State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification	(1) 4/27/12							Owner / Operato	or (2)	APR 30	2012			
Agencies Notified	Type Notifica	ation				Addr		ersity	Est to		- C 1E	1		-
EPA	Type Notifica	ation		17 BAYES				nceton Univer	sity F A Mac	Millan Bldg	-274	-		
	☐ Initia						& Zip (I I I	AMPRICA STREET	That &			1
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					FAC	CILIT	Y INF	ORMATION						
				(3)				Type of Faci						
	sity – Fires	tone Library	/					School (51 15					
Street Address									pter 8 (Other tha					
One Washington	Road								e. private & con	nmercial building	gs, hom	es, e	etc.)	
				race a service			- To mercus min	Square Feet	# of Floo	ors B	ldg. Age	Э		
City (5)	-	County (6)	C	oun	ty C	ode	(7)							
Princeton		Mercer						Current Use	(Prior if being de	emolished)			114	
								University	Library					
Name of Monitoring	Firm Hired b	v Building Ow	ner (8	(1)	-	ASC	CM No		atement Contrac	tor (9)		2000		
	ssociates, Inc. Address By Corporate Center 3 Terri Lan ate & Zip Code gton, NJ 08016 Manager for Monitoring Firm							AbateTech						
Street Address	of Monitoring Firm Hired by Building C Associates, Inc. Address Iey Corporate Center 3 Terri Lan tate & Zip Code Igton, NJ 08016 I Manager for Monitoring Firm Keehn							Street Addre						
	County (6) Merce of Monitoring Firm Hired by Building Contents, Inc. Address Ley Corporate Center 3 Terri Landrate & Zip Code Legton, NJ 08016 Manager for Monitoring Firm Keehn Liled Start Date (10) 10/17/11 Lancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of No Describe: Facility Occupied During Abatement							PO Box 25				8		
	Address Washington Road County (6) Merce of Monitoring Firm Hired by Building Cassociates, Inc. Address Iley Corporate Center 3 Terri Landiate & Zip Code Ington, NJ 08016 It Manager for Monitoring Firm Keehn Illed Start Date (10) 10/17/11 Inancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of No Describe: Facility Occupied During Abatement of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of						-	City, State &	Zip Code			6.7		
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Mike Keehn	e of Monitoring Firm Hired by Building C Associates, Inc. It Address Inley Corporate Center 3 Terri Land State & Zip Code Ington, NJ 08016 Ington, NJ 08016 Ington Address Ington I							609-265-21			0052	9		
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	DOH DCA Emergency Cancellation					1	•	EMSL Anal	lytical					
	DEP DOL Amended #7 DOH Emergency DCA Cancellation a of Facility Where Abatement is Taking Exton University – Firestone Librate Address Washington Road County (6) Merce Abatement is Taking Cathering Firm Hired by Building Cathering Firm Hired & Zip Code Indiana Manager for Monitoring Firm Keehn County (6) Merce Abatement Suilding Cathering Firm Keehn County (6) Merce Abatement Terri Land State & Zip Code Indiana Manager for Monitoring Firm Keehn County (6) Merce Abatement Suilding Cathering Firm Keehn County (6) Associates, Inc. In Address Inc. In Address Inc. In Address Inc. In Address Inc. In Address Inc. In Abatement Center 3 Terri Land In Manager for Monitoring Firm In Keehn County (6) Merce Introduction of Merce In Indiana Manager for Monitoring Firm In Indiana Manager for Merce In Indiana Matement In Indiana Manager for Manager for Merce In Indiana Matement In Indiana Manager for Manager for Merce In Indiana Matement In Indiana Manager for Mence In Indian					7		Street Addre						
					Aba	itéme	ent	108 Haddo						
	ct Manager for Monitoring Firm Keehn duled Start Date (10) 10/17/11 pancy Status During Abatement (Check Facility Closed/Vacated During Entire							City, State &						
								Westmont,						
Facility Occu	pied During	Abatement												
Name of the last o													V	
		1-37							Full Con	tainment with N	egative	Pres	sure	Э
\ \ ≥3 sf or ≥3 lf			X	F	Ren	ovatio	on .		Mini-End	losure				
≥160 sf ≥260) If		Ħ)em	olitio	n		Glove Ba	ag Procedures				
									Non-Exe	mpted and Non	-Friable	Pro	cedu	ıre
Lo	cation of		Is	Lo	cati	on		Description		Amount	Aba	tem	ent T	ype
		g				Jsed		Asbestos-Cor	ntaining	(Specify			Γ	Ť
			1	Sole		-		Material (A		SF or LF)	ایرا		ᄪ	m
			100000000000000000000000000000000000000			ce or		(i.e., thermal s			Remova	Repair	Encapsula	Enclosure
in in			Cus			taff?		insulation, surfactor or other miscell			OV.	oair	Sul	unsc
	(13).		Yes		2) lo	N/A		of other miscen	iarieous)		=		ate	O.
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				11	4		1			450 SF		井	H	ዙ
Mechanical Shaft				1	41	ᅵ	Pipe	e Insulation (Full	Containment)	150 LF		井	H	ዙ
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NAME OF THE PARTY												Ш	Ц	
Name of Registered	e of Registered Waste Hauler						Waste	Cubic Yards	Name of Regis	stered Landfill				
							O No.	of Waste						
AbateTech, Inc.							50	4	TRRF Landf	ill			200	
City, State							1 10	Disposal Date	City, State					
Lumberton, NJ						243		5/31/12	Tullytown, P	A				
Completed By (Print	or Type)	7 25			Title			Signature	-		Date			
Gwen Trumbetti					Opp	ps. C	oord.	-	. 17		4/27/	12		
									1/1/10					

ETS JOB # 3802/12 CHECK # 4	2512				AMENDM	ENT#'4
Date of Notification (1) 04/25/2012	Name of Buil Bed, Bath a			百度信	TWE	
Agencies Notified Type Notification	Street Addres					
DEP Initial Notification				APR 3	0 2012	19
☑ DOL ☑ Amended Notification ☑ DOH ☐ Cancellation	Name of Con				IT	elephone Number
DCA Sunscinction	Mr. John P			ASBESTUS (UNIKUL	-3-1
			TION	UVUN		<u> </u>
Name of Facility Where Abatement is Taking	2.0200000000000000000000000000000000000	Y INFORMA	e of Facility (4)		a - souther little to	National States
Bed, Bath and Beyond Property	Place (3)		School (K-12)			Water days and Table 1
Street Address			Subchapter 8 (Other than K-	12)	
Street Address						gs, homes, etc.
650 Liberty Avenue		- Fernand	are Feet	# of Floors		ldg. Age
City (5) County (6)	County Code (7		200,000	1		50+
	County Code (7		ent Use (Prior i	f being demoli	ched)	
Union	-		nmmercial O		sileu)	
	(0) 14004		ne of Abatemen		\\\	
Name of Monitoring Firm Hired by Building C ATC Associates, Inc.	wner (8) ASCI		ne of Abatemen Contracting		")	7.4
Street Address	0003		et Address	, 1110.		
1090 King Georges Post Road, Suite 7	706		Clay Street			
City, State & Zip Code	00		, State & Zip Co	ode		
Edison, NJ 08837			oklyn, NY 11			
Project Manager for Monitoring Firm	Telephone Number		phone Number		License No	umber
Pat Sisk	(732) 771-0051		-706-6300			00511
	Completion Date (11)	Nam	ne of OSHA Mo	nitor		
4/25/2012	12/31/12	Env	rironmental T	actics, Inc.		
Occupancy Status During Abatement (Check			et Address			
Facility Closed/Vacated During Entire			Broad Street			
Abatement Performed Outside of No	rmal Facility Hours -		, State & Zip Co			
Describe:			awan, NJ 077	4		
- Commence and annual management that the state of the st	acated: - Working I	Hours				
from 5:00pm	- 1:30am					
Scope of Work (Check all that apply)			☑ □ □ □ □ □		Manativa D	rocouro
Demolition Renov	vation		Consumer Con	tainment with	Negative P	ressure
☐ Large Project				g Procedure		
Quantity is ≥ 3 SF or ≥ 3 LF ACM				Non Friable	Electric (Pabla
Quantity is ≥ 160 SF or ≥ 260 LF AC					- Company of the Comp	Abatement Type
Location of Asbestos-Containing	Is Location Normally Used		escription of stos-Containing		Amount Specify	(Specify: Removal,
Material (ACM)	Solely by		aterial (ACM)		are Feet or	Repair,
TO BE ABATED	Maintenance or		thermal system		ear Feet)	Encapsulation or
in Facility	Custodial Staff?	insulation	on, surfacing, V	AT		Enclosure)
(13)	(12)	or othe	er miscellaneou	s)		¥9.
)/AT	400	000 CE	Damaval
1 st Floor	No		VAT		0,000 SF	Removal
2 nd Floor	No		VAT		,000 SF	Removal
2 nd Floor	No		e Insulation		00 LF	Removal
Name of Registered Waste Hauler	NJDEP Waste Ha		Cu. Yds. of W			ered Landfill rprises, Inc.
Tri State Transfer	19551	<u> </u>	3 Disposal Date		State	prises, iiic.
City, State			TBD		nesburg,	ОН
Bronx, NY Completed By (Print or Type) Title			Signature	0 1/10		7 Date
	JECT EXECUTIVE			12/11/1/		04/25/12
The solution			1	0		

ate of Notification	(1)	Name o	f Building C	Owner / Operator (2 nship Board of E	ducation E		EM	Į.
	4/26/12	Street A	ddross	isiip board or a	11551			
gencies Notified	Type Notification	Street A	Torro Ac	Iministration Bld	a. County Rou	te 516		
] EPA		Patrick	to 9 7in C	odo	IU LI API	3 0 2012		
DEP		City, Sta	ate & Zip C	00e	dear tens		Second P	
⊠ DOL	☐ Amended		an, NJ 07	141		Tele	phone Nur	nber
⊠ DOH	☐ Emergency		of Contact		ASBE	STOS CONT		
D DCA	Cancellation	Mr. Fra	ank Frazzi	itta		LICENSING =		
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(1) S			ILITY INF	ORMATION	(4)			1
ame of Facility W	here Abatement is Taking P	lace (3)		Type of Facility	(4)	ADTER 8		
alle of Facility W	9			School (K-1	2) NON SUB-CH	AFILIO		
				Subchapter	8 (Other than K-	12)		- \
treet Address				Other (i.e. p	orivate & commerc	cial buildings,	nomes, etc	j.)
Awn Street				Square Feet	# of Floors	Bldg	g. Age	
				122	4	-	40+	
City (5)	County (6)	County C	ode (7)	50000	1	in bood)		
	Middlesex			Current Use (Pr	ior if being demol	isnea)		
old Bridge	Illiaaiooox	5 0.0 X		School				
-34		(0)	ASCM No		ment Contractor (9)		
Jame of Monitorin	g Firm Hired by Building Ow	ner (8)	ASCIVI NO	Printel Enviro	onmental, Inc.	***		
Environmental (Connection	1			/iiiioiitai, iiioi			
Street Address		6.60		Street Address	044			
120 North Warre	an Street	STATE BLOOM		1123 Beaver	Street			
20 NOILII Wait	and a	43	S-02-8	City, State & Zi				
City, State & Zip C	.de			Bristol, PA 19		T		
Trenton, NJ 080	110	Telephone	Number	Telephone Nun	nber	License Nur	nber	
Project Manager for	or Monitoring Firm	609-392-4	200	(215)788-604		00509		
Ryan Broadwat	er			Name of OSHA	Monitor			
Scheduled Start D	ate (10) Scheduled Co	ompletion Dat	e (11)	Drintel Envir	onmental Inc.			
5/7/1	2	5/9/12	To be a second					
Ctotus	During Abatement (Check	only one)		Street Address				
	osed/Vacated During Entire	Period of Aba	atement	1123 Beaver	Street			
	nt Performed Outside of Nor	mal Hours -	7am to 3pm	City, State & Zi	p Code			
0100	T Performed Outside of Non	nai modio		Bristol, PA 1	9007			
Describe:	4 PM to 12:30 AM							
Facility O	ccupied During Abatement							
Scope of Work (C	theck all that apply)			φ <u>Γ</u>	☐ Full Contain	ment with Ne	gative Pres	sure
Coope of the t			320	ŗ	Mini-Enclos	ure		
☐ ≥3 sf or ≥	3 If	2	novation	Ļ	Glove Bag I			
		☐ Der	molition			ted and Non-	Eriable Pro	cedure
∑ ≥160 sf ≥	200 11				Non-Exemp	ted and Non-	Abstom	ont Ty
		Is Local	tion	Description	of		Abatem	entiy
	Location of	Normally	Lleed	Asbestos-Cont	aining	(Specify		
	estos-Containing	Solely	by	Material (AC	M)	SF or LF)	7 -	2
	Naterial (ACM)	Maintenar		(i.e., thermal sy	stems		Remova	Encapsulate
<u> </u>	O BE ABATED	Custodial		insulation, surfaci	ng, VAT		l ov l bai	Su
	in Facility			or other miscella	ineous)		<u>a</u> 7	ate
	(13)	(12)		Of Other mass				
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All Purpose Re	nom			Pipe Insula	UOII	020 01	一门片	TIT
All Fulpose Ki	VIII				10.0	-		1=1
		-	TELL	The Farm Control		12.12	그닐!닏	121
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	110/ - La Hardan	IN	JDEP Was	te Cubic Yards	Name of Registe	ered Landfill		
Name of Registe	ered Waste Hauler		lauler ID No	o. of Waste				
		1000	20990	1/2 Cu Yd	Minerva Land	fill		12
Service Trans	port Inc.	20 100 100 100 1	0330	Disposal Date	City, State			
City, State					Waynesburg,	Ohio		
New Castle, D	F			5/9/12	wayilesburg,		Date	
		IT	itle	Signature		1 0		2
Completed By (Print or Type)	1.70	Project	10- 11	40.	1-11	4/26/12	4
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Gino Pizzig	0111	l R	Manager	4	1111 8	' /		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

			(P	ursu	ant	to NJA	C 8:0	60 and 5:16	3)	Cop 7	# 2	27	2	
Date of Notification (1) 4 /	26 /	12				of Building gers Univ		er/Operator (ty	P) E C		Eli	7		
Agencies Notified EPA	Type Notificat ☑ Initial	ion		77777		Address Road 1 I	Bldg	4086	MAD!	3 0 2012	The second second			
□ DOLWD	☐ Amended	0.200.200		City	, St	ate, Zip C	ode		-14 H -41	1 3 () 2012	Les	71		
☑ DHSS	Amendmer	31 - U. S.		P	isc	ataway,	NJ 0	8854			1	OH PROPERTY.		
DCA	☐ Emergency justification		3	1		of Contact			ASE	Telephone Num	nber	1		
(NJAC 5:23-8)	☐ Cancellation			N	like	Smith			_	HOCKET		•		
				F	AC	ILITY IN	FOR	MATION	1200	PONENT C.				
Name of Facility Where	Abatement is Ta	king Place	(3)						Type of Facility (4	4)				
Armitage Hall									☐ School (K-12)					
Street Address									Subchapter 8	(Other than K-1)	2) vraial bu	ildina	_	
311 N. 5 th Street Bl	lda 7036								Other (i.e., priv	ate and comme	erciai bu	ilaing	s,	
City (5)	149 1000		71.0		11				Square Feet	# of Floors	Blo	dg. Ag	ge	
Camden									46000	4	- 31	30+		
County (6)				TC	ount	v Code (7	VSTAT	TE USE ONLY)	Current Use (Prio	r if being demol	ished)		-	
Camden				0	Juin	y code (r	,,,,,,,	L OOL OIL!	University		/			
Name of Monitoring Firm	a Hirad by Buildi	na Owner	(8)	ASC	A M	Vo.	Nan	ne of Abatem	ent Contractor (9)	- Control of the cont				-
ATC	ir rilled by Bullar	ing Owner	(0)		009				VIRONMENTAL	. INC.				
Street Address								et Address						_
	3 Terri Lane						1	123 BEAVE	R STREET					
	3 Terri Lane ty, State, Zip Code						City	, State, Zip C	ode					-
Burlington Towns	hip. NJ 08016	17-					100	RISTOL, PA						
Project Manager for Mo	The state of the s		Te	lepho	ne N	No.	Tele	phone No.		License No.				
Brian Kearney				william is		8800	2	15-788-6040)	00509				
Start Date (10)	Ts	cheduled (Comp	letion	Dat	e (11)	Nan	ne of OSHA N	Monitor					
5 / 5 /		5					В	RISTOL EN	VIRONMENTAL	, INC.				
Occupancy Status Durin								et Address	D CTDEET					
☐ Facility Closed/Vaca	ted During Entire	e Period oi rmal Facili	Abau N Ho	urs - I	ı Desn	cribe	1		Min Market Last State State					
Time of Abatement:								, State, Zip C RISTOL, PA						
Scope of Work (Check a ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	all that apply)		enova		2010			☐ Mini-End☑ Gloveba	tainment with Nega closure g Procedure empted (*) and Non		ure			
			s Loc	ation			No.		9 - 90		Ab	atem	ent T	ype
Locatio Asbestos-Containing TO BE AB	g Material (ACM) BATED	' M	ainter	nally blely b nance al Staf	ĺ	Asbe (i.e	e, the	Description of Containing Marmal systems urfacing, VAT	aterial (ACM) insulation,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
IN Fac (13)			(12	2)				ner miscellane		0, 0, 2, ,	1-	12	late	o,
()		Yes	N	0 1	l/A									
Suite 146]	TSI			77 HO 94 C 85	8 LF				
]	-13"								
				Ī]									
-	of the same		ĪП	I	7									
Name of Registered Wa						Vaste No.	Cub	oic Yards of	Name of Regist		1	3	II.	
SERVICE TRANSF	PORT GROUP	, INC.			990		3	0 Cu Yds posal Date	MINERVA L	MINDFILL	-	_		
City, State NEW CASTLE, DE	19720							/26/12	5000	JRG, OH 4468			D	
Completed By (Print or	Type)	Title			7	14. 14		Signature	0	/	Date		1.	0 0
Gino Pizzigoni		Gener	al M	anag	er			Line	Przzigon	i/gl	4/0	10/	104	

ASB-41 MAY 11 GI 12093

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

CHECK#21845

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

Date of Notification (1)				N	lame of Build	ing Owner	r/Operator (2)	DECEL	\mathbb{W} [M	
4/26/2012							BYTERIAN CI	IUKCH		11		
Agencies Notified	ype Notificati	on			Street Address					100		
EPA	Initial				3 SOUTH M		REET	1 LI APR 3 0	2012		-11	
□ DEP	Amended	Amend	ment:		City, State, Zip					1		
	Emergen			I	PENNINGTO		12	<u> </u>	Teleni	one l	Numb	er
DOH .	justification				Name of Cont		Į.	ASBESTOS CON LICENSINA	cichi	10110 1	· ·	,
DCA	Cancellat			A	ANTHONY	P. LOVE	RO, SR.	1, 13, 13, 13, 13, 13, 13, 14, 15, 15, 15, 15, 15, 15, 15, 15, 15, 15	ı		•	-
DOA				F.A	CILITY INF	ORMAT	ION	. The stopped Manage Street from the	*1,547 / *			
Name of Facility Where Aba	tement is Tal	ing Pla	ce (3)				Surviva in a	Type of Facility (4)				- 111
PENNINGTON PRESBY	CEDIAN CI	HURCI	I COF	NER I	HOUSE			School (K-12)		IZ 42V		
Street Address	I Divisir O.					n=		Subchapter 8 (Other	tnan	N-12)	al buile	dings)
13 SOUTH MAIN STREE	T							Other (i.e., private &	COIIII	nercia	Bldg.	Aga
								Square Feet	# OT F	loors	blug.	Age
City (5)											1\	
PENNINGTON, NJ				7	County Code	(7) (STA	TE USE ONLY)	Current Use (Prior if bein	ig den	nolisn	ea)	
County				.								
MERCER Name of Monitoring Firm His	rod by Buildin	a Owne	er (8)		ASCM No.		Abatement Conti					
		ig Owne	,, (0)			CREAM	RIDGE ENVI	RONMENTAL INC.				
AMERITECH SERVICE	8		-			Street Ad						
Street Address	eet Address E. ATLANTIC WAY					15 BLAG	CK FOREST R	OAD				
							te, Zip Code					
	y, State, Zip Code					100	TON, NJ 08691	[
LAVALLETTE, NJ 0873	5	Teleph	one No			Telephor			Licen	se No		
Project Manager for Monitor	ring Firm	100 CO 10				609-890-			00676	6		
ROD MORRIS		732-66	4-1/8	omnletic	on Date (11)		OSHA Monitor					
Start Date (10)		L.		Mibieuc	on Date (11)	N/A						
4/27/2012		5/1/20				Street Ac	ddress					
Occupancy Status During A	batement (Ci	neck on	d of Al	hatama	nt							
Facility Closed/Vacate	d During Enti	re Penc	ia oi Ai	Dateme	110	City Sta	te, Zip Code					
Abatement performed outs	side of workin	g nours										
ESSENTIAL PERSONNE						1		Full Containment wi	th Ne	gative	Pres	sure
Scope of Work (Check all the	nat apply)				Renova	tion		Mini-Enclosure				
$\geq 3 \text{ sf or } \geq 3 \text{ lf}$					Demolit			Glovebag Procedure	е			
≥ 160 sf or ≥ 260 lf					☐ Delilolit	1011		☐ Non-Exempted (*) 8		-Friab	le Pro	cedur
10										ement	Туре	
		Is	Locati mally l	on lead	Descriptio	n of Asbes	stos Containing				Encapsulate	m
Location of Asbestos-C	ontaining		Solely L		Material (A	CM) (i.e. t	hermal systems	Amount (Specify SF or	Remova	Repair	caj	Enclosure
Material (ACM) TO BE A	BATED In	Mainte	enance	/Custo	insulation,	, surfacing	, VAT, or other	LF)	Nou	pa.	usc	nsc
Facility (13)		dial	Staff?	(12)		miscellane	eous)		<u>a</u>	1	ate	0
Section 1		Yes	No	N/A		* ACTION	DEDDIC	3 L.F./150 SQ.FT.	X			
BASEMENT			X		PIPE INSU			300 SQ. FT.	X			
VAT			X		KITCHEN		ROOM	4 SQ. FT.	X			
BASEMENT	AI				FLUE PAC			32 SQ.FT.	V	1	-	1
	BASEMENT					PANEL		Name of Registered La	ndfill			
Name of Registered Waste	lame of Registered Waste Hauler						Cubic Yards of Waste	INAMINE OF REGISTERED EST				
					Hauler ID No.		4 YD	GROWS				
LUCAS DEMOLITION					22384		Disposal Date	City, State		_		
City, State	City, State						1	MORRIȘVILLE, PA				
7.00	HIGHTSTOWN, NJ					10:	5/3/2012	11171	Date			
Completed By	npleted By Title						n 27-Mar Willed	1. Cendre	4/26	/2012		
DAVID D'ANDREA	eted by					1/6	ue co f	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1			

CK 1524

Date of Notification (1) 04/27/	2012		1	Name of	Building ashingte	Owner/Operator on Ave. LLC.	(2)	1131					SACCE MADE
Agencies Notified	Type Notificatio	n		Street A	ddress ashingte	on Ave.		10 4	APR 30	2012		IJ	- Annual Control
DEP DOL	Initial Amended Amendment Emergency	#			ate, Zip Co adt, NJ	ode	1	1	ISBE CTOP COM		alexa e		
☑ DOH □ DCA	justification Cancellation)			f Contact ick Tucc			The second of the second	TO 300	Y			
				FACI	LITY INFO	ORMATION	-0.3×			7	****		\dashv
Name of Facility Where Former Wonder Br	Abatement is Tak ead	ing Place	(3)				JA	School (K-12) Subchapter 8	(Other than K-1 2 vate & commercia) I buildir	ngs,		
720 Washington A	ve.						Squ	homes, etc.) uare Feet	# of Floors		g. Ag	e	_
Carlstadt, NJ				Count	y Code (7) (STATE	Cu	,000 rrent Use (Pric	or if being demoliser Bread Wareh	hed)			=_
Bergen					-	Name of Abater			A Divide it in the				=
Name of Monitoring Fir (8) J & S Environm	m Hired by Buildin nental Laborato	g Owner ries		ASCM N N/A	0.	Valiant Ass	ocia						_
Street Address 2333 Rt 22 West						Street Address 145 Mill Str	eet_						_
City, State, Zip Code Union, NJ 07083						City, State, Zip Paterson, I	NJ 0	7501				_	_
Project Manager for M Sherry Gelsomino	onitoring Firm		Tele 908	phone N 3-206-0	lo.)073	Telephone No. 973-553-53			101108 No.				
Start Date (10) 05/07/2012	Sc	heduled C 05/21/20		tion Dat	e (11)	Name of OSHA Valiant Ass							
Occupancy Status Du	and the second of the second of the second of	The state of the s				Street Address							
Facility Closed/Vac	ated During Entire	Period of	Abate	ment		145 Mill Str							_
Abatement Perform Other - Describe:	ned Outside of Nor	mal Facilit	y Hou	rs		City, State, Zip Paterson, N					_		
Scope of Work (Check >3 sf or >3 lf >160 sf or >260 lf	k all that apply)		enovat emol			Mini-E Gove	Enclose bag P	ure rocedure	gative Pressure Non-Friable Proc	edure			
-		le	Locati	on		[A] Non-	CXGIII	pted () and (1011 1 1144 1	A	bate		ŝ
Location Asbestos-Containing TO BE AI IN Fac	g Material (ACM) BATED allity	Use Mai	ormall d Sole ntena ustodi staff? (12)	y ily by nce/ al	Asbes (i.e	Description stos Containing M ., thermal system surfacing, VA other miscellar	Materia is insul AT, or	lation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	26.34	I Floor T	ila		3,480 SF	X	-		-
Office Areas, Con				X		Layer Floor T	IIC .		800 SF	X		-	-
Roof (upper/lower		_		X		Flashing Around Wind	low		500 LF	X			
Exterior Window	Exterior Window Caulk					Around Willa	OW						T
Name of Registered		NJDEP Hauler I 2099	Waste D No.	Cubic Yards of Waste 30 CY		Name of Reg Minerva L	stered Landfill andfill						
Service Transpor	Стопр		2077		Disposal Date 05/21/2012		City, State Waynesbu	rgh, OH					
New Castle DE Completed By Miodrag Stameno	vic	Title Project	Mana	ager	_	Signature		Came	n kortan	7/2012)		

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

						ne of Building (Owner/Opera	tor (2)	I W	61	MI	
te of Notification (1)					He	rcules				7/1		2
	4/25/201	12				1.4.11.00	111 111	APR 3	0 001	- 111		
	4120120	Notification :	Гуре		Stre	eet Address	497 6 ₁₀ 1.]	MIN J	U ZU12	2 1	3/1	
gencies Notified					500	Hercules Roa	ad				1	
()EPA		(X) Initial N () Amende	otification	tion	City	State, Zip Co	ode	ASBESTOS CO	MITOOL		mar-v)	
) DEP		Amandr	nant #				WT-100	OD LICENS	NG	50	Î	
() DOL	1	() Emerge	ncy (includ	ding justification) W	ilmington.	, DE, 198	00	the party of the p	CASTA FRANCISCO		
() DOH		() Cancella	ation		l Na	me of Contact						
) DCA		9E 117				e Keller				-01		
				FACILITY	INFOR	pe of Facility (4	1)					
ame of Facility Where Aba	tement is Ta	aking Place	(3)		1 1	C-had (K-12)						
ercules Former Facility	terrioric is				16	Subchapter 8	(other than I	(-12)	homes	etc.		
ercules romici - ay					(X) Other (i.e. pri	vate & comm	iciciai bioge	, nome	,		
reet Address						, q. Feet	6000	# of Flo	ors	_3		
E ookdale road	O		County	/ Code (7)	S	q. Feet						
ity (5)	County (6)		(State	Use Only)	B	ldg. Age	30+		DES	NOENCE	=S	
	MORRIS				l c	urrent Use (pri	or if being ae	molished)	RES	DLIVOL		
HESTER			ASCM	I No.	I AI	-ma of Contrac	ctor (9)					
ame of Monitoring Firm			MOON		A	Iliance Enviro	nmental Sys	,,,,,,,,	7			
HS INC	IC Address					treet Address 50 East Union	Street					
treet Address	Address N STREET				5	ity State, ZipC	ode					
MAIN STREET	STREET ate. Zip Code					Vest Chester,	PA 19382		Linanco	Numbe	r	
AULUCA HILL NJ	CA HILL, NJ Abortoring Firm Telephone Number					elephone Num	ber		00508	Nullibe	<u>.</u>	
Project Manager for Monito	ct Manager for Monitoring Firm Telephone Num					10-701-9000			00000			
JACK CARNEY	tot Manager for Monitoring Firm 8562230080					10044	Monitor					
		Schedule	d Comple	tion Date (11)	1	Name of OSHA EHS, INC	VIVIOLITOI					
Scheduled Start Date (10)		6/29/201	2		1.	E113, 1110				o sala		
5/9/2012						Street Address						
Occupancy Status During	Abatement	(Check only	one)	ent		9 MAIN STREE	<u>I</u>				100.000	
Occupancy Status During (X) Facility Closed/Vacate	ed During Er	ntire Periou (lity Hours	-			Codo					
(X) Facility Closed/Vacate () Abatement Performed	Outside of	Nominarias	,			City, State, Zip MULLICA HIL	I N.I					
- 70-	10 20				-	MULLICATIL	_,					
DescribeOther -												
Source of Work (Check a	II that apply	1										
							() Minor Pro	i (<25 SF or	<10 LF	ACM)		
(x) Demolition () Re (X) Large Proj. (>160 SF	enovation	ACM)()SI	VI Proj. (>2	25<160 SF or >	10 < 26	bag Procedure					T	·no
(X) Large Proj. (>160 SF () Full Containment with	Negative P	ressure (x) Mini-Er	nclosure (x)	Glove	CM (i.e.	Amount (S	Specify SF or	LF)	Abate	ment Ty	/pe
() Full Containment with Location of Asbestos-	Is L	ocation Non	nally Used	d Descript	system	s insulation,				1		
Containing Material (ACI	WITH I CO		/Custodia	surfacin	g, VAT,	or other				Rem.	Rep.	Encap Encl
Facility (13)	1 310	aff? (12)	10	NA miscell.)		57185sf			X		-
	Y	ES 1		X Roofing	3		39855sf			X	-	+
ROOF			CONTRACTOR CONTRACTOR	X Vat & n	nastic		60SF	= 1:1:		X		
1 ST FLOOR			X	TRANS	W CAL	JLK	8lf			X		
1 ST FLOOR			X	Duct ta			845SF			$\frac{1}{x}$		
			X	JUMPE	R WIR	E	600LF 1435LF			X		
1 ST FLOOR			x	PIPE II	NSULA	TION	1435LF		785712	X		
N 355			X	SEAM	TAR	Cubic Yards			Nam	e of Rec	. Landf	<u>III</u>
- Weste U	lauler	NJDE	P Waste F	Hauler ID #\		Cubic Talus	01 110010		PEL	Imperia	1	8
Name of Reg. Waste H	aulei	17235	50			Approx. 10	0	To: Date		imperia	City, S	tate
N.E.T.S. / Miners								Disp. Date				
City, State	17001-2							TBD			Imper	ial, PA
-				164 60		1 Cicantura		1	Date	2		
Hazelton, PA	Tune	Title				Signature	\bigcap Λ		4/05	2/2042		
Completed by (Print or	Type					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	KI	\sim	4/25	5/2012		
DEVIN BLOM		Estin	nator			120	- 8					
DEALLA DECIN					(66)				C:\W	VORD\M	YDOCS	SASBESTOS
		Toler	hone 609	-984-6620				27100	9/18			

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

Telephone 609-984-6620

CK-00731P

D&S Proj. #: MS 12-149

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

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Date of Notification	(1)	Na	ame of Build	ding Owner	/Operator (2)		115	EGE	N/E		7	•	
0 4 1/12 7			Cartus Fin	ancial				E U E	WG	11		ig.	
Agencies Notified EPA	Type Notification	n St	reet Addres	S							A STATE OF THE PARTY OF THE PAR		
☐ DEP	Amended		40 Apple		ad		Accessed to the control of the contr	APR 3 n	2012				
	Amendment #:	Ci	ity, State, Zi	p Code			Office of the second		7.744	house	and the same of		
DOL DOL	☐ Emergency				icut, 06810		1 1 6	Seprence on	I comment	Į.	Dallman		
□ DOH	(including justification)	Na	ame of Cont	act			St. Millione	Telepho	ne Number		and bear		
☐ DCA	Cancellation		Patricia C)'Marra			*******	ser awy 6x.			}	ì	
		410.00		FACIL	ITY INFORM	ATION					وزيهه		
Name of facility wh	nere abatement is	taking pla	ce (3)					Type of Facility	(4) ool (K - 12)				
Private Residen	nce								hapter 8 (O	ther th	an K	-12)	
Street Address								☐ Othe	r (Private/Co	omme		1 1176	
					-8				s./Homes, et		D	da A	20
405 Grand Ave	enue		- 10)					Square Feet	# of Floor	s	В	ldg. A	ge
City (5)		Coun	nty (6)			24.A.C.	ty Code (7) e use only)	Current Use (Prior if hein	meh r	olieh	ed)	
Hackettstown		Wai	rren			(Otati	s use only)	Current ose (r nor ir being	y uem	UIISII	Suj	
Name of Monitorin	a Firm Hired by E				ASCM No.	11	Name of Abatement	Contractor (9)					
N/A	,						D & S RESTOR	ATION, INC.					
Street Address				l			Street Address	in the second se					
Oli CCC / Idai CCC							20 California A	ve.					
City, State, Zip Coo	ie .						City, State, Zip Code						
							Paterson, NJ 07	503					
Project Manager fo	r Monitoring Firm		Ph	one Numbe	er		Telephone Number		License		er		
							973-345-8020		0	0159			
Start Date (10)		Sched	d. Completio	n Date (11)		Name of OSHA Mon						
			5/10/10			- 11	D & S Restorati	on, Inc.					
05/8/12 Occupancy Status	During Abotomon		05/10/12		-		20 California Av	ienuė.					
	ed/vacated during			ment.			City, State, Zip Code			-			
Abatement p	erformed outside	of normal	facility hour	S-			· ·						
Other-Describe:	ibe: NORMAL H	OURS				= 11	Paterson, NJ 07	7503			_		
Scope of Work (c								Full Containmen	t w/negative	press	ure		
≥ 3 sf or >3 l	f 🛛	Renovation	on				- Lander	Mini-enclosure	dura				
☐ >160 sf or ≥	260 If	Demolitio	n				Ä	Glovebag proced Non-Exempted		friable	proc	edure)
Location of		Is locatio	on normally	used solely						R	R	E	E
asbestos-co	ntaining	by mainte staff(12)	enance/cus	todial			sbestos-containing	Amount (Specify		m	p	n	n
material (ac abated in fa		-	T	Τ	material	(ACM)		LF)	7 31 01	O V	a	a	L
abated in ta	Cility (13)	Yes	No	N/A			1000			е	r	р	
Basement			X		Pipe Insula	ation		9 LF	- 1 (1)		Ш		
Basement			X		Pipe Recle	aning		17 LF				10	14
							4						旦
							•						
-									INFORMATION CONTRACTOR				
Registered Waste	Hauler		EP Hauler		ubic Yards of 2 CY	Waste	Name of Registered TULLYTOWN,	RESOURCE I	RECOVER	RY			
D & S RESTO	KATION, INC.		506	Disposal D			City, State	ILLOUGICE		_	_		
City, State PATERSON, 1	NI 07503			Access to the second of the se	15/12		TULLYTOWN	, PA					
Completed by (Pri		Title		Signature		1		Date		1000			
BOGDAN JO		PRESII	DENT						4	/27/1	2		
ASR-41				for asbest	os licensure e	xempted	d activities.						

D&S Proj. #: MS 12-148

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

								11-7	TE TO	0 F= 0 F	(2) Nene	The same			
Date of Notification				uilding Owr		r/Operator (2)			L U	DE W	<u> </u>	Patherine	-		
Agencies Notified	Type Notificati	on S	Street Addr		_			110 11	AT	D 0 - 00	. 11	11			
☐ EPA	Initial		5 CVDD	ESS AVI	EN	IIIE			Ar	R 3 0 201	2 1	/ `			
☐ DEP	Amended	11	City, State,		C/L	NOE					1	1	-		
□ DOL	Amendment #:	11				0.77.5		f ton	ASBE	STOS CONTROL	R	1	i i		
	Emergency (including			URST, N.	J	07755		100		LICENSING					
□ DOH	justification)	^	lame of Co	ntact				+ 90.	a		ne Number	eed			
DCA	☐ Cancellation		CONRA	AD BLUI	М			1 Same		-					
			- Marian Inter- on	FAC	CIL	ITY INFORMA	TION								
Name of facility w	here abatement is	s taking pla	ace (3)							Type of Facility	(4) ol (K - 12)				
CONRAD BLU	UM									Subc	hapter 8 (O			12)	
Street Address										Other Bldgs	(Private/Co ./Homes, e	tc.	renounted		
5 CYPRES AV	VENUE								_ [Square Feet	# of Floor	s	Ble	dg. A	ge
City (5)	4 - 1	Cou	nty (6)					ity Code (7)			<u> </u>		_		
OAKHURST		00	EAN				(Stat	e use only)		Current Use (F	Prior if bein	g dem	olishe	ed)	
Name of Monitorin					T	ASCM No.	-11	Name of Abatem	nent Co	intractor (9)					
1141119 01 115111						. 10 0 111 1101		D & S REST	ORAT	TION INC					
01-14-11								Street Address	OICA	TION, INC.					
Street Address								20 Californi	a A 210						
								City, State, Zip C					-	_	
City, State, Zip Coo	de							AND WEST CONTRACTOR OF THE SECOND							
								Paterson, N)3					
Project Manager fo	or Monitoring Firm		P	hone Num	be	er		Telephone Numb			License		er		
								973-345-8			0	0159			
Start Date (10)		Sche	d. Complet	tion Date (11)		Name of OSHA D & S Resto							
05/07/12		05/1	8/12				- 11	Street Address							
Occupancy Status	During Abatemer							20 California	a Aver	nue					
Abatement p	ed/vacated during performed outside	of normal				- T		City, State, Zip C	ode					12	
	ribe: <u>NORMAL</u> H				_		- 11	raterson, iv						_	
Scope of Work (c	10000	y)								Il Containment	w/negative	press	ure		
\boxtimes >3 sf or >3!	f 🛛	Renovati	on							ni-enclosure ovebag proced					
≥160 sf or ≥	260 If	Demolitic	n							ovebag proced on-Exempted (*		friable	proc	edure	1
			on normally	used sole	elv		-			Z. Zamptou (, 2 110/1	R	R	E	
Location of asbestos-co	ntaining		enance/cu		,		n of or	sbestos-containir		Amount		e	е	n	E n
material (ac		staff(12)			_	material (/		spesios-comanii	ig	(Specify	SF or	m o	p a	a	C
abated in fa	cility (13)	Yes	No	N/A			anonac en la c			LF)		v	i	p	L
					_	EVER BUGIL		0.11		22 L FT	*	e	r		\vdash
BASEMENT						PIPE INSU	LAII	UN		32 L FT		X	닏	닏	부
Z							المورقة من					1	Ш	Ш	
										TO THE REPORT OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON					
									t Navoro	A SELECTION OF THE SECOND					
					7							П	П	П	
Registered Waste	Hauler	INIT	EP Hauler	ID# T	Ci	ubic Yards of V	Vaste	Name of Regist	tered L	andfill		1	_		
D & S RESTOR			506	10#		YD		TULLYTOV	VN, R	ESOURCE R	ECOVER	Y			
City, State				Disposal	_			City, State			CENTRAL PROPERTY.				
PATERSON, 1	NJ 07503			05/08/				TULLYTO	WN. P	Α					
Completed by (Pri		Title		-1		Signature			, -	and the same of th	Date				
BOGDAN JOI		PRESII	DENT			2.3					04/25/	12			
ASR 41				n for asbes	_l	s licensure exe	empted	l activities.							
							0.000	Dec Stones of April 1985.							

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60-7 and 12:120-7) Check # 5231 2012-84 B & G proj. #: Name of Building Owner/Operator (2) Date of Notification (1) 10 14 1/12 17 1/11 12 1 Residence Type Notification Street Address Agencies Notified 2012 EPA 23 North Willow Street Initial X City, State, Zip Code DEP Amendment Telephone Number Montclair, NJ 07043 DOL Name of Contact **⊠** DOH Cancellation Loretta DiQuattro ☐ DCA FACILITY INFORMATION Type of Facility (4) School (K - 12) Name of facility where abatement is taking place (3) Subchapter 8 (Other than K-12) Other (Private/Commercial Residence Bldgs./Homes, etc. Bldg. Age Street Address # of Floors Square Feet 23 North Willow Street County Code (7) Current Use (Prior if being demolished) County (6) (State use only) residential Name of Abatement Contractor (9) Essex Montclair, NJ 07043 ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) B & G Restoration, Inc. Street Address 105 Ryerson Road Street Address City, State, Zip Code Lincoln Park, NJ 07035 City, State, Zip Code License Number Telephone Number Phone Number 0378 Project Manager for Monitoring Firm 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) B & G Restoration, Inc. Scheduled Start Date (10) Street Address 5/8/2012 5/8/2012 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-Lincoln Park, NJ 07035 Describe: Other-Describe: Glovebag procedure Scope of Work (check all that apply) Full Containment w/negative pressure Non-friable procedure □ Renovation ☐ Demolition Mini-enclosure ≥160 sf or ≥260 lf E >3 sf or >3 lf e e n Is location normally used solely n Amount m p C Description of asbestos-containing by maintenance/custodial (Specify SF or C Location of 0 a asbestos-containing material (ACM) staff(12) V material to be N/A abated in facility (13) No Yes M 160 lf pipe insulation basement Name of Registered Landfill Cubic Yards of Waste Tullytown Resource & Recovery Center NJDEP Hauler ID# Registered Waste Hauler 2 yards 19563 B & G Restoration, Inc. City, State Disposal Date Tullytown, PA City, State 5/9/2012 Date Lincoln Park, NJ 07035 Gordana Luna Signature 4/27/2012

Completed by (Print or Type)

Gordana Luna

Title Treasurer

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

B & G proj. #: 2012-83

Check # 5230

Date of Notification	1(1)	I I Name	of Building	Owner/C	perator (2)		and the second second	TO THE					
10 14 1/12 17		11				F	TE GE		11111				
	Type Notification	-	Hohmuth			- 11	1)						
Agencies Notified EPA						11		2 2 2012					
☐ DEP			Columbu				HI APR	3 0 2012	1				
_	☐ Amendment	. 13	State, Zip C			1	DE	9 4 1			-		
□ DOL	Amendment	11 16	nafly, NJ				ASBEST	US CUM Teler	hone Numbe	er			
□ DOH	ee 2004	100000000000000000000000000000000000000	of Contact				Mania	ICLM2143					
☐ DCA	Cancellation	B	en Hohmu	th			Come and the second	- <u> </u>					=
				FACILI	TY INFORMA	TION	generalistic ve.	T T (Too	ilib. (4)				
Name of facility w	vhere abatement is tal	king place	(3)						chool (K - 12		04000		
Ben Hohmuth								□ s	ubchapter 8 (ther (Private/	(Other tha Commerc	n K-1: ial	2)	
Street Address								B	ldgs.iHomes,	, etc.			
	D.1							Square Fe	et # of Flo	oors	Bldg	. Age	()
138 Columbu	s Drive	County	(6)			County	Code (7)	-					
City (5)							use only)	Current U	se (Prior if be	eing demo	lished	1)	
Tenafly, NJ	07670	Berge			ASCM No.	TIN	ame of Abatemen	t Contractor (9)				
Name of Monitor	ring Firm Hired by Bld	g. Owner (8)		ASCIVI NO.	11	B & G Restorat						
n/a	HII T						treet Address	ion, me.					
Street Address						110	105 Ryerson Ro	nad					
						_ -	ity, State, Zip Code						
City, State, Zip C	ode						- 5-00						
**************************************						_ _	Lincoln Park, I	NJ 07033	TLicer	nse Numb	er		
Project Manager	for Monitoring Firm		Phon	e Numbe	er	11'	973-696-6869		037				
. , , , , , , , , , , , , , , , , , , ,						11.	Name of OSHA Mo						
Scheduled Start	Data (10)	ISched.	Completion	Date (11)		B & G Restora						
Scheduled Start	Date (10)					1	Street Address	tion, me.					
5/7/2012		5/7/20					105 Ryerson R	oad					
Occupancy Stat	us During Abatement	(Check on	ly one)	olen ar #		11	City, State, Zip Coo						
X Facility clo	osed/vacated during e	ntire period	d of abatem	ent.		11	city, State, Zip Coc	ic.					
Abatemer	nt performed outside of	it normal ta	icility flours				Lincoln Park,	NI 07035					
Describe:						-1	Lincoln Park,	143 07033					_
-	(check all that apply)							62	По	ovebag p	ocodi	Iro	
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	=	160 sf or ≥				☐ M	ini-enclosure		∐ No	on-friable		-	_
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Location		by mainte	nance/custo	odial	Descrip	ation of as	sbestos-containing		nount	m	P	c	n
asbestos material	s-containing .	staff(12)				I (ACM)		LF	pecify SF or	0	a	а	C
material abated it	n facility (13)	Yes	No	N/A					,	V e	l'r	P	
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basement					duct insu	lation							
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						-	100 - 10	rod Landfill			1	ᆜ	1_
Registered Wa	aste Hauler	NJD	EP Hauler I		Cubic Yards	of Waste	Name of Register Tullytown Re	ered Landilli	covery Cer	nter			
B & G Rest	oration, Inc.	19:	563		1/2 yard			Source & Itt					
City, State		70-7		Disposal			City, State	Δ					
Lincoln Pa	rk, NJ 07035		-	5/8/20			Tullytown, P		I D	ate			_
	(Print or Type)	Title	7		Signature		Gordana Lun	ıa	10.000	/27/2012			
Gordana L		Treasur	er				0						

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60-7 and 12:120-7) 2012-81 B & G proj. #: Check # 5232 Date of Notification (1) Name of Building Owner/Operator (2) FICENZING MSEESTOS CONTROL & 0 4 / 2 7 / 1 2 Barbara Tinari Type Notification Agencies Notified Street Address □ EPA 21US O E A9A Initial 17 Cathedral Avenue DEP City, State, Zip Code Amendment X DOL Florham Park, NJ 07932 Name of Contact Telephone Number DOH. Cancellation DCA Barbara Tinari **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Barbara Tinari Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. # of Floors 17 Cathedral Avenue Square Feet Bldg. Age County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) Morris Florham Park, NJ 07932 Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. n/a 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 Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 5/9/2012 5/9/2012 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition ☐ Full Containment w/negative pressure Renovation Mini-enclosure Non-friable procedure \times >3 sf or >3 If ___ ≥160 sf or ≥260 lf Is location normally used solely E Location of E by maintenance/custodial е n Amount asbestos-containing Description of asbestos-containing n m p staff(12) (Specify SF or C material to be material (ACM) 0 a a abated in facility (13) Yes No N/A pipe insulation 36 lf X garage area

Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# 19563 B & G Restoration, Inc. Tullytown Resource & Recovery Center 1 yard Disposal Date City, State City, State 5/10/2012 Lincoln Park, NJ 07035 Tullytown, PA Completed by (Print or Type) Title Signature Gordana Luna 4/27/2012 Gordana Luna Treasurer

1111-4414 SUB8 Check#

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Date of Notification						ullaing (Owner / Operato	(2)		7	11 11	Ī	
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							School (
Street Address					3777		Subchap	ter 8 (Other th	an K-12)				
Washington Roa	d						Other (i.e	e. private & cor	mmercial building	s, hom	es, e	tc.)	
		ampus					Square Feet	# of Flo	oors B	ldg. Ag	е		
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	inc.					-	Street Address			4	10 (O)		
Street Address	4- 04 2	Tamilana	C:40	40			PO Box 25	55					
		Terri Lane,	Suite	12	11.25		City, State &	Zin Code					
							Lumberton						
		iona	Telep	hono	Nun	aber	Telephone N		License N	umber	11054		
	wonttoring F	ILLI	609-				609-265-210		Libblico	0052	9		
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				(12)			or other miscell	aneous)	27	Va.	Ŧ	Encapsulate	ure
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1 st Floor Lobby				5 7			Ceiling Pla		395 SF			П	П
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Work Area #2 (St	air 3)	2 Charles Call		\boxtimes			Floor tile & I		100 SF	\boxtimes		ᆜ	닏
1 st Floor Lobby	100				X		Floor tile & I		395 SF				
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				На	uler	ID No.	of Waste						
AbateTech, Inc.					187	750	20	TRRF Land	Itill		-		
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	t or Type)		7 (144)	Tit			Signature			Date	7.	7.	100000
Gwen Trumbetti				Op	ps.	Coord.	\\ \hat{\chi}	1		4/27	/12		

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65 - 35.10	here Abatement is Taking P		I AU			Type of Facility	(4)	4.6 mm 2 mm 2	6			
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	ad					Other (i.e.	private & com	mercial buildings,	nome	s, etc	;.)	_
						Square Feet	# of Floo	rs Bldg	g. Age			
	County (6)	Cour	ntv C	ode (7)							7
City (5)		000	, -			Current Use (P	rior if being de	molished)				
Princeton	Mercer	1				University		\				
	D. II.E - O	mar (9)	-	ASCI	A No.	Name of Abate	ment Contract	tor (9)				
Name of Monitoring	g Firm Hired by Building Ow	ner (o)		AGGI	VI IVO.	AbateTech, I		V				
	, Inc.				-	Street Address						
Street Address	esta Cantar 2 Tarri I ana	Suite 1	12			PO Box 25						
Bromley Corpor	t Address hington Road ceton University Main Campus 5) ceton e of Monitoring Firm Hired by Building Ow Associates, Inc. et Address mley Corporate Center 3 Terri Lane, State & Zip Code lington, NJ 08016 ect Manager for Monitoring Firm e Keehn eduled Start Date (10) 11/28/11 upancy Status During Abatement (Check's Abatement Performed Outside of Norro Describe: WORKING 6AM-3PM Facility Occupied During Abatement pe of Work (Check all that apply) ≥3 sf or ≥3 If					City, State & Z						
City, State & Zip C	000					Lumberton,						
Burlington, NJ C	or Monitoring Firm	Teleph	none	Numb	er	Telephone Nur		License Nur				
Project Manager it	of Monttoring i iiii	609-3	86-8	800		609-265-210			00529	9		
	ate (10) Scheduled Co					Name of OSH						
	State & Zip Code lington, NJ 08016 ect Manager for Monitoring Firm e Keehn eduled Start Date (10) 11/28/11 upancy Status During Abatement (Check) Facility Closed/Vacated During Entire					EMSL Analy	tical	1-111				
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	aterial (ACM)	Maint	olely			(i.e., thermal sy			Re	Z	nce	Enc
TC	BE ABATED			Staff?	i	nsulation, surfac	ing, VAT		Removal	Repair	Encapsulate	Enclosure
=======================================	in Facility (13)	Ousie	(12)	O.a		or other miscella	aneous)		Val	=	ılatı	ure
	(13)	Yes	No	N/A							CD	
T 12 0 27			***					4 400 CE		П	П	
Room #369	The state of the state of				(a w	Floor tile & N		1,400 SF		H	H	十
Room #365						Floor tile & N		1,250 SF		H	H	干
Room #377			\boxtimes			Floor tile & N	ALCOHOL: The same of the same	324 SF		H	H	1
Room #361			M			Floor tile & N		1,350 SF		H	片	1=
Room #375			M			Floor tile & I		675 SF		남	H	十
	oom #375 oom #359					Floor tile & I	Mastic	324 SF			Ш	11-
Name of Register	red Waste Hauler				Waste	Cubic Yards	Name of Reg	istered Landfill				
Ivallie of Register			H	auler I 187		of Waste	TRRF Land	IFIL				
AbateTech. Inc	bateTech, Inc.					20	and the second second	4111			-	
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Gwen Trumbetti			0	pps. C	coord.		W	**	412	1112		
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1111-4414 SUB8 Check #4023

Date of Notification (1) 4/27/12				ilding Univ e	Owner / Operato	or (2)	FIWE	M	P		
Agencies Notified Type Notification EPA	S	Street	Addre	ess	nceton Univer	sity E.A. Ma	cMillan Bldg.	A CONTRACTOR OF THE PERSON NAMED IN CONTRACTOR OF T			
□ DEP □ Initial □ DOL □ Amended #11 □ DOH □ Emergency □ DCA □ Cancellation	F N	City, S Princ Name	State 8 eton of Co	& Zip C , NJ 0 ontact	code 8544	APR	3 0 2012	Felepho	one N	umb	er
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Name of Facility Where Abatement is Takin Princeton University – Jadwin Hall Street Address	g Place (3)			School ((K-12)	han K-12)	A	4.		
Washington Road										tc.)	
Princeton University Main Campus					Square Feet	# of FI	oors	ldg. Ag	е		
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	Owner (8)		ASC	CM No.	Name of Aba		actor (9)				
Street Address	ne, Suite	12					2.1				
City, State & Zip Code Burlington, NJ 08016											
Project Manager for Monitoring Firm Mike Keehn				oer			License N		29		
Scheduled Start Date (10) Scheduled 11/28/11			è (11))							
Facility Closed/Vacated During Entition Abatement Performed Outside of Not Describe: WORKING 6AM-3PM Facility Occupied During Abatement	re Period o ormal Hou	of Aba	iteme	nt	108 Haddo City, State &	n Ave. Zip Code				7500100	
Scope of Work (Check all that apply) ≥3 sf or ≥3 lf ≥160 sf ≥260 lf						Mini-E	nclosure Bag Procedures	ST-20			
	ls L	ocati	on				Amount	Aba	ateme	ent T	ype
	So Maint Custo	olely b enan	oy ce or		Material (A (i.e., thermal s insulation, surface	CM) systems cing, VAT	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Room 380 A					Floor tile & r	mastic	100 SF				
Room 380 B					Floor tile & I	Mastic	68 SF				
4 th Floor Stairwell #3					Window Cau	ılk (NF)	40 LF		<u>-</u>	H	H
		버	H							d	d
DEP											
City, State							PA				
Completed By (Print or Type)		1000 A 100		oord.		it			/12		

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

te of Notification (1)		Nar	ne of l	Building Ow	ner / Operator (2	10.72					
	4/26/12	•	Un	ion I	ownsnip E	oard of Educat		3 0 2012				
encies Notified	Type Notificat	ion			dress	1.1	III AFR.	,		1		
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DEP	☐ Initial		City	, Stat	e & Zip Code		ASHESTOS	S CONTROL &	1			
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⊠ DOH	☐ Emerg	encv			Contact	Ĺ	and the second s	1	Cicpitone	8,8,800,000	-	
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				FACI	LITY INFO	RMATION	(4)			-22		
ame of Facility Who	ere Abatement	is Taking Place	(3)			Type of Facility	(4)					
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reet Address	1 BOX BOX O					Subchapter	· 8 (Other than k	(-12)	- kamaa	otc)		
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ity (5)		County (6)	Coun	ty Cot	16 (1)	Current Use (Pr	ior if being dem	olished)				
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ame of Monitoring	Firm Hired hy	Building Owne	r (8)		ASCM No.		nent Contractor	(9)				
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roject Manager for	r Monitoring Fi	irm	Teleph			609-265-210	17		00529)		
eiser Fajardo			201-4									_
cheduled Start Dat	te (10)	Scheduled Comp	oletion	Date (11) /	Name of OSHA						
1/16/11		Scheduled dom	5/18/	12		EMSL Analyt	ical			77.	SCALI LOSSAS	
4/16/1	12	(5/18/	12	/	EMSL Analyt Street Address						_
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4/16/1 Occupancy Status D	During Abateme	ent (Check only Ouring Entire Pe	5/18/ one) riod of	12 Abate	1	Street Address 107 Haddon	Ave.			775 (a) (**)		
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State of New Jersey 1204-4465 NOTIFICATION OF ASBESTOS ABATEMENT Check #4020 (Pursuant to N.J.A.C. 8:60 and 12:120)

										EF	7		
Date of Notification	(1) 4/25/12						Owner / Operatory y University	r (2)		-11			
Agencies Notified EPA	Type Notifica	8 *	1	Street 2039	t Add	dress nnedy	Boulevard	1	APR 3 0 2012				
☐ DEP ☐ DOL	☐ Initial ☐ Amer	nded #2				& Zip (07305			1			
☑ DOH		gency				Contact		-	ASBESTOS CONTROL S	elepho	ne N	umbe	er
DCA		ellation	100			Christ		gent applica.	LICENSING			_	
7				FA	CIL	TY INF	ORMATION			d babba barra	•	1	
Name of Facility W	here Abateme	ent is Taking Pl	ace (3				Type of Facil		Special Control of State Control of the State of the Control of th	ware to de	CAC C		
NJ City Universi	ty						School (
Street Address									Other than K-12)	s hom		to)	
2039 Kennedy B	oulevard						Other (i.e. Square Feet		ate & commercial building	ldg. Ag		10.)	
City (5)		County (6)	Co	unty (Code	e (7)			17 01 1 10010				
Jersey City		Hudson				- 1.7	Current Use	(Prior	if being demolished)		10000		
ociocy only							University	*					
	Monitoring Firm Hired by Building C Environmental				AS	SCM No			t Contractor (9)				
McCabe Environ	nmental						AbateTech,						
Street Address	k Avea						Street Addres PO Box 25	SS					
City, State & Zip Co							City, State &	Zip Co	ode				
Lyndhurst, NJ 0							Lumberton			77			
Project Manager fo		irm	Telep 201-				Telephone N 609-265-21		License N	umber 005 2	29		
Scheduled Start Da		Scheduled Con			ite (1	1)	Name of OSI				100		
5/15/12			5/25				EMSL Anal						_
Occupancy Status	During Abater	nent (Check or During Entire P	ily one eriod	e) of Ab	aten	nent	Street Addres						
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Describe:							Westmont,	150					
	cupied During	The second secon											
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≥160 sf ≥26			H		molit			Ħ	Glove Bag Procedures				
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Science Building		oms	П	Ø	T	i	Floor tile & I	-		-			
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Name of Registere	d Waste Haul	er				Waste ID No.	Cubic Yards of Waste	Nam	e of Registered Landfill				
AbateTech, Inc.					18	750	12	1000	RF Landfill			21	
City, State						- 3	Disposal Date		State				
Lumberton, NJ							5/25/12	Iull	ytown, PA	ID-4			
Completed By (Prin				Tit	le ffic	•	Signature	Λ		Date 4/25			
Gwen Trumbe	εαι			1200	oor		(m	t		4/20	114		

1204-4473

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Date of Notification	(1) 4/27/12				owner / Operator Venture	1(2)5 6	EIVET	17:			
Agencies Notified	Type Notification		reet Ado				111	111	•		
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☐ DEP	☐ Initial	Cit	ty, State	& Zip C	ode	7 711	3 n 2012 L	71			
☑ DOL	Amended #1	Li	vingsto	on, NJ (7039	and the second					
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			FACILI	ITY INFO	ORMATION	- delettiving	Sant Secondary	J			
Name of Facility W	here Abatement is Taking	Place (3)			Type of Facilit	ty (4)	of the same of the				
Livingston Mall	Space #2033C				(.	,					
Street Address						ter 8 (Other th		7 1000000000			
112 Eisenhower	Parkway				Name of the last o		mmercial buildings			tc.)	
	10 1 (0)	10	-4 · O - d	- (7)	Square Feet	# of Flo	oors	lg. Ag	8		
City (5)	County (6)	Cour	nty Code	e (7)	Current Use (Drior if boing	demolished)				
Livingston					The state of the s	Prior ii being	demonshed)				
	Fi III II Deildies O	(0)	Inc	SCM No.	Mall Name of Abat	ement Contra	actor (9)			_	
Name of Monitoring Health & Safety	g Firm Hired by Building O	wner (8)	AS	SCIVI NO.	AbateTech,		actor (9)	17.			
Street Address	30111033				Street Addres	S			,		
318 12 th Street	A CONTRACTOR OF STREET				PO Box 25	7:- 01-					
City, State & Zip C					City, State & Z Lumberton,						
Hammonton, NJ		Tolonh	one Nu	mhor	Telephone Nu		License Nu	mber			
Project Manager for James Proctor	r Monitoring Firm		04-8850		609-265-210		License iva	0052	9		
Scheduled Start Da	ate (10) Scheduled,		ALMOST THE REAL PROPERTY.		Name of OSH	A Monitor					
4/30/1:	2 ' /	5/2/1	2		EMSL Analy						
Occupancy Status	During Abatement (Check	only one)			Street Addres	72					
	sed/Vacated During Entire			nent	City, State & 2						
Z-3	Performed Outside of Nor	mai Hour	S		Westmont,						
	3 PM – 11PM cupied During Abatement				westmont,	NJ 00100					
Scope of Work (Ch		-			1.,	14 300011-2-3					
Scope of Work (Ci	leck all triat apply)					☐ Full Co	ontainment with Ne	gative	Pres	sure)
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	ocation of		ocation		Description		Amount	Aba	atem	ent T	ype
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	in Facility (13)		(12)	.	or other miscella			Va.	H.	Encapsulate	Enclosure
	(10)		No N/	/A						Œ	
Space #2033C		Int	X C	7	Pipe Fittir	ngs	35 total	\boxtimes			
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орасс игосоо											
		TEL	TIT			A 15 105 YORK					
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Name of Registere	ed Waste Hauler	\$ T =		P Waste		Name of Re	gistered Landfill				
AbeteTook Inc			11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	r ID No. 8 750	of Waste	TRRF Lan	dfill				
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Lumberton, NJ					5/2/12	Tullytown	, PA				
Completed By (Pri	nt or Type)	- A	Title		Signature	Λ		Date			
Gwen Trumb			Offic	е		. []		4/27	//12		
			Coor	rd.	1	MP					

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Check #3947

(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1)	1					Owner / Operato	or (2)	DD 0 0 0010				
4/27/12						ersity	II III A	PR 3 0 2012	11-	4		
Agencies Notified Type Notification		0.00		Addr				Willer Dide	1	-		
□ EPA						nceton Univer		BESTUS CONTROL &		-	-	_
☐ DEP ☐ Initial ☐ Amended #7			Control Control		Zip C		102	LICENSING		1		
1 1/2/2-20					, NJ 0 ontact	8544		THE RESERVE THE PERSON NAMED IN COLUMN TWO	elepho	no N	lumh	or
□ DOH □ Emergency □ Cancellation					tego,	DE			elebilo	HE I	uitin	101
Cancellation		I'V			Scriego imita		40947 20 4 1 1 1 1 1 1 1	T				
			FA	CILIT	Y INF	ORMATION						
Name of Facility Where Abatement is Taking		(3)				Type of Facil						
Princeton University – Firestone Libra	ry					School (I/ 10)				
Street Address							oter 8 (Other tha				۱ ما	
One Washington Road			96			Square Feet		nmercial building	dg. Ag		:(6.)	
City (5)	Ic	,011	atu (Code ((7)	Square reet	# 01 F100	015	ug. Ag	8		
City (5) County (6)		,oui	ny c	Joue ((1)	Current Hea	(Prior if being d	omolished)				
Princeton Mercel							-	errionsned)				
N 77 E 11 11 D 71 O		2)		Tage	20.0.0.1.	University	The state of the s	4== (0)				
Name of Monitoring Firm Hired by Building O	wner (3)		ASC	CM No		tement Contrac	tor (a)				
ATC Associates, Inc. Street Address						AbateTech, Street Addres						
Bromley Corporate Center 3 Terri Land	Suif	ha 1	2	5		PO Box 25	55					
City, State & Zip Code	, oun	ic i	_		V-10-10	City, State &	Zin Code			_		
Burlington, NJ 08016						Lumberton						
Project Manager for Monitoring Firm	Tele	eph	one	Numl	oer	Telephone N		License No	umber			
Mike Keehn				800		609-265-210			0052	9		12000
Scheduled Start Date (10) Scheduled @	omple	tion	Dai	e (11))	Name of OSH	HA Monitor					
10/17/11	5/3	31/1	2			EMSL Anal	ytical					
Occupancy Status During Abatement (Check						Street Addres						
Facility Closed/Vacated During Entire				iteme	nt	108 Haddoi						
Abatement Performed Outside of Nor	mal H	our	s			City, State &						
Describe:						Westmont,	NJ 08108					
Facility Occupied During Abatement												
Scope of Work (Check all that apply)							₩ Eull Con	tainment with Ne	antivo	Dro	. O. IFO	
☐ ≥3 sf or ≥3 lf			Don	ovatio	vn.		Full Con	tainment with Ne	gauve	ries	suie	
≥3 \$1 01 ≥3 11 ≥160 sf ≥260 lf	A	53		nolitio			The Description of Transaction	ag Procedures				
∑ 2100 \$1 2200 H	Ш		Dell	iontio	1		-	empted and Non-	Friable	Pro	cedu	ire
Location of	1	310	cati	on	T	Description	Name of the last o	Amount	Aba			22.11
Asbestos-Containing				Jsed		Asbestos-Con		(Specify	7.00			700
Material (ACM)			ely t			Material (A		SF or LF)			ᄪ	т
TO BE ABATED	37,150			ce or		(i.e., thermal s			· em	Repair	cap	nck
in Facility	Cus			Staff?		insulation, surfactor or other miscell			Remova	air	Encapsulate	Enclosure
(13) Work Area #1 Level A	Yes		12) No	N/A	Floo	r tile & Mastic (400 SF			ate	O.
Work Area #1 & #2 Level A		+	\neg	M		Floor tile & I		39,600 SF		П	П	
Work Area #1 & #2 Level A	十片		Ħ	X	- 1	Pipe/Fitting In:		4,500 LF	A	計	Ħ	Ħ
Work Area #1 & #2 Level A	In	H	=	X		int Compound		8,500 SF	X	Ħ	Ħ	Ħ
Work Area #3 Level A	一片	Ti	Ħ	X	1 8	Pipe/Fitting Ins		100 LF	X	Ħ	Ħ	П
Work Area #4 Level B		Ti	T	X	1517	Floor tile & N	Vlastic	1,780 SF		Ħ	n	
Work Area #1 Level 1A	TH	Ti	7	X	No.	Floor tile & N		1,063 SF	X			
Name of Registered Waste Hauler			NJ		Vaste		Name of Regis				7.	
			На	uler II		of Waste						
AbateTech, Inc.				1875	50	14	TRRF Landf	III		. 6		
City, State						Disposal Date	City, State					
Lumberton, NJ	×					5/31/12	Tullytown, P	'A	-			
Completed By (Print or Type)			Titl			Signature			Date			
Gwen Trumbetti			Up	ps. C	oord.	\bigcirc	Af		4/27	112		

Date of Notification (1) 4/27/2012					Owner/Opera PMENT LL				ASBE	70		irn (3)	-
Agencies Notified Type Notification	1	1.55%	Street Ad 676 HI		UNTAIN F	ROAD			Sol	io.		(min)	2000 March 1990
EPA Initial Amended Amendmen				e, Zip Co (LIN LA	^{de} KES, NJ ()7417			DWTRO	0.20			Port office a
□ Emergency justification □ DCA	1)		Name of RICHA		RRISON			Teleph	one Nur	mher		וחת	
			FACIL	ITY INFO	RMATION	1~	5 = - 374 - 740			-	-	-13	4
Name of Facility Where Abatement is Tak VACANT RESIDENCE	ing Place (3)				7.7		School (K-12) Subchapter 8		han K-1	2)		4	Section Of the
Street Address 26 WESTMORELAND AVENUE						×	Other (i.e. privetc.)	vate & co	ommerci	al build	ings,		s,
City (5) MONTVALE		34					uare Feet	# of Fl			dg. A	ge	
County (6) BERGEN			County C STATE U	ode (7) SE ONLY)		Cu	rrent Use (Prior	if being	demolisi	hed)			
Name of Monitoring Firm Hired by Building	g Owner (8)		ASCM	No.			batement Contr ROTHERS C			1G			
Street Address						eet Add	ress THERFORD	BLVD				i i	
City, State, Zip Code					Cit	y, State	, Zip Code N, NJ 07014						
Project Manager for Monitoring Firm	-	T	Telephon	e No.	Te	lephone		L	icense N 0494	lo.			
Start Date (10) 5/8/2012	Scheduled 5/11/201		pletion D	Date (11)			SHA Monitor AS (9) ABOV	Æ					
Occupancy Status During Abatement (Ch	eck Only One)		1 113		Str	eet Add	ress	2.5		1.7			
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: VACANT	e Period of Ab	atem	ent		Cit	y, State	, Zip Code						
Scope of Work (Check All That Apply)		1572		4.000		27777000				0 1000			
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		nova moliti				×	Full Containmer Mini-Enclosure Glovebag Proce Non-Exempted	dure				e	
	-	_					NOII-Exempled	() and i	ton i na	1		ement	
	74-C(0)/(C)	ocati rmall	\$13000		_						Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custoo	Sole tenar dial S (12)	ly by nce/ Staff?	Asbes (i.e.	Descrip tos Containii thermal sys surfacing other misc	ng Mate tems in: , VAT, c	sulation, r	Amo (Spe SF o	ecify	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A				-	400	T.F.		-		
BASEMENT		X	-		PIPE INS	ULATI	ON	120	LF	X			
								- 110	D- 49 V	1 200	Section 1	14.11	
					+				Toler		-		
Name of Registered Waste Hauler	Name of Registered Waste Hauler				Cubic Yar	ds	Name of R	0.000					±0.
TWO BROTHERS CONTRACTION	1	8743	NO.	of Waste	Onto .	WASTE City, State		AGEME	ENT C	3.R.C).W.:	S. 	
City, State CLIFTON, NJ				1142.00	Disposal 0 5/11/20	ð12	MORRI		-				
Completed by VIVECA RAMOS	Title SECR	ETA	ARY		Sigh	ature	ient) en	1	ate /27/20	012		

1 0	9.	29	19
11/2	1	1	69
IY	,		
150			

Date of Notification (1) April 26, 2012			Name of Frank	Building (Salfi	Owner/O	perator	(2)			į	-11		42	
Agencies Notified EPA	Type Notification		C1 122	Street Ad 586 Mo	ddress ountain /	Ave			Section .	213 co	1			
DEP X DOL	Amended Amendment				te, Zip Coo Caldwell		7006		1.					
DOH DCA	Emergency justification) Cancellation		0.00	Name of Frank	Contact Salfi			1		Telephone Nu	mber.	7 , 1 ₁ :	1	
Name of Facility Where	Abstament in Takin	a Diago (2)		FACI	LITY INFO	RMATI	ON	Tune of Casili	1 1			-	Ì.	
House	Abatement is Takin	g Place (3)						Type of Facili	7	-	. I]	
Street Address 586 Mountain Aven	nue								oter 8 (Other than K-1 ate & commerc		dings	, hom	es,
City (5) North Caldwell								Square Feet N/A	- 1	# of Floors N/A		Bldg. /	Age	
County (6) Essex		· je —		County ((STATE L	Code (7) JSE ONLY)			Current Use (House	Prior if	being demolis	hed)		No	
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	No.	+		of Abatement (Abatement,		ctor (9)		4		
Street Address								Address osengren Av	venue	9			2	
City, State, Zip Code								tate, Zip Code wa, NJ 0751	2					
Project Manager for Mor	oject Manager for Monitoring Firm				ne No.			one No. 345-8685		#00675				
Start Date (10) 5/09/12		Schedule 5/10/12		pletion (Date (11)			of OSHA Moni Abatement,						
Occupancy Status Durin	g Abatement (Che	k Only On	e)					Address					0.00	
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr					_	City, S	osengren Av state, Zip Code wa, NJ 0751		9		3		
Scope of Work (Check A	All That Apply)	Exercise -	2000						**********					
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			enova emoliti				×	Mini-Enclos Glovebag F	sure Proced	with Negative ure) and Non-Fria			ro.	
		le	Locati	on				1 Non-Excin	Jieu (and Non-i na		7,539	emen	t
Location	n of	- N	ormall	ly		Des	cription	of				T	уре	
Asbestos-Containing <u>TO BE AB</u> In Faci (13)	ATED ity	Mai	d Solel ntenar odial S (12)	nce/		thermal surfac				Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							-		te	6
garaç	ge		X			pipe	insula	tion		30 LF	X		17.	1.3
basem	ent		X			pipe	insula	tion		86 LF	X			
2		+ y' - M = 3	5.0	esta a		7 1				on the		=		i i see
			V + 1	15.50			17.							
Name of Registered Waste Hauler D&S Abatement, Inc.				JDEP W auler ID 20996	0.0000000000000000000000000000000000000	Cubic of Was TBD				gistered Landfi nagement o				
City, State Totowa, NJ		10				Dispos TBD	al Date	400000000	state town,	PA		r a		
Completed by Deanna Brkusanin	ct ma	nager		3	ignature	un Belle	ш	D 4	ate /26/1:	2				

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Pate of Notification (1) April 26, 2012			ame of E	Building Own kert	er/Opera	ator (2)						
Agencies Notified Type Notification			treet Ad 8 Tona	dress awanda R	oad	- 100 market 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 - 1900 -		. 25		+		
EPA X Initial Amended Amendment #_		C	ity, State Glen Re	e, Zip Code ock, NJ 07	7452			(3)				
Emergency (inc justification)	cluding	11112	ame of Carl Ec	Contact kert				Telephone Numb	er	ha:	iP	1
			FACIL	ITY INFORM	MATION	17	f Facility (4)	1		100	2_	\dashv
Name of Facility Where Abatement is Taking I House Street Address	Place (3)			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		S S S	chool (K-12)	Other than K-12) ate & commercial	buildir	ngs, h	omes	
18 Tonawanda Road City (5)		11				Square N/A		# of Floors N/A	Bld N/A	g. Age A	•	
Glen Rock County (6)			County C	Code (7) USE ONLY)		Currer - Hous		f being demolishe	ed)	3.5		
Bergen	(0)	1,	ASCN				ement Contra	actor (9)				
Name of Monitoring Firm Hired by Building ON/A	wner (8)		ASCIV		I	O&S Abate Street Address	ement, Inc.	85 77 7	17 6			- 0
Street Address						11 Roseng	ren Avenu	e				
City, State, Zip Code	* _100000					City, State, Zi Totowa, N	p Code J 07512			1		
Project Manager for Monitoring Firm		-	Telepho	ne No.		elephone No 973-345-8		#00675	o. 			
Start Date (10)	Scheduled 5/10/12	Con	npletion	Date (11)		Name of OSI D&S Abat	HA Monitor ement, Inc					
5/09/12 Occupancy Status During Abatement (Check)				Street Addre	ss gren Avent	10		20		
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Occupied	eriod of Ab	aten	nent s		- h	City, State, Z Totowa, N	ip Code					
Scope of Work (Check All That Apply)		-								220		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoli	ation ition			× Mi	ni-Enclosure	nt with Negative F edure (*) and Non-Friat			e	æ
	1			T			71 2.00			Abate	ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair Custo	ntena odial (12)	ally ely by ance/ Staff?	(i.e. 1	os Conta thermal s surfac	cription of hining Materia systems insu ing, VAT, or iscellaneous	lation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
The state of the s	Yes	No			nina	insulation		30 LF	X			-
boiler room		X		1		insulation		9 LF	X		1	
laundry room	+	X			pipe	Insulation						
a figures and a superior description	-			-	1 41	9 44,7	/Sales			75		1
Name of Registered Waste Hauler			NJDEP		Cubic			Registered Landf				
D&S Abatement, Inc.	-	Hauler #2099		of Was			Management	ot PA			_	
City, State Totowa, NJ		- 4-			TBD	sal Date	City, Stat	vn, PA	Date			Energy Services
Completed by Deanna Brkusanin	Title Proje	ect r	manag	er	5	signature	Blue		1/26/1	2		

Date of Notification (1) 4/27/12				Name of Sean	Building (Owner/C	perator	(2)	2700				10		25
Agencies Notified	Type Notification			Street A	ddress . Paul' A	venue				A CHARLES OF THE CONTRACT OF T		2>		1	
EPA DEP DOL	Amended Amendment				te, Zip Co vood, N		31		1 2	2017		立 (3)			
DOH DCA	Emergency (i justification) Cancellation	ncluding		Name of Sean	Contact				SIIS.	Teleph	one Nu	mber			
				FACI	LITY INFO	DRMATI	ON			18.		5		32-41	
Name of Facility Where		Place (3)						of Facility (4) School (K-12 Subchapter 8 Other (i.e. pri	Other t	han K-1	2)		home	
225 St. Paul's Aver	nue								etc.)	vale a co	ATTITION CO.	arbuii	unigs,	1101110	,
City (5) Jersey City			lui			New York		1000		# of Flo		5	ildg. A	ge	
County (6) Hudson					Code (7) USE ONLY		_	Curre	nt Use (Prior	if being	demolis	ned)			
Name of Monitoring Firm	Hired by Building C	wner (8)		ASCM	1 No.				tement Cont onmental					Second Sec	
Street Address							Street PO B		ss 33, 4 E Ga	te Drive	e				
City, State, Zip Code									p Code , NJ 0741	8					-
Project Manager for Mon	oject Manager for Monitoring Firm				ne No.		Teleph 973-7			1	cense N 03	lo.			
Start Date (10) 5/9/12		Schedule 6/9/12	ed Com	pletion l	Date (11)		Name	of OSH	A Monitor	1	== 15000VÅI I I IV				
Occupancy Status Durin	g Abatement (Check	Only On	ne)				Street	Addres	SS				-		
	ated During Entire P led Outside of Norma						City, S	tate, Zi	p Code						
														-	
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	II That Apply)		Renova Demoliti				×	Min	Containmenti-Enclosure vebag Procest-Exempted	edure				e	
		Τ.,	1 47							() =		T	55-66 VSS	ement	1
Location	o of		Locati Vormali			Do	scription	of					Ty	ре	
Asbestos-Containing TO BE AB. In Facil (13)	Material (ACM) ATED ity	Ma	d Sole intenar todial S (12) No	nce/		tos Cont thermal surfa	taining M systems cing, VA niscellan	laterial insula T, or		Amo (Spe SF or	cify	Removal	Repair	Encapsulate	Enclosure
basement - various	s storage areas	-		x		nine	insulat	ion		600	1 F	x			
- Dasement - Various	s storage areas					Pipo	modia					+-	-		
										5 3		-			_
									100 p. 12						-
/		1 1			**				1						
Name of Registered Was	ste Hauler		1,5419,9	JDEP Wauler iD		Cubic of Was	Yards	200	Name of R	egistered	Landfil	I			- 1
Newark Carting				509	140.	20			IESI						
City, State Newark NJ						Dispos TBD	sal Date		City, State Bethlehe						
Completed by Andrew Scott Higgin	npleted by Title					S	Signature	De			A	ate 27/13	2		

CK#1884

Date of Notification (1) 04/25/12				Owner/Oprant Jr.	perator	(2)	G		VI	3 [377		
Agencies Notified Typ EPA DEP DOL	e Notification Initial Amended Amendment#		City, Sta	range F	ode	4		APN	3 0 20	12			100
DOH DCA	Emergency (including justification) Cancellation		Name of Fenwio		rant Jr.	- X X - X	A	(Tele	phone Nu	mber	1	O'SECULIA	i I
Name of Facility Where Abate Private Residence	ement is Taking Place (3)	FACI	LITY INF	ORMATIC	ON	Type of Facility		THE SHOP IN THE PERSON OF	Server person		j	All Controls
Street Address 227 Orange Road							School (K-Subchapter Other (i.e. petc.)	8 (Other			dings	, hom	es,
City (5) Montclair							Square Feet 2,100	# of I	Floors		3ldg. <i>F</i> 50+	\ge	
County (6) Essex	4		County (n		Current Use (Pri	or if bein	g demolis	hed)			
Name of Monitoring Firm Hire	d by Building Owner (8)	ASCM	l No.			of Abatement Co mid Contractir						
Street Address							Address Sargeant Aver	nue					
City, State, Zip Code				×11 . 5			tate, Zip Code n, NJ 07013						
Project Manager for Monitorin	g Firm		Telephor	ne No.			one No. 689-6281	197	License N 01099	No.			
Start Date (10) 05/05/12							of OSHA Monitor Environmenta	Labora	atories l	LC			
Occupancy Status During Aba Facility Closed/Vacated Abatement Performed O	During Entire Period of	Abaten				2333	Address Route 22 We tate, Zip Code	st					
Other – Describe:		, , , , o a			-		n, NJ 07081						
Scope of Work (Check All Tha ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renova Demolit				×	Full Containm Mini-Enclosure Glovebag Pro Non-Exempte	e cedure				e	
Location of	1	s Locat Normal			Door	adation	of					pe 'pe	t
Location of Asbestos-Containing Mate TO BE ABATEL In Facility (13)	M	ed Sole aintena stodial S (12)	nce/		stos Conta	ystems ng, VA	laterial (ACM) s insulation, T, or	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Basement	Yes	No	N/A		Pipe I	ncula	tion	75	LF	X		Ö	
Dasement			^		ripe i	risula	uon	73	LF	,			
	100 100				1 1 1 1 1		n pane			-			
Name of Registered Waste Ha	auler		JDEP W		Cubic Y		Name of	Registere	ed Landfill		1,		-
Pyramid Contracting Con	г р.	-	lauler ID 2613	NO.	of Wast	е	G.R.O.	W.S., Ir	nc.				
City, State Clifton, New Jersey					Disposa 05/07/		City, State Morrisy		nnsylva	nia			
Completed by Dimo Golcev	eral M	anger	harden.	Sig	hatture	Dal	M	11	ate 4/25/1	2			
ASB-41 (R-06-08)					D.	Do no	t use this form for	asbestos	s licensur	e exen	pted	activit	ties.

Date of Notification (1) 04/25/12 Ck# 2051 \$200	T			Owner/Ope		2) 5 5	E I W			971		
Agencies Notified EPA DEP Amended Amendment	#		City, Sta	adison /		v 070		R 3 0 2012		IJ		
□ Emergency justification) □ DCA □ Cancellation	(including		Name of	f Contact as Wals	h		whomever in a serie	Telephone Nu	ımber	- Armer		
Name of Facility Where Abatement is Takin Newton Medical Center Street Address	g Place (3)	FACI	LITY INFO	ORMATION		Type of Facility (4		2)	e son	¥.	
175 High Street			Manager 1		-		Other (i.e. pr etc.)	rivate & commerc	ial buil			es,
City (5) Newton, New Jersey 07962						_ :	Square Feet 20,000	# of Floors	. 5	3ldg. / 55+	Age 	
County (6) Morris			(STATE	Code (7) USE ONLY		-	Current Use (Prio Medical Cente	er	hed)			
Name of Monitoring Firm Hired by Building Birdsall Services Group	Owner (8)		ASCN	1 No.			f Abatement Cont Corporation	tractor (9)				
Street Address 65 Jackson Drive					treet A	^{ddress} cBride Avenu	e		describe	*		
City, State, Zip Code Cranford, New Jersey 07016	-						ite, Zip Code and Park, Nev	w Jersey 0742	24			
Project Manager for Monitoring Firm Kevin Burns			Telephoi	ne No. 97-8900	T	elepho		License N			<u>v</u>	
Start Date (10) 05/07/12	Schedule 05/08/1		npletion l	Date (11)	N	lame of	OSHA Monitor	Labs				
Occupancy Status During Abatement (Chec	12.5	70			S	treet A						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	Period of A nal Facility	Hours	nent s		С	ity, Sta	te, Zip Code , New Jersey					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Proposers:	enova		8.		×	Mini-Enclosure Glovebag Proce				e	
Location of		Locat			Doggri	intian a					ement rpe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	d Sole intena odial S (12)	ly by nce/			stems i g, VAT,	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Medical Records Room	165	X	IN/A		T	SI		100 LF	x			
Hallway	X	2311		T	SI		6 LF					
						-			-			
Name of Registered Waste Hauler	7	C1 (0) (0)	IJDEP W		Cubic Yar	rds	Name of R	Registered Landfil	1	1		
Lilich Corporation		lauler ID 87:24	140.	of Waste 2			V.S Landfill					
City, State Woodland Park, New Jersey 07424					Disposal I 05/09/12		City, State Morrisvil	le, Pennsylva	nia		, see	
Completed by Tatiana Kalenikova	Presi	dent			ature	anallal	1 1 11	ate 4/25/1	12		- 5	

CX 8408

Date of Notification () Pagencies Notified (x) EPA () DDF (x) DDH	<u> </u>									ACMORPHICA STATE	
() DEP (x) DOI () DOA					Operator	(2)		9- DA C	Action in	- · ·	
City, State, Zip Code Spara, NJ 07871 City, State, Zip Code Spara, NJ 07893 City, State, Zip C		pe Notification					5 15 1	u w E			
Name of Facility Where Abatement is taking Place (3) Street Address "same as above" City (5) County (6) Essex City (5) County (6) Essex City (5) County (6) Essex City (7) County (8) Essex City (8) County (9) Essex City (9) County (1) Essex City (1) County (1) Essex City (1) County (2) Essex City (5) County (6) Essex City (7) Essex City (7) Essex City (8) Essex Street Address City (8) Essex Essex Essex City (8) Essex	(x) DOL	Notification				JU U AP	R 30	2012			
Name of Facility (4) Building 76 Street Address "same as above" County (6)	() DCA	Notification				Telephone Nu	ımber	ROL &			
Street Address "same as above" County (6)			FACILI	TY INFORMATIO	N	-		· J		11	
Simen as above" County (6)		is taking Place (3)				{ } School (K-12) { } Subchapter 8 (o	ther than	n K-12)			
Name of Monitoring Firm Hired by Building ASCM No. Owner (8) E.H.I Street Address 655 W. Shore Trail City, State, Zip Code Sparta, NJ 07871 Project Manager for Monitoring Firm Telephone Number 973-729-5649 Scheduled Start Date (10) Sched.Completion Date (11) [05] / [14] 1/ [12] [05] / [23] / [12] [Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) [1] Abatement Performed Outside of Normal Facility Hours - Describe: 7 am - 230 pm Scope of Work (Check all that apply) Scope of Work (Check											
Owner (8) E.H.I Street Address 655 W. Shore Trail City, State, Zip Code Sparta, NJ 07871 Project Manager for Monitoring Firm Telephone Number 973-729-5649 Scheduled Start Date (10) Sched, Completion Date (11) [05] / [14]] / [12] Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) [] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours - Describe: 7 am - 230 pm Scope of Work (Check all that apply) [] [] Demolition	ity (5)	TO 02-30			20120	Current use (Prior if l	15				
City, State, Zip Code Sparta, NJ 07871 Project Manager for Monitoring Firm Telephone Number 973-729-5649 Scheduled Start Date (10) Sched.Completion Date (11) [05] / [14] // [12] Month Day Year Occupancy Status During Abatement (Check only one) [] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours - Describe: [x] Other - Describe: 7 am − 230 pm Scope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that a		Building ASCM N	o. , Na		Contracto	r (9)					
Sparta, NJ 07871 Project Manager for Monitoring Firm Telephone Number 973-729-5649 Scheduled Start Date (10) Sched.Completion Date (11) [05] / [14] / [12] [05] / [23] / [12] Month Day Year Month Day Year Cocupancy Status During Abatement (Check only one) [] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours - Describe: [] x] Other - Describe: 7 am - 230 pm Scope of Work (Check all that apply) [] 2 st for ≥ 260 lf Location of Location Asbestos-Containing Used Asbestos-Containing Amount E R Material (ACM) Soley Material (ACM) (Specify M E R In Facility tenance/ (custodial only staff (12) To BB ABATED By Main- (i.e., thermal systems insulation, surfacing, VAT, LF) V A I (13) Yes No NA NJDEP Waste Hauler Name of Registered Waste Hauler NJDEP Waste Hauler Waste Management ID No 304597 Disposal Date City, State Tullytown, PA, Pen Argyl PA	655 W. Shore Trail				7 West S	treet					
Scheduled Start Date (10) Sched.Completion Date (11) [05] / [14] / [12] [05] / [23] / [12]	Sparta, NJ 07871		B	loomfield, NJ 070	003	I inner Ni		357			
Scheduled Start Date (10) Sched.Completion Date (11) (05) (14) / (12) (05) (23) (12) (05) (23) (12) (05) (23) (12) (05) (23) (12) (05) (23) (12) (05) (23) (12) (05) (23) (12) (05) (23) (12) (05) (23) (12) (23) (12) (23) (12) (23) (12) (23) (12) (23			per le			License N	imber .	35/			
Occupancy Status During Abatement (Check only one) [] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours - Describe: 7 am - 230 pm City, State, Zip Code Scope of Work (Check all that apply) [] Demolition [] ≥3 sf or ≥ 3 lf [] ≥ 160 sf or ≥ 260 lf [] Mini-Enclosure with remote decon [x] Glovebag Procedure [] Non-Friable Procedure Location of Asbestos-Containing Material (ACM) Description of Asbestos-Containing Amount E R R Asbestos-Containing Material (ACM) (Specify M E SF or O P In Facility tenance/ insulation, surfacing, VAT, LF) V A I I Removation [ND P Waste Hauler Waste Management Wes No NA Duct 1100 sf x Name of Registered Waste Hauler Waste Management NJDEP Waste Hauler Unity of Waste Vaste Management NJDEP Waste Hauler Unity of Waste Name of Registered Landfill Vaste Management NJDEP Waste Hauler Unity of Waste Name of Registered Landfill Vaste Management Disposal Date City, State Morrisville PA Name of Registered Landfill Vaste Management Disposal Date City, State	cheduled Start Date (10) Sched 05]/[14]/[12] [0	.Completion Date (5] / [23 / [12]	11) N		itor			Control Air Leading and Service			
[] Abatement Performed Outside of Normal Facility Hours - Describe: [x] Other - Describe: 7 am − 230 pm Scope of Work (Check all that apply)	ccupancy Status During Abatemen [] Facility Closed/Vacated Durin	(Check only one)	St	reet Address	2						
Scope of Work (Check all that apply) [] Demolition [x] Renovation [x] Full Containment with Negative Pressure [] Demolition [x] Glovebag Procedure [] ≥ 160 sf or ≥ 260 lf Is Abatement Location of Asbestos-Containing Material (ACM) Used Asbestos-Containing Material (ACM) Amount E R R Naterial (ACM) Solely Material (ACM) (Specify M E R E R In Facility tenance/ insulation, surfacing, VAT, LF) V A (13) Custodial Staff (12) or other miscellaneous A I Ves No NA NA Ves No NA Name of Registered Waste Hauler Waste Management Name of Registered Landfill Name of Registered Waste Hauler Waste Management NDEP Waste Hauler ID No 304597 Cubic Yards of Waste Name of Registered Landfill City, State Morrisville PA Disposal Date City, State Tullytown, PA, Pen Argyl PA	[] Abatement Performed Outside Hours - Describe:		Cit	y, State, Zip Code							
[] Demolition		The state of the s									
Location of Asbestos-Containing Material (ACM) Used Solely Material (ACM) (Specify M E	[] Demolition []≥3 sf or≥3 lf		enovation		[] Min [x] G	ni-Enclosure with re lovebag Procedure					
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basement piping 50 lf x Name of Registered Waste Hauler Waste Management ID No 304597	Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Asi 1 (i.e insula	bestos-Containing Material (ACM) ., thermal systems tion, surfacing, VA		(Specify SF or	E M O V A	R E P A	E N C A P S U L	E N C L O S U R		
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Name of Registered Waste Hauler NJDEP Waste Hauler Waste Management ID No 304597 Of Waste Tullytown Resource Recovery & Grand Ce City, State Morrisville PA Disposal Date City, State Tullytown, PA, Pen Argyl PA		Service Property	en i l'anni verbonnen de avolui			The state of the s		-		-	
Name of Registered Waste Hauler Waste Management NJDEP Waste Hauler ID No 304597 Of Waste Of	asement										
City, State Morrisville PA Disposal Date City, State Tullytown, PA, Pen Argyl PA	: [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	NJDEP Waste H	auler Cu			of Registered Landfi	11	& Grand	Central		
Completed By (Print or Type) Sharon Hendee Owner Title Signature Mu, 4 4/25/12	ompleted By (Print or Type)		Signature Date								

		NOT		MOITA	OF AS	ew Jersey BESTOS ABAT AC 8:60 and 5:16		1 # 2269	- 30 -		erskijzij George	
Date of Notification (1)				Name	of Buildin	g Owner/Operator (2)		7 /			-
4 / 24	/ 12	2			gers Un			DE IV.	-//			
Agencies Notified Type	Notification		S1 25 50 (0).	Street	Address					111	100	
⊠ EPA ⊠ Ir	itial			#27	Road 1	Bldg 4086	II LI A	PR 3 0 2012	111	1)		
	mended			City, S	State, Zip (Code			-	-		
	mendment #			Pis	cataway,	NJ 08854	1 LAS	BESTOS CONTROL &	- Lecent	1		
	mergency (in stification)	iciuain	3		of Contac	The state of the s	140.	Telephone Numb	er			
	ancellation			Mik	e Smith		- Amus		-	أسسنا		
				FΔ	CIL ITY IN	FORMATION	Av.	. 	•			
Name of Facility Where Abaten	nent is Takin	a Place	(3)	1 //	OILITT II	el Oldina llore	Type of Facility	(4)				F
Miller House	ione io Takin	9 1 1000	. (0)				School (K-1					
Street Address							Subchapter	8 (Other than K-12)				
857 Hoes Lane								private and commerc	ial bu	ilding	ıs,	
City (5)		2///20	Vin .	- 2			homes, etc. Square Feet	# of Floors	DI	da ^.		
Piscataway						ALL OF THE	5000	3		dg. Aq 80+	ge.	
County (6)		- 17/42	2000	Cour	ty Codo /	7)(STATE USE ONLY)		rior if being demolish	1	00+		
Middlesex				Cour	ity Code (/	(STATE USE UNLT)	ieu)					
Name of Monitoring Firm Hired	h. D. Ildian	O	(O) T	A COM	N-	TA1	Residentia					
ATC	by Building	Owner	(8)	ASCM		Name of Abateme						
	-			0009	18		VIRONMENTA	L, INC.				12
Street Address						Street Address						
3 Terri Lane						1123 BEAVE						
City, State, Zip Code						City, State, Zip Co						
Burlington Township, N.			_			BRISTOL, PA	19007					
Project Manager for Monitoring	Firm		1000	phone		Telephone No.		License No.				
Brian Kearney			o 1220	9-386		215-788-6040		00509				
Start Date (10)					te (11)	Name of OSHA M						
5 / 7 / 12	- -	5 /	11	_ / _	12	BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During Abate	ement (Chec	k only	one)			Street Address						
□ Facility Closed/Vacated Duri						1123 BEAVER	R STREET					
Abatement Performed Outsi					cribe	City, State, Zip Co	ode					
Time of Abatement: 7:00AN	1- <u>5:00</u> PM/_	—_Р	M	AM		BRISTOL, PA	19007					
Scope of Work (Check all that a	pply)	3- 1/32				1 1				X		
≥3 sf or ≥3 lf		Пр	novati			⊠ Full Cont ☐ Mini-Enc	tainment with Ne	gative Pressure				
☐ ≥3 \$1 01 ≥3 11 ☑ >160 sf or >260 lf			molitio	3000000		☐ Glovebag						
		77						on-Friable Procedure	•			
		1000	Locat		1.7				Ab	atem	ent T	ype
Location of			Normal d Sole			Description o			R	R	Щ	Щ
Asbestos-Containing Materi TO BE ABATED	ai (ACIVI)		intena			stos Containing Ma thermal systems i		Amount (Specify	Removal	Repair	cap	000
IN Facility		Cus	todial S	Staff?	(surfacing, VAT,	, or	SF or LF)	<u>val</u>	7	Encapsulate	Enclosure
(13)			(12)	T	S 0 1	other miscellane	ous)				ate	
Basement/Crawlspace	-	Yes	No 🖂	N/A	Dino in	sulation,Furnace	Inculation	575 LF, 48 SF				П
Living Room					Transit		, modiation	432 SF				
Roof					Roofing			64 SF				
Kitchen & Bathrooms					Sinks	9		4 EA				
AILUITETT & DALTITOOTTS	And the same of				SHIKS	A STATE OF THE STATE OF		7-7				

Name of Registered Waste Hauler

SERVICE TRANSPORT GROUP, INC.

City, State

NUMBER VALUE | Name of Registered Landfill |
Waste | SCu Yds |
Disposal Date | City, State |
NEW CASTLE, DE 19720

Name of Registered Landfill |
Waste | SCu Yds |
Disposal Date | City, State |
WAYNESBURG, OH 44688

Completed By (Print or Type)

Gino Pizzigoni

Title
General Manager

Signature Line Peggygoni / je

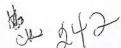
H/24/12

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

MB # 21/4 (Pursuant to NJAC 8:60 and 5:16)

[5								CKTX	20	0		- 18 SE
Date of Notification (1) 4 / 24	/ 12	2			e of Buildir I tgers Ur	ng Owner/Operator (niversity	2)	NATIONAL DEPOSITS OF THE PROPERTY OF THE PROPE	7, 1	2394) . · · ·	
Agencies Notified Typ	e Notification		-	Stree	t Address			E G E II	WI	FI	11	1
⊠ EPA ⊠	Initial			#2	7 Road 1	Bldg 4086	III/r					
	Amended			(6-5-3-11 PRV	State, Zip	4.5	111 111		10000000	11		
	Amendment # Emergency (i			Pis	cataway	, NJ 08854		APR 302	012			
	justification)	roldding		Name	e of Conta	ct		Telephone Numi	ber			
	Cancellation			Mil	ke Smith			A	1			9
				FA	CILITY	NFORMATION		LICENSING	******	-	angujujuh)	Ι,
Name of Facility Where Abate		- Day III MANGEMENT	(3)				1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	(4) www.ce	را مريا احتراده	Spenier		
Livingston Recreationa	I CTR #415	4				W. W. C. C. C.	Subchapter	?) 3 (Other than K-12)	1			
Street Address 62 Road 3								rivate and commer		uildin	gs,	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
Piscataway							18000	1		60+		
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)	-		
Middlesex							University 0	MY				
Name of Monitoring Firm Hired	d by Building	Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
ATC				000	98	BRISTOL EN	VIRONMENTA	L, INC.				
Street Address					2000-1-100	Street Address						
3 Terri Lane	-					1123 BEAVE						
City, State, Zip Code						City, State, Zip Co						
Burlington Township, N		-1-220				BRISTOL, PA	19007					
Project Manager for Monitoring	g Firm			lephone		Telephone No.		License No.				
Brian Kearney				609-386		215-788-6040		00509	INDE-		50%	
Start Date (10) 5 / 21 / 12				letion Da 25 /		Name of OSHA M		INC				
			No.		12		VIRONMENTAI	L, INC.				
Occupancy Status During Aba Facility Closed/Vacated Du	35			omont		Street Address	CTDEET					
☐ Pacifity Closed/Vacated Du					scribe	1123 BEAVE						
Time of Abatement:						City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all that	apply)					M Full Cont	-1	-0- P				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		⊠ Rer				☐ Mini-Enc	Procedure	ative Pressure n-Friable Procedur	e			
		Is	Loca	ation	T		, , , , ,		1	atem	ent T	vne
Location of			orm	ally lely by	Lane Control	Description of			-	_		T T
Asbestos-Containing Mater TO BE ABATED	rial (ACM)			ance/		estos Containing Ma e., thermal systems i		Amount (Specify	Removal	Repair	nca	ncic
IN Facility		Custo		Staff?	(1.0	surfacing, VAT,	or	SF or LF)	oval	5	Encapsulate	Enclosure
(13)		Yes	(12 No			other miscellaned	ous)				ate	(b)
121 MER - Mechanical					Tank Ir	sulation		400 SF				
121 MER - Mechanical					Pipe Fi	ttings		30 EA	Ø			
			П			**************************************			П	П	П	П
Name of Registered Waste Ha	uler		一	NJDEP \	Vaste Vaste	Cubic Yards of	Name of Regist	ered Landfill			- 0.2	
SERVICE TRANSPORT		Э.		Hauler II 20990		Waste 5 Cu Yds	MINERVA L					
City, State						Disposal Date	City, State		1/1			
NEW CASTLE, DE 19720)					5/25/12	WAYNESB	URG, OH 44688				
Completed By (Print or Type) Gino Pizzigoni	Title	eneral	Ma	nager		Signature Line &	2	/ · O 4	e/20	1/1	2	
SR.41				37.		, sinc l	Jegon	178	1-	1'0	i de co	-

MAY 11 GI / 1 0 8/ * Do not use this form for asbestos licensure exempted activities.



Date of Notification (1) 04/25/2012				Building (Owner/Op T	erator (2)	E C	E	WE	M	7 :		
Agencies Notified Type Notification		1	Street Ad 18 TAY		TREET						Westwale		
X DEP Amended X DOL Amendment				e, Zip Co DALE N	ode I.J. 0764	2	112 11	302	012	لا		FI	
□ Emergency □ justification) □ DCA □ Cancellation		1.0	Name of JAYNE	Contact HURS	т		500 TO 1	l-Telen		nber			
	77.00	-	FACIL	ITY INFO	ORMATIO	N			WITH SERVICE PROPERTY.	* DEPOSITE A			
Name of Facility Where Abatement is Takir PRIVATE	g Place (3)						of Facility (School (K-1 Subchapter	2)	than K-1))			
Street Address 18 TAYLOR STREET		102				×	Other (i.e. p etc.)	rivate & c	commerci	al build			?S,
City (5) HILLSDALE N.J. 07642	4.6					1	re Feet 800		ORIES	6	ldg. A 2 YE	ge ARS	>
County (6)			County C (STATE U	ode (7) ISE ONLY)		— Curre	ent Use (Pri	or if being	demolish	ed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	No.		Name of Aba SHARON				ION I	LC		
Street Address						Street Addre		PLACE		-		1 10	
City, State, Zip Code						City, State, Z		J. 0760	1	ы	Te.	-	
Project Manager for Monitoring Firm		T	Telephon	ne No.		Telephone N 201-708-4	lo.	- 1	icense N	0.			
Start Date (10)	Scheduled 04/26/20		npletion E	Date (11)		Name of OS J&S ENV	HA Monitor			:S	17	na II	
04/25/2012 Occupancy Status During Abatement (Che				***************************************		Street Addre							
					and the same	2333 ROI		EST					
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	mal Facility I	Hours	nent S			City, State, 2 UNION N		3					
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				Ŭ Mi	III Containmoni-Enclosure ovebag Prodon-Exempted	e cedure	100			A	
	Т		. 1				JII Excimpto	4 () ((101111100		V	ement	t
	SP(21)(3)	ocati ormal	22000		Doc	cription of					Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Custo	itena	nce/ Staff?		stos Conta . thermal s surfaci	ining Materia ystems insul ng, VAT, or scellaneous)	ation,	(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		ti Samuel Sala					_		(D)	
SECOND FLOOR		X		VAT	r FLOOF	R TILE DE	BRIS	160	SF				
					CLE	AN UP	. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		17 1	_			
The second section of the Asset		10.7	10.700		n million	Maria Africa				-			
			JDEP W	la a ba	Cubia	Cubic Yards Name of Registered Landfill							
Name of Registered Waste Hauler SHARON QUALITY CONSTRUCT	ION LLC	. +	lauler ID 033967	No.	of Wast		TRI -ST	1000			ERV	ICES	5
City, State HACKENSACK N.J. 07601					Disposa 05/01/		City, Stat	e K N.Y. 1	0474				
Completed by XIOMARA GOMEZ C.	Title PRES	IDE	NT			gnature 10 m a rc	66m	. Q.	Da 04	te 1/25/2	2012		



NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1) 3/29/2012 REV – 4/25/12	- 4	***		Name of Build Paulsboro Ref			/FS /FS	f n	7	-	1.44
Agencies Notified () EPA () DEP (X) DOL	() Initia	ation Type Il Notification nended Certifica ncelled	tion	Street Address 800 Billingspo City, State, Zig Paulsboro, NJ	rt Rd	UU A	en 3	0 201	12 1		
(X) DOH () DCA	() 0a			Name of Cont. Ravi Jarecha	act /	ASU)	Tel. N	umber	4		1 1
Name of Facility Where Abatem Paulsboro Refining Company Street Address	ent is Taking Pl	ace (3)	FACILITY IN	Type of Facilit () School (K- () Subchapte (X) Other (i.e.	y (4) 12) r 8 (other th	nan K-12)	ah saayaa .	Manager and State of the State			
800 Billingsport Rd				Sq. Feet N/A		# of Floor	rsN/A	Α	_		
	nty (6) ucester	County C (State Us		Bldg. Age N. Current Use (p		g demolished)	Oil Re	efinery			
Name of Monitoring Firm Hired	by Bldg. Owner	(8) ASCM N	0.			Name of Co Kenny Atlan			rvices L	_C	
Street Address			- 1	Street Address 800 Billingspo City State, Zip	rt Rd						
Project Manager for Monitoring	Firm Telent	one Number		Paulsboro, NJ Telephone Nu	08066		Licens	e Numb	oer		
Project Manager for Monitoring	Telepi	one ivaniber		856-224-4392	<u> </u>		00857		_		
Scheduled Start Date (10) 4/12/2012	Sched 5/4/20	uled Completion	Date (11)	Name of OSH. Kenny Atlantic		Services, LLC					
Occupancy Status During Abate () Facility Closed/Vacated Duri () Abatement Performed Outside	ng Entire Period	of Abatement	,ti	Street Address 800 Billingspo	rt Rd						
Other – Describe – Removal wit	hin restricted w	ork area in outsi	de areas	City, State, Zip Paulsboro NJ							
Source of Work (Check all that a		= 12									
() Demolition (X) Renovation () Large Proj. (>160 SF or >26 (X) Full Containment with Nega	0 LF ACM) (X) S	SM Proj. (>25<1	60 SF or >10 <26) Minor Pro	oj. (<25 SF or <	<10 LF A	ACM)			
Location of Asbestos- Containing Material (ACM) in	Is Location No Solely by Main	mally Used	Description of thermal system	ACM (i.e. ns insulation,	Amount ((Specify SF or	LF)	Abate	ment Ty	<u>pe</u>	
Facility (13)		NO NA	surfacing, VAT misc.)					Rem.	Rep.	Encap I	<u>Enclose</u>
CU 7 Heater Transfer Line			TSI – Large C	DD Pipe	~10 LF			X			
Name of Reg. Waste Hauler Waste Management, Inc.	NJDEF 17273	Waste Hauler	ID#	Cubic Yards o	f Waste				Landfill ounty La		
<u>City, State</u> South Harrison, NJ						Disp. Date Various			City, Sta South Ha	<u>te</u> arrison, N	47
Completed by (Print or Type)	Title		1 10 100 - 5.	Signature	e Marie		Date		100		
ANDREW GREEN	MANA	GER - KENNY /	ATLANTIC	and Site &	perations S	Supervisor	4/25/2	012			
				/-			;	-92-1			

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



Date of Notification (4/23/12				Name of New Jers	Building sey Scho	Owner/Op ol Develo	perator pment	(2) Authority	<u> </u>	g II W	L			
Agencies Notified Ty	pe Notification			Street Ac 1 West S		P.O. Box	991		APR	3 0 201	2		The state of the s	
X DEP X DOL	x Amended Amendment #1 Emergency (include		- [Frenton I	te, Zip Co N.J. 0862	25		D. P. P. P.		S CONTROL			THE REAL PROPERTY.	,
X DOH DCA	justification) Cancellation		- 1 2	Name of aul Moc	Contact k			L. Marian		phone Nun	-		المحمي	*******
				FACI	LITY INF	ORMATIC	ON	NAME					0.402.0	, it
name of Facility Where Abat Caruso Elementary School Street Address	ement is Taking Plac	ce (3)					11	Type of Facility (School (K-1 Subchapter	12) 8 (Othe			inaa	homo	
81 Frances Place City (5)								Other (i.e. p etc.) Square Feet		Floors		ldg. A		
Keansburg, N.J. 07734								48000		2	35	5+		
County (6) Monmouth				County C STATE U	code (7) ISE ONLY	o	_	Current Use (Pri School	or if bein	g demolish	ed)			
Name of Monitoring Firm Hir Hatch Mott MacDonald	ed by Building Owne	r (8)		ASCM 00140	No.			of Abatement Cor Enterprises Inc	ntractor (9)		, N		p.
Street Address 27 Bleeker St.								Address eers St						
City, State, Zip Code Millburn N.J. 07041								tate, Zip Code rt N.J. 07735		1-02-001-10-0				
Project Manager for Monitori Kevin Herrighty	ng Firm			Telephor 973-912-				one No. 89-1200		License N 01095	0.			
Start Date (10) 4/30/12	eduled ()/12	Com	pletion [Date (11)		Name n/a	of OSHA Monitor							
Occupancy Status During Ab	patement (Check Onl	y One)	-				Street	Address	-					
x Facility Closed/Vacated Abatement Performed 0 Other – Describe:				ent			City, S	tate, Zip Code			<u> </u>			
Scope of Work (Check All Th	nat Apply)				4									
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		Ren x Dem					 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proce 							
		Is Lo	ocati	on	-						T	Abate	_	t
Location of		Norma	ally L	Ised		Des	scription	of				Ту	ре	
Asbestos-Containing Ma TO BE ABATE In Facility (13)	ח	Mainte Custod		ice/	Asbe: (i.e	stos Cont thermal surfac	aining N	faterial (ACM) s insulation, T, or	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes										-		ate	Ф
						There		- 4 4			X			
SEE ATTACH				SEE	ATTACH	IED				X				
Name of Registered Waste H Horizon Disposal		H	JDEP Waller ID I 2612		Cubic Yards Name of Registered Landfill Cumberland County Landfill				X					
City, State 235 Gibbs Ave Trenton N.J.			1000		Dispos	al Date	City, Stat				4			
Completed by James Mahoney	tle roject m	ana	ger		Si	hature	and the second		Da	te 4/23/1	2			

ASB-41 (R-06-08)

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

Location of Asbestos-Containing Material	Use	tion Nor d Solely intenant	by	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation,	Amount (Specify		Abate Ty		
(ACM) TO BE ABATED In Facility (13)		todial St (12)		surfacing, VAT, or Other miscellaneous)	SF or LF)	Removal	Repair	Encapsulation	Enclosure
	Yes	No	N/A				-		
1245202122		h h	X	VAT+ MASTIC	4,2055F	X	_	-	-
1/1/1/20/20/20/20/20/20/20/20/20/20/20/20/20/			X	Linoleum	4,260sF	X	-	-	-
Mallways Rms 6, 7, 23, 24,27			X	VAT+MASTIC Linoleum VAT+MASTIC	2685F	X		-	-
5m86, 1,20,27,21			X	1/AT+MASTIC	12254	X	_	-	+
RMS 35+36			V	VAT+MASTIC	1125F	X	-		_
RMS 35 +36			X	VAT+ MASTIC	300 5F	X			1
ms 8-18		1	X	Radina.	37,5005				
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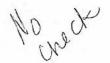
CK 2322 EMERGENCY

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NJ Dept	of Health	& Senior	Service
8	9 5	ALERA .	

Date of Notification (1) Agencies Notified Type Notification Agencies Notified Type Notification Type Notification Type Notification Sugest Address County (6) Name of Sultding Owner/Operator (2) Date: In County (3) Date: In County (2) Date: In County (3) Date: In County (4) Date: In County (2) Date: In County (3) Date: In County (4) Date: In County (2) Date: In County (3) Date: In County (4) Date: In Count	0	201,	2	2.0
Initial Amended Amen	0	201	2	The state of the s
Initial	0	201	2	Programme de se
Amendment & Emergency (including justification) Cancellation	0	201	2	-
DCA	and the		100-34-0-80-4	1
(NJAC 5:23-6) justification Name of Contact Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Street Address City (5) City (5) City (5) Square Feet # of Figors	an an		Mariant Mari	
Cancellation	A) bra		NOT AND DES	
FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Street Address Street Address City (5) City (5) FACILITY INFORMATION Type of Facility (4) School (K-12) School (K-12) School (K-12) School (K-12) School (K-12) Southapter & (Other than K-12) Normas, etc.) Square Feet # of Floors	s) fara		-	
Street Address Street Address City (5) City (6) City	a) face			No.
Street Address Street Address Other (i.e., private and commercial hornes, etc.) City (5) City (5) Square Feet # of Floors	al form			
Street Address THE WAST NOW AND Square Feet # of Floors City (5) Kanway	al fara			
City 5 Square Feet # of Floors	al man	iid ng	8,	
County Code (TVSTATE (ISE ONLY) Current Use (Prior if being demolishe	816	ig. A	jė	
mount (a)	ed)			
llanion				
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)	12.	-	ħ.	
Street Address Street Address	L	Ш	K	
151 Forest Ave			V	
City, State, Zip Code City, State, Zip Code LUNCHUTST, AL 07071				
Project Manager for Monitoring Firm Telephone No. Telephone No. Ucepse No. 01038				
Start Date (18) 20 / 12 Schaduled Completion Date (11) Name of OSHA Monitor				
Occupancy Status During Abatement (Check only one) Street Address				
Facility Closed/Vacated During Entire Period of Abatement				
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPMPMAM City, State, Zip Code				
Scope of Work (Check all that apply) Full Containment with Negative Pressure				
☐ ≥3 9f or ≥3 If ☐ Renovation ☐ Mini-Enclesure				
Demolition ☐ Glovebeg Procedure ☐ Non-Exempted (*) and Non-Friable Procedure				
is Location	-	elem	ent Ty	wne.
Normally		_		1
Asbestos-Containing Material (ACM) Used Solety by Asbestos Containing Material (ACM) Amount Maintenance (See the Insulation (Specify	Remova	Repair	70	당
	EAL	7	Encapsulate	Ericlosure
(13) (12) olher miscellanceus)			ate	, ,
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Classification The Plant Howard Con	-			
Name of Registered Waste Hauter MIDEP Waste Cubic Yards of Name of Registered Landfill Waste T. R. R. F				
A SMEARIN AND A STEERN AT A STEER ASTRONOMY AND ASTRONOMY AND ASTRONOMY ASTR	-		12.17	
City State Disposal Date City, State				
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City State Disposal Date City, State	1.	n. 1		
City, State Office Offi	110	2/1	2	



Date of Notification (1) 04-25-12			Name	of Building	Owner/Operat	or (2)	The second second second second	1000-00					
					Urban Rene	wal Compan	y, LLC	F	1] }			
▼ EPA	cation		100 V		on Blvd., Su))	CONTRACTOR OF STREET			The second second			
	ded dment # gency (including			tate, Zip Co ford, CT		II APR	3 0 2012		IJ	The state of the s			
DOH justific	ation) ellation		and the second second	of Contact Dolan		ASBEST	Telepho	one Nu	mber	1			
			FAC	ILITY INFO	ORMATION		CENSING		-	<u> </u>			
Name of Facility Where Abatement is The Orpheum Building	Taking Place (3)	1011			Type of Facil	ity (4)	Manager Services	4 T036-	-			
Street Address						School ((K-12)			4			
24 Beacon Way						Subchar X Other (i.	oter 8 (Other th e. private & co	an K-1	2)	nar.	2000 8 00 000		
City (5)						etc.)	c. private & co	mmerc	iai bu	liaing:	s, nor	nes,	
Jersey City						Square Feet 250,000	# of Flo	ors		Bldg. 50+-	77		
County (6) Hudson			County (STATE	Code (7) USE ONLY)		Current Use (Prior if being d	emolis	- 1				
Name of Monitoring Firm Hired by Bui	Iding Owner (8)		ASCI	M No.	Name	e of Abatement (Contractor (9)	_					
Lis Consulting Services, LLC						nmark Contra							
Street Address 134 Bennington Pkwy						t Address Edsall Drive							
City, State, Zip Code		100				State, Zip Code				-		_	
Franklin Park, NJ 08823						sex, NJ 0746	61 .						
Project Manager for Monitoring Firm Kris Lis			Telepho 732-94	ne No. 40-6207		hone No. -864-2022		ense N 137	0.				
Start Date (10) 05-08-12	Schedule 06-22-1		mpletion	Date (11)		of OSHA Monit	or						
Occupancy Status During Abatement (Check Only On	e)				Address							
			mont			East 30th Str	reet						
Facility Closed/Vacated During El Abatement Performed Outside of Other – Describe:	Normal Facility	Hour	'S			State, Zip Code	2010						
Scope of Work (Check All That Apply)		-			- IVEW	York, NY 10	016						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoli			2	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
	Isi	ocat	ion				T / drid Hor	THAD			emen	t	
Location of	N	orma	lly		Description	of					ре		
Asbestos-Containing Material (ACM	" Moir	ntona		Asbesto	s Containing N	Material (ACM)	Amoun				Tit		
In Facility (13)	Custo	dial (12)	Staff?		hermal systems surfacing, VA	T, or	(Specify SF or LF		Rer	Re	n a	Enc	
(13)	No	N/A		other miscellar	eous)	0, 5, 5,	,	Removal	Repair	l En papsulate	Enclosure		
All Floors	Yes	X	IN/A	1	Mindow Co.	Ulcina	000				te .		
2nd & 19th Floors		^ X		, v	Vindow Cau Pipe Insula		892 windo		х				
17th Floor		X		Par			275 L.F		x				
			1	· · · · ·	or insulation	sulation board 390 S.F. x							
Name of Registered Waste Hauler		TN.	JDEP Wa	ste	Cubic Yards	Yards Name of Registered Landfill							
Pro-Tech, LLC	****	H	auler ID N 90713	No	of Waste		ra Landfill	indfill					
City, State lew Haven, CT		Disposal Date					City, State						
Completed by	Title	on completion Waynesburg, OH					Section 14						
farko Stankovic	ent			Signature	A Date								



Date of Notification (1) 04-25-12			Name of	Building	Owner/O	perator ((2) Rana	wal Com	nanvi	ile-			a Cowy	A Lagran
Agencies Notified X										E	1			
DEP X Amended Amendmer		_	City, Sta	te, Zip Co	de	ı., Suite	200			APR 3	0 2	012		
DOH justification)								Tel	lephone Nur	mber	UIZ	IL	
<u> </u>			FACI	LITY INFO	ORMATIO	ON	- 200	-(B BATTER	GATEG)	1 2	-4	9
The state of the s	ng Place (3)								- MAN	AC.	-	-	
			8				X	Other (i.e. p		el ulail IX- I	~)			es,
		11.	2.4		3.1		Squa	re Feet	1000000	f Floors	10000		ge	
	4					_		Carried and Carried	or if be	ing demolisl	ned)	4		
	Owner (8)		ASCM	l No.						-30				
		2 32 SW												
City, State, Zip Code		e motile		250					CIII COMINICO	50 M2 10 10 10 10 10 10 10 10 10 10 10 10 10	<u>,</u>	- 1 - 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-		
						Teleph	one N	0.		License N	lo.			
Start Date (10)	Schedule	d Cor						HA Monitor		101137				
04-17-12	05-20-1	12				Amer	Seminary.							
Occupancy Status During Abatement (Che						Street /		ss 30th Stree	et	(With the Paris				
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:						City, St	ate, Z	ip Code , NY 100						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	The state of the s	enova emoli				××××	Mir	ni-Enclosure ovebag Prod	e cedure	n Negative F			A	
	lo lo	Loont	ion						. , ,		T	Abate		t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lorma d Sole ntena	lely by ance/ (i.e. therr su				ateria insula T, or		(5	Amount Specify F or LF)	Remova	Repair	e Encapsulate	Enclosure
	Yes	No	N/A								Ļ		te	
Throughout Powerhouse		X				Insulat		1	4,0	50 L.F.	x			
Throughout Powerhouse		X		Boile	r & Bre			lation		000 S.F.	x			
3rd Floor North Rooms	2	Х		11111		or Tile				50 S.F.	х			
Roof		X		-	Roofing		shing	ACCOUNT OF THE PARTY OF THE PAR	100	00 S.F.	x			
Name of Registered Waste Hauler Pro-Tech, LLC		H	IJDEP W lauler ID 90713		Oubic of Was 200			Minerva		ered Landfill dfill				V. 15
City, State New Haven, CT		-		-1		sal Date mpletic	on	City, Stat		, OH				
Completed by Marko Stankovic	Title Presid	dent				igpetidre		Hour		Da	ate 4-25-	12		

Fax:

		NEC			Jersey	eren and		"Che	ek Ø1	008	9
Date of Notificat	ion (1)	(Pur	suent to 1	NJAC 8:	PESTOS ABATEMENT 60-7 and 12:120	71 1	IF II DA	APPRO	VEM	i i	
4/20/12			Name of	Build:	ing Owner/Operati	0± (2) L		lealth &	Senio	r Se	rvice
Agencies Notified	Type Noti	Pication				(25)	6	(Signabu		2	
[]EPA	(X) Initi	al	Street .		ngton Ave	U W API	Date: On 8			10	
[]DEP	Noti	fication	City, E	tate, z	in Code	- É		kwaga			=
[X]DOL	[]Amend Noti	ed fication			eld, NJ 070	03 LASSES	TOS COVERNO V		No. of Contract		
EOG[X]	[X] EMERG	ENCY	Name of		77	Telep	phone Number		+		
[]DCA	[]Cance		Mar	ie Te	ellini	•				į.	
Ma			1	PACILIT	Y INFORMATION				-	-	
Name of Facility Private	Where Abatene	nt is Tal	ing Place	(3)		Type of Fa	cility (4)				
Street Address					10	[] Scho	ol (K-12)	7 22	120	232	
41 Lexingto	n Ave			1		<pre> (x)Othe</pre>	haptar 8 (Oth r (i.e., priv l buildings,	ate &	COM	er-	
City (5)		County	(6)		-2 2 1 4	Square Fee			aldg.		e
Bloomfield		Ess			County Code (7)	1800	2	}	10	0	
1.0 1.0						Corrent Use	Prior if b	eing d	emol:	ishe	(D
Name of Monitoring Owner (8)	Firm hired 1	y Buildi	ng ASCM N	No.	Name of Abate	Reside	nce				
N/A			67			ANAGEME					
Street Address					Street Address						St =
						topher S	St.				
ity, State, zip c	ode		7		City, State,	Zip Code					
roject Manager for	r Monitoring	Eden m	lenhone N		Montclai		7042				
	1		/A	mper	(973) 744			Cicense 003		pe:	
cheduled Start Day	ts (10) Sc	had. Comp	Letion Dat	te (11)					-		
4/23/12 Month Day 1		1/24/1	2		N/A						
ccupancy Status D	uring abatem	nt (Cheese	only one)	Street address	. —					
[X] Facility Cl of Abateme	nt										
[]Abatement P	erformed Outs	ide of No	rmal Faci	lity	City, State, z	in Code					
f lother - Des	cribe: «Office Cribe: «Other	Occupancy	pt» Descript			TP COM					
cope of Work (Chec				=							
[X]≥3 sf or []≥160 sf	: >3 lf	C	X]Removati Demoliti		[x]Glove)	Containment of colors of Proceedure		Press	ure		
Locatio		ī	Is coation		Description) OF		Abe	Some	et ?	rype
Asbestos-Co Material		- 1	Used		Asbestos-Cont	aining	Amount	R	R	N	EZC
TO BE AR	LATED	B	Solely y Main-		Material (A		(Specify	1 44	P	C A P	L
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asement		, Ava	No N/A		e Insulatio	n	130 lf	X	\square	<u>.</u>	E
asement	-		х		ler Insulat		25 sf	X		-	
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ma of Registered WANAG		IC. Ha	DEF Waste		bic Yards Waste 2.0 .	Name of Reg. G.R.O.W.	istered Lands	ill	1		1100
ty, State		1	7040	De	sposal Date					9	-
ontelair, NJ	07042			25.00 FM 40.000		City, State Morrisvi	11e, PA	1906	7		
upleted By (Print	or Type) fi	tle					1.0-014				1,14
onstantine V		reside	nt	in the same	Signature			Date 4/20/	12		
					L. U						

Date of Notification (1) 04 / 25 /	12				of Building id Stepp	Owner/Operator (2		GEIW	EI	Marin Contract of the Contract	1				
Agencies Notified ☐ EPA ☐ DOLWD ☐ DHSS ☐ Type Notifica ☐ Minitial ☐ Amended ☐ Amendment	d ent #			186 City, S	Address N. Gasto tate, Zip C	Code	The state of the s	PR 3 0 2012							
DCA (NJAC 5:23-8) Emergen justification Cancellat	on)	aing			of Contact		ha managina-patawani	Telephone Num		OSperito Account					
				FAC	ILITY IN	FORMATION	To the same of the same of	and described and the managed projects.	er a de processon	No. of Street, or other Printers.					
Name of Facility Where Abatement is T Private House Street Address 186 North Gaston Ave	Γaking P	lace (3)				Type of Facility (School (K-12) Subchapter 8	4)	2)		s,				
City (5)		-10					Square Feet	# of Floors	Blo	ig. A	je				
Somerville							2000 SF	1		50÷					
County (6) Somerset		70 22		Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri-	or if being demoli	shed)						
Name of Monitoring Firm Hired by Build	ding Ow	ner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)			12 (1,7)					
N/A						Genesis Con	tracting Corp								
Street Address						Street Address									
N/A						106 Gold St		4							
		1				City, State, Zip Co	nde	J-2							
City, State, Zip Code								*							
N/A			77-1-	11	112	A CONTRACTOR OF THE PARTY OF TH	rook, NJ 08812								
Project Manager for Monitoring Firm N/A			N			Telephone No. 908-809-0315	5 01090								
Start Date (10) 5 1 12 12	Schedule 05			tion Dat		Name of OSHA M	lonitor								
Occupancy Status During Abatement (Facility Closed/Vacated During Enti				ment		Street Address N/A									
Abatement Performed Outside of N Time of Abatement:AM	lormal Fa PM/_	acility	Hour _PM-	s - Des	cribe AM	City, State, Zip Co	ode	7 -				4			
Scope of Work (Check all that apply) □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		Ren					tainment with Neg losure g Procedure mpted (*) and No		ıre			£			
2007	T	Isl	Locat	ion	I		1		Ab	atem	ent T	уре			
Location of Asbestos-Containing Material (ACN <u>TO BE ABATED</u> IN Facility (13)		Used	ntena	lly ely by nce/ 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	Enclosure			
	1	Yes	No	N/A							100.1				
Basement- Boiler	1		\boxtimes		TSI			60 SF	\boxtimes						
		51							П	П	П	П			
			200	-	-						_				
	L								ᆜᆜ	Ш	Ц	Ц			
		$\supset \mid$					10 10 10 10								
Name of Registered Waste Hauler Genesis Contracting Corp			6.00	JDEP V	No.	Cubic Yards of Waste	Name of Regis G.R.O.W.S								
City, State				32980		TBD Disposal Date	City, State	7	7						
Green Brook, NJ						TBD	Morrisville	, PA							
Completed By (Print or Type)	Title	nago	•	171	oye Tarking	Signature			ate	1.	,				
Eli Brito	iviai	nage	r				1		7/25	11	_				
ASB-41 MAY 11	* Do	not i	use ti	nis form	for asbes	tos licensure exem	ofed activities.								

House

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

Date of Notification (1)	4 /	12				ling Owner/Operator of University-Office	111-11				The same of	's Williams
Agencies Notified EPA	Type Notifica	ation	151.00		et Address 0 Elm D	5x		-APR 30	2012	A STATE OF THE PARTY OF THE PAR	and a	1
☑ DOLWD ☑ DHSS		MATERIAL SALES	24/12	City,	State, Zip	Code	1 (Applotes (01) LIGENTIN	ful 8	mental.		-
□ DCA	☐ Emergen			Pr	inceton,	, NJ 08544	Entre windows	11(.13).14(
(NJAC 5:23-8)	justification	on)		Nam	e of Conta	act	4.4	Telephone Nun	nber		-	-
	☐ Cancellat	tion		Ro	bert Ort	tega	*Dates College			ARTS CA	edua-Japan Maringah	rgi (
	-we-, we-, we-			FA	CILITY	INFORMATION						
Name of Facility Where A			ice (3)				Type of Facility School (K-1			7/		
Street Address Washington Rd							8 (Other than K-1) private and comme		uildin	ıgs,		
City (5) Princeton							Square Feet	# of Floors	8	ldg. A	Age	-
County (6) MERCER				Cou	nty Code	(7)(STATE USE ONLY)	Current Use (P	rior if being demoli	ished)		ul in a	
Name of Monitoring Firm	Hired by Build	ling Owne	ar (8)	ASCM	1 No	Name of Abateme	ent Contractor (0	\			100	_
ATC Associates Inc		ang Owne	1 (0)	AGGIV	1110.		VIRONMENTA	f.				
Street Address				1		Street Address	VIICONNENTA	CL, INC.				
Bromley Corporate	Center-Three	ee Terri	Lane			1123 BEAVE	RSTREET	36				
City, State, Zip Code	•					City, State, Zip Code						
Burlington, NJ 080	16					BRISTOL, PA 19007						
Project Manager for Mon	itoring Firm		Te	lephone	No.	Telephone No. License No.						_
Michael Keehn			(609-386	9-386-8800 215-788-6040			00509				
Start Date (10)4/14/		cheduled 12		letion Da		Name of OSHA M	Ionitor VIRONMENTA	LINC			lesson.	
Occupancy Status During			1000		12		VIKONIVIENTA	L, INC.				
☐ Facility Closed/Vacate				ement		Street Address 1123 BEAVE	OCTREET					
Abatement Performed Time of Abatement: 7	Outside of No	rmal Faci	lity Hou	urs - Des		City, State, Zip Co	ode				rycesty.	
Scope of Work (Check all	that annly)					BRISTOL, PA	19007					_
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			Renova Demolit			☐ Mini-Enc ☐ Glovebag	Procedure	gative Pressure	ıre			
	(9)		Is Loca							atem	ent	Т
Location		U	Norm sed So			Description o				_	1	
TO BE ABATED IN Facility Mainten Custodia				ance/ I Staff?		estos Containing Ma e., thermal systems i surfacing, VAT,	insulation, (Specify or SF or LF)		Removal	Repair	Encapsulate	
(13)		Yes				other miscellane	ous)				afe	
B-Level	-				Floor	tile and mastic		12,212 SF				
Stair towers #2, #3, #4	4 & #5				Floor	tile and mastic		1,755 SF				
Stair towers #2, #3, #4 & #5					Windo	w caulk and glazi	The second of th					1
					1-1-1					П	П	
Name of Registered Wast BRISTOL ENVIRON		C.	100	NJDEP I Hauler II	D No.	Cubic Yards of Waste	Name of Regis	stered Landfill . NORTH LAND	-1	-		3
City, State			- 1	18706	<u> </u>	Disposal Date	City, State			-	2.	_
BRISTOL, PA 19007						Disposal Date		LLE, PA 19067		0		
Completed By (Print or Ty								LLL, 1 A 10007				

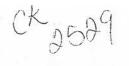
ASB-41 MAY 11

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

Date of Notification (1) Name of Building Owner/Operator (2) 12 Princeton University-Office of Design and Construction Agencies Notified Type Notification Street Address 2012 3.0 ☐ EPA 200 Elm Dr DOLWD 3276 ☐ Amended City, State, Zip Code ☑ DHSS 5269 Amendment # ASBESTOS CONTROL & Princeton, NJ 08544 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number-□ Cancellation Robert Ortega **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Princeton University- Jadwin Hall ☐ School (K-12)
☐ Subchapter 8 Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, Washington Rd homes, etc.) City (5) Square Feet # of Floors Bldg. Age Princeton County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) MERCER Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ATC Associates Inc. BRISTOL ENVIRONMENTAL, INC. Street Address Street Address Bromley Corporate Center-Three Terri Lane 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Burlington, NJ 08016 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Michael Keehn 609-386-8800 215-788-6040 00509 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor 4 / 14 / 12 6 / 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-3:30PM/___ BRISTOL, PA 19007 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ⊠ Renovation ☐ Mini-Enclosure ≥3 sf or ≥3 lf ≥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 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 B-Level П \boxtimes Floor tile and mastic 12,212 SF Stair towers #2, #3, #4 & #5 \boxtimes Floor tile and mastic 1,755 SF X Stair towers #2, #3, #4 & #5 Ø П Window caulk and glazing 1,094 SF \boxtimes П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste BRISTOL ENVIRONMENTAL, INC. G.R.O.W.S. NORTH LANDFILL 18706 Disposal Date City, State City, State BRISTOL, PA 19007 MORRISVILLE, PA 19067 Title Completed By (Print or Type) Signature Estimator Brian Scafiro

ASB-41 B5/2034

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



Date of Notification (1) 4/26/12		Name of Building Owner/Operator (2) Mike Walsh /Residence															
Agencies Notified Type Notification			Street Ad	ldress st Harrin	gton		115			111		111	**				
EPA Initial Amended Amendment #			City, State, Zip Code Long Beach Township NJ 08008														
DOH DCA Emergency (in justification) Cancellation	ncluding		Name of Mike	Contact		- l	į.	ASBEST		ephone Nur	nber		,				
	E. (0)	IIII-CCC	FACIL	ITY INFO	RMATI	ON	Mindrackers		FM21 例	G T		1					
Name of Facility Where Abatement is Taking Mike Walsh /Residence	Place (3)					5,		of Facility (4 chool (K-12	2)	or than K 1		J		-			
Street Address 11 West Harrington					=27		X e	other (i.e. pr tc.)	ivate 8	k commerci	-12) rcial buildings, homes,						
City (5) Long Beach Township NJ 08008						1	Square 1000	+	1.5		3	ldg. A 5+	ge				
County (6) Ocean			County C	Code (7) ISE ONLY)				nt Use (Prio dence	r if bei	ng demolish	ned)						
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.		1	of Abat aco In	ement Cont	ractor	(9)			10				
Street Address							Addres	700	1								
City, State, Zip Code							City, State, Zip Code West Berlin NJ 08091										
Project Manager for Monitoring Firm	17	Telephone No.				Telephone No. License No. 856-753-9800 00727											
	Scheduled	I Com						me of OSHA Monitor									
Occupancy Status During Abatement (Check		1	-				Addres		-				Same de				
	N A S E SE		ant			PO Box 329											
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:											7						
Scope of Work (Check All That Apply)						Acres 500 (61)						West and St.					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	novat moliti				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure											
	Ι						1401	PEXCHIPICU	() an	d 14011 1 Hai	Abatement						
1	No.	ocation	γ, °		D.	o orintia r	. of	8				Туре					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Main Custo	d Solely by intenance/ todial Staff? Asbestos (i.e. th				itaining I I system icing, V	scription of aining Material (ACM) systems insulation, cing, VAT, or niscellaneous)		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure			
	Yes	No	N/A			14							ē				
Exterior Siding			х		Exte	erior Si	ding		18	00 SF	x						
					20122372						+			-			
					T.						1						
Name of Registered Waste Hauler	N.	JDEP W	/aste	Cubic	Yards		Name of F	Registe	ered Landfil	1			-				
United Containers			auler ID 2459	No.	of Wa	aste		G.R.O.\	N.S.								
City, State Elm NJ				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Dispo 5/11	sal Date /12)	City, State Morrisvi		A 19067							
Completed by Anthony T Perna	Title Presid	lent				Signatur	nature Date 4/26/12							Ŧ			



NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

OVA CI-			100000		I Name of Buil	ding Owner	(Operator (2)	About the second second	Ottober State	Thus resistance				
Date of Notification (1) 2/06/12				Name of Building Owner/Operator (2) BASF Corporation							7			
27007.2								5 V. 11	11	1 15	2 11 11	<u> </u>		
Agencies Notified		Notification	Туре		Street Address 100 Campus						- 11 11	1		
(X)EPA		() Initial N			City, State, Z			I E.J.	1					
(X) DOL				tion Rev. #1			APR 3 0 2012							
(X)DOH		() Cancell	ed		Florham Park			Trai						
() DCA					Name of Con Frank Piecho		}	Tal	7201	Q.	⇒e ³			
				FACILITY II	NFORMATION		The Action of the State of the	6.0210			Three and the same of the same	1		
Name of Facility Where Abate	ment is	Taking Place	(3)		Type of Facil	ity (4)	or one links to be and disk	etillhopmen med talky o	Constanting a	el-		1		
BASF - Powerhouse Building					() School (K () Subchapt	(-12) as er 8 (other t	han K-12)		~0					
Street Address			1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A		(X) Other (i.e	. private & c	commercial blo	igs., homes,	etc.					
1 James Street					Sq. Feet 1	5000	# of Floor:	s 2 + partial	mezz					
	ounty (6)		County (Code (7)										
Belvidere	Warren		(State U		Bldg. Age _6 Current Use		g demolished)	Powerho	use					
Name of Monitoring Firm Hire	d by Bldg	Owner (8)	ASCM N	lo.		•		ontractor (9)			- 11.20			
realine of Monitoring 1 mil 1 me	<u>u b) b.ug</u>	. O MIIOI NOT	00104			37		olition and Re	emedi	ation,	LP			
Environmental Health Investig	ations, In	ic.					l							
Street Address		***************************************	<u> </u>		Street Addres									
CCE Mark Chara Trail					404 N. Berry	Street								
655 West Shore Trail City, State, Zip Code					City State, Zi	pCode								
					Brea, CA 92									
Sparta, NJ 07871		r 	11 1		Talanhana Ni	umbor		License N	umbe	·				
Project Manager for Monitorin William S. Kerbel, CIH	g Firm		Telephone Number 973-79-5649			<u>Telephone Number</u> <u>License Number</u> 01066								
William S. Reibel, Cin		373-73-304	.5	8	1401 100 000		5,700							
		01.11.1	0 1.6	D-4- (44)	Nome of OCL	JA Manitor								
Scheduled Start Date (10) 2/21/2012		Scheduled 6/01/2012	Completion	Date (11)	Name of OSHA Monitor Testor Tech									
77407027037031011					64-1044									
Occupancy Status During Aba (X) Facility Closed/Vacated D	uring Ent	ire Period of	<u>ne)</u> Abatement		Street Address 10 59 Jackso	and the same of th								
() Abatement Performed Ou	tside of N	ormal Facility	Hours -		01 01 7	0.1	110 1	I V-ale 11	101					
Describe Vacant Bldg. To Be	Demolish	ed			City, State, Z	ip Code	L.I.C. N	lew York, 11	101					
15,000 sf building to be demo														
Other - Describe	4 1.0								- 40					
Source of Work (Check all tha	t apply)													
(X) Demolition () Renovat	ion													
(X) Large Proj. (>160 SF or >2	260 LF A	CM) ()Small		160 SF or >10	<260 LF ACM) Glovebag Proced	() Minor I	Proj. (<25 SF	or <10 LF A(SM)		5			
(X) Full Containment with Ne Location of Asbestos-		ation Normall	Mini-Encl	Description of			Specify SF or		atem	ent Ty	pe			
Containing Material (ACM) in		by Maint./Cu			ms insulation,	/ unount	(орос) от от	-/						
Facility (13)	Staff?			surfacing, VA					22 0	n	e r			
	YES	NO	NA_	miscell.) Pipe Insulation	2	2,700 lf		Re X	in.	Rep.	Encap E	liciose		
Throughout Interior & Exterior Pipe Racks	X			ripe insulatio	П	2,70011				-				
Windows	X			Glazing on W	indows	150 ea	ch	X		6 -				
Throughout	X			Debris on Floo	or	500 sf		X						
Mezzanine Deck	X.	- mile		Tank Insulation	n .	800 sf		X						
Top Tier & @ Boilers	X		1995 3807	Wire Wrap		150 lf		X						
Boilers	X			Block Insulation		18,000 st		X						
South Side & Elec. Switch	X			Transite & Bla		1,500 st		X	-					
Roof	X	1	L	Flat & Flashin		13,000 st		X Name of P	00	ndfill		-		
Name of Reg. Waste Hauler	7	NJDEP Was			Cubic Yards of	of Waste		Name of R Minerva Er						
Service Transport Group		A901 #20	990 / SW2	117	120		Disp. Date	IVIII ICI VA LI	-	prises City, State				
City, State							5/04/12				urg, OH			
58 Pyles Lane - New Castle, I	DE				T a:			D-7						
Completed by (Print or Type)		<u>Title</u>	roinet Me-	agor.	Signature /			Date 4/26/12						
Joseph K. White	* 20 51	. Р	roject Mana	igei .	deser!	1. 111116	7	TILUITE						
					and the state of	-				_				

Notification of Demolitic	on or Renovation	(continued)			MPR 3 0 2012
X Description of Planned Dea	molition or Renovation V	Nork and Me	thods to be l	Jsed:	
Building will be demolished u	sing wet dust suppress	ion methods	with Mechai	nical means	& methods.
				į	harman and a second
				lane i	The State of the S
				-	at the later of the second section of the second section of the second second second second second second second
XI. Description of Engineerin	Controls and Work Pra	actices to be	Used to Con	trol Emmisi	ons of Asbestos at the
Demolition or Renovation Sit	e:				200 m
Full negative air containment	s for interior abatement.	. Wet remove	al methods. V	acumms wi Caulking F	Il be equipped with hepa filters.
	and use drop poly and	wet method	S IOI WIIIUUW	Caulking. L	Exterior piping utilizing glovebag
methods.				agentina, anno agus sa capacida na anno agus agus an anno	
XII. Waste Transporter#1 Wa	ste Management	Commission of the Commission o			
Address: 100 Ave. A		0 -			
City: Newark	County: Essex			State: NJ	Zip: 07114
Contact: Susan Rubinetti (Layton)				Telephone: 20	01-206-2258
Waste Transporter#2 Serv	rice Transport Group, In	c.			
Address 58 Pyles Lane					
City New Castle	County New Castl	e		State DE	Zip 19720
Contact Tom Gaudet				Telephone 30	2-778-5930
XIII. Waste Disposal Site Mir	nerva Enterprises			EPA Certificat	tion Number: PO104984
Address: 9000 Minerva Rd	тогта 2/110/р				
City: Waynesburg	County: Stark			State: OH	Zip: 44688
Contact: Sara Pomera				Telephone: 33	30-866-3435
XIV. If the Demolition was Or	dored by a Government	Agency Ple	ase Identify t	he Agency E	Below:
	dered by a dovernment	/ (go//oy) / 10	Title		
Name			1		
Authority			Date Ordered to	Begin (MM/DD/	YY)
Date of Order (MM/DD/YY)	one:		CONTRACTOR OF THE PARTY OF THE	CONTRACTOR II STATE	
XV. For Emergency Renovati			(HH:MM)		
DATE and HOUR of Emergency: (MM/D Description of SUDDEN, UNEXPECTED		2755We-11758We-4.	Townson,		
Explanation of how the Event caused u	nsafe conditions, or a serious d	lisruption of indu	strial operations		
199					
XVI. Description of Procedure	es to Be Followed in the	Event that l	Jnexpected A	sbestos is l	ound, or that Previously Non-
Friable Ashestos Material Be	comes Crumbled, Pulve	rized or Red	uced to Powe	der	
Restrict work area and regula	ite, wet material, notify a	appropriate i	regulatory ag	encies, com	mence cleanup using wet
methods.					
					4
XVII. I Certify that an Individu	al, Trained in the Provis	ions of this	Regulation (40CFR, Part	61, Subpart M) Will be On-Site
During the Demolition or Ren	ovation, and that Evider	nce that the	Required Tra	ining has Be	een Accompiisnea by this
Person will be Available for I	nspection During Norma	al Business i	Hours (Required	f one (1) year afte	er promulgation).
		110	gh W. 601	(L)	
1.0		(Signature of O	wner/Operator)	(1	Date) 4/26/12
XVIII. I Certify that the Above	Information is Correct	Million and the Consessor			A STATE OF THE PARTY OF THE PAR
		-1.	1 1.15	(12) D	
0.00 = 0 - 20 0 0 00		1 /light	H. CUICH		
		(Signature of O	wner/Operator)	(1	Date) 4/26/12
				The second second second	

Check # 6418:

Date of Notification ((1) April 25, 2012			of Buildin	g Owner / Operator ase & Co.	(2)	о е п <i>пл</i>			7	£				
Agencies Notified	Type Notification			Street Address											
□EPA □DEP	EMERGENCY		53 No	orth Bever	wyck Road		APR 3 0 2019)		and a second					
⊠DOL			City,	State & Zip	Code	1 60 600	-/III	2	and the last	1	8				
⊠ рон	Amended Amendment	#	Lake	Lake Hiawatha (Parsippany-Troy Hills), NJ 07034											
DCA	Cancellation			of Contaction	532		LICENSING Te	leph or	ne Nu	mbe	ŧΓ				
					INFORMATION		and the second s	STERRICE		, e 40g, ga	y d'				
Name of Facility Wh	ere Abatement is Takir	ng Place (3)		CILITI	Type of Fac	ility (4)									
JP Morgan Chase E	Bank				School	(K-12)									
Street Address						apter 8 (Other than	500 STATE OF STATE OF	12		902					
53 North Beverwyc	k Road						ommercial building			tc.)					
City (5)				11-2-10-2006-1	Square Fee	Charles and the control of the contr	oors Bld	g. Age	46						
Lake Hiawatha					Current Use	(Prior if being der	nolished)		40						
O(0)		10 0 .			Bank										
County (6) Morris		County Cod			2										
	Firm Hired by Building	Owner (8)		ASCM	100 March 100 Ma	atement Contracto	or (9)								
Arcadis US Inc. Street Address	- 1 - 1					Synatech, Inc.									
35 Columbia Road						Street Address 829 Radio Road									
City, State & Zip Coo						City, State & Zip Code									
Branchburg, NJ 088 Project Manager for		ITA	elephone	Number	Telephone N	larbor, NJ 08087	License Num	her							
William Mener			8-526-10		609-296-691		Licerise Num	0081	7						
Scheduled Start Date April 27, 2		led Complet Apri	ion Date II 28, 201			Name of OSHA Monitor Synatech, Inc.									
Occupancy Status D	uring Abatement (Chec sed/Vacated During Ent	k only one)			Street Addre	ess									
Abatement I	Performed Outside of N	Normal Hour	S		City, State 8	Zip Code									
Other – Des	scribe: upled During Abatemer	nt.			Little Egg H	larbor, NJ 08087									
Scope of Work (Chec	<u> </u>			**		1									
Coope of Work (Ories	on all triat apply)				\triangleright	Full Containmen	nt with Negative Press	ure							
≥ 3 sf or ≥ 50 lf			Renovati	ion		Mini-Enclosure									
≥160 sf or ≥26	30 If		Demolition	on		Glovebag Proce	dure								
						CANADA AND DESCRIPTION OF THE PARTY OF	*) and Non-Friable Pr								
	cation of aining Material (ACM)	Is Locati	on Norm	ally Used nance or	Descrip Asbestos-C		Amount (Specify	Abatement Type							
TO BI	E ABATED		dial Staff		Material	(ACM)	SF or LF)								
IN	Facility (13)				(i.e., therma insulation, su					П	_				
	(10)				or other misc			Reg	Re	ncap	nc				
						1		Remova	Repair	Encapsulate	Enclosure				
		Yes	No	N/A				<u> </u>		ate	6				
Mechanical/Storage Room				х	Duct Insulati	ion / debris	40 SF	X							
						the state of the s									
Name of Registered \	Waste Hauler	NJDEP V	Vaste	Cubic Y	ards of Waste	Name of Regist	ered Landfill			_					
		Hauler ID	No.		N. I	7.5									
Synatech, Inc. City, State		27	429	.5 Disposa	I Date	Grows Landfill City, State	111								
				Біброза	. 2010	Date Oity, State									
Little Egg Harbor, N. Completed By				April 30		Morrisville, PA									
completed by	Title			Signatur	vane alora		Date								
Diane Aloia	Execu	tive Adminis	strator	1 11/	unellara	را ز	April 25 2012								