					ryndrite		,						
CKILQY		NOTI	FICATIO Pursuan	State of New Je N OF ASSEST 10 NUAC 8:60	DS ABATE and 12:12	(0)	ır E) <u>E</u>	G E		\mathbb{V}		M
Date of Notification (1) 07/30/2019	30		Name	of Building Own ence Townsh	er/Operato	r (2)	baal		AUG -	2 2	019	- 11	
Agencies Notified Type Notification	n			Address	ip iviidai	e 50	chool			_		- -	
X EPA X Initial				Princeton Pi	ke			ASE	ESTOS	CON	THOL	. &	
X DEP X Initial X Amended Amendmen	nt #3			ate, Zip Code enceville, NJ	08648		Learning	Todamovacane on	LIGEN	4SING		Tr Attivition (-
Emergency justification Cancellation	(including	3	the state of the s	of Contact				Tele	ohone Nui	mher			
DCA Cancellatio			Thom	nas Eldridge				100	-671-54				
Name of Facility Where Abatement is Taki	ng Place (3)	FAC	ILITY INFORMA	ATION	Tyr	ne of Facility (4)						
Lawrence Middle School	,	5.5				TINE W	School (K-12						
Street Address 2455 Princeton Pike						×	Subchapter 8	(Other	than K-1	2)	novet-1000		
City (5)							Other (i.e. pri etc.)			ial buil	dings	hom	es,
Lawrenceville						0.000	uare Feet 4.000	# of F	loors		Bldg. A	\ge	
County (6)			County	Code (7)			rent Use (Prior	1	demo'isl				
Mercer				USE ONLY)		Mii	ddle School						
Name of Monitoring Firm Hired by Building TTI Environmental	Owner (8))	0000				catement Contr Safety L.L.C	actor (§	9)				
Street Address			0000		Street								
1253 North Church St							Lane						
City, State, Zip Code Moorestown, NJ 08057							Zip Code						
Project Manager for Monitoring Firm		-	Telepho	ine No	Linco		Park, NJ 070						
Michael R. Keehn				40-8800			-0099	18	License N 01317	0.			
Start Date (10) 07/15/2019				Date (11)			SHA Monitor			170 1700 No. 1000			
Occupancy Status During Abatement (Che	08/05/						afety LLC						
Facility Closed/Vacated During Entire			ment		Street 22 T	Principal Control							
Abatement Performed Outside of Non Other – Describe:	mal Facility	/ Hour	s		City S	tate,	Zip Code			-			
Scope of Work (Check All That Apply)					Lince	oln F	Park, NJ 070	35					
≥3 sf or ≥3 lf	IXI s	Renova	otion		E	1 -							
≥160 sf or ≥260 lf	Decisional	Demoli			X	- M	ull Containmen Imi-Enclosure		legative P	ressu	re		
						J G	lovebag Proce on-Exempted (dure *) and l	Non-Friab	le Pro	cedur	e	
		Local									Abate	ment	
Location of Asbestos-Containing Material (ACM)	Use	Norma ed Sole	ely by	Asbestos Co	Description		21 (A C NI)	4 00	ount		1.	ре	
TO BE ABATED In Facility	181 55500000000	intena todial		(i.e. therm	nal systems	s insu	lation,	(Sp	ecify	ZJ O	ZD.	Enca	Enc
(13)		(12)		othe	facing, VA r miscellan	i, or leous)	SEC	or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A							=		ate	é
Work #1B Corridor Rms 301-305		Х		Pip	e Insula	tion		30	LF	Х			
										-			
	Name of Registered Waste Hauler						Name of Re			-	1		
Service Transport Group			Hauler ID SVV2117		/aste D		GROWS	Land	511				
City, State Yardley, PA				1.0	osal Date		City State	- 52.0					
Completed by	Title			TBI	Signature		Morrisville	e, PA		to.			
Vanco Petkov	100000000000000000000000000000000000000	ect M	anager	4	Signatule	- 3"	()	1.	Da 07		2019		

CKD181		NOTIF (F	CATION	ate of Ne LOF ASB TO NUAC	ESTOS	ABATE	VEN.	ggs u day, s d) <u>, </u>	6	<u>s</u>	<u>U</u>	₩ [
Date of Notification (4) 13/	297			f Building ns Institi					Ш		AUG	- 2	? 20	019	The was said and
Agencies Notified Type Notification	9		Street A	ddress	on Hu	ıdson				ASBI	ESTO	S C	ONT	ROL	8.
X EPA X Initial Amended Amendment	ш			ate, Zip Co					MGC PORTOR OF		Lici	FAIS	ING	NO. TO SERVICE MATERIAL PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS O	The Antibody
X DOL Amendment Emergency justification)		-		en, NJ (07030				Tel	ephone	Numb	er			
DCA Justification			Kevin	200000000000000000000000000000000000000						1-655					
Name of Facility Where Abatement is Takin	g Place (3	3)	FACI	LITY INFO	ORMAT	ION	Тур	e of Facility (4	-)						
Burchard Building, Room 710 Street Address							×	School (K-12 Subchapter		er than	K_12\				
1 Castle Point on Hudson							Н	Other (i.e. pretc.)				build	ings,	home	es,
City (5) Hoboken							Squ N/A	are Feet	# o N//	f Floors			dg. A	ge	
County (6) Hudson			County (Code (7) USE ONLY)			ent Use (Prio Iding	r if bei	ng dem	olished	1)			
Name of Monitoring Firm Hired by Building Briggs Assocites	Owner (8)		ASCM 0004				of Ab	atement Cont tement, Inc		(9)					
Street Address			0004			Street	Addre	ess	-22-2641						
3 Crosswicks Street City, State, Zip Code								ngren Aven Zip Code	ue						
Bordentown, NJ 08505							NJ 07512								
Project Manager for Monitoring Firm Michael Hoodak										Licens 0131					
Start Date (10) 08/10/2019	Schedule 08/12/2		mpletion (Date (11)				SHA Monitor tement, Inc).						
Occupancy Status During Abatement (Chec						Street									
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe: Occupied	Period of Anal Facility	Abater Hour	nent s			City, S	tate, 2	Zip Code	ue						
Scope of Work (Check All That Apply)						1010	wa, i	NJ 07512							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	lenova emoli				×××	M G	ull Containme ini-Enclosure lovebag Proce on-Exempted	edure					α.	
	10000	Locat											Abate	ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	lorma d Sole intena odial 3 (12)	ely by nce/		tos Cont thermal surfa	scription taining M systems cing, VA niscellan	lateria s insu T, or		(8	mount specify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									<u>a</u>	7	late	lre
Room 710	X			Pipe	insula	tion		8	3 LF		Х				
Room 710				VAT			20	00 SF		Х					
Name of Registered Waste Hauler Atlantic Carting	aste No.	Cubic of Was TBD	ste		Name of R Grand C	entra		ndfill							
City, State Wayne, NJ			Dispos TBD	sal Date		City, State Pen Arg		4							
Completed by Ned Joksimovic		S	ignature		FN			Date	9/2	019					

Print Form

K9489530751	1		CATION	ate of New Jerse OF ASBESTOS to NJAC 8:60 an	ABATE			<u> </u>	5 1	\mathbb{V}	<u>_</u>	
Date of Notification (1) 07/29/2019	26		Name of Wes N	f Building Owner/ lingus	Operator	(2)	ШЦ	AUG	- 2	2019)	L
Agencies Notified Type Notification X EPA Initial	1		Street A	ddress			1	SBESTO	S COI	VTRC)L &	an consumer
X EPA X Initial Amended Amendmen Emergency		[Maple	ite, Zip Code wood, NJ 070	40			The state of the s	AMPLIAN SLANE	Y Probability Common		alteritoras
DOH justification,)		Wes N				Te	enhone Nii	mhar			
Name of Facility Where Abatement is Takin	ng Place (3	3)	FACI	LITY INFORMAT	ION	Type of Facility	(4)					
House Street Address						School (K	(-12) er 8 (Oth	er than K-1 & commerc		dings,	home	es,
City (5) Maplewood						Square Feet N/A	# c N/.	f Floors A	175.753	ildg. A	ge	
County (6) Essex			County (Code (7) USE ONLY)		Current Use (F House	rior if be	ing demolis	hed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	1 No.		of Abatement C Abatement,		(9)				
Street Address						Address osengren Av	enue			-27-1-11		
City, State, Zip Code					The second second	tate, Zip Code wa, NJ 07512	2					
Project Manager for Monitoring Firm		T	Telephoi	ne No.	The second second	one No. 458685		License N 01311	lo.			
Start Date (10) 08/09/2019	Schedule 08/10/2		mpletion I	Date (11)		of OSHA Monito Abatement,		I.				
Occupancy Status During Abatement (Che						Address osengren Av	enue					
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe: Occupied					City, S	tate, Zip Code wa, NJ 0751:						
Scope of Work (Check All That Apply)				Name of the Contract of the Co	1000	, 110 0701						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	Renova Demolii			×		ire ocedure				9	
Location of	10 100	Locat	3200\	D.	escription	a f				Abate Ty	meni pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole iintena todial ((12)	nce/	Asbestos Con (i.e. therma surfa	taining M	laterial (ACM) s insulation, T, or	(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								fe	
Basement		X		Pipe	e insula	tion	7	'5 LF	X			
Name of Registered Waste Hauler		IN	JDEP W	aste Cubic	Yards	Name o	of Registe	ered Landfil				
Atlantic Carting		H	lauler ID 6085			5995	l Centra					
City, State Wayne, NJ				Dispo TBD	sal Date	City, St Pen A	ate irgyl, P	Ą				
Completed by Ned Joksimovic	Title Proje	ect Ma	anager	8	Signature	.Fu		7.1	ate 7/29/2	2019		

Print Form

CK308	30	1	NOTIF (F	ICATION	ate of Nev I OF ASB to NJAC	ESTOS	ABATEI	VENT	E	D)r	E (G I		\mathbb{V}		
Date of Notification (1) 7/30/2019	nu/3/	ML			f Building er Soltai		Operator	(2)	per est porcential		A	UG	- 2	20'	19	
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendment Emergency	t #	100	Millbu	ddress ate, Zip Corn, NJ 0				To the state of th		ASBE	LIC	ENS	NTF ING	₹OL {	8.
DOH DCA	justification) Cancellation			Mike N						l i ele	phone	Num	ber			
				FACI	LITY INFO	ORMAT	ON									
Name of Facility Where Residence	Abatement is Takir	ng Place (3	3)					_	of Facility (4)							
Street Address								S	School (K-12) Subchapter 8 Other (i.e. pri	(Othe				lings,	home	es,
City (5) Millburn									etc.) e Feet	# of	Floors	3	В	ldg. A	ge	
County (6) Essex				County (Code (7) USE ONLY)			nt Use (Prior dence	if beir	ng dem	nolish	ed)			
Name of Monitoring Firm IRIS Environmenta				ASCN	/ No.	2777.27	Name		ement Contr	actor	(9)					
Street Address 2333 Route 22 Wes	st	, 1930-19-19-				76		Addres Main S	s Street, #26	51				-1		
City, State, Zip Code Union, NJ 07083								tate, Zij eysville	p Code e, PA 1943	38						
Project Manager for Mor Troy Morton	nitoring Firm			Telepho	ne No. 06-0073			one No 400-87			Licen 0137					
Start Date (10) 08/09/2019		Schedule 08/12/2		mpletion	Date (11)		- continue to the continue to		A Monitor Laborator	ies G	lobal	Inc.				
Occupancy Status Durin	g Abatement (Che	ck Only Or	ne)					Addres								
Facility Closed/Vac Abatement Perform Other – Describe:							City, S	tate, Zij	Cary Stre Code VA 23220			-				
Scope of Work (Check A	JI That Apply)						MICH	monu,	VA 23220							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		and the same of th	Renov				×	Min Glo	Containmen i-Enclosure vebag Proce i-Exempted (dure					е	
Location	a of	10.70	Loca	35.855.65		Do	scription	of						Abate Ty	ment pe	
Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED	Ma	d Sole intena todial (12)	ince/ Staff?		tos Cont thermal surfa	taining N systems cing, VA niscellan	laterial s insula T, or		(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A											TO .	
Basem		-	X				and ma				9SF		X			
Basem	Х		Pipe		ation ar	0897/8/01/8/96	ows		55LF		Х					
Basem			Х				Plaster			200	2SF		X			
First FI			Х				noleun	n ,			0SF		X			
Name of Registered Was Century Waste Serv				NJDEP W Hauler ID		of Wa	Yards ste		Name of Re Fairless I	1000 N		natill				
City, State Elizabeth, NJ	0					Dispos	sal Date		City, State Morrisvill	e, PA	۸					
Completed by Carol Bradford		Title Presi	dent			9	Signature	02	ere la	1	0	Dat 07		019		

MAID

Print Form

MCH		N		State of New Jers CATION OF ASBESTOS Suant to NJAC 8:60 ar	ABATEMENT		EGE		<u> </u>		
Date of Notification (1) 7/29/19			me of Bu	ilding Owner/Operator (2)			AUG - a	2 20	119	-	ا
Agencies Notified □ EPA □ Initial □ DEP □ Amended □ DOL □ Amendment # 1 □ Emergency (including justification)	gg	Stro 1 I City Ha	eet Addre Berger v, State, Z	n County Plaza ip Code ack, NJ, 07601	Public Works	Telephone Num 201-336-6			ROL	. &	n-idealpho includes
□ DCA □ Cancelation				FACILITY INFORMAT	ION	201-330-0					
Name of Facility Where Abatement is Taking Place (3) Bergen County Justice Center Courtho Street Address 10 Main St.	use			ACETT IN ORNA	Type of Facility (4) School (K-12 Subchapter	, 8 (Other than	K-12) mercial buildin	gs, ho	mes,	etc.)
City (5) Hackensack County (6) Bergen Name of Monitoring Firm Hired by Building Owner (8)				nty Code (7) TE USE ONLY)	Square Feet 342,797 Current Use (Prior if being Courthouse	# of Floors 5 ng demolished)	Bldg. Age 1957				
Omega Environmental Services, Inc				ASCM No. 00120	Name of Abatement Cor Unicorn Contracti Street Address						
280 Huyler Street City, State, Zip Code South Hackensack, NJ, 07606					32 Willow Way City, State, Zip Code Woodland Park, N	J 07424					
Project Manager for Monitoring Firm Richard Kuiters				hone No. -489-8700	Telephone No. 973-333-9176		License No.				
Start Date (10) 08/09/19 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Per		8/31	/19	pletion Date (11)	Name of OSHA Monitor Envirovision Consustreet Address 20-21 Wagaraw Rd			*			•
Abatement Performed Outside of Norma Other - Describe: Scope of Work (Check All That Apply)	l Facility	Hours		91	City, State, Zip Code Fair Lawn, NJ 0741	.0					
 ≥3 sf or ≥3 lf ≥160 lf or ≥260 lf 				vation olition	☐ Full Containme ☑ Mini-Enclosure ☑ Glovebag Proce ☐ Non-Exempted	edure		uro.			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Us Ma	s Location Normallied Solely eintenantitodial St (12)	y by ce/	(i.e. the	Description of Containing Material (ACM) ermal systems insulation, surfacing, VAT, or her miscellaneous)		Amount (Specity SF or LF)	Removal		emer ype Encapsulate	Enclosure
Room 326		Х	14/1		TSI		50 LF	X	=	te	re
Room 327 Room 111		X			TSI TSI		50 LF 6 LF	X			
Room 129		Χ			TSI		2 LF	X			
ame of Registered Waste Hauler Inicorn Contracting Corp.		NJDEP W 003584		100	ubic Yards of Waste + CU YD		Name of Reguster Fairless Hills				
ty, State /oodland Park, New Jersey					isposal Date	8 /	Çity, State Morrisville, P				
ompleted by imo Golcev	^{Title} Genera	Mana	iger		Signature	1/		Date	9/19		

LD13539 STATE OF	NEW JERSEY	DEPARTME	NTOF	LABOR NOTIFICATION OF ASI	RESTOS ABATE	JENT	-		
Date of Notification (1) 07/12/2019	1 1329!	2	P	Name of Building Owner/Operator			\mathbb{V}		
Agencies Notified	Type of Notifica	ation		Street Address 1835 Burnett Avenue	AUG	- 2	2019	A CONTRACTOR OF THE PARTY OF TH	肼
() USEPA () NJDEP (X) NJDOL (X) NJDOH		ed ment #	•	City, State, Zip Code Union, NJ	ASBESTO	S COI	VTROL	. &	
() NJDCA	() Emerge justifica () Cancell	ation)	ing	Name of Contact Elon Kohlberg		Tel.1	Number 604.68		-
			FACILIT	Y INFORMATION					
Name of Facility Where Abatemer Commercial property	nt is Taking Place (3)		Type of Facility (4) () School (K-12)					
Street Address 1835 Burnett Avenue, Buil	ding A	0705	83	() Subchapter 8 (other than I (X) Other (i.e. private & comm	nercial bldgs., hom			0	
City (5) Union	County (6) Essex	County Cod (State Use (SQ. Feet: 6,000 # of FI Current Use (if being demolish	oors <u>2</u> ned):	Bldg.	Age <u>8</u> (<u>U</u>	
Name of Monitoring Firm Hired by Sky Environmental Service		ASCM No. N/A		Name of Contractor (9) Industrial Safety & Environme	ental Solutions, In	c.			
Street Address 140 Boulevard				Street Address 3300 Hudson Avenue					
City, State, Zip Code Mt. Lakes, NJ 07046			17.	City State, ZipCode Union City, NJ 07087					
Project Manager for Monitoring Fi David Camacho	rm Telephone N 201 325-00			<u>Telephone Number</u> (201)325-0055			ense N 1124	umber	
<u>Scheduled Start Date (10)</u> 07/22/2019	Scheduled C 07/30/2019	ompletion Date	te (11)	Name of OSHA Monitor ISES, Inc.	T.				
Occupancy Status During Aba () Facility Closed/Vacated During () Abatement Performed Outsi	ing Entire Period of	Abatement		Street Address 3300 Hudson Avenue					
(X) Other - Describe: vacant				City, State, Zip Code Union City, NJ 07087					
(X) Large Project (>25 <160 (X) Large Project (>160 SF	or <10 LF ACM) O SF or >10 <260 or > 260 LF ACM	LF ACM)		(X) Renovation ent with Negative Pressure (Mini-Enclosure with Negative F Glove-bag Procedure or Wrap	ressure		iable F	Proced	ure
Location of Asbestos- Containing Material (ACM)	Is Location Nor Solely by Main	tenance or		Description of ACM (i.e. thermal systems insulation,	Amount (Specify SF or LF)			ent Type	_
To be Abated in Facility (13)	Custodial St YES NO	aff? (12) N/A	surfa	cing, VAT, or other miscellaneous.)		R e m o v a -	Repair	E n c a p	E n c l o s ure
2nd floor		X	floor	tile (9"X9")	~ 5,500 SFT	Х			
2nd floor		Х	sink ı	undercoating	~ 4 SF	Х			
Name of Reg. Waste Hauler Newark Carting	NJDEP Waste F 04509	Hauler ID #	<u>Cubic</u> ~ 15	Yards of Waste	Name of Reg. Lar Grand Central Sa 1963 Pen Argyl R	nitation	1		
City, State 369 Raymond Blvd, Newark N	NJ		Disp. 07/30	Date 0/2019	City, State Pen Argyl, PA 1	8072			
Completed by (Print or Type) David Camacho	Title Project Supe	rvisor	Signat	ture and	Date 07/12/2019				

-			State of New Jers	sey		In E	CE	1 1	1 E	Posterior Property and the party and the par	1
MA PL	NOT	TIFICA ⁻	TION OF ASBESTOS	SABATEME	ENT			U I	J Um	7	11
IN C.C.	(Pursua	ant to NJAC 8:60 a	nd 12:120)		III					
Date of Notification (1)	Name	of Buildi	ing Owner/Operator (2)				AUG - a	2 20	19		#
7/30/19	Berg	en Cou	unty Department of	of Public W	'orks	had had	71.00		10	han	
Agencies Notified Type Notification	Street	Address					and the state of t	Carpert and a	Market Market Market		
	1 Be	rgen (County Plaza			AS	BESTOS C		ROL 8	i.	
☐ DEP ☒ Amended	H 1000000000000000000000000000000000000	tate, Zip				and the second second second	LICEN	SINC	************	pulatigitalist	numery
■ DOL · Amendment # 2	Hack	censac	ck, NJ, 07601								
☐ Emergency (including	Name	of Conta	ct			Telephone Numb	er				
☑ DOH justification)	Scott	t Luna				201-336-68	04				
Name of Facility Where Abatement is Taking Place (3)		++	ACILITY INFORMAT	Type of Fa	cility (4)						
Bergen County Justice Center Courthous	.e										
Street Address					chool (K-12)		20024				
10 Main St.						(Other than I		12		05 28	
TO Wall St.					ther (i.e. pri	ivate & Comm	ercial buildin	igs, ho	mes, e	etc.)	
City (5)				Square Fee	et #	of Floors	Bldg. Age				
Hackensack				342,797		5	1957				
County (6)		County	/ Code (7)		e (Prior if bein	g demolished)					
Bergen		(STATE	USE ONLY)	Courtho	use						
Name of Monitoring Firm Hired by Building Owner (8)		-	ASCM No.	Name of A	batement Cont	tractor (9)					-
Omega Environmental Services, Inc			00120		Contractir	5.5					
Street Address			100120	Street Add		16 co.b.					
280 Huyler Street				32 Willo							
City, State, Zip Code		all ball to the second	VI	City, State,							
South Hackensack, NJ, 07606					nd Park, NJ	1 07/12/1					
Project Manager for Monitoring Firm		Telepho	ana No	Telephone		07424	Liennes No				
Richard Kuiters		1000000	89-8700	973-333			License No.				
Michard Raiters		201-4	65-6700	373-333	-91/0		01331			- 1 00	
Start Date (10)	Schedule	ed Compi	letion Date (11)	Name of OS	HA Monitor						
08/09/19	8/31/1	19		Envirovis	sion Consu	Itants, Inc.					
Occupancy Status During Abatement (Check Only One)				Street Addr	ess						
☐ Facility Closed/Vacated During Entire Perio	od of Abatemen	t		20-21 W	agaraw Rd	., Bldg. 35-E					
Abatement Performed Outside of Normal	Facility Hours			City, State, 2			THE STATE OF THE S				
☐ Other - Describe:		- 746		Fair Law	n, NJ 0741	0					
Scope of Work (Check All That Apply)			***************************************			junge.					
≥3 sf or ≥3 lf	X	Renova	ation	☐ Full	l Containme	ent with Negat	tive Pressure				
☐ ≥160 If or ≥260 If		Demol	ition		ni-Enclosure						
				⊠ Glo	vebag Proce	edure					
						(*) and Non-l	Friable Proce	dure			
	Is Location					(/ =	1	T	Abat	ement	t
Location of	Normally			Description	n of			_	Ty	уре	_
Asbestos-Containing Material (ACM)	Used Solely b Maintenance	36.			Material (ACM))	Amount				
TO BE ABATED In Facility	Custodial Staf	192.00 to	(i.e. t	hermal system surfacing, VA			(Specity SF or LF)			Enc	_
(13)	(12)			other miscella			35 01 17	Ken	7 2	aps	nclo
. I	Yes No	N/A			583 			Kemova	Repair	Encapsulate	Enclosure
Room 326	X			TSI			50 LF	X			
Room 327	X			TSI	-1-10-1		50 LF	X	_		
Room 111	X			TSI		***************************************	6 LF	X	_		
Room 129	X		·	TSI			2 LF	X			
Name of Registered Waste Hauler	NJDEP Wa	ste Haul	er ID No.	Cubic Yards o	f Waste		Name of Regus		andfill		
Jnicorn Contracting Corp.	003584		G 15 110.	3+ CU YD			Fairless Hill				
City, State	1003384	•		Disposal Date			city, State	J 4011	Jim.		
Moodland Park New Jersey				TRD		11/	Morrisvillo	DΛ			

Title

General Manager

Completed by Dimo Golcev Signature

Date

7/30/19

Check	#	Tni	-	12	34	91				ļ	parama all'il 1991 negation	and a second subsequence	and the spine			the desirable property.	
106		NO NO	OTIF	IC/	ATION		BES	Jersey STOS ABA1 :60 and 5:1					9 [<u> </u>	\mathbb{V}		
Date of Notification (1)			-		Name	of Buildin	OM P	ner/Operator (2)	-111		A I	10	7	0040		
	29 / _	19					2	niversity Hos				AU	IG	- 2	2015	1	
	Type Notifica	ation			Street	Address				1	AS	SBES	STOS	S GOI	JTR(3.10	-
□ EPA □ DOLWD		4				Easton				L.	PATRICINA CONTRACTOR C			ENSIN		Terrandorum de la companya de la com	eterosconium e
⊠ DHSS	Amendme				Commonwear or	State, Zip (
	☐ Emergen		ding					, NJ 08901									
(NJAC 5:23-8)	justification	on)			Name	of Contac	t			1	Γeleph	one N	lumb	er			
	☐ Cancellat	tion			Roi	n Carvall	o a	s agent			908-	208-	3060)			
					FA	CILITY IN	FOF	RMATION									
Name of Facility Where At	patement is T	Taking Pla	ace (3)					Type of Facil	ity (4)							
N/A									School (K								
Street Address									☐ Subchapte ☐ Other (i.e.						ildina	c	
7 Wirt Street									homes, et		ate and	J COIT	merc	Jiai Du	liuling	5,	
City (5)			-55754	135005					Square Feet	Ť	# of F	loors		Blo	lg. Ag	je	
New Brunswick									10,000		2			6	8 + 9	yrs.	
County (6)					Cour	nty Code (7)(STA	TE USE ONLY)	Current Use	(Prior	if bein	g den	nolisl	ned)			_
Middlesex									Office/Me	dica	Bldg	J.					
Name of Monitoring Firm H	lired by Build	ding Own	er (8)	ASCM	No.	Na	me of Abateme	ent Contractor	(9)							
Environmental Tacti	cs, Inc.				N/A		N	MAK-B Pro, I	nc.								
Street Address							Str	eet Address									-
64 Broad Street							1	04 Market S	treet								
City, State, Zip Code							City	y, State, Zip Co	ode								
Matawan, NJ 07747								Sarfield, NJ (
Project Manager for Monito	oring Firm			Tele	phone	No.		ephone No.			Licen	se No					_
Tom Geiger	10.770				2-290		1000	73-931-3293		İ	013		36				
Start Date (10)	S	Scheduled	d Cor				-	me of OSHA N			-						
08 / 09 /				236	/		200	Same as abo									
Occupancy Status During		N	- 2					eet Address							-		
☐ Facility Closed/Vacated					ment		Str	eet Address									
Abatement Performed (cribe Time	City	y, State, Zip Co	ada						-		
of Abatement:A	MPN	//F	PМ		_AM		City	y, State, Zip Ct	ode								
Scope of Work (Check all t	that apply)			-													
≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf	on touching the Man of the		Rend						tainment with Nosure g Procedure mpted (*) and	Ü							
			Is I	ocat	ion				inpled () and	1	Habic	1 100	- Cuur	T	iteme	nt Ti	, no
Location o	of		No	rma	lly			Description of	of					-			
Asbestos-Containing M		17			ly by nce/			Containing Ma				ount		Removal	Repair	Encapsulate	Enclosure
TO BE ABAT IN Facility					Staff?	(I.e		ermal systems surfacing, VAT				ecify or LF)		ova	₩.	Sdt	uso
(13)				(12)				her miscellane			01.	,,		-		ilate	9
		Ye	es	No	N/A												
Bround Floor Entranc			Pipe ins	sula	tion			80	LF		\boxtimes						
				\neg						+				П	П	П	П
Name of Registered Waste	e Hauler			N	JDEP \		Cuk	oic Yards of	Name of Re	gister	ed Lar	ndfill				_	=
Newark Carting, Inc.				Н	auler II 11222		Wa 2	ste	G.R.O.W	B							
Dity, State							100	posal Date	City, State								
Newark, NJ		,					А	ugust 2019	Morrisvi	Ile, P	'A						
Completed By (Print or Typ Kiril Nestorov	oe)	Title Proje	ect N	/lana	ager			Signature	11- Fet			and the second	Dat	e 7 - J	7-	15	7

2019-170

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

Chapter 8 Check # 9465

1 10				SUB Cha	apter	8		CHCCK # 3	7-00			_	_
Date of Notification (1)		Building Ow			Sch	ool District		ECE		E	M	- Anna Control of the	
Agencies Notified Type Notification EPA Initial	Street Ad		_		-			AUG -	2 2019		Ü	and the same of th	_
DEP Amendmen	City, Stat	e, Zip Code vale, NJ 0		9				ASBESTOS	CONTRO	L &			
DOH Cancellation	Name of	Contact ert Donah	ue					Telephone 201-358	Number		ANTONIO PAR	ral	
				Y INFORMA	TION								
Name of facility where abatement is to	aking place (3)					in .	Тур	e of Facility (4)	(K - 12)				
Pascack Valley High School		r 8)	S						oter 8 (Other	er tha	n K-1	2)	
Street Address 200 Piermont Avenue							Sa	Other (P Bldgs./H uare Feet #	rivate/Com omes, etc.	mero		. Age	2
City (5)	County (6)					nty Code (7)	999	999	2		+0		
Hillsdale	Bergen		(8)		(Sta	te use only)		rrent Use (Pric	or if being o	demo	ished)	
Name of Monitoring Firm Hired by BI AHERA Consultants, Inc.	dg. Owner (8)		1 6	ASCM No. 00057		Name of Abatem B & G Resto							
Street Address P.O. Box 385						Street Address 105 Ryerso							
City, State, Zip Code Oceanville, NJ 08231						City, State, Zip C Lincoln Pa		7035					
Project Manager for Monitoring Firm		Phone Nu				Telephone Numb (973)696-			License N		er		
John Smoyer	Sched. Com	609-652			_	Name of OSHA	Monitor						
Scheduled Start Date (10) 08/12/2019	08/17/20		(,			B & G Rest	oration,	Inc.				_	-
Occupancy Status During Abatement	(Check only or	e)	-		_	105 Ryerso							
Facility closed/vacated during and Abatement performed outside	entire period of a	abatement. hours-				City, State, Zip C	ode						
Describe: Occupied Other-Describe: Occupied	*				=	LincolnPar	k, NJ 07	7035				- 12	_
Scope of Work (check all that apply Demolition	Renovation				X	Full Containment	w/negativ	e pressure [Gloveb	-			
>3 sf or >3 if	≥160 sf or ≥260		-1-1-1		Ц	Mini-enclosure			Non-fri	R	R	E	T
Location of asbestos-containing material to be	Is location non by maintenance staff(12)	nally used s e/custodial	olely			asbestos-containi	ng	Amount (Specify S LF)	SF or	e E o	e pa	n c a	-
abated in facility (13)	Yes	No N	/A							e e	r	p .	1
Music Room		X		VAT & m	astic			650 sf		X	出	H	+
													+
							-United States			旹	旹	H	+
Registered Waste Hauler	NJDEP H	auler ID#	C	ubic Yards o	f Wast			ndfill al Landfill					
B & G Restoration, Inc. City, State Lincoln Park, NJ		Dispo	sal D			City, State	Argyle, I						V.
Completed by (Print or Type) Gordana Luna	Title Secretary/T	reasurer		Signature		Gordana D	Quna		Date 07/2	9/20	19		

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) Eheck #5465 2019-170 B & G proj. #: SUB Chapter 8 Date of Notification (1) Name of Building Owner/Operator (2) AUG - 2 2019 0 17 1/12 19 1/11 19 1 Pascack Valley Regional High School District Agencies Notified Street Address ☐ EPA ASBESTOS CONTROL & 28 West Grand Avenue X Initial ☐ DEP City, State, Zip Code Amendment Montvale, NJ 07645 X DOL Telephone Number Name of Contact X DOH Cancellation 201-358-7020 Robert Donahue DCA FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K-12) Pascack Valley High School (Sub chapter 8) ☐ Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. 200 Piermont Avenue Bldg. Age Square Feet | # of Floors 50± 99999 County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) Bergen Hillsdale school Sub 8 Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) 00057 AHERA Consultants, Inc. B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road P.O. Box 385 City, State, Zip Code City, State, Zip Code Oceanville, NJ 08231 Lincoln Park, NJ 07035 License Number Telephone Number Phone Number Project Manager for Monitoring Firm (973)696-6869 00378 609-652-1833 John Smoyer Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 08/17/2019 08/12/2019 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) Glovebag procedure Full Containment w/negative pressure ▼ Renovation Demolition Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf >3 sf or >3 lf is location normally used solely e e Location of n by maintenance/custodial Amount Description of asbestos-containing m p asbestos-containing C (Specify SF or staff(12) 0 material (ACM) material to be a a abated in facility (13) p NA Yes No X VAT & mastic 650 sf Music Room

Name of Registered Landfill NJDEP Hauler ID# 19563 Cubic Yards of Waste Registered Waste Hauler Grand Central Landfill B & G Restoration, Inc. Disposal Date City, State

Pen Argyle, PA 08/17/2019 Lincoln Park, NJ Signature Completed by (Print or Type)

Secretary/Treasurer

Gordana Luna

Ciordana Luna 07/29/2019

State of New Jersey NOTIFICATION OF ASPESTOS ABATEMENT Pursuant to MAC 3:60 and 12-120 Agencies Notified Type Notification Street Address OCH Fell EXCAVATION OF ASPESTOS ABATEMENT Pursuant to MAC 3:60 and 12-120 Augencies Notified Type Notification Street Address OCH Fell EXCAVATION CONTROL & LICENSING City, State, Zip Code Emergency (including justification) Name of Facility Where Abatement is Taking Place (3) Name of Facility Information FACILITY INFORMATION	
Street Address City (5) County (6) Name of Monitoring Firm Hired by Building Owner (8) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished)	
Street Address City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Start Date (10) Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Name of Abatement Contractor (9) Street Address // 1/2 Dic Live Fin Live Country (9) Street Address // 2/2 Dic Live Fin Live Country (9) Street Address Street Address Street Address Street Address Street Address	
□ ≥3 sf or ≥3 lf □ Renovation □ Pull Containment with Negative Pressure □ Mini-Enclosure □ Glovebes Pressure	
Location of Asbestos-Containing Material (ACM) In Facility (I3) Ves No N/A Location Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Amount (Specify VAT, or other miscellaneous) Yes No N/A CUSTON IN N/A CUSTON IN N/A CUSTON IN N/A Location Non-Exempted (*) and Non-Friable Procedure Abatement Type Amount (Specify SF or LF) Fig. 18 Con SF C	
of Registered Waste Hauler NJDEP Waste Hauler ID No. Of Waste Disposal Date City, State Dotc Title Figure 1 Figure 1 Figure 1 Figure 2 Figure 2 Figure 3 Figure 4	

MO#25974681287	TEMENT	DE		\mathbb{V}	E						
Date of Notification (1)	M IV I T	, , ,		Name	of Building	Owner/Operator	(2)	THE ALL	IG - 2	2010	
	30/	19		Edwar	rd Mazelis	3		IT TI NO	0 - 2	2013	
Agencies Notified	Type Notification	on			Address					erestet et es es	-
□ EPA	☑ Initial								STOS CO LICENSII)L&
☑ DOLWD ☑ DHSS	Amended Amendmen	t #		City, S	State, Zip C	ode	and a second			THE STREET	
□ DCA	☐ Emergency				am, NJ 07						
(NJAC 5:23-8)	justification)		Name	of Contact			Telephone Numb	er		
	Cancellation	n ————		Edwar	rd Mazelis	S					
				FA	CILITY IN	FORMATION					
Name of Facility Where	Abatement is Tal	king Place	(3)				Type of Facility	1.500			
Private house							School (K-1	2) 8 (Other than K-1 2)			
Street Address							Other (i.e.,	private and commerc		gs,	
City (5)							homes, etc.	.) # of Floors	Dida /	100	
City (5)							Square Feet	# OF PROOFS	Bldg. A	(ge	
Chatham, NJ 07928 County (6)				Coun	tv Code (7)	(STATE USE ONLY)	Current Use (P	rior if being demolis	hed)		
Morris					., (.,	(02 002 02./)		nor in borning domination			
Name of Monitoring Firm	Hired by Buildir	ng Owner	(8)	ASCM	No.	Name of Abatem	nent Contractor (9	9)			
						Gr Tech LLC					
Street Address				(25)(2 - (5	********	Street Address					
						576 Valley Rd	#283				
City, State, Zip Code						City, State, Zip 0	Code				
	-					Wayne, NJ 074	70				
Project Manager for Mon	nitoring Firm		Tele	ephone	No.	Telephone No.		License No.			
Start Date (10)	190	heduled (omole	tion Da	te (11)	973-638-1777 Name of OSHA	Monitor	01127			
			09			Envirovision C					
Occupancy Status Durin Status Durin Status Dur				mont		Street Address		V-0207-124			İ
Abatement Performed	er wetter en en en fan en en finde fan en en				scribe	20-21 Wagarav City, State, Zip (35E			-
Time of Abatement:	AM	_PM/	PM		_AM	Fair Lawn, NJ					
Scope of Work (Check a	Il that apply)					The same of the sa		ination with negative	pressure		
	.,,	57 0				Full Co	ntainment with No		5		
>3 sf or >3 lf > 160 sf or >260 lf			enovat emoliti			Gloveb	closure ag Procedure	Tent with Negative	Pressure		
						☐ Non-Ex	empted (*) and N	on-Friable Procedur	e		
In a series			s Loca Norma			_	~		Abaten	nent T	уре
Location Asbestos-Containing			ed Sol	ely by	Asbe	Description stos Containing M		Amount	Repair	Enc	Enc
TO BE AB.		10.000	aintena stodial	ance/ Staff?	(i.e	e., thermal systems		(Specify SIF or LF)	Repair	aps	Enclosure
(13)	nty		(12)			surfacing, VA other miscellan		SIF OI LF)	<u>n</u>	Encapsulate	re l
W A		Yes	No	N/A						(0	
Basement				\boxtimes	Pipe inst	ulation		90 LF			
			TIT							П	П
		一一	t		1						
			1	$\frac{1}{1}$	-						
Name of Designated We	ata Uavilar				a Maular IS Na	Touble Weeds of Mr	stall Manager of Deep	internal Landell			Ш
Name of Registered Wa	sie naulei				e Hauler ID No.		ste Name of Reg				
Gr Tech LLC				00337	85	TBD	T.R.R.F. Inc	<u> </u>			-
City, State						Disposal Date	City, State				
Wayne, NJ 07470 Completed By (Print or 1	Tyne)	Title				TBD Signature	Tullytown, I	PA Da	te		
A TABLE						Signature	A 1 1				
N.Jevtic		Owner					Hewic We	mad 107/	30/19		

State of New Jersey - Notification of Asbestos Abatement												
CK12509	7		(Pursu	ant to N.J.A.C.	8:60-7 and 12:12	0-1))E	CE	<u> </u>		
U110010)				Name of Building C		tor(2)	1	ALLO	2 00	40	$\parallel \parallel $
Date of Notification (1) July 29,2019	W	1328	Z		BASF Catalys			1	AUG -	2 20	19	
Agencies Notified		Notification '			Street Address	Furnailea						
XEPA		Initial N ☑Amende			25 Middlesex City, State, Zip Coo			ASE	BESTOS (ROL &	
DCA		□ Emerge			Iselin, NJ 088		and the same		LIVEN	DIVIG		Name of Street
xDOL X DEP		justific	ation)	Ü	Name of Contact				hone Num	ber		
xDOH		☐ Cancel	led		Kyle Smith			732.2	205.7664			
Name of Facility Where Abaten	nont is Tak	ing Place (3)		FACILITY INF	ORMATION Type of Facility (4)							
BASF Catalysts	ient is Tak	ing riace (5)			School (K-12)							
Street Address					Subchapter 8 (oth			2200400-00000				
25 Middlesex Turnpike	е				Other (i.e. pringsq. Feet: 20,000	vate & common of sf # of F	ercial bui loors: 1	ildings, I <u>Bld</u>	homes, etc g. Age: 7	o.) 70 ye a	rs	
	County (6) Middles			Code (7) Ise Only)	Current Use (prior i	if being dem	olished):	:				
Name of Monitoring Firm Hired			ASCM N		Name of Contractor	(9)						
EnviroVision Consulta	ants inc	: .	0007	9	GREENWOOD	ABATEME	ENT CO	ONSU	LTANTS	S. INC		
Street Address		CO COMPOSITION OF THE STATE OF			Street Address							
20-21 Wagaraw Road,	Bldg#	35 E		72	511 MAIN STRE	EET						
City, State, Zip Code					City State, ZipCode							
Fairlawn, NJ 07410	F:	Talashasa	l h a u		Butler, NJ 0740 Telephone Number)5		Licans	se Number			
Project Manager for Monitoring Fred Larson	Firm	<u>Telephone N</u> 973-636-			3			25		99		
200000000000000000000000000000000000000				D-1-44)	973-492-0477	itas		0084	10			
Scheduled Start Date (10) July 29,2019		Scheduled C Septemb			Name of OSHA Mor	illor						
Occupancy Status During Ab	atement (Check only or	ne)		Street Address							
Facility Closed/Vacate	d During E	Entire Period of	of Abaten		1056 Stelton R	oad.						
Abatement Performed Describe	Outside o	f Normal Faci	lity Hours	5 -	City, State, Zip Code							
Other - Describe:					Piscataway, N	.1 08854						
Source of Work (Check all that	apply)				1 iscataway, iv							
				5		1	II Contai Mini-Enc		with Nega	itive Pr	essure	ĺ
\geq 3 sf or \geq 3 lf \square > 160 sf or \geq 2	én.			Renovation Demolition			viini-⊨nd ovebag l					
<u> </u>	****					Nor	-Exemp	ted (*)	and Non-			dure
Location of Asbestos-Containir Material (ACM) in Facility (13)		ocation Normal by by Maint./Co			pestos Containing Mat lal systems insulation,		Amoun (Specif		Abateme		- 	
material (terri) in a demay (te)	Staff	f? (12)		VAT, or other mis			or LF)	8	Remove	Repair	=ncap E	<u>=nclose</u>
Laboratory # 112	YES	NO IX	NA	VAT & Masti	C		450 s	f	X		Г	
Fan Room # 3	X	_		TSI - Pipe &			600 lf	26	X			
				Mechanical			1,000 800 lf		X			
Crawlspace By Fan	X			TSI-Pipe & F	itting		800 11		125.1			
Room # 3 Room # 45	X		TSI-Pipe & F	ittina		18 If		X				
KOOM # 45									<u></u>			
Name of Reg. Waste Hauler See Hauler Below # 1 & 2	2	· ID #	Cubic Yards of Wa	80		Fairle	e of Registe ess Landi d Central	fill/				
Hauler #1) Greenwood Ab		Consultants, I	nc. Butler	r, NJ 07405		Disposal D		City, S	State 000 New Fo	ord Rd	Morrisy	ville.PA
NJ DEP # 12561 Hauler #2) Newark Carting		ork NII 04500	MI DED #	10551		Septemb 30,2019	Jei	19067	7 Permit#1	8072		
mauler #2) Newark Carting	, inc. Newa	11K, NJ 04509,	NJ DEF#	17331		50,20.0		Argyle	1963 Pen . e, PA 1807	72	ka, Pen	!
Completed by (Print or Type)		Title			Signature			Permi Date	it # 100265)		
Marin Graure		Sr. Projec	t Mana	ger	Marin Grau	re		July	/ 29, 20 ⁻	19		
GAC # 2019-680-002	,003 &	004										

Check # 942

328 State of New Jersey Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) Project # 060-19 Date of Notification (1) Name of Building Owner/Operator (2) July 30, 2019 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT TREHST ☑Initial Notification ☐ EPA ■ Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS ☐ DCA City, State, Zip Code ■ Emergency (including X DOL ASBESTOS CONTROL & justification) PISCATAWAY, NJ 08854 X DEP- No Longer REQUIRED Name of Contact □Cancelled Telephone Number 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) 84 COLLEGE AVENUE, BLDG# 3039 School (K-12) ☐Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) COLLEGE AVENUE CAMPUS Sq. Feet: N/A # of Floors: 4 Bldg. Age: 100+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC NEW BRUNSWICK **MIDDLESEX** (State Use Only) Name of Monitoring Firm Hired by Bidg. 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 08/09/19 08/12/19 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address 20-21 WARGARAW ROAD, BLDG# 35E Facility Closed/Vacated During Entire Period of Abatement □ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 5PM - 5AM Daily (24 HOURS & 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 X Glove bag Procedure / Wrap & Cut □Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material 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 Enclose VAT, or other miscell.) or LF) NO YES NA 004 MER X TSI <10 SF X 004 MER X TSI < 9 LF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 10 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 08/12/2019 NJ DEP # 4509 19067 215-736-1700 Completed by (Print or Type) Signature Date RAYMOND C. PEDALINO SENIOR PROJECT Raymond & Pedalino July 30, 2019 MANAGER

Inv 13322

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

Check # 25937

VIVI	Jod		M	irsuanut	O NJACE	60 and 12:12	20)		Im E	(C)	E	$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	E
Date of Notification (1) 8/1/20	019			Name of	Building C	wner/Operato		ıntino	TIKE				
Agencies Notified	Type Notification		+	Street Ad	Idress			-		AIIG	- 2	201	9
□ EPA	× Initial							i		NOU	_	201	9
DEP	Amended			City, Stat	e, Zip Cod					desentation of the second	uterna en en	with the second of the second	www.eng.u
× DOL	Amendment : Emergency (- L			Maywoo	od, N	J 07607	1	BEST	SITE IF	1117	OL 8
□ DOH	justification)	inoluding		Name of		tino		8	Telephone N	dumbar	20010		46.00
☐ DCA	Cancellation				aul Pian	100-1116-01							
Name of Facility Where	Abatement is Taking	Place (3)		FACIL	II Y INFO	RMATION	Typ	pe of Facility (4)				-	
Resid							П	School (K-12)					
Street Address							Ī	Subchapter 8 Other (i.e. priv			ildinas	homo	c
							×	etc.)		H Clai Du			5,
City (5)	1 111 07007						Sq	uare Feet	# of Floors		Bldg.	100 TO 10	
	d, NJ 07607							2200	2	12-1	70 -	-/-	
County (6) Bergen				County C	Sode (7)		Cu	rrent Use (Prior i	t being demo	ilisnea)			
Name of Monitoring Firm	n Hired by Building (Owner (8)		ASCM	No	Nam	e of A	batement Contra	actor (9)				
MECS	in rined by building (2 WITCH (0)		AGOIN	. 10.			Environment		s, Inc.			
Street Address						Stree	et Add	Iress		-			
PO Box 34	1					PO	Box	322					
City, State, Zip Code				11.12				, Zip Code					
	I, NJ 08515						n, NJ 08501						
Project Manager for Mo		- 1	Telephor		100000000000000000000000000000000000000	phone	No. 1-9688	License 00493					
Bill Weisgarl	ber	Cabadala		609 29	Section Control of the Control of th	102000		SHA Monitor	00490)			
Start Date (10) 8/15/2019		Schedule		17/2019		ME		SHA MONITOR					
Occupancy Status Durin	ng Abatement (Chec	k Only One	e)			1000000	et Add						
× Facility Closed/Va	cated During Entire F	Period of A	batem	nent		PO	Box	341					
Abatement Perform Other – Describe:	med Outside of Norm	al Facility	Hours	3				, Zip Code field, NJ 085	15				
Scope of Work (Check						- 011	COLCI	11610, 140 000	10				
≥3 sf or ≥3 lf	All Hat Apply)	X D	enova	tion			П	Full Containmen	t with Negativ	e Pres	iire		
≥160 sf or ≥260 lf		-	emolit				Ш	Mini-Enclosure		70 1 103	Juic		
								Glovebag Proced Non-Exempted (riable P	rocedu	re	
		la	Locati	ion				, ton another ,	/ 4.1.2			tement	Š.
Locatio	on of	N	ormal	lly		Description	on of				T	ype	
Asbestos-Containin	g Material (ACM)		l Sole			os Containing	Mate		Amount		,	E	Е
TO BE A			odial S	Staff?	(i.e.	thermal syste surfacing, \			(Specify SF or LF)	National	Repair	cap	nclo
(13			(12)			other miscell	aneou	ıs)		0	air	Encapsulate	Enclosure
		Yes	No	N/A								ê	
Baser	nent	X			Th	ermal Pipe	Insu	lation	55 If	Х			
Name of Registered Wa	aste Hauler		N	NJDEP W	/aste	Cubic Yards	,	Name of Re	egistered Lan	dfill			
Stevens Environme			H	Hauler ID 18292		of Waste 1		Fairless	Candfill				
City, State Allentown, NJ						Disposal Da 8/20/2019		City,/State Morrisvill	e PA				
Completed by		Title				Signati	111	/ Worldsvill	/ 1	Date			
Mahlon E. Stevens		100000000000000000000000000000000000000	ct Ma	anager			1//		7//		1/201	9	

Check # 25934

INV 1332	NO			O NUAC 8:				bearing	1 6 6	E	Π	7\//	F	-
Date of Notification (1) 7/30/2019		N	Name of	Building Ov	And the second second second second	rator (), <u> </u>		U	W	5	
Agencies Notified Type Notification		5	Street Ad	dress					AUG	; -	2 2	2019	70-70-00-0	IJ
EPA Initial Amended Amendment #_ Emergency (inc	cluding		City, State	e, Zip Code	e Middle:	sex,	NJ 08	3846	ASBEST	ros (CON	TRO	1.8	
□ DOH justification) □ DCA □ Cancellation	adding	١	Name of	Contact atricia					Telephone	Numb	SIM	G	NATIONAL PROPERTY.	*******
_ BCA _ Cancellation				ITY INFOR	RMATION									
Name of Facility Where Abatement is Taking P Residential	Place (3)						_	Facility (4)						
Street Address			- N				Su	bchapter 8	Other than h		nuildi	nas l	omes	
							etc	c.)		er Giai i		- 50		,
City (5) Middlesex, NJ 08846								300	# of Floors		7	dg. Aq '5 +/		
County (6) Middlesex			County C STATE U	ode (7) SE ONLY)		-	Current	Use (Prior	if being demo	olished	i)			
Name of Monitoring Firm Hired by Building Ow MECS	rner (8)		ASCM	No.				ment Contr vironmen	actor (9) tal Service	s, Ind	Э.			
Street Address PO Box 341					1		Address ox 322							
City, State, Zip Code Chesterfield, NJ 08515					10 00000	MATERIA STATE	ate, Zip own, N	Code NJ 08501						
Project Manager for Monitoring Firm Bill Weisgarber		- 1 2	Telephon	e No. 8-4070	1 1500		one No. 59-968	88	Licens 00493					
Start Date (10) S 8/8/2019	cheduled		pletion D 7/2019			ame o		Monitor						
Occupancy Status During Abatement (Check C	Only One)	y N			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Address							
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: 8 am - 4 pm					Ci	ity, St	ox 341 ate, Zip terfield		15					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novat moliti				×	Mini- Glove	Enclosure ebag Proce	nt with Negation edure (*) and Non-F				ì	
Location of		ocation rmall			Descri	intion	of				,	Abate Ty		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Maint Custoo (enan	nce/		os Contain thermal sys surfacing other miso	ing M stems g, VA	aterial (insulati T, or		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
Basement		X		The	ermal Pip	pe In	sulatio	on	55 If	\neg	Х			\neg
Name of Pagiatored Waste Useda		N1	JDEP W	laete	Cubic Ya	rde		Name of D	legistered Lar	ndfill				
Name of Registered Waste Hauler Stevens Environmental Services		30.8	auler ID 18292	No.	of Waste			Fairless	2000 market 1	.Gim				
City, State Allentown, NJ					Disposal 8/30/20		1 6	City, State Morrisvil						
Completed by Mahlon E. Stevens	Title Projec	t Ma	anager		Sigr	nature		4	/	Date 7		/201	9	

State of New Jersey

								г					one market process		Prin	nt For
CK 022346	N		AFTON	te of New OF ASBES NJACE:	STOPIA						G			<u> </u>		
Date of Notification (1) 7/30/2019 10 133	200			Building O SS Solu					ЦЦ		AUG	- 6	. 2	019	The same of the sa	2
Agencies Notified Type Notification EPA Initial				ings Geo		st R	oad			ASB	EST(OS C			. &	
DEP X Amended Amendment #				e, Zip Code NJ 0886						alla de la constanti		CTAMINE TO LIKE				
Emergency (i justification) DCA Emergency (i justification) Cancellation	ricidality	4	lame of Lisa Da								one N 806-4		er ———			
Name of Capilla, 18/hars Abstament in Taking	Dlaga (2)		FACIL	ITY INFOR	RMATIO	N	Type o	f Facility	(4)							
Name of Facility Where Abatement is Taking LANXESS Solutions US Inc.	Place (3)		s medical				☐ Sc	chool (K-	-12)	11n n n 41	V	42)				
Street Address 1020 King George Post Road							× o		privat	e & co	mme				X	s,
City (5) Fords							Square			of Flo				lg. A	ge	
County (6) Middlesex			County C STATE U	Code (7) ISE ONLY)		_	boiler	t Use (Pr house	pipir	ng, p	roce			int 8	k tan	ks
Name of Monitoring Firm Hired by Building C Emilcott Associates, Inc.)wner (8)		ASCM	No.				ment Co molition				ntal	Ser	vice	s, LL	.c
Street Address 190 Park Avenue							Address Old Ea	gle Sch	hool l	Road	i, st	E 91	0			
City, State, Zip Code Morristown, NJ 07960	***************************************						itate, Zip ne, PA	Code 19087								
Project Manager for Monitoring Firm David Tomsey		41.0	elephor 973-53	ne No. 8-1110 ·	1		none No. 581-74			0.00	cense 1286			~5205.0		
Start Date (10) 2/18/2019	Schedule 10/31/2		pletion [Date (11)				A Monito molition		nviro	nme	ntal	Ser	vice	s, LL	_C
Occupancy Status During Abatement (Check							Address Old Ea	gle Scl	hool l	Road	i, ST	E 91	0			
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: boiler house			ent	0.00	1	City, S	state, Zip							nut inc		
Scope of Work (Check All That Apply)							_				***************************************					
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	-	enovat emoliti				202	Mini Glov	Containr -Enclosu ebag Pr -Exempt	ire ocedu	re					3	
	Is	Locatio	on				1 11011	-LXcmpt	T	arra r	101111	1000		Abate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	lormall d Solel intenan odial S (12)	y by ice/	(i.e. t	Desc os Conta hermal s surfaci other mi	system ing, VA	Material (s insulat AT, or			Amo (Spe SF or	cify		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A												6	
#6 Fuel Line		X		P	ipe Ins)	-	197		2				-
Door Gasket, caulk, counter		X				er Mi		·	-	530	LF	_	2			
QA, M1D, E2, E1 Area	-	X		Р	ipe Ins)	1 8	2538	Trans.	-	2			
ZAA, Ester 2, PA Tank, E1 Name of Registered Waste Hauler		X	JDEP W	laste T	Cubic Y	rfacir ⁄ards	19	Name o	. 74				χ.			
Horwith Trucks, Inc.		Н	auler ID N-199	No.	of Was			Cumb	erlar				dfill			
City, State Northampton, PA					Disposa 8/9/20			City, St Shipp		urg,	PA					
Completed by Mark Klotzbach	Title Vice	Presi	dent		Si	gnatur		legit.		£	-	7/30		g e		

2KD1734	19	N		CATION	of New Jers OF ASBESTO NJAC 8:60 a	ABATE		AND COMMENTS OF THE PERSON OF	Dr	E C		\mathbb{V}		
Date of Notification (4) 07-31-19	V 13319			Name of PSEG	Building Owner	Operator	(2)			AUG	- 2	2019	The second second second	U
Agencies Notified	Type Notification			Street Ad	ddress fadley Rd.			-		SBEST	25.00	NITRO	11 &	
EPA DEP	Initial Amended		-	City, Sta	te, Zip Code						52161			
DOL	Amendment # Emergency (in				Plainfield NJ				Tala	N				
DOH DCA	justification) Cancellation	····			Contact Gazick				0.000	phone N 6-628-2			•	
				FACIL	LITY INFORMA	TION								
Name of Facility Where a Roadway	Abatement is Taking	Place (3	3)				Type of	- 100	5933 					
Street Address 59 Furler St & Unio	n Blvd						Sul	ner (i.e. p	8 (Othe	er than K- commer		ldings,	home	es,
City (5) Totowa							Square I	1	# of N/A	Floors	1000	3ldg. A	ge	
County (6)				County C	Code (7)		(I) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1		or if beir	ng demol	ished)	=====		
Passaic Name of Monitoring Firm	n Hired by Building O	wner (8)		ASCN	M towns		Manho of Abater	nent Cor				10		
N/A Street Address				N/A		3000000	S Enviro	nmenta	al Sen	rices, Ir	ic.			
N/A							Old Dock							
City, State, Zip Code N/A						7700-05	State, Zip (hank, N		0					
Project Manager for Mor N/A	nitoring Firm		//	Telephor N/A	ne No.		hone No. -924-811	11		License 01136				
Start Date (10) 07-29-19		Schedule 08-29-		pletion [Date (11)		of OSHA S Enviro			vices, Ir	ıc.			
Occupancy Status Durin	g Abatement (Check	Only Or	ne)				t Address Old Dock	Dd						
Abatement Perform	ated During Entire Pened Outside of Norma						State, Zip (VEHICLASSE -						
Other – Describe:						Yap	hank, N	Y 1198	0					
Scope of Work (Check A ≥3 sf or ≥3 if ≥160 sf or ≥260 if	All That Apply)		Renova Demolit				Mini-E Glove	Enclosur bag Pro	e cedure	Negative			·е	
			Locati	75 m									ement /pe	t
Location Asbestos-Containing TO BE AB In Faci (13)	n Material (ACM) ATED lity	Use Ma Cus	Normal ed Sole aintenai todial S (12)	ly by nce/ Staff?	Asbestos Co (i.e. therm sur		Material (A ns insulatio AT, or		(8	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
Stree	at .	Yes	No	N/A X	Tı	ansite p	nine		10	00 LF	x	-		
Stree				X		ansite p	16.751			00 LF	x			
Stree				X		oal tar v				00 LF	x			
							•			professional Ecologic				
Name of Registered Wa	ste Hauler	1	0.550	JDEP W		ic Yards	1	Name of	Registe	red Land	Ifill			
Veolia ES Technica	I Solutions			lauler ID 01699	TBI			EQ	4-					
City, State Flanders, NJ					TBI	osal Date		City, Sta Michig						
Completed by Raymond Tutiven		Title Proje	ect Ma	anager		Signatur	re meul	Tul	in		Date 07-31	-19		

mch	N		CATION	te of New OF ASBE to NJAC 8	STOS	ABATE		D) <u>E</u>	C [Ē [\mathbb{V}	E		
Date of Notification (1) 8-1-19				Building (AUG -	- 2	201	9		加
Agencies Notified Type Notification	ed,	1 3	Street Ad	idress	-0.00					na rational de la constantia de la const	artenna were		el de martie		
EPA Initial Amended	: *.	1		. Jefferste, Zip Co			7.2		ASE	ESTO:			OL 8		
DOL Amendment #_				lle, MD				Enmones			ertasyeastur	r uz rokumadiNdi	Lineary Agestrates	-ACCUMUNIC	_{cared}
Emergency (in- justification) DCA Cancellation	cluaing			Contact						ephone 1-998-					
DCA Cancellation		1	Ric Wo	ITY INFO	RMATIO	ON			30	1-990-	020	0			
Name of Facility Where Abatement is Taking I			.,,,,,,,,				Туре	of Facility (4	1)						
Ellisburg SC Space 12(former hallmanner) Street Address	ark stor	e e	-1400,0440					School (K-1: Subchapter		er than k	<-12)				
22NJ -70							×	Other (i.e. p etc.)					ings,	home	s,
City (5)							Squa	re Feet		Floors		1	dg. A	ge	
Cherry Hill		Τ,	2) ada (7)			100	0 ent Use (Pric	1	a dome	aliaha		-50		
County (6) Camden			County C STATE U	SE ONLY)			vac	- 75	i ii beli	ig demo	JIISHE	u)			
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCM	No.				atement Con							
Vertex Companies Street Address						1.0	per E	nvironmer	ntal S	ervices	S			W-92	
700 Turner Way								ey Street							
City, State, Zip Code								Zip Code							
Aston, PA 19014 Project Manager for Monitoring Firm			Telephon	ne No		N = 17/1/1825	hone N	19137		Licens	e No				
Don Heim			25	7-0402			-533-			0116					
I N	Scheduled		pletion D	Date (11)				HA Monitor							
8-1-19 Occupancy Status During Abatement (Check		^					Addre	ompanies							-
➤ Facility Closed/Vacated During Entire Pe			ent			700	Turne	er Avenue							
Abatement Performed Outside of Norma Other – Describe:					_			Zip Code A 19014							
Scope of Work (Check All That Apply)							_							221 1 2	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Name and Address of the Owner, when the Owner, which	enoval emoliti				2	Mi Gi	III Containme ini-Enclosure ovebag Proc on-Exempted	e edure					Э	
	ls l	ocati	on											ment	
Location of		ormall I Solei		Ashsa		scription		I (ACM)	^	mount			ıy		
Asbestos-Containing Material (ACM) TO BE ABATED	(V.) (V.) (V.) (V.)	ntenar	000000		thermal	system	is insul	al (ACM) lation,	(5	Specify		Rer	Re	Encapsulate	Encl
In Facility (13)		(12)				cing, VA niscella)	Si	or LF)		Remova	Repair	psula	Enclosure
	Yes	No	N/A											te	W.
office area (exposed)			x	VAT	red ar	nd tan	and r	mastic	3	50sf		х			
elevated wood platform			х	VAT	red an	nd tan	and r	mastic	1	000sf		Х			
								285							
		1	IDES			V!		l Nie f	Dariet	- الممد	- MEII				
Name of Registered Waste Hauler			JDEP W auler ID		of Wa	Yards ste		Name of Minerva	roekstoor o		IGTIII				
Service Transport Group City, State					Dieno	sal Date	2	City, Stat		uiiii					
Yardley, PA					Disho	Jai Dale	,	Libson,							
Completed by	Title				5	Signatur	·e	7			Dat				
Jennifer Niven	Dir of	Ope	rations	1	-		/	_			8-	1-19			

11/1-51	_	N	OTI	FICA		ate o Ne		ersey TOS ABAT	HMENT	FR	P I	7 77	7	7 100
chiosor.) In	118						60 and 5.4		D) <u> E G</u>		<u> </u>		-
Date of Notification (1)								er/Operator (2)	11011				44.11174
7 /	29 /	19	_		Rol	pert E. Ho	olme	s Gardens		II LI AUG	- 2	201	9	1
Agencies Notified	Type Notifica	ation			Street	Address								1
⊠ EPA	☐ Initial				14	Rev. Sam	nuel (Carpenter E	Boulevard	ASBEST	OS CO	NTR	01.8	
☑ DOLWD	☐ Amended				City, S	State, Zip C	Code			LIC	DENSI	VG	JL 0	
⊠ DOH	Amendme		ıdina		Edi	son NJ 0	8820				unest the Control	PROGRAMO	AND STREET,	(POINTS IN
☐ DCA (NJAC 5:23-8)			Juling		Name	of Contac	ct			Telephone Num	ber		-0-1	(6),(7),(1)
(☐ Cancellat				Hur	iey, Deb	orah			1-908-561-2	525			
					FAG	CILITY IN	NFOR	MATION				-		
Name of Facility Where	Abatement is T	aking P	lace	(3)					Type of Facility	(4)				
Same		Ø							School (K-12					
Street Address									Other (i.e., p	8 (Other than K-12 rivate and comme		ilding	s,	
03.75									homes, etc.)	# of Floors	DI	dg. Ag	10	
City (5)									Square Feet 1000	2		19. Aş 70	C	
Edison					T.C	to Cada 17	7\/CTA7	TE LICE ON VO				-		
County (6)					Cour	ity Code (/	1)(SIAI	TE USE ONLY)	Residential	ior if being demoli	sneu)			
Middlesex				0\ T	10011	N	T Man	f A b - t						
Name of Monitoring Fire	경기 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	aing Ow	mer (8)	ASCM				ent Contractor (9)					
Environmental Ta	ictics inc.				0045)			mental Service	8				
Street Address								et Address	on St					
64 Broad Street	minutes							421 Hegerm						
City, State, Zip Code Matawan NJ 0774	7							, State, Zip C						
				Tala	phone	Nla		phone No.	FA 13130	License No.				
Project Manager for Mo Thomas Geiger	onitoring rimi			1200000	32 290		10000000	:phone No. 15 333-5117		01328				
Start Date (10)		Schedule	ad Co	1				ne of OSHA N		01020				
7 / 30				0.70) /			ame	.om.or					
Occupancy Status Dur	ing Abatement (0	Check o	nly o	ne)			Stre	et Address						
☐ Facility Closed/Vac	The second of th					22		ame					a Historiae	
Abatement Perform Time of Abatement			100 CO. C. C. C. C.					, State, Zip C ame	ode					
Scope of Work (Check	all that apply)			7-3-37-			3	anie						
Scope of Work (Check	an triat apply)								tainment with Ne	gative Pressure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf				novati molitic					g Procedure	on-Friable Procedu	ıre			
			ls	Locat	ion	1					Ab	ateme	ent T	ype
Location				lorma d Sole				Description of		10 mars 200 2000 of persons	R	R	Ш	m
Asbestos-Containin TO BE A		1)		intena				Containing Ma rmal systems		Amount (Specify	Removal	Repair	ncap	clo
IN Fac			Cust		Staff?	(1.6		urfacing, VAT		SF or LF)	val	-	Encapsulate	Enclosure
(13)	-		(12)		-	oth	er miscellane	eous)				ate	(0
			Yes	No	N/A		4				-	_		-
2 bedrooms and ha	illway	L				VAT				350SF		Ш	П	Ш
				\boxtimes										
			5	П							$\exists \Box$	П	П	П
Name of Registered W	aste Hauler				JDEP '	 Waste	Cub	ic Yards of	Name of Regis	stered Landfill				
ASBESTOSTRAN		COM	PAN	1	S243	D No.	Was	ste	MINERVA	ENTERPRISES	LLC			
City, State YAPHANK NY							Disp	osal Date	City, State WAYNESE					
Completed By (Print or	Type)	Title					-	Signature	0 0	Tana D	ate			7
ANTHONY JONES	3	PRO	OJE	CT M	ANAC	ER		Ant	hong ?	Ung	7.	29.	19	5

425933 Date of Notification (1) =	N N	(Pu	Irsuanti	ASBES ONJOS:	TOS A	BATEI 12:120	U,	- waste			G AUG	E		Prii	nt FG
7/29/2019	100	196		61		Berns	10162								
Agencies Notified Type Notification Initial Amended Amendment #			Street Ad	te, Zip Code		pewell	, N.	J 08525	Lunioren	ASE	BEST(SING		. &
X Emergency (ir DOH justification) DCA	ncluding		Name of	Contact Paul Berns	stein				Tel	ephone	Numh	ner			
	DI (0)		FACIL	LITY INFOR	MATIC	N	-	(F :::: //						0=3.7	
Name of Facility Where Abatement is Taking Residential Street Address	Place (3))					y	School (K-12 Subchapter 8 Other (i.e. pretc.)	?) 3 (Oth			build	ings,	home	s,
City (5) Hopewell, NJ 08525							Squ	uare Feet 2000	# 0	f Floors			dg. A		
County (6) Mercer			County C	Code (7) USE ONLY)			Cui	rrent Use (Prio	r if be		olishe				
Name of Monitoring Firm Hired by Building O MECS	wner (8)		ASCM	l No.				batement Cont Environme			es, In	ıc.			
Street Address PO Box 341						Street PO E									
City, State, Zip Code Chesterfield, NJ 08515								, Zip Code vn, NJ 0850	1						
Project Manager for Monitoring Firm Bill Weisgarber		- 1	Telephor 609 29	ne No. 8-4070		Teleph 609 2		No. -9688		Licens 0049				75-	
Start Date (10) 7/30/2019	Schedule		npletion [31/2019	Date (11)		Name MEC		SHA Monitor							
Occupancy Status During Abatement (Check						Street PO E									
Facility Closed/Vacated During Entire Poly Abatement Performed Outside of Normal Other – Describe:	eriod of A al Facility	Hours	nent		_	City, S	tate,	, Zip Code field, NJ 08	515						
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		enova emolit				×	1	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure					•	
	10000	Locati	(7) (4)										Abate Ty	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lormal d Sole intenal odial S (12)	ly by nce/	(i.e. th	s Cont ermal surfac		Mater s ins		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	The		D: I		l-ti		40 If	_	7.5		Ф	30-35
Basement		X		Ther	rmal	Pipe Ir	ısul	ation	XXX—IIIX	40 lf		X			
Name of Registered Waste Hauler Stevens Environmental Services		100000	IJDEP W lauler ID 18292	No.	Cubic of Was			Name of F			ndfill				
City, State Allentown, NJ						al Date /2019		City, State Morrisvi		PA					
Completed by Mahlon E. Stevens	Title Proje	ct Ma	anager		S	ignatur					Date		/201	9	

														Pri	nt Fo
1K85lag	P	NOTIFI (P	CATION	ate of Ne OF ASB to NJAC	ESTOS A	BATE	MEN.	Ţ) <u></u> 		<u>E</u>		<u>₩</u> [
Date of Notification (1) 07/31/19	+		Name of Paul C	f Building Cramer	Owner/O	perator	(2)				AUG	-	2 2	019	
Agencies Notified Type Notification			Street A	ddress		l			-	ASI	BEST		ONT		. &
EPA Initial Amended Amendmen	t #			ite, Zip Co water, N)7	-		-			O Isan V	31.10		
Emergency justification) DCA Cancellation				f Contact				11 11 11 11 11 11	Tele	ephon	a Nive	har			
			FACI	LITY INFO	ORMATIC	ON	-								1 - 1
Name of Facility Where Abatement is Takir	ng Place (3	3)					Тур	e of Facility (
Street Address							H	School (K-1 Subchapter	8 (Oth						
							×	Other (i.e. p etc.)	rivate 8	& com	mercia	l build	dings,	home	s,
City (5) Bridgewater							Squ	are Feet	# 01	f Floor	S	В	ldg. A	ge	
County (6) Somerset	3071		County (Code (7) USE ONLY)	_	Cur	rent Use (Prid me	or if bei	ng der	nolish	ed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	l No.				patement Con AD PROFE			S				
Street Address						Street 6 WI		ess DOVE CO	DURT						
City, State, Zip Code								Zip Code OOD, NJ 08	8701						
Project Manager for Monitoring Firm	25 92						hone 668-	No. ·9078		Licer 120	nse No O).			
Start Date (10) 08/12/19	Schedule 08/16/		npletion I	Date (11)				SHA Monitor AD PROFE	SSIO	NALS	3				
Occupancy Status During Abatement (Che	ck Only Or	ne)				Street		333	N I D T						
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	Period of A	Abaten / Hours	nent S			City, S	State,	Zip Code DOD, NJ 0							
Scope of Work (Check All That Apply)								•							000000
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolif				>	N G	ull Containme lini-Enclosure Blovebag Prod	e cedure						
	Is	Locat	ion			<u> </u>		Ion-Exempted	1 () an	u Non-	-FIIau	e Più	Abate	ement	
Location of		Normal ed Sole				cription							T I y	pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intena todial ((12)	nce/		. thermal	system cing, VA	is insu AT, or		(5	mount Specify or LF	/	Removal	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A		PIPE IN	ISIII	ΔΤΙΟ	N	1	50LF	•	x		te	,,,
INTERNOT					111 - 11	1002	· · · ·	//		OOLI					
		323													
Name of Registered Waste Hauler		10.000	JDEP W		Cubic			Name of	Registe	ered La	andfill				
NEWARK CARTING		10000	lauler ID 4509	No.	of Was			IESI							
City, State NEWARK, NJ					Dispos 08/16	al Date /19	9	City, State		ЛРА					
Completed by JOSEPH PERLSTEIN	Title OWN	NER			S	ignatur	е				Da 05	te /07/	19	. 2	

Ch 5890	Inv	13	NOT	IFIC	ATIO	NOF AS	RES	STOS ABAT :60 and 5 1	EMENT	D) []	G		\mathbb{V}	E	M
Date of Notification (1) 07 /	29 /	19	<i></i>		100000000000000000000000000000000000000	e of Buildin prothy Da	100	vner/Operator (2)		A	UG	- 2	2019)	
Agencies Notified ☑ EPA ☑ DOLWD ☑ DOH	Type Notific ☑ Initial ☐ Amended Amendm	d				et Address State, Zip	Code				ASBE		S CO)L &	
DCA (NJAC 5:23-8)	☐ Emergen	ncy (inc	cluding	9	_	ms Rive	1	08757			Γelephon	e Nu	mber			
	Cancella	tion				orothy Da				(
Name of Facility Where A	hatement is "	Taking	Place	(3)	FA	CILITY	NFO	RMATION	Type of Facili	tv (4)			-111			
Davis Residence Street Address		- axing	- 1400						School (K-Subchapte Other (i.e. homes, et	-12) er 8 (0 , priva	Other tha			ouildin	gs,	
City (5)									Square Feet	T	# of Floo	ors	1	Bldg. A	\ge	
Toms River									1,248		2			58		
County (6) Ocean					Cou	nty Code (7)(STA	ATE USE ONLY)	Current Use (Residence		if being o	demo	lished)			
Name of Monitoring Firm					ASCN	No.	Na	me of Abateme	ent Contractor	(9)						
Management & Envi	iro. Consul	ting S	Servi	ces			5	Shade Enviro	onmental, LL	.C						
Street Address							N.5483	eet Address								
PO Box 341								323 Cutler Av								
City, State, Zip Code Chesterfield, NJ 085	515							y, State, Zip Ci Vlaple Shade								
Project Manager for Monit	oring Firm			1	ephone		Tel	lephone No.			License	No.				
Bill Weisgarber				a dama a sa		8-4070		356-755-0099			0084	2				
Start Date (10)08 /07 /					etion D	ate (11) 19		me of OSHA N E MSL Analyt								
Occupancy Status During	Abatement (Check	only o	one)			Str	eet Address	****							
☐ Facility Closed/Vacated							2	200 Route 13	0 North							
Abatement Performed Time of Abatement:			2000					y, State, Zip Co Cinnaminsor								
Scope of Work (Check all	that apply)									=					-	
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		I	⊠ Re □ De	nova				☐ Mini-Enc ☐ Gloveba	tainment with N losure g Procedure mpted (*) and I	ā			lure			
				Loca		T				T			A	baten	ent T	ype
Location of Asbestos-Containing N TO BE ABAT IN Facility (13)	faterial (ACN ΓΕ <u>D</u>	1)	Use Ma	inten todial (12	ely by ance/ Staff?	(i.e	e., the	Description of Containing Ma ermal systems surfacing, VAT her miscellane	terial (ACM) insulation, or		Amou (Spec SF or I	ify	Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A											
Lower Level						Floor 7	Tile			-	575 9	SF.			10	
			Ц										L		Ш	
						-										
Name of Registered Waste Freehold Cartage	e Hauler		1	100	NJDEP Hauler I 1593	D No.	Cub Wa		Name of Reg			ill				
City, State	****		**********		1093	<i>3</i>		posal Date	City, State							
Freehold, NJ								8/09/2019	Morrisvil	le, P	Α					
Completed By (Print or Typ	oe)	Title						Signature				T	Date			
Christina Lynch	SVA	Vic	ce Pr	esid	ent of	Operatio	ns	Charl	3	>			7/2	9-1	19	

14 FOOT	Thi	, NC			MOIT		BES	rsey TOS ABAT 60 and 5:16		ECE		7 E		1
11000	411	11	01	J					1100	\\				Ш
Date of Notification (1) *	30 /	19						ner/Operator (ter School	2)	AUG -	2 20	19		7
Agencies Notified	Type Notifica	ation			Street	Address			- Laurence	1		was desired		士
⊠ EPA					101	Sullivan	Way	y		ASBESTOS	CONTI	ROL	2	
□ DOLWD	☐ Amended				City, S	tate, Zip C	ode		busermes	LICE	4SING		nci mentro describ	parental and
⊠ DOH	Amendme				Tre	nton, NJ	0862	28						
DCA (NJAC 5:23-8)	☐ Emergend		ding			of Contact				Telephone Nu	ımber			
(NJAC 3.23-0)	☐ Cancellati	0.000				I DeWitt				609-695-0		16		
		.5						MATION		300 300 3				
Name of Facility Where A	\hotomont is T	okina DI	200 /	21	FAC	JILIIY IN	FUR	RMATION	Type of Facility	(4)			-	-
		aking Fi	ace (3)					School (K-12					
The Village Charter	3011001								Subchapter		12)			
Street Address									Other (i.e., p	rivate and comm	nercial b	uilding	js,	
101 Sullivan Way									homes, etc.)		To	Ida A		
City (5)									Square Feet	# of Floors	В	ldg. A 65	ge	
Trenton					10	. 0	VOTA	TE 110E 0111 14	36,000	2	o Cala a all	65		
County (6)					Cour	ity Code (/)(STA	TE USE ONLY)	Current Use (Pr	ior it being dem	olisnea)			
Mercer									School					
Name of Monitoring Firm			ier (8)	ASCM	No.	- Servicesses		ent Contractor (9)					
Epic Environmenta	I Services, L	LLC							onmental, LLC					
Street Address							1	et Address						
1930 Brown Road								23 Cutler Av						
City, State, Zip Code	y, State, Zip Code							, State, Zip Co						
Newfield, NJ 08344								laple Shade	, NJ 08052					
Project Manager for Mon	itoring Firm			Tele	phone	No.	Tele	ephone No.		License No.				
Jim Eberts					56-205			56-755-0099		00842				
Start Date (10)08 /19 /	W. C.	Schedule 08			tion Da		533516	ne of OSHA M MSL Analyt						
Occupancy Status During	g Abatement (0	Check or	nly on	e)			Stre	et Address						
☐ Facility Closed/Vacate	9						2	00 Route 13	0 North					
Abatement Performed Time of Abatement: _							City	, State, Zip Co	ode					
Time of Abatement	AIVI			1 101-		CIVI	C	innaminsor	n, NJ 08077					
Scope of Work (Check al	I that apply)							П		- I' - D				
≥3 sf or ≥3 If ≥160 sf or ≥260 If			Ren					☐ Mini-End	tainment with New losure g Procedure mpted (*) and No		dure			
			100000	ocat							А	patem	ent T	уре
Location	Tribina - Anton Inno Santa			orma	lly ely by	500 500		Description of		1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	R	Z	m	Ш
Asbestos-Containing TO BE ABA		1)	Main					Containing Ma rmal systems		Amount (Specify	Remova	Repair	nca	nclo
IN Facili					Staff?	(1.0		urfacing, VAT		SF or LF)	oval	=	Encapsulate	Enclosure
(13)	N.T.	-		(12)	T	-	oth	ner miscellane	ous)				late	CD
			es	No	N/A							-	_	-
Building A First and	Second Floo	ors []	\boxtimes		Windov	v Gla	azing		100 SF				Ш
												T	\Box	П
					-						-+=	+=		
		<u> </u>		Ц										
Name of Registered Was Freehold Cartage	te Hauler			1 (22)	IJDEP I lauler II 15939	O No.	Cub Wa:	7.7.7.	Name of Registration Fairless L					
City, State					10000			posal Date	City, State					
Freehold, NJ							0	8/22/2019	Morrisville	, PA				
Completed By (Print or T	ype)	Title	-) - 1 1			l	Signature	10		Date			-
Christina Lynch		Vice	Pre	side	ent of	Operation	ns	Omed	alto	,	7/3	01	9	

MEGIN	INV!	33 _N	/ / OTI		TION		BES	TOS ABA			ME	C	E	\mathbb{V}		IF
Date of Notification (1))			(Pu		Li	الما	60 and 5:1	L-		M	Alig	- 2	201	0	
	29 / _	19	_		Gar	y Whelai	n			San Park		AUU	_	201	3	lanc.mo
Agencies Notified	Type Notifica	ation			Street	Address					100		metamananan	nii maaanaa	tartest man	1
⊠ EPA											ASI	BESTO	OS CO DENSI		OL &	
☑ DOLWD ☑	☐ Amended Amendme				100	State, Zip C				Bank		TODOS POPULACIONES	March Martin Co.	t-respons		-mirthetapen
□ DCA	☐ Emergend	- 17 Company	uding			ole Shad		J 08052								
(NJAC 5:23-8)	justification	on)				of Contac					Telephor	ne Num	ber			
	☐ Cancellat	ion				y Whelai	-				(
					FAC	CILITY IN	FOF	RMATION	-							
Name of Facility Where A	batement is T	aking F	Place	(3)					- 1	Type of Facility (
Whelan Residence										☐ School (K-12)☐ Subchapter 8		an K-12	2)			
Street Address										Other (i.e., pr				ilding	S,	
City (E)							-		+	homes, etc.) Square Feet	# of Flo	ore	RI	ig. Ag	10	
City (5) Maple Shade									1	2,160	2	015	100-00	19. A	je	
County (6)			-		Coun	ty Code 17	VSTA	TE USE ONLY)	-	Current Use (Pric		demoli	0.00	,,,		
Burlington					Coun	ity Code (/	1014	TIL USE ONE T		Residence	or in being	GSHION	31100,			
Name of Monitoring Firm	Hired by Ruila	ling Ow	mer (8)	ASCM	No	Nar	me of Ahatem	ner	nt Contractor (9)						
Eagle Industrial Hyg				510	TOOM		2000			nmental, LLC						
Street Address	910110 710001	Jiatoo,						eet Address								
359 Dresher Road							0.000	23 Cutler A	\ve	enue						
City, State, Zip Code					-		City	, State, Zip C	Coc	de						
Horsham, PA 19044	L)						N	laple Shad	e,	NJ 08052						
Project Manager for Moni	toring Firm			Tele	phone	No.		ephone No.	-		License	No.		-		
Larry Nagelberg				21	5-768	-4681	8	56-755-009	9		0084	2				
Start Date (10)	S	Schedul	ed Co	omple	tion Da	te (11)	Nar	me of OSHA	Mo	nitor						
08/07/	19	08	/	12	/	19	E	MSL Analy	tic	cal, Inc.						
Occupancy Status During	Abatement (0	Check o	only o	ne)			Stre	eet Address								
□ Facility Closed/Vacate	d During Entir	re Perio	d of A	Abater	nent	87.	2	00 Route 1	30	North						
☐ Abatement Performed							City	, State, Zip C	Coc	de						
Time of Abatement: _	AM	PM/		_PM-		AM	C	innaminso	n,	NJ 08077						
Scope of Work (Check all	that apply)								e e e e e e e e e e e e e e e e e e e							
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		No.		novati molitio				☐ Mini-En ☐ Gloveba	nclo ag	inment with Neg osure Procedure opted (*) and Nor			ıre			
				Locat									Ab	atem	ent Ty	уре
Location Asbestos-Containing I		n		lorma d Sole		Acho	etne	Description Containing M		erial (ACM)	Amo	unt	Re	Re	En	Ε̈́ρ
TO BE ABA	TED	"		ntena			., the	rmal systems	s in	sulation,	(Spe	cify	Remova	Repair	Encapsulate	Enclosure
IN Facilit	ty		Cust	odial ((12)	stan?			surfacing, VA* her miscellan			SF or	LF)	<u>a</u>		sula	ure
(13)			Yes	No	N/A	1	Oti	nei miscellan	160	us)					te	
Living Room & Laund	dry Room]		\boxtimes		Tile and	d Ma	stic			160	SF	\boxtimes			
Living Room		[\boxtimes		Sheetro	ock a	and Joint C	or	npound	84 \$	SF	\boxtimes			
Bathroom]		\boxtimes		Sheetro	ock a	and Joint C	or	npound	19 5	SF				
Name of Registered Was	te Hauler			N	JDEP \	Waste	Cut	oic Yards of		Name of Regis	tered Land	fill				
Freehold Cartage				Н	auler II		Wa 2			Fairless La	ndfill					
City, State					15939	,	-	posal Date		City, State						
Freehold, NJ								8/12/2019		Morrisville	, PA					
Completed By (Print or Ty	vpe)	Title						Signature	7			D	ate			
Christina Lynch	,,,,,	7.000	e Pr	eside	nt of (Operatio	ns	Mary	ا	1			7/2	Or A	O	
200.44						-		LIVI	100	\sim			110	11	Ų	

CK = 4870

JnvI	\mathcal{D}	(Pursuan	t to NJAC	8:60 and 12:12	0)	AUG - 2	201	9		1
Date of Notification (1)	7-19		Nam	e of Buildin	ng Owner/Operator AW SCOR	-MATION	ASEES NOTE OF	NTR	8 10	1	
Agencies Notified	Type Notification	1	Stree	et Address	/	LARKSL	AMONG 1	RO			
1 000 €	Amended Amendment	f	City.	State, Zip	Code GG HLAVR	BOR	N.J	08	57	18	
DOH DCA	justification) Cancellation	racon g	Name	e of Conta	OM		Telephone Numb		740	38	
					ORMATION	Type of Facility					
Name of Facility Where	Abatement is Takir	ng Place (3	5)			School (K-1)			
Street Address				¥.			orivate & commercia)	al build			
City (5)	TO			08	8004	Square Feet	# of Floors	1	4. gb 50		
County (6)			Cou	inty Code (7) (STATE		rior if being demolis	hed)			
Name of Monitoring Firm	MT/C Hired by Building	Owner	ASCM		EAST	nent Contractor (9	9)				
(8)	1/A				Street Address		CALC.				=
Street Address					369 City, State, Zip C	S. Spri	ICE AVE				=
City, State, Zip Code					MAP (Telephone No.		DE W.T	80	05	2	_
Project Manager for Mor			relephone		856-779		= 01	37]		_
Start Date (10)		duted Com	pletion Da	ete (11)	Name of OSHA N	MONITOR N A					_
Occupancy Status Durin	g Abatement (Che	ck only on	e)	-	Street Address						
Facility Closed/Vacate	ed During Entire Pe Outside of Norma	riod of Ab I Facility H	lours		City, State, Zip C	ode .					
Other - Describe: Scope of Work (Check a	It that apply)				☐ Full Con	ntainment with Ne	gative Pressure				
≥3 sf or ≥3 ff ≥160 sf or ≥260 ff		Renor	vation dition		Mini-End	closure	on-Friable Procedur	re			
W=10000		Is Loc						A	bate:		
	1	Norm			Description of					Enca	Enclosure
Location of Asbestos-Containing M TO BE ABAT IN Facility (13)	laterial (ACM)	Used So Mainter Custo Sta (12	nance/ xdial ff?	Asbes (i.e	tos Containing Mat thermal systems in surfacing, VAT, other miscellaneo	erial (ACM) nsulation, or	(Specify SF or LF)	Removal	Repair	Encapsulate	
Asbestos-Containing M TO BE ABAT IN Facility	laterial (ACM)	Mainter Custo Sta (12	nance/ odial ff? 2)	(i.e	thermal systems in surfacing, VAT, other miscellaned	erial (ACM) nsulation, or ous)	(Specify SF or LF)		Repair	psulate	
Asbestos-Containing M TO BE ABAT IN Facility	laterial (ACM) ED	Mainter Custo Sta (12	nance/ odial ff?	(i.e	thermal systems in surfacing, VAT,	erial (ACM) nsulation, or ous)	(Specify	Removal 😾	Repair	psulate	
Asbestos-Containing N TO BE ABAT IN Facility (13)	laterial (ACM) ED	Mainter Custo Sta (12	nance/ odial ff? 2)	(i.e	thermal systems in surfacing, VAT, other miscellaned	erial (ACM) nsulation, or ous)	(Specify SF or LF)		Repair	psulate	
Asbestos-Containing M TO BE ABAT IN Facility (13)	laterial (ACM) ED	Mainter Custo Sta (12	nance/ odial ff? 2)	(i.e	thermal systems in surfacing, VAT, other miscellaned	erial (ACM) nsulation, or ous)	(Specify SF or LF)		Repair	psulate	
Asbestos-Containing M TO BE ABAT IN Facility (13) S(V) W	laterial (ACM) ED Cr te Hauler	Mainter Custo Sta (12	nance/ odial ff? 2)	(i.e	thermal systems in surfacing, VAT, other miscellaned VAT SIT	erial (ACM) nsulation, or xus) Name of Reg	(Specify SF or LF)		Repair	psulate	
Asbestos-Containing M TO BE ABAT IN Facility (13)	laterial (ACM) ED Cr te Hauler LAC	Mainter Custo Sta (12	nance/ odial ff? 2)	(i.e	thermal systems in surfacing, VAT, other miscellaned	erial (ACM) nsulation, or ous)	(Specify SF or LF)		Repair	psulate	

CK 4870

P A Jesey D

DEGELVED AUG - 2 2019

NOTIFICATION OF ASBESTOS ABATEMENT

IN1/17	3214	(8:60 and 12:12	Control of the Contro							
Date of Notification (1)	22-19	Owner/Operator	S (2)	UST	ASBESTAS	TAC	ROL	. &	_					
Agencies Notified	Type Notification			Street Address 300 777" ST.										
D.BPA	Initial Amended		1	City State Zip Code										
DE DEP	Amendment #	nctuding		Jily. 0	SEA ISLE CITY N.J. 08293								=	
Ø DOH □ DCA	justification)		1	Name of Contact V. R. AW IC										
				FAC		ORMATION							_	
Name of Facility Where	Abatement is Takir	ng Place (3)				Type of Fact	(-12)						
	ESIDEAL	<u>E</u>		_			Subchap	ter 8 (C	other than K-12) te & commercial t	wiktir	ngs,			
Street Address				18.	10-	2.001	homes, e	etc.)	# of Floors		, Ag	ę	-	
·City (5)	CEAN C	IT			0	8770	1500		f being demolishe	<u>3</u>	2		=	
County (6) CAP				Coun USE	ty Code (ONLY)	7) (STATE		MAC	HUT	_	_		=	
Name of Monitoring Fin		Owner	A	SCMI	Yo.	Name of Abater	ment Contracto	r (9) [NC_				_	
(8)	VA					Street Address		DIQ.			2014 1000			
Street Address						369 City, State, Zip	Code	PRU		_			7	
City, State, Zip Code	•					MAI	PLE S	HA	DE N.J.	0	80	25	=	
Project Manager for Mi	onitoring Firm		Telep	hone	No.	Telephone No. 856-77	9-0478	2	013	7.		_	=	
Start Date (10)	Sche	duled Co	mpletix	on Da	te (11)	Name of OSHA	Monitor	10						
8-19-19 Occupancy Status Dur	9		19 me)	=1	1	Street Address		1						
	Dumna Entire P	enco or r		ent		City, State, Zip	Code							
Abatement Perform	ed Outside of Norma	al Facility	Hous							_			=	
Other - Describe: Scope of Work (Check	all that apply)					☐ Full Co	ontainment with	Negati	ive Pressure					
		Ren	ovatio	n		F (1-1-1-1)	nclosure bag Procedure		Triable Drawdire					
23 sf or ≥3 ff 2160 sf or ≥260 ff		Den Den				Non-E	xempted (*) and	d Non-I	riable Procedure	A	bater	nent	\neg	
·		No	ocation mally			Description	of			_	Тур		\dashv	
Locatio	n of	Used	Solety tenano	by æ/	Asbe:	tos Containing M	aterial (ACM)		Amount (Specify	R	T)	Enca	Enc	
Asbestos-Containing	Material (ACM)	Cu	stodial		(i.e.	thermal systems surfacing, VA	1,01		SF or LF)	Removal	Repair	Encapsulate	Enclosure	
IN Fact (13)	fity	10000	(12)			other miscellan	eous)			/al	7	ale	6	
(13)		Yes	No	N/A	· ·		=1=		3000 Se	X	_			
SIDI	IL	1		X		TRANSI	15	= =	الح ١٥٥٥	/ `				
SIVIY	V U							= =						
		-												
	U. Uerdae	للل			Waste	Cubic Yards of Waste	Name of	Registe	ered Landfill					
Name of Registered V			H	59	DNG DV		- City, Stat	e 200	M.U.H.	_	_			
City. State	UMUL		_	70	ośz	Disposal Date-	Wo	000	BINIE A	1.7		=	=	
WAP LE	SHAVE	MI.	1	00	056	Signature	-100		Date	_*	77	-	19	
Completed By	M	5	UP.	W		- ha	un h							

CK#4870 Jnv 13307

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

E	C	E		\mathbb{V}	M
1	AUG	-	2	2019	W

0 10 10			(1 41)			0.00 and 1211					1	
Date of Notification (1),	77-19			Name	of Buildin	g Owner/Operator ARVI W	(2) TATE 1	DRAGIOCETTALE	ONTE	ROL	8	
			-	Chron	Address	HAVEN	and a supplemental and a supplem	FIGENO	Ha			\exists
Agencies Notified	Type Notification			Sueer	Address	8 CLER	MON N	R.				
D. BPA			-	04.0	State, Zip C		-1000					\neg
DEP DEP	Amendment #		.	Спу, з			7 NIT	08210)			
	Emergency (ir	cluding	L			LERMON	1 . 31.1	Telephone Numbe		1.		\exists
DOH DOA	justification)			Name	of Contac			l ciopilono i lanci				
					MIT							-
	•		(0)	FAC	CILITY INF	ORMATION	Type of Facility	(4)				\dashv
Name of Facility Where	Abatement is Takin	g Place	(3)				School (K-1					
	RESIDENC	<u> </u>					☐ Subchapter	8 (Other than K-12)				
Street Address						200		private & commercial	buildi	ngs,		
						70:	homes, etc. Square Feet	# of Floors	T Bld	g. Ag	e	\dashv
City (5)	1 1111	11110	~ ^		()	\times 100	1500	7	1 52	50		
	V. WILL	wa	ンシ		U	COLUMN	Current like (P	rior if being demolish	1			\dashv
County (6)	/AL				nty Code (ONLY)	7) (STATE		CAUT	-/			
CAP						Name of Abote	ent Contractor (9					=
Name of Monitoring Firm	h Hired by Building (Owner		ASCM	No.	E U.S.		MIC				
(8)	JA						MOI	МС				=
Street Address						Street Address	C 5 2	LICE ALE				
						369		cut ALL				-
City, State, Zip Code						City, State, Zip C		1.01 11 7	160	-7	,	
						WAF	LE SHU		200) (=
Project Manager for Mon	nitoring Firm		Tele	phone	No.	Telephone No.	0 6117-	License No.	7 1			
,						856-7		_013				=
Start Date (10)	Sched	fuled C	omple	tion Da	te (11)	Name of OSHA	Monitor					
8-6-19		8-	16-	-19			WIA					=
Occupancy Status Durin	ng Abatement (Che	k only	one)			Street Address						
Facility Closed/Vacat	ted During Entire Pe	riod of	Abate	ment		-						=
Abatement Performe	d Outside of Norma	Facility	y Hou	rs		City, State, Zip C	ode					
Other - Describe:												=
Scope of Work (Check a	all that apply)							antivo Proceura				
	a a.a			ē		☐ Full Cor		egative Pressure				
≥3 sf or ≥3 lf			novati molitio			Gloveh	an Procedure					
≥160 sf or ≥260 lf		ĮΔ.		A.D.		Non-Ex	empted (*) and N	on-Friable Procedur			non!	\neg
		ls L	ocatio	n		30			\ ^	bater Typ		
42 9590			smally Soleh			Description of	f		-			\neg
Location Asbestos-Containing I	of Material (ACM)		tenan		Asbes	tos Containing Ma	terial (ACM)	Amount	-		四	ш
TO BE ABA			stodia	al	(i.e.	, thermal systems i	nsulation,	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
IN Facility			taff? (12)			other miscellane			SVOI	bair	sula	Sur
(13)						H14 40 1			=		te	е
		Yes	No	N/A				0.4	1	_	-	
SIDINIG				X		TRAUSIT	E	900 SF	X			_
2101116		-		<u> </u>								
				-								
						T Out 1 Vends	I Name of Day	gistered Landfill				
Name of Registered Wa	aste Hauler			UDEP !		Cubic Yards of Waste	Ivame of Reg	gistered Landilli	11			
KLTMCO	DUK		17	lauler IC	SV.	3 VDS		M.C.M.D	14			_
	214					Disposal Date	City, State		Α.Ι	_		
City, State	SHADE N	T					_ Wo	OD BINE	111	,)		
	Title		-			Signature	1	Date	- 7	7 -	-19	
Completed By	Mill -	SUL	tra	VIS	or.	_ M.	UDA			_		_

NO CH		N	ЮТІ		TION	OF ASI	ew Jersey BESTOS ABAT C 8:60 and 5:1	6)	R	1110			\mathbb{V}	LILI	
Date of Notification (1)	e of Notification (1) 07 / 30 / 19 encies Notified EPA						g Owner/Operator ((2)	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	AUG	- 2	21	019	and count have been and an	
Agencies Notified EPA	☐ Initial					Address Nest Sta	te Street		AS	BESTO LIC		ONT		L &	
☑ DOLWD					City, S	State, Zip C	Code								
		· · · · · · · · · · · · · · · · · · ·	ıdina		Tre	nton, NJ	08608								
			uding		Name	of Contac	t		Telephone N	lumber					
(10110 0.20 0)					Jos	eph Ferr	ogine		609-292-0						
					FAC	CILITY IN	FORMATION								
				(3)				Type of Facility (4.50						
Beneficial Insect Re	earing Labo	ratory						School (K-12) Subchapter 8		(12)					
Street Address	ate of Notification (1) 07							Other (i.e., pri			ouild	inas	s		
20 State Police Driv	gencies Notified EPA							homes, etc.)				3	10		
City (5)								Square Feet	# of Floors	- 1	3ldg	. Age	е		
West Trenton								21,000	2		34				
County (6)					Coun	ty Code (7)(STATE USE ONLY)	Current Use (Price	or if being den	nolished					
Mercer								Laboratory							
Name of Monitoring Firm	Hired by Build	ding Ow	mer (8	3)	ASCM	No.	Name of Abatem	ent Contractor (9)							
Matrix New World E	ngineering						Shade Enviro	onmental, LLC							
Street Address							Street Address								
26 Columbia Turno	ike. Second	Floor					623 Cutler A	venue							
	e of Notification (1) 07						City, State, Zip C	ode							
	26 Columbia Turnpike, Second Floor ity, State, Zip Code Florham Park, NJ 07932 roject Manager for Monitoring Firm Gavin Gilmore tart Date (10) Scheduled						Maple Shade								
		Tele	phone	No	Telephone No.	,	License No	1							
		100000 P	1-738		856-755-0099	9	00842								
Start Date (10)	ed Co				Name of OSHA N										
W. 157			_ /		EMSL Analyt										
Occupancy Status During	only o	ne)			Street Address				-						
				ment		200 Route 13	0 North								
						cribe	City, State, Zip C	ode			-	7000			
Time of Abatement: _	roject Manager for Monitoring Firm Gavin Gilmore tart Date (10) Sch 08 / 01 / 19 ccupancy Status During Abatement (Che Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Time of Abatement:AM			_PM-		AM	Cinnaminson								
Scope of Work (Check all	that apply)						17 17 17 17 17 17 17 17 17 17 17 17 17 1	17 DX	4 32						
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		[2 [Rer Der	novati			☐ Mini-End ☐ Gloveba	tainment with Nega closure g Procedure empted (*) and Nor							
				Locat						l A	bate	emei	nt Ty	/ре	
				orma	lly ely by		Description	KIR	•	2) ;	D T	ш	ш	
		1)		ntena			stos Containing Ma ., thermal systems		Amount (Specify	Kellioval		Repair	Encapsulate	Enclosure	
IN Facilit	-		Cust	100000000000000000000000000000000000000	Staff?	(,,,,	surfacing, VAT	, or	SF or LF)) \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		5	nsc	sur	
(13)		-	V	(12)	NI/A	-	other miscellane	eous)					late	O	
Dailer		-	Tes	No	N/A	014			2.05		a [\dashv			
Boiler		l		\boxtimes	Ш	Gasket	S		6 SF	Σ		-	Ш		
		[4] [
		[] [
Name of Registered Was	te Hauler			N	JDEP \	Naste	Cubic Yards of	Name of Regist	tered Landfill					-	
Freehold Cartage				H	auler II		Waste	Fairless La	ndfill						
City, State					15939	1	1 Disposal Date	City, State							
Freehold, NJ							08/16/2019	Morrisville,	PA						
Completed By (Print or Ty	rpe)	Title	V 1740-552				Signature			Date	-				
Christina Lynch	to 6		e Pre	eside	nt of (Operation	1	2		7/3	20	na			



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

	90		
1	HECK#	00	1
CT	1+0 #	/	1-
	1		

inco			(1.0	ii Suaiit	to NOAO	o.oo and	4 12.120	"									_
Date of Notification (1) 07/26/2019			100		Building ((2)			E	G	5	1			-
Agencies Notified	Type Notification			Street A	ddress I Amboy	Road					A	110	2	20	40	-	Contraction of the last
EPA DEP	Initial				te, Zip Co					lend len	A	UU	- 2	20	19	-11	-
DEP X DOL	× Amended Amendment	# 1			ntown N)5										
Parameter (1)	Emergency				Contact					Tel	ephone:	Turnit	er C	ONT	ROL	8	T
DOH DCA	justification) Cancellation			Ritchie	Woolst	on				60	9-298-	224	ENS	ING	workerstein and the second	and and	1
				FACI	LITY INFO									1			
Name of Facility Where	Abatement is Takir	g Place (3)				of Facility (4	4)										
Vacant Lot									School (K-1								
Street Address		11640.							Subchapter Other (i.e. p				build	inas.	nome	S.	
34 Thoms J Rhode	s industrial Dri	/e 						<u></u>	etc.)								1
City (5) Hamilton Township				11					quare Feet # of Floors Bldg. Age					је			
County (6)				County Code (7) (STATE USE ONLY)					ent Use (Pric	or if bei	ng demo	lishe	d)				1
Mercer	History D. Halisa	O (0)					Name	9.05000			(0)						-
Name of Monitoring Firm	Hirea by Building	Owner (8)		ASCM No. Name of Abatement Alpha Environs													
Street Address		233				Street P O										1	
City State 7in Code															-	-	
City, State, Zip Code					City, State, Zip Code Trenton NJ 08650												
Project Manager for Mon	nitoring Firm		Τ.	Telephor	ne No.		Teleph				Licens	e No.	35 MARIE			17000	1
,		5			609-				0122	2							
Start Date (10)		Schedule		pletion [Date (11)		Name	of OS	HA Monitor								1
07/28/2019		08/03/2		9 Street Addr													-
Occupancy Status During							Street	Addre	ess								
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Non						City, S	tate, Z	Zip Code						-		
Scope of Work (Check A	II That Apply)																1
23 sf or ≥3 lf		Пв	enova	tion] Fu	ıll Containme	ent with	Negativ	e Pr	essur	e			1
× ≥160 sf or ≥260 lf		-	emoliti					Mini-Enclosure Glovebag Procedure									
							Non-Exempted (*) and Non-Friable Pro					Proc	Procedure				
		lei	ocati	on										Abatement			1
Location	o of	N	ormall	y		De	scription	n of							ре		-
Asbestos-Containing	Material (ACM)		Sole			tos Cont	taining N	// Ateria	al (ACM)	0.77	mount				ш	ш	
TO BE AB.			odial S		(i.e.		system: cing, VA		ation,		Specify For LF)	- 1	Rem	Repair	псар	nck	
(13)			(12)				niscellar)	8870			Remova	pair	Encapsulate	Enclosure	
		Yes	No	N/A									_		te	ω	
Vacant	Lot			Х			Siding			7 Cu	bic Yar	ds	Х				
																	-
Name of Designation 1111	ata Harda-		N*	JDEP W	lacto	Cubic	Yards		Name of	Posist	arod l a-	dfill					-
Name of Registered Was	ote i laulei		Н	auler ID		of Wa			100 000 000 000	0.00		unii					
Woolston	0	7516		7	Grows Landfill			200			-						
City, State Bordentown NJ						Dispos	sal Date		City, State	ity, State Morrisville PA							
Completed by		Title					Signature		171011137		, ,	Date					1
Kelly Sisk			ct Ma	anager			1	~	1	300	- 11			2019			
,		1 , -		3-1			1-21	fil	1	1	3~	٠.	10.000			-	1

(1)		NOTI				3ESTOS ABA I C 8:60 and 5:10		MEGI	<u> </u>	\mathbb{V}	<u>E</u>	-//		
Date of Notification (1)				Name	of Building	Owner/Operator (2)					111		
07/29	/ 19					ca School		AUG AUG	- 2	201	9			
Agencies Notified Ty	pe Notification			Street	Address							1		
	Initial			421	9 North F	Route 9		ASBESTOS CONTROL &						
	Amended	~	v	City, S	state, Zip C	ode			ENSI			-		
DOH √	Amendment #			Hov	vell, New	Jersey 07731		STATE OF THE STATE	100,000,00					
□ DCA (NJAC 5:23-8)	Emergency (in justification)	Chading		Name	of Contact			Telephone Numb	er					
	Cancellation			Dea	con Gind	Esposito	732 370-3891							
	440000000000000000000000000000000000000			FAC	CILITY IN	FORMATION		1,						
Name of Facility Where Abate	ement is Taking	g Place	(3)				Type of Facility	(4)						
Saint Veronica School							School (K-12							
Street Address								8 (Other than K-12) rivate and commerc	ial hu	ilding	S			
4219 North Route 9							homes, etc.)		iai bu	nuning	σ,			
City (5)							Square Feet	# of Floors	Blo	dg. A	ge			
Howell							60,000	2		~ 50				
County (6)				Coun	ty Code (7	(STATE USE ONLY)	Current Use (Pr	ior if being demolish	ied)					
Monmouth						•	Elementary	School						
Name of Monitoring Firm Hire	ed by Building (Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)							
Pennoni Associates, Ir	ame of Monitoring Firm Hired by Building Owne Pennoni Associates, Inc.					Neuber Envir	ronmental Ser	vices, Inc.						
Street Address						Street Address								
515 Grove Street, Suite	e 1B					1100 Grosse								
City, State, Zip Code						City, State, Zip Co	ode							
Haddon Heights, NJ 08	3035					Gilbertsville,	PA 19525							
Project Manager for Monitorin	ng Firm		Tele	ephone	No.	Telephone No.		License No.						
Jeremy Humble	6	1	1	56 547		610 933-4332	!	00836						
Start Date (10) 06 / 26 / 1	//		724	Name of OSHA Monitor Neuber Environmental Services										
Occupancy Status During Ab	atement (Chec	k only o	ne)			Street Address								
☐ Facility Closed/Vacated D				ment		1100 Grosse	r Road							
☐ Abatement Performed Ou					cribe	City, State, Zip Co	ode							
Time of Abatement: 7AM-	<u>5</u> PM/PI	M	_AM			Gilbertsville,								
Scope of Work (Check all tha	t apply)													
□ >2 of or >2 If		⊠ Re	novat	ion			tainment with Ne	gative Pressure						
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			moliti				g Procedure							
						☐ Non-Exe	empted (*) and No	n-Friable Procedure						
1 10 2		10.222	Loca			_	2		Ab	atem	ent T	ype		
Location of Asbestos-Containing Mate	erial (ACM)			ely by	Ashe	Description of stos Containing Ma		Amount	Re	Repair	En	En		
TO BE ABATEL	all the second s	1 1 1 1 1 1 1 1	inten			., thermal systems	insulation,	(Specify	Removal	pair	cap	Enclosure		
IN Facility		Cus	todiai (12)	Staff?		surfacing, VAT other miscellane		SF or LF)	a a		Encapsulate	ure		
(13)		Yes	No	7-1-1		other miscellane	eous)				te			
See Attached Spreadshe	eet			\boxtimes	See Att	ached Spreadsh	neet	See Attached						
				\boxtimes										
			П							П	П			
										П	П			
Name of Registered Waste H	lauler			NJDEP	Naste	Cubic Yards of	Name of Regi	stered Landfill						
Neuber Environmental		ic.	1 1	Hauler II	D No.	Waste 40	- Annual	n County Recalm	atio	n Ce	nter			
City, State						Disposal Date	City, State							
Gilbertsville, PA						July-Aug 19	Tinton Fal	ls, NJ						
Completed By (Print or Type)	Titl	е				Signature		Dat	te					
Pat Larney	F	roject	Mar	nager		to Tak	Thu	- 1	7-2	9.	19			

State of New Jersey

State of New Jersey TIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) 7-29-19 106 FRANKLINTURNAIKE Type Notification Agency Notified 106 FRANKLIN O EPA BP Initial City, State, Zip Code D DEP ☐ Amended 配 DOL Amendment # 3 CENSING WALDERCK ☐ Emergency (including Name of Contact A DOH iustification) BRADY D DCA ☐ Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) 106 FRANKLIN TURNPIKE LLC O School (K-12) Q Subchapter 8 (Other than K-12) FRANKLIN TURNPIKE Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age 74 VRS County Code (7) (STATE USE Current Use (Prior if being demolished) ONLY BERGEN RESIDENCE Name of Monitoring Firm Hired by Building Owner Name of Abatement Contractor (9) ASCM No. Best Removal Inc Street Address Street Address 450 South River St City, State, Zip Code City, State, Zip Code Hackensack, N.J. 07601 Project Manager for Monitoring Firm Telephone No. License No. Telephone No. 201-329-7444 00388 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8-8-19 8-9-19 Omega Environmental Occupancy Status During Abatement (Check only one) Street Address 280 Huyler St O Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours City, State, Zip Code MOther-Describe: 8AM - 5PM S. Hackensack , N.J. 07606 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure 23sfor≥3ff Renovation Mini-Enclosure Q ≥ 160 sf or ≥ 260 M Demolition **®** Glovebag Procedure O Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Used Solely by Description of stos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Enospsulate Maintananna/ Enclosure TO BE ABATED Removal (i.e., thermal systems insulation, (Specify Custodial IN Facility surfacing, VAT, or Staff? SF or LF) other miscellaneous) (12)NIA No BASEMENT X 90 LF THERMAL INSULATION Name of Registered Waste Hauler NJDEP Waste Hauler Cubic Yards of Name of Registered Landfill Best Removal Inc ID No Waste 17109 ZYD CUMBERLAND COUNTY LANDFILL City, State Hackensack , N.J. 07601 8-9-19 17240 NEWBURGH Completed by Signature R. VELDRAN Estimator

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

2				op.	and,		Via U check	S.	Ma	1	i
Inv 13305		NOTI	FICATI (Pursua	State of New Jerse ON OF ASBESTO of to NJAC 8:60 at	ABATE	EMENT	C heci	< #	14	15	83
	19	100	Name	of Building Owner/O	Operator (1 7 - 11	DEC] <u> </u>	7 [
Agencies Notified Type Notification EPA Initial DEP Amended				Address 50 Bo tate, Zip Code	le i	Road	III AUG	- 2	201	19	
DEP Amended Amendment Emergency (justification) Cancellation	including		(Jyeenwic of Contact whe's Dut	h (avis head	ASRESTO Telephone Ner	rbers)	NTE	IOL 8	1
Name of Facility Where Abatement is Taking F	Place (3)		FAC	ILITY INFORMA	MON	Type of Facility	17	× <u>7</u>		0.0	
Street Address / / / /			-			School (K-Subchapter Other (i.e.	12) 8 (Other than K-12) private & commercia	l buildi	ngs, ho	omes,	etc.)
New Brunswick	<, \	1.5	-	089	101	Square Feet	# of Floors		Bldg. A	\ge	
- Middles-ex	/		(STATE	Code (7) USE ONLY		Current Use (Price	or if being demolished		<u> </u>		
Name of Monitoring Firm Hired by Building Ox	wner (8)		ASCI	M No.	Name	of Abatement Con	tractor (9)				
Street Address					Street /	ddress Six	814				
City, State, Zip Code					City, St	tate, Zip Code,	LVJ	-	08:	f J	7
Project Manager for Monitoring Firm			Telepho		Telepho 73) / License No				
Start Date (10) 8/8/19	Schedule	d Comp	letion D	ate (11)	Name o	OSHA Monitor	Inc.				
Occupancy Status During Abatement (Check On Facility Closed/Vacated During Entire Peri Abatement Performed Outside of Normal FOTO Other – Describe:	od of Aba	tement ours			City, St.		814		4 2 .		1
Scope of Work (Check All That Apply)					U	ld Din	de No	٠. (000	5%	/
≥3 sfor≥3 lf □ ≥160 sfor≥260 lf		Renovati Demoliti		\$*	DARK	Full Containme Mini-Enclosure Glovebag Proce Non-Exempted	ent with Negative Presectors edure (*) and Non-Friable		ura		
Location of Asbestos-Containing Material (ACM)	1	Location Loc	у	Des	scription o	of	() 250 1100		-	ment pe	
TO BE ABATED In Facility (13)	//	aintenan todial S (12)	15055		uning Ma ems insula VAT, or niscellane	tion, surfacing,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	- 100						ate	9.
BASEMENT			X				= 100 L/F	X			
									-		\dashv
Name of Registered Waste Hauler Novertech In C			DEP Wa	No. of Wast		Name of R	Registered Landfill	5.	7	nc	
City, State Old Bridge, NJ. Composeted by M.	Title			Dispose C9/	Date Off	Gity, Stale	rrisulle,	1	4		
Carlos Almerda	10	unt	27	3	Suature	And	Dáte	0%	7/30	0//	9