CK 1012

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

Date of Notification (1)	1/21/18		Nai	me of B	uilding Owner	Operator (2	11:11/		2				
0	4/2//16		2	eet Add	MRD .	SHLLTI	-41 1.811 V	3 ,,	016	-		\neg	
Agencies Notified	Type Notification		Stre	eet Add	Jess				平尺				
EPA DEP DOL	Initial Amended Amendment #				, Zip Code	MMIT	r, NJ,	079010	2	7			
рон	Emergency (indigustification) Cancellation		Name of Contact LCONARD SALLAHIAN Telephone Number										
DCA	Cancellation		1~	FACILI	TY INFORMA	TION	Type of Facility (4)	5		جي ا	-	\dashv	
Name of Facility Where	Abatement is Taking I	Place (3)	E				School (K-12	<u></u>	2	-			
Street Address		3	14 1777 Belleville				Other (i.e. pr etc.)	ivate & commercial l				,	
City (5)	MMM						35.75	# of Floors		g. Ag	3_		
County (6)			Co (S	ounty Co	ode (7) SE ONLY)		HOME	if being demolished	i)				
Name of Monitoring Fir		wner (8)	\perp	ASCM	No.	Name of	of Abatement Cont	ractor (9)	VDI	ifi	All	au	
Street Address						Street	Address, MILL S	121					
City, State, Zip Code				-			·		70/				
Project Manager for M	onitoring Firm		Te	elephon	e No.	Teleph	PATERSON, NJ, 07570/ elephone No. License No. 1257						
		Scheduled (Comp	lation D)ata (11)	Name	of OSHA Monitor						
Start Date (10) 05/09//	16	05%	2	3/16	6	GO	RAN TGE	eV					
Occupancy Status Dur	ring Abatement (Check	Only One)					Address Will ST	_					
Facility Closed/Va Abatement Perfo Other – Describe	acated During Entire Permed Outside of Normal	eriod of Aba al Facility H	iteme ours	ent		City, S	state, Zip Code	NJ, 075	70,	/			
Scope of Work (Check						1///	7						
≥3 sf or ≥3 lf ≥160 sf or ≥260 l			novati nolitic			E	Mini-Enclosure	redure			_~~		
				1		L	Non-Exempted	d (*) and Non-Friable			ment		
			catio	333						Ту			
Asbestos-Containi TO BE /	tion of ing Material (ACM) ABATED acility (3)	Used S Maint Custoo	enan	y by ce/	(i.e. the	Description Containing Name of System The system of Syst	Material (ACM) is insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
	226	Yes	No	N/A			۳	100015					
ATT	ic	~			YERH	icul,	76	1800 SF					
			-										
								D internal Landfill					
Name of Registered V	Naste Hauler,	TIC CAN	H	JDEP Wauler ID	No O	ubic Yards f Waste TBI	0	Registered Landfill					
City, State	100/ #1/HM				NI	isposal Date			€,	F	A		
Completed by	RAN PAEV	Title 4	00	1116	TOOV	Signatur		Dat	2961	121	1/1	£6	
(70	KHIV I GEV	1	6.	KE	17/1	1	166						

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) 3006

Date of Notification (1)	15	_					er/Operator (ew Jersey	0)	P 22	SO				
Agencies Notified				2000	Address O Penning tate, Zip Co	-	Rd.		R 27 AM	8: 42	?			
☑ DHSS Amen	DHSS Amendment #4-4/20/16							& L1	& LICENSING					
DCA Emerg			ng, NJ 08 of Contact			Telephone Number								
Cance				Dav	id Jurkin				732-233-8	082				
				FAC	ILITY IN	FOR	MATION							
Name of Facility Where Abatement TCNJ-S.T.E.M. site(Former I			(3)					Type of Facility (4) School (K-12)						
Street Address 2000 Pennington Rd.						60		Subchapter 8 Other (i.e., prinhomes, etc.)	(Other than K- vate and comn	·12) nercial	buil	ding	S,	
City (5) Ewing								Square Feet	# of Floors		Bld	g. Ag	je	
County (6) MERCER				Coun	ty Code (7)	(STAT	E USE ONLY)	Current Use (Price	or if being dem	olished	1)			
Name of Monitoring Firm Hired by E USA Env Manangement Inc)wner ((8)	ASCM	No.			ent Contractor (9)	, INC.					
Street Address						Stre	et Address					1 = 1 = 1		
344 West State St						11	23 BEAVE	R STREET						
City, State, Zip Code Trenton, NJ 08618		20				7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	State, Zip C							
Project Manager for Monitoring Firm	n	C	Tele	ephone I	No.	Tele	phone No.	License No.						
William Weisgarber			6	09-656	-8101	21	215-788-6040 00509							
Start Date (10)				etion Dat		acamera.	ne of OSHA N RISTOL EN	A Monitor ENVIRONMENTAL, INC.						
Occupancy Status During Abateme							et Address							
☐ Facility Closed/Vacated During I ☐ Abatement Performed Outside of					cribe	200	State, Zip C	R STREET						
Time of Abatement: 7:00AM-3:							RISTOL, PA							
Scope of Work (Check all that apply	y)													
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		⊠ Re						Containment with Negative Pressure -Enclosure /ebag Procedure -Exempted (*) and Non-Friable Procedure						
			Loca								Aba	teme	ent T	уре
Location of Asbestos-Containing Material (A <u>TO BE ABATED</u> IN Facility (13)	ACM)	Use Ma Cus	todial (12	lely by ance/ Staff?		., thei	Description Containing Marmal systems urfacing, VAT ner miscelland	aterial (ACM) insulation, r, or	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
Exterior		Yes	No 🖂	N/A	Transit	e wa	ter pipes		530 LF		Ø			
Exterior					Steam	pipe			295 LF	1				
										[
										1				
Name of Registered Waste Hauler BRISTOL ENVIRONMENTA			100	NJDEP I	D No.	Cub	ic Yards of ste	Name of Regis G.R.O.W.S.	tered Landfill	NDFIL	L	100-300		
City, State	- Productive To B			18706	5	Disp	osal Date							
BRISTOL, PA 19007	- Service						Cianat	IIVEIXADIVI	LLL, FA 130			===		
Completed By (Print or Type) Brian Scafiro	Completed By (Print or Type) Brian Scafiro Title Estimator						Signature	ture Date						

ASB-41 B S 15 / 25 MAY 11

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

APPROVED: TOM VOORHEES, NJOOH

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

4 /				Name of Building Owner/Operator (2) RESIDENCE Street Address AM 8: 42										
	13 / 1	6		RI	SIDENC	E	<6	IL APR 27						
Agencies Notified	Type Notification	1		Stree	et Address		A	</td <td>A MI</td> <td></td> <td></td> <td>_</td>	A MI			_		
□ EPA							¥	1857n	0.	42	<u> </u>			
☐ DOLWD				City	State, Zip	Code		\$ 1700 CT	il e					
□ DHSS □	Amendment			0.50	0.00	Y, NJ 07087		LICENSIA	MIM IC	Θ_I				
DCA (NUA O 5 00 0)	☐ Emergency (includir	ng	-				~ //4	16	- 1.				
(NJAC 5:23-8)	justification) Cancellation			100000000000000000000000000000000000000	e of Contac	5.5		Telephone Nur	nber					
	☐ Cancellation					IUNKVOLD								
Name of Facility Where Al	natement is Taki	oa Diaa	. (2)	FA	CILITY II	NFORMATION	_							
RESIDENCE	Datement is Taki	ng Plac	e (3)				Type of Facility	*						
Street Address							School (K-12) 3 (Other than K-1	0)					
Street Address							Other (i.e., pr	ivate and comm	Z) ercial h	wildin	nac			
							homes, etc.)	ivate and commit	- Ciolai L	Juliuli	ys,			
City (5)							Square Feet	# of Floors	F	Bldg. A	Ane	-		
UNION CITY, NJ								" 01110010	-	nug. 7	ige			
County (6)				Cou	nty Code /	7)(STATE USE ONLY)	Current Hear (De	- 151				_		
HUDSON				000	my code (I NOTATE USE CIVET)			ished)					
Name of Monitoring Firm I	lired by Building	Owner	(8)	ASCM	No	Name of Abateme	RESIDENCE							
Health and Safety Se		Owner	(0)	AUCIVI	140.		VIRONMENTAL	INC						
Street Address							VIRONIVIENTAL	_, INC.						
318 12 th Street						Street Address								
	Les Acres de la company					1123 BEAVE	R STREET							
City, State, Zip Code						City, State, Zip Co	ode			- C. C. C.				
Hammonton NJ 0803						BRISTOL, PA	19007							
Project Manager for Monito	oring Firm		Tel	ephone	No.	Telephone No.		License No.				_		
Jim Proctor			(6	609) 70	4-8850	215-788-6040	A CONTRACT OF THE CONTRACT OF							
Start Date (10)	Sche	duled (etion Da		Name of OSHA M		00000	_			_		
4/20/				0 /	100		VIRONMENTAL	INC						
Occupancy Status During A							VIICOMMENTAL	., INC.						
occupancy status burning /	Abatement (Chec	ck only	one)			Street Address								
T Encility Classed / /seeted				92										
Facility Closed/Vacated	During Entire Pe	eriod of	Abate	ment		1123 BEAVER	R STREET							
Abatement Performed 0	During Entire Pe	eriod of	Abate tv Hou	rs - Des	scribe									
Abatement Performed C Time of Abatement: 9:0	During Entire Per Outside of Norma 10AM-5:00PM/_	eriod of	Abate tv Hou	rs - Des	scribe	1123 BEAVER	de							
Abatement Performed 0	During Entire Per Outside of Norma 10AM-5:00PM/_	eriod of	Abate tv Hou	rs - Des	scribe	1123 BEAVER City, State, Zip Co BRISTOL, PA	de 19007							
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Abatement Performed Common of Abatement: 9:0 Scope of Work (Check all the second sec	During Entire Per Dutside of Normal DAM-5:00PM/_ hat apply) aterial (ACM) ED	eriod of I Facilities Properties	Abate ty Hou W enovate enovate enolitie S Loca Norma ed Sole sintena todial (12) No	rs - DesAM	Asber (i.e.	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat., thermal systems in surfacing, VAT, other miscellaned UM FLOORING Cubic Yards of Waste	ainment with Negatosure Procedure Pr	Amount (Specify SF or LF) 75 SF	Removal	1	T	T		
Abatement Performed Continue of Abatement: 9:0 Scope of Work (Check all the second s	During Entire Per Dutside of Normal DAM-5:00PM/_ hat apply) aterial (ACM) ED	eriod of I Facilities Properties	Abate ty Hou W enovate enovate enolitie S Loca Norma ed Sole sintena todial (12) No	rs - DesAM	Asber (i.e.	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat., thermal systems in surfacing, VAT, other miscellaned UM FLOORING Cubic Yards of Waste 2	ainment with Negatosure Procedure In I	Amount (Specify SF or LF) 75 SF	Removal	1	T	T		
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NO CK

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

T	Ocienal the 1048	
	650 . 2121.0	

Date of Notification (1)					Name	e of Buildin	α Οι	wner/Operator ((2)								
	26 /	16			1 (1997)	y of Cam		anne centerna esta ante a come a com-	(~)								
Agencies Notified	Type Notific	ation			Stree	t Address	ess										
⊠ EPA	☐ Initial				PO	Box 951	35120										
⊠ DOLWD	⊠ Amende	51 book aware			City,	State, Zip (Code	Э	2 = y 2 + \(\frac{1}{2}\) \(\frac{1}{2}\)								
□ DCA	Amendm Emerger			1	Ca	mden, N.	J 08	101	2018 452								
(NJAC 5:23-8)	justificati	ion)	adding	3	Name	me of Contact Telephorie Number: 47											
	☐ Cancella	tion			Joi	hn Bond			ō-,	000-014-00	24						
					FA	CILITY IN	IFO	RMATION		& I IDENSIA	111	fil		1-11/11/11			
Name of Facility Where A		Place	(3)					Type of Facility	(4) - HE HS!!	1G	VI	2001					
WALNUT STREET F	RESIDENCE	ES				School (K-12)											
Street Address								☐ Subchapter ☐ Other (i.e., p	8 (Other than K-1) private and comme	2) ercial	ouildings.						
City (5)									homes, etc.)							
Camden									Square Feet	# of Floors	1	3ldg.					
County (6)		-			Com	-h - C - d - /7	71/07	ATE UDE ONLY	varies	varies		50+	6 2223				
CAMDEN					Cou	nty Code (/)(51)	ATE USE ONLY)		rior if being demol	100						
Name of Monitoring Firm	Hired by Build	dina O	wner /	(8)	ASCM	No	Ne	me of Abatomo	ent Contractor (9)	DEEMED UNSA	rE						
Health and Safety S		aning O	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	٠,	117	140.			nvironmental								
Street Address							-	reet Address	TVII OTITICITESI .	Jystems		-	-				
PO Box 365							1		lehem Pike - S	uite 60							
City, State, Zip Code				-			-	ty, State, Zip Co	and the state of t	4.00							
Berlin, NJ 08009								Spring House									
Project Manager for Monit	toring Firm	H 19350-1		Tel	ephone	No.		elephone No. License No.									
Jim Proctor				C	609-8	39-2432	1 2	215 542 7000		00847							
Start Date (10)					etion Da		2225	me of OSHA M	-IA Monitor								
3/14/					0_/.	16	(CES									
Occupancy Status During							1000000	reet Address									
☐ Facility Closed/Vacate☐ Abatement Performed	Outside of No	re Peri	od of	Abate	ement	oribo			lehem Pike -Suite 60								
Time of Abatement: 7:						scribe	- 33	y, State, Zip Co									
Scope of Work (Check all	that anniv)	20.000				Spring House, PA 19477											
	mar apply)					☐ Full Containment with Negative Pressure											
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			☐ Re 図 De		0.000			☐ Mini-Encl	osure								
<u></u>			Z De	HIOHU	OII				exempted (*) and Non-Friable Procedure								
			100000	Loca						-	A	baten	nent T	Гуре			
Location of Asbestos-Containing N		,		lorma d Sol	ally ely by	A - h -		Description of		_	7	Z	Ш	m			
TO BE ABA	TED	"	Mai	inten	ance/		., the	Containing Mat ermal systems i	nsulation,	Amount (Specify	Remova	Repair	ncap	Enclosure			
IN Facility (13)	У		Cust	(12)	Staff?			surfacing, VAT,		SF or LF)	\sigma	-	Encapsulate	sure			
(10)			Yes	No	N/A	1	Ot	inei miscellaneo	ous)				ite				
SEE ATTACHED						SEE AT	TAC	CHED		200 YD per res	s 🗵						
		_				OLL AI	1744			200 ID per les		-	1	ᆜ			
											L						
Name of Registered Waste				100	JDEP \	30.000	135500000	bic Yards of	Name of Regis	tered Landfill			1				
Waste Management	of NJ				lauler II 17273		1000	ste 200/residenc	GROWS								
City, State								posal Date	City, State								
Fairless Hills, PA							5	/20/16	Tullytown	PA							
Completed By (Print or Ty	oe)	Title	0					Signature	11	Da	ate	1	7 9 9 9				
Patricia Visco		Office Manager						Patuc	en Viac	05-	41	26	120	ita			

- NOCK

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMEN

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

NT C	SCIGN	asl	CATER 15501
	17.3		

			SILIZIONE		to contract					- De -	.,				
Date of Notification (1)	26 /	40				7	5	ner/Operator (2	2)	- VI (-					
	26 /	16			City of Camden Street Address 2016 APR 27 AM11: 47										
Agencies Notified EPA	Type Notifica	tion				Address Box 9512	20								
□ DOLWD						State, Zip C			& LICENSING						
⊠ DOH	Amendme	-				nden, NJ		01	& LICENSING RUL						
DCA (N.IAC 5:23-8)	DCA Emergency (including justification)									Telephone Number	er				
(110/10/3.20-0)	☐ Cancellati					of Contact in Bond	,			856-374-6094					
					FAC	CILITY IN	FOR	RMATION			iiwasta			-40	
Name of Facility Where	Abatement is T	aking	Place	(3)					Type of Facility	(4)					
NEWTON STREET	RESIDENCE	S							School (K-12						
Street Address								Other (i.e., p	3 (Other than K-12) rivate and commerc	ial bu	ilding	ıs,			
City (E)			eo nasta				-		homes, etc.)		DI	- A			
City (5) Camden									Square Feet varies	# of Floors		dg. A	ge		
County (6)			-		Cour	tu Codo /7	VCTA	TE USE ONLY)		ior if being demolish		7U~			
CAMDEN					Cour	ity Code (7	NOTA	TE USE UNLT)		EEMED UNSAFE					
Name of Monitoring Firm	5	ing O	wner (8)	ASCM	No.	Nar	me of Abateme	ent Contractor (9)						
Health and Safety	Services	2211			117		С	ontrolled Er	nvironmental S	Systems					
Street Address								eet Address							
PO Box 365									ehem Pike - S	uite 60					
City, State, Zip Code								, State, Zip Co							
Berlin, NJ 08009				T = 1				pring House	e, PA 19477	1					
Project Manager for Mon	litoring Firm			4 × 20	ephone		Telephone No. License No.								
Start Date (10)	10	chod	ulod C		tion Da	39-2432		15 542 7000	00847						
3//)/		Name of OSHA Monitor CES								
Occupancy Status Durin	g Abatement (C	Check	only o	one)			Stre	eet Address							
☐ Facility Closed/Vacat							1	121 N Bethle	nlehem Pike -Suite 60						
Abatement Performed						scribe	City, State, Zip Code Spring House, PA 19477								
Scope of Work (Check a	Il that apply)			-10-11-7-			-					To be to be			
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			☐ Re 図 De												
			ls	Loca	tion		-	Z3 11011 EXC	mptod () dild ite	in i nabio i roddaid	_	atem	ent T	vne	
Location			P	Vorma	ally			Description o			-	1	T	7	
Asbestos-Containing TO BE AB)			ely by ance/			Containing Ma ermal systems		Amount (Specify	Remova	Repair	Encapsulate	Enclosure	
IN Facil			Cus		Staff?	(1.6	S	surfacing, VAT,	or	SF or LF)	val	=	lusq	sure	
(13)			V	(12)	1	1	ot	her miscellane	ous)	25			ate	U	
OFF ATTACHED			Yes	No	N/A	CEE AT	TAC	NED		200 YD per res		П			
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Name of Registered Was Waste Managemen				122	NJDEP I	D No.	Wa		Name of Regis	stered Landfill					
City, State					1727	3	-	00/residenc posal Date	City, State	w					
Fairless Hills, PA								/30/16	Tullytown	PA					
Completed By (Print or T	Гуре)	Title					1	Signature		/ Dat	е .	1			
Patricia Visco Office Manager						Pateria Vosco 1/26/2016							0/6		