UK 1034

Date of Notification (1 04/25/2018)			Nam Wes	e of Building tfield Area	Owner/ YMCA	Operator (2)	- in column	D),	E C	heck#	7 11		
Agencies Notified	Type Notification			100000000000000000000000000000000000000	et Address Clark Stree	et		and white the state of the stat		APR	3.0	201	0	The second secon
□ EPA □ DEP □ DOL	☐ Initial ☐ Amended Amendment #_	1_			State, Zip C		07090		4 11	AFN	vu	201	5	111
☑ DOH □ DCA	☐ Emergency (in justification) ☐ Cancellation	cluding			e of Contact k Lagemar				Te 90	(lephone N 8-233-27	umber 00 X 2	42	· · · · · · ·	.t
				F	ACILITY INF	ORMAT	ION		1					
Name of Facility Whe Westfield Area YM	re Abatement is Takin CA	g Place (3)				Type of Fac	cility (4)						
Street Address 220 Clark Street							□ School □ Subcha ☑ Other ((K-12) apter 8 (Othe i.e. private 8	r than	K-12) nercial buil	dings, l	nomes	s, etc.))
City (5) Westfield, New Jers	sey 07090						Square Fee 15,000	t	# 0	f Floors		3ldg. / 50+	Age	
County (6) Union					ty Code (7) TE USE ONLY)	Current Use	e (Prior if bei Recre	ng den eation	nolished) al Center				
Name of Monitoring F Detail Associates, I	irm Hired by Building nc.	Owner (8)	AS	CM No.		Name of Aba Lilich Corp	atement Con oration	tractor	(9)				
Street Address 300 Grand Avenue							Street Addre	77 TO 1920						
City, State, Zip Code Englewood, New Je	ersey 07631	-					City, State, 2 Woodland		Jerse	у				
Project Manager for M Anthony Valentine	Monitoring Firm				hone No 569-6708		Telephone N 973-225-84			License 01104	No.			
Start Date (10) 05/07/2018		Schedul 05/10/2			on Date (11)		Name of OS Iris Environ		orato	ries, LLC				
Occupancy Status Du	ring Abatement (Chec	k Only O	ne)				Street Addre	ess						
☐ Facility Closed/V	acated During Entire F	Period of	Aba	tement			2333 Route	e 22 West						
		al Facility	у Но	urs			City, State, Z Union, NJ (Zip Code 07083						
Scope of Work (Check	All That Apply)						-							
≥3 sf or ≥3 lf≥160 sf or ≥260 lf				ovation olition			☐ Mi 図 Glo	II Containme ni-Enclosure ove Bag Prod n-Exempted	cedure	/ Limited	Contain	ment	&Ten	ıt
			Is				L 140	II-Exempled	() and	INOII-I IIa	Die Flot	85005 10	emen	t
	ion of	1 555	oca lorm			De	escription of				-	Ty	ре	T
Asbestos-Containi TO BE A			ed S	Solely	Asbes	therma	taining Materia I systems insul	al (ACM)		Amou nt	70		Ē	ш
In Fa (1	cility	Mai	by inter	ance/	,	surfa	cing, VAT, or miscellaneous)	2.102002003 0		(Specif	Remova	Repair	Encapsulate	Enclosure
BLD		Yes	usto		A	other	mscenarieous)			y SF or LF)	val	¥:	ulate	ure
Boys Locker Room	70 1	100	X		Fitting In	sulatio	ın		5 LF		x	-		
Bathrooms/Aquati	c Office		X		Fitting In		2		7 LF		X			
Members Service D			X		Fitting In				1 LF	<u> </u>	X			
Women'sSilverLockerR	oomLargeRoomArea		X		Fitting In				1 LF		X			
Women'sSilverLockerR	oomChangeStallArea		X		Fitting In				4 LF		X			
Mechanical Room	Closets	X		-	Fitting In				25 LI		X			
Name of Registered W				NJDEP	Waste	-	Yards	Name of F						
Lilich Corporation				Hauler 1872		of Wa		Fairless						
City, State Woodland Park, New	w Jersey						sal Date 1/2018	City, State Morrisville						

PAID

Date of Notification (1) 04/21/2018			Nam	e of Build	ing Owner	/Operato	r (2)	E	(0)	2- 11	g D	4
	· ·	- 3				CONTR	RUCTION MA	NAGEMENE	LLC.			- 1
☑ DOL Ame ☐ Eme justif		ng	JER Name	e of Conta	Code ITY NJ.			Telephone	Numbe		n 2	018
L Can	ellauon		1		NSAGR			504 - 289	9 - 08	77		Mental .
Name of Facility Where Abatement PRIVATE Street Address City (5)	is Taking Place	(3)	FA	CILITY	NFORMAT	ION	Other (i.e etc.)		(-12) ercial b	uildin	gs, ho	mes,
JERSEY CITY NJ. 07302							Square Feet 4.000.	# of Floors			. Age	
County (6) HUDSON			Count (STAT	y Code (7 E USE ON	7) "LY)			rior if being demo	lished)	9	<i>(</i>	
Name of Monitoring Firm Hired by Bi Street Address	uilding Owner (I	8)	ASC	CM No.		NOR	of Abatement C	ontractor (9) NVIRONMENT	AL LI	LC.		
City, State, Zip Code						1126 City, S	- 51 ST. tate, Zip Code					
Project Manager for Monitoring Firm			Teleph	ione No.		Teleph	TH BERGEN one No.	License				
Start Date (10) 04/30/2018	05/02	/2018		n Date (1	1)	Name	776 - 0642 of OSHA Monito TH EAST EN	01300 r IVIRONMENT		С.		
Occupancy Status During Abatement Facility Closed/Vacated During B Abatement Performed Outside of Other – Describe:	Entire Period of f Normal Facilit	Ahate	ment rs			Street / 1126 City, St	Address - 51 ST. ate, Zip Code RTH BERGEN					
Scope of Work (Check All That Apply ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demol			£	×	Mini-Enclosur Glovebag Pro				iro.	
Location of		s Loca Norma	lly		Des	ะสมัชย์การ		y and non the	J	Aba	temer /pe	nt
Asbestos-Containing Material (ACI <u>TO BE ABATED</u> In Facility (13)	Mai	intenai codial S (12)	nce/	Asbe: (i.e	stos Conta thermal s surfaci	ining Ma	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
ROOF	Yes	No	N/A						=		ate	e.
ROOF		X		Ro	oof (Blac	k Mem	brane)	3,753 SF.	X			
ame of Registered Waste Hauler RI - STATE - ASSOCC.		H	JDEP W auler ID 9951		Cubic Y of Wast	е	1	Registered Landfill		NC.		
ity, State RONX NY. completed by					Disposa TBD		City, State WAYNE	SBURG, OH	10			
ARLOS ESQUIVEL	Title SAFE	TY N	IANAG	BER.	Sig	nature	Guny	De Od	ite 4/21/2	2018		

State of New Jersey

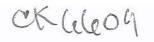
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Date of Notification (1) 04/24/18					f Building Constru		Operator	(2)	1, 100 F	Charles and a second					
Agencies Notified	Type Notification			Street A	ddress	enue				<u> </u>			-		
EPA DEP DOL	Initial Amended Amendment	#			ate, Zip Co urst, NJ		1			AP	R 3 1	2018		hard !	
DOH DCA	Emergency (i justification) Cancellation	ncluding		Name of	f Contact						ephone Nui 1-939-13		<u>.</u>		1
□ DOA	☐ Caricellation		_		LITY INF	2.500140115		-	1 /	20	1-303-10	04			
Name of Facility Where A	Abatement is Taking	Place (3	3)	IAOI	LIII INI	OKWAT	ION	Туре	e of Facility (6(B)					
Street Address			0 2 2 2 2 2					×	Subchapter Other (i.e. p	8 (Oth			dings,	hom	es,
City (5) Millburn								1	etc.) are Feet 00 +	# 0	f Floors	0.00	8ldg. <i>A</i>	ge	
County (6) Essex					Code (7) USE ONLY)			ent Use (Prid		ng demolish				
Name of Monitoring Firm	Hired by Building C	wner (8)		ASCN	1 No.				atement Cor			Cons	ultin	a In	
Street Address					-	-	Street	Addre		LITVIIC	menta	Cons	Sullii	9, 111	·.
City, State, Zip Code		A TOTAL CONTRACTOR					City, S	State, 2	Zip Code		320				
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	none N			License N	0.			
Start Date (10) 05/04/18		Schedule		mpletion I	Date (11)		Name	of OS	9200 SHA Monitor	المحمدان	00408			1.04	
Occupancy Status During									sion Cons	uitant	s, inc.				
Facility Closed/Vaca	ated During Entire P	eriod of A	Abate	ment				1 Wa	agaraw Ro	ad, B	ldg. #35E				
Abatement Perform Other – Describe:		al Facility	Hou	rs					Zip Code n, NJ 0741	0					
Scope of Work (Check A	ll That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renov Demo	ration lition			×××	M Gl	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure				e	
		Is	Loca	ition									Abate	ement	t
Location Asbestos-Containing TO BE AB/ In Facili (13)	Material (ACM) ATED	Use Ma	inten	lely by ance/ Staff?		tos Cont thermal surfa		Nateria s insul T, or	. 1	(8	mount Specify or LF)	Removal	Repair	e Encapsulate	Enclosure
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Unit 34	15	1		X		30.04633	Insula				20 LF	X			
				X		FI	loor Til	е		ь	0 SF	X			
												-			
Name of Registered Was	te Hauler	\perp	_	NJDEP W	lasto	Cubio	Yards		Name of) a minta	العمال مصافاا	1			
J.R. Contracting & E		nsul., I	ne	Hauler ID 17819		of Was			(ACC 00000000000000000000000000000000000	1000 11 12000	red Landfill al Landfill				
City, State Wayne, New Jersey						Dispos	sal Date		City, State Pen Arg		ennsylvar	nia			
Completed by Jerry Bijelonic		Title Proje	ct M	lanager		S	Signature	e /	7		Da 04	ite 1/24/	18		

Title Project Manager





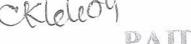
Date of Notification (1) 4/25/18					f Building Contrac		Operator	(2)	1			<u> </u>	-7	17.75	120	7:
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Name of Facility Where	Abatement is Takin	g Place (3)						l ly	pe of Facility (4	500						
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County (6) Ocean				County (Code (7) USE ONLY			180000	rrent Use (Prio	r if bei	ng dem	olishe	d)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	1 No.	***************************************			batement Cont AD PROFES							
Street Address							Street 6 WH		ress E DOVE CO	URT						
City, State, Zip Code									, Zip Code OOD, NJ 08	701		1112-111				
Project Manager for Mo	nitoring Firm			Telephor	ne No.		Teleph 732-		No. -9078		Licens					
Start Date (10) 5/6/18		Scheduled 5/9/18	Con	pletion i	Date (11)				SHA Monitor AD PROFES	SSIO	NALS					
Occupancy Status Durin	ng Abatement (Chec	k Only One)				Street							7 == 70		
Facility Closed/Vac	cated During Entire I	Period of Ab	atem	ent					E DOVE CO	URT						
Other – Describe:	——————————————————————————————————————		iours						, Zip Code OOD, NJ 08	701						
Scope of Work (Check A	All That Apply)			-			1									
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	nova moliti				X		Full Containmer Mini-Enclosure Glovebag Proce Non-Exempted	edure	•				a.	
	W	ls L	ocati	on										Abate	ment	
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Asbestos-Containing TO BE AB In Faci (13)	ATED lity	Main Custo	tenar diai S (12)	nce/ Staff?		thermal surfa	taining M I systems icing, VA miscellar	s ins	r	(S	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
INTER	IOR	Yes	No	N/A		!!!-	- 61 a a-				2005				15	
INTER	IUR	-		-		cellin	g tile m	nast	IC	50	00SF	- 2	ζ			
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									-							
Name of Registered Wa	ste Hauler		F. Committee	JDEP W auler ID	F107-1774	Cubic of Wa	Yards		Name of R	egiste	red Lan	dfill				
NEWARK CARTING	3		1117	4509	INO.	4	ste		IESI							
City, State NEWARK, NJ						Dispo	sal Date		City, State BETHLE		1 PA					
Completed by JOSEPH PERLSTE	IN	Title OWNE	R			5	Signature	9				Date				



					to NJAC						C	[F2]	1 1	17		
Date of Notification (1) 4/26/18					f Building Ridge at			(2)		3	mentals () ()			-		
	Type Notification			Street A 2 Fox						- Company	APR	3 0	20	118		L
DEP X DOL	Amended Amendment				ate, Zip Ci					A		% 5.			<u>-</u> -	
DOH DCA	Emergency (justification) Cancellation	including			f Contact elle Sletv	vold					ephone N 2-350-9			P		
				FACI	ILITY INF	ORMATI	ION								-	
Name of Facility Where Ai	patement is Taking	g Place (3)					Type	s of Facility (4 School (K-12 Subchapter 8 Other (i.e. pr etc.)	, ;) 3 (Othe			ildin	gs, ł	nome	ıs,
City (5) Whiting								Squa	re Feet	# of	Floors		Bldg	j. Ag	e	
County (6) Ocean					Code (7) USE ONLY	n			ent Use (Prior pile home	if bei	ng demo	lished)				
Name of Monitoring Firm I	lired by Building (Owner (8))	ASCN	A No.				etement Cont D PROFES							
Street Address								Addre	ss DOVE CO	URT						
City, State, Zip Code									Zip Code OD, NJ 08	701						
Project Manager for Monit	oring Firm			Telepho	ne No.			none N 668-9			License	No.		32.10		
Start Date (10) 5/7/18		Schedul 5/25/1		pletion	Date (11)				HA Monitor D PROFES	SSIO	NALS					
Occupancy Status During	Abatement (Check	Only Or	ne)				Street									
Facility Closed/Vacat Abatement Performer Other – Describe:	ed During Entire P d Outside of Norm	eriod of all Facility	Abatem Hours	ient			City, S	state, Z	DOVE CO					7-22		
Scope of Work (Check All	That Annly)						LAKI	EWO	OD, NJ 08	701						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ттаг дэргуу	anomeros.	Renova Demoliti				X	Mi	Il Containmer ni-Enclosure ovebag Proce n-Exempted	dure				dure		
		10000	Locati										Ab	ater	nent	
Asbestos-Containing N TO BE ABAT In Facility (13)	laterial (ACM) ED	Use Ma Cus	Normali ed Sole iintenar todial S (12)	y by nce/ staff?		tos Cont thermal surfac		Materia s insul T, or	ation,	(S	mount pecify or LF)	Removal	000	Ť	Encapsulate	Enclosure
INTERIO	D	Yes	No	N/A			1 = = -2 = =			47	2005	-	+	+		
EXTERIO		-					looring				00SF	X	-	+	-	
EXTERIO	, K					ROOF	FLAS	HING	-	5	5SF	X	+	+	-	
							Accessors to the second	5					\dagger	+	-	\neg
Name of Registered Waste NEWARK CARTING	Hauler		Н	JDEP W auler ID 509		Cubic of Was 10			Name of R	egiste	red Land	fill				
City, State NEWARK, NJ						Dispos 5/25/	al Date	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	City, State BETHLE	HEM	I PA		-			
Completed by JOSEPH PERLSTEIN		Title	IER			S	ignature	:	l.			Date				

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Date of Notification (1) 4/26/18					f Building Ridge at			(2)		M	٨	PR 3	n ')/\10		and the second	
Agencies Notified	Type Notification	l		Street A	ddress	0,000			- The second of	U L	A	IN V	UZ	.010	The Part of Committee age (1995)	100	
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DOH DCA	justification Cancellation)		Roche	f Contact lle Sletv	25.48%						elephone 32-350					
Name of Facility Where	Abatement is Takir	ng Place (3	3)	FACI	LITY INF	ORMAT	ION	Tv	me o	f Facilit	v (4)						
Street Address								×	S	chool (R ubchap	<-12) ter 8 (Ot	her than & comm			dings,	hom	es,
City (5) Whiting	177							So	uare	Feet	1	of Floors		E	ildg. A	\ge	
County (6) Ocean				County (Code (7) USE ONLY)				t Use (I e hon		eing dem	olish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	1 No.						Contracto ESSIC	or (9) ONALS	ì				
Street Address							Street 6 Wh				COUR	Т	0.00				
City, State, Zip Code						City, S LAKE				08701							
Project Manager for Mon	nitoring Firm		Telephor	ne No.		Teleph 732-6					Licens 1200).				
Start Date (10) 5/7/18		Schedule 5/25/18		npletion (Date (11)					Monit PROF		DNALS					
Occupancy Status During Facility Closed/Vac		100		nent	F)		Street 6 WH				COUR	Г					
Abatement Perform Other – Describe:	ed Outside of Norr	nal Facility	Hours	S		_	City, S LAKE		-		08701						
Scope of Work (Check A	II That Apply)						L	-7									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		pronuncing .	enova emolit				×		Mini- Glov	Enclose ebag P	ure rocedure	th Negati e nd Non-F				Α.	
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INTERI	0.0	Yes	No	N/A							-					te	10
INTERI		-		-			looring				-	150SF		х			
EXTERI	OR				RC	OOFIN	G —			3	300SF		X				
Name of Registered Was	te Hauler	IN	JDEP W	aste	Cubic	Yards			Name (of Regist	ered Lar	ndfill					
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City, State NEWARK, NJ						Dispos 5/25/	al Date 18		- 1	City, St BETH	ate ILEHEI	М РА					
Completed by JOSEPH PERLSTEI	N	Title OWN	ER			S	igriature						Dat	е			



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 4/26/18 Pine Ridge at Crestwood Agencies Notified Type Notification Street Address 2 Fox St **EPA** Initial DEP City, State, Zip Code Amended A.S. X DOL Amendment # Whiting, NJ 08759 Emergency (including × Name of Contact DOH Telephone Number justification) DCA Cancellation Rochelle Sletvold 732-350-9000 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, X etc.) City (5) Square Feet # of Floors Bldg. Age Whiting County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Ocean mobile home Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) AAA LEAD PROFESSIONALS Street Address Street Address 6 WHITE DOVE COURT City, State, Zip Code City, State, Zip Code LAKEWOOD, NJ 08701 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 732-668-9078 1200 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 5/7/18 5/25/18 AAA LEAD PROFESSIONALS Occupancy Status During Abatement (Check Only One) Street Address 6 WHITE DOVE COURT Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: LAKEWOOD, NJ 08701 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Repair Custodial Staff? Removal In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A INTERIOR Flooring 300SF x Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste **NEWARK CARTING IESI** 04509 5 City, State Disposal Date City, State NEWARK, NJ 5/25/18 BETHLEHEM PA

Completed by

JOSEPH PERLSTEIN

Title

OWNER

Date

Signature



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Date of Notification (1) 4/26/18				of Building Ridge at			(2)	-	4.0	D 0					
Agencies Notified Type Notification			Street A					let tes	—AP	H 3 () 21	918		世	/
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Emergency (i justification)	ncluding	Ī		f Contact						phone N			er- er.		1
DCA Cancellation				elle Sletv		TION	Karales		732	2-350-9	9000				
Name of Facility Where Abatement is Taking	Place (3)	FAC	LITTINE	UKIVIA	TION	Туре	of Facility (4)			-			=
Street Address							×	School (K-1 Subchapter Other (i.e. p etc.)	8 (Othe			build	lings,	home	es,
City (5) Whiting								re Feet	# of	Floors		В	ldg. A	ge	
County (6) Ocean				Code (7) USE ONLY)			ent Use (Prio	or if bein	g demo	lished	i)			
Name of Monitoring Firm Hired by Building C	me of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) AAA LEAD PROFESSIONALS eet Address Street Address														
Street Address	et Address Street Address 6 WHITE DOVE COURT														
City, State, Zip Code								ip Code OD, NJ 08	3701						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph		0.		License	No.				
	Schedul		npletion	Date (11)		Name	of OSI	HA Monitor D PROFE			911-99				
Occupancy Status During Abatement (Check		34				Street		COLUMN TOWNS OF THE	00101	VALO		2010			
Facility Closed/Vacated During Entire P	eriod of	Abaten	nent			6 WH	HITE I	DOVE CO	URT						
Abatement Performed Outside of Norma Other – Describe:	I Facility	/ Hours			 :	50 50 50 50 50 50		ip Code OD, NJ 08	3701						
Scope of Work (Check All That Apply)						779	9								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	No. of Concession	Renova Demolit				×	Mir	l Containme ni-Enclosure ovebag Proc n-Exempted	edure					e e	
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Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Achae		escription ntaining M		(4 CNA)	۸		-		Тy	ре	
TO BE ABATED In Facility (13)		intenar todial S (12)			therma surf	al systems acing, VA miscellan	s insula T, or		(Sp	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
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INTERIOR						Flooring			10	0SF	X				
EXTERIOR					R	OOFIN	G		60	0SF	X				
											1				
Name of Registered Waste Hauler		l M	JDEP W	/aste	Cubi	c Yards		Name of F	Dogisto-	od I cod	fill				
NEWARK CARTING		Н	auler ID 1509		of Wa			IESI	register	eu Lanu	1111				
City, State NEWARK, NJ					Dispo 5/25	osal Date /18		City, State BETHLE		PA			-10-0		
Completed by JOSEPH PERLSTEIN	Title OWN	IER				Signature					Date				

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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.IAC 8:50 and 12:120)

A CMRRA				to NJAC				office Lemberton	K		F. Service			Mer of	711	
Date of Notification (1) 4/26/18				of Building Ridge at			(2)	and the second	areal married by	A	PR	3 0	20	18		
Agencies Notified Type Not	ification			Address					- 1			-	7. +		340	
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	ergency (including fication)			of Contact						Tele	phon	e Num	her			
	cellation		Roche	elle Slet	vold							0-900				
Name of Facility Where Abatement	is Taking Place (2)	FAC	ILITY INF	ORMAT	ION	_		7							
Walle of Facility Where Abatement	is raking Place (3)					Туре		2.0	250						
Street Address								School		2) 8 (Othe	r than	K-12	Y			
							X	Other (i.e. p	rivate &	com	mercia	l build	dings,	home	es,
City (5)							Squar	etc.) e Fee		# of	Floor	s	В	ldg. A	ge	-
Whiting										1						
County (6) Ocean		İ		Code (7) USE ONLY	n		Currer			or if bein	ig der	nolishe	ed)			
Name of Monitoring Firm Hired by E	Building Owner (8))	ASC	M No.						tractor (
Street Address							No.	0770 1735.07	DFE	SSION	VALS	S				
Olicet Address						Street 6 WH	Addres IITE [CC	URT						
City, State, Zip Code						City, S										
						LAKE				3701						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	one No					ise No				
Start Date (10)	Schedui	ed Cor	mpletion	Date (11)		Name (itor		1200	J				
5/7/18	5/25/1		inpicaon	Date (11)	î				1000	SSION	NALS	3				
Occupancy Status During Abatemen	nt (Check Only Or	ne)				Street										_
Facility Closed/Vacated During	Entire Period of	Abater	nent			5 WH				URT						
Abatement Performed Outside Other – Describe:	of Normal Facility	/ Hour	S			City, St	ate, Zip WOC			2701						
Scope of Work (Check All That Appl	y					LATE		, , ,		701					<u> </u>	
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× ≥160 sf or ≥260 lf	and the same of th	Demoli				ec. ye	Mini	-Enclo	sure		voga	uve i i	coour	C		
				·		×				edure (*) and	Non-	Friable	Prod	cedure	9	
		Locat												Abate		
Location of Asbestos-Containing Material (A	/ / les	Norma d Sole		Anton		scription		(4.00.4)		***			-	Ту	pe	
TO BE ABATED	Ma	intena todial s			tos Cont thermal	systems	insulat				nount		R	71	Enc	E
In Facility (13)	Cus	(12)				cing, VAT				SF	or LF))	Remova	Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	IJDEP W lauler ID	1818 P. B. B.	Cubic of Was					Register	ed La	ndfill				
NEWARK CARTING		1237407	4509	NO.	12	ole.		IESI								
City, State NEWARK, NJ					Dispos 5/25/1	al Date		City.		HEM	ΡΔ					-
Completed by	Title		-			ignature		ا عاد	1 166	-1 L_ V	- ^	Date				
JOSEPH PERLSTEIN	OWN	IER			3	gnature						Date				

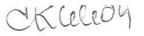
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Date of Notification (1) 4/26/18 Agencies Notified Type Notification I EPA DEP Amended Amendment # Emergency (including justification) Cancellation	Pine F Street A 2 Fox City, Sta Whitin	Ridge at Address St ate, Zip Co	Owner/Operato Crestwood	or (2)		The state of the s	R 3) ;	2018		
EPA DEP Amended Amendment # Emergency (including justification)	2 Fox City, Sta Whitin	St ate, Zip Co				ĺ					o' Distances
DEP Amended Amendment #_ Emergency (including justification)	Whitin Name o				į.	ASSIL	h .		en.		100
DOH justification)	Name o	19, INJ U8				Contraction of the contraction o	A			<u> </u>	
	LOCITE	of Contact				Telephone					
			RMATION			732-330	J-9000	,			
Name of Facility Where Abatement is Taking Place (3)				Туре	of Facility (4)	(
Street Address					School (K-12) Subchapter 8 Other (i.e. pri	(Other than	ı K-12) nercial	buile	dings	, hom	ies,
City (5) Whiting					etc.) re Feet	# of Floors	S	В	lidg. A	Age	
County (6) Ocean		Code (7) USE ONLY)		Curre	nt Use (Prior ile home	if being den	nolishe	d)			
Name of Monitoring Firm Hired by Building Owner (8)	ASCN	/ No.	Name	of Abat	tement Control PROFES	actor (9) SIONALS					
Street Address			Stree	t Addres							
City, State, Zip Code			City, S	State, Zi							
Project Manager for Monitoring Firm	Telephor	ne No.	Telep	hone No -668-90),		se No.				
Start Date (10) Scheduled Co 5/7/18 5/25/18	mpletion [Date (11)	Name	of OSH	A Monitor PROFES						
Occupancy Status During Abatement (Check Only One)	-			Addres		0.0147120					
Facility Closed/Vacated During Entire Period of Abater	ment		6 WI	HITE D	OVE COL	JRT					
Abatement Performed Outside of Normal Facility Hour Other – Describe:	rs .			State, Zip EWOC	o Code DD, NJ 087	01					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renove	ation		Г	7	Containment	idla Nilad					
≥160 sf or ≥260 lf Demoli				Mini Glov	-Enclosure vebag Proced -Exempted (*	lure				_	
Is Local				14011	-Exempled () and Non-r	Tiable		Abate	emen	t
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TO BE ABATED In Facility (13) Maintena Custodial (12)		(i.e. th	hermal system: surfacing, VA other miscellar	s insulat T. or	ion,	Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
Yes No	N/A					and the same of the same of the same of				te	(0)
EXTERIOR			ROOFIN	G		750SF	x	0			
INTERIOR			FLOORIN	IG		300 SF	х				
								-			
	JDEP W	7 TO TO THE REAL PROPERTY OF T	Cubic Yards	T	Name of Re	gistered Lar	ndfill				
0.	lauler ID t 4509		of Waste 15		IESI						
City, State NEWARK, NJ			Disposal Date 5/25/18		City, State BETHLEH	IEM PA					
Completed by Title JOSEPH PERLSTEIN OWNER			Signature				Date		-		



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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

				N OF ASE t to NJAC				IT	Variation of the second	A D	R 3 (201	0	And the state of t	With the same of t	
Date of Notification (1) 4/26/18				of Building Ridge at			(2)	1						- Community (A)	CHANGE ZODO	
Agencies Notified Type Notification EPA X Initial	n		Street / 2 Fox	Address St				+	P.Z.				7 ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;			
DEP Amended X DOL Amendmen				tate, Zip C ng, NJ 0												
□ Emergency justification □ DCA □ Cancellation	1)			of Contact elle Slet						1000000	lephone					
Name of Facility Where Abel and Tall	- DI		FAC	ILITY INF	ORMA	TION										
Name of Facility Where Abatement is Taking Street Address	ing Place (3)					Typ	Scho	acility (ool (K-1 chapter r (i.e. p	2) 8 (Oth	er than & comm	K-12) nercial	build	ings	, hom	es,
City (5) Whiting							Squ	uare Fe	eet	# 0	f Floors		Blo	dg. A	\ge	
County (6) Ocean			County (STATE	Code (7) USE ONLY	,			rent Us bile h		or if be	ing dem	olished	i)			
Name of Monitoring Firm Hired by Building	Owner (8))	ASCI	M No.					ent Con		(9) NALS					
Street Address						Street 6 WH			/E CC	URT						-
City, State, Zip Code				_		City, S			de NJ 08	3701						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph 732-6		No. -9078			Licens 1200					
Start Date (10) 5/7/18	Schedul 5/25/1		mpletion	Date (11)		Name AAA				SSIO	NALS					
Occupancy Status During Abatement (Che	3377					Street		100000	·= 0.0							
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of a mal Facility	Abater / Hour	ment s			City, S	tate,	Zip Co								
Scope of Work (Check All That Apply)						LANE	= ٧٧ (,טטט,	NJ 08	3701						_
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	BACTER CO.	Renova Demoli		-31		×	M G	lini-End loveba	closure g Proc	edure	Negation				e	
Location of		Locat			D.	escription								bate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intena todial (12)	nce/ Staff?		tos Cor therma surfa	ntaining M al systems acing, VA miscellan	ateri insu T, or	lation,		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A												ate	Ø.
EXTERIOR					R	OOFING	G			90	00SF	x				
EXTERIOR						FLASI		G		10	00 LF	x				
INTERIOR			-	-	FL	OORIN	G			40	00 SF	x				
Name of Registered Waste Hauler		H	j IJDEP W lauler ID 4509		Cubic of Wa	Yards aste		Nar IES		Registe	red Lan	dfill				
City, State NEWARK, NJ	W. C.					sal Date 18			, State		1 PA					
Completed by JOSEPH PERLSTEIN	Title	FR			1	Signature					T	Date				

Print Form





Date of Notification (1) 4/26/18					f Building Ridge at		Operator wood	(2)	<			-		2 }	7	
Agencies Notified	Type Notification			Street A 2 Fox					2	1	7		15	7//	11	
DEP × DOL	Amended Amendment		_		ite, Zip Co g, NJ 08					4.7	: "	2011	3	-11	Ш	
X DOH □ DCA	Emergency (i justification) Cancellation	ncluding			Contact	/old		1			lephone 2-350-			10-70-		
	 			FACI	LITY INF	ORMAT	ION	155 16				(i) 1	25	_	1	/
Name of Facility Where	Abatement is Taking	Place (3)						☐ Sc	Facility (4 chool (K-1, ubchapter ther (i.e. p	2) 8 (Oth				dings,	home	es,
City (5) Whiting								Square	Feet	# 0	f Floors		В	ldg. A	ge	
County (6) Ocean				County (Code (7) JSE ONLY)			Use (Price e home	or if be	ing dem	olishe	ed)			
Name of Monitoring Fire	m Hired by Building C	wner (8)		ASCN	1 No.				ment Con							
Street Address							Street	Address		************	224					
City, State, Zip Code							City, St	tate, Zip	5-000				1.	22000		
Project Manager for Mo	nitoring Firm		T	Telepho	ne No.		Teleph	one No.			Licens		•	30111		
Start Date (10) 5/7/18		Scheduled 5/25/18	Con	npletion I	Date (11)		Name	of OSHA	Monitor PROFE	SSIC						
Occupancy Status Duri	ng Abatement (Check		1					Address			TVILO					
			607 300						OVE CO	URT						
Abatement Perform Other – Describe:	cated During Entire P med Outside of Norm	al Facility F	lours	nent S			City, St	tate, Zip	E-votava				11			
Scope of Work (Check	All That Apply)		-		a to report the		1		,							-
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Name of Registered Wa	aste Hauler		N	JDEP W	aste	Cubic	Yards		Name of F	Registe	ered Lan	ndfill				
NEWARK CARTIN	G			lauler ID 4509	No.	of Wa	22-20NS		IESI		XX-20-00-1-00	0.00000				
City, State NEWARK, NJ	5.3					5/25	sal Date 118		City, State BETHLI		ЛРА					
Completed by JOSEPH PERLSTE	EIN	Title OWNE	R			,	Signature					Date	9			



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Date of Notification (1) 04/25/2018		T		of Building		Operator	(2)	III. E	(C)	1-7	7.7	125		1		
Agencies Notified	Type Notification		1	Street A	een Bas	11		1	WI	* (711		
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▼ DOH	Emergency		-		f Contact	, 0, 0,			P.C.	Tel	ephone	Numb	ner.	señ S		
DCA	justification) Cancellation				en Basi	i			Page	101	opnone	Mulli	-			
- Internal				FAC	ILITY INF	ORMAT	ION		E AT SET THEFT							
Name of Facility Where		ng Place (3)						Туре	of Facility (4)					10.	
	ate Rezidence								School (K-1	2)						
Street Address									Subchapter	8 (Oth						
									Other (i.e. p etc.)	rivate (& comme	ercial	Dullo	iings,	nom	es,
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Westfield , NJ 0709	90							150	0	2			5	0+		
County (6)					Code (7) USE ONLY	1			ent Use (Prid	or if bei	ng demo	lishe	d)			
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Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	ИNo.		1		tement Con		(9)				77	
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Street Address							Street			n						
City, State, Zip Code									r Stockin	g Path	1					
City, State, Zip Code							11 02232		ip Code	07001	-					
Project Manager for Mon	itorina Firm	- 00000	1	Telepho	no No				Park , NJ	07033		- 11-				_
. reject manager for mon		relepino	He NO.		Teleph 862-				License 01306							
Start Date (10)		Scheduled	Con	nletion	Date (11)		2020		HA Monitor		01300	,				
05-08-2018		05-09-2		ipicuon	Date (11)				truction L	LC						
Occupancy Status During	g Abatement (Chec			-			Street	A STATE OF THE STA								
X Facility Closed/Vac				ont					r Stocking	a Path	1					
Abatement Perform	ed Outside of Norr	nal Facility F	lours	ieni					ip Code			-				-
Other – Describe:			5110000						Park , NJ	07035	5					
Scope of Work (Check A	II That Apply)															
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× ≥160 sf or ≥260 lf		De	moliti	ion			_	Mir	ni-Enclosure	•		77.07.01.7		-		
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(13)	ity .		(12)				miscellan		- 1	51	or LF)		Removal	Repair	Encapsulate	Enclosure
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Nari Construction LL	auler ID		of Wa			G.R.O.\										
City, State	037535)	10 C			0.00000-2000-2000-2000-2000-2000-2000-2										
Lincoln Park , NJ						TBD	sal Date		City, State Morrisv		٥Δ					
Completed by Title						_00000000000000000000000000000000000000	Signature		IVIOITISV	iiie , r		Date				
Igor Jezdimirovic			t Ma	nager		,	Jigilalule							2012		
		Manager 04-25-2018														

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check#3043 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 04 26 18 Jackie Bondarenko 2018 Agencies Notified Type Notification Street Address ☐ EPA ✓ Initial **⊠** DOLWD ☐ Amended City, State, Zip Code Amendment #_ X DHSS West Orange, NJ 07052 ☐ DCA ☐ Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number Cancellation Jackie Bondarenko **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age West Orange, NJ 07052 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Essex 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 08 / 18 05 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___AM 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 Glovebag Procedure Tent with Negative Pressure Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Remova Repair Encapsulate Enclosure Used Solely by Asbestos-Containing Material (ACM) 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 \boxtimes X Ш Basement 15 LF Pipe insulation 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 leutic Wenad 04/26/18 N.Jevtic Owner

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

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Date of Notification (1) 04-25-2018				ding Ov Iulligar	vner / Operator	(2)	EGH		122	7.51	
Agencies Notified Type Notification	Stree				·	1131				111	
⊠ EPA							APR 20	2018	3	111	1
☐ DEP ☐ Initial (Page 1 of 2) ☐ DOL ☐ Amended (site address				ZIP Coo	de	[4 4]	VI :,			Laborator	
☑ DOL ☑ Amended (site address) ☑ DOH ☐ Emergency	Name						Tele	ephon	e Nu	mbe	-
DCA Cancellation				lulligar	n		Acris				
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Name of Facility Where Abatement is Taking Plac		AL	/ILI I	INFO	Type of Facility	(4)					
Former Restaurant and Bar Supply Company	0 (0)				School (K-						
Street Address					☐ Subchapte	r 8 (Other than K	-12)				
1200 White Horse Pike						private & comme		nome J. Age		C.)	
City (5) County (6)	County	Co	nde (7	7	Square Feet 30,000	# of Floors	Bidg		100		
Oaklyn, NJ 08107 Camden	County	00	1) 00/	,		rior if being demo	olished)				
					Former Restau	rant and Bar Sup	ply Company				
Name of Monitoring Firm Hired by Building Owner	(8)		ASCI	VI No.		ment Contractor					
ATS Group, LLC Street Address					Street Address	agement Group,	LLC				-
200 Federal Street, Ste 213						Ave, Suite 202					
City, State & Zip Code					City, State & Zi						
Camden, NJ 08103					Trenton, NJ 08		1				_
	elephon 88-249-3			er	Telephone Nur 609-914-4279	nber	License Nun	nber 01185	5		
Scheduled Start Date (10) Scheduled Comp 4-23-2018 Scheduled Comp	letion D		(11)		Name of OSHA	A Monitor ental Laboratorie	s Inc.				
Occupancy Status During Abatement (Check only		_			Street Address		0, 1110.				
Facility Closed/Vacated During Entire Per	iod of A	bat	emer	it	2333 Route 22						
Abatement Performed during Normal Hou	ırs:				City, State & Z Union, NJ 070						
Describe: 7:00am 7:00pm weekdays & Facility Occupied During Abatement	weeken	ds									
Scope of Work (Check all that apply)		-									
				nment with Neg	ative	Pres	sure				
□ ≥3 sf or ≥3 lf			vatio		1	Mini-Enclos	sure Procedures				
⊠ ≥160 sf ≥260 lf	⊠ De	em	olition	1		□ Glove Bag Non-Exem	oted and Non-F	riable	Pro	cedu	re
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	Normally				Asbestos-Cont	aining	(Specify			_	
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2 nd floor office		1	DEB	Floor	tile Cubic Yards	Name of Registe					
Name of Registered Waste Hauler					of Waste	Traine of regist	J. Ju Lullulli				
Resource Management Group, LLC			35218		TBD	Grows Landfill					
City, State Trenton, NJ 08619					Disposal Date TBD	City, State Morrisville, PA					
	1-	Titl	0		Signature)		Date			
Completed By (Print or Type) Mr. Brian Haney			e esider	nt	Oignature	/		4-25-		3	
IVII. Ditail Halley		. 10	,0,00	**	/ /						

State of New Jersey

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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) 04-25-2018 Jim & Lori Mulligan Agencies Notified

EPA Type Notification Street Address DEP Initial City, State & Zip Code $\overline{\times}$ X DOL Amended (site address) Oaklyn, NJ 08107 X DOH Emergency Name of Contact Telephone Number DCA Cancellation Jim & Lori Mulligan **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Former Restaurant and Bar Supply Company School (K-12) Street Address Subchapter 8 (Other than K-12) 1200 White Horse Pike Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 30,000 100 Oaklyn, NJ 08107 Current Use (Prior if being demolished) Former Restaurant and Bar Supply Company Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ATS Group, LLC Resource Management Group, LLC Street Address Street Address 200 Federal Street, Ste 213 2115 Hamilton Ave, Suite 202 City, State & Zip Code City, State & Zip Code Camden, NJ 08103 Trenton, NJ 08619 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Mr. Jim Malanos 888-249-3017 609-914-4279 01185 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 4-23-2018 J&S Environmental Laboratories, Inc. 5-4-2018 Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West Abatement Performed during Normal Hours: City, State & Zip Code Describe: 7:00am 7:00pm weekdays & weekends Union, NJ 07083 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure X ≥160 sf ≥260 If Demolition Glove Bag Procedures X Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Material (ACM) Solely by SF or LF) Encapsulat Enclosure Removal TO BE ABATED Maintenance or (i.e., thermal systems Repair in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes N/A No 1st floor bathroom X Floor tile X 20 SF Showroom X X Flooring 100 SF Storage room X X panels П 240 SF Room above boiler room XII Floor tile 300 SF Roof X Roofing Material 11.300 $\boxtimes \square$ П Roof 90 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill

Hauler ID No.

0035218

President

Title

Resource Management Group, LLC

Completed By (Print or Type)

City, State

Trenton, NJ 08619

Mr. Brian Haney

of Waste

Signature

Disposal Date

Grows Landfill

Morrisville, PA

Date

4-25-2018

City, State

TBD

TBD

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1)					wner / Operator	(2)	=	1 - 1							
04-4-2018				Mulliga	an []	DIL									
Agencies Notified Type Notification	S	Street	Addre	ess		III APR	3 0 2018								
☐ DEP ☐ Initial (Page 1 of 2)	C	City. S	tate &	Zip Co	ode	1	2010	board !							
□ Amended	10	Daklyr	n, NJ (08107		Ĺ		-							
☐ DOH ☐ Emergency			of Co			From	Те	lephone Number							
☐ DCA ☐ Cancellation	J	lim &	Lori I	Mulliga	an	a sal emagning of year									
		FA	CILIT	Y INFO	DRMATION			· · · · · · · · · · · · · · · · · · ·							
Name of Facility Where Abatement is Taking Pl	ace (3)			Type of Facility	y (4)									
Former Restaurant and Bar Supply Company					School (K										
Street Address 1208 White Horse Pike					Subchapte	er 8 (Other tha	n K-12)	h							
1230 White Horse Fike					Other (i.e. Square Feet	# of Floo	mercial buildings	g. Age							
City (5) County (6)	Cou	unty C	ode (7)	30,000	2	no Did	100							
Oaklyn, NJ 08107 Camden			•		Current Use (F	Prior if being de									
N			T		Former Restaurant and Bar Supply Company										
Name of Monitoring Firm Hired by Building Own ATS Group, LLC	er (8)		ASC	M No.	Name of Abate										
Street Address					Resource Man Street Address		p, LLC								
200 Federal Street, Ste 213					2115 Hamilton		2								
City, State & Zip Code															
Camden, NJ 08103 Project Manager for Monitoring Firm	Talan	h	A I d		Trenton, NJ 08		II : Ni	t							
Mr. Jim Malanos	Telep 888-2			per	Telephone Nu 609-914-4279		License Nu	mber 01185							
Scheduled Start Date (10) Scheduled Con	-	_	-		Name of OSH	A Monitor		01100							
4-23-2018	5-4-2					ental Laborato	ries, Inc.								
Occupancy Status During Abatement (Check or Facility Closed/Vacated During Entire P			tomo	nf	Street Address 2333 Route 22										
Abatement Performed during Normal He		JI ADO	iterrie	IIL	City, State & Z										
Describe: 7:00am 7:00pm weekdays	& wee	kends	;		Union, NJ 070										
Facility Occupied During Abatement															
Scope of Work (Check all that apply)						□ Full Con	tainment with Ne	native Pressure							
≥3 sf or ≥3 lf		Ren	gative i ressure												
≥160 sf ≥260 If	\boxtimes	Den	nolition	n		☐ Mini-End ☐ Glove Ba	ag Procedures								
Location of	400	Locati	35,500		Description		Amount	Abatement Type							
Asbestos-Containing Material (ACM)		nally tolely b			Asbestos-Cont Material (AC		(Specify SF or LF)								
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in Facility	Custo		Staff?		nsulation, surfaci			Enclosure Encapsulat Repair Removal							
(13)	Yes	(12) No	N/A		or other miscella	ineous)		osure osulat oair							
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Showroom	H	H	-	Floori			100 SF								
Storage room	片	H		Panels			240 SF								
Room above boiler room	H	H	X	Floor			300 SF								
2 nd floor garage area & corner office	H	H	_	Floor			200 SF								
2 nd floor office	Ħ	X	Floor			400 SF									
Name of Registered Waste Hauler		DEP	Waste	Cubic Yards	Name of Regi	stered Landfill									
Resource Management Group, LLC		uler II 35218		of Waste TBD	Grows Landfil	I									
City, State				Disposal Date	City, State										
Trenton, NJ 08619		-			TBD Morrisville, PA										
Completed By (Print or Type)		Tit	ALCOHOLD STREET	nt.	Signature			Date 4-4-2018							
Mr. Brian Haney		Pre	esider	IL				1-4-ZU10							

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

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Date of Notification	(1)					ing Own ulligan	er / Operator (2)	EGE	7 77 77						
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⊠ EPA			City	Sia	re & /	ip Code	14 1	- APH 3	0 2018	U					
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Name of Facility W	Iboro Abatama	ent is Taking Plac				1	Type of Facility (4)							
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Street Address	t and bar oup	ory Company				MADE NO.	☐ Subchapter	8 (Other than K	-12)	0					
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City (5)		l (o)	000,			,	Current Use (Pri	or if being demo	olished)						
Oaklyn, NJ 08107		1					Former Restaura	ant and Bar Sup	ply Compan	y				_	
CAA 31 3	- Cina Hisad I	Puilding Owns	or (8)		ASC	VI No.	Name of Abaten	ent Contractor	(9)						
Name of Monitorin	ig Firm Hired i	by Building Owne	51 (0)		, 100.		Resource Manag	gement Group,	LLC					_	
ATS Group, LLC							Street Address								
Street Address	+ Cto 212						2115 Hamilton A	ve, Suite 202							
200 Federal Stree				_			City, State & Zip	Code							
City, State & Zip (Trenton, NJ 086						-	\dashv	
Camden, NJ 0810 Project Manager	for Monitoring	Firm	Telepho	ne l	Numb	er	Telephone Num	hber License Number 01185							
Mr. Jim Malanos	ioi wormornig	1 11111	888-249	-30	17		609-914-4279			0118	55			-	
	Data (10)	Scheduled Com		-			Name of OSHA	Monitor						- 1	
Scheduled Start I		Scrieduled Oon	5-4-201		(,		J&S Environme	ntal Laboratorie	s, Inc.					_	
4-23-2	During Abot	amont (Chock or		_	-		Street Address							- 1	
Occupancy Statu	is During Abai	During Entire P	ariad of	Δha	teme	nt	2333 Route 22	West						-	
- Facility C	losed/vacated	Juning Little I	olica or	, LDC			City, State & Zi	Code						1	
	nt Performed	during Normal Ho Opm weekdays	Juis. & weeke	nds	;		Union, NJ 0708	3							
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≥160 sf ≥	2200 11							Non-Exen	npted and No	on-Friad	le i	2100	edui	=	
	Location of		Is Lo	cat	ion		Description		Amount	At	bate	eme	nt Ty	be	
Act	pestos-Contair	nina	Norma				Asbestos-Conta		(Specify				m	_	
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	TO BE ABATE		Mainte	nar	ice of	1	(i.e., thermal sy	stems		Kellio	3	Repair	Encapsi	Enclosure	
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	(13)		(12)			or other miscella	neous)		1 =	-		ulat	Ø	
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Showroom			+#+	片					240 SF				Ц	Ш	
Storage room			1 1 1	님					300 SF	D	1				
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Roof							transite				7				
Name of Regist	tered Waste F	lauler		N	JDEF	Waste	Cubic Yards	Name of Regis	sterea Landii	ш					
Maine of Negis	torou vidoto i					ID No.	of Waste	01	,						
Resource Mana	agement Grou	p. LLC		0	0352	18	TBD	Grows Landfill							
		Prof.					Disposal Date	City, State							
City, State	610						TBD	Morrisville, PA	200						
Trenton, NJ 08				1-	":A1 -		Signature			Da	ate				
Completed By				1	itle		Signature			4-	4-2	018			
Mr. Brian Hane	ey			1	resid	ent	1 1/2								
Dec. 1	75					jet:	3	and the same of the same							

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50 A 1 5000 M	PAL		(P	ursuant	to NJAC	8:60 an	d 12:12	0)	CH	tE@t	# 1	36	7 7	94-0	
Date of Notification (1) 04/24/2018				Name o 182 P	of Building PAULSB	Owner/0	Operator LC	(2)		15	100		100		
Agencies Notified	Type Notification			Street A 745 H	ddress HULSES	CORN	NER R	DAC			APR 3 C	20	18	-	
DEP DOL	Initial Amended Amendment #_			City, Sta HOW	ate, Zip Co ELL NJ	ode 07731			-	- Land					
DOH DCA	 Emergency (inc justification) Cancellation 	luding	ŀ	Name o ED W	f Contact /EST				,	-	phone Nur	nber			
				FACI	ILITY INFO	ORMAT	ION								
Name of Facility Where Ab RESIDENTIAL	patement is Taking P	lace (3)						Ту	pe of Facility School (K-						
Street Address								V	Subchapte Other (i.e.	r 8 (Othe			dings,	hom	es,
City (5) PAULSBORO									etc.) uare Feet 196	# of 2	Floors		3ldg. <i>A</i> 39	ige	
County (6) GLOUCESTER					Code (7) USE ONLY)			Cu R	rrent Use (Pr ESIDENTI	ior if bein AL	g demolish	ied)			
Name of Monitoring Firm F ACER ASSOC.	lired by Building Owr	ner (8)		ASCN	/ No.		Name ASS	of A	batement Co ED ENVIR	ntractor (9) NTAL SE	RVI	CES	INC	
Street Address 1012 INDUSTRIAL D	DRIVE						Street 570		ress EMS RUN						
City, State, Zip Code WEST BERLIN NJ 0	8091								, Zip Code CA HILL NJ	08062				- Enc	
Project Manager for Monitor MATT DEPALMA	Project Manager for Monitoring Firm MATT DEPALMA						Teleph 610-		No. 1-4676		License N 01145	0.			
Start Date (10) 04/25/2018		heduled (4/26/20		pletion I	Date (11)		Name EMS		SHA Monitor		***************************************				
Occupancy Status During /	Abatement (Check O	nly One)					Street	Add	ress						
Facility Closed/Vacate Abatement Performed Other – Describe: B/	Outside of Normal F	acility Ho	nire	City State Zin Code											
Scope of Work (Check All	That Apply)						200000000000000000000000000000000000000	3370070							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	[THE REAL PROPERTY.		Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						a.					
		ls Lo	catio	on									Abate	ment	•
Location o		Norr Used S					scription					-	Ту	pe	
Asbestos-Containing M <u>TO BE ABAT</u> In Facility (13)	ED	Mainte Custodi	nan	ce/	Asbest (i.e.	thermal surfa	systems cing, VA niscellan	ins T, or		(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
DAOENAEN		Yes N	10	N/A		==								е	
BASEMEN	N1		X BOILER INSU					_AT	ION	16	SF	X			
				1 2 2 2 2											
Name of Registered Waste ASSURED ENVIRON		CES	Ha	IDEP Wauler ID 34895	No.	Cubic of Was 6					ed Landfill NDFILL				
City, State MULLICA HILL NJ							sal Date 8/2018	$\overline{}$	City, Stat WAYN	e ESBUF	RG, OH				
Completed by RON SWANSON	RAL	. MAN	AGER	S	ignature	Ka	well he	XU1991	7 Da		2018				

page 1 PAGE 83/04 ASSURED SERVICES 04/24/2018 11:21AM 18562249799 MANAGEST SENATORNO C Lift - In nav State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and (2:120) CHECK# Name of Building Owner/Operator (2) 182 PAULSBORO LLC Date of Notification (1) 04/24/2018 Type Notification Street Address
745 HULSES CORNER ROAD Agencies Notified DP EPA Initial City, Stale, Zip Code Amanded DEP HOWELL NJ 07731 V DOL Amendment # Emergency (including Name of Contact Telephone Number DOH justification) ED WEST DCA Cancellation FACILITY INFORMATION Name of Facility Where Abstement is Taking Place (3) Type : Facility (4) REGIDENTIAL # hord (K-12) Street Address If ibcliapter 8 (Other than K-12) C her (i.e. private & commercial buildings, homes, Bquair Fest City (5) PAULSBORO # of Floors Bldg, Age 2496 Currer Use (Prior II being demolished) RES DENTIAL County Code (7) (STATE USE ONLY) County (8)
GLOUCESTER Name of Manitoring Firm Hired by Building Owner (8) ACER ASSOC. Name of Abai mont Contractor (9)
ASSUREI: ENVIRONMENTAL SERVICES INC. ASCM No. Street Address Street Address 1012 INDUSTRIAL DRIVE 570 CLEN S FIUN City, State, Zi Code MULLICA TILL NJ 08062 City, State, Zip Code WEST BERLIN NJ 08091 Project Manager for Monitoring Firm MATT DEPALMA Licensa No. Telephone No. Telephone No 856-809-1202 810-304-4 176 01145 Start Date (10) Scheduled Completion Date (11) Name of OSH & Monitor 04/25/2018 04/26/2018 EMSL Occupancy Status During Abatement (Check Only One) Street Addres 200 RT. 1: 0 NORTH Facility Closed/Vacated During Entire Period of Absternant Abatement Performed Outside of Normal Facility Hours Other - Cescribe: BASEMENT VACANT DURING REMOVAL City, State, 2 Crde CINNAMII ISON NJ 08077 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation 23 of or 23 If Min -Enclosure ≥160 af or ≥280 if Demotition Gip whig Procedure No -Exampled (*) and Non-Frieble Procedure Abetement is Location Type Normally Location of Description of 18 Used Solely by Asbestos-Containing Material (ACM)
TO BE ABATED Asbestos Containing Material (ACM) Amount Maintenancel Encapsulate Enclosure (i.e. thermal systems insult ion. (සිදුලෙක්) Remova Repair Custoplat Staff? auriscing, VAT, or Facility SF or LF) (12) (13) other miscettaneous) Yes No NIA BOILER INSULATION 18 SF BASEMENT X K

Signatule Completed by RON SWANSON GENERAL MANAGER

NJDEP Weste

Hauler ID No. 0034895

Cubic Yerds

Disposal Date 04/26/2018

of Waste

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

04/24/2018

Name of Registered Landfill

MINERVA LANDFILL

Cly, State WAYNESBURG, OH

LATELANGUMA

City, State MULLICA HILL NJ

Name of Registered Waste Hauler

ASSURED ENVIRONMENTAL SERVICES

0K 12019

Date of Notification (1) 04/23/2018)	Na	ame of Buildir	ng Owner/	Operato	r (2)				7	111				
Agencies Notified Type Notification			reet Address	21050		-				111					
EPA	(including	Cit Po Na	ty, State, Zip ompton Pla ame of Contac licheal Gra	ains, NJ	07444			3 0 20		-					
			FACILITY IN		ION		_	-							
Name of Facility Where Abatement is Takin Private House Street Address City (5)	g Place (3)					Type of Facility School (K- Subchapte Other (i.e. etc.)	-12) er 8 (Oth	er than K- & commer	12) cial bu	ildings	s, hom	nes,			
Pompton Plains, NJ 07444						Square Feet 1250	# 0	f Floors		Bldg. 50+	Age				
County (6) Morris		Co (S7	unty Code (7 FATE USE ONL) .y)		Current Use (Pi	rior if be	ing demoli			1800				
Name of Monitoring Firm Hired by Building N/A	Owner (8)	1	ASCM No.		Name Nari	of Abatement Co Construction	ntractor LLC	(9)							
Street Address		,				Address eather Stockir	ng Patl	1							
City, State, Zip Code						state, Zip Code oln Park NJ 07	7035								
Project Manager for Monitoring Firm			ephone No.			none No. 264-9463		License I	No.						
Start Date (10) 05/04/2018	05/05/20	18	etion Date (11)		of OSHA Monitor Construction I									
Occupancy Status During Abatement (Chec						Address		***********							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	eriod of Aba al Facility H	atement ours	i .		City, S	eather Stockin		1							
Scope of Work (Check All That Apply)			Lincoln Park NJ 07035												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation nolition													
		cation				- Non Exemple	u () am	1 NON-FIIdi	Jie Fro	Abat	emen	t			
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility	Used S Mainte Custod	mally Solely by enance/ ial Staff	Asbe	stos Conta thermal:	cription aining M systems ing, VA	aterial (ACM) insulation,	(S	mount pecify	Re		/pe Enca	Enc			
(13)		12)	I/A	other m	iscellan	eous)	51	or LF)	Removal	Repair	Encapsulate	Enclosure			
Basement	168 1		X	Pine	Insulat	ion	20	015	-						
			· ipc	moula	301		00 LF	x		Х					
Name of Registered Waste Hauler		NIDE	P Waste	Cubic Y	/ard-										
Nari Construction LLC			r ID No.	of Wast		G.R.O.		red Landfill							
City, State Lincon Park, NJ				Dispose		City Of A		(LE	P	-		-			
Completed by Igor Jezdimirovic	Title Project	ger		gnature	THOL	NC JV	Date 04/23/2018								

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Date of Notification (1)		Name	of B	uilding Owner/Ope	erator (2)		APR	10	2018		1
2/25/18		E	STI	ATE OF	0	UVIA	AVIS APR				Lesson
Agencies Notified Type Notification		Street	t Addı	ress			<u> </u>				- Common
□ EPA ☑ Initial		City	State	, Zip Code			Page 1		-		
DEP		City,	June,	TE A A) EC	10	NJ. DI	2666			4-	
☐ Emergency (inc	luding	Name	e of C	ontact		100.	Telephone Number	r		_	
DOH justification ☐ DCA ☐ Cancellation				RYAN DA	WIS						
DCA COMMON				TY INFORMATI							
Name of Facility Where Abatement is Taking Place	ce (3)					Type of Facility (4)				
AIVIJO TO STATES	NAG	15	= 1	-		☐ School (K-12					
Street Address						Subchapter 8 Other (i.e. pr.	ivate & commercial bu	ilding	s, hom	es, et	c.)
_						Square Feet	# of Floors				-
City (5)		15. 23				1800	2		1g. Ag	10	
TEANECK		I Comm	- C-	1- (7)		* *	if being demolished)	1.	•	<u> </u>	-
County (6) RERGEN				ode (7) SE ONLY)		Curicin os (Trici	ESIDENC	25			
Name of Monitoring Firm Hired by Building Own	ner (8)	ΙΔ,	SCM	No	Name	of Abatement Contra					
Name of Monitoring Fifth Filed by Building Own	ici (6)	, Au	JCIVI .	140.							
Street Address					Street	t Removal Address	Inc				
Sueet Address					450	South Ri	ver Street				
City, State, Zip Code						tate, Zip Code					
-	2				Hacl	kensack,	NJ 07601_				
Project Manager for Monitoring Firm		Telep	phone	No.		one No.	License No.				
					201	- 329 - 7444 of OSHA Monitor	00388	3	74		
Start Date (10)	Scheduled C	ompletio	n Date	e(11)	Name	of OSHA Monitor					
5/8/18	2	5/4	11	8	Ome;	ga Enviro	nmental				
Occupancy Status During Abatement (Check Onl	y One)	•	,	*		Address					
☐ Facility Closed/Vacated During Entire Period	d of Abatem	nent				Huyler S	treet				
Abatement Performed Outside of Normal Fa	acility Hours	5 DM				State; Zip Code		776	0.0		
					Sou	th Hacken	sack, NJ (1/6	06		
Scope of Work (Check All That Apply)	/-					T Full Containme	nt with Negative Press	aire			
≥3 sf or ≥3 if ≥160 sf or ≥260 if		novation nolition			9.7	Full Containme Mini-Enclosure		Juic			
2100 St 01 2200 ii	- T-				- 57	Glovebag Proce	edure (*) and Non-Friable P	roced	ire		
	T -	+	-		1	☐ Non-Exempted	(*) and Noti-Friable i	Tocca	Abate	ment	
	267,000	ocation							Ту	ре	
Location of		rmally Solely by			escription	n of Naterial (ACM)	Amount			н	
Asbestos-Containing Material (ACM) TO BE ABATED	P 02.37	itenance/ dial Staff	,		tems insu	ulation, surfacing,	(Specify	Ren	Re	inca	Encl
In Facility (13)		(12)	.	other	VAT, or miscella	5551.5	SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	77	I »	T/A					-		ite :	6
	Yes	No N	√A				110 / E	10			-
BASEHENT		,	7	THERMAL	INSL	ICATION	1104F	×		_	-
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	+										
Name of Registered Waste Hauler		NJDF	EP Wa	aste Cubic	Yards	/ Name of	Registered Landfill				
There of respective trade reader		- 1 TO THE R. C. P.	er ID 1		ste 7	6		1100			
Best Removal Inc		1	710	19	2/		rva Enter	ori	ses	,	LLC
City, State					sal Date	. 0		т ,	1.00	0	
Hackensack, NJ 07601	Title				Signatur	77 64	esburg, Ol		468	00_	
Completed by	1 0-2	imet	0 25			Maisron	۵ هـ	9/2	5	18	
J. Maiorano	LSU	imato	Ur		X						- 1100
ASB-41 (R-06-08)					()	* Do not use this fo	rm for asbestos licensi	ire exe	empted	l activ	rities.





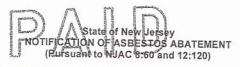
Date of Notification (1)	/ Ne	ame of Buildin	Owner/Operator	(2)		7 7	•		
7-d6	-18		Steph	anie	ETERSON)	(1) (1)	1	
Agencies Notified Type Notification	St	reet Address		i limi j				1	To be a section of the section of th
☐ EPA	. Ci	ty, State, Zip (Code		I AFT	201	8	₩	#
DOL Amendmen	t#	The state of the s	smerv	ille N	T 08	87	6	Human	-
DOH Emergency justification		ame of Contac	1	- Lake	Telephone Nu	mhar		-1	
□ DCA □ Cancellatio			nie le	terson					1
Name of Facility Where Abatement is Taki	na Place (3)	FACILITY IN	FORMATION	Type of Facility	(4)			- /	
Single famil	y Dwel	lina	1	☐ School (K-					
Street Address	9 200			□ Subchapte	r 8 (Other than K-1	2)		72	
				etc.)	private & commerc	iai buil	dings	, home	es,
City (5)	11-	200 m -		Square Feet	# of Floors	E	Bldg. A	-	
Somerville County (6)		0887		Current Head /D-			6	24	_
(ounty Code (7) TATE USE ONL		Current Use (Pr	ior if being demolis	nea)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCM No.	Name o	of Abatement Co	ntractor (9)			4	
EPC Technolo	sies	· N/I	A E		chnolog	ie	S .	In	34
Street Address	77		Street /	Address		3			
RO. DOX 3	37		P.	0. Box	337				
City, State, Zip Code	MITC	1953	2 City St	ate, Zip Code	TIA SA.	A	94	12	2
Project Manager for Monit rij gr-Firm	Te	lephone No.	Telepho	one No.	License N	lo	0		
Steve Schenke	1000	09 758		158-330		5.3	39	4	
Start Date (10)	Scheduled Comple	etion Date (11) Name o	of OSHA Monitor	1			-	
May 7th 2018	May 1	1 20			hnologies	I	nc		
Occupancy Status During Abatement (Che			Street A	828	727				
Facility Closed/Vacated During Entire Abatement Performed Outside of Non	Period of Abatemen	nt		ote, Zip Code	351				
Other – Describe:	mar radiity ridars			w Egypt	AIT	าส	52	2	
Scope of Work (Check All That Apply)				JIPI	700	70-			
≥3 sf or ≥3 lf	Renovation	n		Full Containm	ent with Negative i	ressu	re		
≥160 sf or ≥260 lf	☐ Demolition	l.		Mini-Enclosur Glovebag Pro					
					d (*) and Non-Frial	ole Pro	cedur	e	
	Is Location							ement /pe	t
Location of	Normally Used Solely b	by Ash	Description of stos Containing Ma		Amount	-	Γ,		Г
Asbestos-Containing Material (ACM) TO BE ABATED	Maintenance Custodial Stat	2/ / /16	e. thermal systems	insulation,	(Specify	Re	R	Encapsulate	Enc
In Facility (13)	(12)		surfacing, VAT other miscellane		SF or LF)	Removal	Repair	psu	Enclosure
(1.5)	Yes No	N/A		,		al	-	late	16
0	 		下"		1100 05	+	-		\vdash
basement.	X		ion Tiles	n ·	400 SF	K	-		-
Basement	X	IR	ansite	ripe	2 SF	X	-	-	-
						-			-
		ED Wests	Cubic Yards	Name - f	Dogistared Landel				
Name of Registered Waste Hauler	100 200 TOTAL	EP Waste ler ID No.	of Waste		Registered Landfil		,	,	2.6
EPC Technologie	s li	7000	2	Was	te_Manage	nen	to	Ft	W.
City, State New Equot	NJ.		Disposal Date	City, Sta	te uisville 1	PA			
Completed by	Title		Signature	-C1	Di Di	ate			
Steve Schenker	Presiden	1	Slee	ep) Oke	ohn	4-	16	-/8	3

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		and the efficients of	(17	ursuam	to NJAC	8:60 a	na 12:12	0)			1-1-7	9000 III D		11.00		
Date of Notification (1) 4/24/18					of Building		STATE AND A TANK A LAND AND A LAND A LAND A LAND AND A LAND A LA			, da	L				. 17	-, -
Agencies Notified	Type Notification	<i>p</i>		Street A		cole V	ilbur Pi	rıva	te Home	H L						
	15.5	Le.		Street F	Address						AT	77	0	201	8	
EPA DEP	Initial Amended		ŀ	City, Sta	ate, Zip C	ode										1
⊠ DOL	Amendmen		_		Bottom		800									_1
⊠ DOH	Emergency justification	(including			of Contact					Te	lephone	Numl	per			
☐ DCA	Cancellation	1		Ginge												
Name of Facility Where	Abatement is Takir	ng Place (3))	FAC	ILITY INF	ORMA	TION	T	pe of Facility	(4)						
Andrew & Nicole \			,													
Street Address								H	School (K- Subchapte		er than I	K-12)				
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City (5)								Sc	quare Feet	# 0	f Floors		В	ldg. A	Age	
Ship Bottom NJ 08	3008							1	+ 000	2			3	35+		
County (6) Ocean					Code (7) USE ONLY	3			ırrent Use (Pr	ior if be	ing demo	olishe	d)			
Name of Monitoring Firr	n Hirod by Building	O (0)						_	hed							
N/A	in Hired by Building	Owner (8)		ASC	vi No.				Abatement Co	ntractor	(9)					
Street Address							Street							-		
							-		329							
City, State, Zip Code							City, S	State	, Zip Code					XUITE		-
A CONTRACTOR OF STREET							Wes	st B	erlin NJ 08	091						
Project Manager for Mo	nitoring Firm			Telepho	ne No.		Teleph				Licens		8			
Start Date (10)	10	1.0	5				3-9800		0072	7						
5/4/18		Schedule 5/11/18		npietion	Date (11)		Name		SHA Monitor							
Occupancy Status Durin	ng Abatement (Chec						Street	100	Iress							
	ated During Entire			ent			1									
Abatement Perform	ned Outside of Norr	nal Facility	Hours	One			City, S	State	, Zip Code							
Other – Describe:			100													
Scope of Work (Check A	All That Apply)	-														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	enova emolit				-	-	Full Containm	ent with	Negativ	e Pre	ssur	e		
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		T			I		×		Non-Exempte	d (*) an	d Non-F	riable				
			Locati ormal												ement pe	t
Location Asbestos-Containing		Used	Sole	y by	Asbes		escription		rial (ACM)	Δ	mount	t		Ė		
TO BE AB In Faci	ATED	100000000000000000000000000000000000000	ntenar odial S			therma	systems	s ins	ulation,	(8	Specify		Re	ZJ	Ence	Enc
(13)			(12)			other	acing, VA miscellar	i, o neou	r s)	SF	or LF)		Remova	Repair	Encapsulate	Enclosure
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Name of Registered Was	eto Haules		1	IDEE !!	l1:											
1370	200	JDEP W auler ID		of Wa	Yards ste		Name of	2000000-0	red Land	dfill						
United Roll Off	2	2459		4			G.R.O	.W.S.								
City, State Elm NJ				1 2	sal Date		City, Stat			8						
Completed by		Title				5/11	1.857//		Morris	/ille P/	1960					
Anthony T Perna		Presid	dent			1	Signature	3				Date 4/2		2		
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(h/0010)		NOT	IFICATIO	N OF AS	New Jers BESTO: C 8:60 a	SABAT	<i>} ∫</i> EMEN 20)	IT			55 (0040	The state of the s	
Date of Notification (1) 4/26/18			Name	of Buildir	ng Owner	/Operato	or (2)			Α	PR C	3 U	2018		
Agencies Notified Type Notificati	on	-		Address	JIISHUC	uon				4	10 30 1	7	1110	<u> </u>	
EPA Initial				Bartlett	Ave				apren nem	A Diversion of the		56	9	644 T.3254	
DEP Amended				tate, Zip											
Emergend	y (including]			NJ 080)92									
DCA justification Cancellation			100	of Contace Lynn C						lephone 09-296-		r			
					FORMAT	TION			01	J9-290-	0700				
Name of Facility Where Abatement is Tal	king Place (3)					Тур	e of Facility	(4)			-			
Street Address								School (K	-12)						
							×	Subchapte Other (i.e.	er 8 (Otl private	ner than I & comm	<-12) ercial bu	ildina	s hom	165	
City (5)								etc.) are Feet			7			100,	
Little Egg Harbor							Squ	are reet	1	f Floors		Bldg.	Age		
County (6) Ocean				Code (7)		-	Curi	ent Use (Pr	rior if be	ing demo	olished)				
5000000000				USE ONL	Y)		hor	ne			,				
Name of Monitoring Firm Hired by Buildin	g Owner (8)		ASCI	M No.		Name	of Ab	atement Co	ontractor	(9)			39-20-		
Street Address						-		D PROF	ESSIC	NALS					
							eet Address WHITE DOVE COURT								
City, State, Zip Code			City,					, State, Zip Code							
Project Manager for Monitoring Firm								OD, NJ	08701						
1 10,000 Warrager for Mornicoring Firm			Telepho	ne No.			lephone No. License No. 32-668-9078 1200								
Start Date (10)	Schedule	ed Co	mpletion	Date (11	<u> </u>			HA Monitor		1200					
5/7/18	5/11/18	3	- Will 120					D PROFE		NALS					
Occupancy Status During Abatement (Che		(2)	/			Street					- 1000				
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of A mal Facility	Abater Hour	ment s			City, S	tate, Z	DOVE Code		·		-			
Scope of Work (Check All That Apply)						LAKE	EWO	OD, NJ 0	8701						
≥3 sf or ≥3 If	Пь	222011	ation a				٦ _								
≥160 sf or ≥260 If		enova emoli				×	Mir Glo	Il Containm ni-Enclosur ovebag Pro	e cedure						
	le	Locat	ion				1 1/10	n-Exempte	d (*) and	Non-Fri	able Pro	1000	re ement		
Location of	N	ormal	lly		Des	scription	of						/ре		
Asbestos-Containing Material (ACM) TO BE ABATED	Mai	i Sole ntena	nce/		stos Conta	aining M	ateria			mount			Е	_	
In Facility	Custo	odial 9 (12)	Staff?	(i.e.	. thermal surfac	ing, VA7	T, or	ation,		pecify or LF)	Ren	Repair	ncap	Encl	
(13)	-	(12)			other m	iscellan	eous)				Remova	pair	Encapsulate	Enclosure	
EVERIOR	Yes	No	N/A								-		te	е	
EXTERIOR				<u> </u>	5	Siding			25	00SF	x				
Name of Posistered Wests 11															
Name of Registered Waste Hauler NEWARK CARTING		Н	JDEP Wa auler ID 1 1509		Cubic Y of Was 15			Name of I	Register	ed Landf	ill				
City, State NEWARK, NJ					Disposa 5/11/1			City, State		PA					
Completed by JOSEPH PERLSTEIN	Title OWNE	ER	2		Sig	gnature					ate				

Ch4806





APR 3 0 2018

Date of Notification (1) APRIL 26, 2018			Name SUS	of Buildin	ng Owner UMA	r (2)			-	**	aria arat. 6					
Agencies Notified T	ype Notification		Street	Address				gga galamayan kan ka	-+		1					
EPA DEP DOL DOH	Amended Amendment # Emergency (inclu	ding	MAP	tate, Zip	OD, NJ	07040										
DCA [justification) Cancellation		MAT	TABRA	MSON			1 16	elenhone N	liimhei	8					
Name of Facility Where Aba	atement is Taking Pla	ce (3)	FAC	CILITY IN	FORMAT	TION	Type of Facili	of Facility (4)								
SUSAN ONUMA RES	SIDENCE	(-)					School (I									
Street Address							Subchap	ter 8 (Oth	ner than K- & commer	12) cial bu	ildings	s, hom	ies,			
City (5) MAPLEWOOD							Square Feet # of Floors Bldg. Age 1,611 SF 2 1923									
County (6) ESSEX			County (STATE	Code (7) USE ONL	Ŋ		Current Use (Prior if hoing domolished)									
Name of Monitoring Firm His N/A	red by Building Owne	r (8)		M No.		Name of Abatement Contractor (9) Finishing Touch Asbestos Abatement Corp., Inc.										
Street Address						Street	Address		S ADatei	nent	Corp	., Inc). ———			
City, State, Zip Code							hompson Strate, Zip Code	reet			-2.75040-					
Decised Many 6 and 6						West	Long Branc	h, NJ 0	7764							
Project Manager for Monitori N/A	ing Firm		Telepho	ne No.			one No. 222.8372		License 00040	No.						
Start Date (10) MAY 7, 2018	Sche MA	duled Co Y 7, 20	mpletion 18	Date (11))	Name o	of OSHA Monito	or				1111				
Occupancy Status During Ab	patement (Check Only	(One)				Street A	Address		-							
Facility Closed/Vacated Abatement Performed C Other – Describe:	During Entire Period Outside of Normal Fac	of Abater	ment s		1	City, St	ate, Zip Code									
Scope of Work (Check All Th	nat Apply)								E .							
≥3 sf or ≥3 if ≥160 sf or ≥260 if	X	Renova Demoli				×	Full Contains Mini-Enclosu Glovebag Pro Non-Exempto	re ocedure								
6		Is Locat							1	Abate	ement					
Location of Asbestos-Containing Mat TO BE ABATE In Facility (13)	erial (ACM)	Norma Used Sole Maintena Custodial (12)	ely by nce/	Asbes (i.e.	tos Cont thermal surfac	scription of aining Ma systems bing, VAT niscellane	aterial (ACM) insulation, , or	(S	mount pecify or LF)	Removal	Repair	e Encapsulate	Enclosure			
BASEMENT	Ye	s No	N/A							-		ate	roi .			
BASEMENT			X			TSI		10	0 LF	X						
Name of Registered Waste H	oules.															
Finishing Touch Asbesto		rn I H	IJDEP Wa lauler ID I 2058		of Was			All the second second	ed Landfill ANDFILL							
City, State WEST LONG BRANCH	, NJ 07764					al Date	City, Sta MORF	te RISVILL	E, PA							
Completed by JOSEPH P. MILLER	NT			gnature	11/1/1		Da 4,	ite /26/18	3							
ASB-41 (R-06-08)			1	* Do not	use this form fo	r asbesto	s licensure	e exem	pted a	activiti	es.					

Ch 3400	G				ATIO		BÉS	dersey STOS ABAT 1:60 and 5:10		DE C	E.		V				
Date of Notification (1)					Name	of Buildin	ig Ov	vner/Operator (2)	APE	3	9-2	018	- 1			
	20 /	18			Se	nior Livir	ng S	olutions Rea	Ity, LLC	1 1 -	340	17	9	1			
Agencies Notified	Type Notific	ation			Stree	t Address				Aude			rdis.	. či			
☑ EPA ☑ DOLWD	☐ Initial	d				5 Amwell	100000			Esteration production and are a second			(*****			
☑ DOH	Amendm	500 - 1000 m				State, Zip (
☐ DCA	☐ Emergen		cluding	g		Isboroug	-1001000	J 08844									
(NJAC 5:23-8)	justificati Cancella				Processing and a second	of Contac	907			Telephone Numb							
	☐ Cancella	tion				n Pelligri				908-722-7022	2						
Nome of Facility 1885 8		- :-		FACILITY INFORMATION													
Name of Facility Where A	batement is	akıng	Place	(3)					Type of Facility								
Street Address							☐ School (K-12) ☐ Subchapter 8 (Other than K-12)										
Street Address							Other (i.e., private and commercial buil										
City (5)										1							
Hillsborough									Square Feet	# of Floors	100	dg. A	ge				
County (6)					Cour	aty Codo /	N/CT/	ATE USE ONLY)	2000 sf	2	-	80					
(0)					Cour	ity Code (/)(317	ATE USE ONLY)	Residence	or if being demolisl	ned)						
Name of Monitoring Firm	Hired by Build	ding C)wner	(8)	ASCM	No.	Na	me of Abateme	nt Contractor (9)								
Guardian Contraction	ng, Inc.						0	Guardian Cor	ntracting, Inc.								
Street Address							Str	eet Address			_						
1889 Rte. 9, Unit 61							1	889 Route 9,	Unit 61								
City, State, Zip Code		*		1			City	y, State, Zip Co	de								
Toms River, New Je	- 7	i					T	oms River, N	lew Jersey 08	755							
Project Manager for Monit	toring Firm				phone		1	ephone No.	-27.								
Nicholas Fernicola	17	N-11	1.10			-9932	-	32-349-9932		00624							
Start Date (10)						te (11) 18	1000	me of OSHA M .M.S.L. Anal									
Occupancy Status During	Abatement (Check	only o	one)			Stre	eet Address									
☐ Facility Closed/Vacate							1	056 Stelton									
Abatement Performed Time of Abatement:	Outside of No	ormal	Facility	y Hou	s - Des	cribe	City	y, State, Zip Co	de								
100		' "	"-			, AIVI	P	Piscataway, N	lew Jersey 088	354							
Scope of Work (Check all	that apply)							☐ Full Conta	ainment with Neg	Negative Pressure							
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24 _ 100 01 01 <u>-</u> 200 11			□ Demolition					⊠ Glovebag ⊠ Non-Exer		n-Friable Procedure	9						
	v.			Local						V T	T	atem	ent T	уре			
Location Asbestos-Containing N				Norma d Sole				Description of			Z,	Z.	ш	Ш			
TO BE ABA		1)	Ma	intena	nce/			Containing Mat ermal systems in		Amount (Specify	Removal	Repair	Encapsulate	Enclosure			
IN Facilit			Cust	todial (12)	Staff?	(S	surfacing, VAT,	or	SF or LF)	oval	=	lusc	sure			
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Name of Registered Wast				1.6	JDEP \		625-55	oic Yards of	Name of Regist	tered Landfill							
Guardian Contractir	ng, Inc.	200			20223		Wa	SIE	T.R.R.F.								
City, State Toms River, New Je	rsev							posal Date /11/18	City, State	Donne de l'							
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Completed By (Print or Ty Nicholas Fernicola	Man	ager			Signature		Dat	e	V	Widestan Paris	, o						
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Date of Notification (1) 4/25/18			Name	of Building Owner/O	perator (2)	-0-	11)	<u> </u>	1 fr 7 fr	i	
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DOL Amendment #			<	ZUTHE	RF	ard.	NJ.	070	70	1111		
DOH justification)	icidanis		Name o	of Contact			Te	lephone Num	A - CA	7 7.	I SIN	10)
DCA				CHARLES		MAIDE	1	699-	605	-	182	25
Name of Facility Where Abatement is Taking Pl	ace (3)		FAC	ILITY INFORMAT	TION	Type of Facility	(4)					
SAMMARTINO		LL.				1 1	N.7835					
Street Address						School (K. Subchapte	-12) r 8 (Other	than K-12)				
City (5) RUTHERFOR	W	44		5, "		Other (i.e.	private &	commercial	buildir	gs, h	omes,	etc.)
City (5)			¥			Square Feet	#0	f Floors	E	ldg.	Age	
County (6)	5				E	35051		3	2000	19	65	5
BERGEN				Code (7) USE ONLY)		Current Use (Pri	or if bein	g demolished	1)			
Name of Monitoring Firm Hired by Building Ow	ner (8)		LASC	M No.	I Name	UN	WER	SITY				
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Street Address					Street	Remova Address	1 In	c		-		-
300 GRAND AVE					450	South R	iver	Stree	+			
City, State, Zip Code					City, S	tate, Zip Code	2701	DULCE				
Project Manager for Monitoring Firm	. 1	17	. ك	7631	Hack	censack,	NJ	07601				
	. 0.1	t	Telepho	ne No.	Telepho	one No.		License No).			
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Occupancy Status During Abatement (Check Onl	y One)	-/			Street A	a Enviro	onmer	ntal	-			
Facility Closed/Vacated During Entire Period	d of Aba	atement			280	Huyler S	Stree	e t				
☐ Abatement Performed Outside of Normal Fa ☐ Other — Describe:	cility Ho	ours			City, St	ate; Zip Code						
Scope of Work (Check All That Apply)					Sout	h Hacker	nsack	, NJ	076	06		
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In Facility	Cus	stodial S (12)	taff?	(i.e. thermal syste	ms insula VAT, or	ation, surfacing,	100,000	pecify or LF)	Remova	Re	incap	Encl
(13)		(12)		other n	niscellane	eous)		/	oval	Repair	Encapsulate	Enclosure
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BLAG MAIN ENTRANCE OVERHADG			X	EXTERIOR	ST	vcco	6	28 SF	X			
					87							
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Name of Registered Waste Hauler		0.000	DEP W		ards	Name of	Registered	Landfill				
Roct Domoses 1 To-			auler ID									
Best Removal Inc City, State			1710	0 Disposa	1 8CY	→ Mine City, State City, State City rva	Enterr	ris	es	, I	TC	
Hackensack, NJ 07601				6/	13/1	8					•	
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Date of Notification (1) 04/25/18			لبنا		of Building Own				A	PR 3(201	Я	
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DOH DCA	justification)			of Contact				Telephon	e Numbe	er	10 to = 11 to	
L DOA	☐ Cancellatio	n			Braudis				609-46	3-0994	x237	0	
Name of Facility Where	Ahatement is Taki	na Place /	31	FAC	ILITY INFORM	ATION	_	1-000 mark 42					
Q17	TOUTONICIS TAKE	ing Flace (3)				Тур	pe of Facility (4	1)				
Street Address								School (K-1	2)				
1140 Rt 49							X	Other (i.e. p.	8 (Other than ivate & com	1 K-12)	uildina		
City (5)							M	etc.)	ivate & Conn	nerciai b	ullalrig	s, non	ies,
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County (6)								520	2		69		
Salem				County (STATE	Code (7) USE ONLY)	404 (00		rrent Use (Prio	r if being den	nolished)			
Name of Monitoring Firm	Hirad by Duildin	Ow /^	,					one					
N/A	i iii eu by building	Owner (8)		M No.			batement Cont	ractor (9)				
Street Address				n/a		SA2	2/62						
Ollock Address						Street							
City, State, Zip Code								deral Stree	t				
ony, orace, zip code								Zip Code					
Project Manager for Moni	toring Cirm				H15-20-1			i, NJ 08105	N				
r roject warager for worth	toring Firm		1	Telepho	ne No.	Teleph				se No.			
Start Date (10)		Cabadul	-10	1 17	<u> </u>			3288	0130	03			
05/07/17		05/08/		mpletion	Date (11)			SHA Monitor				211	
Occupancy Status During	Abotoment (Cha					Self		103.57%					
			270			Street	Addr	ess					
Abatement Performe Other – Describe:	ted During Entire ed Outside of Norr	Period of an all Facility	Abater / Hour	ment s		City, St	tate,	Zip Code	11				_
Scope of Work (Check All	That Apply)												
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	, , , , , , , , , , , , , , , , , , ,	-	Renova Demoli			×	M G	ull Containmer lini-Enclosure lovebag Proce	dure				
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(13)	У		(12)			facing, VAT		,	SF or LF)	Removal	Repair	aps	clos
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2nd floo	or			Х		Linoleum	ĺ		526 SF	x			
W.				х									
			57.57								-		
Name of Registered Waste	e Hauler		IN	JDEP W	aste Cub	ic Yards	C-18/86	Name of Pr	egistered Lan	dfill			
Champion Disposal			H	lauler ID	No. of W	aste				IVIIII.			
			3	2707	1			GROWS	Landfill				
City, State						osal Date		City, State					
Hainsport, NJ					05/	09/18		Morrisvil	e, PA				
Completed by Jeff Yekenchik		Title				Signature	A			Date			
Deli TekeHCUIK		Owne	er					1		04/25	/18		

Apr 25 2018 16:12 NJ Asbestos	Control 609,633	3.0664	page 1	FREE	EIMER
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Date of Real Parks	-	A THE WAR OF THE PARTY OF THE P	or Access Controls representation Controls and County	i i	1068
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Date of Notification (1)		00000			9.025		ng Owner/Operator	(2)	5 W La 11 V L								
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(NJAC 5:23-8)	☐ Emerger	ncy (incl	luding	,		e of Conta			Telephone Number								
	justificati		dunig	,	100000000000000000000000000000000000000	ex Baylor			301-583-0048								
	L						NFORMATION		301-363-002	10							
Name of Facility Where A	batement is	Taking F	Place	(3)	- 17	CILITI	(4)										
Verizon Bloomfield				/				Type of Facility ☐ School (K-12									
Street Address) 3 (Other than K-12	2)									
428 Bloomfield Ave	į.							Other (i.e., p	rivate and comme	rcial b	uildin	gs,					
City (5)						30000000000000000000000000000000000000		homes, etc.)	4 - 5 - 5	- 15							
Bloomfield								Square Feet	# of Floors	1	ldg. A						
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USA Environmental				٠,	ACCIVI	140.	The second discount of the second of the sec	VIRONMENTAL	INIO								
Street Address	goine		•				Street Address	VIRONWENTAL	_, INC.			-					
8436 Enterprise Ave	2							DOTREET									
City, State, Zip Code							1123 BEAVE	Sign of the control o									
Philadelphia, PA 19	153						City, State, Zip Co										
Project Manager for Monit		300000000000000000000000000000000000000		T-1-			BRISTOL, PA	19007				7/2					
Mark Jenkins	toring Film			-0.0000000	phone		Telephone No.		License No. 00509								
Start Date (10)	10	Cohodula	24 C			5-5810	215-788-6040										
4 / _26_ /		Schedule				18	Name of OSHA M										
					_ ′ .	10		VIRONMENTAL	., INC								
Occupancy Status During							Street Address										
☐ Facility Closed/Vacate ☐ Abatement Performed	a During Entir	re Perio	d of A	Abater	nent		1123 BEAVER										
Time of Abatement:	AM-	PM/5	5:00F	PM-2:	s - Des OOAM	cribe	City, State, Zip Co										
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Scope of Work (Check all	tnat apply)						□ Full Cont	ainment with Neg	otius Deserve								
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TO BE ABAT IN Facility				odial S		(i.e	, thermal systems in		(Specify	Vou	air	aps	losi				
(13)	7			(12)			surfacing, VAT, other miscellaned		SF or LF)	<u>a</u>		Encapsulate	ure				
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Name of Registered Waste				10.000	JDEP V		Cubic Yards of	Name of Registe				-					
SERVICE TRANSPO	RT GROUP	, INC.		1	auler IE 20990		Waste	MINERVA L	ANDFILL								
City, State						Disposal Date	City, State										
NEW CASTLE, DE					TBD	WAYNESBU	JRG, OH										
Completed By (Print or Type	pe)	Title					Signature		Dat	e							
Dillan DeCaro		Esti	mate	or			Dilla	an DOCAN	0/00/	100	5	-18	>				

		NC	TIF	CATIO	ON OF A	New Jersey SBESTOS AB	ATEMENT	Chri	#.	33	34	5			
			(Pursu	ant to NJ	JAC 8:60 and 5	:16)	MEC			\mathbb{N}	F			
Date of Notification (1)				1		ing Owner/Operato	r (2)		1	0	19	Lin			
	/	18		V	erizon Co	ommunications									
Agencies Notified Type No		n		Stre	et Address	3		HIL AP	R 3	0 2	018				
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(NJAC 5:23-8) justif	ication)		· · · · ·		ne of Conta			Telephone Nur	nher	3:77533	· Na Sage Att.	100			
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Name of Facility Where Abatemen	is Taki	ng Pla	ce (3)				Type of Facilit	v (4)				_			
Verizon Bloomfield C.O.							School (K-	5 700							
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428 Bloomfield Ave							Other (i.e., homes, etc	private and comme	ercial l	ouildir	ıgs,				
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Name of Monitoring Firm Hired by E			(8)	ASCN	/ No.	Name of Abatem	nent Contractor (9	9)							
USA Environmental Manage	ment	inc.	32				VIRONMENT								
Street Address						Street Address		AL, 1110.				733			
8436 Enterprise Ave						1123 BEAVE	RSTREET								
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Philadelphia, PA 19153						BRISTOL, P									
Project Manager for Monitoring Firm	1		Te	lephone	No.	Telephone No.		License No.		-		-			
Mark Jenkins					5-5810	215-788-604)	00509							
Start Date (10)	Sche	duled (Compl	letion D	ate (11)	Name of OSHA		00000							
4 /26 /18				2 /			VIRONMENTA	I INC							
Occupancy Status During Abatemer	it (Chec	k only	one)			Street Address		,							
☐ Facility Closed/Vacated During E	ntire Pe	riod of	Abate	ement		1123 BEAVE	RSTREET								
Abatement Performed Outside of	Norma	Facili	v Hou	ırs - De	scribe	City, State, Zip C									
Time of Abatement:AM	P	M/ <u>5:0</u> (PM-2	2:00AM		BRISTOL, PA									
Scope of Work (Check all that apply)						2.40102,17	. 10007								
⊒ ≥3 sf or ≥3 If ⊠ ≥160 sf or ≥260 If		⊠ Re	novat			Mini-Enc Gloveba	Procedure	gative Pressure on-Friable Procedu	·e						
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TO BE ABATED	(۱۷۱)		intena		Asbes	stos Containing Ma , thermal systems	terial (ACM)	Amount	Removal	Repair	nca				
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(13)		Yes	(12) No	N/A	1	other miscellane	ous)		-		Encapsulate	1			
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ame of Registered Waste Hauler		Ц	Ч.												
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VENTURE INCIDENTIFICATION	, INC	··		20990			MINERVA	LANDFILL							
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ity, State	Title					TBD Signature	WAYNESB DeComo	URG, OH	e .						

Check# 3111

State of New Jersey - Notification of Asbestos Abatement
(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) April 25, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ☑Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT (REHS) ☐ EPA Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS D DCA ■ Emergency (including) City, State, Zip Code X DOI justification) PISCATAWAY, NJ 08854 □ DEP- No Longer REQUIRED □Cancelled Telephone Mumber 3 2018 Name of Contact X DOH MICHAEL F. SMITH, ENV. 848-445-2550 **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) **BUSCH CENTRAL HEATING, BLDG# 3540** ☐ School (K-12) ☐Subchapter 8 (other than K-12) Street Address ☑ Other (i.e. private & commercial buildings, homes, etc.) **BUSCH CAMPUS** Sq. Feet: N/A # of Floors: 3 Bldg. Age: 80+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): HEATING PLANT **PISCATAWAY MIDDLESEX** (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 05/17/18 05/19/18 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 3PM - 5AM (24 HRS. & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure X > 3 sf or >3 lf □ Renovation ☐ Mini-Enclosure □ > 160 sf or > 260 lf ☐ Demolition ☒ Glove bag Procedure / Wrap & Cut ■Non-Exempted (*) and Non-Friable Procedure Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Staff? (12) Remove Repair Encap VAT, or other miscell.) or LF) NO YES NA Enclose 103 MEZZANINE X TSI <9 LF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 5 CY Cubic Yards of Waste: See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill Hauler #2) Newark Carting, Inc., Newark, NJ 04509 Rd. Morrisville, Pa 05/19/2018 NJ DEP # 4509 19067 215-736-1700 Completed by (Print or Type) Signature SENIOR PROJECT RAYMOND C. PEDALINO Raymond C. Pedalino April 25, 2018 MANAGER

State of New Jersey - Notification of Asbestos Abatement Check# 3/08
(Pursuant to N.J.A.C. 8:60-7 and 12:120-4)

GAC Project # 060-18			(113011 K	C. O. 20 - 110 12.12 1-									
Date of Notification (1)					Name of Building Own	er/Ope	rator (2)	-					
April 25,					RUTGERS, THE	STAT	TE UN	ÍVERS	SITY (OF NJ				
Agencies Notified EPA DCA SIDOL		☐ Emer	Notific ded No	tification # (including	Street Address ENVIRONMENTA 74 STREET 1603, City, State, Zip Code PISCATAWAY, N	, BLD	G 411	& \$A 6, UIV	FETY	DEPT TON C	(RÉI	HS) US		
☑ DEP- No Longer REQUIRE ☑ DOH	D	□Cance)	Name of Contact MICHAEL F. SMIT HEALTH & SAFE	ГΗ, Ε			phone 3-445-2		2018	111		
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Name of Facility Where Abatemer SCILS BLDG, BLDG# 31 Street Address	nt is Takin 134	ig Place (3)			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (other the	nan K-1	2)		Page Control of Control	The second secon	-!u	om da marijena		
COLLEGE AVENUE CA	MPUS				X Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: N/A # of Floors: 3 Bldg. Age: 80+ years									
NEW BRUNSWICK	ounty (6) MIDDLI			y Code (7) Use Only)	Current Use (prior if being demolished): ACADEMIC									
Name of Monitoring Firm Hired by	Bldg. Ow	ner (8)	0009		Name of Contractor (9)									
Street Address				GREENWOOD ABA	ATEM	ENT C	ONS	JLTAN	ITS, IN	c.				
3 TERRI LANE				511 MAIN STREET										
	016				City State, ZipCode BUTLER, NJ 07405	5								
Project Manager for Monitoring Fir BRIAN R. KEARNEY		Felephone I			Telephone Number	se Num	lumber							
Scheduled Start Date (10)		Scheduled (Completi	on Date (11)	973-492-0477			0084	40					
05/10/18	0	05/14/18		on bate (11)	Name of OSHA Monitor ENVIROVISION, IN	IC.								
Occupancy Status During Abate Facility Closed/Vacated Durin	g Entire P	Period of A	batemer	nt	Street Address 20-21 WARGARAW	/ ROA	AD, BL	DG# 3	35E					
Describe:		2-00-11			City, State, Zip Code	20200								
☑ Other- Describe: Schedule: WEEKENDS AS NEEDED)	5PM – 5	SAM Daily	/ (24 H)	OURS &	FAIRLAWN, NJ 074	110								
Scope of Work (Check all that app	ly)													
□≥ 3 sf or >3 lf 図≥ 160 sf or ≥ 260	lf		I	XRenovation Demolition	☐ Full Containment with Negative Pre☐ Mini-Enclosure☐ Glove bag Procedure / Wrap & Cu						t			
Location of Asbestos-Containing		ion Normal		Description of As	bestos Containing Material		Amour			n-Friable		aure		
Material (ACM) in Facility (13)	Staff? (1			(ACM) (i.e. therm VAT, or other mis	nal systems insulation, surface	cing,	(Speci			e Repair		Enclose		
and =: a	YES	NO	NA		10.		ecockari.							
2 nd Fl. Corridor & 222 Suite*		X		VAT			430	0 SF	X	T				
Room# 301* *(Single Work Area Connected Through		VAT			43	0 SF	X							
Stairwell) Name of Reg. Waste Hauler	tairwell)													
See Hauler Below #1 & 2		Cubic Yards of Waste:	25 C	Y			North		ill					
Hauler #1) Greenwood Abatemen NJDEP # 12561	NJ 07405		Disp	osal Dat	e		City, Sta		705210					
Hauler #2) Newark Carting, Inc., Newark, NJ 04509 NJ DEP # 4509						05/	14/201	8		100 New Rd. Mori 19067 215-736-	risville,			
Completed by (Print or Type) RAYMOND C. PEDALINO Title SENIOR PROJECT					Signature Date									
RAYMOND C. PEDALING	Raymond C. Pedalina April 25, 2018													

State of New Jersey - Notification of Asbestos Abatement
(Pursuant to N.J.A.O. 8: 00-7 and 12:120-7)

Check# 3109

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Date of Notification (1)	0040				Name of Building Owner						Til
April 25,	2018				RUTGERS, THE S	STATE UN	IVERS	SITY OF	NJ	40000	
Agencies Notified		Notificatio		ation	Street Address ENVIRONMENTAL		AE	3 D _ 3 D	_2018		2//
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□ DCA					74 STREET 1603,	BLDG 411	6, LIV	INGST	ON CA	MPUS	5
X DOL			cation)	(including	City, State, Zip Code PISCATAWAY, NJ	00054	ASSE	\$ TC 0 0	CMIRO	L&	
☑ DEP- No Longer REQUIRE	D	□Cance			Name of Contact	00004	Latelan	phone Nu	MIG	*****************	DMP0/98-0
⊠ DOH		- Carice	illeu		MICHAEL F. SMIT	H FNV		-445-25			
					HEALTH & SAFET		0-10	-440-20	50		
				FACILITY IN	FORMATION	•					
Name of Facility Where Abatemer	nt is Taki	ing Place (3)			Type of Facility (4)						
SCILS ANNEX BLDG, B	LDG#	3135			School (K-12)						
Street Address					Subchapter 8 (other that						
COLLEGE AVENUE CAN	MPUS				Other (i.e. private & co	ommercial buil	dings, ho	omes, etc.)		
Section of the sectio	00				Sq. Feet: N/A	# of Floors:	3 Bldg	g. Age:	80+ ye	ars	
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NEW BRUNSWICK	MIDDL	LESEX	State	Use Only)	Current Use (prior if beir	ng demolished	i): AC	ADEMIC			
Name of Monitoring Firm Hired by ATC	Bldg. O	wner (8)	ASCM		Name of Contractor (9)						
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Street Address					GREENWOOD ABA Street Address	TEMENT C	ONSU	LIANI	S, INC.		_
3 TERRI LANE											
					511 MAIN STREET						
City, State, Zip Code					City State, ZipCode						-
	016	24			BUTLER, NJ 07405						
Project Manager for Monitoring Fir	<u>m</u>	Telephone			Telephone Number		Licens	se Numbe	r		
BRIAN R. KEARNEY	1	609-386	-8800		072 402 0477		0000				
Scheduled Start Date (10)		Scheduled	Completio	on Date (11)	973-492-0477 Name of OSHA Monitor		0084	10			
05/18/18		05/21/18		11. 2. 2. 1. 17	ENVIROVISION, IN	C.					
Occupancy Status During Abate	ment (C	heck only o	ne)		Street Address						
☐Facility Closed/Vacated Durin	g Entire	Period of A	batemer	nt	20-21 WARGARAW	ROAD, BL	DG# 3	5E			
□ Abatement Performed Outside	e of Nor	mal Facility	Hours -			* 1.00m					
Describe:					City, State, Zip Code FAIRLAWN, NJ 074	10					
Other- Describe: Schedule:	5PM -	5AM Dail	y (24 H	DURS &	PAIRLAVIN, NJ 074	10					
WEEKENDS AS NEEDED)											
					15						
Scope of Work (Check all that app	ly)							-			
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□≥ 3 sf or >3 lf			1	Renovation		Mini-Enclos		•			
≥ 160 sf or ≥ 260	lf			Demolition		☐ Glove bag	Procedu	ure / Wra	p & Cut		
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Name of Reg. Waste Hauler		NJDEP Was	ste Haule	r ID #	Cubic Vordo of Wester	5 CV	Name	of Registe	ered Land	460	
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NJDEP # 12561			water, I	10 07703		Dispusai Da	10		ity, State 00 New F		ill
Hauler #2) Newark Carting, Inc.,	Newark	, NJ 04509				05/21/20	18		d. Morris	sville, F	²a
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Completed by (Print or Type)	Tit	tlo			Cinneture	<u> </u>	D :		10-130-1	700	
RAYMOND C. PEDALING	_	ue ENIOR P	ROJEC	T	Signature Ci 63	Ω	Date	125 20	10		
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GAC Project # 060-18	S	State of N		rsey Jotif swant to N.J.A.	ication of Asbestos C 8:60-Zand 12:120-7	s Aba	atemo	ent	道	GE		7/1/
Date of Notification (1)	25, 2018				Name of Building Own	er/Ope	erator (2		- 1	PR 3	0 20	19
Agencies Notified	3, 2016	Notification	n Type		RUTGERS, THE Street Address	STA	TE UN	IVER	SITY	OF NJ	0 20	10
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☑ DEP- No Longer REQUII ☑ DOH	RED	□Cance		,	Name of Contact MICHAEL F. SMIT HEALTH & SAFE	Ή, Ε			phone 3-445-	Number 2550		
				FACILITY IN	FORMATION	1 1						
Name of Facility Where Abates MEDICAL SCIENCE, E	ment is Tak BLDG# 7	ring Place (3 7257)		Type of Facility (4) School (K-12)							
Street Address RBHS NEWARK CAM	PUS				☐ Subchapter 8 (other the Sq. Feet: N/A	omme	rcial buil	dings, h	omes, e a. Aae	etc.) <u>:</u> 60+ y	ears	
City (5) NEWARK	County (6)	SEX	Count (State	y Code (7) Use Only)	Current Use (prior if bei							
Name of Monitoring Firm Hired	l by Bldg. O	wner (8)	ASCM 0009		Name of Contractor (9)		-		<u> </u>			_
Street Address					GREENWOOD ABA	TEM	ENT C	CONS	JLTAN	ITS, IN	C.	
3 TERRI LANE					Street Address 511 MAIN STREET							
	08016				City State, ZipCode BUTLER, NJ 07405		-					
Project Manager for Monitoring BRIAN R. KEARNEY	Firm	Telephone			Telephone Number			Licen	se Num	ber		
		609-386			973-492-0477			0084	10			
Scheduled Start Date (10) 05/04/18		05/07/18		on Date (11)	Name of OSHA Monitor ENVIROVISION, IN	c.		1 000				
Occupancy Status During Abatement Performed Outs	uring Entire	Period of A	batemer	nt	Street Address 20-21 WARGARAW	ROA	AD, BL	.DG# 3	35E			
Describe: Other- Describe: Schedul PHASES, 24 HOURS & W	le: 5PM – VEEKENI	5AM Daily DS AS NEI	y (4 WE EDED)	EKEND	City, State, Zip Code FAIRLAWN, NJ 074	10						
Scope of Work (Check all that a	apply)											
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Location of Asbestos-Containing Material (ACM) in Facility (13)		ation Normal by Maint./Cu (12) NO	ly Used ustodial NA	Description of Ast (ACM) (i.e. therm VAT, or other miss	pestos Containing Material al systems insulation, surfac		Amour (Speci or LF)	nt	Abate	n-Friable ment Type e Repair	e	aure
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B 619		X		TRANSITE				0 SF	X			
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Hauler #1) Greenwood Abatem NJDEP # 12561 Hauler #2) Newark Carting, In NJ DEP # 4509			Butler, ?	NJ 07405			osal Dat 07/201	e		City, Stat 100 New Rd. Morr 19067 215-736-	te Ford Nrisville,	Mill
Completed by (Print or Type) RAYMOND C. PEDALII	100000	le ENIOR PI ANAGER		т	Signature Raymond C. Pe	edalin	ra	<u>Date</u> Apri l	25, 2	018		

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Date of Notification (1)			Section of the sectio	ing a second of the second	wner/Operat	or (2)			APR	3.0	201	9
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Agencies Notified Type Notification			Street /	Address					- or, essentially		5-70	OI 2.
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DOH Emergency justification		3	Name o	of Contact				Telephone	Numbe	ar .		
DCA Cancellation	1			nam Moha		and the state of t						
Name of Facility Where Abatement is Takir	ng Place (3)	FAC	ILITY INFO	RMATION	Tyr	pe of Facility (4					
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Street Address			77			$\exists \exists$	School (K-12 Subchapter 8		K-12)			l
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City (5)		- 30000				Squ	uare Feet	# of Floors	;	Bldg.	Age	
Fairview											2526	
County (6) Bergen County				Code (7) USE ONLY)		Cui	rrent Use (Prior	if being dem	nolished)		
Name of Monitoring Firm Hired by Building	Owner (9)		ASC	A-15-35			h-1	1 /0		71.45		
or mornioring t innitiated by building	Owner (8	/	ASU	VI INU.			batement Contr	actor (9)				
Street Address						t Add		···				
					1100		ewkirk Ave					
City, State, Zip Code					City,	State,	Zip Code					
B							ergen, NJ 07	7047				
Project Manager for Monitoring Firm			Telepho			hone 6820	No. 0422	Licen: 0136	se No. 30		33	
Start Date (10) 05/03/17	Schedul 10/23/		mpletion	Date (11)	Name	e of O	SHA Monitor					
Occupancy Status During Abatement (Chec	k Only O	ne)			Stree	t Addr	ress					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	Period of a	Abater y Hour	ment s		City,	State,	Zip Code	9i				
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				X A	Full Containmen Mini-Enclosure Blovebag Proce Mon-Exempted (dure			IFO.	
	lo	Locat	ion		-				, idule r		temen	t
Location of		Norma	lly		Descriptio	n of			_		уре	
Asbestos-Containing Material (ACM) TO BE ABATED		ed Sole intena			s Containing ermal systen			Amount (Specify			四	m
In Facility	Cus	todial (12)			surfacing, V	AT, or		SF or LF)	No.	Repair	Encapsulate	Enclosure
(13)	-				other miscella	neous	5)		و ا	막	sulat	sure
Basement	Yes	No	N/A		Pipe Insul	ation		20 LF	2	+	Φ	H
manual de la companya del companya del companya de la companya de	-							10054		-	+	\vdash
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Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic Yards		Nome of D	naiotored I	ode"		_	
Newark Carting		ŀ	Hauler ID 04509	200000000	of Waste			egistered Lar MANAGE		GRO)WS I	٧.
City, State Hillside, NJ					Disposal Date	9	City, State MORRIS	SVILLE PA				
Completed by	Title				Signatur	e	<u>ــــــــــــــــــــــــــــــــــــ</u>	**	Date			-
Bryan Parra	Own	er			10/	フト	_ <	A STATE OF THE STA	10/1	0/17		

ASB-41 (R-06-08)

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

There are 600 SF of tiles which I will



NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

APR 3 0 2018

Date of Notification (1)		Na	me of Build	ling Owner/Operator (2)				10			
04/25/18 Agencies Notified Type Notification		Jo	seph D	eCorso		-	ASSESTES	CCN	TEC)L	&
			eet Addres			MA DINA TRANSPORT	1 *	15#M	9		
- miliai											
DEP Amended		Cit	y, State, Zip	Code							
☑ DOL Amendment #_		Liv	vingstor	n, NJ 07039		8					
Emergency (incl	luding	1	me of Conta			Telephone Nu					
Justification)		Jos	seph De	Corso		Tretephone No	Imper				
☐ DCA ☐ Cancelation						1					
Name of Facility Where Abatement is Taking Place (/21			FACILITY INFORM	ATION						_
Residence	(3)			2224	Type of Facility (4)					_	_
Street Address					☐ School (K-12)					
						ter 8 (Other tha	n K 12\				
A TOTAL OF THE PARTY OF THE PAR					☑ Other (i	e private & Com	11 N-12)	8			
City (5)					— other (i.	c. private & Con	nmercial buildings,	hom	es, et	c.)	
Livingston, NJ 07039					Square Feet	# of Floors	Bidg. Age				_
County (6)			la .		1,550	2	80+				
Essex			(STATE	Code (7) USE ONLY)	Current Use (Prior i	f being demolished)					_
Name of Monitoring Firm Hired by Building Owner (8	21		To and		Home						
owner (8	21			ASCM No.	Name of Abatemen	t Contractor (9)					-
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n cer Audress					Street Address	в согр.					_
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ity, State, Zip Code		17 17 17 17			City, State, Zip Code						_
					Woodland Parl						
roject Manager fo Monitoring Firm			Telepho	ne No.	Telephone No.	C, NJ 07424					
					973-333-9176		License No.				
art Date (10)		Sched	uled Compl	etion Date (11)			01331				
5/07/18		05/0		cuon bate (11)	Name of OSHA Moni						
ccupancy Status During Abatement (Check Only One					Envirovision Co	nsultants, Inc.					
Facility Closed/Vacated During Entire	e Period of A	bateme	nt		Street Address						
Abatement Performed Outside of No	rmal Facility	Hours			20-21 Wagaraw	Rd., Bldg. 35-	E				
Other - Describe: 08:00 AM Star	t	110013			City, State, Zip Code						_
ope of Work (Check All That Apply)					Fair Lawn, NJ 0	7410					
] ≥3 sf or ≥3 If		X	0		12000						_
≥160 sf or ≥260 lf			Renova		▼ Full Contain	nment with Neg	ative Pressure				
		Ц	Demoli	tion	☐ Mini-Enclos						
					☐ Glovebag P	rocedure					
					☐ Non-Exemp	ted (*) and Non	-Friable Procedure	e			
Location of		Is Location Normally			0.0000000000000000000000000000000000000			T	Aba	teme	20
Asbestos-Containing Material (ACM)	U	sed Solely			Description of				T	уре	
TO BE ABATED	2	aintenan	100000	Asbesto	os Containing Material (A hermal systems insulatio	(CM)	Amount				
In Facility	Cu	stodial St	aff?	(110. 5)	surfacing, VAT, or	n,	(Specity			m	
(13)		(12)	-	1	other miscellaneous)		SF or LF)	Ren	-	cap	
Attic	Yes	No	N/A				1	Removal	Repair	Encapsulate	
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e of Registered Waste Hauler		NJDEP W	aste Hauler	ID No.	Cubic Yards of Waste			1			
corn Contracting Corp.		003584		ı	As needed		Name of Regustered				
State							Fairless Hills La	ndfill			
odland Park, New Jersey					Disposal Date	// ~	City, State				
pleted by	Title				TBD	1 ()	Morrisville, PA				
o Golcev	Genera	1 1/222	gor		Signature	1111		Date	19		_
	, oction	· ivialld	801		1//	1/1/		1	25/1	120	

h4579 .	· : [5	ОТІГІ	CATIO	tate of New-Jersey OF ASBESTOS to NJAC 8:60 and	ABATE 12:120)	MENT	TEN E C		45	75	
Date of Notification (1)		- Code	Name of	Building Owner/Op)			_!_	TA	5
Agencies Notified Type Notification		1	Street Ad				API	R 3	0 8	2018	
□ EPA □ Initial □ DEP □ Amended Amendment □ Emergency (including	-[Name of		ΞD	58. N	J . O.76 (er	CON Suit	TRO	L &
Name of Facility Where Abatement is Taking I	Dlace (2)		1 .	LITY INFORMAT	ION	Type of Facility (4	1)				
Name of Pacinty where Addenian is Taking in MR. K. M. Street Address	Tace (3)					☐ School (K-1		uildinį	gs, hoi	nes, et	.c.)
City (5) RIJER ED	5E	2				Square Feet 2200	# of Floors Z	Bi	/ S	ge 4E	>
County (6) RERGEN			County C	Code (7) ISE ONLY)		Current Use (Prior	r if being demolished)				
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	I No.	Name	of Abatement Contr					
Street Address						t Removal Address	Inc				
City, State, Zip Code						South Ri	ver Stree	t_			
City, State, 21p Code	2					kensack,	NJ 07601				
Project Manager for Monitoring Firm			Telephon	e No.		one No.	License No.				
Start Date (10)	Scheduled	Comp	etion Da	te (11)	Name	-329-7444 of OSHA Monitor ga Enviro		8			
Occupancy/Status/During Abatement (Check O Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe: 73	riod of Abat		4	×	Street 280 City, S	Address Huyler S tate; Zip Code		076	0.6		
☐ ≥3 sf or ≥3 lf ₽ ≥160 sf or ≥260 lf		Lenovati Demoliti			[] []	Mini-Enclosure Glovebag Proce			ure		
		Location								ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normall ed Solel; aintenar todial S (12)	y by ice/	Asbestos Conta (i.e. thermal syste		laterial (ACM) lation, surfacing,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A			10 44	175055	~		co.	
CALLGE			9			ATERIAL SATERIAL	17505F				
GALAGE			\$	210186	<u> </u>	ATAU AC.	40251	*			
Name of Registered Waste Hauler Best Removal Inc City, State		1	JDEP Wauler ID	No. of Was	ite		Registered Landfill rva Enteri e	ori	ses	,_]	[,],(
Hackensack, N.I 07601	Title				5/.4 d		esburg, OF		468 1	8	
J. Maiorano		ima	tor			Mojon	Dug	4/	25	11	8
ASB-41 (R-06-08)						Do not use this for	m for asbestos licensu	re exe	mpted	activ	ities.

1. Knosa	P	NOTE OF	FIGATI Pursua	State of New ON OF ASBE	Jersey STOS ABA	TE:12	EMENT 0))-f	PrinteFo
Date of Notification (1)				of Building C					Ш	API	1	3 0	201	U I
04/25/2018 Agencies Notified Type Noti	· · ·		Resi	dence	× × × × × × × × × × × × × × × × × × ×		,,-/				: : : :			2021-1-100-
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X DEP Ame	l nded		City, S	State, Zip Cod	ie				ent on president of the	MPD-CD44 1	~ 11-11/9		n water hards	
	ndment # rgency (includin		Morri	is Plains, I	NJ 07950	1								
DOH justif	ication) ellation	9	2237000	of Contact Phan					Telenhor	o Nive	har	9		
Name of English Whore Abote and	T		FAC	CILITY INFO	RMATION		-31182-00							
Name of Facility Where Abatement Residence	s Taking Place	(3)					Type of	Facility (4)						
Street Address						\dashv	Sc Su	hool (K-12)	(Other than	n K 10	0			
							× Oth	her (i.e. pri	vate & com	mercia	l bui	ldings	, hom	nes,
City (5) Morris Plains							Square 1,650		# of Floor	s	- 81 9	Bldg.	Age	
County (6) Morris			County	Code (7)			1000	Use (Prior	if being der	nolishe	31 1	104		
Name of Monitoring Firm Hired by Br	ilding Owner (9								56/50		084.0			
A. Seine Lighthouse Solution	S S)	ASC	M No.	Nar Bri	ne o	of Abaten s Tank	nent Contr Services	actor (9)					
Street Address PO Box 354							Address	Avenue						
City, State, Zip Code			2 - 2				ate, Zip (
South Orange, NJ 07079							de, NJ C							
Project Manager for Monitoring Firm Sarah Calandra			Telepho 201-3	one No. 49-2666			one No.	5	Licen 0131	ise No.		7		
Start Date (10) 05/07/2018	Schedul 05/11/		npletion	Date (11)	1 250 1		of OSHA							-
Occupancy Status During Abatement							Ine Ligr	ithouse	Solutions					
Facility Closed/Vacated During I Abatement Performed Outside of Other – Describe:	ntire Period of	Ahaton	nent		PO City,	Bo	ox 354 ate, Zip C							
Scope of Work (Check All That Apply					- So	uth	Orang	e, NJ 07	079					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit	tion ion			×	Gloveb	ag Proced	with Negat ure) and Non-F				0	
		Locati							, and Hon i	Habic		Abate	emen	t
Location of Asbestos-Containing Material (AC	M) Use	iormal d Sole	ly by	Ashestos	Description Containing	on o	of	20.0	****	-		Ту	pe	\mathbf{H}
TO BE ABATED In Facility	Ma	intenar odial S		(i.e. the	ermal syster	ns i	insulation	JM) 1,	Amount (Specify		Re	77	Enc	m I
(13)		(12)			surfacing, V ther miscella				SF or LF)		Removal	Repair	Encapsulate	Enclosure
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ewark Carting			auler ID 509	No. of	f Waste		3		nagemen		dfill	ĺ		
City, State				D	isposal Date	е		ty, State	200					_
ast Orange, NJ	77.4						100	enn Argy	le, PA					
lison Lamers	Title Office	Man	ager		Signatur	20	Mi	15		Date 04/2	E 10	040		

					oute of	New Jersey			-	- Seattle - Maria		***	
no Ct)	N	OTIF	ICAT (Purs	ION OF A	ASBESTOS AE JAC 8:60 and	BATEMENT 5:16)		(D)-	E C]_[<u> </u>
Date of Notification (1)	e e			N	ame of Build	ding Owner/Opera	tor (2)		l leave				
/	26 /	18	-,			kin Acquisition				APR	3	0 20	118
Agencies Notified	Type Notifica	tion			reet Addres								
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☑ DOLWD ☑ DHSS	Amended				ty, State, Zi			_		States in			901
□ DCA	Amendme		dina			non, NY 10553			SCHOOL SECTION SALE	MERENSET IC TOTAL	Intialist, with	on more seen	· Administra
(NJAC 5:23-8)	justification	y (iriciai 1)	uing		me of Conta								
	☐ Cancellation	n			Dan Katz				Telephone				
				F	ACILITY	INFORMATION			914-66	7-6400			
Name of Facility Where A	batement is Ta	king Pla	ace (3))		W CINATION	Type of Faci	lite (A)					
Acme Manahawkin			100				School (k						
Street Address							── ☐ Subchapt	er 8 (C	Other than	K-12)			
609 East Bay Ave.								., priva	ite and co	ommerci	al bui	ldings	
City (5)							homes, e		# -5 =1		T =		
Manahawkin, NJ 080)50						27,900		# of Floor	rs		g. Age	9
County (6)				Co	unty Code	(7)(STATE USE ONL)	Current Use	(Drior i				5+	
Ocean						.,	Commeri	(FIIOI I	i being de	emolishe	d)		
Name of Monitoring Firm H	lired by Buildin	g Owne	er (8)	ASC	M No.	Name of Abate	ment Contractor						
Vertex				N.A	λ		vironmental S		~				
Street Address						Street Address	vii oriiiiciitai c	yster	115				
700 Turner Way						550 East Ur	nion St						
City, State, Zip Code						City, State, Zip	[The state of the			10-10-10-10-10-10-10-10-10-10-10-10-10-1			
Aston, PA 19014	<u> </u>						er, PA 19382						
Project Manager for Monito	ring Firm			lephone		Telephone No.	, , , , , , , , , , , , , , , , , , , ,	11	icense N	0			
Dave Turotsy													
					8-8902	610-701-900	0	-		0.			
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D&S Proj. #: 18-82 Date of Notification (1))	Name of F	(Purs		sbes C\8:	NJ tos Abatement 60 and 72:120)		E G [3 0	<u></u>	E.	
10 4 / 2 4 / 1 8				menoperator (2	2)		i				-	
Agencies Notified Type Notificat	ion	lynda za Street Add					A:	\$23,F3-11.5	(40)	SIST)[&	
☐ EPA ☐ Initial ☐ Amended							Marco del Constituto de Calabi	estables of the filter	1.150		cutication	enneament.
Amendment #:	110	City, State	Zip Code									
DOL ☐ Emergency		MAPL	EWOOD.	NJ 07040								
DOH (including justification)		lame of Co					Telepho	ne Numb	er		-	
☐ DCA ☐ Cancellation		lynda z	ahor				ı					
			FAC	CILITY INFORM	MATIC	ON .			_			
Name of facility where abatement is	taking pla	ace (3)				···	Type of Facility	(4)				
lynda zahor		8.5						ol (K - 12)			
Street Address								hapter 8 (
							Other Bldgs	(Private/0./Homes,	Comme etc.	ercial		
City (E)	Το:	1 (0)					Square Feet	# of Floo		В	ldg. A	ge
City (5)	Cour	nty (6)				ounty Code (7) tate use only)						
MAPLEWOOD	esse				(5)	late use only)	Current Use (F	Prior if bein	ng der	nolish	ed)	
Name of Monitoring Firm Hired by B	ldg. Owne	er (8)		ASCM No.	\Box	Name of Abatement	Contractor (9)					
						D & S RESTOR	ATION, INC.					
Street Address						Street Address						
City, State, Zip Code					_	20 California Av	/e.		_			
					- 1	City, State, Zip Code	500					
Project Manager for Monitoring Firm		Ph	none Numb	er	-	Paterson, NJ 07 Telephone Number	303	License	Numi	oer .		
						973-345-8020			1169			
Start Date (10)	Sched.	Completion	on Date (1	1)	-	Name of OSHA Moni						
05/07/18	05/31	/18				D & S Restoration	on, Inc.					
Occupancy Status During Abatement	(Check or	nly one)	-		-	20 California Av	enue					
☐ Facility closed/vacated during e ☐ Abatement performed outside o Describe:	ntire perio	d of abate acility hour	ment. rs-			City, State, Zip Code	chide					
Other-Describe: NORMAL HO	URS				-	Paterson, NJ 07:	503					
Scope of Work (check all that apply)							ull Containment v	v/negative	press	ure		_
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≥160 sf or ≥260 lf □	emolition					× ×	Glovebag procedu Non-Exempted (*)	re and Non-	friahlo	proc	adura	
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material (acm) to be	staff(12)	iance/cusi	Julian	Descriptio material (A	n of a	sbestos-containing	Amount (Specify S	SF or	e m	e p	n	n
abated in facility (13)	Yes	No	N/A	material (A	ACIVI)		LF)	, 01	0	a	a p	L
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D & S RESTORATION, INC.	1350	P Hauler II 16		ubic Yards of W yds.	aste	Name of Registered I TULLYTOWN, F		COVED	v			
City, State			Disposal D	ate		City, State	LOCOROL III	OU VER	-			
PATERSON, NJ 07503 Completed by (Print or Type)	741		05/06/18			TULLYTOWN, I	PA					
D C C D	itle RESIDE	NT		Signature				Date 04/24	2010			
			or asbesto	s licensure exe	mpted	d activities.		04/24/	2018			-

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Ch1501		NO	TIFICAT (Pursu	ION OF A	New Jers SBESTO AC-8:60-	SARATE	EME 20)	NT	Language Con-		;			E
Date of Notification (1) 4/25/18			Nam	e of Build	ing Owner	r/Operato	or (2)	//		1	APF	3 (20	8
Agencies Notified Type Notificati	on			elia Nav					1	L	DI.	Υ.		,
V 504	OH		Stree	et Address	S				-		2077 3		ompo como	IOL &
EPA Initial DEP Amended	ı		City	State, Zip	Code					Pa:			undi.	iUL &
× DOL Amendm	ent#				gton, NJ	07031			former	metanena eta	e rytopył o	a sansin	u engi-tokky etas	・ 中央の大学・イクリ 中心・原文学
DOH Emergen	cy (includ on)	ing		e of Conta		0,001			To	lenhon	o Misses	1		
DCA Cancellat			Noe	lia Nav	arro				1 14	шини				
Name of Facility Where Abatement is Ta	king Dlas	- (0)	FA	CILITY	NFORMA	TION			-		5			
Residential Home	King Place	e (3)					Ty	pe of Facility	(4)					
Street Address								School (K-	-12)					
							×	Subchapte Other (i.e.	er 8 (Oth	er than	K-12)	huildi	nac ho	mon
City (5)								etc.)						
North Arlington							23	uare Feet	2	f Floors	S	0.0000	g. Age +/-	
County (6)			Count	y Code (7	")			rent Use (Pr		ing don	noliek e	1000	+/-	
Bergen			(STAT	E USE ON	LY)		Re	sidential I	Home	ing den	ionsne	a)		
Name of Monitoring Firm Hired by Building Project Manager	g Owner ((8)	ASC	CM No.		Name		patement Co		(9)				
Street Address						All S	tage	es Abatem	ent	. ,				
onect Address						Street								
City, State, Zip Code								lidland Av	e.					
0.40 1 (0.000 p.) (1.000 p.) (1.000 p.)								Zip Code	22000					
Project Manager for Monitoring Firm			Teleph	one No.		Telepho		Brook, NJ (1/663					
						201-6				0130	se No.			
Start Date (10)	Schedi	uled Co	mpletion	Date (11)			SHA Monitor		0130		_		
5/10/18	5/12/	18				0.50.8000.200		·······································						
Occupancy Status During Abatement (Che						Street A	Addre	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: 8 A.M. to 4 P.M	Period of mal Facili	Abate ty Hour	ment 's			City, Sta	ate, 2	Zip Code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf	×	Renova Demoli	ation tion			×	Gl	III Containme ni-Enclosure ovebag Proc on-Exempted	edure					
	1	s Locat	ion						() ariu	NOII-F	nable i	02.432	ure atemer	
Location of		Normal			Des	cription o	of						Туре	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	aintena	nce/	Asbe	stos Conta	aining Ma	teria	(ACM)		nount			m	
In Facility (13)	Cus	todial ((12)	Staff?	(1.6	. thermal s	ing, VAT,	or	ation,		ecify or LF)		200	Encapsulate	Enclosure
(13)				1	other m	iscellane	ous)			/	3	Kepaii	Sula	osur
D	Yes	No	N/A										ate	(i)
Basement		Х			Pip	e Wrap	ě		110) LF	×	1		
												1		
												+	-	
					-						-	+	+	
Name of Registered Waste Hauler		N.	JDEP W	aste	Cubic Y	ards		Name of R	enietore	dland	IGII			
All Stages Abatement		H	auler ID 036592	No.	of Wast			Grand C				י ש יובי		
City, State		100	130392		2 Dispose	I Dete			Gritial	Sanit	ary La	aridti	1 .	
Saddle Brook, NJ					Disposa TBD	ii Date		City, State	4 DA					
Completed by	Title					nature	1.	Pen Argy	yı, PA		Deti			
Richard Cristofol	Presi	dent			Oig		11		_		Date	10		

State of NJ

2018-104

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

Б d G proj. ж.				(i diod		0.00	410 121120-7)	С	heck # 89	64			
Date of Notification	1 (1)		Name	of Building Ov	vner/Operator (2	2)	NA STANCES						
10 14 1/12 17				le Neale	···orporator (.	-/		Programme and American	NE	GE		M	
Agencies Notified EPA	Type Notific		Street A	Address					ni ni				4 1
☐ DEP	X Initial		City Ct	ate, Zip Code				. 1	<u> </u>	PR 3	0	2018	2.90
X DOL	Amen	dment		ona, NJ 07									- AFTER
₩ DOH			Name o	f Contact				Tele	phone Num	ber			1 0
☐ DCA	☐ Cance	ellation	Nice	ole Neale				l lunes	CONTRACTOR OF THE PROPERTY OF	Sq. minut	h(11)		Mark 2 rusheks kustoni
		=:0::5		FA	CILITY INFORM	MATIC	N		57 V 4 7-3-3				
Name of facility wh	ere abatement	t is taking	place (3)					Type of Fac	cility (4)		-		
Nicole Neale									chool (K-				
Street Address									ubchapter 8 ther (Private				
								Square Fe	dgs./Homes		TE	3ldg. A	\ge
City (5)		C	ounty (6)			(5.5000000	unty Code (7)				_		.50
Verona, NJ 0			ssex			(St	ate use only)	Current Us Residen	se (Prior if b	eing der	nolis	ned)	
Name of Monitoring	Firm Hired by	Bldg. Ov	mer (8)		ASCM No.	-	Name of Abatement C	contractor (9)	ual		-		
Charl A.I.					n/a		B & G Restoration	on, Inc.					
Street Address							Street Address 105 Ryerson Ro	nad					
City, State, Zip Code						-	City, State, Zip Code			-	-		
Drainat Manager							Lincoln Park, N	IJ 07035					
Project Manager for	Monitoring Fire	m		Phone Numi	ber		Telephone Number (973)696-6869	1		se Numi 00378	ber		
Scheduled Start Date	e (10)	Sch	ed. Comp	letion Date (1	1)	_	Name of OSHA Monito	or		00010	10		
05/09/2018		05	5/10/201	8	· .		B & G Restoration	on, Inc.					
Occupancy Status Di						-	105 Ryerson Ro	ad					
Facility closed/ Abatement per	vacated during formed outside	entire pe	riod of ab	atement.			City, State, Zip Code						
Describe: Other-Describe			- raointy i			_	LincolnPark, NJ	07035					
Scope of Work (che		y)						07000				2	
☐ Demolition	X	Renovat	ion			☐ F	full Containment w/nega	itive pressure	Glov	ebag pr	oced	ure	
		≥160 sf c	r ≥260 lf				Mini-enclosure	8		-friable			
Location of asbestos-conta	ninina	Is locati	on norma tenance/o	lly used solely						R	R	E	E
material to be		staff(12			Descriptio material (A	n of a	sbestos-containing	Amou (Speci	nt fy SF or	m	p	n c	n
abated in facilit	ry (13)	Yes	No	N/A				ĹF)		o v	i	a p	L
pasement main r				_ X	pipe insula	tion		70 lf		e			
front & rear sto	orage room		<u> </u>										
			1							井		H	#
										H		H	1
Registered Waste Hat B & G Restoration	uler on, Inc.	NJE	DEP Haule 19563	er ID# C	ubic Yards of W	aste	Name of Registered La	andfill	Door	-11		<u> </u>	
City, State Lincoln Park, NJ				Disposal D			Tullytown R City, State Tullytown, P.		Recover	y Cent	er		
Completed by (Print o		Title			Signature			^	Date			Y:	
Gordana Luna		Secreta	ary/Trea	surer		(Gordana Luna			27/201	8		

State-of NJ

B & G proj. #: 2018-69		Carl Land	/ Notifi	cation of As	best	os Abatement -7 and 12:120-7)	製				
		1.5	(deci		2.00	-7 and 12.120-7)	Chec	k# 8962			
Date of Notification (1)	11	Name of P	Building Ow	ner/Operator (2	1						
0 4 1/12 17 1/11 18 1			vangelos		,			2 P E	U U	n e	F
Agencies Notified Type Notificat	ion	Street Add						G C E	[] //		
☐ EPA 💢 Initial		Otroot 7 taa	1000								
DEP MINICIAN	11	City State	, Zip Code				de la company	APR 3 (20	10	11 11
■ DOL			, zip Cade nd, NJ 07	436				AIN O	LU	10	- Lancanica -
₩ DOH		Name of Co	ontact				I Telepho	ne Number	11311	711 &	
☐ DCA ☐ Cancella	ation	Beth E	Evangelos				11	11: 22:02.			eponed sourcements and services
				CILITY INFORM	IATIC	NN	- 1				
Name of facility where abatement i	s taking n	lace (3)			7110		Tone of Francis	(4)			
Beth Evangelos	o tanınığ p	.000 (0)					Type of Facility Scho	(4) ol (K - 12)			
							Subc	hapter 8 (Oth	er thar	n K-12)	
Street Address								(Private/Com ./Homes, etc.		ai	
							Square Feet	# of Floors		Bldg. A	lge
City (5)	Cou	inty (6)				unty Code (7)					
Oakland, NJ 07436	Be	ergen			(St	ate use only)	Current Use (F Residential	Prior if being o	demoli	shed)	
Name of Monitoring Firm Hired by I	Bldg. Own	er (8)		ASCM No.	1	Name of Abatemen	t Contractor (9)				
				n/a		B & G Restora	ation. Inc.				
Street Address						Street Address					
City, State, Zip Code						105 Ryerson					
City, State, Zip Code						City, State, Zip Code					
Project Manager for Monitoring Firm	-	Ιp	hone Numb	207	_	Lincoln Park,	NJ 07035				
,		1	none Numb) C1		(973)696-686	69	License No			
Scheduled Start Date (10)	Sched	d. Complet	ion Date (1	1)	-	Name of OSHA Mor	1000000	-			
05/07/2018	05/	08/2018				B & G Restora	ition, Inc.				
Occupancy Status During Abatemen	t (Check o	only one)			-	105 Ryerson F	Road				
Facility closed/vacated during	entire per	iod of abate	ement.			City, State, Zip Code					
Abatement performed outside Describe:	of normal	facility hou	ırs-								
Other-Describe:					_	LincolnPark, N	IJ 07035				
Scope of Work (check all that apply Demolition										-	
	Renovatio				∐ F	Full Containment w/ne	egative pressure		proce	dure	
	160 sf or				×	Mini-enclosure		Non-friab	le pro	cedure	
Location of asbestos-containing	by mainte	n normally enance/cus	used solely	1				F	R	€ 50°	E
material to be	staff(12)			Descriptio material (A	n of a	asbestos-containing	Amount (Specify 8		n e	n	n
abated in facility (13)	Yes	No	N/A	I material (10111)		LF)		-	a	L
garage				pipe insula	tion		20.15	e	-	Р	1
boiler room			×	pipe insula			30 lf 50 lf			11	#
back storage room			×	pipe insula			25 lf	<u>[</u> 2		++	+
							2011		11-	11	卅
Registered Waste Hauler								F	1	H	一
B & G Restoration, Inc.		EP Hauler 19563	ID# C	ubic Yards of W	aste	1	Landfill Resource & Re	acover Co	entor		1
City, State Lincoln Park, NJ			Disposal D			City, State		occordiy Ce	HILEI	-	
			05/0	8/2018		Tullytown,	PA				

Completed by (Print or Type) Gordana Luna

Title Secretary/Treasurer

Signature

Gordana Luna

Date

04/27/2018

State of NJ

2018-103 R & G proj. #:

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

)D	/\\\	entialdan	Glade Addings Glade Addings Gl	Chec	k # 8963	3			_
Date of Notification			Nar	ne of Bu	ıilding Ow	ner/Operator (2)	- Control of the Cont	[my	医而	TC'	7 11	// IE	= 7
10 14 1/12 17] c	hang .	Jeong		50			<u>E</u> (C	E.			1.//
Agencies Notified EPA DEP	Type Notific		Stre	et Addre	ess			-MI	1	APR	3 (20	18	
DOL DOL	Amen	dment			Zip Code rood, NJ	1.07450								
₩ DOH			_	e of Co		107450				ASHER!			iUL 8	4
☐ DCA	☐ Cance	llation			Jeong				Lieleph	one Numb	er	of the Street Printer	time the property of the party	ومطيعة والمرافقة والمسائدة
			11	many		OIL ITY INCODE	***							
Name of facility wh	nere abatement	t ie takir	na place	(3)	FAC	CILITY INFORM	MATIO	N	T- (- 111	7				
Chang Jeong	icie abatement	i is takii	ig place	(3)					Type of Facility School	7 (4) 201 (K - 12)			
Street Address									F (1)	hapter 8 (12)	
Offeet Address									X Othe Bldgs	r (Private/0 s./Homes,	Commo etc.	ercial		
City (5)			County	/6\					Square Feet	# of Floo		В	dg. Ag	ge
	×		150					unty Code (7) ate use only)	Current Use (Delea if hair	ag don		od\	
Ridgewood, N			Berge						Residential		ig den	nolisn	eu)	
Name of Monitoring	g Firm Hired by	Bldg. (Owner (8	3)		ASCM No.		Name of Abatement (Contractor (9)				5A, 60 18	
Street Address	3/8					n/a		B & G Restorati	on, Inc.					
Olice Address								105 Ryerson R	oad					
City, State, Zip Code	е						-	City, State, Zip Code						
D1								Lincoln Park, N	NJ 07035		1000			
Project Manager for		n		Pho	one Numb	per		Telephone Number (973)696-6869		License 00	Numl 0378	oer		
Scheduled Start Dat	te (10)	S	ched. Co	ompletio	n Date (1	1)		Name of OSHA Monit B & G Restorati	55000					
05/08/2018			05/09/2					Street Address	on, me.				-	
Occupancy Status D			600	100,000,000				105 Ryerson Ro	oad					
Facility closed Abatement pe Describe:	/vacated during rformed outside	g entire e of non	period o	f abater ity hours	ment. s-			City, State, Zip Code						
Other-Describ							_	LincolnPark, NJ	07035					
Scope of Work (che							_							-
>3 sf or >3 If	×			27.2			-	full Containment w/nega	ative pressure		V175(8)			
		_	f or ≥26		sed solely		X I	Mini-enclosure		☐ Non-fi		_	dure	
Location of asbestos-cont	aining	by ma	aintenan	ce/custo	odial		nn of a	sbestos-containing	Amount		e	e e	E n	E
material to be abated in facili	ity (13)	staff(NI-	l	material (sucstos-containing	(Specify :	SF or	o	p a	c a	C
		168		No	N/A						v e	i r	р	, L
pasement			#		X	pipe insula	ation		70 If		X			
			╬								무	片		片
			#						_		ዙ	片	붜	+
			T								H	片	퓜	H
legistered Waste Ha B & G Restoration	auler on Inc	N	IJDEP H)# C	ubic Yards of V	Vaste	Name of Registered L			رب.	<u></u>		_
City, State		<u> </u>	, , , ,		Disposal D			City, State	Resource & R	ecovery	Cent	er	<u> </u>	
Lincoln Park, N.						9/2018		Tullytown, P	PA				ν.	
Completed by (Print of Gordana Luna	or Type)	Title Secre	etary/T	reasur	er	Signature	(Gordana Luna		Date 04/27	7/201	8		

NOTIFICATION OF ASBESTOS ABATEMENT

Check # 25582

Date of Notification (1)				e of Building Ow			1	n e	C	E	W
4/28/2018			Ivaiii	e or building Ow		or (2) Chumbiriza		J	6 7 1 A A A A A A A A A A A A A A A A A A		·
Agencies Notified Type Noti	fication		Stree	et Address					APR	3 0	2018
EPA X Initia	l nded		City	Cinta 71 0 1				Li,	Arn	3 0	2010
X DOL Ame	ndment #		City,	State, Zip Code	Fli	zabeth, NJ 07	204				
☑ DOH ☐ Eme	rgency (includi	ng	Name	e of Contact	L11.	zabelli, NJ 07				12 OC	
	ellation			Raquel C	humbiriz	а	relep	hone.Nun	nber	-	
Name of Facility Where Abatement i	s Taking Diese	(0)	FA	CILITY INFORM	IATION						_
Reside	s raking Place ential	(3)				Type of Facility	(4)				
Street Address						School (K-	12)				
						Subchapte Subchapte Other (i.e.	r 8 (Other i private & c	than K-12) Il buildi	nas ho	mee
City (5)						etc.) Square Feet					Yel
Elizabeth,	NJ 07201					1400	# of FI	oors 2	110000	ig. Age 5 +/-	
County (6)			Count	y Code (7)		Current Use (Pr			100	3 1/-	
Union				EUSE ONLY)			509	acmons.	Juj		
Name of Monitoring Firm Hired by Bu MECS	ilding Owner (8)	ASC	CM No.	Name	of Abatement Co	ntractor (9)				
Street Address						ens Environme	ental Ser	vices, Ir	IC.		
PO Box 341						Address Box 322					
City, State, Zip Code											
Chesterfield, NJ	08515				Allen	tate, Zip Code town, NJ 0850	11				
Project Manager for Monitoring Firm			Teleph	one No.		ione No.		cense No.	1		
Bill Weisgarber				298-4070		259-9688	1 223	0493			
Start Date (10) 5/9/2018	Schedu		mpletion	Date (11)		of OSHA Monitor				-	
Occupancy Status During Abatement	(Check Only C		710720	10	MEC						
Facility Closed/Vacated During F	ntire Period of	A hata	mont			Address Ox 341					
Abatement Performed Outside of Other – Describe: 8 am to 4pm	Normal Facilit	y Hour	S			ate, Zip Code				More evene	
						terfield, NJ 08	515				
Scope of Work (Check All That Apply)										-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli			×	Full Containme	nt with Neg	ative Pre	ssure		
		Jemon	uon		×	Mini-Enclosure Glovebag Proc		•	-331170		
						Non-Exempted	(*) and No	n-Friable	Proced	dure	
Logotion		Locat Normal							Ab	atemer	nt
Location of Asbestos-Containing Material (ACM	// Use	ed Sole	ly by	Asbestos Co	escription (of		-	-	Туре	1
TO BE ABATED In Facility	Ma	intena todial S		(i.e. therma	al systems	insulation,	Amoui (Speci	1072	д _	Ē	_
(13)		(12)		surf other	acing, VAT miscellane	, or	SF or L	.F)	Removal	caps	Enclosure
	Yes	No	N/A			1			val	Encapsulate	sure
Basement		X		Thermal	Pipe Ins	ulation	00.15			œ	
Basement		X			er Insulat		80 If		2		
				Dolle	Insulat	1011	90 sf	2	2		
									-		
Name of Registered Waste Hauler		100	JDEP W		Yards	Name of R	egistered I	andfill			
tevens Environmental Services	3	Ha	18292		ste 2	Fairless	4000	GI GIIII			
City, State			10202		sal Date						
Illentown, NJ					18/2018	City, State Morrisvill	e. PA				
Completed by Mahlon E. Stevens	Title				Signature	/ /	7	Date			
E. Stevens	Proje	ct Mai	nager		114			The second second	8/18		

glasseenits, more dis-	gazzene	.v										Р	rint Forn
	Constant	NOT	FICATIO	State of New ON OF ASBES	Jersey	reme	ENT	C	heck#	255	561		
	لا) (Pursuar	nt to NJAC 8:	60 and 12:1	20)	-141		ME	C			VE
Date of Notification (1) 4/28/2018			Name	of Building O			5/)			Barrio de Calenda			
Agencies Notified Type Notification	on		Street	Address		Ger	raldine			APR	3	n o	018
EPA Initial				7.55					14	M! !!	U	U Z	010
DEP Amended Amended Amendment	ent #		City, S	tate, Zip Code		- N			ĀĒ	ar trans	Na r	TELL S	ROL
□ Emergence justificatio	y (includir	ng	Name	of Contact	Unio	n, N	J	Tol	ephone Nu	L.	it-agraciona	SING	TOL O
DCA Gancellati				-2/-2/	Geraldine	Э		l ele	eprione int	ımber			
Name of Facility Where Abatement is Tal	ing Place	(3)	FAC	CILITY INFOR	RMATION	I T	uno of Facility	(4)					
Residentia		(0)					ype of Facility School (K-						
Street Address						×	Subchapte	r 8 (Othe	er than K-1 commerc	12) cial bui	ildings	, hom	es,
City (5) Union, NJ						So	quare Feet 1500	# of	Floors 2		Bldg. /	-	
County (6) Union				Code (7) USE ONLY)		Ci	urrent Use (Pri	or if beir	ng demolis	shed)			
Name of Monitoring Firm Hired by Building MECS	Owner (8	3)	ASC	M No.	Name	e of A	Abatement Co	ntractor ental S	(9) ervices	Inc			
Street Address PO Box 341					Stree	et Add	dress						
City, State, Zip Code							e, Zip Code				-5,00		
Chesterfield, NJ 08	515						vn, NJ 0850)1					
Project Manager for Monitoring Firm Bill Weisgarber			Telepho 609 2	one No. 298-4070	Telep 609		e No. 9-9688		License N 00493	10.			
Start Date (10) 5/8/2018	Schedu		mpletion 1/11/20	Date (11) 18	Name ME0		OSHA Monitor						
Occupancy Status During Abatement (Che	ck Only C	ne)			Stree		1000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						-
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: 8 am to 4pm	Period of mal Facilit	Abater ty Hour	nent s			State	, Zip Code						
Scope of Work (Check All That Apply)					Che	ster	field, NJ 08	515					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli			È	× !	Full Containme Mini-Enclosure Glovebag Proc	e cedure					
	1:	s Locat	ion				Non-Exempted	(*) and	Non-Friab	le Pro		e ement	
Location of		Normal ed Sole	ly		Description					_	Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	aintena stodial ((12)	nce/	(i.e. the	Containing Normal system surfacing, VA her miscellar	is ins	ulation,	(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	00	ner miscelläi	neou	٥)			val	air	ulate	ure
Basement		X		Therr	nal Pipe Ir	nsul	ation	2	5 If	Х			
Name of Registered Waste Hauler		l N	JDEP W	/asta I o	uhio Vast-		I No.	2					
Stevens Environmental Services		11 1123	auler ID	No. of	ubic Yards Waste 1		Name of F Fairless						
City, State Allentown, NJ				Di	sposal Date 5/14/201		City, State						
Completed by Mahlon E. Stevens	Title Proje	ect Ma	nager		Signature		74/	/	Da	te 4/28	/18		

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

EG	E		EM
	- 34 3 ********	and the second	
APR	3.0	2018	\

Date of Notification (1)					Name	of Buildi	ng Owner/Operator	(2)		APR	30	2016	7
	1	8					th Corporation		ob #1609-2		-	k. #50	
Agencies Notified Type Notifi	ication	1			Street	Address			Au	AGE OF	- 5.1	515(jl
☑ EPA☑ Initial☑ DOLWD☑ Amende					336	0 Grand	dview Parkway, S	Suite 200	CONTRACTOR OF THE PROPERTY OF	1 1 0 0 1 1 1 1 1 1 1 1	-(5)	43	
		ш		(tate, Zip				-			****
☐ DCA ☐ Emerge						ninghai							
(NJAC 5:23-8) justificat	tion)	riciuai	ing	1		of Conta			Train				_
☐ Cancella						abeth N			Telephone 205-970				
							NFORMATION		203-970	J-1 00U			_
Name of Facility Where Abatement is								Type of Facility ((4)				_
HealthSouth Rehab Hospital o	of To	ms R	Rive	r				School (K-12))				
Street Address								Subchapter 8 Other (i.e., pri	(Other than	K-12)		ď	
14 Hospital Drive								homes, etc.)	ivate and cor	mmercia	Dulic	lings,	
City (5)								Square Feet	# of Floors	s	Bldg	. Age	-
Toms River								84,619	3		- 5	er 30)
County (6)					Count	y Code (7)(STATE USE ONLY)	Current Use (Pric	or if being de	molisher			_
Ocean								Rehab Hospi			-/		
lame of Monitoring Firm Hired by Buil	lding (Owner	r (8)	AS	SCM N	lo.	Name of Abateme				- 717 - 27 17		_
Horizon								d Mold Services	Corn				
Street Address							Street Address		э, оогр.				_
PO Box 316							3859 Sylon B	oulevard					
City, State, Zip Code							City, State, Zip Co			- 2-4525			
Thorofare, NJ 08086							Hainesport, N						
Project Manager for Monitoring Firm			T	eleph	one No	0.	Telephone No.		l icones M				
Dave or Steve Flanigan					848-0		609-702-0400		License No 00862	0.			
Start Date (10)	Sched	uled (Com		n Date		Name of OSHA M	onitor	00002				_
5 /3 /18					1		EMSL Analyti						
Occupancy Status During Abatement (Check	only	one))			Street Address						_
Facility Closed/Vacated During Entir	re Per	riod of	Aba	teme	nt		200 U.S. Rout	o 120 North					
Abatement Performed Outside of No	ormal	Facili	ty Ho	ours -	Descri	ibe	City, State, Zip Co						
Time of Abatement: AM-	DI	Λ/	P	M	A	VI	Cinnaminson						
cope of Work (Check all that apply)	1 2.1	Mill.	,	With	4/6	, ·	Cililalilison	NJ 08077					
				WE	e hi	nd w	W Full Conta	inment with Negat	tive Pressure	9			
] ≥3 sf or ≥3 lf] ≥160 sf or ≥260 lf		⊠ Re						osure	ave i ressure	5			
<u>a _100 31 31 ≥200 11</u>		∐ De	emol	ition			☐ Glovebag	Procedure	F :	-			
		ls	s Loc	cation			☐ Non-Exer	npted (*) and Non-	Friable Proc				
Location of		9 973.5		nally			Description of			A	Abate	ment 1	Гу
Asbestos-Containing Material (ACM)	1)	Use	ed S	olely b	у	Asbes	stos Containing Mat		Amount	2	2 2] <u>_</u>	
TO BE ABATED IN Facility		Cus	todia	nance al Staf	f7	(i.e.	, thermal systems ir	sulation,	(Specify	Kemova	Kepair	cap	
(13)			(12				surfacing, VAT, other miscellaneo		SF or LF)	2	5	Encapsulate	1
		Yes	N	0 N	I/A		other miscenaries	us)				ate	
ata Room 119, Storage Area abo	ove				I P	opcorr	n Ceiling		250 SF	×	1 -		+
					a								+
	_		-		-						1 -		1
]								
	-		_		- 1						1/		1
ame of Registered Wests U.S.											- -		4
				NJDE	P Wa		Cubic Yards of Waste	Name of Register			- -		
Waste Management				NJDE Haule		lo.	Waste 5	Grand Centra			- -		
Waste Management ty, State				NJDE Haule	P Was	lo.	Waste 5 Disposal Date	Grand Centra City, State	al		-		
Waste Management ty, State Lafayette, NJ	Title			NJDE Haule	P Was	lo.	Waste 5 Disposal Date 5/10/18	Grand Centra	al		- -		
ame of Registered Waste Hauler Waste Management ty, State Lafayette, NJ ompleted By (Print or Type) Joann Mullarkey	Title Ad			NJDE Haule	P Was	lo.	Waste 5 Disposal Date	City, State Penn Argyle,	al	Date	27:		

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

Date of Notification (1)				Na	me of Build	ing Owner/Operator	(2)		APR	3 A	201	10-
4 /	27 /	18				Rosenkratz		1804-2299		. #49		10
Agencies Notified	Type Notif	fication	_		reet Address				* may			
□ EPA	☑ Initial				oct / taules			AGC		5 GC () (SI	TITA	OL
⊠ DOLWD	☐ Amend			Cit	y, State, Zip	Code		Total Commence of the Commence	Section 1		or and others	
☑ DHSS □ DCA		ment #		1	Coronado,							
(NJAC 5:23-8)	justifica	ency (incluation)	ding	-	me of Conta			- 1				
	☐ Cancel			10000	Oron Rose	50 FUS		Telephone N	umber			
						NFORMATION						
Name of Facility Where Ab	atement is	Taking P	ace (3)		ACILITY	NFORMATION	TT 15 W					
Residential			400 (0)				Type of Facility (4					
Street Address							School (K-12) Subchapter 8	Other than K-	·12)			
							Other (i.e., privalent homes, etc.)	ate and comr	nercial l	buildir	igs,	
City (5)							Square Feet	# of Floors	- 1,	21-1-	A	
Moorestown							2157	# 01 F100FS		3ldg.	- 5	
County (6)				Co	ounty Code	(7)(STATE USE ONLY)			المصطحال		year	rs
Burlington						()(002 0/12/)	Vacant Resid		olisnea)			
Name of Monitoring Firm Hi	ired by Bu	ilding Own	er (8)	ASC	M No.	Name of Abatem	ent Contractor (9)	enuai				
Finog Environmental							d Mold Services	Corn				
Street Address						Street Address	a mola del vices	, corp.				
617 Stokes Rd., Suite	4-318					3859 Sylon E	Roulevard					
City, State, Zip Code						City, State, Zip C						
Medford, NJ 08055						Hainesport,						
Project Manager for Monitor	ring Firm		Te	lephon	e No.	Telephone No.	10 00000	License No.				
Rebecca Rubnitz			1 .		715-2211	609-702-0400)	00862				
Start Date (10)		Scheduled				Name of OSHA M		00002				
_5 / _7 / _	18	5	/	7/	18	EMSL Analyt						
Occupancy Status During Al	batement	Check on	y one)		400000000000000000000000000000000000000	Street Address						
□ Facility Closed/Vacated I	During Ent	ire Period	of Abat	ement		200 U.S. Rou	te 130 North					
Abatement Performed On	utside of N	ormal Fac	ility Ho	urs - De	escribe	City, State, Zip Co						
Time of Abatement:		PM/	PN	1	_AM	Cinnaminson						
Scope of Work (Check all the	at apply)											
≥3 sf or >3 If		M	Renova	tion		Full Cont	ainment with Negati	ive Pressure				
≥160 sf or ≥260 lf			Demolit			☐ Mini-Enc	losure I Procedure					
				550 E.O.		⊠ Non-Exe	mpted (*) and Non-F	riable Proced	ure			
			Is Loca						_	atem	ent T	vne
Location of Asbestos-Containing Mat	erial (ACN	n lu	Norm sed So		0-6-	Description o	f			_		-
TO BE ABATE	<u>D</u>	l l	Nainten	ance/	/i o	stos Containing Mai	terial (ACM)	Amount (Specify	Removal	Repair	nca	nclo
IN Facility (13)		Ci	ıstodia (12		,	surfacing, VAT,	or	SF or LF)	ova	= -	Encapsulate	Enclosure
(13)		Ye	1		1	other miscellaned	ous)	5500 - 5000 H5000F6			late	(O)
Basement					Dino Inc	sulation		Telephone Control		_		
				-	ripe ins	sulation		170 LF			\boxtimes	
										П	П	П
									-	1		1
Name of Registered Waste H	lauler		1		Waste	Cubic Yards of	Name of Registere	ad Landfill			Ц	
Waste Management				lauler l	D No.	Waste	Grand Centra					
City, State				1727	3	5 Disposal Date	Continue to the second of the	•				
Lafayette, NJ						5/7/18 ₄	City, State					
Completed By (Print or Type)		Title				1 1	Penn Argyle,	ra				
Joann Mullarkey		Admir	ι Δeet			Signature	201.	/ D	ate			
SB-41		- willing				Dun	1 11 HUC	[]	4-6	17-	18	

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

MAY 11

Date of Notification (1)	014	813	No.	OTIFICATION O	0 NU.A.C. 7:26	-2.12)			@ F	п пл	60
04/24/2013			Sept.	T /A\	Name of	Building Owner	er/Operator (2	2) 1) 5	65	11 14	
Agencies Notified		Notificati	iled.		The Chen	nours Compar	ıv	1			1
(X) EPA		Notification (X) Initial	Notification	25	Street Add	dress	9		DD 0.0	0.041	0
() DEP		() Amen	ded Certi	on fication	1007 Mar	ket Street			PR 3 (2018	d L
(X) DOL (X) DOH		() Cance	elled		City, State	e, Zip Code					- 1
() DCA					Wilmingto	n, DE 19899				ranaran karaner Garana karaner	CALL CO
					Name of C	Contact			E8708 C		UL&
-					Jim Lacev			Tel. Numb 856-540-2	er	THE FOR	AND THE RESERVE
Name of Facility Where Al	batement is	Taking Place	(3)	FACILITY	/ INFORMATIO			1 000 040-2	334		
16.00			107		Type of Fa	cility (4)					
Chemours Chamber Work Street Address	s Facility				() School	(K-12) apter 8 (other t	hon V 40				
Canal Rd.					(X) Other (i.e. private &	nan K-12) Commercial h	ldgs., homes,	-4-		
								lugs., nomes,	etc.		
<u>City (5)</u>	County (6)		Count	y Code (7)	Sq. Feet 32	2,350 # of F	oors_3_				
Deepwater	0-1-		(State	Use Only)	Bldg. Age_	65					
Name of Monitoring Firm H	Salem				Current Us	e (prior if bein	n demolisher	d) Chemical P			
1		g. Owner (8)	ASCM	No.	il de la companya de		Name of C	Contractor (9)	ant		
Harvard Environmental, Inc) .		1								
Street Address					Ctroot Add		Brandenbu	urg Industrial S	ervice Cor	npany	
760 Pulaski Highway City, State, Zip Code				22	Street Addr 2217 Spillm	ess an Dr					
					City State, 2	Zip Code					
Bear, DE 19701											
Project Manager for Monito	ring Firm	Telephone	Number		Bethlehem	Pennsylvania	18015				
JT Morrison		302-326-23	33		Telephone 1 610-691-180	<u>Number</u>		License Nur	nber		
Scheduled Start Date (10)		0-1-11			0.0001-100	50		00721			
		Scheduled	Completic	on Date (11)	Name of OS	HA Monitor					
05/08/2018		07/27/2018									
Occupancy Status During A	batement (01 1	e)		Street Addre	g Industrial Se	rvice Compa	iny			
() Abatement Performed O	During Entir	re Period of Al	batement		Street Addre	SS					
	utside of No Thur Fri &	omal Facility	Hours -	***	2217 Spillma	an Drive					
Holidays	mar, i ii d	oats as nece	ssary; Exc	cluding Major	City, State, Z	ip Code					
Describe_Demolition											
(x) Scheduled Demo Start 0 Scheduled Demo Compl	6/01/18	40			Bethlehem, F	DA 10015					
Source of Work (Check all th	of annha	/18			Journal III, I	A 10015					
(X) Demolition () Panov	otion								A11 A 17 (7 A)		
(A) Laige Proj. (>160 SF or	2601F AC	CM) () SM Pr	oj. (>25<1	60 SF or >10 <2	260 I F ACM	/) Mines D					
(x) Full Containment with N Location of Asbestos-	3-110	Court (A)	IVIIIII-E-DC	losure (x)	Glovebag Proce	() Willior Pro	J. (<25 SF or	<10 LF ACM)			
Containing Material (ACM) in	Solely	tion Normally by Maint./Cust	Used	Description of	ACM (i.e.		pecify SF or	IF) Abat	ement Typ		
Facility (13)	Staff? ((12)	oulai	thermal system surfacing, VA	ns insulation,		,	- / Abat	STREET TYP	<u>e</u>	
Building 888	_YES	NO	NA	miscell.)	i, or other	*		-	2		
Building 888	-		Х	Duct Insulation	n	100 SF		Rem.	Rep.	Encap E	Enclose
Building 888	+		X	Fire Doors		35 EA		X	+		-
Building 888			X	VAT & Mastic		364 SF		X	1		-
Building 888			X	Galbestos Window Glaze		13,786 SF		X			
Building 888			X	Tar Mastic		456 LF		X			
Building 888 Building 888			x	Pipe Insulation	1	80 LF 500 LF		X			
Building 888	-		х	Pipe Insulation	- Tar Paper	801 LF		X			
Building 888	+		X	Pipe Mastic		3,800 LF		X			
Building 888			X X	Roof Flashing		870 LF		X			
Building 888			x	Roof Membran Tank Covering	e	4,676 SF		×			
Building 888			x	Transite Pine		8,001 SF		x			
Name of Reg. Waste Hauler Brandenburg Industrial Service		NJDEP Waste	Hauler II	D#	Cubic Yards of	7 LF Waste		X			
Company	е	21838	725	20 -32	300 cy	- vaste		Name of Reg.	Landfill	- 15"	
City, State								Republic Cone	sioga Lar	Iatill	
Bethlehem, PA 18015							o. Date		City, State		
Completed by (Print or Type) Jennifer Polzer		Title			Signature	TBI			Norgantow		
	(Contract Mana	iger	1				Date 04/24/18		10-10-10-10-10-10-10-10-10-10-10-10-10-1	
NAME OF STREET			9:		NX	1	1	J-1/24/10			
Mail to: NJDEP-DSHW-BRR	TP 7	Telephone 609	-984-662	n	0	()					

M 401 E. State St., PO 414 Trenton, NJ 08625-0414

C:\WORD\MYDOCS\ASBESTOS 9/18/00

Date of Notification (1) 04/24/2018	813	P	TIFICATION OF (Rursuant to	N.U.A.G. 7:26-2	ATEMENT 12) uilding Owner	Operator (2)	<u></u>	EC	E	W	61 EF
Agencies Notified (X) EPA () DEP	Notification (X) Initial N	Votification	n	The Chemo Street Addr 1007 Market		y		APR	3 0	2018	
(X) DOL (X) DOH () DCA	() Amend () Cancel	ed Certific led	cation	City, State, Wilmington, Name of Co	DE 19899			SOEST		TROL	&
				Jim Lacey	madi	tout		Number 540-239		e i'Y	Carried the Colombian Co.
Name of Facility Where Abatemen	=		FACILITY	INFORMATION			000-	040-239	4		
Chemours Chamber Works Facility		<u>(3)</u>		Type of Fac () School (I	K-12)						
Street Address Canal Rd.				(X) Other (i.e	ter 8 (other to e. private & c	nan K-12) ommercial bl	dgs., ho	mes, etc			
City (5) County	(6)		Code (7)		250 # of Fl	oors2_					
Deepwater Salem		State	Use Only)	Bldg. Age	64 (prior if hair-						
Name of Monitoring Firm Hired by	Bldg. Owner (8)	ASCM	No	Current Use	(prior if being	demolished) Chem	ical Plan	t		
Harvard Environmental, Inc.		LICOM	140.			Name of Co	5-711-X 7-711-11				
Street Address 760 Pulaski Highway				Street Addre	SS	Brandenbu	rg Indus	trial Sen	vice Con	npany	
City, State, Zip Code				2217 Spillma	n Dr						
Bear, DE 19701				City State, Zi							
Project Manager for Monitoring Firm	n Telephone I	lumah a s		Bethlehem F	Pennsylvania	18015					
JT Morrison	302-326-23	33		Telephone No. 610-691-1800	<u>umber</u> O		<u>Licens</u> 00721	se Numb	er		
Scheduled Start Date (10)	Scheduled (completio	n Date (11)	Name of OSF	A Monitor						
Occupancy Status During Abateme	07/27/2018	2)		Brandenburg	Industrial Se	rvice Compa	ny				
() Abatement Performed Outside of	Entire Period of Ab	atement		Street Addres	7-20						
Holidays	i & Sat's as neces	sary; Exc	cluding Major	2217 Spillmar City, State, Zi						-	
Describe_Demolition_ (x) Scheduled Demo Start 06/01/18				Pothlaham D	A 40045						
Scheduled Demo Completion 08 Source of Work (Check all that apply	3/30/18			Bethlehem, PA	A 10015						
(x) Demolition () Renovation (x) Large Proj. (>160 SF or >260 LF (x) Full Containment with Negative	ACM) () SM Dec	oj. (>25<1	60 SF or >10 <2	60 LF ACM)	() Minor Pro	i. (<25 SF or	<10 F	ACM)			
Location of Aspestos-	ocation Normally	Mini-Enc	losure (x)	Jovebag Proced	dure			, conn			
Containing Material (ACM) in Sole	ely by Maint./Cust	odial	Description of thermal system surfacing, VAT	ns insulation,	Amount (S	pecify SF or I	LF)	Abaten	nent Typ	<u>oe</u>	
YF		NA	miscell.)	, or other	1			Rem.	Rep.	Encer [
A&B Building A&B Building		x	Tank Insulation	1	1,446 SF				Nep.	Encap E	liciose
A&B Building		X	Canvas over In	sulation	929 SF		_	X	-		
A&B Building		X	Fire Doors		25 EA			X			
A&B Building		X X	VAT & Mastic		104 SF			х			
A&B Building		X	Galbestos Roof Flashing		25,905 SF			х			
A&B Building		X	Roof Membrane	9	725 LF 7,516 SF			X			
A&B Building		x	Tar Paper on P		95 LF			X			
							-	-			
								-			
Name of Reg. Waste Hauler	NIDEDWast	111	5 "								
Brandenburg Industrial Service Company	NJDEP Waste 21838	nauler II	<u>D#</u>	Cubic Yards of 300 cy	Waste		Name o Republi	of Reg. L	andfill toga La	ndfill	
City, State Bethlehem, PA 18015					Die	p. Date					
Completed by (Print or Type)	Titl-				TB				ty, State	wn, PA	
Jennifer Polzer	Title Contract Mana	iger		Signature) /X		<u>Date</u> 04/24/18		- iguillo	, т. А.	
Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414	Telephone 609	984-662	0	0	-		:\WORI	D\MYDC	CS\AS	RESTO	

Trenton, NJ 08625-0414

9/18/00

Ch 140			NOT	HICATI	State of NON OF AS	BESTOS	SABATE	EMENT 20)		EC	E			
Date of Notification (1) 4/26/2018				Name Wei	of Buildin	g Owner. Realty	/Operato	r (2)		APR	3.0	2011	0 0	
Agencies Notified EPA DEP DOL DOH	Type Notification Initial Amended Amendmen Emergency justification	t# (includir	ng	City, S New Name	t Address Herbert S State, Zip (vark NJ (Code 07105	11		· a · · · · · ·	Audes T	5 (A) 1 (M)	IT.N		Contract to the second
DCA	Cancellation							Manager		73-570-2				
Name of Facility Where A N/A Street Address	Abatement is Takir	g Place	(3)	FA	CILITY INI	FORIMAT	ION	Type of Facility School (k	(-12)					
16 Herbert St								Other (i.e etc.)	er 8 (Ot . private	her than K- & commer	12) cial bu	ilding	s, hon	nes,
Newark County (6)								Square Feet 50,000	1	of Floors		Bldg. 100	Age	
Essex				County (STATE	Code (7)	y)		Current Use (P commercial	rior if be	eing demolis erty	shed)			
Name of Monitoring Firm	Hired by Building	Owner (8	3)	ASC	M No.		Name Chec	of Abatement Co ckmark Indus	ontracto trial	r (9)				
Street Address								Address Iorgan Dr						
City, State, Zip Code							City, St Spar	tate, Zip Code ta NJ 07871						
Project Manager for Monit	toring Firm			Telepho	one No.		Teleph 973-	one No. 570-2645		License N	10.			
Start Date (10) 5 10 2018 Occupancy Status During	Ahatement (Chec	5/1=	HON		Date (11)		Chec	of OSHA Monito kmark Indus	r trial					
Facility Closed/Vacat Abatement Performe Other – Describe:	ted During Entire P	eriod of	Ahaten	nent			54 M	Address organ Dr ate, Zip Code						
Scope of Work (Check All	That Apply)					_	Span	ta NJ 07871						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	7,77		Renova Demolit				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure					
Location	of	1 1	Locati Normal	ly		D						Abate		t
Asbestos-Containing N <u>TO BE ABA</u> In Facility (13)	Naterial (ACM) TED	Ma	ed Sole intenar todial S (12)	nce/	Asbesi (i.e.	tos Conta thermal s surfac	cription of aining Ma systems ing, VAT iscellane	aterial (ACM) insulation, , or	(8	mount specify or LF)	Remova	Repair	Encapsulate	Enclosure
attic		Yes	No X	N/A		0" + 0	1 41 1				_		ate	re e
3,110					9 X 9	' floor t	lles	65	0 SF	Х				
Name of Registered Waste	Hauler		N.	JDEP W	/aste	Cubic Y	arde	None	Daniet	d 1 '=-				
Atlantic Carting			0.5000	auler ID		of Wast	e	1		red Landfill gement				
City, State Wayne NJ		<u> </u>				Disposa	I Date	City, State Tulleyto		Ą				
Completed by Corey Stankovic		Title CEO				Sig	nature	Stanker	·	Dat 4/2	e 26/20	018		

131750	a Í		MOTIFIC	STATE OF	F NEW JERSEY ASBESTOS ABATEM	ENT	10			7 . ~	_
Poto of Notification	7		TEURSU	ANT TO N	AC 8:60 7 AND 12:12	20-7	GILL	2016	1=0	219)\
Date of Notification 04 / 27	(1)		U L	Name o	of Building Owner / C NE CORPORATION	perator (2)	III	3	61	W	E II
	/	-		Description of the last of the	Address		1111		nes electricity	- Andrews Case	·
Agencies Notified EPA	Type of	Notification Initial			RRIS AVENUE			8 0 0	1 20	0040	11000
☐ DEP		Amended		SUMMI	ate, Zip Code Г, NJ 07901		14 1	AIT	1-30	2010	1
☑ DOH ☑ DOL	_	Amendment	t	Name o	f Contact		Telepho	ne Numi	per	7 T Filmon as	1
		Cancellation	w/ justification	JANOS	ANGELI		908-897	4646	CB COL	TROL	- &
			The second of the second of	FACILITY	NFORMATION			(.)	CEROIN	iu	
Name of Facility Wh	ere Abate	ment is Taking	Place (2)		Tr. (5						
CELGENE CORPOR	ATION - B	LDG. S-2	i lace (3)		Type of Facility (4)					
Street Address					☐ School						
535 MORRIS AVENU	E				Subcha	pter 8 (Othe .e., private 8	r than K-1	2)			
City (5)	County (2)	10	700	bldgs.,	homes, etc.)	Jai			
SUMMIT	UNION	9)	County Code	9 (7)	Square Feet 17,000	# Of Floo	ors 2	Buildin	g Age		
	<u> </u>				Current Use (Prior	if being der		1	40+	·	
Name of Monitoring	Firm Hire	d by Bldg. Owr	ner (8)	ASCM N	OFFICE/CAFATER	IA					
WCD GROUP LLC			(0)	ASCIVI IV							
Street Address	/ E	WMA			NORTHSTAR CON	TRACTING	GROUP. IN	IC.			
23 RT 31 NORTH, STE		00 MISTY LANE			Street Address						
City, State, Zip Code PENNINGTON, NJ 0853		ARSIPPANY, NJ	07054		32 Williams Parkwa						
Project Mngr. For Mc	nitorina F	irm	Telephone No	umber	City, State, Zip Coo	de					
MIKE GARAMBONE / Ke Sheduled Start Date	evin Seise	ICabad Ca	609-730-0007 / 97	3-560-1400	East Hanover, NJ 07						
05/07	/18	05	oletetion Date (11)	Telephone Number		License I	Number			
Occupancy Status De		/	/		973-884-8682		THE STREET	0	0860		
Occupancy Status Do	osed/Vaca	ement (Check ted During En	Only 1) tire Period of		Name of OSHA Mon NORTHSTAR CONT	nitor	POUR IN				
Abatement	t				Street Address	INACTING (ROUP. IN	U			
Hours - De	scribe:	7:00 am to 3:3	ormal Facility		32 Williams Parkway	,					
Other - De	scribe: _	MON-FRI			City, State, Zip Cod	е					
Scope of Work (Chec	k All That	Apply)			East Hanover, NJ 07	036			*********		
Demolition≥3sf or ≥3l		V	Renovation		Full Containment w Mini - Enclosure	ith Negative	Pressure				
≥160 sf or :	≥260 If			7	Glovebag Procedur						
					Non-Exempted (*) a	nd Non-Fria	ble Proced	dure			
Location of Asbestos Contai		ls		Descript		T	Abatemen	t Type			-
Aspestos Contai	ning	Location Normally	As	bestos - C Material		Amount	R E		E	E	
TO BE ABATE in Facility	<u>.D</u>	Used	(l.	e., thermal	systems	(Specify	M	R E	N C	N C	
(13)		Solely by Main-	insu	lation, surf other misc	acing, VAT,	SF or LF)	0 V	P	A	L	
		tenance/					A	A I	P S	o s	
		Custodial Staff (12)					L	R	U	U	
52		YES NO N/A							<u> </u>	R	
32			FITTINGS			30 LF	V				
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lame of Registered W	laste Hau		NJDEP Waste	Cubi	N		Image: section of the content of the				j
NORTHSTAR CONTRA	ACTIN GRO			Yards of Waste	Name of Registered FAIRLESS LANDFILL						
ity, State AST HANOVER, NJ				Disposal	City. State MORESVILLE, PA	0	-				\neg
completed by (Print o	r Type)		Title		, in	1	-502				
iteven Stiles	J.F.E.	- 1			Signature	A			Date		
SB-41			Project Manage	Г	4	دب			04	/27/18	
					7						

Ch	4331	08		NO	IFICAT Pursu	ION OF	New Jer ASBESTO AC 6:60 :	NE IA DE ALT	EMENT	DE	C E	·]	W	Print
Date of Notifi 4-27-2018	ication (1)				Nam		ling Owne			A A	28 3	0 2	2018	100
Agencies No	tified Typ	pe Notification	on			et Addres								1
× EPA	×	Initial				Baekela				ASSE	stòs: Ucei	CONT Market	TROI	_ &
DEP DOL		Amended Amendme			City, Mid	State, Zip	Code NJ 0884	6		<u> </u>	Maria Charles	: 22.44		- V-11
Ĭ DOH		Emergeno justification	y (includ	ing		e of Conta				Tolonhaus	AT			
DCA		Cancellation				nard We				Telephone 1 989 63				
Name of Faci	lity Where Abate	ement is Tak	ing Place	e (3)	FA	CILITY	NFORMA	TION	Type of Facilit	v (4)			-	
Bound Bro Street Addres	ok Facility								School (K	리 - 취실점				
65 Baekela									Subchapt	ter 8 (Other than h	(-12)	4.0		
City (5)									etc.)	. private & comme	ercial bi	500		nes,
Middlesex									Square Feet >50,000	# of Floors		#50	. Age	
County (6) Middlesex					Count	y Code (7 E USE ON	7)		Current Use (P	Prior if being demo	lished)	10000000000		
Name of Moni	toring Firm Hired	by Building	Owner ((8)		CM No.		Namo	of Abotomont C					
Criterion La	abs							Delta	of Abatement Co /BJDS, Inc	ontractor (9)				
400 Street	6							7.25	Address					
City, State, Zip	Code								Industrial Bly	vd				
Bensalem F	Pa 19020 er for Monitoring							South	nampton Pa 1	18966				
Eric Wysocl	ki	Firm				one No. 244-130	0		one No. 22-2900	License	0.000			
Start Date (10) 5-7-2018			Schedu	uled Co		Date (11			of OSHA Monitor	00783				
	tus During Abate	amont (Oh	5-21-	2018		i i		EHS	. Commonitor					
Britished.	osed/Vacated Di							Street A		COURT SUIT				
Abatemen	t Performed Out	side of Norn	nal Facili	ty Hour	s				ate, Zip Code	COURT SUIT	EE			
Scope of Work							_		LETON NJ					
≥3 sf or ≥3		гфріў)	×	Renova	ation									
× ≥160 sf or	≥260 If			Demoli	tion			×	Wini-Enclosure	ent with Negative e	Pressu	ıre		
								Ы	Glovebag Pro- Non-Exempte	cedure d (*) and Non-Fria	able Pro	ocedu	re	
	Location of		100	s Locat Norma								Abat	emen	t
Asbestos-Co	ontaining Materia	al (ACM)	Us	ed Sole	ly by	Asbe	stos Conta	cription of aining Ma	terial (ACM)	Amount	-	13	ype	
10	In Facility		Cus	todial 8	Staff?	(i.e	. thermal surfac	systems i	nsulation,	(Specify SF or LF)	Rer	Re	Enca	Enc
	(13)		T		other m	iscellane	ous)	Of Of El)	Remova	Repair	Encapsulate	Enclosure		
Door	at Front of Blo	No	N/A		-	0 "					te	Ф		
		Х			Door	Caulkir	ng	25LF	х					
											-			
Name of Registe				N.	JDEP W	aste	Cubic Y		Name of F	Registered Landfil				
Service Trans	port Group In	ic			auler ID 1990	NO.	of Wast	e	40 March 10 M	Landfill				
City, State 58 Pyles Lane	New Castle	DE 19720)				Disposa	al Date	City, State					\dashv
Completed by			Title		-		Sig	natúre	vvaynes	burg, OH	ate			
Christine Del \	/ISCIO		Asst A	Admir	strator		11	Ma	to A	15	-27-20)18		

10 6779905646		NOT	HICATI	State of I ON OF AS nt to NJA	SBESTOS	ARATE	EMENT 0)	Comments of)_E	C E	3]	$\mathbb{W}_{\underline{}}$	E
Date of Notification (1) 04/25/2018			Name	of Buildin	ng Owner	Operato	r (2)		To A	PR 3	n :	กาล	
Agencies Notified Type Notification			Street	Address				-	1	1511 6		-010	1
EPA X Initial				Billingsp					ASSE	19 P		TRO	
DEP Amended Amendment	#			state, Zip sboro N		3		parakter és	and supplies to the first of the Pines.		ADTAI TOTAL		
DOH Emergency justification)	(includir	ng		of Contac				1 7.	Jank				
DCA Cancellation			1 22 2	Jarecha					elephone N 56-224-4				
Name of Facility Where Abatement is Takin	a Dlass	(2)	FAC	CILITY IN	FORMAT	TION							
Paulsboro Refining Company	y Place	(3)					Type of Facility	7000		-			
Street Address 800 Billingsport Rd							School (K. Subchapte X. Other (i.e.	er 8 (Oth	ner than K	-12)	ildinas	hon	nac
City (5)							etc.)						165,
Paulsboro							Square Feet NA	# C	of Floors		Bldg. NA	Age	
County (6) Gloucester			County (STATE	Code (7)	Y)		Current Use (Po	rior if be	ing demol				
Name of Monitoring Firm Hired by Building of Total Environmental Solutions	Owner (8	B)	ASC NA	M No.		Name	of Abatement Co	ontractor	r (9)				
Street Address 1005 St Georges Lane							Address	VICES I	LC				
City, State, Zip Code Landenburg, Pa 19350							ate, Zip Code	Calcarter			<u> </u>		
Project Manager for Monitoring Firm			Telepho	ne No			lesboro, NJ 0	8085					
Ed Igelesias Start Date (10)	C-1-1		302-3	44-4217		856-4	one No. 67-2850		License 01009	No.			
05/09/2018	05/25	/2018		Date (11))	20 WHO RECORDS - 1700	of OSHA Monitor Environment		ıtions			e e e e e e e e e e e e e e e e e e e	
Occupancy Status During Abatement (Check			tare cons				Address St Georges L	ana					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Regulated Area will b	al Facilit	V Hour	nent s			City, St	ate, Zip Code						
Scope of Work (Check All That Apply)						Lande	enburg, PA 19	9350					
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	-	Renova Demoli				×	Full Containm Mini-Enclosun Glovebag Pro Non-Exempte	e cedure				•	
		s Locat						- () () ()	110111110	1	Abate		t
Location of Asbestos-Containing Material (ACM)		Normal			Des	cription o	of			_	Ty	ре	
TO BE ABATED In Facility (13)	Ma Cus	aintena stodial 3 (12)	nce/ Staff?	(i.e.	thermal: surfac	aining Ma systems bing, VAT niscellane		(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes N						13			a	-	late	ıre
Tank 2685 - EOM Unit		×		Th	ermal F	Pipe Ins	sulation	90	0 LF	х			
New (D.)										-			
Name of Registered Waste Hauler		1.00-000	JDEP W auler ID		Cubic Y		Name of I						
Waste Management Inc.		1000000	7273		6		Glouces	ster Co	ounty La	ndfill			
City, State South Harrison NJ				Disposa Variou		City, State South F		n, NJ					
Completed by Charles J Perri	Title Proje	ct Ma	nager		Sig	gnature	2		Da	ate 4/25/2	018		

Date of Notification (1)			NOT	FICATION Pursuan	State of New ON OP ASBES TO NVAC	Jersey TOS AB 50 and 12	EMENT			E	(C)		LWPr
4/210/18 Agencias N. 811		110,375		Name	of Building On	unoriO-				A	PR-	3.0	2018
EPA II Initia	1				eton Unive Address cMillan Bui		Istees of F	Princeton	-	-	ATO	SOC	งเรล o L
X DOU Emer	ndment #	cludin	ng	City, Sta Prince	ate, Zip Code ton, NJ 08				والمراجعين والمحتمين والمحتمين	NEW PERSON IN THE PARTY NAMED IN	ŲĢ	546II	VG
L DCA Dustille	ellation)			Bob O					Telephi 609-2	one Nu	umbei	1	
Name of Facility Where Abatement is Residence Street Address	Taking I	Place	(3)	TAGIL	ITY INFORM	TATION	Type of F	acility (4)					
City (5) Princton							Subo	ool (K-12) chapter 8 (i r (i.e. priva	Other thate	an K-1.	2) ial bui	ldings	, homes
County (6) Mercer			C	ounty Co	ode (7)		Square Fe 3,200	eet 3	# of Floo }	ors	18	Bldg. A	
Name of Monitoring Firm Hired by Build TTI Environmental, Inc.	ling Own	er (8)	(8	ASCM N	EONLY)		Current Us Unoccup	neu Resi	dence	molish	ed)		
1253 N. Church Street						1 0005	of Abatemer ervices, LI Address	nt Contract LC	or (9)				
City, State, Zip Code Moorestown, NJ						303B	National I ate, Zip Cod					Por const	
Project Manager for Monitoring Firm Mike Keehn			Tei	ephone N	Vo.	Exton	, PA 1934	e 41			V		
Start Date (10) 4/30/18	Sche	duled	Comple	6-840-8 tion Date	(11)	484-8	72-8884 OSHA Mon	ilas	Licens 0116		9		
Occupancy Status During Abatement (Ch Facility Closed/Vacated During Entir Charge of No.				14/12		Street Ad	fdress	and the second					
Other - Describe: hours - 8 am - 4:30	mal Fac pm - Ar	of Aba ility Ho ea isola	atement ours ated and	l regulate	.	200 US	Route 13 e, Zip Code	30 North					
23 sf or ≥3 if				90.010.		Cinnan	ninson, N.	08077					
≥160 sf or ≥260 lf		Reno	ovation olition				Full Contain Mini-Enclose Glovebag Pr	Ocedura					
Location of		ls Loca Norm	ation				Non-Exempt	ed (*) and	Non-Fria	able Pr			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility	M M	ed So ainten	lely by	Ast	estos Contain	ription of ning Mater	ial (ACM)	Am	ount	_	Aba	temer Type	nt
(13)	Yes	(12)		1 "	surfacin	stems insured of the state of t	ulation,		ecify	Removal	Repair	Encapsulate	Enclosure
Bath room 207A	168	No X	N/A	-	1:					Val	1	ulate	sure
the test Commence to the	1		Lino	leum		90 8	SF	X			\vdash		
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e of Registered Waste Hauler													
te Management of New Jersev		N. Ha	JDEP Wauler ID	laste No.	Cubic Yard of Waste	ds	Name of F	Registered	l andfill				
State on, NJ					5 Disposal D	ate	GROWS	6	Landilli				
leted by Vhite	Title Project	F N A	2018800		TBD Signat		City, State Morrisvill	le, PA					
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Ch Jal	K)	THE PERSON NAMED IN COLUMN TO PE	M)	FIGATIC	State of N ON OF AS nt to NJA	BESTOS	ABATE	EMEN 20)	NT			C E		W.	EF
Date of Notification (1) 4/26/18					of Buildin il North			or (2)			Α.	PR (3 0	2018	111
Agencies Notified	Type Notification				Address	Amend	<u>а</u>				, A	111 4) ()	2010	1
□ EPA	× Initial				5th Aver	nue					i, Anto-	- 14 2	CA:	THO	1 &
DEP × DOL	Amended	,			tate, Zip (50- trem-150	S SUNTY AND SUNT			- Annual Administration of the Control of the Contr	- CK
_	Amendmen Emergency	(including	g		York, N		17								
DOH DCA	justification) Cancellation				of Contac				300		lephone				
					CILITY IN		ION			85	6-722	-6455)		
Name of Facility Where A Former Lukoil Station	Abatement is Takir	g Place	(3)			Orthiza	IOIN	Тур	pe of Facility	(4)					
Street Address						1/4			School (K	-12)					
1349 Route 9								×	Subchapte Other (i.e.	er 8 (Oth	er than	K-12)	huild	inac h	
City (5)									etc.)			erciai			
Toms River								100 000	uare Feet 000	# 0	f Floors		35 35	dg. Age	9
County (6)					Code (7)				rrent Use (Pi		ing dem	olished	1		
Ocean Name of Monitoring Firm	Ulead by D. II.II				USE ONL	y)		Ga	as Station	Kiosk			6		
The Vertex Compar	nies by Building	Owner (8)	ASC	M No.				batement Co ces, LLC	ntractor	(9)				
Street Address 700 Turner Way, Su	uite 105						Street 303 I	Contraction of	ress ational Ro	ad					
City, State, Zip Code Aston, PA 19014						City, S	State,	Zip Code A 19341							
Project Manager for Moni	toring Firm		Telepho	ne No.		Teleph				Licens	a Na				
Joseph Anello Start Date (10)		ad Car		58-8902		484-8	872-	-8884		0116					
5/7/18		5/11/1	8	npietion	Date (11)		Name EMS		SHA Monitor						
Occupancy Status During × Facility Closed/Vaca							Street 200 F		ess te 130						
Abatement Performe Other – Describe:	ed Outside of Norm	al Facility	Abaten Hours	nent S					Zip Code				_		
	T								nson, NJ						
Scope of Work (Check All ≥3 sf or ≥3 lf	I I hat Apply)														
≥3 st or ≥3 if ≥160 sf or ≥260 if			Renova Demolit					FI	ull Containm lini-Enclosur	ent with	Negativ	e Pres	sure		
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(13)				Γ -		other m	niscellan	eous))		1/5	2	levio	Repair	Enclosure
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Cashier Kios	Cashier Kiosk ext.					Faux br	ick on	met	al	60	0 SF	X			
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Name of Registered Waste	e Hauler		I NI	JDEP W	asts	CL!	/a								
Waste Management			4	auler ID	E117.70%	of Was			Name of GROW	3000		till			
City, State						3 Dispos	al Dat-				41111				
Trenton, NJ						Dispos TBD	al Date		City, State Morrisvi						
Completed by		Title	10	91 <i>6</i> 702		Si	gnature		1			Date			
Jack Bally		oject	Manag	ger		ack	1	Sally	(D)	91 9	4/26/	18			