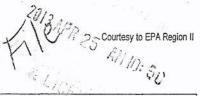


Date of Notification (1)		-3.4	Name	of Buildin	g Owner/Operator (i	御ほAPR 25	/ i.e.				
4 / 24 / 20	13		Sch	nneide	g Owner/Operator (i er National,	Inc.	AT 10: 30				
Agencies Notified Type Notificatio	n			Address	044			1			
☐ EPA ☐ Initial ☐ DOLWD ☐ Amended				Water		& Lillian	1.1./ HDI				
DHSS Amendment	#6			State, Zip (. 1110				
□ DCA □ Emergency	including	3	W. C.		e, FL 32202	11 454					and the same
(NJAC 5:23-8) justification)			100000000000000000000000000000000000000	of Contac	t nert, Facilities	Droi Mar	Telephone Num	ber _			
Gairceilation					FORMATION	s Proj. ivigi.	<u> </u>				
Name of Facility Where Abatement is Tak	ng Place	(3)	FA	CILITY	IFURIVIATION	Type of Facility (4)				
CSX Intermodel - Schneider	생물 등 기가 있는 것이 없었다.		Mod	dular Bi	uildina	School (K-12)					
Street Address							(Other than K-12				
25 Pennsylvania Avenue						Other (i.e., pri homes, etc.)	ivate and comme	rciai bu	llaing	S,	
City (5)				0.500,000		Square Feet	# of Floors	Ble	dg. A	ge	
Kearny						8000	1	2	5+		
County (6)			Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (Price	or if being demoli	shed)			
Hudson						Industrial					
Name of Monitoring Firm Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme	50 305		Je			
Shaw Environmental, Inc.					Prism Resp	onse, Inc.		- 17			
Street Address					Street Address						
128 S. Tryon Street - Intersta	ate lo	wer			102 Techno City, State, Zip Co						
City, State, Zip Code Charlotta, NC 28202					Export, PA						
Project Manager for Monitoring Firm		Tele	phone	No.	Telephone No. License No.						
Roy Stancil				1-6334		01121					
	eduled C				Name of OSHA Monitor						
5 / 6 / 2013	/	8	/ _	2013	Shaw Envi	ronmental,	Inc.				
Occupancy Status During Abatement (Che	ck only	one)			Street Address			• ••••••••			
Facility Closed/Vacated During Entire F				a alla a	128 South Tryon Street, Interstate To						
Abatement Performed Outside of Norm Time of Abatement:AM					City, State, Zip Co Charlotte, N						
Scope of Work (Check all that apply)				R 9.01	E Full Cont	ainment with Neg	ativa Pressura				
☐ >3 sf or >3 lf	■ Re	novati	on*		Mini-Enc		ative Flessure				
■ ≥160 sf or ≥260 lf *Abatement prio		molition by			☐ Glovebag	g Procedure mpted (*) and Nor	Eriable Procedu	ro			
Abdition, pro		Locat		T	□ Non-cxe	impled () and 1401	I-i Hable i Tocedo		atem	ent T	vne
Location of		Norma	lly		Description of	f			70		-
Asbestos-Containing Material (ACM)		ed Sole iintena			stos Containing Ma	terial (ACM)	Amount	Remova	Repair	пса	nclo
TO BE ABATED IN Facility		todial		(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	oval	=	Encapsulate	Enclosure
(13)	Vos	(12) No	N/A		other miscellane	ous)				ate	
Roof	Yes		×		Roofing		800 SF	×			
Exterior of Structure			×	Glazin	g Compound fro	om Windows	9 SF	×	П	П	
Throughout			×	Olaziri	Pipe Insulati	-	80 LF	×			
	量	1	×	C Owner St.	VAT	OII	12 SF	×		П	
Throughout Name of Registered Waste Hauler	14_		IJDEP \	Maste	Cubic Yards of	Name of Regist		1			
Waste Management		H	lauler II		Waste		entral Sani	tarv	Lar	ndfi	II
City, State		S	W1724		Disposal Date	City, State		,			-
Camden, New Jersey				1.00	4/25/2013	Penn Arg	vl. PA		9		
	tle				Signature	^		ate	-		- 320
	0.00	istr	ative	Supp		NOA K.	10h 4	/24/	201	3	
OCCOSICA DAGOIT	MITH	- Out	41140	Capp	All	near Le				-	_

Date of Notification (1) 4 / 19 /	2013				g Owner/Operator (er National	2) ^{CUIJ} APA , Inc.	25 (MID:	50			
Agencies Notified Type Notific			500	t Address Water		t		//	į.	****	
DOLWD Amended Amended	i ent#5		City,	State, Zip	Code		1.0714G	••			
DHSS American		g		KSONVIII	le, FL 32202		Telephone Num	ber			-
(NJAC 5:23-8) justificati			Rva	n Gron	nert, Facilitie	s Proj. Mgr	1000				17
					FORMATION	70.1					
Name of Facility Where Abatement is	aking Place	(3)				Type of Facility ((4)				
CSX Intermodel - Schneid	er Natio	nal's	Mod 8	dular Bı	uilding	School (K-12	(Other than K-12	2)			
Street Address						Other (i.e., pr	ivate and comme	rcial b	uildin	gs,	
26 Pennsylvania Avenue						homes, etc.) Square Feet	# of Floors	TB	ldg. A	ae	-
City (5)						8000	1	11 (0.00)	5+	.9-	
Kearny			Cour	nty Code ((STATE USE ONLY)		or if being demolis	shed)			
County (6)			Cou	ity Code (NOTATE OSE STEEL	Industrial					
Hudson Name of Monitoring Firm Hired by Build	ling Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)	7 7 9			177	n ib-
Shaw Environmental, Inc.	ing owner	()			Prism Resp	onse, Inc.					
Street Address					Street Address		9				
128 S. Tryon Street - Inter	state To	wer			102 Techno						
City, State, Zip Code					City, State, Zip Co						
Charlotta, NC 28202	4				Export, PA	15032	License No.				
Project Manager for Monitoring Firm			phone	^{No.} 1-6334	Telephone No. 724-325-33	30	01121				
Roy Stancil	Scheduled C	100			Name of OSHA Monitor						
Start Date (10) 5 / 2013	5 /				Shaw Envi		Inc.				
Occupancy Status During Abatement (Check only	one)			Street Address			-			
■ Facility Closed/Vacated During Entit	e Period of	Abate	ment		128 South T	ryon Street,	Interstate I	owe	er		
Abatement Performed Outside of No Time of Abatement:AM	rmal Facilit	y Hour	s - Des	cribe AM	City, State, Zip Co Charlotte, N	C 28202					
Scope of Work (Check all that apply)		-		4 11	E Full Cont	ainment with Neg	ative Pressure				
□ ≥3 sf or ≥3 lf	Re De prior to demoli	novati	n		☐ Mini-Enc	losure Procedure	n-Friable Procedu	re			Š:
Abatement		Locat							atem	ent T	ype
Location of Asbestos-Containing Material (ACM TO BE ABATED IN Facility (13)) Use Ma	Norma ed Sole intena todial (12)	lly ely by nce/	Asbe (i.e	Description of stos Containing Ma ., thermal systems surfacing, VAT, other miscellane	terial (ACM) insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	11			800 SF	x	П	П	
Roof			×	10 - Ki	Roofing	107 - 1		x		П	
Exterior of Structure			×	Glazing	Compound fro		9 SF 80 LF	×		H	Ħ
Throughout			x		Pipe Insulati	on		×	H	1	믐
Throughout			×		VAT	Name of Regist	12 SF				
Name of Registered Waste Hauler Waste Management		Н	JDEP \ auler II v1724		Cubic Yards of Waste	Grand Ce	entral Sanit	ary	Lar	ndfi	11
City, State	an ed t		14	- N	Disposal Date 5/1/2013	City, State Penn Arg	yl, PA				500
Camden, New Jersey	Title		11.		Signature	7	∦ Da				
Completed By (Print or Type)	Admin	istra	ative	Supp	//	uca Bi	SCh 41	19/2	201	3	100

ASB-41 MAY 11



Date of Notification (1) 4 / 11	2013		0.000		ding Owner/Operato		17	D/A	710	ÚĮ.	
Agencies Notified Type Not			50		er Street	í			í		
DOLWD Amen	ded dment # 4		0.2558	y, State, Zij		•					
□ DCA □ Emerg	gency (inclu	iding		me of Cont	ille, FL 32202	<u> </u>	Tolombono Ni				
(NJAC 5:23-8) justific			1000		nnert, Faciliti	es Proj. Mg	r. Telephone N	umber	7		
			F	ACILITY	INFORMATION						
Name of Facility Where Abatement					21 1/20 201	Type of Facili					
CSX Intermodel - Schne	ider Na	tior	nal's M	odular E	Building	Subchante	12) er 8 (Other than K-	12)			
Street Address 26 Pennsylvania Avenue	ı						private and comm		build	ings,	
City (5)						Square Feet	# of Floors		Bldg.		
Kearny						8000	1	ecocasacan fi	25+		
County (6) Hudson	7 1 1		Co	ounty Code	(7)(STATE USE ONLY)	Industrial	Prior if being demo	olished)		
Name of Monitoring Firm Hired by Bu		er (8) ASC	M No.		nent Contractor (9)				
Shaw Environmental, Inc					Prism Resp	onse, Inc.					
Street Address					Street Address						
128 S. Tryon Street - Inte	erstate i	OW	/er		City, State, Zip C						
City, State, Zip Code Charlotta, NC 28202	= 0				Export, PA						
Project Manager for Monitoring Firm		-1	Telephon	e No.	Telephone No.	10002	License No.	-	_		-
Roy Stancil		- 12		31-6334		30	01121				
Start Date (10)	Scheduled				Name of OSHA N			-			
4 / 22 / 2013	4	1 3	25 /	2013	Shaw Env	ironmenta	l, Inc.				
Occupancy Status During Abatement	(Check only	y one	∍)		Street Address						
Facility Closed/Vacated During Ent							t, Interstate	Tow	er		
Abatement Performed Outside of N Time of Abatement:AM					City, State, Zip Co Charlotte, N						
Scope of Work (Check all that apply)	Factories III								-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf *Abatement		emo	vation * olition by others.		☐ Mini-Enc ☐ Glovebag	g Procedure	gative Pressure on-Friable Procedu	ıre			
			cation	T		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			atem	ent 7	ype
Location of Asbestos-Containing Material (ACM TO BE ABATED	(I) Us	Nor sed S lainte	mally Solely by enance/ ial Staff?		Description o stos Containing Ma ., thermal systems i	terial (ACM) insulation,	Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility (13)	Cu		12)		surfacing, VAT, other miscellaned	2975-299	SF or LF)	<u>m</u>		ulate	ē
	Yes	N	lo N/A					1			
Roof			×		Roofing		800 SF	x			
Exterior of Structure]	Glazing	Compound fro	m Windows	9 SF	×			
Throughout					Pipe Insulation	on	80 LF	x			
Throughout				in the second	VAT		12 SF	×			
ame of Registered Waste Hauler			NJDEP \		Cubic Yards of Waste	Name of Regist	어릴 때 가는 하고 있었습니다. 이 없었다면 모르는 게임.		i la	45	1
Vaste Management		1	SW1724				entral Sanit	ary	Lan	QTI	1
ty, State		l Vi			Disposal Date 4/25/20:13	City, State Penn Arg	vl PA				3.V)
amden, New Jersey	Title				Signature	i omining	yı, ı A	te		24.4	El
mpleted By (Print or Type) essica Busch		ist	rative	Suppo	//	n Busi		11/2	2013	3	
		-				1		TO DESCRIPTION OF THE PERSON O			

Date of Notification (1) 3 / 28 /	2013		1 - 11 - 12 - 12 - 12 - 12 - 12 - 12 -		ing Owner/Operator ler Nationa	l, Inc.	idos AA,	//). n			
Agencies Notified to Type Notified	ication		Stre	eet Address 0 Wate	3	1 4 1	10/10/10/10	107) ;		
■ DOLWD ■ Amend	ed ment # 3			, State, Zip			10/1/6	W.	-		
	ment # 3 ency (includ	fina	Ja	cksonvi	lle, FL 32202		- Q				
(NJAC 5:23-8) justifica		an ig		ne of Conta			Telephone Nu	mber			
☐ Cancell	lation		Ry	an Gro	nnert, Facilitie	es Proj. Mgr					
			F	ACILITY I	NFORMATION				_		
Name of Facility Where Abatement is						Type of Facility	(4)				
CSX Intermodel - Schnei	der Nat	iona	al's Mo	odular B	Building	School (K-1		10)			
Street Address					No. 4		8 (Other than K-		buildi	ngs,	
26 Pennsylvania Avenue						homes, etc.)				
City (5)			-			Square Feet	# of Floors	11 (2)	3ldg.	Age	
Kearny					-	8000	1	-39-11-0-39-50	25+		
County (6)			Co	unty Code	(7)(STATE USE ONLY)		rior if being demo	lished)			
Hudson						Industrial					
Name of Monitoring Firm Hired by Bui		er (8)	ASCI	M No.		ent Contractor (9)				
Shaw Environmental, Inc.					Prism Resp	onse, inc.					
Street Address	rototo T		~=		Street Address	logy Lano					
128 S. Tryon Street - Inte	istate i	OW	eı		102 Techno City, State, Zip C						
City, State, Zip Code Charlotta, NC 28202					Export, PA						
Project Manager for Monitoring Firm		17	Telephone	a No	Telephone No.	10002	License No.		W/mr.V2		- 0.200
Roy Stancil				31-6334		30	01121				
	Scheduled				Name of OSHA Monitor						
4 / 15 / 2013		/ 1		2013	Shaw Envi		Inc	•			
Occupancy Status During Abatement (Check only	one	<u> </u>		Street Address	TOTITIOTIC	,				
Facility Closed/Vacated During Enti					128 South 7	rvon Street	. Interstate	Towe	er		
☐ Abatement Performed Outside of N	ormal Faci	ity H	ours - De		City, State, Zip Co		,				
Time of Abatement:AM	PM/	P	M	_AM	Charlotte, N						
Scope of Work (Check all that apply)		-			- 1 - 1	100		-	11	5	
≥3 sf or ≥3 lf <u>= ≥160 sf or ≥260 lf</u> *Abatement		emo			☐ Mini-Enc ☐ Glovebag	tainment with Neg losure g Procedure mpted (*) and No		ıre			
		s Lo	cation	1		- 101		T	atem	ent T	ype
Location of		Norr	mally	-	Description o			-			
Asbestos-Containing Material (ACM TO BE ABATED			olely by nance/		stos Containing Ma ., thermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility	Cu		al Staff?	(surfacing, VAT,	or	SF or LF)	\\\ \delta	"	Sula	sure
(13)	Yes	T	2) lo N/A	1	other miscellane	ous)				ite	
Roof	Tes 🗆				Roofing	. 14 14.3	800 SF	×			
Exterior of Structure		T		Glazino	Compound fro	m Windows	9 SF	x			
Throughout			x	7	Pipe Insulation		80 LF	×			
Throughout		In		N. H. S.	VAT	The state of the s	12 SF	×			
lame of Registered Waste Hauler		1	NJDEP	Naste T	Cubic Yards of	Name of Regist				10.75	
Vaste Management			Hauler II		Waste		ntral Sanit	arv	Lan	dfil	
ity, State			SW1724		Disposal Date	City, State	5 1 12 2 12 1	<u>J</u>	Al di		
Camden, New Jersey					4/17/2013	Penn Arg	vl. PA				
	Title				Signature	i omining	/ Da	fe		1	-
ompleted By (Print or Type)	Title Admir	ict	rativo	Sunna	ort oliginature	rica Be		28/2	011	3	
essica Busch	Aumil	115ti	alive	Suppo	nyew	uccexu	Will SI	2012	.0 10	, ,	

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

Date of Notification (1) 3 / 15 / 20)13	1 6	1		ding Owner/Operato der Nationa	r(2) al. Inc.	1PR 25 AM	0:5	ח		
Agencies Notified Type Notificati	on		Stre 50	et Addres 0 Wate	er Street	1 × 1.	KEKKAK	no _l	<u> </u>	i	-
DOLWD Amended Amendmen				, State, Zi cksonv	p Code ville, FL 32202						
□ DCA (NJAC 5:23-8) □ Emergency justification □ Cancellation)	ing	Nan	ne of Cont			Telephone Nur	nber			
			F	ACILITY	INFORMATION		\$W			52,	
Name of Facility Where Abatement is Tak CSX Intermodel - Schneider Street Address			's Mo	odular I	Building				buildi	nas.	
26 Pennsylvania Avenue						homes, etc.				175000	
City (5) Kearny						Square Feet 8000	# of Floors		3ldg. 25+	Age	10.000
County (6) Hudson		-47	Col	unty Code	(T)(STATE USE ONLY)	Current Use (Pr	ior if being demol	ished)			
Name of Monitoring Firm Hired by Building) Owne	r (8)	ASCN	Л No.		nent Contractor (9)					
Shaw Environmental, Inc.				-	Prism Resp	onse, mc.			1	-	
Street Address	oto T	011/0			Street Address	ology Lana					
28 S. Tryon Street - Intersta	ate 1	owe			102 Techno					_	_
City, State, Zip Code					City, State, Zip C						
Charlotta, NC 28202		1=		Ma	Export, PA	13032	I Lianna Na	12 ,			
Project Manager for Monitoring Firm Roy Stancil		70		1-633			License No. 01121				
4 / 1 / 2013 4 Occupancy Status During Abatement (Che	ck only	/ 3 one)	_ ′	ate (11) 2013	Street Address	ironmental,				72	
 Facility Closed/Vacated During Entire P Abatement Performed Outside of Normalitime of Abatement:AMF 	al Facili	ty Hou	rs - De		City, State, Zip C		interstate i	OWE			
Scope of Work (Check all that apply)					Chanotte, iv	10 20202					
] ≥3 sf or ≥3 lf 1 ≥160 sf or ≥260 lf *Abatement prior		enovat emoliti ition by	on		☐ Mini-End ☐ Gloveba	tainment with Neg closure g Procedure empted (*) and Nor		·e		180	
141 1 24 11 16	1	Loca						Ab	atem	ent 7	ype
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Use Ma Cus	(12)	ely by ance/ Staff?		Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Liciosofie
Roof	Yes	No	N/A		Roofing		800 SF	x	П		
Exterior of Structure				Glazin	g Compound fro	m Windows	9 SF	×			1
Extensi of ordinary				- 3211	3 temporium						
		П		100 -		otal yalli					E
me of Registered Waste Hauler /aste Management		H	JDEP V auler ID W1724		Cubic Yards of Waste	Name of Registe	ered Landfill ntral Sanita	ary	Lar	dfi	11
ty, State amden, New Jersey	2,4	131	W1124		Disposal Date 4/3/2013	City, State Penn Argy			i j		
empleted By (Print or Type) Title		istra	ative	Supp	Signature	. 0	Date	15/2	01:	3	

ASB-41 MAY 11

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Date of Notification (1)	25 / 201	13				g Owner/Operator (er National		1. C.S.	(1) (1).	5/		
Agencies Notified EPA	Type Notification	n		500	t Address Water		į.	14.07/16	Vig		î.	
■ DOLWD	Amended Amendment	# 1			State, Zip C							
■ DHSS	☐ Emergency (g	100		e, FL 32202		1=				
(NJAC 5:23-8)	justification)		~		of Contac		Dari Mari	Telephone Nur	, h			
	☐ Cancellation	1				nert, Facilitie	s Proj. Mgr.					
				FA	CILITY IN	IFORMATION						
Name of Facility Where	Abatement is Taki	ng Place	e (3)				Type of Facility					
CSX Intermodel	- Schneider	Natio	nal's	s Mo	dular Bu	uilding	School (K-12	?) 8 (Other than K-1	2)			
Street Address	Sa I			+			Other (i.e., p	rivate and comme	ercial b	uildin	gs,	
26 Pennsylvania	Avenue			T II			homes, etc.)		- 15	Late 1		
City (5)							Square Feet	# of Floors		ldg. /	ige	
Kearny							8000	1		OT.		
County (6)			was between	Cou	nty Code (7	(STATE USE ONLY)	1 10 10 10 10 10 10 10 10 10 10 10 10 10	ior if being demol	isnea)			
Hudson			0.000		1		Industrial					
Name of Monitoring Firm		Owner	(8)	ASCM	No.	Name of Abatem	[1] (1) [1] (1) [1] (1) [1] (1) [1] (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)					
Shaw Environme	ental, Inc.					Prism Resp	onse, inc.					
Street Address						Street Address	logy Long					
128 S. Tryon Str	eet - Intersta	ite I c	wer			102 Techno						
City, State, Zip Code						City, State, Zip C						
Charlotta, NC 28						Export, PA	15032	License No.				-
Project Manager for Mor	nitoring Firm			phone		Telephone No. 724-325-33	30	01121				
Roy Stancil			0.7775		1-6334	Name of OSHA Monitor						
Start Date (10) 3 / 18 /		eduled C	20 <u>20</u>		2013	Shaw Envi		, Inc.				
Occupancy Status Durin	g Abatement (Che	ck only	one)			Street Address			-			
Facility Closed/Vacat	ed During Entire P	eriod of	Abate	ment		128 South T		, Interstate	IOWE	er		
Abatement Performed Time of Abatement:	d Outside of Norma F	al Facilit	y Houi PM-	s - Des	cribe AM	City, State, Zip Co Charlotte, N						
Scope of Work (Check a	Il that apply)											
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	*Abatement prior	□ D∈	enovati emolition	n		☐ Mini-End			ıre			
	Abatement phor		Locat		T		Impled () and ()		19.00	atem	ent T	vpe
Location	of		Norma			Description of	of		-	_	1	T
Asbestos-Containing			ed Sole		Asbe	stos Containing Ma	terial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
TO BE ABA			todial		(i.e	, thermal systems surfacing, VAT		SF or LF)	oval	=	lusa	sure
(13)	ity	-	(12)			other miscellane	ous)				ate	
	Language State 6th	Yes	No	N/A				ed urbans.			_	_
Roof				X	- 1600	Roofing		800 SF	×			
Exterior of S	tructure			×	Glazing	Compound from	om Windows	9 SF	×			브
												Ш
							71 112 119					
Name of Registered Was	ste Hauler			JDEP I		Cubic Yards of	Name of Regist				, ,,	
Waste Manage				auler II W1724	O No.	Waste		entral Sani	tary	Lar	ndfi	11
City, State		7		17		Disposal Date	City, State	DA				+/5
Camden, New	Jersey		· LAP			3/20/2013	Penn Arg		1. 1.	4	ė.	
Completed By (Print or T	ype) Tit			1	THE PARTY	Signature	. ()	H. H.	ate	20.4	_	
Jessica Busch	A	dmin	istra	ative	Supp	ort less	real De	ACK 2	/25/2	201	3	

ASB-41 MAY 11

Date of Notification (1) 2 / 25 / 20	13		10000		ing Owner/Operato ler Nationa	al, Inc.	" 30 TATA		C		
Agencies Notified Type Notificati □ EPA □ Initial ■ DOLWD ■ Amended	on		St. 50	reet Address 00 Wate	r Street	ě.	TERSTALL!	Űί		í	
■ DHSS Amendmen	#1			y, State, Zip							
☐ DCA ☐ Emergency		ing			lle, FL 32202		Ta variable				
(NJAC 5:23-8) justification				me of Conta		oo Duo! Mau	Telephone Nur	nber	-		
Cancellation					nnert, Faciliti	es Proj. Mgr					0-00
				ACILITY	NFORMATION						
Name of Facility Where Abatement is Tak CSX Intermodel - Schneider				odular E	Building	Type of Facility School (K-1		2)			
Street Address 26 Pennsylvania Avenue						Other (i.e., homes, etc	private and comme	ercial			
city (5) Kearny						Square Feet 8000	# of Floors		Bldg. 25+	77.0	¥.
County (6) Hudson			C	ounty Code	(T)(STATE USE ONLY)	Current Use (P Industrial	rior if being demoli	shed)		
Name of Monitoring Firm Hired by Building	Owne	r (8)	ASC	M No.	Name of Abaten	nent Contractor (9)				
Shaw Environmental, Inc.					Prism Resp	oonse, Inc.					
Street Address	1000				Street Address						
128 S. Tryon Street - Intersta	ate To	owe	r		102 Techno	ology Lane					
City, State, Zip Code					City, State, Zip C						
Charlotta, NC 28202			-0111-01		Export, PA	15632					
Project Manager for Monitoring Firm	+	955000	lephor		Telephone No.		License No.				
Roy Stancil				31-6334			01121				
Start Date (10) School		Comp / 20		Date (11) 2013	Name of OSHA		Ino		÷		
			′			ironmental	, Inc.	34.77			
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire P			omont		Street Address	Envon Stroot	Interetate T		25		
Abatement Performed Outside of Norm. Time of Abatement:AMf	al Facili	ty Ho	urs - De	escribe _AM	City, State, Zip C Charlotte, N	ode	, Interstate T	OW			
Scope of Work (Check all that apply)		-									
_ ≥3 sf or ≥3 lf = ≥160 sf or ≥260 lf *Abatement prior	□ De	enova emolit ition by	ion		☐ Mini-End	g Procedure	pative Pressure n-Friable Procedure	e			
	-	s Loca	-	7		1		1	atem	ent T	vne
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Use	ainten	lely by ance/ Staff?	(i.e	Description of stos Containing Ma ., thermal systems surfacing, VAT, other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	-								-
Roof			x		Roofing		800 SF	×			
Exterior of Structure			x	Glazing	Compound fro	om Windows	9 SF	×			
						1					
ame of Registered Waste Hauler Vaste Management		1	NJDEP Hauler I	SCHOOL STATE OF THE STATE OF TH	Cubic Yards of Waste	Name of Regist Grand Ce	ered Landfill entral Sanita	ırv	Lar	ıdfi	ll -
ty, State		13	W1724		Disposal Date	City, State		,	-01 70		
amden, New Jersey			300		3/20/2013	Penn Arg	vl. PA				

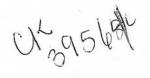
ASB-41 MAY 11

1	Courtesy to EP	A Region II
	149 DE	

Date of Notification (1) 2 / 15 / 2	013		1 (1)		ing Owner/Operato ler Nationa		V.C.	4/	8		1
Agencies Notified Type Notificat	ion		Str	eet Address 00 Water	3	i			100	170	121
■ DOLWD Amended Amendmer	s+ ++			y, State, Zip							
□ DHSS Amendmer □ DCA □ Emergency		ding			lle, FL 32202	2					
(NJAC 5:23-8) justification				me of Conta		aa Drai Mar	Telephone Nu	ımber	_		17
Cancellatio					nert, Faciliti	es Proj. Mgr					
Name of Facility Where Abatement is Ta	king Pl	200 (3)		ACILITY I	NFORMATION	Type of Facility	(4)				
CSX Intermodel - Schneide				odular B	uildina	School (K-1					
Street Address							8 (Other than K- private and comm		الماليطا	inna	
26 Pennsylvania Avenue						homes, etc.		ieiGia	Dulla	ngs,	
City (5)					1	Square Feet	# of Floors		Bldg.	. 150	A CONTRACTOR
Kearny						8000	1		25+		
County (6)			Co	unty Code (7)(STATE USE ONLY	Current Use (Pr	rior if being demo	lished	i)		
Hudson Name of Monitoring Firm Hired by Buildin	a Owne	ne /0\	LASCI	M No.	Name of Abotes	nent Contractor (9)					
Shaw Environmental, Inc.	y OWITE	=1 (0)	ASC	VI INU.	Prism Res						
Street Address	C	7	1		Street Address	501150, 1110.			refine-	-	
128 S. Tryon Street - Interst	ate T	owe	r		102 Techn	ology Lane					
City, State, Zip Code					City, State, Zip						
Charlotta, NC 28202					Export, PA	15632					
Project Manager for Monitoring Firm Roy Stancil		10000	elephone	e No. 31-6334	Telephone No. 724-325-33	30	License No. 01121				
	eduled			ate (11)	Name of OSHA Monitor						
2 / 25 / 2013 2	2	/ 27	/	2013	Shaw Env	ironmental,	Inc.				
Occupancy Status During Abatement (Che	ck only	one)			Street Address						
Facility Closed/Vacated During Entire F						Tryon Street,	Interstate 7	Tow	er		
Abatement Performed Outside of Norm Time of Abatement:AMI					City, State, Zip C Charlotte, N						
Scope of Work (Check all that apply)					4 - 18 - 18 - 18 - 18 - 18 - 18 - 18 - 1	10 0 1 1 1 1 Gr					
_] ≥3 sf or ≥3 tf	III R	enova	tion *		■ Full Con ☐ Mini-End	tainment with Neg	ative Pressure				
■ >160 sf or >260 lf		emolit	ion		☐ Gloveba	g Procedure					
Abatement prior		•		1	∐ Non-Exe	empted () and Non	-Friable Procedu				
Location of		s Loca Norma			Description of	of		A	batem	ent T	уре
Asbestos-Containing Material (ACM)	Us	ed Sol	ely by		tos Containing Ma	iterial (ACM)	Amount	Rem	Rep	Enca	Enc
TO BE ABATED IN Facility			Staff?	(i.e.	, thermal systems surfacing, VAT		(Specify SF or LF)	lova	air	nsde	inso
(13)	107	(12)	1	-	other miscellane			-	Repair	late	e e
Roof	Yes	No	N/A		Roofing		800 SF	×			
			-	Clasic		m Mindaya		×			
Exterior of Structure				Glazing	Compound fro	on windows	9 SF			ᆜ	
					-2010/01/2			10	Ш	Ц	Ц
							n, Pi-Fi				
ame of Registered Waste Hauler Vaste Management		H	IJDEP \ lauler IE W1724		Cubic Yards of Waste	Name of Registe Grand Cer		ary	Lan	dfil	ı
ty, State	-1/400		-	1	Disposal Date	City, State			1000	1902	_
amden, New Jersey	11.00		a f	2	2/27/20/13	Penn Argy					
ompleted By (Print or Type) Print or Type Active Active Active Title				Suppo	Signature	. ()	Dat	100	2013		

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Date of Notification (1) 04/23/13				Name of Werne	Building r Decor	Owner/C nstructi	on, LL	(2)01 C.	3APR 25	j je	4 (1): 51	0			5	
Agencies Notified X EPA	Type Notification	į.		Street A	ddress inlam S	t. Suite	2300	AS			HIRO	ĺ.	30/030			
EPA DEP DOL	Amended Amendment				te, Zip Co n, TX 77			A 1.3. 188.	La la la	. 5 2 4.5	1 2 1					
DOH DCA	Emergency justification) Cancellation	1			Contact m Carro	oll	y.			Te	lephone N	Number				
				FACII	LITY INFO	DRMATI	ON				La company	30				
Name of Facility Where	Abatement is Takin	g Place (3)						Туре	of Facility (4	1)					- 350	
Werner Generating	Station			Da 2017	ř.	-			School (K-1							
Street Address 2 Lower Main St.									Subchapter Other (i.e. p	8 (Otl	her than K	(-12)	ildie	.aa h		
The state of the s								×	etc.)	iivale	& comme	i Ciai Di	iiuii	ıys, ı	ome	s,
City (5) South Amboy								100	re Feet ,000	7	of Floors		Bld 85	g. Ag	е	
County (6) Middlesex				County C	Code (7) JSE ONLY)			ent Use (Prio ver Plant	r if be	eing demo	lished)				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	l No.		Name	of Aba	atement Con	tracto	r (9)					
Accredited Environ	mental Technol	ogies					Site	Enter	prises, Ind							
220 Church St.							Street 815		ss Street Suit	te 3						
City, State, Zip Code Bridgewater, NJ 08	807			*.		-			ip Code on, NJ 080	037						
Project Manager for Mor Eric Houseknecht	itoring Firm			Telephor	ne No.	1	Telephone No. 609-567-1250				License 01172				0	
Start Date (10) 05/04/13	Start Date (10) Schedule						Name AET		HA Monitor							
Occupancy Status Durin	g Abatement (Chec	k Only One)					Street	Street Address						-		
➤ Facility Closed/Vac	ated During Entire	Period of Aba	item	ent			220	Chur	ch St.							- 1
Abatement Perform Other – Describe:							100000000000000000000000000000000000000		ter, NJ 088	307						
Scope of Work (Check A	ll That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Ren X Den						Mi Gi	II Containme ni-Enclosure ovebag Proc	edure				duro		
		Т							n-Exempted	() ai	IG 14011-F11	lable Fi		aten	ent	
	= :	ls Lo Nor				1	750 150	172	1					Тур		
Location Asbestos-Containing		Used S	Sole	ly by	Ashes	Des tos Cont	scription		L(ACM)		Amount				m	
TO BE ABA	ATED	Mainte Custod		STATE OF THE STATE		thermal	system	s insul		(Specify	Re	;	0	Encapsulate	Enclosure
In Facil (13)	ity		12)	idir:		surfac	cing, VA niscellar	(T, or		S	F or LF)	Remova	- copul	, and	usa	losu
		Yes 1	Vo.	N/A		Outlot II		10000)				<u> </u>			ate	6
						14		197								
						(SEE A	ATTAC	HED)				-	-	1	
												+			-	
Name of Registered Was	te Hauler		IN	JDEP W	aste	Cubic	Yards	-	Name of F	Regist	ered Land	fill		-		\exists
Weigle Trucking	ic riddici		Н	auler ID W2912	No.	of Was 5,000	ste		Minerva							
City, State Linden, PA							al Date -12/31		City, State Waynes		, Ohio		V			
Completed by	. 1 . 1	Title			71.10	Ş	ignature	2 1	MILLA	In	110	Date				\neg
Kati Di	Natal	Office	9	, mo	wag	evP	UU		UM VII	11	1	04/23	13			



Date of Notification (1) 4-03-2013	16				f Building Clermon					2013 APD					
Agencies Notified	Type Notification		11 108	Street A 520 C	oddress apital M	fall, Sui	te 200	1	ź.	2013 APR	40	Â	M In	: 5 _L)
EPA DEP DOL	Amended Amendment				ate, Zip C mento,		841		i ·	e lit	EN	577.	2 / I	ÜĹ	
DOH DCA	Emergency justification) Cancellation			Name o Chris I	f Contact Miller				4	Telephone			(()		
N				FACI	LITY INF	ORMATI	ON			1		•		0.50	
Name of Facility Where National Envelope		ig Place (3)						Type of Facil School	(K-12)						
Street Address 450 Clermont Terr	ace									Other than I			dings	, hom	es,
City (5) Union			******					Square Feet 265,000		# of Floors 2			ildg. A		
County (6) Union	B				Code (7) USE ONLY	n		Current Use Not in use		f being demo	olishe	ed)	124		mA Caleda
Name of Monitoring Fire ECMS	m Hired by Building	Owner (8)		ASCN	/ No.			of Abatement nercy Group		ctor (9)					
Street Address 10 Filmont Drive								Address Burns Ave	nue				-		
City, State, Zip Code New City, NY 1095	56				- V	- :	City, S	tate, Zip Code	1						
	oject Manager for Monitoring Firm						Teleph	none No. 876-0020		License 01085			-		
Start Date (10) 5-06-2013	tart Date (10) Schedule				38-0640 Date (11)		Name	of OSHA Mon		01000					
Occupancy Status Duris	ng Abatement (Chec				1		la constantin	nercy Group) IIIC.						
	200 - 200 -		100	Street Address 3000 Burns Avenue											
Abatement Perform	cated During Entire I ned Outside of Norn Facility scheduled fo	nal Facility F	Hours		су	_	City, S	tate, Zip Code tagh, NY 11							
Scope of Work (Check	All That Apply)	- FRWI III								8					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ACCOUNTS NO.	Renovation Demolition					Mini-Enclo	sure Procedi	with Negativ				Α.	
		le l	ocatio				Non-Exemp			ana Non-1	labic	. 1.10	10.5	ement	t
Locatio	n of	No	rmally	,		Des	cription	of					Ту	ре	
Asbestos-Containing TO BE AB In Fac (13)	g Material (ACM) BATED ility	Main Custo	(12)	aff?	e/ aff? (i.e. thermal sys surfacing other misc			laterial (ACM) s insulation, T, or		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
Through	haut	res	No	N/A X	-				-	1000 1	,				
	Throughout						Pipes	- 15/2		4,000 sf		X			
Throug		X	L market		VAT			26,000 sf		X					
Name of Registered Wa	ste Hauler		NJ	DEP W	aste	Cubic	Yards	ls Name of Register		istered Land	dfill			15.45	
Horwith Trucks Inc.				uler ID I 227			of Waste		10.27	va Enterprises					
City, State Northampton, PA 18067				Disposal Date 6-30-12			ate City, State Waynesburg OH					99-0			
Completed by Robert Lewin	onmental Coordinator Signature					Date 4-24-13									

or 2383

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

Date of Notification (1)				Name	e of Buildi	ng Owner/Operator	(2)				-171	
04/	17 /	13		Pic	atinny A	Arsenal		2013 400				
Agencies Notified	Type Notific	ation	110000	Stree	t Address			2013 APR	25 -	AHI	11: 5	in
⊠ EPA				Ro	ute 15 N	orth		E 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
DEP (NUAC 5:16)	Amende			City,	State, Zip	Code	4	9 1 12	/ J. L.	teni:	17:13	1
☑ D Ø (NJAC 5:16) ☑ DHSS	Amendm Emerger	nent # ncy (including		Do	ver, NJ	07086		« Lic	EKS	HH.	110	1.
☐ DCA	justificati	ion)	5	Name	of Conta	ct		Telephone Num				
(NJAC 5:23-8)	☐ Cancella	tion		Ka	thleen P	ostol						
				FA	CILITY I	NFORMATION	13			-		
Name of Facility Where A	Abatement is	Taking Place	(3)				Type of Facility	(4)				
Ballistics Evaluation	n Center						School (K-12					
Street Address			-007					8 (Other than K-12 rivate & commerc		dinas		
Bear Swamp Rd. B	LDG. 636						homes, etc.)		iai buli	unigs	8	
City (5)	Contract Contract						Square Feet	# of Floors	В	ldg. A	ge	
Picatinny Arsenal,	Dover, NJ	1970					120	1		70 y	ears	
County (6)				Cou	nty Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)			
Morris							Vacant					
Name of Monitoring Firm				ASCM			ent Contractor (9)					
Langan Engineerin	g & Enviror	ım. Servic	es	000	99	SMAC Corp.						
Street Address						Street Address	D					
619 River Drive Cer	iter 1 sor.					27 EAST 33 ^R	100					
City, State, Zip Code	07407					City, State, Zip C						
Elmwood Park, NJ			TT.	laukaaa	N	PATERSON	NJ 0/514					
Project Manager for Moni Vijay Patel	toning Firm			lephone 201-398		Telephone No. 973-345-4055		License No.				
Start Date (10)	- 1	Scheduled C			E-EVELO:	Name of OSHA N	7.1	01110				
04 / 27 /				30 /	AC 277	EMSL ANAL				3		
Occupancy Status During						Street Address			-/0.5			
☐ Facility Closed/Vacate		3		ement		1056 SHELTO	ON AVE					
☐ Abatement Performed					scribe	City, State, Zip Co	TO 100 TO			-		_
Time of Abatement: _	AM	PM/	_PN	Λ	AM	PISCATAWA						
Scope of Work (Check all	that apply)											
≥3 sf or ≥3 lf		П Re	nova	ition		☐ Full Con	tainment with Neg	ative Pressure				
☐ ≥160 sf or ≥260 lf		⊠ De				☐ Gloveba	g Procedure					
		1 .	1			Non-Exe	mpted (*) and No	n-Friable Procedu				
Location	of		Norm	ation ally	1	Description of			Ab	atem	ent T	ype
Asbestos-Containing I	7			lely by	Asb	estos Containing Ma		Amount	Re	Repair	En	En
TO BE ABA IN Facilit		200000		I Staff?	(i.e., the	ermal systems insula	ation, surfacing,	(Specify	Remova	pair	caps	Enclosure
(13)	y		(12	2)		VAT, or other miscellane	ous)	SF or LF)	<u>a</u>		Encapsulate	ure
		Yes	No	N/A	1.41=1.17		2.3.4				œ.	7 7
Roof					Therm	al System	Company of the	120 SqFt				
		П		D	B						П	П
	war and the		П						一			
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Name of Posistered Man	o Hauler		Ч	NJDEP V	Masta	Cubic Verds of	Nows of Davis	tored Landell		Ш	Ш	Ц
Name of Registered Wast SMAC Corp	e nauler			Hauler II		Cubic Yards of Waste	Name of Regis					1000
				18590)	5 Yards		uilli				
City, State	toroon MI	07544		N. D. W.		Disposal Date	City, State	DA				124
27 E 33rd Street, Pa		- 17	evalue s			04/30/2013	Morrisville,				7.7	-
Completed By (Print or Ty	rpe)	Title Preside			100	Signature		Da	^{tte} 4	Inl	201	13
Borce Gjorsoski	ent			Box	ue Coss	000	71	11/	AUL	1		

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Ing hahf at ugura a course	1 :					TIPL TO	7010 04.00biii		1 01		<i>J</i> 1
(signature) Date: 4 14 14 14 Time: 2:3		NOTI	FICATIO	itate of Now Jers N OF ASBESTO: t to NJAC 8:60 a	SABATE	MENT (0)	00.05			8	:/4
Date of Notification (1)			Name	of Building Owner	/Operato	1 (2)	PR 25 AM	10 · 5	6		-
Agencies Nobified Type Notificatio	:		5	PHIE NA	FTA	LOVICH					
EPA X Initial	n: :	i	2	Address 7 Louis	STRA	6&7 &	LICENSIN	TINU G	Ji.	1850	
DOL Amendmen	nt#		Uity, Si	ate, Zip Code	tar I C. te	N.5.	negni				"-
Emergency justification		9		of Contact		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Telephone N	a tempro	_		_
DCA Cancellation				PHIE			4				a
Name of Facility Where Absternent is Take	- Min	403	FAC	ILITY INFORMAT	TION	:					7
MAFTA LOVICH	ng Place	(E)				Type of Facility	(4)		**********		
Street Address					-	School (K-	(2) B (Other than K-	400			
27 Louis ST.	:					反 Other (Le.)	nvate & commer onvate & commer	riz) clal bu	iding:	s, hor	nes,
Olly (5) NEW BRUNSWICK	:					Square Feet	# of Floors	7	Bldg.	Age O	
County (8) MIGNUESEX				Code (7) USE ONLY)		Current Use (Pri	or if being demoli	shed)			
Name of Monitoring Firm Hired by Building	Owner (8		ASCI		Nama	of Abatement Con		,	-		
g and a g	within (c	,	7.00	a ru,	A. M	or Abatement Con lac Contracting	ingcior (a)		٠		
Street Address				************		Address Lowell Road					
Cily, State, Zip Code						tate, Zip Code					
						Rock, N.J. 07	452				
Project Manager for Monitoring Firm	-		Telepho	na No.		ione No.	License	No.			
Start Daje (10)	Sahadu	letel Cou	malaliaa	Date (11)		262-5841	00156				
4/19/13		22/		Date (11)	Ome	of OSHA Monitor ga Environme	ntal Services	nc.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	E-1
Occupancy Status During Abatement (Che	ck Only O	ne)			Street .	Address	 				-
Facility Closod/Vacated During Entire Abatement Performed Outside of Nora Other - Describe:	Period of rral Facilit	Abater y Houn	nent s		City, St	Huyler Street					
Scope of Work (Check All That Apply)					Hack	kensack, NJ 07	606				
S ≥3 sfor≥3 if S160 sfor≥260 if	- I	Renova				Mini-Enclosure Glovebag Proc	nt with Negative edure (*) and Non-Fria			е	
		Locat Normal								emen rpe	1
Location of Asbestos-Containing Material (ACM)	Usa	ed Sole	ly by	De Asbestos Cont	scription :		Amount		1 '3	T	T
TO BE ABATED In Facility		intena todial S		(i.e. Ihemnal	systems	Insulation,	(Specify:	20	70	Encapsulate	9
(13)		(12)		othern	cing. VAT niscelland	eous)	SF or LF)	Remove	Repair	apsu apsu	Endosure
	Yes	No	NVA					2H	-	ם	ត
BASEMENT			75	P	PE		100 LF	X	-		
			- 51				W	1			
						-					1.5
Name of Registered Waste Hauler	للمسلم	IN	JDEP Wa	ste Cubic	Varde	Mama of D	egistered Landfill				
Rovic Transport		Н	euler ID 1 0785				Bethlehem La		Con	D.	
City, State		ــــــــــــــــــــــــــــــــــــــ		-11	al/Data	City, Stale			- T-1		
Riverdale, New Jersey 07457				+4-110	1111	J. Mothins	SHI DA TONKE				
Riverdale, New Jersey 07457 Completed by	Title	_		7/1°	1/13 o	Bethlehe	em, PA 18015	_/	1	51 /A 15	

		Name	of Building (Owner/Operator	(2) 1 d Fe =					
	\dashv	Street	Address	VID N	WALL LINE	25 Air 10: 313				
		14	6 Hu	ONTGO	HERY	ST				
	-	City, S	tate, Zip Co	de .	 	ED SWITTED				
		BL	00HF	ELD .	NJ. O	2003111G			1155-623	
ng		Name	of Contact			a Atombar				
		FACI	LITY INFOR	RMATION					i.e	
ce (3)			•		Type of Facility	(4)				
11300000			· · · · · · · · · · · · · · · · · · ·		☐ Subchapter 8	(Other than K-12)				
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					1800	2	14.3	9		
	1			STATE USE	Current Use (P	rior if being demolishe	d)			
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er .	ASCM	No.	1	Name of Abaten	nent Contractor (S	9)				
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						T 07601				
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v one)	/				V 11 011 011				dine.	
		-			ler St					
of Adal Billy Hou	ement urs		. 1	City, State, Zip C	Code				_	
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ls	Locat	ion		Q NOIP	Exemples () and	I NOT TIED IS THOUSE	-	111-10		nt
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Ma	intena	nce/	Asbesto	s Containing Ma	aterial (ACM)	Amount (Specify	20	_	Enc	5
				surfacing, VAT	or .	SF or LF)	130	ê	Pos	Enclosure
	(12)		111	other miscelland	eous)		2	=	late	150
Yes	No	N/A	ly a ba		a Green de Lance					-
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		1	-			60 LF	Y			Г
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		Waste !			Name of Regi	stered Landfill	1100	-	-	-
	1000000	9		Waste / 1/2	Minerva	Enterpris	es			
076	01			Disposal Date	City, State Waynes	ourg , Oh				
070	01	Yie Ka		1 1	1	Da	te ,	,		_
				Signature /	سرصاف		1/22	1.	-	
	Ter Ter Tompleter State	Telepho Telepho Telepho Telepho Maintena Custed Norma Used Sole Maintena Custed (12) Yes No	County Name FACI County Name FACI County Name FACI County ONLY ASCM No. Telephone No. Telephone No. Telephone No. Telephone No. In Abatement ity Hours Is Location Normally Used Solely by Maintenance/ Custodial Static (12) Yes No N/A A NJDEP Waste I ID No. 17109	Street Address AG Manne of Contact FACILITY INFORM City, State, Zip Co BLOOM FR Name of Contact H. N. FACILITY INFORM County Code (7) (1) ONLY) Telephone No. Telephone No. Telephone No. If Abatement Intelligible Hours If Renovation Demolition Is Location Normally Used Solely by Maintenance/ Custodial State (Le., 1) NJDEP Waste Hauler ID No. 17109 07601	Street Address AC MONTGO City, State, Zip Code BLOOUTIELD Name of Contact AL. NATIE FACILITY INFORMATION Ce (3) County Code (7) (STATE USE ONLY) ASCM No. Name of Abaten Best R Street Address 450 S. City, State, Zip C Hacken Telephone No. 201-329- Disposal Date (12) Name of OSHA Omega En Street Address 280 Huy City, State, Zip C South H Benovation Demolition Street Address City, State, Zip C South H City, State, Zip C South H Benovation Demolition City, State, Zip C South H City, State, Zip C So	Street Address City, State, Zip Code	Street Address AGO MONTGO WE RY ST City, State, Zip Code BLOOMELD NJ. 07093 MG Name of Contact M. NATIE FACILITY INFORMATION OR (3) County Code (7) (STATE USE Current Use (Prior if being demolished Normes, etc.) To Street Address 450 S.River St City, State, Zip Code Hackensack, N.J. 07601 Telephone No. Tel	Street Address ASCM No. Name of Contact ASCM No. Name of OSHA Monitor Telephone No. Teleph	Street Address ACHITY INFORMATION Cet (3) Cet (4) Cet (4) Cet (4) Cet (5) Cet (4) Cet (4) Cet (4) Cet (4) Cet (5) Cet (4) Cet (7) Cet (7) Cet (7) Cet (8) Cet (7) Cet (8) Cet (9) Cet (8) Cet (8) Cet (9) Cet (9) Cet (10) Cet (10	Street Address AC WONTGO WE'RY ST City, Strate, Zip Code DIODWACLD NJ. 007003116 Name of Contact We'l' NAME FACILITY INFORMATION OR (3) Type of Facility (4) Subchapter 8 (Other than K-12) Subchapter 9 (Other than

		2		
	-	1	m ()	1
1.1	A	N	11	1
CA	11	1	100	-

Date of Notification (1) 04/22/13	-	Name of Felicial	Building n Colle	Owner/Ope ge	erator ((2) ['i	A CZ	កាបៈ តិ					
Agencies Notified Type Notification Fig. 1. Type Notification I provided in the provided in	on			uth Ma	in Street	å j:	\$ 50 & 1	ins of ICERS	JAANOL MG		t		
X DOL Amendme	ent #	_	City, Stat Lodi, N										
➤ DOH justification ➤ DCA Cancellat			Name of Richard		ccio, Jr., S	Sen.	Dir.of	Facilitie	Telephone N	umber		2 15 2	
			FACIL	LITY INF	ORMATION	V .							
Name of Facility Where Abatement is Ta Old Library-Building 7 - Felician			erford C	ampus				of Facility (School (K-1	78				
Street Address 223 Montross Avenue				2010					8 (Other than K- private & commer		dings	hom	es,
City (5)							Squar	e Feet	# of Floors		Bldg. A	\ge	
Rutherford							50,0		3		0+		
County (6) Bergen			County C)	-	Curre	nt Use (Pri	or if being demoli	shed)			
Name of Monitoring Firm Hired by Buildir McCabe Environmental Services			00118					tement Cor ontractin	and the second s				
Street Address 464 Valley Brook Avenue						Street / 163 S		s ant Aver	iue				1
City, State, Zip Code Lyndhurst, NJ 07071								p Code 07013					
Project Manager for Monitoring Firm Mr. James Ruff	Mr. James Ruff							o. 281	License 01099	No.			
Start Date (10) 05/06/13	ed Cor	mpletion [Date (11)				A Monitor onmental	Laboratories	LLC				
Occupancy Status During Abatement (Ch	eck Only On	ie)	1911		4.5	Street /		7				17	
Facility Closed/Vacated During Enti Abatement Performed Outside of No Other – Describe:	e Period of A ormal Facility	Abaten Hours	nent s		C	City, St	ate, Zi	e 22 We	st	17.1			
Scope of Work (Check All That Apply)						Unior	n, NJ	07081					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ENGINEERS .	Renova Demolit				×	Min Glo	i-Enclosure vebag Pro				Α.	
	Is	Locat	ion				1401	rexemple	a () and reon-rin	1000110	Abat	emen	ıt
Location of	l N	Normal	lly		Descr	ription	of				T	уре	Т
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole intena todial s (12)	nce/ Staff?		stos Contair thermal sy surfacin other mis	stems	insula Г, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
	Yes	No	N/A										1
Ground Floor		X	1000		loor Tile	200	Jan 1995 S. J.	2 12 h	15,200 SF	X	100		1
1st Floor	-143 - 155	X	1	10	loor Tile				1,750 SF	×	1,1=		L
2nd Floor	W X 2 C W 1 = 1	X	1.5%		loor Tile			-	2,500 SF	x		r) e	+
Throughout Building Name of Registered Waste Hauler	X	JDEP W		Pipe Join Cubic Ya	*It will read	uatio		150 LF Registered Land	X FIII	184			
Service Transport Group, Inc.	- 1	lauler ID I		of Waste				a Landfill					
City, State New Castle, Delaware					Disposal	Date		City, Stat	e sburg, Ohio	ye sa	3 A	/ NES	10
Completed by Dimo Golcev	Title Gene	Title General Manger					1	(1)		Date 04/22/	13		
ASB-41 (R-06-08)	£ 9// /		d.	Do not	t use t	his form for	asbestos licensu	ıre exer	npted	activ	itie		

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) 4/22/2013 Agencies Notified Type of Notification					Name of Buildir	g Owner/Ope A to 2	erator (2) Z Site Contractors	, Ino. 100	u	21	54	2
Agencies Notified [x] EPA [] DEP	[] Initia	al Notific	tification		Street Address City, State, Zip	940 P	ark Avenue	35 / 35 / Extreme	9/10.	30		
[x] DOH [] DCA	justi	rgency (i fication) cellation	including		Name of Contac Irvir	19,2500000000		Telephone Number	100	-		
				FAC	ILITY INFOR	MATION					-	
	oatement is Takin idence	g Place ((3)				Type of Facility (4	School (k-12) Subchapter 8 (or	ther tha	nk-12)		
Street Address 43 1	2 th Street			15,5			[x]	Other (i.e., priva		TO COLUMN TO STATE OF THE STATE	cial bui	ldings,
City		Count	7 N/A		County Code (7) (STATE USE ON	LY)	Square feet 1000 sf	# of Floors		g. Age (50	
Lakewood		Ocea	an				Current Use (Prior Reside	er and a series in the contract of the series of the serie)			
[[전기 시간 이 프리크 레크 () 전 : [] [] [] [] [] [] [] [] [] [ASCM No.	Name of	Abatement Contracto		Inc			
Street Address	ate, Zip Code					Street A	ddress	Route 9, Unit 61				
City, State, Zip Code	State, Zip Code					City, Sta	te, Zip Code	River, New Jers		755-1	271	
Project Manager for Monit	ect Manager for Monitoring Firm Telephone No					Telephor 732-34	ne Number	License N 00624				100
Scheduled Start Date (10) 4/22/13				-	ion Date (11)		OSHA Monitor	.L. Analytical				
[X] Facil	4/22/13 4/23/13 Occupancy Status During Abatement (Check only one)					Street Ad	1056 S te, Zip Code	Stelton Road	ey 088	54		
L .	that apply) For≥3 If sf or≥260 If		[] [x]	Renova: Demolit		[] [] [x]	Mini-Enclosure Glovebag Proces	nt with Negative Preduce dure *) and Non-Friable		ure		
					1				Abat	ement	Туре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Is Location Normally used Solely by Maintenance/Custod Staff (12) YES NO N/				sed /	(i in	Descriptions bestos-Communication (Ale., thermal substitution, substitution, substitution, substitution (AT, other miscellar)	ntaining .CM) systems rfacing,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R E
Exterior			X		-Asbestos sid	ing	The state of the	1200 sf	X			
												1
	Seri Proposer	1 12		1 = 1 = 1								4.
Name of Registered Waste Guardian Cor		1	NJDEP Was 2	0223	3	ards of Wast	T.R.R.F.	ered Landfill				9 (g) .
City, State Toms River	New Jersey					City, Sta	ate own, Pennsyl y ani	a			853	Emily S
Completed by (Print or Typ Nicholas Fern	, New Jersey 4/24, ype) Title			1334 1 13	Signature	Tich	J 12	1	Date 4/22	2/2013	er serio	losso USI n

NOTIFICATION OF ASBESTOS ABATEMENT

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

Pr. 9								0.				
Date of Notification (1)	April 22, 2013				Name of Build		perator (2) e Jenkins	2013 APR 2	di	213	43)
Agencies Notified [X] EPA	[x] Initia	ıl Notific			Street Address	27 G	eorge Street	47/28 n	ANI	7:5U		
[x] DOL	Ame	ndment	#		City, State, Zi		chen, NJ 08840	i "CENO)	NG A	01		
[] DCA	020 020				Name of Cont Sto	act eve Jenkins		Telephone Number	or _	_		
				FAC	CILITY INFO	RMATION						
		g Place	(3)		-		Type of Facility	School (k-12)		1.12)		
Street Address 27	George Street					*	[x]	Subchapter 8 (Other (i.e., pri homes, etc.)				ildings,
City	DEP					7) ONLY)	Square feet 2000	# of Floors 2		g. Age	60	
	Metuchen Middlesex te of Monitoring Firm Hired by Building Owner (8) Guardian Contracting, Inc. tt Address 1889 Rte. 9, Unit 61 State, Zip Code Toms River, NJ 08755 tet Manager for Monitoring Firm Telephone 1						Resid	or if being demolish dence	ed)			
	acies Notified EPA					Name of	f Abatement Contrac	tor (9) dian Contracting	or Inc			
Street Address	7		ic.			Street A	Address	Route 9, Unit 6	7			
City, State, Zip Code						City, St	ate, Zip Code	s River, New Je		755-1	271	
Project Manager for Mon	DOL						one Number 49-9932		Numbe			
Scheduled Start Date (10))		Scheduled	Complet	tion Date (11)	Name o	of OSHA Monitor E.M.	S.L. Analytical				
[x] Fac	cility Closed/Vacate	d Durin	g Entire Per			Street A	Address	Stelton Road				
		Outside	of Normal 1	Facility F	Hours	City, St	ate, Zip Code Pisca	taway, New Jer	sey 08	854		
[x] >3	sf or ≥3 lf		[x]	Renova		[[x	Mini-Enclosur Glovebag Proc			lura		
[] 210	50 SI OF 2200 II		L J	Demon	ition	L] Non-Exemple	() and NoiFriaoi	e Floced	iuie		
									Aba	tement	Туре	
Asbestos-Containing N <u>TO BE ABA</u> in facilit	Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Solely by Maintenance/Custon Staff (12)					Descripti Asbestos-Co Material ((i.e., thermal insulation, st VAT, other miscel	ontaining ACM) I systems urfacing, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R
					Asbestos r	ipe insulation	on	75 lf	X	100		10.00
Dascinett A					1					-	-	
				1		1				1 22	-	
					1					Contract or		-
		1		te Hauler	r ID No. Cubi	c Yards of Wa	ste Name of Reg	stered Lardfill			-	
City, State Dispos				sal Date	City, S	tate				C 14-4-		
		Title		5/8/1	Signature	Tully	town, Pennsylva	nia	Date		0 -211	
	, State					1/05	1 100	1		2/201	3	

NOTIFICATION OF ASBESTOS ABATEMENT

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

							2	100			
Date of Notification (1) April	22, 2013			Name of Building		erator (2) O Rosetto	20/37A	56	11	180	
[x] EPA [] Initial Not			Street Address	211 N	orth Ocean Aven	ue /	ेंड	AMU	50	
[x] DOL	Amendme [Emergency	nt #i y (including		City, State, Zip Co		le Park, NJ 08752	ET/05/		1	50	
[x] DOH [] DCA				Name of Contact Denis	e Rosetto		Telephone Number	1981	3 110	?	
			FAC	CILITY INFORM	IATION		7				
Residence		e (3)				Type of Facility (4)	School (k-12) Subchapter 8 (o	thar the	ın le12)		
Street Address 1882 Con	npass Court					[x]	Other (i.e., priva				ldings,
City	Co	unty (6)		County Code (7) (STATE USE ONL	Y)	Square feet 1500 sf	# of Floors	Bld	g. Age	60	
Toms River	A				-	Current Use (Prior Reside)			
	agencies Notified Type of Notification		4	ASCM No.	Name of	Abatement Contracto	r (9) an Contracting,	Inc	7 ·		
Street Address					Street Ac	ldress	Loute 9, Unit 61			d	
City, State, Zip Code					City, Star	te, Zip Code	River, New Jers	10277	755 1	271	
Project Manager for Monitoring F	'irm	Telephone N	Number		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e Number	License N			2/1	
Scheduled Start Date (10)	bject Manager for Monitoring Firm Telephone Note the duled Start Date (10) 4/22/13 Scheduled Code 4/23/13					9-9932 OSHA Monitor	00624				
	ent (Check only		3		Street Ad		L. Analytical				
	57		od of Al	patement	Sueet Au		telton Road				1
		de of Normal Fa	acility H	Iours	City, Stat	e, Zip Code					
[] Other – Des	cribe						way, New Jerse	ey 088	854		
Scope of Work (Check all that app	oly)	A SHEET OF			[]	Full Containmen Mini-Enclosure	t with Negative Pre	essure			
[] >3 sf or ≥3 l	f	[]	Renova	ation		Glovebag Proced	lure				
[X] ≥160 sf or ≥	260 lf	[x]	Demoli	ition	[x]		*) and Non-Friable	Proced	ure		
							T	Abat	ement	Type	
		Is Location	J.	a main e a	Description	n of				T	T .
			ed	Ast	estos-Con	taining	Amount	R E	R E	E N	E N
					Naterial (A		(Specify SF	M	P	C	C
	Ma		stodial		, thermal s		or LF)	0	A	A	L
			18	inst	lation, sur			V	I R	PS	O S
(13)		(12)		oth	VAT, or er miscella			A	K	U	U
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Is Location Normally use Solely by Maintenance/Cust Staff (12) YES NO		N/A	Out	er miscena	neous)		L	-	L E	R E	
		-	Asbestos sidin	g		2000 sf	X			-	
The second secon		7.000	-				1		-32	-	909
	4				· ·					1070 Marie	
	7.5									1	55
Name of Registered Waste Hauler.					rds of Waste		ered Landfill	77.	100	a track	
	ng, Inc.	203		2	Tay a	T.R.R.F.					
City, State Dispos Toms River, New Jersey 4/24/					City, Sta	te wn, Pennsylvania	1.7				
Completed by (Print or Type) Nicholas Fernicola	Title	e ject Manager		Signature	hol	10.		Date 4/22	2/2013	3	

208									5			
	1		CATION	te of New Jers OF ASBESTO to NJAC 8:60 a	SABATER			20	13 _A	PR 2	查 ///	
Date of Notification (1) 04/23 3	í		Name of	Building Owner	r/Operator W	Mornat	NÐ	45 37	- 1	70		10:5
gencies Notified Type Notification			Street A	ddress (O	19/	Mornait	4 RL.		Z L	ICE	NS/N	MOU
Amended Amendment #		_[City, Sta	te, Zip Code Ĉd	lews	d ~-	1 usto1					
DOH justification) DCA Cancellation	nocomg		Name of	Contact	ęh		Tel	-			20	
ame of Facility Where Abatement is Taking	Place (3	5)		LITY INFORMA	TION	Type of Facility	(4)					
	oth	Ro				Other (i.e.	12) er 8 (Other than K-1 private & commerci		dings	, home	es,	
Sity (5) Lakewood	/1	•				etc.) Square Feet	# of Floors	T	Bldg. /	Age	-	
County (6) At O Clan			County (Code (7) USE ONLY)		Current Use (Pr	ior if being demolis Asuse	hed)				
Name of Monitoring Firm Hired by Building C	Wner (8)	77 3 h	ASCN	No.	Name	of Abatement Co	ontractor (9)	2.00	al	\$		
Street Address	112				Street	Address ()	e Dave	, c	I	-,		
ity, State, Zip Code	or 2004				City, S	tate, Zip Code	1 ~5	08	30	1	- 1	
Project Manager for Monitoring Firm	10 × 90	T	Telepho	ne No.	Teleph 732	one No. 3 - 9.	_ / License,	20	9	7.		
tart Date (10)	Schedul	1 .	pletion	Date (11)	Name	of OSHA Monito		Rs	٠٥١٥	nal	دا	
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P			nent		Street 6	Address H	Due (3				
Abatement Performed Outside of Norm Other – Describe:						ate, Zip Code	LN 1	00	PJe	7		
Scope of Work (Check All That Apply) J ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova				Mini-Enclosus Glovebag Pro				re		
		Locati								ement ype		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use	d Sole intenar todial S (12)	ly by	Asbestos Co (i.e. therm sur		aterial (ACM) insulation, I, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A	2			10		1	ate	3	
	44			p.pl	エクス	ulah'en	300 1	1				
							1000					
Newale Charing	Inc	1 14	JDEP W auler ID		ic Yards Vaste	Name of	Registered Landfill Physical TE	51				
City, State Mewart Co			07	Disp	osal Date	13 City, Sta	the lener P	24		117		
Completed by . // 1 2 m	Title		er		Signature	100	/ DE	ate	1-	21.0		galan in



Date of Notification (1) 04-22-2013					uilding /ickha	Owner / Operato	r (2)	2013 APR 25				
Agencies Notified Type Notification				Addi			-	"" (5	411111:	511		
☐ EPA	•	1000			m Ave	nue	Ř		,	V.G		
☐ DEP ☐ Initial		C	ity, S	State	& Zip C	ode	to the second	& LICENS	HIMI	11	Servicio de	
DOL Amended	t	N	At. H	olly,	NJ 08	060		- LIVE MOI	METT	11.	- 10	
☑ DOH ☐ Emergen ☐ DCA ☐ Cancellar		1000			ontact				Telepho	ne N	umb	er
DCA Cancella	tion	L	.inda	a Cas	shan			1			_	
			FA	CILIT	Y INF	ORMATION				1 6		
Name of Facility Where Abatement i	s Taking Pla	ce (3))			Type of Facili						
Residential						School (3	than 10 40)				
Street Address							oter 8 (Other	commercial buildin	as hom	200	to)	
35 Bartram Avenue						Square Feet			Bldg. Ag		10.)	
City (5)	unty (6)	TCol	inty (Code	(7)	2,508		2		30 yr	•	
	rlington	1000	irity (Joue	(1)			g demolished)		JU yı	3	
Mt. Holly, NJ 08060	mington					Residential		g demonstrea/				
Name of Monitoring Firm Hired by Bi	uilding Owne	r (8)		AS	CM No			tractor (9)				-
Health & Safety Services, LLC				1.	117			nt Group, LLC				
Street Address	***************************************					Street Addres						
318 12 th Street		1				2115 Hamil		te 202				
City, State & Zip Code Hammonton, NJ 08037						City, State & Trenton, N.						
Project Manager for Monitoring Firm	17	Telen	hone	Num	her	Telephone N		License I	Number	200		
Mr. Jim Proctor		309-7				609-977-61			0118			
	eduled Comp	pletio	n Da	te (11	1)	Name of OSI	A Monitor					
05/06/2013		5/11/2		3		J&S Enviro	nmental L	aboratories Inc				
Occupancy Status During Abatemen	t (Check only	y one)	25		Street Addres		1				
Facility Closed/Vacated Duri	-		of Ab	atem	ent	2333 Route						
Abatement Performed during	38	urs				City, State &	207					
Describe: 7:30 am to 5:3						Union, NJ (1/083					
Facility Occupied During Aba Scope of Work (Check all that apply		y ny a	بسس									
Scope of Work (Check all that apply	,						⊠ Full 0	Containment with f	Negative	Pres	sure)
≥3 sf or ≥3 lf		\boxtimes	Rer	novati	ion			Enclosure				
≥160 sf ≥260 lf			Der	molitic	on		Locate	e Bag Procedures				
				- 3				Exempted and No				
Location of			ocat			Description		Amount	Ab	atem	ent T	ype
Asbestos-Containing Material (ACM)			olely	Used		Asbestos-Con Material (A		(Specify SF or LF)			m	
TO BE ABATED				ice oi		(i.e., thermal s		0. 0. 2. /	Removal	N.	Encapsulate	Enclsoure
in Facility				Staff		insulation, surfac	cing, VAT		Non	Repair	psu	Sot
(13)		. 1	(12)	T 81/8	4	or other miscell	aneous)		<u> </u>	-	late	Te
		Yes	No	N/A	-		<u> </u>	40515	54			
Basement / Crawlspace			H			Pipe insula		125 LF		H		
Basement / Crawlspace	Margaretta (Margaretta (Margaretta (Margaretta (Margaretta (Margaretta (Margaretta (Margaretta (Margaretta (Ma		H		17.00	Floor tile & I	Wastic	150 SF		1	님	H
the transfer and the second second second second	Chair Ceann Loo		H	부님	-			a barren men	++	H	H	H
		H	Η	H					ᅱH	卄	H	H
		H	Η	H	-				$\dashv H$	H	H	H
Name of Registered Waste Hauler		<u> </u>	N.	IDEP	Waste	Cubic Yards	Name of R	tegistered Landfill				
Traile of Registered vvaste Fladici			1000		ID No.	of Waste						
Robinson Waste Disposal Serv	rice, Inc.		17	7304		TBD	Grows La	andfill -	11 4 - 14	4.4	4.00	
City, State	or desire		1.7		14180	Disposal Date	City, State					15
Voorhees, NJ	rae Harpony Maria	-115	111	AVO.	N. Ti	TBD	Morrisvil	le, PA		-1.575	254.00	
Completed By (Print or Type)	May . Mage y	1111		tle	, ,	Signature	Constant The	THE PERSON NAMED IN	Date		0.4.0	
Mr. Brian Haney			P	resid	ent	1	1		04/2	23/2	U13	
						1	A/		î.			



Date of Notification (1) 4/23/13					perator (2		-			No.					
	[- N 100 70 -	*				(Priva	te Hom	1e)		_ 2	Ala Apr			15.6	
Agencies Notified EPA	Type Notification			Street Ad 17 Wes	idress st Nava:	sink				£.	- 717 M	3	AM	l):	in.
DEP X DOL	Amended Amendment				te, Zip Co ton NJ (Algapa & Lici	3,0) _M ;	Esen	G.
DOH DCA	Emergency justification) Cancellation		1.23	Name of Mina	Contact					Tel	ephone Ni	- AA	"/G	· U	
			_	FACIL	ITY INFO	DRMATIC	NC	ST		-					
Name of Facility When		g Place (3)					1	Туре	of Facility (4)					
Mina Schaffert (F	rivate Home)								chool (K-12						
Street Address 17 West Navasini	<							×	Subchapter (Other (i.e. prote.)	ivate 8	er than K-12 & commerci	i) al build	dings,	home	es,
City (5) Tuckerton NJ 080	987	7.0					100		e Feet	# 01	f Floors	10000	ldg. <i>A</i> 5+	ge	
County (6) Ocean	A 10			County C	ode (7) ISE ONLY)			Currer Hom	nt Use (Prio e	r if bei	ng demolish	ed)			
Name of Monitoring Fi N/A	rm Hired by Building	Owner (8)		ASCM	No.		Name of		ement Con	tractor	(9)				
Street Address							Street A		_	hat Z. i					
City, State, Zip Code						THE STATE OF	City, Sta	ite, Zi	p Code	04	N. N. S.	-7,0			
Project Manager for M	onitoring Firm		Т	Telephor	ne No.	Witte	Telepho	ne No		91	License N	0.			
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Start Date (10) 5/1/13		Scheduled 5/13/13	Com	pletion [Date (11)		Name of Same		A Monitor						
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PAGE 1 OF 2

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DOH justification)		140000			LUSSE	,					1
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Name of Monitoring Firm Hired by Building O	wier (d)		ASCIVI I	vo.		Mac Contracting					
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City, State, Zip Code				m, 149,71 (+)		State, Zip Code n Rock, N.J. 07	452				
Project Manager for Monitoring Firm		T	elephone	e No.		hone No. -262-5841	License No. 00156				
Start Date (10) 3/26/13	Scheduled		pletion D	ate (11)	Name	e of OSHA Monitor lega Environme	ntal Services Inc				
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R. McDonald	Pres	siden	I	1+2-1+2-12-12-14-1 24-1	1//	- W Park	9	1.1		//	_

PAGE 2 of 2

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Project Manager for Monitoring Firm	*11.78.1.1						mitor					
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PAGE 1 OF 2

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

Check # 8116 #2 / 8146

Date of Notification (1) 3/12/13		N	ame of E	Building Ov	vner/Operate	or (2) 2UIS 1	TIONS	ANLLC/HI	AN.	OVE	en	
Agencies Notified Type Notification		s	treet Add	ress For	T LEE	ROAL	000	10: JR106	ED	ALL	5, 4	4
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City, State Riverdale, New Jersey 07457		74.9			Disposal Dis	/13 ou		hem, PA 18015			1	
Completed by R. McDonald	Title Pres	ident			Signa	2M	Donal.	De		112	11	3

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PAGE 2 of 2

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

20/3 APO

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Name of Facility Where	Abatement is Taking	Place	(3)			Type of Fac	cility (4)				-	
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451 Ridge Road											eic.)	
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City (5)	County (6)	C	ounty	Code	(7)	5000			Inkno	wn		
						Current Use	(Prior if being	demolished)				
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Street Address						Street Addre	ess	Hayo ya hara				1.1
						PO Box 13	314					
City, State & Zip Code						City, State 8	Zip Code	PER				
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Project Manager for Mon	itoring Firm	Tele	phon	e Nun	nber	Telephone N		License N	umber			
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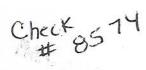
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City, State	Waste Hauler				Cubic Yards of Waste Disposal Date	Name of Rog	istered Landfill S. L	1	autorio		
COLTI NO	ALL I	lo OPS	mh	ß.	Signature Signature	r Gal	Date 4/-2	3	13		

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Name of Monitoring Fi	rm Hired by Building	Owner	T	ASCM	No.		nent Contractor	(9)		THE RESERVE		* *******************************
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Date of Notification (1) 4/21/13					•	wner/Operate (Private)			28	13 APR ;	بنو		1	
Agencies Notified	Type Notification		1	Street Ad 606 S (dress Green S	treet			4 3 3	13 APR	3 1/4	11/1/	: 50	
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Name of Facility Where Ralph Zaccone (F		Place (3)						of Facility (4 School (K-12	2)					
Street Address 606 S Green Stree	et						×	Subchapter (Other (i.e. pretc.)	rivate	& commerc	cial buil			es,
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Street Address				Tampi			Street Address PO Box 329							
City, State, Zip Code				20.2				State, Zip Code st Berlin NJ 08091						
Project Manager for Mo	Project Manager for Monitoring Firm					100000	ephone N 6-753-9			License 00727	No.			
Start Date (10) 5/3/13		Scheduled 5/10/13	Com	npletion [Date (11)		ne of OSI me	HA Monitor						
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Date of Notification (1) Agencies Notified Type Notification Street Address Doll Amended Amended Amended Amended Amended Doll Amended Amended Amended City, State, Jo Code Cancellation Name of Facility Where Abatement is Taking Place (3) Street Address City State, Jo Code Octor (1) City State, Jo Code Octor (1) Street Address County (6) Amended Amended Amended Amended Amended Amended Cancellation Name of Facility Where Abatement is Taking Place (3) Street Address County (6) Amended Accounty (6) Amended	Date of Notification (1)			-т	Name of	Building Owner/0	Operator	(2)	2012		7.5	0.0	
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Project Manager for Monthrightim	City State Zip Code	DOK J					City St	U. DOX	00 P				
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Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) 23 sf or 23 lf 2160 sf or 2260 lf Demolition Location of Abatement Procedure Location of Abatement With Negative Pressure Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Pipe Trisulation Name of Registered Waste Hauler EPC Technologies Normally Name of Registered Waste Hauler EPC Technologies Normally Name of Registered Landfill Name of Registered Waste Hauler Normally Name of Registered Landfill Name		Commence of the Commence of th	4400	9230	13		Street	Address	nnologies		nc		
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code New Egypt NJ 08533					nent		- PROBREM - 1		337				
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Signature Sig							Ne	w Egypt	NJC	180	53	3	1
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Same of Registered Waste Hauler Signature Date Signature Signature Date Signature							***	Glovebag Prod	cedure	l= D			
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City, State New Egypt NJ Completed by Title Disposal Date City, State PA Signature Disposal Date City, State PA Date	FPC TO	hadagies			Car.		ste 2	Wast	e Manaco	ne -	t .	c F	A
New Egypt NJ 5-3-13 Mornisville PA Completed by Title Signature Date	City, State			-	1 /00	Dispos	sal Date	City, State	9				
Completed by Title Signature Date	New E	tarp		-	Control of	5	3-1	3 Morn			. 1	13434	1.0
	Completed by	Vac			+	S	Signature	-C.	Da		רו	12	2 V

		(Pu	rsuant to	NJAC 8:6	0 and 12:120	J)		2012.	**· ;		. Sys.		
Date of Notification (1) April 23, 2013				Building Ow Brothers	ner/Operator Inc. ((2) Check #	‡ 5790 _{, s}	2013 APR	5 A				
Agencies Notified Type Notification			Street Ad					25 17 7 7 c	. ""	11	: 51)	
EPA Initial DEP Amended Amendment #		-	City, Stat	e, Zip Code oro, NJ 0		(100A	SING	770	97	c.	
Emergency (in justification) DCA Emergency (in justification) Cancellation	cluding	_ -	Name of	La Company				Telephone	Number				
DOA Candidatori			FACIL	ITY INFOR	MATION								
Name of Facility Where Abatement is Taking Bayside State Prison Street Address	Place (3))		2		So St	f Facility (4 chool (K-12 ubchapter	2) 8 (Other than	K-12)				
4293 Route 47							ther (i.e. pi c.)	rivate & comn	nercial bi				s,
City (5) Leesburg					V.	3quare 20,00	0	# of Floors	et s	10	ig. Ag	je 	
County (6) Cumberland			County C	Code (7) ISE ONLY)		Curren Priso		or if being den	nolished)				
Name of Monitoring Firm Hired by Building O TTI Environmental	wner (8)		ASCM	No.			ement Con ironmen						1
Street Address 1253 North Church Street				· Interes	623	t Address Cutler	Ave.				5.5		
City, State, Zip Code Moorestown, NJ 08057					Map		de, NJ C					12	38
Project Manager for Monitoring Firm Michael Stocku			Telephor 856-84	ne No. -0-8800		hone No 3)755-0		Licen 0084	ise No. 42				
	Schedule June 3			Date (11)	Name EMS		A Monitor						
Occupancy Status During Abatement (Check	Only Or	ne)				t Address Haddo							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Work being performe	al Facility	Hours	2	ouilding	City,	State, Zip	Code	ersey 081	08				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renova Demoli				Mini	i-Enclosure					e	
		s Locat										ement pe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Norma ed Sole aintena stodial (12)	ely by ance/ Staff?	(i.e. tl	Descriptions Containing nermal system surfacing, Vother miscell	Material ns insula 'AT, or		Amount (Specify SF or LF		Removal	Repair	Encapsulate	Enclosure
Fleatric Chon	res	XXX		Svilve corr	Transite P	anels	1 1 1 1 1	100 SF		X	Ŧ		
Electric Shop Electric Shop	-	XXX		Pin	e Insulatio		as	9 LF		X			
Elec. Shop/Storage/Health Office	-	XXX	75 105 105	Т	Pipe Insu			38 LF			X		
	-	XXX			12x12 Oliv			600 SI		X		- 1	
2nd Fl. Library/Stage Name of Registered Waste Hauler			NJDEP V	Vaste	Cubic Yards	The state of	Name of	Registered L		- 100	1 %		-
Freehold			Hauler ID	100 000 000 000 000 000 000 000 000 000	of Waste 10		Grows	Landfill				4	
City, State Mount Holly, New Jersey 08060					Disposal Da 6-3-13	te	City, Sta Tullyto	wn, PA.	in the				
Completed by Christina Lynch	Title Office	се Ма	anager	to and seems to the	Signatu	MOD	8em	_	Apri		3, 20	13	Arrive

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2-12)

				(Pur	suant to	NJAC 8:60 and 1	2:20/1	N.J.A.C. 7	:26-2 .12)	DOL - 1	0 D	AY		
	otification (1):				lding O				-				7	
03/30/11 Agencies	Type Notificat		-	rk Boar Addre	d of Ed	ucation						1	-	
Notified	N Initial	225 C C C C C C C C C C C C C C C C C C		ar Lane	105016					APR 2	4 20	N. J		
□EPA	☐ Amended			State, Z		4				1/21/	Dell	-		
DEP	Amendment#: □ Emergency		Newar Name						Telephone	Munich D V	DDD	01/1	<u>_</u>	+
DOL	(including		ranic	01 001	itact.				Telephone	WATTER A	rrn	UVI	<u>.u</u>	_
P DOH	justification								E. Canada					
□DCA	13 Cancellation					FACILITY INFO	DMA	TION						
Name of F	Facility Where	Abateme	ent is 7	Γaking	Place (3			of Facility	(4):					
Street Add	dress:							hool (K-12)						
	Kinney Street								Other than K-	·12) ercial buildings, he	omes e	tc.)		
City/ (5): Newark	144.03	County	(6):		Count 07102	y Code (7):								
Newark		Essex			07102			19	49,049A	# of Floor	rs:			
								g. Age 🖟	15					
Name of N	Monitoring Firr	n Hired	hy Rui	ilding ()wner	ASCM No.:		rent Use : S	chool ment Contra	actor (9)				
	Company	ii Tiiica	oy Du	ilding (Juliot.	ABCM No.				30000				
Street Add	lrecc.		iita -			4		et Address:	Interprise	s, inc	-	-		
	e Headquarte	rs, 7 Pl	leasant	t Hill I	Road,		Suc	ct riddi css.		*				
							358	Broads	way, Sui	te 202				
	e, Zip Code:						City	, State, Zip	Code:					14 6
Cranbury	, N J 07104						Nev	vark, NJ	07104					
	anager for Mon	nitoring l	Firm:			Telephone No.:	Tele	phone No.		License No.:				
Kevin T	Lovely					732-390-5858		3) 485-4000		01017				
Start Date 04/25/13	(10):		hedule 1/30/13		pletion	Date (11):		ne of OSHA eriSci	Monitor:		i			
	Status During A				ne)			et Address:	-					
	Closed/vacated D					t		East 30th S						
☐ Abatement Describe:	nt Performed Ou	tside of N	Vormal	Facility	Hours			, State, Zip						17
Describe.							New	v York, Ne	w York, 10	016				
☐ Other Describe:														
Scope of W	ork (Check all th	nat apply)):		/			4 6 6	D Full C	ontainment with	Negat	ive Pr	eccure	
□≥3 sf or	$r \ge 3 \text{ lf}$				Reno	vation			Mini-I	Enclosure	rvegar	ilve I I	CSSUIC	-1
⊔ ≥ 160 st	$\overline{\text{or}} \ge 260 \text{ lf}$		2.75		□ Demo	olition			□ Non-E	bag Procedure rempted (*) and N	Non-Fr	iable F	rocedi	ire
				Locati		Do	script	ion of					ement pe	t
	Location of Containing Ma	terial	Used	ormal I Solel	y y by	Asbestos Cont	aining	Material	(ACM)		-	1	T	
Asocsios	(ACM)	iciai	Mai	intenai	nce/	(i.e., therma	l syste	ems insula VAT, or	tion,	Amount	R	7	En	En
20000000	BE ABATED			ustodia Staff?				llaneous)		(Specify	Removal	Repair	ap	clo
1	N Facility (13)			(12)						SF or LF)	val	Ħ·	Encapsulat	Enclosure
			Yes	No	N/A	- A.A.				24 6	***	-	-	
basemen				X		ceiling plastic				24 sq feet	X	-	-	
basemen	τ			X	-	Pipe insulation		-		6 to 9 ft	X		-	-
		-, -						-			-	-		
NI)				MIDE	P Waste Hauler ID	No:	Cubic Ya	arde	Name of Regis	otorod.	lande	11.	L
Name of F Newark C	Registered Was	ie Haule	er:		4506	i waste Hauter ID	140	of Waste		Tullytown Re.				
City, State		+		Dispo	sal Date	»:		City, Sta Tullytow		graffices.			. 12	
Completed	d By:	-			Title:		Signa		11/1	n Date:			22 42	
Samuel Ilo					Presid	ent	35	imned	Come	4/24/13	35	4		