Date of Notification (1)		Name of B	uilding Owner/C	Operator (2	2)	11) 5				1
2/1/0/18	i de	160	10:15	300						#
Agencies Notified Type Notification	of the state of th	Střeel Add	ress	1.7	1	HU APR	13	2018	}	1
DO EPA JO Initial	į.	City, State	Zin Corie			311				T
DEP Amended Amendment #	100	12 o	1 Book	< M	No Sers	210770	1.		- 1	المت
Emergency (in	cluding	Name of	ontact	11,1		Telephone Nun	ber-			and and
DOH justification) DCA Justification	1	L&	1	200		· 			,	
		FACILI	TY INFORMAT	TON	Type of Facility (At				
Name of Facility Where Abatement is Taking	Place (3)			į	School (K-1		131			
1011)					Subchanter	8 (Other than 10-12)		ueton	
Street Address				4	Other (i.e. p	nivate & commercia	i Dunca	11 <u>1</u> 15. 11	uncs,	
CIV(A)					Square Feet	# of Figure	Bit	学学	9	į
Red Book					2000	i d				
County (6)		County Co				or if being demolish	eu)			1
Marmuth	was (C)	! ASCM	No.	l Name (<u>(၉) . d</u> of Abatement Co	niractor (9)				
Name of Menitoring Firm Hired by Building O	milei (o)	1000		1	eInJU		1	7(_		1
Street Address				Street	Address	-3	,			Merch. Special
0.70017188				197	Montr	use VIC'				
City, State, Zip Code				City, St	ate, Zip Code ト)んパ(レ	i. NJO:) 7.	G. C		-
5 84 71 Pro		Telephon	a No		one No.	License N				
Project Manager for Monitoring Firm		r di upara		1	294175	7 1 00	100	9		
Start Date (10)	Schedujed Co	mpletion D	late (11)		of OSHA Monitor			•		1
4/19/18	4124	118								
Occupancy Status During Abatement (Check		,		Street	Address					and the
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of Abate	ment m		City, S	tate, Zip Code					
Other - Describe:	m				500000000000000000000000000000000000000					
Scope of Work (Check All That Apply)										
23 sf or ≥3 \f	☐ Renov			1	Full Contains Mini-Enclosur	nent with Negative l	?cessur	е		The Print and
置 ≥160 sfor≥260 lf	Damo	Hon		1	le Glovebau Pro	scedure	5			
				- 3	Alon-Exemple	id (*) end Non-Friel 		Abate		
	1s Loca Norm	Mariana - 1					1	Ту		
Location of Asbestos-Containing Material (ACM)	Used Sc	slely by		Description entaining f	ror Jateñal (ACIJ)	Amount			亚	rs
TO BE ABATED	Mainter Custodia			noi system rfacing, VA	s insulation, IT or	(Specify SF or LF)	Removal	Ropair	cap	Enclosure
In Facility (13)	(12	2)		r miscella		er bassy	levo) ar	Encapsulate	sure
The state of the s	Yes No	N/A			£2				0	
K. John		1/	Floor	+160		1350	+		1	
HITCHEN	1	1/	•	1.0						
		-					1			
Name of Registered Waste Hauter	1 1	NJDEP W		bic Yards	Wama	Registered Landi	1	**********		
Ale Tosicion (VI	7	Hauler ID	No. of	Maste)	1	hrins				
City, State, Alace NT	10	100	/ U Dis	ppkal Date	T CIV.	and the same of th		- tentier-		
TOH) NICK, NO		et epitember kan a saas		1126		いか、アタ				
Completed by	Title			Signatur	ė \		ale			- [
Breen bill	BOLIET	CYTM	WITH		MULY_	<u> </u>				1



Date of Notification (1)	lab	# 000	24.04	1				1		- VI				1
The second	1)	JOD	#: 969	94.01	Nar	ne of Bui	lding Owr	ner/Operator	(2)	15	Sins			100	-
March 28, 2018 Agencies Notified	Matification							Authority	- P		APR	13	201	8	-
Agencies Notified	Notification	on Type			Stre	eet Addre	SS			A 1-21					1
⊠ EPA	☐ Initial		ion		-	Port Ce				L			7%		لمب
☑ DEP ☑ DOL	⊠ Amen				City	, State, Z	ip Code			$F_{\mathbb{R}^2}$	1. 17			1.5	7.
Ø DOH	☐ Emerg	endmen	t# <u>01</u>	~	Can	nden, NJ	08101			0.058			-		
☐ DCA	justific	cation)	icidali	9		ne of Cor					Telepho	ne N	umbe	r	-
	☐ Cance	ellation			05-	·								5)	
						istina Oç					856-772	-690	6		
Name of Facility Whe	re Abateme	ent is Ta	kina P	ace (3)	FAC	CILITYIN	IFORMAT	TION	T 6.5.	-111 (4)					
PATCO Lindenwold				(0)					Type of Fa						
Street Address									School Subcha	(K-12) ipter 8 (Otl	her than	K-12)		
801 Berlin Road N.									Other (.e. private	& (comr	nerci	, al buil	dings	š.
City (5)									homes,	etc.)					
Lindenwold									Square Fe 50,000	et # of	f Floors		175000000	g. Age	9
County (6)					Cou	nty Code	(7) (ST	ATE	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -				50		_
Camden					USE	ONLY)	(, (0))	.,_	Current Us			mons	ned)		
Name of Monitoring F	irm Hired b	y Buildir	na Own	er (8)	ASCN		Nama	of Contract	Maintenan	ce Facility					
Criterion Labs		,	3 0 111	.5. (0)		1110.		of Contractor	100						
Street Address					178		Street A	Group Remo	ediation, Inc	i		-			_
400 Street Road							50000-02-04								
City, State, Zip Code							City St	dams Road ate, Zip Cod	Suite I, P.C). Box 6					_
Bensalem, PA 19020							7.00								
Project Manager for M	Ionitorina Fi	irm	Telen	hone Nu	ımher			em, PA 190	20						
Michael Panepresso					Ext. 26		in the second	one Number		License N	Number				
Scheduled Start Date		Sched		mpletio			215-533			00858				0075005	
April 7, 2018	(10)				11 (11)			f OSHA Mor	nitor						
Occupancy Status Du	ring Abatem	April 2	2, 201	ly one)			Criterio								
							Street A								
Facility Closed/Vac	ated During	Entire	Period	of Abate	ement		05-33/3	eet Road							
Other - Describe: _		01 14011	iiai i at	лиу пос	irs -		City, Sta	ate, Zip Code	9						
Source of Work (Chec	le all that a			0			Bensale	em, PA 1902	20						
	k all that ap	ply)													
					enovation emolition	1			g Procedure						
					T =			☐ IVOII-EXE	mpted (*) an	d Non-Fria	able Prod	cedur	e		-
		7.65553	Locati	7000									Abat	emen	ıt
Location of Asbes	stos-		mally L Solely b			Do	scription						Ty	ре	
Containing Material	(ACM)	Ma	intenar	ice/	Asbe	stos Con	taining M	aterial (ACM))	Amount (Specify					T
TO BE ABATE IN Facility	D	C	Stoff		(i.e	., therma	I systems	insulation,		SF or LF)		70		En	
(13)			Staff? (12)				cing, VAT miscellan					em	Repair	cap	
/ Strickt		1	\ ·-/			Other I	mocellati	eous)				Remova	air	Encapsulate	
		Yes	No	N/A										te	
ain Area		Х			Pipe Fi	ittings			73 LF		- 23	X			+
															1
															1
ame of Reg. Waste H	lauler		N.	JDEP W	aste	Cubic \	/ards	Name of I	Reg. Landfill						1
ime Group Remedia	otion !		1000000	auler ID	#	of Was			-						
ty, State	ation inc.		19	272		6	15		Berk Comm	unity Lan	dfill				
ensalem, PA 19020						Disposa		City, State							
ompleted by	Title					04/23/2			o, PA 19608						
ncent Primavera	420000	-4.55				1	Signature	20			Date				
41	Proje	ect Man	ager				_ =	2			April	10,	2018		

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY - REGION 2 Division of Enforcement & Compliance Assistance - Air Compliance Branch (DECA-ACB) 290 Broadway - 21st Floor New York, NY 10007-1866

	Operator Desired #	NOTIFIC	CATION OF DEMO	DLITION AND RE	NOVATION	844	1 12	3 (4)			1.57
	Operator Project #	Postma	rk		ate Received	111			Notifica	ation	111
				1		11	111	Amm	1 0	0010	111
							1	APH	13	2018	
I. TYPE	OF NOTIFICATION (O-Ori	ginal / R= Revised):							o-lesses		
II. FACILI	TY INFORMATION (identif	R - y owner, removal contracto	Revised or, and other ope	rator)			1				- Add - O.
OWNER:							2.03			-	***********
Address:	Delaware River Port Aut	hority									
City:	One Port Center										
-	Camden			State: NJ			Zip:				
Contact:	Christina Ogunsuyi , PA	FCC		NJ			Tel:	08101			
REMOVAL	CONTRACTOR:							856-772	2-6906		
Address:	Prime G	roup Remediation, Inc. (NJ	DOL# 00858)								
City	1400 Adams Road, Suite	I, P.O. Box 6									
City:	Bensalem			State:			Zip:				
Contact:	Vincent D.I.			PA			Tel:	19020			
OTHER OP	Vincent Primavera ERATOR:							215-533	-3503		
Address:	There is	no other operator.			VII. 200						
City:				State:			Zip:				
Contact:				L		-	Tel:				
III. TYPE O	F OPERATION (D = Demol	ition / R - Penovation):					i ei.				
		D	- Renovation								
Carrier Control of Control	ESTOS PRESENT? (Yes/N	Voc					E-Docume				
V. FACILIT	TY DESCRIPTION (include	building name, number and t	loor or room numb	per):			-				
Building Nan	ne;										
Address:	PATCO Lindenwold	Station									
	801 Berlin Road N.										
Address:							1122				
City:	Lindenwold			State:			County				_
Site Location	Lindenwold			NJ				Camd	en		
Building Size	Main Area	0.11									
		SqMeter:	SqFt: 50,000		# of Floors:			Age in '	Years:		251125125-03
Present Use:	Maintenance Facility		00,000		Prior Use:	1				50	
VI. PROCEI	DURE, INCI LIDING ANALY	TICAL METHOD, IF APPRO	PRIATE USED T	O DETECT THE	DDESENCE	Maintenance	Facility				
Polarized lig	BESTOS MATERAL:	ysis of suspect materials b		O DETECT THE	FILDENCE						
	Table 1	you or suspect materials D	y a building inspi	ector.							
VII. APPROX	KIMATE OF RACM TO BE I	REMOVED AND NON-FRIAE	RI E ASDESTOS	MATERIAL TILAT						700000000000000000000000000000000000000	
OF ASB	ESTOS BELOW:	The state of the s	JEE AUDESTOST	WATERIAL THAT	WILL NOT B	E KEMOVED	. SPEC	IFY THE	AMOL	INT	
						1		ble Asbes			
Pipes – Linea	r Feet			RACM to be F	Removed	Cate	gory I	ot to be r		a Category	11
Pipe Fittings				73 LF						7	
Pipes – Linea											
Surface Area	- Square Feet						-				
Surface Area	- Square Meters										
Volume RACI	M off Facility Component – C	Cubic Feet									
	off Facility Component – C										
		OS REMOVAL: (MM/DD/YY									
		TON/RENOVATION: (MM/D		Start: 04/07/201	88	Comple	etion: 0	4/22/201	8		
Federal Notifi				Start: n/a	С	ompletion: n	ı/a			200 Car (100	
				A CONTROL OF THE PARTY OF THE P					_		

NOTIFICA	ATION OF DEMOLITION AND RENOVATION (continued)		APR 13 2018
A. DESC	CRIPTION OF PLANNED DEMOLITION OR RENOVATION W	ORK, AND METHOD(S) TO BE USED:	3 2010
	of Pipe Fittings using Glovebag Method. Work is scheduled	d for two shifts, 03/17/18 and 03/24/18.	L. I
XI. DESC	CRIPTION OF WORK PRACTICES AND ENGINEERING CON-	TDOLO TO DE LIGITA	
REN	CRIPTION OF WORK PRACTICES AND ENGINEERING CON OVATION SITE:	TROLS TO BE USED TO PREVENT EMISSIO	NS OF ASBESTOS AT THE DEMOLITION AND
Prime Gr	oup intends to follow all Federal and State of New Jersey A	sbestos Regulations and Code in reference t	o all major and minor asbestos abatement work
	STE TRANSPORTER #1		
Name:			
Address:	Prime Group Remediation, Inc.		
Address.	1400 Adams Road, Suite I, P.O. Box 6		
City:	Bensalem	State:	Zip:
Contact:		PA	19020 Tel:
WAS	Vincent Primavera TE TRANSPORTER #2		215-533-3503
Name:	David Geppert Recycling		
Address:	2692 Woodstream Drive		
City;		State:	
Contact:	Hatfield	PA PA	Zip: 19440
	Joe Rispo		Tel: 215-842-0122
AIII. WAS	STE DISPOSAL SITE		213-042-0122
Name:	Woodan D. J.O.		
Address:	Western Berk Community Landfill		
City:	455 Poplar Neck Road		
	Birdsboro	State:	Zip: 19608
Tel:	610-375-2772		13000
XIV. IF DE	EMOLITION IS ORDERED BY A GOVERNMENT AGENCY, PL	EASE IDENTIFY THE AGENCY BELOW	
Name:		Title:	
Authority:	This is not an "Ordered Demolition."		
Data if Ore	No. /AMAIDD and		
	der (MM/DD/YY);	Date Ordered to Begin (MM/DD/	Y):
XV. FOR	EMERGENCY RENOVATIONS		
Date and F	Hour of Emergency (MM/DD/YY):		
Description	This is not an "Emergency of the Sudden, Unexpected Event:	Renovation."	
	The state of the s		
Explanation	n of How the Event caused Unsafe Conditions or Serious Disrup	tion of Industrial Operation:	
XVI. DESC	RIPTION OF PROCEDURE TO BE FOLLOWED IN THE EVEN DMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDE	NT THAT UNEXPECTED ASBESTOS IS FOUN	D OR PREVIOUSLY NON-FRIABLE ASBESTOS
using HEP	vill stop. The affected area will be isolated using plastic and A vacuuming and wet wiping techniques. Air monitoring fo	r re-occupancy, if required, will be adequ	ately wetted. The area will be cleaned
XVII. I CER	RTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS	OF THE BECH ATION (1995) BARTAL SUIT	
DEMO	OLITION OR RENOVATION AND EVIDENCE THAT THE REQ ECTION DURING NORMAL BUSINESS HOURS (Required 4	UIRED TRAINING HAS BEEN ACCOMPLISHE	ED BY THIS PERSON WILL BE AVAILABLE FOR
4	ECTION DURING NORMAL BUSINESS HOURS. (Required 1	year after promulgation).	
Signatu	ure of Owner/Operator	04/10/2018 Date	3
XVIII. I CER	t Primavera, Project Manager RTIFY THAT THE ABOVE INFORMATION IS CORRECT.	546	
-	JON 10 CORRECT.		
Signatu	ire of Owner/Operator	04/10/2018	1,000
Vincent Federal Not	Primavera, Project Manager	Date	

CK012.

PAID

Date of Notification (1) 04-06-2018			T	Name o	of Building	Owner/	Operato	r (2)	: F		APF	1 :	20	18	
Agencies Notified	Type Notification	1	1	Street A	Address					111	AFI	1 1 4			1
X EPA X DEP X DOL	Initial Amended Amendmen		_	City, St	Broad St ate, Zip C ark NJ 0	ode				- /					<u></u>
DOH DCA	Emergency justification Cancellatio)		Name o	of Contact	erf				100000	ephone '3-733-		г		
Name of Facility Where	Abatement is Taki	ng Place (3)		FAC	ILITY INF	ORMAT	ION	Typ	e of Facility (4)					
Newark Vocational	High School	,						X	School (K-1	**					
Street Address 301 W Kinney Stre	et						*		Subchapter Other (i.e. p	8 (Oth			uildin	js, hon	nes,
City (5) Newark NJ 07103								Squ N/A	are Feet	# o	f Floors A		Bldg N/A	. Age	
County (6) Essex				County (STATE	Code (7) USE ONLY)			ent Use (Prid	or if bei	ng demo	olished)		<u></u>	
Name of Monitoring Firm Whitman Environm	n Hired by Building nental Consulta	Owner (8) nt		ASC	d No.				atement Con entracting I		(9)				
Street Address				1			Street	Addre	ess						
7 Pleasant Hill Roa City, State, Zip Code	10						PO E		734 Zip Code						
Cranbury NJ 08512									d Park NJ	0742	4				
Project Manager for Mor Kevin Lovely	nitoring Firm			Telepho 732-39	ne No. 90-5858		Teleph 973-		√o. 6298		License 01266	2000			
Start Date (10) 04-19-2018		Scheduled 09-30-20		pletion	Date (11)		The state of the s		HA Monitor ntracting L	I.C.					
Occupancy Status During	g Abatement (Che	ck Only One)					Street								-
Facility Closed/Vaca Abatement Perform	ed Outside of Norr	Period of Aba	atem	ent			PO E		734 Zip Code						
Scope of Work (Check A	occupied building					_			d Park NJ	0742	4				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	іі тпас Арріу)		novat noliti				×	Mi	ill Containme ni-Enclosure ovebag Proc on-Exempted	edure	J			ıre	
		ls Lo											Aba	itemen	it
Location Asbestos-Containing		Used 8		y by	Asbes		scription aining M		I (ACM)	Δ	nount		Т	Ī	T
TO BE ABA In Facili (13)	ATED	-	ial S 12)	taff?		thermal surfac	systems cing, VAT niscellan	insula T, or	ation,	(S	pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Throughout I	Ruilding	Yes 1	No	N/A		10/:	J O-				2015	-	+	-	
Tritoughout	Dulluling			Х		VVINC	dow Ca	lulk		770	00 LF	X	+	1	
												1			
Name of Registered Was	te Hauler		N.	IDEP W	aste	Cubic '	Yards		Name of R	enister	ed Land	fill	_		
Amax Contacting LL	С		33033	uler ID I	gene d	of Was	ste		Fairless		ou Lune	,,,,,			
City, State Woodland Park NJ 0	7424		1,50			Dispos	al Date 8-2018	3	City, State Morrisvil	le PA					
Completed by		Title					ignature		1	.517		Date			
Tome Maslarkov		Project	Ma	nager			-	11	(u	0		04-02	-201	8	

nock

Date of Notification (1) 04/02/2018)						Operator (2) of Education	Chec	k No. 1065			# 7 #/	(.72 ::::::::::::::::::::::::::::::::::::
Agencies Notified	Type Notification ☐ Initial				Address idge Roa	d			AP	n 1	0 0	n18	-
☑ DEP ☑ DOL					ate, Zip C Arlington		ersey 07031		AF		3-4	Wiğ-	-
☑ DOH □ DCA	justification) □ Cancellation			Name of Tony A	of Contact Alho				Telephone Numb 201-991-6800	per			
				FAC	ILITY INF	ORMATI	ON						-
Name of Facility When George Washington	re Abatement is Takir n Elementary Scho	g Place (3 ol)				Type of Fac						
Street Address 175 Albert Street							☐ Subcha	pter 8 (Other that e. private & com		s, hom	ies, e	tc.)	
City (5) North Arlington, New	w Jersey 07031						Square Fee 10,000	t #	of Floors	Bld 50-	g. Ag	е	
County (6) Bergen					Code (7) USE ONLY	n	Current Use	(Prior if being d Educatio	emolished) nal Facility			1000	
Name of Monitoring Fi T & M Associates	irm Hired by Building	Owner (8)	1	ASCI	M No.		Name of Aba Lilich Corpo	atement Contrac oration	tor (9)		2000		
Street Address 40 Monmouth Park	Highway, Suite 2						Street Addre						
City, State, Zip Code West Long Branch,	New Jersey 07764						City, State, 2 Woodland	ip Code Park, New Jers	sey				
Project Manager for M Kevin Burns	lonitoring Firm			Telepho 732-67	one No 76-4000		Telephone N 973-225-84		License No. 01104				
Start Date (10) 04/10/2018		Schedule 04/11/20	ed Co	mpletion	Date (11)		Name of OS Iris Environ	HA Monitor mental Labora	tories, LLC				
Occupancy Status Du							Street Addre		-				
☐ Abatement Perform ☐ Other – Describe:	acated During Entire F med Outside of Norm	al Facility l	Hours	nent			City, State, Z Union, NJ (
Scope of Work (Check	(All That Apply)												-
≥3 sf or ≥3 if □≥160 sf or ≥260 if			enova emoli				☐ Mi ☐ Gl	Il Containment w ni-Enclosure ove Bag Procedu n-Exempted (*) a	re / Limited Cor	ntainm		Tent	
		Is	Loca	tion					Amount		bater		
Locat	ion of	l N	lorma	illy		D	escription of		(Specify SF of LF)		Тур	e	
Asbestos-Containi TO BE A In Fa (1)	ABATED Collity	Mai	ntena	Staff?		estos Co e. therm. surf	ntaining Mater al systems instacing, VAT, or miscellaneous	ulation,		Remova	Repair	Encapsulate	Enclosure
Basement Hallway		Yes	No	N/A	Dina /Di	Citt			25.15			ite	Ф
Dasement Hallway				X			ng Insulaio Criticals)	1	35 LF	X			
			-1,12										
Name of Registered W	/aste Hauler		1	NJDEP V	Vaste	Cubic	Yards	Name of Regi	stered Landfill		1		
Lilich Corporation			ŀ	lauler ID 18724	No.	of Was	ste	Fairless Lar					
City, State Woodland Park, Nev	w Jersey					04/1/2	IXI I	City, State Morrisville, F	PA				
Completed by Adriana Olejarova		Title Pre	sider	nt		\$	ignative	.(5)	Date 04	/02/20)18		8

Date of Notification (1)			1				i je	7			- 1	
2/14/18			Name PSE		ig Owner/	Operator	(2)	APR 1	3 %	2018		
Agencies Notified Type Notification Y Initial				Address HADLI	EY ROA	D			ts.		-1	
EPA Initial Amended Amendment	t#		City, S	State, Zip			7000					- 1-
X DOH Emergency justification)	(includir	ng		of Conta	ct	^		Telephone Nu	mber			
DCA Cancellation				SOH	N /	BRA	DLEX	732-3	74	-6	12	8
Name of Facility Where Abatement is Takin	g Place	(3)			· Ordinati		Type of Facility	(4)	2			
Street Address 982 SPRING	FiE	E) A	IVE			Other (i.e.	-12) er 8 (Other than K-1 private & commerc	2) ial bu	ildings	s, hor	nes,
				.0.			etc.) Square Feet	# of Floors	T	Bldg.	Age	
County (6)				Code (7			Current Use (P	ior if being demolisi	ned)	4993	4/6	004
Name of Monitoring Firm Hired by Building	Owner (8)		M No:	.Y)	_	Sul	STATIO				
ENVIRONMENTAL TACTICS	Owner (a	5)	004			UNIQ	of Abatement Co UE SYSTEM	intractor (9) IS OF AMERICA	4			
Street Address 64 BROAD STREET							Address VHITEHEAD	AV/E				
City, State, Zip Code MATAWAN, NJ 07747				·	,`	City, St	ate, Zip Code				-	
Project Manager for Monitoring Firm			Teleph	one No.		SOUT	H RIVER, N					
TOM GEIGER Start Date (10) 3/,			732-2	90-221		732-4	32-8350	License N 01111	0.			
11/2018	4	5/		Date (11	2		f OSHA Monitor UE SYSTEM	S OF AMERICA	<u> </u>			
Occupancy Status During Abatement (Check		- 50		- 0		Street A	ddress					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	al Facilit	hr Horn	CD.		-		HITEHEAD ate, Zip Code	AVE.				
Scope of Work (Check All That Apply)	pera	lens	and	7			H RIVER, N.	J 08882				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demoli			Ψ.		Mini-Enclosure Glovebag Pro	ent with Negative P e cedure d (*) and Non-Friabl				
l cookies es		s Locat					,	2 () GIIG IVOII-I II ADI		Abate	men	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Use	ed Sole	ely by	Asbe	stos Conta	cription o ining Ma	térial (ACM)	Amount		1 9	pe	
In Facility (13)	Cus	todial (12)	Staff?	(i.e		ystems ing, VAT, scellaned	or	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
132 - 1 5	Yes	No	N/A	A .							ıte	е
Windows		X		ACM	WIND	10w (AulKing	2250 SF	X			
ame of Registered Waste Hauler ASTE MANAGEMENT		H	JDEP W lauler ID 125		Cubic Y of Waste		M. Communication	Registered Landfill				
ity, State LIZABETH, NJ		_ 1	120		Appy Disposa	Date	City, State			in the W	-	
ompleted by AROL RAIMO	Title	CE M	ANAG			nature	exal La	Date	9/		/	

NOCK # 8743

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Date of Notification (1)	18			Name PSE	of Building &G	Owner/	Operato)г (2)		The State of the S			1-27		
Agencies Notified	Type Notification				Address HADLE	/ POA	ח		1 4 14	AF	1 1 3	2018	-	land)	The same of the sa
EPA DEP DOL	Initial Amended Amendment	# <i> </i>	-	City, S	State, Zip Co TH PLAII	ode		กรกล	<u> </u>	4	And the				Will have been discovered by the second
Ŭ DOH DCA	Emergency (i justification)		-		of Contact	71	^			Tel	ephone Nu	mber		- 1	-
	Cancellation			FAC	SOH /			700	LEX_	7.	32-3	74	-6	120	8
Name of Facility Where A	patement is Taking	Place (3)						Тур	e of Facility	**************************************					
Street Address 982 S	PRING	FIEL	<u>-</u>	A	VE.				School (K Subchapte Other (i.e. etc.)	er 8 (Oth	er than K-1 & commerc	2) ial bui	Idings	, hom	ies,
	gton							A	are Feet	#0	Floors	40.0	Bldg. /		6
County (6)	SEX			County (STATE	Code (7)				rent Use (P		ng demolis	hed)	AH X	. 10	DOYA
Name of Monitoring Firm I ENVIRONMENTAL	Hired by Building O	wner (8)		ASC	M No:		Name	of Ab	atement Co	ontractor	7 Ti. C			2011	
Street Address				004	5			QUE	SYSTEM	1S OF	AMERIC	Α			
64 BROAD STREET City, State, Zip Code									TEHEAD	AVE.				3	
MATAWAN, NJ 0774 Project Manager for Monite									Zip Code RIVER, N	J 0888	2				
TOM GEIGER	oring Firm				one No. 190-2217		Telepi 732-	hone N 432-			License N	0,			
Start Date (10) 3/1/	2018	5	/,		Date (11)				HA Monitor SYSTEM						
Occupancy Status During	Abatement (Check				018		Street	Addre	ess		AIVIERIU	4			
Facility Closed/Vacate Abatement Performed Other – Describe:	Uutside of Norma	Facility L	loure		.,		City, S	tate, 2	TEHEAD Zip Code						
Scope of Work (Check All	/ /						SOU	IHF	RIVER, N	J 0888.	2				
≥3 sf or ≥3 if ≥160 sf or ≥260 if			novati nolitic				×	Glo	II Containm ni-Enclosur ovebag Pro n-Exempte	e cedure					
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Location of Asbestos-Containing M TO BE ABAT	aterial (ACM)	Used 3	enand	by	Asbesto	s Conta		atéria		Ап	ount		Ту		\Box
In Facility (13)		Custod	ial St 12)	aff?		hermal : surfac other m	ing, VA	T, or	ation,		ecify or LF)	Remova	Repair	Encapsulate	Enclosure
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Name of Registered Waste	Hauler		NJI	DEP W	aste I	Cubic Y	'ards		Name of I	Degistes	ed Landfill				
WASTE MANAGEMEN City, State	IT			ıler ID	No.	of Wast	e 80	5	GROW						
ELIZABETH, NJ						Disposa	B A		City, State MORRI						-
Completed by CAROL RAIMO		Title OFFICE	MA	NAG	FR		nature	1	04	1 .	Dat	2/2	- /	, -	
				, .	-11		6	11/2	al L	rem	2	101	7/	18	'

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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) PSF&G Agencies Notified Type Notification Street Address 4000 HADLEY ROAD EPA Initial DEP Amended City, State, Zip Code DOL Amendment #_ d SOUTH PLAINFIELD, NJ 07080 Emergency (including DOH Name of Contact justification) Telephone Number DCA Cancellation JOHN FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Street Address School (K-12) Subchapter 8 (Other than K-12) RINGFIELD AVE Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age 12,000 400 x 100 YES. County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) SUBSTA Name of Monitoring Firm Hired by Building Owner (8) 11 OR ASCM No: Name of Abatement Contractor (9) **ENVIRONMENTAL TACTICS** 0045 UNIQUE SYSTEMS OF AMERICA Street Address Street Address 64 BROAD STREET 396 WHITEHEAD AVE. City, State, Zip Code City, State, Zip Code MATAWAN, NJ 07747 SOUTH RIVER, NJ 08882 Project Manager for Monitoring Firm Telephone No. Telephone No. TOM GEIGER License No. 732-290-2217 732-432-8350 01111 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 2018 UNIQUE SYSTEMS OF AMERICA Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement 396 WHITEHEAD AVE. Abatement Performed Outside of Normal Facility Hours Other - Describe: Mesessaku apalus o City, State, Zip Code SOUTH RIVER, NJ 08882 Scope of Work (Check All That Apply) ≥3 sf or ≥3 if Renovation ≥160 sf or ≥260 lf Full Containment with Negative Pressure Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure is Location Abatement Location of Normally Туре Asbestos-Containing Material (ACM) Description of Used Solely by Asbestos Containing Matérial (ACM) TO BE ABATED Maintenance/ Amount (i.e. thermal systems insulation, Custodial Staff? In Facility (Specify Repai surfacing, VAT, or (12)SF or LF) other miscellaneous) Yes No N/A win bours ACM WINDOW CAUKING 302.05F 120 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill WASTE MANAGEMENT Hauler ID No. of Waste **GROWS NORTH** 1125 City, State Disposal Date ELIZABETH, NJ City, State MORRISVILLE, PA Completed by Signature CAROL RAIMO Date OFFICE MANAGER

State of New Jersey

Chr # 3344

- 1										the same of		2547 342	*****
Date of Notification (1) 4 /	10 /	18	-				g Owner/Operator (Medical Center	2)			1.27		17
Agencies Notified EPA	Type Notification	ation			. 330.33	t Address I Hamilto	on Ave			APF	1	3 2	2018
□ DOLWD	☐ Amended					State, Zip (- 1		-		
□ DHSS	Amendm Emergen	VACEA IMPE	ding			nton NJ			L.				20.00
(NJAC 5:23-8)	justificati		unig		Name	of Contac	zt		Telephone Num	ber			
	☐ Cancellat				Rit	a Gelli			609-599-500	1.4			W +
					FA	CILITY IN	NFORMATION						
Name of Facility Where	Abatement is 7	Taking Pl	lace	(3)				Type of Facility (4)			-	
St. Francis Medical	Center							School (K-12)					
Street Address									(Other than K-12 ivate and comme		ilding	10	
601 Hamilton Ave								homes, etc.)	ivate and comme	Ciai Di	andnię	,,	
City (5)								Square Feet	# of Floors	В	dg. A	ge	
Trenton								70,000	3		60+		
County (6)					Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (Price	or if being demolis	shed)			
Mercer								Hospital					
Name of Monitoring Firm		ding Owr	ner (8	3)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Environmental Con	nection						BRISTOL EN	VIRONMENTAL	., INC.				
Street Address							Street Address						
120 North Warren S	Street						1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip Co						
Trenton, NJ 08010							BRISTOL, PA	19007					
Project Manager for Mon	itoring Firm			55, 40, 17	phone		Telephone No.		License No.				
Rollie Jones						-4200	215-788-6040		00509				
Start Date (10)	18700000	Schedule					Name of OSHA N						
4/10/					/ .	18	BRISTOL EN	VIRONMENTAL	., INC.				
Occupancy Status During	And the state of t						Street Address						
☐ Facility Closed/Vacate						AND THE STREET	1123 BEAVER	R STREET					
Abatement Performed Time of Abatement: 1							City, State, Zip Co						
							BRISTOL, PA	19007					
Scope of Work (Check al	that apply)						□ Full Cont	tainment with Nega	ativa Praesura				
≥3 sf or ≥3 If ≥160 sf or ≥260 If		=		novati	-		☐ Mini-Enc	losure	ative Flessure				
1 82-20				. IA . ME	2000			mpted (*) and Non	-Friable Procedu	re			
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Location Asbestos-Containing	STATE OF THE PARTY	n 1			ly by	Ashe	Description o stos Containing Ma		Amount	Re	Re	En	Ē
TO BE ABA	TED			ntena			e., thermal systems i		(Specify	Removal	Repair	cap	Enclosure
IN Facilit	ty		Jusic	(12)	Staff?	1	surfacing, VAT, other miscellane	, or	SF or LF)	/a		Encapsulate	ure
(10)		Y	es	No	N/A	1	other miscellane	ous)				te	
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]										
			1		П					ТП	П	П	П
Name of Registered Was	te Hauler				JDEP I		Cubic Yards of	Name of Regist	ered Landfill				1-
BRISTOL ENVIRON		1C.		Н	auler II 18706		Waste 1 Cu Yd	FAIRLESS					
City, State							Disposal Date	City, State					
BRISTOL, PA 19007							4/10/18	FAIRLESS I	HILLS, PA 190	47			
Completed By (Print or Ty	rpe)	Title					Signature	0.0	I Day Da	ite			
Gino Pizzigoni		Estir	nato	or			Mino	Pinn roy	1912 1	1-1	() -	18	



ASB-41 (R-06-08)

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

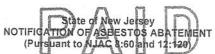
Date of Notification (1)			Name	of Buildir	a Owner	Operator (2)					-	6	
04/06/2018				Metro	ovation/C	ole, G.P).		S F	Check	No.	1072	21	
Agencies Notified	Type Notification				Address idge Ave	nue,Sui	te 150	1 1 f				4 4	HCTE	-
□ EPA 図 DEP	Initial □ Amended			City, S	State, Zip	Code			111	nn 1	2 0	018		H
⊠ DOL	Amendment			Red I	Bank, Ne	w Jerse	y 07701		(II A	PR 1	3 2	JIO		Improved.
⊠ DOH	☐ Emergency (justification)	including			of Contac	ot			Telephoi	ne Numb	er		+	-
□ DCA	□ Cancellation			Kerry	Dolan			ŧ	732-933					i
Name of Facility Whe	ere Abatement is Tak	na Diana /	21	FA	CILITY IN	FORMAT						W 37	do .	÷
Building	ere Abatement is Tak	ng Place (3)				Type of Fa	acility (4)					100	
Street Address							☐ Schoo	I (K-12)						
218 Monmouth Str	eet						⊠ Other (napter 8 (Other i.e. private & co	man K-12) mmercial I	buildings	, hom	ies, e	tc)	
City (5) Red Bank, NJ 077	01						Square Fe 2,500	et	# of Floo 2	rs K	Blo	ig Ac	je	
County (6) Monmouth					Code (7)		Current Us	se (Prior if being	demolishe	ed)	1			10-2
Name of Monitoring F Brinkerhoff environ	Firm Hired by Building Imental Services, IN	Owner (8))	ASC	CM No.		Name of All Lilich Corp	patement Contro	actor (9)		-			
Street Address 1805 Atlantic Aven	ue						Street Addr 606 McBri			****	V —			
City, State, Zip Code Manasquan, NJ 0873							City, State, Woodland	Zip Code Park, New Je	ersev					
Project Manager for M Gary W.Fleming	Monitoring Firm				one No 23-2225		Telephone 973-225-8	No.		nse No.				
Start		Schedul	ed Co	mpletion	Date (11)		SHA Monitor	011	1113	lenn	3, 51	1.)	
04/17/2018		04/25/2	2018				Iris Enviro	nmental Labo	ratories, L	LC		: /\d	0	
Occupancy Status Du Recility Closed/V	aring Abatement (Che acated During Entire	The contract of the contract of		2000000			Street Addre 2333 Rout	ess			-	or Etai		٠,
Abatement Performance Other – Describe:	rmed Outside of Norm	nal Facility	Hours	nent			City, State, Union, NJ	Zip Code 07083						
Scope of Work (Chec	k All That Apply)											7		<u>:</u>
≥3 sf or ≥3 lf			Renova	ition			□ Ft	III Containment	with Moga					
⊠≥160 sf or ≥260 lf			Demolit				× M	ini-Enclosure	56					£ .
							□ G ⊠ No	love Bag Proce n-Exempted (*)	dure / Limi	ted Cont	ainm	ent &	Tent	Deli
		Is	Locat	ion				ii-Exempted ()	Amou			baten	nent	
Locat	tion of	1	Norma	lly		D	escription of		(Speci SF of L			Туре	Э	
	ing Material (ACM) ABATED		d Sole intena		Asb	estos Co	ntaining Mate	rial (ACM)	01 012	,			rm	1. 1
In Fa	acility	Cust	todial	Staff?	(1	e. therm. surf	al systems ins facing, VAT, o	ulation, r			Ren	Re	nca	Enc
£ (1	3)		(12)				miscellaneou				Remova	Repair	Encapsulate	Enclosure
127		Yes	No	N/A							<u>m</u>		ate	Ö
Basement				Х	Boiler F	lue Ring	5,		2sf		X			
Basement	72			X	Air Cell	Pipe Wr	ap & Debris		50 lf	F 4-1	Χ			
Basement				X	White Co	ementitio	ousPackiging	Around Pipes	3 sf		Χ			
Basement				X	Cement	itious P	acking Boile	r Motor	1sf	- 1	Χ.	20. S	C/II	
Kitchen				х	Vinyl I	looring	3	1.0	120 9	SF	X	F# 487	£m;	
Name of Registered W	/aste Hauler	•	Н	JDEP V auler ID 18724		Cubic of Was		Name of Reg		ndfill ;		Lind	- 130	
City, State Woodland Park, Nev	w Jersev			10/24			al Date	Fairless La					<u> </u>	
Completed by		T:41-					/2018	Morrisville,	PA				E I	33178
Adriana Olejarova		Title Pre	siden	t		S	ignature \	led.		Date 04/0	6/20	18		

* Do not use this form for asbestos licensure exempted activities

IALU			1101	(F			AC 8:60 and 5:1		BER	E	1 17	7 72	ament :
Date of Notification (1)		Same							D) E G				11
4 /	11 /	18					g Owner/Operator Relocation Com						The same of the sa
Agencies Notified	Type Notific						Nelocation Com	party / a	ob#1804-229	1 1 3	hk.#	5022	
☐ EPA	I ype Notific	Jation				et Address	th e.						-
☑ DOLWD	Amende	ed			700000	07 N. 118			L		- Stranger		
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☐ DCA	☐ Emerger		cluding	g		naha, NE		- 12 - 12	1		- 1/20 == L7	-	. • • · · · · · · · · · · · · · · · · ·
(NJAC 5:23-8)	justificat Cancella	2000			2001/00/00/00	e of Contac			Telephone N				
	Cancella	111011				nnifer Lel			800-533-7	7353			
Name of Facility Where A	hatement is	Taking	Dlage	(2)	FA	CILITY IN	IFORMATION				57.4		
Residential	Datement is	Taking	Place	(3)				Type of Facility	5 79-5				
Street Address								School (K-1	2) 8 (Other than K	10\			
Oli oct Address								Other (i.e.,	private and com	-12) mercial t	ouildin	as.	
City (5)								homes, etc.	.)			J-,	
Cherry Hill, NJ 0803	А							Square Feet	# of Floors	E	Bldg. A	Age	
County (6)	4							1,924	2		56 y	rs.	
Camden					Cou	nty Code (7)(STATE USE ONLY)	The second second	rior if being dem	olished)			
Name of Monitoring Firm I	Hired by Ruil	dina C	hunor	(0)	ASCM	I N.	IN	Residentia					
Finog Environmenta		ung C	wilei	(0)	ASCIV	I NO.	Name of Abateme		500				
Street Address								d Mold Servic	es, Corp.				
617 Stokes Rd., Suit	e 4-318						Street Address						
City, State, Zip Code							3859 Sylon B						
Medford, NJ 08055							City, State, Zip Co						
Project Manager for Monit	oring Firm			Tel	ephone	No	Telephone No.	40 00036					
Mark Finog	8 00					5-2211	609-702-0400	i	License No.				
Start Date (10)	1	Sched	uled C	17 97		ate (11)	Name of OSHA M		00862				
_4 / _20 /						18	EMSL Analyt						
Occupancy Status During	Abatement (Check					Street Address	icai, iiic.					
□ Facility Closed/Vacated	During Enti	re Per	iod of	Abate	ement		200 U.S. Rou	to 120 Nowb					
☐ Abatement Performed (Outside of N	ormal	Facility	v Hou	ırs - Des	scribe	City, State, Zip Co						
Time of Abatement:	AM	PN	Λ/	_PN	l	_AM	Cinnaminson						
Scope of Work (Check all t	that apply)	-											
≥3 sf or ≥3 If			N D		CR STORY			ainment with Ne	gative Pressure	Enc	1050	11	
☐ ≥160 sf or ≥260 lf			⊠ Re □ De	nova moliti			☐ Mini-Enc ☐ Glovebag	losure			factor the factor	5 -	
		-					☐ Non-Exe	mpted (*) and No	on-Friable Proce	dure			
. 61	2			Loca							batem	ent T	vpe
Location o Asbestos-Containing M		4)		Norma	ely by		Description o	f					T
TO BE ABAT	ED	"	Ma	inten	ance/	Asbes (i.e.	stos Containing Ma , thermal systems i	terial (ACM)	Amount (Specify	Removal	Repair	nca	nclo
IN Facility			Cust	odial (12)	Staff?	1	surfacing, VAT,	or	SF or LF)	ova	=	Encapsulate	Enclosure
(13)			Yes	No	N/A	-	other miscellane	ous)	100			late	G)
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Name of Registered Waste	Hauler				NJDEP I	Vaste	Cubic Yards of	Name of Regis	stered Landfill			Ш	Ш
Waste Management				100	Hauler II	D No.	Waste	Grand Cer					
City, State					17273	5	5 Disposal Date	City, State					
Lafayette, NJ							4/30/18	Penn Argy	In DA				
Completed By (Print or Typ	e)	Title					- 1	I emi Argy	100000 910 CD	_			
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Date of Notification (1)		3 12		Na	me of Buildi	ing Owner/Operator	(2)	11/3C	3	Tax Table	A War Africa	7
4 /12 /	18					Township Scho		APR	1 2	201	0	Applications,
Agencies Notified ☐ EPA ☐ Initial ☐ DOLWD ☐ DOH ☐ DCA ☐ Emerg	ded dment #_	ludir	_	1 City	eet Address Egbert S y, State, Zip Pemberton	t	a de la companya de l	ASSE			7. 8	Lanca de la constante de la co
(NJAC 5:23-8) justific	ation)	Juun	ig	Nar	me of Conta	ict		Telephone Num				
		150m		F	ACILITY I	NFORMATION		000 000 01-				_
Name of Facility Where Abatement i Joseph Stackhouse School Street Address	s Taking	Plac	e (3)				Type of Facili	12)			_	
125 A Trenton Rd							Other (i.e.,	er 8 (Other than K-12 private and comme c.)	2) ercial b	ouildir	igs,	
City (5)	33						Square Feet	# of Floors	TE	Bldg. /	Age	_
Browns Mills							20,000	1		50+		
County (6) Burlington				Co	unty Code (7)(STATE USE ONLY)	Current Use (I	Prior if being demoli	shed)			
Name of Monitoring Firm Hired by Bu	ilding Ov	vner	(8)	ASC	M No.	Name of Abateme		9)				
ATC						Controlled E						
Street Address						Street Address	TVII OTIIITETILEI	Oystellis				
3 Terri Lane - Suite 4						1121 N. Bethl	ehem Pike -	Suito 60				
City, State, Zip Code						City, State, Zip Co		ouite ou				
Burlington NJ 08106						Spring House						
Project Manager for Monitoring Firm			Tel	ephon	e No.	Telephone No.	7,17410477	License No.				
John Lutz			6	09 38	6 8800	215 542 7000		00847				
Start Date (10)					Date (11)	Name of OSHA M	onitor	00047				
6/21/18				1_ /	18	CES						
Occupancy Status During Abatement	(Check o	only o	one)			Street Address			-			_
☐ Facility Closed/Vacated During En	tire Perio	d of	Abate	ment		1121 N. Bethl	ehem Pike - S	Suite 60				
Abatement Performed Outside of Name of Abatement:AM	Normal Fa	acility	y Hou	rs - De	escribe	City, State, Zip Co	de					
Scope of Work (Check all that apply)		.001	101-12	UU/AII	<i>n</i> .	Spring House	, PA 19477					
						□ Eull Conte	sings and the bu				-	
 ≥3 sf or ≥3 If ≥160 sf or ≥260 If 			novat molitic			☐ Mini-Encl	osure Procedure rais	egative Pressure	acc.	نعا	تت	
			Locat					That is the control of the control o	_	atem	ont T	
Location of Asbestos-Containing Material (ACI TO BE ABATED IN Facility (13)		Use Mai Cust	(12)	ely by		Description of stos Containing Mate , thermal systems in surfacing, VAT, other miscellaneo	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Ceiling Corridors	Y	res	No	N/A	-	ting Insulation (V	Vern 9 Cod		_	_		
Exterior Window Panels								51 LF		Ш	Ц	
					Exterior	Window Panels		1620 SF				
		7								Ш	Ш	Ш
lame of Registered Waste Hauler		_	N		Waste	Cubic Yards of	N- CT					
Geppert Recycling				auler I		Waste	Name of Regis					
ity, State						Dianas-I-D-1		erks Communtiy	Lan	dfill		
Hatfield, PA						Disposal Date	City, State					
completed By (Print or Type)	Title						Birdsboro,	PA 19508				
Patricia Visco	Title Office	ce M	lanaç	jer		Signature	Mes	Date	e . /	1		
SB-41 N 13	* Do	not :	100 46	is form		4 50000	wer see	-	11:	2/2	2019	7

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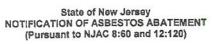
Date of Notification (1) APRIL 11, 2018		Name K. Si	of Building Ov	vner/Operato	r (2) DN	led tox		- 101114	Parket mean	**************************************
Agencies Notified Type Notificatio	n	Street	Address BEACH RC			ASE	JEST	OS C	SING	TROL
EPA X Initial Amended Amendme			tate, Zip Code IMOUTH B		07750					
DOH justification Cancellation			of Contact AN MICION	Telephone Nu 732-222-18						
Name of Facility Where Abatement is Tak SHAW PROPERTY Street Address 33 DENORMANDIE AVENUE	ing Place (3)	FAC	CILITY INFOR	MATION	Type of Facility (4) School (K-12 Subchapter 8 X Other (i.e. pri		2) ial bui	ldings	, hom	es,
City (5) FAIR HAVEN	-		etc.) Square Feet 944 SF					3ldg. <i>A</i>	Age	
County (6) MONMOUTH BEACH			Code (7)		Current Use (Prior RESIDENCE	if being demolish	ned)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASC	M No.	Name Finis	of Abatement Contr shing Touch Asb	actor (9) estos Abatem	ent (Corp.	., Inc	
Street Address					Address hompson Street	t .				
City, State, Zip Code				City, S Wes	State, Zip Code st Long Branch, I					
Project Manager for Monitoring Firm		Telepho	one No.		none No. 222.8372	License N 00040	lo.			
Start Date (10) APRIL 21, 2018	Scheduled 0	Completion 2, 2018	Date (11)	Name N/A	of OSHA Monitor	1				
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of Aba	tement			Address					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation polition		×	Mini-Enclosure Glovebag Proce	t with Negative F dure *) and Non-Friab			e	
Location of	11/19/2016/00/00	cation mally		Description				Abate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mainte Custodi	olely by nance/ al Staff? 2)	(i.e. the	Containing Name of the	flaterial (ACM) s insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
KITCHEN	Yes N	lo N/A		VAT		168 SF	X		TO .	
Name of Registered Waste Hauler Finishing Touch Asbestos Abateme		cubic Yards f Waste 1 cy		egistered Landfill SS LANDFILL						
City, State WEST LONG BRANCH, NJ				isposal Date /25/18		VILLE, PA				
Completed by JOSEPH P. MILLER	Title PRESII	DENT		Signature	WIII	Da 4/	te /11/1	8		

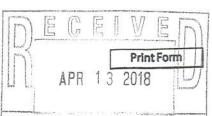
MCIL			FICATIO	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE		т	D)-	E C	E		W_	L	
Date of Notification (1) 04/10/18 PAL Job#17-1738 Chang	je Licen	se#		of Building d Airline		Operator	(2)			APF	1 1 ;	3 6	2018		الل
Agencies Notified Type Notification EPA Initial		Street Address 233 S. Wacker Drive - 11th Floor HDQOU ASBESTOS COLUCENSIN												L &	
DEP X Amended Amendment	#2			ate, Zip C go, IL 6				loss		havi	10411	211.4	<u> </u>	THE STATE OF THE S	The state of the s
□ Emergency justification) □ DCA □ Cancellation			Name o	of Contact	ji	200			T	elephone	Numb	er			
Name of Facility Where Abatement is Takin	g Place (3	1)	FAC	ILITY INF	ORMAT	ION	Typ	e of Facility	(4)						
Newark Liberty International Airport Street Address 151 Conrad Road	ng 15	51/151A	4				School (K- Subchapte Other (i.e.	-12) er 8 (Ot			build	dings	hom	es,	
City (5) Newark							200	etc.) are Feet 000	1	of Floors		B 6	ldg. A	\ge	
County (6) Essex				Code (7) USE ONLY	n		Cur	rent Use (Proort	rior if be	eing dem	olished	<u> </u> (1)			
Name of Monitoring Firm Hired by Building 6	Owner (8)		ASCN N/A	M No.				atement Co ironmenta							
Street Address 104 East 25th Street 8th Floor						Street 11-02			za South						
City, State, Zip Code New York, NY 10010			City, State, Zip C Long Island						NY 11	1101					
Project Manager for Monitoring Firm			Telepho 212-35	ne No. 53-8306		Teleph 718-3				Licens 0085					
Start Date (10) 01/04/2018	06/04/2	018	mpletion	Date (11)				HA Monitor Kowalcz							
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire F	Province (1971) 2 (1970)	CCT-CC	nont			Street /		ess th 98th St	reet						
Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours	3					Zip Code y Park, N	IY 116						
Scope of Work (Check All That Apply)						_									
≥3 sf or ≥3 If ≥160 sf or ≥260 If	Designed.	enova emolit				× × ×	Fu Mi GI	ull Containm ini-Enclosur ovebag Pro on-Exempte	re ocedure						
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(13)	Yes	(12) No	N/A			niscellane				i oi Li j		Removal	Repair	Encapsulate	Enclosure
Facade		X	11.002.00		Scra	atch Co	at		3	3,500	-	Х			
1				4								4			
Name of Registered Waste Hauler ATC	JDEP Wauler ID 14310		Cubic Yof Was 50 Ya	te		Name of Minerva	1976								
City, State Shirley, NY 11967			Disposi		1	City, Stat Wayne		OH 4	4688						
Completed by Ann Ali	Title Comp	lianc	e Admi	in		gnature	L				Date 04/10	0/2	018		

Print Form

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	APR	13	2018	

Date of Notification (1) 04/05/2017 PAL Job#17-1738 Ad	d Material			Building Owner Airlines, Inc.	Operator	r (2)		1-	T ASB	eser er ESTO	300	NTR	OL 8
Agencies Notified Type Notification	1	1 7	Street A	ddress Wacker Driv	e - 11th	ı Flo	or HDQOU	Currents	S ANTONIO PROPERTIES PAR		ENSI		NYARA-PERING
EPA Initial DEP X Amended Amendmer	nt #1			te, Zip Code go, IL 60606									
□ Emergency justification □ DCA □ Cancellation)	N	Name of	Contact				Tel	ephone N	umber	27 (A.) E.)		
Name of Facility Where Abatement is Taki	ng Place (3)		FACI	LITY INFORMA	пои	Тур	pe of Facility (4)					
Newark Liberty International Airpo	ort Building	151	/151A			F	School (K-12 Subchapter 8		er than K-	12)			
151 Conrad Road				Other (i.e. privetc.)					k commer	cial buil			s,
City (5) Newark							uare Feet ,000	1 4 01	Floors		ildg. A	ge	
County (6) Essex				Code (7) USE ONLY)	Current Use (Prior if being demolished) Airport								
Name of Monitoring Firm Hired by Building ATC	Owner (8)		ASCN N/A	1 No.			batement Cont vironmental			T. 4110001115000			
Street Address 104 East 25th Street 8th Floor					Street 11-0		ress ueens Plaza	a Sou	th				
City, State, Zip Code New York, NY 10010					City, S	11101							
Project Manager for Monitoring Firm		10.00	elephor	ne No. 53-8306	Telepi	hone	-		License 2867				
Start Date (10) 01/04/2018	Scheduled 06/04/20		pletion I	Date (11)	100000000000000000000000000000000000000		SHA Monitor						
Occupancy Status During Abatement (Che	ck Only One)			Street Address 133 Beach 98th Street								
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:			ent		City, State, Zip Code Rockaway Park, NY 11694								-
Scope of Work (Check All That Apply)					Rock	Kawa	ay Park, NY	110	94				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	novati molitic			XXXX	V V	Full Containment Aini-Enclosure Glovebag Procession-Exempted	edure		re Pressure			
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Facade		X		Sc	ratch C	oat		3	,500	Х			
Name of Registered Waste Hauler		На	DEP W	No. of W			Name of R			ill			
City, State Shirley, NY 11967		24	310	Disp	ards osal Date 0/2018	S 10 04	City, State			688			
Completed by Ann Ali	Title Compl	iance	e Adm		Signature	1				ate 04/05/2	2018		





Date of Notification (1) 12/22/2017		Name of Building Owner/Operator (3 United Airlines, Inc.						Transfer of Add	OJH SETWINE	AGUUS L	(100) 10,63)			JL 8
Agencies Notified Type Notification			Street Ad 233 S.		Drive	- 11th	Floo	r HDQOU				2.118	10.1520-5	
EPA Initial Amended Amendment			City, State, Zip Code Chicago, IL 60606											
DOH	(7.0	1	Name of Contact						Telephone Number					
Name of Facility Where Abatement is Takin Newark Liberty International Airpor	g Place (3) t Building	151		JTY INFO	RMATI	ON	Туре	of Facility (4) School (K-12)					
Street Address 151 Conrad Road		Subchapter Other (l.e. p							vate 8	commercia	l bulld			s,
City (5) Newark							10,0		1	Floors	6	dg. Ag	ge 	
County (6) Essex			County C	ode (7) ISE ONLY)		_	Airp	ent Use (Prior ort	if beli	ng demolish	ed)			
Name of Monitoring Firm Hired by Building ATC	Owner (8)		ASCM N/A	No.				ronmental						
Street Address 104 East 25th Street 8th Floor		Street A 11-02						ess eens Plaza	Sou	th				
City, State, Zip Code New York, NY 10010							, State, Zip Code ng Island City, NY 11101							
Project Manager for Monitoring Firm			Telephone No. Telep 212-353-8306 718					No. 0900		License No 28675).			
Start Date (10) 01/04/2018	Scheduled 06/04/20							HA Monitor Kowalczyk						
Occupancy Status During Abatement (Chec	k Only One)					treet Address 33 Beach 98th Street							
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of Ab nal Facility h	atem	ent			City, State, Zip Code Rockaway Park, NY 11694								
Scope of Work (Check All That Apply)			-									-		
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		ocational			-							Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair Custo	Solel itenan idlal S (12)	ice/	Asbes (i.e.	tos Cont thermal surfa	scription taining M systems cing, VA miscellar	nateria s Insu T, or		(5	mount Specify For LF)	Removal	Repair	Encapsulate	Enclosure
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											-			

Name of Registered Waste Hauler ATC		NJDEP Waste Cubic Yards Name of Registered Lar Hauler ID No. of Waste 24310 50 Yards Minerva Enterprise					A STANDARD CONTRACTOR AND A STANDARD CONTRAC							
City, State Shirley, NY 11967		_1		7	Dispo	sal Date 0/2018		City	burg,	OH 446	38			
Completed by Ann Ali	Title Comp	lianc	e Adm	in		Signature	9			Da 12	te /22/2	2017		



BASE BID SCOPE OF WORK BREAKDOWN	LUMP SUM PRICE	Unit Price for Added Work	Unit Price for Deducted Work
disposal of the light buibs is not included in this scope of work.			
7) Lump Sum Price for 14,000 SF of ACM Fireproofing:			
Phase One - Full Containment Abatement of 14,000 SF of ACM			
Fireproofing that is located in the First and Second Floors (above the			
ceilings) well as in the 2nd Floor Roof Overhang (exterior soffit) of			
Bidg 151. All Suspended Ceiling Tiles and Soffit boards are to be			
removed and disposed as ACM.			-
8) 1,500 SF of ACM Floor Tiles and ACM Mastic:	+ +		
Removal of 900 SF of VAT (the bottom 2 layers of 3 layers) and mastic			
in Phase One in Bldg 151A, plus an additional 600 SF of ACM Floor Tile			
and mastic in Bidg 151, for a total quantity of 1,500 SF.			
9) 10,000 SF of ACM Tar Vapor Barrier/Damp Proofing:	+ +		<u> </u>
This material is presumed to have been applied to the exterior face of the			
concrete block walls prior to the application of the brick veneer. The brick			
veneer needs to be removed in order to gain access to the Damp Proofing.			
For bidding purposes we are assuming that these walls were constructed			
as cavity walls, and that the brick veneer is not mortared to the face of the			
concrete block walls. All brick veneer will be disposed along with the			
building debris as Non-ACM waste.			
10) Lump Sum Price for 1,500 LF of Door Caulk:			
Remove the ACM Door Caulking from around the exterior doors.			
11) Lump Sum Price for 400 LF of ACM Pipe Insulation =			
Based on the Addendum #1 Abatement Phasing Plan, and the Responses			
to Bidders Questions provided in Addendum #3, there is expected to be			
220 LF of ACM Pipe Insulation on horizontal pipes that are hanging			



BASE BID SCOPE OF WORK BREAKDOWN	LUMP SUM PRICE	Unit Price for Added Work	Unit Price for Deducted Work
from the exposed ceiling in the Warehouse. The remaining 180 LF			
of ACM Pipe Insunation is presumed to existing inside vertical chases			
In Bldg 151. To access the pipes in the vertical chases, the chases			
will need to be partially removed. For bidding purposes, we assume that			
the chases were constructed of metal studs and sheetrock.			
12) 90 SF of ACM Vibration Cloth:			
Removal of 90 SF of Vibration Cloth that is located in the ceiling			
area of Bldg 151 at nine locations where the Vibration Cloth is between			
the AC/Heater Units and their associated ductwork. Each Vibration Cloth			
is expected to be roughly 1' wide x 10' long.			
13) 400 LF of 4" diameter Transite Pipe Removal:			
Removal of 400 LF of Transite (ACM) Pipe that is located under the			
floor slab of the two bulldings as shown on the Addendum #1 Abatement			
Phasing Plan. There are four areas that are expected to yield 100 LF of			
Transite Pipe. For bidding purposes, we are ignoring the reference to			
Wire Wrap or Tar Wrap. This bid proposal is based on the removal and			
disposal of 400 LF of 4" (assumed size) diameter Transite Pipe. The GC			
will remove the floor slab and excavate and expose the Transite Pipes			
for Abatement by the ACM Abatement Subcontractor.			
5,000 SF of Sub-grade Mastic			
Total Base Bid Amount for the Abatement Scope of Work =			
Submitted by (company name)	Authorized Person:		
Number of Work Weeks to complete the above work Scope:weeks	This Date:		

Print Form State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) 13 2018 Name of Building Owner/Operator (2) 04-06-18 John Viteri Jr. Esq., LLC Agencies Notified Type Notification Street Address LICENSING 3 University Plaza, Suite 207 **EPA** Initial DEP City, State, Zip Code Amended E DOL Amendment # Hackensack, NJ 07601 Emergency (including Name of Contact F DOH Telephone Number iustification) John Viteri DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private Home School (K-12) Street Address Subchapter 8 (Other than K-12) F Other (i.e. private & commercial buildings, homes, City (5) Square Feet # of Floors Bldg. Age Little Falls County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Bergen Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) N/A Delfa Contracting LLC. Street Address Street Address 522 7th St. City, State, Zip Code City, State, Zip Code Union City NJ 07087 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 201 216-9603 01206 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 04-16-18 04-30-18 Delfa Contracting LLC Occupancy Status During Abatement (Check Only One) Street Address 522 7th St. Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Union City NJ 07087 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Remova Custodial Staff? Repair In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A

Name of Registered Waste Hauler Delfa Contracting LLC		NJDEP Waste Hauler ID No. 35240	Cubic Yards of Waste 20	Name of Registere	ed Landfill Durce Recovery Facility
City, State Union City, NU Completed by Title Proi.			Disposal Date 04-20-18	City, State Tullytown, PA	
		Manager.	Signature	7-R2 -	Date 04-06-18

X

X

Wall Plaster

Roofing Materials

2nd Floor / Rm 1

Roof

250 SF

1200 SF

Credi	4			ICATION	ate of New Jerse N OF ASBESTOS to NJAC 8:60 an	ABATE		т			1 1)	W	nt-ro	
Date of Notification (104-06-18	1)				f Building Owner/ Viteri Jr. Esq.,		had been	2R 1	3 8	2018	-			
Agencies Notified	Type Notification	1		Street A	ddress versity Plaza, S	Suite 2	07		ASSESSES CONTROL &					
DEP DOL	Amended Amendmen				ate, Zip Code ensack, NJ 076	501			A STATE OF THE PROPERTY OF THE	to a mic many micro	an conse	ment a concess	inautonies.	
DOH DCA	Emergency justification Cancellation)		Name of John \	f Contact Viteri				Telephone No	ımher				
				FACI	LITY INFORMAT	ION								
Name of Facility Whe Private Home	ere Abatement is Takir	ng Place (3	3)				Тур	e of Facility (4)					
Street Address							, L		2) 8 (Other than K- rivate & commerc		ldings,	, home	es,	
City (5) Little Falls							Squ	Jare Feet	# of Floors	E	Bldg. A	Age		
County (6) Bergen					Code (7) USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring F N/A	irm Hired by Building	Owner (8))	ASCN	ЛNo.		Name of Abatement Contractor (9) Delfa Contracting LLC.							
Street Address						Street 522			a					
City, State, Zip Code						City, State, Zip Code Union City NJ 07087								
Project Manager for N	Monitoring Firm			Telepho	ne No.	Telephone No. License No. 201 216-9603 01206								
Start Date (10) 04-18-18		Schedul 04-30-		mpletion	Date (11)	Name of OSHA Monitor Delfa Contracting LLC								
Occupancy Status Du	uring Abatement (Che	ck Only Or	ne)			Street	Addr	ess						
	/acated During Entire ormed Outside of Nor					522 7th St. City, State, Zip Code								
						Unic	n Ci	ty NJ 0708	57					
Scope of Work (Chec ≥3 sf or ≥3 lf ≥160 sf or ≥260	7.55d		Renova Demoli				N G	lini-Enclosure Glovebag Prod				e-		
		Is	Locat	tion								ement		
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	and Attic	-	×	1		Comp		4	6,000 SF	x	-			
	ement	-	×	-					145 LF		-			
	oof		^			sulation+Transite Pipe 145 LF x					-			

NJDEP Waste Hauler ID No. 35240

Proj. Manager.

City, State

Tullytown, PA

Cubic Yards of Waste

20

Disposal Date

04-24-18

Signature

Name of Registered Landfill

Tullytown Resource Recovery Facility

Date

04-06-18

Union City, NJ

Jaime Delgado

Completed by

City, State

Name of Registered Waste Hauler

Delfa Contracting LLC

¹⁶⁷⁷⁴

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

Check # 4244

Date of Notification (1)			Name	of Building	Owner/C	Operator	(2)		T		prompt of the same				
04/06/2018								d Veterans	Affai	F)	臣	C	E		\mathbb{W}
Agencies Notified Type Notific	ation			Address				- rotorant		1				- U	
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DEP Amend	ied	İ		tate, Zip C					-111	1	A	PR	13	2 2	018
	lment #		Lawre	nce NJ					14	1	Pi	111	1	0	AID
■ DOH Emerg	ency (including	1		of Contact					Tele	ephone	e Numi	ber			7/1
DCA Cance			Ted							The second lines	4S890		SC	CM	real
Name of the second	SAN TO SA			CILITY INF	ORMATI	ON			10/3	2)004	-930		ENS		
Name of Facility Where Abatement is	Taking Place (3)					Тур	e of Facility ((4)						
National Guard Armory								School (K-1	12)						
Street Address							Ħ	Subchapter	r 8 (Oth	er than	K-12)				
2001 Park Blvd						- 1		Other (i.e. p					dings,	hom	es,
City (5)							Sail	etc.) ıare Feet	T # of	Floors		Тъ	lda /	70	
Cherry Hill, NJ													Bldg. A	ige	
County (6)				Code (7)			Cur	rent Use (Pri	or if bei	ng den	nolishe	d)			
Camden			SIAIE	USE ONL	" —	_									
Name of Monitoring Firm Hired by Bui	lding Owner (8)	ASC	M No.		Name	of Ab	patement Cor	ntractor	(9)					
TTI						Nick F	Resi	toration LI	LC						
Street Address						Street						_		-	
1253 North Church St						72 Br	ook	side Rd							
City, State, Zip Code								Zip Code						-	
Moorestown, NJ 08057				39				NJ 078	60						
Project Manager for Monitoring Firm		Т	Telepho	one No.		Teleph			09	Licen	se No.		-	_	-
_		- 1		340-880	n	973-9				0135					
Start Date (10)	Schedu		1	Date (11)				SHA Monitor		0130	00			_	_
04/17/2018	04/27/2		ripicuori	Date (11)		IRIS	01 00	JI IA WOULD							
Occupancy Status During Abatement	100 000 000					Street	Λ al al a						_		
		000				2333									
Facility Closed/Vacated During E Abatement Performed Outside of	ntire Period of	Abaten	nent		-										-
Other - Describe: Outside of	the building	g	3					Zip Code							
Scope of Work (Check All That Apply)						Union	, NJ	07083							
	1000					-	,								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	processor	Renova						ull Containme		Negat	ive Pre	essur	re		
= 100 si di 2200 li		Demoli	uon					lini-Enclosure							
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Asbestos-Containing Material (ACI		ed Sole		Asbes	stos Conta	scription aining M		al (ACM)	Ar	nount				Е	
TO BE ABATED		intena todial 3			. thermal	systems	insu		(S	pecify		Re	æ	nca	Enclosure
In Facility (13)		(12)				ing, VAT		,	SF	or LF)		Remova	Repair	ncapsulate	dos
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Name of Registered Waste Hauler		I N	JDEP V	Vaste	Cubic \	Yards		Name of F	Register	red I a	ndfill				
			lauler ID		of Was			terresonaren		ou Ldi	MIIII				
Newark Carting		0.	4507		TBD			G.R.O.V	v.s						
City, State Randolph, NJ 07869					Dispos	al Date	2 10	City, State						Dillino.	
Completed by	Title					griature		1 any tow	.,		Date				
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Date of Notification (1) 04/06/2018				of Building Casino	Owner/	Operator	r (2)	TI-		VPR 1	-3-2	018		and f
Lanca Comment	e Notification			Address Vinfield	Avenue	9			ASU	LETOS			_ &	
× EPA × DEP × DOL	Initial Amended Amendment #			ate, Zip C y City, N)5		In constitution	THE RESIDENCE OF THE PERSONS ASSESSED.	Military (1), 190,000,000	emwarent artis	erie (desdyrante spe	OATHURSON T	pervisor to a
X DOH	Emergency (includir justification) Cancellation	ng	Name o	of Contact					Telep	hone Nu	mber			
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Name of Facility Where Abate House	ement is Taking Place	(3)					Туре	of Facility (4	.)					
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Name of Monitoring Firm Hire	d by Building Owner (8)	ASC	M No.				ement Cont ement, Inc)				
Street Address							Addres	s ren Aven	ue		7			
City, State, Zip Code							tate, Zip	Code J 07512						
Project Manager for Monitorin	g Firm		Telepho	ne No.		Teleph	one No 345-86		100	icense N	lo.			
Start Date (10) 04/19/2018	Schedu 04/20		mpletion	Date (11)		Name	of OSH	A Monitor ment, Inc		1011				
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D&S Abatement, Inc.	uler	ŀ	NJDEP W Hauler ID 1 0996		of Was		10	Name of Re Fairless I						
City, State Totowa, NJ					Disposa TBD	al Date		City, State Morisville	, PA					
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Project Manager for Mon	itoring Firm			Telepho	no No		100000		IJ 07512						
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City, State Totowa, NJ						Dispos TBD	al Date	1	City, State Morisvill						
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Street Address						Street 11 R		ess ngren Ave	nue					
City, State, Zip Code						City, S	State,	Zip Code NJ 07512						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph 973-	none i	No.		Licens 0131				
Start Date (10) 04/17/2018	Schedu 04/18/	led Co	mpletion	Date (11)	Name	of OS	SHA Monitor tement, Ir		0101	•	- 177		
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ame of Registered Waste Hauler		N	JDEP W	/aste	Cubic	/ards		Name of I	2paists-	od s= -	1611			
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DOH justification Cancellation			Amry	Bock	BULLEIGH			releprione	Number			
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City (5) Morris Plains						Squ N/A	uare Feet	# of Floors N/A	1/3	Bldg.	Age	
County (6) Morris				Code (7) USE ONLY)			rent Use (Pric	or if being dem	olished)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.			patement Con atement, Inc					
Street Address						t Addr	ress ngren Aven	ue				
City, State, Zip Code							Zip Code NJ 07512	mbs-4-2	-			
Project Manager for Monitoring Firm			Telepho	ne No.	Telep	hone		Licens 0131				
Start Date (10) 04/16/2018	Schedul 04/17/2			Date (11)			SHA Monitor atement, Inc).				
Cocupancy Status During Abatement (Che Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: Occupied	Period of	Abater	ment 's		Stree 11 F	t Addr Roser State,						
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lame of Registered Waste Hauler &S Abatement, Inc.		H	JUDEP W lauler ID 0996	No.	Cubic Yards of Waste TBD		Name of R Fairless	egistered Land Landfill	Hill			
ity, State otowa, NJ					Disposal Date	in	City, State Morisville	e, PA				
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Date of Notification (1)		1	Vame (of Building Owne	er/Operato	or (2)		11111	APR	13	2018	\mathbb{H}
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DOH Emergency justification)	N	lame o	of Contact				Telephone	e Numbe	r		
DCA Cancellatio	n ————		Karl									
Name of Facility Where Abatement is Takin	ng Place (3	3)	FAC	ILITY INFORMA	TION	Tyr	e of Facility (4	1)				
Karl Berkuta Private Home						,,,	School (K-12					
Street Address						X	Subchapter Other (i.e. pretc.)	(Other than	K-12) nercial b	uilding	ıs, hon	nes,
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Pennington NJ 08534 County (6)		1.5		0.1			00+	2		35+		
Mercer Name of Monitoring Firm Hired by Building	Oumos (9)	(S	STATE	Code (7) USE ONLY)		Ho	rent Use (Prio OUSE		nolished)	2		
N/A	Owner (8)		ASCI	VI No.	_		oatement Cont	ractor (9)				
Street Address					Street							
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City, State, Zip Code				s.			Zip Code rlin NJ 080	91			8186-W	
Project Manager for Monitoring Firm				ne No.	Teleph 856-		No. -9800	Licen 0072	se No.			
Start Date (10) 4/23/18	Schedule 4/27/18	3	letion I	Date (11)	Name Sam		SHA Monitor					
Occupancy Status During Abatement (Chec					Street	Addre	ess	2000				
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of A nal Facility	batemer Hours	nt		City, S	tate, i	Zip Code			2 - 21	2010	
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Exterior Siding			Х	Exte	erior Sid	ling		1800 SF	x			
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Name of Registered Waste Hauler Horizon Disposal Ser	•	E18 (1231) (125)	EP Waler ID I	50.5	Yards aste		Name of Re	egistered Lan	dfill			
City, State		104	10		sal Date		City, State					
Trenton NJ				4/27				e PA 1906	57		74	
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Date of Notification (1)			(,						IK L			
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	mended mendment	#		City	, State, Zip	Code				Litt	NSIN	G
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	ancellation			Diar	ia Yousse	f			L			
					ACILITY I		TION		7	3	<i>a</i>	_
Name of Facility Where Abaten	nent is Taki	ng Plac	e (3)					Type of Facility	(4)			
Private house								School (K-				
Street Address								Subchapter	8 (Other than k	(-12)		
								Other (i.e., homes, etc	private and con	nmercial b	uildin	gs,
City (5)								Square Feet	# of Floors		N. I	
Orange, NJ 07050								oquare reet	# OF FIOORS	1	Bldg. A	\ge
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Essex							_ 5.11/	Ourient Ose (F	nor it being der	nolisnea)		
Name of Monitoring Firm Hired	by Building	Owner	(8)	ASCN	A No.	Name of	f Abateme	ent Contractor (9	0)			
						Gr Tech		on contractor (s	"			
Street Address						Street A						
						II ANNOUS CONSTRUCTOR	ley Rd#	202				
City, State, Zip Code						City. Sta	te, Zip Co	203 ode				
							NJ 0747					
Project Manager for Monitoring	Firm		Tel	ephone	No.	Telephor		0	License No			
						973-638						
Start Date (10)					ate (11)		OSHA M	onitor	01127			
		04		9/	18	Envirovi	cion Cor	nsultants,Inc				
Occupancy Status During Abate	ment (Chec	k only	one)			Street Ac		isuitants,inc				
Facility Closed/Vacated Durin	ng Entire Pe	eriod of	Abate	ment		20-21 W	agarası	Road, Bldg .#	250			
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TO BE ABATED IN Facility		1000000	intena todial		(i.e	., thermal s	systems in	sulation.	Amount (Specify	em	Repair	nca
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Name of Registered Waste Haule	er		NJD		Hauler ID No.	Cubic Yards	s of Westa	Name of Dazi-	torod I IFII			
r Tech LLC							U WASIE		tered Landfill			
City, State			_ 0	03378))	TBD Disposal [Data	T.R.R.F. Inc				
Jayne, NJ 07470								City, State				
Completed By (Print or Type)	Title					TBD		Tullytown, PA	1			
.Jevtic						Signa		1 .		Date		
B-41	Owr	ier					Mei	dic Wena	el (04/09/18		

Date of Notification (1)			of Building Owner/Op			MEG	E		V/ [E
4/10/18			R. TRIJ	ED1			1.23	Mr.		레
Agencies Notified Type Notification		Street A	Address		31 <u>23 838</u>		4		0.4.0	
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□ DCA □ Cancellation			R. TRIVES					este	٠	
Name of Facility Where Abatement is Taking Place	e (3)	FAC	ILITY INFORMAT		Type of Facility (4)				
MR. TRIVED?	C (2)		() () () () () () () () () ()		☐ School (K-12	!)			9	
Street Address					Subchapter 8	(Other than K-12) ivate & commercial by	iildina	s hon	nes etc	:)
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City (5)					Square Feet	# of Floors	BI	dg. Ag	18	
PASSAIC		County	Code (7)			if being demolished)		' /	-	\dashv
County (6) PASSAIC			E USE ONLY)		TZE	SIDENCE				
Name of Monitoring Firm Hired by Building Own	er (8)	ASC	CM No.	Name of	Abatement Contra	actor (9)				
				Best	Removal	Inc.				
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City, State, Zip Code					ensack,	N.I 07601				
Project Manager for Monitoring Firm		Teleph	one No.	Telephor		License No.				
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	cheduled Co			Department of						
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Other - Describe: 3:00 AH 40	5:00	3110		Sout	h <u>Hacken</u>	sack, NJ	076	06		_
Scope of Work (Check All That Apply)			34							
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		ovation olition			Full Containme Mini-Enclosure	nt with Negative Pres	sure			
2 2100 St Or 2200 II	d Dem	Ondon			Glovebag Proce		rocedi	ire		
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		cation mally		escription of	, f		_	Ту	ре	_
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TO BE ABATED In Facility	Custodi	al Staff?	(i.e. thermal sys	tems insula VAT, or	ition, surfacing,	(Specify SF or LF)	Remova	Repair	ıcaps	Enclosure
(13)	(1	(2)	other	miscellane	eous)		oval	air	Encapsulate	sure
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BASEMENT			VATA	MAS	TIC	480SF	×			
						64				
Name of Registered Waste Hauler		NJDEP		Yards	Name of	Registered Landfill				
Post Demoved Tree		Hauler I		34-	ec7 Mine	rva Enter	nri	900	. 1	.T.C
Best Removal Inc City, State			1 () 9 Dispo	osal Date	City, Stat				3	
Hackensack, NJ 07601				4/27/	Wayn		H 4	468	18	_
Completed by	Title		1	Signature V	Porono	Da	1	1,0	119	
J. Maiorano	Esti	mato	r l		0.000			, _	/10	
ASB-41 (R-06-08)				0 *	Do not use this for	rm for asbestos licens	ire exe	mpte	l activi	ties.



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☐ EPA ☐ Initial ☐ DEP ☐ Amended		0	City, Stat	e, Zip Code			had had a to	1-1-	0 6	U10	1
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DOH justification)	returning	1	Name of	Contact			Telephone Numb	er .	4 354	TROI	&
□ DCA □ Cancellation				S. KRIEG			Name and the second sec	(CERTIFICATION)	TEL THE PARTY	The residence	- THE OWNER OF
Name of Facility Where Abatement is Taking Pl	ace (3)		FACII	LITY INFORMAT	ION	Type of Facility (4	1)				
MS. KRIE		_	7.	11-e		. □ School (K-1:					
Street Address				0		Subchapter 8	3 (Other than K-12) rivate & commercial b	ouildin	es, ho	nes, et	c.)
		0.01(1) 10-2-0.00		·			# of Floors		ldg. A		\dashv
City (5)				•		Square Feet	# 01 Floois			JC	
6 + 10		T	County C	ode (7)			r if being demolished)			3	\neg
BERGEN				SE ONLY)			ESIDENCE				
Name of Monitoring Firm Hired by Building Ox	vner (8)		ASCM	1 No.	Name o	f Abatement Contr	actor (9)				
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Street Address					Street A		a .				
C: 0: 7: 0:1						South R1 ate, Zip Code	ver Stree	t_			-
City, State, Zip Code						Si Si	NJ 07601				
Project Manager for Monitoring Firm		1	Telephon	e No.	Telepho		License No				
					201-	329-7444	0038	88			
Start Date (10)	Scheduled				Name o	OSHA Monitor		TRACCO ET			
4/23/18		4/2	4/1	8		a Enviro	nmental				
Occupancy Status During Abatement (Check Or					Street A						
☐ Facility Closed/Vacated During Entire Per ☐ Abatement Performed Outside of Normal I	Facility Hou	irs /	M			Huyler S até, Zip Code	rreer			6415	
Other - Describe: 8: 32AH	0 5:	عود	1-3		Sout	h Hacken	sack, NJ	076	06		
Scope of Work (Check All That Apply)	223				1						
≥3 sf or ≥3 lf		enovati					ent with Negative Pres	sure			
☐ ≥160 sf or ≥260 lf		emolitie	on		~ □	Glovebag Proc	edure	S 8			
						Non-Exempted	(*) and Non-Friable	Proced		ement	\dashv
	4	Locatio				200				ре	
Location of Asbestos-Containing Material (ACM)	Use	d Solely	y by	Asbestos Con	escription taining Ma		Amount			н	
TO BE ABATED		intenan odial St	57:588-a	(i.e. thermal syst			(Specify SF or LF)	Remova	Re	Encapsulate	Enclosure
In Facility (13)		(12)		other	miscellane	eous)	or or Ery	oval	Repair	sula	osure
	Yes	No	N/A							ie.	
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Best Removal Inc City, State			1710)9	sal Date	/ Mine City, Stat	<u>rva Enter</u>	pri	ses	, 1	LLC
Total man see to the second of					1/24/	1.01		H_4	1,60	Q	
Hackensack, N.I 07601 Completed by	Title				Signature	/) wayii	Da		1 1	<u>л</u>	
J. Maiorano	Est	ima	tor		\ \	Paisner	ر کند	A	10	18	
			NHL		/)	1	6 1 1			ا معداد	tion
ASB-41 (R-06-08)					1 / . *	Do not use this for	rm for asbestos licens	ure exe	anpiec	activi	Itles.

Y	13K		N	OTIFIC	ATION	te of New OF ASBES 6 NIAC 8:	STOS AB	ATE 2:12	MENT		D-		P E	38.77	W	Prin	t Fo
	of Notification (1)					Building O						AF	R 1	3	201	8	1
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	cies Notified EPA	Initial				iterson A	venue				F	45142	HUER LIGER			OL 8	¢.
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×	DOL	Amendment Emergency			VValling Name of	gton, NJ	0/05/				Taler	ohone N	Jumber	_			
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	e of Facility Where a)						e of Facility (4	9. 2000						
10.2507020	t Address	0,00000 00.100							×	School (K-12 Subchapter 8	(Other						
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City (W059									are Feet	10.65,00000	Floors			g. Ag	je	
	llington				County C	'ode (7)				000 ent Use (Prio	2 r if being	n demo	lished)	50	т	17/7/27	
	ity (6) RGEN					ISE ONLY)		_		ent ose (Frio nool	in Deni	9 461110	oriou)				
	e of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.	100			atement Conf		9)					
N/A								11000000	800000000	ces Corpor	ation						
Stree	et Address						-		Addre 69th	ess Street							
City,	State, Zip Code			_			C	City, S	State,	Zip Code							
									A 150 M A 150	erg, NJ 070							
Proje	ect Manager for Mor	nitoring Firm			Telephor	ne No.	100		none 1	No. 1700	210	License 01074					
Start	Date (10)		Schedule	ed Com	pletion [Date (11)				SHA Monitor		0.07	-			-3 1112-2	
	il 10/2018		4/11/20			e-1000000 pp		Sam	e as	above							- 5_
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	Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr						City, S	State,	Zip Code							
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			Is	Locati	on						\ / J				bate	ment	
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Α	Asbestos-Containing TO BE AB		Ma	intena	nce/		os Contair thermal sy				(S	nount pecify		Re	R	Encapsulate	Enc
	In Fac	ility	Cus	todial S (12)	stan?		surfacin other mis				SF	or LF)		Remova	Repair	nsde	Enclosure
	(10)		Yes	No	N/A		00.101.1110			,			1	2	-	ate	re
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Tri-S	State Transfer A	Asso			lauler ID 9551	NO.	of Waste	2		Minerva	a Ente	rprise	s Inc				
City,	State			- '			Disposal	I Date	е	City, State		20000					
	nx, NY						TBD		_/	Wayne	sburg,	ОН	Deta				
	pleted by a Betances		Title	e Ma	nager		Sig	natur	e D	Vinax	9		Date 04/6	3/20	018		

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Date of Notification (1)		NOTIF (F	ursuant	OF ASB to NJAC	8:60 an	d 12:12	9)	Г		APR	1	3 2	2018	20 mm
4/9/18				rt Schroe		Орегасог	(2)						V* Normality	- Company
Agencies Notified Type Notification	1		Street A	Address					AS	Little	C EN	- 3 15. 451N	TRO G	1.8
EPA Initial Amended Amendment			City, St	ate, Zip Co K, NJ	ode			5 2	The conference was a response	egouine and	organity (Fig. Wash	HIP OF SECTION	TRUCK RUNCH	Port inspection
DOH Emergency justification Cancellatio)		Name o	of Contact t					Telephon	e Num	ber			
Name of Facility Where Abatement is Taking	na Place (3)	FAC	ILITY INF	ORMAT	ION	Type	e of Facility (4)					
		-,					П	School (K-1	1975					
Street Address							×	Subchapter	8 (Other than private & com			dings,	hom	es,
City (5) Clark							Squ	are Feet	# of Floor	s	E	Bldg. A	\ge	
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Name of Monitoring Firm Hired by Building	Owner (8)	ASC	M No.				atement Cor D PROFE	ntractor (9)	 S			20000110	
Street Address		12				Street 6 WH			DURT					
City, State, Zip Code City, State, Zip Code LAKEWOOD, NJ 08701														
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-6	one N	No.		nse No.				
Start Date (10) 4/12/18	Schedul 4/13/1		mpletion	Date (11)		Name	of OS	HA Monitor	SSIONALS					
Occupancy Status During Abatement (Che						Street			COIOIVALO		-			
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of an all Facility	Abater y Hour	nent			City, S	tate, 2	DOVE CO			200			
Scope of Work (Check All That Apply)						LAND	EVVC	OD, NJ 0	5701					_
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	× F	Renova Demoli	ation tion			×	Mi Gi	ni-Enclosure ovebag Proc	edure					
	Is	Locat	ion			<u>[^</u>	1 NO	on-Exempted	I (*) and Non-	Friable			e ement	
Location of		Norma ed Sole	ly			scription				-		Ту	ре	\vdash
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intena todial ((12)	nce/		thermal surfa	aining M systems cing, VA niscellan	insul T, or	ation,	Amount (Specify SF or LF		Removal	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A		tran	site pa	nel		16 SF	_			ite	Ф
			,		uail	one ha	ilei		10 5F	-	K			
Name of Registered Waste Hauler		IN	JDEP W	/aste	Cubic	Yards		Name of I	Registered La	ndfill				
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City, State NEWARK, NJ					Dispos 4/13/	al Date 18		City, State	EHEM PA		122			
Completed by JOSEPH PERLSTEIN	Title OWN	IER			S	ignature	Ŋ.	1		Date				

NOTIFICATION OF ASBESTOS ABATEMENT MO#24776114714 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 04 10 / Pete Morison Agencies Notified Type Notification Street Address ☐ EPA 2018 X Initial **⋈** DOLWD Amended City, State, Zip Code X DHSS Amendment # □ DCA ☐ Emergency (including New Providence, NJ 07974 (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation Pete Morison **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house School (K-12) Street Address Subchapter 8 (Other than K-1 2) Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age New Providence, NJ 07974 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 04 / 20 / 18 04 / 21 / 18 Envirovision Consultants, Inc. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/ Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 If ≥ 160 sf or >260 If Renovation Mini-Enclosure Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Location of Normally Description of Asbestos-Containing Material (ACM) Used Solely by Repair Asbestos Containing Material (ACM) Remova Encapsulate Amount TO BE ABATED Maintenance/ (i.e., thermal systems insulation, (Specify IN Facility Custodial Staff? surfacing, VAT, or SIF or LF) (13)(12)other miscellaneous) Yes No N/A Basement-boiler room П X Pipe insulation 24 LF X Garage П X Pipe insulation X 60 LF П П П Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date N.Jevtic Owner 04/10/18 ASB-41

State of New Jersey

Date of Notification (1)			Name	e of Buildin	g Owner/Operator (2) - 1721	(2) 1 - 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-			-	-
04//	18		Bil	l Waldy	g owner/operator ("心道	0 4 1	33	9	4/5	-
Agencies Notified Type Notific ☐ EPA ☐ Initial	ation		Stree	t Address			ACTO I I TOTAL	10			
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DCA Emerger		ıg		yville, NJ		- i	1.7	V			
(NJAC 5:23-8) justificat				of Contact Waldy	T.		Telephone Num	ber		Ē	
			FA	CILITY IN	FORMATION					_	_
Name of Facility Where Abatement is	Taking Plac	e (3)				Type of Facility	(4)				
Residence					2	School (K-1)					
Street Address						☐ Subchapter	8 (Other than K-12 private and comme	2) rcial bu	ilding	s,	
City (5)					Y			151			
Bayville						Square Feet	# of Floors		lg. A	ge	
County (6)						1100 sf	1		35		
			Cour	nty Code (7	()(STATE USE ONLY)	Current Use (Pr	rior if being demoli	shed)			
Ocean						Residence					
Name of Monitoring Firm Hired by Buil	ding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9))				
N/A					Guardian Cor	ntracting, Inc.					
Street Address					Street Address						
					1889 Route 9	. Unit 61					
City, State, Zip Code					City, State, Zip Co	· Control of the cont					
					Toms River, I		755				
Project Manager for Monitoring Firm		Tol	ephone	No		vew Jersey uc					
l separation and the separation		168	spriorie	INO.	Telephone No.		License No.				
Start Date (10)	S-b1-1-1	<u></u>			732-349-9932		00624				
	Scheduled (etion Da 3 /	회사기에게 전혀 가는 것이 없다.	Name of OSHA M						
			<u> </u>	10	E.M.S.L. Anal	ytical					
Occupancy Status During Abatement (Street Address				7.A		
☐ Facility Closed/Vacated During Enti	re Period of	Abate	ment		1056 Stelton						
Abatement Performed Outside of N Time of Abatement:AM	ormal Facili	ty Hou	rs - Des	cribe	City, State, Zip Co	de					
		PIVI		AIVI	Piscataway, N	lew Jersey 08	854				
Scope of Work (Check all that apply)					□ Full Cont	ainment with Ne	nativa Programs				
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		enovat emoliti			☐ Mini-Encl ☐ Glovebag	osure Procedure	on-Friable Procedu	23			
	1 1	Loca	tion		≥ INOII-EXE	ripted () and No	III-FIIADIE PIOCEGU	-			
Location of		Norma	illy		Description of			Aba	teme	ent 1	/pe
Asbestos-Containing Material (ACM		ed Sol		Asbes	stos Containing Mat	erial (ACM)	Amount	Re	Repair	En	ᄪ
TO BE ABATED	100000000000000000000000000000000000000	aintena	ince/ Staff?		, thermal systems in	nsulation,	(Specify	Remova	pair	cap	Enclosure
IN Facility (13)	June	(12)			surfacing, VAT, other miscellaned		SF or LF)	/al		Encapsulate	ure
(1.5)	Yes	No	N/A		otter miscellanet	ous)				ate	
exterior		\boxtimes		asbesto	s siding		1100 sf				
interior		\boxtimes		asbesto	s floor tile		700 sf				
Name of Registered Waste Hauler		1	JDEP V	Vaste	Cubic Yards of	Name of Regis	stered Landfill			77.70	
Guardian Contracting, Inc.		F	lauler IE 20223	CONTROL CONTROL	Waste 3	T.R.R.F.					
City, State					Disposal Date	City, State					
Toms River, New Jersey					04/23/18	Tullytown,	Pennsylvania				
Completed By (Print or Type)	Title				Signature	1	// Ins	ite	- 1		
Nicholas Fernicola	Project	Man	ager		1	'\	V	ite	10/	K	
ASB-41			-			1-12		- 1	1-1	10	

hock

Date of Notification (1 04/02/2018	Name of Building Owner/Operator (2) North Arlington Board of Education Check No. 1065														
Agencies Notified	Type Notification				Address idge Roa	d									
☐ EPA ☑ DEP ☑ DOL	☐ Initial ☑ Amendment # Emergency (i				ate, Zip Co Arlington,		ersey 07031	· · · · · · · · · · · · · · · · · · ·	AP	K L	2 2	018	A STATE OF THE STA		
☑ DOH ☐ DCA	justification) □ Cancellation		Ì	Name of Tony A	of Contact Alho			Telephone Number 201-991-6800							
				FAC	ILITY INF	ORMAT	ION								
Name of Facility Whe George Washington	re Abatement is Takin n Elementary School		Type of Facility (4) School (K-12)												
Street Address 175 Albert Street						s, hom	homes, etc.)								
City (5) North Arlington, Ne	w Jersey 07031				iii		Square Feet 10,000		# of Floors 2	Bldg. Age 50+					
County (6) Bergen			Code (7) USE ONLY	,	Current Use		demolished) tional Facility								
Name of Monitoring F T & M Associates	irm Hired by Building	Owner (8)		ASC	M No.		Name of Aba Lilich Corpo	tement Contra ration	actor (9)						
Street Address 40 Monmouth Park	Highway, Suite 2						Street Addres 606 McBrid	200	***************************************						
City, State, Zip Code West Long Branch,	New Jersey 07764				City, State, Z Woodland F	ip Code Park, New Je	ersey			- 24					
Project Manager for M Kevin Burns		Telepho 732-67	one No 76-4000		Telephone N 973-225-84	Telephone No. License No. 973-225-8400 01104									
Start Date (10) 04/10/2018		Schedule 04/11/20		mpletion	Date (11)		Name of OSHA Monitor Iris Environmental Laboratories, LLC								
Occupancy Status Du	ring Abatement (Chec	ie)				Street Addres									
□ Facility Closed/Vacated During Entire Period of Abatement □ Abatement Performed Outside of Normal Facility Hours □ Other – Describe:							2333 Route 22 West City, State, Zip Code Union, NJ 07083								
Scope of Work (Check	(All That Apply)						0, 1.0.0								
 ≥3 sf or ≥3 if □≥160 sf or ≥260 if 	VAII Пасарріу)		lenova Jemolit				☐ Mir	ni-Enclosure ove Bag Proce	with Negative Preduce / Limited Cor	ntainm		Tent			
		Is	Locat	ion				, ,,,	Amount	Abatement					
Asbestos-Containi TO BE A	tion of ing Material (ACM) ABATED acility 3)	Use Mai	Norma d Sole intena	lly ely by ince/ Staff?		estos Co e. therm sur	Description of Intaining Material systems insufacing, VAT, or r miscellaneous	lation,	(Specify SF of LF)	Remova	Typ Repair	Encapsulate	Enclosure		
		Yes	No	N/A						-		ite	е		
Basement Hallway				Х	Pipe/Pi	pe Fitti	ing Insulaior	ì	35 LF	Х					
					(Wrap	& Cut -	Criticals)								
Name of Registered V	10.2	NJDEP V Hauler ID 18724		Cubic of Wa	Yards ste	Name of Re	egistered Landfill								
City, State Woodland Park, Ne	w Jersey						sal Date	City, State Morrisville,							
Completed by Adriana Olejarova		Title Pre	sider	nt		\$	ignature	(Date 04	02/20)18				
ASB-41 (R-06-08)							* Do not use t	his form for a	sbestos licensure	exemp	ted a	ctivit	ies.		

PATT

A CM.	JR 20			(Pursua	int to NJA	C 8:60	and 12:120)		Chec	0 4	5	42	energy.	77.70			
Date of Notification (1)	Name	of Building		The state of the s														
Agencies Notified Type No	tification			Street	Address		ADD 10 3000											
□ EPA SK Init	ial)	AF	H	3	2018					
D DEP G Am	ended	n		City, S	tate, Zip C	~		1				_						
□ Em	endment : ergency (i	including		W	000	15	DGE	- - , ,	NA	07075								
	ification)			Name	of Contact	LADI	1-1	/		Tele	nhone Ni	nha-						
				FAC	CILITY IN	FORM				_								
Name of Facility Where Abatement is	Taking P	lace (3)				- 01111	2110:1	Туре	of Facility (4)								
Street Address	1X								School (K-1	2)	*							
	Ľ								Subchapter Other (i.e. p	8 (Other t	han K-12) commercia	l build	ings, h	omes,	etc.)			
City (5) WOOD RIE	ika	_						Squar	re Feet		Floors	Т	Bldg.					
County (6)	10C			Country	Code (7)			19	00	2	2_		8	ZY	RS			
BERGEN					USE ONLY	n		Curre	nt Use (Prior	if being	demolishe	d)		/				
Name of Monitoring Firm Hired by Br	illing Ov	wner (8)		ASC	M No.		Name	of Ahat	ement Contr	EYVC	E							
Court 4.3.1									moval I									
Street Address							Street A			IIIC								
City, State, Zip Code	+						450	0 Soi	uth Rive	Stree	t							
					ate, Zip Code kensack, NJ 07601													
Project Manager for Monitoring Firm	Telepho	ne No.		Telepho	none No. License No.													
Start Date (10)_	-	01.11						201-329-7444 00388										
4-19-18	pletion D	ate (11)		1		A Monitor												
Occupancy Status During Abatement (neck On	ly One)		-0	10		Street A	ddress	Environ	mental								
Facility Closed/Vacated During E Abatement Performed Outside of	ntire Peri	od of Abat	emen	t			110000000000000000000000000000000000000		yler Stre	et								
Abatement Performed Outside of Other - Describe: ORM	Normal F	acility Hou	ITS				City, Sta	ate, Zip	Code						-			
Scope of Work (Check All That Apply)	-						50	utn F	Hackensa	ick, N.	07606)						
≥3 sf or >3 If		B√ R	enova	ition			_	02020						-0-0-364				
☐ ≥160 sf or ≥260 lf			emoli	tion				- Min	Containment i-Enclosure		gative Pres	sure						
							ř	< Glov	vebag Proced -Exempted (lure *) and No	m Erichte	n						
		Is	Locat	tion					Zxempted () and No	ni-riiable	Тосео		ment				
Location of Asbestos-Containing Material (AC			ormal I Sole			Γ	Description o	of						Туре				
TO BE ABATED	M 1)	Mai	intena		(i.e. the	stos Con	ntaining Mat stems insula	terial (A	ACM)	Amo				щ				
In Facility (13)		Cusic	(12)				VAT, or		indonig,	(Spe SF or		Remova	Repair	ncap	Enclosure			
		Yes	No	N/A		oule	miscellane	ous)				oval	air	Encapsulate	Sure			
BASEMENT				X		~ .		-		— .	ر							
THE MILLION	-	-		+	7461	CYMA	1 INS	ULA	1000	14	SLF	X						
		-		-														
		-		-														
Name of Registered Waste Hauler			l N	JDEP Wa	octo	101	V. I											
Best Removal Inc			100000	lauler ID		of Wa	Yards este		Name of Re	gistered [andfill							
City, State				1710)9	1	4 40		Mi	nverva	Enter	orise	s, L	LC	.			
Hackensack, NJ 07601							sal Date	D	City, State									
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Date of Notification (1) 4-6-2018	Name of Building Owner/Operator (2) Elmer Evans																
Agencies Notified		Address				113		8 PM (-	2018		boll					
EPA DEP DOL DOH DCA	X Initial Amended Amendment X Emergency justification) Cancellation	(including		City, St Jerse	ate, Zip C y City, N of Contact	NJ 0730	05			L	APH				. * **		
Name of English When					ILITY INF	ORMAT	ION		pe of Facility								
Name of Facility Where A Residential	Abatement is Takin				×												
Street Address		School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,															
City (5) Jersey City, NJ 073				u u				# of Floors Bldg.			Age						
County (6) Hudson		Code (7) USE ONLY				rrent Use (Pr	2 ior if be	ing demolis	- 1	75+							
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC		/	Name	of A	batement Co	ntractor	/0)						
		3 50							invironmen			LC					
Street Address							1 0000	et Address Virginia Avenue									
City, State, Zip Code					State, Zip Code ey City, NJ 07304												
Project Manager for Mon	Telepho	ne No.		Telepi	none	No.		License N	No.								
Start Date (10)	npletion	Date (11)		NA GVITTI VOCAL		-8855 SHA Monitor		01174									
4-7-2018	Viii.	- X 1 X		Sam	e as	above											
Cocupancy Status During Facility Closed/Vaca Abatement Performe Other – Describe:	ated During Entire F ed Outside of Norm	Period of Al	aten	nent s			Street City, S		Zip Code								
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Location of Used Sole Maintenan Custodial S (12)					Asbes (i.e.	tos Cont thermal surfac	scription aining M systems cing, VA niscellar	fater s insu T, or		mount specify or LF)	Removal	Repair	e Encapsulate	Enclosure			
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City, State	bervices			034889		3		G.R.O.W.S North Landfill									
Jersey City, NJ						Dispos 4-7-20	al Date 018		City, State Morrisv		. PA						
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Date of Notification (1)	Name of Building Owner/Operator (2) Rory Rickwood							1 0	2016	2							
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Agencies Notified	Type Notification			Street A	ddress				i								
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Name of Facility Where	JRIVIATI	ON	Type	of Facility	(4)												
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City (5)									etc.) re Feet	# 01	Floors	TE	lldg. A	ae	_		
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Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	A No.		Name		tement Cor	ntractor	(9)				-		
Bio Terra Solutions	73 377								ntracting		1						
Street Address					_			Addres	_	M. S. Dayler							
1130 West Chestni	ut Street						1360	Clifte	on Avenu	ue Uni	t 365						
City, State, Zip Code							City, S	tate, Zi	ip Code				7/20		-		
Union, NJ 07083			Clifto	on, No	07012												
Project Manager for Mon		Telepho	ne No.			none No			License N	No.							
Rick Eustaquio		97349	43762		9734	34509500 01036											
Start Date (10)	pletion	Date (11)		Name	of OSF	A Monitor											
4/17/2018				Incin	nia Co	ntracting	, Inc										
Occupancy Status During			Street	Addres	SS												
Facility Closed/Vaca	ated During Entire	Period of A	batem	nent 1360 Clifton Avenue Unit 365													
Abatement Perform	ed Outside of Norr	nal Facility	Hours	i		İ	City, S	State, Zip Code									
Other – Describe: _					Clifton, NJ 07012												
Scope of Work (Check A	ll That Apply)								West Area or								
23 sf or ≥3 lf			enova						l Containm	ent with	Negative I	Pressu	re				
≥160 sf or ≥260 lf		De	emolit	ion			×	IVIII	ni-Enclosure								
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Location	of	N	ormal	ly		Des	cription	of					Туре				
Asbestos-Containing	Material (ACM)	A CO. (275.0)	Sole Stenar			tos Conta	aining N	1aterial		Α	mount			Ш	_		
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Name of Registered Was	JDEP W	aste	Cubic `	Yards		Name of	Registe	red Landfil	1								
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Atlantic Carting			N	J641/J	A464	30 YF	0.0000000			Central Sanitary Landfill							
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