NOTIFICATION OF ASBESTOS ABATEMENT Initial Notificat (Pursuant to NJAC 8:60-7 and 12:120-7) Check #: 7375

Initial Notification

		2/								Onco						
Date of Notification	on (1)		Nan	ne of	Bui	lding	Owne	r/Operato	or (2)	y p-400	o contraction of the contraction	0 0	П В	ANTE V		
0 4 1/10	1 1/11	9	Nu	utley	Prop	erties	5					GE			1	4
Agencies Notified	Type Notific	cation			Addr										1	-
[X]EPA	[X]Initia	l cation	1 1				et, 11	th Floor`				APR 1	2 20	19	1	
XIDGL	[]Amende			-71		NY 10									1	
(X)DOH	Notifi		1 1		College des	tact				Te	Lepho	one Num	ber	1 130000		
70	[]Cancel	lation		0		.:				(21	2) 60	97-0450	Company of	Maria de		
[]DCA			IVI		opov	-				[(2)	2) 03	77-0430				
Name of Facility W	nere Ahareme	nt is Ta	king				NFORM	MOITE	Type	of Faci	lity	(4)				_
			-	9/		(5)		1		[]Scho	01 [5	K-12)				
Nutley Properties										⊠]Othe	r (i.	ldings.	ivate	s. et	mmer- c.)	
181 Hancox Avenue									1	re Feet	# 9	2	es	50	nye	
City (5)		County	(6)					ode (7) SE ONLY)	CULL	0000 ent Use	(Pri		eing		ishe	1)
Nutley, NJ 07110		Essex							Resi	dential b	uildir	ngs	000.00		•	
Name of Monitoring Owner (8)	Firm Hired		ing	ASC	M No	• 1	Name	of Abate	ment	Contract	or (9)				
S&S Environmental	Sciences Inc	e:				1	Four	Strong Bu	uilders	, Inc.						
Street Address	ociences, me	<u> </u>					Stre	et Addres	s							
98 Sand Park Road							180	Sargeant A	Avenu	ie						
City, State, Zip C	ode						City	. State.	Zip C	ode						
Cedar Grove, NJ 07	009 r Monitoring	Firm T	elep	hone	Num	ser	Clifto	on, NJ 070 phone Num)13-19	35		Lic	cense	Numbe	ī.	_
Prakash Khaitan Scheduled Start Da	27 18	hed.Comp	leti		ate			614-0377 of OSHA		or		008	307			
0 4 / 1 1 / Month / Day / Occupancy Status D	Year Year	onth /	Day	nly	Year	1		Strong B		s, Inc.						
[]Facility Clos of Abatement []Abatement Per Hours - Descr X]Other - Descr	ed/Vacated I formed Outsi ibe:	Ouring En	tire	Per	iod		City	Sargeant . State.	Zip C	ie ode						
Scope of Work (Che			_				Clin	on, NJ 070								
[]Demolit []>3 sf o	ion	appili	×] Rend	ovati	on		[X]Mini	i-Encl vebag	ainment osure Procedu le Proc	re		ive P	ressu	re	
				Is		- 77.00							Ab	ateme	nt T	7Pe
Asbestos- Materia TO BE in Fac	cion of Containing 11 (ACM) ABATED Fility (3)		No.	cation mall used olely Main mance stoding aff ()	Ly Y h- e/ ial 12)		Asbe Ma (i.e. nsulat	description of the control of the co	tainin ACM) syste facing	ems		Amount (Specif SF or LF)	Y M	R E P A	NCAPSUL .	
Building No.: F, M, N & L -	Crawl Space & Sto	rage Rooms	1		_	Pipe	Insula	ation			5,	500 LF	X			
	•														1	Γ
											T			1		Γ
			-	1										1	1	1
Name of Registered	Waste Haul	er			Was r ID		Cubi of W	c Yards aste		e of Reg						-
Newark Carting, Co).		4	509			Dien	osal Date	Gra	nd Centr	al Sa	anitary l	andfil	I		_
City. State							DISP	Jan Jace		100	2					
Newark, NJ									Pan	LArgyl/F	PA 18	3072		M-+-		
Completed By (Pri	nt or Type)	Title						Signatur	e	7	1		-	Date		
Bilyana Kulakovska	a	Office A	dmir	nistra	itor			10-	-					4/1/1	9	
ASB-41 JUN 95							-		-			/			G4f	

prore of Mem Patrel

NOTIFICATION OF ASBESTOS ABATEMENT Initial Notificat

(Pursuant to NJAC 8:60-7 and 12:120-7)

Check #: 7376

Initial Notification

								41100					
Date of Notificatio			Na Na	ame of	Build	din	g Owner/Operat	or (2)	F 6	0 12	П	ΠΠ	11.
0 4 1/ 0	1 1/11	9	HE	ssex G	arder	าร		-	EC			\mathbb{W}	1275
Agencies Notified	Type Notif	ication		reet A					I Property		1114	111014	1
[X]EPA	**************************************			Most A	10+h C	`tro	ot 11th Floor	1		m 1	A 1		
[X] DEP	[X]Initial Notification [X]	al ication	C	ty. St	ate.	Zii	et, 11th Floor`	· ·	<u>il i. Ar</u>	R I	2	4019	-
X1DOL	[]Amend	ed	- 11						į				
i×1DOH		ication	1.1	ew Yor					//	Sider	374	1	-11-46
[]DCA	[]Cancel	llation						Tel	Lephone Num	ber	1	e Li Strange	8 8
1 IDCA			N	larc Po	powit	Z		(21	2) 697-0450	١			
							NFORMATION						
Name of Facility Wh	ere Abatem	ent is 1	aking	J Place	(3)			Type of Faci.	lity (4)				
Essex Gardens									ol (K-12)				2.
Street Address								X]Other	napter 8 (0 r (i.e., pr	ivate	8 0	omme	r-
23 Essex Ct.								Square Feet	buildings,	home	lda.	Age	
City (5)		Count	y (6)		- 13	Coul	nty Code (7)	20000	2		50		
							ATÉ USE ONLY)	Current Use		eing			ed)
Maywood, NJ 07607		Berge	n	75550				Residential bu	uildings				
Name of Monitoring Owner (8)	firm Hired	by Buil	ding	ASCM	No.		Name of Abate	ement Contracto	or (9)				
S&S Environmental S	ciences Inc	2					Four Strong B	uilders Inc					
Street Address	0.01.000, 1110	J				-1	Street Addres	is		-	-		
98 Sand Park Road						1	180 Sargeant	Avenue					
City. State. Zip Co	de					-	City. State.	Zip Code					
Cedar Grove, NJ 070	19						Clifton, NJ 070	113-1935					
Project Manager for	Monitoring	Firm	Teler	hone N	umber	=	Telephone Num		Lic	ense	Numb	er	
Prakash Khaitan			973-8	57-718	8		973-614-0377		008	07			
Scheduled Start Dat		hed.Com	pleti	on Dat	e (1)	T	Name of OSKA	Monitor	1000	01			
0 4 / 1 10 / 1	191 11	0 5 /	0 3	1/11	9		Equir Otrona Di	vildoro Inc					
Month / Day / Occupancy Status Du	ring Abatem	nent (Ch	Day eck c	/ Ye	ar e)	-1	Four Strong B	uliders, Inc.					
[]Facility Close													
of Abatement []Abatement Perf	ormed Outsi	ide of N	ormal	Facil	110		180 Sargeant	Avenue					
Hours - Descri	oe:				1		orty, state,	ZID Lode					
				-			Clifton, NJ 070	113					
Scope of Work (Check		apply)					[]Full	Containment w	rith Negativ	70 D-	0000		
[]Demolition []>3 sf or			\bowtie	Renova	tion		[X]Mini	-Enclosure		e PI	essu	e	
X1∑160 sf	260 lf						[]Non-	ebag Procedure Friable Proced	ure				
				Is						IAba	teme	nt Ty	zne.
Locatio	on of			ation mally			Descriptio	T of	1	9 500		Ε	E
Asbestos-Co Material			U	sed lely			Asbestos-Cont	aining	Amount	R	R	N	C I.
TO BE A	BATED		рй	Main-		(i	Material (A	systems	(Specify SF or	M	E	P	
in Facil				ance/ todial		ins	ulation. surf or other misc		LF)	V	A	S	0 8
				ff(12) No N/	<u> </u>			- 404 404 - 404 - 404 - 404 - 404 - 404 - 404 - 404 - 404 - 404 - 404 - 404 - 404 - 404 - 404 - 404 - 404 -		L	R	L	R
Building No.: 1,2,3,4,5 & 6 - Crawl S	paces & Storage R	ooms	X	10 107.	$\overline{}$	e In	sulation		2,800 LF	X	-	·-	E
					+-				-,550 21	1	-		
			-	-	+-	_			-	-			
				_	+					1			
Name of Registered W	aste Wanta	-	137	נו פשח	150	70	uhia V2-	Try					
or wedtareted #	rases udnig	•		DEP Was uler II			ubic Yards f Waste	Name of Regis	tered Landi	111			
Newark Carting, Co.		0007777779	45	09				Grand Central	Sanitary Lar	ndfill			
ity. State						D	isposal Date	City. State					
Newark, NJ								Pan Araul DA	18072				
ompleted By (Print	or Type)	Title					Signature	Pan Argyl, PA	10072	In:	ate		
Bilyana Kulakovska		Offi 1	: - سال	shurt.			(A)	James /		150			
ASB-41		Office Ad	ımıni	strator	//		1	ren		4/	1/19		
JUN 95)		1	4.3 E 4.55 Miles		2465	

prace of Mam Setzek

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Check #: 7376

Initial Notification

(X)DOH (X)DOT (X)DEB	1 / 1 9	8 01 N	SSEX (Sarde Addre	ens	g Owner/Operat	or (2)	ECI		W	In Lin	Manual Control
Agencies Notified Type [X]EPA [X]DEP [X]DOL [X]DOH []DCA Name of Facility Where Essex Gardens	pe Notification [X]Initial Notification []Amended Notification	8 CI	West	Addre	ss	······································	A CONTRACTOR OF THE PROPERTY O			r	Lim	Pillan Marie
[X]EPA [X]DEP [X]DOL [X]DOH []DCA Name of Facility Where Essex Gardens	[X]Initial Notification []Amended Notification	8 CI	West	Addre	ss	***************************************						111
[X]DEP [X]DOL [X]DOH []DCA Name of Facility Where Essex Gardens	Notification []Amended Notification	N	ty. S	40th	Stro		711 1		201 (1999)			111
[X]DEP [X]DOL [X]DOH []DCA Name of Facility Where Essex Gardens	Notification []Amended Notification	N	ty. S	40th		-1 4411 (-1)	111	APR	12	2019)	
(X)DOH []DCA Name of Facility Where Essex Gardens	Notification	N			21	et, 11th Floor	154 1	ist.				i house
(X)DOH []DCA Name of Facility Where Essex Gardens	Notification	11										25.4
Name of Facility Where	[]Cancellation	1100	ew Yo					Australia			ent en fatig	
Name of Facility Where		11		17.00000			Te.	lephone Numb	er.	≠.c.×,±tra		
Essex Gardens		IM	arc Po	powi	tz		(21	2) 697-0450				
Essex Gardens			FA	CILIT	I Y	NFORMATION						
[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	e Abatement is	aking	Plac	e (3)			Type of Faci.	lity (4)				
Street Address								ol (K-12)				
							⊠]Other	hapter 8 (0)	vate	8 0	omme	r-
23 Essex Ct.							Square Feet	buildings.	home	e 0	tc.)	
City (5)	Count	y (6)			Cou	nty Code (7)	20000	2	.	5(
Marrier I N. I. 27027				1	(ST	ATÉ USE ONLY)	Current Use	(Prior if be	ing			ed)
Maywood, NJ 07607 Name of Monitoring Fir	Berge	en	TARRET				Residential bu	uildings		<u> </u>		
Owner (8)	m nired by Buil	ding	ASCM	No.		Name of Abate	ment Contracto	or (9)				
S&S Environmental Scie	nces. Inc.					Four Strong B	uilders Inc					
Street Address					-	Street Addres	s		-			-
98 Sand Park Road						180 Sargeant	Avenue					
City. State. Zip Code						City, State,	Zip Code					_
Cedar Grove, NJ 07009						Clifton, NJ 070	13-1935					
Project Manager for Mo	nitoring Firm	Telep	hone i	Numbe	r	Telephone Num	ber	Lice	nse	Numb	er	
Prakash Khaitan		973-8	57-718	88		973-614-0377		0080)7			
Scheduled Start Date (IT	Name of OSHA	Monitor	1550		_		
0 4 / 1 0 / 1 9	0 5 1/1	0 3	1/11/	9 1		Four Strong Bi	ilders Inc					
Month / Day / Yea	g Abatement (Ch	eck or	nly or	ie)	-	Street Addres	s					
<pre>[]Facility Closed/V: of Abatement</pre>	acated During E	ntire	Perio	bo	-	180 Sargeant	Avenue					
[]Abatement Perform Hours - Describe:	ed Outside of N	ormal	Facil	Lity		City. State.	Zip Code					
XJOther - Describe:	Residential buildings					CI:# N. 1 070	40					
cope of Work (Check a.	II that apply)					Clifton, NJ 070	113					
[]Demolition		DYIE	Renova	ition		[]Full	Containment w	rith Negativ	e Pr	essu	re	•
[]>3 sf or >3 [X]\(\sum_{1}\)5160 sf or	lf \250 \5	0131	.c.iov	1011			-Enclosure ebag Procedure					
N15100 St 01	2250 11					[]Non-	Friable Proced	lure				
	_	Loca	ls ation						Aba	teme	it Ty	pe E
Location of Asbestos-Conta			nally sed			Description Asbestos-Cont	n of		R		N	N
Material (AC TO BE ABATE	CM)	Sol	Lely		404	Material (A	CM)	Amount (Specify	E	RE	CA	C T.
in Facility	Y Y	tena	Main-		ins	.e., thermal sulation, surf.	acing, VAT.	SF or LF)	0	PA	PS	0 S U
. (13)		Staf	odial f(12)			or other misc	ellaneous)		A	I	U	Ü
uildies No. 10015 a.e.		Yes	No N/	Ā					L.	K	L	R E
uilding No.: 1,2,3,4,5 & 6 - Crawl Spaces	s & Storage Rooms	X		Pip	e In	sulation		2,800 LF	X			
	•											
											1	
											-	
ame of Registered Wast	te Hauler		EP Wa			ubic Yards	Name of Regis	tered Landf:	111			_
lewark Carting, Co.			ler I	n wo.	0	f Waste						
ity. State		450	19		-	isposal Date	Grand Central :	Sanitary Lan	dfill			
					1	Lopodar date	City, state					
ewark, NJ	Pr	20					Pan Argyl, PA	18072				
ompleted By (Print or	Type) Title					Signature	16		Da	te		
lilyana Kulakovska	Office Ad	dminis	trator				1		A	1/10		
SB-41 UN 95					-			/_	14/	1/19		

State of New Jersey

CALL (1/15) PAID				to NJAC					EGE		\mathbb{V}_{-}		
Date of Notification (1)				of Building			32.70	In				fi	-
04/10/2019 Agencies Notified Type Notification				boration	s Hous	ing, LL	_C		APR	122	019	Albertanic	U
			Street A	lm St								Carl Marrie	
EPA Initial Amended		-		ate, Zip Co	ode			· kaan		1.24	i - depth	. cz	1
X DOL Amendment				g, NJ 0							el Sidentino	erna 6 i	
DOH Emergency (justification) Cancellation	including	' T	Name o	of Contact			10 - 11 - 15 - 15 - 15 - 15 - 15 - 15 - 	Te	lephone Nu	umber			
DCA Cancellation			Janin					9	08-963-7	553			
Name of Facility Where Abatement is Taking	Place /	31	FAC	ILITY INFO	ORMATI	ON	Tyma of Fac	1114(4)		01-0-2			
Private home	i lace (٥,					Type of Fac	6.5					
Street Address							School Subcha		ner than K-	12)			
							X Other (i.e. private	& commerce	cial buil	dings	home	es,
City (5)							etc.) Square Feet	# (of Floors	E	Bldg. A	ge	
Stirling													
County (6) Morris				Code (7) USE ONLY)		Current Use	(Prior if be	ing demolis	shed)	88	0	
Name of Monitoring Firm Hired by Building C	wner (8)	ASCN	И No.		Name	of Abatement	Contracto	r (9)				
							oval Safet		. ,				
Street Address							Address						
014 014 71 0							osby Ave						
City, State, Zip Code							tate, Zip Code						
Project Manager for Monitoring Firm			Telepho	ne No			rson, NJ 0	7502	I 11				
, and a second s			relepilo	ne ivo.	İ		400-8711		License I	NO.			
Start Date (10)	Schedul	ed Com	pletion	Date (11)		2000	of OSHA Mor	nitor	01002				
04/19/2019	04/22/	2019				Sam	e as (9)						
Occupancy Status During Abatement (Check	Only O	ne)				Street	Address						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of a	Abatem y Hours	ent		-	City, S	tate, Zip Code	•					
Other – Describe: 8:00 am - 4:30 pm					-	•							
Scope of Work (Check All That Apply)													
× ≥3 sf or ≥3 lf	- Comments	Renovat					Full Conta	inment with	h Negative	Pressu	re		
≥160 sf or ≥260 lf	ш	Demoliti	on			×	Mini-Enclo	sure Procedure					
									nd Non-Fria	ble Pro			
	1	Location Normali										ement pe	
Location of Asbestos-Containing Material (ACM)	Use	ed Solel	y by	Ashesi		cription	of laterial (ACM)		Amount		Τ,		
TO BE ABATED In Facility	2000	iintenar todial S			thermal:	systems	insulation,	(Specify	Re	,	Encapsulate	Enc
(13)		(12)				ing, VA		S	F or LF)	Removal	Repair	nsde	Enclosure
	Yes	No	N/A				•			a	-	ate	IГе
Basement			х		Pipe	Insula	tion	1	50 LF	x		х	
First floor attic			х		Pipe	Insulat	tion	-	I0 LF	x		х	
										+	-		
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic	Yards	Name	e of Registe	ered Landfil	11			
Removal Safety LLC		1.6535	auler ID 037007		of Was	te	VOA5000-00	less					
City, State					Dispos	al Date	City,						
Paterson, NJ					TBD	4		risville, F	PA				
Completed by Lasko Veskov	Title Pres	ident			Sį	gnature	lo la	3slon		ate)4/10/	2019	í.	

PAID

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

Chk#3553

Date of Notification (1)	A MARINETA						(5.30)	0 10				and the later	and the con-	
	10 /	19)					g Owner/Operator (mmunications	(2)	EGI		\mathbb{V}		7
Agencies Notified EPA DOLWD	Type Notific ☑ Initial ☐ Amende					15		ntgomery Street	American de la constanta de la	APR	1 2	2019		Ш
☑ DOH	Amende	-			(State, Zip C							leader v
☐ DCA	☐ Emerger	ncy (ir		g		301 - 100		PA 15212	E E	A	1 - (7)		1,200	i
(NJAC 5:23-8)	justificat Cancella				1		of Contac	-		Telephone Nur		Ġ.	33.0	
	☐ Cancella	luon		_			thony Po	ATT BUSINESS CONTRACTOR OF THE PARTY OF THE		412-638-40	21			
Name of Engility Where A	h = 1 = = - 1 ! = .	T-1:-	DI	(0)		FA	CILITY IN	FORMATION		**************************************				
Name of Facility Where A Verizon Madison Ce			g Place	e (3)					Type of Facility (
Street Address	illiai Ollic	е							School (K-12) Subchapter 8) (Other than K-1	2)			
150 Main Street									Other (i.e., pr	ivate and comm	ercial b	uilding	gs,	
City (5)			4						homes, etc.) Square Feet	# of Floors		Ida A		
Madison									24,192	3		lldg. A +-50		
County (6)						Cour	nty Code (7)(STATE USE ONLY)	Current Use (Price		lished)	00		
Morris								,, , , , , , , , , , , , , , , , , , , ,	Verizon	or in boning donner	101100)			
Name of Monitoring Firm I	Hired by Buil	ding (Owner	(8)	A	SCM	No.	Name of Abateme	ent Contractor (9)					
USA Environmental	Managem	ent l	nc					1	VIRONMENTAL	., INC.				
Street Address								Street Address						
8436 Enterprise Ave	•							1123 BEAVE	R STREET					
City, State, Zip Code								City, State, Zip Co	ode				SE IN	
Philadelphia, PA 191								BRISTOL, PA	19007					
Project Manager for Monit	oring Firm			Te	eleph	none	No.	Telephone No.		License No.				
Mark Jenkins							-5810	215-788-6040		00509				
Start Date (10)							te (11)	Name of OSHA M						
4/29/_						_ / _	19_	BRISTOL EN	VIRONMENTAL	, INC				
Occupancy Status During								Street Address						
☐ Facility Closed/Vacated ☐ Abatement Performed							a eile a	1123 BEAVER						
Time of Abatement:	AM-	omiai Pi	л/5:00	у по РМ-	1:30	- Des OAM	cribe	City, State, Zip Co						
						-		BRISTOL, PA	19007					
Scope of Work (Check all I ≥3 sf or ≥3 If ≥160 sf or ≥260 If	тат арріу)	# 28	⊠ Re			1		☐ Full Cont ☐ Mini-Encl ☐ Glovebag		ative Pressure				
							,		mpted (*) and Non	-Friable Procedu	ure			
Lagation	£		10000		ation hally						At	atem	ent T	уре
Location o Asbestos-Containing M		1)	Use	ed So	olelý	by	Asbes	Description of stos Containing Mat		Amount	Re	Re	En	Ē
TO BE ABAT IN Facility			1000		nanc			, thermal systems i	nsulation,	(Specify	Removal	Repair	Encapsulate	Enclosure
(13)	2			(12				surfacing, VAT, other miscellaned		SF or LF)	a		ulat	ure
			Yes	No	0	N/A			,				(D)	
Basement AC Equip R	oom Phas	e 1			- 1		VAT/Ma	stic		225 SF				
Basement AC Equip R	oom Phas	e 2			1	\boxtimes	VAT/Ma	stic		225 SF				
Basement AC Equip R	oom Phas	e 3			1	\boxtimes	VAT/Ma	stic		225 SF	\boxtimes			
					[
Name of Registered Waste		INIC				EP V	Vaste No.	Cubic Yards of Waste	Name of Registe					
SERVICE TRANSPOR	CT GROUP	, INC	•			0990		100000000000000000000000000000000000000	MINERVA L	ANDFILL			12-11591	
City, State YARDLEY, PA								Disposal Date TBD	City, State WAYNESBU	JRG, OH				
Completed By (Print or Typ	e)	Title						Signature	1		ate			
Dillan DeCaro		Es	stimat	tor					1 No. Cano		4-1	0	19	

PAID

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

Chl #3554

Parameter and the second of th	Moeting!		,			70 0.00 and 5.	10)	Olo.	1			
Date of Notification (1)						ing Owner/Operator	(2)		0		7 12	-
/10	_ /	19		V	erizon Co	ommunications		E	G	E	1	
Agencies Notified Type	Notification	on		Stre	eet Address	i			Marin (CP)			
	nitial			1	5 East Mo	ntgomery Street						
	mended mendmen	. 41			, State, Zip			- H. E., A	PR	12	20	19
	mergency	-	—			, PA 15212		1				
	stification)		ing		ne of Conta			Tolophoro Nu	- 10 - 10	- 1		4, 87
	ancellation	ı		A	nthony Po	orta		Telephone Nun 412-638-40			169	
						NFORMATION		412-030-40	21	and the same	mandon (miliona)	-X-+ +-
Name of Facility Where Abater	nent is Tak	ing Pla	ce (3)	-	NOILITT I	IN OKWATION	Type of Facility	(4)				
Verizon Dover Central O	ffice						School (K-12					
Street Address							☐ Subchapter	8 (Other than K-1)	2)			
36 South Morris Street							Other (i.e., p homes, etc.)	rivate and comme	ercial	buildi	ngs,	
City (5)							Square Feet	# of Floors	- 1	51.1		
Dover							27,675	# 01 Floors		Bldg.		
County (6)				Co	unty Code (7)(STATE USE ONLY)		ior if being demoli	-	+-5	U	
Morris					<i>3</i> 2	n	Verizon	ior ir being demoil	snea,)		
Name of Monitoring Firm Hired	by Building	Owne	r (8)	ASC	Л No.	Name of Abateme						
USA Environmental Man	agement	Inc					VIRONMENTA					
Street Address						Street Address	THOMBLATA	L, INC.				and the second
8436 Enterprise Ave						1123 BEAVE	STREET					
City, State, Zip Code			-			City, State, Zip Co	A STATE OF THE STA					
Philadelphia, PA 19153						BRISTOL, PA						
Project Manager for Monitoring	irm		Tel	ephone	No.	Telephone No.	13007	I Linnana Ni				
Mark Jenkins			1		5-5810	215-788-6040		License No.				
Start Date (10)	Sche	eduled (ate (11)	Name of OSHA M		00509				
_4 / _24 / _19					19		/IRONMENTAL	INC				
Occupancy Status During Abate						Street Address	MONINENTAL	-, INC				
☐ Facility Closed/Vacated Durin	a Entire P	eriod of	Abate	ment		1123 BEAVER	STREET					
	e of Norma	al Facili	tv Hou	rs - De	scribe	City, State, Zip Co						
Time of Abatement:A	MF	PM/ <u>5:0</u> 0)PM-1	:30AM		BRISTOL, PA						
Scope of Work (Check all that ap	ply)					DIGIOTOL, FA	19007					
≥3 sf or ≥3 If		Ø.				☐ Full Conta	ainment with Nega	ative Pressure				
☐ ≥160 sf or ≥260 lf			enovat emolitic				osure	1957/2951251.07 5				
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***		☐ Glovebag☐ Non-Exen	Procedure	-Friable Procedur	0			
			Locat					T TIABLE T TOCEGUI	1	natam	ont T	
Location of Asbestos-Containing Material	(ACNA)		Norma ed Sole			Description of				atem		_
TO BE ABATED	(ACIVI)	Ma	intena	nce/	Asbes	stos Containing Mate , thermal systems ir	erial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility		Cus	todial	Staff?	(1.0.	surfacing, VAT,	or	(Specify SF or LF)	lova	ai-	apsı	uso
(13)		Vaa	(12)	1	-	other miscellaneo	us)	Of Or Er)	=		ulat	Гe
Pagamont Community A		Yes	No	N/A							CD	
Basement Generator Area				\boxtimes	ACM Pip	e Insulation		30 LF		П	П	П
st Floor Pipe Chase				\boxtimes	ACM Pip	e Insulation		5 LF				
		П						0 21				Ш
			- A- 37									
lame of Registered Waste Haule												
SERVICE TRANSPORT GR		_		JDEP V		Cubic Yards of	Name of Registe	red Landfill			are to in i	
	OUP, IN	J.		20990	Account on the control	Waste	MINERVA LA	ANDFILL				
ity, State						Disposal Date	City, State					-
YARDLEY, PA						TBD	WAYNESBU	RG, OH				
ompleted By (Print or Type)	Title)				Signature,		Date	9			-
Dillan DeCaro	E	stimat	or				D. Caro			0 -	19	
7 44						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 15 Just 14 W/1	1 -11	. A.	-		- 1

Pa 1			NO	TICI	~ 4 TI	State of	Nev	w Jersey						
19 N	00	K	_ NC)TIFI)	Pursu	ant to NJ	JAC	ESTOS ABA 8:60 and 5:	16)	NEC	E			3
Date of Notification (1)	22 /	1	19					Owner/Operator ipal Garage	(2)	400	1 0	001	^	And the second s
	ype Notif	ficatio	n		Stre	eet Address	3		1	ULL APR	12	201	9	11-
NA DOLLAR	☑ Initial				1	901 Lowe	r R	oad	3	j				1
☑ DOH	Amend Amend		44 A14	10/40	City	, State, Zip	Cod	de		Francisco de la constante de l		- 777	د در اور در اور اور	المُحد
	Amend Emerge	ment	# <u>1-4/</u>	10/19		inden, NJ				راد در از ماد اداد ماد در از		ue.	-1	
(NJAC 5:23-8)	justifica	ation)	moluui	iig		ne of Conta				Telephone Nu	mhor		(2005) W	
	Cancell	lation			R	obert Nev	vma	an		917-567-82				
								ORMATION		317-307-02	.24			
Name of Facility Where Aba	tement is	Takir	ng Plac	ce (3)		NOILITT I	141	OKWATION	Type of Facilit	(4)				
Linden Municipal Gar									School (K-1	5/13/5/19/5				
Street Address									☐ Subchapter	8 (Other than K-1	2)			
1901 Lower Road									Other (i.e.,	private and comm	ercial	buildir	ngs,	
City (5)									homes, etc					
Linden									25000	# of Floors	1	Bldg.		
County (6)	-			_	Co	unty Code (7)(5)	TATE USE ONLY)				+-5	0	
Union						, 0000 (, 10	TATE OOL ONET)	,	rior if being demo	ished)	K		
Name of Monitoring Firm Hir	ed by Bu	ilding	Owner	r (8)	ASC	/ No	N	lame of Ahatam	Garage ent Contractor (9					
Environmental Conne				(-)	1.00.		14							
Street Address				-			0	treet Address	IVIRONMENTA	AL, INC.				
120 North Warren Stre	et							1123 BEAVE	D CTDEET					
City, State, Zip Code		-					-	ity, State, Zip C						
Trenton, NJ 08608							1	BRISTOL, PA						
Project Manager for Monitoria	ng Firm			Te	lephone	No	_		19007	122				
Dominick Dercole				(09-39	2-4200		elephone No. 215-788-6040)	License No. 00509				
Start Date (10)4 /3 /1	19	Sched O	duled (Comp Ho	etion D	ate (11)	1 18	ame of OSHA N	lonitor VIRONMENTA	L. INC				
Occupancy Status During Ab	atement ((Chec	k only	one)				reet Address		•		7742772		
☐ Facility Closed/Vacated D	uring Ent	ire Pe	riod of	Abat	ement			1123 BEAVE	R STREET					
Abatement Performed Out	tside of N	lormal	l Facili	ty Hou	ırs - De	scribe		ty, State, Zip Co						
Time of Abatement: 7:00/		РМ/	P	PM	AM			BRISTOL, PA						
Scope of Work (Check all that $\triangle \ge 3$ sf or ≥ 3 If	t apply)	274-20-1-0						☐ Full Cont	ainment with Ne	gative Pressure				
≥ 160 sf or ≥260 lf			-	enova emoliti				☐ Mini-Enc	losure Procedure	n-Friable Procedu	re			
				Loca								atem	ent T	vne
Location of Asbestos-Containing Mate	rial (ACM	A)		Norma	ely by	0-6-		Description of	f		-	_	T	1
TO BE ABATED	!	''	Ma	inten	ince/	(i.e.	stos the	Containing Mat ermal systems i	terial (ACM)	Amount (Specify	em	Repair	nca	nclo
IN Facility (13)			Cus	todial (12)	Staff?		5	surfacing, VAT,	or	SF or LF)	Removal	= -	Encapsulate	Enclosure
(13)			Yes	No	N/A	-	ot	ther miscellaned	ous)	100 miles	-		llate	е
Break Room					N/A	VAT/Ma	stic	;		750 SF				
Break Room	0					Coveba	se I	Mastic		150 LF				
Supervisor Front Office	17					VAT/Ma				360 SF				
Back Office					\boxtimes	VAT/Mas	stic	1		750 SF				
lame of Registered Waste Ha	uler			IN	JDEP V		/NH-5V2-	oic Yards of	Name of Regis				Ш	Ш
SERVICE TRANSPORT	GROUP	, INC	:.	1 200	auler II 20990	No.	Wa	17/27	MINERVA L					
City, State YARDLEY, PA								posal Date	City, State					
Completed By (Print or Type)	-	75.11					T	BD	WAYNESB	URG, OH				
Dillan DeCaro		Title	47					Signature	Λ 2	Da Da	3500			
68-41 0 to 1 G		Es	timat	or				Dilla	n De Car	0/474	1-1	0-	19	

ASB-41 JAN 13 DD19022

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

Date of Notification (1)	20					ding Owner/Operato	or (2)	EG	E	U U	1	100
	/	19		L	inden Mu	unicipal Garage			4			
Agencies Notified EPA	Type Notifica	tion		Str	eet Addres	S		APR	12	201	9	_
☑ DOLWD	⊠ Initial			1	901 Lowe	er Road		1				
⊠ DOH	Amended Amendme		40/40	City	, State, Zip	Code		Kutawa				
□ DCA	Emergenc				inden, N					e G	ا منا منا ا	0
(NJAC 5:23-8)	justificatio		ing		me of Conta				e- organization	era vizue	41.44	*
	☐ Cancellation			100	obert Ne	TT (T. A.)		Telephone N				
				F		INFORMATION		917-567-8	224			_
Name of Facility Where	Abatement is Ta	king Pla	ice (3)			Oranization	Type of Facil	ity (4)				_
Linden Municipal C	arage						School (K					
Street Address		-					── ☐ Subchapte	er 8 (Other than K-	-12)			
1901 Lower Road								, private and comr	nercial	buildi	ings,	
City (5)		-					homes, et					
Linden							Square Feet	# of Floors		Bldg.	Age	-
County (6)			-	Co	untu Cada	(7) (OTATS 110 5 5 11 11 11 11 11 11 11 11 11 11 11 11	25000	1		+-5	0	
Union				0	unity Code	(7)(STATE USE ONLY		Prior if being demo	olished)		
Name of Monitoring Firm	Hired by Buildin	a Owno	r (0)	ASC	4.51-	1	Garage					
Environmental Con	nection Inc	ig Owne	1 (0)	ASCI	VI No.	Name of Abaten				12		
Street Address	nection, inc						NVIRONMENT	AL, INC.				
120 North Warren S	troof					Street Address					11000	-
City, State, Zip Code	treet					1123 BEAVE	R STREET					
						City, State, Zip C	ode			-	100	-
Trenton, NJ 08608						BRISTOL, P.	A 19007					
Project Manager for Monit	oring Firm		Tel	ephone	No.	Telephone No.		License No.				_
Dominick Dercole			6	09-39	2-4200	215-788-604	0	00509				
Start Date (10)	Sch	eduled	Compl	etion D	ate (11)	Name of OSHA I	Monitor	00303			-	_
4/_3_/		DNC.	H_Q	LL			VIRONMENTA	AL. INC				
Occupancy Status During	Abatement (Ch	eck only	one)			Street Address						
Facility Closed/Vacated	During Entire	Period o	f Abate	ement		1123 BEAVE	RSTREET					
Abatement Performed	Outside of Norm	al Facili	ty Hou	rs - De	scribe	City, State, Zip C						
Time of Abatement: 7:		F	PM	AM	e e e e e e e e e e e e e e e e e e e	BRISTOL, PA						
cope of Work (Check all I	hat apply)						10007		_			
] ≥3 sf or ≥3 lf		M P	enovat	ion		☐ Full Con	tainment with Ne	gative Pressure				
≥160 sf or ≥260 lf			emoliti				losure g Procedure					
						Non-Exe Non-Exe	mpted (*) and N	on-Friable Proced	ure			
Brown and a second and			Loca			2-112-112-12-12-12-12-12-12-12-12-12-12-		1 10000		haton	ant :	
Location o Asbestos-Containing M		Use	Norma	lly elv by		Description of	f			batem	1	-
TO BE ABAT	ED (ACIVI)	Ma	intena	nce/	Asbes	stos Containing Ma	terial (ACM)	Amount	en	Repair	Enc	
IN Facility		Cus	todial	Staff?	(1.6.	., thermal systems surfacing, VAT,	nsulation,	(Specify SF or LF)	Removal	<u>a</u> .	aps	
(13)		V	(12)	T		other miscellane		SF OI LF)	<u>n</u>		Encapsulate	
strance Hallway		Yes	No	N/A							е	
ntrance Hallway				\boxtimes	VAT/Ma	stic	200	100 SF				-
ffice Bathroom				\boxtimes	VAT/Ma	stic		36 SF		П	I	
oiler Room				\boxtimes	Flue Pat	tch		5 SF		1		
me of Registered Waste			N.	JDEP V	Vaste	Cubic Yards of	Name of Regis	torod Landell				_
SERVICE TRANSPOR	T GROUP, IN	C.	H	auler ID	No.	Waste	MINERVA					
y, State				20990		Dianas-ID:		LANDFILL				
y, State						Disposal Date TBD	City, State					
						1811	MAVNECD					
YARDLEY, PA	\						WATNESB	URG, OH				
		e Stimat				Signature	Decare	Da	te			-

rg.

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

Chu#3540

Date of Notification (1)				Na	me of Ruildi	ng Owner/Operator	. (0)	<u> </u>		-		
	22 /	19				nicipal Garage	(2)	EG	E		<u>W</u> 7	
⊠ EPA	Type Notificatio	n		1000000	eet Address 901 Lowe							
	☐ Amended				, State, Zip		1	APE	1 1	2	2010	
⊠ DOH	Amendment		_	- 4	inden, NJ			if The but	Parameter Co.	5.0	.010	
DCA (NJAC 5:23-8)	☐ Emergency justification)	(includi	ing		ne of Conta							
	☐ Cancellation			100000	obert Nev			Telephone Nun		() ()	V	WWE.
								917-567-82	24		No.	
Name of Facility Where Ab	-t			F	ACILITY II	NFORMATION		•				A STATE OF THE STA
Linden Municipal Gar	atement is Tak	ing Pla	ce (3)				Type of Facility					
Street Address	rage						School (K-1	2)				
1901 Lower Road							☐ Subchapter	8 (Other than K-12 private and comme	2)	huild	inas	
City (5)							homes, etc.)	iolai	Dulla	ngs,	
Linden							Square Feet	# of Floors	T	Bldg.	Age	
							25000	1		+-5		
County (6)				Co	unty Code (7)(STATE USE ONLY)	Current Use (Pr	rior if being demoli	shed)		
							Garage					
Name of Monitoring Firm Hi		Owner	r (8)	ASC	M No.	Name of Abatem	ent Contractor (9)			-	-	
Environmental Conne	ction, Inc						IVIRONMENTA					
Street Address						Street Address			77.			
120 North Warren Stre	eet					1123 BEAVE	RSTREET					
City, State, Zip Code						City, State, Zip C	ode		-	-		
Trenton, NJ 08608						BRISTOL, PA	19007					
Project Manager for Moniton	ing Firm		Te	lephon	e No.	Telephone No.		License No.				
Dominick Dercole					2-4200	215-788-6040)	00509				
Start Date (10)	Sche	duled (Comp	letion D	ate (11)	Name of OSHA N	Monitor	10000				
4/_3_/_				5 /	19	BRISTOL EN	VIRONMENTAL	L, INC				
Occupancy Status During At	patement (Chec	k only	one)	-		Street Address		•				
☐ Facility Closed/Vacated ☐	ouring Entire Pe	eriod of	Abate	ement		1123 BEAVE	RSTREET					
☐ Abatement Performed Ou Time of Abatement: 7:00	tside of Norma	I Facilit	ty Hou	ırs - De	scribe	City, State, Zip Co	A CONTRACTOR OF THE PROPERTY O					
			/IVI	AN	1	BRISTOL, PA						
Scope of Work (Check all tha	it apply)					☐ Full Cont	ainment with Neg	otive December	2 00 11-			
 ≥3 sf or ≥3 if ≥160 sf or ≥260 if 			enova				osure	ative Pressure				
23 - 100 31 01 - 200 II			emoliti	ion		Glovebag	Procedure					
		Is	Loca	tion	T	M Moll-Exe	ripted (*) and Nor	1-Friable Procedur	е			
Location of		1	Norma	ally		Description of	.		Al	paten	nent T	уре
Asbestos-Containing Mate TO BE ABATED	erial (ACM)		ed Sol	ely by	Asbes	tos Containing Mai	terial (ACM)	Amount	Re	Re	m	四
IN Facility	2	1,120,034-5		Staff?	(i.e.	, thermal systems i	nsulation.	(Specify	Removal	Repair	сар	clos
(13)		ļ	(12)	1	_	surfacing, VAT, other miscellaned	or ous)	SF or LF)	/al		Encapsulate	Enclosure
Break Room		Yes	No	N/A		-41-					(e)	
Break Room				-	VAT/Mas			750 SF	×			
Supervisor Front Office						se Mastic		150 LF	×			
Back Office				+	VAT/Mas			360 SF	×			
Name of Registered Waste Ha	auler			IJDEP	VAT/Mas			750 SF	\boxtimes			
SERVICE TRANSPORT		,	1 2 2	lauler II		Cubic Yards of Waste	Name of Registe					
City, State				20990)		MINERVA L	ANDFILL				
YARDLEY, PA						Disposal Date	City, State					
						TBD	WAYNESBU	JRG, OH				
Completed By (Print or Type)	Title					Signature		/ Date				-
Dillan DeCaro	Es	stimat	or			1)illan	r DeCar			CC	-/	91
BB-41 ADIGIATA						110 COCO	Law	0 0 0		ic oc	. 1	4

Pg.2

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

Date of Notification (1)		-		Mai	me of Build	ing Owner/Operator	(2)		n 1	1	0040	-
3 / 22	/ _1	9				ing Owner/Operator inicipal Garage	(2)	III IN AP	Η .	1	ZUTS	1
Agencies Notified Type No	tification	n			eet Address							
⊠ EPA ⊠ Initia					901 Lowe	3 3		American			1.74	
☑ DOLWD ☐ Ame					, State, Zip				distriction of the second of t	- 1	respective s	
	dment		_	1	inden, NJ							
DCA Eme (NJAC 5:23-8) Line	gency (i cation)	includi	ng	-	ne of Conta							85
Cano					obert Nev	17.7%		Telephone Num				
			-					917-567-822	24			
Name of Facility Where Abatement	is Takir	no Play	10 /31	F	ACILITY	NFORMATION	T=					
Linden Municipal Garage	is rakij	ig Flat	<i>y</i> e (3)				Type of Facility	2 50				
Street Address							School (K-12	t) 3 (Other than K-12	2)			
1901 Lower Road							Other (i.e., p	rivate and comme	rcial t	ouildir	igs,	
City (5)			-		-		homes, etc.)				5 8	
Linden							Square Feet	# of Floors	E	3ldg. /	Age	
County (6)				100	······································	TVOTATE LIGE OUT A	25000	1		+-5()	
Union				100	unty Gode (7)(STATE USE ONLY)		or if being demolis	shed)			
Name of Monitoring Firm Hired by B	uildina	Owner	- /0\	I A COL	VI No.	This can	Garage					
Environmental Connection,		Owner	(0)	ASCI	VI NO.		ent Contractor (9)		- 65			
Street Address	IIIC						VIRONMENTAL	_, INC.				
120 North Warren Street						Street Address						
City, State, Zip Code						1123 BEAVE	=0.07					
Trenton, NJ 08608						City, State, Zip C						-
Project Manager for Monitoring Firm			1-			BRISTOL, PA	19007					
Dominick Dercole			100000	lephone		Telephone No.		License No.				
Start Date (10)	10.6.	1.1.1.	. 1		2-4200	215-788-6040		00509				
_4 / _3 / _19					ate (11)	Name of OSHA N						
				5 /	19	BRISTOL EN	VIRONMENTAL	, INC				
Occupancy Status During Abatemen	t (Chec	k only	one)			Street Address						
□ Facility Closed/Vacated During E □ Abatement Performed Outside of the performance	ntire Pe	riod of	Abat	ement	2.0	1123 BEAVE	R STREET					
Time of Abatement: 7:00AM-3:	OPM/	raciii	y Hou	Irs - De	scribe	City, State, Zip Co					A=10	
Scope of Work (Check all that apply					'	BRISTOL, PA	19007					
Scope of Work (Check all that apply						□ Full Cont	alamant Ub. N.			- 100		
□ ≥3 sf or ≥3 if		⊠ Re					ainment with Nega	itive Pressure				
≥160 sf or ≥260 lf		□ De	emolit	on		☐ Glovebag	Procedure					
		le le	1000	tion	T	⊠ Non-Exe	mpted (*) and Non	-Friable Procedur	е			
Location of			Norma	ally		Description o			Ab	atem	ent T	ype
Asbestos-Containing Material (At	M)	Use	ed Sol	ely by	Asbe	stos Containing Ma	terial (ACM)	Amount	Re	Re	En	m m
TO BE ABATED IN Facility				ance/ Staff?	(i.e	., thermal systems i	nsulation,	(Specify	Removal	Repair	cap	Clos
(13)			(12)			surfacing, VAT, other miscellaned		SF or LF)	à		Encapsulate	Enclosure
**************************************		Yes	No	N/A		Other miscellanet	ous)				ate	
Intrance Hallway				Ø	VAT/Ma	stic		100 SF				
Office Bathroom				×	VAT/Ma	stic		36 SF		H		-
Boiler Room					Flue Par	tch		5 SF				
			П					0 01	-	_		
ame of Registered Waste Hauler		_		JDEP '	Maste	Cubic Yards of	Name of Design	1 1611				
SERVICE TRANSPORT GROU	P, INC) <u>.</u>	1.53	lauler II	D No.	Waste	Name of Registe					
ity, State				20990		Disposal Date	City, State					
YARDLEY, PA						TBD	WAYNESBU	RG. OH				
ompleted By (Print or Type)	Title		=5-1/4			Signature				V.		
Dillan DeCaro	Es	timat	or				DeCara	One 3	-	רו	-10	}

HPROVED BY: TOM VOORHEES, State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Chr.#3550

City, State Bristol, PA Completed By (Print or Type)			Tie	tle		Disposal Date 4/8/19 Signature	City, State Fairless H	ills, PA	640	Date			
				7.00									
Bristol Environmental Inc.			2000	auler II 8 <mark>706</mark>	30000000	of Waste 2 cu yd	Fairless L	andfill					
Name of Registered Waste Hau	ıler		10.000		400000000000000000000000000000000000000	Cubic Yards	Name of Re	gistered l	_andfill	-2/11-1-21			
		T	Ħ	TT					74				
		Ħ	H	Ħ									
		H	H	H									
			H	H				-		一一	I		百
Exterior closet			H	H	V	viap allu out	Tittings	2.	, m.u.		Ħ	Ī	Ħ
Futuriou algorit		Yes	No		"	Vrap and Cut'	' Fittings	21	0 Ea		П		П
in Facility (13)		Custo	odial (12)	Staff?		nsulation, surfactor or other miscella	ing, VAT			Removal	Repair	Clean Up	Enclsoure
Material (ACM) TO BE ABATED				ice or		(i.e., thermal sy				Ren	Re	Cles	ncl
Asbestos-Containii	ıg		nally lolely l			Asbestos-Cont Material (AC			pecify or LF)				-
Location of			Locati			Description				Aba	ateme	ent T	ype
					V			xempted a					
≥3 sf or ≥3 lf ≥160 sf ≥260 lf				novation nolition			Mini-E Glove	nclosure Bag Proc	edures				
Scope of Work (Check all that a	ppiy)						☐ Full Co	ontainmen	nt with Ne	gative	Pres	sure	
Facility Occupied During	Abatement 7:0	0 AN	to 3	:30 P	'IVI								
Describe:	20 <u>20</u> 018					Bristol, PA	19007						
Abatement Performed C	utside of Norma	ıl Hoı	ırs –	7am to	3pm	City, State & 2							
☐ Facility Closed/Vacated	During Entire Pe	eriod (of Aba			1123 Beave							
Occupancy Status During Abate	ment (Check on	ly one))			Street Addres							
4/6/19		4/6/			a	Bristol Envi	ronmental	lnc.			7.0		
Scheduled Start Date (10)	Scheduled Com					Name of OSH							
Brian Clark		856-6			<i>(</i> 0)	(215) 788-60			509				
Haddon Heights, NJ 08035 Project Manager for Monitoring I	Firm	Telen	hone	Numb	er	Telephone Nu		Lic	cense Nu	mber	4/1-7-2-2-2		
City, State & Zip Code						City, State & Z Bristol, PA 1							
515 Grove Street, Suite B						1123 Beaver							
Street Address						Street Address							
Pennoni Associates		es atolik				Bristol Envi		Inc.					
Name of Monitoring Firm Hired b	y Building Own	er (8)		ASC	M No.	Name of Abate						alka, =	
East on out in o						Dormitory			17-5-				
Lawrenceville	Mercer			\	me5	Current Use (F	Prior if being	demolishe	ed)				
City (5)	County (6)	Cor	untv C	ode (7)	12000	powerd and the	3			40+		
2083 Lawrenceville Road						Square Feet	# of Flo			lg. Age		-	Tortus.
Street Address							. private & co		buildings	, hom	es, et	(c.)	
Kroner Dormitory						School (K	(-12) er 8 (Other th	an K-12\					
Name of Facility Where Abatem	ent is Taking Pla	ice (3))			Type of Facility							
				CILITY	Y INFO	RMATION							-0.00
☐ DCA ☐ Cand	ellation	V		r Edd				2	0,0	J-030	110	.Y	
	rgency			of Cor						epnor 9-896			1.5
□ Amer □						J 08648			I To	lephor	ra Nı	ımhe	<u>- :</u>
☐ DEP ☐ Initial					Zip Co			1 22 123	477				and of the
EPA /		2	083 1	Lawre	encevi	lle Road			APF	3 12	2 20	19	-
Agencies Notified Type Notification	ation			Addre				lini	1				
Date of Notification (1) 4/4/19					ersity	wner / Operator	(2)	11.17	EG	E	U 1:	/ (::	
													man 1

PAID

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

Chk#3547

Date of Notification							Owner / Operato		IN EC	E	W		1-7
Agencies Notified	4/3/19 Type Notifica	ation		East Stree			oard of Educat	ion		125 U	13	V-50	7
EPA	Type Nounce	ation	- 1			ville R	nad						1
DEP					-	& Zip (TULL API	R 12	2019	1	land
□ DOL	Amer	nded	- 1			NJ 08			12. 12.1				loune
□ DOH	☐ Emer	gency		Name	e of C	Contact			i desame	Telepho	ne N	umb	er
☐ DCA	☐ Cano	ellation		Ms.	Judy	Holla	day			908-78			
					CILI	TY INF	ORMATION			100000	12 VI		
Name of Facility Wh		ent is Taking Pla	ace (3	3)			Type of Facil						
Maintenance Bar	n		27	705			School (I						
Street Address	2							ter 8 (Other th					
43 Wertsville Roa	id								mmercial buildin			tc.)	www.me
City (E)		0	10-		0 1	(7)	Square Feet	# of FI	oors	3ldg. Ag	е		
City (5)		County (6)	100	unty	Code	(7)	0	(D.::(L.:					
Ringoes		Hunterdon	1					(Prior if being					
Name of Monitoring	Eirm Lirad h	L Building Own	75 (0)		IAC	SCM No		ntenance ba					
RJB Environmen		y building Owne	1 (0)		AS	CIVI NO		tement Contra ironmental,					
Street Address	tui iiio						Street Addres		IIIC.				
56 East Bridge St	reet						1123 Beave						
City, State & Zip Co							City, State & 2						
Morrisville, PA 19							Bristol, PA						
Project Manager for Richard Beach	Monitoring F			hone			Telephone No		License N	lumber			
Scheduled Start Dat	o (10)			991-	- 14		(215) 788-60 Name of OSH		00509				
4/15/19	e (10)	Scheduled Comp	4/22		te (1	1)		ironmental	Inc				
Occupancy Status D	uring Abater						Street Address						
		During Entire Pe			atem	ent	1123 Beave	r Street					
		utside of Normal	Ho	urs –			City, State & 2	Zip Code					
	7:00am to 3						Bristol, PA	19007					
	pied During												
Scope of Work (Che	ck all that ap	piy)						□ Full Co	ntainment with N	lenative	Pres	cure	2
≥3 sf or ≥3 lf				Rer	novat	ion			nclosure	vogative	1 100	Juio	re:
≥160 sf ≥260) If		\boxtimes	Der	nolitio	on		Glove	Bag Procedures				
									kempted and Nor	n-Friable	Prod	cedu	ire
	cation of			Locat			Description		Amount	Aba	teme	ent T	уре
	os-Containing erial (ACM)	3		nally l olely l			Asbestos-Cont Material (AC		(Specify SF or LF)			ш	
	E ABATED	1		tenan		r	(i.e., thermal sy		SF OI LF)	Re	Z	nca	Enc
	Facility	(Custo	odial 3	Staff?	?	insulation, surfac	ing, VAT		Remova	Repair	psu	Enclsoure
	(13)		Yes	(12) No	N/A		or other miscella	aneous)		/ <u>a</u>	=	Encapsulate	J.Te
Exterior				140	IN/A	\							
Exterior					H	-	Transite		2000 SF		님	<u> </u>	님
Restrooms Kitchen				H	H	-	Transite		900 SF		붜	井	님
Boiler Room				H	H	-	Board Mas Boiler	SLIC	480 SF		H	븜	H
Boiler Room				H	H		Flue Pack	ina	30 SF 2 SF		H	H	ዙ
Bollet Room				H	H		Flue Fack	ilig	2 3 7		H	片	H
Name of Registered	Waste Haule	er		NJ	DEP	Waste	Cubic Yards	Name of Red	gistered Landfill			ш.	1—
				На	uler l	ID No.	of Waste		, <u></u>				
Service Transpor	t Inc.			20	990		15 Cu YD	Minerva La	ındfill				
City, State					187 m	**************************************	Disposal Date	City, State					
New Castle, DE				Tare			4/22/19	Waynesbu	rg, Ohio				
Completed By (Print	3-5050 35			Tit	le ojec i	+	Signature	2	10-	Date			
Gino Pizzigoni					ojec anag		Lino t	unigor	vi/91-	4/4/	19		10
				1416	anay	01	1901-0 "	100	6				

PAID

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

Chl473549

Date of Notification (1)		Name	of Buildin	g Owner / Operat	for (2)	F	PE	ПП	A Comment	
4/4/19		Macy	s Inc.	g Owner / Operar	101 (2)	ME	GE	II /		
Agencies Notified Type Notific	ation	Street	Address			III				
DEP Initia	ı			th Street			IPR 1	2 201	10 1	
	nded		state & Zip			(41 61)	11 11	- 401		
	rgency		of Contac			L. Company	Telepho	no Ni	mhor	
	cellation		enrich			ASS	(513) 5			
		FΔC	II ITY IN	FORMATION		* * * * * * * * * * * * * * * * * * *	. No work Ass.			
Name of Facility Where Abatem	ent is Taking Plac	ce (3)) LI I II I	Type of Fac	ility (4)					
Macys Store				School						
Street Address			30000 320 1102200000	Subcha	pter 8 (Other t	han K-12)				
275 Parsonage Road						ommercial buildi			c.)	
City (5)	County (6)	County	odo (7)	Square Feet	# of F	loors	Bldg. Ag	е		
Edison	Middlesex	County C	ode (7)	Current Llee	/Delegate to					
	Wildulesex			Retail	(Prior if being	demolished)				
Name of Monitoring Firm Hired b	y Building Owner	r (8)	ASCM N		atement Contr	actor (0)				
Pennoni Associates, Inc.		(-)	,		/ironmental,	Inc.				
Street Address			•	Street Addre	ess					
24 Commerce St, Suite 300 City, State & Zip Code				1123 Beav						
Haddon Heights, NJ 08035				City, State & Bristol, PA						
Project Manager for Monitoring F	irm Te	elephone I	Number	Telephone N		License I	Vlumber			
Ralph Coppola	8	56-547-0	505	(215) 788-6		00509	varriber			
Scheduled Start Date (10)	Scheduled Compl		(11)	Name of OSI						
4/23/19 Occupancy Status During Abater	nont (Chook ank	/15/19			rironmental	Inc.				
Facility Closed/Vacated [During Entire Peri	one) od of Abat	ement	Street Addre	7.7					
	utside of Normal	Hours –	01110111	City, State &						
Describe: 10:00 PM to 7				Bristol, PA	19007					
Facility Occupied During	Abatement									
Scope of Work (Check all that ap	ply)				N 5.110		¥	ian i		
≥3 sf or ≥3 If	۵	⊠ Reno	vation			ntainment with N	Negative	Pressu	are	
≥160 sf ≥260 lf	Ĩ	Demo								
						Bag Procedures cempted and Nor	n-Friable	Proce	dure	
Location of Asbestos-Containing	, N	Is Locatio ormally Us	3143	Description		Amount	Aba	temen	t Type	
Material (ACM)	'	Solely by		Asbestos-Con Material (A		(Specify SF or LF)			m	
TO BE ABATED	F-75.000	aintenance	50000000 H	(i.e., thermal s	ystems	0. 0. 2. 7	Rei	ZD	Enc	
in Facility (13)	C	ustodial Sta (12)	аπ?	insulation, surfactor or other miscella			Remova	Repair	Enclosure Encapsulate	
	Ye		V/A	or other miscell	arieous)		<u>m</u>		re	
Lower Level, Main Level & U	pper Level			Mastic		55,300 SF			1	
				Floor Til		39,472 SF		ᆔ┝	ᅱ	
								Ħir	計片	
Name of Registered Waste Haule	r L		=P Wasta	Cubic Yards	Name of De-	istered Landfill				
			er ID No.	of Waste	Name of Reg	istered Landilli				
Service Transport Inc.		2	0990	215 Cu Yd	Minerva La	ndfill			5	
City, State New Castle, Delaware				Disposal Date	City, State	011				
Completed By (Print or Type)		Title		7/15/19 Waynesburg, OH						
Gino Pizzigoni		Proj	ect	Signature) .	- 10	Date	0		
			ager	Lemo 1	wy Joh	1/Lpc	4/4/1	J		
					1 11	1. 0	1			

State of New Jersey

					State o	of New Jersey		P	0	P 1	77.77	7 /
CK002702P	ATT		NOTI	FICA (Pu	TION OF	ASBESTOS ABA NJAC 8:60 and 5:	ATEMENT		G	E	M	-
Date of Notification (1)	BALA	est 29						mi				
_04/05	_ / _	2010			Name of Buil	lding Owner/Operato	r (2)		APR	12	201	9
Λ	Notifica	500000000000000000000000000000000000000			State of NJ	DPMC	į					
□ EPA 🗵 Ir	itial	uon			Street Addres	ss						
LI DOLWD IT A	mended			_	33 WEst St	tate Street		P 10. 1 +				Section 1
	mendme			- 1	City, State, Zi	ip Code		17. 17. 170.	trans and see	A CONTRACTOR	an and	A design
/N1/AC = 00 01	mergeno stificatio	y (incl	uding	L	Trenton, NJ		¥7					
1	ancellatio			- [1	Name of Cont	tact		Telephone	Numbe	er .		_
		<i>311</i>			Regina				rambo			
Name of Facility Where Abatem	ont in Ta	Li n			FACILITY	INFORMATION						_
The same of the sa	ent is 1a	iking P	lace (3	3)			Type of Facility	(4)				
Street Address							School (K-12	1				
32 Jefferson Lake Road							Subchapter 8	Other than I	K-12)			
City (5)							Other (i.e., pr homes, etc.)	ivate and com	nmercia	al build	lings.	,
Byram, NJ							Square Feet	# of Floors		Did	Α	
County (6)							1200	1		1 1000	. Age	2
Sussex				1	County Code	(7)(STATE USE ONLY)	Current Use (Price	1 2	nolisha		<i>ј</i> т	
Name of Monitoring Firm Hired b	v Duitai	~ 0					Abandoned Res	sidence	ionsile(u)		
N/A	y bullain	g Own	er (8)	AS	CM No.	Name of Abateme	ent Contractor (9)					
Street Address						Yannuzzi Env	/ironmental Ser	vices				
						Street Address						
City, State, Zip Code						135 Kinnelon	Road, Suite 10	2				
						City, State, Zip Co	de					
Project Manager for Monitoring Fi	rm		1=			Kinnelon, NJ	07405					
S S S S S S S S S S S S S S S S S S S	1111		16	elepho	ne No.	Telephone No.		License No.				
Start Date (10)	Sch	odule d				908-218-0800		01228				
_04 / _09 / _19	Scil	euulea	Comp	letion	Date (11) / 19	Name of OSHA Mo						
Occupancy Status During Abatem		1)4	/ _12		7 19	Yannuzzi Envi	ironmental Serv	ices				
A Facility Closed/Vacated During	Catina D					Street Address						
- routerile religimen i literae	of Norma	1	*** * *			135 Kinnelon I	Raod					
Time of Abatement:AM-	F	PM/	PN	115 - L 1-	escribe AM	City, State, Zip Coo	le				10-20-0	
cope of Work (Check all that appl				-		Kinnelon, NJ 0						
	у)											_
] ≥3 sf or ≥3 If] ≥160 sf or ≥260 If		□ R	enova	tion		☐ Mini-Enclo	nment with Negati	ve Pressure				
		D &	emoliti	on		☐ Glovebag F	Procedure					
		T	s Loca	tion		L⊠ Non-Exem	pted (*) and Non-F	riable Proced	ure			
Location of			Norma	illy						batem	ent T	vn
Asbestos-Containing Material (A TO BE ABATED	(CM)	Us M:	ed Sol	ely by	Aspes	Description of tos Containing Mater	ial (ACM)					_
IN Facility		Cus	stodial	Staff?	(i.e.,	mermal systems ins	ulation	Amount (Specify	Removal	Repair	Encapsulate	a incount
(13)			(12)	_		surfacing, VAT, or other miscellaneous	.,	SF or LF)	oval	=	nsd	Jour
		Yes	No	N/A		outer miscellaneous	5)				late	a
xterior Siding				(X	Trans	site Siding						
apor Barrier Under Floor				X	Trans	one ording	1	800 sf	X			
ink in Kitchen								1115 of	X			
			X	Sink (Cink Coati					금	-	
tchen					031						Ш	L
ne of Registered Waste Hauler NJD					vvaste 10		lame of Posi-t	10 sf	X			
Haule					D No. V	Vaste	lame of Registered					
ry, State 174						20 Disposal Date C	Sussex County U	tilities Authori	ty			
innelon, NJ 07405							ity, State					
npleted By (Print or Type)	Title					04/12/2019	Lafayette, NJ					
ohn Mucha	Pro	oject	Mana	qer		Signature (1)	(M)	Dat	te			
41						1 Jeh	- 1 (and	04	/05/201	10		
3	* \(\)	0 004	100 44.		_			04/	03/201	y		

X1884	PAI		NOT	FICATION	State of New Jers DN OF ASBESTO nt to NJAC 8:60 a	SABATE	EMEN 20)	т	The state of the s					fint For
Date of Notification (1) 04/9/2019					of Building Owne Nebb Compan		r (2)		100	AF	'K I	2	2019	
Agencies Notified EPA	Type Notification				Address Middlesex Turr	npike				Fig. 15 -		17.15	G.	- white
DEP X DOL	Amended Amendment Emergency	#			State, Zip Code ord, Massachu	isetts 0	1370				25.5460	Later Company		71.
DOH DCA	justification) Cancellation		ig	Al Mo	of Contact CVicker				All 1/755/2013	ephone N 8 401 2		r		
Name of Facility Where	Abatement is Takin	g Place	(3)	FAG	CILITY INFORMA	TION	Тур	e of Facility						
Street Address City (5)							×	School (K- Subchapter Other (i.e. p etc.)	8 (Othe	er than K- & commer	12) cial bu	iilding	s, hom	es,
Elmwood Park							Squ. 620	are Feet 104	# of 2	Floors		Bldg. 40 y		
County (6) Bergen County				County (STATE	Code (7) USE ONLY)		Curr	ent Use (Pri	or if bei	ng demoli	shed)			
Name of Monitoring Firm Divine Environmen	n Hired by Building (tal Inc.	Owner (8)		м No. 0385	Name JLs (of Ab	atement Cor p, Inc.	tractor	(9)				
Street Address 55 Berkeley Terrac	е			1 8	0000	Street 25-1		ess h Street						-
City, State, Zip Code Irvington, New Jers	ey 07111			City, State, Zip Code East Elmhurst, N					e					\dashv
Project Manager for Mor Timothy Aghaji	nitoring Firm			Telepho 973 4	one No. 83 3400	Teleph 877 2	one N	lo.		License I	No.			
Start Date (10) 04/19/2019		TBD		mpletion	Date (11)	Name	of OS	HA Monitor alytical						
Abatement Perform	ated During Entire P	eriod of	Ahater	nent		Street 255 V	Addre V 36	ss th Street						
Other - Describe: Scope of Work (Check A			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					ip Code , NY 1001	8					
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demo l it			×	Mir Glo	I Containme ni-Enclosure ovebag Procon-Exempted	edure				ra.	
Location Asbestos-Containing		De	scription	of		, , , , , , ,	- Jon I Hal	10110	Abate	ement /pe				
TO BE ABA In Facili (13)	TED	ed Sole aintena todial 8 (12)	rce/	(i.e. thermal surfa	tos Containing Material (ACM) thermal systems insulation, surfacing, VAT, or other miscellaneous)				ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure	

ame of Registered Waste Hauler s Group, Inc.		NJDEP Waste Hauler ID No. 2A-799			Cubic Yards of Waste TBD	 me of Registered Landfill O Sand Company	
City, State East Elmhurst, NY					Disposal Date	 v, State	
Completed by Title Secret Secret Secret Title Secret Secret Title Secret Secret Title Title Secret Title Title Secret Title Title Secret Title Title Title Secret Title Ti		tary			Signature	Date 4/9/2019	

Roofing Flashing

Roofing Flashing

X

Χ

Concrete Deck

Wood Deck

33500

19500

X

X

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

122
 [

					State of N	New	Jersey		1111_5 6	IE	U	W	
Killo9 PAII	D	NO	TIFIC (F	CATIC Pursu	ON OF AS	SBE	STOS ABA 8:60 and 5:	TEMENT 16)	APF) 1	2 0	010	****
Date of Notification (1)	19				me of Buildin	ng Ov	wner/Operator	(2) # 1904-5460	Check			019	
Agencies Notified Type Notifi	ication			Stre	et Address				1000		14.	FEMILE.	- 12
☑ EPA ☑ Initial				Decognit	000 Hadley		ad		Established			وريبعنان	4,
☑ DOLWD ☐ Amende					, State, Zip (5							
□ DHSS Amendr	-			1	outh Plain								
DCA Emerge (NJAC 5:23-8)		ciuali	ng		ne of Contac		-,		Telephone Nu	mhar			_
☐ Cancell				Pa	atrick Disp	poto			908-986-57				
				_	ACILITY IN				300-300-37	71			_
Name of Facility Where Abatement is	Taking	Plan	e (3)	г	ACILIT IN	NFOI	RIVIATION	Tuna of Facility	. (4)				_
PSE&G- Madison Street Subs)C (3)					Type of Facility					
Street Address	tation	10						School (K-1	· 8 (Other than K-1	2)			
1160 Madison Street								Other (i.e.,	private and comm	ercial i	buildir	ıgs,	
City (5)								homes, etc				-	
Hoboken								Square Feet	# of Floors	E	3ldg. /	\ge	
County (6)				1.									
Hudson				Cor	inty Code (7	r)(STA	TE USE ONLY)		rior if being demol	ished)			
								Substation					
Name of Monitoring Firm Hired by Buil	laing O	wner	(8)	ASCN	No.			ent Contractor (9)				
Health & Safety Services							bateTech, I	nc.					
Street Address							eet Address						Ī
PO Box 365						-		. PO Box 25					
City, State, Zip Code					1	, State, Zip Co							
Berlin, NJ 08009							umberton, N	IJ 08048					
Project Manager for Monitoring Firm				ephone		2,000	ephone No.		License No.				
James Proctor					1-8850	60	09-265-2107	\$	00529				
4 /22 /19	5	_ /	3		ate (11) 19		ne of OSHA M MSL Analyt i						
Occupancy Status During Abatement (Stre	et Address						_
☐ Facility Closed/Vacated During Enti	re Perio	od of	Abate	ment		20	00 Route 130	North					
Abatement Performed Outside of No Time of Abatement:AM	ormal F	acilit	y Hour	s - Des	scribe	City,	State, Zip Co	de				-	_
	PIVI/	_	PIVI-		_AIVI	Ci	innaminson	NJ 08077					
Scope of Work (Check all that apply)							☐ Full Conta	ainment with Neg	Negative Pressure				_
≥3 sf or ≥3 If ≥160 sf or ≥260 If			novati				☐ Mini-Encl						
		3 00	mondo				⊠ Non-Exen	npted (*) and No	n-Friable Procedu	re			
-			Locat							_	atem	ent Ty	VI
Location of Asbestos-Containing Material (ACM	,		Normal d Sole				Description of		V-100-000-00-00		_		T
TO BE ABATED	"		intena				ontaining Mate mal systems in		Amount (Specify	Removal	Repair	Encapsulate	
IN Facility		Cust	odial 9 (12)	Staff?	(,	su	ırfacing, VAT,	or	SF or LF)	oval	=	nsd	
(13)	-	Yes	No	NI/A	-	othe	er miscellaneo	us)				late	3
ontrol House		res	No.	N/A	Door Cau	ulk			10 LF		П		1
ontrol House	_				Cement I		els		95 SF				
ontrol House			Window	Cau	lk		12 LF				1		
KV Yard	\boxtimes	Transite	Pipe	9		300 LF		П	П	ſ			
ame of Registered Waste Hauler			752.50	JDEP V	Vaste (c Yards of	Name of Regist					-
Environmental Transport Group	o, INC.			auler ID	No.	Wast	e		rless Landfille				
ity, State				00069	2061	25 Dispo	sal Date	City, State					_
Flanders, NJ		1		3/19	Morrisville,	PA 19067							
ompleted By (Print or Type)	Title						Signature	1		to			_
Gwendolyn Trumbetti	ons C	oordi	nator	,	Gigilatule)	mt	Da	це Ц-	-8-	10	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) 4 19 Kean University / Job #1903-5448 Check #11218 Agencies Notified Type Notification Street Address **⊠** EPA ☑ Initial 100 Morris Avenue **⊠** DOLWD ☐ Amended City, State, Zip Code ☑ DHSS Amendment # Union, NJ 07083 □ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Suzanne Kupiec 908-737-4804 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Kean University- Dougall Hall ☐ School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 1000 Morris Avenue homes, etc.) City (5) Square Feet # of Floors Bldg. Age Union, NJ 07083 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Union University 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. Jim Guilardi 856-840-8800 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 4 / 23 / 19 __4__ / 23 / 19 **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/_ Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure $\boxtimes \ge 3$ sf or ≥ 3 If □ Renovation Mini-Enclosure WVap a cut ☐ ≥160 sf or >260 lf ☐ Demolition ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure

Is Location Abatement Type Normally Location of Description of Used Solely by Repair Asbestos-Containing Material (ACM) Removal Encapsulate Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED nclosure (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Lobby X Pipe Insulation 8 LF \boxtimes П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill AbateTech, Inc. Hauler ID No. Waste **GROWS-Fairless** 18750 City, State Disposal Date City, State Lumberton, NJ 4/23/19 Morrisville, PA Completed By (Print or Type) Signature Date Gwendolyn Trumbetti

Operations Coordinator

CK11219 P	AU	NOTIF	ICATI (Purs	ON OF A	ASB	w Jersey BESTOS ABA C 8:60 and 5	ATEMENT :16)	E	G E		$\overline{\mathbb{W}}$	
Date of Notification (1)						Owner/Operato	r (2)		pp 1	2 1	019	
4/9	/19			Kean Univ	vers	sity / Jol	b #1903-5449 C	heck #11219	rn '	4 6	UIY	appear to
	otification		St	reet Addres	s							1
⊠ EPA			- 1	100 Morris		/enue		Far in			100	- 4.
☑ DOLWD ☐ Ame			Cit	y, State, Zij	р Со	ode				, p.191	4	
	ndment #_ rgency (incl	din n		Jnion, NJ								
	ication)	uaing		me of Cont				Tolonhone A	lmala an			
☐ Cano			1	Suzanne K		iec		Telephone N 908-737-				
						ORMATION		300-131-	4004			
Name of Facility Where Abatement	is Taking F	Place (3)	ACILITI	HAL	ORMATION	Tunn of F - 104	(4)				
Kean University- Downs Ha			Ś				Type of Facility	55 50				
Street Address							School (K-1)	2) 8 (Other than K	(-12)			
1000 Morris Avenue							Other (i.e., p	rivate and com	mercial	buildi	ngs,	
City (5)							homes, etc.					
Union, NJ 07083							Square Feet	# of Floors		Bldg.	Age	
County (6)			Co	unty Code	(7)/0	TATE USE ONLY)	10 111 15					
Union				unity Code	(1)(3	TATE USE UNLY)		ior if being dem	olished)		
Name of Monitoring Firm Hired by B	uilding Ow	ner (8)	ASC	M No.	I N	lama of Abatan	University					
TTI Environmental	anding OW	101 (0)	ASC	WI NO.	IN		ent Contractor (9)					
Street Address					-	AbateTech, I	inc.					
1253 North Church Street					0.770	treet Address	50 5					
City, State, Zip Code							e. PO Box 25					
Moorestown, NJ 08057					100	ity, State, Zip C						
Project Manager for Monitoring Firm		I T	elephone	a Na		Lumberton, I	NJ 08048					
Jim Guilardi		1		0-8800		elephone No.		License No.				
Start Date (10)	Schedule					609-265-2107 ame of OSHA N		00529				
4 /23 /19				19	1	EMSL Analyt						
Occupancy Status During Abatement	(Check on	ly one)			-	reet Address						
☐ Facility Closed/Vacated During Er	ntire Period	of Abai	ement		100000	200 Route 13	0 North					
☐ Abatement Performed Outside of	Normal Fac	ility Ho	urs - De	scribe		ty, State, Zip Co						
Time of Abatement:AM	PM/	P	Λ	_AM		Cinnaminson						
Scope of Work (Check all that apply)							, 140 00077					
⊠ ≥3 sf or >3 If		Renova	li			☐ Full Conta	ainment with Nega	tive Pressure				
☐ ≥160 sf or ≥260 lf		Renova Demolit				Mini-Encl Glovebag	osure Procedure					
						☐ Non-Exer	npted (*) and Non	-Friable Proced	lure			
		Is Loca								patem	ent T	vne
Location of Asbestos-Containing Material (AC	M U	Norm sed So		0-1		Description of			100	_	T	T
TO BE ABATED	1	/lainten	ance/	Asbes (i.e.	stos the	Containing Matermal systems in	erial (ACM)	Amount	em	Repair	nca	nclo
IN Facility (13)	C	ustodial (12		(S	surfacing, VAT,	or	(Specify SF or LF)	Removal	₹	Encapsulate	Enclosure
(13)	Ye		N/A	+	oti	her miscellaneo	us)	646V 64.210098.1 #0	-		late	O,
Mechanical Room		I I	IN/A	Pipe Ins	lo	tion				-		
		10		ripe ilis	ula	uon		6 LF				
					_							
Name of Registered Waste Hauler		<u> </u>										
AbateTech, Inc.	IJDEP V lauler ID		Cub	oic Yards of ste	Name of Registe							
City, State 18750 4							GROWS- Fai	ness				
Lumberton, NJ						oosal Date 23/19	City, State Morrisville, F	ΡΔ			7.00	
Completed By (Print or Type)	Title		-11-11-11-1		1	Signature)	\(\frac{1}{2}\)		-4.			
Gwendolyn Trumbetti		tions (Coordi	nator		Oignature)	1//	D	ate U _l	9 -	1 6	
SB-41						_ \ /	1/0			5	~	3

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

17	7	0	1	П	W
1	=	G	F		14/
- 1	=	60	150	11	13

Date of Notification (1)					LN	(5.00			AP	o 1	2	2019	
4 /	9	/	19				ing Owner/Operator estitute for Rehal						
Agencies Notified ⊠ EPA ⊠ DOLWD	Type No	tificatio			Str	eet Address		omation 7 30b ;	And a second	1. 2. 4	C.1.		
☑ DHSS	Amen	ided dment	. #			y, State, Zip	THE RESERVE TO SERVE THE PROPERTY OF THE PROPE						
DCA	☐ Emerg		_	ling	V	Vest Oran	ge, NJ 07052						
(NJAC 5:23-8)	justific	cation)	12	9	Na	me of Conta	ct		Telephone Nu	mber			
	☐ Cance	ellation			0	ary Formi	isano		973-414-4				
					F	ACILITY I	NFORMATION			1/ - 31.000			
Name of Facility Where A				ice (3)				Type of Facility (4)				
Kessler Institute for	r Rehabil	itatio	n					School (K-12))				
Street Address								Subchapter 8	(Other than K-	12)			
199 Pleasant Valley	Way							Other (i.e., pri	vate and comm	ercial	buildi	ngs,	
City (5)	==0=V/==).====						Square Feet	# of Floors	Т	Bldg.	Age	
West Orange								1,200			9.	· ·g·	
County (6)					Co	unty Code (7)(STATE USE ONLY)		r if being demo	lished)		-/-
Essex								Rehabilitatio			/		
Name of Monitoring Firm I				r (8)	ASCI	M No.	Name of Abateme	The state of the s	-				
Partner Engineering	Science	, Inc.					AbateTech, I						
Street Address							Street Address						-
611 Industrial Way V	Vest						30 Maple Ave	e. PO Box 25					
City, State, Zip Code							City, State, Zip Co						
Eatontown, NJ 0772							Lumberton, N						
	oject Manager for Monitoring Firm						Telephone No.		License No.				
	Brian Nemetz						609-265-2107		14400 CONTO 14800 CON				
Start Date (10)						ate (11)	Name of OSHA M			2000			
4 /18 / _	19		4	/ _1	8_/	19	EMSL Analyti	cal					
Occupancy Status During A	Abatement	(Chec	k only	one)			Street Address						-
☐ Facility Closed/Vacated	During En	tire Pe	riod of	Abate	ement		200 Route 130	0 North					
Abatement Performed C	outside of N	Vorma	Facili	ty Hou	rs - De	scribe	City, State, Zip Co	de					
Time of Abatement:		P	VI/	PIV		_AM	Cinnaminson,	NJ 08077					
Scope of Work (Check all the	nat apply)				3772		and the second s						
≥3 sf or ≥3 If ≥160 sf or ≥260 If				enovat emoliti				ull Containment with Negative Pressure lini-Enclosure lovebag Procedure on-Exempted (*) and Non-Friable Procedure					
				Loca							patem	ent T	vne
Location of Asbestos-Containing Ma		A \		Norma		1	Description of	9					1
TO BE ABATE		VI)	Ma	intena	ince/	Asbes	tos Containing Mate thermal systems in	erial (ACM)	Amount (Specify	Removal	Repair	nca	nclo
IN Facility			Cus	todial (12)	Staff?	(surfacing, VAT,	or	SF or LF)	oval	=	Encapsulate	Enclosure
(13)			Yes	No.	N/A	1	other miscellaneo	us)				late	0
Office L057										-	_		
office Log/						Fittings			9 LF				
												П	
												1	1
laws of D. Co. Co.					NJDEP Waste						Ш	Ш	
AbateTech, Inc. Hau					auler II	No.	Cubic Yards of Waste	Name of Register G.R.O.W.S. L					
ity, State					18750		8 Disposal Date	City, State	real state of the				
Lumberton, NJ						1.	4/18/19	Tullytown, PA	V.				
ompleted By (Print or Type)	Title					SHOW SHOW SHOW SHOW SHOW SHOW SHOW SHOW	i dilytown, PA					
Gwendolyn Trumbetti			nersti	one (oordi	nator	Signature	1	Da	te f —	a	_1 (>
B.41			Joiau	UIIS C	Joordi	iidl0ľ		N	-	1-	7-	11	1

all a

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

and the		١	>	2	_
CITI	7	-	<u>U</u>	-	_
REPLACE	H	_	1.2	3	1

KIROT	a	(P	ursuant	to NJAC	8:60 and	12:12	0)			1	26/14	Ch:	生	33	
Date of Notification (1) 4/2/19			Name of RJS C	Building orp	Owner/O	perator	(2)			EC	E	Comment	V	n :	
Agencies Notified Type Notification	l		Street A	ddress lett Stre	et						n 1	0 0	010	and the second second	
EPA		_		ite, Zip Co						AP	H_I		019	apart of the	
□ Emergency justification □ DCA □ Cancellatio)		and the common of the common o	Contact e Bean						hone Nur 473-15			الد الد الد	_ 4	
			FACI	LITY INFO	ORMATIC	ON									
Name of Facility Where Abatement is Taki RJS Corp	ng Place (3	3)					Ту	pe of Facility (4 School (K-12							
Street Address 19 Wall Street							×	Subchapter 8 Other (i.e. prietc.)				dings,	home	S,	
City (5) Passaic							-00	quare Feet 2,000	# of F	loors		ldg. A 962	ge		
County (6) Passaic			County (Code (7) USE ONLY)			urrent Use (Prior ffice/Wareho		demolisi	ned)				
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	1 No.				Abatement Cont Contracting)					
Street Address						Street 185		dress eeland Ave							
City, State, Zip Code								e, Zip Code I Park, NJ, 07	7432						
Project Manager for Monitoring Firm	ject Manager for Monitoring Firm					Telepi 201-		e No. 2-5841	1	icense N	lo.				
Start Date (10) 4/11/19	ed Cor	mpletion I	Date (11)				OSHA Monitor Environmen	tal Ser	vices Ir	nc.					
Occupancy Status During Abatement (Che	ck Only Or	ne)	· (V)	***************************************		Street	Add								
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:				ė	_	City, S	State	e, Zip Code nsack, NJ, 07	606						
Scope of Work (Check All That Apply)		-				•									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolii				2	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedu								
	1	Locat Norma							,			Abat	ement		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cus	ed Sole intena todial ((12)	ely by ince/ Staff?		stos Conta	system	Mate is in: AT, o	or	(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure	
Document.	Yes	No	N/A			Dallas			445	CE	1,7		_	-	
Basement Basement			X			Boiler Pipe		-		SF LF	X	-	-	_	
Dasement				i ipe			200	, Li							
										I					
Name of Registered Waste Hauler Newark Carting Inc.	NJDEP W Hauler ID 4509		of Was		2	Name of R				ndfill					
City, State Newark, NJ 07105					Dispos 4/11/1	sal Date	-	City, State Pen Arg		08072	,				
Completed by R. McDonald			S	igratur	e 	MAN	29		ate /2/19						

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

Check # 25771

	Î		ursuant	to NJAC	8:60 ar	nd 12:120	0)			C	E		W/	1.7	
Date of Notification (1) 1/19/2019	1.		Name o	f Building	Owner/	Operator Sma		And the second second		W-24-21720				-	And the second
Agencies Notified Type Notification			Street A	Address					111	APR	1	2 2	019	1	
EPA Initial		-	011 01									-0.0			www.
DEP Amended Amendment			City, Sta	ate, Zip Co		enton, l	NJ (08629	Estate.	1 1-					
Emergency (i	ncluding	t	Name o	f Contact		74			Tel	ephone	Num	ber	Marileo .	- (g-	
DCA Cancellation				Micha	C-19-1-1-10115	18,000			i						
Name of Facility Where Abatement is Taking	Place (3)	FAC	ILITY INFO	DRMAT	ION	Ty	pe of Facility	(4)					- 10	_
Residential								School (K-	A. T. A. (10)						
Street Address							×	Subchapte Other (i.e. etc.)	er 8 (Oth private	er than & comm	K-12) nercia	l build	lings,	home	es,
City (5)	n						Sq	uare Feet	#0	f Floors		В	ldg. A		
Trenton, NJ 0862	9	т	County	Code (7)			Cu	1400 rrent Use (Pi	ior if hoi	2	olisho)d)	85	+/-	
Mercer			(STATE	USE ONĹY)	-						IOIISTIC	u)			
Name of Monitoring Firm Hired by Building C MECS	wner (8)		ASCN	A No.				batement Co Environm			es, Ir	ıc.			
Street Address PO Box 341						Street PO E									
City, State, Zip Code Chesterfield, NJ 08515						9000000		, Zip Code n, NJ 085	01						
Project Manager for Monitoring Firm			Telepho	ne No.	EMERT C	Teleph			01	Licens	se No				
Bill Weisgarber			298-407	0			-9688		0049		D.				
Start Date (10) 1/22/2019		ed Com 1/23/2		Date (11)		Name MEC		SHA Monito	r						
Occupancy Status During Abatement (Check	Only Or	ne)				Street									
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe: 8 am 4 pm	eriod of a al Facility	Abatem / Hours	ent			C. C	State,	341 Zip Code field, NJ 0	Q515						
Scope of Work (Check All That Apply)						Ones	Ster	neid, No o	0010						-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoliti	70.70			×		Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure						
	Is	Locati	on										Abate		
Location of Asbestos-Containing Material (ACM)		Normall d Sole	*	Achost		escription		rial (ACM)		mount			1 y	ре	
TO BE ABATED	0.000	intenar todial S			therma	systems	s ins	ulation,	(5	Specify		Re	_Z	Encapsulate	Enc
In Facility (13)		(12)				acing, VA miscellar			Si	or LF)		Removal	Repair	psul	Enclosure
	Yes	No	N/A									al		ate	re
Basement		Х		Th	ermal	Pipe Ir	nsul	ation		50 If		Х			
Crawl Space		Χ		Th	ermal	Pipe Ir	nsul	ation		15 If		Х			
Name of Registered Waste Hauler		1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	JDEP Wauler ID	1.T. (1.T. (1.T	Cubic of Wa	Yards iste		Name of			ndfill				
Stevens Environmental Services			18292	2		2 cu		Fairles		ITIII					
City, State Allentown, NJ						sal Date 5/2019		City/Sta / Morris		A					
Completed by	Title	Project Manager Signature Date 1/19/2019													
Mahlon E. Stevens	rojec	i wana	ager		_///	1	/				/19	2019	9		

01/19/2018 8:58AM FAX 60003/0004 Print Form State of New James MOTIFICATION OF ASSESTED ASATEMENT Check # 25771 (Pursuant to NJAC 8:80 and 12:120) E Date of Notification (1) Name of Building Owner/Operator (2) 1/19/20/19 Smell Agencies Notified ype Notification Street Addiess EPA × Initiat DEP Amended City, Siste, Zip Code 又 DOL Amendment # Trenton, NJ 08629 X Emergency (including DOH Name of Contact |ustification) Telephone Number DCA Cancellation Michael Small FACILITY INFORMATION Name of Facility Where Adatement is Taking Place (3) Type of Facility (4) Residential Street Address School (K-12) Subchapter & (Other than K-12) Other (i.e. private & commercial buildings, homes, K City (5) 9(c.) Square Fest # of Figora Tremion, NJ 08529 Bldg. Age 1400 2 85+/-Courty (6) County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Merce Name of Monitoring Film (filted by Building Owner (8) ASCM No. Name of Abstement Contractor (9) **MECS** Stevens Environmental Services, Inc. Street Address Street Address PO Box 301 PO Box 322 City, Stale, Zip Code City, State, Zip Code Chesterfield, NJ 08515 Allentown, NJ 08501 Project Manager for Monitoring Firm Telephone No. Telephone No License No. Bill Walagarber (609) 298-4070 609 259-9688 00493 Start Date (10) Scheduled Completion Dale (11) Name of OSHA Monitor 1/22/2019 1/23/2019 MECS Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vaca ed During Entire Period of Abatement PO Box 341 Abelement Performed Outside of Normal Facility Hours
Other - Describe: dam 4 pm City, State, Zip Code Chesterfield, NJ 08515 Scope of Work (Check All That Apply) 83 sf or 23 H Renovation Full Containment with Negative Pressure ≥160 af or ≥260 II Demolition Mini-Enclosure × Glovabag Procedure Non-Exempted (*) and Non-Erlable Procedure la Location Abatement Normally Location of Type Asbestos-Containing Material (ACM)
TO BE ABATED Description of Land Solely by Asbestos Containing Material (ACM) Maintenance/ Amouni (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Encapsutate Custodial States (Specify SF or LF) n Facility ground (12) (13) Yes No N/A Basement X Thermal Pipe insulation 50 If X Crawl Space X Thermal Pipe Insulation 15 H X Name of Registered Waste Hauter NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. Stevens Environmental Services of Waste Fairless Landfill 18292 2 cu City, State Disposal Date City, State Allentown, NJ 1/25/2019 Marrisville, PA Completed by Signature Dete Mahlon E. Stevens Project Manager 1/19/2019 ASB-41 (A-08-08) . Do not use this form for asbestos licensure exempted activities.

	5	State of N	ew J	Jersey - No	tific	cation of Asbestos	Abater	nen	t E	GE	7 10	VII (c)	
CK13480	PA	MD	(Pu	rsuant to N.J.	<u>A.C</u> .	. 8:60-7 and 12:120-7)	'n		<u>v</u>		7 5	Manuscraw, 25th Salaman, 25th
Date of Notification (1) April 8, 2019						Name of Building Owne		(2)	i,	APR I	2 20	119	
Agencies Notified		Notification	Type			The Valley Hospi Street Address	tal	7	į				1
⊠ EPA		x Initial				223 North Van Die	n Aven	110	Locate				4
□ DCA		Amend				City, State, Zip Code	II AVCII	ue	\$"\4_J	Line in	0.150		
x DOL		Emerge	ncy (including		Ridgewood, NJ	07450-2	2736	6	alternative strangers and a	in a movement to the state of	Made	
☑ DEP x DOH		justific	cation	n)		Name of Contact		T		hone Nun	nber		
X 3 0 1 1						William Stasiak				-447-81			
Name of Facility Where Abatem	ent is Ta	king Place (3)		FACILITY	Y INF	ORMATION Type of Facility (4)							
The Valley Hospital-Be	ergen \	Wing-				School (K-12)							
Room # B3 "Soiled Uti	lity Rn	n"				Subchapter 8 (other that	an K-12)						
						Other (i.e. private &		ial bui	ldings, l	homes, et	.c.)		
Street Address						Sq. Feet: Unknown	# of F	loors	3: 4 B	ldg. Age	50	+ year	S
223 N.Van Dien Avenue	е					0							
	County (6	<u>i)</u>		nty Code (7)		Current Use (prior if beir	ng demolis	ned):	Hosp	oital			
Ridgewood	3erger	1	(Sta	te Use Only)									
Name of Monitoring Firm Hired b	ov Blda (Owner (9)	ASC	CM No.	-	N (0 1 1 (0)							
Colden Corporation	blug. V	Owner (o)	ASC	NI NO.		Name of Contractor (9) GREENWOOD ABA	TEMEN		MICHI	TANTO	INC		
0.70						CICLLIA WOOD ADA	I CIAICIA		MOOL	IANIS), IIVC.	9	
Street Address					T	Street Address				3			
28 Washington Street City, State, Zip Code					-	511 MAIN STREET							
Ballston Spa, NY 1202	0					City State, ZipCode Butler, NJ 07405							
Project Manager for Monitoring F		Telephone N	lumbe	<u>r</u>	\neg	Telephone Number		Т	License	e Number		-	
Jim Miades		347.435.				973-492-0477			00840				
Scheduled Start Date (10) April 19, 2019		April 22,	2019	etion Date (11)		Name of OSHA Monitor EMSL inc.							
Occupancy Status During Abat	tement (Check only or	ne)		\neg	Street Address					-		
Facility Closed/Vacated Abatement Performed O	During E	Entire Period	of Aba	tement	- 1	1056 Stelton Road							
Describe Describe	utside o	i Normai Faci	шу но	ours -	H	City, State, Zip Code							_
Other - Describe:						Piscataway, NJ 088	354						
Source of Work (Check all that a	pply)								1/27 (12)	9 90 X	7/25		
≥ 3 sf or > 3 If				Renovati	ion		x Full Cor Mini-En			in Negativ	ve Pres	sure	
□≥ 160 sf or ≥ 260	1			Demolitic			Glovebag						
Landing of Ash I O I I							Non-Exe			d Non-Fr	iable Pı	rocedur	re
Location of Asbestos-Containing Material (ACM) in Facility (13)		ls Location N by Maint./Cu		ly Used Solely I Staff? (12)		escription of Asbestos entaining Material (ACM) (i.	A 100 8000	ount		Abatemer	nt Type		
			NO	NA NA	the	ermal systems insulation,	or l		SF !	Remove F	Repair Er	ncap Er	nclose
				= 100	sur	rfacing, VAT, or other misce	eli.)						
Room # B3-"Soiled Util	ity"		. 1		VA	T & Mastic	130) sf		X	$\neg \neg$		
		I IX	4										
			- 1							- 1			
Name of Reg. Wests Hard		NUDES :::											
Name of Reg. Waste Hauler See Hauler Below # 1 & 2		NJDEP Wast See Below		ler ID #		Cubic Yards of Waste:	,			f Register			
Hauler #1) Greenwood Ab	atemor			nc - Rutlor M	107		2 Disposal	_	0.1124.1141.1024.147	wfill Lar	y, State	RUWS	,
NJ DEP # 1256		Oonoundi	ito, il	no. – Butter, No	0 0/4	403	April 2				ute 2, B	ox 68	
Hauler #2) Newark Carting	7	Newark, N.J	04509), NJ DEP # 195	51						dgeport,		
Completed by (Print or Type)		ïtle			_	Signature		1	Date	304	4-842-27	04	
Marin Graure	100	SENIOR PE	ROJE	CT	0	Marin Coraune		1	April 8	8, 2019)		

JKU 754	PA	M	NOT	IFICATIO	State of New ON OF ASBE nt to NJAC 8	STOS ABATI	EMEN 20)	IT			6		<u> </u>	
Date of Notification (1)					of Building O		or (2)			<u>y</u>	APR	12	201	0
04/08/2019	*				Flanders F	lotel			11 11	1	ni li		401	J
	Type Notification				Address									
	Initial				E 11th Stre					Ann			1.	
X DEP [Amended Amendment	#			State, Zip Cod							1		dore a
	Emergency	(includin	g		an City, NJ	08226								
DOH L	justification) Cancellation				of Contact r Voudouri	•					Vumber	5		
	Caricellation			100000000000000000000000000000000000000					610	-299-	3410			
Name of Facility Where Ab	atement is Takin	g Place	(3)	FAC	CILITY INFOR	RMATION	Тур	e of Facility (4)						
The Flanders Hotel							П	School (K-12)						
Street Address								Subchapter 8	(Other	than K	-12)			
719 E. 11th Street							X	Other (i.e. privetc.)	vate &	comme	rcial bu	ildings	s, hon	nes,
City (5)							Squ	are Feet	# of F	loors	Т	Bldg.	Age	
Ocean City County (6)				0	0.1.5			,000	7			25+		
Cape May					Code (7) USE ONLY)		Cur n/a	rent Use (Prior	if being	demol	lished)			
Name of Monitoring Firm H		Owner (8	3)	ASC	M No.	Name	10000	atement Contra	actor (9)				
Health and Safety Se	ervices	(89)						erprises, Inc.		<i>'</i>				
Street Address						Street		7.7.7						
PO Box 365						662	6 De	lilah Road						
City, State, Zip Code Berlin, NJ 08009						114 000		Zip Code	14, 2-3					
Project Manager for Monito	rina Firm							oor Townshi	p, NJ	08234	4			
James Proctor	ring Firm			Telepho		Teleph				icense	11000000			
Start Date (10)	т	Schodu	lod Co		52-1311 Date (11)		1000	1250	()1172				
04/18/2019		05/10			Date (11)			SHA Monitor Safety Serv	ices	lno				
Occupancy Status During A	batement (Check	Only O	ne)			Street			ices,	IIIC.				_
Facility Closed/Vacate	d During Entire P	eriod of	Abater	ment		POE		33336						
Abatement Performed Other – Describe:	Outside of Norm	al Facilit	y Hour	S		City, S	tate, 2	Zip Code						
						Berli	in, N	J 08009						
Scope of Work (Check All T	hat Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		_	Renova Demoli			×	Mi GI	Ill Containment ni-Enclosure ovebag Proced on-Exempted (*	ure				_	
		Is	Locat	ion			- 110	T Exempted () and is	OH-I HE	DIE FIC		ement	
Location of		1	Norma	lly		Description	of						ре	
Asbestos-Containing Ma TO BE ABATE	iterial (ACM)		ed Sole intena		Asbestos	Containing M	lateria	I (ACM)	Amo	unt			ш	
In Facility	<u>.D</u>	Cus	todial 3	Staff?		rmal systems surfacing, VA		ation,	(Spe SF or		Rer	Re	nca	Enc
(13)			(12)			her miscellan			0, 0,		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							<u>a</u>		ate	ē
Mechanical Ro		Х	(Ceiling Plas	ster		2,10	00	x					
Name of Registered Waste F	Hauler		100	JDEP W	10.00	ubic Yards		Name of Reg	istered	Landfi	11			
Site Enterprises Inc.				035220		Waste 0 cy		Tullytown	Land	fill				
City, State	100 V 1000	20 E2				sposal Date		City, State			115 2 2			
6626 Delilah Road Egg	Harbor Towr	-	IJ		0.5	5/1/0/2019		Bristol, PA	1					
Completed by Eric Keys		Title OM	vi=1.49.8.			Signature	1	V			ate			
		OIVI				ILL	11	LA .		0	4/08/2	2019		

Print Form

-			-			
P	rII	nt	H	0	r	n

OK 23953 PA		NC	TIFICA (Pursi	State of New Je TION OF ASBEST Jant to NJAC 8:60	OS ARAT	EMENT 20)		屋(C E		W	ļ,s
Date of Notification (1) 4/8/2019	a Sarcin dicase		Nan OF	ne of Building Owner	er/Operat	or (2) OUCATION		Al Al	PR 1	1 2	2019	
Agencies Notified Type Notifica X EPA DEP Initial Amendo			Stre 45	et Address 1 LINCOLN AVI				No.			-010	History
X DOL Amendm	ent #	ding	OR	, State, Zip Code ANGE, NJ 070:	50			Fig. 3. s	-7 54-1 1-75-2	e e e e e e e e e e e e e e e e e e e	vi n minera	<u>a 12</u> au
DOH justificati Cancella				ne of Contact EKUNLE JAME	S		T	elephone	Numb	er		
Name of Eacility Whose About				ACILITY INFORMA			9	73-677-	4190			
Name of Facility Where Abatement is Ta OAKWOOD AVENUE SCHOOL	iking Plac	ce (3)				Type of Facili	y (4)					
Street Address 135 OAKWOOD AVENUE						School (I Subchap Other (i.e	ter 8 (Ot	her than k	(-12) ercial b	wildin	ne he	maa
City (5) ORANGE						etc.) Square Feet		of Floors	oroidi b	-	. Age	
County (6) ESSEX			Coun (STAT	ty Code (7) E USE ONLY)		Current Use (F	rior if be	eing demo	lished))		
Name of Monitoring Firm Hired by Buildin	g Owner	(8)		CM No.	Name	of Abatement C						
WESTCHESTER ENVIRONMEN	ITAL, L	LC			TWC	BROTHERS	CON	r (9) TRACTI	NG, I	INC.		
1248 WRIGHTS LANE City, State, Zip Code						Address REELAND A'	/ENUE	=				
WEST CHESTER, PA 19380					City, S	tate, Zip Code OWA, NJ 075	12					
Project Manager for Monitoring Firm PHILIP CONTEH			Teleph	none No. 431-7545	Teleph	one No.	12	License	No.			
Start Date (10) 4/20/2019	Sched	uled Co		Date (11)		956-8700 of OSHA Monito		00494				
Occupancy Status During Abatement (Che	4/27/	2019			SAM	E AS (9) AB(
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: Start Sat. 7 AM	Dorina -		ment 's			Address ate, Zip Code						
Scope of Work (Check All That Apply)						, р 0000						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renova Demoli			×	Full Containm Mini-Enclosun Glovebag Pro Non-Exempte	e cedure					
Location of		s Locat Normal						. Ton Thai	510 1 10	10000000	emen	t
Asbestos-Containing Material (ACM)	Us	ed Sole	ly by	Des Asbestos Conta	cription o	f toriot (A OMA)			-	Ty	/pe	T
TO BE ABATED In Facility (13)		aintena stodial S (12)		(i.e. thermal surfac	systems i ing, VAT, iscellaned	nsulation,	(Sp	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
BOILER ROOM	Yes	No	N/A						<u>a</u>		late	Ire
BOILER ROOM	X			Roping fr			100) LF	X			
					b Boiler							
				Dissemble an			49	SF	Х			
Name of Registered Waste Hauler	1	N	JDEP W		er Base							
TWO BROTHERS CONTRACTING		Ha	uler ID I 3743			Name of R			NT G	PO	1/1/0	
City, State FOTOWA, NJ				Disposa 4/27/2		City, State			11 0.	.13.0	. v v . S	
Completed by VIVECA RAMOS	Title	IECT	0000	/ Sig	nature	MORRIS	SVILLE	PA Dat	e			
	FRU	JECT	COOR	DINATOR	Xave	caken			/2019	9		- 1



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



Deta - (N. 115 11								1 (3	
Date of Notification	4/6/19 e Notificati	ion	Nam	ne of Building C	wner / Operator (2)	1.1	· F	a P I n	П
Agencies Notified	c Notificati	OH	45 8	South Grove	Urban Renewal L	LC		CEIV	
EPA	Eme	ergency Noti		et Address		112	31		
DEP	X Initia	I Notification		State % 7 in O	Street	# 1 # 1 1 1		7	
X DOL		nded Notific	[o.t.y,	State & Zip Co		1.1	A A	PR 12 201	9
X DOH		cellation	~	Prange, NJ 07 le of Contact	017	+			
DCA							Externa.c.	Telephone N	lumbe
				nis McNeil/Jo			ku i i	908-813-23	
Name of Facility Wher	e Ahateme	ent is Taking	Place (2)	ACILITY INFO	1		- * - * parant	A COLUMN TO THE PROPERTY OF TH	hary)
	Vaca	nt Buildin	10 Place (3)		Type of Facility (4)				
Street Address			-5		School (K-12)				
	45 So	uth Grove	St		Subchapter 8	(Other than K	-12)		
0:: /=:					X Other (i.e., prin	# of Floors	ercial build	ings, homes, e	etc.
City (5)		County (6)	County	Code (7)	9,000			Bldg. Age	
East Orang	9	Essex	,			1.5		70+	•
					Current Use (Prior Commercial	ii being demo	lished)		
Name of Monitoring Fir	m Hired by	Building O	wner (8)	ASCM No.	Name of Abatemen	t Contract	0)		
and Planning and	Design				Global Abateme	nt Services	9)		
Street Address					Street Address	in Dervices,	LLC		
21 High Street City, State & Zip Code					443 Schoolhous	e Road			
lackettstown, NJ 0	70.40				City, State & Zip Co	ode			
roject Manager for Mo	7840				Monroe Townshi	ip. NJ 08831	ř.		
ohn Scelba	nitoring Fi	rm	Telephone		Telephone Number	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	License N	Jumher	
cheduled Start Date (0) 10	ahadidi 10	908-813-2	323	732-605-9062			00714	
4/18/19	0)	cneduled C	ompletion Date		Name of OSHA Mor	nitor			
ccupancy Status Durin	na Abatam	ont (Charle	4/30/19		Global Abatemer	nt Services,	LLC		
X Facility Closed/	/acated Di	uring Entire	Only one)		Street Address				
Abatement Perf	ormed Out	side of Norr	nal Facility Ho	_	443 Schoolhouse	Road			
Describe:		0,11011	nai i aciiity i io		City, State & Zip Coo	de			
Other - Describe				1	Monroe Townshi	p, NJ 08831			
cope of Work (Check a	Il that app	ly)							
X Demolition	•	Renova	ation		FII 0	************		-	
Large Project					Mini Cont	ainment with I	Vegative P	ressure	
Quantity is ≥ 3 S	For≥ 3L	FACM			Mini-Encl				
X Quantity is ≥ 16	OSF or ≥ 2	260 LF ACM	I		X Other:	g Procedure			
Location	on of		Is Locatio	n l	Description of				
Asbestos-C	ontaining		Normally Us		sbestos-Containing	10000	mount pecify	Abatement	
Material TO BE A	(ACM)		Solely by	/	Material (ACM)		re Feet or	(Specify: Re Repair	
in Fac			Maintenance	- A	e., thermal systems	line	ar Feet)	Encapsulat	
(13			Custodial St. (12)	(1887) (2대 - 1991) (1887) (2대 - 1887)	ation, surfacing, VA	T 1		Enclosu	
	8		(12)	or c	ther miscellaneous)				250
Lower			N/A		Roofing	41	20 SF	Dames	rol .
Roof/HVA			N/A		Flashing		00SF	Remov	
Windo			N/A		Window caulk		ea.	Remov	
Basem	ent		N/A		VAT		8SF	Remov	
me of Registered Was Freehold Carting	e Hauler			e Hauler ID#	Cu. Yds. of Was			red Landfill	di
/, State			1	8693	40	GROV	VS	ICU LAHUIIII	
Trenton, NJ					Disposal Date	City, S			
mpleted By (Print or Ty	ne)	Title		4/30/19			sville, Pa		
Dominick Tringali	pc)	Manage	. F	Signature				Date	
		imanage	71		Dominick Tri	naali		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6/19
		1				regione		1 7/1	

CK 24275 P	AID	NOTII	FICATIO	State of N ON OF AS of to NJAC	BESTOS	ABATE	MENT 0)	111111111111111111111111111111111111111		C	E ()	W	Ea
Date of Notification (1) 4/8/2019			Name PAS	of Building	g Owner/ DUNTY	Operato COMI	r (2) MUNITY CO	LLEGE	1	ADD	1 2	201	0
Agencies Notified Type Notifie	cation			Address COLLE	GE BO	ULEVA	ARD	1/2	1211	APR	1/	201	9
DEP X Amen	dment #_1		200	tate, Zip C		505			fra fra				- (nea
□ DOH □ justific □ DCA □ Cance		g		of Contact		101230			elephone I 73-684-	Number	2 1 22 1 3 4 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	with 12200	
			FAC	ILITY INF	ORMAT	ION				0000			
Name of Facility Where Abatement is PASSAIC COUNTY COMMU	Taking Place NITY COLL	(3) EGE					Type of Facil School (2.505					
Street Address 113-119 COLLEGE BLVD.							Subchar	oter 8 (Otl	ner than K & comme	(-12) ercial bu	ildings	, hom	ies,
City (5) PATERSON							Square Feet	# (of Floors		Bldg. /	Age	
County (6) PASSAIC				Code (7) USE ONLY	0		Current Use (Prior if be	ing demo	lished)			
Name of Monitoring Firm Hired by Bui BRINKERHOFF ENVIRONME				M No.			of Abatement (ING. II	VC.		
Street Address 1805 ATLANTIC AVENUE						Street	Address REELAND A			,			
City, State, Zip Code MANASQUAN, NJ 08736						City, S	tate, Zip Code OWA, NJ 07						
Project Manager for Monitoring Firm GARY W. FLEMING		T	Telepho	one No. 23-2225		Teleph	one No.	012	License				
Start Date (10)				Date (11)			956-8700 of OSHA Monit	or	00494	ļ			
3/21/2019 Occupancy Status During Abatement (5/2/20 Check Only O	10.70					E AS (9) AE	BOVE					
Facility Closed/Vacated During El Abatement Performed Outside of Other – Describe:	ntire Period of Normal Facilit	Abaten y Hours	nent S			City, S	tate, Zip Code						
Scope of Work (Check All That Apply)											No. and San		
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demolit				×	Full Contair Mini-Enclos Glovebag P Non-Exemp	ure rocedure					
		s Locati Normal						1	<u> </u>	abic i ic	Abate		
Location of Asbestos-Containing Material (ACN TO BE ABATED In Facility	ا) Use Ma	ed Sole aintenar stodial S (12)	ly by nce/	Asbes (i.e.	tos Cont thermal surfac	systems cing, VA7	aterial (ACM) insulation, Γ, or	(5	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	Yes	No	N/A		other n	niscellan	eous)			oval	air	sulate	sure
SEE ATTACHED													
Name of Registered Waste Hauler TWO BROTHERS CONTRACT	ING	H	JDEP W auler ID	THE TOTAL	Cubic of Was		2000000000000		red Landf		: P O	1/1/	
City, State TOTOWA, NJ	78774.556.	1	8743		Dispos		City, St	ate		LINIC			,.
Completed by	Title				5/2/20	gnature	MOR	RISVILI	es = store of the) at-			
VIVECA RAMOS	110000000000000000000000000000000000000	JECT	COOF	RDINATO	OR C	Liv	eent))ate 1/8/201	19		

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

-	* *- Assesse	-	-	-	
		(F	N NA	
		11 15	12	11 11/1	1
ì.	1	1.07	14-	1 19	į

Date of Notification (1) 3/11/2019	3/11/2019					Name of Building Owner/Operator (2) PASSAIC COUNTY COMMUNITY COLLEGE APR 1 2 2019									
Agencies Notified	_				Address COLLE	GE BO	ULEVA	ARD				201	0.00		
EPA DEP DOL	Initial Amended Amendmen		_		ate, Zip C RSON,		505				And the second		S. STAWA		
▼ DOH DCA	Emergency justification) Cancellation				of Contact VEGAN						ephone Nu 3-684-59				
Name of Equility Where	Abstement is Takir	a Diago (2)		FAC	ILITY INF	ORMAT	ION	-	75 111						
Name of Facility Where PASSAIC COUNT			E					Туре	School (K-	12)					
Street Address 113-119 COLLEGE	BLVD.							×	Other (i.e. petc.)				dings	, hom	es,
City (5) PATERSON								Squa	are Feet	# 0	f Floors	E	Bldg. /	Age	
County (6) PASSAIC					Code (7) USE ONLY)		Curre	ent Use (Pri	or if be	ng demolis	hed)			
Name of Monitoring Firm BRINKERHOFF EN			CES	ASCN	Л No.				atement Cor			G, IN	IC.		
Street Address 1805 ATLANTIC AV	/ENUE			1			Street 11 V		ess LAND AV	ENUE	9				
City, State, Zip Code MANASQUAN, NJ	08736								Zip Code	2					
Project Manager for Mon	itoring Firm		- 1	Telepho	ne No. 23-2225		Teleph	none N			License N	lo.			
Start Date (10) 3/21/2019		Scheduled 4/11/201		npletion	Date (11)		Name	of OS	HA Monitor S (9) ABO	VE	00.0.				
Occupancy Status During	Abatement (Chec									V L	-				
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire	Period of Aba	atem												
Scope of Work (Check A	II That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		⊠ Rer □ Der	ova nolit				×	Mi	III Containmo ni-Enclosure ovebag Prod on-Exempted	e cedure					
		T						1 140	n-Lxemptet	/ / ari	I NOTI-T Hat	1		emen	1
Location	of	ls Lo	mal			Do	andation	of						ре	8. 22
Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED	Used S Mainte Custod	enar	nce/		tos Cont thermal surfa	scription aining M systems cing, VA niscellan	lateria s insula T, or	ation,	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
OFF ATTA	Yes											ļ-		ite	Ф
SEE ATTACHED										-1-111-1-11-1		-	_		
Name of Registered Was	te Hauler		N	JDEP W	aste	Cubic	Yards		Name of I	Registe	red Landfill				
TWO BROTHERS CONTRACTING					No.	of Was	ste				AGEME		.R.C).W.	S.
City, State TOTOWA, NJ				Dispos 4/1/1/2	al Date		City, State		E, PA						
Completed by VIVECA RAMOS	#S	Title PROJE	СТ	COOF	RDINAT		ignature	11 نوسرا	P	-12-2	Da	te 11/20)19		
		1.11001	- 1	2001		,	Un	, C		11-1	0/	- 474			

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 04 80 19 D'Onofrio-Galetto Realty Agencies Notified Type Notification Street Address **⊠** EPA 317 West Elmer Road □ DOLWD ☐ Amended City, State, Zip Code ☑ DOH Amendment #_ Vineland, NJ 08360 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number □ Cancellation Mark D'Onofrio 609-805-6857 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Vacant Warehouse School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 3340 South Lincoln Avenue homes, etc.) City (5) Square Feet # of Floors Bldg. Age Vineland 30,000 1 70 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Cumberland Vacant Warehouse Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) MDG Environmental, LLC Shade Environmental, LLC Street Address Street Address 1000 Maplewood Drive, Suite 207 623 Cutler Avenue City, State, Zip Code City, State, Zip Code Maple Shade, NJ 08052 Maple Shade, NJ 08052 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Chris Macri 856-755-9300 856-755-0099 00842 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __04__ / __17__ / __19 04 / 19 / 19 EMSL Analytical, Inc. 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-__AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Gloveban Procedure $\boxtimes \ge 3$ sf or ≥ 3 If ☐ Renovation ≥160 sf or ≥260 If □ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Repair Encapsulate Enclosure Asbestos Containing Material (ACM) Removal 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 Front Office X П Floor Tile and Mastic 600 SF \boxtimes П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Freehold Cartage Waste Fairless Landfill 15939 1 City, State Disposal Date City, State Freehold, NJ 04/19/2019 Morrisville, PA Completed By (Print or Type) Title Signature Date Christina Lynch Vice President of Operations

State of New Jersey

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

CK 5044

1	L Laboration II.	ursuant	EN OF	MC 0.	60 and 12:120	BCFTW B
	B	Na	me of B	uilding (Owner/Operator (2	1000
ate of Notification (1)	9/19		7	ICA	TIDNY	ARSENAC APR 1 2 2019
Netified	Type Notification	Str	reet Add	ress	STATE L	1WY 151 APR 12 2019
gency Notified			213	200	371.10 1.	
EPA	☑ Initial ☐ Amended	Cit	ity, State	, Zip Co	A1.T	8/103
DEP	Amendment#		WH	HICT	00.00	Telephone Number
DOL	☐ Emergency (including	N:	armo of (Contact		701-794-370°
тон	iustification)		211	0 1	TOUSHA	w l
DCA	☐ Cancellation		74011	CV INIEC	RMATION	
		to the second second	FACILI			Type of Facility (4)
Name of Facility Where	Abatement is Taking Place (3	,				☐ School (K-12)
S CAS	Abatement is raining to the control of the control	AC_	_	- 1 5		
(ICA	- /					Subchapter 8 (Other train R42) Other (i.e. private & commercial buildings,
Street Address	HINY	15		,		homes, etc.) Square Feet # of Floors Bldg. Age
213 N	1 24 418 124 T				1.7	0.0654621
O:1- (E)	*					
· 1414	ARTON				MATATE HIGE	Prior if being demolished)
			County	Code (/) (STATE USE	MECH ROOM
County (6)	RNS		ONLY)		2007-1-12-2	
1-10	aus	ASCM	No		Name of Abate	ment Contractor (9)
Name of Monitoring F	Firm Hired by Building Owner	AGON	110.		Rest Re	emoval Inc
(8)					Street Address	
					Sueet Audicoc	. Diwar St
Street Address					450 Sot	ith River St
					City, State, Zip	Code 0.7601
City, State, Zip Code	=				Hackens	sack, N.J. 07601
Oky, Carr,					4.1	Liocites
	Monitoring Firm	Teleph	one No.		201-32	9-7444 00388
Project Manager for	Mountains	1			201-32	o and - there
	Scheduled Cor	noletion [)ate (11)	Name of OSH	A Monitor
Start Date (10)		5./1	7		Omega	Environmental
1 24		-/	/		Street Addres	SS
Occumancy Status	During Abatement (Check only	one)	36		280	Huyler St
Occupano) Carr	Full- Boried of	f Ahateme	ent			
☐ Facility Closed/V	/acated During Entire Period of ormed Outside of Normal Facility	ty Hours	Λ		City, State, 2	Tackensack ,N.J. 07606
Abatement Perk	omed Outside of North	5:00	, KH		5. 1	idekomen
2 Other - Describ	ormed Outside of Normal Facilities 7:39 A.M. TO			1000		Full Containment with Negative Pressure
Scope of Work (Ch	neck all that apply)			enovation		Mini-Enclosure
					on Lit	Militariologai
1			JE R	enovali	on 🗆 :	Glovebag Procedure
23 sf or ≥3 ff	n #			enovaud emolitio	on D	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatemen
☑ ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 26	50 H		D D	enovair	on G	Glovebag Procedure
☑ ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 26	50 H	ls Lo	D D	emolitic	on 👊	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatemen Type
☑ ≥ 3 sf or ≥ 3 ff □ ≥ 160 sf or ≥ 26	50 H	No	ocation	emolitio	on 🛄	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatemen Type
. □ ≥ 160 sf or ≥ 26	Location of	No.	ocation mally Solely b	emolitio	Descrip	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatemen Type
. □ ≥ 160 sf or ≥ 26	Location of ontaining Material (ACM)	Used Maint	ocation rmally Solely b tenance	emolitio	Description Containing a thermal sys	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatemen Type
. □ ≥ 160 sf or ≥ 26	Location of ontaining Material (ACM)	Used Maint	ocation mally Solely b	emolitio	Description Description (i.e., thermal systems of the systems of t	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Detion of Ing Material (ACM) Stems insulation. SF or LF) SF or LF)
. □ ≥ 160 sf or ≥ 26	Location of ontaining Material (ACM) O BE ABATED IN Facility	Used : Maint Cu	ocation mally Solely b tenance	emolitio	Description Description (i.e., thermal systems of the systems of t	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Type
. □ ≥ 160 sf or ≥ 26	Location of ontaining Material (ACM)	Used : Maint Cu	ocation mally Solely b tenance stodial staff?	py /	Description Description (i.e., thermal systems of the systems of t	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Detion of Ing Material (ACM) (Specify Ing Mat
. □ ≥ 160 sf or ≥ 26	Location of ontaining Material (ACM) O BE ABATED IN Facility	Used : Maint Cu	ocation rmally Solely b tenance istodial Staff? (12)	ny /	Description (i.e., thermal system other misc	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Potion of Ing Material (ACM) Stems insulation. SF or LF) SF or LF) Amount (Specify SF or LF) SF or LF) Amount (Specify SF or LF) SF or LF) Amount (Specify SF or LF) SF or LF)
Asbestos-Co	Location of ontaining Material (ACM) O BE ABATED IN Facility (13)	Vsed Maint Cu	ocation rmally Solely b tenance istodial Staff? (12)	py /	Description Description (i.e., thermal systems of the systems of t	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Potion of Ing Material (ACM) Stems insulation. SF or LF) SF or LF) Amount (Specify SF or LF) SF or LF) Amount (Specify SF or LF) SF or LF) Amount (Specify SF or LF) SF or LF)
. □ ≥ 160 sf or ≥ 26	Location of ontaining Material (ACM) O BE ABATED IN Facility (13)	Vsed Maint Cu	ocation rmally Solely b tenance istodial Staff? (12)	ny /	Description (i.e., thermal system other misc	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Type Define Material (ACM) Stems insulation. SF or LF) Remorbage
Asbestos-Co	Location of ontaining Material (ACM) O BE ABATED IN Facility (13)	Vsed Maint Cu	ocation rmally Solely b tenance istodial Staff? (12)	ny /	Description Description (i.e., thermal system other misc	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Type Define Material (ACM) Stems insulation. SF or LF) Remorbage
Asbestos-Co	Location of ontaining Material (ACM) O BE ABATED IN Facility (13)	Vsed Maint Cu	ocation mally Solely beterance istodial Staff? (12)	ny /	Description Description (i.e., thermal system other misc	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Type Amount (Specify SF or LF) 130 SF 130 SF
Asbestos-Co	Location of ontaining Material (ACM) O BE ABATED IN Facility (13)	Vsed Maint Cu	ocation mally Solely beterance istodial Staff? (12)	ny /	Descrip Asbestos Containi (i.e., thermal sys- surfacing other misc	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Define of Registered Landfill Amount (Specify (
Asbestos-Co	Location of ontaining Material (ACM) O BE ABATED IN Facility (13)	Nor Used Maim Cu Yes	ocation rmally Solely b tenance stodial Staff? (12)	oemolitio by	Description Descri	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Define of Registered Landfill Amount (Specify (
Asbestos-Co	Location of ontaining Material (ACM) O BE ABATED IN Facility (13) 382	Noi Used Maint Cu S	ocation mally Solely beterance istodial Staff? (12)	oemolitio by	Description Descri	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatemen Type prion of Ing Material (ACM) Stems insulation, SF or LF) Ing Material (ACM) SF or LF Ing Material (ACM
Asbestos-Co	Location of ontaining Material (ACM) O BE ABATED IN Facility (13) 382	Noi Used Maint Cu S	ocation rmally Solely beterance stodial Staff? (12)	N/A N/A	Description Descri	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Potion of Ing Material (ACM) Stems insulation. SF or LF) 130 SF 130 SF Minerva Enterprises , LLC Minerva Enterprises , LLC
Asbestos-Co	Location of ontaining Material (ACM) O BE ABATED IN Facility (13)	Noi Used Maint Cu S	ocation mally Solely b tenance is stadial Stadial No. 1	N/A N/A	Description Descri	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Define Material (ACM) Stems insulation. SF or LF) 130 SF 7 7 7 7 7 7 7 7 7 7 7 7 7
Asbestos-Co	Location of ontaining Material (ACM) O BE ABATED IN Facility (13) 382 tered Waste Hauler Removal Inc	Noi Used Maint Cu S	ocation mally Solely beterance stodial staff? (12) No 1 IDEP Walton No. 171	N/A N/A	Description Descri	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Potion of Ing Material (ACM) Stems insulation, SF or LF) Ing Material (ACM) SF or LF Ing Material
Asbestos-Co	Location of ontaining Material (ACM) O BE ABATED IN Facility (13) 382 tered Waste Hauler Removal Inc	Noi Used Maint Cu S	ocation mally Solely beterance stodial staff? (12) No 1 IDEP Walton No. 171	N/A N/A	Descrip Asbestos Containi (i.e., thermal sys surfacing other misc VA Uler Cubic Ya Waste 3 Disposal A) 23	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Prior of Ing Material (ACM) Stems insulation. Stems insul
Asbestos-Control Name of Regist Best City, State Hacks	Location of ontaining Material (ACM) O BE ABATED IN Facility (13) See 382 tered Waste Hauler Removal Inc ensack , N.J. (Noi Used Maint Cu S	ocation mally Solely beterance stodial staff? (12) No 1 IDEP Walton No. 171	N/A N/A	Description Descri	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Prior of Ing Material (ACM) Stems insulation. Stems insul
Asbestos-Control of Regist Best City, State Hack Completed by	Location of ontaining Material (ACM) O BE ABATED IN Facility (13) Letered Waste Hauler Removal Inc ensack , N.J. (Title	Noi Used Maint Cu S Yes NJ ID	ocation mally Solely betterance studial Staff? (12) No 1 DEP Wa No. 1 7 1	NVA aste Hau	Descrip Asbestos Containi (i.e., thermal sys surfacing other misc VA Uler Cubic Ya Waste 3 Disposal A) 23 Signatur	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Pation of Ing Material (ACM) Stems insulation. L. VAT. or SF or LF) Indicate City. State Sign Waynesburg, Oh, 44688 Date On Manage of Registered Landful Minerva Enterprises, LLC Pation
Asbestos-Control Name of Regist Best City, State Hacks	Location of ontaining Material (ACM) O BE ABATED IN Facility (13) Letered Waste Hauler Removal Inc ensack , N.J. (Title	Noi Used Maint Cu S Yes NJ ID	ocation mally Solely betterance studial Staff? (12) No 1 DEP Wa No. 1 7 1	NVA aste Hau	Descrip Asbestos Containi (i.e., thermal sys surfacing other misc VA Uler Cubic Ya Waste 3 Disposal A) 23	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type Pation of Ing Material (ACM) Stems insulation. L. VAT. or SF or LF) Indicate City. State Sign Waynesburg, Oh, 44688 Date On Manage of Registered Landful Minerva Enterprises, LLC Pation

OS Apr	2000 10:54PM NJ Asbestos Conti	rol 609,633	.0664		page 1	MEC	E I	\mathbb{W}	
	EMERGENCY			popular version		Mhere	– 1 2	20185	1
. (K 10 05 A) Date of Notifice Scr (7)	TON (Pureus:	Mate of New James N OF ASBESTOS I to NJAC 8:50 ar	ABATEMUNT ed 12:120)	的样	18	(00) (Y)	
	Agencies Notified Type Notification	-19		Address	Franchi De	molitio	7	V	
u,	D EPA DEP Amended Amended Amendment Ethergency	#	City, S	34.9 Sip Code S	ewell A	Ville-GRE	080		Ra
	D DCA justification		N	of Contact	enchi!	Talaphone Nu	mber	029	5
	Name of Facility Where Abetement is Taking Single Family Shaet Address	Dwelle		A THE STANK	Type of Facility School (K	-1.20			
,	Charles Lindenwold	NJ	A	3021	Square Feet	ar 8 (Other than K-1; private & commerci	lal build	ings, hon	nes,
	County (6) Canden Name of Monitoring Form Hay a by Building C		County	Code (7) USE ONLY)	- Single	rior H being demolish	red)	85 11:35	+-
	Street Address	Avner (8)	ASC	M No.	Name of Abetament C	Chooleg			
	City, State, Zip Code	W2	90	533	City, State, Zip Code	int ALT	AS	15:	13
	Project Manager for Moeth of greinm Start Date (10)	Scheduled Co	Telepho PO3	758-3365	Telephone No. 33 609 758-33 Name of OSHA Monito		32	94	
N 25	Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P	ariost of Abotes	9~	19	EPC Tec	hnologies 337	In	<u>c</u>	
ii:	Abatement Farformed Outside of Normal Other - Describe: Scope of Work (Check All That Apply)	al Facility Hour	j		City, State, Zip Code		285	33	
	23 sf or 23 # 2190 sf or 2280 if	Renovi Demoil			☐ Mini-Enclosur	ient with Negative P W Cedure Ki (*) and Non-Friabl			
	Location of	Is Locat Normal	lv	Des	cription of	A () SILL HORF-HEDI	7	batemen Type	
•	Asbestos-Containing Matrikal (ACM) TO BE ABATED In Facility (13)	Maintante Custodial S (12)	100	(i.e. thermal :	swing Material (ACM) systems insulation, ing, VAT, or socilaneous)	(Specify SF or LF)	Rumoval	Ewcapeniale Respensate	Enclosure
	exterior Walls	Yes No	NA	Siding	Stringles	1600 35	2	al d	5
					<u> </u>	,			
	Rame of Registered Weeks Hauser EPC Technologies	i H	JDEP W suler ID	No. of Was	10 Wash	Registered Lands		- F F	A
	City, State New Egypt Agamplated by	1 <u>7</u>		Disposi U -	10-19 More	isville P	A		
	Steve SchenKee	Præsid	ent	3	Steen Sch	Deta	4-	4.	19

State of New Jersey

	0	Term.	L. Williams							STOS AB				E	C	E	7 [7 [
OKONS	,4	M.	AUD (PI	ursu	iant	to	<u>N.</u>	J.A.	<u>C.</u> i	8:60 and	12:1	20)	1		- <u>U</u>	11-5	1 1.	1 (2	
Date of Notification	(1) 4-9-20	019								ner / Operator olution Corp.					APR	1 2	20	10	-
Agencies Notified	Type N		ation		Stre				Kev	olution Corp.	,	-	124	انا	FM 11	4		IJ_	hugo-
⊠ EPA	_					_		Avenu						<u> </u>				4 1 -7	1
☐ DEP ☑ DOL		Initial Amer			2000			Zip C		9				divi in			KG KG	ravia (
			gency					10455 ntact					-			lepho		umh	ar .
☑ DOH □ DCA			ellation					Kinley	у							3-387			51
Name of Facility Wh	are Ah	atomo	ent is Takina D	lace (3/	-AC	CILIT	Y INF		MATION	h. /4)								
MetroPCS	icic Abi	ateme	ant is raking r	iace (٥)				-	Type of Facili ☐ School (k									
Street Address										☐ Subchap	ter 8 (
150 Market Street										Other (i.e Square Feet		# of Flo		ial build				tc.)	
City (5)			County (6)	Co	ounty	Co	de (7)	1	2,800		3 stories	CT (CO (CT (C))	sement		g. Age Estim		30 vrs	3
Newark, NJ 07102			Essex				•			Current Use (Retail Space	Prior i								
Name of Monitoring Health and Safety S	Firm Hi	ired b	y Building Owr	ner (8)		ASC	M No.	. 1	Name of Abat									
Street Address	CIVICES					_1			15	Resource Mar Street Addres	S			.0				State of	20.00
	de					-)2			10.16.00			
Berlin, NJ 08009	Box 365 2115 Hamilton Ave, Suite 202 State & Zip Code City, State & Zip Code In, NJ 08009 Trenton, NJ 08619 ect Manager for Monitoring Firm Telephone Number Telephone Number License																		
Project Manager for Mr. Jim Proctor	Monito	ring F	irm	Tele 856-				per		Felephone Nu 309-914-4279				License		nber 0118	5		
Scheduled Start Dat 4-22-2019		3	Scheduled Cor		on Da	ate	(11)		- 1	Name of OSH J&S Environm			orioe	nc					
Occupancy Status D	Ouring A	bater	nent (Check or	nly on	e)				_	Street Addres		Laborate	nics,	110.		-			
			During Entire P		of Al	oate	eme	nt	-	2333 Route 2									
Describe:			ring Normal H 30pm	ours:						City, State & Z Jnion, NJ 070		ae							
	upied D	uring	Abatement		g- 250														
Scope of Work (Che	eck all th	nat ap	pply)								\boxtimes	Full Cor	tainm	ent with	Ner	ative	Pres	SIIFA	
≥3 sf or ≥3 If	f			\boxtimes	Re	no	vatio	n				Mini-End			11408	Janvo	1 100	Juic	
≥160 sf ≥260	O If				De	mo	litio	า				Glove B					-		
10	cation	of		le	Loca	tion	n	Г		Description	of	Non-Exe		d and N Amount	-	-		ent Ty	
Asbesto	os-Conf	tainin	g	Non	mally	Us	ed		A	sbestos-Cont				Specify		ADE	terric	JIIC 1	ype
	erial (A0 BE ABA				olely				/:	Material (AC			S	F or LF)	70	77	En	En
	Facility			Cust				i		e., thermal sy lation, surfac						Remova	Repair	cap	clos
	(13)				(12)				other miscella						oval	air	Encapsulat	Enclosure
Basement (through	hout)			Yes	No	_	N/A	Plaste	ar.				3,000	CE.			П		
Basement Boiler ro				Ħ	H			Pipe I		lation			40 LF			X	H	퓜	ᆸ
Basement Boiler ro	oom					_		Elboy					5 eac						
Basement Boiler ro	oom						\boxtimes	Boiler	r Ins	sulation			60 SF	1		\boxtimes			
						-													
Name of Registered	Waste	Haule	er						1	bic Yards	Name	e of Regi	stered	d Landfi	ill			Ш	Ш
Resource Managem	ent Gro	oup, L	LC				er IE 218	No.	of \	<i>N</i> aste D	Grow	s Landfil	I						
City, State Trenton, NJ 08619			120						Dis	posal Date	City,	State sville, PA	A						
Completed By (Print	or Type	e)			T	itle				naturé/	10111	////	101			Date			
Mr. Brian Haney	, p.	-,			100000		iden	t	2	PDIM		\/////			- 10	4/9/20	19		

MAY 11

04/08/2 0 19 09:25A	M 97363817	78								P	AGE	03/	04
1 2219	TO A TE	B		61.	4= 1= # Ma			·	<u> </u>	PR 1	2	2010)
	TALL	NOTIF	ICAT	TON	te of New	ESTOS /	ABATE	MENT		DAY			,
Check#3319	_		(Pur	euent	to NJAC	8:60 and	d 5:16)		20				
Date of Notification (1)	_		1	verme o	Building	Owner/Ope	retor (2)		# 11 1 m	1		Ġ.	_
)8 , 19		S	שתותו	ga Alexa	ndre _			1	/3			
Agencies Notified 7	ype Notification		3	Street A	Address						T		
⊠ DOLWD	Amended			city. St	ete, Zip Co	rie		- WA	IVER APP	POVE	<u> </u>	-	_
⊠ DHSS	Amendment # Emergency (inc.)	lution	1		range, N.	A			1-1 1 1 2- 1	1.07.7.5			
(NJAC 5:23-8)	Justification)	. Serving			Contact				Telephone Nur	nber			
	Cencetighon		S	-	ga Alexa				-				_
Name of Facility Where Abo	Hamant is Taking	Discs I	21	FAC	ILITY INF	ORMATIC		Type of Facility	(4)				
Private house	Minus er er stattiff.	riace (34					School (K-12	3				
Street Address								Subchapter 6	(Other than K-1	2) acctal buil	dicas	60	
					_			homes, etc.)					
Chy (5) West Orange, NJ 07052								Square Feet	# of Floors	Bld	g. Ag	8	
County (6)				County	Coda (7) (5	TATE USE	ONLY)	Current Use (Pr	or if being demoi	Ished)			-
Essex													J. U. A.S.
Name of Monitoring Firm H	ired by Building O	Kuat (g) A	BCM N	- 1			nt Contractor (9)					
Street Address						Gr Toch L		1			_		
						576 Valle		283					
City, State, Zip Code						City, State			Water to the later			-	
Seniort Manager See Manie	nice Firm					Wayne, N		0	T11			4	
Project Manager for Monito	ព្រះ។ ខ្លាញ		1 etep	יו פתמה		1 elaphone 973-638-1			License No.				
Start Date (10)	Sched				s (11)	Name of C		onitor	101121				
04 / 09 /		4 1		_ / _	19			naultanta,Inc					
Occupancy Status During /				sent		Street Add		n1	aer				
Abatement Performed C	Sutside of Normal	Facility	Hours	- Deed	ज्ञांकेट	City, State	garsw a, Zip Co	Road, Bidg #	305				
		W			AM	Fair Lawr	a, NJ 0	7410	***				medico.
Scope of Work (Check all I	hát apply)								nation with negal gative Pressure	No buse	ri em		
>3 sf or >3 if 2 160 sf or >260 if			novatio molitica				Alni-End	kasure	Tent with Negat	we Prem	ше		
			0.000			M S	ion-Eva	mpted (*) and N	on-Friable Proce	dure	1		
Location	af	1	Locati	ly		Danc	ription o	ıf.		-	_	ent T	
Aspestos-Containing M TO BE ABAT			id Sale Intensi		Asber	tos Contai	ning Ma	terial (ACM)	Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility (13)		Cha	(12)	Staff?			ng, VAT	or	SIF or LF)	Dwal	15	Blue	Sure
(13)		Yes	No_	NA		OBJES UR	actiigue	OU'S)				8	
Basement		O		×	Pipe hos	alation			40 LF	X			C
			U						-				
													E
		6			-	10							E
Name of Registered Wast	e Heuler		NE	EP Vitanti	Hauser ID No.	Cubic Yard	is of War	Name of Reg	istered Landfill			-	
Gr Tech LLC				03371	35 .	TBD		T.R.R.F. In					-
City, State			10.0			Disposat		City, State					
Wayne, NJ 07470 Completed By (Print or T)	rea) Till	8				TBD	raturar)	Tullytown.	PA	Date	_	-	_
N.Jevtic	,,	ner				-		he Wenna	1	04/08/1	9		
AFE-41	, DW					1 15	1	-		7 7/ WW B			

^{*} Do not use this form for asbestas licensure exampled activities.

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

CK 5043

Date of Notification (1) Agency Notified Type Notification DEPA DEPA DEP Amended Amendment # Emergency (including justification) DCA Name of Building Owner/Operator (2) NS. PREMI LA RATH NAM Catth NAM City, State, Zip Code ENGLEWOOD CUFFE. NJ Name of Contact Name of Contact Telephone)19 2	120					
Agency Notified Type Notification Street Address Initial DEP Amended Amendment # Emergency (including justification) Name of Contact Telephone	076			-0.84					
DEPA DEP DOL Amendment # DEM DOL Emergency (including justification) Name of Contact Telephone	076				1				
DEP DOL Amended Amendment # Emergency (including justification) Amendment # Department # Depart	076			-					
DOL Amendment # ENGLEWOOD CUFFE. NJ Emergency (including justification) Name of Contact Telephone		3	2	1					
DOH justification) Name of Contact Telephone									
in DOIT			1		-4				
TO THE THE PART OF									
FACILITY INFORMATION		exile o			_				
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4)			_						
NC POEMIA RAMINAM									
Street Address Street Address Street Address	K-12)								
Other (i.e. private & common homes, etc.)	ercial buildin	ıgs,							
City (5) Square Feet # of Floors	Bldg.	Age	•						
ENGLEWOOD CLIFFS 2200 2	19	9		_					
County (6) County Code (7) (STATE USE Current Use (Prior if being de ONLY) RESI DEN CE									
Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9)									
(8) Best Removal Inc Street Address Street Address									
450 South River St City, State, Zip Code City, State, Zip Code			_	(410-0					
Hackensack, N.J. 07601 Project Manager for Monitoring Firm Telephone No. Telephone No. License No.					_				
201-329-7444 0038	00388								
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor				-					
4/25/19 4129/19 Omega Environmental									
Occupancy Status During Abatement (Check only one) Street Address									
□ Facility Closed/Vacated During Entire Period of Abatement 280 Huyler St									
DAbatement Performed Outside of Normal Facility Hours DOther - Describe: 8:00 144 TO 5:00 PM S. Hackensack , N. J.	07606	į.							
Scope of Work (Check all that apply)	07000								
□ ≥ 3 sf or ≥ 3 lf □ Renovation □ Mini-Enclosure □ ≥ 160 sf or ≥ 260 lf □ Demolition □ Demolition □ Renovation □ Mon-Exempted (*) and Non-Friable	*:								
Is Location	. 1000000	A	bate	me	nt				
Normally		-	Ту	pe	_				
Location of Used Solely by Description of Asbestos-Containing Material (ACM) Maintenance/ Asbestos Containing Material (ACM) Amou	unt	-		m	_				
TO BE ABATED Custodial (i.e., thermal systems insulation, (Spec	cify	Ren	Re	lear	Enclosure				
IN Facility Staff? surfacing, VAT, or SF or (13) (12) other miscellaneous)	LF)	Removal	Repair	Bule	Insc				
		-		te	0				
BASEMENT Yes No N/A 75	- 4	×			-				
BASEMENT / VAT 75	00 -	1		_	-				
	* 4	-	-	_	-				
		-	-						
Name of Registered Waste Hauler NJDEP Waste Hauler Cubic Yards of Name of Registered Landfill		L							
Best Removal Inc Name of Registered Landing Cubic fairs of Name of Registered Landing Waste Ac75 Minerva Enter	prises	,	LI	LC					
City, State Disposal Date City, State									
Hackensack, N.J. 07601 4/29/19 Waynesburg, Completed by Title Signature	0h, 446	88		"	_				
J. Maiorano Estimator Voisiones	1 41	19	1	9					
ASB-41 * Do not use this form for asbestos licensure exempted activities.		e-	,						

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

1 NOHO	丁	AJUL	(P	ursua	ant to	NJAC	8:60 ar	1d 12:1	20)			70	D /7	#MINES	
-Date of Notification (1)	`			T			g Owner/			(5 (5 E	1	W	13	9 5
419/19	P	8			43	F	MAN	SA	BALLAS	>// F				373	10.7
Agency Notified	Type No	otification		1	Street A	ddress					4				
□ EPA	_a Initia									A	PR I	2_	201	3	
□ DEP	☐ Ame	(d (d) (d) (d) (d) (d) (d) (d) (d) (d) (1	City, St	ate, Zip (Code	٠.	1	15 00	115				
A DOL		ndment# rgency (includi:	na						AKES.	NJ. 07	411				-
Æ DOH □ DCA	justil	ication) cellation	9			of Contact	# 3A	(AA)		Telephone Nun	nber	?	7	'n	-
					100000000000000000000000000000000000000		ORMATIC	55	1	1,					7
Name of Facility Where	Abatemer	nt is Taking Pla	ċe (3)			7.7.		1	Type of Facility	(4)			TO THE RE		-
A		JA BAI						I							
Street Address	LITANI	JA DA		1 50					☐ School (K-1) ☐ Subchapter	2) 8 (Other than K-12	2)				
						, ,		.	DOther (i.e. p. homes, etc.	rivate & commercia	al buildin	gs,			
City (5)		4			_				Square Feet		Bldg.	Age			
FLAN	1< Lin	J LAK	CE ?	Š	-10-6				.1800.	1	19	SI	2		
County (6)					County ONLY)	Code (7)	(STATE	USE		rior if being demol					
BER								15		58100N C	<u> </u>				
Name of Monitoring Firm	n Hired by	Building Owner	er .	ASCM	No.				ent Contractor (()*:					
(8)									noval In	С					
Street Address					23			ddress		10 <u>20</u> 10					
	City, State, Zip Code							Sout	St					4	
City, State, Zip Code							City. State, Zip Code Hackensack, N.J. 07601								
Drain at Manager for Mar	lephor	no Mo			one No.		License No.					\dashv			
Project Manager for Monitoring Firm Tel					ie ito.				-7444 -	00388					
Start Date (10) Scheduled Completio					te (11)		The state of the	f OSHA		1 00300	-				\dashv
6/19/1	9		20)						Environm	ental					
Occupancy Status Durin	ng Abaten	1	- /				Street A								7
☐ Facility Closed/Vacati	od During	Entire Deriod	of Abot	omont			28	30 Hu	yler St						
Abatement Performer	d Outside	of Normal Faci	lity Ho	urs_			City, St	ate, Zip C	ode			101			
2 Other - Describe: 8			, 20	SPP	1		S.	. Hac	,N.J. 07	7606					
Scope of Work (Check a	all that app	oly)			19			□ Full C	Containment with	Negative Pressu	e				
₽23sfor≥3lf					Ren		20	- Mini-	Enclosure	.	35 34				
☐ ≥ 160 sf or ≥ 260 lf					□ Dem	OHUON			ebag Procedure Exempted (*) an	d Non-Friable Pro	cedure				
			ls	Locati	ion					***************************************		Al		ment	t
Locati	6		1	lormal	ły	- 2	Do	scription o		10		\vdash	Typ)e	-
Asbestos-Containin		I (ACM)		d Sole intenar		Asbe			eterial (ACM)	Amount		_		m .	п
TO BE A			Ç	ustodi		(i.e		systems cing, VAT	insulation,	(Specify SF or LF)		Removal	Repair	cap	nclo
(1:			İ.	Staff? (12)		,		niscellane	(D) (A) (0, 0, 2,		ova	=	Encapsulate	Enclosure
			Yes	No	N/A				Ð					9	
BASEMEN	7		1.00	110	1/	TRAI	USITE	PAGE	risc	A2:	SF	7	1	+	٦
- 70- (0					1			1/4					1	\top	\exists
											٠,			1	٦
													1		
Name of Registered Wa			1	1000	Vaste H	auler	100 to 10	ards of	Name of Reg	stered Landfill					٦
Best Remo	oval	Inc	ID	No.	109		Waste	e75	Minerv	a Enterpr	ises	,	LI	C	
City Shaha	Τ/	109			sposal Date City, State							-			
City, State Hackensac					2/19		abura Ob	1, 1, 4	00						
Completed by	,	Title	OOL				Signatu	111	wayne	sburg, Oh	Date	00			-
J.Maiorano		Est	ima	tor	8		Y	An	مسرمه در		Date 4	9/	10		
ASB-41					n for as	bestos lic	censure	xempted)					
							/								

Completed by Title Signature	CKID PAI	D	NOT	(Pursua	ON OF AS int to NJA	BESTO: C 8:60 a	S ABATE and 12:12	MENT 0)		C				
Agencies Notified Stoel Address							/Operato	r (2)			1			
DPA DRA	Agencies Notified Type Notification	n				10				APR	12	201	9	
DEP Amendment # Emergency (including DOH DOH DOH DOH Emergency (including North Heldedon 07508 Name of Facility (Morer Abstement is Taking Place (3) North Heldedon 07508 Name of Facility (Morer Abstement is Taking Place (3) School (K-12) Subchapter 9 (Other than K-12) Other (Lephvate & County (6) Street Address H of Floors Bidg. Age Other (7) Street Address	☐ EPA ☑ Initial													
DOH	DEP Amended			City, S	State, Zip C	Code			- An		- 1	7.55	- 1000 - 1000	ن
DCA		nt #					08				erica de la seguina	a Carren		
DCA	iustification	y (inclual 1)	ng	Name	of Contact	t			Teler	phone N	umher		2/1/25 (E)	
North Haledon County (6) County Code (7) Square Feet Horise Feet Content to Haledon Square Feet Horise Horise Square Feet Horise Square Feet Horise Horise Square Feet Horise Horise Square Feet Horise Square Feet Horise Horise Square Feet Horise Horise Square Feet Horise Horise Square Feet Horise Horise Horise Square Feet Horise				Mich	nael Espi	е			1	onone i	umber			
Street Address School (K-12) Subchapter 8 (Other than K-12)	Name of Escility Whore Abstances in Tall	. 5:	101	FA	CILITY INF	ORMAT	TION	M-1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -					-	
Street Address School (K-12) Subchapter 6 (Other than K-12) Other (Le, private & commercial buildings, homes, etc.) Other (Le, private & Carliston Normal) Other (Le, private & Carliston Other & Carliston Normal) Other (Le, private & Carliston Material (ACM) Other & Carliston Normal) Other (Le, private & Carliston Normal) Other & Other & Carliston Normal) Other &	House	ing Place	(3)					Type of Facilit	y (4)					
City (5) North Haledon County (6) Passalc Square Feet # of Floors Bidg, Age County (7) Residental Name of Monitoring Firm Hired by Building Owner (8) Street Address Street Address Street Address Street Address Street Address Street Address City, State, Zip Code Garfield NJ 07026 Project Manager for Monitoring Firm Telephone No. (862)262-8006 City, State, Zip Code Garfield NJ 07026 Start Date (10) 04/25/2019 Scheduled Completion Date (11) 04/25/2019 Scheduled Completion Date (11) 04/25/2019 Scheduled Completion Date (11) 04/25/2019 Start Date (10) 04/25/2019 Scheduled Completion Date (11) 04/25/2019 04/25/2019 04/25/2019 04/25/2019 04/25/2019 04/25/2019 04/25/2019 04/25/2019 04/25/2019 04/25/2019 04/25/2019 04/25/2019 04/25/2019 05/36/36/36/36/36/36/36/36/36/36/36/36/36/								School (H	(-12)					
County (5) North Heledon Square Feet # of Floors Bidg. Age								Subchapt	er 8 (Other	than K-	12)			
North Haledon County (6) Passaic (County (7) Passaic (County (8) Pas	City (5)							etc.)	. private &	Jonner	ciai du	liaing	s, nor	nes,
County (6) Passaic Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Rizzov LLC Street Address Street Address Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code Froject Manager for Monitoring Firm Telephone No. Telephone No. Telephone No. (862)262-8006 O1369 Start Date (10) O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 Street Address Street Address 246 Gaston Ave. License No. (862)262-8006 O1369 Start Date (10) O4/25/2019 O4/25/2019 Street Address Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address Street Address 246 Gaston Ave. City State, Zip Code Garfield NJ 07026 Street Address Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address Street Address Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address Street Address Street Address Street Address Address Street Address Street Address Street Address Street Address Street Address Ad								Square Feet	# of F	loors		Bldg.	Age	
Passaic Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Rizov LLC Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Project Manager for Monitoring Firm Telephone No. Telephone No. Telephone No. (862)262-8006 01369 Start Date (10) Od/20/2019 Occupancy Status During Abatement (Check Only One) Active Title Telephone No. Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Start Date (10) Od/20/2019 Occupancy Status During Abatement (Check Only One) Active Title Telephone No. Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Steet Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Scope of Work (Check All That Apply) Sal of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3 31 if Sale State The Code of Normal Facility Hours Sale of v3	County (6)			Count	(Codo /7)									
Name of Monitoring Firm Hired by Building Owner (8) Street Address Street Address Street Address 246 Gaston Ave. City, State, Zip Code City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Start Date (10) 04/25/2019 Scheduled Completion Date (11) 04/25/2019 Scheduled Completion Date (11) 04/25/2019 Report Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Scope of Work (Check All That Apply) 23 sf or ≥3 if ≥160 sf or ≥260 if Renovation Demolition Scheduled Completion Date (11) Asbestos-Containing Material (ACM) To BE ABATED In Facility (13) Resolution Solicity Yes No N/A Basement X Pipe insulation Normally Yes No N/A Pipe insulation 168 LF x Name of Registered Waste Hauler Number of Registered Waster Number of Registered	Passaic			(STATE	EUSE ONLY	0		Current Use (F	rior if being	demoli	shed)			
Street Address Street Address 246 Gaston Ave. City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Garfield NJ 07026 Project Manager for Monitoring Firm Telephone No. Telephone No. Telephone No. Telephone No. (R62)262-8006 O1369 Name of OSHA Monitor Rizov LLC Cocupancy Status During Abatement (Check Only One) Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) 23 of or 23 lf Stoed Manager for Monitoring Firm Telephone No. Telep	Name of Monitoring Firm Hired by Building	Owner (8)	ASC	M No		Name			,				
Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Garfield NJ 07026 Start Date (10) 04/20/2019 Scheduled Completion Date (11) 04/25/2019 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State Garfield NJ 07026 Street Address 246 Gaston Ave. City, State Garfield NJ 07026 Street Address 246 Gaston Ave. City, State Garfield NJ 07026 Street Address 246 Gaston Ave. City, State Garfield NJ 07026 Stre		000-00-00000							ontractor (9)				
City, State, Zip Code City, State, Zip Code City, State, Zip Code Carfield NJ 07026	Street Address					-								
City, State, Zip Code Garfield NJ 07026 Project Manager for Monitoring Firm Telephone No. Telephone No. (862)262-8006 01369 Start Date (10) 04/20/2019 Occupancy Status During Abatement (Check Only One) Abatement Performed Outside of Normal Facility Hours Other Describe: Scope of Work (Check All That Apply) 23 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Basement X Pipe insulation Abatement Abatement Count in ment with Negative Pressure Glovebaga Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempt								100000000000000000000000000000000000000						
Project Manager for Monitoring Firm	City, State, Zip Code													
Start Date (10) 04/20/2019 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Posseribe: Scope of Work (Check All That Apply) ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf Location of Asbestos-Containing Material (ACM) In Facility (13) Basement X Pipe insulation Name of Registered Landfill Fairless Hills Landfill Fairless Hills Landfill Fairless Hills Landfill Fairless Hills Landfill Fairless Hills Landfill Fairless Hills Landfill Completed by Title Scheduled Completion Date (11) Name of OSHA Monitor Name of OSHA Monitor Rizzov LLC Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Street Address 18 Location Ave. City, State, Zip Code Garfield NJ Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Typ									6					
Start Date (10) 04/20/2019 Scheduled Completion Date (11) 04/25/2019 Scheduled Completion Date (11) 04/25/2019 Scheduled Completion Date (11) 04/25/2019 Streat Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥160 sf or ≥260 lf Demolition Demolition Demolition Demolition Demolition Description of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Name of Registered Waste Hauler Name of Registered Landfill Fairless Hills Landfill Name of Registered Waste Hauler Name of Registered Landfill Fairless Hills Landfill Name of Registered by State Disposal Date Tible Singstrue Singstr	Project Manager for Monitoring Firm			Telepho	one No.		Teleph	one No.	L	icense l	Vo.			
O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 O4/25/2019 Street Address 246 Gaston Ave. City, State, Zip Code Garfield NJ 07026 City, State, Zip Code Garfield NJ 07026 Scope of Work (Check All That Apply) Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Scope of Work (Check All That Apply) Other – Describe: Other –	Stort Data (40)						(862)	262-8006	0	1369				
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Street Address 246 Gaston Ave.		Schedu	iled Co	mpletion	Date (11)				r '					
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) S S S or ≥3 if				, 			Rizov	LLC						
Abatement Performed Outside of Normal Facility Hours Other — Describe: Scope of Work (Check All That Apply)								900000 F. 111100			2501335-2			
Scope of Work (Check All That Apply) Scope of Work (Check All That A	Abatement Performed Outside of Norm	Period of	Abate	ment										
Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 if ≥ 160 sf or ≥260 lf Renovation Demolition Procedure	Other – Describe:	nai r dom	ty i loui	3				전 (HEG) [[[[[]]] [[]] [[] [[]] [[] [[]] [[] [[
Salido sf or ≥3 lif	Scope of Work (Check All That Apply)	-					Garne	eid NJ 07026						
Demolition Demolition Demolition Demolition Demolition Demolition Demolition Demolition Demolition Demolition Demolition Demolition Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non-Exem	The state of the s	X	Danov	ation										
Completed by Title Signature Color C	≥160 sf or ≥260 lf							Full Containm Mini-Enclosur	ent with Ne	egative l	Pressu	re		
Secretarion of Asbestos-Containing Material (ACM) Secription of Asbestos-Containing Material (ACM) Secription of Asbestos Containing Material (ACM) Sec							×	Glovebag Pro	cedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Basement X Pipe insulation Pipe i		1 .						Non-Exempte	d (*) and N	on-Friat	le Pro			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Basement X Pipe insulation Name of Registered Waste Hauler Rizov LLC City, State Garfield NJ Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler Rizov LLC Disposal Date TBD To BE ABATED Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation (i.e. thermal systems insulation (i.e. thermal systems insulation) (i.e. thermal	Location of													t
Custodial Staff? (12) Yes No N/A Basement X Pipe insulation Name of Registered Waste Hauler Rizov LLC No N/A No N/A No N/A No N/A Rizov LLC Custodial Staff? (12) Yes No N/A Pipe insulation Cubic Yards of Waste Hauler ID No. 0037825 TBD Disposal Date TBD City, State Garfield NJ Completed by Title Custodial Staff? (1.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Specify SF or LF) Rizov LF	Asbestos-Containing Material (ACM)	Us	ed Sole	ly by	Asbest	Des os Conta	scription o	of terial (ACM)	Amo	.m.t				Т
Name of Registered Waste Hauler Rizov LLC City, State Garfield NJ Completed by Rizov LT Completed by Rizov LT		Cus	amiena stodial S	nce/ Staff?	(i.e.	thermal	systems	nsulation.	(Spec	cify	Z.	77	Enc	四
Name of Registered Waste Hauler Rizov LLC City, State Garfield NJ Completed by Rizov LT Completed by Rizov LT City, State Cubic Yards of Waste TBD Cubic Yards of Waste Tairless Hills Landfill City, State Morisville PA						other m	ing, VAT iscellane	or ous)	SF or	LF)	ome	герг	aps	clos
Name of Registered Waste Hauler Rizov LLC City, State Garfield NJ Completed by Rizov LT Completed by Rizov LT City, State Cubic Yards of Waste TBD Cubic Yards of Waste Tairless Hills Landfill City, State Morisville PA		Yes	No	N/A				1			val	₹-	ulate	ure
Name of Registered Waste Hauler Rizov LLC City, State Garfield NJ Completed by Title NJDEP Waste Hauler ID No. 0037825 Disposal Date TBD Name of Registered Landfill Fairless Hills Landfill City, State Morisville PA	Rasement			- Turk									· Co	
Rizov LLC Hauler ID No. 0037825 City, State Garfield NJ Completed by Title Hauler ID No. 00 Waste TBD Disposal Date TBD City, State Morisville PA Signature Disposal Date Morisville PA	Dadoment	-	Х	-		Pipe	ınsulati	on	168	_F	Х			
Rizov LLC Hauler ID No. 0037825 City, State Garfield NJ Completed by Title Hauler ID No. 00 Waste TBD Disposal Date TBD City, State Morisville PA Signature Disposal Date Morisville PA														
Rizov LLC Hauler ID No. 0037825 City, State Garfield NJ Completed by Title Hauler ID No. 00 Waste TBD Disposal Date TBD City, State Morisville PA Signature Disposal Date Morisville PA										7.55				
Rizov LLC Hauler ID No. 0037825 City, State Garfield NJ Completed by Title Hauler ID No. 00 Waste TBD Disposal Date TBD City, State Morisville PA Signature Disposal Date Morisville PA												_		\vdash
Rizov LLC Olivity, State Garfield NJ Completed by City, State Disposal Date TBD City, State Disposal Date TBD City, State Morisville PA Signature	Name of Registered Waste Hauler					Cubic Y	′ards	Name of	Registered	Landfill	L			
City, State Garfield NJ Completed by Title Disposal Date TBD City, State Morisville PA Signature	Rizov LLC					of Wast								
Garfield NJ Completed by Title City, State Morisville PA Signature	City, State		100	13/825).		10-1			iuiiii				
Completed by Title Signature	Garfield NJ				ai Date									
		Title				The second second	naturo	IVIORISVII	IE PA					
	Aleksandra Rizova	1 22	er			Olé	DA.	fa.				010		

State of New Jersey

PAUD

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Initial Notification Check #: 7375

								and 12:1		Officer	#: 7375				
Date of Notification		9				pertie	700 14	er/Operat	or	(2)	E C F	a			
Agencies Notified	Type Notif:	cation	St	reet	Add	ress								and the second live	estimation.
[X] EPA	[X]Initia	-1	8	Wes	t 40t	th Stre	et, 11	Ith Floor			APR	1 2 2	.019	1	ا الحسين
[X] DEP	Notif	ication	CI	ty.	Stat	e, Zi	p Cod	e	_					1	
₩100r	[]Amende	ed ication	N	ew Y	ork,	NY 10	0018			Ĺ	Special Control of the Control of th		115.00		
(X) DOH	Control of the contro		Na	me o	f Co	ontact				Tele	phone Num	ber	ųŽ • ≡lo•sė –		
[]DCA	[]Cance	LIATION	М	larc F	opc	witz				(212)	697-0450)			
							NFORM	MATION							
Name of Facility W	here Abatem	ent is Ta	king	Pla	ice	(3)			П	Type of Facili					
Nutley Properties						•				X10ther	pter 8 (C	ivate	& CO	mmer)
181 Hancox Avenue										Square Feet	# of Floo	ors B	ldg.	Age	
City (5)		County	(6)					ode (7)	11.	20000	2		50	icho	a
Nutlay N I 07110		Гором				(SI	TATE L	ISE ONLY)	11	Current Use (P		eing	3emor	Tane.	1)
Nutley, NJ 07110 Name of Monitoring	Firm Hired	Essex by Build	ing	ASC	M No	0.	Name	of Abate	em	Residential bui	(9)				
Owner (8)								- Ctrone D	· :	ldoro Ino					
S&S Environmental	Sciences, In	C					Stre	et Addres	ss	iders, Inc.			_		
08 Sand Park Road	Sand Park Road						180	Sargeant	Δ	venue					
City. State. Zip C						City	. State.	e, Zip Code							
Cedar Grove, NJ 07	g Firm [T	eleg	phone	e Nu	mber	Clift	on, NJ 070	01	3-1935 er	Lie	cense	Numbe	er .		
Prakash Khaitan	9	73-8	357-7	188			-614-0377			008	807				
Scheduled Start Da	1 . 9	ched.Comp 0 5 / 1 Month /	1 6	171	1 9) 1	Fou	r Strong B	Bui	ilders, Inc.					
Month / Day / Occupancy Status D	uring Abate	ment (Che	ck c	only	one)	Stre	et Addres	SS					W. V	
[]Facility Clos of Abatement []Abatement Fer Hours - Descr	formed Outs	ide of No						Sargeant 7. State.							
X]Other - Descr						_	Clift	on, NJ 07	01	13					
Scope of Work (Che { Demolit { }>3 sf o X \sum_160 sf	ion		×]Reno	ovat	ion		[X]Min: [X]Glov	i- ve	Containment w Enclosure bag Procedure riable Proced		ive Pr	essu	re	
				Is		Г						Aba	teme	nt T	7pe E
Asbestos- Materis TO BE in Fac	ABATED		No.	cation real line with the control of	ly y n- e/ ial 12)	i	Asbe M: (i.e. nsula	Description estos-Con aterial { , thermal tion. sur other mis	AC S	uining Mi)	Amount (Specif SF or LF)	Y M	REPAIR	N C A P S U L .	NCI OSURE
Building No.: F, M, N & L -	Crawl Space & Sto	orage Rooms	X			Pipe	Insula	ation			5,500 LF	X			
												-			
Name of Registered	Waste Haul	er		JDEP aule		te No.	of W	c Yards aste		Name of Regis	tered Lan	dfill			
Newark Carting, Co	4	509						Grand Central	Sanitary L	.andfill					
City. State							nrsp	osal Date	•	City. State					
Newark, NJ	Newark, NJ									Pan Argyl PA	18072				
Completed By (Prin	Title						Signatur	e	Xall .		7	Date			
Bilyana Kulakovska	1	Office A	dmir	nistra	tor			-					4/1/19	9	
ASB-41 JUN 95															

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		C	B		\mathbb{V}	
		APR	_1_	2	2019	
¢	hec	k#11	216			

V/1/2/10	PAT	1	ITO		TION	OF ASE	ew Jersey BESTOS ABAT C 8:60 and 5:1			. 1	· ·	¥	-
Date of Notification (1)	9 /	19				of Building	Owner/Operator (2) 1904-5464	Check#11		2 21)19	To School Street
Agencies Notified ⊠ EPA ⊠ DOLWD	Type Notificat ☑ Initial ☐ Amended				400	Address O Hadley State, Zip C			Francisco de la constante de l	Complete Special	ing C	د میراد د در مرمعه	. (1.
DHSS DCA (NIAC 5:23-8)	☐ Emergenc	y (incl	uding			of Contact		-	Telephone Numb	er			_
(110/10/0.20/0)					Joh	n Belo			908-413-8987	7			
					FAC	CILITY IN	FORMATION						
PSE&G Street Address								Type of Facility School (K-12 Subchapter 8 Other (i.e., p	t) 3 (Other than K-12) rivate and commerce	cial bu	lding	S,	
City (5)		igers	Diva	•				Square Feet	# of Floors	Blo	lg. Ag	e	\neg
County (6) Hudson					Coun	ty Code (7))(STATE USE ONLY)	Current Use (Pr Substation	ior if being demolis	hed)			
and the second s		ing Ov	vner (8	3)	ASCM	No.	Name of Abatem						
	rvices						AbateTech, I Street Address	nc.					\dashv
The second secon							30 Maple Ave	e. PO Box 25					
CONTRACTOR CONTRACTOR CONTRACTOR							City, State, Zip C						
The state of the s							Lumberton, I						
	itoring Firm			Tele	phone I	No.	Telephone No.		License No.				
James Proctor					9-704		609-265-2107	1000	00529		1		
Start Date (10)4 /18 /		250	tion Dat		Name of OSHA N EMSL Analyt								
							Street Address						
☐ Abatement Performed	acility	Hour	s - Des		200 Route 13 City, State, Zip C Cinnaminsor	ode							
Scope of Work (Check al	II that apply)						☐ Full Con	tainment with Ne	gative Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			☐ Rei ☑ Der					g Procedure	n-Friable Procedu	re			
				Locat						Ab	ateme		
Asbestos-Containing TO BE ABA	Initial					Asbe (i.e	Description of stos Containing Ma ,, thermal systems surfacing, VAT other miscelland	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		-	Yes	No	N/A	Cool To	ır Wrap		40 LF			П	
Exterior		_				Coarra	ir wrap		40 21				
					-								П
None of Decistored Was	Interest Interest						Cubic Yards of	Name of Regi	stered Landfill	1-	1-		
		p, INC	c .	0.00	JDEP I lauler II 00069	D No.	Waste 8		airless Landfille				
City, State							Disposal Date	City, State					
Flanders, NJ							4/18/19	Morrisville	e, PA 19067				
	100000000000000000000000000000000000000		734				Signature	- N	Da	ate	7 -	19	
Gwendolyn Trumb	etti	Op	perati	ons (Coord	inator		WA-		1	(

CK.00650490PA	JD	NOTIF (P	ICATION	tate of Ne N OF ASE to NJAC	ESTOS	ABATE	MENT 0)	The Art of the Art of			G	E	7_0	1	300		
Date of Notification (1) 04/09/2019			Name o	of Building Grace	Owner/	Operator	(2)	Branch at	Andread S	A	PR	1 2	20	19			
Agencies Notified Type Notification EPA Initial			Street A	Address leadow	Road					4		· Court	- 17	+ 13-	- State of the sta		
DEP Amended Amendment #				ate, Zip Con, NJ 08					- 40	+	5.30	rain de la companya d	1484	Sandarie (
Emergency (i	ncluding	-		f Contact mmed B	adr				Tele	ephone	Num	ber					
			FAC	ILITY INF	ORMAT	ION			-	32 TO 12 m				_			
Name of Facility Where Abatement is Taking WR Grace - Old Lab Trailer	Place (3	3)		****			Type of Fa	cility (4)									
Street Address 340 Meadow Road							Subc Subc		<-12)ter 8 (Other than K-12)private & commercial buildings, homes								
City (5) Edison							Square Fe 400	et	# of	Floors			ldg. <i>A</i>	ge			
County (6) Middlesex				Code (7) USE ONLY)		Current Us			ng dem	olish	ed)					
Name of Monitoring Firm Hired by Building O EHI Inc.	wner (8)		ASC	И No.			of Abateme denburg I				Co	mpa	ny				
Street Address 655 West Shore Trail						Street	Address Spillman										
City, State, Zip Code Sparta, NJ 07871	State, Zip Code City, State, Zip Code								5								
Project Manager for Monitoring Firm Brooke Majka		100	Telepho 973-72	ne No. 29-5649		Teleph	none No. 691-1800			Licens		No.					
	Schedule		npletion	Date (11)			of OSHA M	onitor	1								
Occupancy Status During Abatement (Check						Street	Address Spillman	Drive									
Facility Closed/Vacated During Entire Po Abatement Performed Outside of Norma Other – Describe: DEMO- 04/30/2019-09	I Facility	Abaten Hours	nent			City, S	tate, Zip Co lehem PA	de									
Scope of Work (Check All That Apply)						Detil	ielielii FA	10010	,								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demolit				×	Gloveba	closure g Proced	dure								
	ls	Locati	on				11011 2.40	T T) unc	110111	Habit		Abate	ment			
Location of		Normal d Sole				scription							Ту	pe			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intenar todial S (12)	nce/		thermal surfa			И)	(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure		
	Yes	No	N/A											6			
Throughout			X		F	loor Til	е		38	0 SF		X					
Roof			X	Tar	Seale	r at Ro	of Seams		12	0 LF		X					
Exterior Windows			Х			Caulk			9	95 LF X							
Name of Registered Waste Hauler		LN	JDEP W	laste	Cubic	Yards	Nor	ne of Re	aioto	rad Lan	JEII						
Brandenburg Industrial Service Comp	oany	100	auler ID		of Wa			aste Co	F			hleh	em l	_and	ifill		
City, State Bethlehem PA		1			Dispo: 04/30	sal Date 0/19		, State thleher	m, P	A		rilezo.					
Completed by Stephen Carne	Title Envir	onme	ntal M	anager	8	Signature	5/	200			Date 04/	e 09/1	9				

B & G proj. #: 2019-73

State of NJ

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

5 a 6 proj	-		17 - * - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2				Check	# 9213				_	
Date of Notification	1 (1)	LINess	a of Duilding Ou	nor/Operator /2			Ins. E	CE	7 1	1	3		
0 4 / 0 9		11	e of Building Ow ton Hall Univ		10			W IL	ll /	1	=7		
Agencies Notified	Type Notificati		t Address	ersity								111	
☐ EPA ☐ DEP	Initial	40	00 S. Orange	Avenue				APR 1	2 20	119	and the state of t		
₩ DOL	Amendr		State, Zip Code	N I 07070			-						
☑ DOH			outh Orange,	NJ 07079			/\display	ne Number	-) . ne 1	. G.		
_	☐ Cancella	ition	3 39							(Perilicano e	Bart T		
DCA		1 1	om Lapcomp	te			973-2	04-4904					
			FA	CILITY INFORM	ATIO	N							
Name of facility wi	nere abatement is	s taking place	(3)				Type of Facility	(4) ol (K - 12)					
Seton Hall Ur	niversity-Moor	ney Hall						napter 8 (0	thar th	an k	(_12)		
Street Address								(Private/C			-12)		
400 S. Orang	je Avenue						Bldgs	/Homes, e	tc.		Ida A		
City (5)		County (6)		Co	unty Code (7)	Square Feet	# of Floor	S	Ь	ldg. Ag	je	
					0.000	ate use only)	Current Use (F	rior if bein	g dem	olish	ed)		
South Orang		Essex	:				University						
Name of Monitorin	_)	ASCM No.		Name of Abatement C							
	ronmental Se	rvices inc.			_	B & G Restoration, Inc. Street Address							
Street Address 280 Huyler S	Street					105 Ryerson Ro	oad						
City, State, Zip Cod		2000				City, State, Zip Code				RI-SI			
	ensack, NJ 07		_	Lincoln Park, N	IJ 07035	Titanaa	Mussala						
Project Manager fo			Phone Num 201-295-			Telephone Number (973)696-6869)	License 00	378	ei			
Geiser Fajar	V-1072	I Cahad Ca	ompletion Date (_	Name of OSHA Monito	or						
Scheduled Start Da	ite (10)			11)		B & G Restoration	on, Inc.						
04/20/2019		04/21/2				Street Address	1						
Occupancy Status Facility close						105 Ryerson Road City, State, Zip Code							
	erformed outside												
Other-Descri	be:				_	LincolnPark, NJ	07035						
Scope of Work (ch	neck all that apply	')				wrap & cut							
Demolition	X	Renovation			Ш	Full Containment w/nega	50	Glovei	٠.				
>3 sf or >3 lf		≥160 sf or ≥26				Mini-enclosure		★ Non-fr	iable p	госе	_		
Location of	2. 201	Is location no by maintenan	rmally used sole	1	7.23		Amount	20	e	e	E n	E	
asbestos-cor material to be		staff(12)		Descripti material		asbestos-containing	(Specify	SF or	m o	p a	c a	n	
abated in fac	cility (13)	Yes	No N/A				LF)		v e	i	p	L	
Room # 437			×	7 VAT & ma	astic		70 sf		X				
												III	
											님	뷰	
	Laufan		1110#	Cubic Yards of	Masta	Name of Registered L	andfill			Ц	Ш,		
Registered Waste F B & G Restora		NJDEP I 195		1 1/2	rvasie	Grand Central I							
City, State Lincoln Park, I			Disposal			City, State Pen Argyl, PA				Y,44221 ***			
Completed by (Prin		Title		Signature				Date		TREE T			
Gordana Luna	Time of Typo)					Gordana Luna 04/09/2019							