AMAC

PAGE 02/03

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Date of Photograph (5)	<u> </u>	(Personni M	NJAC 6255 EN		IXIT D			1	77
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roject Manager for Monitoring Firm		Telephorn No.	Afid	land Park N	. 07452			Change, etc.	-
tert Date (10)			Files	282-5841	Licente	es No.			
4/18/18	Constituted Cor	The Committee (1-	() Nating	Of CERTA SAFE	0016	35		4	
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ID BE ASATED In Facility	Maint School	nd f Paggand	Description of the Curtainten Alex			L	Typ	ba market	
(13)	Custode to		BERTSONE MAN	the delicity,	Alletonia (Siparate SF or UF)	12	_	5	802
	Yes No	REIA	AND PRINCIPAL STATE	MATES.	at or CF)	Матриа	Repair		Busingury
SEMBLY (REC AREA)	111		·			1	7	Brouppeulgha	8
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

				N OF ASE t to NJAC				T			C		9	117		
Date of Notification (1) 04/19/2018 Check #3165	2 M3 12-			of Building Norris	Owner/	Operator	r (2)	The same and	M	-	<u> </u>		4	-20%	-	
Agencies Notified Type Notification	on		Street A	Address				11	4 1 1		APF	1 2	4 2	018	- 11	السا
EPA Initial DEP Amended			City St	ate, Zip C	ada										المير	
DOL Amendme	ent #			ate, Zip C na, NJ 0				Į.		A.C.		- 1 - 1			. A	
DOH justification		7		of Contact					T	Telep	hone	Num	ber	1 4 to 1		
DCA Cancellati	ion		Kristi	100010000000000000000000000000000000000	00111											
Name of Facility Where Abatement is Tal Mrs. Kristi Norris Residence	king Place ((3)	FAC	ILITY INF	ORMAI	ION	Тур	e of Facility	87 - 30 C-84 - 10							
Street Address							H	School (K- Subchapte		Other	than	K-12)	e e			
							×	Other (i.e. etc.)	privat	te & c	omm	nercia	l buil	dings,	hom	es,
City (5) Verona							Squ 2,0	are Feet	2	# of F	loors			Bldg. A	ige	
County (6) ESSEX				Code (7) USE ONLY)		Cur	rent Use (Pr sidence	ior if I	being	dem	olishe	ed)			
Name of Monitoring Firm Hired by Buildin N/A	g Owner (8)	ASC	И No.				ces Corpo)					
Street Address						Street	Addr	ess								
City, State, Zip Code								Street								
						100000000000000000000000000000000000000		Zip Code erg, NJ 07	093							
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 201-				155	icens		•			
Start Date (10) 04/21/2018	Schedu 04/24/		npletion	Date (11)		1/12		SHA Monitor								
Occupancy Status During Abatement (Ch	- XSPON-TANARING					Street		above		-1						
Facility Closed/Vacated During Entir Abatement Performed Outside of No Other – Describe: Starting 11 AM	e Period of	Abaten	nent S					Zip Code								
Scope of Work (Check All That Apply)					_											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	M G	ull Containm lini-Enclosur lovebag Pro on-Exempte	e cedui	re					е	
		s Locati												Abate		
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Ashes	De	scription	of Natori	al (ACM)		Amo	ount.	ł		1 9	pe	
TO BE ABATED In Facility (13)		aintenar stodial S (12)		(i.e.	thermal surfa	I systems cing, VA niscellan	s insu T, or	lation,		(Spe SF or	cify		Removal	Repair	Encapsulate	Enclosure
_	Yes	No	N/A				100000								te	
Basement			Х		Duct	Insula	tion			20 :	SF		х			
												-				
												+				
Name of Registered Waste Hauler		0.000	JDEP W		300 G (- G	Yards		Name of	Regis	stered	d Lan	dfill				
Freehold Carting			auler ID 5939	INO.	of Wa	ste		Cumbe	rland	d La	ndfil					
City, State Freehold, NJ					Dispos	sal Date		City, Stat		PA						
Completed by Gina Betances	Title Offic	e Mar	nager		S	Signature	E	Qual	7_			Date 04/		2018		



State of New Jersey

	NOTIFICA	ATION C	F ASBESTOS ABAT	EMENT	Total Comments	The state of the s	Water and		Party Server
Date of Notification (1)			C 8:60-7 and 12		In E				3 7.
4/20/18	Name of	Bulldii	og Owner/Operato	or (2)		- V	· 100 = 415.		7
Agencies Notified Type Notific	/(OW	unger					18	The state of the s
[Impa		ddress	J		THE IN AF	PR- 2-4	2010	3	114
[]EPA [X]Initial Notific				, de la companya de					imen
(lpm	City, Sta				A College				
[X]DOL []Amended	eation Mon-	tCia	ic, NJ,	07042	Production of the con-			11.0	t.
[X]DOH	Name of C	Contact	1171001					٠	
[]DCA []EMERGENO	The state of the s	-1		retep	hone Number				970
[]Cancella	ition 7000	Y							
Name of Books	F	ACILITY	INFORMATION			-			
Name of Facility Where Abatement	is Taking Place	(3)		Type of Fac	cility (4)				
· Toold linger					ol (K-12)				
Street Address				[]Subch	apter 8 (Ot	her tha	n K-:	L2)	
	·			[x]Other	(i.e., pri buildings,	vate &	comme	er-	
City (5)				Square Feet					
	County (6)	Co	unty Code (7)	oquale 1666	1" OT EI	oors E	Bldg.	Age	3
Montclair	ESPEX	(S	TATE USE ONLY)	Current Use	(Prior if)	peing de	amoli	cho	41
				Resider	ice	Journey Co.	2MOL 1	.SIIE	۱,
Name of Monitoring Firm hired by 1 Owner (8)	Building ASCM No	•	Name of Abatem	ment Contract	tor (9)				
N/A Street Address	67		AZTECH M	ANAGEMEN	T, Inc.				
Screet Address			Street Address						
O. L.	ŭ.		86 Chris	topher S	ቲ.				
City, State, Zip Code			City, State, Z	ip Code					
			Montclai:	r, NJ 07	042				
Project Manager for Momitoring Fir	m Telephone Num	ber	Telephone Numb	er		License	Num	her	
V .	N/A		(973) 744-	-8800		0037			
Scheduled Start Date (10) Sched	. Completion Date	(11)	Name of OSHA Mo	onitor			000000	_	
5-3-18 5	- 5- 18	3	N/A						
Occupancy Status During Abatement	(Check only one)	r	Street Address						
In Facility Closed/Vacated Dur	ing Entire Period	ı j	Street Address	57)					
of Abatement []Abatement Performer Outside	of Normal Facili		2						
Hours - Describe: Affhours	Descript»	Ly	City, State, Zi	ip Code					The state of the s
[]other - Describe: Other Occ									
Scope of Work (Check all that apply	()		78. 5						
[X1≥3 sf or ¿° lf	[X Renovatio	n	[]Full C	ontainment w	ith Negative	e Press	ure		
()≥160 sf or >260 lf	[]Demolitio	n	[\sqrt{i} Gloveba	ag Procedure					
	Is		[]Non-Fri	iable Proced	ure	157	l.		
Location of	Location Normally		Description	oż		Aba	temer	E	Ype E
Asbestos-Containing Material (ACM)	Used Solely		Asbestor-Conta		Amount	RE	R	N	N
TO BE ABATED	By Main-	(Material (AC i.e., thermal s		(Specify SF or	M	E P A	A P	CTC
In Facility	tenance/ Custodial	ins	ulation, surfact	ing, VAT,	LF)	V	AI	S	S
(13)	Staff (12) Yes No N/A	01	r other miscella	eneous)		A. L	R	T	R
Rasement		nic	P MACh &	11000	SN/T	- 1/	+		E_
		h 11-	COCILICIA:	L. Cecuri	, DUCT	X	-	+	
		- 4	SINSLICITIO	NT.		-		+	
-							-		
Name of Registered Waste Hauler	NJDEP Waste	Cubi	c Yards	Jama of Bosi		54.2.2			
AZTECH MANAGEMENT, INC.	Haules ID No.	1	aste / /	Name of Regis	olered rendi		13	10	
	17040		1.0	MILLIA	i zinter	pnx	1:1	ال	
ity, State Montclair, NJ 07042				ity, State					00
1011 CC 1 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		15/	718/1	Dames	oura (Dhio	44	66	88
ompleted By (Print or Type) Title			Signature	/ /	11	Date			
	ident		1 2.01.	-6-1	/ .	si.	10/	10	
			1 647 60	11111 1/1	VIIAIA	1416	UII	0	

PAI				N OF ASI						G		N.7	Es.	
Date of Notification (1) 4/19/18				of Building		Operator	(2)		- Control of the Cont	100	•			
Agencies Notified Type Notificat	ion			Address /lonmou	th Stree	et				APR	2.4	2018		
DEP X Amender X DOL Amender	ent #			ate, Zip C Windsor		3520			File	h.;	5.70	**y	5	
□ Emerger □ justificati □ DCA □ Cancella		9	Name o	of Contact				78 (to) 4 .		lephone				
Caricella	ion			ILITY INF		1011		Kallessa	(6	09) 632	2-0006	X 5	19	
Name of Facility Where Abatement is Ta 1 Woodbridge Center	king Place	(3)	FAC	ILIIT INF	ORWAI	ION	-	f Facility	1.05					
Street Address 1 Woodbridge Center							Si x O	chool (K- ubchapter ther (i.e. p	8 (Oth	er than h & comme	K-12) ercial bu	ildings	s, hom	nes,
City (5) Woodbridge							Square	c.) Feet	#0	f Floors		Bldg.	Age	
County (6) Middlesex				Code (7) USE ONLY	n		Curren	t Use (Pri	or if be	ing demo	olished)			
Name of Monitoring Firm Hired by Buildi	ng Owner (8)	ASCI	M No.				ement Cor PROFE						
Street Address							Address	OVE C	DURT					1.8-21
City, State, Zip Code							tate, Zip	Code D, NJ 0	8701					
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	ione No.			License	e No.			
Start Date (10) 4/30/18	Schedu 7/27/1		mpletion	Date (11)				Monitor	SSIO	-1.5634			**********	
Occupancy Status During Abatement (CI	eck Only O	ne)					Address		.0010	14/120				
Facility Closed/Vacated During Enti Abatement Performed Outside of N	re Period of ormal Facilit	Abaten y Hours	ment s				HTE Do	OVE CO	DURT					
Other – Describe:								D, NJ 0	8701					
Scope of Work (Check All That Apply)	177					F	1						1770	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Mini-	Containme Enclosure ebag Proc Exempted	e edure				re	
	Is	Locat	ion			(Abat	emen	t
Location of Asbestos-Containing Material (ACM)		Normal ed Sole		A - I		scription					-	1	уре Т	T
TO BE ABATED In Facility (13)	Cus	todial (12)	Staff?	(i.e.		aining M systems sing, VAT niscelian	insulation	on,	(S	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A										Ф	
INTERIOR					Joint	compo	und	-	85	00LF	x			
												-	-	
											+			
Name of Registered Waste Hauler		0.00	JDEP W		Cubic \			Name of F	Registe	red Land	fill			
NEWARK CARTING			auler ID 4509	No.	of Was 40			IESI						
City, State NEWARK, NJ					Dispos 7/27/1	8		City, State BETHLE		PA				
Completed by JOSEPH PERLSTEIN	Title OWN	IER			S	gnature					Date			

State of New Jersey

CK 3952

State of NJ
Notification of Asbestos Abatement

B & G proj. #:	2018-92			(Pursua			7 and 12:120-7)	. 12 600	3, 25 -5	7 D	### PPP		
Data divide di	40				***RES	SUME		E Check	# 8952	100	2	11	_
Date of Notification		- 11			ner/Operator (2)							
10 4 / 2 0	1			gh of Mat	awan		de conserva de la con	APR	2 4 20	18	- Contract	111	
Agencies Notified EPA	Type Notifica	ition	Street Ad	dress					(4)		1		
□ DEP	Initial		_	road Stre	******			L		~~ /		-	
₩ DOL	X Amend	Iment		e, Zip Code wan, NJ 0			1	Parini		. Vilta			
⋉ DOH	_	11	Name of 0	Contact		MI 1983 A. F. MARINE	THE RESERVE THE PROPERTY OF THE PARTY OF THE	Telephor	ne Number				-
☐ DCA	☐ Cancel	lation	Louis	Ferrara							看		
				FA	CILITY INFORM	IATION	1		WS-HUS-SERVE				
Name of facility wh	ere abatement	is taking p	lace (3)					Type of Facility					
Matawan Boro	ough Hall An	nex							ol (K - 12)				
Street Address									apter 8 (0 (Private/Co			-12)	
201 Broad Str	eet								(Private/Ci /Homes, e		irciai		
									# of Floor	S		dg. A	ge
City (5)		Cor	inty (6)				inty Code (7)	50,000	2		90		
Matawan		Mo	onmout	า		(0.6	lie use only)	Current Use (P Borough Ha		g den	olish	9 a)	
Name of Monitoring		Bldg. Own	er (8)		ASCM No.	-	Name of Abatement Co		-	-	-		
T & M Associ	ates				145		B & G Restoration	n. Inc.					
Street Address						_	Street Address						
11 Tindall Ro							105 Ryerson Roa	ad					
City, State, Zip Code Middletown, I			-				City, State, Zip Code Lincoln Park, NJ	J 07035					
Project Manager for	Monitoring Firm	n	T	Phone Num	ber	-	Telephone Number		License	Numb	er		
Kevin Burns			-	732-671-6	400		(973)696-6869		00	378	0====1		
Scheduled Start Dat	e (10),	Sche	d. Comple	etion Date (1	11),	-	Name of OSHA Monitor		-				
04/23/2018	XXX	06/	22/2018	*	**		B & G Restoration Street Address	n, Inc.			_		
Occupancy Status D	uring Abateme	nt (Check	only one)				105 Ryerson Roa	ıd					
Facility closed. Abatement per Describe:	/vacated during rformed outside						City, State, Zip Code						
Other-Describ	e: occupied					=	Lincoln Park, NJ	07035			250		8 4 4 4 4
Scope of Work (che	ck all that appl	у)	-									6.5	
☐ Demolition	X	Renovation	on			X F	ull Containment w/negati	ive pressure [Gloveb	ag pr	ocedu	ıre	
> 3 sf or $> 3 $ If	X	≥160 sf or	≥260 If				lini-enclosure	, [Non-fri	able p	roce	dure	
Location of				y used solel	У					R	R	Е	Е
asbestos-cont material to be	aining	staff(12)	enance/c	ustodial			sbestos-containing	Amount (Specify S	For	e m	e p	n	n
abated in facili	ity (13)	Yes	No	N/A	material (ACM)		(Specify S LF)	r or	0 V	a	а	C L
					1					е	Ė	р.	1_
oiler room boile	The Real Property lies and the last of the			×	boiler jack			1,050 sf		X	뷔	부	片
oiler room boile				X			ng/fire bricks/packing er flue insulation	2 cy		X	屵	井	H
poiler room boile				X		-	below metal jacket	120 sf 70 sf		X	屵	井	H
oiler room boile				×	fibrous rop			10 lf		X	뉘	금	H
Registered Waste Ha	uler		EP Haule		Cubic Yards of V		Name of Registered La			<u>(1)</u>		Ц,	
B & G Restoration	on, Inc.		19563		45		Fairless Landfill						
City, State Lincoln Park, N.	J			Disposal I 04/23	Date /18-06/22/18	3	City, State Morrisville, PA					, v	
Completed by (Print of Gordana Luna	or Type)	Title Secreta	ry/Trea:	surer	Signature	(Gordana Luna		Date 04/20	/201	8		

Re: One page attachment to 14 day initial notification dated

04/04/2018 for asbestos removal at: Matawan Borough Hall Annex

201 Broad Street

Matawan, NJ 07747

*** RESUME ***



The following materials shall be abated:

Location of asbestos- containing material to be abated in facility	Is location normally used solely by maintenance / custodial staff	Description of ACM	Amount (LF or SF)	Remove	Repair
Boiler room throughout	NO	Pipe insulation and associated pipe fittings	210 lf	X	
boiler room boiler # 2	NO	Water tank insulation	10 sf	X	

State of NJ Notification of Asbestos Abatement (Pursuant to NIAC 8:60.7 and 13:130.7

B & G proj. #:	2018-92		(Pursuar		3:60-	7 and 12:120-7)	Chec	c#-8912 to 7	73 73	m-1 .	· ·
Date of Notification ((1)	111	Name of Buil	ding Own	er/Operator (2)	1		11) 5 6	is the	10	; i i i	
10 14 1/11 17			Borough			,						
Agencies Notified EPA	Type Notificat	tion S	Street Addres	SS				U U Al'	2 4 2018		1	1
DEP	☐ Initial		201 Broa	ad Stree	t							drawer.
₩ DOL	Amend		City, State, Z Matawa		747	aleen men	į.	AC. D	1	0.053		
X DOH			lame of Con	tact				Telepho	ne Number	71.		
☐ DCA	☐ Cancell	ation	Louis Fe	errara								
				FACI	LITY INFORM	IATIO	N					
Name of facility whe	ere abatement	is taking pl	ace (3)					Type of Facility				
Matawan Boro	ugh Hall An	nex							ol (K - 12) hapter 8 (Other	than	K-12)	
Street Address	723								(Private/Comn ./Homes, etc.	nercial		
201 Broad Stre	eet							Square Feet	# of Floors	E	Bldg. A	ge
City (5)		Cou	nty (6)			Coi	unty Code (7)	50,000	2	90		-
Matawan		Mo	nmouth			(Sta	ate use only)	Current Use (I	Prior if being de	molisi	ned)	
10000012 100000000	Firm Directly					<u> </u>		Borough Ha	all		4	
Name of Monitoring T & M Associa	2.	Blag. Own	er (8)		ASCM No.		Name of Abatement					
					145		B & G Restorat	tion, Inc.				25
Street Address 11 Tindall Ro	ad						Street Address 105 Ryerson F	Road				
City, State, Zip Code						_	City, State, Zip Code			-		
Middletown, N	NJ 07748						Lincoln Park,	NJ 07035				
Project Manager for I Kevin Burns	Monitoring Firn	п		one Numb 2-671-64			Telephone Number (973)696-686	9	License Nur 00378			
Scheduled Start Date	e (10)	Sched	d. Completio	n Date (11	1)	-	Name of OSHA Mon			30000	- 22	
04/18/2018			18/2018	•			B & G Restora	tion, Inc.				2 F
Occupancy Status Di	uring Abateme	nt (Check o	only one)				105 Ryerson R	load				
Facility closed/							City, State, Zip Code					
Abatement per Describe:		e oi normai	racility nour	5- 		_	Linaala Dada A	11.07005				
M Other-Describe						-	Lincoln Park, N	13 07035				24.4.
Scope of Work (che	ck all that appl	y) Renovation	on			X	Full Containment w/ne	gative pressure	☐ Glovebag (огосео	dure	
> 3 sf or $> 3 $ If	X	≥160 sf or	≥260 If				Mini-enclosure		☐ Non-friable	proc	edure	
Location of			n normally u		1			1	R	R	E	1_
asbestos-conta	aining	by mainted staff(12)	enance/cust	odial			asbestos-containing	Amount	e m	e p	n	E n
material to be abated in facili	ty (13)	Yes	No	N/A	material ((ACM)		(Specify LF)	0	a	a	C
		100	140						v e	<u>l'</u>	P	
boiler room boiler	-			×	boiler jack			1,050 sf		_		40
boiler room boiler				×			ing/fire bricks/packir		X		14	<u> </u>
boiler room boiler boiler room boile				X		-	iler flue insulation	120 sf	X	부	#	14
				X			l below metal jack		X	ዙ	#	부
boiler room boile Registered Waste Ha		IN ID	EP Hauler II	# C	fibrous ropubic Yards of		SKeting Name of Registered	10 lf				
B & G Restoration			19563		45			Resource & R	ecovery Ce	nter		
City, State Lincoln Park, N.	J			Disposal D 04/18/	ate /18-05/18/1	8	City, State Tullytown,					
Completed by (Print of Gordana Luna	or Type)	Title Secreta	ıry/Treasu		Signature		Gordana Luna		Date 04/17/20	18		



PAID

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

Date of Notification (1) 04/11/18				f Building s Guerre		Operator	(2)	TRI	angue de la com		0016	,		
Agencies Notified Type Notification			Street A	ddress					APR	2 4	2018	5	-	
EPA Initial Amended Amendment				ate, Zip Co					***************************************		7 3		r.	-
DOH justification) Cancellatior				f Contact s Guerre	ero				Teleph	none Ni	ımber	e tents		
Name of Facility Where Abatement is Takir	a Place (3	2)	FACI	LITY INFO	ORMAT	ON	T	-6 FIII- (4)	145			77.		
Andres Guerrero Residence	ig Place (3))					-	of Facility (4)						
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Start Date (10) 04/16/18	Schedule 4/21/18		npletion	Date (11)		Name N/A	of OSH	IA Monitor						
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Name of Registered Waste Hauler		-	JDEP W	1235-20	Cubic		Olcai	Name of Re			2000	L		
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NOTIFICATION OF ASBESTOS ABATEMENT MO#24776113577 Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 04 21 18 Marja Patel Agencies Notified Type Notification Street Address ☐ EPA X Initial **⊠** DOLWD ☐ Amended X DHSS City, State, Zip Code Amendment # ☐ DCA Ridgewood, NJ 07450 ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation Maria Patel **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 Ridgewood, NJ 07450 County (6) County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Bergen 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 05 / 01 / 18 Envirovision Consultants, Inc. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe 20-21 Wagaraw Road, Bldg .# 35E City, State, Zip Code Time of Abatement: ____AM-___PM/ 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 Removal Encapsulate Asbestos Containing Material (ACM) Enclosure Amount TO BE ABATED Maintenance/ (i.e., thermal systems insulation, Custodial Staff? (Specify IN Facility surfacing, VAT, or SIF or LF) (13)(12)other miscellaneous) Yes No N/A Basement X Pipe insulation 45 LF X 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 Tullytown, PA TBD Completed By (Print or Type) Title Signature Date N.Jevtic Tentic Wenad Owner 04/21/18 ASB-41 **MAY 11**

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT Check#3036 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 04 20 18 Arshala Eaton Agencies Notified Type Notification Street Address ☐ EPA ✓ Initial 2018 **⋈** DOLWD ☐ Amended orty, State, ZIP Code X DHSS Amendment # DCA East Orange, NJ 07017 ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact elephone Number .. Cancellation Diana Youssef **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.) Square Feet # of Floors Bldg. Age East Orange, NJ 07017 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 / 30 / 18 05 / 01 / 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/ 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 lf > 160 sf or >260 lf Renovation Mini-Enclosure Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Remova Repair Encapsulate Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A Basement \boxtimes Pipe insulation 70 LF 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

State of New Jersey

04/20/18

Owner

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

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Date of Notification (1) Agencies Notified / Type Notification	State of New Jersey NOTIFICATION OF ASBESTOS AB. (Pursuant to NJAC 8:60 and 12: Name of Building Owner/Operat Of Pursuant Street Address	ATEMENT :120) or (2) -Sul Inc.	APR 24 2018
DEPA DEP DOL DOL DOH DOA	City, State, Dip Code 13c(1/1) p Name of Contact Car PurSell	, I E	- LICENSING
Name of Facility Where Abatement is Taking Place (3)	FACILITY INFORMATION	Type of Facility (4)	55 6 261 2501
City (5)		School (K-12) Subchapter 8 (Other than	nmercial buildings, homes, etc.)
County (6) Can Clen	County Code (7) (STATE USE ONLI)	Current Use (Prior if being dem	
Name of Monitoring Firm Hired by Building Owner (8)	1 1000	of Abatement Contractor (9)	lolished)
Street Address	Street A	Joe Hartman	Denis Tieri / C
City, State, Zip Code	/2/2	2 Bielinas	Are I
Project Manager for Monitoring Firm	2/1:	ite, Zip Code	Esc)5
Start Date (10) Scheduled Con	(E.C.)	-346C916 Licen	se No.
Occupancy Status During Abatement (Check Only One)	5/18	OSHA Monitor	
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe:	Street Add City, State.		
Scope of Work (Check All That Apply)	Ony, State.	Zip Code	
☐ ≥3 sf or ≥3 lf ☐ Renovati Demolition	on	full Containment with Negative P Aini-Enclosure Flovebag Procedure	-
Lecation of Normally	n l	on-Exempted (*) and Non-Friabl	le Procedure Abatement
Asbestos-Containing Material (ACM) TO BE ABATED In Facility West Solely Maintenance Custodial Sta	by Description of Asbestos Containing Material	(ACM) Amount	Type
(13)	VAT, or other miscellaneous)	SF or LF)	Enclosure Encapsulate Repair
Out Side Yes No	N/A C		sure sulate
	Sidly	2005F	
Name of Registered Waste Hauler NJDE	P Waste Cubic Yards		
Hauler City, State 20%	r ID No. of Waste	Name of Registered Landfill	
Completed by Childs Mi	15:	City, State	
- Joseph T Hall. V. Riesiden		10 llytown P	1 1 1
ASB41 (R-06-08)			1/17/8
	= Do not use	this form for asbestos licensure e	ekempteg activities.

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Agencies Notified Type Notification EPA Initial Amended		City, Sie	4 E. 2			-	. 8	H	M		
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C CASCAGO			LITY INFORM	ATION			1010-0	14	O 4		-
Name of Facility Where Abelianian is Telling NOBPERE GAT CHEMICAL C	Place (3)				Type of Fa	OC-	12)				
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PATERSON					SO, 0	W	of Plants		do. A		
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Street Address				Birset 185	Address Vreetend	A8	¥1				
City, State, Zip Gode					ista, Zip Co and Park,						
Project Manager for Monitoring Plan		Telapho			202-5841	-	Ucesse No 00158	١.			
4/17/18		mpintion -G/LB	Date (11)		of OSHA No ge Enviro		ntal Services in				
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Name of Registered Waste Houser Newwisk Carting, Inc.		NJOSEP W Hauter IO		bio Yarda Mente	1		Registered Landilli		101	Ш	Н
City, Sieta		04508	'	_/		2000	Central Sanitary te gyl, PA 08072	Len	CERTIS .		-
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Date of Notification (1) 04/17/2018				of Building Levine	g Owner/	Operator	r (2)		APR	2 4	2018	}	U
Agencies Notified Type Notification			Street	Address					97/12/00/00/00/20	w West of the	50000000		
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DOH Emergency justification)	(includin	g		of Contact				1 +	-lanhana N	ımher	,		
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Name of Facility Where Abatement is Takir	g Place	(3)	FAC	ILITY INF	ORMAT	ION	Type of Facil	ity (4)					
House							School (
Street Address	J 100 - 100 - 100						Subchar	oter 8 (Ot	her than K-	12)	al al time an experience		
City (5)							etc.)		& commer				ies,
Old Tappan							Square Feet N/A	94 (5)	of Floors /A	100	Bldg N/A	Age	
County (6)		T	County	Code (7)			Current Use (Prior if b	eing demolis			_	
Bergen Name of Monitoring Firm Hired by Building	O (5			USE ONLY	n	_	House			-5.0.5000001			
N/A	Owner (8	5)	ASCI	M No.			of Abatement (Abatement,		or (9)				
Street Address							Address	1110.					
City, State, Zip Code							osengren A	venue					
only, otale, zip code							tate, Zip Code va, NJ 0751	2					
Project Manager for Monitoring Firm			Telepho	ne No.			one No.		License I	No.			
Start Data (40)						973-3	345-8685		01311				
Start Date (10) 05/01/2018	Schedu 05/02/		npletion	Date (11)			of OSHA Monit Abatement,	2000					
Occupancy Status During Abatement (Chec	k Only O	ne)					Address	IIIC.					
Facility Closed/Vacated During Entire F	Period of	Abaten	nent			11 R	osengren Av	enue/					
Abatement Performed Outside of Norm Other – Describe: Occupied	al Facilit	y Hours	5				tate, Zip Code va, NJ 0751	2					
Scope of Work (Check All That Apply)						10100	va, NJ 0751						
≥3 sf or ≥3 lf		Renova					Full Contain	ment wit	h Negative	Pressu	ire		
× ≥160 sf or ≥260 lf		Demolit	ion				Mini-Enclos Glovebag P	ure					
	T					X	Non-Exemp	ted (*) ar	nd Non-Frial	ole Pro			
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Asbestos-Containing Material (ACM) TO BE ABATED	Ma	ed Sole intena	nce/		tos Cont		aterial (ACM)	- 60	Amount			Е	
In Facility	Cus	todial S (12)	Staff?	(i.e.	surfac	cing, VAT			Specify F or LF)	Remova	Repair	ncap	enclo
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Name of Registered Waste Hauler		N	JDEP W	aste	Cubic `	Yards	Name o	of Registe	ered Landfill				Щ
D&S Abatement, Inc.			auler ID 0996	No.	of Was		Acceptance of the	ss Land					
City, State						al Date	City, St	ate					_
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Oliver Hegedis	Title Proje	ct Ma	nager		Si	gnature	11/		Da 04	ite 1/17/2	2018		

Print Form

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Date of Notification (1) 04/17/2018			Soul	Name	e of Building	g Owner/	Operato	or (2)			APR	2	4 6	2018	
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Name of Equility Mharman					CILITY INF	ORMAT	ION			-					
Name of Facility Where All House	patement is Tak	ing Place	€ (3)					Ту	pe of Facility	(4)					
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Essex				County (STATE	y Code (7) E USE ONLY	0	_	Cui	rrent Use (Pr	ior if being d	emolishe	d)			
Name of Monitoring Firm H N/A	lired by Building	Owner ((8)	ASC	CM No.		Name D&S	of A	batement Co atement, Ir	ntractor (9)					
Street Address							Street								
City, State, Zip Code							11 R	ose	ngren Ave	nue					
									Zip Code NJ 07512						
Project Manager for Monito	ring Firm			Teleph	one No.		Teleph 973-3	one	No.	74 3666	ense No.				
Start Date (10)		Schedu	uled Co	mpletion	Date (11)				SHA Monitor	013	011				
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Agencies Notified Type Notificatio	n		Street	Address					AGE	AZZYĆ US	S CC ENSI	INTR	OL &
	y (includir	ng .	Mapl Name	tate, Zip Code ewood, NJ of Contact Pietz			*	Teler	nhone N				
Name of Facility Where Abatement is Tak	ing Place	(3)	FAC	CILITY INFOR	RMATION	Tyn	e of Facility (4	4)					
House Street Address						×	School (K-1: Subchapter Other (i.e. pretc.)	2) 8 (Other	than K	(-12) ercial bu	ildings	s, hom	nes,
City (5) Maplewood						Squ N/A	are Feet	# of F N/A	loors	1.0	Bldg. N/A	Age	
County (6) Essex			County (STATE	Code (7) USE ONLY)			rent Use (Prio	or if being	g demo	lished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8	3)	ASC	M No.	Name D&S	of Ab	atement Cont tement, Inc	tractor (9	9)				
Street Address					Street 11 R		ess ngren Aven	ue					
City, State, Zip Code					City, S	tate, 2	Zip Code NJ 07512						
Project Manager for Monitoring Firm			Telepho	one No.	Teleph 973-	none N	No.	100	icense	No.			
Start Date (10) 04/27/2018	Schedu 04/28		mpletion	Date (11)			HA Monitor tement, Inc						
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe: Occupied	Period of	Abater	ment s		Street 11 R	Addre osen tate, 2	ess gren Aven Zip Code						
Scope of Work (Check All That Apply)					lotov	wa, i	NJ 07512						
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										+			
Name of Registered Waste Hauler D&S Abatement, Inc.		Н	JDEP W	No. of	ubic Yards Waste		Name of Re	-1 -1		ill			
City, State Totowa, NJ		20	0996	Di	BD isposal Date BD		City, State						
Completed by Oliver Hegedis	Title Proje	ect Ma	nager	110	Signature		Morisville	e, PA		ate 14/17/2	2018		

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Date of Notification (1)			Name o	f Building Owner/0	perator	(2)		APR	2	4 2	018	
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Agencies Notified Type Notification EPA Initial			Street A		700	AVE	AG	E. I	EN:	SINC	TROL	- &
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Emergency (in			-	2/4/3/67/7 f Contact			Telephone	Numbe	r			-
DOH justification) Cancellation		1	SHE	No 171/2	IRZ)	VK	4843			19	02	2
N	DI	2)	FACI	LITY INFORMAT								
Name of Facility Where Abatement is Taking BAVWAY SWITCH Street Address	//////////////////////////////////////	ARL)			Type of Facility (School (K-1 Subchapter		(-12)				
400 ClIFTON AVE						Other (i.e. p	orivate & comme	ercial b	uildir	ngs, l	nomes	3,
City (5)						Square Feet	# of Floors			g. Ag		
ElizaBET/T			<u> </u>	0-1-70		2000	12		-	9/	4	
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Sold CR S & THE Name of Monitoring Firm Hired by Building Or	wner (8))	ASCN	/ No.	Name	of Abatement Cor						
BUREAU VERITAS							NSTRU	57/6	سن	- 1	ے ماد	-
Street Address				0/		Address		2, 2				
City, State, Zip Code	-KR	ARIT,	1300	MAZAI		BOX 11	587					
No	83.	7			PH	111	19/16					
Project Manager for Monitoring Firm			Telepho	ne No.	Telepl	hone No.	Licens	e No.				
JB. CHADWICK			7320	225-6040	267	-784-4691	9 012	76				
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(FIGATION OF ASSESTOS ABATEMENT
(Pursuant to NJAC 8:40 and 12:120) 2018 Date of Notification (1) Name of Building Owner(Operator (2) 4/19/18 IS MARION DELGUTE Type Notification Agmois Notified Street Address OL VG Initial O EPA City, State, Zip Code DEP Amanded MONTCLAIR. DOL Amundment # 07042 Emergency (including Name of Contact Telephone Number DOH (ustification) MS. DELGOTTE D DCA Consultation FACILITY INFORMATION Name of Facility Where Abstracting is Taking Place (3) Type of It dit (4) KS. HANGON DECOUTE D Schi 4 (K-12)
D Sob: upn e 8 (Other than K-12)
Set: Othe (i.e private & commercial buildings, homes, etc.) Server Address # of Floors City (5) Square F: MONTCLAIR 1940 25 25, Current II p (Prior If being demalished) County (5) County Code (7) GTATE USE ONLY " ESIDENCE X5225 Name of Monitoring Firm Hired by Building Owner (8) Name of Abstern: LCtotractor (9) ASCM No. Best Rem Wil Inc Street Address City, Sma, Zip Code Hackensa k NJ 07601 Project Manager for Monitoring Firm Telephone No. Telephone No. 201-329- 444 Name of OSHA 3 opinor 00388 Schodulad Completion Data (11) 1/201 18 Omega Succi Addres Er 1 conmental Occupancy Status During Abatement (Check Only One) 280 Huyl ir Street ☐ Facility Closed/Vscated During Entire Period of Abatement D Abateonant Partitioned Outside of Narroal Facility Hours of Other - Describe 8: 05 A/4 TO \$: 0.5/4 City, State, Zip C de South Ha kinsack, NJ 07606 Suope of Work (Check All That Apply) 23 st or 23 If Full Commisment with Negative Pressure
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Glow/ ag Franchure Renovation Demolition □ ≥160 af or ≥260 lf Non-F sam seed (*) and Non-Friable Procedure Abetement Is Lecetion Typs Normally Location of Description of
Asbestos Containing Material (A! M) Used Solely by Asbestos-Containing Material (ACM)
TO BE ABATED AMOUNT Maintenance/ (i.e. thermal systems touslation, sur ain; (Specify SF or LF) Curredini Smf7 Removal In Facility VAT, or (12) (13) other miscellaneous) Yes No NA BASEMENH 76LF THERMAL INSULATION! Name of Regimered Waste Hauter NIDEP Weste Cubio Yarda lamit of Registered Landfill 2 42 cy

Disposal Page 4/23/18

Signatur

dinerva Enterprises, LLC

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Jaynesburg

Hackensack, Completed by

J. Maiorano

Best Removal Inc

NJ 07601

Estimator

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Mark Carelli	y riace	(3)					Type of Facilit	D. (8345)					
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Montvale Nj 07465						The state of the state of	State, Zip Code	_					
Project Manager for Monitoring Firm			Telepho	no No			tvale Nj 0746	55					
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STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7 Date of Notification (1 Name of Building Owner / Operator (2) 04 06 18 MERCK SHARP & DOHME CORP Street Address Type of Notification encies Notified 2000 GALLOPING HILL ROAD EPA Initial City, State, Zip Code 1 DOL V Amended KENILWORTH, NJ 07033 4 DOH Amendment# Name of Contact Telephone Number Emergency w/ justification JESSICA FEARON-BROWN 908-740-2035 Cancellation CONTROL & FACILITY INFORMATION LICENSING Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) MERCK School (K-12) Street Address Subchapter 8 (Other than K-12) 2000 GALLOPING HILL ROAD 1 Other (i.e., private & cmmercial bldgs., homes, etc.) City (5) County (6) County Code (7) Square Feet # Of Floors **Building Age** KENILWORTH UNION N/A N/A Current Use (Prior if being demolished) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM NO Name of Abatement Contractor (9) ATC GROUP SERVICES Northstar Contracting Group, Inc. Street Address Street Address 3 TERRI LANE, BROMLEY CORP CENTER City, State, Zip Code 32 Williams Parkway BERLINGTON, NJ 08016 City, State, Zip Code Project Mngr. For Monitoring Firm Telephone Number JOHN LUTZ 609-571-7522 East Hanover, NJ 07936 Sheduled Start Date (10) Telephone Number Sched, Completetion Date (11) License Number 05 03 18 06 01 18 973-772-3660 00860 cupancy Status During Abatement (Check Only 1) Name of OSHA Monitor Facility Closed/Vacated During Entire Period of Northstar Contracting Group, Inc. Abatement Street Address Abatement Performed Outside of Normal Facility Hours - Describe: 32 Williams Parkway Other - Describe: 7:00AM-3:30 PM City, State, Zip Code MON-FRI East Hanover, NJ 07936 Scope of Work (Check All That Apply) Demolition 1 Renovation Full Containment with Negative Pressure 1 >3sf or >3lf Mini - Enclosure ≥160 sf or ≥260 If Glovebag Procedure 4 Non-Exempted (*) and Non-Friable Procedure Location of Description of Is Abatement Type Asbestos Containing Location Asbestos - Containing R Material (ACM) Normally Material (ACM) Amount E R N N TO BE ABATED Used (I.e., thermal systems (Specify M E C C in Facility Solely insulation, surfacing, VAT, SF or LF) 0 P L A (13)by Mainor other miscellaneous) V P 0 A tenance/ S A 8 S Custodial L R u U Staff (12) R YES NO N/A EXTERIOR ADJACENT TO #EM-1 SUB STATION CONCRETE/TRANSITE PIPE 25 LF 1 Name of Registered Waste Hauler NJDEP Waste Cubic Name of Registered Landfill NORTHSTAR CONTRACTING GROUP, INC. Hauler ID No. Yards LYCOMING COUNTY RESOURCE MGMT SRVCES of Waste , State Disposal City. State ST HANOVER, NJ 07936 Date MONTGOMERY PA 17752 Completed by (Print or Type) Title Signature Date STEVEN STILES PROJECT MANAGER Atrea

ASB-41

04/13/18

STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT

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NOTIFICATION OF ASBESTOS ABATEMENT (Pursua NUAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 2 4 2018 20 18 Kathleen Cabrera / Job #1804-2298 Chk. #5023 Agencies Notified Type Notification Street Address ASBESTOS CONTROL & ☐ EPA LICENSING □ DOLWD ☐ Amended City, State, Zip Code ☑ DHSS Amendment # Burlington, NJ 08016 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Kathleen Cabrera **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residential ☐ School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Burlington, NJ 2,500 100 yrs. County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Burlington Residential Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Finog Environmental Asbestos and Mold Services, Corp. Street Address Street Address 617 Stokes Rd., Suite 4-318 3859 Sylon Boulevard City, State, Zip Code City, State, Zip Code Medford, NJ 08055 Hainesport, NJ 08036 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Rebecca Rubnitz (888)715-2211 609-702-0400 00862 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 30 / 18 __5__/__1__/__18 EMSL Analytical, Inc. Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 200 U.S. Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-__ Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or >3 If □ Renovation ☐ Mini-Enclosure ≥160 sf or ≥260 If Demolition ■ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Asbestos Containing Material (ACM) Repair Encapsulate Maintenance/ Amount TO BE ABATED (i.e., thermal systems insulation, (Specify IN Facility Custodial Staff? surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Basement \boxtimes Pipe Insulation 240 LF X \Box П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Waste Management Hauler ID No. Waste **Grand Central** 17273 5 City, State Disposal Date City, State Lafayette, NJ 5/3/18 Penn Argyle, PA Completed By (Print or Type) Title Signature Date Joann Mullarkey Office Coordinator ASB-41

State of New Jersey

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	nended	,,			State, Zip			production in the second section in the section in	1 17	#1.14. 	ING	
Annual to a sale	endment ergency (_			nfield, NJ						
	tification)		ng	Nam	e of Conta	ict		Telephone Nu	mber			
☐ Ca	ncellation			Ry	an Thon	nasen		973-941-81				
				F/	CILITY	NFORMATION						
Name of Facility Where Abateme	nt is Taki	ng Plac	ce (3)				Type of Facility (4	1)				
PSE&G- Orange Gas Faci	lity						School (K-12)					
Street Address 284 North Park Street							Subchapter 8 Other (i.e., pri	(Other than K-1 vate and comm	2) ercial b	uildin	gs,	
City (5)							homes, etc.) Square Feet	# of Floors	10	lda /	\00	
East Orange, NJ							Square reet	# 01 F1001S	6	ldg. A	age	
County (6)				Cou	inty Code (7)(STATE USE ONLY)	Current Use (Prio	r if heing demol	lished)			
Bergen					,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	District Office		isiicu			
Name of Monitoring Firm Hired by	/ Building	Owner	(8)	ASCN	l No.	Name of Abateme						
NA						AbateTech, I						
Street Address						Street Address				_		
						30 Maple Ave	e. PO Box 25					
City, State, Zip Code						City, State, Zip Co	ode					
						Lumberton, N	NJ 08048					
Project Manager for Monitoring Fi	rm		Tel	ephone	No.	Telephone No. 609-265-2107		License No. 00529				
Start Date (10)	Sche	duled (Comple	etion Da	ate (11)	Name of OSHA M		00020				
4 /30 /18					18	EMSL Analyti						
Occupancy Status During Abatem					- //	Street Address						
Facility Closed/Vacated During	Entire Pe	eriod of	Abate	ment		200 Route 13	0 North					
Abatement Performed Outside Time of Abatement:AM	of Norma	l Facilit M/	y Hou	rs - Des -	scribe AM	City, State, Zip Co						
						Cinnaminson	, NJ 08077					
Scope of Work (Check all that app	ly)					☐ Full Cont	ainment with Negat	iva Pressure				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			enovat emoliti			☐ Mini-Encl ☐ Glovebag	osure		ıro			
			Loca			Z HON Exc.	inpled () and Non-	nable i roceuc	-	atem	ent Ty	vne
Location of			Norma ed Sole			Description of				1		_
Asbestos-Containing Material (TO BE ABATED	ACM)		intena			stos Containing Mat ., thermal systems in		Amount (Specify	Removal	Repair	nca	nclo
IN Facility		Cus	todial	Staff?	(surfacing, VAT,	or	SF or LF)	oval	₹	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A	1	other miscellaned	ous)				ate	Ф
Exterior				×	Roof Pa	per & TarFlashir	ng	2,290 SF				
Exterior				\boxtimes	Sealant	Caulk		300 SF		П	П	П
Exterior					Roof In	sulation		7,800 SF				금
Name of Registered Waste Hauler			0.0595	JDEP V		Cubic Yards of	Name of Register	ed Landfill				_
Environmental Transport G	roup		Н	auler ID NJD0	No. 0 06920	Waste 40	G.R.O.W.S. L					
City, State						Disposal Date	City, State				- 111111111	
Flanders, NJ						5/18/18	Morrisville, P	A				
Completed By (Print or Type)	Title					Signature	A	Da	ate	h	. 0	.
Gwendolyn Trumbetti	0	perati	ons (oordi	nator	1 / An	V17.1		4/2	01	18	

CK 10078		NC	OTIFI (CATI(Pursu	ON OF-A	New Jersey BESTOS ABA AC 5:60 and 5:1	TEMENT	DE	C		\mathbb{V}	E
Date of Notification (1) 4 / 20 /	18	3				ng Owner/Operator	(2) Check #10	0.78	PR a	2 4	2018	3
Agencies Notified Type Noti	fination	_		1 11///22			Officer # 10	078				
⊠ EPA ☐ Initiat				10000000	eet Address			1.2.1	343,00		ery een gewaan	and the same
☑ DOLWD ☑ Amend				_	000 Hadle			Actor	1.70% 1.70E	NSIN	HKC G	JL &
I — I /	dment #4	4		100000000000000000000000000000000000000	, State, Zip			CONTRACTOR SOCIETATION CO.	**************************************	PRINCE PRINCE		den and the state of
☐ DCA ☐ Emerg			ing	S	outh Plair	nfield, NJ						
(NJAC 5:23-8) / justific				Nán	ne of Conta	ct		Telephone N	umber			
Cance	llation			R	yan Thom	asen		973-941-8				
				F	ACILITY II	NFORMATION						
Name of Facility Where Abatement is	s Taking	Plac	ce (3)	710		u oranziron	Type of Facility	(4)				
PSE&G- Plainfield Gas Facili							School (K-12	• •				
Street Address	-						Subchapter 8	.) 3 (Other than K	-12)			
40 Rock Avenue							Other (i.e., p	rivate and comi	nercial l	buildin	gs,	
City (5)							homes, etc.)					
Plainfield, NJ 07036							Square Feet	# of Floors	E	Bldg. A	ge	
County (6)				1-								
Union				Cot	unty Code (7	()(STATE USE ONLY)	Current Use (Pri	or if being dem	olished)			
100 100 100 100 100 100 100 100 100 100				\perp			District Office	ce				
Name of Monitoring Firm Hired by Bu	ilding O	wner	(8)	ASCN	/ No.	Name of Abateme	ent Contractor (9)					
NA						AbateTech, Ir	ıc.					
Street Address						Street Address			- 40-1		-	
						30 Maple Ave	. PO Box 25					
City, State, Zip Code						City, State, Zip Co						
						Lumberton, N						
Project Manager for Monitoring Firm			Tel	ephone	No.	Telephone No.		License No.				
			_			609-265-2107		00529				
Start-Date (10)	Schedu	led C	Comple	etion Da	ate (11)	Name of OSHA Mo	pritor	00329				
_4 / 24 / 18				/		EMSL Analytic						
Occupancy Status-During Abatement							cai					
Facility Closed/Vacated During Ent						-Street Address						
Abatement Performed Outside of N	lormal F	acilit	Abate	ment	noriba	200 Route 130						
Time of Abatement:AM	PM/	donne	y riou PM	- De:	AM	City, State, Zip Coo						
						Cinnaminson,	NJ 08077					
Scope of Work (Check all that apply)						ПЕЛО						
≥3 sf or ≥3 lf	D	Re	novati	on		☐ Mini-Enclo	inment with Nega	itive Pressure				
≥160 sf or ≥260 If			molitic			Glovebag	Procedure					
						Non-Exem	pted (*) and Non-	-Friable Proced	ure			
Location of			Locat Norma	0.700					Ab	ateme	ent Ty	уре
Asbestos-Containing Material (ACM	1)		d Sole		Achae	Description of tos Containing Mate	rial (ACNA)		_Z	D.	ш	ш
TO BE ABATED	**		intena		(i.e.,	thermal systems in	sulation.	Amount (Specify	Removal	Repair	lca	ıclo
IN Facility (13)		Cust	todial ((12)	Staff?	- 83	surfacing, VAT, o	or	SF or LF)	val	-	Encapsulate	Enclosure
(13)		Yes	No	N/A	1	other miscellaneou	ıs)				ate	0
Exterior				N/A	Roof Fla	shina		1.200 SF	M			
Exterior		_			Roof Tar			1,200 SF				
Exterior		-			2	Iking Pads		600 SF				믬
								230 01			님	금
Name of Registered Waste Hauler				JDEP V	Vaste (Cubic Yards of	Name of Registe	red Landfill				Ц
Environmental Transport Group	р		Ha	auler ID		Waste 40	G.R.O.W.S.	TOU LANUIII				
City, State						Disposal Date	City, State					-
Flanders, NJ 07836					1	5/1/18	Morrisville, I	PA				
Completed By (Print or Type)	Title				- F	Signature			ate			
Gwendolyn Trumbetti		ratio	ons C	oordi	nator	January Charles	1 \$	D	ate UI2	all	8	

CV 100	7, 1		NC	TIF	GATY	State of ON OF A	SBI	ESTOS ABA	TEMENT		0 [חי	D //	
CF1001	19			ı		/	11	8:50 and 5:		(In)_E	U, E	ij	\mathbb{W}	
Date of Notification (1)	,			E.				Owner/Operator	(2)	I Pri			1 11-4- 1-104	11
	19 /		18		F	SE&G / J	lob	#1804-5302	Check #1007	411	APR 2	A C	0010	1
Agencies Notified	Type Notif	ficatio	n		Str	eet Address				I F	4111 6	4 (U10	- 1
☑ EPA 図 DOLWD		#100W			4	000 Hadle	y R	Road		mein		Vin a kina	(TO allegano	
☑ DOLWD	☐ Amend Amend		#		City	, State, Zip	Cod	de		ASU:				- &
□ DCA	☐ Emerge		_	ina	S	outh Plair	nfie	ld, NJ	,	THE RESERVE AND ADDRESS OF THE PARTY OF THE	LIGEN	VIIC	i 	mmowogn
(NJAC 5:23-8)	justifica	ation)			Nar	ne of Conta	ct			Telephone I	Number			
	☐ Cancell	lation			IV	lichael Es	can	nilla		973-417-	-0464			
					F	ACILITY II	NFO	ORMATION			my-t	River .		
Name of Facility Where Al		Taki	ng Pla	ce (3)					Type of Facility ((4)				
PSE&G- Bergen Poi	nt								School (K-12					
Street Address									Subchapter 8 Other (i.e., pr	(Other than I	K-12)			
23 Evergreen Street									homes, etc.)	ivate and con	imerciai	Juliuli	igs,	
City (5)					7722				Square Feet	# of Floors	1	Bldg. /	Age	
Bayonne, NJ														
County (6)					Co	unty Code (7)(S7	TATE USE ONLY)	Current Use (Prid	or if being den	nolished)			
Middlesex	~								Substation					
Name of Monitoring Firm H		ilding	Owner	(8)	ASC	И No.	N	ame of Abateme	ent Contractor (9)					
Health & Safety Serv	rices							AbateTech, I	nc.					
Street Address					ST-0		St	treet Address						
PO Box 365								30 Maple Ave	e. PO Box 25					
City, State, Zip Code							Ci	ity, State, Zip Co	ode					
Berlin, NJ 08009								Lumberton, N	IJ 08048					
Project Manager for Monito Jim Proctor	ring Firm			1	ephone		1 0	elephone No.		License No				
Start Date (10)						2-1311	- 2	609-265-2107		00529				
5/1/	18	_	5		etion D 4/	ate (11) 18		ame of OSHA M EMSL Analyti						
Occupancy Status During A							Str	reet Address						
☐ Facility Closed/Vacated	During Enti	ire Pe	riod of	Abate	ment		2	200 Route 130	0 North					
Abatement Performed O Time of Abatement:	AM-	ormai Pi	i Facilii M/	y Hou PM	rs - De -	scribe AM		ty, State, Zip Co						
							(Cinnaminson	, NJ 08077					
Scope of Work (Check all the state of the s	ат арріу)			enovat emolitic				☐ Mini-Enclo	Procedure					
									npted (*) and Non-	Friable Proce	edure			
Location of			100	Local Norma							Al	atem	ent Ty	/ре
Asbestos-Containing Ma	terial (ACM	1)	Use	d Sole	ely by	Asbes	tos	Description of Containing Mate		Amount	Re	Re	四	En
TO BE ABATE IN Facility	D			intena todial			, the	ermal systems in	nsulation,	(Specify	Removal	Repair	Encapsulate	Enclosure
(13)				(12)	otan.			surfacing, VAT, ther miscellaneo		SF or LF)	a		sula	ure
			Yes	No	N/A	7	-	area missenarios	(30)				6	
Exterior						Caulk				250 LF				
												П	П	П
														$\overline{\Box}$
											- -			_
Name of Registered Waste H	Hauler		Ц		JDEP 1	Masta	Cuk	oio Vanda af	No. of Decide	11 1511		Ш		
Waste Management	iaulei			Н	auler II	D No.	Was		Name of Registe G.R.O.W.S. L					
City, State					18750		Disp	posal Date	City, State				Terror - Jack	-
Camden, NJ								/14/18	Tullytown, P.	A				
Completed By (Print or Type))	Title						Signature	1		Date .	-		
Gwendolyn Trumbetti				ons C	oord	inator		0	mit		41	9/	18	
SB-41								/						

* * .							11	01	DEN)		Pr	int For
no CK	<i></i>			ICATIO	State of New Jerse N OF ASBESTOS t to NJAC 8:60 an	ABATE	MENT		OTIF		AT	7,0	N
	/18			Name PSE8	of Building Owner/0	Operator	r (2)	1 1		\ <u>\</u>	E	M	
Agencies Notified EPA	Type Notification Initial			4000	Address HADLEY ROA	D		+	APR 24	2018		W	
DEP DOL	Amended Amendment Emergency		_ [SOUT	tate, Zip Code ΓΗ PLAINFIELΩ	D, NJ (7080						
M DOH DCA	justification) Cancellation			J	of Contact ONATHAN SILITY INFORMAT	V:11	IA - Go	nzales	Telephone Nu			24	9
Name of Facility Where A	Abatement is Takir	ng Place (3)	FAC	ILITY INFORMAT	ION	Type of Fa	acility (4)					
Street Address 958 J	ERSEX	AV	— Е.				Subc		Other than K-1 te & commerc		dings	, hom	es,
City (5) NEW	BRUNSU				***************************************		Square Fe		f of Floors	1	Bldg. A	Age 68	VR5
County (6) MiDE	desex				Code (7) USE ONLY)				being demolis	hed)	71~		, ,
Name of Monitoring Firm ENVIRONMENTAL	Hired by Building TACTICS	Owner (8)	ASC 004	M·No. * 5		of Abateme		tor (9) F AMERIC	A INC)		
Street Address 64 BROAD STREET	Г						Address WHITEHE	AD AVE		×			
City, State, Zip Code MATAWAN, NJ 077							itate, Zip Co TH RIVEI		882				
Project Manager for Monit TOM GEIGER	toring Firm			Telepho 732-2	one No. 90-2217	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	none No. 432-8350		License N 01111	lo.			
Start Date (10) 4/25	5/18	٠	5/		Date (11)		of OSHA M		F AMERIC	A INC).		
Occupancy Status During				7-			Address NHITEHE					-	\neg
Facility Closed/Vacar Abatement Performe Other – Describe:	d Outside of Norn	nal Facility	Hours				tate, Zip Co	A Medical Company			-1	tur-	
Other – Describe: ∠ Scope of Work (Check All	/	Fren	e son	on	ly	SOU	TH RIVER	R, NJ 08	882				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoliti			X	Mini-End Gloveba	losure g Procedur	ith Negative F e and Non-Friat				
Location		1	Location	у	Des	cription		· Inpied () i	2110 11011-F118L		Abate	ement pe	
Asbestos-Containing N <u>TO BE ABA'</u> In Facility (13)	TED	Ma	d Solel intenar todial S (12)	nce/	Asbestos Conta (i.e. thermal surface	aining M	aterial (ACN insulation, T, or	'	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
NATIONAL STATE OF THE STATE OF	10-10 P. A.	Yes	No	N/A								ate	e e
MIDDLE OF BU	ilding		X		TRANSITE WIRE	= 4	ANGIS	10	2 SF	X			
			X		W.RE.	Soc	K	5	OLF	X			
Name of Registered Waste	e Hauler		l N	JDEP W	aste Cubic	/ards	l Non	o of Deci-	tered I andfill				

NJDEP Waste Hauler ID No. 1125

Cubic Yards of Waste

APA / D

Disposal Date

Name of Registered Landfill FAIRLESS

ELIZABETH, NJ

Title

OFFICE MGR.

MORRISVILLE, PA

City, State

Date 4/23/18

Completed by

CAROL RAIMO

OK# 8871

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

	Ħ	(1	ursuan	t to NJAC 8:	:60 and	1 12:120)				555	0046	
Date of Notification (1) 4/16/18			Name o	of Building O &G	wner/O	perator	(2)		Al	11 6	4	2016	j
Agencies Notified Type Notification				Address HADLEY	ROAD)			į.			. 70	3 JC
EPA Initial Amended Amendment	#			tate, Zip Cod TH PLAIN!		NIO.	7080		(0)		4		-C-INVESTOR
☐ Emergency justification)			Name o	of Contact				Tele	phone Nu	mber			
DCA Cancellation			J	DUATH	AN	V:11	A-GONZA	185	908-0	202	00	24	9
Name of Facility Where Abatement is Takin	g Place (3	3)	FAC	ILITY INFOR	RIVIATIO	ON	Type of Facility	y (4)	-2-32-33				
Street Address							School (K		7.00 ST-800				
958 JERSEX	AVE	E.					Subchapt Other (i.e etc.)	er 8 (Othe . private &	r than K-1 commerc	2) ial bui	ldings	, hom	ies,
NEW BRUNSW	ick	,					Square Feet	# of	Floors	1	Bldg. A	3	vRs
County (6) MiDDLESEX			County	Code (7) USE ONLY)			Current Use (P			hed)	W.		7~
Name of Monitoring Firm Hired by Building				M No.		Name	of Abatement C	BSTA)			
ENVIRONMENTAL TACTICS	o (11)		004			UNIQ	UE SYSTEN	IS OF A	9) MERIC	A INC			
Street Address 64 BROAD STREET							Address VHITEHEAD	AVE.					
City, State, Zip Code MATAWAN, NJ 07747							ate, Zip Code TH RIVER, N	1.1 08882	,				
Project Manager for Monitoring Firm TOM GEIGER			Telepho			Telepho	one No.		License N	lo.			
Start Date (10)	Schedule	ed Cor		90-2217 Date (11)			32-8350 f OSHA Monito	r	01111		- 7		
7/25/18		4/	27/	18		100000000000000000000000000000000000000	UE SYSTEN	IS OF A	MERICA	A INC).		
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire F	20-10-10-10-10-10-10-10-10-10-10-10-10-10		nont.			Street A	ddress HITEHEAD	AVF					
Abatement Performed Outside of Norm Other – Describe: Messey	al Facility	Hours		0		City, Sta	ate, Zip Code			37000			
Scope of Work (Check All That Apply)	-			7		SOU	H RIVER, N	IJ 08882	2				
≥3 sf or ≥3 If ≥160 sf or ≥260 If	Personal Property and Property	lenova emolit					Full Containn Mini-Enclosu Glovebag Pro	re	Negative F	ressu	re		
	_					Z	Non-Exempte		Non-Friab	le Pro	cedur	е	
Logation of	7 7350	Locati Iormal			_	2702						ement pe	t l
Location of Asbestos-Containing Material (ACM)	Used	d Sole ntenar	ly by	Asbestos		cription of ining Ma	of iterial (ACM)	Am	ount				
TO BE ABATED In Facility		odial S				ystems ng, VAT	insulation, , or		ecify or LF)	Remova	Repair	ncap	Enclo
(13)	Yes	No.	N/A	٥	ther mi	scellane	ous)			oval	pair	Encapsulate	Enclosure
MIDDLE OF BUILDING	163	X	INA	1000	15'75	- P	401616	12	SF	~		· ·	
1' 1' 1'		×		Un. PA	13,1E	500	quels K	50		X			
				100									
Name of Registered Waste Hauler		l N	JDEP W	laste C	Cubic Y	arde	Nama of	Registere	41450				
WASTE MANAGEMENT		H	auler ID 125	No. o	of Waste	е	FAIRL		u Lanuilli				
City, State ELIZABETH, NJ					Disposa TB		City, Star	te ISVILLE	ΡΔ				
Completed by	Title		XXXXX							te ,	,	,	-
CAROL RAIMO	OFFIC	CE M	GR.			40	eral La	rem	2	te 4/	16/	18	-

CK# 8898									Print For						
		NOTI	FICATE	State of N ON OF AS nt to NJA	BESTOS	ABATE	MEN 0)	Т				Ŵ	E		
Date of Notification (1) 4/23/18			Name PSE	of Buildin &G	g Owner/	Operator	r (2)			APR 2	4 2	018		1)	
Agencies Notified Type Notification				Address HADLE	Y ROA	D						***	13		
DEP Initial Amended Amendment	#		City, S	State, Zip (TH PLA	Code		708		A/	1100			_ &		
		g	Name	of Contac	t				Te	elephone Nu	umber	,			
Name of Facility Where Abatement is Takin		(3)		CILITY IN	FORMAT	CAD		1		32-3	74	- 6	12	8	
PSE & G Street Address	9 - 1400	(0)					Тур	e of Facil School	(K-12)						
982 SPRING	EFi	ELI	5 /	IVE.			×	Subchar Other (i. etc.)	chapter 8 (Other than K-12) er (i.e. private & commercial buildings, homes,						
City (5) IRVINGTON								are Feet		of Floors	- 1	Bldg.	370)		
County (6)			County (STATE	Code (7)	Y)		Curr		Prior if be	ing demolis	hed)				
Name of Monitoring Firm Hired by Building (ENVIRONMENTAL TACTICS	Owner (8	3)		M No.		Name	of Ab	atement (Contractor	5/AT;					
Street Address 64 BROAD STREET			000	0045 UNIQUE SYSTEMS OF AMERICA IN Street Address						A IN	INC				
City, State, Zip Code MATAWAN, NJ 07747	396 WHITEHEAD AVE. City, State, Zip Code														
Project Manager for Monitoring Firm	Т	SOUTH RIVER, N Telephone No. Telephone No.					NJ 08882 License No.								
TOM GEIGER Start Date (10)	Schedu	led Cor					732-432-8350 01111 Name of OSHA Monitor								
Occupancy Status During Abatement (Check	6	0/	S/18 UNIQUE SYSTEMS OF AMERICA INC.												
Facility Closed/Vacated During Entire P	eriod of	Ahaten	nent				7 11 17 17	ess TEHEAD	D AVE.						
Abatement Performed Outside of Norm Other – Describe: Mesessas	al Facilit	y Hours	City, State, Zip Code SOUTH RIVER, NJ 08882												
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	Z.	Renova	tion	/											
≥160 sf or ≥260 lf		Demolit					Mir Glo	ni-Enclos ovebag P	ure rocedure	Negative F					
			tenance/ Asbestos Containing							Non-Friab	le Pro	Abatement Type			
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Use Ma	ed Sole intenar								Amount		ı y			
In Facility (13)	Cus	todial S (12)	Staff?	(i.e.	surfac	ing, VAT iscellane	, or	ation,		pecify or LF)	Remova	Repair	Encapsulate	Enclosure	
	Yes				N/A				,			7	ilate	ure	
ROOF SKYLigHTS		×		ACM WIND			ISOU CAUIK 150 C			FOLF	X				
		+													
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic Y	'ards		Namo	of Pegiate	rod I anden					
WASTE MANAGEMENT		Ha	auler ID 125		of Wast	e		Name of Registered Landfill FAIRLESS							
City, State ELIZABETH, NJ					Disposa			City, Sta	ate	 Ε DΛ			07-1-1-		

TBD

Title

OFFICE MGR.

Completed by

CAROL RAIMO

Date 4/23/18

MORRISVILLE, PA

CK# 8899	State of New Jers NOTIFICATION OF ASBESTOR (Pursuant to NJAC 8:50 a	ABATEMENT	DECE	Print Fo		
Date of Notification (1) 4/23/18	Name of Building Owner PSE&G	/Operator (2)	JL APR 2	4 2018		
Agencies Notified Type Notification EPA Initial	Street Address 4000 HADLEY ROA	AD	ASULTATION L'OEN	UNTROL &		
DEP Amended Amendment #_	City, State, Zip Code SOUTH PLAINFIEL	.D, NJ 07080	From Society Science Society S	OTTO TO THE PROPERTY OF THE PR		
DOH Emergency (including justification) Cancellation	Name of Contact ARL	SCHM: ST	Telephone Nu	mber 463 - 9537		
Name of Facility Where Abatement is Taking Pl	FACILITY INFORMATION (3)	Type of Facil	ity (4)			
PSE&G	1000 (0)	School (
Street Address		Subchar	oter 8 (Other than K-1) e. private & commerci			
City (5)	AN ST.	etc.) Square Feet	# of Floors	Bldg. Age		
South HACKE	ENIS ACK	APPX 80	4	AMX 854RS		
BERGEN	(STATE USE ONLY)	Current Use	Prior if being demolish	hed)		
Name of Monitoring Firm Hired by Building Own ENVIRONMENTAL TACTICS	ner (8) ASCM No. 0045	Name of Abatement				
Street Address 64 BROAD STREET	•	Street Address 396 WHITEHEA	D AVE.			
City, State, Zip Code MATAWAN, NJ 07747		City, State, Zip Code SOUTH RIVER,				
Project Manager for Monitoring Firm TOM GEIGER	Telephone No. 732-290-2217	Telephone No. 732-432-8350	License N 01111	lo.		
5/14/18	cheduled Completion Date (11)	Name of OSHA Moni UNIQUE SYSTE	tor MS OF AMERICA	A INC.		
Occupancy Status During Abatement (Check O		Street Address 396 WHITEHEAD AVE.				
Abatement Performed Outside of Normal F	Facility Hours	City, State, Zip Code SOUTH RIVER,	N.I 08882			
Scope of Work (Check All That Apply)	/					
\(\sum_{\text{\tince{\text{\te}\text{\tinit}\xi\text{\tin}\text{\text{\text{\texi}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\text{\text{\text{\text{\text{\text{\text{\text{\text{\texit{\tin\tinte\ta}\tint{\text{\text{\texi}\tint{\text{\texi}\til\text{\texitie\tint{\texi}\tilint{\text{\tiin}\tiint{\text{\tii}\tiint	Renovation Demolition	Mini-Enclos Glovebag F	1735 7 San Land			
	ls Location			Abatement		

Location of		Normall		Description of				Туре				
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Solel aintenar stodial S (12)	nce/		tos Containing Mater thermal systems ins surfacing, VAT, o other miscellaneou	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosu		
	Yes	No	N/A					=	2	ate	e	
ROOF PARAPET		X		ACI	n CAUIK		300 LF	X				
ROOF PARAPET WINDOWS		X		ACI	n CAUIK n window	CAULK	3000LF	X				
Name of Registered Waste Hauler WASTE MANAGEMENT			NJDEP Waste Hauler ID No. 1125		Cubic Yards of Waste	Name of FAIRLE	Registered Landfill					
City, State					Disposal Date	City, Stat	e					

TBD

Signature

Is Location

Normally Used Solely by

Title

OFFICE MGR.

Completed by

ELIZABETH, NJ

CAROL RAIMO

Date

MORRISVILLE, PA

Туре

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)	LJ Loon	en la	Name	e of Buildin	g Owner/Operator	(2)						
4 /23 /	18										E	
Agencies Notified Type Notific	ation		Stree	t Address				9/ [=	1 (2			
			10	20 Trento	on Rd - 2 nd Floor	(Room 425)						
☑ DOLWD ☐ Amende				State, Zip		(1100111 120)	HIII AI	PR 2	Δ	2018	}	
□ DOH Amendm		_		milton, N			IN TO VI	11 -	• (55%)			
DCA Emerger		ig		of Contac	1/4/		T	to	***************************************	(5 System		
(NJAC 5:23-8) justificat			INATTR	or Contac	Contact Telephohe Number of CONTROL & LICENSING							
			FΔ	CILITYIN	NFORMATION			LIVE	1/1011	i G	yernad days	
Name of Facility Where Abatement is	Taking Plac	e (3)	- 1.7	OILITT II	AI OKWATION	Type of Facility	(4)					
Sypec Center - Room A142		- (-)				School (K-1)						
Street Address				8 (Other than K-12	2)							
129 Bull Run Rd				Other (i.e., p	rivate and comme		uilding	js,				
A COMPANY OF THE PROPERTY OF T				homes, etc.)								
City (5)						Square Feet	# of Floors	BI	dg. A	ge		
Pennington, NJ 08534												
County (6)			Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Pr	rior if being demolis	shed)				
Mercer						LINS						
Name of Monitoring Firm Hired by Buil	ding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9))					
TTI Environmental Inc					Controlled E	nvironmental	Systems					
Street Address					Street Address							
1253 North Church St					1121 N. Beth	lehem Pike - S	uite 60					
City, State, Zip Code					City, State, Zip Co	ode						
Moorestown, NJ 08057					Spring House, PA 19477							
Project Manager for Monitoring Firm		Tele	phone	No. Telephone No. License No.								
Mike Stocku		8	56 840	40 8800 215 542 7000 00847								
Start Date (10)	tion Da	ite (11)	Name of OSHA M	lonitor			CHIPPE	_				
_5 / _7 / _18	18	Controlled Er	nvironmental S	Systems								
Occupancy Status During Abatement (Check only	one)			Street Address							
☐ Facility Closed/Vacated During Enti			ment			ehem Pike - S	uite 60					
☐ Abatement Performed Outside of N	ormal Facili	ty Hou	s - Des	cribe	City, State, Zip Co	and the second of the second o					_	
Time of Abatement:AM-2:0	0PM/10:00	PM	A	Л	Spring House							
Scope of Work (Check all that apply)					1 -1 3	,			18			
□ >2 -£ -> > 2 E	-				☐ Full Cont	ainment with Neg	gative Pressure					
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		enovati emolitic			Glovebag Procedure Gantes Continuement (ICC. Rice Souls						عربان	
		Ji i i o i i ci					n-Friable Procedu					
		Locat						Ab	atem	ent Type		
Location of	Contract of the Contract of th	Norma	-		Description of			R	70	т	m	
Asbestos-Containing Material (ACN TO BE ABATED		aintena			stos Containing Mat ., thermal systems i		Amount	em	epe	nca	nclo	
IN Facility		todial		(1.6	surfacing, VAT,	or	(Specify SF or LF)	Remova	4 2018 CONTRONSING iddings, dg. Age atement Ty Repair	Enclosure		
(13)	Vas	(12)	N//0	-	other miscellaned		,	-		late	G,	
Room A142	Yes	No.	N/A	Trav-!*	n Done!-		400.00	K-7				
NOOM A172				ransite	e Panels		130 SF		Ш		Ш	
Name of Registered Waste Hauler		1772	JDEP \		Cubic Yards of	Name of Regis	tered Landfill					
Geppert Recycling		Н	auler II	No.	Waste	Western B	erks Communit	y Lan	dfill			
City, State	7				Disposal Date	City, State		200				
Hatfield, PA					***************************************	Birdsboro,	PA 19508					
Completed By (Print or Type)	Title		SELECTION OF THE PERSON OF THE		Signature		Da	to		-		
Patricia Visco	Office	Mana	ner		Digitature +	w Visc	Da	. /	/	-		
ASB-41	300		. · ·		ratic	u visc	e '	1/23	12	Ciy		