State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

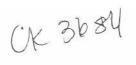
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)				Nar	ne d	of Building	g Owner/Operator (2)						
8 /	4 / _	15		U	Inic	on Cour	nty Board of Cho	sen Freeholde	ers AU3	Û.	15			
Agencies Notified		tion		12.52		Address					10.55,712			
							ilding 10 Elizabe	thtown Plaza						
				- 65		tate, Zip C								
□ DCA	The second secon	1970	ng	Е	liza	abeth, N	J 07207							
(NJAC 5:23-8)	8 / 4 / 15 Type Notification						t		Telephone Nu	umber				
	☐ Cancellat	ion		N	lich	nael Yus	ka,							
				F	AC	ILITY IN	IFORMATION							
Name of Facility Where A	Abatement is T	aking Pla	ce (3)					Type of Facility	(4)					
Warinanco Ice Rink	(School (K-12		12)				
Street Address								Other (i.e., pr			bui	Iding	IS,	
	ad							homes, etc.)						
City (5)								Square Feet	# of Floors	0	Blo	lg. A	ge	
								8,000	1		- 2	0+		
County (6)				Co	ount	ty Code (7	()(STATE USE ONLY)	Current Use (Pri	or if being dem	olished)			
	Hired by Build	ling Owne	er (8)	ASC			Name of Abateme							
	8 / 4 / 15 Initial			00	14	5		nvironmental S	Systems					
							Street Address							
								lehem Pike - S	uite 60					
							City, State, Zip Co							
							Spring House	e, PA 19477						
L	itoring Firm		1	lephor			Telephone No.		License No.					
	encies Notified EPA DOLWD DOH DOH DOCA (NJAC 5:23-8) Initial Amended Amendment # Emergency (incluing justification) Cancellation Cancellat					1725	215 542 7000		00847					
The state of the s	gencies Notified EPA						Name of OSHA M	ionitor						
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113.0022						cribe	City, State, Zip Co		uite ou					
	gencies Notified GEPA GEPA GOLWD GOLW						Spring House							
Scope of Work (Check all				_		Opring House	5, 1 A 15411				-			
	i tilat appij)							tainment with Neg	jative Pressure					
			Renova Demoli				☐ Mini-End	losure g Procedure						
Z = 100 31 01 = 200 11	Amendment #						⊠ Non-Exe	mpted (*) and No	n-Friable Proce	edure				
	Warinanco Ice Rink reet Address Warinanco Park Road by (5) Roselle, NJ 07036 Sunty (6) Union Imme of Monitoring Firm Hired by Building Over Town Associates reet Address 11 Tindall Rd by, State, Zip Code Middletown, NJ 07748 Oject Manager for Monitoring Firm Kevin Burns Interpretation of Abatement (Check of Facility Closed/Vacated During Entire Perion Abatement Performed Outside of Normal Form Time of Abatement: 7:00AM-4:00PM/ Impero of Work (Check all that apply) 23 sf or 23 lf 2160 sf or 260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) In Concession - Kitchen above flue In Roof										Aba	atem	ent T	уре
		. 1	Norm sed So		v		Description of				D.	Re	甲	Щ
		/	//ainte				stos Containing Ma e., thermal systems		Amount (Specify		Removal	Repair	ncap	ıclo
IN Facili		C	ustodia (12		?		surfacing, VAT	, or	SF or LF)	2	2	7	Encapsulate	Enclosure
(13)	Cancellation						other miscellane	ous)					ate	
Cananasian Kitahan	DOLWD DOA DOH DOA (NJAC 5:23-8) Emergency (incligiting procession - Kitchen above flue entral area curtain wall Document Emergency (incligiting procession - Kitchen above flue entral area curtain wall Emergency (incligiting procession - Kitchen above flue entral area curtain wall Emergency (incligiting procession - Kitchen above flue entral area curtain wall Emergency (incligiting procession - Kitchen above flue entral area curtain wall Emergency (incligiting procession - Kitchen above flue Emergency (incligiting procession - Kitchen above					T	. 0.:::		60.05		7			
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Main Roof					1	Roof Fl	ashing/sealant		500 SF		3			닏
										L		Ш	Ш	
	te Hauler			NJDE Haule			Cubic Yards of Waste	Name of Regis						
				, idulc			4 Yds		erks Commu	intiy L	an	atıll		
City, State							Disposal Date	City, State						
Hatfield, PA							9/11/15	Birdsboro,	PA 19508					
	ype)	Title					Signature	2/		Date		;		
Patricia Visco		Office	e Man	ager			Pater	cu U W	0	8/:	1/	15	-	

Emergency Abatement & Clean Up As per Jim Harris NJDOL

Date of Notification (1)			П	Name	of Building	g Owner/Operator	(2) Aloysius Cl	aurch			5	
Agencies Notified	/31/15 Type Notification			Stroot	Address	51	Aloysius Ci	iuicii				_
Agencies Notified	Initial			Street	Address	935	Bennett's M	ill Rd	"			
DEP	Amended		-	City, S	tate, Zip C							
⊠ DOL	Amendment #		-				ackson, NJ 08	3527				
⊠ DOH	justification)				of Contac			Telephone Nur	nber			
DCA	☐ Cancellation			Sco	t Pirozz	zi- Diocese of	Trenton				_	_
				FAC	ILITY INF	ORMATION						
Name of Facility Where	Abatement is Takin	g Place	(3)				Type of Facility	(4)				-35-55
	St. Aloys	sius C	hurc	h			School (K-1	2) 8 (Other than K-	40)			
Street Address	935 Benne	ett's N	Iill F	Rd.			Other (i.e., p	rivate & commer	cial buil	dings		
City (5)	Tacks	son, N	JI				Square Feet 5000	# of Floors	В	dg. A	ge +/-	
County (6)	Jack	3011, 1	13	Coun	tv Code (7	7) (STATE		rior if being demo	lished)			_
100 100 100	Ocean				ONLY)		Andrews as well structured by 1 c. 3				5	
Name of Monitoring Fire		Owner	_	ASCM I	No.	Name of Abaten	nent Contractor (9)				
	nmental Tactic					Stev	vens Environi	mental Servi	ces, Ir	ıc.		
Street Address						Street Address		×2 ×2000				_
	64 Broad Str	eet					PO E	30x 322				_
City, State, Zip Code			1150001			City, State, Zip C						
]	Matawan, NJ 0	7747					Allentow	n, NJ 08501				_
Project Manager for Mo			1 27.07.75	phone I		Telephone No.	50 0600	License No.	0040	2		
	Geiger		-		0-2217		59-9688		0049	3		_
Start Date (10)	Sche			tion Da	te (11)	Name of OSHA		ECS				
8/3/15			8/5/1	.5		Ctoret Address	1V1	ECS			_	_
Occupancy Status Dur				mont		Street Address	PO F	30x 341				
Facility Closed/Vaca						City, State, Zip C		70X 3 11				_
Other - Describe:	ou outside of Homis	., , ao	,			Oity, Otato, Zip C		wicks, NJ				
Scope of Work (Check	all that apply)					L 	American Construction					_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emolitio			Mini-En Gloveb	ntainment with Ne closure ag Procedure cempted (*) and No		dure			
			ocati							Abate		
Location	n of		omali Sole			Description of	of .			Тур	oe	
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TO BE AB		100	ustodia Staff?	36711	(i.e.,	, thermal systems surfacing, VAT		(Specify SF or LF)	Ren	Repair	Encapsulate	Enclosure
(13)			(12)			other miscellane		,	Remova	pair	sula	osur
		Yes	No	N/A			- // I				ate	CO.
Close	ets		×			VAT		30 sf	×			
Janitor's	Closet	×				VAT		25 sf	×			
Worship					V	AT Debris C	lean up	NA	×			
						et Wipe HE						
Name of Registered W	/aste Hauler			JDEP \	Vaste	Cubic Yards		istered Landfill				
Stevens Enviror	nmental Service	es. Inc	. 1	Hauler ID	No. 292	of Waste 1CU		GROWS L	andfil	1		
City, State		J, 1110	-1.	102	- 72	Disposal Date	City, State					
2.17, 2.0.0	Allentown,	NJ				8/5/15	A-01//	Morrisville	e, PA			
Completed By	Title					Signature		Date		50		
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			7.00			1 1/31	/					_

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ounty (6)				-	univ Code	7) ISTATE	5000	nor if being dam	_ -		5+/-	_
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trest Ac	dress						Street Address			063, 1	1150.		-
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nlant iki	Tom C		1	- 1	Telephon	6 No.	Telephone No.		Licanaa Ne-			_	-
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Other	hent Performed	Outside of	Normal F	acility	Hours			Crossy	vicks, NJ				
Other	hent Performed Describe:	Outside of	Normal F	acility	Hours		☐ Full Con	Crossy	vicks, NJ				
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Date of Notification (1) 8 /	4 /	15		100000000000000000000000000000000000000		g Owner/Operator (10401	0.000 12 5				
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Agencies Notified EPA	Type Notifica	ition		1000	Address	OARD COURT						
⊠ DOLWD	☐ Amended			-		BOARD COURT			-			-
☑ DOH	Amendme		_	10.533	State, Zip C							
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(NJAC 5:23-8)	justification				of Contac			Telephone Num	ber			
	☐ Cancellat	ion		BO	B STONE	:						
				FA	CILITY IN	IFORMATION						
Name of Facility Where A	Abatement is T	aking Pla	ce (3)				Type of Facility (☐ School (K-12)	-3.0				
Street Address		12 22 22						Other than K-12)			
1952 SEAMAN COL	JRT							ivate and comme		ilding	S,	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
TOMS RIVER							1279	1	1000	46		
County (6)				Cour	nty Code (7)(STATE USE ONLY)			shed)			
OCEAN		Apparation Torritoria					RESIDENCE					
Name of Monitoring Firm	Hired by Build	ling Owne	r (8)	ASCM	No.	Name of Abateme						
011-0-11							CONTRACTING	i, INC.				
Street Address						Street Address						
City State Zie Code						170 U.S. HW						
City, State, Zip Code						City, State, Zip Co						
Project Manager for Mon	itorina Eirm		Tal	phone	No	Telephone No.	13 00721	License No.				
i roject wanager for worr	itornig i iiiii		100	sprione	INO.	732-349-3771		01244				
Start Date (10)		Scheduled	Comple	ation Da	te (11)	Name of OSHA N		01244				
8 /18 /		8				NEIL MARZA						
Occupancy Status During						Street Address						
☐ Facility Closed/Vacate	S X.			ment		138 SENECA	RI VD					8
☐ Abatement Performed					scribe	City, State, Zip Co	STATE WAS A STATE OF THE STATE					
Time of Abatement: _	AM	PM/	PM		AM	BARNEGAT,						
Scope of Work (Check al	I that apply)											_
☐ >3 sf or >3 lf			Renovat	ion		☐ Full Con	tainment with Neg	ative Pressure				
≥160 sf or ≥260 lf			Demoliti				g Procedure					
							mpted (*) and Nor	n-Friable Procedu	re			
19 197			Is Loca Norma				20		Ab	atem	ent T	уре
Location Asbestos-Containing		, U	sed Sol		Ashe	Description of stos Containing Ma		Amount	Re	Re	E	Ē
TO BE ABA	ATED		Maintena			., thermal systems		(Specify	Removal	Repair	cap	Enclosure
IN Facili	ty		ıstodial (12)			surfacing, VAT other miscellane		SF or LF)	a		Encapsulate	ure
(13)		Ye		N/A	1	other miscellane	ous)				te	
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Name of Registered Was	to Hauler			JDEP V	Macta	Cubic Yards of	Name of Regist	tered Landfill		ш	ш	
RICH-MARK CONTI		IC.		Hauler II	D No.	Waste		ORTH LANDFIL	L			
City, State				07764	+	5 Disposal Date	City, State					
BAYVILLE, NJ						8/24/15	MORRISVII	LE, PA				
Completed By (Print or T	ype)	Title				Signature /	M	Da	ate /	1		
NEIL MARZANO		SUPE	RVISC	R		9/ 6	Mayna		8/4	1/2	DIC	5

ASB-41 JAN 13 * Do not use this form for asbestos licensure exempted activities.



Date of Notification (1)					uilding O	wner/Op	erator (2)							
8/4/15				nda Bu	A STATE OF THE STA					41,	9				_
Agencies Notified	Type Notification			reet Add 04 Bro	iress oklyn B	ĺvď		X			1/4				
× EPA × DEP	X Initial Amended		100		, Zip Cod	е									
× DEP × DOL	Amendment Emergency			Sea Gir	230					T = 1-	-b Ni	shor			-
DOH DCA	justification) Cancellation	**************************************		ame of C Bob	Contact					i ele	phone Nun	nber			
LI DCA	Caricenation	-		FACILI	TY INFO	RMATIC	N			-					
Name of Facility Where	Abatement is Takin	g Place (3)	-505-					Type of	Facility (4)	88					
Burke Residence								Sc.	hool (K-12)	(Otho	rthan K 19	2)			
Street Address								X Of	her (i.e. pri	vate &	commercia	al buildi	ngs, l	nome	5,
504 Brooklyn Blvd								Square		# of	Floors	Ric	íg. Ag	ie.	-
City (5)								1200	1 661	1	10015	55	-		
Sea Girt			TC	ounty Co	ode (7)		-		Use (Prior	if bein	g demolish	ned)			-
County (6) Monmouth					SE ONLY)		- 1	reside							
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.	T			ement Cont		(9)				
									ion Co., l	nc.					
Street Address								Address lontros	e Road						
City, State, Zip Code							City, S	tate, Zip	Code						
Only, Charley Exp of the							Colts	Neck	, N.J. 077	722					
Project Manager for Mo	nitoring Firm		T	elephon	e No.			none No. 294-17			License N 00029	la.			
8 52					1 (44)				A Monitor		00025			-	
Start Date (10) 8/13/15		Scheduled 8/20/15	Com	pletion D	ate (11)	}	Name	01 USH/	4 IVIOTINOI						
Occupancy Status Duri	ng Abatement (Che	ck Only One)				Street	Address	S						
Facility Closed/Val Abatement Perform X Other – Describe:	cated During Entire ned Outside of Nor 7am-7pm	Period of Ab mal Facility I	atem	ent		_	City, S	State, Zip	Code						
Scope of Work (Check													-		
× ≥3 sf or ≥3 lf	rui (flat) ipp///	П Ве	novat	ion				Full	Containme	nt with	Negative	Pressur	е		
≥160 sf or ≥260 lf			moliti				2	Mini Glov	-Enclosure rebag Proc -Exempted	edure				е	
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Location Asbestos-Containing		Used	Sole	ly by	Asbes	tos Conf	taining I	Material	(ACM)		mount			E.	Е
TO BE A	BATED	Custo	itenar idial S		(i.e.	thermal	system cing, V	ns insula AT. or	tion,		Specify or LF)	Remova	Repair	cap	nclo
In Fac	2010 T C.		(12)				niscella				2	oval	air	Encapsulate	Enclosure
50.8		Yes	No	N/A										6	
baser	nent			х		floor t	ile w/r	nastic		Į.	40sf	X			
kitch	ien			x		łi	noleur	n			100sf	X		_	
1st fl	oor			х		asbe	stos p	aper			10sf	X			
Name of Registered W	aste Hauler			JDEP W lauler ID		Cubic of Wa	Yards este				ered Landf	Ш			
Ace Insulation Co.	, Inc.		50000	2086	110.	1			GROW						
City, State Colts Neck, New J	ersev					Dispo 8/20/	sal Date /15	е	City, Stat		A				
Completed by		Title				1	Signatu	re	1			Date			
Bree McGuire		Secre	tary	Treasu	ırer		13	cly	1-			3/4/15			



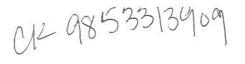
Date of Notification (1) 7/29/15				Name of Elaine	Building ()wner/C	perator	(2)		L	NUG 6	25	5		
Agencies Notified	Type Notification		-	Street Ad	00.010000000	Venue									
EPA DEP DOL	Initial Amended Amendment	#		City, Sta	te, Zip Co	de			* 			3 7			
ĭ DOH	Emergency justification)	(including	h		Contact	0702				Tele	phone Nun	nber			
☐ DCA	Cancellation				LITY INFO	DMATI	ON							-	
Name of Facility Where House	Abatement is Takin	g Place (3)		FACIL	LITTINEC	KINIATI	ON	Туре	e of Facility (4)						
Street Address								H	School (K-12) Subchapter 8		er than K-12	2)			
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City (5) Glen Ridge								Squ:	are Feet	# of N/A	Floors	10.55	Bldg. A	\ge	
County (6) Essex				County C	Code (7) ISE ONLY)			Curr	ent Use (Prior USE	if beir	ng demolish	ned)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	No.		11 23		atement Contr tement, Inc		(9)				
Street Address				1			Street 11 R		ess ngren Avent	ie .					
City, State, Zip Code		100 100 100					City, S	State, 2	Zip Code NJ 07512						
Project Manager for Mor	nitoring Firm		T	Telephor	ne No.		Telepl	hone I			License N #00675	0.			
Start Date (10)		Scheduled	Con	npletion (Date (11)		Name	of OS	SHA Monitor		100010				
8/12/15	a Abatamant (Cha	8/13/15							tement, Inc						
Occupancy Status Durin	ag Abatement (Checated During Entire						Street 11 R		ess ngren Aveni	Je					
Abatement Perform Other – Describe:	ned Outside of Norr					_	- 8		Zip Code NJ 07512						
Scope of Work (Check A	All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova				2	M G	ull Containmer lini-Enclosure lovebag Proce on-Exempted	dure				°0	
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Locatio	n of	No	rmal	ly		De	scription	n of				_	T	/pe	
Asbestos-Containing TO BE AB		Used Main				tos Con thermal			al (ACM)		mount specify	77		E	ш
In Faci	ility	Custo	dial S (12)	Staff?	(1.6.	surfa	cing, VA	AT, or	7		or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A		otner	niscella	neous)			val	#	ulate	ure
basem	nent	100	X	14/73		pipe	insula	ation		24	18 LF	X	-		
Name of Registered Wa	ste Hauler		TN	JDEP W	/aste	Cubic	Yards		Name of R	egiste	red Landfill				
D&S Abatement, Inc			Н	lauler ID 20996		of Wa					gement o				
City, State Totowa, NJ			-			Dispo TBD	sal Date		City, State Tullytow		Λ.				
Completed by Deanna Brkusanin		Title	F N.4	nogor		1	Signatur	e) /	ALLIN DI	//	Di	ate 29/1	5		
Dealina Dikusalilii		Projec	IVIć	anayer			<u> </u>	11/1	mus of	w	~ - //	Z9/	J		

CK 1533802637

Date of Notification (1) 7/29/15		11.2035	ame of Bui enneth E	William Control Control		perator	(2)			AUG	6	20	15	
Agencies Notified Type Notification		Str	reet Addre	ess										
X EPA	ali idia a	Cit	ty, State, 2 Vest Ora	Zip Code)52								
□ Emergency (in justification) □ DCA □ Cancellation	ciuuling	1000	ame of Co enneth E		der				Tele	ephone Nur	nber	201.00		
			FACILITY			N.			1					
Name of Facility Where Abatement is Taking House	Place (3)		17.00	7 1111 011	m/ATTS			of Facility (4 School (K-12			9	V.		
Street Address 19 Highwood Road								Subchapter (Other (i.e. pr	(Oth			dings,	home	es,
City (5) West Orange								etc.) e Feet	# of	Floors	50.0	ldg. A	ge	
County (6) Essex			ounty Code				Curre	nt Use (Prio	r if bei	ng demolish	ned)			
Name of Monitoring Firm Hired by Building Ov	vner (8)	\perp	ASCM No	D.			of Abat	ement Cont		(9)				-
N/A								ement, Ind). 					
Street Address						Street 1		s Iren Aven	ue					
City, State, Zip Code								p Code J 07512						
Project Manager for Monitoring Firm		Те	elephone N	No.		Teleph 973-3				License N #00675	0.			
	Scheduled (3/12/15	Compl	letion Date	e (11)				IA Monitor ement, Inc).				,	
Occupancy Status During Abatement (Check	Only One)					Street	Addres	S						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Occupied	riod of Aba I Facility Ho	temer ours	nt			City, S	tate, Zi	ren Aven p Code IJ 07512	ue					
Scope of Work (Check All That Apply)						10101	.wa, i	0 07512						
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	le Lo	cation	,						()	0 11011 1 1102	T	Abate	ement	
Location of	Nor	mally			Des	cription	of					Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custod	enance	e/ '		Conta ermal surfac		laterial insula T, or		(5	mount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes 1	10	N/A										te	Ф
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garage		X			duct	insula	tion		2	0 LF	X			
						in the later of					-			
Name of Registered Waste Hauler		NIE	DEP Waste		Cubic `	Varda		Name of F	Dominto	ered Landfil				
D&S Abatement, Inc.		Нац	uler ID No. 0996	. (of Was			SVENDER NOSE DES		gement o				
City, State Totowa, NJ				111	Dispos FBD	al Date	\sim	City, State Tullytow		4				
Completed by Deanna Brkusanin	Title Project	Man	ager		S	ignature (Ne	euwo/	Elle	Culle 71	ate 29/1	5		

CK 6442 5900110

Date of Notification (1)					Building C	wner/C	perator	(2)							
7/29/15				Hong V	Vang						1117	6 1	T.		
Agencies Notified	Type Notification			Street Ac 40 Ridg	ddress geview D	Drive					Pow 4	2 1			
× EPA × DEP × DOL	Initial Amended Amendment	#	ľ		te, Zip Cod g Ridge,		7920				ř				
	Emergency		-	Name of		140.0	7020			Tele	ephone Nur	nber			
➤ DOH DCA	justification) Cancellation			Hong V							-				
			_	FACIL	LITY INFO	RMATI	ON								
Name of Facility Where	Abatement is Takin	g Place (3)						Туре	e of Facility (4)						
House									School (K-12)			0.			
Street Address 314 Central Ave								×	Subchapter 8 Other (i.e. pri				dings	, home	es,
									etc.)						
City (5) East Newark								N/A	are Feet	# 01 N/A	Floors	100	Bldg. /	Age	
County (6)			-1	County C	Code (7)	-			ent Use (Prior		-				
Hudson					ISE ONLY)			Hou	() 의료 () 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	501	ng domeno	.00)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.		110000000000000000000000000000000000000		atement Contr tement, Inc		(9)				=
Street Address							Street								
07.04.77.0									ngren Avenu	1e					
City, State, Zip Code									Zip Code NJ 07512						
Project Manager for Mo	nitoring Firm			Telephor	ne No.		Teleph 973-		No. 8685		#00675	lo.			
Start Date (10) 8/14/15		Scheduled 8/15/15	Cor	mpletion [Date (11)		400 E800 SS		SHA Monitor Itement, Inc						Š
Occupancy Status Durin	ng Abatement (Che	L ck Only One))				Street	Addre	ess						
	cated During Entire								ngren Avenu	ıe					
Abatement Perform Other – Describe:	ned Outside of Norr Occupied	mal Facility H	lour	3		_	The state of the s		Zip Code NJ 07512						
Scope of Work (Check /	All That Apply)						1010	, , , ,	110 070 12						
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Asbestos-Containing TO BE AB		Main					taining N system		al (ACM)	100	mount Specify	a a		En	m
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(13))		0 0	T		other i	miscella	neous	5)			oval	air	Encapsulate	sure
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basen			X	-			insula	47.576-276.255			55 LF	X	-	-	_
crawl s	pace		X	-		pipe	insula	ation		5	50 LF	X	-		-
		-											-		-
Name of Registered Wa	aste Hauler		1	NJDEP W	/aste	Cubic	Yards		Name of R	egiste	ered Landfil	I			
D&S Abatement, In			100	Hauler ID 00675	No.	of Wa	ste		Waste M	lana	gement c				
City, State Totowa, NJ						TBD	sal Date	1	City, State Tullytow	n. P	A				
Completed by Deanna Brkusanin		Title Projec	t M	anager		\$	Signatur	10 OL	wa Khu	lel	D. 7.	ate /29/1	5		



Date of Notification (1) 7/29/15				lame of l	Building Ov ernitz	wner/O	perator	(2)			AUG	6	015		
Agencies Notified	Type Notification		1 7	Street Ad	dress se Place										
EPA DEP DOL	Initial Amended Amendment		C	City, State	e, Zip Code air, NJ 07	9									
× DOH	Emergency (justification) Cancellation	ncluaing		lame of	Contact bara Lew	vis				Tele	phone Nu	mber			
DCA	Cancellation				ITY INFOR		N.				-17/2/10/2				-
Name of Facility Where	Abatement is Taking	Place (3)		FACIL	ITT INFOR	CIVIATIO	JN	_	f Facility (4						
Street Address 4 Melrose Place								□ s	chool (K-12 ubchapter { ther (i.e. pr	(Othe			ings,	home	s,
City (5) Montclair								Square N/A	tc.) e Feet	# of	Floors		dg. A	ge	
County (6)				County C					t Use (Prio	6.77	<u> </u>				
Essex	and the state of t		(-		ISE ONLY)			Hous			(6)				
Name of Monitoring Firm N/A	n Hired by Building (Owner (8)		ASCM	No.				ement Cont ment, Inc		(9)				
Street Address								Address	ren Aven	ue					
City, State, Zip Code								state, Zip wa, NJ	Code J 07512						
Project Manager for Mor	nitoring Firm		1	Γelephor	ne No.		973-	none No 345-86	85		License 1 #00675				
Start Date (10) 8/10/15		Scheduled 8/11/15	Com	pletion [Date (11)				A Monitor ment, Inc	Э.					
Occupancy Status Durin	ng Abatement (Chec	k Only One)					Address	s ren Aven	110					
	cated During Entire I ned Outside of Norm Occupied						City, S	State, Zip		iue					
Scope of Work (Check A	All That Apply)							- <u> </u>	-11-500-00-0						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat moliti				2	Min Glo	Containme i-Enclosure vebag Proc n-Exempted	edure	-			۵	
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			ocation ormall			Do	parintian	o of					Ту	ре	
Locatio Asbestos-Containing TO BE AB In Fac (13)	g Material (ACM) BATED ility	Used	Solel tenar	ly by nce/		os Cont hermal surfa		Material is insula AT, or		(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
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basen	nent		X			pipe	insula	ation		1	50 LF	X			
		+++													
Name of Registered Wa			7.7	JDEP W	P(00) (2)	Cubic of Wa	Yards		200-4000 ACC - 20		ered Landf				
D&S Abatement, In	C.		100,70	20996	110.	TBD					gement	of PA			
City, State Totowa, NJ						TBD	sal Date)	City, State Tullytov						
Completed by Deanna Brkusanin		Title Projec	ct Ma	anager		5	Signatlur	e Zalla	Q Bll	lille		Date 7/29/1	5		

CK 1943908499

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

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Notified		LIOII		1755						1.4			-1-		
FEDA	Newark Public School														
		1									11				
DDOL			1						Telephone	Number:					
₽ DOH	justification		Mr. B	enjamir	Olagad	eyo									
LIDCA						FACILITY INFO	RMA	TION	<u> </u>						
Name of F	Facility Newto	n Street	t Elemer	ntary So	chool	THE BITT IN			(4):						
3.5.2	on on oct										re hom	oc et	o)		
		0.000				y Code (7):	l cas	0000 0000	ivate & comme				U.)		
Newark		Lissen					Squa	ire Feet:		# of I	Floors				-
									School						
		rm Hire	d by Bu	ilding (Owner:	ASCM No.:	Nam	e of Abat	ement Contra	actor (9):					
WHITM	AN					00110	Ape	x Develo	pment, Inc	2.					
Street Ad	dress:														
17 Pleasa	Sepecies Type Notification Street Address: Cedar Street City, State, Zip Code: Newark, NJ 07102 Name of Contact: Mr. Benjamin Olagadeyo Newark NJ 07102 Name of Contact: Mr. Benjamin Olagadeyo Newark NJ 07102 Name of Contact: Mr. Benjamin Olagadeyo Newark NJ 07102 Name of Contact: Mr. Benjamin Olagadeyo Newark NJ 07102 Name of Contact: Mr. Benjamin Olagadeyo Newark NJ 07102 Name of Contact: Mr. Benjamin Olagadeyo Name of Monitoring Firm Hired by Building Owner: ASCN Newark Sexex NJ 07103 Name of Monitoring Firm Hired by Building Owner: ASCN Newark NJ 07103 Name of Monitoring Firm Hired by Building Owner: NJ 08112 NJ 08512 NJ 08514/15 NJ 08514				659	Dutas	re Dlago								
City State	7 7in Codo	-					and the second second							-	
70							100.000.00		• 5000000000000000000000000000000000000						
	Newark Public School				Talaskana Na				License N	١٠.					
	Street Address: County (6): County Code (7					34			10						
	Name of Monitoring Firm Hired by Building Owner: ASCM On 110				/		01215				-				
Start Date 08/14/15	: (10):				pletion	Date (11):	A 2010 A 2010			ries					
Occupancy	17 Pleasant Hill Road City, State, Zip Code: Cranbury, NJ 08512 Project Manager for Monitoring Firm: Kevin Lovely Start Date (10): 08/14/15 Occupancy Status During Abatement (Check only one) Facility Closed/vacated During Entire Period of Abatement									•••					
						t				te 203					
☐ Abateme Describe:	ent Performed O	outside of	i Normal	Facility	Hours					018					
□ Other															
	Vork (Check all	that app	lv):								200		5500		
□ > 3 sf o	r > 3 lf	1.1							ÐMini-l □Glove	ontainment Enclosure bag Procedu	ire	_			
			,						□ Non-E	xempted (*)	and No		able P		
	T + : F					De	escripti	ion of						ре	
		[aterial	Use	d Sole	ly by	Asbestos Con	taining	Materia	l (ACM)	-	F				
Asbestos		iatoriai	Ma	intena	nce/	(i.e., therma	al syste	ems insul	lation,	Amou	nt	R	T.	Encapsulat	En
TO)	C							(Speci		Removal	Repair	ap	Enclosure
						Outer				SF or L)Va	air	SLI	Strr
	(13)		Yes	_	N/A							_		at	e
METER	ROOM								UDING	600 LF		*			
						ELBOWS AND	JOIN	NTS		N 838300 61086			-		
										-					-
			-												
								Cubia	Vanda	N	D i - t	1	146	1.	
				IC.	NJDE	P waste Hauler ID	No.:		T. C.	Name of MINERV ASSOC,	/A	erea		ERPR	ISES
Newark Public School				e:											
Agencies □ Type Notification □ Initial □ EPPA □ DEP □ Amended □ City, State, Zip Code: Newark, NJ 07102 □ DebCL □ Cancellation □ County (6): □ County Code (7): □ School (K-12) □ Subchapter 8 (Other de. Square Feet: □ Bidg, Age □ Current Use: School Name of Monitoring Firm Hired by Building Owner: □ ASCM No.: □ Other (i.e., private &. Square Feet: □ Bidg, Age □ Current Use: School Name of Monitoring Firm Hired by Building Owner: □ ASCM No.: □ Other □ City, State, Zip Code: □ City, State, Zip Code: □ Cranbury, NJ 08512 □ Project Manager for Monitoring Firm: □ Telephone No.: □ Te			sburg, OH 44		21										
	Diffied Disposal Date: Diffied Disposal Date: Diffied Amended Amendment#: Disposal Date: Diffied Amended Amendment#: Disposal Date: Diffied Diffied Amended Amendment#: Disposal Date: Diffied Diffied Amended Amendment#: Disposal Date: Diffied Amended Amendment#: Disposal Date: Diffied Amended Amendment#: Disposal Date: Diffied City, State, Zip Code: Newark, NJ 07102 Name of Contact: Mr. Benjamin Olagadeyo			lent	Signa	ature:	2	Date 08/0	e: 03/201	5					

Check # 9388

Date of Notification (1)	8-4-1	5	N	lame of	f Building C	Owner/C	perator (2	11	<u> </u>	1, Lo	200	J.		11	C
Agencies Notified	Type Notification		S	Street A	ddress (71	7 (Call	11	<u>iontr</u>	ac	M	9		-(
□ EPA . □ DEP	Initial Amended		0	City, Sta	ate, Zip Coo	de O	46	ar ne	10	408		m/	3.0		
DOL	Amendment #		-			15	Ridge	water	۷	NJ	0		30	7	
DOH DCA	justification) □ Cancellation		1	lame of	f Contact	()	10			Telephone	Kirim	har			
Name of Facility Where	Abstement is Taking	Dlace (3)		FACI	LITY INFO	RMATI		ype of Fac	ility (A)	•				,	N-100
Sink.	1 .1	open	L	Ga	Rage				(K-12)						
Street Address 14	Glases	΄ Λ	·UE	,	3	+	X			(Other than vate & comm			lings,	home	es,
City (5) Rar	itan	N.T	-	286	369		S	Square Fee	t .	# of Floors		В	dg. A	ge Or	_
County (6)	nerset	,			Code (7) USE ONLY)			Smal		if being dem		24	eac	ce_	- 87-0 -
Name of Monitoring Firm		wner (8)		ASCN	No.		Name of	Abatement PC T				•		In	18
Street Address	Box 33	37					Street A	idress Be	ar S	337	J		/li		
City, State, Zip Code	augt.	NZ	- (80	53	3	City, Sta	te, Zip Cod	e	+ A)	7	0	26	13	3
Project Manager for Mo	sit ni gvFirm		1	elepho	ne No.	2265	Telephor	ne No. 58-3	365	Licens	e No	7	9	4	
Start Date (10)	14-15	Scheduled	Com	pletion	Date (11)		Name of	OSHA Moi	nitor	nologi		T		-	
Occupancy Status Durin	ng Abatement (Check	Only One)	1	8-17.	-15	Street A	ddress		~	<u>دی</u>		ıc		
Facility Closed/Vac Abatement Perform	ned Outside of Norma						City, Sta	o B	е	33 t		55	100000		
Other - Describe: Scope of Work (Check A							Nec	U Egy	ot.	LU	0	83	53	3	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	iii macraphy)		enovati emolitio				0	Full Conta Mini-Enclo Glovebag	osure	t with Negati	ve Pr	essur	e	12	
	35						_>			*) and Non-F	riable			ement	
Location	n of	No	ocation comally	1		. De	scription o	f			8		-	ре	
Asbestos-Containing TO BE AB	Material (ACM)	Mair	Solely	œ/		os Con		terial (ACM	1)	Amount (Specify		Re	מ	Enc	En
In Faci (13)	lity	Custo	dial St	аπ?			cing, VAT, niscellane			SF or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								=		ate	θ,
Detached (Garage			X	Sid	ing.	Shin	igks		600 5	E	K			
	7					J		<u> </u>	-	_				3.	
									+						
Name of Registered Wa	ste Hauler		100000	JDEP W	10000		Yards	Nam	ne of Re	egistered Lar	ndfill				
EPC Tec	hnologies	•	Ha	uler ID	00	of Wa	4			Manag	jer	ient	0	F 8	A'
City, State	aypt 1	VJ	`			8	sal Date		State	syille		A			
Steve Sche		Pres	side	nt			Signature Stee	e)Se	le	h	Date	3-	4.	- is	5

Chech# 1/944

Date of Notification (1)				Name o	of Building (Dwner/C	nerator	(2)			WAY.	# 1	11	77	
7–31–15					Auto G			(4)		4	UG 6	2015			
Agencies Notified	Type Notification			Street A		LOup									
	nanan arese sa				Route	9 No:	rth								
DEP EPA	☐ Initial ☐ Amended				ate, Zip Co							,			
☑ DOL	Amendment	#			h AMbo		T 08	879							
E 2011					f Contact	21 -				TTO	lephone N				
DOH DCA -	justification) □ Cancellation									1 16	elepriorie N	umber			
L BOX -	L Caricellation				k Gioe		ON								
Name of Facility Where A	Abatement is Taking	Place (3	3)	FAC	ILITINFC	RIVIATI	ON .	Type	of Facility	(4)					
Paramus Honda		,	,					0.0		X250					
Street Address 120 Route 4									School (K- Subchapte Other (i.e.	r 8 (Oth	ner than K- & comme	12) cial bui	ldings	, hom	es,
City (5)									etc.) re Feet	# ,	of Floors		714-	^	
Paramus, NJ 0	7652							1000	,000	# (1		30+	^{Age} ∙yea:	rs
County (6)				County	Code (7)			Curre	ent Use (Pr	ior if be	ing demol	shed)			
Bergen				(STATE	USE ONĹY)			car	deale	ershi	Lp.	10501			
Name of Monitoring Firm				ASCN	Λ No.		Name	of Aba	tement Co	ntracto	r (9)				
Environmental	Health Inve	estiga	tio	ns					th Env.			Co.	, Ind	·	
Street Address							Street								-
655 West Shore	Trail						923	B Hav	ws Ave	nue					
City, State, Zip Code			1).				City S	tate Z	ip Code						
Sparta, NJ 07	871								town,	PA 1	9401				
Project Manager for Moni				Telepho	ne No.		Teleph				License	No			
J.P. Von Doehr					599–987	77	100000000000000000000000000000000000000		9-9920		003				
Start Date (10)	<u> </u>	Schedule	ed Co		Date (11)	'			HA Monitor		003	<i></i>			
8-5-15		8-28		mpiction	Date (11)				h Envi		nental	Co	Tnc		
Occupancy Status During	Abatement (Check						Street			LI OI III	ica recar	00.7	1110	•	
				20				(1) (2) (2) (1) (2) (2)	vs Aver	פוור					
☐ Abatement Performe	tea During Entire F ed Outside of Norm	eriod of A	Abater	nent					ip Code	iuc					
☐ Other - Describe: _		ar r donity	11001				323.1		cown, I	DA 10	2401				
Scope of Work (Check Al	That Apply)						IVOI	1150	LOWII, I		7101				
	· · · · · · · · · · · · · · · · · · ·	227 90	8 0												
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Renova Demoli				[3	t Ful	l Containm ni-Enclosur	ent with	h Negative	Pressu	ire		
100 01 01 - 200 11		X	ZETTION	ition					vebag Pro						
									n-Exempte			able Pro	cedu	re	
		Is	Locat	tion									Abat	ement	
Location	of	1. 900	Vorma			Des	scription	of					T	уре	
Asbestos-Containing I		2533310	d Sole intena		Asbest	os Cont	aining M	laterial	(ACM)	123	Amount			ш	_
TO BE ABA				Staff?	(i.e.		systems cing, VA		ation,		Specify F or LF)	Remova	Re	Encapsulate	Enclosure
(13)	2		(12)				niscellan			0	i oi Li)	Nov	Repair	psu	OSL
-		Yes	No	N/A								<u>a</u>	1	late	Гe
out al de	C 1			1.70	63					4.5			-	-	
outside rear o	I building		X		floor		e			-	000 SF	X			
					masti	.C				12,0	000 SF	X			
						102111									
Name of Registered Wast	e Hauler		1	NJDEP W	/aste	Cubic	Yards	-	Name of	Registe	ered Land	ill			
Newark Carting			1000	Hauler ID	\$200 GOODS	of Was	ste		191					т	36.
				4509		8					ral Sa	ınıta	гУ	Lan	III.
City, State							al Date		City, Stat						
Newark, NJ							8–15		Pen Ar	gyl,	PA 18	3072			
Completed by		Title				S	ignature		5		1	Date			
David Rowley		Pro	ject	Mana	ger	1	Je-	6	10	5		7–31	-15		



Date of Notification (1)				Nam	e of Buildin	g Owner/Operator (2)											
08/03	15	5		The State of New Jersey-The Department of Transportation														
Agencies Notified Type No	ification			Street Address														
				1035 Parkway Ave-CN600														
□ DEP □ Amer					State, Zip				-									
	dment #		-	Tre														
	gency (ii cation)	nciuaing	9	Name of Contact Telephone Number														
(NJAC 5:23-8)				James Britton														
				FΑ	CILITY	NFORMATION												
Name of Facility Where Abatement	is Takin	g Place	e (3)				Type of Facility	e of Facility (4)										
BRIDGE No 12																		
Street Address			_			☐ School (K-12) ☐ Subchapter 8 (Other than K-12)												
CREEK RD (CR753) OVER I		Other (i.e., pr homes, etc.)	rivate & commer	rcial buil	dings,	ļ												
City (5)							Square Feet	# of Floors	B	Bldg. A	ge							
BELLMAWR							10,000	N/A		50+								
County (6) CAMDEN				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished)									
	*1.11	0	(0)	1.00		1	BRIDGE											
Name of Monitoring Firm Hired by I				ASCN	No.	Name of Abateme	ACTION TO THE PROPERTY OF THE PARTY OF THE P											
ATC Associates Inc. Bromle	y Corp	Cent	er				ntbach Constru	action Corpor	ation									
Street Address						Street Address												
Three Terri Lane			1111			500 East Luzerne Street												
City, State, Zip Code						City, State, Zip Code												
Burlington, NJ 08016						Philadelphia, PA 19124												
Project Manager for Monitoring Fire			Te	ephone	No.	Telephone No. License No.												
John R Lutz			(09-38	6-8800	215-739-8166		00646										
Start Date (10)	ompl	etion D	ate (11)	Name of OSHA M	lonitor													
08 /04 /15		08_ /	1	4/	/ 15 SAME AS ABOVE													
Occupancy Status During Abateme	nt (Chec	k only	one)		Street Address													
☐ Facility Closed/Vacated During I	ntire Pe	eriod of	Abate	ement														
Abatement Performed Outside of Time of Abatement:AM	Norma	l Facilit	y Hou	ırs - De	scribe	City, State, Zip Co	ode											
	<u>0</u> _A	IVI																
Scope of Work (Check all that apply)					□ Full Cont	rainman at cuitte Man	-:- D				1						
≥3 sf or ≥3 If		☐ Re	enova	tion		☐ Mini-Enc	ainment with Neg losure	ative Pressure										
≥160 sf or ≥260 lf		□ De	emolit	ion		Glovebag	g Procedure											
		Is	Loca	ation	1	Non-Exe Non-Exe	mpted (*) and Nor	n-Friable Proced	100		0-8657							
Location of		1	Norm	ally		Description o	f		Al	patem	ent T	ype						
Asbestos-Containing Material (A	CM)			lely by ance/	Asbe	estos Containing Ma		Amount	R	R	ш	Щ						
TO BE ABATED				Staff?	(i.e., the	ermal systems insula	ation, surfacing,	(Specify	Removal	Repair	icap	ıclo						
IN Facility (13)			(12)		VAT, or other miscellane	ous)	SF or LF)	val	_	Encapsulate	Enclosure						
		Yes	No	N/A		other misocharie	ous)				ate	to						
Gas main pipe wrap underbri	ge		\boxtimes		Tar Wra	ap		208 LF										
Verizon conduit under bridge			\boxtimes		Transit	e Pipe		1,248 LF										
											П							
Name of Registered Waste Hauler				NJDEP	Waste	Cubic Yards of	Name of Regist	ered Landfill										
Service Transport Group			1	Hauler I		Waste	Minerva Landfill											
City, State					U	3 cy Disposal Date	City, State											
New Castle, DE 19720				07/30/14	Waynesburg, OH 44688													
Completed By (Print or Type)	Title	9			Signature Date													
Wayne Huntbach	P	roject	Mar	ager		11) 2 2 8/						1/2/15						

CK1114

Date of Notification (1) 07/30/15				Name of Building Owner/Operator (2) JOSELITO HERQUEZ & DEBBIE GRAJALES													
				Street Address													
Agencies Notified	Type Notification		1		ROSSELLE AVE												
H EPA DEP	Initial Amended			City. Sta	te. Zip Co	de											
DOL	Amendment #		_	100	1, 1/0	7.07	1649	66									
DOH DOH	Emergency (iii justification)	ncluding		Marsa of	Cantant			Tologhana Mumbas									
DCA	Cancellation			705	64/70	OM:	HK W	RQUEZ.									
		FACI	LITY INFO	RMAT	ION												
Name of Facility Where	1-1	_			Type of	(4)											
JOSEL:70					hool (K-1		40)										
Street Address	Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,																
& ROSSELLE AVE								etc.)									
City (5) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4								182		# of Floors	Ι,		3				
County (6)				County (Code (7)			100		or if being demo	lished)	P					
BERGE	N.				JSE ONLY)					ENCE	995.01.5054						
Name of Monitoring Firm		wner (8)		ASCN	1 No.					ntractor (9)		- 1	-				
										ROWING	0057	RK	35 (20			
Street Address	9						Street	Address									
								14112		/.							
City, State, Zip Code					City, State, Zip Code PATERSON NJ 0-1												
Project Manager for Mor	nitoring Firm		- 1-	Telephor	ne No		Telephone No. License No.										
1 Toject Wanager for World		releprior	ic No.		9736533652 1257												
Start Date (10) Scheduled Co					Date (11)			me of OSHA Monitor									
Occupancy Status During Abatement (Check Only One)						Street Address											
	ated During Entire Pe			ent	194 MLLL ST												
Abatement Perform	ned Outside of Norma						City S	State 7in	Code			- 1					
Other - Describe:							PA	TEK	SON	NJE	1451	//					
Scope of Work (Check A	All That Apply)	_/					-	-									
≥3 sf or ≥3 lf		The state of the s	enovat	2.70			-	Full Containment with Negative Pressure Mini-Enclosure									
≥160 sf or ≥260 lf			emoliti	on			V	☑ Glovebag Procedure									
							L	Non-	Exempte	d (*) and Non-Fi	riable Pro						
		100	Locatio									Abatement Type					
Locatio			ormali Solel		Anhani		scription	on of Material (ACM) ms insulation,		Amount		T	Ī				
Asbestos-Containing TO BE AB		Mair	ntenan	ice/						(Specify	Z.		Enc	E			
In Faci	lity	Custo	odial S (12)	tam?		surfa	cing, VA	T, or		SF or LF)	Remova	Repair	Encapsulate	Enclosure			
(13)		V	N	NI/A		other	mscenar	leous)			l va	=	ulate	ure			
24223	-	Yes	No	N/A						2015	1	+-	-	\vdash			
BASENER	/7		V			1/3	51			201F	V	-	-	\vdash			
												_					
Name of Registered Waste Hauler N.					aste		Yards		Name of	Registered Land	dfill						
ATLANTIC CARTING Hauler ID N						of Wa	0			2.0.W	. S.						
City, State WAYNE	NJ					Dispo	sal Date		City, Stat	te YTO WI	U, P	A					
Completed by							Signature		11				11	_			
GORAN IGEV SECRETARY								ZH	1		07/	36	1//-	>			

Extended the Europhtion Date

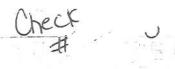
NO CX

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

Check,

Amendment Date 8/2/	13	,				· .							
Date of Notification (1) Tuly 3, 2015 Name of Building Owner/Operator (2) Tuly 3, 2015 Name of Building Owner/Operator (2) Tuly 3, 2015													
Agencies Notified Type Notification	200	S	treet Ac	dress		-250							
☐ EPA	1	0	ity, Stat	e, Zip Code	0x 5465								
DOL Amendment #		1		Trenton	NJ 08638								
DOH justification)	oldding	N	/	Contact zy: Vinch	Telephone Number								
				ITY INFORMATION									
Name of Facility Where Abatement is Taking	Place (3))			Type of Facility (4) □ School (K-12)								
Street Address	Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,												
330 Reserv	etc.)												
City (5) Trenton NJ	Square Feet	# of Floors		60									
County (6) DA	- H _a	10		Code (7) ISE ONLY)		or if being demolishe							
Name of Monitoring Firm Hired by Building On	wner (8)		ASCM		HU40 K	epair Jano	ise		-				
EPC Technolo	Si C	b	7,001			chnolog	ies	,	In	16			
Street Address Box 3	37			60	P.O. Box 337								
City, State, Zip Code	714	- /	20	City	117	INT ACESS							
Project Manager for Monitoring Firm	MO	1	elephor	700 17	tw Egy	License No	U						
Steve Schenker					758-334	5 00	3	14	4				
Start Date (10) 7- 13-15	Schedule	d Com	pletion I	Date (11) Name	of OSHA-Monitor	hanlacias	T						
Occupancy Status During Abatement (Check	Only On		13		EPC Technologies Inc								
Facility Closed/Vacated During Entire Pe	eriod of A	bateme	ent	City	P.O. Box 337 State, Zip Code								
☐ Abatement Performed Outside of Norma ☐ Other – Describe:	al Facility	Hours	*		New Egypt NJ 08533								
Scope of Work (Check All That Apply)	-				UF								
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf		enovat emoliti		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure									
2 2100 31 01 2250 11	_				☐ Glovebag Pro Non-Exempte	cedure d (*) and Non-Friabl	e Prod	edur	re .				
	ls	Locatio	on										
Location of		lormally d Solely		Descriptio Asbestos Containing		Amount		Ту					
Asbestos-Containing Material (ACM) TO BE ABATED		intenan odial S		(i.e. thermal system surfacing, V	ns insulation,	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure			
In Facility (13)		(12)		other miscella			oval	air	sulati	sure			
	Yes	No	N/A										
ROOF AREa	X			Tar Flashi		600 SF	X	-		-			
under Stairs on 1st fl.		X	-	9"k9" Floor	Tiles	30 SF	X			_			
*			-				-						
Name of Registered Waste Hauler			JDEP V		Name of	Registered Landfill							
EPC Technologies	>	H	auler ID	00		te Manager	nen	40	e f	A.			
City, State	9 - 7 - G GD- 7 T- G G G G G G			Disposal Dat	te City, Sta		A						
Completed by Title Signature Date										_			
Steve Schenker	President Steep Scheck 7-3-												

NOCK



							·								
Date of Notification (1) July 3,	2015	N	ame of	Building Owner/G	Operator (2)	Son	s Inc	9 4	15						
Agencies Notified Type Notification	300		treet Ac	idress D \	Box 5465										
☐ EPA ☐ Initial ☐ Amended		C	ity, Stat	te, Zip Code	OOK -	02 0 760									
DOL Amendment #_		-		Trento.	a NI	NJ 08638									
DOH Emergency (inc justification)	cluaing	N	ame of	Contact	٠.	Tolonhore Number									
□ DCA □ Cancellation) 						- 4								
Name of Facility Where Abatement is Taking F	Place (3)		PAOIL	LITY INFORMAT		of Facility (4)								
Garage (A	uto)					School (K-1		0)							
Street Address 330 Reserv	Join	S	tre	e+	×		8 (Other than K-1, orivate & commerci		lings,	home	es,				
City (5) Trenton NJ			918			Square Feet # of Floors				ge +-					
County (6) 00				Code (7)	Curre	ent Use (Pri	or if being demolis	hed)	w	-					
Mercer	200	(5	STATE	ISE ONLY)	$-\mid A$		epair Gar	age							
Name of Monitoring Firm Hired by Building Ow	vner (8)		ASCM	No.	Name of Aba	- CONTRACTOR	tractor (9)	ies		Tin	. 2				
Street Address	7			1-10-0	Street Addre		222	3.00		a v					
P.O. Box 33	77	-	20	E 2 2	City State, Z	ip Code	117	' A	24	7 9	9				
New Equat	NJ	(78	335	New Telephone N	Egy	At NU	O	9)5	5				
Project Manager for Moeit ril gl Firm		1	elephor	7 <i>58-336</i> 5		-		53	39	4					
Start Date (10)	cheduled	Comp	oletion [Date (11)	Name of OS	HA-Monitor	1			-					
	7-13-15 7-31-15							EPC Technologies Inc							
Occupancy Status During Abatement (Check			nt		P.O. Box 337										
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal					City, State, Zip Code										
□ Other – Describe:					New	Egypt	NJ	280	53	3					
Scope of Work (Check All That Apply)	43						1 M. M	0			7.				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati molitic			☐ Mi	ni-Enclosur		Pressu	re						
(_				☐ Gl	ovebag Pro n-Exempte	cedure d (*) and Non-Frial	ble Pro	cedur	е					
,	ls I	ocatio	n			10		Abatement							
Location of		rmally	1		escription of		Naci	Туре							
Asbestos-Containing Material (ACM) TO BE ABATED	Main	tenan	œ/		ntaining Materia al systems insul		Amount (Specify	R	70	Enc	En				
In Facility	Custo	dial St (12)	taff?	surfa	acing, VAT, or miscellaneous)		SF or LF)	Remova	Repair	Encapsulate	Enclosure				
(13)		No	N/A	oulei	miscellarieous			/al	-	late	лe				
0.000	Yes	NO	INA	·			600 SF	X							
Roof Area	X	~		61.	ashing look Ti		30 SF	×							
under Stairs on 1st fl.		X		911	looic (1)	رد ح .	50 5.	-							
			,												
Name of Registered Waste Hauler	-		IDEP W		c Yards aste		Registered Landfi		_	_	- A				
EPC Technologies	•		170	00	6		te Manage	men	f 0	e t	A				
City, State	VJ	X			osal Date	City, Sta	risville	PA	Ø.						
Completed by	Title	, Λ	ı		Signature	50		ate 7-	2_	15	-				
Steve Schenker	Pres	ide	NI		Deep	D-OCK	on	1)	3					

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

Cl # 2851

Date of Notification (1)		Name of Building Owner / Operator (2)										
7/10/15				MUNICATIONS								
Agencies Notified Type Notification		et Address	7.0			AU 5	0 [9]					
- 2 ~ 4	15 301	Philadel										
□ DEP □ Initial # 2-1/31 □ DOL □ Amended #1-7/23		, State & Z										
	-5,	×		New Jersey			T= 1		-			
☑ DOH ☐ Emergency ☐ DCA ☐ Cancellation		ne of Conta					Telepho	ne N	umb	er		
Cancellation	ALI	EX DATE	UK									
		ACILITY	INFO	DRMATION								
Name of Facility Where Abatement is Taking	Place (3)			Type of Facility (4)								
Egg Harbor City Central Office				School (K-12)								
Street Address				Subchapter 8 (Other than K-12)								
301 Philadelphia Avenue				Other (i.e. private & commercial buildings, homes, etc.)								
07 (5)	- 1-			Square Feet	# of Flo	ors	Bldg. Ag	ldg. Age				
City (5) County (6)	County	y Code (7)		6400		1		75				
Egg Harbor City Atlantic					Prior if being of	lemolished)						
				COMMUNIC				N				
Name of Monitoring Firm Hired by Building Ov USA ENVIRONMENTAL MANAGEMENT		ASCM	No.		tement Contract NVIRONMEN							
Street Address				Street Addres		ITAL INC						
8436 ENTERPRISE AVE				1123 BEAVE	15							
City, State & Zip Code				City, State & Zip Code								
PHILADELPHIA PA 19153 Project Manager for Monitoring Firm	Talanhar	na Nijembar		BRISTOL, PA 19007								
MARK JENKINS	215-365	ne Number 5-5810		Telephone Number License Number 215-788-6040 00509								
Scheduled Start Date (10) Scheduled C				Name of OSHA Monitor								
8/3/15	8/7/15	. ,		BRISTOL E	NVIRONMEN	ITAL INC						
Occupancy Status During Abatement (Check				Street Addres								
Facility Closed/Vacated During Entire				1123 BEAVE	and the same of th							
Abatement Performed Outside of Nor	mal Hours	/am to 3	pm	City, State & 2	18.00 m 19.00 m							
Describe: 5:00 PM – 1:00 AM				BRISTOL, PA 19007								
Facility Occupied During Abatement Scope of Work (Check all that apply)										_		
Coope of Work (official an trial apply)				Full Containment with Negative Pressure								
≥3 sf or ≥3 lf	⊠ R	enovation		Mini-Enclosure								
≥160 sf ≥260 lf		emolition			Glove B	ag Procedures	5					
					Non-Ex	empted and No	n-Friable	riable Procedure				
Location of	Is Loca			Description		Amount	Aba	Abatement Type				
Asbestos-Containing	Normally			Asbestos-Cont		(Specify						
Material (ACM) TO BE ABATED	Solely Maintena			Material (AC	SF or LF)	고	_	E	m			
in Facility	Custodia		in	(i.e., thermal synsulation, surfac		Remova	Repair	aps	cls			
(13)	(12			or other miscella		ova	ar.	Encapsulate	Enclsoure			
,	Yes No							te	(U			
1 st Floor Generator Room				Vat/mast	ic	350 SF						
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Name of Registered Waste Hauler		NJDEP Wa	ste (Cubic Yards	Name of Reg	istered Landfill						
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SERVICE TRANSPORT GROUP, INC.	2	20990	2	20	MINERVA L	ANDFILL						
City, State			[Disposal Date City, State								
NEW CASTLE, DE 19720		484		WAYNESBURG, OH 44688								
Completed By (Print or Type)	1.33	Title		Signature	0 0	1	Date					
PATRICK T. DeCaro	P	PROJ. MO	iR.	Patrick	11 140	40/0	7/10/	15				
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