Date of Notification (1) 8/2/2012	Check#2	2283		Name of TRINIT	Building C	Owner/O	Operator	(2) OTH	ALL HEALS	ALLG	RE	PM	5:	ij		
Agencies Notified	Type Notification			Street Ad	ddress sell Stre	eet			A58	ES	10S (	20	HTR	OL		
EPA  × DEP  × DOL	Initial Amended Amendment				te, Zip Coo ok, NY	de			9.	& L	ICEN	31	NG	6	d	
X DOH DCA	Emergency (in justification) Cancellation	ncluding		Name of Jason	Contact Curley					Tel	ephone I	Num	ber			
				FACIL	LITY INFO	RMAT	ION									
Name of Facility Where Trinitas Reg Medic Street Address								Тур	School (K-12 Subchapter 8	)	er than k	(-12)	)			
655 East Jersey St	reet							×	Other (i.e. pri etc.)	000000		ercia	l build	lings,	home	es,
City (5) Elizabeth, NJ 0720	6							30,	are Feet 000	3	Floors		7	dg. A 5+	.ge	
County (6) UNION				County C (STATE L	Code (7) ISE ONLY)	_			rent Use (Prior spital	if bei	ng demo	olish	ed)			
Name of Monitoring Firm Omega Environme		wner (8)		ASCM	No.				atement Cont ces Corpora							
Street Address 280 Huyler Street							Street 426		ess Street							
City, State, Zip Code South Hackensack	. NJ 07606			*					Zip Code erg, NJ 070	93		T		17.573 114		
Project Manager for Mon				Telephor	ne No. 89-8700	·	Telepi	hone I	<u> </u>		Licens 01074		).			
Start Date (10) 8/11/2012		Schedule 9/11/20	d Com				Name	of OS	SHA Monitor ces Corpora	ation						
Occupancy Status Durin	4.300						Street					+		W. D. 1950		//
	ated During Entire P			ent					above							
Abatement Perform	ned Outside of Norma 4:00 PM-12 PM-Job t	al Facility	Hours			_	City, S	State,	Zip Code			Ì				
Scope of Work (Check A	All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emoliti			,	2	M G	ull Containment lini-Enclosure liovebag Proces on-Exempted	edure	J				e	
		le	ocati	on					On Exempled	1 / 0	u Holl I	i idibi			ement	t
Locatio	n of	N	ormal	ly	039		escription	n of						Ty	ре	
Asbestos-Containing TO BE AB In Faci (13)	IATED lity		Sole ntenar odial S (12)	nce/		os Con therma surfa		Materi ns insu AT, or	2 22	(8	mount Specify For LF).		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A											(0)	
	Boiler Plant x						haust b		ching		00 SF		x			
Boiler F	Plant	X					Elbows	5		4	0 LF	+	x			
						-				-		-				
Name of Registered Wa	ste Hauler		N	JDEP W	aste	Cubic	Yards		Name of R	egiste	ered Lan	dfill				
Freehold Carting	900 (100 - 100 (100 (100 (100 (100 (100 (			auler ID 5939	No.	of Wa tbd			Waste M	1 2	gemen	t				
City, State PO BOX 5010						Dispo tbd	sal Date	•	City, State Tullytow		ndfill					
Completed by Gina Salvador		Title Office	Mar	nager		,	Signature	e	Quas.	_		Dat 8/2	te 2/201	2		

- FOR 201 OPEN F						2 8:60 and 12:12		570				3.7
Date of Nottilcation (1)	-28-11			Mar	ne of Build	ng Owner/Operato	CENT T	ECH NOCO	3/es	\/ f	- (1)	
Agencies Notified	Type Notificat	ion	-	- Ch	600	MOUNTA	IN ALE	- 2012 AUG				_
25 DOF	Amenamer  Emergency		ina	1	WRE	MY HILL	NJ	07974	<del>)</del>			
₩ DOH	justificatio	n)		Nan	nc of Conta	ict		Telephone Nu	Dor	JIV	RI	
⊠ ocv	Cancellatio	п		*		FEDERICO	2					67
				F	acility in	FORMATION						۵,
Name of Facility Where							Type of Facili	A DOMESTIC				
ALCATEL	- WCENT	TEC	#.	INC	<u> </u>		School (K-	12) v 8 (Othor man K-	12)	*		
Street Address		۸.,	_				Oner (I.a.,	private & commer		Daing	S.	
_ 600 Mov	NTAIN	444	· ·				Square Feet	l # of Floors	-	slag.	Age	
City (5) MURRAY	HILL.	NJ	0	797	14		300,000	5	_   _		+	
County (6)				Co	unty Code ( E ONLY)	7) (STATE		Prior if being demo	disned)	1		
UNION	77 TO 8 97			ASCA		Name of Abatem	OFFI			==	==	=
Name of Monitoring Firm (8) HILLMAN D				ASCI	4 14O.		RO, 11					
Speet Address	- NVIRUIVA	ENIN				Street Address				-		
1600 Ra	OTE 22 E	THST				173	KARKI	IS AVE	-			
City, State, Zip Code  UNION,			3			City, State, Zip C WOOD F	ode RIDGE	, NJ O	709	95	-	
Project Manager for Mor	storing Firm		Tel	ephone 2-686	No. -7800	Telephone No. 732-720	6-3111	License No.	6/5	-		
Start Date (10)		eduled (				Name of OSHA N		1				
OPEN		ope					N ENVIRO	MARUTAL			=	
Occupancy Status Durin						Street Address	1. 22 EA.	cT.				
Facility Closed/Vacals	ed During Entire I	refloot of tel Facill	tv Hou	ment ment		City, State, Zip Ci				=		=
Other - Describe:			,				U, NJ	07803				_
Scope of Work (Check al ≥3 af or ≥3 if ≥160 af or ≥280 if	I that apply)	⊠ Re	enovat emolitic			Mini-End	iosure g Proceduro	ogativo Pressuro				
		181	ocatk	<b></b>		☐ Non-Exe	mpred () and N	on-Friable Procedi		Vbate	ment	
		N	onnal)	,		Description of				Typ	æ	
Location of Asbestos-Containing M TO BE ABATI (N Facility (13)	sterial (ACM)	Man	Solci ntenan ustodia Staff? (12)	ce/	Asbest (I.C.,	os Conteining Mate thormal systems in surfacing, VAT, other miscellaneo	or	Amount (Specify SF or UF)	Removal	Repair	Encapsulate	E INCIOSUR 8
	# N	Yes	No	N/A							8	_
									+-	-		-
		-							+			
		+										
Name of Registered Wast	e Hauter	- 1NO		JDEP V	No.	Cubic Yards of Waste		S. INC-	1			
City State  NEWARK	_		کاے	450		Disposal Date -	City State		PA	,		
Completed By  DAY ( D T TO	Tis	P05			1	Signature	MORRES QT. THE	hi Date 12.	-28-	-44	) e	

RECEIVED

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

2012 AUG -6 PM 5: 14

SEE ATTACHED	OPEN FILL	NG.	(1 1110			^ -	«Constant	2)						$\neg$
Date of Notfleation, (1)	0		1	Name	A LC	A-T7	ar/Operator (	UCENT	TECHA	10000	re	3	ROL	-
	Type Notification	10	-	Srect	Address					LIULI	101	10	-	P
Agencies Notified	Initial				600	MO	UNTAI	U AVE			-		_	=
Ø ₽A □ DEP	M Amended	2	<b>-</b>	Chy, S	tate, Zip C	ode		As T	079	374				
₩ DOT	Amenament #	duding	٠				HILL	NJ	Telephone		==		==	4
₩ DOH	justification)			Namo	of Contact		-4=0	10.6	1 eleginorio	HOLDE				
₹ 0CV	☐ Cancellation						EDER	100	1				_	-
				FAC	ILITY INF	ORMA	TION	Type of Facility	745					$\dashv$
Name of Facility Where	Abatement is Takin	Place	(3)			1.1	_	School (K-1						1
ALCATE	2- WCEN	1	7.11	MOLC	G(5)	12		Subchaptor	8 (Othor ma	n K-12)				
Street Address		۸						Other (I.a., p		imercial i	outon	ngs.		
	OUNTANU	HIL	· ·				-	Square Feet	# of Floo	rs	BId	9 A9	5,	$\neg$
City (5) MURRAL	1 Hill,	NJ		OR				700,000 Current Uso (P	dor if bring o	Icmollsho		05	=	4
County (6)	,				owly)	(51)	A/E	OFFI						_
UNG	011		=-!	SCM		Name	e of Abatem	ent Contractor (S	1					7
Name of Monitoring Firm	Hired by Building	ASI 177	- 1	SCAL	140,		UNTP	RO. IN	c.					_
	EUVIRANI	TENTA	14-				Address					******		
Street Address R	OUTE 22	EAS	T.					KARKU!	AVE	•		_		닉
Control Code		07		3		City.	State, Zip Co	3RIDGE	NJ.					_
ONION			Toler	hone !	No.	Telep	hone No.		License	No.	_			
Project Manager for Mo	ELSON		908	688	1800		52-726		0	0615	==			=
Start Date (10)	Sched	suled Co			le (11)	Name	OF OSHA N	1AN EA	JUI CONS	HENT	×			_
Ava. 8th		UG.	67.4	·			+ Address							$\neg$
Occupancy Status Duni	ng Abatement (Cho	ck only	ane) Absteri	nent			1600	POUTE 2	2 EX	ST			<u>.</u>	
M Facility Closed/Vacal  ☐ Abelement Performe	d Outside of Norma	Facility	Hours	3	1	Crty,	State, Zp C	ode		BANK DE				
Other - Describe.	d College a						UNIO	<u>1 172</u>	01	1803			=	=
Scope of Work (Check a	all that apply)			-			E Euil Con	tainment with No	aativo Press	uro				
1		Ro	novatio	in.			MINLENC	dosure	-		-			
≥3 af or ≥3 lf ≥ 160 af or ≥260 lf			nalition				Gloveba	g Procedure empted (*) and N	on-Friable P	ософиге				$\Box$
6		isi	ocation	7							A	Typo		
		No	mally	1		0	escripsion of			-		-7		$\dashv$
Location Asbestos-Containing	of Material (ACM)	Main	Solely tenanc	ze/	Asbest	tos Co	nteining Met	ertal (ACM)	Amour (Specif	NO. 1	20		E Z	m
TO BE ABA	TED		stodial		(i,c.,	surf	al systems in acing, VAT,	or	SForU		Remova	Repair	ncapsulate	Enclosura
IN Facilit (13)	y	1 7	(12)	-		ronto	miscellaneo	xrs)		1	a l	5	ulale	5
		Yes	NO	N/A					4 45	=				
	11 =	-	-+	×		2/=7	MA PI	HE INS.	4 4		x			
3vd floor @ ST	AIR#7		$\dashv$	×		7010	1 /1		4 LF		×			
445 floor P	7 47			+		- 11	·	τ,	36 LT		×		-	
6 th \$1000 @ pa	SS Fre illers		-	×		===								
	to Haylor		TN	IDEP V		Ćubi	c Yards	Name of Rec						18
Name of Registered Wa	/ 1	1-17	HE	zular IC	No.	of W	astc 10	6.R.O	WS.11	06.				
NEWARK !	CARTING.	20	-1-	450	1	Disp	osal Date	City, State		- 0	1			
City, State	N.T.				- ==	_	.17.12	MORR	isville		4 .			
Completed By	Title						Signature	-1	01	A	. 3	2	01	V
DAVID T.T		RES					1)av	ed 1,781	a-1.	1.0/		-		

Date of Notification (1) 8/1/2012 Check#	2282			Building C				٦L.		UG -6				
Agencies Notified Type Notification			Street Add	dress hapel H	lill Ca	mpus		Δ	30E	STOS LICE	CON	TRO	DL	
EPA   Initial   Amended   Amendment #		1	City, State	e, Zip Coo Hills, N	de		<del></del>			<u> </u>	171H	<del></del>	()	Ì
Emergency (ir justification)  DCA  Emergency (ir justification)  Cancellation	ncluding		Name of 0 Sharon		ġ.		Par y Navert Lamber	= 2	Tele	phone Nu	mber		¥	
		-	FACIL	ITY INFO	RMAT	ION			1					1000 m. A
Name of Facility Where Abatement is Taking Kennedy Memorial Hospital Street Address 2201 Chapel Hill Campus	Place (3)				200.00			of Facility (4) School (K-12 Subchapter 8 Other (i.e. prietc.)	) 3 (Oth			lings,	home	? 95,
City (5) Cherry Hill, NJ 08002							Squar 250,0	e Feet 000	# o	Floors	5:	ldg. A 2	ge	
County (6) Camden			County C (STATE U	ode (7) SE ONLY)		_	Curre	nt Use (Prior pital	if bei	ng demolis	shed)	13.4		
Name of Monitoring Firm Hired by Building O Health and Safety Services	wner (8)		ASCM 117	No.	-	L. C. S. C. S. C.		tement Contr es Corpora		(9)	11			
Street Address 318 12th Street							Addres	s Street-2nd	l Flo	or				
City, State, Zip Code Hammonton, NJ 08037		9						p Code g, NJ 0709	93					
Project Manager for Monitoring Firm Jim Proctor			Telephon 609-70		met.		none No 295-1			License I 01074	No.			
0.0	Scheduled 8/17/12		npletion D	Date (11)				A Monitor es Corpora	ation	4				
Occupancy Status During Abatement (Check	Only One	e)				Street	Addres	SS						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: 4:00 PM-12:00 PM	eriod of A al Facility	baten Hours	nent				e as a State, Zi	bove ip Code	8.					
Scope of Work (Check All That Apply)												_		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit					Mir Glo	I Containme ni-Enclosure ovebag Proce n-Exempted	edure	_			e.	
	T						_ 140	LXCIIIPICU	1 / 0.	4 11011 1 110		1980 m 18	emen	t
	1000000	Locati ormal	50-500 N mm			escription	o of					Ty	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntena odial ( (12)	nce/		tos Co therm sur	intaining I al system facing, VA	Material ns insula AT, or		(	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
-Pav Area-		P	х	F	loor	Tile and	Mast	ic		6 SF	x			
						38								
			HDEDIA		T 0h	ia Vanda		Name of F	Pogist	orod Landi	511			
Name of Registered Waste Hauler Atlantic Carting		H	NJDEP W Hauler ID 6085		10000000	ic Yards /aste		IESI - Be				orp		
City, State Wayne, NJ	Za I				Disp tbd	osal Date	9	City, State Bethlehe		PA				****
Completed by Gina Salvador	Title Office	Mai	nager			Signatur	e ()	Puns		(1) 10	Date 3/1/20	12		

Date of Notification (1) 8/2/2012 Check#2	2280	N T	lame of	Building Ow AS REGIO	ner/O ONA	perator L ME	(2) DICAL	CENTER	UG	-6 P	M S	5: i	1		
Agencies Notified Type Notification	7	S	treet Ac		32	010		ASBE	ST	78 00	110				
EPA X Initial Amended Amendment	<b>#</b>	0.0		te, Zip Code eth, NJ 072		-107		å	LI	ENSI	NG	πU	2		
Emergency (i justification)  DCA  Emergency (i justification)  Cancellation	ncluding	8.96	lame of Brian A	Contact					Tele	phone N	umb	er		-	
			FACIL	ITY INFORI	MATIC	ON			-			_			
Name of Facility Where Abatement is Taking Trinitas Reg Medical Center-	Place (3)							of Facility (4) School (K-12)						85	
Street Address 225 Williamson Street							X C	Subchapter 8 Other (i.e. privetc.)	(Other	er than K- commer	12) cial	build	ings,	home	s,
City (5) Elizabeth, NJ 07206								e Feet	# of 8	Floors		10000	dg. A	ge	
County (6) UNION				Code (7) ISE ONLY)		_	Curre	nt Use (Prior pital	if bei	ng demol	ished	d)			
Name of Monitoring Firm Hired by Building C Omega Environmental	Owner (8)		ASCM	l No.				ement Contra es Corpora		(9)					
Street Address 280 Huyler Street			4				Addres 69th S						15/2		
City, State, Zip Code South Hackensack, NJ 07606				2				p Code g, NJ 0709	93		Г				
Project Manager for Monitoring Firm Adel Guerrero	*********		elephor	ne No. 89-8700		34 A S C C C C C C C C C C C C C C C C C C	none No 295-1			License 01074					
Start Date (10) 8/11/2012	Scheduled 9/11/201		pletion [	Date (11)				A Monitor es Corpora	tion			-	SA-2-11 OV		
Occupancy Status During Abatement (Check		1020			-		Addres	•			-				
Facility Closed/Vacated During Entire F			ont			same	e as a	bove							
Abatement Performed Outside of Norm  Other – Describe: 4:00 PM-12 PM-Job	al Facility H	ours			-	City, S	State, Zi	p Code			<u> </u>				
Scope of Work (Check All That Apply)	-		1/2												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novat		¥	,	2	Min Glo	Containment i-Enclosure ivebag Proce	dure					e	
	Т			,	•		_ 110	Lxcmptod	<i>)</i> un	9 7 70 11 1	T			ement	
1		ocation rmally			Do	scription	o of						Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	Solel tenan	y by ice/	, , , , , ,	s Cont ermal surfa		Material is insula AT, or		(	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
Sixth and Seventh Floor			x		Elbo	ws/Fit	tinas		1	30 LF	$\Box$	x			
Sixti did Seventi i issi		-	-												
												- 73			
										•		n)			
Name of Registered Waste Hauler		0.2639	JDEP Wauler ID		Cubic of Wa	Yards	1000	Name of R	- 1						
Freehold Carting	-		939	t	bd			Waste M	lana	gement					
City, State PO BOX 5010					bd	sal Date		City, State Tullytown	n La	ndfill					
Completed by Gina Salvador	Title Office	Man	ager		S	Signatur	e A	Tueas-			Date 8/2	) 201	2		

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Completed By

Ray Nedich

Tille

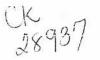
President

Montville, NJ 07045

			TIFICAT	ON OF AS	ew Jersey BBESTOS ABATEM 8:8:60 and 12:120			2012 /	TE.	C	e
Date of Notification (					ng Owner/operator	r (2)		-017	AUG	-6	,
08/0				rick Cahi				127			
Agencies Notified  EPA	Type Notificati  Initial	ion		et Address Midland	Boulevard			2	STU	15/	
IDEP	Amended			State, Zip				<u>G</u>	10	Chi	1
⊠ DOF	Amendmen Emergency				NJ 07040						1)
DOH DCA	justification	n)	-	ne of Conta			Telephone Number	er	_		=
_ DCA	Cancellatio	n	Patr	ick Cahiv	vat						
			F,	ACILITY IN	FORMATION						14.
Name of Facility Whe	ere Abatement is Ta	king Place	(3)			Type of Facilit			15-16-17/17		
Residence						School (K-	12)	2)			
Street Address						Other (i.e.,	r 8 (Other than K-1 : private & commerci	z) ial buil:	dings	,	
36 Midland Boule	evard					homes, etc	0.)				_
City (5) Maplewood, NJ 0	7040					Square Feet 2000	# of Floors		dg. A )+	ige	
County (6)			T Co	unty Code	(7) (STATE		Prior If being demoli		-	-	=
Essex		II	US	E ONLY		Residential I					
Name of Monitoring F	irm Hired by Buildir	ng Owner	ASCN	Nc.	Name of Abaten	ment Contractor (	9)				_
8) <u>n/a</u>			<u>n/a</u>		Blavor, Inc.						
Street Address					Street Address						
n/a					1 Mountain A						=
City, State, Zip Code n/a					City, State, Zip of Montville, NJ						
Project Manager for N n/a	Monitoring Firm		Telephon n/a	e No.	Telephone No. 973-265-4165	5	License No. 01049				
Start Date (10)	TSc	heduled Co		ate (11)	Name of OSHA			=	_	_	=
08/11/12		8/11/12		a.e ( ,	Blavor, Inc.						
Occupancy Status Du	uring Abatement (C	heck only o	one)		Street Address						_
Facility Closed/Va					1 Mountain A						_
Abatement Perform Other - Describe:			Hours		City, State, Zip						
	202011111111111111111111111111111111111	5111			Montville, NJ	07045					_
Scope of Work (Chec ≥3 sf or ≥3 If ≥160 sf or ≥260 If	ck all that apply)	Ren Den	ovation nolition		Mini-Er Gloveb	nclosure lag Procedure	legative Pressure	ıre			
			ocation	T		temptou ( ) a lu l	T			ment	
Locatio	on of		mally Solely by		Description of	of			Ту	pe	
Asbestos -Containin	ng Material (ACM)	Main	enance/		stos Containing Ma	iterial (ACM)	Amount			m	
TO BE AS			stodial taff?	(i.e	., thermal systems surfacing, VAT		(Specify SF or LF)	Ren	Re	Encapsulate	Eliciosura
(13			12)		other miscellane	eous)		Remova	Repair	sulat	Sul
		V	No In	112				<u>a</u>		. ab	α
Basement		Yes	No N/A		os Pipe Insulatio	on	30 LF	X			-
rascincin			- X	1.130031	os i ipo insulatio			+^		-	-
		+++		<del></del>	Topological Control of the Control o			+			_
		-		+				+-	-	-	_
Name of Registered \	Maste Hauler		NIDE	Waste	T Cubic Yards	Name of Pa	gistered Landfill			<u> </u>	_
Blavor, Inc.	vvasto i laurei		Hauler 0178		of Waste	G.R.O. W.S		100			
City, State			- 01/8		Disposal Date	City, State	J. Dandin.			-	=
City, State Montville, NJ 070	145				TBD		e, PA 19057				

Signature

Date 08/02/12



Date of Notification (1) 07/11/12	100,7	200.00			Building Owner/ University	Operato	2012 AUG -	-6 PM	3: 4	0	
Agency Notified Type No	tificati	on		Street Ad	dress		* C T T T T T		1		
EPA	_ Initi	al		P.O. box			453EST	<u> </u>	ITRO	<u>L</u>	
DEP	Comme	tificat	ion		te, Zip Code		& LI	CENSIA	€Ğ		
DCA x	-	nded			NJ 08543						
DOH		tificat cellati		Name of C			Tele	phone Nu	mper		
	_Can	cenau	1011	I I I I I I I I I I I I I I I I I I I	TY INFORMA	TION	10	- •	-		
Name of Facility Where Abatement is Ta	ldaa I	Ness	(2)	FACILI	ITT INFORMA	HON	Type of Facility (4)		_		
Princeton University — 20 Washington Street Address		lace	(3)				School (Ki Subchapter x Other (i. c.	8 (Other			
20 Washington Road							buildings,			. Ciai	
							Square Feet # of	Floors	Bldg.	Age	
City (5)	Cou	nty (6	6)		County Code		100000	4	50+		
Princeton					(STATE USE ONL	Y)	Current Use (Prior if University	being dem	olished	)	
Name of Monitoring Firm Hired by Buil ATC Associates, Inc	ding (	wner	(8)		ASCM No.		of Abatement Contract iated Specialty Contract				
Street Address 3 Terri Lane				10		11	Address Crue Avenue				
City, State, Zip Code Burlington NJ 08016		merica Ann				1022 575375	State, Zip Code Mills, PA 19342				
Project Manager of Monitoring Firm Mike Keehn				Telephone 609-386-8		LUS 0500000000000000000000000000000000000	hone Number 64-9622		Licence 1103	e Numb	er
Scheduled Start Date (10)	Sch	ed Cor	npletion Date	e (11)	Name	of OSHA Monitor				-	
07/23/12		Joen		10/01/12			rion Labs				
Month/Day/Year				onth/Day/Ye	ar		CIVIDOR MENANCODO				
Occupancy Status During Abatement (C						100000000000000000000000000000000000000	Address				
x Facility Closed/Vacated During I				oatement			Progresive Drive	-			-
Abatement Performed Outside o			cility			1	State, Zip Code				
Hours - Describe: 7:00 AM	- 5:30	PIVI				Bensa	lem PA 19020				
Other - Describe:						11	Full Containment wit	h Magatina	Dagger		
Scope of work (Check all that apply) Demolition			x	Renovatio	\n	x	Mini - Enclosure	ii regative	I I Coou		
>3 sf or >3 if			A	Renovatio	,,,	x	Glovebag Procedure				
x >160 sf or >260 lf						x	Non-Friable Procedu	re			
	Т	Is		Τ			1		atement	Type	
Location of	La	catio	n	Des	cription of					E	E
Asbestos - Containing	No	rmall	v	C0400041035040600	os-Containing		Amount	R		N	N
Material (ACM)	38.0	sed			erial (ACM)		(Specify SF or	E M	R	C	L
TO BE ABATED		olely Main			nermal systems		LF)	0	P	P	o
In Facility (13)	237	ance			r miscellaneous)		l DAT	v	A	s	S
1177	10000	stodia						A	I	U	U
		ff (12	_					L	R	L	R
Ground Floor - exterior outside room 1	Yes	No x	N/A	window ca	nlk		170 LF	x	-		E
1st Floor - exterior outside room 101 G		window ca		-	170 LF	x			-		
2nd Floor - exterior outside room 201 G		window ca	ulk		170 LF	x		25 to 10.			
throughout		x		pipe insula	ation		100 LF	x			
Name of Registered Waste Hauler	1		1207230400	EP Waste	Cubic Yards		Name of Registered I	andfill		T.	
Horizon Disposal			Haul	er ID No.	of Waste		GROWS				
City, State			9 1	Agran a	Disposal Date		City, State				
Trenton NJ					As needed	101	Morrisville PA	: 			
Completed By (Print or Type) Mark Goshow							MarkeSuch	m		Date S-J	75
4 DC 41		100		Walter Street					10.00		-

### STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT

(PURSUANT TO NJAC 8:60-7 AND 12:120-7 Name of Building Owner / Operator (2) [\* Date of Notification (1) paramus chrysler jeep dodge 2012 15 Street Address Type of Notification 314 route 4 west Agencies Notified City, State, Zip Code Initial **EPA** paramus nj 07652 DEP Amended Name of Contact Amendment # 1 DOH Emergency w/ justification melisa michaels 1 DOL Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) paramus chrysler jeep dodge School (K-12) Subchapter 8 (Other than K-12) Street Address Other (I.e., private & cmmercial 7 314 route 4 west bldgs., homes, etc.) **Building Age** # Of Floors Square Feet County (6) County Code (7) City (5) 20+ 10,000 bergen paramus Current Use (Prior if being demolished) car dealer ASCM NO Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) gza LVI Environmental Services Inc. Street Address Street Address 55 lane rd 462 Getty Avenue City, State, Zip Code City, State, Zip Code fairfield nj 07004 Project Mngr. For Monitoring Firm Telephone Number Clifton, NJ 07011 973 2487816 ben sallemi License Number Sched. Completetion Date (11) Telephone Number Sheduled Start Date (10) 12 8 00117 973-772-3660 Name of OSHA Monitor Occupancy Status During Abatement (Check Only 1) LVI Environmental Services Inc. Facility Closed/Vacated During Entire Period of Street Address Abatement Abatement Performed Outside of Normal Facility 1 462 Getty Avenue Hours - Describe: \_\_ 8am to 4 pm City, State, Zip Code Other - Describe: \_ Clifton, NJ 07011 Scope of Work (Check All That Apply) Full Containment with Negative Pressure 1 Renovation Demolition Mini - Enclosure 1 >3sf or >3lf Glovebag Procedure ≥160 sf or ≥260 lf Non-Exempted (\*) and Non-Friable Procedure 1 Abatement Type Description of Is Location of Asbestos - Containing Location Asbestos Containing N N R E Amount Material (ACM) Normally С C (Specify M E (I.e., thermal systems TO BE ABATED Used SF or LF) 0 P insulation, surfacing, VAT, in Facility Solely P 0 V A or other miscellaneous) by Main-(13)s S 1 A tenance/ U Custodial R Staff (12) YES NO N/A 200 sf duct tar paper roof level 4 sf 1 pitch pockets roof level Name of Registered Landfill NJDEP Waste Cubic Name of Registered Waste Hauler Hauler ID No. Yards I.E.S.I. NEWARK CARTING 4509 of Waste Disposal City. State City, State BETHLAHEM, PA 18015 Date NEWARK, NJ Date Signature Completed by (Print or Type) Title VICE PRESIDENT PAUL MAST 08/03/12

Date of Notification (1) 6 / 15 / 2012				Building Ov hrysler jeep		ator (2)	HE(	JE1	VEN	
			Street Add	dress		20		- 2 1		
	otification		314 route	4 west e, Zip Code			12 AUG	6-	₩ C. 2	
☐ EPA ☐ ☐ DEP ☑	Initial Amended		paramus n		Š.	2		- 1	11 3.5	4
☑ DOH	Amendment #	3	Name of C			ేస	Delephoi	је Мип	ber.	
DOL	Emergency was Cancellation	/ justification	melisa mi	ichaels				L18.1	ING	L
		F	ACILITY IN	FORMATIC	ON					72
Name of Facility Where Abaten	nent is Taking I	Place (3)		Type of Fa	acility (4)					
paramus chrysler jeep dodge	3					exorem				
Street Address				님	School (K	-12) er 8 (Other	than K 1	)\		
314 route 4 west						private &				
					bldgs., ho	mes, etc.)				
City (5) County (6	5)	County Code	(7)	Square Fe	\$190000000 T	# Of Floor	S	Build	ing Age	0+
paramus bergen					000 se (Prior if	heing dem	olished)	+	21	JŦ
				car dealer		Joing doin	olioniou,			
Name of Monitoring Firm Hired	by Bldg. Own	er (8)	ASCM NO	Name of A	batement	Contractor	(9)			
gza				LVI Enviro	nmental Se	wices Inc				
Street Address				Street Add		71003 IIIO.				
55 lane rd										
City, State, Zip Code				462 Getty						
fairfield nj 07004 Project Mngr. For Monitoring F	irm	Telephone Nu	ımher	City, State	, Zip Code					
ben sallemi		973 2487816	illibei	Clifton, NJ	07011					
Sheduled Start Date (10)	Sched. Comp	etetion Date (1		Telephone	Number		License	Numbe	r	
08 / 06 / 12	_8/		12	973-77	2-3660				00117	
Occupancy Status During Abat	tement (Check	Only 1)			SHA Moni	tor			00111	
☑ Facility Closed/Vaca				-	nmental Se	vices Inc.				
Abatement Perform	ad Outside of N	armal Facility		Street Add	dress					
Abatement Performe Hours - Describe:		ormal Facility		462 Getty	Avenue					
Other - Describe:				City, State	, Zip Code					Www.
				Clifton, NJ	07011					
Scope of Work (Check All That	Apply)									
☐ Demolition	V	Renovation			inment wit	h Negative	Pressure	,		
				Mini - Enc						
☐ ≥160 sf or ≥260 lf			님		Procedure pted (*) an		ble Proce	dure		
/										
Location of	Is		Descripti				Abateme	nt Typ		le
Asbestos Containing	Location Normally	As As	sbestos - C Material (			Amount	R E	R	E	E N
TO BE ABATED	Used	(1.	.e., thermal			(Specify	М	E	С	С
in Facility	Solely		lation, surf		Γ,	SF or LF)	0	P	A	L
(13)	by Main- tenance/	or	other misc	ellaneous)			V A	A	s	o s
	Custodial						Ĺ	R	Ū	U
	<u>Staff (12)</u>								L	R
roof level	YES NO N/A	duct tar paper				200 sf	7		Г	
roof level		pitch pockets				4 sf	V			
		F TOTAL TOTA								
		N. IDER III	16 :	In .				ΙЦ		
Name of Registered Waste Hau NEWARK CARTING	lier	NJDEP Waste Hauler ID No.		I.E.S.I.	Registered I	_anomii				
			of Waste							
City, State			Disposal	City. State		1.5				
NEWARK, NJ			Date	BETHLAH	EM, PA 180	15				
Completed by (Print or Type)		Title			Signature				Date	
PAUL MAST		VICE PRESIDE	ENT							07/27/12
ASB-41						-	-			01121112

Date of Notification ( 6 / 15	1) / 2012					Building O	wner / Ope	rator (2)	I to Seaso	See See	YEL	and a second	
<del>-   / -   /</del>	/_2012				Street Ad		doage	2	010	-			
Agencies Notified	Type of N	otificati	on		314 route			1	012 AUG	-6	PM 5.	21	
☐ EPA		Initial			City, Stat	e, Zip Code	)					4	
☐ DEP	V	Amend	led		paramus r	and the second second		5	SHERT	710. 6			
☑ DOH		Amend			Name of	200000000000000000000000000000000000000			Telepho	ne Nun	nben   K	OL	
☑ DOL		Emerg		// justification	melisa m	ichaels					ING	CA	
		Caricei	lation	F	ACILITY IN	FORMATION	N.			-		祖阳	
					AOILITTII								
Name of Facility Whe paramus chrysler jeep		nent is T	aking	Place (3)		Type of F	acility (4)						
paramus chrysler jeep	aoage						School (K	-12)					
Street Address						1 8		er 8 (Other	than K-12	2)			
314 route 4 west								, private &					
								mes, etc.)					
City (5)	County (6	)		County Code	(7)	Square Fe		# Of Floor		Build	ing Age		
paramus	bergen						,000		- I' - I IV	4	2	0+	
				<u></u>		-	se (Prior if	being dem	olished)				
Name of Monitoring	Eirm Hirod	by Blde	Own	or (9)	IASCM NO	car dealer	Abatement	Contractor	(0)				
gza	riiii mieu	ny biu	j. Own	er (o)	ASCIVI NC	Name of A	Abatement	Contractor	(3)				
5						LVI Enviro	nmental Se	rvices Inc.					
Street Address					-	Street Ad	dress						
55 lane rd													
City, State, Zip Code					1	462 Getty							
fairfield nj 07004				-		City, State	e, Zip Code						
Project Mngr. For Mo	nitoring F	irm		Telephone Nu	mber	01:0 - 11	07044						
ben sallemi	(40)	10-1-1	C	973 2487816	41	Clifton, NJ		-	License	Marinaha			
Sheduled Start Date	. ,	A		letetion Date (1	12	relephon	e Number		License	Numbe	er		
$\left  \frac{7}{30} \right $	/12	8	_/	//		973-77	72-3660				00117		
Occupancy Status D	uring Abat	ement (	Check	Only 1)		100000000000000000000000000000000000000	SHA Moni	tor		_			
				tire Period of			nmental Se						
Abatemen	t					Street Ad	dress						
				lormal Facility									
Hours - De						462 Getty							
Other - De	scribe:						, Zip Code						
Scope of Work (Chec	k All That	(vlaaA	-			Clifton, NJ	0/011	A AND DESCRIPTION OF THE PARTY					-
☐ Demolition	7.5			Renovation			inment wit	h Negative	Pressure	9			
						Mini - End							
☐ ≥160 sf or	≥260 lf						Procedure pted (*) an		ble Proce	duro			
					(Y)	NOII-LACII	ipteu ( ) aii	u Non-Fria	DIG FIOCE	uuie			
Location of		Is	S		Descript	ion of			Abateme	nt Typ	е		
Asbestos Conta	ining	Loca	tion	As	sbestos - C				R	I	ĮΕ	E	
0.000 0.000	. 20	Norn			Material			Amount	E	R	N	N	
TO BE ABAT	ED	Us			e., therma		_	(Specify	M	E	C	C	
in Facility		Sol				facing, VA		SF or LF)		P	A P	L	
(13)		by N tena		or	otner misc	ellaneous)			V A	A	s	o s	
		Custo		l			4		Ĺ	R	ű	ű	
		Staff							_		L.	R	
		YES N	Q N/A										
roof level		1 C		duct tar paper				200 sf	V				
roof level		1		pitch pockets				4 sf	<b>V</b>				
Name of Registered V	Naste Haul	ler		NJDEP Waste	Control of the contro		Registered	Landfill					
NEWARK CARTING				Hauler ID No. 4509	of Waste	I.E.S.I.							
City, State				4000	Disposal	City. State							
NEWARK, NJ					Date		ЕМ, РА 180	15					
75							40		-				
Completed by (Print	or Type)			Title			Signature	ALMANIA AND AND AND AND AND AND AND AND AND AN			Date		
PAUL MAST				VICE PRESIDE	:NT							0-	7/10/12

Date of Notification (1	2012				Name of	Building O	wner / Ope	erator (2)		YC	J.		
$\frac{6}{-6} / \frac{15}{-15} /$	/_2012				Street Ac	chrysler jee	p dodge			-			
Agencies Notified	Type of N	otifica	tion		314 route			2012 4	UG -6	DM E	5: 5L		
☐ EPA		Initia				te, Zip Cod	е	€015 H	س- دال	-111-	1.62		
DEP DEP	V	Amer			paramus								
☑ DOH ☑ DOL			ndment a		Name of			17 (200	Telenkin			100	
DOL DOL	H		rgency w ellation	v/ justification	melisa m	nichaeis		ď	4		- (1)	2	
			0	The second second second	ACILITY II	NFORMATI	ON					0.200	
Name of Facility Wher	re Abaten	nent is	Taking	Place (3)		Type of F	acility (4)						-
paramus chrysler jeep o			,	1 1000 (0)		1,000	domey (1)						
							School (F						
Street Address 314 route 4 west								ter 8 (Other					
314 Toute 4 West								., private & omes, etc.)	cmmerci	al			
City (5)	County (6	)		County Code	(7)	Square F		# Of Floor	rs	Build	ing Age		* 18
	bergen			5		10	,000		1		20	+	
								f being dem	olished)	1			
Name of Manitorina E	11500	I DI		7.5	1.201111	car dealer							
Name of Monitoring Fi gza	irm Hirea	by Bi	dg. Own	ier (8)	ASCM NO	Name of	Abatement	Contractor	(9)				
gza						LVI Enviro	nmental Se	ervices Inc.					
Street Address						Street Ad	-	STVICOU IIIC.	***************************************				
55 lane rd													
City, State, Zip Code						462 Getty							
fairfield nj 07004						City, State	e, Zip Code	9					-
Project Mngr. For Mon ben sallemi	nitoring F	irm		Telephone Nu 973 2487816	ımber	Cliffon N	07044						
Sheduled Start Date (1	10)	Scher	d Comr	eletetion Date (	11)	Clifton, No	e Number	***	License	Numbe			
7 / 23 /	12	36116	8 8	30	12	relephon	e Number		Licerise	Numbe	r		
			/			973-7	72-3660				00117		
Occupancy Status Dui							OSHA Mon	1000					
		ted Du	iring Ent	tire Period of			nmental Se	ervices Inc.					
Abatement						Street Ad	dress						
Abatement Hours - Des				Normal Facility		462 Cotty	Avonuo						
Other - Des						462 Getty	e, Zip Code						
						Clifton, NJ							
Scope of Work (Check	All That	Apply)	)										
☐ Demolition			V	Renovation	П	Full Conta	ainment wi	th Negative	Pressur	e			
≥3sf or ≥3lf						Mini - End		mogativo					
	260 If						Procedure						
					V	Non-Exen	npted (*) ar	nd Non-Fria	ble Proce	edure			
Location of			ls		Descript	tion of			Abateme	ent Type			
Asbestos Contair	ning		cation	A:		Containing			R	1	E E	ĮΕ	
	5.5	Nor	rmally		Material			Amount	E	R	N	N	
TO BE ABATE	₽	1070	sed		.e., therma		2	(Specify	M	E	C	C	
in Facility		6,736	olely			facing, VA		SF or LF)	0	P	A	L	
(13)		300	Main-	or	other misc	ellaneous)			V	A	P	0	
	1		ance/ stodial						A L	l R	S U	S	
		107907070	ff (12)						_		Ľ	R	
		YES	NO N/A									_	
roof level	roof level							100 sf	<b>V</b>				
roof level		V		pitch pockets				4 sf	7				
V(B-14-1W				NIDED W.	16	T							
Name of Registered Wa NEWARK CARTING	aste Haul	er		NJDEP Waste Hauler ID No.	British Comment	I.E.S.I.	Registered	Landfill					
NEVIARR CARTING					of Waste	I.E.S.I.							
City, State					Disposal	City. State	1		-				
NEWARK, NJ					Date		EM, PA 180	015					
								S-0000					
Completed by (Print or	Type)			Title			Signature				Date		
PAUL MAST				VICE PRESIDE	=NT						1	0-	7/00/40
											1	U/	7/03/12

ASB-41

Date of Notification (1							Owner / Ope	erator (2)	n	1 13	LIVE		
$\left  \frac{-6}{-} \right  \frac{15}{-}$	/_2012					s chrysler je Address	ep dodge						
Agencies Notified	Type of N	Votifica	ation		_	e 4 west			2012	Alig -	6 PM	5: 21	1.
☐ EPA	V	Initia	310			ate, Zip Co	de		2012	100	0 111	0, 6,	9
☐ DEP ☑ DOH			nded			s nj 07652			. 4 . 1	rer	heep Oh	TERN	
DOL DOL		Eme		w/ justification	melisa	f Contact michaels			ITëlebho	e Nu	ENSIN	IG	2004
		Cano	ellation	enter the contract of the cont	EACILITY	INFORMAT	ION				-		1
					FACILITY	INFORMAI	ION						
Name of Facility Whe paramus chrysler jeep		nent is	Taking	g Place (3)		Type of	Facility (4)						
							School (F	(-12)					
Street Address	2502						Subchapt	ter 8 (Other	than K-1	2)			
314 route 4 west				¥.).		V		., private & omes, etc.)	cmmerci	ial			
	County (6	5)		County Code	e (7)	Square I	Feet	# Of Floo	rs	Build	ling Age		537
paramus	bergen						0,000	<u> </u>	1	4	20	0+	
						car deale	Use (Prior if	being den	nolished)				
Name of Monitoring F	irm Hired	by BI	dg. Ow	ner (8)	ASCM N	and the second second second	Abatement	Contracto	(9)				
gza		#							(-)				
Street Address							onmental Se	rvices Inc.					
55 lane rd						Street A	ddress						
City, State, Zip Code						462 Getty	v Avenue						
fairfield nj 07004	The second secon						te, Zip Code						
	nitoring F	irm		Telephone N	umber	7							
ben sallemi Sheduled Start Date (*	10)	Cobo	d Com	973 2487816	(44)	Clifton, N	The second secon						
7 / 9	12	Scrie	a. com 8	pletetion Date (	/ 12		ne Number		License	Numbe	er .		
_/_/				/ ——/			772-3660				00117		
Occupancy Status Du	ring Abat	ement	(Checl	(Only 1)			OSHA Moni						
Facility Clo Abatement	sed/Vaca	ted Di	iring Er	ntire Period of			onmental Se	rvices Inc.					
	Performe	d Out	side of	Normal Facility		Street A	aaress						
Hours - Des	cribe:	8am t	o 4 pm	90 C 92 W O A 90 PM C 90 C 90 C 90 C 1 W C 1 W C 1 W C 90 C 1 W C		462 Getty	Avenue						
Other - Des	cribe:						te, Zip Code						
Scope of Work (Check	All That	Apply	)			Clifton, N	J 07011						
☐ Demolition				Damassatian	_								
≥3sf or >3lf			<b>✓</b>	Renovation	H	Mini - En	ainment wit	h Negative	Pressure	9			
☐ ≥160 sf or ≥	260 If						Procedure						
					V		mpted (*) an	d Non-Fria	ble Proce	dure			
Location of			ls		Descrip	tion of			Abateme	nt Type	9		
Asbestos Contair	ning	100000000000000000000000000000000000000	ation	A		Containing			R		E	E	
TO BE ABATE	.	0.000	mally sed		Material		1	Amount	E	R	N	N	
in Facility	- I	150	olely		.e., therma	rfacing, VA	т 1	(Specify SF or LF)	M O	E P	C A	C	
(13)			Main-			cellaneous)		01 01 11 /	v	Ä	P	L	
		100000000000000000000000000000000000000	ance/						Α	1	s	s	
	- 1	C12221100	todial ff (12)						L	R	U	U	
			NO N/A						-		<u> </u>	R	
roof level		V		duct tar paper				100 sf	V	П		+	П
roof level		V		pitch pockets				4 sf	V				
lame of Registered Wa	aste Haul	er		NJDEP Waste	Cubic	Name of I	Registered L	andfill					
NEWARK CARTING				Hauler ID No.	Yards of Waste	I.E.S.I.	vedisteted F	anunn.					
City, State					Disposal	City. State	9						
NEWARK, NJ							EM, PA 180	15					
completed by (Print or	Type)			Title			Signature				Date		
aul mast				vp									
							1				6 15 1	2012	

ASB-41