						C	1	387	<i>V</i>	, ,		A STATE OF	al social
REMEN	Sand Sand Sand Sand Sand Sand Sand Sand	AIL IN PI	POST A ST DE	State of SWOFA At to W	RRES	lersey TOS ABATI 30 and 12:12	20) 20)	MT	REC	DA	Y	1	A The
e of Noticiation (1)	1.1.		N	James of Bu	intang O	wnor/Operator	(2)	DEVOY	¥AUG -	3 A/	4	16	H
may Nothind	30 12 Typo Notifica	tion	8	Street Addr	ota O	PASSAC	ید	12000	100			131	#
PA	D Amondod		-	City, Stato,	Zip Coo	PASCAC	710	WKHIR-	MIA	影 运	May	凹	
EF OOL	Acceptance of Emergence	ry (enaludina	1	Moores of C	ONDE	100 × 8		AWI	Ambitudity Pit	initial .		J	
50H 50A	D Concellat			FACELITY	DAU	10 HOOR	<u> </u>		- Alberta - Tit		and the same	CANADA S	in the second
		rustan Maco	(3)	FACELITY	(1001, 100	PART LEAN	Тур	e of Facility (4)	The state of the s				
me of Facility Villere	Abstraction to	Tay.	<i>(~)</i>					canool (K-12) johchaptor 8 (C	other than K	12)			
and Defriences	-					5)	1.5	kinchspors (Sher (La. privs homes, etc.)	to & comins	Period Reason	20,000,0		
215 0	KOCET	15 CD	AUG				Bell	jore Feet	For Floors	Eth	85 Y		1
y(5) - TEN €0 €	ATOL					The state of the s	11	rone Uson (Prim	Z burng den	notished			
wenty (6)	2650		1	County Co		STATE USE	1	(125	STOWN	Cos.			
or Manhada P	bra Hated by Bu	Ling Owner	ASC	No.		Name of Abate	anom Ama	val fnc	:				
)						Einet Address		- Angeles in Column			-		
troot Address	WAR 11 P. W. 19 C.			•		450 So	uth	River	St				
ay, Sam, Zip Code				428		City, State, Zip Hacken	sac	k , N.	076				
rojoct Managor for h	Southenness Film	-	Tologlid	one No.		Telephone No. 201-32	320,000	1	Disonse No.				
Joloce Menerally, say or			1	LL RIAN		Marries of COSH	A Mor	thor					
Start Data (10)	12	cheduled Co	12 L	ATRA (11)		Omega	Ent	vironme	ntal				
Securation de l'acceptante de		it (Check only	(ané)			280 E	a Iuy:	ler St	22				
a Facility Clockdi/VB a Abptionent Perfor	cattle Dustria El	ntire Period o	f Abatoma Ily Hous	រាជ <u>់</u> 		C'By Stein 78	D C05	C	0760	16			
3.Office - Date of Care	70000	2) 2				. Hacker)Sa	ck, N.J	. 0700	edect store	-Adirciniar	-	
Bcope of Work (Cho)		D Roma	a Pita	C M	m-en	solution with closure ag Procedure ompted (*) and			tee		
L = 100 = er = 200	II .					Q N	an-Pa	ocubara () and	Picter 1	A LANGUAGE		Abode Tyr	
PRINCESON CONT.	scatters of althing Material SE APPATED N FOCKY . (13)	(ACM)	Morr Unad 9 Mainto Cum	miles mally- opely by manual motion (2)	A-duc GA	Description Contesting and thornest system againsting, \ other misses	Model Marie fri WAT. 4	Manager.	(30	ound ecity ar LF)	10,40,000	Repair	Encapadida
*			Y2 1	No NYA					120	SF	1	K	
125764	\$ 40		++	-	-	VAT						-	H
					1							+	+
					2,13,0	Cubic Yards	of T	Namo of Reg	istered Labidi	nu u			4
Hame of Royaldara Best REM			LID No	P Whate I		Witnester / 7		MINER	14 Euro	e pro	525	L	
- BACTION AND AND AND AND AND AND AND AND AND AN		Waster Committee				Disposal Da		CITY STATE	සුව ල	10_a	OH		
Completed by	ensacic	C3A .	070	01		Signature	-	مان ما		1		50/	1.7
I Chamaniahad bes			imato				2000	A .DIE	Mark mark	1	1/7		

State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-12

RECEIVED

-heche # LS73

Client Project #			<u> </u>						
Date of Notification (1) July 31, 2	012				Name of Building Owner/G RUTGERS, THE ST	ATE UNIV	PHUSTY30	: OLNA	Ļ
Agencies Notified EPA		Notification Initial N In Amende	Notifica	5 HONE SEC	Street Address ENVIRONMENTAL 27 ROAD 1, BLDG 4	HEALTHS 1086, LIVIN	SAFETY	DEPT.)L
DCA DOL		■ Emerge justific		ncluding	City, State, Zip Code PISCATAWAY, NJ (·	19
DEP- No Longer REQUIRED DOH)	□ Cancel		- 3	Name of Contact MICHAEL SMITH, E	NV.	Telephone	Number	
				FACILITY INF	HEALTH & SAFETY				
Name of Facility Where Abatemen				TAOLITTIN	Type of Facility (4)				
NELSON BIOLOGY, BLD Street Address	JG# 30	008			☐ School (K-12) ☐ Subchapter 8 (other that	an K-12)			
BUSCH CAMPUS					Sq. Feet: N/A #	nmercial buildi of Floors: 3			ars
	unty (6) MIDDI	LESEX		Code (7) Jse Only)	Current Use (prior if being				
Name of Monitoring Firm Hired by ATC ASSOCIATES	Bldg. O	wner (8)	ASCM 0098		Name of Contractor (9) GREENWOOD ABAT	EMENT C	ONSULTA	NTS, INC.	
Street Address 3 TERRI LANE					Street Address 268 MAIN STREET	30			
City, State, Zip Code BURLINGTON, NJ 0801	16				City State, ZipCode BUTLER, NJ 07405				
Project Manager for Monitoring Fir BRIAN KEARNY	rm	Telephone N 609-386-			<u>Telephone Number</u> 973-492-0477		License Nur 00840	<u>mber</u>	
Scheduled Start Date (10) 08/10/12		Scheduled C 08/13/12	ompletio	n Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC).			
Occupancy Status During Abate Facility Closed/Vacated Durin Abatement Performed Outsid	ng Entire	Period of Al	oatemen	t	Street Address 20-21 WARGARAW	ROAD			
Describe SOther – Describe: Shift Ho		**************************************		M	City, State, Zip Code FAIRLAWN, NJ	5			
Scope of Work (Check all that app	oly)	·			17				
$\boxtimes \ge 3 \text{ sf or } \ge 3 \text{ lf}$ $\square \ge 160 \text{ sf or } \ge 26$	60			⊠Renovation □ Demolition		Full Contain Mini-Enclos Glovebag P	sure rocedure		
Location of Asbestos-Containing Material (ACM) in Facility (13)				Description of Ast (ACM) (i.e. therm VAT, or other mis	pestos Containing Material al systems insulation, surfaci cell.)	Amour	fv SF	tement Type	ncap Enclose
C-WING CRAWLSPACE	X			TSI		9 LF	X		
						_			
Name of Reg. Waste Hauler See Hauler Below #1 & 2	NJDEP Was See Below		ID#	Cubic Yards of Waste:	30 CY		egistered Lan S. North L		
Hauler #1) Greenwood Abatemer NJDEP # 12561 Hauler #2) Newark Carting, Inc., NJ DEP # 4509			Butler, N	NJ 07405		Disposal Da 08/13/12	te .	City, State 100 New I Rd. Morris 19067 215-736-1	Ford Mill sville, Pa
Completed by (Print or Type) RAYMOND C. PEDALING	o s	itle SENIOR PI ∕IANAGER		TC.	Signature 3		<u>Date</u> July	31, 2012	25.00

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

RECEIVE

Date of Notification (1) 07/27/12 Ck: 2190 \$200				Building Ow Grove Bo			2012 ion	AUG	-3 A	M 10:	12			
Agencies Notified Type Notification EPA DEP Amended Amended	#		City, State	dress mpton Av e, Zip Code Grove, Ne		av 070	4588 &	ESTU	DS CC EHSI	NIR NG	OL.			
DOL Amendment Emergency (in justification) DCA Cancellation			Name of Mario G	Contact	5W 00130	ey or c	,00		phone N		Q	<i>y</i>	1	
Name of Facility Where Abatement is Taking Cedar Grove High School Street Address	Place (3)		FACIL	ITY INFOR	MATION	· Ty	/pe of Facility (4) School (K-12 Subchapter 8 Other (i.e. pri) B (Othe	r than K-	-12)	ding	s, h	ome	s,
90 Rugby Road City (5) Cedar Grove, New Jersey 07009							etc.) quare Feet 0,000		Floors	E	3ldg. 55+			
County (6) Essex			County C (STATE U	ode (7) SE ONLY)		- H	urrent Use (Prior igh School			ished)				
Name of Monitoring Firm Hired by Building (AHERA Consultants Inc.	Owner (8)		ASCM	No.	Li	ilich C	Abatement Control orporation	ractor ((9)			10.5511		
Street Address PO Box 385					6		Bride Avenue	Э						
City, State, Zip Code Oceanville, New Jersey 08231	-				V	Voodla	e, Zip Code and Park, Nev	w Jers	Sey 074					
Project Manager for Monitoring Firm John Smoyer	Schedule		Telephon	2-1833	9		5-8400 OSHA Monitor		01104					
Start Date (10) 08/03/12 Occupancy Status During Abatement (Chec	08/05/1	2	ipietion L	Jale (11)	J		vironmental l	Labs	LLC					
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: Fri 4pm start , Sat &	Period of A	baten Hours	nent		2 Ci	333 R	oute 22 Wes e, Zip Code New Jersey (3					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If		enova emolit				×	Full Containme Mini-Enclosure Glovebag Proce Non-Exempted	edure				ure		
	0.000	Locati	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		Daggi	ntion of						aten Typ	nent e	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntena odial (12) No		(i.e. th		stems ir g, VAT,	erial (ACM) sulation, or	(S	mount pecify or LF)	Removal	Ivabaii		Encapsulate	Enclosure
Ground Floor Hallway Ceiling	+	X	1	P	ipe Fitti	ing(O8	kM)		8	X	T	1		
E Wing Entrance Door Way							kM)		2	X		-		
Name of Registered Waste Hauler Lilich Corporation	ilich Corporation					rds Date	Name of F G.R.O.V	V.S L		dfill		1		
City, State Woodland Park, New Jersey 07424 Completed by	Title			100	08/06/12	2	Morrisvi	lle, Pe	ennsyl	Date				
Tatiana Kalenikova	Vice	Pres	ident		Ta	tes	Mulu	lu	_	07/27	/12			

REMEM	BFK - MIY	IL IN H	ARD	COPY	State of N ION OF AS ant to NJA	dew Jo BEST C 8:60	STATE OF THE PARTY			OF DA	-	1	V	Biji
Date of Notification (1) 07/27/12 Ck: 2189	\$200			Nom	of Buildin	g Own	er/Operato	1 (2)	11 A:	501	+	+	1	
Agencles Notified	Type Notification	n		Stree	Address		20.1	& LVCEMI	11430	0//01	2-	\		000000000000000000000000000000000000000
EPA DEP	X Initial Amended				Pomptoi Stato, Zip (пие	OF FLORING	es M	MAD				ķ.
DOL	Amendmo Emergenc	nt W_	200		ar Grove		Jersey	00009	-0 /	PPF	ROVI	ED	1	4
IN DOH	justification Cancellation	1)		Mari	ol Contac o Gaita			MAIN		elephone	Numbe	9	- 105 - 105	1
Name of Facility Where Ab Cedar Grove High So	atement is Tak	ing Place	(3)	FA	CILITY IN	FORM	ATION	Type of Facility	The state of the s					***
Street Address 90 Rugby Road	(_		School (K- Subchapte Other (I-e-	er 8 (O1	her (han & comm	K-12) nercial bu	illdlng:	a, hor	1108.
City (6) Cedar Grove, New Je	rsey 07009							Square Feet 20,000		of Floors		Bldg. 55+		
County (8) Essex				County (STATE	y Codo (7) E USE ONL	n		Current Use (Pr High School	rior If bo	Ing dom	olished)			
Name of Monitoring Firm HI AHERA Consultants I	red by Building	Owner (8)	ASC	M No.		Name	of Abatement Co Corporation	ntracto	r (9)				
Street Address PO Box 385								Address AcBride Aven	ие					
City, State. Zip Code Oceanville, New Jerse	11.7							ato, Zip Code Iland Park, N	ew Je	sey 07	424			
Project Manager for Monitor John Smoyer	ing Firm			609-6	ona No. 352-1833		Telepho	25-8400		Licens 0110	e No.			
Start Date (10) 07/31/12		08/04	/12	mplotion	Date (11)			rosha Monitor nvironmenta		LLC				
Occupancy Status During At Facility Closed/Vacated	During Entire	Poned of	Abatar	nont.			Street A	ddress Roule 22 We	st					
Facility Closed/Vacated Abatement Parformed (Other – Describe: 4pm	Outside of Norr	nal Facili	y Hour	8 			City, Sta	ite, Zip Code , New Jarsay	-	2	******			
Scope of Work (Check All Th	nat Apply)						1 0111011	, New Jarasy	0708					
23 of or ≥3 if ≥160 of or ≥260 if			Renova Demoil				×	Full Containme Mint-Enclosure Glovebag Proc Non-Exempted	edure:					
Location of			Locat Normol	ly		De	scription o	f	1 / NIN	1 14011-1-1	Taule Fitt	Abate		
Asbestos-Containing Mat TO RE ABATE In Excility (13)	onal (ACM)	Ma	intensitedial (12)	rool	Asbest (i.o.	therms surfs	itaining Ma I systems i icing, VAT, miscatlane	10	(5	nount pecity or LF)	Remova	Repair	Encapsulate	Endosure
Media Roon	Yes No Media Room X						2 martin	(occupied)		70.00			क्ष	9
			37,01 100	21 1116	samasm	(occubied)	<u>3</u> ∠3	50 SF	X					
		-			- 11									
Name of Registered Waste H illich Corporation	aulor		H	JDEP Wauler ID 1724		Cubic of Wa	Yards ste	Name of F		and the second	un			
City, State Woodland Park, New Je	State odland Park, New Jersey 07424						sal Date 5/12	City, State Morrisvi		nnsylv	ania			
Completed by I atiana Kalenikova	leted by Title						ignature.	mulle	lele	1	Doto 07/27/1	2		2

ASB-41 (R-05-08)

^{*} Do not use this form for appostos licensure exempled activities.

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

RECTIVE

Date of Notification (1)	\$200		1	Name of	Building O	wner/C	perator (2) ation ? (012 AUG	0	411 O	pa.				
07/27/12 Ck: 2189 Agencies Notified	Type Notification		5	Street Ad												
EPA DEP DOL	Initial Amended Amendment	#	(City, Stat	e, Zip Cod Grove, N	le			SBEST & LI	CEA	ISING	ROL	- ga			
	Emergency justification) Cancellation		1.9	Name of Mario (Contact Gaita	W. C			11	Tele	ephone N	umbe	r	-	9 11	
N DON	Carlosianon			FACIL	ITY INFO	RMATI	ION						•			
Name of Facility Where A Cedar Grove High		g Place (3)						× Sc	Facility (4 chool (K-12	!)		10)				
Street Address 90 Rugby Road		5. 1						Of et		ivate 8	& commer					s,
City (5) Cedar Grove, New	Jersey 07009							Square 20,00	0	2	Floors		55	dg. A	je ——	
County (6) Essex				County C (STATE U	Code (7) ISE ONLY)			High :	t Use (Prio School			ished)	12	10 10	
Name of Monitoring Firm AHERA Consultant		Owner (8)		ASCM	l No.				ment Cont oration	ractor	(9)					
Street Address PO Box 385								Address AcBrid	e Avenu	е						
City, State, Zip Code Oceanville, New Je	rsey 08231			-				tate, Zip dland F	Code Park, Nev	w Jer	sey 074	124				
Project Manager for Mor John Smoyer	nitoring Firm			Telephoi 609-65	ne No. 52-1833	-		one No. 225-84			License 01104					
Start Date (10) 07/31/12		Schedule 08/04/1		npletion I	Date (11)				A Monitor nmental	Labs	LLC					
Occupancy Status Durin	The 10							Address	22 Wes	t			-			
	ated During Entire ned Outside of Norr 4pm-12am					_		tate, Zip	Code V Jersey	0708	3					
Scope of Work (Check A	All That Apply)			West Spilete			1	,								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Transferred .	enova				×	Mini Glov	Containme -Enclosure /ebag Proc	edure					9	
		Is	Locati	ion			-	14011	LXCIIIptou	174	14 1101111			october more to	ment	t
Locatio Asbestos-Containing TO BE AB In Fac (13)	g Material (ACM) BATED ility	Use Mai	lormal d Sole intena odial S (12)	ely by nce/ Staff?		tos Cor therma surfa	escription ntaining N al system: acing, VA miscellar	Material of s insulat T, or		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Endosure
Media F	Room		X		9x9Flo	orTile	es&mas	tic(occ	upied)	32	250 SF	2	X.			
Name of Pasistared Wa	eto Hauler		IN	NJDEP V	Vaste	Cubi	c Yards		Name of	Regist	ered Lan	dfill	100			L_
Name of Registered Wa Lilich Corporation	iale Hauler		H	Hauler ID 8724		of W	aste /		G.R.O.\	W.S I						
City, State Woodland Park, Ne	ity, State oodland Park, New Jersey 07424						osal Date)6/12	:	City, State Morrisv		Pennsyl	vania	а			
Completed by Tatiana Kalenikova		Title Vice	Pres	ident			Signature	Em	resta	les	m	Date 07/2		12		-0.74.5

REMEMBE	R-N	lAll I	NHAI	20,000			2012	AUG -3 AI	1'10:	63	4 1.	W 000
Data of Marie	**	1	NOTIF NOTIF	ICAMON OF	Non	Jornay		selvenoff) I v	201	7 [W
Date of Notification (1) 07/27/12 Ck: 2190 5200 Agencies Notified			· —	Name of Build Cedar Grov	ing O	150 and 12	11EMEN争 5 :120)	AUG -3 AI BESTOSDO & LICENS	ING	TO L	D	1
Libra Molit	catron		- 18	tree! Address	e BC	ard of E	ator (2) ducation		1111	3/0	Z20	
DOL Amend	ment a		16-	320 Pompto	Cada	-		WAIV	FR	ΔP	PF	ROV
DOH Emerge	incy (incl	luding	No.	me of Contac	. Ne	w Jersey	07009	AATTIV		/ \1	1 1	100
Name of Facility James Al		ICB (3)		ario Gaita FACILITY INF	ORM	ATION		Lelepho	ne-Nar	nber		
Street Address							Type of Fac			_	971	
90 Rugby Road City (5) Cedar Grove, New Jersey 07000	-						etc.)	(K-12) pter 6 (Other than e. private & comm	K-12) nercial	buiklii	iga, i	iomes
Essex			Cour	ty Code (7)			20,000	# of Floors	-417	Bld). Ag	
Name of Monitoring Firm Hirod by Bulldin AHERA Consultants Inc.) Owner	(0)	ISTA	CM No	-		55- 4	Prior if being dem	ollaheo	1)	-	
Strect Address PO Box 385	-					Lilich (f Abatement Corporation	ontractor (9)		-		
City State, Zip Code Oceanville, New Jersey 08231	ceanville, New Jersey 08231						cBride Ave	⊓u⊕				
Project Manager for Monitoring Firm John Smoyer			Toleph	iane No.	\perp	Wood!: Telephor	and Park, N	lew Jersey 07				
S(srt Date (10) 08/03/12	Schedu 08/05	uled Co	mplation	552-1833 Date (11)	-	973-22 Name of	5-8400 OSHA Monito	01104				
Occupancy Status During Abatement (Cher	k Only C	One)			+	J&S En	vironmenta	I Labs LLC				
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other - Describe: Fri 4pm start . Set &			z S			2333 R	oute 22 We				-	
Scope of Work (Check All That Apply)					+	Union,	New Jersey	07083				_
≥3 sfor ≥3 If ≥160 sfor ≥280 If		Renova Demoli					Mini-Enclosur Glovebag Pro					
Location of		Locat Normal						4 / One More Inc	l ru	Abate		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Usc Ma	od Solo intensi todial 5 (12)	ily by nce/	(i.e. the	Conta mal s	oription of ining Mate yetema ins ng, VAT. o scellaneou	ulation,	Amount (Specify SF or LF)	Removal	Repai	Encapsulate	Endosure
Cround Floor Hollway Calling	Yes	No X	N/A						<u> </u>		6	क
Ground Floor Hallway Ceiling E Wing Entrance Door Way	-	444		ting(O&I		8	X					
	Janes .	X										
Name of Registered Waste Hauter Lilich Corporation						ardá 9	1	Registered Landfill	<u> </u>			
City, State Woodland Park, New Jersey 07424					sposa 1/06/1	Date 12	City, State Mosrisvi	lle, Pennsylva	nia			
Completed by Tatiana Kalenikova	Title Vice	Presid	dent		Sig	nature	Jalus	D.	ate 7/27/1	2		

Check # 1453

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

17	georg.	-	Sales.	your	8
1T	17	100	1,	B-u	
		67500	dia	1000	

Date of Notification (1)			Nam	e of Buildir	ng Owner/Operator (2) 2012	AUG -3 AM	1 0.5	3		5-500
	12		Depa	rtment of	Interior-National			1 5.0.	3		
Agencies Notified Type Notif	ication		Stree	et Address			ESTOS CO	all for	1		-
			North	neact Dea	ional Office				L		
☑ DOLWD ☐ Amend	ed			State, Zip			& LICENSI	nu -	40		
□ DHSS Amend	ment #		1 000	50 50					A D		
	ency (includ	ing			PA 19106					_	
(NJAC 5:23-8) justifica			Nam	e of Contai	ct		Telephone I	Number	-		
Cancel	lation			les Fabiar							
N C C C C C C C C C C C C C C C C C C C			FA	CILITY	NFORMATION			1	•		
Name of Facility Where Abatement is	-70	100 100				Type of Facilit					
Government Furnished Quarters	#10/Morr	istown	Nation	nal Histor	ical Park	School (K-		er Villager			
Street Address						Subchapte	r 8 (Other than K , private and con	(-1 2)		1000	
714 Jockey Hollow Road						homes, etc		imercial i	oullair	gs,	
City (5)						Square Feet	33.5		Bldg. /	Δηρ	
Morristown, NJ 07960							1			-ge	
County (6)			Соц	nty Code (7)	(STATE USE ONLY)	1,300 SF	2 Prior if being der		0 +		
Morris			-	, 0000 (1)	(OTTIL OOL ONLY)	Current use (rnor ii being der	nonsnea)			
Name of Monitoring Firm Hired by Bu	ildina Owne	er (8)	ASCM	l No	Name of About						
The second secon	manig Own	51 (0)	ASCIV	I NO.	Name of Abateme	ent Contractor ((9)				
Character & Additional Control of the Control of th					Gr Tech LLC						
Street Address					Street Address						
					576 Valley Rd #	[‡] 283					
City, State, Zip Code					City, State, Zip Ci	ode	-	1			-
					Wayne, NJ 0747	70					
Project Manager for Monitoring Firm		Tel	ephone	No.	Telephone No.		License No	,			
					973-638-1777						
Start Date (10)	Scheduled	Comple	etion Da	ate (11)	Name of OSHA M	Monitor	01127				
08 / 13 / 12	08	/ 1	6 /	12							
					Envirovision Co	nsultants,Inc					
Occupancy Status During Abatement X Facility Closed/Vacated During En					Street Address				-		
Abatement Performed Outside of I	Normal Eac	or Abate	ement		20-21 Wagaraw	Road, Bldg .#	# 34A				
Time of Abatement:AM	PM/	IIILY HOU PM	rs - De	SCRIDE AM	City, State, Zip Co	ode					
				_VINI	Fair Lawn, NJ 0	7410					
Scope of Work (Check all that apply)											
>3 sf or >3 If	∇	Renovat	ion		☐ Full Cont	tainment with N	egative Pressure	3			
⊠ ≥ 160 sf or ≥260 lf		Demoliti				g Procedure					
		<u> </u>			Non-Exe	mpted (*) and N	Ion-Friable Proc	edure	21		
		is Loca					T	TA	batem	ent T	vne
Location of	vo 11	Norma sed Sol			Description o				-	1	Ť
Asbestos-Containing Material (AC TO BE ABATED		aeu 30⊪ ∕aintena		Asbe	stos Containing Mat	terial (ACM)	Amount	Remova	Repair	200	Enclosure
IN Facility	Ci	ustodial	Staff?	(1.6	e., thermal systems i surfacing, VAT,		(Specify	lou	pair	aps	los
(13)		(12)		1	other miscellane		SIF or LF)	<u>8</u>	1	Encapsulate	J.Ce
	Ye	s No	N/A			53.000°	1 -			ro	1.1
Roof	lП		\boxtimes	Roof shi	nalos		1 100 00	X	\vdash	1	
		+=	+=-	1001 5111	ingles		1,100 SF			1	
		_ L_									
									П	П	
		To	tin						1		H
Name of Registered Waste Hauler		ALI N	TED Manual	Hauler ID No.	Cubia Vanda (11)		<u> </u>				
					Cubic Yards of Waste			11			1
Gr Tech LLC		(003378	35	TBD	T.R.R.F. Inc			estili Dwar		
City, State					Disposal Date	City, State				-	
Wayne, NJ 07470					TBD	Tullytown, F	PA	23			i
Completed By (Print or Type)	Title	-			Signature /			Date			
N.Jevtic	011/202				1/2	a- 11.	nad				
ASB-41	Owner				1/24	we	ned	07/31/20	012		
MAY 11	* Do n	ot use ti	his form	ı for asbesi	os licensure exempt	ed activities					

3887

State of How Josepy MONFROAMON OF ASSESSED AS ATTEMENT (Partness to HJAC 8:00 and 12-120)

Date of Notification (1)			Hame	of Building	Ourses/O	perator (2)	MEUG	114	1. 1			
7-31-2012				CLARK	<u> </u>				-			And the last of the last	
Agencies Notifed	Type Not Scatton			Address	·	·	201	2 AUG -3	AM	9:	5	٠.	Sarca-Ju-
D EPA	a hillal		74	CEDIAL Sala, Za C	LAKE	ROA	The second secon	The second second second	-	WATER STREET,		-	+
DEP DOL	Amended Amendment		Colly o	warrite	- 41	r in	7834	JESTOS	Col	dlik	'n		-
	Emergency (interference (inter	including	Name	of Contac	\$, 10. \	1 0	7007	Telepho	to Pin	faber	01		i
E DOM .	Cancellation		1	CLARI					1			Z	ill more and
			FA	CILITY IN	PORMATI	086					~		
Name of Facility Where /	Vhalement is Table	Fiscs (3)		92			Type of Facility					•	1
C. CLARK Sheet Address			·				School (K	me At At Money than	No.	20			41.74
74 CEDAR LAI	15 Paga 50	<u> </u>			14	patradomen	Other (i.e.	. privata & cos	inner:	ial by		, hon	186
Cay (5)	CE IWAN E.	31		ilian esta esperante.			Strings Feet	# of Flor	133	$\overline{}$	Bidn.	Aga	.
DENVILLE	7.0	•		• 1.		.					1		1
County (5)			Chunk	y Code (7)	1		Current Hee (F	vior if being d	imolis	hed)		-	-
MORRIS.			STATE	euse cia	<i>y</i> —	—.		•					
Name of Montoning Firm	i-fired by Building C	James (8)	AS	ZM No	a day to the base of the control of		of Abatament C						Ì
Street Address		PAGE TO THE TAXABLE AND ADDRESS OF THE PAGE TO THE PAG		· .			t Remova	l Inc			Participa	transport (c	
SUBBLAGGESS	185			•	•		Address	Dimen		1			1
City, State, Zip Code	THE RESERVE OF THE PERSON OF T				· .	-	O South) E	-	·	decide	
1 .	•						ckensack	70E3	0	760)1		
Project Manager for Mon	loto; Fim	-	Teleph	ione No.		Telephy	one No.		100 N				+
Cleat Date MO							-329-744		103	88			
Start Date (10) . 8-10-2012	4.540	Schoduled	The state of the s) [rosha Mondo a Envir		1	Car	T 10 10 10 10 10 10 10 10 10 10 10 10 10		- [
Occupancy Status During	Abetement (Check	8-11- (Only One)	2012			Street A		021202				~~~	1.
Facility ChandAfaca	and During Entire P	erind of Ab	dament.		sali tunis (i)		Huyler	St				:	of the last
El Absternant Performe Ell Other - Describe: _	od Outside of Norm	IL Facility H	CERS		råightun	City, St	ste, Zip Code	•	-		•	Telephone (married)	-
Scope of Wasts (Chack Al					1	Sout	h. Hacke	nsack .	N:	I.	076	06	*
	· ENDLPHANTS		1- K	*		102							
0 260 da 200 f			nollien:	38	i*.	直		ia .	the P	ream	139·		Percent
	() ()						Grunhan Pa	codure of (*) and Non	Tiles.				3
	· · · · · · · · · · · · · · · · · · ·	la Le	cation	T		èd.	PREPLANIE	A TABLE NO.	in the same		Abbt	tonon-fi	
Location	of '	Nos	mally	systemateur		cription o	ef .		١.		ħ	PB	1
Anheatos-Containing I	Material (ACM)	Maint	icialy by			itaing Ma	decial (ACM)	Amount		-		型	100
in Englis	7		iai Simi? 12)		surfaci	ing, VAT,	OF	SFORLE		Removal	Reguelr	00.	00
(13)				-	omermi	scellane.	ous)			E	4	Encepeulate	O THE
		Yes I	to. MW								Ŀ	9	.]
BASEMENT			X	THER	MACI	NSUL	Arioi	.95	LF	X			
				<u> </u>			1; 13						
							:						ad basynal by
•				1									In Italia
Name of Registered Ward	Hader		NUCEP V	Mante:	Cubic Y		Name of	Registered La			-		T
Best Remova	1 Inc.		1710		3/4 y		, Mine	erva En	ter	יים	iso	CT.	_
City, State	,			111	Disposa	d Date	City, Stat	B -	1		TOG	تاه	
Hackensack,		775-			8-11-		Wayne	esburg;	-				_
Completed SV		Esti	nator			Veldr			/Dat	1			-
R.Veldran				*	11/	1. Decor	rand		17-	51-	- 2-6	パン	لإ

CK 194

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

RECEIVE

Date of Notification (1)	7/31/2012				Name of	Building C	wner/Opera A to Z S	itor (2 Site	²⁾ Contractors, I _l	1912 016/	20	49	Q	
Agencies Notified [X] EPA [] DEP	Type of Notificat [X] Initial [] Amen	ion Notificati ded Notif dment #			Street Ad	dress e, Zip Cod	940 Par	k A	venue A	SBESTOS	AM	9: 5 (RO	ν L	
[x] DOL [x] DOH [] DCA	[] Emerg	gency (inc cation)	luding		Name of	Contact Irving	Perlstein	ood,		lephone Number) }		
Name of Facility Where A	batement is Taking	Place (3)		FACI	LITY II	VFORM.	ATION	Тур	e of Facility (4)	School (k-12)				
Street Address	7 First Street	- W							[] [x]	Subchapter 8 (oth Other (i.e., private homes, etc.)			al build	lings,
City Lakewood		County			County County County County	ode (7) JSE ONLY	7)		are feet 2000 sf rent Use (Prior if Residene	# of Floors 1 being demolished)	Bldg	. Age 6	0	
Name of Monitoring Firm		Owner (8)		ASCM No),	Name of A		ment Contractor		Inc.			
Street Address City, State, Zip Code			7144				City, State		Code	oute 9, Unit 61		755.16		
Project Manager for Moni	toring Firm		Telephone 1	Number			Telephone		nber	License N 00624		/33-12	2/1	
	8/13/12 8/15/1: cupancy Status During Abatement (Check only one)						Name of C		E.M.S.L	. Analytical				
[x] Fac	8/13/12 8/15/12 ccupancy Status During Abatement (Check only one)						City, State		1056 Sto	elton Road vay, New Jerse	y 088	54		
	I that apply) sf or ≥3 If 60 sf or ≥260 If		[] [x]	Renovat Demolit			[] [] [x]	. 1	Mini-Enclosure Glovebag Procedu	with Negative Pre are and Non-Friable I		ıre	6	
		I			l I						Abat	ement	Гуре	
Location Asbestos-Containing N TO BE AB/ in facilit (13)	n sed stodial		Ash N (i.e inst	Description pestos-Com Anterial (A) ,, thermal sulation, sur VAT, or er miscella	taini CM) syster facin r	ms ng,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E			
Exterior		Asbe	stos sidir	ng			1500 sf	X						
												4		
Name of Registered Wast	e Hauler ontracting, Inc.	N	JDEP Wast 2	te Hauler 0223	ID No.	Cubic Ya	ards of Wast	e	Name of Registe T.R.R.F.	red Landfill				
City, State Toms River	, New Jersey	Linia					City, Sta Tullyto		, Pennsylvania		Date			
Completed by (Print or T Nicholas Fe	ype) rnicola		et Manag		Signat	1/10	hos	<i>Y</i>	ter	1	-	1/201	2	
		*D	o not use	this forn	i for asb	estos licei	ısure exem	pted	activities.					

State of NJ

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

Das Floj. i	7. IVIS 12-200		ζ,	u. Juu			,	Acn	dom y .					
OK 102	587		7. m					REC	CIVE	* ***				
Date of Notification	(1)				Operator (2)		2012	PAUG -:	٠					
10 17 1/13 10	Type Notification		N GORD	ON				100 -	AMS	1:41				
Agencies Notified EPA	I ype Notification	Stree	et Address				ASB	ESTAS	20,25	,				
☐ DEP	Amended	11	PINE DR					e Lici	WOLLD TO	HOF				
☑ DOL	Amendment #: _		State, Zip (IUI	ØD.				
	Emergency (including		PPER SA e of Contac		RIVER, NJ				Telephone	695				
□ DOH	justification)							1		-				
☐ DCA	☐ Cancellation	<u> </u>	AN GOR	DON										==
				FACIL	ITY INFORM	ATION								
Name of facility wh	nere abatement is	taking place	(3)					Type o	f Facility (4) (K - 12)				
DAN GORDO	N							l F	_	pter 8 (C	ther tha	an K-1	2)	
Street Address								D	Other (F	Private/C	ommer			
	DDUIT	F F F						Sauar		Homes, e		Bld	g. Ag	e
59 PINE HILL	DRIVE	County	(6)			Count	y Code (7)	Squai	e i cci i	7011100			, ,	
City (5)		County	(0)				use only)	Curre	nt Use (Pri	or if bein	g demo	lished	d)	
UPPER SADI	OLE RIVER	BERG	EN.											
Name of Monitorin	ng Firm Hired by B	ldg. Owner (8)		ASCM No.		Name of Abatemer							
							D & S RESTO	RATION	, INC.		-			
Street Address							Street Address 20 California	Ava						
AV 30 - 2 A	-					_	ity, State, Zip Cod	ACCUPATION AND ADDRESS OF THE PARTY OF THE P		ortological designation of the last of the		-		
City, State, Zip Coo	ie						Paterson, NJ							
Project Manager fo	or Monitorina Firm		Phon	e Numbe	er		elephone Numbe			License		er		
1 Tojoot Managor To							973-345-802				0159			
Start Date (10)		Sched. C	Completion	Date (11)		Name of OSHA M							
10502.00m256.50m2 \$600.50		00/12/1	13				D & S Restor	ation, inc						
07/31/12 Occupancy Status	During Abatemen	08/12/1					20 California	Avenue						
	ed/vacated during			ent.			City, State, Zip Coo							
Abatement p	performed outside						-							
Describe: Other-Descri	ribe: _NORMAL H	OURS				_	Paterson, NJ							
	check all that apply					la securi, vilando			tainment w	//negative	e press	ure		
\boxtimes >3 sf or >3 I	f 🖂	Renovation						Mini-end		re				
≥160 sf or ≥	260 If	Demolition						Non-Ex	empted (*)	and Non	-friable			
Location of		Is location to			1 0 000		.,		Amount		e	R	E n	E
asbestos-co material (ac		staff(12)	ance/custo		Descript material		bestos-containing	+	(Specify S	SF or	m	p a	c a	C
abated in fa		Yes	No	N/A		,			LF)		v e	i	p	L
BASEMENT			7		PIPE INST	JLATI	NC	- 63	LFT					
DASEIVIENT				-			V10							
									4 9	1 - *				10
														具
				VI III. SHIPE						<u> </u>			Ш	Ш
Registered Waste D & S RESTO	Hauler	NJDEF 1350	Hauler ID		ubic Yards of YD	Waste	Name of Registe TULLYTOW	red Landfil N. RESO	URCE RI	ECOVE	RY			
City, State	KATION, INC.			sposal D			City, State					-		
PATERSON,	NJ 07503			08/01/1	2		TULLYTOW	N, PA		-				
Completed by (Pr		Title	2 100		Signature					Date 07/3	0/12			
BOGDAN JO	LDZIC	PRESIDE		r achaet	os licensure e	xempted	activities			01/3	0/12			
11 021		Do not use	uns 101111 10	1 030031	Jo Hooridaid G									

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

Pehrolett 8575

Date of Notification (1) 7-31-12			Name o	Building (Owner/C	Dperator (Healt	2) h Sy 211/2 n/	lubic3 AM				
Agencies Notified Type Notification			Street A	ddress Old Ho	ok Ro	nad	A S or	O AM	9: 4 -			
■ EPA □ DEP □ Amended ■ DOL ■ Amendment #		_	City, Sta	ite, Zip Co wood,	de	07675	& &	STOS CUM LICENSINO	ROL			
☐ Emergency (ir ☑ DOH justification) ☐ DCA ☐ Cancellation	cluding			Contact	an			Telephone	Numbe	2		
			FACI	LITY INFO	RMATI	ON	T	(4)		•		
Name of Facility Where Abatement is Taking Pascack Valley Hospital Street Address	Place (3))			30-		Type of Facility ☐ School (K- ☐ Subchapte	-12) er 8 (Other than K	(-12)			
250 Old Hook Road							図 Other (i.e. etc.)	private & comme				es,
City (5)							Square Feet	# of Floors	1	Bldg.		***************************************
Westwood			C	2-d- (7)			50,000	ior if being demo		ээу.	rs.	-
County (6) Bergen				Code (7) USE ONLY)			hospital	nor it being derrie	ilaricu)			
Name of Monitoring Firm Hired by Building Or	wner (8)		ASCN	1 No.		9-5-9-7-5-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-	of Abatement Co	N. D. A. D. B. D.		700	10,15	
Pennoni Associates, Inc.								ironmental	Co.,	Inc		
Street Address 515 Grove Street						Street A	ddress Haws Avel	nue				
City, State, Zip Code						la mariante	ate, Zip Code					
Haddon Heights, NJ 08035							ristown, 1			2 5		
Project Manager for Monitoring Firm			Telepho			Telepho	ne No. -239–9920	License	e No. 0398			
Alan Lloyd Start Date (10)	Schedule	d Cor		547-050 Date (11)	05	Market Brooks	f OSHA Monito		0370	_		
8–14–12		24-1		Date (11)				ironmental	Co.,	Inc		
Occupancy Status During Abatement (Check	Only One	e)				Street A						
Facility Closed/Vacated During Entire Pe							Haws Ave	nue				
Abatement Performed Outside of Norma Other – Describe:	1 Facility	Hours					ristown,	PA 19401				
Scope of Work (Check All That Apply)												
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	DX R	enova emoli				口 这 经	Mini-Enclosu Glovebag Pr				ıre	
	le	Locat	ion					T		Aba	temer	ıt
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	N Used Mai	ormal d Sole ntena odial (ly ly by nce/	Asbesi (i.e.	tos Cont thermal surfa	scription of taining Ma systems cing, VAT miscelland	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A								Ö	
basement-central supply		x		floor	tile	& mas	stic	230 SF	х			
1st floor-radiology	х		floor	tile	& mas	stic	50 SF	x	L			
1st floor-diagnostics lab	х		floor	tile	& mas	stic	56 SF	X			1	
1st floor-diagnostics lab	X		pipe f	Eitti	ngs		81 ea.	x	<u></u>		1	
Name of Registered Waste Hauler Newark Carting	100	IJDEP W lauler ID 4509		of Was	Yards ste	Name o	f Registered Lan SI	ifill				
City, State Newark, NJ				ave Mess	sal Date	City, Sta	_{ate} thlehem,PA					
Completed by	Title	(4) i	on o i			Signature	///		Date			
James M. Kelly	Proj	ect	Mana	ger		11/2	11		7-31	-12		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

99.			(Pursu	ant to	NJAC	8:60 and 12:1	²⁰⁾ REC	FIVED						
Date of Notification (1)	Date of Notification (1)				Name of Building Owner/Operator (2)									
07/30/2012				City of East Orange 2012 AUG -3 AM 8: C3										
Agency Notified	Type Notification				Address		2012 AUG	-3 AH 8: (13					
53 EDA	☐ Initial		2	44 City	Hall Pl	aza	A 15 50 50 50 50 50 50							
⊠ EPA □ DEP	☑ Amended			City, State, Zip Code ASBESTUS CUMTRO East Orange NI 07019 & LICENSING										
⊠ DOL	Amendment #	udina	J			J 07019	če i. i		- 40-				_	
⊠ DOH	 Emergency (inclining justification) 		Name	of Contac	ot	Telephone Number								
⊠ DCA	☐ Cancellation		(Cecil F	I. Sande	rs Jr.		<u> </u>						
				FACI	LITY INF	ORMAT10N								
Name of Facility Where	Abatement is Taking	Place (3)				Type of Facility	(4)						
Old EOPD Building					☐ School (K-1	2)	(0)							
Street Address							Subchapter	8 (Other than K-1 rivate & commer	∠) cial buildin	as.				
44 City Hall Plaza			homes, etc.)										
City (5)							Square Feet	# of Floors	Bldg. Age					
East Orange, NJ 0701	9								50+					
County (6)				County	Code (7) (STATE USE	Current Use (P	rlor if being dem	olished)					
Essex				ONLY)							A COMMISSION OF			
Name of Monitoring Fire	m Hired by Building O	wner	ASCM	No.		Name of Abatem	ent Contractor (9)						
(8)	and the control of the state o					RICI CORP								
Street Address			J			Street Address								
3 Crosswicks Street						41 LIBERTY STREET								
City, State, Zip Code			City, State, Zip Code											
Bordentown, NJ 0850	5					PASSAIC, NJ 07055								
	Project Managerfor Monitoring Firm Telephone						ne No. Telephone No. License No.							
Michael Hoodak		6	09-298	-5520		973-614-1266 00838								
Start Date (10)	Scheduled	Compl	etion Da	te (1 1)		Name of OSHA	Monitor							
August 8, 2012	October 2	3, 2012	2	RICI CORP										
Occupancy Status Durin	ng Abatement (Check	only on	e)			Street Address								
☐ Facility ClosecNacate	ed During Entire Perio	nd of Ab	atement			41 LIBERTY S								
M Abatement Performe	d Outside of Normal F	acility I	lours	City, State, 21p Gode										
□ Other - Describe						PASSAIC, NJ	07055							
Scope of Work (Check a	all that apply)					⊠ Full	Containment wit	h Negative Pres	sure					
□ ~: 3 sf or ~: 3 lf					ovation	☐ Mini	-Enclosure							
				LI Den	nolition	☐ Non	elbag Procedure -Exempted (*) ar	nd Non-Friable P	'rocedure					
		T	1. 1		1					A	bate		nt	
			Is Locat Norma					1070			i y	ре	Т	
Locati Asbestos-Containii			sed Sole	ely by	Ashe	Description estos Containing M	of aterial (ACM) Amo		nt			Ш	-	
TO BE A		ı	Maintena Custod		(i.e	thermal systems	insulation,	(Speci		Rer	R	าเลเ	ng.	
IN Fa			Staff?			surfacing, VA		SF or L	_F)	Remova	Repair	Encapsula	Enclosure	
(1:	5)	17/2	(12)					1.00		0		te	æ	
		Ye	s No	N/A						1	-	ļ	1_	
Room 0001		x			Boiler	r Insulation		480 sf		X		1	1	
Room 0001		x			Breech	ing insulation of	ff boiler	720 sf		X				
Room 0001		x		1	+	nsulation		240 sf	4 2022	x				
		X		-		sulation		80 lf		x	-			
Room 0001 Name of Registered Wa	ste Hauler	Control Control	NJDEP V	Naste F		Cubic Yards of	Name of Reg	stered Landfill					deanie	
			ID No.			Waste	0000000							
RICI CORP		2	9051			TBD	The second secon	LANDFILL						
City, State						Disposal Date	City, State	- 01						
PASSAIC, NJ					101012	TBD	MORRISVI	LLE, PA	Date			-		
Completed by	Title					Signature	12 -		1,049,000,029	201	2			
RISTO TRAJKOV	PRESIDE	NT			6221227	12-200	Cachivities		07/30/	201	4			
ASB-41	* Do	not use	this forr	n for as	pestos li	censuré exempted	activities.							

2012 AUG -3 AM 8: 63

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

07/30/2012

Location of Asbestos-Containing Material (ACM)		Locat Norma ed Sole	lly ely by	Description of Asbestos Containing Material (ACM)	Amount	Abatement Type				
TO BE ABATED IN Facility (13)	Custodial Staff? (12)			(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	(Specify SF or LF)	Remova	Repair	Encapsulat	Enclosure	
	Yes	No N/A				2	ű,	ilate	le e	
Room 0001	X			Pipe Insulation	550 lf	X				
Room 0001A	X			Pipe Fitting Insulation	18 lf	X				
Room 0002		X		Pipe Fitting Insulation	76 lf	X				
Room 0003		X		Pipe Fitting Insulation	30 lf	X				
Room 0004		X		Pipe Fitting Insulation	26 lf	X				
Room 0005		X		Pipe Fitting Insulation	212 lf	X				
Room 0006		X		Pipe Fitting Insulation	44 lf	X				
Room 0007		X		Pipe Fitting Insulation	72 lf	X				
Room 0009		X		Pipe Fitting Insulation	72 lf	X				
Room 0011		X		Pipe Fitting Insulation	38 lf	X				
Room 0012		X		Pipe Fitting Insulation	30lf	X				
Room 0013		X		Pipe Fitting Insulation	42 lf	X				
Room 0014		X		Pipe Fitting Insulation	28 lf	X				
Room 0015		X		Pipe Fitting Insulation	24 lf	X				
Room 0016		X		Pipe Fitting Insulation	26 lf	X				
Room 0017		X		Pipe Fitting Insulation	240 lf	X				
Room 0018		X		Pipe Insulation	16 lf	X				
Room 0019		X		Pipe Fitting Insulation	31 lf	X				
Room 0020		X		Pipe Fitting Insulation	36 lf	X				
Room 0022		X		Pipe Fitting Insulation	60 lf	X				
Room 0023		X		Pipe Fitting Insulation	24 lf	X				
Room 0024		X		Pipe Fitting Insulation	14 lf	X				

RECEIVED

2012 AUG -3 AM 8: 0"

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

PAGE 3 OF 4

07/30/2012

Location of Asbestos-Containing Material (ACM)		Locat Norma ed Sole	lly ly by	Description of Asbestos Containing Material (ACM)	Amount	Abatement Type				
TO BE ABATED IN Facility (13)	Maintenance/ Custodial Staff? (12)			(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure	
		No N/A		- 3 - 1 - 2 - 2		<u> </u>	ir	liate	G.	
Room 0025	-	X		Pipe Fitting Insulation	42 lf	X				
Room 0025A		X		Pipe Fitting Insulation	14 lf	X				
Room 1005		X		Pipe Fitting Insulation	60 lf	X				
Room 1006		X		Pipe Fitting Insulation	60 lf	X				
Room 1007		X		Pipe Fitting Insulation	234 lf	X				
Room 1008		X		Pipe Fitting Insulation	120 lf	X				
Room 1010		X		Pipe Fitting Insulation	60 lf	X				
Room 1011		X		Pipe Fitting Insulation	60 lf	X				
Room 1011A		X		Pipe Fitting Insulation	210 lf	X				
Room 1013		X		Pipe Fitting Insulation	168 lf	X				
Room 1014		X		Pipe Fitting Insulation	78 lf	X				
Room 1015	1	X		Pipe Fitting Insulation	30 lf	X				
Room 1016		X		Pipe Fitting Insulation	30 lf	X				
Room 1022		X		Pipe Insulation	16 lf	X	-			
Room 1023		X		Pipe Insulation	16 lf	X				
Room 1024		X		Pipe Insulation	16 lf	X				
Room 1025	T	X		Pipe Insulation	16 lf	X	-			
Room 1026		X		Pipe Insulation	20 lf	X	-			
Room 1027		X		Pipe Insulation	20 lf	X	-			
Room 1028		X		Pipe Insulation	20 lf	X			T	
Room 1029		X		Pipe Insulation	20 lf	X				
Room 1030		X		Pipe Insulation	20 lf	X				

RECEIVED

2012 AUG -3 AM 8: :4

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

07/30/2012

Location of Asbestos-Containing Material (ACM)		Locat Normal d Sole	lly ly by	Description of Asbestos Containing Material (ACM)	Amount	<i>F</i>	Abatement Type				
TO BE ABATED IN Facility (13)	Custodial Staff? (12)			(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure		
		No	N/A			2	Ť	late	9		
Room 1030		X		Pipe Insulation	20 lf	X					
Room 1031		X		Pipe Insulation	20 lf	X					
Room 2002		X		Pipe Fitting Insulation	24 lf	X					
Room 2003		X		Pipe Fitting Insulation	12 lf	X					
Room 2004		X		Pipe Fitting Insulation	8 lf	X					
Room 2005		X		Pipe Fitting Insulation	8 lf	X					
Room 2006		X		Pipe Fitting Insulation	24 lf	X					
Room 2006A		X		Pipe Fitting Insulation	8 lf	X					
Room 2007		X		Pipe Fitting Insulation	8 lf	X					
Room 2008		X		Pipe Fitting Insulation	8 lf	X					
Room 2009	1	X		Pipe Fitting Insulation	8 lf	X					
Room 2012	†	X		Pipe Fitting Insulation	12 lf	X					
Room 2014		X		Pipe Fitting Insulation	12 lf	X					
Room 2016		X		Pipe Fitting Insulation	24 lf	X					
Room 2019		X		Pipe Fitting Insulation	12 lf	X					
Room 2020		X		Pipe Fitting Insulation	24 lf	X					
Room 2021		X	,	Pipe Fitting Insulation	24 lf	X					
Room 2022		X		Pipe Fitting Insulation	12 lf	X					
Room 2023		X		Pipe Fitting Insulation	8 lf	X					

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

Date of Notification (1) 08 / 02 /	12	N	Name of Building Owner / Operator (2) NOVARTIS PHARMACEUTICALS CORPORATION										
//_		S	Street Address										
☑ EPA [of Notification Initial Amended	C	1 HEALTH PLAZA City, State, Zip Code EAST HANOVER, NJ 07936										
☑ DOH [Amendment # Emergency w Cancellation		Name of Contact KEN PIROZZI A Sta Telephone Number KOL										
	400	FAC	CILITY IN	FORMATION		-	macella	(D)					
Name of Facility Where Al NOVARTIS Street Address 1 HEALTH PLAZA	batement is Taking	Place (3)			er 8 (Other								
				bldgs., homes, etc.)									
City (5) Coul EAST HANOVER MOR	nty (6) RRIS	County Code (7)	7) Square Feet # Of Floors Building N/A N/A Current Use (Prior if being demolished)						g Age 40+				
N	III. II. BU. O	(0)	COM NO	OFFICE/RESEARCH	the second second	(0)							
Name of Monitoring Firm HILLMAN ENVIRONMENT	· () : [1] - [1]	er (8)	SCIVI NO	Name of Abatement LVI Environmental Se		(9)							
Street Address				Street Address	AVIOCO INC.								
1600 ROUTE 22 EAST City, State, Zip Code				462 Getty Avenue									
UNION, NJ 07083		Company of the Compan		City, State, Zip Code)								
Project Mngr. For Monitor MIKE NEHLSEN	ing Firm	Telephone Num 908-688-7800	ber	Clifton, NJ 07011									
Sheduled Start Date (10)	Sched. Comp	letetion Date (11)		Telephone Number		License	Number		-				
,	12 09		12										
Occupancy Status During	Abatement (Check	Only 1)		973-772-3660 00117 Name of OSHA Monitor									
	Vacated During En			LVI Environmental Services Inc.									
Abatement Abatement Per Hours - Describ	formed Outside of N	Street Address 462 Getty Avenue											
	e:MON-FRI - 7:0	00AM - 3:30PM		City, State, Zip Code									
Scope of Work (Check All	That Apply)			Clifton, NJ 07011									
☐ Demolition ☐ ≥3sf or ≥3lf ☑ ≥160 sf or ≥260		Renovation		Full Containment wi Mini - Enclosure Glovebag Procedure Non-Exempted (*) ar									
Location of	ls	10 10 10 10	Descripti			Abateme	nt Type						
Asbestos Containing Material (ACM) TO BE ABATED in Facility (13)	Normally Used Solely by Maintenance/ Custodial Staff (12)	Material (, thermal tion, surf		Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R					
B415 - MEZZANINE	YES NO N/A	PIE & FITTING			310LF		\vdash \vdash	$+$ \neg	$+$ \Box				
B415 - MEZZANINE		TSI			45SF	[/]							
						<u> </u>		4-8					
Name of Registered Waste NEWARK CARTING	e Hauler	100000000000000000000000000000000000000	ubic ards f Waste	Name of Registered IESI	Landfill								
City, State NEWARK, NJ			isposal ate	City. State BETHLAHEM, PA									
Completed by (Print or Ty STEVEN STILES	pe)	Title PROJECT MANA	AGER	Signature				Date	08/02/12				

ASB-41