E NB. 18/12/E

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Pkinl Form

## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:80 and 12:120)

Date of Notification (1) 2/2 (720 (9		Name of Building Owner/Operator (2) Peter Briody	Operator (2)		
Agandes Moffied	Type Notification	Sucel Address 144 Bergen Avenue	0		
20 CE	Amended Amendment#	Chy. Slein, Zp Code North Arlington, NJ			
₩ 20 20 20 20 20 20 20 20 20 20 20 20 20	(Astification)  Carocalation	Name of Cortact Pefer Briody		Telephone Nurther	
		FACILITY INFORMATION	TION	200	
Name of Facility Whee Private	Name of Facility Where Abauamont is Telding Place (3) Private		Type of Facilly (4)		
Street Address 144 Bergen Avenue	we		Subdrapler 8 (Co. prival	Subchapter (§ Other Fram K-(2) Subchapter (§ Other Fram R-(2) Other (Lee, private & commercial buildings, homes,	uldhgs, homes,
Giy (5) North Arlington			Square Foel	# of Floors	Bidg. Age
County (8) Bergen		County Code (7) (STATE USE ONLY)	Oursei Use (Prio	Ouren! Use (Prior II being demokshed)	
Name of Mankoring Fil	Name of Montoring Firm Hired by Building Owner (B)	ASCMINO.	Nerne of Abatement Cratractor (9)	Today All	

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2019

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1465 Route 23 South, #111

Wayne, NJ 07470

Cily. State, Zip Code

Namo of OSHA Moritor EnviroVision Consultants

Scheduled Completion Date (11)

2723/2019

973-750-0752

Tokephone No.

Telephone No.

Project Managor for Monitoring Firm

Start Date (10)

2722/2019

City, State, Zip Code

Sired Address

Sireel Address 20-21 Wagaraw Road

Fair Lawn, NJ 07410

City, State, Zp Code

Faciliy Gozed/Natoled During Enive Period of Abatement Abailement Performed Outside of Normet Facility Hours Other — Describe:

Stope of Work (Check All That Apply)

23 stor 23 II

Occupancy Status During Abatement (Check Only One)

G S C Services Corp

\*Do not use this form for sabestos floorsure exempled adiMites.

2/21/2019

Jullytoym, PA

Cily, State

Obposal Date Cubic Yards of Waste

Dwner

Completed by Daniela Anfic

Wayne, NJ Oly, State

ASB-41 (R-05-08)

TRRF

NUDEP Waste Hauler ID No. 0036309

Name of Registered Landill

P. 2 7271 .ON

MMA 7

Name of Registered Waste Houler

G S C Services Corp

3:18PM 5016

Enclosure

Repair

Amount (Specify SF or LF)

Description of Ashestox Containing Malerial (ACM) (i.e. thormal systems Insulation, surfacing, VAT, or other miscolarenous)

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Location of
Asbestos-Containing Material (ACM)
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In Faciliy
(13)

20LF

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Yes Ma

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Full Containment with Negative Pressure
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Clovekary Procedure
Non-Exempted (\*) and Non-Frinble Procedure

Renavation

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Date of Notification (1)	23 /	201	9				g Owner/Operator ( lechek	2)	ASSESTON	CC. NSING	OL8	-
	Type Notifica	ation			Street	Address			T	/ Surve	and the second	
Ď DOLWD Ď DOLWD	Amended Amendme	ent#				State, Zip o	Code City, NJ 07302	) [ ]				
(NJAC 5:23-8)		on)	cluding	J	Name	of Contac		ť	Telephone N	umber		
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Name of Facility Where At Private  Street Address	patement is T	Taking	Place	(3)			-	Type of Facilit  School (K- Subchapte Other (i.e., homes, etc.	12) r 8 (Other than K private and com	-12) mercial bu	ildings	
City (5) Jersey City, N.	J 07302							Square Feet	# of Floors	Blo	lg. Age	
County (6) Hudson					Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (I	Prior if being dem	nolished)	7-3-2	
Name of Monitoring Firm F	lired by Build	ding O	wner (	(8)	ASCM	No.	Name of Abateme					
Street Address					-3-2	1/4	Street Address 1465 Rout	e 23 South	n, #111			
City, State, Zip Code							City, State, Zip Co Wayne, No					
Project Manager for Monito	oring Firm			Tele	phone	No.	Telephone No. 973-750-0	752	License No. 01253			
Start Date (10) 01 / 24 /		Schedi 01		omple 25	tion Da		Name of OSHA M EnviroVisio		ants			
Occupancy Status During	The second secon						Street Address					-
☐ Facility Closed/Vacated ☐ Abatement Performed C Time of Abatement:												-
Scope of Work (Check all t	hat apply)							<u>N</u>				-
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				Locat							atemer	ype
Location o Asbestos-Containing M TO BE ABAT IN Facility (13)	aterial (ACM ED	)	Use Mai Cust	d Sole intena odial (12)	ly by nce/ Staff?		Description of stos Containing Master, thermal systems surfacing, VAT, other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Enclosure
Second Floor I	Redroom		Yes	No	N/A		VAT		130sf	凶		:
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Name of Registered Waste G S C Services C					JDEP V auler IE 0036		Cubic Yards of Waste	Name of Reg	istered Landfill			
City, State Wayne, NJ					5500		Disposal Date	ity, State Tullytow	ŋ, PA			
Completed By (Print or Typ	e)	Title					Signature	/ / (		Date		
Daniela Antic		Ov	vner					//		1/23/2	2019	
ASB-41 JAN 13		* D	o not	use th	is form	for asbest	to lieensure exemp	ted activities.				

JAN 13

.:05 PM FROM: Staples

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Date of Notification (1) 3/6/2019				Nam	e of Buildi	ng Owne	r/Operato	or (2)			J .M	2. 17	2014	1	1
	Type Notification				nielle Be	1888				ASBE	570S	CON	· PIDS	1.	-
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Name of Facility Where Abo	atement is Takir	ng Place	(3)	FA	CILITY IN	FORMA	TION	Type of I	Sacilib. (4						
Private															
Street Address								III Sub	ool (K-12 chapter	Other	than K-	12)			
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City (5)								Square F		# of F	aars	T	Bldg.	Age	
County (6)				Count	y Code (7										
Passaic					E USE ONL			Current L	lse (Prior	r If being	demolis	hed)	27/4/2		
Name of Monitoring Firm Hi	red by Building	Owner (	B)	ASC	M No.		Name	of Abatem	ent Cont	ractor (9	1				_
								C Service			,				
Street Address								Address							
City, State, Zip Code						-7/1		Route 2 tate, Zip C		h, #11	1				
								ne, NJ 0							
Project Manager for Monitor	ing Firm			Teleph	one No.		1	one No.		TL	cense N	io.	W		_
Stad Data (46)		-					973-7	750-075	2	100.00	1253	•			
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			Locat		1									ement	
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In Facility (13)		J	(12)			surfac	ing, VAT,	, or		SFor		Remova	Repair	Encapsulate	Enclosure
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G S C Services Corp			1.0	03630		or was	le	TR	RF						
City, State		7		-5		Disposa	al Date		State					-	-
Wayne, NJ Completed by							1	Tul	lytown,	PA					
Completed by Daniela Antic		Title Owne	er			Si	gnature	11		_	Date				
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ASB-41 (R-06-08)				68		(/	Do not u	ise this for	m for ast	estos ilo	ensure	exem	oted a	ctivitie	es.

TO: +16096330664

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Date of No. 4/26/19	tification (1)					of Building continent			(2) Co, LLC	m	APR	3 D .	2010	
Agencies N	lotified	Type Notification  Initial				Address ox 2400,	MD 46		e de la companya de l		ALL	JV	2019	
EPA DEP DOL		Amended Amendment		_	City, S Tulsa	ate, Zip C OK 741	ode 02			A	Shasio Lici	ENSIN		.720-20-2
DOH DCA		Emergency justification)  Cancellation	AMERICA DAN MANAGARIA		Name o	of Contact					ephone No 8-573-20			-
Name of E					FAC	ILITY INF	ORMATI	ON						-
Williams	Transco S	Abatement is Takin	g Place (	3)					Type of Facility	(4)				
Street Addr		tation 240							School (K			4.63		
	rson Plank	Rd							Subchapte Other (i.e.	private	er than K-	12) cial buile	dings, t	nes.
City (5)									etc.)					
Carlstadt	, NJ								Square Feet 0	0	f Floors	0	ildg. Ag	
Bergen	14					Code (7) USE ONLY	n		Current Use (Pr LNG Tank Fa	ior if bei irm	ng demolis	shed)		
Name of Mo	onitoring Firm	Hired by Building	Owner (8	)	ASC	M No.		100	of Abatement Co anced Specia		27 M	rs, LL	С	
Street Addr	ess								Address Main Street	Exten	sion. Su	ite 10	)	
City, State,	Zip Code							City, S	tate, Zip Code	a - v - Seculia	,			-
Project Mar	nager for Mon	itoring Firm			Telepho	ne No		250	eville, NJ 08	5/2	1:			
•					releptic	ne ivo.			525-0100		License 1 00750	NO.		
Start Date ( 5/13/19	10)		Schedu 5/15/19		npletion	Date (11)		Name	of OSHA Monitor		00.00			
The second secon	Status During	Abatement (Chec	k Only O	ne)						Street Ad	ddress			-
☐ Abater	ment Perform	ated During Entire F ed Outside of Norm	al Facilit	Abatem y Hours	nent				oad St tate, Zip Code					
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	Location			Normall	•		Des	cription	of				Тур	
Asbesto	s-Containing TO BE ABA In Facili (13)	ed Solel intenar todial S (12)	nce/		thermal surfac			(S	mount pecify or LF)	Removal	Repair	Enclosure		
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Name of Re Newark Ca	gistered Was rting	Ha	JDEP Wauler ID		Cubic Y of Was		Name of Waste N		red Landfil ment			1		
City, State 609 N Unio	on Ave, Hill	side, NJ 07205					Disposi 5/15/1		City, Star Morrisy					
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Michael Mi	gliore		1.554.40	count	Manag	er	SI	gnature	he Meil	/_ /n L		ate 26/19		

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7 Date of Notification (1) Name of Building Owner / Operator (2) 19 HACKENSACK UNIVERSITY MEDICAL CENTER 04 29 Street Address Type of Notification Agencies Notified 30 PROSPECT AVENUE 1 **EPA** Initial City, State, Zip Code Amended DEP HACKENSACK, NJ 07601 1 DOH Amendment # Name of Contact Telephone Number DOL Emergency w/ justification DONAL FERRELL 551-996-5778 Cancellation FACILITY INFORMATION LICENSING Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) HUMC MAIN BUILDING School (K-12) Street Address Subchapter 8 (Other than K-12) 30 PROSPECT AVENUE Other (I.e., private & cmmercial bldgs., homes, etc.) City (5) County (6) County Code (7) Square Feet # Of Floors **Building Age** HACKENSACK BERGEN 20,000 Current Use (Prior if being demolished) 40 + HOSPITAL Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM NO LANGAN ENGINEERING NORTHSTAR CONTRACTING GROUP, INC. Street Address Street Address 300 KIMBALL DR, 4TH FLOOR City, State, Zip Code 32 Williams Parkway PARSIPPANY, NJ 07054 City, State, Zip Code Project Mngr. For Monitoring Firm Telephone Number **BRIAN FEURY** 973-560-4857 East Hanover, NJ 07936 Sheduled Start Date (10) Sched, Completetion Date (11) Telephone Number License Number 07 19 973-884-8682 00860 Occupancy Status During Abatement (Check Only 1) Name of OSHA Monitor Facility Closed/Vacated During Entire Period of NORTHSTAR CONTRACTING GROUP, INC. П Abatement Street Address Abatement Performed Outside of Normal Facility Hours - Describe: 32 Williams Parkway 1 Other - Describe: \_\_ 7:00 AM-3:30 PM City, State, Zip Code East Hanover, NJ 07936 Scope of Work (Check All That Apply) Demolition 1 Renovation Full Containment with Negative Pressure >3sf or >3lf Mini - Enclosure ≥160 sf or ≥260 If Glovebag Procedure 1 Non-Exempted (\*) and Non-Friable Procedure Location of Is Description of Abatement Type Asbestos Containing Location Asbestos - Containing R Normally Ε Material (ACM) Amount R N TO BE ABATED Used (I.e., thermal systems (Specify M E C Solely in Facility 0 P insulation, surfacing, VAT, SF or LF) (13)by Mainor other miscellaneous) ٧ A S tenance/ A Custodial 11 R Staff (12) YES NO N/A MAIN WINDOW/LINTEL CAULK 590 LF 1 MAIN GLAZING 600 LF MAIN CAULK 165 LF MAIN ROOF FLASHING 800 SF Name of Registered Waste Hauler NJDEP Waste Cubic Name of Registered Landfill NORTHSTAR CONTRACTING GROUP, INC FAIRLESS LANDFILL Hauler ID No. Yards Of 30534 Waste City, State Disposal City. State EAST HANOVER, NJ Date MORRISVILLE, PA

Signature

Date

/19

04/4

Steven Stiles

Completed by (Print or Type)

Title

Project Manager

STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7 CR \$\mathref{k}\$ \$\m

Date of Notification	(1) 4 4	LEA	U	, , , , , ,		Building Owne			TED )	EC	E	7 1	Īŝ.	9 1
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☑ DOL	lH		gency w ellation	/ justification	DONAL F	ERRELL			551-996	ASBES!	03	JOH.	OL	&
				F	ACILITY II	NFORMATION					IOEH	A 15.15	Para-Citi.	arte believe e
Name of Facility Wh	ere Abatem	ent is	Taking F	Place (3)		Type of Facili	tv (4)						_	
HUMC LAUNDRY BU		ione is	raking i	1400 (0)		Type of Facili	Ly (+)							
						☐ Sc	hool (K	-12)						
Street Address		America Constitution						er 8 (Other t						
30 PROSPECT AVEN	NUE							, private & c	mmercial					
City (5)	County (6	1		County Code	(7)	Square Feet	igs., no	mes, etc.) # Of Floors		Duildin	- A			
HACKENSACK	BERGEN	)		County Code	(1)	10,000		# Of Floors		Building	j Age			
						Current Use (			Same and the same	ł	4	10 +		
						HOSPITAL/LA								
Name of Monitoring	Firm Hired	by Blo	ig. Own	er (8)	ASCM NO	1								
I ANDAN ENGINEE	1110													
LANGAN ENGINEER	ING					NORTHSTAR		RACTING GR	OUP, INC					
Street Address 300 KIMBALL DR, 4T	H EL OOR					Street Addres	S							
City, State, Zip Code						32 Williams Pa	arkway							
PARSIPPANY, NJ 07						City, State, Zi								
Project Mngr. For M		irm		Telephone Nu	mber	,,,								
BRIAN FEURY				973-560-4857		East Hanover,	NJ 079	36						
Sheduled Start Date	,		-	letetion Date (1	<b>1</b>	Telephone Nu	ımber		License I	Number				
	/19	-	<u>07</u> /	/ <u>31</u> /	19	070 004 0	000			0	0000			
Occupancy Status D	uring Abat	omont	(Chack )	Only 1)		973-884-86 Name of OSH		tor		U	0860		· .	_
				ire Period of		NORTHSTAR			OUP INC					
Abatemer						Street Addres								
☐ Abatemer	nt Performe	d Outs	ide of N	ormal Facility										
Hours - D						32 Williams Pa								
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Scope of Work (Cho	ck All That	Annly		- N-112 - 1-112 - 1-127 - 1-127 - 1-127 - 1-127 - 1-127 - 1-127 - 1-127 - 1-127 - 1-127 - 1-127 - 1-127 - 1-12	100000	East Hanover,	NJ 0/9	36					-	_
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	S Containing Location Normally E ABATED Used				Material			Amount	E	R	N			
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(13)				ore	otner misc	ellaneous)			V A	A	PS			
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	me of Registered Waste Hauler PRTHSTAR CONTRACTING GROUP, INC Hauler ID					FAIRLESS LA								
				30534	Yards Of Waste									
City, State					Disposal	City. State								
EAST HANOVER, NJ					Date	MORRISVILLE	, PA							
Completed by (D.)	T \			T:41-		la:					1=			
Completed by (Print	or Type)			Title		Sig	nature	0	d		Dat	е		
Steve Stiles				Project Manage	er	12	10	en Al	R	7		04/2	/19	
ASB-41		-2/8		- Just manage	Charles and the Control of the Contr			1		The same of the sa	_	0-1/2	110	

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gencies Notified Type N	Notification			eet Add		DI 1	awar Lava	APR 25	2019			/
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Z DOLLIO	ended endment#				, Zip Coo			ASSESTED TO	Jan a Rid	&		
XI DHOO	nergency (inclu	ding	1000			A 15212		Telephone Number	NG_	10-1-	7	
(NJAC 5:23-8) jus	tification)				Contact ny Porta	a		412-633-4021				
☐ Ca	ncellation		- 4: 2	2017 - IV. S. S.		ORMATION						
	ti- Takina D	lace (3)		FACIL	11 1 1141	Orthornor	Type of Facility (4	.)				
Name of Facility Where Abatem	ent is Taking P	Contar					School (K-12)					
Verizon - Pleasantville Ga	arage work	Center					Subchapter 8	(Other than K-12) vate and commercia	al buildi	s,		
Street Address							homes, etc.)	vate and commercial			*	
2546 Fire Road							Square Feet	# of Floors	Bldg.	је		
City (5)								-				
Egg Harbor Twp			10	County	Code (7)	(STATE USE ONLY)	Current Use (Price	or if being demolished	ed)			
County (6)				Journey	0000 (17)	15.11.11.5	Office					
Atlantic	1 D 1111 - Ou	mas (0)	1 4 9	CM No	,	Name of Abatem	nent Contractor (9)					
Name of Monitoring Firm Hired	by Building Ov	vner (o)	AS	CIVI INC		BRISTOL EN	NVIRONMENTAL	, INC.				
USA Environmental Man	agement					Street Address						
Street Address						1123 BEAVE	R STREET					
8436 Enterprise Ave						City, State, Zip 0				0.00		
City, State, Zip Code						BRISTOL, P				35001.0		
Philadelphia, PA 19153		- 1.	Tolonk	none No	2	Telephone No.		License No.				
Project Manager for Monitoring	j Firm			-365-5		215-788-604	10	00509				
Mark Jenkins		uled Cor				Name of OSHA						
Start Date (10)	95		3			BRISTOL E	NVIRONMENTA	L, INC.				_
Occupancy Status During Aba	tement (Check	only on	e)	Company)		Street Address	ED STREET					
☐ Facility Closed/Vacated Du	ring Entire Per	iod of A	batem	ent	-:1		ER STREET					
Abatement Performed Outs	side of Normal	Facility	Hours	- Desc	ribe	City, State, Zip BRISTOL, I	PA 19007			-		
Scope of Work (Check all that	apply)	⊠ Ren	ovatio	on n		☐ Mini-E	had Procedure	gative Pressure	re			
□ ≥100 31 01 ≥230 11		0000			V	⊠ Non-E	xempled ( ) and re	T Tubio : Terran	Aba	me	nt Ty	pe
Location of Asbestos-Containing Mate TO BE ABATED IN Facility	erial (ACM) O	Used Mai	Locati ormal d Sole ntenar odial S (12)	ly ly by nce/	Asb (i.	Description estos Containing e., thermal syster surfacing, V other miscella	Material (ACM) ns insulation, AT, or	Amount (Specify SF or LF)	Removal	Danair	Encapsulate	Enclosure
(13)		Yes	No	N/A				10.05		7		П
Shop Office, Tool Shop	and Storage		$\boxtimes$		Floor	tile and mastic		10 SF		=		
										1		
										1		
								10.00		ᆜ	Ш	
Name of Registered Waste H	Hauler		10.32	JDEP Hauler I 1870	D No.	Cubic Yards of Waste	ATLANT	gistered Landfill IC COUNTY UTIL	LITY A	TH	ORI	TY
City, State BRISTOL, PA				10/0		Disposal Date	City, State EGG HA	RBOR TWP, NJ		_		
Completed By (Print or Type Brian Scafiro	.,	tle Estima	ator			Signatur	an Scole	10/gr	Date 4-	d	2-(	9
Dilail Scallio	1					100	- 0		12 13 1			

PAID

STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT

(PURSUANT TO NJAC 8:60-7 AND 12:120-7)

				II TO NJA			THE OWNER OF TAXABLE PARTY.	1		0 ,0	
Date of Notification	1				Building Ow			n	C	EIW	Gi
04_ /24	/19			BRISTOL I Street Add	MYERS SQ	UIBB, INC.	- 1	1)1 5	, U		5
Agencies Notified	Type of No	otification		1	ress IBB DRIVE			51			111
☐ EPA	✓	Initial	500		, Zip Code		1	1111	A DD	2 = 2016	- 111
DEP		Amended	*	NEW BRU	NSWICK, N			7 17		2 5 201	
✓ DOH	_	Amendment #	The state of the s	Name of C			1	Telepho		ber	
☑ DOL		Emergency w	/ justification	PHIL DES	PIRITO			732-227 A.S	5000	DS CONTRI	- å
		Cancellation	F	ACILITY IN	IFORMATIC	)N		7 %		CINDING.	- 01
			8.0	AOILITT III	II ORMATIC	J.14					BRIC LEA
Name of Facility Wh		ent is Taking I	Place (3)		Type of Fa	cility (4)					
BRISTOL MYERS SO	UIBB					0-11/1/	40)				
Street Address					11.00-577	School (K	-12) er 8 (Other th	an K 12)	e e		
ONE SQUIBB DRIVE							, private & ci				
	1)						mes, etc.)		11		
City (5)	County (6)		County Code (	7)	Square Fe		# Of Floors	210	Buildi	ng Age	
NEW BRUNSWICK	MIDDLES	ΞX				/A	N/A		1	\$1/A	
	<u> </u>				Current Us DEMOLISH	33	being demo	isned)		N/A	
Name of Monitoring	Firm Hired	by Blda Own	er (8)	ASCM NO		ICD					
Tame or monitoring	mieu	of Diag. Owli	c. (o)	ACCIII NO							
ENVIRONMENTAL HEA	ALTH INVEST	TIGATIONS, INC.		0104	NORTHST	AR CONTI	RACTING GR	OUP, INC	0.		
Street Address					Street Add	iress					V2 VIII
555 WEST SHORE T					22 /4/:11:	o Doelesses					
City, State, Zip Code SPARTA, NJ 07871					32 Williams City, State				_		-
Project Mngr. For M	onitorina F	irm	Telephone Nu	mher	City, State	, zip code					
WILLIAM KERBEL	ormcormig r		973-729-5649		East Hano	ver, NJ 079	36				
Sheduled Start Date	(10)	Sched. Comp	letetion Date (1	1)	Telephone	Number		License	Numbe	r	
05 / 06	/19	06/	<u> </u>	19						20000	
/ Danuary Status F	/ i A b.a.t		/ / / / / / / / / / / / / / / / / / /		973-88 Name of C	4-8682	tor			00860	
Occupancy Status D Facility C		ted During Ent					RACTING GR	OUP. INC	Ο.		
Abatemer					Street Add				7.1		-
		ed Outside of N	lormal Facility			223 0					
	escribe:	7.00 *** 0.00			32 William						
Other - Do	Other - Describe: 7:00 AM-3:30 PM				City, State East Hano						
Scope of Work (Che	ck All That	Apply)			Lactriano	101, 110 010	,00				
Demolition		✓	Renovation				th Negative F	Pressure			
<ul><li>≥3sf or ≥3</li><li>≥160 sf o</li></ul>					Mini - Enc Glovebag						
<u>≥</u> 100 31 0	2200 II						nd Non-Friab	le Proced	dure		
						• 0000000000000000000000000000000000000			et 45 0 X P S S	10	
Location of		ls	7 9500	Descript				Abatem	ent Type		
Asbestos Cont	aining	Location	As	bestos - C			Amount	R	R	E N	= d
TO BE ABAT	ED	Normally Used		Material e., thermal			(Specify	M	E	C	5
in Facility		Solely			facing, VAI	Γ,	SF or LF)	0	P	A	-
(13)		by Main-			ellaneous)			V	Α	P	)
		tenance/						A	I	S	3
		Custodial Staff (12)						L	R	ľ	5
		YES NO N/A					-		+		-
EXTERIOR UNDERC	ROUND		TRANSITE DU	ICT BANK			300 LF	7			
BLDG 53/65											
1	10/		NUMBER 11	10	INI-	)	100 (1571)				
Name of Registered NORTHSTAR CONT			NJDEP Waste Hauler ID No.		Name of F		Landfill NT - FAIRLE	SS HILL	LANDE	11	
HORTING IMA CONT	I CALLING C	SINOUP INC		of Waste	WAS IE IV	MINAGEIVIE	INI - FAIRLE	OO TIILL	רייואטלו	LL	
City, State				NAME OF TAXABLE PARTY.	City. State	9					-
EAST HANOVER, N.	J			Date	MORRISV						
			-			()		1			
Completed by (Prin	or Type)		Title			Signature	1/		_	Date	
Steve Stiles			Project Manag	er		Mo	er &	les	$\mathcal{L}$	04	4/19
			. Toject Mariay	U1		-		PARK DESCRIPTION		04	7/10

1	10,	V H w	-,	St to NAT				*		L	Prir
1 CK 2020	15	月月	NOTIFIC (Pu	CAT O CE SB STO	ALAT	EMENT	× -**	Tig 6			
Date of Notification (1) 3/8/19			IN	lame of Building O	ariu 12:1	20)			E	1	NJ
				lame of Building Owne City of Vineland	r/Operat	or (2)	· · · · · · · · · · · · · · · · · · ·			_	
T	cation		S	treet Address				LIAT	1		
EPA Initial Amend	dod			340 E Wood Stree	t		** - :	NICT	-	1 2	U19 10
Amend	ment #		_   V	ity, State, Zip Code ineland, NJ 0836	3			700		2	-17
DCA Justifica	ency (incl	luding		ame of Contact			•	15			W 8
Cancel	lation		IV	latt DePalma			Teleph	one Nun	nber	-	
Name of Facility Where Abatement is	Taking Pl	ace (3)		FACILITY INFORMA	TION		000 8	09-120	)2	_	
Vacant Building #6 Street Address	•	-55 (5)				Type of F	acility (4)			-	
111 Highland Avenue						Scho	ol (K-12)				
City (5)						X Othe	hapter 8 (Other the r (i.e. private & cor	an K-12) nmercia	) I buildi		homes,
Vineland						etc.) Square Fe				0.00	
County (6)			Cor	Inty Code (7)			" 511.150		Blo	Aç	ge
Cumberland			(STA	ATE USE ONLY)		Current Us	e (Prior if being de	molishe	d)	-	
Name of Monitoring Firm Hired by Buildi	ing Owne	r (8)	A	SCM No.	Name	of Ahateman	nt Contractor (9)				
Street Address				a.s	Ricco	Constru	tion Corp				
					Street /	Address				_	
City, State, Zip Code					282 (	reek Roa	ıd				
Project Manager for Manager											
Project Manager for Monitoring Firm			Telep	phone No.							
Start Date (10)	Scher	dulad O	Jan-1 11			11	1 1				
3/18/19	1//1//	I U	ompletio	on Date (11)	(	100	I won!				-
Occupancy Status During Abatement (Ch	eck Only	One)			C	1			1		
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	e Period o	of Abate	ement				210	0.0	+	-	
Other - Describe:	mai Façi	lity Hou	irs	_		V	3-100	IN V	J		
cope of Work (Check All That Apply)						1 0	11				
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renov	ation								$\vdash$
1 2100 31 01 2200 IT	×	Demol	ition								
Location of		ls Loca Norma									H
Asbestos-Containing Material (ACM)	Us	ed Sole	elv by	Desi							
TO BE ABATED In Facility	Cus	aintena stodial	nce/ Staff?	Asbestos Conta (i.e. thermal sys	stems ins	Ulation	1 (0				
(13)		(12)		surfacing other misc	. VAT o	r	(Specify SF or LF)	Rem	Re	ncar	Encl
	Yes	No	N/A	outer misc	ellaneou	s)		Removal	Repair	ncapsulate	Enclosure
Exterior .			X	Ele-	hin -					D D	0
C.4. ·			X	Flas			1200 SF	X			
Exterior				Roofing			5000 SF	X			
Exterior Exterior			X			7	06015			-	
Exterior			X	Window			960 LF	X			2
Exterior Interior ne of Registered Waste Hauler		l N.	X IDEP W	Drywall & Join	t Comp	ound	12,000 SF	x		-	
Exterior Interior e of Registered Waste Hauler CO Construction Corp		Ha	X IDEP W	Drywall & Join aste Cubic Yard of Waste	t Comp	Name of	12,000 SF Registered Landf	x			
Exterior Interior se of Registered Waste Hauler co Construction Corp State		Ha	X IDEP W	Drywall & Join aste Cubic Yard No. of Waste TBD	it Comp	Name of Cumbe	12,000 SF Registered Landferland County	x			
Exterior		Ha	X IDEP W	Drywall & Join aste Cubic Yard of Waste	it Comp	Name of	12,000 SF Registered Landferland County	x			

ate of Notification (1) /17/19 gencies Notified Type Notification	NO	(Purs	TION OF uant to I		OS ABAT and 12:1	20)		SCALARY .		APR 2	5 2	019		
		1000		State St				17.5-4	7	LICEN	ISING	- 101	2	
EPA Initial Amended		10 1000000		Zip Code										
DOL Amendment # Emergency (in	cluding		renton,						T-1	haan Numi	205			
DOH justification)	cidaling	20,555	me of C							hone Numl -433-874				
DCA Cancellation		R	egina l	Y INFOR	MATION				000	100 01 1		_		-
ame of Facility Where Abatement is Taking	Place (3)		FACILI	TINFOR	WATION	T	Type of	Facility (4)						
ormer residence, BLUE ACRES DE	MOLITI	ON					☐ Sc	chool (K-12)						
treet Address								bchapter 8 her (i.e. pri	(Other	than K-12)	l huildi	nas.	omes	
86 Reid St.							et	c.)						,
ity (5)							Square		The state of the s	Floors	50 50	lg. A	3	
South River, NJ							2,000		2 1		10000	, ,		
county (6)			ounty Co	de (7) E ONLY)				t Use (Prior doned, B			Ju)			ŀ
Middlesex	(0)		ASCM N	lo.	Na	me		ement Contr					-	
lame of Monitoring Firm Hired by Building On/a	wner (8)	- 1	ASCIVIT	NO.	1000000			Group, Inc		17/6				
treet Address							Address	STATE OF STA						
Meet Address					13	35	Kinnel	on Rd.						
City, State, Zip Code					100		State, Zip						NELENA MARIENTA MARIE	
								NJ 07405					_	
Project Manager for Monitoring Firm		T	elephone	e No.	100000		hone No			License No	Э.			
							-218-08			01228			0	-
Start Date (10)	Schedule	d Comp	letion D	ate (11)			331 F.E.	A Monitor Group, Inc						
5/23/19	6/5/19	. \				25.50	t Address		,.		-1	-	-	
Occupancy Status During Abatement (Check								on Rd. St	uite 1	02				
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	eriod of A al Facility	bateme Hours	ent		77		State, Zij							
Other – Describe:					- K	(ini	nelon,	NJ 07405						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emolitic					Min	Containme i-Enclosure vebag Proc n-Exempted	edure	8. <del>5</del> 2			1	- 1
	le.	Locatio	on I									Aba	ment be	
Location of	N	lormall	y		Descri				0.00	To the	-	$\Box$	_	
Asbestos-Containing Material (ACM)		d Solel intenan			os Containi hermal sys					mount Specify	R	77	Encapsulate	En
TO BE ABATED In Facility	Cust	odial S (12)	taff?		surfacing	g, V	AT, or		SI	For LF)	Remova	Repair	apsu	Enclosure
(13)		(12)			other misc	cella	aneous)				va	=	ılate	Jre
	Yes	No	N/A				e .						200	
Interior			х	F	PLASTE	R١	WALLS	3	3,	000 sf	х			
Basement		х	The	ermal Pip	ре	insulat	ion	ė	100 If	х		_		
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic Ya	ards		Name of	Regist	ered Landfi	11			
Yannuzzi Group, Inc		H	auler ID	0.0000000000000000000000000000000000000	of Waste			Grows	Fairle	ess				
Kodanicoso Barro II		1	7467		80 Disposal	Da	ite	City, Stat	e			_		
City, State Kinnelon, NJ					6/6/19	20		Morrisv		PA				
Completed by	Title				Sign	nati	ure	0.1	٨		ate		-	
Completed of	1,000,000	ם אם	roject [	Designer	Second Second	1	1 0	( Yhu)	V	4	1/17/1	9		

Date of Notification (1)	3 PA	T NOTI	Pursi	TION OF uant to N me of Bui	f New Jerse ASBESTOS JAC 8:60 ar	ABATEM d 12:120)	)	1111	APR	2 5	2019
4/18/19			1	eet Addre	Transport of the second			-		- 24 - 4 - 4	
Agencies Notified	Type Notification		40	1 Sant	a Monica	a Blvd.	Suite 70	00	ASSES: L	ZEHŞIA	1G
Z EPA J DEP	Initial Amended		Cit	v State.	Zip Code				The state of the s		-
\range Dor	Amendment #_ Emergency (incl	uding			onica CA	9040	<u> </u>		Telephone Num	ber	
✓ DOH	justification)	dung		me of Co	<sub>ntact</sub> Ghafari				424-229-33		
DCA	Cancellation				Y INFORMA	TION		-1112 743			
Name of Facility Where A	batement is Taking P	lace (3)					Type of Fa				
Former Sears Sto	ore					11.50	= -	ol (K-12 hapter 8	10thor than K-12	) I buildin	as hon
Street Address	Contor Road						Other etc.)	r (i.e. pri	vate & commercia		
1750 Deptford (	Jenle Road						Square Fe		# of Floors	30-	j. Age F
City (5) Deptford Townsh	ip						150000	se (Prin	2 r if being demolish		Augusta III
County (6)			C	ounty Co	de (7) EONLY)		vacant	56 (1 110)	II Doing To		
5.	Lised by Building Ow	ner (8)		ASCM N	0	Name	of Ahateme	ent Conf	ractor (9)	dina li	20
Name of Monitoring Firm Tabbara Corpora	ation	inci (o)				Ass	ociated S	Speci	ality Contrac	ting ii	IC .
Street Address						Stree 98 L	A Adrage		5		
317 Morgan Hill	Street					City,	./1	1.	· M .		
City, State, Zip Code	2065					Glei	1 1	40	: Mia		
Simi Valley CA 9	nitoring Firm			elephone		Tele		11.			
Mike Tabbarra		2000	2000		4-3388	610 Nam					
Start Date (10)		Scheduled		pletion Da	ate (11)	Syn			$\wedge$	1 1	1
5/7/19 Occupancy Status Duri						Stre	el Loc	) 4	7.V 01	di	tini
J = 01 10/0	ested During Entire Pr	eriod of Ab	atem	ient		220		✓ ¹	or ac	700	1101
Abatement Perform	med Outside of Norma	al Facility h	Hours			City		Λ	10006		
Other - Describe:							_ _	$\alpha$	1 Las		
Scope of Work (Check 23 sf or ≥3 If ≥160 sf or ≥260 If	All: Hat Apply/		enova								
Locati Asbestos-Containin <u>TO BE A</u> In Fa (1	ng Material (ACM) ABATED	Used Mai	ntena	lly ely by ince/ Staff?	(i.e. the	ermal systemations.	g Matenai (* ems insulatio	on,	(Specify SF or LF)	Removal	Repair
The state of the s		-	140	1,447		roof	ing		8400 sf	х	
,	- A [] +	X		-		Va			400sf	x	
Auto Cer						Duct Ins	sulation		90sf	х	
Auto cente	r sales area	X							23500sf	x	
Auto cente Main E	r sales area Building	x		-		floor n	liasuc			-	
Auto cente Main E Main Buildin	r sales area Building g 1st and 2nd			NJDEP V	1000	floor n	ds	Name	of Registered Land	dfill	
Auto cente  Main E  Main Buildin  Name of Registered V	r sales area Building g 1st and 2nd Waste Hauler	×		NJDEP V Hauler IC	No.	approximate the second	ds	Tulley	town Resource	dfill es Rec	overy
Auto cente  Main E  Main Buildin  Name of Registered V  Mercer Gro	r sales area Building g 1st and 2nd Waste Hauler OUP Interna	× × ationa	al	Hauler IC	No.	Cubic Yar of Waste 200 Disposal I	ds Date	Tulley City, S	town Resource	dfill es Rec	overy
Auto cente  Main E  Main Buildin  Name of Registered V  Mercer Gro	r sales area Building g 1st and 2nd Waste Hauler	× × ationa	al	Hauler IC	No.	Cubic Yar of Waste 200 Disposal I as nee	ds Date	Tulley City, S	town Resource	es Reconstant	



Date of Notification (1)		Name of	Building O	wner/	Operator	(2)						_				
4/11/2019				Davar	ne Realt	y Co	. c/o N	landel	baum & N	<i>l</i> lande	elbaur	n				
Agencies Notified Type	Notification		1	Street A			F40									
☐ EPA ☐ I	nitial				in Street	2	te 510									
Normal Paris	Amended Amendment#				te, Zip Cod Orange, I		7052									
	Emergency (ir				Contact	145 0	1002			Tole	phone	Numk	or		_	
	ustification) Cancellation				Szwed					1	3-325					
					LITY INFO	RMAT	ION			0,	0 020	001	_	_		-
Name of Facility Where Abatem	ent is Taking	Place (3	3)					Туре	of Facility (4	1)				_	·	
7 Eleven Store								<b>a</b> :	School (K-12							
Street Address									Subchapter Other (i.e. pi				huild	ina	home	20
41 Central Avenue			126						etc.)	ivale c	COMM	erciai	Dulla	ing	потпе	,5,
City (5) Jersey City								Squai	re Feet	# of	Floors		BI	dg.	ge	
County (6)				0	0! - (7)			_	:= :	<u> </u>						
Hudson					Code (7) USE ONLY)			Curre	nt Use (Prio	r if bei	ng dem	olishe	d)			
Name of Monitoring Firm Hired	by Building O	wner (8)		ASCN	1 No		Name	of Aba	tement Con	tractor	(0)					
Traine or Monitoring 1 min 1 mod	by building o	writer (o)		AGGIV	i ivo.		100000		rvices Con		(9)					
Street Address								Addres		Α.					1	
							146	5 Rou	te 23 Sou	th, #1	11					
City, State, Zip Code							City, S	State, Z	ip Code					_	-	
							Way	ne, N	J 07470							
Project Manager for Monitoring	Firm			Telepho	ne No.		100000000000000000000000000000000000000	none No			Licens					
21.15.1 (10)								-750-0	2000		0125	3				
Start Date (10) 4/21/2019		5/6/20		ipletion l	Date (11)				A Monitor	.14 4 -						
Occupancy Status During Abate	ment (Check		0.000				to the same of the same of	Addres	ion Consu	litants	· · · · · · · · · · · · · · · · · · ·			_		
	- 5						ss garaw Ro	hed								
Facility Closed/Vacated Du Abatement Performed Out	Facility Closed/Vacated During Entire Period of Ab Abatement Performed Outside of Normal Facility I								ip Code	au						
Other – Describe:									, NJ 0741	0						
Scope of Work (Check All That	Apply)														1	_
23 sf or ≥3 lf		7 F	Renova	tion				Ful	l Containme	nt with	Negati	ve Pre	essur	е		
≥160 sf or ≥260 lf			Demoliti	on			r		ni-Enclosure ovebag Proc							
							17		n-Exempted	(*) and	l Non-F	riable	Proc	ed	3	
		Is	Locati	on										Aba	ment	
Location of			Normall d Sole			D	escription	n of				-	_	_	ре	
Asbestos-Containing Materi TO BE ABATED	al (ACM)	100000000000000000000000000000000000000	intenar				ntaining N al system				mount				四	т
In Facility		Cus	todial S (12)	itaff?		surf	acing, VA	T, or	ation,		pecify or LF)		Remova	Repair	cap	nclo
(13)			(12)		1	other	miscella	neous)					oval	air	Encapsulate	Enclosure
		Yes	No	N/A									00.000		6	
Roof				Х		tra	nsite p	ipe		;	3LF		Х			
Roof	Roof						roof			12	00SF		Х			
Roof		Х		roof	top flas	hina		4(	OOSF		Х					
1,001						. 501		9					/	-	-	
Name of Registered Waste Hauler NJD					/aste	Cuhi	c Yards		Name of F	Registe	red I ar	ndfill		_		
	S C Services Corn Hauler ID					Cubic Yards Name of Registered Landfill of Waste										
TO SEE STATE OF THE PROPERTY O	. 0030309								TRRF					_		
City, State Wayne, NJ						Dispo	osal Date	•	City, State Tullytov		Α					
Completed by		Title					Signature	9	, any to	, . /		Date	•	_	-	
Daniela Antic		Own	er				- 11 <del>- 1</del> 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						1/20	15		

1751 5 Wayne, NJ Completed by City, State G S C Services Corp Name of Registered Waste Hauter Scope of Work (Check All That Apply) Occupancy Status During Abatement (Check Only One) Siari Dale (10) Name of Facility Whore Abstorners is Tolding Place (3) XIX 2/18/2019 Project Manager for Munitaring Firm City, State, Zip Code Sireel Address Name of Manitering Firm Hired by Building Owner (8) County (6] Chy (5) Commercial/Industrial Complex Agencies Nollind Middlesex East Brunswick 110 Tices Lane Asbestos Contairing Material (ACM)

10 BE ABATEO
In Facility
(13) ela Antic 23 51 or 23 H 2180 51 or 2280 H Other - Describe: Fediliy Glosed/vacated During Entite Period of Abatement Abatement Performed Outside of Normal Facility Hours DEP A Mezzanine Location of Unit 4 114C Type Notification Emergency (including Justification)
Cancellation Amendment # Owner 4/1/2019 Scheduled Completion Date (11) Yes XI Is Location
Normaly
Used Solely by
Main(enanos)
Curalodial Staff? Renovation Demothson No (2) NJDEP Waste Haufer ID No. 0036309 N ΤοΙορήσιο Νο (STATE USE ONLY) Short Hills, NJ 07078 × × × Name of Confact Tices Developers, LLC Scoll Lovenihal Clly, State, Zlp Code 820 Marris Tumpike ASCMNO FACILITY INFORMATION Description of Asbestos Containing Material (ACM) (f.o. thermal systems Insulation, surfacing, VAT, or other miscelleneous) Cubic Yards of Wards Disposal Data TSI pipe TSI pipe TSI pipe Fair Lawn, NJ 07410 City, State, Zip Code 20-21 Wagaraw Road Name of OSHA Monitor 973-750-0752 Oity, Slale, Zip Code EnviroVision Consultants Harne of Abatement Contractor (9)
G S C Services Corp. Telephone No. Wayne, NJ 07470 1465 Route 23 South, #111 XXX Current Use (Prior if being demolished) XII Square Foci Type of Facility (4) Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Full Containment with Negative Pressure Mint-Enclosure School (K-12)
Subchapter 8 (Other than K-12)
Other (Le. private & commercial buildings, homes, Tullytown, PA Oly, Side Name of Registered Landill TRRF (Specity SF or LF) # of Ploors Telephorie Number 973-467-5000 X1212 4LF 4LF 2LF 01253 2/6/2019-× × ГемошеЯ Bldg. Age Abalement Acpalr Type

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Do not use this form for asbestos licensure exempted activities.

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> > Pa

State of Now Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:00 and (2:120)

Name of Building Owner/Operator (2)