CK 847764

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

Print Form

	NOI	(Pursu	ant to N	JAC 8:60	and 12:120)	1	1	- 0	017		Ш
Date of Notification (1)		Nam	ne of Bu	JOB# 17	er/Operator ance LLC	(2)	L. Carrier and C. Car	L. AIN	1 21	JII		7
04/03/2017			et Addr		ance LLO			ASBESTOS	CON	TRO	- &	
Agendide Health		489	9 Fifth	Avenue	18th Floo	r		LICEN	ISING	ì	-	-
EPA Initial DEP Amended Amendment	# 2	City	, State, w Yorl	Zip Code k, NY 10	017							
Emergency (including		ne of Co				1	Telephone Numb	er			
DOH justification) Cancellation		1		Y INFORM	TATION							-
Name of Facility Where Abatement is Takin	g Place (3)		AOILI			Тур	e of Facility (4)					
Sears Store Unit#1434						H	School (K-12) Subchapter 8	(Other than K-12)	buildin	ne hr	nmes	
Street Address 50 Route 46						×	etc.)	ate & commercial				_
City (5)							are Feet 000	# of Floors 2	50+	g. Age I	E	
Wayne		Co	unty Co	de (7)				if being demolishe	ed)			
County (6) Passaic		(S7	TATE US	E ONLY) _		Co	mmercial					_
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM N 00120		Nam PAI	e of Al	vironmental S	actor (9) Services				
Omega Environmental Services			00120		Stree	et Add	ress					
Street Address 280 Huyler Street							ueens Plaza	South				
City, State, Zip Code South Hackensack, NJ 07606					Lor	state ng Isl	, Zip Code and City, NY	11101				
Project Manager for Monitoring Firm			elephone		Tele	phone	No. 0-0900	License No 28675).			
Veronica Kero		1000	- 100 M	9-8700	1		SHA Monitor	20070				
Start Date (10) 04/05/2017	Scheduled 12/16/20		letion D	ate (11)	Ma	rtin N	/IcRea					
Occupancy Status During Abatement (Ch	eck Only One	:)				et Ado	iress nnedy Blvd.					
Facility Closed/Vacated During Entire Abatement Performed Outside of No	e Period of Al	oateme	nt		City	, State	e, Zip Code				-8	
Other – Describe:					– Ba	yonn	ie, NJ 07002					
Scope of Work (Check All That Apply)	-					×	Full Containme	nt with Negative F	ressur	е		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renovation Demolition					H	Mini-Enclosure Glovebag Proc					
-						Non-Exempted	(*) and Non-Friat		Abate			
	Is Location Normally					709 1002					ре	
Location of Asbestos-Containing Material (ACM)	Used	Normally Used Solely by Ashesto				tion of ng Mat	erial (ACM)	Amount	77		m	
TO BE ABATED In Facility		Custodial Staff? (i.e. the				VAT,	nsulation, or	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		(12)	1		other misce	ellaneo	ous)		Va.	=	ılate	are
	Yes	No	N/A	PT T	Titling	000	iroproofing	58,000 SF	X		-	-
1st Floor	1st Floor						ireproofing	47,600 SF	X		-	+
2nd Floor					iie, riturig	SOLF	ii opi ooiii	,000	X	1	\vdash	
				-								
Name of Registered Waste Hauler			JDEP V		Cubic Yar	ds	1	Registered Landf	ill	-		
ATC			lauler ID 4310	No.	of Waste 50 Yard	S	Minerv	a Enterprises				
City, State					Disposal 1		City, Sta	te esburg, OH 44	688			
Shirley, NY 11967	Tul				04/10/20	ature	Wayne		Date	ANCER 19		
Completed by Ann A. Ali	Title Com	plian	ce Adr	min	Joign		TA	1	04/03/	/201	7	
						1	100	eshantes lisans	ira ave	mnta	d arti	ivitie

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N	O CLC	(Purs	TION (OF ASB	v Jersey ESTOS ABA 8:60 and 12 # 17-1119 Owner/Ope		7.5	The second secon	DE	CEI	V E		Control of the Contro	
Date of Notification (1)		Na S	ame of	e SRC	Finance	LLC			1 4			\dagger	-	
03/15/2017 Agencies Notified	Type Notification			1drocc	nue 18th				AS	BESTOS CO	NTRO VG	L&	- ALEGERIA	
	☐ Initial	-	ity Sta	te Zip C	ode		-00	L		LIOLIT				
× EPA DEP	X Amended Amendment #_ 1	\	New Y	ork, N	Y 10017				Telep	hone Number		The toron		
⊠ DOL	Emergency (including justification)	N	Name o	f Contac Stirrat	t						7		\dashv	
X DOH X DCA	Cancellation		COIIII	II ITY IN	IFORMATIO	N		f Facility (4)					
X DOA	At stampet is Taking Place (3)	FAU	ILIT I			_		12)					
Name of Facility Where Sears Store Unit#	Abatement is Taking Place (T S	ubchapte	r 8 (Othe	r than K-12) commercial bui	ldings, h	nomes	. \	
Street Address							e	tc.)			Bldg. Ag	ge	_	
50 Route 46							Squar	e Feet	# of 2		50+			1
City (5)							80,00	nt Use (P		ng demolished)				
Wayne		T	Count	y Code E USE O	(7) NLY)		Com	mercia						4
County (6) Passaic				55,000		Nam	e of Aba	tement C	ontractor	(9)				
- itaging E	irm Hired by Building Owner	(8)		CM No. 120		PA	L Envir	onmen	al Serv	1062				7
Omega Environn	nental Services					Stre	et Addre	eens Pl	aza So	uth				
Street Address							21.1.	Tin Code						
280 Huyler Stree						Lo	ng Isla	nd City	NY 1	License No.				\dashv
City, State, Zip Code South Hackensa	ick, No or oo		Tele	phone N	No.	Tel	ephone	No.		28675				
Project Manager for	Monitoring Firm		20	1-489-	8700		8-349-	SHA Mon	itor					-
Veronica Kero	Sch	eduled (Comple	tion Dat	e (11)	Na	artin M	IcRea						
Start Date (10) Postponed	12/	16/201	17			St	reet Add	ress						
Ctotus	During Abatement (Check On	ly One)				7	14 Ker	nedy B	lva.			10000		
Facility Closed	dNacated During Entire Peric erformed Outside of Normal F			ıt.		C	ity, State Bayonn	e, Zip Cod ie, NJ 0	7002				34.75.2.50	-
	neck All That Apply)	× Re	enovatio emolitio	on n			×	Mini-End	closure	with Negative P lure *) and Non-Friat	ole Proc	edure		
≥3 sf or ≥3 lf ≥160 sf or ≥2	260 11							Non-Ex	Simpled (1	Abater Typ		
A-hastos-Co	Location of ntaining Material (ACM) BE ABATED In Facility (13)	Use Ma	Location lormally d Solel intenar todial S (12)	y y by ice/		Conta ermal s	cription of lining Ma systems ing, VAT liscellane	insulation or	:M)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	FUCIONIC
	(13)	Yes	No	N/A	Floor Til		ings &	Firento	ofina	58,000 SF	X		_	
	1st Floor		X		Floor Til	e, FILI	lings &	Firence	ofina	47,600 SF	X			
	2nd Floor		X		Floor Til	e, Fit	lings &	. 1 110 110	EM		X			
	ZIId I loor													
Name of Regis	stered Waste Hauler			NJDEP Hauler 24310	ID No.	of W	Yards aste 'ards osal Dat	e in	Minerv	Registered Lan a Enterprises ite esburg, OH	S 			
City, State Shirley, NY		Titl	е		dmin	0312	Signatu	1 2 1			Date 03/1		17	
Completed by		Co	mplia	ance A	umm			-VU		er achastas lice	nsure 6	xemp	ted a	€ vita

MO: 24051485158		(Pur	suant t	o NJAC 8	:60 and	12:120)	MI DES	K					
Date of Notification (1) 03/31/17		100000		Building C Semand		perator	(2)	OAD PARTY OF CHIEFFEE		APR	- 7	201	7	
Agencies Notified Type Notification	1	S	treet Ad	dress				***************************************	L					
▼ EPA									AS	SBEST			OL 8	X
➤ DEP		25-22		e, Zip Coo		010		L		LIC	ENS!	VLA		
X DOL Amendmer X Emergency		S 1300		tstown,	143 07	040			Tak	phone Nu	ımhor		A	
■ DOH ■ justification ■ Cancellation)	N	ame of	Contact					1616	epriorie inc	midei			
			FACIL	ITY INFO	RMATI	ON								
Name of Facility Where Abatement is Tak Robert Semanchik	ng Place (3)						_	of Facility (
Street Address				- 200				School (K-1 Subchapter	8 (Othe					
							100	Other (i.e. p etc.)	rivate 8	commerc	cial build	lings,	nome	s,
City (5)							Squar	re Feet	# of	Floors	В	ldg. A	ge	
Hackettstown									ļ		1 1			
County (6) Warren County				ode (7) SE ONLY)			Curre	nt Use (Pri	or if bei	ng demolis	shed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.		Name	of Aba	tement Cor	ntractor	(9)				
						,	Abate	1.07.000	11-1177					
Street Address							Addres 87th	ss Street S	uite A	4				
City, State, Zip Code						111111111111111111111111111111111111111		ip Code	70.47			- 92		
								gen, NJ ()/U4/	License	No			
Project Manager for Monitoring Firm		I	elephor	ie No.		100000000000000000000000000000000000000	none N 293-6			01223	INU.			
Start Date (10)	Entire Period of Abater of Normal Facility Hour			Date (11)		100000000000000000000000000000000000000		HA Monitor		0110				
04/03/17						100000000000000000000000000000000000000	Addres	A CONSU	JLIIN	G LLC				
Occupancy Status During Abatement (Ch			ant					JTE EAS	T SUI	TE 107				
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	rmal Facility H	ours	Site					ip Code J 07083						
						UNI	ON N	3 07063						-
Scope of Work (Check All That Apply)	× Reno					Г	7	II Containm	ont with	Negative	Proces	re		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	The same of the sa						Mir	ni-Enclosur	е	rivegative	1 10330	10		
2100 07 07 2200 77	-0 "					3		ovebag Pro n-Exempte		d Non-Fri	able Pro	cedur	e	
	1						_ 140	n Exemple	4 () 4	4 11011 1 11		Abate	ement	
Landing of	catio			De	scriptio	n of					Ту	ре		
Asbestos-Containing Material (ACM)				tos Con	taining l	Materia	I (ACM)	0.5	mount			En	П	
	Location of Lised S			(i.e.		system		ation,		Specify F or L.F)	Remova	Repair	caps	Enclosure
TO BE ABATED Custoo						miscella		Č			oval	air	Encapsulate	sure
In Facility Cus			N/A										е	
Attic Yes						Other			7	00 SF	Х			
										4				
Name of Registered Waste Hauler		2000	JDEP W		Cubic of Wa	Yards		and the second second		ered Land				
NEWARK CARTING		0.000	auler ID I509	INU.						NAGEM	ENT C	SRO\	VS N	1.
City, State HILLSIDE, NJ					Dispo	sal Dat	е	City, Sta		LE PA				
Completed by	Title					Signatu	DI	mach	MA	4	Date	47		
Bryan Parra	Projec	t Ma	nager				DI	LIPU	1100		03/31/	17		

Chef# 1263

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-17	April 3, 2017 Amended Notification Amended Notification # Emergency (including justification) Cancelled FACILITY April 3 According to the province of Facility Where Abatement is Taking Place (3) BHS POWER PLANT, BLDG# 7261 Beet Address BHS NEWARK CAMPUS Y. (5) EWARK County (6) ESSEX County Code (7) (State Use Only) Meet Address TERRI LANE Y. State, Zip Code JRLINGTON, NJ 08016 JOSEPHONE Monitoring Firm RIAN KEARNY Abatement Performed Nonitoring Entire Period of Abatement Abatement Performed Outside of Normal Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours-scribe Other – Describe: Indeed Start Date (10) Apple of Work (Check all that apply) Apple of Work (Check all that apply)				1	尼 /	P Id	R W	/ L	- 7		
	, 2017					of Building Owner/Ope		F (U L	UI	!=	
Agencies Notified EPA DCA DOL		☑Initial ☐ Amen	Notifica ded Not gency (tification # (including	27 R	Address RONMENTAL HE OAD 1, BLDG 408 tate, Zip Code	6, ĽIVII	IGST	ON C	AMPU	S	
DEP- No Longer REQUI	RED				Name	ATAWAY, NJ 088				CONT		ά
LEI DON					HEA	IAEL SMITH, ENV LTH & SAFETY	<u>.</u>					
Name of Eacility Where Abate	mont in Tol	ring Place (2)		FACILITY IN				es segue				
					☐ Sch	f Facility (4) ool (K-12)	٥,					
Street Address RBHS NEWARK CAM	PUS				X Oth	chapter 8 (other than K-1 ner (i.e. private & comme eet: N/A # of F	A 10.00				oarc	
City (5)	County (6)	I Count	v Code (7)	99.10	# OI 1	10013. 2	Diag	. Age.	00 · y	cars	
NEWARK					Curren	t Use (prior if being der	molished):	ACA	DEMIC			
Name of Monitoring Firm Hired	by Bldg. C	Owner (8)				f Contractor (9)			-2			
						NWOOD ABATEM	ENT CO	NSU	LTANT	rs, inc	<i>.</i>	
3 TERRI LANE						Address						
City, State, Zip Code						ate, ZipCode						
	JRLINGTON, NJ				BUTL	ER, NJ 07405						
Project Manager for Monitoring BRIAN KEARNY	IRLINGTON, NJ 08016 LIAN KEARNY eduled Start Date (10) 2/2017 Scheduled Start Date (10) 2/2017 Supancy Status During Abatement (Check of Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Facilities Other – Describe:					92-0477		License 00840	e Numbe	<u>er</u>		
Scheduled Start Date (10)	neduled Start Date (10) 12/2017 Scheduled 04/15/20 04/15/20 cupancy Status During Abatement (Check only			on Date (11)		f OSHA Monitor		0004				
4/12/2017	12/2017 04/15/2017 coupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement				11	ROVISION, INC.						
Occupancy Status During Ab	ccupancy Status During Abatement (Check only on Facility Closed/Vacated During Entire Period of Ab Abatement Performed Outside of Normal Facility H				Street A							
	Abatement Performed Outside of Normal Facility Hours			nt	00.04							
Facility Closed/Vacated During Entire Period of Abate Abatement Performed Outside of Normal Facility Houlescribe			Hours -			WARGARAW ROA ate, Zip Code	4D	-				
	HOURS	& WEEKE	NDS AS	S NEEDED)	EAIDI	AWN, NJ						1
20					LAIK	WAALA' LAD						
				10 10			Containme		n Negat	ive Pres	sure	
							Enclosure bag Proce		Wrap 8	k Cut		
						■ Non-	1. T				rocedu	ire
Location of Asbestos-Containin	0			Description of Ast			Amount		Abatem	ent Type	2	
Material (ACM) in Facility (13) Solely by Maint./C Staff? (12)			VAT, or other mis		s insulation, surfacing,	(Specify or LF)	51	Remove	Repair	Encap I	Enclose	
YES NO N			TSI			<9LF	+	X	Т			
	F-1 🗵									1		
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Was See Below		ID#	Cubic Y	ards of Waste: 5 C				tered Lai North I		ill
Hauler #1) Greenwood Abaten	ent Consu	ıltants, Inc. –	Butler, N	NJ 07405		Disposal Date				City, Stat		
NJDEP # 12561 Hauler #2) Newark Carting, In NJ DEP # 4509	c., Newarl	k, NJ 04509				04/15/2017			F	100 New Rd. Mori 19067 215-736-	risville,	S10000 II
Completed by (Print or Type)			Title			Signature		Date	e			
RAYMOND C. PEDALII	NO		SENI	OR PROJECT AGER		Raymond C. P.	Pedalino			1 3, 20°	17	
								1				

		ı	ITON		TION	OF ASE	BESTOS ABAT C 8:60 and 5:16		TOPE # APR	319	7 0	17	
Date of Notification (1) 3 /	20 /	17				of Building izon	g Owner/Operator (2	2)	B. Service				
Agencies Notified EPA DOLWD DHSS DCA	Type Notifi Initial Amende Amendr Emerge justifica	ed ment # <u>1</u> ency (inc		_	15 E City, S Pitts	tate, Zip C	PA 15212	Lower Level	ASBESTO LIC	ENS			. α
(NJAC 5:23-8)	Cancell				10.0000.1000.0	k Baylor	•		1 10.0	_			
					FAC	CILITY IN	IFORMATION						
Name of Facility Where A Verizon Dunellen C Street Address 200 S Madison Ave	0	Taking	Place	(3)) 3 (Other than K-12) rivate and commerc		ilding	s,	
City (5)	•							Square Feet	# of Floors	Blo	dg. Ag	je	
Dunellen County (6) Middlesex)(STATE USE ONLY)	Office	or if being demolish	hed)			
Name of Monitoring Firm USA Environmenta			wner (8)	ASCM	No.		ent Contractor (9) VIRONMENTA					
Street Address 8436 Enterprise Av	e.						Street Address 1123 BEAVEI		3 400 40				
City, State, Zip Code Philadelphia, PA 19							City, State, Zip Co BRISTOL, PA						
Project Manager for Mon Mark Jenkins	itoring Firm			2.11.79.004.28.33	5-365		Telephone No. 215-788-6040	í	License No. 00509				
Start Date (10)		Sched	uled Co				Name of OSHA M		00303				
4/_3_/	17	4	/	7	_ / _	17	BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During Abatement (Check only ☐ Facility Closed/Vacated During Entire Period of ☐ Abatement Performed Outside of Normal Facility Time of Abatement:AMPM/5:00 Scope of Work (Check all that apply) ☐ ≥3 sf or ≥3 lf				Abater Hour	s - Des	cribe	Street Address 1123 BEAVEI City, State, Zip Co BRISTOL, PA	ode					
Abatement Performed Outside of Normal Facility Time of Abatement:AMPM/ <u>5:0</u> Scope of Work (Check all that apply) □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf				novati molitic			☐ Mini-Enc ☐ Gloveba	g Procedure	gative Pressure	re			
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf □ D 				Locat	37.00					Ab	atem	ent Ty	уре
Location of Asbestos-Containing Material (ACM) TO BE ABATED Ma				d Sole intena odial (12)	ly by nce/		Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
TO BE ABATED IN Facility (13)			\boxtimes		Floor ti	le and mastic		210 SF					
Small Foyer				\boxtimes		Floor ti	le and mastic		20 SF				
Basement Ventilating	g Equip Ro	oom		\boxtimes		Duct In	sulation		2 SF				
	Unit 1	2-1											
Name of Registered Was SERVICE TRANSPO		JP, INC	ì.		JDEP V auler II 20990	O No.	Cubic Yards of Waste	Name of Regis					
City, State NEW CASTLE, DE	19720						Disposal Date	City, State WAYNESE	BURG, OH 44688	3			
Completed By (Print or T		Title					Signature		, Da		/		

MAY 11 PD 17036

Patrick T. DeCaro

Estimator

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

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Chic # 3	11/	19	0017	Ш

Date of Notification (1)			T	Name	of Building	Owner/Operator (2	2)	THE A	PR -	7 2	017	i
Date of Notification (1)	20 / 17			Veri				lied to-				-
				Street	Address			ASBES	TOS	MO	TRE	11 8
Agencies Notified	Type Notification ⊠ Initial					tgomery Place,	Lower Level		LICEN			, _ 0
⊠ EPA ⊠ DOLWD	Amended		-		tate, Zip C			1-manufactured and				
☑ DOEWD	Amendment #_				(H) : 10~11 (1 시설년) - (H)	PA 15212						
□ DCA	☐ Emergency (inc	cluding	1		of Contact			Telephone Num	ber			
(NJAC 5:23-8)	justification) Cancellation		1		Baylor							
	☐ Caricellation					FORMATION		. 				
		D/	(2)	FAC	ALII I IN	FORWATION	Type of Facility (4	1)				
Name of Facility Where		Place	(3)				School (K-12)					
Verizon Dunellen (00						☐ Subchanter 8	(Other than K-1)	2)	Idina	•	
Street Address							Other (i.e., pri	vate and comme	ercial bu	namg	5,	
200 S Madison Ave	э.						Square Feet	# of Floors	Blo	lg. Ag	e	-
City (5)			20				oquate i cot					
Dunellen				1.0	. 0 1 /7	VOTATE LICE ONLY	Current Use (Price	r if being demol	ished)			
County (6)				Coun	ty Code (/)(STATE USE ONLY)	Office	in it boing control				
Middlesex						Name of Abateme			-			
Name of Monitoring Firm	n Hired by Building C	wner (8) /	ASCM I	No.		VIRONMENTAL	INC				
USA Environmenta	al Management						VIKONWIEWIAL	, 1110.				
Street Address						Street Address	CTREET					
8436 Enterprise Av	ve.					1123 BEAVE						
City, State, Zip Code						City, State, Zip C						
Philadelphia, PA 1	9153					BRISTOL, PA	19007	License No.				
Project Manager for Mor	nitoring Firm			phone I		Telephone No.		00509				
Mark Jenkins				5-365		215-788-6040		00509				
Start Date (10)				tion Dat		Name of OSHA N		INIC				
4 / 3 /	17	1/	7	_ / -		BRISTOL EN	VIRONMENTAL	, INC.				
Occupancy Status Durin		only o	ne)			Street Address						
□ Escility Closed Vacat	ted During Entire Per	riod of	Abater	nent		1123 BEAVE						
M Abetoment Performe	d Outside of Normal	Facility	/ Hour	s - Des	cribe	City, State, Zip C						
Time of Abatement:	AMP	// <u>5:00</u>	PM- <u>1:</u>	30AIVI		BRISTOL, PA	19007					
Scope of Work (Check a	ill that apply)					⊠ Full Con	tainment with Neg	ative Pressure				
		⊠ Re	noveti	on		☐ Mini-End	closure	alive r lessure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			molitic			☐ Gloveba	a Procedure	Fishe Deed				
△ ≥ 100 St 01 ≥200 II		1000				☐ Non-Exe	mpted (*) and Nor	-Friable Proced				no
	**************************************		Locat			D				ateme	1000	The sales
Location			d Sole		Ashe	Description of stos Containing Ma		Amount	Remova	Repair	Encapsulate	Enclosure
Asbestos-Containing TO BE AB	Material (ACIVI)		intena		(i.e	., thermal systems	insulation,	(Specify	VOO	ar.	aps	OSU
IN Faci		Cus	todial (12)	Staff?		surfacing, VAT other miscellane	, or	SF or LF)	<u>a</u>		ulat	Ге
(13)		Yes	No	N/A	1	Other miscenario	,003)				Ф	
			×		Elearti	le and mastic		210 SF	\boxtimes			
Large Lobby	arge Lobby								\boxtimes	П	П	
Small Foyer	arge Lobby					le and mastic		20 SF] [1
										Ш	Ш	
		П		П								
	4-11-1			JDEP \	Naste	Cubic Yards of	Name of Regist	ered Landfill				
Name of Registered Wa	ste Hauler	_	11	auler II		Waste	MINERVA L					
SERVICE TRANSP	OKT GROUP, IN	J.		20990)	Disposal Data	City, State					
City, State	2000-00-00-00-00-00-00-00-00-00-00-00-00					Disposal Date		URG, OH 446	88			
NEW CASTLE, DE	19720						WATNESD					
Completed By (Print or	Type) Title	9				Signature	^ ^		3/21	1,-	2	
n-Adal T DaCaro		stima	tor			PATAK	KT NOCAN	o ILIK	2/21	11	/	

		N			ON O	F ASBI	v Jersey ESTOS ABATI : 8:60 and 5:16		DEGE		<u> </u>	E	
Date of Notification (1)				Na	ame of	Building (Owner/Operator (2	()	APP-	7	2017		吧
04 /	03 /	17	—				bury Board of E		31	60	1		
Agencies Notified	Type Notific	ation		1,52743	reet Ad			- unique	ASBESTOS	CO	NTR	OL 8	&
⊠ EPA				- 1			ad Street		LICE	NSIN	dG_		-
□ DOLWD	Amende			C	ity, Stat	e, Zip Co	ode						
⊠ DOH	Amendn		ıdina		Wood	bury, N	J 08096						_
☐ DCA (NJAC 5:23-8)	justificat		ding	N	ame of	Contact		1	Telephone Number	-0			
(110/10 0:20 0)	☐ Cancella	ation			C Alte	er							
					FACIL	LITY INF	ORMATION						_
Name of Facility Where	Abatement is	Taking F	Place (3)				Type of Facility (4	1)				
Woodbury High Sc								School (K-12)	(Other than K-12)				
Street Address								Other (i.e., pri	vate and commercia	build	dings,		
25 North Broad Str	eet							homes, etc.)					_
City (5)								Square Feet	# of Floors		. Age		
Woodbury								100,000	2	80)		
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Name of Monitoring Firm	Glouchester ame of Monitoring Firm Hired by Building Owner Horizon Environmental reet Address P O Box 316 ty, State, Zip Code				SCM N	٥.		ent Contractor (9)					
Horizon Environm	ame of Monitoring Firm Hired by Building Owner Horizon Environmental treet Address P O Box 316 ity, State, Zip Code							ntracting, Inc.					
Street Address	Horizon Environmental reet Address P O Box 316 ty, State, Zip Code Thorofare, NJ 08086						Street Address						
P O Box 316	rreet Address P O Box 316 ity, State, Zip Code Thorofare, NJ 08086						1889 Route 9		and the second second				
City, State, Zip Code	P O Box 316 City, State, Zip Code Thorofare, NJ 08086						City, State, Zip C						
Thorofare, NJ 080	City, State, Zip Code Thorofare, NJ 08086						1 200	New Jersey 08					-
Project Manager for Mo	City, State, Zip Code Thorofare, NJ 08086 Project Manager for Monitoring Firm				hone N	0.	Telephone No.		License No.				
Steve Flannagan				856	-848-0	0800	732-349-9932		00624				_
Start Date (10)		Schedu					Name of OSHA						
04 / 11		_ 0-	4_ /	_17	_ / _	17	E.M.S.L. Ana	alytical					
Occupancy Status Durin	ng Abatemen	t (Check	only o	ne)			Street Address						
	ted During E	ntire Per	iod of A	Abatem	ent		1056 Stelton						
 ☐ Facility Closed/Vacated During Entire Period of A ☐ Abatement Performed Outside of Normal Facility Time of Abatement:AMPM/ 			Hours _PM	- Desc A	ribe .M	City, State, Zip C Piscataway,	New Jersey 08	854					
Scope of Work (Check	all that apply)						□ FCo.	ntainment with Neg	native Pressure				
N . 0 - f > 2 If			⊠ Re	novatio	n		☐ Mini-En	closure	gative i resoure				
≥3 sf or ≥3 lf >160 sf or >260 lf			Barrent	molition			Gloveb	ag Procedure	n-Friable Procedure	8			
							☐ Non-Ex	empted (") and No	m-Friable Frocedure		ateme	ent T	vne
				Location Normal			Description	of				-	
Location Asbestos-Containing		CM)	Use	d Sole	ly by	Asbe	estos Containing M	laterial (ACM)	Amount	Rem	Repair	nca	nclo
TO BE A	BATED	OIVI)		intenar todial S		(i.e	e., thermal systems	s insulation,	(Specify SF or LF)	Removal	air	Encapsulate	Enclosure
IN Fac	cility		Cus	(12)	nan!		surfacing, VA other miscellar	neous)	Gi Gi Li)	_		llate	G)
(13	1		Yes	No	N/A								
crawlspace				\boxtimes		asbest	tos pipe insulat	ion-wrap & cut	60 If	\boxtimes			

 \boxtimes crawlspace Name of Registered Landfill Cubic Yards of NJDEP Waste Name of Registered Waste Hauler Hauler ID No. Waste T.R.R.F. Guardian Contracting, Inc. 20223 3 City, State Disposal Date City, State Tullytown, Pennsylvania 4/18 Toms River, New Jersey Date Signature Completed By (Print or Type) Title Project Manager Nicholas Fernicola

Date of Notification (1)						JAC 8:60 and 5:	· (1	UL# 3	191			
	3 /	47				ling Owner/Operato	r (2)		APA	- 7	20	17
		17			lownship	of Woodbridge						
	pe Notificati	on		St	reet Addres	S		1 L	OTO	2.00	-	
	Initial Amended				1 Main Str	eet		ASBE	Liga			HUL
⊠ DHSS	Amendmen	t #		Cit	y, State, Zij	Code		Long-to-	LIUS	-18.3	140	
	Emergency		ina	1	Noodbrid	ge, NJ 07095						
(NJAC 5:23-8)	justification)	9	Na	me of Cont	act		Telephone No	ımhor			
	Cancellation	1		(Construct	ion office		relephone W	unber			
Nome of Early 140				F	ACILITY	INFORMATION		<u> </u>				
Name of Facility Where Abat Vacant Residential	ement is Tak	ing Pla	ce (3)			Type of Facility	(4)				
							School (K-12	2)				
Street Address							Subchapter	8 (Other than K-	12)			
9 Federal Street			(CIS)=				homes, etc.)	rivate and comn	nerciai	build	ngs,	
City (5)							Square Feet	# of Floors		Bldg.	Age	
Metuchen County (6)												
Woodbridge				Co	ounty Code	(7)(STATE USE ONLY)	Current Use (Pr	for if being demo	lished)		
The state of the s							School					
Name of Monitoring Firm Hire	d by Building) Owner	(8)	ASC	M No.		ent Contractor (9)					
Environmental Connec Street Address	tion, Inc.					BRISTOL EN	VIRONMENTA	L, INC.				
						Street Address		-				
120 North Warren Stree	et					1123 BEAVE	RSTREET					
City, State, Zip Code						City, State, Zip C	ode					
Trenton, NJ 08608						BRISTOL, P	4 19007					
Project Manager for Monitoring	g Firm		Te	elephon	e No.	Telephone No.		License No.				
Dominick Dercole					2-4200	215-788-6040)	00509				
Start Date (10)	Sche				Date (11)	Name of OSHA N	Monitor				_	
//					17	BRISTOL EN	VIRONMENTAL	, INC.				
Occupancy Status During Aba	tement (Che	ck only	one)			Street Address				_		
Facility Closed/Vacated Du	ring Entire P	eriod of	Aba	tement		1123 BEAVE	RSTREET					
Abatement Performed Outs	ide of Norma	al Facilit	у Но	urs - De	escribe	City, State, Zip Co	Marie 2-19 of the court		-	_		
Time of Abatement: 8AMA			NI	AI	M	BRISTOL, PA						
Scope of Work (Check all that	apply)											
≥3 sf or ≥3 if		□ Re	nove	tion		☐ Full Cont	ainment with Nega	ative Pressure				
≥160 sf or ≥260 lf		⊠ De					losure					
						⊠ Non-Exe	mpted (*) and Non	-Friable Procedu	ıre			
1 1		2000		ation					7	natem	ent T	Type
Location of Asbestos-Containing Materi	al (ACM)		Norm	lely by		Description o	f		1	T	T	
TO BE ABATED	ai (ACIVI)	Ma	inten	ance/	Asbe	stos Containing Ma ., thermal systems i	terial (ACM)	Amount	Remova	Repair	inca	Enclosure
IN Facility		Cus		Staff?	(1.0	surfacing, VAT.	or	(Specify SF or LF)	SVO	ar.	sqe	JSO
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hroughout residence		Yes	No	3 1000000		1					Ф	
hroughout residence					VAT			TBD				
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(001					Roofing			TBD				
(8)										П	П	
ame of Registered Waste Hau				NJDEP		Cubic Yards of	Name of Registe	red Landfill				
SERVICE TRANSPORT G	ROUP		1	dauler I 2099		Waste TBD	MINERVA LA					
ity, State			-	_000		Disposal Date	City, State					
NEW CASTLE, DE						4/5/2017	WAYNESEU	RG. OH				
ompleted By (Print or Type)	Title	0				Signature			to			
Gino Pizzigoni	Es	stimate	or				In man:	/ Ox. Da		? - /	7	

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					Current Us Water	e (Prior if t Treat	ment F	ished) Plant				
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	V 10 10	54 TS			□ Non-E	xempted (*	*) and Non-	rnabie r	Toccur	Abate		
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io io		Hauler ID 4509	No.	of Waste				ndfil	1			
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City, State Newark, NJ Completed by Title						- A	-	10	ate			
t nontification of the contract of the contrac	5-25 Int (Check Only One) Ing Entire Period of Able of Normal Facility HOAM-4:00PM Diply) All (ACM)	btial beneded benededbeneded benededbeneded benededbenededbenededbenededbenedben	Street Addres 78 Ba City, State, New Energency (including stification) encellation FACILITY Street Addres 78 Ba City, State, New Energency (including stification) encellation FACILITY STAking Place (3) ent Scheduled Completion Dat 5-25-17 Int (Check Only One) Ing Entire Period of Abatement e of Normal Facility Hours OAM-4:00PM Poply) Renovation Demolition Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Filter X NJDEP W Hauler ID NJDEP W Hauler ID	City of New Street Address 78 Bayard ST City, State, Zip Code New Brunswich Name of Contact Daniel Torr: FACILITY INFORM STAking Place (3) Int County Code (7) (STATE USE ONLY) Building Owner (8) ASCM No. County Code (7) (STATE USE ONLY) Scheduled Completion Date (11) 5-25-17 Int (Check Only One) Ing Entire Period of Abatement e of Normal Facility Hours OAM-4:00PM Poply) Renovation Demolition Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Filter x pipe: NJDEP Waste Hauler ID No.	Street Address 78 Bayard STreet City, State, Zip Code New Brunswick, NJ Name of Contact Daniel Torrisi FACILITY INFORMATION Straking Place (3) Int County Code (7) (STATE USE ONLY)	78 Bayard STreet tital tital tital tended mendment # City, State, Zip Code New Brunswick, NJ 08903 Name of Contact Daniel Torrisi FACILITY INFORMATION STAKing Place (3) Int County Code (7) (STATE USE ONL) Building Owner (8) ASCM No. Name of Abatement Plymouth Street Address 923 Haws City, State, Zip Co Water County Code (7) (STATE USE ONL) Building Owner (8) ASCM No. Name of Abatement Plymouth Street Address 923 Haws City, State, Zip Co Norristow Telephone No. 609-571-7522 Scheduled Completion Date (11) 5-25-17 Int (Check Only One) Ing Entire Period of Abatement of Normal Facility Hours OAM-4:00PM Street Address 923 Haws City, State, Zip Co Norristow Street Address 923 Haws City, State, Zip Co Norristow Street Address 923 Haws City, State, Zip Co Norristow Street Address 923 Haws City, State, Zip Co Norristow Street Address 923 Haws City, State, Zip Co Norristow Asbestos Containing Material (Af (i.e. thermal systems insulation, sur VAT, or other miscellaneous) The property of Waster Hauler ID No. 4509 The property of Waster Hauler ID No. 4509 Disposal Date	Street Address Building Owner (8) Street Address ASCM No. Street Address Plymouth Enviro Stre	Street Address 78 Bayard STreet City, State, Zip Code New Brunswick, NJ 08903 Name of Conact Daniel Torrisi FACILITY INFORMATION 8 Taking Place (3) Int County Code (7) Int Code (Street Address Street Address Street Address Street Address Street Address Taking Place (3) Int County Code (7) (County Code (7) (Coun	Street Address Building Owner (8) County Code (7) STATE (SE ONL)	Street Address Gounty Code (7) (STATE USE OV.) Building Owner (8) County Code (7) (STATE USE OV.) Building Owner (8) County Code (7) (STATE USE OV.) Building Owner (8) County Code (7) (STATE USE OV.) ASCM No. Name of Contact Tractor (9) Plymouth Environmental Co., Inc. Street Address 923 Haws Avenue City. State, Zip Code Now Assense Company City. State, Zip Code Norristown, PA 19401 Telephone No. 609-571-7522 Scheduled Completion Date (11) 5-25-17 Int (Check Only One) Renovation Demolition Renovation Demolition Building Owner (8) Scheduled Completion Date (11) School Completion Date (11) Scho	diffication Street Address 78 Bayard STreet City, Suster, Zip Code New Brunswick, NJ 08903 Name of Connect Daniel Torrisi FACILITY INFORMATION STaking Place (3) Int Staking Place (3) Int County Code (7) STATE USE ONLY) ASCM No. Name of Abatement Contractor (9) Plymouth Environmental Co., Inc. Street Address 923 Haws Avenue City, Suster, Zip Code NorristStown, PA 19401 Telephone No. 609-571-7522 Scheduled Completion Date (11) 5-25-17 Int (Check Only One) Benefition Scheduled Completion Date (11) Scheduled Completion Pate (11) Scheduled Completi

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X DOH	justification)		251223653.1		Torris	si							
R DCA	☐ Cancellation				Y INFORMA								
Name of Facility Where	Abetament is Taking	Place (3)		ACILIT	1 1111 0111111		Type of Faci	ility (4)					
Name of Facility Where	Abatement is raking	1 1000 (0)					☐ School	(K-12)					1
D & R Canal P	ump Station						X Subcha	apter 8 (Other than K-12)	h ilding	a ho	mae	
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New Brunswick							Current Lise	Prior if	being demolishe	d)	-		
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Name of Monitoring Fir	m Hired by Building (Owner (8)		ASCM N	lo.	Name	e or Apaternen	n 00000	nmental Co)Tn	C-		
ATC Associate	es							IVITO	nmental Co	, • TII	•		
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City State, Zip Code						City.	State, Zip Coo	de	10/01				
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Project Manager for M			Te	lephone	No		phone No.	227274	License No				
John Lutz	outround that		6	09-57	71-7522		0-239-99		0039	5			_
		Scheduled 0	Comp	letion D	ate (11)	Nam	ne of OSHA Mi	onitor		O T	20		
Start Date (10) 4-17-17		5-25-			60	Pl	Lymouth I	nvir	onmental C	O., II	10.		
	ing Apatamant (Cha						et Address						
Occupancy Status Dur			12-	at		92	23 Haws A	Avenu	e				
□ Facility Closed/V	acated During Entire	Period of Aba	iteme ours	111		City	State, Zip Co	ode					
Abatement Perfo	rmed Outside of North	OPM				No	orristow	n, PA	19401				
Scope of Work (Check	k Ali That Apply)	p					X Full Cor	ntainme	nt with Negative f	Pressure	9		
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1,000,000,000		No	rmail	у		Descrip	tion of		N. A. Carlotte				
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Date of Notification (1)			I N	ame of B	uilding Own	ner/Opera	ator (2)			APA	1-7	201	7	T	
4-3-17			"	City	of New	Bru	nswick	ς	1						
Agencies Notified	Type Notification			treet Addi				Line	A	SBESTO	SCO	NTF	ROL	8	
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Name of Facility Where A	batement is Taking Pl	ace (3)		PACIE	11 1.11 01.			pe of Facility (4)						
Water Treatme	ent Plant	**********						School (K-12	3						
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Street Address 1 Conntock St	-root							Other (i.e. pr	ivate & co	ommercial b	uildings	, hom	es, etc	.)	
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Name of Monitoring Firm	Hired by Building O	wner (8)		ASCM	No.		Name of A	Abatement Contro	actor (9)	ntal ('o T	nc			
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Project Manager for Mon	itoring Firm			Telephone	No.		Telephone			License No					
John Lutz				609-5	71-752	22	610-2	239-9920		00398	3				
Start Date (10)		Scheduled C					Name of (OSHA Monitor			01 AV	70			
4-17-17		5-25-			001140 E110		Plvmo	outh Envi	ronme	ental (lo., I	nc.			
Occupancy Status During	Abstament (Check C	-					Street Ad			200					
							923 1	Haws Aver	iue						
☐ Facility Closed/Vac	ated During Entire Pe ed Outside of Normal	riod of Abater	nent			-		e, Zip Code	J. C. C. C. C.	-					
☐ Abatement Perform ☑ Other – Describe:	7:00AM-4:00	PM	,				Norr	istown, I	PA 19	401				1	
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James Kell	У						Ann	V J 1 - G	1						
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		NOT	TFICATION (Pursua	ON OF ASI	BESTO	SABATE	EMENT) [CE		\mathbb{V}	
Date of Notification (1) 04/01/2017			Name	of Building	g Owner	/Operato	r (2)	100		PR -	- 7	201	7
Agencies Notified Type Notification X EPA X Initial	on		Street 1 Ca	t Address astle Poin	nt on H		97	100			2233	V 200-2000	
X EPA X DEP X DOL X DOL X Emergence	y (includi	ng	Hobo	State, Zip C oken, NJ	07030)		- Constitution of the Cons	ASBE	STOS LICE			JL (
DOH justificatio	on		David	of Contact d Fernan CILITY INF	dez			Te	elephone	· I · mhe	r		
Name of Facility Where Abatement is Tak Stevens Institute of Technology	ing Place	(3)	TA	CILIT INF	ORIVIA	ION	Type of Facility School (K-		-				
Street Address 807 Castle Terrace							Subchapte Other (i.e.	er 8 (Oth	her than & comm	K-12) ercial b	uildin	gs, ho	mes
City (5) Hoboken, NJ 07030 County (6)							Square Feet N/A	# c	of Ficors A		Bldg N/A	. Age	
Hudson			County (STATE	Code (7) USE ONLY)		Current Use (Pr School	ior if be	ing cem	olished)			
Name of Monitoring Firm Hired by Building TTI Environmental, Inc. Street Address	Owner (8)	000	M No. 3		D&S	of Abatement Co Abatement, Ir	ntracto	r (9)				
1253 North Church Street City, State, Zip Code						11 R	Address osengren Ave	nue					
Moorestown, NJ 08057 Project Manager for Monitoring Firm			Telepho	ana Ne		Totov	tate, Zip Code va, NJ 07512						
Jeff Seaman Start Date (10)	Schedu	lled Co.	856-8	40-8800 Date (11)		973-3	one No. 345-8685		Licens 01311	Service Company			
04/05/2017 Occupancy Status During Abatement (Che	04/06	/2017	inpietion	Date (11)		D&S	of OSHA Monitor Abatement, In	IC					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	Pariod of	Abatar	nent			11 Rd	Address osengren Aver	nue					
Other – Describe: Occupied Scope of Work (Check All That Apply)	nui i doiii	ty moun			_		ate, Zip Code va, NJ 07512						
≥3 sf or ≥3 If ≥160 sf or ≥260 If	(Constant of the Constant of	Renova Demolit				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				ıre	
Location of		s Locati Normal ed Sole	ly		Des	cription o	of					temen ype	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	aintenar stodial S (12)	nce/	(i.e. t	hermal s surfac	aining Ma systems ing, VAT iscellane		(S	mount pecify or LIF)	Remova	Repair	Encapsulate	Enclosure
Basement	Yes	No X	N/A		D	laster		200	0.05			ate	re
		^				iastei		20) SF	х			
me of Registered Waste Hauler		l N.	JDEP Wa	aste	Cubic Y	ards	Name of R	legistor	ad Land				
S Abatement, Inc		Ha	auler ID 1 996	No.	of Wast TBD		Waste M						
y, State towa, NJ					Disposa TBD	I Date	City, State Tullytown						
mpleted by d Joksimovic	Title Proje	ct Mar	nager		Sig	nature	TW			ate 4/01/2	2017		

(n 4d)	4	,	uisuaiit	TO NUME O.	00 and 12.120	,	11))	150		1./	
Date of Notification (1)	04/04/17			of Building	g Owner/Ope C	rator (2)	APE	- 7	201	17
	Notification Typ			Address Cedar E	Bridge Aver	nue - S	Suite 1				
) Initial Notifi X) Amended	cation		State, Zip C				ASBEST			10L
(X) DOL	Amendmen		Lake	wood, N	J 08071		<u> </u>	<u> </u>	DENS	NG	
(X) DOH () Emergency justification		7.70	of Contact	t			- 1	, 3,,		
(723.1) Cancellatio		Kevir	n Seise							
Name of Facility VAllage	Abatamant in	Taldes Diese		ITY INFOR	RMATION	_	F = - 111 / / /				
Name of Facility Where Browntown Shopping Co		Taking Place	(3)			10000	of Facility (4)				
	MAN (1900-200-19)						hool (K-12) bchapter 8 (other	than K-1	2)		
Street Address 2695 County Road 516	(Main Office) -	> Store 266	5			(X)C	other (i.e. private omes, etc.			ilding	gs,
City (5) Old Bridge Township						Squar	e Feet # of	Floors	Bldg	. Age)
County (6) Middlesex County			County USE C	y Code (7) ONLY)	(STATE	Currer	nt Use (Prior if be	ing demol	ished)		
Name of Monitoring Firm	n Hired by Bld	g. Owner	ASCM	No.	Name of C	ontract	or (9)				
(8) EMWA					CID CONS	TRUCT	TION SERVICES	, LLC			
Street Address					Street Add	ress		-			
100 Misty Lane			10.00		365 River [Orive					
City, State, Zip Code Parsippany, NJ 07054					City State,	Zip Coo	de				
Parsipparty, No 07054					Garfield, N.	J 07026	3				
Project Manager for Mor		Telephone	Number	ſ	Telephone	Numbe	er	License		er	
Kevin Seise	<u> </u>		1) 923-71		(973)685-9			01191	А		
Scheduled Start Date (1	0)	Scheduled (11)	Comple	tion Date	Name of O		onitor				
04/05/2017		0:	5/05/201	7	Testor Tecl			- le			
Occupancy Status Durin	g Abatement (Check only	one)		Street Addr						
(X) Facility Closed/Vaca	ted During Ent	rire Period of	Abateme	ent	10-59 Jack City, State,	SOURCE STATES	(25) (10) (10) (10) (10) (10) (10) (10) (10				
() Abatement Performe () Other – Describe:				Citt	Long Island	23					
Source of Work (Check a	all that apply)				/ \ F.·!!	Cantai	amont with None	ti sa Danaa			
() \geq 3 sf or \geq 3 lf (X) \geq 160 sf or \geq 260 lf		(X) Renova			() Mini	-Enclos	nment with Nega sure Procedure	live Press	ure		
		3.6					pted (*) and Non-	Friable Pr	ocedu	re	
Location of	Is	Location No	ormally					Ab	ateme	nt Ty	ре
Asbestos-Containing N		Used Solel	y by		ription of Asb		Amount	_		四四	П
(ACM) TO BE ABATED		Maintenan ustodial Stat			ng Material (A I systems ins		(Specify	Rem	Repair	cap	nclo
in Facility			1	surfac	cing, VAT, or	other	SF or LF)	Removal	air	Encapsulate	Enclosure
(13)	Y	es No	N/A	П	niscellaneous	5)		_		te	(D
Rear-Room #2			x	VAT & M	astic		200 SF	×			
								-			
Name of Reg. Waste Ha Cid Construction Service		NJDEP Was # 32905	te Hauler	ID Cub	ic Yards of W)	/aste	Name of Reg. Landf 110 Sand Landf				
City, State Garfield, NJ				Disp TBD	oosal Date		City, State Melville, NY				
Completed by Roque G Schipilliti	Title Project Man	ager		Signatu	170ges	Alch	ipelety	Date)4/04/1	7	

State of New Jersey

Check # 15898

Cneck # 15892

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Date of Notification (1) April 4, 2	2017		Nam	ne of Build	ding Owner / Ope	rator (2)		to t	U	15	7
Agencies Notified Type No				et Addres	Regional Medica	Center					
							III II APR	- 7	201	7	
EPA DEP			1925	5 Pacific /	Avenue		, Sec. 10.				-
	nitial		City	Ctata 0 7	7:- C-d-		I L	77.77			
	Amended		555V.1000	State & Z	NJ 08401		AS 3ESTO	ENS!		IUL	ά.
	Amendment #	_	Auai	inite City,	NJ 06401		LIO	L140!	140		
□ dCA	Cancellation		Nam	e of Conta	act		Т	elepho	one N	umbe	r
			Willi	iam Malaz	zita						
			F	ACILITY	/ INFORMAT	ION					
Name of Facility Where Abatem	ent is Taking	Place (3)			Type o	f Facility (4)					_
AtlantiCare Regional Medical Street Address	Center					chool (K-12)					
1925 Pacific Avenue						ubchapter 8 (Other tha					
1020 I dome Avende						ther (i.e., private &				etc.)	
City (5)					Square	Feet # of F	loors	dg. Ag			
Atlantic City, NJ					Current	Use (Prior if being de	molished)	1	18 Ye	ars	
County (6)					Hospita						
Atlantic		ounty Cod	le (7)				100				
Name of Monitoring Firm Hired b	y Building Ov	vner (8)		ASCN	No. Name o	of Abatement Contract	or (9)				
Hillmann Consulting, Inc.		57420016-7. 3 C50 7 06		1000000	Synate	ch, Inc.	01 (0)				
Street Address 1600 Route 22 East, Ste 107					Street A						
City, State & Zip Code						dio Road ate & Zip Code					
Union, NJ 07083					Little E	gg Harbor, NJ 08087	,				
Project Manager for Monitoring F Stephen Cherepany	ırm	73.00	elephone 18-688-78	Number	Telepho 609-296	ne Number	Lic∈nse Nun				
Scheduled Start Date (10)	Schedule	d Complet				f OSHA Monitor		0081	17		
April 14, 2017		Jun	e 14, 201		Synated						
Occupancy Status During Abater Facility Closed/Vacated	nent (Check of	only one)	Abatomo	ant	Street A						
Abatement Performed C				5111		dio Road					
Other - Describe:		mai riour	3		1000	ate & Zip Code gg Harbor, NJ 08087					
Facility Occupied During	Abatement				Little L	39 Harbor, 145 00007					
Scope of Work (Check all that ap	ply)										
_						Full Containmen	nt with Negat ve Press	cure			
≥3 sf or ≥ 50 lf			Renovat	ion		Mini-Enclosure	it with regative riess	suie			
≥160 sf or ≥260 lf			Demolitie	on		Glovebag Proce	dure				
		,				☐ Non-Exempted	(*) and Non-Friable Pr	rocedu	re		
Location of Asbestos-Containing Materia	al (ACM)	Is Locati	on Norm	ally Used nance or		scription of		Ab	atem	ent Ty	/ре
TO BE ABATED	ar (AOW)		dial Staff		Aspest	os-Containing erial (ACM)	Amount (Specify SF or LF)	1			
IN Facility				` '	(i.e., the	ermal systems	0. 0. 2.				
(13)					insulation	, surfacing, VAT miscellaneous)		R	יד	Enc.	m
					or other	miscellarieous)		Removal	Repair	aps	Clos
		Yes	No	N/A				val	air	Encapsulate	sure
st Floor										Ф	200
st Floor				X		ng Plaster	300 SF	X			
				^	Floor II	le and Mastic	390 3F	X			
								-			
lame of Registered Waste Haule	r	NJDEP V	Vaste	Cubic Y	ards of Waste	Name of Regist	ered Landfill				_
Synatoch Inc		Hauler ID	No.				o.ou Eunum				
Synatech, Inc. City, State		27	429	20 Disposa	al Date	Fairless Hills					
73				Disposa	ai Date	City, State					
ittle Egg Harbor, NJ 08087	I+v-			June 1		Morrisville, PA					
completed By	Title			Signatu	ire - //	,	Date				
iane Aloia	Executiv	e Adminis	strator	NU	ane all	12_	April 4, 2017				

Date of Notification (4)				1				pa l				
No.	Street Address Street Address ASBLISTOS CONTROL &											
	Street Address ASE STOS CONTROL & Wildwood Crest, NJ 08260. Name of Contact Richard Marcinek Telephora Number of Contact Richard Marcinek Telephora No. ASC Marcinek ASE STOS CONTROL & Wildwood Crest, NJ 08260. Name of Contact Telephora N interest As STOS CONTROL & Wildwood Crest, NJ 08260. Name of Contact Telephora N interest Ass STOS CONTROL & Wildwood Crest, NJ 08260. Name of Contact Telephora N interest Ass STOS CONTROL & Wildwood Crest, NJ 08260. Name of Contact Telephora N interest Telephora N interest Ass STOS CONTROL & Wildwood Crest, NJ 08260. Name of Contact Telephora N interest Tele											
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☐ Cancel	ation			Ric	hard Ma	rcinek						
				FA	CILITY IN	FORMATION						
	Taking	Place	e (3)				Type of Facility	(4)				
Resident												
Street Address											::-::	
									ommerc	iai bu	lidings,	
City (5)							Square Feet	# of Flor	rs	Blo	la. Age	
Wildwood Crest, NJ 08260.							1200Sf	3 Flo	ors	- 4		
County (6)			1100	Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	ior if being	emolish	ned)		
Ocean COUNTY										,		
Name of Monitoring Firm Hired by Bu	ilding C	wner	(8)	ASCM	No.	Name of Abateme						
									LIC			
Street Address								ui 001 1100	, LLO.			-
						10000000000000000000000000000000000000	Road					
City, State, Zip Code			7		-							
#1 3 t DEAR						I amount to the second						
Project Manager for Monitoring Firm			Tel	enhone	No		9, 143 00330	Linenee	NI.			
,gg			, 0,	срионс	110.							
Start Date (10)	Sched	ulad C	omnle	ation Do	to (11)			0115	5			
04 / _09_ / _17					2.00			al Service	LIC			
Occupancy Status During Abatement									,			
				ment			D4					
☐ Abatement Performed Outside of N	lormal	Facility	y Hou	rs - Des	cribe				-			
Time of Abatement: 7AM-11:30PI	VI/	_PM-		_AM								
Scope of Work (Check all that apply)						Mays Landing	J, NJ 00330		-			
[] 3 of or > 2 If				• 200,000		☐ Full Conta	ainment with Neg	ative Press	ure			
□≥3 \$1 of ≥3 11 □≥160 sf or ≥260 If		⊠ Re	novat	on								
						Non-Exer Non-Exer	npted (*) and Nor	n-Friable Pr	ocedure			
50 0000 vis											tement 7	Type
Location of												1
	VI)								The second secon	Rem	inc:	incl
IN Facility		Cust			(1.6.					ova	apsu	uso
(13)		Yes							,	-	ulate	6
Upstairs		П		-	Asbesto	s Floor Tile		8709	-	M		
Lower Bathroom			-	-								
		_			ASSEST	73 1 1001 THE		2/3/				
			-							븻		닏
Name of Registered Waste Haules	FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Subchapter 9 (Other than K-12) Su											
TO THE STATE OF THE PROPERTY O												
City, State	17											
958 Jackson Rd. Mays Landing	g, NJ (08330)			Disposal Date		ntown Ro	Morri	sville	PΑ	
Completed By (Print or Type)	Title					Signature	10				91.7	
Vernice Graham		eside	nt			V/ 11	11 M	, ,	Date	-	21,	7
SB41	1	20146				NUME	Len	M	1) (1-1	

ASB-41

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

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State of New Jersey

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

Chille			(Pu	ursuant	to NJAC	8:60 and 12:12	0)		0.0	7	004	7	
Date of Notification (1)						ng Owner/Operator	r (2)	UL -	PR -	-/	2 U H		13 700
4/4/17	T 11 05 0				Peters Cl								_
Agencies Notified	Type Notificati	on			et Address Middlet	own Street	200	ASBE	STOS	(00)	MA	0L	ä
DEP	Initial Amended			-	State, Zip			And Desirion	LICE	1201	3	_	_
☑ DOL	Amendmen		_	2000	erside, N								
⊠ DOH	Emergency justificator	(Incluair	ng		ne of Cor			I Telepho	ne Numb	oer		_	_
☐ DCA	Cancellation	ĺ			ld Johns			1					
				FA	CILITY IN	FORMATION						-	
Name of Facility Where	Abatement is Tal	king Plac	e (3)				Type of Fac						
Abandoned Church							School (V 40				
Street Address 101 Middletown Stre	eet				200000000000000000000000000000000000000		Other (i.e	ter 8 (Other t e., private 8 c			dings	,	
City (s)							homes, Square Fee		ors	ТВ	ldg.	Aae	
Riverside, NJ						14	Large	2) yrs		
County (6)				Cou	inty Code	(7) (STATE	1	(Prior if being	demolis	hed)			
Burlington			_	USE	EÓNLY)		Abandone						
Name of Monitoring Firm (8)	Hired by Buildin	g Owner		ASCM	No.	Name of Abaten AEi2, LLC	nent Contracto	r (9)					
Street Address						Street Address					_		
Oli ect /\ddi ess						361 E. Flemin	ng Pike						
City, State, Zip Code						City, State, Zij	~				_		_
						Hammonton,	NJ 08037						
Project Manager for M	onitoring Firm		Te	lephone	No.	Telephone No.		Licens 0068					
	Lou		<u></u>			609-481-212							_
Start Date (10) 4/13/17		eduled 0	ompi	etion Da	ate (11)	Name of OSHA N AEi2, LLC	VIORITOR						
Occupancy Status During			one)			Street Address							_
☐ Facility Closed/Vacate						361 E. Flemi	ng Pike						
Abatement Performed	Outside of Norm	al Facili	ty Hou	urs		City, State, Zip C	ode						
Other - Describe:						Hammonton,	NJ 08037		-				
Scope of Work (Check all	that apply)					Name and Advanced to the Control of	ntainment with	Negative Pr	ssure	a control			
≥3 sf or ≥3 lf		Re	enova	tion		Mini-End	closure ag Procedure						
		X	emoliti	011		Non-Ex	ag Procedure empted (*) and	Non-Friable	Procedu	re			
			Locat							1	bater		g I
Location o	ıf		ormal d Sole			Description of					Тур	е	
Asbestos-Containing Ma	aterial (ACM)	Mair	ntena	nce/		tos Containing Mat	erial (ACM)	Amou		R	R	E n	E
TO BE ABATE IN Facility	<u>=D</u>		ustodi Staff?		(I.e.,	thermal systems in surfacing, VAT,		(Spec SF or I		e m	e p	a a	1
(13)			(12)			other miscellaned				0	a i	p s	o s u
		Yes	No	N/A						a 1	r	1 a	r e
Boiler Rm		100	110	X	TSI			80 SF		X		t o	
Custodial Storage				X	TSI			12 LF		X			
Bathroom				X	Floor T	ile		120 SF	-	X			
Windows				X	Caulk			43 W	-	X			
Name of Registered Wast	e Hauler		100	NJDEP I		Cubic Yards	Name of Re	egistered Lan	fill				
AEi2, LLC			1	Hauler IE 21376	No.	of Waste	TBD						
City, State			-1-2	1010		Disposal Date	City, State	n	-				
Hammonton, NJ						TBD //	TBD	_/_					
Completed By	Tit		. 1.1			Signature /	tmu	/)ate				
Wm. Minnick	<u>l</u>	rogran	ı Mg	μ,		NUI'I	VIII	1	/4/17				

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DOE Amended Amended Amended Amended Amended Amended Proceeding DOH Dot Dot Dot Dot Dot
Amendment Amen
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Name of Facility Where Abatement is Taking Place (3) Street Address
Street Address City (5) Folkuston No. County (6) Folkuston No. County (7) County (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Street Address City, State, Zip Code Hackensack, NJ 076 11 Steret Address Start Date (10) All 18 17 Coupanny States During Abatement (Check Only One) Seed Address Start Date (10) Seed Address Start Date (10) Abatement Performed Onition Firm Street Address Start Date (10) Seed Address Start Date (10) All 18 17 Coupanny States During Abatement (Check Only One) Seed Address 280 Huyler Street City, State, Zip Code City, State, Zip Code City, State, Zip Code Soop of Work (Check All That Apply) Seed Address 280 Huyler Street City, State, Zip Code South Hackensack, NJ 07606 Soop of Work (Check All That Apply) Seed Solely by Maintenance (*) as I Non-Friable Procedure Non-Exempted (*) as I Non-Friable Proc
Street Address Square Feet Floors Square Feet Square Feet Floors Square Feet Square Feet Floors Square Feet Floors Square Feet Square Feet Floors Square Feet Square Feet Square Feet Square Feet Square Feet Floors Square Feet Square Feet Floors Square Feet Square Feet Floors Square Feet Square Square Feet Square
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County (6) County (6) County Code (7) County Code (7) County (6) County (6) County Code (7) Code (7) Code (7) County Code (7)
County (6) County (6) County Code (7) County Code (7) County (6) County (6) County Code (7) Code (7) Code (7) County Code (7)
County (6) Follus County Code (7) Current Lag (Prior if beil g demolished)
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Absterment Contractor (1)
Name of Monitoring Firm Hired by Building Owner (8) Street Address Street Address 4.50 South River St: eet 4.50 South River St: eet 4.50 South River St: eet City, State, Zip Code City, State, Zip Code Hackensack, NJ 076 1 Froject Marager for Monitoring Firm Telephone No. 201-329-7444 Name of OSHAM Monitor Omega Environmer tal Street Address 4.50 Huyler Street City, State, Zip Code Hackensack, NJ 076 1 License No. 201-329-7444 Name of OSHAM Monitor Omega Environmer tal Street Address 4.50 Huyler Street City, State, Zip Code Street Address Asbestors Containing Material (Ack M) TO BE ABATED In Facility In Facility In State Containing Material (ACM) TO BE ABATED In Facility In Faci
Best Removal Inc
Best Removal Inc
Street Address City, State, Zip Code Hackensack, NJ 076 11 Froject Manager for Monitoring Firm Telephone No. Telephone No. 201-329-7444 00388 Start Date (10) A 18 17 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility House Coty State, Zip Code Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Location of Asbestos Containing Material (ACM) Asbestos Containing Material (ACM) TO BE ABATED In Facility (13) To DE ABATED In Facility (13) Yes No N/A N/A N/A N/A Source of Registered Waste Hauler Normal Facility N/AT, or other miscellaneous) Normal Facility
A A A A A A A A A A
City, State, Zip Code City, State, Zip Code Hackensack, NJ 076 1
Hackensack, NJ 076 1
Project Manager for Monitoring Firm
Project Manager for Monitoring Firm
Start Date (10) Scheduled Completion Date (11) Name of CSHA Monitor
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Abatement City, State, Zip Code South Hackensack. NJ 07606 Scope of Work (Check All That Apply) State of Value of Normal Facility Hours Abatement City, State, Zip Code South Hackensack. NJ 07606 Full Containment with Negative Pressure Glovebeg Procedure Non-Exempted (*) at a Non-Friable Procedure Non-Exem
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: 7 20 Mm
Pacility Closed/Vacated During Entire Period of Abatement 280 Huyler Street
Pacifity Closed Vacated During Entire Period of Agament Abatement Performed Outside of Normal Facility Hours
Abatement Performed Outside of Normal Facility Hours
Scope of Work (Check All That Apply) 3 sf or ≥3 if
Scope of Work (Check All That Apply) Stop Stop
Secondation Demolition Procedure Mini-Enclosure Glovebag Procedure Non-Exempted (*) at Non-Friable Procedure Non-Exempted (*) at Non-Exempted (*) at Non-Friable Procedure Non-Exempted (*) at Non-Exempted (*)
Demolition De
Glovebag Procedure Non-Exempted (*) at Non-Friable Procedure Abatement Type
Non-Exempted (*) at 1 Non-Friable Procedure Non-Exempted (*) at 1 Non-Friable Procedure
Location of Asbestos-Containing Material (ACM) Used Solety by Maintenance/ Custodial Staff? (12) Yes No N/A N/A Secretary Secr
Is Location Normally Used Solely by Maintenance Custodial Staff? (12) Yes No NVA
Normally Used Solely by Maintenance/ Custodial Staff? (12) Normally Used Solely by Maintenance/ Custodial Staff? (12) Name of Registered Waste Hauler Best Removal Inc Normally Used Solely by Maintenance/ Custodial Staff? (12) Normally Used Solely by Maintenance/ Custodial Staff? (12) Normally Used Solely by Maintenance/ Custodial Staff? (12) Normally Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Solely by Maintenance/ Custodial Staff? (I2) Normally Used Solely by Maintenance/ Custodial Staff? (I2) Normally Used Solely by Maintenance/ (Specify Sport LF) Normally Used
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Hackensack, NJ 07601 4/2017 Waynest urg, OH 44688
Completed by Title Signature () Date
J. Maiorano Estimator Vairus; 4/3/17
J. ITIMOTORIO ESCINATOR

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EPA		-	City S	tate, Zip	Code			L-					
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DCA	justification)			of Conta	act						_		-
(NJAC 5:23-8)	☐ Cancellation			Rica									
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Residence							☑ Other	r (i.e., priv	ate and c	or mercia	building	5,	
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Ottoor, in					City	State Zip C	Code						
City, State, Zip Code	3				T	oms River	New Je	ersey 08	755				
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Toms River, Nev	v Jersey 08755	T	oloph	one No		Telephone No.		Licer	nse	No.			
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gencies Notified Type Notification		Stree 100	et Addres) Hoope	ss er Avenue)			AS	BES	OS (CON	TRO	18	-
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DOL Amendment # Emergency (inclu	ding	Nan	ne of Cor	ntact			1	-	*10	8.0				
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lame of Facility Where Abatement is Taking Pla	ice (3)		AOILIT			Type of Fa								
Ocean County Courtnouse							ol (K-12) hapter 8 (r (i.e. priv	Other	than K	12) cial bu	uilding	s, hor	nes,	
Street Address 100 Hooper Avenue						etc.) Square Fe		# of F		-	Bldg.	Age		_
City (5)						20,000		4	-1 = === 6	ished	55+			-
Toms River, New Jersey 07753		Co (S1	unty Cod	e (7) ONLY)		Current U	se (Prior ouse	if being	g demic	istieu	,			
Ocean	ner (8)		ASCM N		Name	of Abatem	ent Contr	actor (9)					
Name of Monitoring Firm Hired by Building Own T&M Associates	101 (0)				1000	h Corpora	ation			-				
Street Address 40 Monmouth Park Highway, Suite 2					606	McBride)						
City State Zin Code					City,	State, Zip C odland Pa	ode ark, Nev	v Jers	sey 0	424				
West Long Branch, New Jersey 0776 Project Manager for Monitoring Firm		Telephone No. Telephone							Licen 0110	e No.				
Kovin Rurns		100	32-676		Nom	973-225-8400 0110 Name of OSHA Monitor								
Start Date (10) 04/21/2017	cheduled)4/22/20	17 IRIS Environmental Laborato						ratori	S LL				_	
Occupancy Status During Abatement (Check	Only One)	ľ.	60		233	33 Route	22 Wes	st						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Occupied	riod of Ab I Facility H	ateme lours	ent		City Un	, State, Zip lion, New	Code Jersey	0708	3	_				
Scope of Work (Check All That Apply)		73				× Full C	Containme	ent with	n Nega	ive Pr	essure	9		
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		Locati ormal			Descrip	tion of						Ту	pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	Sole ntena	ely by nce/ Staff?	(i.e. th	c Containir	ng Material (ems insulat VAT, or	ACM) ion,		Amour (Specif SF or L	1	Removal	Repair	Encapsulate	
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E Wing;2nd FI Restroom Pipe hase			X	Pipe ins	ui /\3300									1
									A	onds.	11			
Name of Registered Waste Hauler Lilich Corporation			NJDEP V Hauler IE 18724		Cubic Ya of Waste 2		Name of	S.W.C			11			
City State					Disposal 04/22/2		City, St Morri	tate sville,	PA				11 12	
Woodland Park, Ne Jersey Completed by	Title	ider	n†		Sign	nature (Page -	nerit	0		0ate 04/03	1201	7	
Adriana Olejarova	Pres	siden	nt .			Do not use	0,	for och	noetos	icensi	ire ex	empte	ed acti	

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Date of Notification (1) 4/4/2017			Name of Brance	of Building Owner/	Operator	(2)			AF	PR -	7 8	017			
Agencies Notified Type Notification EPA Initial	1		Street A	Address				A	BES	TOS	CON	TRO	L.&		
X DEP Amended X DOL Amendment				ate, Zip Code a Nj 07605						LICEN	1574	3			
☐ DOH ☐ Emergency justification ☐ DCA ☐ Cancellatio)		Name of	of Contact di Gil				Tel	phone	Numbe	r				
Name of Casility Manage Abeta and in Tabi	- Di- /	2)	FAC	ILITY INFORMAT	ION								8		
Name of Facility Where Abatement is Taki N/A	ng Place (3)				Тур	e of Facility	0.10							
Street Address			***			×	School (K- Subchapte Other (i.e.	r 8 (Othe	than I	K-12) ercial b	uildin	gs, ho	mes,		
City (5) Leonia						Squ 195	etc.) are Feet 50	# of 2	Floors		Bldg 68	. Age			
County (6) Bergen County				Code (7) USE ONLY)		5 35 35 2	rent Use (Pri sidential	ior if bei	g demo	olished)					
Name of Monitoring Firm Hired by Building Turningpoint Contracting Corp.	Owner (8)		ASC	И No.			atement Co oint Contr								
Street Address 51 Berkeley Terrace	et Address Berkeley Terrace						Street Address 51 Berkeley Terrace								
City, State, Zip Code Irvington NJ 07111	, State, Zip Code						Zip Code NJ 07111								
Project Manager for Monitoring Firm Emeka Okeke			Telepho 973-3	ne No. 72-2177	Teleph 973-		No. 2177			License No. 01238					
Start Date (10) 4/16/2017	Schedul 4/17/2		npletion	ion Date (11) Name of OSHA Monitor JLC Environmental Inc											
Occupancy Status During Abatement (Che	ck Only Or	ne)			Street										
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Floor vacated durin	nal Facility	/ Hours	;		City, S	tate, 2	25th Stree Zip Code		-						
Scope of Work (Check All That Apply)	g abatomo	in donv	itios		New	York	k NY 1000	07							
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility Nor Used S Mainte Custod				escription of ntaining Material (ACM) al systems insulation, acing, VAT, or miscellaneous)		(S	ount ecify or LF)	Tellova	Kepair	Encapsulate	Enclosure			
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Name of Registered Waste Hauler		1 212	JDEP W auler ID		Yards		Name of	Register	ed Land	dfill					
Newark Carting Inc			aulei ID	or vva	ole .		Tully To	own R	facilit	.y					
City, State Newark NJ 07102			Dispos	sal Date	12	City, Stat									
Completed by Emeka Okeke	dent		S	ignatufe	L	the	Ci	Date 4/4/2017							

Date of Notification (1) 4/4/2017				Name of	of Building	Owner/0	Operator	r (2)								
Agencies Notified	Type Notification		\dashv		Address						-					
		25		Oli CCL /	iddi C33											
EPA DEP DOL	Amended		t	City, St	ate, Zip Co	ode					4-0-0					
× DOL			_		a Nj 076											
□ DOH			Ī	Name o	of Contact					Tels	hone	Numh	er			
☐ DCA				Branc	di Gil											
Name of Facility 10th	AL-1	DI (0)		FAC	ILITY INFO	ORMAT	ION	_			- 1145-336				_	
N/A	Abatement is Takii	ng Place (3)						Ту	pe of Facility	(4)						
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Street Address								×	Subchapte Other (i.e.				ouilo	dinas.	hom	es.
City (5)									etc.)							
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County (6)			_	Country	Codo (7)			80.0) W. (1922)	2	Tollars.	-P-E-		Ö		
Bergen County					Code (7) USE ONLY)			l	ırrent Use (Pri esidential	or it beir	j dem	olished	1)			
	Hired by Building	Owner (8)		ASCI	M No		Name		batement Co	ntractor	1)					
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Street Address							Street	_	•		•		-		== 1	
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City, State, Zip Code				H-11-10071			City, S	State	, Zip Code		*					
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	itoring Firm			Telepho		, i	Teleph				icens					A LES ACCES
Emeka Okeke					72-2177		10070.192	-12.00	2-2177)123	8				
Start Date (10) 4/16/2017	Shotified Type Notification A				Date (11)		1000000		SHA Monitor							
	Abatamant (Char	4/17/20		JLC Environmental Inc												
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Facility Closed/Vaca	ated During Entire ad Outside of Norr	Period of Ab	atem	ent					, Zip Code						-01/17	
X Other - Describe: F	loor vacated during	abatement	activ	ities		1			rk NY 1000	7						
Scope of Work (Check Al	I That Apply)						71011				-					
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Boller ro	om			X		Pipe	Insula	tior	1	3(LF	- 2	X			
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Newark Carting Inc			H	auler ID	No.	of Was	ste		Tully To	own Re	acilit	.y				
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Agencies Notified	Initial	1		Stree	et Address				ASBES	TOS	CO	NTF	ROL	
DEP DOL	Amended Amendment	#		City,	State, Zip (Code	m			JOE	NSH	¥G.	_	
⊠ DOH			ng	Nom	e of Contac		Ewing, NJ 08		Ni	102	70.00		_	
□ DCA	Cancellation			INdilli		Ken Graziul		relet	none Num	oer			-	
				FA	CILITY IN	ORMATION							12	
Name of Facility Where							Type of Facility	(4)	_					
Street Address	Res	ident	ıal				School (K-1		than K-12	2)				
City (5)							Other (i.e., phomes, etc.)	orivate &	commerci	al buil	- 5			
City (5)	Ewing.	NJ 0	8618	3			Square Feet 2000	# 01	Floors 2	B	ldg. A	.ge +/-		
County (6)				Cou	nty Code (7) (STATE	Current Use (P	rior if b€	ng demolis	shed)		. /		
	as Notified Type Notification Initial Amended Amended Amended Amendent # Emergency (including justification) Cancellation Facility Where Abatement is Taking Facility Mercer Monitoring Firm Hired by Building Owner MECS Address PO Box 341 Inte, Zip Code Crosswicks, NJ 08 Manager for Monitoring Firm Tet (10) Schedule 4/14/17 Incy Status During Abatement (Check of the state of t				l No.		ment Contractor (9						=	
	## A/5/17 Sea Notified					Law Victoria Control of the Control	vens Environ	menta	Service	es, Ir				
Street Address	PO Box 34													
City, State, Zip Code						City, State, Zip		30X 3.					_	
		0851	70	phone			Allentow							
	OL Amendment #_ Emergency (inclusive structure) Cancellation					Telephone No. (609) 2	59-9688	Lice	ise N o.	0493	3			
Start Date (10) 4/14/17	Sche		Comple 4/19/		ate (11)	Name of OSHA	(6975.6775F);	ECS						
A top the contract of the cont						Street Address							=	
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Other - Describe:			r a colorium to			Oity, Otate, Zip	Crosswick	s, NJ	08515					
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IN Facility	Asbestos-Containing Material (ACM) TO BE ABATED IN Facility Main Cu				(1.0.,	surfacing, VAT other miscellane	, or		·LF)	Remova	Repair	Encapsulate	Enclosure	
(13)		Yes	(12) No	N/A		other miscellane	ous)			oval	ar.	ulate	sure	
Basemer	nt		X		The	ermal Pipe In	sulation	10) lf	×				
Crawl Spa	X			ermal Pipe in	lf	X								
Name of Registered Waste Hauler														
(5)		s, Inc	L	JDEP V auler ID 182	No.	Cubic Yards of Waste 2 CU	Name of Regis	_	ndfill ss Land	lfill				
City, State						Disposal Date	City, State	7						
Completed By						4/20/17	M	/Mor	sville,	PA				
Mahlon E. Stev			oject	Man	ager	Signature	1/		Date	4/5/	17			

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) 3 / WENY Pat, LLC c/o NAI Hanson Mgmt Agencies Notified / J ib #1702-2160 -Type Notification Chk. #NA Street Address ☐ EPA ☐ Initial **⊠** DOLWD 235 Moore Street ☑ DHSS City, State, Zip Code Amendment #1 SBESTOS CONTROL & ☐ DCA ☐ Emergency (including Hackensack, NJ 07601 LICENSING (NJAC 5:23-8) justification) Name of Contact ☐ Cancellation T lephone Number Daniela Bonanata Name of Facility Where Abatement is Taking Place (3) FACILITY INFORMATION Weny Pat, LLC Type of Facility (4) Street Address ☐ School (K-12) Subchapter 8 (O ier than K-12) 104 McLean Blvd. Other (i.e., privat and commercial buildings, City (5) homes, etc.) Paterson Square Feet # of Floors County (6) Bldg. Age 2600 County Code (7)(STATE USE ONLY) | Current Use (Prior if eing demolished) Passaic 1950 Name of Monitoring Firm Hired by Building Owner (8) Vacant ASCM No Criterion Laboratories Name of Abatement Contractor (9) Street Address Asbestos and Mold Services, Corp. 3370 Progress Drive, Suite J Street Address City, State, Zip Code 3859 Sylon Boulevard Bensalem, PA City, State, Zip Code Project Manager for Monitoring Firm Hainesport, NJ 08036 Telephone No. Mike Panepresso Telephone No. 215-244-1300 Lic nse No Start Date (10) 609-702-0400 Scheduled Completion Date (11) 3 / 13 / 17 0 862 Name of OSHA Monitor 3 / 24 / 17 Occupancy Status During Abatement (Check only one) EMSL Analytical, Inc. □ Facility Closed/Vacated During Entire Period of Abatement Street Address Abatement Performed Outside of Normal Facility Hours - Describe 200 U.S. Route 130 North Time of Abatement: ____AM-___PM/___PM-___AM City, State, Zip Code Scope of Work (Check all that apply) Cinnaminson, NJ 08077 ≥3 sf or >3 If ⊠ ≥160 sf or ≥260 lf Full Containment with Negative Pr ssure Renovation ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Location of Asbestos-Containing Material (ACM) Normally Used Solely by Abatement Type Description of Asbestos Containing Material (ACM) TO BE ABATED Maintenance/ IN Facility (i.e., thermal systems insulation, Encapsulate Enclosure Custodial Staff? Am unt (13)(Sp cify (12)surfacing, VAT, or SF c LF) other miscellaneous) Yes No N/A SEE ATTACHED SCOPE OF WORK X X X П X Name of Registered Waste Hauler NJDEP Waste Waste Management Cubic Yards of Name of Registered Land II Hauler ID No. Waste City, State 17273 Grand Central 5 Lafayette, NJ Disposal Date City, State Completed By (Print or Type) 3/24/17 Penn Argyle, PA Title Kimberly A. Trumbetti Sighature Office Coordinator 3-16-17

ASB-41 MAY 11



PAGE 2 – SCOPE OF WORK

Job Number – 1702-2160, Check Number NA

Initial Notification Date: 3.3.17

Date of Amendment #1 3.16.17 - Amended to Demolition - no scope or date changes

Weny Pat, LLC Paterson, NJ



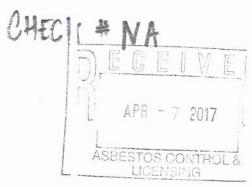
- Removal and disposal of approximately 240 SF of transite siding from the exterior ea t wall
- Removal and disposal of approximately 120 LF of window caulk from the exterior ea t wall windows
- Removal and disposal of approximately 100 SF of breeching within the basement
- Removal and disposal of approximately 50 LF of pipe insulation within the basement
- Removal and disposal of approximately 225 SF of floor tile in first floor office #2
- Removal and disposal of approximately 1,035 SF of floor tile and black mastic with 1 the first floor office
- Removal and disposal of approximately 400 SF of floor tile and black mastic within the first floor office #3
- Removal and disposal of approximately 220 SF of linoleum flooring within the first floor office #5
- Removal and disposal of approximately 280 SF of mastic under carpet within first floc office #6
- Removal and disposal of approximately 170 SF of cove base within the first floor offic: #1 and office #2
- Removal and disposal of approximately 170 SF of mastic associated with black cove base within the first
- Removal and disposal of approximately 25 SF of linoleum flooring within the first floo bathroom
- Removal and disposal of approximately 2,800 SF of roofing and flashing from exterio roof. Only includes small portion of overall roof, as instructed by AET during site visit.

3-14-17

NOCH	NO	OTIFI(CATIO Pursua	ON OF A	SBESTOS ABA IAC 8:60 and 5:	TEMENT 16)		EG		V		
Date of Notification (1)			Nan	ne of Build	ing Owner/Operator	(2)	1 - (1					
3 /13 /	17				oard of Education		#170	-2159	Chk	20	17A	
Agencies Notified Type Notif	fication		Stre	et Address			950 E		Olik	74 -	AM	~
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	ment #1 ency (include			illburn, N		L			Lat YU1	:40		
(NJAC 5:23-8) justifica	ation)	iing		e of Conta			Tel	ohone Nu	mhor			
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					NFORMATION					_		
Name of Facility Where Abatement is	Taking Pla	ace (3)			THE OTHER PROPERTY.	Type of Facility	v (4)					
Washington School						School (K-1						
Street Address						─ Subchapter	8 (Oth	r than K-1	2)			
70 Spring Street						Other (i.e., homes, etc	private	nd comm	ercial b	uildir	igs,	
City (5)		3,7073		30-12-3-11		Square Feet		Floors	TE	Bldg.	Ane	
Millburn						43,134	1	5016		55	ige	
County (6)			Cou	inty Code	7)(STATE USE ONLY)		rior if b	ing demo	lished)	-	-	
Essex						Vacant		3				
Name of Monitoring Firm Hired by Bu		er (8)	ASCN	No.	Name of Abatem	ent Contractor (9	3)	9-				
The Saban Engineering Grou	p, Inc.					d Mold Servic		p.				
Street Address					Street Address			-				
201 Stuyvesant Avenue					3859 Sylon B	Boulevard						
City, State, Zip Code		T.			City, State, Zip C	ode						
Lyndhurst, NJ 07071					Hainesport,	NJ 08036						
Project Manager for Monitoring Firm			ephone		Telephone No.		Lic	nse No.				
Stephen Pharai				9-7705	609-702-0400)	C	1862				
Start Date (10)3 / 27 / 17	Scheduled				Name of OSHA N							
			/	17	EMSL Analys	ical, Inc.						
Occupancy Status During Abatement					Street Address							
∑ Facility Closed/Vacated During Ent ☐ Abatement Performed Outside of N ☐ Abatement Performed Outside of N ☐ Abatement Performed Outside N ☐ Abatemen	ire Period o	of Abate	ement		200 U.S. Rou	te 130 North						
Time of Abatement:AM	PM/	PM	rs - Des	AM	City, State, Zip C							
Scope of Work (Check all that apply)		_	-	2.111.	Cinnaminsor	n, NJ 08077						
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≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renovat			☐ Mini-End	losure	gative r	essure				
2 ≥ 100 st of ≥260 if		emoliti	on		☐ Gloveba	g Procedure						
		ls Loca	tion	T	□ Non-Exe	mpted (*) and No	n-Friat	Procedu				
Location of		Norma	ally		Description of	f				atem	ent T	ype
Asbestos-Containing Material (ACN TO BE ABATED	A) US	ed Sol	ely by ance/	Asbe	stos Containing Ma	terial (ACM)	F	nount	Removal	Repair	Encapsulate	Enc
IN Facility		stodial	Staff?	(I.e	., thermal systems surfacing, VAT.			or LF)	SVOL	air	aps	Enclosure
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ame of Registered Waste Hauler		N	JDEP V	Vaste	Cubic Yards of	Name of Regis	tered I	ndfill		Ш		Ш
Waste Management			auler ID	No.	Waste	Grand Cen						
ty, State			17273		5 Disposal Date	City, State						
Lafayette, NJ					4/7/17	Penn Argyl	e DA					
ompleted By (Print or Type)	Title				Signature	. Silii Aigyi	, FA	- 1=				
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Page 20f2

Proxet: Washington School Millburn, NJ



Date of Initial Notification: 3-13-17

B. This non-friable asbestos abatement project will involve the removal of the following materials:

Material Description	Es imated Quantity
12" Floor Tile and Associated Mastic	900 SF
12" Floor Tile and Associated Mastic	1000 SF
	1,000 SF
	1,000 SI
12" Floor Tile and Associated Mastic	60 SF
Wall Putty/Joint Filler	1,000 SF
12" Floor Tile and Associated Mastin	2 SF
Sink Undercoating	550 SF
12" Floor Tile and Associated Magtin	1 Sink
Sink Undercoating	550 SF
	1 Sink
9" Floor Tile and Associated Mastic	2,000 SF
12" Floor Tile and Mastic	1,100 SF
12" Floor Tile and Associated Mastic	1,000 SF
	12" Floor Tile and Associated Mastic 12" & 9" Floor Tiles and Associated Mastic 12" Floor Tiles and Associated Mastic 12" Floor Tiles and Associated Mastic 12" Floor Tile and Associated Mastic Wall Putty/Joint Filler 12" Floor Tile and Associated Mastic Sink Undercoating 12" Floor Tile and Associated Mastic Sink Undercoating 9" Floor Tile and Associated Mastic Sink Undercoating 9" Floor Tile and Associated Mastic

x X

3-31-17

Amendment #1 Change IH PIRM

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Date of Notification (1)	4 / 17				f Building Seymour	Owner/Operator (2 Rubin	/ Job #17	03-	162 APP Ch	- 7 k. #46	2017	7	
		_										_	-
Agencies Notified	Type Notification			Street A	ddress				SBESTO	S CON	VTR	OL 8	
⊠ EPA	☐ Initial									ENSIN			
☑ DOLWD ☑ DHSS	Amended Amendment #				ate, Zip Co								
□ DCA	☐ Emergency (in	602 90000		High	land Par	k, NJ 08904			T. March				
(NJAC 5:23-8)	justification)				of Contact			Teli	hone Numb	er			
	☐ Cancellation			Stev	e Rubin								
				FAC	ILITY INF	FORMATION							
Name of Facility Where	Abatement is Taking	Place	(3)				Type of Facility (4)	-				
Residential Proper							School (K-12)						
Street Address							☐ Subchapter 8 ☐ Other (i.e., pr	(Oth	and commerce	cial buil	dinas	š.	
Ciroti ida.							homes, etc.)	ivalc	and commen	Jidi Daii	5		
City (5)							Square Feet	#	f Floors	Bldg	g. Ag	е	
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County (6)				Count	v Code (7)	(STATE USE ONLY)	Current Use (Pri	or if	eing demolis	hed)			
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Name of Monitoring Firm	n Uisad by Building (Junor /	۵۱	ASCM N	do.	Name of Abateme		_	\ .				
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Horizon Environm	entai					Street Address	a Mola Col Mo						
Street Address						3859 Sylon E	oulovard						
PO Box 316													
City, State, Zip Code						City, State, Zip C							
Thorofare, NJ 080			1 = 1			Hainesport, I	42 00020	1	ense No.				-
Project Manager for Mo	nitoring Firm			phone I		Telephone No.		-)0862				
Dave Flanigan				56-848-		609-702-0400			70002				
Start Date (10)				tion Dat		Name of OSHA							
4 / _17_	/ _17_ _	4 /	18	_ / _	17_	EMSL Analyt	icai, inc.						
Occupancy Status Duri						Street Address							
□ Facility Closed/Vaca						200 U.S. Rou	ite 130 North						
☐ Abatement Performe	ed Outside of Norma	I Facility	y Hou	rs - Des	cribe	City, State, Zip C	ode						
Time of Abatement:	P	IVI/	_PIVI		AIVI	Cinnaminso	n, NJ 08077						
Scope of Work (Check	all that apply)					D- "0			Dranaura T	int in	01.1	-	
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lame of Facility Where Abatement is Taking Private Property Street Address	Place (3)						School (K-12) Subchapter 8 Other (i.e. privetc.)	(Othe	than K-12) commercial b	ouildin	igs, hi	omes,	
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Street Address N/A					1435		Street						
City, State, Zip Code N/A					Nort	h Ber	ip Code gen NJ 070	047	License No.			4	
Project Manager for Monitoring Firm N/A		Telephone No. Telephone No. 201-552-9685						01320					
	Scheduled 4/30/201		on Date	e (11)	Iris	Enviro	onmental L	abor	tories				
Occupancy Status During Abatement (Check					Stree	t Addre	ess ite 22 Wes	t					
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of Aba al Facility H	atement											
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novation molition				M M	ull Containme lini-Enclosure llovebag Proc on-Exempted	edure				e	
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Agencies Notified Type Notifica	tion			Address				/	ASB	:510	SC	ON	TRO	L &
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Street Address						×	School (K- Subchapte		or th	n K 10	1			
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City (5)						90	etc.) uare Feet							
Hoboken, NJ 07030						II /	0.000	2	f Flo	S	400	Bldg. 50+	Age	
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Name of Monitoring Firm Hired by Buildi	ng Owner (8	8)	ASC	M No.	Name	e of A	batement Cor	ntractor	(9)					
N/A							rices Corpo							
Street Address					Stree									
					426	69tl	n Street							
City, State, Zip Code					City, S	State	Zip Code							
Decises Manager (M. W. C.					Gutt	tenb	erg, NJ 070	093						
Project Manager for Monitoring Firm			Telepho	one No.	Telep				Lice	ise No				
Start Date (10)						WENT OF THE	-1700		011	74				
4/13/2017			mpletion	Date (11)			SHA Monitor							
Occupancy Status During Abatement (Ch	4/13/2				Sam	ne as	above							
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Facility Closed/Vacated During Entition Abatement Performed Outside of Notice Other - Describe: 8:00 AM	re Period of ormal Facilit	Abater y Hour	ment s		City, S	State,	Zip Code			-				
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Street Address					Stree		ress ngren Ave	nue					
City, State, Zip Code							Zip Code NJ 07512						
Project Manager for Monitoring Firm			Telephor	ne No.	Telep	hone			License 01311	No.			
Start Date (10) 04/11/2017	Scheduled 04/12/2		pletion [Date (11)	1 33 27 3 22		SHA Monitor atement, Ir						
Occupancy Status During Abatement (Chec	k Only One)			Stree		ress ngren Ave	nue					7115
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Occupied					City,	State,	Zip Code NJ 07512		-				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat	7.7			× N	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure	1000			e	
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Basement		X		· ·	ipe Insul	ation	1	8	1 LF	X			
Name of Registered Waste Hauler D&S Abatement, Inc		Н	JDEP W auler ID 0996	No. of	ubic Yards Waste BD		Waste	Mana	ed Landf		1		
City, State Totowa, NJ		1248			isposal Date BD	е	City, Sta Tullyto						
Completed by Ned Joksimovic	Title Projec	ct Ma	nager		Signatur	re	FN			ate 04/01/	2017		

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3/31/2017 Check	44 - Light of St													\pm	-
Agencies Notified Ty	pe Notification							and the same of th	AS	BES				L &	
			City	y, State,	Zip Code	7		- Indiana		-	Marin Mark Shark Shark				
NoTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) 3/31/2017 Check # 2989 Agencies Notified Type Notification Type Notification Street Address 118 Ferry Street Notified Street Address 118 Ferry Street															
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	Cancellation					ON									
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								Subchapter Other (i.e. r	8 (Othe private &	com	ercial b	uildin	igs, ho	mes,	
118 Ferry Street							Ш	etc.)			_				-
City (5)							Squ	are Feet	2.5	Floor					
Jersey City					do /7\		Cur	rent Use (Pri	77/2	ng der	olished	i)			
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City, State, Zip Code									093						
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Project Manager for Monito	oring Firm		16	elephone	e No.					010	74				
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						Sar	me a	s above							
	Abatement (Chec	k Only One)				Stree	et Add	iress							
Facility Closed/Vacate Abatement Performed	ed During Entire I	Period of Ab	ateme	ent		City,	State	, Zip Code							
≥3 sf or ≥3 lf	That Apply)	Re De				·	H	Mini-Enclose	ire ocedure	9		e Proc	cedure	ement	
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Print Form

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Date of Notification (1) 4/3/17			Name o	on Mutual Ho	Operator	(2)	oration	A STATE OF THE PARTY OF THE PAR	PR	- 7	2017	-	1
Agencies Notified Type Notification EPA Initial			Street A					ASBE				OL 8	ŧ.
DEP Amended Amendment		_		ate, Zip Code oon Park, NJ (8106				LIVE	NSIN	<u> </u>		
DOH justification) Cancellation	•			f Contact w Ricco				Teleph	ne Nu	ımber			
Name of Facility Where Abatement is Takin Vacant Garage	g Place (3	3)	FAC	ILITY INFORMAT	TION	Тур	e of Facilit	y (4)			-	_	
Street Address 13 Whippoorwill Way						×	Other (i.e	(-12) ter 8 (Other the private & co			dings	, hom	es,
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Name of Monitoring Firm Hired by Building	Owner (8)		ASC	√ No.	Ricc	о Со	nstructio	contractor (9) on Corp	·				
Street Address	****				Street 282		ess k Road						
City, State, Zip Code							Zip Code , NJ 080						
Project Manager for Monitoring Firm			Telepho		Teleph 856.4			1000000	nse N :04	No.			
Start Date (10) 04/13/2017	05/02/2	2017	npletion	Date (11)	Name Andr	S	SHA Monito Ricco	OF .					
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Other - Describe: Scope of Work (Check All That Apply)							, NJ 080	31					
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Location of	N	Locati	ly	De	escription	,,	on-exemp	ted (*) and No	-Friat	DIE PIO	Abate		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole intenar odial S (12)	nce/	Asbestos Cor (i.e. therma surfa	taining M	lateria s insu T, or	lation,	Amou (Spec SF or I	1	Remova	Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler Ricco Construction Corp		Н	JDEP W auler ID 28909	No. of Wa	Yards ste 6		Market 198	of Registered I	andfill				
City, State Bellmawr, NJ					sal Date		City, St Allowa						
Completed by Andrew Ricco			Signaturé	1	reus	Min	1985	ate 4/03/2	2017				

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Date of Notification (1)		Name of	Building Owner/O	perator	(2)	1.	PR	- 7	201	7	\square
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DCA Cancellation	-	201	zanne 1	400	ver						
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Lamden			SE ONLY)			(32)		w.j			
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Edward Knorr	. 1		9-1166		629-1166	010					1
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2160 sf or ≥260 if	☐ Demoli			_	Mini-Enclosus	eS T	E0 C-1 4	-	~		1
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Date of Notification (1) 4/3/17				Name of Steve	Building Camp	Owner/C	Operator	(2)			AF	1 -	7	201	1	U
Agencies Notified EPA DEP	Type Notification X				te, Zip Co					AS	BES t	OS	CO	NTR VG	OL 8	Š.
DOL DOH DCA	Amendment Emergency justification) Cancellation	(including		Name of Steve	, NJ 07 Contact					Tal	enhone	Num	iber	*	_	
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County (6) Passaic					Code (7) JSE ONLY)		Curre	nt Use (Prio	r if be	ing der	olish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.		ABS	Envir	tement Con onmental			.LC				
Street Address							PO		83, 4 E G	ate D	rive	-				
City, State, Zip Code Project Manager for Mon	altoring Firm			Telephor	ne No		Glen		ip Code , NJ 074	18	Licer	e No	,			
Start Date (10)	morning i iiiii	Schedule					973-	764-2			703		··			
4/14/17 Occupancy Status During	a Abatement (Chec	5/13/17	7	ipicuoi i				Addres				-				
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first floor	closet			х		pipe	insula	tion			8 LF		х			
Name of Registered Was Freehold Cartage City, State	ste Hauler		Н	JDEP W auler ID 5939					Name of F Westerr	Ber	ks La					
Freehold, NJ Completed by A. Scott Higgins	40.	Title Presi	dent			TBD	ignature	B	Birdsbo	ro, P	Α	Dat 4/3	e 3/17			

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(13)		1		T		other in	iscellari	eousj				Val	=	llat	ure														
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A. Scott Higgins			ident			Sig	3.10.016	111		_	4/3/																		

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ame of Monitoring Firm Hired by Building C	Owner (8)		ASCM	No.			of Abateme	ent Cont	ractor (9)						
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tart Date (10)	Scheduled	d Com	pletion [Date (11)		Name	of OSHA N	Monitor							
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O St. Matters of social		Location ormall				scription	n of						Ту	ре	_
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(10)	Yes	No	N/A	e. Og								=		ate	a
Kitchen	1,50	112	X		FI	oor Ti	ile		185	SF		х			
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		1	IDEE !!	Vant-	Culti	Yards	I N	ame of	Registere	Lar	ndfill				
Name of Registered Waste Hauler United Roll Off		Н	JDEP Wauler ID 2459		of Wa			G.R.O.	1 75						
City, State					Dispo	sal Dat		ity, Stat			200			0)	
Elm NJ					4/6/1			Viorris	ville PA	90					
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