-	Bldg		3	
County (6)				C	ounty Code	(7)(STATE USE ONLY)		3		40	+		
Bergen							Current Use (Prior if being demolished) Hospital						
Name of Monitoring Firm H	ired by Buildin	g Own	er (8)	ASC	CM No.	Name of Abateme		),					
Pennoni Associates I	inc.					BRISTOL FN	VIRONMENTA	N INC				_	
Street Address						Street Address	ALL CHAIR FIA LY	AL, INC.			_		
515 Grove Street						1123 BEAVER STREET						_	
City, State, Zip Code			Ke seelle We			City, State, Zip Co							
Haddon Heights, NJ 0						BRISTOL, PA 19007							
Project Manager for Monitor	ing Firm	17-22			ne No.	Telephone No.		License No.					
Alan Lloyd					47-0505	215-788-6040		00509					
Start Date (10) Scheduled Completi					Date (11) Name of OSHA Monitor					-		_	
Occupancy Status During Ab	patement (Che	ck only	one)				INCHMENTA	L, INC.					
Facility Closed/Vacated During Entire Period of Abatem  Abatement Performed Outside of Normal Facility Hours												_	
	tside of Norm	al Faci	ity Hou	Pr D.		Street Address 1123 BEAVER							
☐ Abatement Performed Ou Time of Abatement: 7:00	tside of Norm	al Faci	ity Hou	Pr D.		1123 BEAVER City, State, Zip Coo	ie						
J Abatement Performed Ou Time of Abatement: 7:00	tside of Norm AM- <u>4:00</u> PM/	al Faci	ity Hou	Pr D.		1123 BEAVER	ie						
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Abatement Performed Ou Time of Abatement: 7:00.  Scope of Work (Check all that ≥3 sf or ≥3 if ≥160 sf or ≥260 if  Location of Asbestos-Containing Mate	rial (ACM)	⊠ R □ D Us	enovatemolitics  Local Norma	ion on lly	escribe M	1123 BEAVER City, State, Zip Coc BRISTOL, PA	inment with Neg sure Procedure pted (*) and Nor		At	patem	_	_	
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