_00 CK			NC			ON OF A	SB	w Jersey ESTOS ABA C 8:60 and 5:		R	G [\mathbb{V}	E
Date of Notification (1)	27 /	_	18		100								2018	
		icatio	n		Str	eet Address	3	The root of the roots			STOS	CON	NTRO)L &
F7		ed							A	Moravenesessessesses	LICE	NSIN	G	MATERIA MATERIA
☑ DHSS				_										
	Scheek S													
	3													
L	Street Address Str							201-602-1	499					
No.					F	ACILITY I	NF	ORMATION						
	gencies Notified Type Notification Initial Initial							/ (4)						
3							10120							
									Subchapter	8 (Other than K-	12)	huildir	200	
											leiciai	Dulluli	igs,	
1 10.75 3									Square Feet	# of Floors	1	Bldg.	Age	
Riverdale, NJ									5555566666		- 1		5	
County (6)					Co	unty Code (7)(S	TATE USE ONLY)	Current Use (P	rior if being demo	olished)		
Morris						•			n sammen and a second		Jiionoa	,		
Name of Monitoring Firm Hir	ed by Bui	lding	Owner	r (8)	ASC	л No.	IN	lame of Abatem						
1 Source Safety & hea	Ith, Inc.	1278								,				
107.5							-		116.					
140 S. Village Ave. Sui	Substate ASCM No. Name of Abatement Contract AbateTech, Inc. Street Address 30 Maple Ave. PO Box Code 9341 Code							. DO D 25						
	100		_				1							
1 - J.							4							
	og Eirm			17.0			_		NJ 08048		22/4			
	ig Film			- A. C. C.			1			1				E
								609-265-2107		00529				
The second state of the se								일본 경기 등 경기 등 하시면 있다.						
Occupancy Status During Aba	atement (Chec	k only	one)			St	treet Address						
☐ Facility Closed/Vacated D	uring Enti	re Pe	riod of	Abate	ment		10000		0 North					
☐ Abatement Performed Out	side of No	ormal	Facilit	ty Hou	rs - De	scribe	_							
Time of Abatement:	_AM	P	Λ/	PM		_AM	1	맛있었다. 그리고 없는 그리스 그리스						
Scope of Work (Check all that	t apply)								, 140 00077					
								☐ Full Cont	ainment with Neg	gative Pressure				
△ ≥3 sr or ≥3 rr □ ≥160 sf or ≥260 lf								☐ Glovebag	Procedure	n-Eriable Proced	uro			
			Is	Loca	tion			Z TON EXO	inplod () dilid 140	11-1 Hable 1 Toced		hotom	ont T	
Location of				Norma				Description of	f				T -	1
Asbestos-Containing Mate	rial (ACM)		ed Sole intena				Containing Mat	erial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABATED IN Facility					Staff?	(i.e.		ermal systems in surfacing, VAT,		(Specify	VOL	a-	aps	losu
(13)				(12)				ther miscellane		SF or LF)	<u>a</u>		ula	are.
			Yes	No	N/A				,			1	6	
Exterior Pole #BT231RD						Asbesto	os c	containing co	nduit pipe	16 LF				
												П	П	П
											-		=	=
					-							ПП	Ш	Ш
lame of Desistantia														
Name of Registered Waste Ha AbateTech, Inc.	uler				JDEP I	No.	Wa	bic Yards of aste	Name of Regist G.R.O.W.S.					
City, State					18750		Dis	posal Date	City, State					_
Lumberton, NJ								8/29/18	Tullytown,	PA				
Completed By (Print or Type)		Title						Signature			ate	- 1		=
Gwen Trumbetti		Op	erati	ons (oordi	nator			CMAN	+ 1	ate 3	25	-1	81

00 (X		NC			ON OF A	SB	w Jersey ESTOS ABA 3:60 and 5:			E (a 1	E		y [
Date of Notification (1)					Na	me of Build	lina (Owner/Operator	. (2)			_			
	27 /		18						(A) (E)	1803-5287	Check	R k #9	- 3 970	20	18
Agencies Notified		ficatio	n		Stre	et Address	S				A O O CO	ry ripagal dia	prosensa.	J 2944	/www.delegen.com
⊠ DOLWD		dod			P	O Box 03	34			1 '				onti Ing	ROL
☑ DHSS			#		1000000								THE PROPERTY.	TOPRING	C-LOTACINISTS
☐ DCA		ency (includi	ng				8625-0034							
(NJAC 5:23-8)	72/22/22	0.5				201 01 01	1051			Telephone	Numbe	er			
	☐ Cancel	lation								609-61	0-3046				
M- 65 W 100					F.	ACILITY I	NF	ORMATION							
			ng Plac	ce (3)					Type of Facility	(4)					
	lture Build	ding													
	20.0								Subchapter	8 (Other than	ı K-12) mmerci	al hu	ildin	ae	
	of Facility Where Abatement is Taking P Health & Agriculture Building Address South Warren Street Onton, NJ (6) cer of Monitoring Firm Hired by Building Ownironmental Connection, Inc. Address North Warren Street tate, Zip Code aton, NJ 08608 Manager for Monitoring Firm a Kelly ate (10) Scheduler Ancy Status During Abatement (Check on lity Closed/Vacated During Entire Period tement Performed Outside of Normal Facet								homes, etc.)	minerci	ai bu	illum i	ys,	
City (5) Trenton, NJ									Square Feet	# of Floor	rs	Blo	dg. A	ge	
County (6)	ies Notified A LWD SS Amended Amended Amended Amended Amendent #_ AC 5:23-8) Diff Facility Where Abatement is Taking lealth & Agriculture Building Address South Warren Street If Monitoring Firm Hired by Building Ownonmental Connection, Inc. Indicates In				Cor	unty Code ((7)(S	TATE USE ONLY)	Current Use (P	rior if being de	emolishe	hed)			
Mercer	Health & Agriculture Building It Address 9 South Warren Street 5) Penton, NJ Ity (6) Ity (6) Ity (6) Ity (7) Ity (8) Ity (8) Ity (9) Ity (9) Ity (9) Ity (10) Ity										JIII OII OII	Juj			
Name of Monitoring Firm	J Health & Agriculture Building et Address 39 South Warren Street (5) enton, NJ hty (6) ercer e of Monitoring Firm Hired by Building Owner (8) evironmental Connection, Inc. et Address 0 North Warren Street State, Zip Code enton, NJ 08608 ct Manager for Monitoring Firm enda Kelly Date (10) 3 / 30 / 18 Scheduled Company Status During Abatement (Check only one actility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Horses						IN	lame of Abatem		-	-				
Environmental Cont	nection, Ir	ıc.							10.700						
Street Address		-			-		-				-		_		
120 North Warren St	reet							30 Maple Ave	e. PO Box 25						
City, State, Zip Code													-		
Trenton, NJ 08608							Hangara and a comment of some								
Project Manager for Monito	of Notification (1) 3 / 27 / 18 Icices Notified PA OLWD HSS CA UJAC 5:23-8) Perfect of Facility Where Abatement is Taking Facility Facility Where Abatement is Taking Facility Where Abatement Street South Warren Stre						1			License N	lo.	_	-		
Linda Kelly				6	09-30	6-1839	1 :		•	The state of the s					
Start Date (10)		Sched	duled (Compl	etion D	ate (11)	Na	ame of OSHA N	Ionitor	1 33320					
3 / _30_ / _	18		3_/	3	0_/	18		EMSL Analyt	ical						
Occupancy Status During	Amendment # Emergency (inclinity with the property of the prop						St	reet Address							
☐ Facility Closed/Vacated	Acton, NJ (6) Cer of Monitoring Firm Hired by Building Own ronmental Connection, Inc. Address North Warren Street ate, Zip Code ton, NJ 08608 Manager for Monitoring Firm a Kelly ate (10) / _30 / _18 3 ancy Status During Abatement (Check on ity Closed/Vacated During Entire Period ement Performed Outside of Normal Fac of Abatement: AM PM/ and Monitoring Firm a Kelly ancy Status During Abatement (Check on ity Closed/Vacated During Entire Period ement Performed Outside of Normal Fac and Abatement: AM PM/						1 :	200 Route 13	0 North						
Abatement Performed (Outside of N	Facilit	y Hou	rs - De	scribe	Cit	ty, State, Zip Co	ode							
Time of Abatement:	AM	PI	W/	PM		_AM	1	•							
Scope of Work (Check all t	hat apply)							- Anna anna anna anna anna anna anna ann	2						
			M Pa	novot	ion			Full Cont	ainment with Neg	ative Pressur	re				
☐ ≥160 sf or ≥260 lf								☐ Mini-Enci	osure r Procedure						
								☐ Non-Exer	mpted (*) and No	n-Friable Prod	cedure				
	• 11		1.000									Aba	teme	ent T	уре
		4)	1 170.71			Asha	etne			A		Z.	R	щ	Щ
TO BE ABATE	<u>ED</u>	.,	0.00				., the	ermal systems in	nsulation,		,	Removal	Repair	Encapsulate	Enclosure
			Cus		Stan?					SF or LF) [Va	٦	suk	sure
(10)			Yes		N/A	1	OU	tner miscellaned	ous)					ate	
Basement Mechanical	3				П	П									
Name of Monitoring Firm Hired by Building Owner (8)	Insulation		21F				$\overline{\Box}$	\exists							
		_			-	1		,				-	늬		님
	3							ᆜ							
Name of Registered Wasto	Hauler		Ц			Noote	0	hie Verda	Name (5						Ш
AbateTech, Inc.	i idulei			110000											
City, State							1	2		Landfill					
	Type Notification □ Initial □ Amended □ Amendment # □ Emergency (incluing justification) □ Cancellation □ Canc						3,		i ullytown,	PA	9				
Nic	of Notification (1)							Signature	. A		Date	ı		_	
Gwendolyn i rumbetti		Ol	perati	ons (Coordi	nator		1 / 1	11/0		3	12	71	18	

ASB-41 MAY 11

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

MOCK

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

M	E	C	E		\mathbb{V}	E	In
K							
		ADD		0	2010		

Date of Notification (1)				Non	o of Duildi	na O	wner/Operato	- (O)	-		APR	-	3	2018	}
3/23	/ 18	}						r (2) i / Job #1802- 5	270	Check			<u>R</u>		
Agencies Notified Type Not	ification				et Address				-	dalam er en	DLC:	+	1 d H	THE	71 &
☑ EPA ☐ Initial							ossing Roa	d		TANACIUS MITO DASCIO			VSIN		787a7100aan
☑ DOLWD ☑ Amen					State, Zip							_			
	dment #_	_					NJ 08648								
DCA Emerg	gency (in cation)	cludir	ig		e of Contac	-			T	elephone	Numbe	er.			
Cance					II McBrid					609-530					
				FA	CILITY II	NFO	RMATION								
Name of Facility Where Abatement	is Taking	Plac	e (3)					Type of Facility	(4)						
Sea Girt Training Center Bui	lding#	18						School (K-1							
Street Address								Subchapter					n r		
1 Camp Drive								Other (i.e., phomes, etc.		e and cor	mmerc	ai di	ıllain	gs,	
City (5)								Square Feet		of Floors	S	В	dg. A	ge	
Sea Girt, NJ														•	
County (6)				Cou	nty Code (7	7)(STA	ATE USE ONLY)	Current Use (Pr	ior if	being de	molish	ed)			
Monmouth								Military Tra		g Cente	r				
Name of Monitoring Firm Hired by B	uilding O	wner	(8)	ASCM	No.	Na	me of Abatem	nent Contractor (9)							
TTI Environmental						1	AbateTech,	Inc.							
Street Address						Str	eet Address								
1253 North Church Street						3	0 Maple Av	e. PO Box 25							
City, State, Zip Code						City	y, State, Zip C	Code							
Moorestown, NJ 08057							umberton,	NJ 08048							
Project Manager for Monitoring Firm Mike Stocku				phone	-		ephone No.		L	icense N	0.				
Start Date (10)	10.1.1	1. 1.0	- 53	1000	-3969	1	09-265-210			00529					
3 / _19_ / _17	Schedu			tion Da /		/	me of OSHA								
			1	_ ′ -			MSL Analy	iicai							
Occupancy Status During Abatement Facility Closed/Vacated During Er							eet Address								
☐ Abatement Performed Outside of					cribe		00 Route 13	Special Production (St. 1911)							
Time of Abatement:AM	PM	/	PM-		AM		, State, Zip C	ode 1, NJ 08077							
Scope of Work (Check all that apply)							IIIIaiiiiisoi	1, NJ 00077	Step 11						-
7)	_	_					☐ Full Con	tainment with Neg	ative	Pressur	е				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		200	novatio molitio				Mini-End	closure g Procedure							
	_		mondo	"				mpted (*) and No	n-Fri	able Proc	edure				
	346		Locati				V202					Aba	ateme	ent Ty	уре
Location of Asbestos-Containing Material (AC	M		lormal d Sole		Acto		Description of	252		***		χ,	Ţ,	Ш	m
TO BE ABATED	ivi)	Mai	ntenar	nce/	Asbes (i.e.	ther	Containing Ma mal systems	insulation.		Amount (Specify		Removal	Repair	Encapsulate	Enclosure
IN Facility		Cust	odial S (12)	staff?		SI	urfacing, VAT	, or		SF or LF)	val	7	lusc	sure
(13)	<u> </u>	Yes	No	N/A		oth	er miscellane	ous)						ate	
Throughout Building #18					Residua	l Fla	oor Tile Mas	tic	-	3,032 SF	- +				
					Residue		701 THE MAS	, tic		3,032 31	_			믬	ᆜ
											-		Ш	Ш	Ц
	[
Name of Registered Waste Hauler			N. 63100	DEP V	ACC-1504-1504		c Yards of	Name of Regist							
AbateTech, Inc.			1100000	uler ID 18750	CONTRACT	Was 40		G.R.O.W.S.	Lar	ndfill					
City, State						Disp	osal Date	City, State							
Lumberton, NJ					(3/2	26/18	Tullytown,	PA						
Completed By (Print or Type)	Title				1		Signature	1			Date		ī	_	
Gwendolyn Trumbetti	Ope	eratio	ons C	oordi	nator		U	MI			3	2	3 1	8	

no cl	,		NO		CATIO		SBE	v Jersey ESTOS ABA 8:60 and 5:1		DE	SE		<u>V</u> [
Date of Notification (1)			_				2	Owner/Operator		had law	भि - ,	1000	118	
	/	1	8		J	CP&L/Firs	stEr	nergy Compa	ny / Job #180	3-5289 Chec	k #100	18		
Agencies Notified	Type Notif	ication	1		Stre	et Address				ASBES	TOSC	ONT	ROL	&
⊠ EPA		2004			10	Legion F	Plac	ce- Building A	. [LICEN		#III COPYUNI	
☑ DOLWD ☑ DHSS	Amend		н		City,	State, Zip	Coc	de						
□ DCA	☐ Emerge				M	orristown	, N.	J 07960						
(NJAC 5:23-8)	justifica		riolaan	9	Nam	e of Contac	ct			Telephone N	lumber	1-1-2		
	☐ Cancell	ation			Pa	trick Con	nley	,		609-608-	8622			
					F/	ACILITY IN	NFC	DRMATION						
Name of Facility Where A	Abatement is	Takir	ng Plac	e (3)					Type of Facility	(4)				
JCP&L- Substation									School (K-12					
Street Address					-		_		☐ Subchapter	(Other than K				
24 Meszaros Road									Other (i.e., p homes, etc.)		mercial	buildir	gs,	
City (5)							-		Square Feet	# of Floors		Bldg. /	\00	
Stockton, NJ									Oquate i eet	# 01 1 10015	1,	Jiug. /	nge	
County (6)					Cou	inty Code (7	71/57	TATE USE ONLY)	Current Use (Pr	ior if boing dom	olichod)			
Hunterdon					000	inty code (i	1)(01	IATE OSE ONET)	Substation	or it being deri	iolistieu			
Name of Monitoring Firm	Hired by Rui	Idina	Owner	(8)	ASCN	1 No	TN	ame of Abatama	ent Contractor (9)					
, ja	i iii oa by bai	iuiig i	Owner	(0)	AGGIV	1110.		AbateTech, Ir						
Street Address							1	treet Address	ic.					
3.13017.1447.000							100000		DO Pay 25					
City, State, Zip Code							-	30 Maple Ave						
ony, orace, zip oode								ity, State, Zip Co						
Project Manager for Monit	oring Firm			Tal	ephone	No	_	Lumberton, N	IJ 00048	I I I annua Ma				
1 Toject Manager for Month	omig riim			lei	epnone	NO.	1 .	elephone No.		License No.				
Start Date (10)		Schoo	lulad C	ample	tion D	ate (11)	_	609-265-2107		00529				
_ 4 / 11 /						18	100000000	ame of OSHA M	7/1/27/7/7					
				1	<u>'</u> '		-	EMSL Analyti	cai					
Occupancy Status During	personal contract con							reet Address						
☐ Facility Closed/Vacated ☐ Abatement Performed	Outside of N	ormal	nod of	Abate	ment	ariba		200 Route 130						
Time of Abatement:	AM-	PI	M/	PM	-	AM		ty, State, Zip Co						
						-051072	•	Cinnaminson,	NJ 08077					
Scope of Work (Check all	tnat apply)							☐ Full Conta	ainment with Neg	ative Pressure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Re					☐ Mini-Enclo	osure		dure			
			100	Loca								batem	ent Ty	vpe
Location o			0.000	Norma	lly ely by			Description of			-		1	
Asbestos-Containing M TO BE ABAT		1)		intena				Containing Mate ermal systems in		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility			Cus		Staff?	(1.0.		surfacing, VAT,		SF or LF)	oval	=	nsd	sur
(13)				(12)	T	-	ot	ther miscellaneo	us)				late	Ф
	V23 100		Yes	No	N/A									
Exterior Pole #UT9DTL	_25					Asbesto	os c	containing co	nduit pipe	16 LF				
			П									П	П	П
				П										
Name of Registered Waste	Hauler				JDEP \	Naste I	Cul	bic Yards of	Name of Regist	ared Landfill		ТП		Ш
AbateTech, Inc.				10.0	auler II 18750	O No.	Wa 2	iste !	G.R.O.W.S.					
City, State								posal Date	City, State					
Lumberton, NJ							4	1/11/18	Tullytown,	PA				
Completed By (Print or Typ	e)	Title						Signature			Date			C
Gwen Trumbetti		0	perati	ons (Coordi	nator			201 d		3.	28	1)	8

Data of N. off.			NOTI	Pursuar	ON DE AS	lew Jerse BESTOS C 8:60 an	ABATI d 12:12	20)	Т		CKH	- /	07	12	
Date of Notification (1) 3/29/2018				Name	of Buildin	g Owner/0	Operato	r (2)			F F	<u>a</u> [2 1	17.77	P
				Nich	olas Re	al Estate	Э				ME		5	M	Ğ
Agencies Notified	Type Notificatio	n		Street	Address						F=0.5	-			
EPA	× Initial											חח	0	004	,
DEP X DOL	☐ Amended	1012			tate, Zip (UL. A	PR	5	201	1
	Amendmen Emergency			Pate	rson, N	J 07502									
X DOH	justification	1)	A	11-11-2015-1-1000-1-10-1-1	of Contac			CTUP III	7	Ti	elephone Nu	mber	SUL	NIR	JL 8
DCA	Cancellation	n		Alexa	andra C	onstand	inou			1	973-634-88	353	ENSI	NG	ere thanes non
Name of Facility Where A	hotomont in Tali			FAC	ILITY IN	FORMATI	ON								
Private Home	Abatement is Taki	ing Place ((3)					Тур	e of Facility	(4)					
Street Address									School (K-	12)					
Offeet Address									Subchapte	er 8 (O	ther than K-1	2)			
01. (5)	*							×	Other (i.e. etc.)	private	e & commerc	ial bui	Idings	, hom	es,
City (5)								Squ	are Feet	T #	of Floors	- 11	Bldg.	Δαο	_
Paterson										1 "	01110010	Ι.	Jiug.	nge	
County (6)				County	Code (7)			Cur	rent Use (Pr	ior if h	eing demolis	hod)			
Passaic				(STATE	USE ONL	y)	_		o 000 (i i	101 11 0	enig demons	ileu)			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASC	M No.		Name	of Ah	atement Co	ntracto	or (0)				
							Rem	iova	Safety L	I C) (3)				
Street Address							Street						_		_
							8 Cr		33.5						
City, State, Zip Code								-	Zip Code			-			
									, NJ 0750	12					
Project Manager for Monit	oring Firm			Telepho	ne No.		Teleph				Lisanes M				
				ASSESSED STREET			973-				License N 01332	0.			
Start Date (10)		Schedul	ed Cor	mpletion	Date (11)		-		HA Monitor		01332				
4/7/2018		4/10/2	018	101					Safety LI						
Occupancy Status During	Abatement (Che	ck Only Or	ne)			-	Street								
Facility Closed/Vacat	ed During Entire	Period of	\ hatan	nent			8 Cro								
Abatement Performe	d Outside of Norr	nal Facility	Hours	S		-		-	Zip Code						
									, NJ 0750	12					
Scope of Work (Check All	That Apply)						1 ato	13011	, 100 0730	12					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova					Fu	II Containm	ent wit	h Negative P	ressu	re		
			emolit	ION			Н	Mi	ni-Enclosure	9					
								No	ovebag Pro	cedure d (*) ar	nd Non-Friabl	e Pro	cedur	Δ.	
		Is	Locati	ion	ų.						- Horri Habi			ement	
Location of			lormal			Desc	ription	of						ре	
Asbestos-Containing N TO BE ABAT	laterial (ACM)		d Sole ntenar		Asbes	tos Contai	ning Ma	ateria	(ACM)		Amount			_	
In Facility		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	odial S	0.0000000	(i.e.	thermal s	ystems	insula	ation,	(3	Specify	20	חב	Enc	E
(13)			(12)			surfacion other mis				SI	F or LF)	Remova	Repair	aps	clos
		Yes	No	N/A		001011111	Joonand	2003)				val	¥.	Encapsulate	Enclosure
Danner		163	140											œ.	-
Basemer	1[X		Pipe II	nsulati	ion			130	Х		X	
					10			272		1		/*****			
		+ +													
Name of Registered Waste	Hauler		l N1	IDED IV				-							
Removal Safety LLC	· .adioi			JDEP Wa auler ID I		Cubic Ya			Name of F	Registe	ered Landfill				
				037007		2			Grows	North					
City, State						Disposal	Date	-17700	City, State						
-arereon NII									,	100					- 1

TBD

Signature

Title

Project Manager

Morrisville, PA

Date

3/29/2018

Paterson, NJ

Risto Veskov

Completed by

 $[\]ensuremath{^{\star}}$ Do not use this form for asbestos licensure exempted activities.

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

CMK#3341

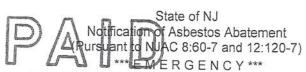
Data of Natification (4)				- 1		1			<u> </u>				
3 /	29 /	18			* Name Pri	e of Buildir nceton L	ng Owner/Operator (Iniversity-Office	(2) of Design and	Constructio	n C [\mathbb{V}	E
Agencies Notified	Type Notific	ration			-								
☐ EPA	⊠ Initial	ation			10000000	EDMINIAN STEEL			111) i,	Ann	2	0040	,
☑ DOLWD		d								APH	- 3	2018	}
☑ DHSS	Amendm	nent #_											1
☐ DCA			cluding	J					ASE	200700	100	FFDC	71 0
(NJAC 5:23-8)	The state of the s				200000000000000000000000000000000000000		7,000		Telephone N	lumber	NSI	IG)L a
	☐ Cancella	ation			Ro	bert Orte	go		609-258-	1841	NAME OF PERSONS	- Control - Section - Sect	THE RESERVE
Name of Equility Where	h-t		Di	(0)	FA	CILITY IN	NFORMATION		-11-0				
	y-James S	tewar	t The	ater						(40)			
185 Nassau St								Other (i.e., pr	rivate and com	mercial t	uildin	gs,	
City (5)								,		1	Nda /	100	
Princeton											-	ige	
					Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (Pri	ior if being dem	nolished)			
													- 1
	Hired by Buil	ding O	wner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
TTI Environmental							BRISTOL EN	VIRONMENTAI	L, INC.				
Street Address				L			Street Address						-
1253 N Church St.							1123 BEAVE	R STREET					
City, State, Zip Code			-										
Moorestown, NJ 08	057												
			-	Tele	nhone	No		13007	License No	-			
				-9355				12					1
		Schedi	ulad C	0.000	Total Committee				00509				
72						37 . 27			INC				
								VIRONWENTAL	L, INC.				
100	927		-		- 20								
Abstement Performed	Outside of N	re Peri	lod of A	Abatei	nent		1123 BEAVE	R STREET					
Time of Abatement: 7:	:00AM-3:30F	ormai i PM/	racility	/ Hour	s - Des	cribe	City, State, Zip Co	ode					
				-			BRISTOL, PA	19007					
Scope of Work (Check all	that apply)							Name and the	G00 X000				
			⊠ Re	novati	on				ative Pressure				
☐ ≥160 sf or ≥260 lf		4					☐ Glovebag	Procedure					
							Non-Exe Non-Exe	mpted (*) and Nor	n-Friable Proce	edure			
										A	oatem	ent T	уре
		n)								Z)	Z	Ш	m
		")	Mai	ntena	nce/					ema	epa	пса	nclo
IN Facilit		- 1	Cust		Staff?	(ova	=	Encapsulate	Enclosure
(13)		-			Τ		other miscellane	ous)				late	O
Stage						Elear ti	lo and mastic		14 SF	N .	-		
		-		200							-		
						FIOOI U	ie and mastic		3 51		1	Ш	Ш
					-								
			Ш										
Agencies Notified													
					18706		Disposal Data						
							Disposal Date		HILLS, PA 1	9047			
Completed By (Print or Ty	pe)	Title					Signature			Date	_		_
Brian Scafiro	75 X		timat	or			Baian	Salino/	Ju 1	31	29	- 18	7

								ſ	M	E C	E		$\overline{\mathbb{V}}$	Pi	ntE
Ch014096		(<u>P</u>	CATION Ursuani	ate of Ne OF ASB ONJAC	ESTOS A 8:60 and	12:120	0)	т	K	APF	7 - 3	3 2	2018	}	
Date of Notification (1) 03-28-18		i	Name o	f Building	Owner/O	perator	(2)		had best						
Agencies Notified Type Notification	-	- 1	Street A	Address					1	NODES	IGENS			DL &	
EPA Initial Amended		_		Hadley Fate, Zip Co	**************				CONTRACTOR OF THE PARTY OF THE	MERCONE DE LOS	rot er minere rocht	PC#40.W			gurjalana)
X DOL Amendment		<u> </u>	South	Plainfie											
DOH justification) DCA Justification			- 10 100	f Contact Yeliseye	V					ephone 1 9-575-2		ſ			
Name of Facility Where Abatement is Taking	g Place (3	()	FAC	LITY INFO	ORMATIC	N	Tvp	e of Facility	(4)						
PSEG Hoboken		* 						School (K-	12)						
Street Address 1160 Madison St.							×	Subchapte Other (i.e. etc.)				ildi	ngs,	home	es,
City (5) Hoboken					1		Squ N/A	are Feet	# o	f Floors		Blo N/	lg. A	ge	
County (6) Hudson				Code (7) USE ONLY)		Cur	rent Use (Pr vitching ya	ior if bei		olished)				
Name of Monitoring Firm Hired by Building C N/A	Owner (8)		ASCN	A No.			of Ab	patement Co	ntractor			-	39243		
Street Address			N/A			Street		vironment ess	al Ser	vices	inc.				
N/A City, State, Zip Code								ock Rd							
N/A						V. 1773.00		Zip Code NY 1198	0						
Project Manager for Monitoring Firm N/A			Telepho N/A	ne No.		Teleph 631-9				License 01136					
Start Date (10) 04-09-18	Schedule		pletion	Date (11)				SHA Monitor		vices In	nc.				
Occupancy Status During Abatement (Check	k Only On	e)				Street	Addr	ess							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Electrical circuit cabin	al Facility	Abatem Hours	ent		-	City, S	tate,	ock Rd Zip Code							
Scope of Work (Check All That Apply)						Yapr	nank	NY 1198	0						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoliti				×	M G	ull Containm lini-Enclosur llovebag Pro	e cedure						
	Is	Locati	on			- EC	I N	on-Exempte	a (") and	a Non-Fr	Table P		bate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Use Mai	lormall d Solel intenar odial S	ly by nce/		tos Conta thermal s	ystems	lateria s insu		(8	mount Specify	7.0		Typ	, III =	Enc
In Facility (13)	(12) No	N/A		surfaci other mi)	SF	or LF)	Kellloval		Repair	Encapsulate	Enclosure	
Switching yard	Yes		Х		trans	site pi	ре		48	800 If	x				
											_				
											_	+			
Name of Registered Waste Hauler Waste Management	H	JDEP W auler ID 7273		Cubic Y of Wast TBD			Name of Fairles		ered Land	lifit					
City, State Elizabeth, NJ 07201				Disposa	al Date		City, Sta		19067	7			8 - E- 11 1 1		
Completed by Raymond Tutiven	rvisor		-		nature	n. /	1	ない		Date 03-28	3-18	3			

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

¥			U U	TI	Li -	Check	# 8904			
Date of Notification (1)	I I Name	of Building Ow	ner/Operator (2	2)			CE	Π 7\/	7 6	
0 3 / 2 9 / 1 8	11		ublic Schools				CE	U W		-11
Agencies Notified Type Notificati		Address								
EPA Initial	11	Highlander I				The state of the s	APR - 3	201	8	لكا
DOL Amenda	STATE OF THE RESERVE	ate, Zip Code					micro employer trayers of the co	ian a maka		
₩ DOH	l vve	st Milford, N	NJ U/46U			and the second s	BESTOS C	44 4 10	10L 8	l.
_ Cancella	22 1 2	of Contact				Lelephor	e Number	or consistent	and the second second	The state of the s
DCA Calledia	Lat	ıra Tallia				(973)	697 1700 >	(507	1	
Nove of feetile when the feetile	4-14	105000	CILITY INFORM	/IATIO	N	T	(4)			
Name of facility where abatement is	taking place (3)			50 W	Type of Facility School	(4) ol (K - 12)			
Macopin Middle School (No	ON Sub 8)					1 =	apter 8 (Othe	r than	K-12)	
Street Address						Other	(Private/Com			
46 Highlander Drive							/Homes, etc.		Dida	۸۵۵
City (5)	County (6)			Co	unty Code (7)	Square Feet	# of Floors		Bldg. /	nge
West Milford, NJ	Passaid			(St	ate use only)	Current Use (P		emolis	hed)	
Name of Monitoring Firm Hired by E	Idg. Owner (8)		ASCM No.		Name of Abatemen	middle scho	Ol			
EnviroVision Consultants	, ,		non sub 8	,	B & G Restora					
Street Address				-	Street Address	don, mo.				
20-21 Wagaraw Road, Bu	ilding 35E				105 Ryerson	Road				
City, State, Zip Code					City, State, Zip Code					
Fair Lawn, NJ 07410					Lincoln Park,	NJ 07035				
Project Manager for Monitoring Firm		Phone Num			Telephone Number (973)696-686	39	License Nu 0037			
Willie Morales		973-949-3	20000000-000		Name of OSHA Mor			0		
Scheduled Start Date (10)		pletion Date (11)		B & G Restora					
04/11/2018	04/12/20				Street Address					
Occupancy Status During Abatemen	A 1070				105 Ryerson F					· Koon
Facility closed/vacated during Abatement performed outside					City, State, Zip Code)				
Describe:					LincolnPark, N	IJ 07035				
Scope of Work (check all that apply										2
	Renovation			П	Full Containment w/ne	enative pressure	Glovebag	nroce	dure	
	160 sf or ≥260	f		100	Mini-enclosure]	Non-friable			
	Is location norm		lvl				T R			1
Location of asbestos-containing	by maintenance			ion of	asbestos-containing	Amount	e	е		E n
material to be abated in facility (13)	staff(12)		- material			(Specify S LF)	F or o) p	a	C
abated in radiity (13)	Yes N	o N/A				LIT	v e	i	p	-
Boys locker room, team room &		X	pipe insul	ation	(O&M repair)	10 lf] X	X	
auxiliary gym at air handler unit										
			4					11	11	
Registered Waste Hauler	NJDEP Ha	uler ID#	Cubic Yards of	Masta	Name of Registered	d Landell				Ш
B & G Restoration, Inc.	1956:		1	v vasit		Resource & Re	ecovery Ce	nter		
City, State Lincoln Park, NJ		Disposal 04	Date 1/12/2018		City, State Tullytown,					
Completed by (Print or Type)	Title		Signature		.		Date			3.
	Secretary/Tre	easurer			Gordana Luna		03/29/2	018		

		RE	ECEIVED 03/2	9/2018 Q3:43F	284
Mar 29 2018 15:39 NJ Asbesto	Control 609,633,06	64	page 1		EGEIVEN
2018-62	Por Bursus	State of Aspertication	stos Abstement 0-7 and 12:120-7		APR -3 2018
Date of Netflication (1)	Name of Building Ow				& Identification &
10 13 1/12 19 1/11 18 1	Roselle Board				LICENSING T
Agencies Notified Type Notification	Street Address	Edication		Ît.	29/18/
EPA E Initial	710 Locust Str	eet			TO
☑ pol ☐ Amendmer	City, State, Zip Code Roselle, NJ 07	004		12.7	wijaboned .
IXI DOH	Name of Contact	203			
Cancellation	٨ .			Telepho	one Number .
G sun	Kevin White			908-4	482-1527
		CILITY INFORMATI	ON		
Name of facility where abatement is ta	king place (3)			Type of Facility	(4)
Abraham Clark High School					pol (K - 12)
Street Address				☐ Subo	thapter & (Other than K-12) I (Private/Gommerelat
122 E. 6th Avenue				81dgs	:/Homes, etc.
City (5)	County (6)		ounty Code (7)	Square Feel	# of Floors Bldg. Age
Roselle	Union	G	State use only)	Current Use (Prior if being demolished)
Name of Monitoring Firm Hired by Bidg	. Owner (8)	ASCM No.	I Name of Ibelans	Residential	
Enviro Vision		0078			
Street Address			B& G Resto	Buon, Inc.	
20-21 Wageraw Road Bldg 3	15E,		105 Ryerso	Road	
City, State, Zip Code Fairlawn, NJ 07410			City. State. Zip Co	le :, NJ 07035	
Project Manager for Monitoring Firm	Phone Numi		Telephone Numb		License Number
Guillermo M Morales	973-636-9		(973)696-6		00378
Scheduled Start Date (10)	Sched, Completion Date (1	1)	Name of OSHA i B & G Resto	anter Inc	
03/30/2019	04/01/2018		Street Address	audn, inc.	
Occupancy Status During Abatement (C	heck only one)		105 Ryersol	Road	
Facility closed/vacated during entities. Abatement performed pulside of n	re period of abatement.		City, State, Zip Ci	10	
Describe: Start Friday 2:00 p	. m.		l'annia Dani		
Scope of Work (check all that apply)			LincolnPark	NJ 07035	
Demolition (R) Res	ecvetion.				
7 .) sf or <u>></u> 260 H		Full Containment w Mini-enclosure		Glovebag procedure
	ocation normally used solely	vi Li	THAT-CIJUEZUIA		Non-frisble procedure
	maintenança/custodial R(12)	Description of	asbastos-containing	Amount	e e e n E
schooland in familiar 1421	es No N/A	material (ACL	1)	(Specify 5	efor a a c
Room # 112 & Room #110	140 144				V I P L
Nurse's office & Vice-Princip	X	VAT & Mastic		700 st /7	
Room # 204	×	VAT & Mastic			500 sf R
Band Rooms (2)	×	VAT & Mastic	Marie Control of the	700 sf	
	×	VAT & Mastic		300 sf / 3	100 sf 🗵 🗆 🗆
Registered Wester Hauter B & G Restoration, Inc.	NIDEP Hauler ID#	Ubic Yards or Wast	Name of Registe	d Landsii	
City, State	19563 Dieposal D	6	Tullyto	n Resource & Re	covery Center
Lincoln Park, NJ		1/2018	City, State Tuilytou		
Completed by (Print or Type) Title Gordana Luna Sec		Signature			Date
350	retary/Treasurer		Gerdana Lua		03/29/2018



			CO 69	Mander E IX	GE	NCY	Check	# 800/				
Date of Notification (1)	- 11	Name of E	Building Ow	ner/Operator (2)		I Fee	(P)	2 1	Π.//	P	period
0 3 1/12 9 1/11 8				f Education				G [<u> </u>	\mathbb{V}		-ln
Agencies Notified Type Notifica	ation	Street Add		- = = = = = = = = = = = = = = = = = = =								11111
L EPA Nitial			ocust Stre	et				APR -	- 3	2018	}	$\ U\ $
L DEP			, Zip Code				100					
X DOL Amend	dment		e, NJ 072	203			ACE		CONTRACTOR OF THE PARTY OF THE	rotteamen	NO NOTE ADDRESS	
⋉ DOH	1 +	Name of C	ontact				Telepho	BESTOS			1L &	
☐ DCA ☐ Cance	llation	Kevin	White							-		CONTRACTOR.
				III ITV INCORM	IATIO		908-4	82-152				
Name of facility where abatement	is taking r	alace (3)	FAC	ILITY INFORM	ATIC	DN T	T=					
Abraham Clark High Scho		nace (5)					Type of Facility School	(4) ol (K - 12)			
Street Address							The second second second second	apter 8 ((-12)	
122 E. 6th Avenue						*		(Private/0 /Homes,		ercial		
City (5)	T Co	unty (6)			C .	water Code (2)	Square Feet	# of Floo	ors	В	ldg. A	Age
			3.9		30000	unty Code (7) ate use only)	Current Use (P	rios if boi	na don		24)	
Roselle		nion				,,	Residential	nor ii beii	ig dei	IOIISI	eaj	
Name of Monitoring Firm Hired by	Bldg. Ow	ner (8)		ASCM No.		Name of Abatement (
Enviro Vision				0079		B & G Restorati	on, Inc.					
Street Address						Street Address						
20-21 Wagaraw Road BI	dg 35E,					105 Ryerson R	oad					
Fairlawn, NJ 07410						City, State, Zip Code Lincoln Park, N	11.07025				10000	
Project Manager for Monitoring Firm	n	Te	hone Numb	ner .	-	Telephone Number	NJ 07035	Triana				
Guillermo M Morales			73-636-9			(973)696-6869	9	License	378	oer		
Scheduled Start Date (10)	ISche		ion Date (1		_	Name of OSHA Monit	or	1				
03/30/2018		01/2018	54.0 (1	.4		B & G Restorati	on, Inc.					
Occupancy Status During Abateme					-	Street Address						
Facility closed/vacated during			ement		1	105 Ryerson Ro	oad 					-
Abatement performed outside Describe: Start Friday 2:	of norma	facility hou	Jrs-			City, State, Zip Code						
Describe: Start Friday 2: Other-Describe:	00 p.m.				-	LincolnPark, NJ	07035					
Scope of Work (check all that appl	y)				-							
☐ Demolition 🔀	Renovati	on			П	Full Containment w/nega	ative pressure [7 Claus				
☐ >3 sf or >3 lf	≥160 sf or	>260 If				Mini-enclosure		Glove Non-f				
Location of		- T-C	used solely	1	_		1		TR	R	E	
asbestos-containing	by maint	enance/cus	stodial	Description	n of a	asbestos-containing	Amount		е	e	n	E
material to be abated in facility (13)		T	T	material (A			(Specify S	F or	m o	p a	c	n c
	Yes	No	N/A				LF)		v e	i	р	L
Room # 112 & Room #110			X	VAT & Mas			700 sf /70	00 sf	X			
Nurse's office & Vice-Princip			×	VAT & Mas			550 sf / 5	00 sf	X			
Room # 204			X	VAT & Mas	-		700 sf		X			
Band Rooms (2)			X	VAT & Mas	stic		300 sf / 3	00 sf	X			
Registered Waste Hauler	LAUD	EP Hauler	ID# 1.0	ubic Yards of W	looto	IN						
B & G Restoration, Inc.		19563	10#	obic Yards of W	asie	Name of Registered L Tullytown R	andfill Resource & Re	COVER	Cent	er		
City, State Lincoln Park, NJ	1		Disposal D			City, State Tullytown, P		COVERY	Jent	CI		
Completed by (Print or Type)	Title		1 - 34/0	Signature	_	·	^	Date			Y.	
Gordana Luna		ry/Treas	urer			Gordana Luna		03/29	9/201	8		

1 \ (\ \ \ ,	(Purs	ATION suant t	OF AS o NJA	lew Jersey BESTOS AB C 8:60 and 1	2.120)		200) EGE) APR -	3 20°			
e of Notification (1)		ame of	Buildir	ng Owner/Ope	rator (2)		ASSESTOS	CONT	BOI	8	
-23-18 encies Notified Type Notification	Si 4	treet Ad 000 F	ddress Hadle	y Road				LICEN	VSING			page (see e
EPA DEP Amended Amendment #1	C	ity, Sta South	ite, Zip Plain	Code field NJ				Telephone Number			_	
Emergency (including iustification)	ding	Name of	f Conta	act igel Jr.				732-215-3572				
DCA Cancellation		FAC	ILITY I	NFORMATIC	N	Type of Fac	rility (4)					
ame of Facility Where Abatement is Taking Pla SEG Hopewell Substation treet Address	ice (3)					School Subch	I (K-12)	Other than K-12) ate & commercial b	uildings	, hom	ies,	
2451 Pennington Road						Square Fe	et	# of Floors N/A	Bldg.	Age		
Sity (5) Hopewell		County	y Code	e (7) ONLY)		Current Us Switchin	se (Prior g yard	if being demolished	i)	ELECTION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PE		
County (6) Mercer			CM No		Nam	a of Abateme	nt Contr	actor (9)				
Name of Monitoring Firm Hired by Building Own N/A	lei (0)	N/A			Stree	et Address	20	Services, Inc.				
Street Address N/A					City	Old Dock I State, Zip C	ode					-
City, State, Zip Code N/A					Ya	phank, NY	11980	License No				
Project Manager for Monitoring Firm		N/A			63	1-924-811	Monitor	01136		- 2		
Start Date (10)	Scheduled Co 06-04-18	ompleti	ion Dat	te (11)	W	RS Enviro	nmenta	I Services, Inc.				_
04-02-18 Occupancy Status During Abatement (Check	Only One)				Str	eet Address 7 Old Dock	Road					
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Electrical circuit cabin	eriod of Abat at Facility Ho	ement urs			Cit	y, State, Zip aphank, N	Code Y 1198	0				
Scope of Work (Check All That Apply) Sopre ≥3 If	X Ren	ovation	1			Mini-	Enclosur					
≥160 sf or ≥260 lf						× Non-	Exempte	ed (*) and Non-Fria	ble Prod	Muale	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Maint Custoo	ocation rmally Solely I tenance dial Sta (12)	by e/	(i.e. ther	Contair mal sy urfacin	iption of ning Material estems insular g, VAT, or cellaneous)	(ACM) ion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
3 2	Yes	No	N/A		Wall	I Caulk		9 SF	X			1
Office Building			X							+	-	+
									-	+	+	+
			JDEP \	Naste (Cubic Y	/ards		of Registered Land	dfill	-1		
Name of Registered Waste Hauler	2000 Sec. 1	Ha	auler II 273	O No.	of Was	te	XUDECO'S	ess Landfill		-		
Waste Management City, State					Dispos TBD	al Date	City,	State risville, PA 1906				
Elizabeth, NJ 07201 Completed by	Title	erviso			,8	ignature Layrn	and -	Tutin	Date 03-23	3-18		

AD CL		NOT	FICATI	ON OF A	New Jers SBESTOS AC 8:60 a	ABATE	EMER	₹T		3,6	C			rint F
Date of Notification (1) 03-28-18			Name		ng Owner	Operato	or (2)		14	4	APR	- 3	20	18
Agencies Notified Type Notification	n		1127.001.001.001	t Address Hadley						ASE	BEST	35 C	ONTF	30L 8
DEP X Amended Amendme			City, S	State, Zip h Plainf	Code				L		LI(DENS	ING	
DOH Emergence justification Cancellation	1)	g	700000000000000000000000000000000000000	of Conta						ephone N 9-575-2		г		
			FA	CILITY IN	FORMAT	ION				0,02				
Name of Facility Where Abatement is Take PSE&G Madison Street Substation	ing Place on	(3)					Тур	oe of Facility (4	1150					
Street Address 1100 Madison St.							×	Subchapter Other (i.e. p	8 (Othe	er than K	-12) rcial bu	uildings	s, hom	ies,
City (5) Hoboken						d d	Squ N/A	etc.) uare Feet A	# of N/A	Floors		Bldg. N/A	Age	
County (6) Hudson			County (STATE	Code (7) _Y)		Cur	rent Use (Prio	r if beir	200		INIT		
Name of Monitoring Firm Hired by Building N/A	Owner (8	3)	ASC N/A	M No.		Name	of At	patement Cont vironmenta	tractor ((9)	nc			
Street Address N/A				(Street	Addr				110.			
City, State, Zip Code N/A						City, S	tate,	Zip Code NY 11980						
Project Manager for Monitoring Firm N/A			Teleph N/A	one No.		Teleph 631-9	none l	No.	П	License 01136	No.			
Start Date (10) 04-09-18	Schedul 06-05-		mpletion	Date (11)	Name	of OS	SHA Monitor vironmental			,			
Occupancy Status During Abatement (Che	ck Only O	ne)				Street								
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe: Electrical circuit cat	mal Facility	Abater y Hour	ment s					ock Rd Zip Code						
	инес					Yaph	ank	NY 11980						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Mi Gi	ull Containmer ini-Enclosure lovebag Proce on-Exempted	dure					
Location of		Locati				cription		- Exampled	yunu	NOTH THE	DIE TI	Abate	ement /pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intenar todial S (12)	nce/	Asber (i.e	stos Conta thermal surfac	aining Ma	ateria insul , or	ation,	(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
Switching yard	Yes	No	N/A								<u>a</u>		ate	ге
			X		tran	site pip	e		480	00 If	х			
									-	19	+			_
Name of Registered Waste Hauler		l N.	JDEP W	/aste	Cubic Y	'ards		Name of Re	gistero	d I andfi				
Environmental Transport Group Inc.		Ha	auler ID	1000	of Wast			G.R.O.W.		u Lanuill				
City, State Flanders NJ 07836					Disposa TBD	al Date		City, State Morrisville	PA 1	9067				
Completed by Raymond Tutiven	Title Super	visor			8ig	nature	1	Tt		Da	ate 3-28-1	18		

			1200					FORDE			_	P	int F
CK1443		NOT	Pursuan	tate of New Jers MOF ASEESTO LTO VJAO 8:60 a	ABATE	(0)	NT		E	<u>C</u>		\mathbb{W}	E
Date of Notification (1) 3/29/18				of Building Owner		r (2)			Å	PR	- 3	2018	
				of East Orange)			1 1					
Agencies Notified Type Notification				Address					ISGE	CETTO C	TO CALL	TTD	VI 0
EPA Initial			0 10 10 10 10 10	y Hall Ave.				1	· ·	LICE	NSIN	VIAC IG)L &
DEP Amended Amendmen	t #		1.00	tate, Zip Code						-	Printed the Owner	CONTRACTOR DE	
Emergency		g		Orange	-								
DOH justification) DCA Cancellation			II SEEMANGER	of Contact				Telepho					
Cancellation	1			Rolling				97	3 -	26	6	5/1	03
Name of Facility Where Abatement is Takir	na Place ((3)	FAC	ILITY INFORMAT	ION	-							
Abandoned unsafe structure (see	attache	(a)				I y	pe of Facility (4)					
Street Address	attacric	,u)		13.			School (K-12						
77 North 15th St.							Subchapter 8	Other that	an K-1	2)	ldingo	hom	
						X	etc.)	ivate & coi	inero	iai uui	iuiriys	, 110111	es,
City (5)						1 2	uare Feet	# of Floo	rs	130	3ldg. A	Age	
East Orange, NJ 07017							000	2			50+		
County (6) 4 ESSE	V			Code (7)			rrent Use (Prior	if being de	emolis	hed)			
/ / -			277	USE ONLY)			pandoned						
Name of Monitoring Firm Hired by Building	Owner (8)		M No.			batement Cont						
Yannuzzi Environmental Services,	inc.		n/a		Yanı	nuzz	zi Environme	ental Ser	vices	, Inc			
Street Address					Street	Add	ress						
135 Kinnelon Rd.					135	Kini	nelon Rd.						
City, State, Zip Code					City, S	state,	Zip Code						
Kinnelon, NJ 07405					Kinn	elor	n, NJ 07405						
Project Manager for Monitoring Firm			Telepho	one No.	Teleph	none	No.	Lice	nse N	lo.			
John Mucha			908-2	18-0880 X10	908-	218	-0880	012					
Start Date (10)	Schedul	led Co	mpletion	Date (11)	Name	of O	SHA Monitor		- 8				
7/9/18		41	18/18	0000 AF			zi Environme	ntal Sen	/ices	, Inc.			
Occupancy Status During Abatement (Chec	k Only O	ne)	1		Street		Control of the Contro			- 11/1/19/20			
Facility Closed/Vacated During Entire F	Period of	Abate	ment		135	Kinr	nelon Rd						
Abatement Performed Outside of Norm	nal Facility	y Hou	rs		City, S	tate.	Zip Code				_		
Other – Describe: abandoned					- C. S.		n, NJ 07405						
Scope of Work (Check All That Apply)		311111				No. of Persons							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	П	Renov	ation		Г	1 -	ull Containmen	A data - N.I					
x ≥160 sf or ≥260 if		Demol					ull Containmen Iini-Enclosure	t with Nega	ative F	ressu	re		
					×		lovebag Proce						
	T	125 - 4	es e			1 1	lon-Exempted () and Nor	-Friab	le Pro	The second second		
2 62 62		Loca Norma									2500		
Location of Asbestos-Containing Material (ACM)		ed Sol			scription		-1 (40)			-	1		
TO BE ABATED		intena		Asbestos Con (i.e. therma				Amoun (Specif		R	_	E	Ш
In Facility (13)	Cus	(12)	Staff?	surfa	cing, VA	T, or		SF or LI		em	Repair	2018 NTROL 8 S (63)	
(13)		, -,		other r	niscellan	eous	5)			Removal	a-	sula	sure
	Yes	No	N/A									te	(D
entire structure			X	Conden	ned st	ruct	ure	2500 s	f	Х			
							-	_000		21			_
					10000000000								
Name of Registered Waste Hauler		1	NJDEP W	aste Cubic	Yards		Name of Re	nistered I	andfill				
Yannuzzi Group		ŀ	Hauler ID	No. of Wa	ste		No. and		ariuilli				
		1	7567	100c	У		Progress	ive/IESI					
City, State					sal-Date/	1	/City, State						
Kinnelon, NJ				4/18/	18 \/	1	Bethlehe	m, PA					
Completed by	Title			S	ignature	//	/		Dat	te			
John Mucha	Proje	ect M	anager		- Wi	4//			3/2	29/18	3		
	-				/ 0	1/			1				

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

D&S Proj. #: 18-76	50		Not (Pur	ification of A	e or spes 0 8:	tos Abatement 60 and 12:120)		<u>S</u> APR	[E] -3	2018		
Date of Notification (1)				wner/Operator (2)	4 5		I L	AI II		2010		
Agencies Notified Type Notifi	cation	Street Ac	diges distribution					As	36E81C	is col	VTRO)L&	
☐ EPA ☐ Initial ☐ Amended	.							Later to the second sec	Manual Property	- 1-1 7 C-11	Prointmoses	nana mana	HV3VIINTTY FERE
Amendmen		City, Star	te, Zip Code)									
DOL Emergen	су	Uppe	r Montclai	r, NJ 07043									
DOH (including justification)		Name of	Contact					Telepho	ne Num	ber			
DCA Cancellai	tion	mary	o layton					1					
			FA	CILITY INFORM	ЛАТІС	DN .							
Name of facility where abatement	nt is taking	place (3)						Type of Facility	(4)				
maryjo layton									ol (K - 1	2)			
Street Address							_		hapter 8	************			
or the state of the second contract of the second of the s									(Private/Homes		ercial		
City (5)	I Co	unty (6)			_		_	Square Feet	# of Flo		В	ldg. A	ge
Oily (0)	00	unty (6)				ounty Code (7) tate use only)					_		
Upper Montclair	es	sex			(idio doc omy)		Current Use (F	Prior if be	eing der	nolish	ed)	
Name of Monitoring Firm Hired b	y Bldg. Ow	ner (8)		ASCM No.		Name of Abaten	nent C	Contractor (9)					
Street Address						D & S REST	ORA	TION, INC.					
Street Address						Street Address							
City, State, Zip Code					_	20 Californi City, State, Zip C	_	e.					
						Paterson, N.		0.2					
Project Manager for Monitoring Fire	m	T	Phone Num	ber	_	Telephone Numb		03	Licens	e Num	ber		
<u> </u>						973-345-80	020		1	01169			
Start Date (10)	Sche	d. Comple	tion Date (1	1)	_	Name of OSHA							- T
03/30/18	04/1	0/18				D & S Resto	ratio	n, Inc.					
Occupancy Status During Abatem				The state of the s		20 California	Ave	nue					
Facility closed/vacated durin Abatement performed outsid Describe:	g entire per e of norma	riod of aba I facility ho	tement. urs-			City, State, Zip C		il de					
Other-Describe: NORMAL					-	Paterson, NJ	075	03					
Scope of Work (check all that app							Fu	ıll Containment v	//negativ	e press	ure		
_	Renovati	on					\square M	ini-enclosure					
≥160 sf or ≥260 lf	Demolitio						No.	ovebag procedu on-Exempted (*)	re and Non	ı-friable	proce	edure	
Location of asbestos-containing	ls location by maint	n normally enance/cu	used solely	1				T		R	R	Е	E
material (acm) to be abated in facility (13)	staff(12)			Descriptio material (A	n of a	sbestos-containing	9	Amount (Specify S	For	m	e p	n C	n
abated in facility (13)	Yes	No	N/A					LF)	D) (201)	o V	a i	a p	L
basement		X		PIPE INSUI	LAT	ON		45 L FT		e	r	П	
								1.0 2.1			님	井	H
												\exists	宣
Registered Waste Hauler	DINID	EP Hauler	ID# I C	ubic Yards of W	asto	Name of Registe	ro d 1	and fill					
D & S RESTORATION, INC.	135		1	YD.	3315			andfill ESOURCE RE	COVER	RY			
City, State PATERSON, NJ 07503			Disposal D			City, State							
Completed by (Print or Type)	Title		04/02/1	Signature	_	TULLYTOW	N, P.	Α	T =				
BOGDAN JOLDZIC	PRESID	ENT		J.g.iataie					Date 03/26/	2018			
ASB-41	* Do not us	e this form	for asbesto	s licensure exe	mpted	d activities.			03/20/	2010			

Date of Notification (1) 0 3 / 2 6 / 1 8 Agencies Notified Type Notification EPA Initial DEP Amended Amendment #	ation	Maryjo Street Add	layton layton ress , Zie Code Montclair ontact	Mer/Operator (2	best 3 B:0	ds Abatement		Tolephi	ASSES	C PR	- 3	2011 2011	18
Name of facility where abatement	D		FAC	CILITY INFORM	ATIO	N							
maryjo layton Street Address	re faking l	0 (3)	-		The section of	-	* -	Subs	ol (K-1: hapter B	Cother Comm	noncia		
City (5)	Co	unty (6)		Control of the second		unty Code (7)		odesia Last	WOTHE	ers	1 '	any. M	30
Upper Montclair	es	SOX			(5:	ete use only)	11	Current Use (Prior If be	ing de	mo list	hedi)	
Name of Monitoring Firm Hired by	Bldg. Ow	er (8)		ASCM No.	1	Name of Abster	int Co	ntrector (9)	Markey Ag	- Total	3599475		
						D & S REST							
Street Address						Street Address				AS LITTLE		And the second	
City, State, Zip Gode		NUMBER OF STREET			-	20 Californi City, State, Zip C				200		1027	
		}				Paterson, N		•					
Project Manager for Monitoring Firm	I	PI	ione Numb	er	Cotal S	Telephone Num		7	Licens	a Nurr	ber		
Short Salve (19)						973-345-8 Name of OSHA	904		-	01169			
Start Date (10)	- 1	d. Completi	on Date (1	1)		D&S Rest							
03/30/18 Occupancy Status During Abatemer	04/1	0/18	,,,			Street Address	(Allenna			a estile	444	ON COMPANY OF THE PARK OF THE	
☐ Facility closed/vacated during	antire per	and of a bute	mani			20 California	-	ue .		- 1000000	and the same		
Abstement performed outside	of norma	facility hou	re-			City, State, Zip C	QP.						
Other-Describe: NORMAL H						Paterson, N	0750	3					
Scope of Work (check all that apply	•							Containment	w/negativ	pree	anto	-	
☐ ≥160 sf or ≥260 ff	Ranovati						2000	il-enclosure vebag procedu	-				
	Demolitic	n in normally i	news sololi	1	-			n-Exampted (*		-frisbl	s proc	edura	
Location of about the containing	by main!	enance/cus	todial	1	n al -	sbastos-containir		Amount		R	R	E	E
material (scm) to be abated in facility (13)	Maft(12)		1	material (A		andores-Coursing		(Specify :	SF or	m	P	C a	n c.
	105	No	NA					LF)		v	1	P	L
basement		LX		PIPE INSUI	AT	ON	No. Service Co.	45 L FT		×	山		
" - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		1			ables, par					10			旦
- 1					-					十二	닏		
					743000				uniter and	卄	1	-	-
Registered Waste Hauter D&S RESTORATION, INC.		EP Hauler I	- (m) /s	ubic Yards of W	ásie	Name of Regist	red La	ndfill	The same of the same of	164	<u> </u>		<u> </u>
City. State	13:	THE RESERVE TO SHARE THE PARTY OF THE PARTY	Disposal D	YD.		City, Siste	N, RE	SOURCE R	COVE	SX		and the same	
PATERSON, NJ 07503			04/02/1	8		TULLYTO'	'N. P.A	k .					
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESID	ENT		Signature	-		Series in		Date		and the same	C Self-	
			orasbesio	s licensure exe	moter	activities.			03/26	2018		_	and the same of th

D&S Proj. #: 18-77 Date of Notification (1) 0 3 / 2 7 / 1 8 Agencies Notified EPA DEP Amended Amendment #: DOH DOH DOA DOA	CHE Street A City, St new Name o	(Purs	ner/Operator (2 LER nj 07974	best Ø 8:6	JJ ps Abatement (Oland 12:120)	Francisco VI allocation of the Control of the Contr	ASSES	PR - 3)NTR NG		Management of the contract of	The state of the s
Cancellation	i Chi											
Name of facility where abatement is CHESTER KELLER Street Address	s taking place (3)		CILITY INFORM	MATIO	N	T	Subch	(4) of (K - 12) napter 8 (((Private/C) /Homes, 6	Other Comm			
01. (5)						S	Square Feet	# of Floo	-3888	В	ldg. A	\ge
City (5)	County (6)			V6-03392	unty Code (7) ate use only)	-						
new providence	union			(0,,	ate use only)	1	Current Use (P	rior if beir	ng der	nolish	ed)	
Name of Monitoring Firm Hired by E	Bldg. Owner (8)		ASCM No.		Name of Abatemer	t Con	tractor (9)					
			-		D & S RESTOR	RATI	ON, INC.					
Street Address					Street Address							
City, State, Zip Code					20 California A							
ony, orace, zip oode					City, State, Zip Code							
Project Manager for Monitoring Firm		Phone Numb	er	-	Paterson, NJ 0 Telephone Number	7503		License	Muma	har		
		l			973-345-8020)		Commence of the St.	1169			
Start Date (10)	Sched, Comp	letion Date (1	1)	_	Name of OSHA Mo				1107		-	
04/17/1818			1/		D & S Restora	ion,	Inc.					
Occupancy Status During Abatement	05/11/18	,		_	Street Address							
Facility closed/vacated during					20 California A		e					
Abatement performed outside of Describe:	of normal facility I	hours-			City, State, Zip Code	9						
Other-Describe: NORMAL HO	OURS			-	Paterson, NJ 0	7503						
Scope of Work (check all that apply)							Containment w	/negative	nress	ure		
≥3 sf or ≥3 If	Renovation					Mini-	enclosure	_	prooc	Juic		
≥160 sf or ≥260 lf [Demolition				×	Glove	ebag procedur	e	ما ما ما د			
Location of	Is location norma	ally used solely	1			NOII-	Exempted (*)	and Non-	R	R	E	T
	by maintenance/ staff(12)	custodial			sbestos-containing		Amount		e m	e p	n	E n
abated in facility (13)	Yes No	N/A	material (/	ACM)			(Specify S LF)	F or	0	a	c a	C
		10/4			************		86 s		v e	r	р	-
basement	X		PIPE INSU	LATI	ON	_	84 L FT					
						-						빝
		#				_			井	닏	닏	井
						-			片	片	片	쓔
Registered Waste Hauler	NJDEP Haul	er ID# Ci	ubic Yards of W	Vaste	Name of Registered	Land	Ifill		Ш	Ш	Ш	Ш
D & S RESTORATION, INC.	13506	1	YD.		TULLYTOWN,			COVER	Y			
City, State PATERSON, NJ 07503		Disposal D 04/18/18			City, State							
	Title	_ 04/10/18	Signature	_	TULLYTOWN	, PA		Dete				
- "이 이번에 보면 회사를 받았다" 이 상이 있는 "라이트 전에 되었다면 하는 것이 없는 사람들이 모든 말이다.	PRESIDENT		2.5110.010					Date 03/27/	18			
ASR 41 * F	o not use this for	an for solver	- P					-00/21/	10			

State of NJ Notification of Asbestos Abatement D&S Proj. #: 18-79 (Pursuant to NJAC 8:60 and 12:120) 2018 Name of Building Owner/Operator (2) Date of Notification (1) 0 3 / 2 7 / 1 8 DAVID MCGRATH ASSLE HIS CONTROL & Agencies Notified Type Notification Street Address ✓ Initial EPA Amended DEP City, State, Zip Code Amendment #: DOL Emergency short hills, nj 07078 DOH. (including Name of Contact Telephone Number justification) ☐ DCA elizabeth KEYLOUN Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) DAVID MCGRATH Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) short hills essex Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 01169 Start Date (10) Name of OSHA Monitor Sched. Completion Date (11) D & S Restoration, Inc. 04/23/18 05/16/18 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure >3 sf or >3 If Renovation Mini-enclosure Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of E by maintenance/custodial asbestos-containing E е Description of asbestos-containing Amount n staff(12) material (acm) to be m n p (Specify SF or C material (ACM) abated in facility (13) 0 a a Yes LF) No N/A V p basement (18 LOCATIONS) DUCT INSULATION 42 SQ FT X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 1 YD. TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date City, State PATERSON, NJ 07503 04/23/18 TULLYTOWN, PA Completed by (Print or Type) Title Signature Date **BOGDAN JOLDZIC** PRESIDENT / 03/27/2018 Do not use this form for asbestos licensure exempted activities ASB-41

D&S Proj. #: 18-80 Date of Notification (1) O 3 /2 7 /1 8 Agencies Notified	Street A City, St. NEV	(Purs	ner/Operator (2	besto	J ps Abatement 0 and 12:120)	To act of Australian Comment	ASDEST	CENSII	NTR NG		To an analysis of the second s	The state of the same of the state of the st
DCA Cancellation	MIC	HELLE TA	YLOR			-						
		FAC	CILITY INFORM	ATIO	N							
Name of facility where abatement is MICHELLE TAYLOR Street Address	s taking place (3)						School Subchar Other (P Bldgs./H	(K - 12) oter 8 (O rivate/Co omes, e	omme tc.	ercial		
City (5)	County (6)			Col	inty Code (7)	Square I	Feet #	of Floor	S	В	ldg. A	Age
NEWFONDS					ite use only)	Current	Use (Pric	r if being	g den	nolish	ed)	
NEW EGYPT Name of Monitoring Firm Hired by B	OCEAN Bldg. Owner (8)		ASCM No.		Name of Abatemen	t Contractor	(9)					
Street Address City, State, Zip Code					Street Address 20 California A City, State, Zip Code	Ave.						
Project Manager for Monitoring Firm		Phone Numb	per	-	Paterson, NJ 0 Telephone Number 973-345-8020)		icense 0	Numl			
Start Date (10) 04/19/18	Sched. Comp 05/11/18	letion Date (1	1)		D & S Restorat							
Occupancy Status During Abatement Facility closed/vacated during e Abatement performed outside of Describe: NORMAL HO	(Check only one entire period of ab of normal facility h	atement.		_	20 California A City, State, Zip Code Paterson, NJ 0	9						
≥160 sf or ≥260 lf	Renovation Demolition					Full Contain Mini-enclosu Glovebag pr Non-Exemp	ure ocedure		iable		edure	===
asbestos-containing	Is location normal by maintenance/ostaff(12) Yes No	custodial	1	n of as	sbestos-containing	Control of the contro	ount ecify SF	or	Remove	Repair	Encap	E n c L
basement crawl space			PIPE INSUI	LATI	ON	36 l ft			ă			
						_						
				Water Street		_		-	뷔	님	뷰	뷰
								-	뉘	片	片	卄
Registered Waste Hauler D & S RESTORATION, INC.	NJDEP Hauk 13506	1	ubic Yards of W YD.	aste	Name of Registered TULLYTOWN,		CE REC	OVER	7			1-
City, State PATERSON, NJ 07503		Disposal D 04/19/18			City, State	DA						
Completed by (Print or Type) BOGDAN JOLDZIC P	itle RESIDENT		Signature		TULLYTOWN	, FA		Date 03/27/2	018			_
ASB-41 * D	o not use this for	m for asbesto	s licensure exer	mnted	activities							

Date of Notification	-70	54			ication of As uant to NJA ner/Operator (2		bs Abatement 0 and 12-120)			G E	3 2			
Agencies Notified	Type Notifica	tion	Street A		0			-	ASD	ESTOS LIVE	CON	TRO	_ &_	-
		- 11								COLOR SALLIAN TOWNS	A-1900		PROTEST SE	lease seed
☐ DEP	Amendment #		City, Sta	ate, Zip Code										
☑ DOL	☐ Emergency		MID	LAND PAR	K, NJ									
M DOH	(including justification)	- 11	Name of	Contact					Telephon	e Numbe	г			
☐ DCA	Cancellation	n	DEA	N STEYLI	NG									
				FAC	CILITY INFORM	IATIO	N							
Name of facility wh	ere abatement	is taking p	lace (3)	-				T	ype of Facility (4)				
		01						1		(K - 12)				
DEAN STEYLI Street Address	ING									apter 8 (0			(-12)	
Street Address										Private/C Homes, e		ercial		
								5		# of Floo		В	ldg. A	ge
City (5)		Cou	inty (6)				unty Code (7)	_						
MIDLAND PA	RK	BI	ERGEN			(50	ate use only)	1	Current Use (Pr	ior if beir	ig den	nolish	ed)	
Name of Monitoring	Firm Hired by	Bldg. Owr	ner (8)		ASCM No.	1	Name of Abatemen	t Con	tractor (9)					
							D & S RESTOR	RATI	ON, INC.					
Street Address							Street Address							
City, State, Zip Code						_	20 California A	-						
Oity, State, Zip Code							City, State, Zip Code							
Project Manager for	Monitoring Firm	ľ		Phone Numi	per	_	Paterson, NJ 0 Telephone Number	/503		License	Numl	ner		
							973-345-8020)			1169			
Start Date (10)		Sche	d. Comp	letion Date (1	1)	-	Name of OSHA Mo	nitor						
04/19/18		05/1	0/18				D & S Restorat	tion,	Inc.					
Occupancy Status D	uring Abatemer)		-	20 California A	venu	IA.					
Facility closed							City, State, Zip Code		10					
Describe:	rformed outside		facility I	nours-										
	e: NORMAL H					-	Paterson, NJ 0	7503						
Scope of Work (che		')						1	Containment w	/negative	press	ure		
>3 sf or >3 lf	\boxtimes	Renovati	on						enclosure ebag procedur	۵				
<u> ≥160 sf or ≥26</u>	60 lf	Demolitio							-Exempted (*)		friable	proc	edure	1
Location of asbestos-cont	aining	by maint		ally used solely custodial							R	R	E	E
material (acm)	to be	staff(12)	Т —		material (sbestos-containing		Amount (Specify SI	F or	m o	p	С	n
abated in facili	ity (13)	Yes	No	N/A					LF)		v	i	a p	L
basement			X		PIPE INSU	LAT	ION	\dashv	110 l ft		e	Γ	П	\vdash
														盲
Registered Waste Ha	uler	TALID			ubia Vanda af V	V4-	Tu de la							
D & S RESTORA		13:	EP Haul 506		VD.	vasie	Name of Registered TULLYTOWN,			COVER	Y			
City, State	07500			Disposal D	ate		City, State				-			
PATERSON, NJ Completed by (Print of		Till		04/20/1		_	TULLYTOWN	, PA						
BOGDAN JOLD		Title PRESID	ENT		Signature					Date 03/27/2	2012			
ASB-41				rm for asbesto	L os licensure exe	mote	d activities			03/21/	2010	_		

ASB-41

Date of Notification (1) O 3 /2 7 /1 8 Agencies Notified Type Notificat EPA Initial DEP Amended	P. Stre	AUL W	(Pursus)	State cation of As ant d NJA0 er/Operator (2	8.6	s Abatemen and 12 120		land land.	C E	CON	rroi	The second secon	
DOL Amendment #:		, State, Z Joper M	0.50	NJ 07043									
DOH (including justification)	Nan	ne of Con						Telephon	e Numbe	r			
DCA Cancellation	n <u>I</u>	PAUL W	ARD										
			FAC	ILITY INFORM	ATIO	N							
Name of facility where abatement i	s taking place	9 (3)					Туре	of Facility ((4) I (K - 12)				
PAUL WARD				-				Subch	apter 8 (C	Other t		(-12)	
Street Address	•							Other (Bldgs./	(Private/C 'Homes, e	omme etc.	ercial		
City (5)	County	(6)			-		Squa		# of Floo		В	dg. A	ge
City (5)	County	(0)				unty Code (7) ate use only)	Curr	ent Use (P	rior if bein	a den	nolish	ed)	_
Upper Montclair Name of Monitoring Firm Hired by I	essex	(0)								9 4011			
Name of Monitoring Firm Fired by I	Blag. Owner ((8)		ASCM No.		Name of Abatement							
Street Address					=	D & S RESTOR. Street Address	ATION	N, INC.					
						20 California Av	/e.						
City, State, Zip Code						City, State, Zip Code	500						
Project Manager for Monitoring Firm		Pho	ne Numb	er	-	Paterson, NJ 07 Telephone Number	503		License	Numb	er		
						973-345-8020			0	1169			
Start Date (10)	Sched. C	ompletio	n Date (11)		Name of OSHA Moni D & S Restorati							
04/18/1818	05/11/1					Street Address	JII, IIIC	•					
Occupancy Status During Abatemen Facility closed/vacated during Abatement performed outside Describe: Other-Describe: NORMAL He	entire period of normal fac	of abaten				20 California Av City, State, Zip Code Paterson, NJ 07.							
_ =	Renovation Demolition						Mini-end Gloveba	itainment w closure ig procedur empted (*)	e	friable		edure	
Location of asbestos-containing	ls location no by maintena				n of a	sbestos-containing		Amount		e R	R	E n	Е
material (acm) to be abated in facility (13)	Yes Yes	No	N/A	material (/		spesios-containing		(Specify S LF)	F or	o v	p a i	c a p	n c L
garage		X		boiler insula	ition		16	sq fT		e			
							_					=	무
							_			片	片	+	#
Registered Waste Hauler D & S RESTORATION, INC.	NJDEP 13506	Hauler ID		ibic Yards of W YD.	/aste	Name of Registered TULLYTOWN, I		IRCE RE	COVER	Y Y		_	
City, State			isposal Da	ate		City, State			20 1 DA	THE REAL PROPERTY.			
^^	Title		04/18/18	Signature		TULLYTOWN,	PA		Date				—
	PRESIDEN Do not use th		r asbesto	s licensure exe	mnter	activities			03/27/	2018			

State of NJ Notification of Asbestos Abatement D&S Proj. #: 18-81 (Pursuant to N/AC 8:60 and 12:120) APR - 3 20**18** Name of Building Owner/Operator (2) Date of Notification (1) 0 3 /12 7 /11 8 ROSE DEPOTO ASSESTOS CONTROL & Agencies Notified Type Notification Street Address LIUENSING ☐ EPA M Initial Amended DEP City, State, Zip Code Amendment #: DOL ☐ Emergency NUTLEY, NJ 07110 (including DOH Name of Contact Telephone Number justification) DCA ROSE DEPOTO Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) ROSE DEPOTO Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) NUTLEY essex Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 01169 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. 04/16/18 05/11/18 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure \times >3 sf or >3 lf **Renovation** Mini-enclosure Glovebag procedure ≥160 sf or >260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of E Ε by maintenance/custodial e e asbestos-containing n Description of asbestos-containing Amount staff(12) n m material (acm) to be p C (Specify SF or material (ACM) C abated in facility (13) a а LF) Yes No N/A p basement PIPE INSULATION 301ft X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 1 YD. TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date City, State PATERSON, NJ 07503 04/17/18 TULLYTOWN, PA Completed by (Print or Type) Signature Title Date **BOGDAN JOLDZIC** PRESIDENT 03/27/18 Do not use this form for scheetoe licensure exempted activities

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

								- Check	. 0002				
Date of Notification	(1)	1	Name of Buil	ding Own	er/Operator (2)			In E	C	3 1	W	ß	
10 13 1/12 19]/[1]8]		lan Nutki	s)	: 6	2	W		$ $ \cap $ $
Agencies Notified	Type Notificati	on S	Street Addres	ss									111
☐ EPA	X Initial								APR -	- 3	2018	-	$\ U$
☐ DEP		Ita	City, State, Z	ip Code				I freed Books					1
X DOL	Amendr	nent	West Ca	aldwell, i	NJ 07006			AS	BESTON		NTRO	11 &	
▼ DOH		IN	lame of Con	tact				Telephone				/L U	
☐ DCA	☐ Cancella	ation	Ian Nutk	(is									
				FACI	LITY INFORM	ATION							
Name of facility wh	nere abatement i	s taking pla	ace (3)				T	Type of Facility (
Ian Nutkis									(K - 12) apter 8 (Ot	her th	an K-	12)	
Street Address							-	X Other (Private/Co	mme		-,	
									Homes, et	_	Bld	g. Ag	ne .
City (5)		Cou	nty (6)			Cou	nty Code (7)	oquaio i cot	,, 01110010			5	,-
West Caldwe	NININTONS	Fe	sex			(Stat	te use only)	Current Use (Pr	ior if being	dem	olishe	d)	
						L.,,	N	Residential					
Name of Monitorin	g Firm Hired by	Blag. Own	er (8)	1	ASCM No. n/a		Name of Abatement (
Otrack Address:						_	B & G Restorati	on, Inc.				-	
Street Address							105 Ryerson R	oad					
City, State, Zip Cod	е						City, State, Zip Code				oration line		
-							Lincoln Park, N	NJ 07035					
Project Manager for	r Monitoring Firm		Pho	one Numb	er		Telephone Number (973)696-6869	2	License I		er		
SIV .							Name of OSHA Monit			378			
Scheduled Start Da	ite (10)	Sched	d. Completio	n Date (11	1)		B & G Restorati	77.W					
04/09/2018		04/	10/2018				Street Address						
Occupancy Status					**************************************		105 Ryerson Ro	oad					
Facility close	d/vacated during erformed outside						City, State, Zip Code						
Describe:		or normal	Taomity Hours			-11	LincolnPark, NJ	1.07035					
Other-Descri		3				- 11	- Lincoln dix, 140	7 07 000				- 1	
Scope of Work (ch	ieck all that apply							F	7 a			2021	
		Renovation					ull Containment w/neg	ative pressure	Gloveb				
>3 sf or >3 lf	<u> </u>	≥160 sf or				X N	lini-enclosure		Non-fri	R			
Location of asbestos-cor	ntaining		n normally u enance/cust					Amount	2	e	R	E n	E
material to be	е	staff(12)			material (sbestos-containing	(Specify S	F or	m o	pa	c a	n
abated in fac	ility (13)	Yes	No	N/A				LF)		v e	i	р	L
boiler room are	а			X	pipe insula	ation		48 lf		X			
													닏
Pegistered Waste F	lauler.	LAUE	ED Herrier II	<u></u>	ubic Yards of \	Masta	Name of Registered	Londfill		Ш	Ш	Ц,	Ш
B & G Restora			EP Hauler II 19563		1	vasit	Tullytown	Resource & Re	covery	Cent	er		
City, State Lincoln Park, I	NJ			Disposal D 04/1	ate 11/2018		City, State Tullytown,	PA					
Completed by (Prin		Title			Signature		0,0		Date				
Gordana Luna	1	Secreta	ry/Treasu	rer			Gordana Luna		03/29	/201	8		

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

				Lad	Beef Veril	(lad	Comment of the Commen						
Date of Notification	1 (1)	111	lame of B	uilding Own	er/Operator (2)				0 0	7 17	17 [== [*	and the same of th
10 13 1/12 19	<u> </u>		Mark T	afoya				IME	CE		W I	5	nli
Agencies Notified	Type Notificati	on S	treet Add	ress									$\forall i$
☐ EPA	X Initial	- 11							n n 0		040		
☐ DEP	initial	1	ity State	Zip Code				- L L - A	PR - 3	-/	118	+	1
X DOL	Amenda		10000	ford, NJ (07070				colitions constituted to the	tear time			
X DOH		N	ame of Co	ontact				Telephone	Number	UNIC	ROL	. &	_
☐ DCA	☐ Cancella	ition	Mark T	Гаfovа				Indiana and a second	LICHIN	771.75	4 Simulations	and the second	want week
					ILITY INFORM	ATION					-		
Name of facility wi	here ahatement is	s taking nla	ace (3)					Type of Facility (4)	Service Sic			
Mark Tafoya	nere abatement i	s taking pie	100 (0)					School	(K - 12)	ar th	on V	12\	
Street Address									pter 8 (Oth Private/Con			12)	
oli del 7 ladi e do								Bldgs./H	lomes, etc				
		T 0	1 (0)					Square Feet #	of Floors		Blo	g. Ag	je
City (5)		Cour	nty (6)			ı	nty Code (7) te use only)	Current Use (Pri	or if being		olishe	d)	
Rutherford, N	NJ 07070	Be	rgen			(0.0	10 400 0111)	Residential	or it being	uem	DIISHIG	u)	
Name of Monitorin	ng Firm Hired by I	Bldg. Owne	er (8)		ASCM No.		Name of Abatement Co						
					n/a		B & G Restoratio	n, Inc.					
Street Address							Street Address						
							105 Ryerson Ro	ad 					
City, State, Zip Coo	de						City, State, Zip Code	1.07005					
							Lincoln Park, N	J 07035					
Project Manager fo	or Monitoring Firm		F	hone Numb	per		Telephone Number (973)696-6869		License N 003		er		
Scheduled Start Da	ate (10)	Sched	d. Comple	tion Date (1	1)	-	Name of OSHA Monito						
04/09/2018		04/	10/2018				B & G Restoration	n, Inc.		_			
Occupancy Status	During Abatemer	nt (Check o	only one)			-	105 Ryerson Ro	ad					
	ed/vacated during			tement.			City, State, Zip Code						
	erformed outside	of normal	facility ho	urs-			J., 1.1.1.						
Describe: Other-Descri	ibe:					-11	LincolnPark, NJ	07035					
Scope of Work (cl	heck all that apply	()										1	-
☐ Demolition	X	Renovation	on			☐ F	ull Containment w/nega	tive pressure	Gloveba	g pr	ocedu	re	
X >3 sf or >3 if	f \square	≥160 sf or	>260 If			X	Mini-enclosure		Non-fria	ble p	госе	lure	
Location of		Is locatio	n normali	y used solel	у					R	R	E	E
asbestos-co	•	by mainte staff(12)	enance/cu	istodial	Description	on of a	sbestos-containing	Amount	_	e m	e p	n	n
material to b abated in fac			Γ	Τ	material ((ACM)		(Specify Sf	- or	0	a	a	C
abatoa III Ia	o (10)	Yes	No	N/A				338.20		v e	r	р	<u>l. </u>
bottom of stairs	S			X	pipe insul	ation		40 lf		X			
c awl space				X	pipe insul			6 If		X	ᆜ	片	부
	her/dryer left side					ation		1 lf		X	屵		#
	asher/dryer right side							3 lf		ᆜ	屵	X	11
boiler area Registered Waste	Hauler	L	EDUL	X	pipe fitting		Nome of Degisters 11	4 fittings			Ц	X	
B & G Restora			EP Haule 19563	110#	2	vvasie	Name of Registered L Tullytown R	anonii Resource & Re	covery C	Cent	er		
City, State Lincoln Park,	NJ			Disposal I			City, State Tullytown, F						
		Title		-1	Signature			***************************************	Date			Y	
Gordana Luna	pleted by (Print or Type) Title Signat						Gordana Luna		03/29/	201	8		

Ch 1391		NO	TIFICA (ATION OF ASI Pursuant to NJAC	BESTOS ABA	TEMENT		E	C		\mathbb{V}
Date of Notification (1): 4/6/17	Nar	ne of E	uilding C)wner/Operator (2):	V II L	/					
Agencies Type Notification		et Add	IEVA JOI ress:	NES			led by	Å	PR -	3 2	2018
(X) Initial Notification	Cit	, State	, Zip Cod	e:				weed to the	www.err.neg.comple	Minuse (a	For Ethiol services and
(X) DEP () Amendment Notification	PA	TERSC	N, NJ 07					ASHE		OON NSIM	TROL
(X) DOH () Emergency (X) DOH () Cancellation		ne of C NEVA	ontact:			Telephone	: Numbi		perec	Carry 16, Tulfor Dinte	che servemente adead
				FACILITY INFO	ORMATION						
Name of Facility Where Aba Street Address:	itement i	s Takir	g Place (3): RESIDENTAL	Type of Facility () School (K-12 () Subchapter 8 (X) Other (i.e., phomes, etc.)	2) (Other than I	K-12) mercial buildings	,		ý -	
City & State (5): PATERSO	N, NJ				Square Feet: N	A	# of Floors: 2	2	Bldg.	Age:	NA
County (6): PASSAIC			ounty Coo	de (7) ISE ONLY)	Current Use (P RESIDENTAL	rior if being	demolished):				
Name of Monitoring Fir Owner:(8)				ASCM No.:	Name of Abate	ment Contra	actor (9):				
ENVIRONMENTAL CONS Street Address:	ULTING	GRO	UP, INC.	1	S/M Enterpris		c.				
					Street Address:						
PO BOX 8466 City, State, Zip Code:					339 North 6th		E2				
HALEDON, NJ 07538					City, State, Zip						
Project Manager for Monitor	ing Firm	:		Telephone No.:	Prospect Park Telephone No.:		License No.:				
FERNANDO				973-418-4036	(973) 595-6955		00641				
Start Date (10): 12/2/17	Schedu 12/4/1		mpletion	Date (11):	Name of OSHA S/M Enterpris	Monitor:					
Occupancy Status During Abater (X) Facility Closed/vacated During	ng Entire	Period o	f Abateme	ent	Street Address: P.O. Box 8265						
() Abatement Performed Outsic () Other – Describe:	le of Norr	nal Faci	lity Hours		City, State, Zip Haledon, NJ 07			17			
Scope of Work (Check all that ap	ply):										
$(X) \ge 3 \text{ sf or } \ge 3 \text{ lf}$ $(X) \ge 160 \text{ sf or } \ge 260 \text{ lf}$			(X) R () D	enovation emolition		() Mini b	ontainment with Enclosure bag Procedure iable Procedure	n Nega	ative P	ressur	e
Location of	1	Locat Norma	lly	Des Ashastas Cont	scription of					emen ype	t
Asbestos-Containing Material (ACM)		d Sole		(i.e., thermal	aining Material (l systems insulat	ion,				H	T
TO BE ABATED IN Facility (13)	Yes	Staff (12)			cing, VAT, or miscellaneous)		Amount (Specify SF or LF)	Removal	Repair	Encapsulat	Enclosure
BASEMENT	165	X	IN/A	PIPE INSULATI	ON		220 LF	X	-	-	
							20				
Name of Registered Waste Ha FREEHOLD CARTAGE, INC	uler: C.			NJDEP Waste Hauler ID No. 15939		rds 4	Name of Regis GROWS	tered	landfil	1:	
City, State: FREEHOLD, NJ		Dispo 4/10/	osal Date:		City, State: MORRISVI	LLE, PA			50.770		
Completed By: MIKE ALTADOUKA			Title: PRESII	DENT	Signature:		Date: 3/28/28	-			

Chibo		NOTIF	FICATIO	State of N N OF AS It to NJAC	BESTOS	ABATE	MEN	M	D.	E C	E			
Date of Notification (1) 3/23/2018			Name Geor	of Bu ld ing	owner/ ther	Operator	(2)	<u> </u>		API	R - 3	201	8	
Agencies Notified Type Notification Property Initial Amended Amendment Emergency (1	City, St Florh	Address tate, Zip C am Parl	k NJ 07	7932			land box	ASDEG	· national street	ONTE	P-Nacra-Process	
DOH justification) Cancellation	•	,	Mark	of Contact o Stank	ovic, P		/lana	ager	To	lanhana	Alumhai	•		
Name of Facility Where Abatement is Taking N/A	g Place (3)	FAC	ILITY INF	ORMAT	ION	Тур	e of Facility	0.740					
Street Address							×	School (K- Subchapte Other (i.e. etc.)	er 8 (Oth	ner than I & comm	K-12) ercial bu	iilding	s, hom	nes,
City (5) Florham Park							Squ 2,0	are Feet 000	# 0	f Floors		Bldg. 53	Age	
County (6) Morris				Code (7) USE ONL)	0		Curr	rent Use (Pr sidence	rior if be	ing demo	olished)			
Name of Monitoring Firm Hired by Building (Owner (8)	ASCI	M No.		Name Chec	of Ab	atement Co ark Indus	ontracto trial	(9)	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
Street Address		10-11				Street 54 M		ess an Dr						
City, State, Zip Code								Zip Code J 07871						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph 973-		No. 2645		License 0133				
Start Date (10) 3/26/2018	Schedul 4/2/20	ed Cor	npletion	Date (11)				HA Monitor ark Indust						
Occupancy Status During Abatement (Check	1.50	26				Street A		100 m						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	al Facility	Abaten Hours	nent			City, St	ate, 2	Zip Code J 07871			-			
Scope of Work (Check All That Apply)						-								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Mi	ill Containm ni-Enclosur ovebag Pro on-Exempte	e cedure				re	
Landing of		Locati			76-3				. ()		1	Aba	emen ype	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intenar odial S (12)	ly by nce/	Asbes (i.e.	tos Cont thermal surfac	scription of aining Ma systems cing, VAT niscelland	ateria insul , or	ation,	(8	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
kitchen	Yes	No	N/A		-								te	Ф
basement		X				or tiles			11/00/	50 SF	X			
		X			70.735	or tiles				0 SF	X			
bascinent	basement								40	00 SF	X			
Name of Registered Waste Hauler Atlantic Carting		11/2/19/2	JDEP W auler ID		Cubic of Was			Name of Waste						
City, State Wayne NJ					Dispos	al Date		City, State Tulleyto		PA				
Completed by Corey Stankovic	Title CEO				Si	gnature,	100	toes	*		Date 3/23/2	018	- 11	

bench)	State of New Jersey	
	ATION OF ASBESTOS ABATEMENT	
(Pu	rsuant to NJAC 8 60 and 12:120)	

	Lod	lland	1	Li L					Learn 1	7 0	177) п	DI	
Date of Notification (1) 3/29/2018		1	Name of	Building Ow	vner/O	perator (2) Morris		D)-l	<u> </u>	<u>l</u> E	,	\mathbb{W}	<u> </u>
Agencies Notified Type Notification		5	Street A	ddress							_			
EPA DEP DOL Mended Amendment #	1	C	City, Sta	te, Zip Code		Milford	, NJ 0884	8		API	1 -	3	201	8
□ Emergency (in justification)		- N		Contact		Willion	, 110 0004		elephone	Numbe	r	VSII		OL 8
DCA Cancellation				James M	2.3/20	DN1								
Name of Facility Where Abatement is Taking Residential	Place (3)		FACII	LITY INFOR	WIATIC		Type of Fac					V		
Street Address							Other ((K-12) apter 8 (O i.e. private			uildin	gs, h	ome	s,
City (5) Milford, NJ 08848	i				-		etc.) Square Fee 1000		of Floors			g. Ag 5+/-	е	
County (6) Hunterdon				Code (7)			Current Use	(Prior if b	eing demo	107	124.0			
Name of Monitoring Firm Hired by Building O MECS	wner (8)		ASCM	l No.			of Abatemen	t Contract	or (9)				-	
Street Address PO Box 341				55		Street A	Address ox 322							
City, State, Zip Code Chesterfield, NJ 0851	5						ate, Zip Cod own, NJ 0			()				
Project Manager for Monitoring Firm Bill Weisgarber			elephor	ne No. 98-4070		Telepho	one No. 59-9688		Licens 0049					
Start Date (10) 4/26/2018	Scheduled		pletion 0 10/201			Name of MECS	of OSHA Moi	nitor						
Occupancy Status During Abatement (Check	Only One)	CI-VIVE		5		Street A					77			\neg
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:			ent		-	City, St	ox 341 ate, Zip Cod							
Scope of Work (Check All That Apply)					_	Cnes	terfield, N	J 08515						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	0.000	novati				×	Mini-Enclo Glovebag	Procedur	e					
	le I e	4! -					Non-Exer	npted (*) a	and Non-F	riable F		dure bater	nent	
Location of	No	catio rmally	/		Des	cription	of			_	_	Тур	е	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		enan	ce/	(i.e. the	ermal s				Amount (Specify SF or LF)	S. C.	Demoval .	Repair	Encapsulate	Enclosure
Attic	X				Ver	miculit	e		1000 sf	2		+		
-											+	+	+	
Name of Registered Waste Hauler Stevens Environmental Services		Ha	IDEP Waller ID 18292	No.	Cubic \ of Was			e of Regis less Lar		ndfill				
City, State Allentown, NJ						al Date 0/2018		State risville,	PA					
Completed by Mahlon E. Stevens	Title Project	Mar	nager		Si	gnature	. 4			Date 3/2	29/1	8		

CK# 8827

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		500	- FIRM
		1514	1111
APR	- 3	2018	

	ATT	(Pursu	ant to NJAC	8:60 and 12:1	120)	APE	1 - 3	2018	de la	
Date of Notification (1) 3/29/2018	FRAN		ne of Building E&G	Owner/Operat	tor (2)					
Agencies Notified Type Notification	1		et Address 00 HADLEY	/ ROAD	100	+i			- · · · · · · · · · · · · · · · · · · ·	- 1
EPA Initial Amended Amendmer Emergency		City SO	, State, Zip Co UTH PLAIN	ode	07080	Tiday act		10.00	Earl wines	
DCA justification)		ne of Contact MARK	MAK	SAAI	Telephoi	ne Numb -214	er	191	9
			ACILITY INFO		SAIC	860	all	7	//	/
Name of Facility Where Abatement is Takin	ng Place (3)				Type of Faci	lity (4)		K104176		
Street Address 727 ABBOTT	BLVD		-		School Subcha Other (i etc.)	(K-12) apter 8 (Other that i.e. private & com	n K-12) nmercial	buildin	gs, hon	nes,
City (5) FORT LEE					Square Feet		rs	Bldg	g. Age	
		Cour	nty Code (7)		Current Use	Prior if being de	molished	APPY	90	YRS
County (6) BERGEN			TE USE ONLY)			STATIC		'/		
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (8)	0.000	SCM No. 045		e of Abatement	Contractor (9) EMS OF AME	717-7-7-1	NC		
Street Address 64 BROAD STREET					et Address WHITEHEA	D AVE.				
City, State, Zip Code MATAWAN, NJ 07747					State, Zip Code UTH RIVER,					
Project Manager for Monitoring Firm TOM GEIGER			hone No. -290-2217	Telep	ohone No. -432-8350	Lice	nse No. 111			
Start Date (10) 4////18	Scheduled (on Date (11)	Name	e of OSHA Moni			NC.		
Occupancy Status During Abatement (Chec	k Only One)	110	0/10		t Address	INO OF AIME	TTOAT	٧٥.	To-12	-
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe: Mocasacy of	nal Facility Ho	ours	0	City,	WHITEHEA State, Zip Code					
Scope of Work (Check All That Apply)	-	3 6-74	7	- SOI	UTH RIVER,	NJ 08882				
≥3 sf or ≥3 If ≥160 sf or ≥260 If		ovation olition			Mini-Enclos Glovebag F				LIFE	
	Is Lo	cation					- Habic I		atemen	t
Location of Asbestos-Containing Material (ACM)	Used S	nally olely by	Aghasta	Description			-		Type	$\overline{}$
TO BE ABATED In Facility (13)	Mainte Custodi (1	al Staff?	(i.e. th	nermal system surfacing, V/ other miscella	AT, or	Amount (Specify SF or LF	1 3	Repair	Encapsulate	Enclosure
	Yes N	0 N/A						_	le	(D)
WINDOWS, DOORS	×	4	ACM	1 CAUL	King	128 4	F>	<		
Name of Registered Waste Hauler		NJDEP	Waste	Cubic Yards	Name	of Registered La	ndfill			
WASTE MANAGEMENT		Hauler 1	ID No.	of Waste	FAIR	LESS	i i Gilli			
City, State ELIZABETH, NJ				Disposal Date	City, S	tate RISVILLE, PA	Δ		-	
Completed by CAROL RAIMO	Title OFFICE	MGR		Signature		Δ	Date 3/0	10	100	
					gerax X	umo	9/0	(7/	00/	5

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

Date of Notification (1) Name of Building Owner/Operator (2) 03 28 18 Verizon Agencies Notified Type Notification Street Address **⊠** EPA 95 William Street **⊠** DOLWD ☐ Amended City, State, Zip Code **⊠** DHSS Amendment #_ Newark, NJ 07102 ☐ DCA Emergency (including (NJAC 5:23-8) Name of Contact justification) Telephone Number Cancellation Alex Baylor 301-802-5112 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Verizon ☐ School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 15 Lanning Avenue homes, etc.) City (5) Square Feet # of Floors Bldg. Age Pennington, NJ 10,000 50 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Mercer Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) USA Environmental Managaement Inc. JVN Restoration Inc. Street Address Street Address 8436 Enterprise Avenue 47 Foster Road City, State, Zip Code City, State, Zip Code Philadelphia, PA 19153 Staten Island NY 10309 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mark Jenkins 718-605-6256 215-365-5810 00774 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 04 / 09 / 18 04 / 12 / 18 **Testor Tech** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 10 59 Jackson Avenue Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 9:00AM-5:30PM/ PM- AM LIC NY 11101 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure $\square \ge 3$ sf or ≥ 3 If □ Renovation ☐ Mini-Enclosure ≥160 sf or ≥260 lf ☐ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Repair Removal Encapsulate Enclosure 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 Roof \boxtimes Caulking 160 LF \boxtimes П X X П M Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste **Newark Carting** G.R.O.W.S., Inc. NJ-566 5 City, State Disposal Date City, State Hackettstown, NJ 02/25/18 Morrisville,PA Completed By (Print or Type) Signature Ruben Diaz **Project Manager** ASR-41 **MAY 11** * Do not use this form for asbestos licensure exempted activities.



1200			La Contraction	
Dv	in	4	Form	
$r_{\rm I}$	111		COHID	

PAID NOTIFIC

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

Date of Notification (1)				Name	of Building (0		The state of the s	- 1	75				
3/15/2018				Mayb	prook Gar	dens I	operato nc	r (2)	247 - 114 -		APE	_	3 20	110
Agencies Notified	Type Notification	1		1	Address					1 [-1]	mi I		5 4	110
X EPA	× Initial				Riverside	Drive			ļ	L				
X DEP	Amended			City, S	tate, Zip Co	de				-				-
X DOL	Amendmen		_	New	York, NY	10024	1		9	** * * *		2.7		
ĭ DOH	Emergency justification			Name	of Contact				I Te	elephone N	lumbe	-	- 14	11 C4 F
X DCA	Cancellatio	n		Brian	Tarzik					12-873-4				
Name of Facility Where	Abatament in Taki	DI 10		FAC	CILITY INFO	RMATI	ON							-
Maybrook Garden	Apartment's rakii	ng Place (3 Luilding 6)					Type of Faci	lity (4)					
Street Address	tpartments - D	ununing o						☐ School	(K-12)					
2-16 Maybrook Driv	/e							Subcha Other (i	pter 8 (Ot .e. private	ner than K	-12)	ildina		
City (5)								Other (i etc.)	.c. private	& comme	i Ciai Di	munig	s, non	ies,
Maywood								Square Feet		of Floors		Bldg.	Age	
County (6)		-		Court	0-1-7				2			60	er see house	-c
Bergen					Code (7) USE ONLY)			Current Use Residentia	(Prior if be	ing demol	ished)			
Name of Monitoring Firm	Hired by Building	Owner (8)		1 480	M No.		N							
Crown Air Services	LLC	Owner (b)		ASC	W NO.		Name	of Abatement estways Sol	Contracto	r (9)				
Street Address						-		Address	utions					
478 Albany Street								Address Nashington	Avenue					
City, State, Zip Code			-					tate, Zip Code					_	
Brooklyn, NY 11203						1		klyn, NY 11						
Project Manager for Mon	itoring Firm		T	Telepho	one No.			one No.		License	No			
								358-2600		01340	140.			
Start Date (10) 011	09/2018			mpletion	Date (11)		Name	of OSHA Moni	tor					
		4/30/20	100				Asbe	stways Solu	utions					
Occupancy Status During								Address						
Facility Closed/Vaca Abatement Performe Other – Describe:	ted During Entire	Period of A	bater	ment			132 V	Vashington	Avenue					
Abatement Performe Other – Describe:	ed Outside of Norn	nal Facility	Hour	s				ate, Zip Code			72.00	-		
Scope of Work (Check Al	I The Access					_	Brook	klyn, NY 11	205					
	і тпат Арріу)	_												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Property .	enova	0.000			×	Full Contain	nment with	Negative	Press	ure		
<u> </u>			emoli	uon			ĥ	Mini-Enclos Glovebag F						
								Non-Exemp	oted (*) an	d Non-Fria	able Pr	ocedu	re	
			ocat							100		Abat	emen	t
Location Asbestos-Containing I			ormal Sole	lly ly by		Desc	cription	of				T	уре	
TO BE ABA	TED (ACIVI)	Mair	ntena	nce!	Asbesto	s Conta	ining M	aterial (ACM) insulation,	10.00	mount			m	
In Facilit (13)	ty	Custo	dial (12)	Staff?		surfaci	ng, VA7	, or		pecify or LF)	Rem	Repair	ncap	nck
(13)		-	,	Υ		other mi	iscellane	eous)			Remova	pair	Encapsulate	Enclosure
		Yes	No	N/A							-		ite	œ
(4) misc crawl	spaces	x				pipe i	nsulati	ion	3	80 If	x	\vdash		
									+		-		-	-
									-		-	-		
		+-+	-	-										
Name of Registered Wast	o Unida-													
Newark Carting Inc	e nauler			JDEP W auler ID		Cubic Y of Waste		Name	of Registe	red Landfi	II			
			100000000000000000000000000000000000000	506				Tully-	town RE	Facility	.3			
City, State			-		1	Disposa	l Date	City, Si	tate					-
Newark, NJ 07102							_							
Completed by Mendy Gorodetsky		Title				Sig	malure	1))		D	ate			
- Jordetsky		Presid	ent			NO	//			3.	/15/20	018		
						1	-							

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

Data of Notice 1: 14					ic to mon				and the	1					
Date of Notification (1) 3/15/2018				Name Mayb	of Buildin prook G	ng Owner ardens	Operato Inc	r (2)		1	APR	- 3	2018		
Mariana Committee Committe	e Notification	9		100000000000000000000000000000000000000	Address Riversid	le Drive					848 31	U	5010		lesant
EPA DEP DOL	Initial Amended Amendment			City, S	tate, Zip (Code			i i	Fix		*		- 6	
	Emergency		q		York, N		4				A		* * * * * * * * * * * * * * * * * * *		#0 ×
∑ DOH □	justification) Cancellation				of Contac Tarzik	at .					lephone I		r		
Name of Facility Where Abater	ment is Takin	g Place	(3)	FAC	ILITY IN	FORMAT	ION	Typ	e of Facility (4	1					
Maybrook Garden Apart	ments - Bu	uilding	7					Тур		18.5					
Street Address								H	School (K-1: Subchapter	8 (Oth	ner than K	(-12)			
18-32 Maybrook Drive								×	Other (i.e. p etc.)	rivate	& comme	rcial bu	ilding	, hon	nes,
City (5) Maywood								Squ	are Feet	# 0	f Floors		Bldg.	Age	
County (6) Bergen					Code (7)			Curi	rent Use (Prio	100	ing demo	lished)			
Name of Monitoring Firm Hired	by Building (Owner (8	3)		M No.		Name		sidential atement Con	roote.	(0)				
Crown Air Services LLC Street Address		•					Asbe	estwa	ays Solutio	ns	(9)				
478 Albany Street							Street 132 \		ess hington Av	enue					
City, State, Zip Code Brooklyn, NY 11203							City, S	tate,	Zip Code NY 11205		~				
Project Manager for Monitoring	Firm			Telepho	ne No.		Teleph			*	License	No			
Start Date (10)							718-8				01340	110.			
3/27/2018 09/01/		4/30/2	018	mpletion	Date (11))			HA Monitor Tys Solution	าร					
Occupancy Status During Abate							Street	Addre	ess						
Facility Closed/Vacated Du Abatement Performed Outs	uring Entire P	Period of	Abate	ment			Linear Control of the Control		nington Ave	enue					
Other - Describe:			, 11001						Zip Code NY 11205						
Scope of Work (Check All That	Apply)		STATE OF					,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
≥3 sf or ≥3 If ≥160 sf or ≥260 If			Renovi Demoli				×	Gl	III Containmer ni-Enclosure ovebag Proce	dure					
		Τ.						l No	n-Exempted	(*) and	Non-Fria	ble Pro			
Location of		1 1	Locat Norma	lly		Do		.,						emen pe	t
Asbestos-Containing Materia TO BE ABATED	al (ACM)		ed Sole		Asbes	stos Cont	scription aining Ma	ateria	I (ACM)	A	mount				П
In Facility		Cus	todial	Staff?	(i.e.	. thermal	systems ing, VA7	insul:	ation,		pecify or LF)	Rer	R	nca	Enc
(13)			(12)			other m	niscellane	eous)		OI.	OI LF)	Remova	Repair	Encapsulate	Enclosure
(2) misc crawl space		Yes	No	N/A					l l					ate	re
meter room	es	X					insulati			1	90 If	×			
basement		X				-	insulati			1	00 If	x			
Dasement		X		-		pipe	insulati	ion		7	5 If	x			
Name of Registered Waste Hauli	er		IN	JDEP W	aste	Cubic '	Yarde		Name of Re	valoto	ad LandE				
Newark Carting Inc			H	lauler ID 506		of Was			Tully-tow						
City, State Newark, NJ 07102						Dispos	al Date		City, State			0 52 1 1 2 2 2 2			\dashv
Completed by		Title					gnature		-		- 15	ota			
Mendy Gorodetsky		Presi	dent			1	, alula)]			24 523	ate /15/2(018		
ASB-41 (R-06-08)					(7	* Do not	1150 #	his form for as)					
						_		43C (no lottil for as	puesto	s licensul	e exen	ipted a	activit	ies.

CX 1444

PAID

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

Print Form

Data of Notice - 11							12.12	.07				an en	0 6	2040	
Date of Notification (1) 3/15/2018				Name May	of Buildin brook G	g Owner ardens	Operato	r (2)		13 14	A	31	-3-3	118	
Para and Par	ype Notification			Street	Address Riversid										. Č.
X EPA X DEP X DOL	Amended Amendment				State, Zip (York, N		4								-
ĭ DOH I DCA	 Emergency justification) Cancellation 		9	Name	of Contact						lephone		r	-	_
Name of Facility Van					CILITY IN	FORMAT	TION				2-873-	4919	-		
Name of Facility Where Aba Maybrook Garden Apa	atement is Takin artments - Bu	g Place (uilding s	(3) 5					Тур	e of Facility	*					
Street Address 34-40 Maybrook Drive									School (K- Subchapte	r 8 (Oth	er than k	(-12)	.n.ar	21.023	
City (5)								×	Other (i.e. etc.)			ercial b			nes,
Maywood				x				Squ	are Feet	2	f Floors		Bldg.	Age	
County (6) Bergen				County (STATE	Code (7)	Y)		Curr	ent Use (Pri	ior if be	ing demo	lished)			
Name of Monitoring Firm Hir Crown Air Services LL	ed by Building C	Owner (8)	ASC	M No.			of Ab	atement Co		(9)				
Street Address 478 Albany Street							Street	Addre	ess						_
City, State, Zip Code									nington A	venue					
Brooklyn, NY 11203									Zip Code NY 1120	5					
	oject Manager for Monitoring Firm						Teleph 718-8				License 01340				
Start Date (10) 3/29/2018 04 /	16/2018	Schedul 5/2/20	ed Co	mpletion	Date (11)		Name	of OS	HA Monitor		01040				
Occupancy Status During Ab							Street		ys Solutio	ons					
Facility Closed/Vacated Abatement Performed C	During Entire P	eriod of	Abate	ment			132 V	Vash	ington Av	enue					
Uther - Describe:		ar r acmty	Tioui	5	-				ip Code NY 1120:	5					
Scope of Work (Check All Th ≥3 sf or ≥3 if	at Apply)						_	,							
≥160 sf or ≥260 lf		-	enov emol				×	Min	Il Containme ni-Enclosure ovebag Proc	edure					
		Is	Loca	tion			Non-Exempted (*) and Non-Friable					able Pr	e Procedure Abatement		
Location of Asbestos-Containing Mate	erial (ACM)		lorma d Sole	lly ely by	Ashaa	Des	cription	of				-	T	уре	_
TO BE ABATED In Facility (13)	2		ntena odial (12)	ince/ Staff?	(i.e.	thermal surfac	systems ing, VAT	ning Material (ACM) stems insulation, ig, VAT, or			nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A		omern	niscellane	eous)				oval	air	sulate	sure
(5) misc crawl sp	aces	x				pipe	insulati	ion		4	75 If	×	-		
meter room		x				pipe	insulati	on			5 If	x			
				-											
Name of Registered Waste Ha	auler		IN	JDEP W	/aste	Cubic	Varde		Name of F) a minta -	1 1 16				
Newark Carting Inc			H	lauler ID 506		of Was			Name of F						
City, State Newark, NJ 07102						Dispos	al Date		City, State						
Completed by		Title				 _{~Si}	gnature	\subseteq	\rightarrow		10	ate			
lendy Gorodetsky		Presid	lent					_	/		1	/16/2	018		
										_	Start Start				_

NOTIFICAT

State of New Jersey FION OF ASBESTOS ABATEMENT	TOTAL CO.	Print Form

Date of Notification (1)					C 8:60 an		S						
3/15/2018			Mayb	of Buildin rook G	g Owner/ ardens	Operator Inc	r (2)		AP	H	3	2018	
Agencies Notified Type Notification EPA Initial	n			Address Riversid	e Drive				fil	==	2 :		
■ DEP	nt #			ate, Zip (York, N	Code Y 10024	4		fo 550				X	
▼ DOH)	g	Name o	of Contac Tarzik					ephone Nu				
					FORMATI	ION		21	2-873-49	919			
Name of Facility Where Abatement is Taki Maybrook Garden Apartments - B	ng Place	(3) 4					Type of Facility	(4)					
Street Address 2-16 Hampton Court							School (K Subchapter Other (i.e. petc.)	8 (Othe	er than K-1 commerc	l2) cial bui	ldings	, hom	es,
City (5) Maywood							Square Feet	# of	Floors		Bldg. <i>i</i>	Age	
County (6) Bergen			County (STATE	Code (7) USE ONL	Y)		Current Use (Pri Residential		ng demolis				
Name of Monitoring Firm Hired by Building Crown Air Services LLC	Owner (8)	ASC	M No.			of Abatement Constways Solution		(9)				
Street Address					10-34		Address	7115			-		_
478 Albany Street City, State, Zip Code							Nashington Av	enue/					
Brooklyn, NY 11203	30					Brook	tate, Zip Code klyn, NY 1120:	5					
Project Manager for Monitoring Firm			Telepho	ne No.		1	one No. 358-2600		License N 01340	lo.			
Start Date (10) 3/29/2018 04/14/2018	Schedul 5/2/20	ed Co 18	mpletion	Date (11))		of OSHA Monitor stways Solutio						
Occupancy Status During Abatement (Che						Street /	Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of a	Abateı y Hour	ment s				Vashington Av	enue					
Scope of Work (Check All That Apply)						Brook	klyn, NY 1120	5			S-13/2		
≥3 sf or ≥3 if ≥160 sf or ≥260 if	processor.	Renova Demoli				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				•	
		Locat					- Tron Exempted	() and	TVOIT-I HAD	1	Abate	ement	
Location of Asbestos-Containing Material (ACM)	Use	Norma d Sole	ely by	Aches	Des	cription	of aterial (ACM)		0000004	-	Ту	pe	_
TO BE ABATED In Facility (13)		intena todial (12)	Staff?	(i.e.	thermal: surfac	systems ing, VAT iscellane	insulation, , or	(Sp	ount ecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A							<u>a</u>		late	Ire
(4) misc crawl spaces	X				pipe i	insulati	ion	38	10 If	х			
Name of Registered Waste Hauler			JDEP W	aste	Cubic	/ards	Name of F	Penistor	ad Landell				
Newark Carting Inc		1	lauler ID I 506		of Wasi	0.000	Tully-tov						
City, State Newark, NJ 07102					Disposa	al Date	City, State						
Completed by Mendy Gorodetsky	Title Presi	dent			Gi	ghature	A		Da 3/	te 16/20	18		\dashv
ASB-41 (R-06-08)	-					De not	use this form for a	asbestos			-	activiti	es.