Date of Notification (1)			I Na	me of Build	ing Owner/Operato	25 (2)	14 t	API	7 1	U	201/	
	4/6/17			1,40	inc or balla	ing Owner/Operato	Adan	ns L					-
Agencies Notified	Type Notific	cation		Str	eet Address	s		A	BEST	U5 (JUN	THE	JE 8
EPA DEP	Initial Amende	d		_					Li	CEN	SIN	,i	
⊠ DOL	Amendm	nent#		Cit	y, State, Zip								
⊠ DOH	☐ Emerger justificat	ncy (includ	ing	_		Han	nilton Twp.	NJ 086	10				
☐ DCA	☐ Cancella	tion		Na	me of Conta			Tele	hone Nur	mber			
				1_		Bob Adams							
Name of Facility Where	Abatamant is	Takina Di-	(0)	F	ACILITY IN	FORMATION							
Traine of Facility Where		Residen					Type of Fac		-				
Street Address		Colucii	ııaı				School (F	(-12)					
4							Other (i.e	ter 8 (Othe	commen	12) cial bu	ilding	ıs	
City (5)							homes, e	etc.)					
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County (6)			, 1		ounty Code (7) (STATE		/Dries if he	2	_ -	6	5+/-	
	Mercer			US	SE ONLY)	i) (SIAIL	Current Use	(Prior if be	ng demo	lished)		
Name of Monitoring Firm		ling Owner		ASCI	M No.	Name of Abaten	nent Contractor	(9)					
(8)	MECS						vens Enviro		Service	es I	nc		
Street Address	70-					Street Address			501110	,,,,,,	nc.	_	
0:4 01-4 7: 0	PO Box	341					PO	Box 32	2				
City, State, Zip Code	roccyriales N	VI 0051	_			City, State, Zip C	ode						
Project Manager for Mo	rosswicks, 1	NJ 0851					Allento	wn, NJ	8501				
	eisgarber		1	ephone		Telephone No.	0.0600	Lice	se Ne.				
Start Date (10)		cheduled (-		98-4070	(609) 25			(0049	3		
4/19/17			4/21/		ate (11)	Name of OSHA N		4ECC					
Occupancy Status Durin	ng Abatement (0	Check only	(one)	1/		Street Address		MECS					
▼ Facility Closed/Vacate	ed During Entire	e Period of	Abate	ment		Street Address	PO	Box 34					
	d Outside of No	rmal Facili	ty Hou	rs	}	City, State, Zip Co		DOX 34					
Other - Describe:						- 1,7, - 1010, <u>- 1,</u> 5 O.	Crosswic	ks NI)8515				
Scope of Work (Check a	II that apply)			lance — a r		00.000						_	_
≥3 sf or ≥3 lf		₩ Re	enovat	ion		☐ Full Con	tainment with N	egative Pr	ssure				
≥160 sf or ≥260 lf			molitic			Gloveba	g Procedure						
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TO BE ABAT		Cu	ustodia		(i.e., t	os Containing Mate thermal systems in	erial (ACM)	Amo (Spe		_		ш	
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Completed By	TTi	itle				Signature	1	1410111	ville, I	Α			_
Mahlon E. Stev	ens	Pro	ject	Man	ager	////				4/6/	17		
SB-41						1///							

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Date of Notification (1) 04 / 05	1	17				g Owner/Operator ((2)		API	R 1	0 2	017	
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						717117			_		-		
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North Plainfield							Square Feet	# 01	loors	B	ldg. A	ge	
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Name of Monitoring Firm Hired b	y Buildin	ng Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Bio Terra Solutions	170		. ,				NAGEMENT L						
Street Address						Street Address							
P.O. Box 1224						27 Outwater	l ane						
City, State, Zip Code						City, State, Zip Co							
Union, NJ						Garfield, NJ							
Project Manager for Monitoring F	irm		Tel	ephone	No.	Telephone No.	0.020	Lice	se No.				
Rick Eustaquio				73-494		973-928-4888			18				
Start Date (10)	Scl	heduled C	comple	etion Da	ite (11)	Name of OSHA M							
04 /14 _ /17		05					NAGEMENT L	LC					
Occupancy Status During Abater	ment (Ch					Street Address							
□ Facility Closed/Vacated Durin	The state of the s			ement		27 Outwater	ano						
Abatement Performed Outside					scribe								
Time of Abatement:Al	M	_PM/	PM		AM	City, State, Zip Co Garfield, NJ							
Scope of Work (Check all that ap	nly)					Garneid, NJ	07026						
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Asbestos-Containing Material TO BE ABATED	(ACM)		inten			stos Containing Ma		0.90266	ount	em	Repair	nca	nclo
IN Facility		Cus		Staff?	(surfacing, VAT,	or		or LF)	Removal	=	Encapsulate	Enclosure
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			П						-				
Name of Registered Waste Haule	er		1 1	NJDEP I	Waste	Cubic Yards of	Name of Regis	stered I	adfill				
Century Waste LLC	544)		1.80	Hauler II	D No.	Waste	IESI Bethi						
City, State				32797	7	As Needed	1	CHOIL L					
Elizabeth, NJ						Disposal Date	City, State	DA.					
Completed By (Print or Type)	1~	ritle.				1 1	Bethlehen	i, PA			. ,		
Allen Monchik		Fitle Project	- 8.7	0000		Signature	$\langle \cdot \rangle_{\Lambda}$		Da	te	~ /	in	
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		NUIII	(Pur	suant 1	to NJAC	8:60 and 5:16)					
Date of Notification (1)			-			Owner/Operator (2		APR 1	0 2	017		<u>.</u>
Date of Notification (1)	4 / 16	,			A	0	tusto wie	nd (a.1				
Agencies Notified	Type Notification			Street A			1001000	ASPESTOS	CON	TRO	 L &	Total Street
☐ EPA								LICEA				
□ DOLWD □	☐ Amended		-	City, Sta	ite, Zip Co	ode	2012-2	Access control of the				acassas y may
⊠ DOH	Amendment		-		RUT	HERFOLD,	JJ 07	070				
☐ DCA	☐ Emergency (justification)		-	Name o	f Contact			Telephone Numbe	I.			- region
(NJAC 5:23-8)	☐ Cancellation			6	CICHAR	n SHUS TO	WICZ.	1-				
						FORMATION			100000000			
Name of Facility When	Ahatement is Tak	ing Place	(3)				Type of Facilit	ty (4)				-
							School (K-	12)				and the same of
	DENTIAL.						Subchapte	er 8 (Other than K-12) , private and commerci	ial build	dings,		
Street Address							homes, et					
Ch. /5\				·			Square Feet	# of Floors	1187 - 87	g. Age		
City (5)	Like Co. o						2100	9		0		
	bil Fond			Count	y Code (7)	(STATE USE ONLY)	Current Use (Prior if being demolish	ed)			
County (6)					te (89)		RE	SIDENTIAL.				
Name of Monitoring Fi	No. irm Hired by Buildin	a Owner i	(8)	ASCM N	lo.	Name of Abatem	ent Contractor	(9)				
Maine of Montonsoning .	an i mod by					A.MAC Cont	racting Inc.					
Street Address					****	Street Address						
Stiget Mudicas						185 Vreeland	l Ave					
City, State, Zip Code						City, State, Zip C	ode					
Oity, otate, Esp over						Midland Parl	k, NJ 07432					
Project Manager for N	Monitoring Firm		Tele	phone N	No.	Telephone No.		License No.				
1 10,000						201-262-584		00156				
Start Date (10)	Sc	heduled C	Comple	tion Dat	e (11)	Name of OSHA I						
4/14	1 16	4.	30	2/1	<u> </u>	Omega Envi	ronmental S	ervices				
Occupancy Status Du	iring Abatement (Cl	neck only	one)			Street Address						
Facility Closed/Va	cated During Entire	Period of	Abate	ment		280 Huyler S	St					
☐ Abatement Perform	med Outside of Non	mal Facili	ty Hou	rs - Des	cribe	City, State, Zip C						
Time of Abatemer	nt:AM	_PM/	PM		AM	Hackensack	, NJ 07606					
Scope of Work (Chec	k all that apply)					ПЕЛС	etainmant with	Negative Pressure				
		de	enoval	tion		Mini-En	closure	racgains rioscare				
≥3 sf or ≥3 lf ⇒160 sf or ≥260 lf			emoliti			G Clovet	an Procedure	1 Non-Friable Procedu	ra			
						∐ Non-Ex	empted () and	1 NOTIFITIABLE / TOCCOL	TAN	ateme	nt Ty	/ne
		-	s Loca Norma			Description	of.		-	T		-
	tion of	Us		lely by	Ashe	Description estos Containing N		Amount	Removal	Repair	Encapsulate	Enclosure
	ning Material (ACM) ABATED	141	ainten		(i.e	e., thermal system	s insulation.	(Specify SF or LF)	ova	air	psu	INSC
IN F	acility	Gu	stodiai 12)	Staff?	and the second s	surfacing, VA other miscellar		37 01 11)	-		late	tů.
{	13)	Yes				outer moderni						
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								24				Ш
			$\forall \Box$	П				o o o o o o o o o o o o o o o o o o o				
Name of Registered	Waste Hauler		17	NJDEP		Cubic Yards of		Registered Landfill				250000
Newark Carting				Hauler I		Waste 2		A Bethlahem Landf	ill Co	rp		
City, State		and the second second		O TOP C		Disposal Date	City, State					
Newark, NJ						4/14/160	* Bethla	hem, PA				
Completed By (Print	or Type)	Title	***************************************			Signature	/	D	ate	1 1		
Joseph Vocatur		Vice f	resid	ient			1. Voc	alis)	4/	4/1	6	

ASB-41 JAN 13 * Do not use this form for asbestos licensure exempted activities.

				- 13										
Date of Notification (1) 04 /	05 /	17						Owner/Operator (2)] [APR	0	201	7	t
Agencies Notified ☑ EPA	Type Notifica	ation					ddress	eet	A PARA PROGRAMMAN	ASBESTOS	00	MTR	<u> </u>	- R
□ DOLWD	☐ Amended				City	. Sta	ate, Zip C	ode		LIGE			02	LA
□ DOH	_ Amendme	_				#1000 M	off, NJ		A-70		-			
DCA	☐ Emergen	cy (inc	luding		1	-	f Contact			Telephone Number				
(NJAC 5:23-8)	justification Cancellat				10000000		Wasile			Telephone Number	51			
					F	ACI	LITY IN	FORMATION				(2		
Name of Facility Where A	Abatement is T	aking	Place	(3)					Type of Facility	(4)				
Commercial									School (K-12					
Street Address									Subchapter	8 (Other than K-12)	-1 5		_	
960 Route 22 East									homes, etc.)	rivate and commerc	iai du	liaing	s,	
City (5)				416-0-					Square Feet	# of Floors	Blo	dg. Ag	16	
North Plainfield												3	,	
County (6)					Co	unty	Code (7)	(STATE USE ONLY)	Current Use (Pr	ior if being demolish	ed)			
Somerset														
Name of Monitoring Firm	Hired by Build	ling O	wner (3)	ASC	M No	0.	Name of Abateme	ent Contractor (9)	YI .				
Bio Terra Solutions	i.							ALL PRO MA	NAGEMENT L	LC				
Street Address				111250				Street Address						
P.O. Box 1224								27 Outwater	Lane					
City, State, Zip Code								City, State, Zip Co	ode					
Union, NJ								Garfield, NJ						
Project Manager for Moni	toring Firm			Tel	lephon	e No	D.	Telephone No.		License No.				-
Rick Eustaquio	Ü			2222	73-49		V. 1	973-928-4888		1188				
Start Date (10)	S	chedu	ıled Co	100			Market Control	Name of OSHA M	San and the san an	1,100				-
_04 / 14 /	- C		5 /						NAGEMENT L	I C				
Occupancy Status During				B				Street Address						
☐ Facility Closed/Vacate			11.53		omont			WWW.						
☐ Abatement Performed							ihe	27 Outwater						
Time of Abatement: _								City, State, Zip Co						
								Garfield, NJ	07026					
Scope of Work (Check all	that apply)							□ Eull Cont	tainment with Ne	notivo Procesuro				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			☐ Rer					Mini-Enc Glovebag	losure	gative Plessure				
<u></u>			EN DOI	110110	1011					n-Friable Procedure	1			
					ation						Ab	atem	ent T	ype
Location				lorm	ally lely by			Description of			_	_		
Asbestos-Containing I TO BE ABA)			ance/			stos Containing Ma , thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facilit			Cust		I Staff	?	(1.6.	surfacing, VAT		SF or LF)	ova	=	nsd	Sur
(13)		-	· I	(12	1	\dashv		other miscellane	ous)		-		late	Œ.
Basement Boiler			Yes	No	N/.	-	Mhite R	reeching		2 SF			П	
Exterior- Window						-	Caulkin			52 SF				
Flat Roof- Middle & B	ottom Laye	r				-		Material		1,500 SF				
Roof Perimeter				П		-		lashing Materia	l	160 SF		П	П	П
Name of Registered Was	te Hauler			一	NJDE			Cubic Yards of		L stered Landfill			_	
Century Waste LLC					Haule 327	r ID I	20020000	Waste As Needed		ehem Landfill				
City, State				_	321	31		Disposal Date	City, State					
Elizabeth, NJ								TBD	Bethlehen	n, PA				
Completed By (Print or Ty	/ne)	Title			d = 1000 c			/Signature/		Dat	ρ ,		-	
Allen Monchik	(100)	1,535,000,000	oject	Ma	nager			Signature	LM	Dat	4-1	5/	17	7

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:1207) CONTINUATION SHEET

DEGETVET

				- CONTINUATION SIZE			- 3	1		_
				960 Route 22 East		Abateme	nt Type		L	TOS CONTROL &
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	No Main	ial Staf	Used by ce/Cust	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a I	R e p a i	E n c a p s u l	E n c l o s u r e	ICENSING
Roofing, Top & Bottom	100		1.77.							1
Layer			Х	Roofing Material	1,750 SF	Χ				
Roof Around Perimeter/Roof Vents and				L. 1000 400						
Pipes	_	_	Х	Black Flashing	170 SF	Х				
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Completed by: (Print or type) Allen Monchik	Title:	Project Manager	Signature:	Date: 4/5/17

NO CH

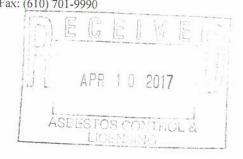
State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

ii) ECEIVA

Data of Natification (1)							/	1171				
Date of Notification (1) 4 / 6		. ~				ng Owner/Operator		III Al	P 1	0 :	2017	
	_ /			U	E Bergen	Mall Owner LLC	c/o Urban Edg	e Properties	Etc. 6		-011	
1	Notificatio	n		Stre	et Address			A.O.E. (100)	-			
⊠ EPA ☐ In	itial nended			2	10 Route	4 East		ASSES	TOS JOEN	00%	TRO)L à
	nended nendment	#1		City	, State, Zip	Code			11-1-1	-Olly	J	
	nergency (na	P	aramus, N	IJ 07652						
(NJAC 5:23-8) jus	stification)		3	Nan	ne of Contac	ct		Telephone Nu	mber			e
☐ Ca	ancellation		7225	A	nthony Sa	lgado		,				
				F	ACILITY IN	NFORMATION		2	-			
Name of Facility Where Abatem	ent is Taki	ng Plac	ce (3)				Type of Facility	(4)				
Bergen Town Center							School (K-12)				
Street Address							→ □ Subchapter 8	Other than K-	12)			
1 Bergen Town Center, S	uite 640						Other (i.e., pr homes, etc.)	rivate and comm	nercial	buildi	ngs,	
City (5)							Square Feet	# of Floors		Bldg.	Ane	_
Paramus, NJ 07652							60,000	2		44	nge	
County (6)				Cou	unty Code (7)(STATE USE ONLY)		or if being demo	lished	7.00		
Bergen						57	Vacant Offic			,		
Name of Monitoring Firm Hired b	y Building	Owner	(8)	ASCN	I No.	Name of Abatem	ent Contractor (9)					
Whitestone Assoc.				NA		I .	ironmental Sys	tems				
Street Address						Street Address	•					
1600 Manor Drive, Suite 2	20					550 East Uni	on St.					
City, State, Zip Code						City, State, Zip C	ode					
Chalfont, PA 18914						West Cheste	r, PA 19382					
Project Manager for Monitoring F	irm			ephone		Telephone No.		License No.				
Jeremy Hassett					2-2700	610-701-9000	Ì	00508				
Start Date (10)					ate (11)	Name of OSHA M	lonitor					
4/3/17				2_ /	17	AET						
Occupancy Status During Abaten	nent (Chec	k only	one)			Street Address						- 100
Facility Closed/Vacated During	g Entire Pe	eriod of	Abate	ment		28 N. Pennel	Road					
Abatement Performed Outside Time of Abatement: <u>7</u> AM	or Norma	I Facili	ty Hou	rs - De	scribe	City, State, Zip Co	ode					
		<u></u>		VIVI		Media, PA 19	063					
Scope of Work (Check all that app	oly)						90 000 000	to the second se				_
≥3 sf or ≥3 If		☐ Re	enovat	ion			ainment with Nega	tive Pressure				
≥160 sf or ≥260 If		☐ De	emoliti	on		Glovebac	Procedure					
		1	1			☐ Non-Exer	npted (*) and Non-	-Friable Procedi	ıre			
Location of			Loca: Norma						А	batem	ent T	уре
Asbestos-Containing Material	(ACM)	Use	ed Sole	ely by	Asbes	Description of tos Containing Mat	erial (ACM)	Amount	Re	Re	Щ	m
TO BE ABATED IN Facility			intena todial		(i.e.	, thermal systems in	nsulation.	(Specify	Removal	Repair	icap	nclo
(13)		000	(12)	Otan:		surfacing, VAT, other miscellaned		SF or LF)	Val	~	Encapsulate	Enclosure
		Yes	No	N/A	1	other miscellanet	Jus)			1	ate	
2 nd Floor			П		VAT & N	lastic		3000 SF		-		
2 nd Floor				-				3000 SF		Ш	Ш	Ш
1 st Floor		JASS - SE	Ш		Pipe Ins	ulation		555 LF	\boxtimes			
1 1001			Ш		VAT & M	lastic		450 SF				
						-				П		
Name of Registered Waste Hauler			1 - 1 - 1	JDEP V	A THE PARTY OF THE	Cubic Yards of	Name of Registe	red Landfill				
Richard Burns & Co			Н	auler II	No.	Waste	and the second s	ks Communi	v Lar	ndfill		
City, State				19955		40 Disposal Date	City, State		, _uı	. 5011111		
Phila., PA						TBD	Birdsboro, P	Δ				
completed By (Print or Type)	Title	-				Signature	ν.ν.l.			3	-	
Mark Griffin		stimat	or			Signature	AM	Da	ite /	,	/	
B-41			erentii				1/1//		1/6	01	17	
V 44							V		11	1		



Bergen Town Center



Alliance will abate pipe and fitting insulation by wrap & cut methods.

Pipe fittings (elbows) on fiberglass pipe runs – Fitting will be double wrapped in 6-mil poly, pipe will be cut beyond the fitting into the non-asbestos insulated pipe. Wrapped fitting will be placed into disposal bags.

Pipe runs with asbestos insulation – Pipe run will be double wrapped in 6 mil poly. Insulation sections will be removed every 10 - 12 feet by glove bag methods within a tented enclosure. Pipe sections will then be cut out and lowered to floor.

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Page	1	of 1-	
D			

Print Form

EDS17-021-3	(Pur	ATION suant t	OF ASE o NJAC	BESTOS AB 8:60 and 1			heck # 27	731 APR 10	2017	1		
Date of Notification (1)	N	ame of	Building SCH	OWNER/OPE	erator (2 TRICT	2)	ACEI	ESTOS CO	NTROI	- &	-	
2 23-2017	- 0	troot A	ddress				ASDI	LICENSI	VG			
Agencies Notified Type Notification	2	2175 L	_emoir	ne Avenue)	٤		and the same of the statement of the same				
EPA DEP DOL Initial Amended Amendment #_ Emergency (includin	(City, Sta Fort L	ate, Zip (ee, NJ	Code			Telep	hone Number			-	
DOL Amendment ** Emergency (including)	ng i	Name o	of Conta	ct							_	
iustification)		Jack l	DeNich	nilo	221		_				\dashv	
X DCA		FAC	ILITY II	NFORMATIO	JN	Type of Facili	ty (4)					
Name of Facility Where Abatement is Taking Place Lewis Cole MS	e (3)					School (Subcha	K-12) oter 8 (Other	r than K-12) commercial bu	uildings,	home	s,	
Street Address						etc.)			Bldg. A	ge		
467 Stillwell Ave						Square Feet 40,000 +	2	Floors	50+			
City (5) FORT LEE			ty Code	(7)		Current Use	(Prior if beir	ng demolished)			
County (6)		(STAT	E USE C	NLY)	_	School		(0)				1
	(0)	TAS	SCM No.		Nam	e of Abatemen	t Contractor	(9)				
Manitoring Firm Hired by Building Owner	er (8)		127			Group, Inc						
Westchester Environmental					Stre	et Address) Hamburg	Tpke					4
Street Address					011.	State Zin Co	de					
307 North Walnut Street					Blo	omingdale,	NJ 07403	3				-
City, State, Zip Code West Chester, PA 19380			1 1	No.	Tele	ephone No.		License No.	•			
Project Manager for Monitoring Firm		Tele	ephone 1 0-431-	7545	(20	01)710-972	5	01004				7
Philip Conteh	cheduled (Na	me of OSHA M	lonitor					
Start Date (10)	-13-201	7	,,,,,,,	500M 60 752		L Group, Inc						
					Str	reet Address 40 Hamburg	Tpke					-
4-10-2017 Occupancy Status During Abatement (Check C	rind of Ab	atemen	nt		Cit	ty State 7ip C	ode	2009				
Sacility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	Facility H	lours			В	Bloomingdale	e, NJ 074					-
Scope of Work (Check All That Apply)			59.3			× Full C	ontainment v	with Negative F	Pressure			1
	× Re	novatio	on			Mini-E	nclosure					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	De De	emolitio	n			Glove Non-E	bag Procedi xempted (*)	ure) and Non-Fria	ble Proc	edure Abate	ment	
X 2100 51 51						Name of the last o			/	Ty		
		Locatio			Dosc	ription of					ш	-
Location of	Use	formally d Solely	y by	Asbestos	0+0	ning Material (ACM)	Amount (Specify	Re	Re	Encapsulate	Enclosure
Ashartas Containing Material (ACIVI)	Mai	intenan todial S	ice/	(i.e. th	ermai s	ng, VAT, or	011,	SF or LF)	Removal	Repair	psul	osur
TO BE ABATED In Facility	Cusi	(12)	ilan:		other mi	scellaneous)			<u>a</u>		ate	0
(13)		No	N/A					160 LF	X	-		
	Yes		140.5	Pir	oe Fitti	ing Insulatio	n			-		+
Boys Bathroom		X	-	Pir	oe Fitti	ing Insulatio	n	190 LF	X	-	-	+
Girls Bathroom		X	-	1 1						-	+	+
					Cubic	Yards	Name of F	Registered Lan	dfill			
Name of Registered Waste Hauler			NJDEP Hauler I	Waste D No.	of Wa		Minerva	a a				
		(00330	34	TBD	-I Data	City, State	e				
GL Group, Inc					Dispo	sal Date	Mayne	shura, OH				
City, State Bloomingdale, NJ						Signature	2. 0	Julia _	3-23-	-201	7	
Completed by	Title		n†			3	leru J	dullar _	0-20			
Elena Solakov	Pre	esider	10					or asbestos lice	ensure ex	kempt	ted ac	tivitie

GL17-007

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

				4
Page A	c # 2	APR 10	2017 ONTROL &	Form
	Telep	phone Numbe	·r	
f Facility (4) chool (K-12) ubchapter 8 (0 ther (i.e. private.)	Other	r than K-12) commercial b	ouildings, homes	5,
e Feet 00 +	2	Floors	Bldg. Age 50+	
nt Use (Prior if ol	bein	g demolished	1)	
ement Contra- Inc	ctor ((9)		
s urg Tpke				
p Code ale, NJ 074	103			
o. 9725		License No. 01084		
IA Monitor Inc				
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Date of Notification (1)			N	lame of B Hasbrou	uilding O	wner/Ope	erator (2)		i Ai	11	0 20		-	
4-3-2017 Agencies Notified	Type Notification			Street Add						ASBES	STOS	CONT	ROL	. &	
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EPA DEP	Amended	#	C	City, State Hasbrou	, Zip Cod	le ahts N	J 0760)4							
× DOL	Amendment : Emergency (Name of C		grito, rit				Telepho	ne Num	ber			
X DOH X DCA	justification) Cancellation			Mihalitsi		Serry									
				FACILI	TY INFO	RMATIO	N	T	ailiby (A)						_
Name of Facility Where	Abatement is Taking	g Place (3)						Type of Fa							
Hasbrouck Heights	S HS/IVIS							Subc	ol (K-12) hapter 8	(Other th	an K-12	2)			
Street Address 365 Boulevard								Othe etc.)	r (i.e. priv	vate & co	mmercia	al buildii	ngs, h	omes	ò,
City (5)								Square Fe		# of Flo	ors	1000000	lg. Ag	е	
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County (6)				County Co				Current U	se (Prior	if being o	lemolist	iea)			
Bergen		0		ASCM			Name	of Abateme	ent Contr	actor (9)					
Name of Monitoring Fire Westchester Envir	m Hired by Building on conmental	Owner (8)		00127				roup, Inc							
Street Address	Offitionia							Address							
307 North Walnut	Street							Hamburg							
City, State, Zip Code								tate, Zip Co mingdale		403					
West Chester, PA				Telephon	e No		-11	one No.	, 110 01		cense N	lo.			
Project Manager for Mo Philip Conteh	onitoring Firm			610-43				710-972	.5	0.	1084				
Start Date (10)		Schedule	d Con	npletion D	ate (11)			of OSHA N							
4-13-2017 at 4:30		4-21-20		t 3:30 p	m			Group, In	C						
Occupancy Status Dur								Address Hamburg	Tpke						
Facility Closed/Va Abatement Perfor	cated During Entire med Outside of Nor	Period of A	baten	nent		-		tate, Zip C							
Other – Describe:	med Outside of Non	mai r acinty	Tiours					mingdale		7403					
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Asbestos-Containi TO BE A			intena	ance/ Staff?	(i.e	. thermal	system	s insulation	n,	(Spe		Remova	Repair	псар	nclo
In Fa	cility 3)	0000	(12)				niscella			0. 0	/	ioval	oair	Encapsulate	Enclosure
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	Office		X		F	Pipe Fit	ting Ir	sulation		13 E	EVT	X			
Name of Registered V				NJDEP V		Cubic	Yards			Registere	d Landi	ill			
GL Group, Inc				Hauler ID		of Wa	ste	1	Minerva	3					
City, State						-	sal Dat		City, State						
Bloomingdale, NJ						TBD		\	Waynes	sburg, (
Completed by		Title					Signatu	re Ca		lulla	, [Date 4-3-20	17		
Elena Solakov		Pres	iden	Ť				P ()	1	1 100 -	/		150		

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:120-7)

Page 2 of 2 Check #2791

CONTINUATION SHEET

								Abatem	ent Typ	е
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma //	ation No Used Solely be aintenar Custodi Staff (12	y nce al 2)	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)		Amount (Specify SF or LF)	R E M O V A L	R E P A - R	ENCAPSUL	ENCLOSURE
Room 108	Yes	No X	N/A	Pipe Fitting Insulation	-	28 EVT		- 13	-	
Room 108	+	^	_	Pipe I ittilig irisdiation	\dashv	20 2 1	,			
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Completed By: (Print or Type) Elena Solakov	Title	President	Signature Solution Date 4-3-2017

Page 1 of 1 Check # 2792 APR 10

Print Form

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) GL17-007 Lincoln Name of Building Owner/Operator (2) Date of Notification (1) Hasbrouck Heights BOE ROL & 4-3-2017 Street Address Type Notification Agencies Notified 379 Boulevard Initial City, State, Zip Code **EPA** Hasbrouck Heights, NJ 07604 Amended DEP Amendment # Telephone Number DOL × Emergency (including Name of Contact justification) Mihalitsianos Gerry DOH × Cancellation DCA **FACILITY INFORMATION** × Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) Lincoln Elementary School Other (i.e. private & commercial buildings, homes, Street Address etc.) Bldg. Age # of Floors 302 Burton Ave Square Feet 50+ 2 40.000 +City (5) Current Use (Prior if being demolished) Hasbrouck Heights County Code (7) (STATE USE ONLY) School County (6) Name of Abatement Contractor (9) Bergen Name of Monitoring Firm Hired by Building Owner (8) ASCM No. GL Group, Inc 00127 Westchester Environmental Street Address 140 Hamburg Tpke Street Address 307 North Walnut Street City, State, Zip Code Bloomingdale, NJ 07403 City, State, Zip Code West Chester, PA 19380 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01084 (201)710-9725 610-431-7545 Philip Conteh Name of OSHA Monitor Scheduled Completion Date (11) GL Group, Inc Start Date (10) 4-21-2017 at 3:30 pm 4-13-2017 at 4:30 pm Street Address Occupancy Status During Abatement (Check Only One) 140 Hamburg Tpke Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Bloomingdale, NJ 07403 Other - Describe: Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation Mini-Enclosure ≥3 sf or ≥3 lf Glovebag Procedure Demolition Non-Exempted (*) and Non-Friable Procedure ≥160 sf or ≥260 lf Abatement Type Is Location Description of Normally Asbestos Containing Material (ACM) Amount Encapsulate Location of Used Solely by Enclosure Remova (Specify Repair (i.e. thermal systems insulation, Asbestos-Containing Material (ACM) Maintenance/ SF or LF) surfacing, VAT, or TO BE ABATED Custodial Staff? other miscellaneous) In Facility (12)(13)N/A YPS No X Entire Boiler X Boiler Room HB Smith Boiler Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler of Waste Minerva Hauler ID No. TBD 0033034 GL Group, Inc City, State Disposal Date Waynesburg, OH TBD City, State Date Bloomingdale, NJ Signature 4-3-2017 lerm Soluller Title Completed by

President

Elena Solakov

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

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Page 1 of 1			0	004		
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EDS17-064		NOTI	(Pursu	ION OF ant to N	of New Jerse ASBESTOS IJAC 8:60 an	ABATEN d 12:120	MENT)	check #2 Page 1 of	3/1	1 0	2017			
Date of Notification (1) 3-30-2017			Во	gota B	ilding Owner/ oard of Ed	Operator ucation	(2)					<u> </u>		
	oe Notification		Stre 1 H	eet Addre Henry (ess C. Luthin P	lace			ASBEST	OS CO CENSII	NIH VG	UL 8	4	
× EPA DEP DOL	Initial Amended Amendment #_		City	, State,	Zip Code NJ 07603									
	Emergency (in justification)	cluding	Nai	me of Co					Telephone Nur	mber				
× DOH × DCA	Cancellation				Y INFORMA	TION							\exists	
Name of Facility Where Aba Bogota High School	tement is Taking	Place (3)					X Sch	ool (K-12) ochapter 8	(Other than K-1 rate & commerc	2) ial buildin	ias, h	omes,		
Street Address 2 Henry C. Luthin Place	ce						Square F)	# of Floors		g. Age		-	
City (5)							10,000		2	50	+			
Bogota County (6)			Co	ounty Co	de (7) E ONLY)		School	Use (Prior 	if being demolis	snea)				
Bergen Name of Monitoring Firm Hi	red by Building C	wner (8)	4	ASCM N	V9 72550	Nam	e of Abaten Group, Ir		actor (9)					
Ahera Consultants Inc	3			0057		Stree	et Address							
Street Address PO Box 385) Hambur	Market	ike			-3000		
City, State, Zip Code Oceanville, NJ 08231	-0385					Blo	State, Zip omingda	le, NJ 07						
Project Manager for Monito			Te	elephon	e No. 52-1833	Tele	phone No. 1-710-972	25	License 01084					
John Smoyer		Scheduled		10		Nan	ne of OSHA	Monitor						
Start Date (10) 4-14-2017		4-18-20	17				Group, I					41		
Occupancy Status During	Abatement (Chec	k Only One	e) hateme	ent		14	0 Hambu	rg Turnp	ike					
Facility Closed/Vacate Abatement Performed Other – Describe:	d Outside of Norn	nal Facility	Hours			City	, State, Zip oomingda	Code ale, NJ 0	7403					
Scope of Work (Check All	That Apply)						П	Containme	ent with Negativ	e Pressu	re			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		× Re	enovat emoliti	ion on			× Mini	-Enclosure	e dure					
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Location Asbestos-Containing I TO BE ABA In Facilit (13)	Material (ACM) TED	Use Mai	d Sole intenar todial S (12)	ly by nce/	(i.e. the	Containir ermal syst	ng Material tems insula	(ACM) tion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A		Pine Ins	sulation		55 LF	X				
Basement Boi	ler Room	X		-		i ipo ini								
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Name of Registered Was Newark Carting, Inc	ste Hauler		1	NJDEP \ Hauler II)4509	O No.	Cubic Yar of Waste ГВD	rus	Grows		15.25				
City, State				, 1000		Disposal TBD	Date	City, Sta Morris	ate ville, PA					
Newark, NJ Completed by		Title				TRANSPORT	nature ,	Verm S	1. N. a.)	Date 3-30-	2017			
Elena Solakov		Pres	sident	t				Jenn 00					212	

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

(Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: 17-98 Name of Building Owner/Operator (2) Date of Notification (1) 10 4 1/10 4 1/11 17 karen bell Type Notification Agencies Notified ASBESTOS CONTROL 8 Street Address Initial **EPA** LICENSING Amended DEP City, State, Zip Code Amendment #: M DOL M Emergency MONTCLAIR, NJ 07042 (including Telephone Number M DOH Name of Contact justification) ☐ DCA karen bell Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) karen bell Other (Private/Commercial Street Address Bldgs./Homes, etc. # of Floors Bldg. Age Square Feet County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) **ESSEX** MONTCLAI 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 License Number Telephone Number Project Manager for Monitoring Firm Phone Number 01169 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. 04/08/17 04/30/17 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 Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure > >3 sf or >3 lf □ Renovation Glovebag procedure >160 sf or >260 lf Demolition Non-Exempted (*) and Non-friable procedure R E Is location normally used solely E Location of е e by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m р staff(12) C (Specify SF or material (acm) to be C material (ACM) 0 а а abated in facility (13) L V Yes No N/A p A 148 l ft \boxtimes PIPE INSULATION BASEMENT. **BOILER INSULATION-bricks** X 35 sq ft BASEMENT. Name of Registered Landfill Cubic Yards of Waste Registered Waste Hauler NJDEP Hauler ID# D & S RESTORATION, INC. 13506 TULLYTOWN, RESOURCE RECOVERY 2 yds. Disposal Date City, State City, State 04/10/17 TULLYTOWN, PA PATERSON, NJ 07503 Signature Date Completed by (Print or Type) Title

BOGDAN JOLDZIC

PRESIDENT

04/03/17

State of NJ Notification of Asbestos Abatement D&S Proj. #: 17-99 (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 10 4 / 10 4 / 17 liz and anthony festa Agencies Notified Type Notification Street Address ☐ EPA X Initial LICENSING Amended DEP City, State, Zip Code Amendment #: DOL ☐ Emergency mountain lakes, nj DOH DOH (including Name of Contact justification) Telephone Number ☐ DCA Cancellation liz and anthony festa **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) liz and anthony festa 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) mountain lakes Morris 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. 04/25/17 0512/17 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 If Renovation Mini-enclosure ≥160 sf or >260 lf Glovebag procedure Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of R E by maintenance/custodial asbestos-containing E P е Description of asbestos-containing staff(12) Amount n material (acm) to be m n р C material (ACM) (Specify SF or abated in facility (13) 0 C a Yes а No N/A L e BASEMENT. PIPE INSULATION 196 I ft X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D& S RESTORATION, INC. 13506 2 yds. TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date City, State PATERSON, NJ 07503 04/26/17 TULLYTOWN, PA Completed by (Print or Type) Title Signature Date **BOGDAN JOLDZIC** PRESIDENT 04/04/17 ASB-41 Do not use this form for asbestos licensure exempted activities.

State of NJ

D&S Proj. #: 17-97		Not (Pur	tification of A suant to NJA	sbes	tos Abatement 60 and 12:120)		CE	Π	\ <u>\</u>	E	[5]		
CK 70	023				o and 12.120)		<u> </u>	<u>U</u>	/\lambda	<u> </u>			
Date of Notification (1)	- 11	ne of Building Ovestors securit	wner/Operator (2)			APR 1	0 8	2017				
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DOL Emergen		N CONTRACTOR SOCIETY											
DOH (including	Nam	e of Contact	33907										
DCA justification	on)	e or corriact				Telepho	one Numbe	er					
Cancella	tion <u>p</u>	eter m. knize				-	y -						
			CILITY INFORM	MATIC	DN								
Name of facility where abateme	nt is taking place	(3)				Type of Facility							
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Street Address							chapter 8 (C)		
80 east somerset street						Bldgs	r (Private/C s./Homes, e	ommetc.	ercia	Į.			
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					ounty Code (7) tate use only)	Current Use (F	Orior if hoir	a don		الممطا			
raritan Name of Monitoring Firm Hired b	middle						-nor ii bein	ig den	nolisi	nea)			
Name of Monitoring Firm Fired b	y Blag. Owner (8)	ASCM No.		Name of Abateme								
Street Address					D & S RESTO	PRATION, INC.							
City, State, Zip Code				_	20 California City, State, Zip Coo		AND DESCRIPTION OF THE PARTY OF	State of the					
Project Manager for Monitoring Fir	m	Phone Num	ber	-	Paterson, NJ Telephone Numbe		License	Numh	ner.				
					973-345-802			1169					
Start Date (10)	Sched. Co	mpletion Date (1	11)	_	Name of OSHA Mo								
04/17/1717	05/12/17				D & S Restora	ation, Inc.							
Occupancy Status During Abateme		ne)	A TONE DEPOSITOR OF	Name of Street	20 California A								
Facility closed/vacated during Abatement performed outsid	g entire period of e of normal facilit	abatement. y hours-			City, State, Zip Coo					_			
Describe: NORMAL Other-Describe: NORMAL	HOURS			-	Paterson, NJ (7503							
Scope of Work (check all that app	ly)				Г	Full Containment w							
≥ 3 sf or >3 If	Renovation				<u> </u>	Mini-enclosure	//negative	pressi	ure				
≥160 sf or ≥260 lf □	Demolition					Glovebag procedu							
Location of	Is location nor	mally used solel	vl			Non-Exempted (*)	and Non-fr	riable R T			9		
asbestos-containing	by maintenand staff(12)	e/custodial		n of a	sbestos-containing	Amount		e	R e	E n	E		
material (acm) to be abated in facility (13)			material (A	ACM)	spesios-containing	(Specify S	For	m o	p a	С	n		
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D & S RESTORATION, INC.	NJDÉP Ha 13506	the state of the s	ubic Yards of W yds.	aste	Name of Registere		COME	7					
City, State		Disposal D			City, State	, RESOURCE RE	COVERY	(es:		
PATERSON, NJ 07503		04/18/1			TULLYTOWN	I. PA							
Completed by (Print or Type)	Title		Signature		1	7-0-0	Date		-	ř.			
BOGDAN JOLDZIC	PRESIDENT						04/04/2	017					
ASB-41 *	Do not use this	orm for asbesto	s licensure exer	nntec	activities				50				

State of NJ Notification of Asbestos Abatement 2017-15 (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: Check # 8322 NON Sub 8 Date of Notification (1) 0 Name of Building Owner/Operator (2) 10 12 1/10 16 1/11 17 1 Gill Saint Bernard's School District Agencies Notified Type Notification Street Address ASBESTOS CONTROL & EPA LICENSING Initial P.O. Box 604, St Bernard's Road DEP City, State, Zip Code DOL Amendment Gladstone, NJ 07934 X DOH Name of Contact Telephone Number Cancellation ☐ DCA Tony DeVergilio **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Brook House Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 11 St Bernard's Road Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Gladstone Somerset Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. JAG Environmental LLC B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 3111 Route 38, Suite 11, Unit 122 City, State, Zip Code City, State, Zip Code Mt. Laurel, NJ 08054-9762 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number Phone Number License Number (973)696-6869 00378 856-701-3152 Stephen Graham Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 04/18/2017 04/19/2017 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) ☐ Demolition | Renovation Full Containment w/negative pressure Glovebag procedure \times >3 sf or >3 lf X Mini-enclosure ≥160 sf or ≥260 lf Non-friable procedure Is location normally used solely E Location of Е by maintenance/custodial е n asbestos-containing Amount Description of asbestos-containing m n staff(12) p C material to be (Specify SF or material (ACM) 0 a а abated in facility (13) LF) Yes No N/A p Main house living room pipe (wrap & cut) X 20 If Apartment # 2 38 If X pipe (wrap & cut) Registered Waste Hauler Cubic Yards of Waste NJDEP Hauler ID# Name of Registered Landfill B & G Restoration, Inc. 19563 Tullytown Resource & Recovery Center City, State Disposal Date City, State Lincoln Park, NJ 04/20/2017 Tullytown, PA Signature Completed by (Print or Type) Title Gordana Luna Gordana Luna Secretary/Treasurer 04/07/2017

B & G Restoration, Inc.

105 Ryerson Road, Lincoln Park, NJ 07035 Tele # 973-696-6869, Fax # 973-696-5929



April 7, 2017

NJ Dept. of Labor Asbestos Control & Licensing 1 John Fitch Plaza, 3rd Floor P.O. Box # 949 Trenton, NJ 08625-0949

Re: Brook House

11 St Bernards Road Gladstone, NJ 07934 Job start: 04/18/2017

The asbestos will be wrapped and cut using the following method:
Limited Containment with negative pressure
Wet the pipe insulation with amended water
Wrap the wet insulation with 2 layers of 6-mill poly
Hepa vacuum the floor.
Have a shower for the men for decontamination.
PCM air clearance per each limited containment

This is the method we have always used on non-subchapter-8 work. If you should have any question please feel free to contact me at your earliest convenience.

Respectfully submitted,

Gordana Luna

B & G Restoration, Inc.

jordana Luna

State of NJ Notification of Asbestos Abatement 2017-41 (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: Check # 8321 Date of Notification (1) Name of Building Owner/Operator (2) 10 14 1/10 17 1/11 17 1 Robert Parra Type Notification Agencies Notified Street Address EPA X Initial DEP City, State, Zip Code Amendment X DOL Pompton Plains, NJ 07444 X DOH Name of Contact Telephone Number Cancellation ☐ DCA Robert Parra **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Robert Parra Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Pompton Plains, NJ 07444 Morris Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number License Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 04/17/2017 04/18/2017 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition |X | Renovation X Full Containment w/negative pressure Glovebag procedure Mini-enclosure Non-friable procedure ¥ >3 sf or >3 lf >160 sf or >260 lf Is location normally used solely Location of E by maintenance/custodial e n asbestos-containing Amount Description of asbestos-containing m n staff(12) p С (Specify SF or material to be material (ACM) 0 a a abated in facility (13) L Yes N/A No basement office VAT/mastic X 120 sf Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill 19563 B & G Restoration, Inc. Tullytown Resource & Recovery Center Disposal Date City, State City, State Tullytown, PA Lincoln Park, NJ 04/19/2017 Signature Completed by (Print or Type) Cordana Luna

04/07/2017

Gordana Luna

Secretary/Treasurer

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

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Date of Notification (1)	7 /	17					3.0	vner/Operator (2 unications	2)	A	PR 1	0.2	017	- 1
	7 / -		_		ver	izon Cor	nmu	inications		Ju L	1 11 1	0 2	011	-
Agencies Notified	Type Notifica	ation				Address			1					
⊠ EPA	☐ Initial				15	East Mor	ntgo	mery Place,	Lower Level	ASBES)L&
☑ DOLWD	Amended Amendm				City, S	State, Zip 0	Code	í		L	LIGER	CHV	2	
□ DCA	☐ Emergen			3	Pitt	sburgh,	PA	15212						
(NJAC 5:23-8)	justificati		Jiddiiig		Name	of Contac	t			Telephone Nu	mber			
	☐ Cancellat	tion			Ale	x Baylor								
					FA	CILITY IN	IFO	RMATION						
Name of Facility Where A	Abatement is 7	Taking	Place	(3)					Type of Facility	(4)				
Verizon Van Hisevi	lle Central (Office	•						☐ School (K-12					
Street Address				7						Other than K-		ttatta a		
140 West Veterans	Highway								Other (i.e., p homes, etc.)		ierciai t	ullaing	JS,	
City (5)									Square Feet	# of Floors	E	ldg. A	ge	
Jackson Township									6,195					
County (6)					Cour	nty Code (7)(STA	ATE USE ONLY)	Current Use (Pr	ior if being demo	olished)			
Ocean									Office					
Name of Monitoring Firm	Hired by Build	ding O	wner (8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)	W				
USA Environmenta	l Manageme	ent					E	BRISTOL EN	VIRONMENTA	L, INC.				
Street Address							Str	eet Address						
8436 Enterprise Av	e.						1	1123 BEAVER	R STREET					
City, State, Zip Code							Cit	y, State, Zip Co	ode			14 15.7	7-1-1-1-1	
Philadelphia, PA 19	153						E	BRISTOL, PA	19007					
Project Manager for Mon	itoring Firm			Tele	phone	No.	Те	lephone No.		License No.				
Mark Jenkins				10000		-5810	2	215-788-6040		00509				
Start Date (10)						te (11)	Na	me of OSHA M	Ionitor					
4 / 21 /		4	1/	28	_ / -	17	E	BRISTOL EN	VIRONMENTA	L, INC				
Occupancy Status During	Abatement (Check	only o	ne)			Str	eet Address		88				
☐ Facility Closed/Vacate							1	1123 BEAVER	R STREET					
Abatement Performed						cribe	Cit	y, State, Zip Co	ode					
Time of Abatement: _		PIV	1/5.00	PIVI- <u>1.</u>	30AIVI		E	BRISTOL, PA	19007					
Scope of Work (Check al	that apply)							M = "0 - 1						
☐ ≥3 sf or ≥3 lf			⊠ Re	novati	on				ainment with Neg	gative Pressure				
≥160 sf or ≥260 lf			☐ De						Procedure					
						1		☐ Non-Exer	mpted (*) and No	n-Friable Proced				
				Locat Iormal				Description	_		A	batem	ent T	уре
Location Asbestos-Containing		1)		d Sole		Ashe	stos	Description of Containing Mar		Amount	Rei	Repair	En	Enc
TO BE ABA	TED	,		ntena			., the	ermal systems i	insulation,	(Specify	Remova	pair	aps	Enclosure
IN Facilit (13)	ty		Cusi	odial 8 (12)	otan?			surfacing, VAT, ther miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
(13)		İ	Yes	No	N/A		Ot	nei miscellane	ous				te	
See attached			\boxtimes	П										
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Name of Death 1981	(- 11- 1-		Ш		<u> ГРЕБ.</u>	0/		hie Varde - f	News - (Dec)	keep al 1 = = 1000			Ш	Ш
Name of Registered Was		1110		10000	JDEP \ auler II			bic Yards of aste	Name of Regis					
SERVICE TRANSPO	JKI GKUUF	, INC	··		20990		1,200,00		MINERVA	LANDFILL				
City, State							Dis	posal Date	City, State					
NEW CASTLE, DE									WAYNESB	URG, OH				
Completed By (Print or Ty	/pe)	Title						Signature	Q (2012) 949	4	Date		_	
Patrick T. DeCaro		Es	stimat	or				Patric	M.T. DOC	an / Mc	4-	7-	(7	

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



Van Hiseville Central Office 140 West Veterans Highway Jackson Township, NJ 08527

	BASE BID	The Charles	
Location	Quantity	Number of Estimate d Shifts	Total Dollar Amount
1 st Floor-Boiler Room	Removal of 36 LF of Pipe Fitting Insulation, 130 SF of Duct Insulation, 90 SF of Boiler Breeching/Stack Insulation and 150 SF of 9"x9" Gray VAT/Mastic (1 Phase)		
1 st Floor-Boiler Room	Demolition/Removal of Boiler in its entirety, associated Ductwork and Header, designated Piping, associated Fire Brick/Brick Base Support/Curbs		
1st Floor-Vestibule	Removal of 15 SF of 9"x9" Gray VAT/Mastic		
1 st Floor-AC1-1 Area	Removal of 3 SF of Thermal Wrap Insulation and 20 LF of Pipe Fitting Insulation (1 Phase)		
1 st Floor-HSB Room	Removal of 11 LF of Valve/Pipe Fitting Insulation, 220 SF of 9"x9" Gray VAT/Mastic and 20 SF of 12"x12" Gray VAT/Mastic (2 Phases)		
1 st Floor-Generator Room	Removal of 4 LF of Valve/Pipe Fitting Insulation, 8 SF of Vibration Damper Cloth, 420 SF of 9"x9" Gray VAT/Mastic (1 Phase)		
1 st Floor-Plant Storage Room	Removal of 6 LF of Valve/Pipe Fitting Insulation and 130 SF of 9"x9" Gray VAT/Mastic (1 Phase)		
1 st Floor-Generator Room	Removal of 50 SF of 9"x9" VAT/Mastic (Separate Mobilization)		
	TOTAL I	BASE BID	solare Language appropriate area in the second

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: 17-96 Name of Building Owner/Operator (2) Date of Notification (1) 0 4 / 0 3 / 1 7 ryan fahy Type Notification Agencies Notified Street Address ASBESTOS CONTROL & Initial LICENSING Amended DEP City, State, Zip Code Amendment #: DOL M Emergency WESTFIELD, NJ 07090 (including DOH Name of Contact Telephone Number justification) DCA ryan fahy Cancellation FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) ryan fahy Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) WESTFIELD UNION Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) 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 Telephone Number License Number Phone Number 973-345-8020 01169 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. 04/04/17 Street Address 04/21/17 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 Mini-enclosure
Glovebag proce >3 sf or >3 lf X Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of E е by maintenance/custodial e n Amount asbestos-containing Description of asbestos-containing n m p staff(12) C material (acm) to be (Specify SF or material (ACM) C 0 a а abated in facility (13) Yes No N/A V p PIPE INSULATION 80 1 ft X BASEMENT X attic vermiculite attic insulation 570 sq ft Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 TULLYTOWN, RESOURCE RECOVERY 7 yds City, State Disposal Date City, State 04/05/17 PATERSON, NJ 07503 TULLYTOWN, PA Signature Completed by (Print or Type) Date PRESIDENT **BOGDAN JOLDZIC** 04/03/2017

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

CK 25759	2		140					8:60 and 5:1						
Date of Notification (1)	0				Nam	e of Buildir	na (Owner/Operator ((2)				-	
04/	06 /	1	7		0.000			ric Company	(-/					
Agencies Notified	Type Notifi	ication	į.		Stree	et Address								
☐ EPA	☐ Initial				60	01 Tonell	le A	Avenue						
□ DOLWD		55 27			City.	State, Zip	Cod	de						
☑ DHSS	Amend		_					NJ 07047						
☐ DCA (NJAC 5:23-8)	☐ Emerge justifica	ency (in	ncludin	g	A Charles	e of Contac		, 140 07 047		T-I				
(1407/0 3.25-0)	☐ Cancell				II I STATE SOURCE	na Olsso				Telephone Num	iber			
					FA	CILITY IN	VF(ORMATION		Pil .			-	
Name of Facility Where A	batement is	Takin	g Place	e (3)					Type of Facility	(4)				
Former General Ele	ctric Facil	ity							School (K-12					
Street Address							-		☐ Subchapter 8	8 (Other than K-12	2)			
6001 Tonelle Avenu	е								Other (i.e., p homes, etc.)	rivate and comme	rcial b	uildir	ıgs,	
City (5)									Square Feet	# of Floors	E	Bldg. /	Age	
North Bergen									127,000	2		61		
County (6)					Cou	nty Code (7	7)(S	TATE USE ONLY)	Current Use (Pri	ior if being demoli	shed)			-
Hudson									Vacant	-				
Name of Monitoring Firm	Hired by Bui	ilding (Owner	(8)	ASCM	42.12.16	N	lame of Abateme	ent Contractor (9)					
CB&I					N/A			Superior Aba	tement Inc					
Street Address							S	Street Address						
1515 Broad Street								2 Henderson			36			
City, State, Zip Code Bloomfield, NJ 0700	2 2006							ity, State, Zip Co			Ä			
Project Manager for Monit				T = -1		N	-	West Caldwe	II, NJ 07006					
Gary Wyrwa	oning Firm				ephone		1 .	elephone No.		License No.				
Start Date (10)		Cabaa				9-37707		(973) 808-161		00411				
3/27/	0.4000.000					ite (11) 17		ame of OSHA M						
			- 3/		_ ′	17_		Superior Aba	tement inc					
Occupancy Status During								treet Address						
☐ Abatement Performed (Dutside of N	ire Pei Iormal	Facilit	Abate / Hou	ment re - Dec	cribe		2 Henderson						
Time of Abatement:	AM	PN	W	_PM		AM		ity, State, Zip Co						
Scope of Work (Check all t	hat apply)					-		West Caldwel	I, NJ 07006					
								□ Full Conta	ainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re	novati molitic				Mini-Enclo						
Z				Honuc	<i>7</i> 11				npted (*) and Nor	n-Friable Procedur	e.			
				Locat							1	atem	ent T	vne
Location o				lorma	lly ely by			Description of	V			_		
Asbestos-Containing M TO BE ABAT		(1)		ntena				s Containing Mate ermal systems in		Amount	em	Repair	nc	incl
IN Facility			Cust		Staff?	(1.6.		surfacing, VAT,		(Specify SF or LF)	Removal	≝.	sde	Enclosure
(13)		-	V	(12)	1			ther miscellaneo		J. J. J. J.	-		Encapsulate	re
Manufacturing Area			Yes	No	N/A	Wood D	1	-l- Fl 1 81			-	_	0	
Old Boiler Room	-					100000000000000000000000000000000000000		ck Floor and M	flastic	55,000 SF				
							alouds.	nsulation)		130 LF 🛛 🗆 🗆				
Old Boiler Room		_				TSI (Tan	k I	Insulation)		150 SF				
N				Ц										
Name of Registered Waste					JDEP V auler ID			ibic Yards of aste	Name of Registe					
Freehold Cartage Inc				110	05412		17/19/19	300	Wayne Disp	osal Inc.				
City, State								sposal Date	City, State				7 7	
Freehold, NJ							5	5/05/17	Belleville, M	11 48111				
Completed By (Print or Type	e)	Title						Signature	01	Dat				
Mary Petrovski		Pr	eside	nt				Max	in Petr	4	-7	-/	7	

ASB-41 MAY 11

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

CK 908	70			(1				C 8:60 and 5:1			5	UY,	5	
Date of Notification (1)	W.				Nan	ne of Buildir	ng	Owner/Operator ((2)					
	28 /	1	7		V	erizon Co	mı	munications	/ Check#	9086 PG1 of	2			
Agencies Notified	Type Noti	fication	1		Stre	et Address								
⊠ EPA	☐ Initial				10	0 Greenv	NO	od Avenue						
⊠ DOLWD			42		City,	State, Zip	Со	de						
□ DHSS	Amend		_	na.	Je	nkintown	n, F	PA 19046						
(NJAC 5:23-8)	justifica		noidan	ig	Nam	e of Contac	ct			Telephone Nun	ber		_	
	☐ Cancel	lation			Al	ex Baylor	r							
					F/	ACILITY IN	NF	ORMATION				-		
Name of Facility Where Al	patement is	s Takin	g Plac	e (3)					Type of Facility (4)				
Verizon Market CO									School (K-12)					
Street Address									☐ Subchapter 8 ☐ Other (i.e., pri			wildin	ne	
95 William Street									homes, etc.)	vato ana comme	TOIGI L	, unum	93,	
City (5)									Square Feet	# of Floors	Е	Ildg. A	\ge	
Newark														
County (6)					Cou	inty Code (7	7)(S	STATE USE ONLY)	Current Use (Price	r if being demoli	shed)			
Essex							_		Offices					
Name of Monitoring Firm H	lired by Bu	ilding (Owner	(8)	ASCN	l No.	1	Name of Abateme						
USA Environmental Street Address							1	AbateTech, In	ic.					
							S		DO Day 25					
	Street Address 36 Enterprise Ave. State, Zip Code Street Address 30 Maple Ave. PO Box 25 City, State, Zip Code													
Philadelphia, PA 191	53						1	Lumberton, N						
Project Manager for Monito				Tel	ephone	No	-	elephone No.	3 00040	License No.				
Mark Jenkins					15-365		'	609-265-2107		00529				
Start Date (10)		Sched	uled C	comple	etion Da	ate (11)	N	ame of OSHA Mo	onitor	1				
_1 / 9 / _	STATE OF THE STATE					17		EMSL Analytic	cal					
Occupancy Status During A	batement	(Check	only	one)			S	treet Address						
☐ Facility Closed/Vacated	During Ent	ire Per	iod of	Abate	ment			200 Route 130	North					
Abatement Performed O				y Hou	rs - Des	scribe	С	ity, State, Zip Coo	de					
Time of Abatement: 7AN		<u> </u>	MA2					Cinnaminson,	NJ 08077					
Scope of Work (Check all th	at apply)							Mello						
≥3 sf or ≥3 lf			⊠ Re	novat	ion				inment with Nega sure	tive Pressure				
≥160 sf or ≥260 lf				moliti				☐ Glovebag		F B	228			
			Ic	Loca	tion	T	_	⊠ Non-Exem	npted (*) and Non-	Friable Procedu				_
Location of				Norma				Description of				atem		
Asbestos-Containing Ma		A)		d Sole intens	ely by			Containing Mate		Amount	Removal	Repair	Enc	Enclosure
TO BE ABATE IN Facility	<u>:D</u>				Staff?	(i.e.		nermal systems in surfacing, VAT, o		(Specify SF or LF)	SVOL	air	apsı	uso
(13)				(12)				ther miscellaneou		SI GILI)	=		Encapsulate	ге
			Yes	No	N/A								w	
Please see attached						Please s	see	attached	attached					
Basement				\boxtimes		Tank Ins	sul	ation		75 SF 🛛 🖂 🖂				
Basement						Pipe Fitt	tin	gs		25 total				
1st to 3rd Floor Pipe Chas						Pipe Fitt	ting	gs		45 total				
Name of Registered Waste I	lauler			195	JDEP V auler ID			ibic Yards of aste	Name of Registe					
AbateTech, Inc.				11	18750		4	40	G.R.O.W.S. I	.andfill				
City, State								sposal Date	City, State					
Lumberton, NJ		0					4	4/28/17	Tullytown, P	A				
Completed By (Print or Type)	Title	,					Signature	J	Da		cl.	7.	
Gwendolyn Trumbetti		Op	erati	ons (Coordi	nator		Mu	1		3/2	2/1	T	

Date of Notification (1)		Name of Building Owner/Operator (2)												
	1	7					nunications	20 20 Sept. 10 Sept.	Check	#9086 PG	2 of	2		
Agencies Notified Type Not	ification	ו		Stre	et Address									
⊠ EPA ☐ Initial				1	00 Green	woo	d Avenue							
☑ DOLWD ☑ Amen ☑ DHSS Amen	ded dment 7	#2		City	, State, Zip	Cod	е							
□ DCA □ Emerg		20 <u>0000</u> 0000000000000000000000000000000	na	J	enkintowi	n, P	A 19046							
(NJAC 5:23-8) justific			.5	Nan	ne of Conta	ct			Tele	phone Num	ber			
☐ Cance	llation			Α	lex Baylo	r			_					
Name of Facility When Abote and		- Di	(0)		ACILITY I	NFC	RMATION	T=						
Name of Facility Where Abatement Verizon Market CO	s rakır	ng Plac	e (3)					Type of Facility	50 90 0 50					
Street Address								School (K-		er than K-12)			
95 William Street								Other (i.e., homes, etc	private a	and commer	cial b	uildin	gs,	
City (5)								Square Feet		f Floors	ТВ	ldg. A	ae	
Newark										5 17 17 17 17 1		-5	-5-	
County (6)				Co	inty Code (7)(S7	ATE USE ONLY)	Current Use (F	rior if be	eing demolis	hed)			
Essex								Offices						
Name of Monitoring Firm Hired by B	uilding	Owner	(8)	ASC	I No.	Na	ame of Abateme	ent Contractor (9	3)					
USA Environmental							AbateTech, Ir	nc.						
Street Address						St	reet Address							
8436 Enterprise Ave.		-					30 Maple Ave	. PO Box 25						
City, State, Zip Code						Cit	ty, State, Zip Co	ode						
Philadelphia, PA 19153					****		Lumberton, N	IJ 08048						
Project Manager for Monitoring Firm				lephone		1 0	lephone No.			ense No.				
Mark Jenkins	0-1	1.1.1.			5-5810		609-265-2107		0	0529				
Start Date (10)1 / _ 9 / _ 17				ietion D 28 /	ate (11) 17	1	me of OSHA M E MSL Analyti							
Occupancy Status During Abatement	(Checl	k only	one)			Str	eet Address							
☐ Facility Closed/Vacated During Er			200	ement			200 Route 130) North						
Abatement Performed Outside of			у Но	urs - De	scribe	Cit	y, State, Zip Co	de						
Time of Abatement: 7AM-3:30PM	/ <u>5</u> PM-	2 AM				18	Cinnaminson,							
Scope of Work (Check all that apply)							N Full Comb	alama and with Nia						
≥3 sf or ≥3 lf		⊠ Re	nova	tion			Mini-Encl	ainment with Ne osure	gative P	ressure				
≥160 sf or ≥260 lf		☐ De	molit	ion			☐ Glovebag				10)			
		10	Loca	tion	_		ĭ Non-Exen	npted (*) and No	n-Friab	le Procedur	T			
Location of			Norm				Description of					_	ent T	
Asbestos-Containing Material (AC	M)	Use	d So	lely by	Asbe	stos	Containing Mat		А	mount	Remova	Repair	Encapsulate	Enclosure
TO BE ABATED IN Facility				ance/ Staff?	(i.e		ermal systems ir surfacing, VAT,			Specify F or LF)	SVOL	air	aps	losu
(13)			(12)			her miscellaneo		Si	- OI LF)	=		ulat	re
		Yes	No	N/A									0	
Basement Mechanical Loft			\boxtimes		Pipe Fit	ting	s		10	0 total	\boxtimes			
7 th Floor					Exterio	r bri	ck façade/bla	ck mastic	2,5	569 SF				
7 th Floor			\boxtimes		Pipe Fit	ting	Insulation		8	38 LF	\boxtimes			
7 th Floor			\boxtimes		Caulkin	g ar	nd Glazing		3 w	indows				
Name of Registered Waste Hauler			11.0	NJDEP			oic Yards of	Name of Regis	stered L	andfill				
AbateTech, Inc.			1	-lauler I 1875		Wa 4		G.R.O.W.S	. Land	Ifill				
City, State						Dis	posal Date	City, State				- Y.		
Lumberton, NJ						4	/28/17	Tullytown,	PA					
Completed By (Print or Type)	Title			55-c-1			Signature	n		Dat	e	201	1,7	
Gwendolyn Trumbetti	0	perati	ons	Coord	inator		1 Cx	Mt.			31	231	17	

ASB-41 MAY 11

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) APR 29 1 17 County of Middlesex Highways & Bridges / Job #1702-5120 Check #9013 Agencies Notified Type Notification Street Address ASBESTOS CONTROL & **⊠** EPA Initial PO Box 7356 LICENSING ☑ DOLWD □ Amended City, State, Zip Code Amendment #1 ☑ DHSS North Brunswick, NJ □ DCA Emergency (including) Name of Contact Telephone Number (NJAC 5:23-8) justification) ☐ Cancellation Administration **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Middlesex County - MCAT Building School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 97 Apple Orchard Lane homes, etc.) City (5) Square Feet # of Floors Bldg. Age North Brunswick, NJ County (6) Current Use (Prior if being demolished) County Code (7)(STATE USE ONLY) Middlesex Office Building Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Matrix New World Engineering AbateTech, Inc. Street Address Street Address 26 Columbia Turnpike 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Florham Park, NJ 07932 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. License No. Telephone No. Gavin Gilmore 609-265-2107 00529 973-585-9040 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor 3 / 20 / 17 4 / 28 / _ **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/_ PM-Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure☐ Glovebag Procedure $\square \ge 3$ sf or ≥ 3 If □ Renovation ≥160 sf or ≥260 lf □ Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Encapsulate Remova Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount nclosure Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility SF or LF) surfacing, VAT, or (12)(13)other miscellaneous) Yes No N/A Main Conf Rm, Superintendent Off \boxtimes Wood Paneling Glue/Mastic 1,120 SF M Front Recention Off Vestibule Exterior \boxtimes X Window/Door Caulk 1,500 LF Mechanical Room, Hall, File & X 352 SF Floor tile & Mastic X Kitchen Closet X 36 SF Janitor Closet Linoleum \boxtimes Name of Registered Waste Hauler NJDEP Waste Name of Registered Landfill Cubic Yards of Hauler ID No. Waste-AbateTech, Inc. G.R.O.W.S. Landfill 18750 25 City, State Disposal Date City. State Lumberton, NJ 4/28/17 Tullytown, PA Completed By (Print or Type) Title Signature Gwendolyn Trumbetti Operations Coordinator

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

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Date of Notification (1)					70	vner/Operator (APF)17	- , į L	
3 / 29 /	17		Fe	deral Avi	atio	n Administra	ation/ Job #16	06-5020 Check	#860	8 F	g. 1	of 2	
Agencies Notified Type Notific ☐ EPA ☐ Initial	/		1722000	t Address A Techni	cal	Center		ASBEST	OS C			_ &	
□ DOLWD (□ Amended	1		City,	State, Zip C	Code			1	JE , 53	211 4 4,2			
□ DHSS Amendm	-/	~	- 55				irport, NJ 0840)5					
DCA Emerger (NJAC 5:23-8) justificati		g		of Contac	10000		• •	Telephone Num	ber				
☐ Cancella			Pet	er				# 100 A 100			3		
			FΔ	CILITYIN	IFOI	RMATION	10-21					_	
Name of Facility Where Abatement is	Taking Plac	e (3)		0.2		T. T	Type of Facility	(4)				_	
William J. Hughes Tech Center		- 1-7					School (K-12						
Street Address							Subchapter	8 (Other than K-12		2502			
Hangar B301							Other (i.e., p	rivate and comme	rcial b	uilding	js,		
City (5)							Square Feet	# of Floors	B	ldg. A	ne .		
Atlantic City							- 4.0.0	011 10010		ug. / 1	90		
County (6)			Cour	ntv Code (7	VSTA	ATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)			-	
Atlantic					,,		Technical C						
Name of Monitoring Firm Hired by Build	ding Owner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)						
TTI Environmental	•					AbateTech, Ir							
Street Address						eet Address						_	
1253 North CHurch Street					100000		e. PO Box 25						
City, State, Zip Code		51 W W				y, State, Zip Co							
Moorestown, NJ 08057					10000	umberton, N							
Project Manager for Monitoring Firm	3	Tele	phone	No.		ephone No.		License No.					
Jim Guilardi				-1683	1 58	09-265-2107		00529					
Start Date (10)	cheduled C	Comple	tion Da	te (11)	Nai	me of OSHA M	lonitor						
8 /29 /16	4 /	28	_ /	17	E	MSL Analyti	ical						
Occupancy Status During Abatement (Check only	one)		/	Str	eet Address							
☐ Facility Closed/Vacated During Entire			ment_		2	00 Route 13	0 North						
Abatement Performed Outside of No					City	y, State, Zip Co	ode					-	
Time of Abatement:AM	PM/	PM-		AM		innaminson							
Scope of Work (Check all that apply)							•						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		enovati emolitio	70.000			☐ Mini-Encl	Procedure	gative Pressure n-Friable Procedu	re				
	1	Locat	ion			M HOH-EXC	inpled () and No	II-I Hable I Tocedu	-	atem	ont T		
Location of		Norma	lly			Description of	f		_	_			
Asbestos-Containing Material (ACM		ed Sole aintena				Containing Mar	terial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure	
TO BE ABATED IN Facility		todial S		(i.e.		ermal systems i surfacing, VAT,		(Specify SF or LF)	ova	H.	nsda	uso	
(13)		(12)				her miscellaned			-		late	e)	
	Yes	No	N/A										
Exterior				Roof Fla				410 SF					
Exterior				Roof Ma	astic	•		115 SF	\boxtimes				
Interior				Floor til	e &	Mastic		20 SF					
Exterior		\boxtimes		Roof Ma	astic			50 SF					
Name of Registered Waste Hauler		315	JDEP V	-C.E.W		oic Yards of	Name of Regis						
AbateTech, Inc.		H	auler II 18750	100000 000000	Wa 1		Atlantic Co	ount Utilities Au	ıthori	ty			
City, State						posal Pate	City, State						
Lumberton, NJ					4	/28/17)	Egg Harbo	r Township, NJ	, NJ 08234				
Completed By (Print or Type)	Title				\	Signature		Da	ate \	^ ^ -		^	
Gwendolyn Trumbetti	Operat	ions (Coordi	nator			OM	NT I	7)	19	11		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

NOCH	NC					SESTOS ABAT C 8:60 and 5:10		4	1_11				
Date of Notification (1) 3 / 29 /	17		N			Owner/Operator (1606-5020 Che	ck#	2017	2 (of 2	
Agencies Notified ☐ EPA ☐ Unittal ☐ Amende		\		FAA	Address A Technic		Salmanage	useshi A LiCi-i	() ()[[]	0)L &		
DHSS Amendm	1987 1988 1)				International Ai	irport, NJ 0840	5					
DCA Emerger (NJAC 5:23-8)		ing	N		of Contact				ner				
☐ Cancella	tion			Pet	er			,					
				FAC	CILITY INF	ORMATION							
Name of Facility Where Abatement is	Taking Pla	ce (3)					Type of Facility	(4)					
William J. Hughes Tech Cente	r						School (K-12		cense No. 00529 Pressure Abatement Ty				
Street Address										uilding	js,		
Hangar B301	79 2711						homes, etc.)						
City (5) Atlantic City							Square Feet	# of Floors	BI	dg. A	ge		
County (6)			1	COLLIN	ty Codo (7)/	STATE LISE ONLY	Current Hee / Dri	as if bains damalia	(bod)				
Atlantic				Journ	ty Code (1)(STATE USE ONLY)	Technical C	- 3	nea)				
Name of Monitoring Firm Hired by Buil	dina Owne	r (8)	T AS	CM I	No.	Name of Abateme		enter					
TTI Environmental	anig Owne	., (0)	1	OIVI I	140.	AbateTech, Ir							
Street Address					-	Street Address	10.						
1253 North CHurch Street						30 Maple Ave	. PO Box 25						
City, State, Zip Code						City, State, Zip Co							
Moorestown, NJ 08057						Lumberton, N	NJ 08048						
Project Manager for Monitoring Firm		Te	eleph	one N	No.	Telephone No.		License No.					
Jim Guilardi			609-	314-	-1683	609-265-2107		00529					
The state of the s	Scheduled				1	Name of OSHA M	onitor						
8 / 29 / 16	<u> 4</u>	25.00	28_	/ _		EMSL Analyti	cal						
Occupancy Status During Abatement (Street Address									
Facility Closed/Vacated During Enti						200 Route 130							
Abatement Performed Outside of No Time of Abatement:AM						City, State, Zip Co							
			-			Cinnaminson	, NJ 08077						
Scope of Work (Check all that apply)						☐ Full Conta	ainment with Neg	ative Pressure					
≥3 sf or ≥3 lf >160 sf or >260 lf		Renov				☐ Mini-Encl	osure						
△ ≥160 St 0f ≥260 If		Demol	ition			☐ Glovebag ☑ Non-Exer		n-Friable Procedur	e				
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Location of	. 11	Norn sed S		٠v		Description of		Was according to		1		Ť	
Asbestos-Containing Material (ACM TO BE ABATED		//ainte				os Containing Mat thermal systems in		Amount (Specify	Removal	Repair	nca	nclo	
IN Facility	Cı	ıstodia (1)		ff?	(1.0.1	surfacing, VAT,	or	SF or LF)	val	=	Encapsulate	Enclosure	
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6 Locations					Roof Flas	shing		4 SF (24 SF					
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						4							
Name of Registered Waste Hauler AbateTech, Inc.			Haul	er ID	No.	Cubic Yards of Waste	Name of Regist Atlantic Co	ered Landfill unt Utilities Au	thori	tv			
City, State			18	750		16 Disposal Date	City, State			•			
Lumberton, NJ						4/28/17		Township, NJ	0823	4			
Completed By (Print or Type)	Title				1	Signature	Nan-	Da	te	G 1	1		
Gwendolyn Trumbetti	Opera	itions	Co	ordii	nator	1	TYYYIT	1	11	11	1		

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 29 17 Resorts International Casinos /Job#1601 4984 Check#7870 PG:nof 2 Agencies Notified Type Notification Street Address ☑ EPA Initial 1133 Boardwalk ASBESTOS CONTROL **⊠** DOLWD City, State, Zip Code Amendment #6 **⊠** DHSS Atlantic City, NJ 08401-7329 ☐ DCA Emergency (including Name of Contact Telephone Number (NJAC 5:23-8) justification) Cancellation Kathy Chamberlin FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Resorts Hotel & Casino-Ocean Tower School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 1133 Boardwalk homes, etc.) City (5) Square Feet # of Floors Bldg. Age Atlantic City County (6) Current Use (Prior if being demolished) County Code (7)(STATE USE ONLY) Atlantic Hotel & Casino Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health & Safety Services AbateTech, Inc. Street Address Street Address PO Box 365 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. James Proctor 856-452-1311 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 1 / 18 / 16 / 28 / **EMSL** Analytical Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-_ Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Proce ☐ >3 sf or >3 lf □ Renovation ≥160 sf or ≥260 lf ☐ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Used Solely by Remova Encapsulate Enclosure Asbestos-Containing Material (ACM) Amount Asbestos Containing Material (ACM) Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility SF or LF) surfacing, VAT, or (12)(13)other miscellaneous) Yes No N/A 2nd Floor- 59 Bathrooms (30 SF per X Mastic Associated with ceramic tile 1,770 SF total П M hathroom) 3rd Floor- 56 Bathrooms (30 SF per \boxtimes Mastic Associated with ceramic tile M 1,680 SF total throom) 4th Floor- 60 Bathrooms (30 SF per П X П Mastic Associated with ceramic tile 1,800 SF total X hathroom) 5th Floor- 58 Bathrooms (30 SF per X Mastic Associated with ceramic tile 1.740 SF total Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste AbateTech, Inc. G.R.O.W.S. Landfill 18750 40 City, State Disposal Date City, State Lumberton, NJ 4/28/17 Tullytown, PA

ASB-41 MAY 11

Completed By (Print or Type)

Gwendolyn Trumbetti

Title

Operations Coordinator

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

Signature

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Resorts International Casinos /Job#1601-4984 Check#7870 PG.2 of 3 29 1 17 Agencies Notified Type Notification Street Address **ASBESTOS CONTROL & ⊠** EPA Initial 1133 Boardwalk LICENSING ☑ DOLWD City, State, Zip Code Amendment#7 □ DHSS Atlantic City, NJ 08401-7329 ☐ DCA Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number ☐ Cancellation Kathy Chamberlin **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Resorts Hotel & Casino-Ocean Tower School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 1133 Boardwalk homes, etc.) City (5) Square Feet # of Floors Bldg. Age Atlantic City County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Atlantic Hotel & Casino Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health & Safety Services AbateTech, Inc. Street Address Street Address PO Box 365 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. James Proctor 856-452-1311 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 1__ / _18__ / _16__ / 28 / 17 **EMSL** Analytical Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _____AM-____PM/____PM-___ Cinnaminson, NJ 08077 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 Removal Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount ncapsulate 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 6th Floor- 57 Bathrooms (30 SF per \boxtimes Mastic Associated with ceramic tile 1,710 SF total X hathroom) 7th Floor-Room 726 X Mastic Associated with ceramic tile 30 SF X П 7th Floor-Room 727 \boxtimes Mastic Associated with ceramic tile 30 SF M П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste AbateTech, Inc. G.R.O.W.S. Landfill 18750 40-City, State Disposal Date City, State Lumberton, NJ 4/28/17 Tullytown, PA Completed By (Print or Type) Signature

Gwendolyn Trumbetti

Operations Coordinator

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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NO Ch			(1	ursua	INI TO NJ	AC 8:60 and 5:1	6)					-
Date of Notification (1)				Nam	ne of Buildi	ng Owner/Operator	(2)	IIII APR	1 1) 21)17	
	31 / 1	17		G	ordon's C	orner Water Co.	/ Job #1701	5100 Check#9	085		111	1
Agencies Notified	Type Notification	n		Stree	et Address							-
☑ EPA	☐ Initial			6 9	South Ma	in Street		ASBESTO				. &
□ DOLWD		90 D		Citv.	State, Zip	Code		<u> </u>	EME	HAR		
☑ DHSS	Amendment			1000	arlboro, N							
☐ DCA (NJAC 5:23-8)	☐ Emergency (justification)	includi	ng	7,153	e of Conta			Telephone Num	ber			
(110710 0.20-0)	☐ Cancellation			Br	ian Doug	hertv		1.000				
				-		NFORMATION						_
Name of Facility Where	Ahatement is Takir	na Plac	ne (3)	17	CILITTI	AFORMATION	Type of Facility	(4)				
Gordon's Corner V			JC (U)				School (K-1					
Street Address	vater oo i lant	<i>π</i> 5	_					8 (Other than K-12	2)			
6 South Main Stree	at .							private and comme	rcial b	uildir	ıgs,	
City (5)							homes, etc.		10	ld-	\	
Marlboro							Square Feet	# of Floors		ldg. A	age	
		7,00		10	-t- O-d- 6	7\/07475 \\05 04 \0	0		- h - d)			
County (6) Monmouth				Cou	nty Code (7)(STATE USE ONLY)	M	rior if being demoli	snea)			
	I list d by D. Mais	^	(0)	10014		Tal. Cal.	Water Com					
Name of Monitoring Firm	15	Owner	(8)	ASCM	l No.	Name of Abateme)				
Health & Safety Ser	rvices					AbateTech, I	nc.					
Street Address						Street Address	DO D 05					
PO Box 365						30 Maple Ave						
City, State, Zip Code						City, State, Zip Co						
Berlin, NJ 08009			-			Lumberton, N	IJ 08048	1				
Project Manager for Moni	itoring Firm		1000	ephone		Telephone No.		License No.				
Jim Proctor			1		-2432	609-265-2107		00529				
Start Date (10)4 /10 /				tion Da 7 /	17	Name of OSHA M EMSL Analyti						
Occupancy Status During		Section				Street Address						
Facility Closed/Vacate						200 Route 13	0 North		3 5 1 1 2			
Abatement Performed Time of Abatement:						City, State, Zip Co	de					
		141/			-CIVI	Cinnaminson	, NJ 08077					
Scope of Work (Check all	that apply)					□ Eull Coot	nines ant with No.	active Deceasure				
		⊠ Re	enovat	ion		☐ Full Cont	ainment with Ne	gative Pressure				
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Location	of		S Locat Norma			Description of	•		Ab	-	ent T	_
Asbestos-Containing N		Use	ed Sole	ely by	Asbe	stos Containing Mat		Amount	Rer	Repair	Encapsulate	Enclosure
TO BE ABA	TED	10.253899	aintena todial			, thermal systems in	nsulation,	(Specify	Removal	air	aps	losu
IN Facility (13)	у	Out	(12)	otan:		surfacing, VAT, other miscellaned		SF or LF)	<u>a</u>		ulat	Tre
(10)		Yes	No	N/A		outer misocilaries	,43)				e	
Plant #3		П			Muffler	Insulation		50 SF				
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lame of Registered Waste	a Hauler			JDEP V	Naste	Cubic Yards of	Name of Regis	stered Landfill				Ш
AbateTech, Inc.	e i idulei		37.533	auler ID	O No.	Waste	G.R.O.W.S					
ity, State				18750)	Disposal Date	City, State					
Lumberton, NJ						4/17/17	Tullytown,	PA				
ompleted By (Print or Typ	oe) Title	9				Signature	~	Da	te :			
Gwendolyn Trumbet	2000 DOCUMENT		ions (Coordi	nator	1 / Min	9	100000		31	1-	1
D 44						UNIN	/		-1	-1		

ASB-41 MAY 11

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) 3 / Cumberland County Improvement Authority/Job #1703-5126 Check #9045 Agencies Notified Type Notification Street Address ASBESTOS CONTROL & X EPA __Initial 169 Jesse Bridge Road LICENSING □ DOLWD City, State, Zip Code **⊠** DHSS Amendment #1 Millville, NJ 08332 **⊠** DCA Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number ☐ Cancellation Jerry Valazquez **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Former Susquehana Bank School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 14 North Pearl Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age Bridgeton, NJ 08332 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Cumberland Former Bank Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ATC Group Services, LLC. 00098 AbateTech, Inc. Street Address Street Address Three Terri Lane- Broomley Corporate Center 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Burlington, NJ 08016 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. John Lutz 609-386-8800 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 4 / 3 / 17 __4__ / __7__ / __17 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _____AM-____PM/____PM-_ Cinnaminson, NJ 08077 Scope of Work (Check all that apply) □ Full Containment with Negative Pressure ≥3 sf or ≥3 lf □ 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 Encapsulate Removal Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount nclosure Maintenance/ TO BE ABATED (Specify (i.e., thermal systems insulation, Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement Boiler Room X Boiler Insulation 140 SF \boxtimes Basement Boiler Room \boxtimes Transite 100 SF M П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste AbateTech, Inc.

ASB-41 MAY 11

City, State

Lumberton, NJ

Completed By (Print or Type)

Gwendolyn Trumbetti

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

20

Disposal Date

Signature

4/7/17

City, State

Millville, NJ 08332

18750

Operations Coordinator

Cumberland County Solid Waste Complex

Date

					Pursi	uant to N	JAC 8:60 and 5:	16)	1131							
Date of Notification (1)					1		ling Owner/Operator		IIIII A	PR 1	0 3	2017				
	5	/1	7		1	Middle To	wnship Public So	1704-5133 Ch	eck #9	104	-011					
Agencies Notified	Type No		n		Str	eet Address	S	1 L	TOO	001						
☑ EPA ☑ DOLWD					2	216 South	Main Street		ASBESTOS CONTROL LICENSING							
☑ DOLWD	Amer	nded ndment :	#		City	y, State, Zip	Code	LIOLIYONYG								
□ DCA	☐ Emer			ina	0	Cape May	Court House, NJ	08210								
(NJAC 5:23-8)		cation)		9	Nar	me of Conta	act		Telephone N	umber						
	☐ Cance	ellation			Α	dministra	ation		1,,,							
					F	ACILITY	NFORMATION		- :							
Name of Facility Where		is Takir	ng Pla	ce (3)				Type of Facility	y (4)							
Middle Township E	:5 #1						5	School (K-1		401						
Street Address								Other (i.e.	8 (Other than Karrivate and comme	-12) mercial	buildir	nas				
215 Eldredge Rd.		0						homes, etc		TIOTOIGI	bulluli	igs,				
City (5)								Square Feet	# of Floors	1	Bldg. /	Age				
Cape May Court Ho	use, NJ (08210			-											
County (6)					Co	unty Code ((7)(STATE USE ONLY)	Prior if being demolished)								
Cape May								School								
Name of Monitoring Firm		uilding (Owner	(8)	ASC	M No.	Name of Abateme)							
Health & Safety Ser	vices						AbateTech, I	nc.								
Street Address							Street Address									
PO Box 365						30 Maple Ave. PO Box 25										
City, State, Zip Code						City, State, Zip Code										
Berlin, NJ 08009							08009Lumber	ton, NJ 08048	3							
Project Manager for Monit	oring Firm			Te	ephone	e No.	Telephone No.		License No.							
Jim Proctor						9-2432	609-265-2107	00529								
Start Date (10)						ate (11)	Name of OSHA M	onitor								
4/14/				500-000	7_ /	17	EMSL Analyti	cal								
Occupancy Status During							Street Address									
Facility Closed/Vacated	During En	tire Per	iod of	Abate	ment		200 Route 130	North								
Abatement Performed (Time of Abatement:	Jutside of I	Normal DM	Facilit	y Hou	rs - De	scribe	City, State, Zip Co	de								
			"			_AIVI	Cinnaminson,	NJ 08077								
Scope of Work (Check all t	hat apply)						T Full Conta									
≥3 sf or ≥3 lf			⊠ Re	novat	ion		☐ Mini-Enclo	ainment with Neg osure	gative Pressure							
_ ≥160 sf or ≥260 lf			☐ De	moliti	on		Glovebag	Procedure								
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Asbestos-Containing Ma	aterial (ACI	M)			ely by	Asbes	stos Containing Mate		Amount	Remova	Repair	Encapsulate	Enc			
TO BE ABATI IN Facility	ED			intena odial	nce/ Staff?	(i.e.	, thermal systems in		(Specify	vou	pair	aps	Enclosure			
(13)				(12)			surfacing, VAT, other miscellaneo		SF or LF)	<u>n</u>		sula	ure			
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ame of Registered Waste	Hauler			1000	JDEP V		Cubic Yards of	Name of Regist	tered Landfill							
AbateTech, Inc.				П	auler ID 18750		Waste 4	G.R.O.W.S.	Landfill							
ty, State							Disposal Date	City, State								
Lumberton, NJ							4/17/17	Tullytown,	PA							
ompleted By (Print or Type	*	Title					Signature	L	[ate	è					
Gwendolyn Trumbetti		Ope	eratio	ons C	oordi	nator	/ Ma	15		41	51,	7				

ASB-41 MAY 11

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

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) 4 5 Verizon Communications / Job #1704-5135 Check #9105 Agencies Notified Type Notification Street Address ASBESTO CONTROL & ☑ Initial 100 Greenwood Avenue 4SING ☑ DOLWD ☐ Amended City, State, Zip Code □ DHSS Amendment # Jenkintown, PA 19046 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) Name of Contact justification) Telephone Number ☐ Cancellation Alex Baylor **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Verizon Spotswood CO School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 461 Main Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age Spotswood, NJ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Middlesex Offices Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) TTI Environmental AbateTech, Inc. Street Address Street Address 1253 North Church Street 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Moorestown, NJ 08057 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Harold Baldwin 908-812-6742 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 4 / 18 / 17 4 / 25 / 17 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ___AM-____PM/5PM-1:30AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ >3 sf or >3 If ⊠ Renovation Mini-Enclosure ≥160 sf or >260 If ☐ Demolition Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Repair Encapsulate Enclosure 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 1st Floor X Floor tile & Mastic 240 SF X 1st Floor X Floor tile 260 SF X П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. AbateTech, Inc. Waste G.R.O.W.S. Landfill 18750 40 City, State Disposal Date City, State Lumberton, NJ 4/25/17 Tullytown, PA Completed By (Print or Type) Title Signaturé Gwendolyn Trumbetti Operations Coordinator

State of New Jersey

Check No. 3996

		NO	TIFIC (Pui	ATI sua	ON OI nt to N	F ASBE	STOS ABAT 3:60 and 12-1	EMENT 20)	MECE			E	Ī	1			
Date of Notification (1)				IN	Name of	Building	Owner/Operator						T				
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□ EPA 🔲 Initial						te, Zip C			ASBESTOS)L 8	3				
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George Washingt	on Bride	ge - Adminis	tratio	n B	uildin	g		☐ School (K-1	12) 8 (Other than K-1 2)								
Street Address								☑ Other (i.e.	private & commercial	building	S,						
220 Bruce Reynol	ds Blvd							homes, etc	:.)					_			
City (5)								Square Feet	# of Floors	Bldg. A	ige						
Fort Lee, NJ 0702	24							30,000	4	67+							
County (6)			0	T	County	Code (7)	(STATE USE	Current Use (Prior if being demolis	hed)							
Bergen				1	ONLY)			Office									
Name of Monitoring Firm Hired by Building Owner ASC					No.		Name of Abatem	nent Contractor	(9)								
PA of NY & NJ				I/A			B&N&K Res	toration Co	ration Co., Inc.								
Street Address							Street Address										
	00m 236	3					223 Randolph Avenue										
241 Erie Street, Room 236 City, State, Zip Code							City, State, Zip Code										
Jersey City, NJ 07310							Clifton, NJ	07011									
Project Manager for Monitoring Firm Teleph					e No.	_	Telephone No.		License No.								
1 Tojout Managor to: memory					5-488	1	973-478-468	31	00120								
Ouay Merita							Name of OSHA	Monitor									
							EMSL Analy	ytical, Inc.									
April 17, 2017	na Ahatem						Street Address										
Start Date (10) April 17, 2017 Occupancy Status During Abatement (Check only one							3 Cooper S	treet									
 ☐ Facility Closed/Vacated During Entire Period of Abatemet ☑ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: 				ment rs	City, State, Zip Code Westmont, NJ 08108-2347												
- I consider	all that app	ely)						0 1-1	ith Negative Pressure	,							
 ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf 		186			⊠ Rend □ Dem		⊠ Mini	-Enclosure									
											Abatement						
			12000	_ocati ormal								Ту	pe				
Scope of Work (Check all that apply) □ ≥ 3 sf or ≥ 3 lf ⊠ ≥ 160 sf or ≥ 260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility		al (ACM)	Used Mai:	Sole ntena ustodi Staff?	ly by nce/ ial	Asbe (i.e	Description stos Containing M ., thermal systems surfacing, VA other miscellar	Material (ACM) s insulation, T, or	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure			
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1st Floor Maintenance Garage Chase			140	100	Pipe	Insulation		30	00 In ft	X							
1St Floor Walliteria	noe dare	igo onaco															
					+												
Name of Registered W Two Brothers Co	ntractin	er ng, Inc. /	ID	No.	Waste F		Cubic Yards of Waste	Grand Cer	gistered Landfill ntral Sanitary Landfi nterprises, Inc.	II /							
Jimmy Byrne Tru	ucking		12				Disposal Date	City, State	interprises; inter								
City, State	A 4 4 6 6 1	D., 1117					04/18/2017 -		gyl, PA / Wayns	ebura	,)H						
Totowa, NJ 0751	2-1120/	_					06/30/2017 Signature	1111/1	111	Date	77.						
Completed by		Title		or			1/1/2	111/11/1		4/4/2	017	7					
G. Roger Woodman Project Manager							11/10	10		2000	-						

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			N	lame of l	Building O	wner/O	nerator	(2)	- 11	-Li-AF	11 11	-2	11/		L					
Date of Notification (1) 04/04/2017			1,535	Resider		WHEITO	perator	(2)												
Agencies Notified	Type Notification		5	Street Ad	dress				- Comments	ASBEST	TOS C	ON	TRO	L &						
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☐ DCA	Cancellation				ITY INFO	(0)	ON					_								
Name of Facility Where	Abatement is Takin	g Place (3)		TAGIL				Type of	Facility (4)											
Residence		5 13 3						☐ Sc	hool (K-12))										
Street Address									bchapter 8	Other than K vate & comme	(-12)	ldina	e ho	mae						
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County (6) Union		County C STATE U	ode (7) ISE ONLY)			Current	Use (Prior	if being demo	lished)											
Name of Monitoring Firm		ASCM	No.		Name	ame of Abatement Contractor (9)														
A. Seine Lighthous	se Solutions			A1.55.4			Brink	s Tank	Services	S										
Street Address						Address														
PO Box 354							2400000000	Liberty	8											
City, State, Zip Code						State, Zip														
South Orange, N.J						ACTION CONTRACTOR OF THE PARTY	. 07205	1.00000	- NI-	1.										
Project Manager for Mo	- 1	Telephor	ne No. .9-2666		Victorial Control	none No. 462-74	65	License 01316		.0.										
Sarah Calandra		100 m				of OSHA		01010	,											
Start Date (10) 04/18/2017	017	ipletion L	Date (11)		A. Se	eine Lig	hthouse	Solutions												
Occupancy Status Duri	ng Abatement (Ched	k Only On	e)				575.9776.7545.95	Address												
Facility Closed/Va	cated During Entire	Period of A	batem	ent				30x 354				_			_					
Abatement Perform Other – Describe:	med Outside of Norr	nal Facility	Hours					State, Zip	ge, N.J.	07070										
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Scope of Work (Check	All That Apply)						г	٦ - "،	0 4 - 1	at with Nogotis	o Proce	uro								
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Name of Registered W	laste Hauler		N	JDEP W	Vaste	Cubic	Yards	T	Name of F	Registered Lar	ndfill	_								
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Newark Carting			0	4509		D'														
City, State East Orange, N.J.							sal Date /2017	e	City, State Penn Argyle, PA											
Completed by		Title					Signatu	MARP	ni A		Date	100								
Alison Lamers	ager				7	WIL	W. G		Date 04/04/2017											

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

Ch 43589	1		ICATION	ate of New I OF ASBE to NJAC 8	STOS	ABATE			EC			\mathbb{V}	E		
Date of Notification (1) 03.31.17				f Building C y College			(2)		AP	R 1	0	2017		L	
Agencies Notified Type Notification			Street A	ddress Myrtle Av	enue			1	ASBEST	OS	201	VTRO) 8	2	
X EPA X Initial Amended Amendment	#			ate, Zip Coo						CEN				_	
Emergency (i justification) DCA Emergency (i justification) Cancellation		_	Name of	f Contact			Telephone Number								
Name of Facility Where Abatement is Taking	Place (3	3)	FACILITY INFORMATION Type of Facility (4)												
Henderson Hall Street Address							School (K	(-12) er 8 (Ot	ther than K		uildi	inas h	ome	· q	
214 Center Grove rd City (5) Randolph				etc.) Square Feet 15000		of Floors	Bldg. Age 60+				,				
County (6)			Code (7)	de (7) Current Use (Prior if being demolished) E ONLY) School											
Morris Name of Monitoring Firm Hired by Building C		ASCN			Name	of Abatement C	ontracto	or (9)							
Whitman	/: 				Nirar										
Street Address 7 Pleasant Hill rd				Address frederick pl.											
City, State, Zip Code Cranbury, NJ, 08512				tate, Zip Code ar Knolls, NJ											
Project Manager for Monitoring Firm Kevin T. Lovely		Telephone No. Telephone No. License No. 732-390-5858 973-299-4455 00529),						
Start Date (10) 04.10.17	mpletion	Date (11)		Name n/a	of OSHA Monito	or									
Occupancy Status During Abatement (Check	Only Or	ne)		37		Street n/a	Address								
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of A al Facility	Abater Hour	ement The state of the state												
Scope of Work (Check All That Apply)						II/a									
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												1			
Name of Registered Waste Hauler Niram Inc		H	IJDEP W lauler ID I J- 312	No.	Cubic of Wa 120	Yards ste	Name of Registered Landfill Tri-State Transfer								
City, State Boonton, NJ 07005					Dispos	sal Date	City, St Bronx						277		
Completed by Marcin Owczarski			S	ignature	11	Date 03.28.17									

Print Form