State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

	是是人是		(F	ursuant	to NJAC	8:60 an	d 12:120))	1.02	\mathcal{C}	KH	16	2	2	
Date of Notification (1)					of Building				111	10		# 10 # 12	17		- 1
4/23/18					ny Smel	ting &	Refining	g		ال الـ		· ;			
Agencies Notified Typ	e Notification				Address Harrison	۸			,	7)					
EPA DEP	Initial Amended		-		ate, Zip C			,			APR	27	2018		11
X DOL	Amendment #			-	ate, Zip C 1y, NJ	ode			}						
X DOH	Emergency (in	cluding	-		of Contact					I To	lephone Nu		111	10 1100	ţ
DOH DCA	justification) Cancellation								i		73-725-81			Q	
				FAC	ILITY INF	ORMAT	ION		<u>`</u>			-		100	
Name of Facility Where Abate Warehouse	ment is Taking	Place (3	3)					Туре	of Facility	(4)					
Street Address									School (K-						
936 Harrison Ave											er than K-1 & commerc		Idinas	hom	29
City (5)								incent.	etc.)	17			1730	1 17-2-170	
Kearny								11,0	re Feet	1 # 0	f Floors	- 1	Bldg. A	lge	
County (6)				County	Code (7)						ing demolis	- 11	50+		
Hudson					USE ONLY)			rehouse	וטו וו טכו	ing demons	neu)			
Name of Monitoring Firm Hired	d by Building Ov	vner (8)		ASCN	I No.		Name		tement Co	ntractor	(9)	+			
n/a									Contract						
Street Address	ddress						Street /								
n/a									ade Ave						
City, State, Zip Code n/a									ip Code						
Project Manager for Monitoring	Firm			Telepho	no No		Telepho		NJ 07026						
n/a	j i 11111		1	n/a	ne No.		9734				License N 01255	0.			
Start Date (10)	S	chedule	d Cor	. 1991/7797	Date (11)				HA Monitor		01200	_			
4/25/18	1000	5/15/18							Contract			-			8
Occupancy Status During Aba	tement (Check	Only On	e)				Street A					+			-
Facility Closed/Vacated D	ouring Entire Pe	riod of A	baten	nent			360 F	alisa	ade Ave						
Facility Closed/Vacated D Abatement Performed Ou Other – Describe: Sched	itside of Normal	Facility	Hours	3			0.50		p Code						
Scope of Work (Check All Tha							Garfi	eld, î	NJ 07026	5	3				
-	г Арргу)			22000											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Properties.	enova emolit				H		l Containm i-Enclosur		Negative F	ressu	re		
		Result		321.			×	Glo	vebag Pro	cedure					
								Not	n-Exempte	d (*) and	d Non-Friab	le Pro	22.0	72 00 000	
			Locati Iormal	\$100 State 1			200.00 .5 0.00.00.00.00.00							ment pe	
Location of Asbestos-Containing Mater	rial (ACM)	Use	d Sole	ly by	Asbes		scription of aining Ma		(ACM)	Δ	mount		П		
TO BE ABATED			ntena odial S			thermal	systems	insula		(S	Specify	Re	R	Enca	Enc
In Facility (13)			(12)	200000			cing, VAT			SF	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A				,				al	7	late	ıre
EXTERIOR			-110	-	-	00511	0.1447					1			-
EXTENION				X	H	OOFIN	IG MAT	EKIA	AL	11,0	000 SF	<			
ROOF WILL BE SEPE	TATED				AND	DISPO	DSED E	BY DI	EMO						
						CO	MPAN'	Y							
Name of Registered Waste Ha	uler			JDEP W		Cubic			Name of	Registe	red Landfill				
Spartan Environmental E	nterprises		H	auler ID	NO.	of Was	ste		Minerv	a Land	dfill	-			
City, State						1000000	al Date	_00	City, Stat	е		-			
Dennora, PA						TBD			Wainbe		Н				
Completed by		Title				S	ignature				Da	te			

Secretary

Tina Caporino

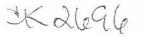
4/23/18

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

CIRCK # 1700

Date of Notification (1) 4/17/2018				f Building ston Ave				LC			6			7.7	
Agencies Notified Type Notification EPA Initial				Bonhom		enue						7			,
X DEP X Amended Amendment # Emergency (i		_	St. Lo	ate, Zip Co uis, MO		i					AP	E.	2.7	201	8
DOH justification) DCA Cancellation				f Contact m Vanm	atre				Telepi (314	hone) 72					3
Name of Facility Where Abatement is Taking Residential	Place (3)	FACI	LITY INFO	DRMAT	ION		of Facility (4			Lateral Control		+		15.0
Street Address							×	School (K-12 Subchapter Other (i.e. pi	8 (Other	than I	<-12) ercial	build	lings,	home	es,
City (5) New Brunswick								etc.) re Feet 0	# of FI	loors			ldg. A	ge	
County (6) Middlesex			County (Code (7) USE ONLY)				nt Use (Prio idential	r if being	demo	olishe	d)			
Name of Monitoring Firm Hired by Building O TBD	wner (8)		ASCM	1 No.				tement Contacting, LL)					
Street Address	72-0					Street 1385		ss ey Road, S	Suite K						
City, State, Zip Code							ip Code ew Jersey	07470							
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph (973)	one No 928-		100	icens 0874		8			
4/27/2018	5/30/20	18	npletion (Date (11)				HA Monitor acting, LL	С						
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Po			nent			Street 1385		ss ey Road, S	Suite K						
Abatement Performed Outside of Norma Other – Describe:	al Facility	Hours	3		_			ip Code ew Jersey	07470						
Scope of Work (Check All That Apply)	По	00010	tion			Г	1	I Cardain	21- NI				225		
≥160 sf or ≥260 lf	-	enova				×	Mir Glo	I Containme ni-Enclosure vebag Proce n-Exempted	edure					e	
		Locati												ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	d Sole intena odial S (12)	ly by nce/		os Cont thermal surfa	scription taining IV systems cing, VA niscellan	laterial s insula T, or		Amo (Spe SF or	cify		Removal	Repair	Encapsulate	Enclosure
Exterior - Window, siding joint	165	X	IN/A		С	aulking]		125	SF		x			
Basement		Х				Insula	5/4		1 L		-	х			
							2				+				
Name of Registered Waste Hauler		100-00	IJDEP W lauler ID		Cubic of Was	Yards ste		Name of R							
Service Transport Group, Inc. City, State			0990		TBD	esneo		Minerva		rises	, LL	C 			
New Castle, Delaware					TBD-	sal Date		City, State Waynes		hio					
Completed by Predrag Sarcev	Title Vice I	Presi	dent		S	ignature	Section of the Sectio				Date 4/17		18		



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Date of Notification (1) 4/10/2018					of Building				nc.			(C)	- 1		
Agencies Notified	Type Notification			Street A							1 /	IPI.	27	2018	
EPA DEB	× Initial				ute 202	•	ox 808	8		İ					
DEP X DOL	Amended Amendment				ate, Zip Ci IIs, NJ C						F.C.		16		7.8
□ DOH	Emergency justification)	(including	·		f Contact					Tele	phone N	umber		e y	1000000
☐ DCA	Cancellation				ominic S			e Presi	dent	10 000 000	8) 658-				
Name of Facility Where	Abatement is Takin	g Place (3)	FACI	LITY INF	ORMAT	ION	LType	of Facility ((A)					
Commercial Office		g / .acc (٠,						School (K-1	200					
Street Address									Subchapter	8 (Other	r than K-	12)			
395 Main Street									Other (i.e. p	orivate &	commer	cial bui	ldings	, home	es,
City (5) Hackensack								Squar 0	e Feet	# of I	Floors	1.59	Bldg. A	Age	
County (6) Bergen					Code (7) USE ONLY)			nt Use (Prio olished	or if bein	g demoli	shed)			
Name of Monitoring Firm TBD	n Hired by Building	Owner (8))	ASCN	/ No.		Name Sky	of Abate Contra	ement Cor acting, LL	ntractor (9)				
Street Address							(CO. 14, 1997)	Addres	s y Road,	Suite K					
City, State, Zip Code		-	-		-		City, S	State, Zip							1400
Project Manager for Mor	nitoring Firm			Telepho	ne No.			none No			License	No			
	9) 928-5		100	00874	INU.			10
Start Date (10) 4/11/2018		Schedul 4/30/2		npletion	Date (11)		A CONTRACTOR OF THE PARTY OF TH		A Monitor cting, LL	С					
Occupancy Status Durin	g Abatement (Chec	k Only O	ne)					Address							
Facility Closed/Vac	ated During Entire f	Period of	Abatem	nent					y Road,	Suite K					
Other – Describe:	ned Outside of Norm	nal Facility	y Hours	•		_	1 - 100 100 100 100 100	state, Zip ne, Ne	Code w Jerse	y 0747	0				
Scope of Work (Check A	All That Apply)								•						
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demoliti				×	Mini Glov	Containme -Enclosure rebag Proc -Exempted	edure				-	
		Is	Locati	on			-	11011	Excriptor	() and	INOTI-I TIE			ement	
Location	10.000		Normalled Sole		NO.2768 (C.R.)		scription						Ту	/pe	
Asbestos-Containing TO BE AB In Faci (13)	ATED (lity	Ma	intenar todial S (12)	nce/		thermal surfa	taining M systems cing, VA miscellar	s insulat T, or		(Sp	ecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								<u>m</u>		ate	Гe
Basement Wal	ls - Exterior		x		٧	Vaterpr	oofing	/Mastid		210	CY	x			
												-			
												+			
Name of Registered Was			100000	JDEP W auler ID		Cubic of Was			Name of F						
Service Transport G	roup, Inc.			990		40			Minerva	Enterp	orises,	LLC			
City, State New Castle, Delawa	ire					Dispos TBD	sal Date		City, State Waynes		Ohio				
Completed by Predrag Sarcev		Title Vice	Presid	dent		S	ignature	2.3				ate /10/20	017		



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Date of Notification (1)					of Building		Operator	٠.		in E	P	75-7 11-1		1 17	
4/23/18				Wave	rly Prop							643		itar.	7
Agencies Notified EPA	Type Notification				Address Linwood	Ave					APR	2	7 21	018	Secretary's Street
DEP × DOL	Amended Amendmen				ate, Zip Co .ee, NJ (2 277.00	10 000		- in
X DOH	Emergency justification)	(including		Name o	of Contact					Telepho	ne Nur	nber			. 0.
DCA DCA	Cancellation	1	, Ni		na River					201-58	35-75	12	: (*	1.0	
Name of Facility Where	Abatement is Takir	g Place (3	3)	FAC	ILITY INF	ORMA	TION	Ту	pe of Facility ((4)					
Linwood Gardens									School (K-1						
Street Address 2007 Linwood Ave								×	Subchapter Other (i.e. p etc.)	8 (Other that private & con	n K-12 nmercia	2) al buil	ldings,	hom	es,
City (5) Fort Lee								Sq	uare Feet	# of Floo	rs	E	Bldg. A	ge	
County (6) Bergen					Code (7) USE ONLY)			rrent Use (Pri		emolish	ied)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.			of A	AD PROFE	ntractor (9)	.S				
Street Address					131	Street 6 WH		ress E DOVE CO	DURT			ABO 10.000 EV.			
City, State, Zip Code						100000000000000000000000000000000000000		, Zip Code OOD, NJ 0	8701						
Project Manager for Mon	itoring Firm		Telepho	ne No.		Teleph 732-6		No. -9078	Lice	ense No	0.				
Start Date (10) 5/3/18		Schedule 5/10/18		mpletion	Date (11)				SHA Monitor AD PROFE	SSIONAL	 S				
Occupancy Status During	Abatement (Chec	k Only On	ie)				Street								-
Facility Closed/Vaca Abatement Performe X Other – Describe:	ed Outside of Norn	Period of Anal Facility	Abaten	nent s			City, S	tate,	Zip Code						
Scope of Work (Check Al							LAKE	= ٧٧	OOD, NJ 0	8701					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	lenova emolit				×	1	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				۵	
1	•	11000	Locat			200			Total Existing to	() und Hon	THUD		Abate	ement pe	
Location Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED	Use Mai	d Sole intena odial S (12)	ly by nce/		tos Cor therma surfa	escription ntaining M il systems acing, VA' miscellan	later s insi T, or		Amoun (Specify SF or LF	y	Removal	Repair	Encapsulate	Enclosure
4 Baseme	ents	100	140	1000		Pipe	e Insula	tion	ı	400 LF	=	x		0000	
															\dashv
Name of Registered Was	te Hauler		1.000	JDEP W			Yards		Name of F	Registered La	andfill				\dashv
NEWARK CARTING			1000000	lauler ID 4509	No.	of Wa	isie		IESI	8					
City, State NEWARK, NJ						Dispo 5/10	sal Date 118		City, State	EHEM PA					
Completed by JOSEPH PERLSTEII	N	Title OWN	ER				Signature		and the second second		Date	е			



Pam		(1		to NJAC				- T	1 M	fil '	1 3		12	111	
Date of Notification (1) 4/23/18				f Building trust Res					5			gr - ,19 die		-	in a contract of
Agencies Notified Type Notification EPA Initial			Street A 3525 F		it Rd N	NE - B	ldg	7, Suite 70	AP	R 27	7 2	018	-	السا	
DEP Amended DOL Amendment		_		ate, Zip Co a, GA 30				i.	V. 2.5.		· ,		; &		
Emergency (i justification) DCA Emergency (i justification) Cancellation	ncluding		Name of	f Contact						ephone 4-554-	Num	ber-		,	
			FACI	LITY INFO	DRMAT	ION			-						
Name of Facility Where Abatement is Taking 132 Hillcrest Ave	Place (3)					T	ype of Facility							
Street Address 132 Hillcrest Ave								Subchapter Other (i.e. petc.)					lings,	home	es,
City (5) Cranford								quare Feet 750	# 0	f Floors		В	ldg. A	ge	
County (6) Union				Code (7) USE ONLY)			1 33	urrent Use (Pri	or if bei	ng demo	olishe	ed)			
Name of Monitoring Firm Hired by Building C	Owner (8)		ASCN	A No.		111111111111111111111111111111111111111		Abatement Co		2005				- Tr	
Street Address						1988		Idress	OURT						
City, State, Zip Code								e, Zip Code VOOD, NJ 0	8701						
Project Manager for Monitoring Firm			Telepho	ne No.		Teler	hor	e No. 8-9078		License	e No				
Start Date (10) 5/3/18	Schedule	ed Co	mpletion	Date (11)	ns-ox-oxin	Name	e of	OSHA Monitor EAD PROFE							
Occupancy Status During Abatement (Check		ne)						Idress		IVALO					_
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm								TE DOVE Co	OURT						
Other – Describe:								VOOD, NJ 0	8701						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	X R	Renova	ation					Full Containm	ent with	Negativ	/e Pr	essu	e		
≥160 sf or ≥260 lf		Demol	ition				×	Mini-Enclosur Glovebag Pro	e cedure	,5-75					
	T	C		T				Non-Exempte	d (*) an	d Non-Fi	riable			ement	
Location of	1	Loca Vorma	ally		De	escriptio	n of						Ту	ре	
Asbestos-Containing Material (ACM)		id Sol- intena	ely by ance/	Asbes	tos Cor	taining	Mat	erial (ACM)		mount		_		m	m
TO BE ABATED In Facility		todial	Staff?	(i.e.	surfa	acing, V	AT,			Specify or LF)		Remova	Repair	caps	Enclosure
(13)		(12)	1	-	other	miscella	anec	ous)				oval	air	Encapsulate	sure
INTERIOR	Yes	No	N/A		Diag	. Inqui	otic		1	20 LF					
INTERIOR		-		-	Pipe	e Insul	auc)[]	1.	20 LF		X			
				 											
			1												
Name of Registered Waste Hauler			NJDEP W		100000000000000000000000000000000000000	Yards		Name of	Registe	ered Lan	dfill				
NEWARK CARTING		10.00	Hauler ID)4509	NO.	of Wa			IESI							
City, State NEWARK, NJ					Dispo 5/8/1	osai Dat 18	e	City, Sta BETHL		ЛРА					
Completed by JOSEPH PERLSTEIN	Title OWN	NER				Signatu	re	Antidana Conference			Dat	е			

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	I		ICATION	N OF ASB to NJAC	ESTOS	ABATE		1		EC		11/1	2017 - 120 121 123 123	
Date of Notification (1) 04-18-18				of Building ounty Se			(2)	The state of the s	M	APR	2 7	2018	, manufacture of the same of t	
Agencies Notified Type Notification			Street A	Address aple Ave									to an a second	Liveau.
EPA Initial DEP Amended Amendment	r	ŀ	City, Sta	ate, Zip Co	ode	27.40.4				6.7		 :::::::::::::::::::::::::::::::::	- Ĉ	
Emergency (i		- -	000000000000000000000000000000000000000	land Par	rk, NJ (07424			Tel	ephone Ni		en marie	erio esta	1.3%
DOH justification) Cancellation			Joe S			ugure o per see				73) 747-				
Name of Facility Where Abatement is Taking	Place (3	3)	FACI	ILITY INFO	ORMATI	ON	Type	of Facility (4	4)					
Private Home								School (K-1	2)					
Street Address							F	Subchapter Other (i.e. p etc.)				dings,	home	es,
City (5) Hamilton					H-V		Squa	re Feet	# 01	f Floors	E	Bldg. A	\ge	
County (6) Mercer				Code (7) USE ONLY)		Curre	ent Use (Pric	or if bei	ng demolis	shed)			24
Name of Monitoring Firm Hired by Building O N/A	wner (8)		ASCN	Л No.		CC 10 YEAR		tement Con tracting L		(9)				
Street Address			-			Street 522	Addres 7th St	5.50						
City, State, Zip Code								ip Code NJ 0708	7					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 201 2	one No 216-9			License I	No.			
	Schedule 04-26-		npletion	Date (11)				HA Monitor tracting LI	LC					
Occupancy Status During Abatement (Check	Only On	ne)				Street	Addres	ss						
Facility Closed/Vacated During Entire Package Abatement Performed Outside of Normal	eriod of A	Abatem Hours	nent			J-11-11-11-11	7th St tate, Z	ip Code						
Other – Describe: Scope of Work (Check All That Apply)						Unio	n City	NJ 0708	7				97	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				r	Mir Glo	l Containme i-Enclosure vebag Proc n-Exempted	edure				e	
		Locati										Abate Ty	ement pe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cust	d Sole intenar todial S (12)	ly by nce/ Staff?		tos Cont thermal surfac		laterial s insula T, or		(S	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
Exterior Garage	Yes	No X	N/A			Siding			81	0 SF	X			
Exterior Garage		^				Jiding				0 01	Δ			
Name of Registered Waste Hauler		1	IDED !	lasts	Codes	Varde		No	Daniel .	d I 150				
Delfa Contracting LLC		100300	JDEP W auler ID 35240	No.	Cubic of Was			Name of F Tullytow	2			ery F	acilit	ty
City, State Union City, NJ	Alter IV		(4)			al Date 3-18		City, State Tullytow				111111111111111111111111111111111111111		
Completed by Jaime Delgado	Title Proj.	Mana	ager.		S	ignature	1	鱼			ate 4-18-	18		

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Date of Notification (1)										1						
04/24/18					of Building Realty A						A	PR	2 7	201	3	
Agencies Notified	Type Notification				Address	155001	ales Li									
⊠ EPA	☐ Initial				Cooper F	Road				1	AS:			43.		الم
X DEP	X Amended		f		ate, Zip Co						ا میسانسد در					
☑ DOL	Amendment Emergency			West	Berlin, N	NJ 080	91									
⊠ DOH	justification)		1		of Contact					Te	lephon	e Nur	nber			
☐ DCA	Cancellation	l)			Gottlieb					8	56 620	6 15	17			
Name of Facility Where	Abatement is Takin	g Place (3)	FAC	ILITY INFO	ORMAT	ION	Typo of	Facility (41						
Camden Commodi	ties Internation	al	0,						1920/0	(ii)						
Street Address			100,00						hool (K-1 bchapter		er than	K-12)			
1895 Federal Stree	et								ner (i.e. p					dings	, hom	es,
City (5)				8				Square		# 0	f Floors	s	E	Ildg. A	Age	-
Camden, NJ 08105	5							104,00	00	2				38		
County (6)				County	Code (7) USE ONLY				Use (Prid	or if be	ing den	nolish	ed)			
Camden	History D. Hall	0 /0						Wareh								
Name of Monitoring Firm Health & Safety Se	and the second section of the second	Owner (8)	ASCI n/a	√l No.			of Abater	nent Con	tractor	(9)					X2 4744-039 (4.53)
Street Address	I VICES IIIC			11/a	·			Address		-						
318 12th Street								D Federa	al Stree	a †						
City, State, Zip Code						E	State, Zip (,,,			_				
Hammonton, NJ 08	3037						iden, N.		5							
Project Manager for Mon	itoring Firm		T	Telepho	ne No.			none No.			Licen	se No).			
Jim Proctor					52 1311		856	630 328	88		013	03				
Start Date (10) 09/11/17				npletion	Date (11)			of OSHA	OSCIPLANTA TO T							
Occupancy Status During	Abstament (Chae	06/30/						monitor								
Towards .		0.53	156				Street	Address								*
Facility Closed/Vaca Abatement Perform	ed Outside of Norm	eriod of a	Abatem v Hours	nent			City S	tate, Zip 0	`ode	-						
Other – Describe:						_	Oity, C	tato, zip c	Jouc							
Scope of Work (Check A	Il That Apply)															
≥3 sf or ≥3 lf		□ F	Renova	tion			×	Full C	ontainme	nt with	Negat	ive P	ressui	re		
≥160 sf or ≥260 lf		X	Demolit	ion			-	Mini-E	nclosure		3					
							×		bag Proc xempted		d Non-l	Friabl	e Pro	cedur	е	
			Locati												ement	t I
Location			Normalled Sole				scription							Ty	ре	
Asbestos-Containing TO BE ABA	Material (ACM) ATED	Ma	intenar	nce/				laterial (A			mount specify		ZJ		E	ш
In Facili (13)	ty	Cus	todial S (12)	staff?	,	surfac	cing, VA	T, or	"		or LF)		Removal	Repair	caps	Enclosure
(13)				Τ		otner n	niscellar	leous)					val	air	Encapsulate	sure
		Yes	No	N/A											0	
Basement/Wa				Х			TSI			27	79 LF		x			
2nd FL/1st Fl				X			VAT			55	00 SF		x			
Heater R				х		T	ransite)		7	0 SF		х			
Alcove Area/W				х			VAT				45 SF					
Name of Registered Was	te Hauler		1.4	JDEP W auler ID	Wildling Lower Co.	Cubic of Was		N	ame of F	Registe	red Lar	ndfill				
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Date of Notification (1)			Name	of Buildin	a Owner	Operator	(2)	1111	A E	15	*	-	j	-
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(13)		(12)			other m	niscellane	ous)	`	, or <u>u</u>		Remova	Repair	Encapsulate	Enclosure
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New Jersey Department of Health
Consumer, Environmental and Occupational Health Service
PD Box 359

Tranton, NJ 08625-0369
Telephone: 609-826-4970 Fax: 609-826-4975

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NOTIFICATION OF NON-FRIABLE ASBESTOS WORK ACTIVITIES

Must be submitted 10 days prior to the beginning of work. Please type or print legibly. . . I., NOTIFICATION INFORMATION. 24 / 2018 Date of Nothication: ✓ Initial ☐ Amended ☐ Cancellation Type of Work: Demolition ☑ Renovation County of Camden Name of Building Owner/Operator; City: Camden Street Address: 520 Market Street State: NJ 08101 Name of Contact: Mike Hagarty Telephone No.: 856-868-0398 III. PACILITY INFORMATION Name of Facility Where Work Activity is to Take Place: Camden City Hall City Hall Describe Facility Use: Street Address: 520 Market Street City: Camden _ State: NJ County Name: Camden County Code (State Use Only): Scheduled Start Date: 04 / 24 / 2018 Scheduled Completion Date: 04 / 26 / 2018 Occupancy Status During Activity (check only one): ☐ Facility Closed/Vacated During Entire Activity Activity Performed Outside Normal Facility Hours—Describe: 4pm-12am Other-Describe: Scope of Work (check all that apply): X Floor Tile 100 SF Square Footage: Percentage Asbestos: Mastic Mastic 100 SF Square Footage: Percentage Asbestos: EV: CONTRACTOR INFORMATION Company Name: Shade Environmental, LLC Telephone No.: 856-755-0099 Street Address: 623 Cutter Avenue City; Maple Shade State: NJ New Jersey Asbestop License Number (if applicable): Monitoring Flrm (if applicable): TTI Environmental, Inc. Telephone No.: 856-840-8800 V. SIGNATURE Completed By (type or print legibly): Christina Lynch Title: Vice President of Operations Signature: Date: April 24, 2018

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□ DOH	justification)	9		f Contact				Te	elephone Nu	mber			
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Atlantic					USE ONLY	n		ourion coo (i	1101 11 00	ang demons	i icuj			
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City, State, Zip Code								tate, Zip Code						
							Wes	t Berlin NJ 0	3091					
Project Manager for Mon	itoring Firm			Telepho	ne No.			one No. 753-9800		License N 00727	lo.			
Start Date (10) 5/4/18		Schedul 5/11/1		mpletion I	Date (11)		Name o	of OSHA Monito	or					
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21787

Title

President

Pernaco Inc.

W. Berlin NJ

Anthony T Perna

Completed by

City, State

Egg Harbor Twp NJ 08234

Date

4/24/18

ACUA

City, State

Disposal Date

Signature

5/11/18

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Trenton, NJ 08625-0369 Telephono: 609-826-4950 Fax: 6

Fax: 609-826-4975

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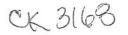
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NOTIFICATION OF NON-FRIABLE ASBESTOS WORK ACTIVITIES

Must be submitted 10 days prior to the beginning of work. Please type or print legibly

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Type of Work;	ition 🖾 Re	enovation					
		· IL BUIL	DING INFORMA	TION		1, 7,	1 1, 7
Name of Building Owner/Op	perator:		The Est	ate of Doris Grego	ory		
Street Address:		City:	Hamilton	State:	NJ	Zip:	08690
Name of Contact: Rene	1		3	Telephone No.			
			a sens a deconstant				
				TION			
Name of Facility Where Wo	rk Activity is to T	îake Place: _			is Gregory	<u>/</u>	
Describe Facility Use:				dence			
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County Name: Mercer			_ County Cod	de (State Use Only):			
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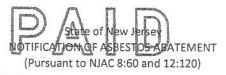


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Name of Monitoring Firm	Hired by Build	ding Ow	vner (8)	ASCM	No.			ent Contractor (9 es Corpora					
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Name of Registered Wast	te Hauler			I N	JDEP V	Vaste I	Cuh	oic Yards of	Name of Regis	stered I andfill		1	ш	
Tri-State Tran		C.				No. 4551	Was		1000	a Enterpris	ac Ir	10		
City, State		-			1	4001	Dier	oosal Date	City, State	a Litterpris	J3, II	10		
Bronx, NY							اداد	TBD	Wayn	esburg, Oh	1			
Completed By (Print or Ty	rpe)	Title	000	Rene •				Signature /	2/2 //		Date	0.00		
Gina Betance	es		Off	ice I	Mana	iger		(E	livas -			04/2	3/2	018

State of New Jersey

*2	PAII	No.	NOTIF	ICATION	OF ASBESTOS ABAT JAC 8:60-7 and 12	EMENT	The state or an artist of the state of the s	فعلو مرين لإلينا ومرموض	CELLAND, MATERITY		
Date of Notification	(1)	ali.			ing Owner/Operato		THE C	元 1	7.7		17.
4/24/1 Agencies Notified	8			ngel			XITT.	8.	5. 100	-	
±	Type Notific	ation	Street	Addres			APR	77	2019	- 1	
[]EPA	[X] Initial Notifie	ration				7	A AIN	41 1	2010	1	
[]DEP		Jacion	City,	State,	Zip Code						
[X] DOL	[]Amended Notific	cation	1140	ntci	air, NJ, (57042	Fair in a			â.	
[X] DOH	[]EMERGENO	225		f Contac			hone Number		,	-	
[]DCA			11 Ar	ap11	7	1					
	[]Cancella	tion	11	100	1					_	
Name of Facility When	e Abatement	is Tak	ing Plac	e (3)	IY INFORMATION	Type of Fac	2124 741				
	We		20000 - 1.50VARIE 1000								
Street Address							ol (K-12) apter 8 (Oth	er tha	n K-1	.2)	
						[x]Other	(i.e., priva	ate &	comme	r-	
G						Square Feet	buildings, h				
City (5)		County	(6)		County Code (7)	oduare reec	# of Floo	ors E	stag.	Age	à:
Montclair	-	ES	SEX	ĺ	(STATE USE ONLY)	Current Use	(Prior if be	ing de	emoli	shed	d)
Name of Monitoring Fi	om hirod bu		-			Resider	ice	278			
Owner (8) N/A	.m .hred by .	Bullain		No.	Name of Abate						
Street Address			67			IANAGEMEN	T, Inc.	0.00			
					Street Address	topher S	_				
City, State, Zip Code					City, State, 2		L.				
			(ii		Montclai		042				
Project Manager for Me	nitoring Fir		lephone 1	Number	Telephone Numb		E	icense		per	
Scheduled Start Date (10)	N/			(973)744			0037	71		
05- 07- 18 Month Day Year		S- Compl	etion Da	ate (11) 8 Sear	Name of OSHA M	fonitor					
Occupancy Status Durin [X] Facility Closed	G Abatement	(Check	only one	1	Street Address						
of Abatement []Abatement Penfo											
Hours - Describ	e: nffHours	Descrip	ot»		City, State, Z.	ip Code					
[]other - Describ			Descrip	<u>t»</u>							
Scope of Work (Check &	1 that appl	У)			[]m.12 c						
[∑i≥3 sf or .º []≥160 sf or	1f ≥260 lf	17	[]Renovat		⊠Mini-E [XiGloveb	containment w inclosure mag Procedure miable Proced		Press	ure		
Location of		To	Is cation					Aba	temer	it T	ype
Asbestos-Contai		No	rmally Used		Description Asbestog-Conta		Amount	R		EN	E
Material (AC		S	olely Main-		Material (A	CM)	(Specify	E	RE	C	C
TO BE ABATE		te	nance/	i	(i.e., thermal surfac	systems	SF or LF)	0	PA	PS	L O S
(13)		Sta	ff (12)		or other miscell		1 22,	A	R	U	U R
Basement		Yes	No N/	A O	De insulati	00	7515	- 1/	-	-	E
			1	1	The HENRICETI	1.01	1.3 61	TX.		-	
				+				+-!	+	\dashv	-
-				1				-	T i	+	
Name of Registered Wast			EP Waste	Cu	bic Yards	Name of Regi	stered Landfi	11		_	-
AZTECH MANACEM	ENT, INC	. Hau	le:: ID N	o. of	Waste 0	Mineria	Saleron	02	1211	_	
ity, State		1	0.10	Di	sposal Date	City, State	CATELLA	JC_	IN (-	
Montclair, NJ C	7042			-2	2/10/18	wing it	eura thi	F, 4	:46	RK	2
ompleted By (Print or					Signature	1 1 1)ate		-,-	
Constantine Vivi		siden	t		/ enstan	Lines la	10-	ate	24/1	8	

Ch alle



Ck# 216 4/24/18 Check# 1065

Date of Notification	(1)				g Owner/Operator (2)		Г					
4/16/18			Berge	en Cour	nty Department of	Public Works		m F G	1	1	$/\!\!/$	F
Agencies Notified	Type Notification		753363330	Address	2 500%						*******	-
⊠ EPA	⊠ Initial				ounty Plaza							-
☐ DEP	☐ Amended		The Control of the Co	ate, Zip Co				APR :	2 7	20	10	55.5
⊠ DOL	Amendment #	_		200000000000000000000000000000000000000	k, NJ, 07601			leul less	2 /	EU	10	***
EN DOLL	☐ Emergency (including			of Contact			Telephone Nu					and and
☑ DOH ☑ DCA	justification) Cancelation		Scott	Luna			201-336	6804 ASSESTO	S ESE		ROL	_ &
E DCA	Lancelation			FΔ	CILITY INFORMATI	ON		ASSESTON	81671	NG		
Name of Facility Who	ere Abatement is Taking Place (3)			170	CILITY IN ONIVIATI	Type of Facility (4)		and the second district of the property of the	ACCURACY OF TAXABLE	925465626	a compa	
(9)	y Justice Center Courthouse	2				☐ School (K-1	21					
Street Address	.						8 (Other tha	n K-12\				
10 Main St.								mmercial buildings, h	aama	vr. ot	c)	
						Other (i.e.)	nivate & Con	innercial bulluings, i	IOTHE	:s, et	c.,	
City (5)						Square Feet	# of Floors	Bldg. Age				
Hackensack						342,797	5	1957				
County (6)					Code (7) USE ONLY)	Current Use (Prior if be	ing demolished	1)				
Bergen				STATE	03E ONET)	Courthouse						
20	Firm Hired by Building Owner (8)				ASCM No.	Name of Abatement C	ontractor (9)					
Omega Enviro	nmental Services, Inc				00120	Unicorn Contrac	ting Corp.					
Street Address						Street Address						
280 Huyler Stre	eet					32 Willow Way	Halabania I. Seed Head See					
City, State, Zip Code						City, State, Zip Code						
South Hackensa	ack, NJ, 07606		ALSO CARROLL TO THE PARTY OF TH			Woodland Park,	NJ 07424		-5-858	000		
Project Manager for	Monitoring Firm			Telepho	ne No.	Telephone No.		License No.				
Alex Palets				201-4	81-6209	973-333-9176		01331				
Start Date (10)												
	of Asbestos Permit From Bldg.				etion Date (11)	Name of OSHA Monito		_				
Dept. Occupancy Status Du	ring Abatement (Check Only One)		10/20	/2018		Envirovision Con	suitants, inc	C				
		. J _£ ^!	020	14		Street Address	טין חואי סנ					
	osed/Vacated During Entire Perio			11		20-21 Wagaraw I	(a., Blag. 35	D-E				-
	nt Performed Outside of Normal		Hours			City, State, Zip Code	410					
Other - De Scope of Work (Check		am	T			Fair Lawn, NJ 07	410			-		
STEEDED	500 N		100			W						
≥3 sf or ≥3			X	Renova		12-12-13-13-13-13-13-13-13-13-13-13-13-13-13-		egative Pressure				
≥160 lf or	≥260 If			Demoli	ition	Mini-Enclose						
						☑ Glovebag Pr						
			1.1			■ Non-Exempt	ted (*) and N	on-Friable Procedur	e	Abat	emen	t
	Location of		Is Locatio Normally	-		Description of					/pe	
Asbestos	-Containing Material (ACM)		sed Solely	by	Asbesto	os Containing Material (A	CM)	Amount				
	TO BE ABATED	199	aintenan	69 3 0 H	(i.e. t	hermal systems insulatio	n,	(Specity	1		m	
	In Facility	Cu	stodial St (12)	aff?		surfacing, VAT, or		SF or LF)	Re		псар	Enc
	(13)	Vec		NI/A		other miscellaneous)			Remova	Repair	Encapsulate	Enclosure
Dle	and Con Attacked	Yes	No	N/A					<u>a</u>	=	ê	6
rie	ase See Attached								+	-		
									+	-	-	-
									+	-		\vdash
Name of Desistant Living	Mana Hardar		ALIDED	/aste Hau	les ID No	Cubic Yards of Waste		Name of Co.	<u></u>	7611		Щ
Name of Registered V			00358		ier ib No.	A TOTAL CONTRACTOR OF THE PROPERTY OF THE PROP		Name of Reguster Fairless Hills L				- 1
Unicorn Contrac	cting corp.		00338	44		20+ CU YD			anu	111	-	-
City, State	Navy Iorany					Disposal Date		City, State Morrisville, P	٨			
Woodland Park,	, New Jersey					TBD Signature	/ /	pivior risville, Pi			_	-
Completed by		Title	-144-			Jagnature.	11	//	Date		9	
Dimo Golcev	The second secon	Gener	al Man	ager		1//	1	/	4/1	6/18)	

State of New Jersey Notification of Asbestos Abatement Continuation Sheet



		Locat	11/20/10/10					ement /pe	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Use Mai	lorma d Sole intena codial (12)	ly by nce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						
Gorund Floor Boiler Room	Х			Interior Transite Windows	220 SF	X			
1st Floor Admin Bldg Main Lobby		Х		TSI/Fittings	50 LF	Х			
2nd Floor Admin Bldg Office Space		X		TSI/Fittings	525 LF	Х			
2nd Floor Admin Men's & Women's		X		TSI/Fittings & Debris	50 LF	Х			
Restrooms 2nd Floor Admin Men's & Women's Restrooms		Х		Wire Insulation	10 LF	Х			
2nd Floor S. Annex Office Space		Х		TSI/Fittings	270 LF	Х			
2nd Floor S.Annex Men's & Women's Restrooms		Х		TSI/Fittings & Debris	120 LF	Х			
2nd Floor Room 213 Offices & Corridor		Х		TSI/Fittings & Debris	2,500 SF	Х			
3rd Floor N. Annex Men's & Women's Restrooms		Χ		TSI/Fittings	50 LF	Х			
3rd Floor Admin Bldg Corridor		Х		TSI/Fittings	15 LF	Х			
3rd Floor Admin Bldg Elevator Lobby		Х		TSI/Fittings	15 LF	Х			
4th Floor Admin Bldg Elevator Lobby		Х		TSI/Fittings	15 LF	Х			

3h470	I	N	ITC				BES	Jersey STOS ABAT 3:60 and 5:1		DE	; G [E			n n n
Date of Notification (1)	1			9	Name	e of Buildin	g Ov	vner/Operator ((2)						100000
04/	24 /	18	2		Ge	rald Fraz	ee				APR	2 7	20	18	1
Agencies Notified	Type Notific	cation			Stree	t Address									7
⊠ EPA	☐ Initial									AS	BESTO	3 (3	OWN	OL.	8
☑ DOLWD	Amende Amendm				City,	State, Zip (Code			And the second s	E-1720	710	Ma	is accompany	uh-et-rox
DCA	☐ Emerger		dina		Bri	elle, NJ 0	0873	80							
(NJAC 5:23-8)	justificat		9		Name	of Contac	t			Telephon	e Numbe	r			
	☐ Cancella	ition			Ge	rald Fraz	ee			7					
		=			FA	CILITY IN	IFO	RMATION		I					
Name of Facility Where A	Abatement is	Taking Pl	ace	(3)					Type of Facility	(4)					
Frazee Residence									School (K-1						
Street Address									Subchapter Other (i.e., phomes, etc.	rivate and c		al bu	ilding	ļS,	
City (5)						19			Square Feet	# of Floo	ors	Ble	dg. A	ge	
Brielle									1,500	2		1	80		
County (6)					Cou	nty Code (7	7)(STA	ATE USE ONLY)	Current Use (P	rior if being o	demolishe	ed)			
Monmouth									Residence						
Name of Monitoring Firm			14.7	200	ASCM	No.	Na	me of Abateme	ent Contractor (9)					
Management & Env	riro. Consu	Iting Se	rvic	es			5	Shade Enviro	onmental, LLC						
Street Address							239.00	eet Address							
PO Box 341							6	323 Cutler Av	/enue						
City, State, Zip Code								y, State, Zip Co							
Chesterfield, NJ 085								Maple Shade	, NJ 08052						
Project Manager for Moni	toring Firm				phone		1	lephone No.		License					
Bill Weisgarber		0-11-1				-4070		356-755-0099		00842	2				
Start Date (10)05 /03 /		Schedule 05		0.000		18		me of OSHA M EMSL Analyti							
Occupancy Status During							Stre	eet Address							
☐ Facility Closed/Vacate							2	200 Route 13	0 North						
Abatement Performed Time of Abatement:	Outside of N	ormal Fac	cility	Hour	s - Des	cribe	City	y, State, Zip Co	ode						
1.5						/ IVI	C	innaminson	, NJ 08077						
Scope of Work (Check all	that apply)	M	Ren	ovati	on				ainment with Neg	gative Press	ure				
☐ ≥160 sf or ≥260 lf				nolitio				Glovebag		n-Friable Pr	ocedure				
				ocat					3			_	ateme	ent Ty	/pe
Location of Asbestos-Containing N		n 1		ormal Sole		A - L	-4-	Description of		3	.		_		
TO BE ABA		"	Mair	itena	nce/			Containing Matermal systems i		Amou (Speci	500.00	Removal	Repair	Encapsulate	Enclosure
IN Facility	у	0	usto	dial (12)	Staff?	,	S	surfacing, VAT,	or	SF or L		val	_	Sul	sure
(13)		Ye	96	No	N/A	1	oti	her miscellaned	ous)		1			ate	
Bathroom						Linoleu	m			40 SI	_				П
										40 01				귀	믐
			-												믐
			-	<u> </u>										님	
Name of Registered Waste	e Hauler				JDEP V	Vaste	Cuh	oic Yards of	Name of Regis	tered Landfi		ш		ш	Ш
Freehold Cartage				H	auler IE	No.	Was		Fairless La		11:				
City, State					15939			posal Date	City, State						
Freehold, NJ							i)	5/04/2018	Morrisville	, PA					
Completed By (Print or Ty	pe)	Title						Şignature		La Sangalana	Date				_
Christina Lynch	2 (5)	Vice	Pre	side	nt of (Operation	ıs	Ohsla	此	>			18		

mergency	NOTIFICATION (Persuant	ate of New Jersey of ASRESTOR ARL to NJAC 5:60 and 12	ATEMENT (120)	DE C	E I	₩ [4]	
Date of Notification (1) Agencies Notification DEP DEP DOL DOH DOA DOA DCA DCA Amendment DCA Cancellation	Sheet A City, Sta	rte, Zip Code	4 14	IND I	\/ 300.0	1028	<u> </u>
Name of Facility Where Abetement is Taking Street Address City (5) City (5) City (5)	RAC	FILE DAMES	D Bubahasal		al buildir	nga, hami lg. Ago	-
County (8) Name of Monitoring First Hilled by Building (Street Address City, State, Zip Code	STATE Series (8) ASCI	N/A	Sink	rior it being demolis (ans) (a	Dragies	To See	
Prologi Manager for Modeling of Irm Start Date (10) 4-2-5-18 Cetupancy State During Absternant (Check Facility Closed/Vacated During Entire I	Scheduled Completion 4 - 2 5 k Only One) Ferlad of Abatement	7.58-3365 G Date (11) 0-/E	EP(Te	Lione chnologics a 337	\$3 	94	
Scope of Work (Check All That Apply) 23 of or 23 if 2180 of or 2280 if	Renovation		O Min Endos	ment with Negativo	ole Prop	eduro	v
Location of Assessor-Combining Material (ACM) TO SE ABATED In Facility (13)	Is Location Normally Used Sclety by Resistences/ Custodies Statt? (12) Yes No N/A	Asbestoe Contain (i.e. thermal sy surfacing	iption of ing Material ACIA) stems insula on, g. VAT, or callaneous)	Amount (Specify SF or LF)	91	Typa Encapsulate	Enclosura
Basement	X		A Tile	400 SF	Y		
Name of Registered Wester Hauter EPC Technologie City, State New Egypt	NJDEP V Hauter III NJ	Disposal	Q. Wa:	unisville	ment PA		
Steve Schenker	President		The Sel	when	4-	24-1	ď

r 24 2018 16:02 NJ ASDESTOS CONTOU 003.000.00

Date of Notification (1) 4/24/18					of Building		Operator	(2)		3 6			7	П	2 [
Agencies Notified	Type Notification				Ziccard Address)	<u> </u>	5 1	1	/ [
EPA DEP X DOL	Initial Amended Amendment Emergency justification)	#(including	_	City, St North	ate, Zip C	eld, NJ			To the state of th	A	85	2 7	20		Tistinoscept cat attacts.
DOH DCA	Cancellation			Judy	Ziccardi								;	iUL	čí
Name of Facility Where	Abatement is Takin	g Place (3)		FAC	ILITY INF	ORMAT	ION	Type of F	acility (4)				Ē		************
Home		3 (0)							ool (K-12)						
Street Address								Sub	chapter 8 (Ot er (i.e. private	her than k & comme	(-12) ercial b	uildir	ngs,	home	es,
City (5) North Plainfield								Square F		of Floors		Bld 60	g. A	ge	
County (6) Somerset					Code (7) USE ONL	n		Current U	Jse (Prior if be	eing demo	lished)				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.		1	of Abatem	ent Contracto mental Ser		LC				
Street Address							Street	Address	4 E Gate I						
City, State, Zip Code							City, S	tate, Zip C							
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	one No. 764-227		License	e No.				
Start Date (10) 5/3/18		Con	npletion	Date (11)			of OSHA N		703						
Occupancy Status During	Abatement (Chec	5/14/18 k Only One)				Street	Address							
Facility Closed/Vaca Abatement Performed Other – Describe:	ated During Entire F	Period of Al	aten	nent				tate, Zip C	ode						
Scope of Work (Check Al	I That Apply)					A						1000			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	47.77	promoted .	nova molit				×	Mini-Er Gloveb	ntainment wit nclosure ag Procedure cempted (*) ar				dure		
		ls L	ocati	on					lompiod () di	14 14011 17	I I I I I I I I I I I I I I I I I I I		bater	ment	
Location Asbestos-Containing	A STATE OF THE PARTY OF THE PAR	No Used	rmall Sole		Aabaa		scription				-	-	Тур	e	
TO BE ABA In Facili (13)	TED `		dial S (12)	staff?	(i.e.	thermal surfa	systems cing, VA niscellan		, (Amount Specify F or LF)	Kellioval		Repair	Encapsulate	Enclosure
baseme	nt	Yes	No	N/A							_	1	_	Ф	
Daseme		X		pipe	insulat	ion	1	00 LF	x	-	+				
				-							+	+			
						versence						T	1		
Name of Registered Wast	e Hauler		1000	JDEP W auler ID		Cubic of Was			me of Registe						
Freehold Cartage			15	5939		TBD	****		estern Ber	ks Land	lfill				
City, State Freehold, NJ						Dispos	al Date	100	ty, State irdsboro, P.	A					
Completed by A. Scott Higgins		Title Presid	ent				ignature	//1			Date 4/24/	1.0			
								1			7/44/	10			

CHECK # 270

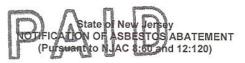
Date of Notification (1) 4/17/2018		LI	Name	e of Building Ov	vner/Operat	or (2)	Provide de la constante de la	TP 16	1 00		the state of
Agencies Notified Type Notifica	4:		78 E	aston Ave U	Jrban Rer	newal LLC				1	\mathbb{W}
EPA District	tion			t Address 1 Bonhomme	e Avenue						
X DEP X Amende	d		City, S	State, Zip Code				AP	R 2	7 2	018
Emerge	ncy (includ	dina		ouis, MO 63	105			2			
DOH justificat	on)	9		of Contact	ia		Teleph	none Num	ber 3	700	120
	207.07			Tim Vanmatr			(314)	721-55	59	SING	ž
Name of Facility Where Abatement is Ta Residential	aking Plac	e (3)	- 17	CILIT INFORI	MATION	Type of Facili	ity (4)				
Street Address						School (
						Subchar	oter 8 (Other ti	han K-12)			
City (5)						CLC.)	e. private & co	ommercial	buildir	ngs, h	omes
New Brunswick						Square Feet	# of Flo	oors		g. Age	9
County (6) Middlesex			County	Code (7)		3,400	2		100)+	
			(STATE	USE ONLY)		Current Use (I Residential	Prior if being o	demolished	1)		
Name of Monitoring Firm Hired by Buildin TBD	ng Owner	(8)	ASC	M No.	Name	of Abatement C	Contractor (9)		-		
Street Address					Sky	Contracting,	LLC				
						Address					
City, State, Zip Code						Valley Road	I, Suite K				
Desired					Wavr	tate, Zip Code ne, New Jers	ev 07/170				
Project Manager for Monitoring Firm			Telepho	ne No.		one No.		ense No.			
Start Date (10)	T					928-5040		874			
4/27/2018	5/30/2	uled Co 2018	mpletion	Date (11)		of OSHA Monito					
Occupancy Status During Abatement (Ch						Contracting, L	LC				
Facility Closed/Vacated During Entire Abatement Performed Outside of No.	Dorind at	E A I 1	ment			Valley Road,	Suite K				
		100				ate, Zip Code e, New Jerse	ev 07470				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	_						-, 0. 170				
≥ 160 sf or ≥260 lf		Renova Demoli			×	Full Containm Mini-Enclosur Glovebag Pro	e cedure				
	Is	s Locati	ion			Non-Exempte	d (*) and Non	-Friable Pi			
Location of Asbestos-Containing Material (ACM)		Normal ed Sole	lv	D	escription o	f				temen ype	t
TO BE ABATED	Ma	intenar	nce/	Asbestos Co	ntaining Mai	terial (ACM)	Amount		T	Im	
In Facility (13)	Cus	todial S (12)	Staff?	surf	al systems in acing, VAT,	or	(Specify SF or LF	Ren	Re	Encapsulate	Enc
	Voc		T	other	miscellaneo	ous)	0. 0. 2.	Removal	Repair	psula	Enclosure
Roof	Yes	No	N/A					-		ate	e
Roof - Chimney		Х			hingles &		1,300 SI	F x			
- tool Chiminey		Х		Flas	hing Mas	tic	15 SF	х			
	-										
ame of Registered Waste Hauler		l NI	IDEP Was	ato lo							
rvice Transport Group, Inc.		Ha	iuler ID No 990	o. Cubic TBD	Yards ste		Registered Lar Enterprise				
y, State w Castle, Delaware					sal Date	City, State					
mpleted by	Title				Signature	vvaynes	burg, Ohio				
edrag Sarcev	Vice F	Preside	ent		S. S. C.			Date 4/17/20	110		

State of New Jersey

n.E	C			Print	Eorm)	
СНЕСК	#\$ B 89	2	7	2018		

MOUN				ICATIO	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE		Т	Executive Contraction of the Con	HECK	#55	89	2 7	201	8
Date of Notification (1) 04-23-18				Name of Medo	of Building to Health	Owner/ Soluti	Operator ions, In	(2) c. (d	lba Expre	ss Scr	ipts)	DE:	77.00	S CX	NTR	OL 8
	Type Notification			Street /	Address				6	an entre	- Con	restation to		Mol		e entred start
DEP DOL	Initial Amended Amendment	# 1	ŀ		ate, Zip C		7447									- 10 m /
ĭ DOH	Emergency (-		of Contact	S, NJ (07417			Tel	lephone	Nun	ber			
DCA C	Cancellation			Mace							01) 26					
Name of Facility Where Ab	atement is Taking	Place (3)	FAC	ILITY INF	ORMAT	ION	Type	e of Facility	(4)						
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Name of Monitoring Firm Hi BEM Systems, Inc.	ired by Building C	wner (8)	ASC	M No.			of Ab	atement Co							
Street Address 100 Passaic Ave							Street	Addre		iciliai	corp.				2-2-7	
City, State, Zip Code							City, St	tate, 2	Zip Code		-					
Chatham, NJ 07928 Project Manager for Monitor	ring Cirm			Talaaha	11-				, NJ 0707	2						
Venkat Balasubramar	nian			30	598-260		Teleph 201-9				Licens 0075					
Start Date (10) 04-24-18(1)Project Po	ostponed	06-30-	18	npletion	Date (11)		Name of Even-		HA Monitor Inc.					Q= W		
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X Facility Closed/Vacate Abatement Performed Other – Describe:	d During Entire P Outside of Norma	eriod of	Abatem y Hours	nent					Zip Code	enue						
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	пат Арріу)	_	Renova Demoliti				×	Mi Gl	ill Containm ni-Enclosur ovebag Pro on-Exempte	e cedure					e	
		1	Locati												ement pe	
Location of Asbestos-Containing Ma TO BE ABATE In Facility (13)	aterial (ACM)	Use Ma	Normali ed Sole intenar todial S (12)	ly by nce/		tos Cont thermal surfac	scription of aining Management of the series	ateria insul , or	ation,	(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
0.4.0		Yes	No	N/A											e	
3A: Gym				X		- Colonies	proofin				00SF		х			
3A: Corridor \			X	SI		ck Com	· Control of	nd		30SF		х				
2A: Kitchen Pre	p Area		X		Fire	proofin	g		1,0	00SF	-	х				
Name of Registered Waste I	Hauler		N.	JDEP W	aste.	Cubic '	Yards		Name of	Register	red Land	4611				
ATC, Inc. / JBT (50071			Ha	auler ID 310	10.13(8)70	of Was			Minerva	- 1						
City, State Shirley, NY / Bronx, NY	,					Dispos TBD	al Date	4	City, Stat		OH 44	1688	3			
Completed by Kevin Moriarty		Title Proje	ct Ma	nager		Si	gnature		(6	A		Date 04-	23-1	8		

credit			NOTIF	FICATIO	State of New ON OF ASB of to NJAC	EST	OS ABATI	EMEN 20)	NT		EC) E	Classic	M		
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	Type Notification			Street	Address East Main	•				had been	996					house
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E DOH	Amendment Emergency (justification)		9		Falls, NJ of Contact	074	124			Te	lephone	Numb	er			3-1/May
DCA [Cancellation			Dave	Burkart	20.000000000000000000000000000000000000					73) 25					
Name of Facility Where Ab	atement is Taking	g Place	(3)	FAC	CILITY INFO	ORM	ATION	Ту	oe of Facility	(4)						
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City (5) Fair Lawn								Sq	etc.) uare Feet	# 0	f Floors		В	ldg. /	\ge	
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Name of Monitoring Firm H	ired by Building C	Owner (8)	ASC	M No.				batement Co		(9)					
Street Address							Street	t Add		LLC.						
City, State, Zip Code								State,	Zip Code	discount of the second						
Project Manager for Monito	rina Firm			Telepho	one No		Unic		ty NJ 070	87						
Start Date (10)		0.1.1.		2			201	216-	9603		Licens 0120					
05-03-18		06-30-	18	npletion	Date (11)		11 12 20 20		SHA Monitor Intracting I							
Occupancy Status During A		100	88				Street 522		- Table 1773							
Facility Closed/Vacate Abatement Performed Other – Describe: 7:00	Outside of Norma	eriod or al Facilit	Abaten y Hours	nent		_	City, S	State,	Zip Code ty NJ 070	07						
Scope of Work (Check All T	hat Apply)					-	Offic	iii Ci	ty NJ 070	0/		-				_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit					N G	ull Containm lini-Enclosur ilovebag Pro on-Exempte	e cedure					2	
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10111001		Х			Pip	e Insula	uon		16	40 SF	X	-				
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Delfa Contracting LLC	idulei			auler ID 35240	No.	of W	ic Yards /aste 30		Name of Tullytov				ove	ry F	acilit	у
City, State Jnion City, NJ						Disp	osal Date -24-18		City, Stat							\neg
Completed by laime Delgado		Title Proj.	Mana	ger.			Signature		18		T	Date 04-2	3-1	8		



CHECK # 2699

Date of Notification (1) 4/17/2018					f Building (ston Ave				I.C.		10	E	C	E		7 E
Agencies Notified	Type Notification			Street A			11 1 (01)	, wai E			 	L	(0)	La .) ()	
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					LITY INFO		ION					NOOM AS NOO	CO.	<u>E/4/5/</u>	NG	
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Name of Monitoring Firm	Hired by Building C	wner (8)		ASCN	l No.			of Aba	tement Contracting, LLC	ractor						
Street Address							Street	Addres	_		(
City, State, Zip Code							City, S	tate, Z	ip Code ew Jersey							-
Project Manager for Mon	itoring Firm		Γelepho	ne No.		Teleph	none N	0.	0/4/	Licen		lo.			-	
Start Date (10)		ed Com	pletion I	Date (11)		Name		HA Monitor		0087	4					
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Abatement Perform Other – Describe:	ed Outside of Norma			ent			City, S	tate, Z	ip Code	electropies com-						
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Asbestos-Containing <u>TO BE AB,</u> In Facil (13)	ATED	Ma	intenan todial S (12)	ce/		thermal surfa	taining M systems cing, VA miscellar	s insula T, or		(S	nount pecify or LF		Removal	Repair	Encapsulate	Enclosure
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E	Service Transport Group, Inc. City, State								Minerva	Enter	prise	es, L	LC			
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Completed by Predrag Sarcev		Title Vice	Presid	lent		5	Signature	Andrew Control					ate 117/2	018		

Signature

Date

Title

DIRECTOR OF OPERATIONS

BENJAMIN SANCHEZ

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) Check #10025 PSE&G / Job # 1802-5273 18 25 4 / Type Notification Street Address Agencies Notified ☐ Initial 4000 Hadley Road **⊠** EPA M Amended **⊠** DOLWD City, State, Zip Code Amendment #1 ☑ DHSS South Plainfield, NJ ☐ Emergency (including ☐ DCA Telephone Number Name of Contact (NJAC 5:23-8) justification) 973-941-8155 Ryan Thomasen ☐ Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) PSE&G- Orange Gas Facility Subchapter 8 (Other than K-12) ☑ Other (i.e., private and commercial buildings, Street Address homes, etc.) 284 North Park Street Bldg. Age Square Feet # of Floors City (5) East Orange, NJ Current Use (Prior if being demolished) County Code (7)(STATE USE ONLY) County-(6) **District Office** Essex Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. AbateTech, Inc. NA Street Address Street Address 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Lumberton, NJ 08048 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 00529 609-265-2107 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 5 / 18 / 18 **EMSL Analytical** 4 / 30 / 18 Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-__PM/__PM-__ Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ≥3 sf or ≥3 lf □ Renovation Demolition ≥160 sf or ≥260 lf Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Enclosure Encapsulate Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or IN Facility (12)other miscellaneous) (13)Yes No N/A \boxtimes 2,290 SF X Roof Paper & TarFlashing П Exterior X 300 SF X Sealant Caulk Exterior X 7,800 SF П X Roof Insulation П Exterior Name of Registered Landfill NJDEP Waste Cubic Yards of Name of Registered Waste Hauler Hauler ID No. Waste G.R.O.W.S. Landfill **Environmental Transport Group** NJD0006920 40 City, State Disposal Date City, State Morrisville, PA 5/18/18 Flanders, NJ Signature Title Completed By (Print or Type)

Gwendolyn Trumbetti

Operations Coordinator

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	24/		18			Verizon C	om	munications	/ Job #18		Check			- Calledon	Arthur
	Type Noti	ificatio	n		S	reet Address	s		-	A CONTRACT	771 71 7N	2 178	Tradesian Tradesian	O C	-
						100 Green	wo	ood Avenue		ASUES:	IUD UI IÜENS	ING	TOL	. či	- 1
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	☐ Emerg		-	ina		Jenkintow	n, l	PA 19046							
(NJAC 5:23-8)	justifica			9	Na	ame of Conta	act			Telephon	e Numb	er	-	-	
	☐ Cancel	llation				Alex Baylo	or			The second second	33-004				
						FACILITY	INF	ORMATION							
Name of Facility Where Ab	atement is	s Taki	ng Pla	ce (3)				Type of Facility	(4)		_			
Verizon- Woodbury (0								School (K-12						
Street Address					- 100011				☐ Subchapter	8 (Other tha	n K-12)				
24 Curtis Avenue									Other (i.e., p homes, etc.)	rivate and c	ommer	cial b	uildir	ıgs,	
City (5)									Square Feet	# of Floo	ors	IB	ldg. /	Ane	
Woodbury, NJ 08096									, -,	01 1 100	,,,,		nug. /	ige	
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USA Environmental								AbateTech, Ir							
Street Address							15	Street Address							-
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City, State, Zip Code	W						10	City, State, Zip Co						_	
Philadelphia, PA 1915	3							Lumberton, N							
Project Manager for Monitori	ing Firm			Te	elephor	ne No.	T	elephone No.	00040	License	No		_	113 - 1	
Mark Jenkins				10000		65-5810		609-265-2107		00529					
Start Date (10)		Sche	duled (Date (11)	IN	lame of OSHA Mo	onitor	00323				-	_
_5 / _14 / _						18		EMSL Analytic							
Occupancy Status During Ab	atement ((Chec	k only	one)			S	Street Address							
☐ Facility Closed/Vacated D					ement		1000	200 Route 130	North						
☐ Abatement Performed Ou	tside of N	lorma	Facili	ty Ho	urs - D	escribe		ity, State, Zip Coo							
Time of Abatement:	AM	P	M/	PN	Λ	_AM		Cinnaminson,							
Scope of Work (Check all tha	t apply)			-				ommaninison,	143 00077						_
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(13)			Yes	No		-	0	other miscellaneou	us)					late	G)
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. Floor Exterior						Ronair	9 0	on Horizontal C	rack	244 LI					
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Name of Death 1144 and			Ц												
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AbateTech, Inc.					1875			aste 40	G.R.O.W.S.	Landfill					
City, State									City, State						\neg
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Completed By (Print or Type)		Title						Signature	A		Date				-
Gwendolyn Trumbetti		0	erati	ons	Coord	linator		1 an	u t		41	24	115	?	

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Date of Notification (1) 4 / 24						ing Owner/Operator	(2)	I APR	2	7 21)18				
	_ / _1	8		\	erizon Co	ommunications	/ Job #180	1-5259 Chec	k #1	0110	PG	11			
57	e Notification	n		Str	eet Address	}	-	Asansa.	1.3		Achi	8			
	Initial			1	00 Green	wood Avenue				iniG		. CC			
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(NJAC 5:23-8)	justification)	oidu	9	Nar	ne of Conta	ct		Telephone Nun	nher						
	Cancellation			A	lex Baylo	r		301-583-0048							
				F	ACILITY II	NFORMATION						_			
Name of Facility Where Abate	ment is Takir	ng Pla	ce (3)				Type of Facility	(4)							
Verizon- Ventnor CO							School (K-12	T. C. T.							
Street Address							☐ Subchapter 8	Other than K-12	2)						
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City (5)							homes, etc.) Square Feet	1#-451	1,	21.1					
Ventnor, NJ 08406							Square reet	# of Floors	1	3ldg.	Age				
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Street Address						Street Address	IC.								
8436 Enterprise Ave.							DO D 25								
City, State, Zip Code					-	30 Maple Ave									
Philadelphia, PA 19153						City, State, Zip Co									
Project Manager for Monitoring	Firm	-	Tol	ephone	No	Lumberton, N	J 08048								
Mark Jenkins			10		5-5810	Telephone No.		License No.							
Start Date (10)	School	uled (-		ate (11)	609-265-2107		00529							
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Occupancy Status During Abate	- -					EMSL Analytic	cal								
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(13)	+	V	(12)			other miscellaneou		0, 0, 1,	-		ulat	Ге			
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nd Floor Roof					Door Cau	ılk		60 LF							
nd Floor Roof			\boxtimes			ove Roof Flashir	ng	200 LF							
ame of Registered Waste Haule	r		N.	DEP V	Vaste (Cubic Yards of	Name of Register					_			

ASB-41
MAY 11

* On not use this form for each extra line.

Hauler ID No.

18750

Waste

25 Disposal Date

5/18/18

Signature

AbateTech, Inc.

Lumberton, NJ

Completed By (Print or Type)

City, State

City, State

G.R.O.W.S. Landfill

Date 4/24/18

Tullytown, PA

NOTIFICATION OF ASBEST OS ABATEMENT (Pursuant to NJAO 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 4 24 18 Verizon Communications / Job #1801-5259 Check #10110 PG2 Agencies Notified Type Notification Street Address **⊠** EPA 100 Greenwood Avenue ☑ DOLWD ☐ Amended City, State, Zip Code Amendment #_ **⊠** DHSS Jenkintown, PA 19046 □ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Alex Baylor 301-583-0048 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Verizon- Ventnor CO School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 10 South Portland Ave. homes, etc.) City (5) Square Feet # of Floors Bldg. Age Ventnor, NJ 08406 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Atlantic Offices Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) USA Environmental AbateTech, Inc. Street Address Street Address 8436 Enterprise Ave. 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Philadelphia, PA 19153 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mark Jenkins 215-365-5810 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor <u>5</u> / <u>7</u> / 18 5 / 18 / 18 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-___AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ⊠ Renovation ☐ Mini-Enclosure ☐ Glovebag Proc ≥160 sf or ≥260 If Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Repair Remova Encapsulate Enclosure Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A 1st Floor Exterior \boxtimes Wall Caulk 20 LF X 1st Floor Exterior \boxtimes **Expansion Joint Caulk** X 60 LF П П П П Ш Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. AbateTech, Inc. Waste G.R.O.W.S. Landfill 18750 25 City, State Disposal Date City, State Lumberton, NJ 5/18/18 Tullytown, PA Completed By (Print or Type)

Gwendolyn Trumbetti

Operations Coordinator

Signature

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

Date of Notification (1)			-	Mar	no of Buildir	ng Owner/Operator								
	18					ob # 1803-5281	(2) Check #	10100	d					
Agencies Notified Type Not ☑ EPA ☐ Initial ☑ DOLWD ☑ Amen		A STATE OF THE PARTY OF THE PAR	1	Stre	eet Address 000 Hadle		DECEIVED							
1 2 2	aea dment # <u>3</u>		1	City	, State, Zip	Code				medically interested their				
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(NJAC 5:23-8) justifie	ation)-	Section 1		Nan	ne of Contac	et .		Telephone N	umber	2018	1			
\☐ Cance	llation			E	ric Lorenz	on		215-247-0			an Paris			
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Name of Facility Where Abatement i PSE&G- Audubon Gas Facili		Place ((3)				Type of Facility School (K-1	A Continuente Continuente suissones	INOIN	u		-		
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535 West Nicholson Road							Other (i.e., homes, etc	private and comi	nercial	buildir	ıgs,			
City (5)							Square Feet	# of Floors		Bldg. A	Age			
Audubon, NJ														
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Name of Monitoring Firm Hired by Bu	ilding Ow	mer (8)	ASCN	1 No.	Name of Abateme		.=						
Bureau Veritas						AbateTech, In		(*)						
Street Address						Street Address								
109 North Center Drive					30 Maple Ave. PO Box 25									
City, State, Zip Code					City, State, Zip Code									
North Brunswick, NJ 08092						Lumberton, N								
Project Manager for Monitoring Firm	N-19-19-19-19-19-19-19-19-19-19-19-19-19-		Tele	ephone	No.	Telephone No.		License No.						
J-B Chadwick			7;	32-489	9-2813	609-265-2107		00529						
	Schedule		200		- CO (CO	Name of OSHA M	onitor							
//				/	18	EMSL Analyti	cal							
Occupancy Status During Abatement						Street Address						-		
Facility Closed/Vacated During En	tire Period	of Ab	ate	ment		200 Route 130	North							
Abatement Performed Outside of N Time of Abatement:AM	lormal Fa PM/_	cility F	lour PM-	s - Des	AM									
Scope of Work (Check all that apply)						Cinnaminson,	NJ 08077							
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		Reno												
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(13)	-	1	12)			other miscellaneo	us)	0. 0. 2. 7			llate	9		
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Exterior					Louver C			80 LF						
Exterior		_				Window sills		50 LF		분				
Name-of-Registered Waste Hauler		_		IDEP V	-	Cubic Yards of	Name of D	112 SF		Ш	Ш			
Waste Management			На	uler ID	No. V	Vaste	Name of Registration							
City, State				18750		40 Disposal Date	City, State							
Camden, NJ						5/4/18	Morrisville,	PA						
Completed By (Print or Type)	-			Signature			ate			_				
Gwendolyn Trumbetti	Oper	ations	s C	oordi	nator		ut.		4120	110				
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Date of Notification (1) 4 / 5	/ 18				ing Owner/Operator Job # 1803-5291	on the case	AP	'R 2	7	2019	2	
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/ □ Canc	ellation		E	d Kuhn			609-847-90					
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PSE&G- Bellmawr Gas Faci	iity					School (K-	12)					
Street Address						Other (i.e	8 (Other than K-1)	2) ercial l	ouildir	าตร		
80 Heller Road						homes, etc	.)	ii Oldi L	Juliuli	igo,		
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						Gas Facilit	у					
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Bureau Veritas					AbateTech, I	nc.						
Street Address					Street Address							
109 North Center Drive				30 Maple Ave. PO Box 25								
City, State, Zip Code					City, State, Zip Co	ode						
North Brunswick, NJ 08092					Lumberton, N	NJ 08048						
Project Manager for Monitoring Firm	/		lephone		Telephone No.		License No.					
J-B Chadwick				9-2813	609-265-2107		00529					
Start Date (10)4 /16 /18 /	Scheduled 5		etion D		Name of OSHA M EMSL Analyti							
Occupancy Status During Abatement	(Check onl	y-one)-			Street Address					7-45		
Facility Closed/Vacated During Er	tire Period	of Abate	ement		200 Route 13	0 North						
Abatement Performed Outside of	Normal Faci	lity Hou	rs - De	scribe	City, State, Zip Co	de						
Time of Abatement:AM	PM/	PN		_AM	Cinnaminson							
Scope of Work (Check all that apply)												
≥3 sf or ≥3 If	⊠ F	Renova	ion		☐ Mini-Encl	ainment with Neo	gative Pressure					
≥160 sf or ≥260 lf		Demoliti	on		☐ Glovebag		n-Friable Procedur					
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Location of		Norma sed Sol			Description of				_		1	
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(13)		(12)	T	-	other miscellaneo	us)	0. 0. 2.)	-		Encapsulate	Ге	
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				Window Door Ca	100		168 LF					
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Name of Registered Waste Hauler Waste Management		1.556	JDEP V		Cubic Yards of Waste	Name of Regist						
City, State			18750		40	Fairless La	ndtill					
Camden, NJ					Disposal Date 5/4/18	City, State Morrisville,	ΡΔ					
Completed By (Print or Type)	Title	-				morrisvine,						
Gwendolyn Trumbetti	Opera	tions (Coordi	nator	Signature	A	Dat	2171/2	111	0		
SB-41			Joiul		(An)	W	4	124	1 l	0		

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

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Date of Notification (1)					Nar	ne of Buildi	ng Owner/Operator	(2)	Tres \				- 11			
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☑ DOLWD ☑ DHSS			#4	\	City	, State, Zip	Code		ASBESTOS CONTROL & LICENSING							
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	□/Cancel	llation			E	ric Lorenz	zon		215-247-0542							
	(/		F	ACILITY II	NFORMATION						- y-20 81			
Name of Facility Where Ab			ng Pla	ce (3)				Type of Facility	(4)							
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Street Address									8 (Other than K-							
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Bureau Veritas	,			(0)	/ 10011	1110.	AbateTech, I		")							
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North Brunswick, NJ	08002						City, State, Zip Co									
Project Manager for Monitor				1= 1			Lumberton, N	IJ 08048								
J-B Chadwick	ing riim			- 1	ephone	The second second	Telephone No.		License No.							
Start Date (10)		0.1		1		9-2813	609-265-2107		00529							
3 / _28_ /			_/		etion Da 1 /	ate (11) 18	Name of OSHA M EMSL Analyti									
Occupancy Status During At	patement	(Chec	k only	one)			Street Address									
☐ Facility Closed/Vacated E					ment		200 Route 130	North								
☐ Abatement Performed Ou	utside of N	lorma	Facilit	y Hou	rs - Des	scribe	City, State, Zip Co	ACCOUNTAGE OF								
Time of Abatement:	AM	PI	M/	PM		AM	539									
Scope of Work (Check all that	at anniv)						Cinnaminson	, NJ 08077								
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△ ≥ 100 St of ≥200 If			∐ D∈	emoliti	on		☐ Glovebag	Procedure npted (*) and Nor	- Ciabla Bassa	Name						
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Exterior					Transite	Window sills		112 SF		П	$\overline{\Box}$	$\overline{\Box}$				
Name of Registered Waste H	auler			(1) (1) (2)	JDEP V		Cubic Yards of	Name of Regist	ered Landfill				=			
Waste Management				Н	auler ID 18750		Waste 40	Fairless La								
City, State					10/30		Disposal Date	City, State					_			
Camden, NJ							5/11/18	Morrisville,	PA							
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Ch 1075	N			te of New J OA ASBES o NJAC 8:6						<u> [</u>	C			V	
Date of Notification (1) 4/18/2018		100		Building Ow Lusardi	vner/Opera	ator (2	2)			A	IPR	2 7	21	018	200
Agencies Notified Type Notification		Street Ad					5-201-201-1111			ta je			TO THE SECTION	2	
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Emergency (in	ncluding		lame of						Teleph	none Nu	umber				
DOH justification) DCA Cancellation				Lusardi											
Name of Facility Where Abatement is Taking	Place (3)		FACIL	ITY INFOR	RMATION	- 1	Type of	f Facility (4))						
Taylor Lusardi Residence	10.5					I		chool (K-12							
Street Address							Si X O	ubchapter 8 ther (i.e. pri	(Other)	than K- ommer	12) cial bu	ilding	s, h	omes	i,
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County (6) Essex		County C	ode (7) SE ONLY)			Curren	t Use (Prior	if being	demoli	shed)					
Name of Monitoring Firm Hired by Building C								nent Contractor (9) ty Maintenance LLC							
Street Address							Address	per Ave							
City, State, Zip Code			ate, Zip	•											
only, clate, 21p odde		471			07011	40									
Project Manager for Monitoring Firm		Γelephon	ne No.	20	01-8	one No. 899-90	800	1 2	icense)1336						
Start Date (10) 4/29/2018				A Monitor											
Occupancy Status During Abatement (Check	8.30				Str	Street Address									
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:					Cit	City, State, Zip Code									
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	1						Non	-Exempted	(*) and	Non-Fri	able P	10000	76	nent	
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	d Sole ntenar odial S (12)	nce/	(i.e. th	s Containi hermal sys surfacing	ntaining Material (ACM) al systems insulation, facing, VAT, or miscellaneous)			Amount (Specify SF or LF)		Kemova		Renair	Encapsulate	Enclosure	
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1st floor front entrance foyer	X		Plaster Wall						SF	X	1	-		-	
Name of Registered Waste Hauler TBD		H	IJDEP W lauler ID BD		Cubic Yar of Waste 1YD	rds		Name of I	Carrier Television						
City, State					Disposal	Date		City, State Melville		1747					
Completed by Darko Raloski		Sign	Signature Date 4/18/2018												

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Date of Not	tification (1) /18				Name of	Building Ov CORPOR	vner / Oper			F C	FI	WEE				
/	/						treet Address										
Agencies N	Notified EPA	Type of No				_	RIS AVENU										
☐ □ □ □ Initial ☐ □ □ Amended						SUMMIT,	e, Zip Code			APR 2 7 2018							
✓ DOH Amendment 2						Name of				Telephone Number							
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Name of Fa					Place (3)		Type of Fa		-12)	The second secon							
Street Address 535 MORRIS AVENUE							School (K-12) Subchapter 8 (Other than K-12) Other (I.e., private & commercial bldgs., homes, etc.)										
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Project Mn					Telephone Nu	mher	City, State	, zip code									
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					30534	of Waste											
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Steven Stile	es				Project Manage	er		20	lex	Le	Q	04	4/26/18				