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Date of Notification (1)	7/11/17		Nar	ne of Bi	uilding Owne	r/Operator	(2)	11		AUG -	20	i i	-	
Agencies Notified	Type Notification		Stre	eet Add	ress D	W 11 13	011	1	ASE	BESTOS C	ONT	ROL	. &	
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Name of Monitoring Firm	m Hired by Building Ow	ner (8)		ASCM	No.			atement Contustries Inc.		(9)				
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Street Address). Box	915 Zip Code						
City, State, Zip Code						Bric	ck, Ne	w Jersey (8723					
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City, State Brick, New Jersey	/					7/2	DI	PA	-/	, In	ate_	1 .		
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Name	of Facility Whe	ere Abate	ement is Taking Place (3)			- 17	CILITI IN ORNAL		of Facility (4)						
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								Unic	corn Contra	cting Corp.					
Street	Address							Street	t Address						
								32 V	Villow Way						
City, St	tate, Zip Code							City, S	State, Zip Code						
								Woo	odland Park	, NJ 07424					
Project	t Manager fo N	Monitoria	ng Firm			Telephor	ne No.	Telep	hone No.		License No.				
,								973-	-333-9176		01331				
Start D	ate (10)				Schedule	ed Comple	etion Date (11)	Name	of OSHA Monit	or					
8/7/:					8/18/			Envi	rovision Co	nsultants, Inc.					
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 07/28/2017 Marry Ann Corrado ASBESTOS CONTROL & Agencies Notified Type Notification Street Address LICENSING Initial × City, State, Zip Code DEP Amended DOL Amendment # Summit, NJ 07901 Emergency (including Name of Contact Telephone Number DOH justification) Marry Ann Corrado DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) House School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, × City (5) # of Floors Square Feet Bldg. Age Summit N/A N/A N/A County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Union House Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. D&S Abatement, Inc. Street Address Street Address 11 Rosengren Avenue City, State, Zip Code City, State, Zip Code Totowa, NJ 07512 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-345-8685 01311 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/08/2017 08/09/2017 D&S Abatement, Inc. Occupancy Status During Abatement (Check Only One) Street Address 11 Rosengren Avenue Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Occupied Totowa, NJ 07512 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure X ≥160 sf or ≥260 lf Demolition Mini-Enclosure X Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Remova Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement X 90 LF pipe insulation Χ Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste D&S Abatement, Inc. Waste Management of PA 20996 TBD City, State Disposal Date City, State Totowa, NJ TBD Morrisville, PA

Completed by

Oliver Hegedis

07/28/2017

Signature

Project Manager

Print Form

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Date of Notification (1) 07/28/2017				Building (Skuratof	Owner/Op fsky	erator	(2)	and the second		AUG	- 7	201	7	世
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DOL Amendment # Emergency (ii justification) DCA Cancellation			Name of	NJ 070 Contact Skuratof	- Canada and a second				l Tel	enhone Nu	mber			
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Street Address							×	Subchapter Other (i.e. petc.)	8 (Oth			dings,	home	∋s,
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Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	l No.				atement Cor tement, Ir		(9)				
Street Address	10	111.				Street 11 R		ess ngren Ave	nue		77			
City, State, Zip Code								Zip Code NJ 07512						
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph 973-3				License N 01311	lo.			
	Schedule 08/10/2		npletion [Date (11)				SHA Monitor tement, Ir	IC.					
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Scope of Work (Check All That Apply)	ANATOM I						_							
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Name of Registered Waste Hauler D&S Abatement, Inc.		Н	JDEP W auler ID 0996		Cubic Y of Wast TBD			I Same		ered Landfil gement o				
City, State Totowa, NJ					Disposa TBD	l Date	4	City, Stat Morrisv		A				
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DOH DCA	Emergency justification Cancellation)		Name o	of Contact erine Bas					I Tal	enhone Niir	mher		779-2	
Name of Facility 100	Ab -1 1 - T - 1 -	51 /		FAC	ILITY INF	ORMATI	ON	_					-		
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City (5) Cedar Grove								Squ N//	uare Feet	# o N/A	f Floors A		Bldg. A	Age	
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Name of Monitoring Firm	n Hired by Building	Owner (8))	ASC	M No.				batement Co atement, Ir		(9)				
Street Address							Street 11 R		ress ngren Ave	nue					
City, State, Zip Code	- 89 (1)						City, S	State,	Zip Code						
Project Manager for Mor	nitoring Firm		- 1	Telepho	one No.		I oto		NJ 07512		License N	0			
				ås.			973-	345-	-8685		01311				
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Occupancy Status Durin	g Abatement (Che	ck Only Or	ne)				Street		ess ngren Ave	nuo					
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr						City, S	state,	Zip Code NJ 07512						
Scope of Work (Check A	All That Apply)						, 0.0	wa,	110 07012						
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City, State Totowa, NJ				24.55.42.15.42.5		Dispos TBD	al Date	,	City, Stat		Ą				
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Date of Notification (1)			Name	of Building	Owner/Operator (2	2)	U Li MOO				- CHARLES
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(NJAC 5:23-8) justificatio				or Contact n Baech			Telephone Numb	er			
					FORMATION			-			
Name of Facility Where Abatement is T	aking Place	(3)				Type of Facility	(4)				
Residence						School (K-1					
Street Address							8 (Other than K-12) private and commerce		ilding	s,	
City (5)		3011				Square Feet	# of Floors	Bio	dg. Ag	ne .	
Bradley Beach						2000 sf	2		65		
County (6)			Cour	ity Code (7	(STATE USE ONLY)	Current Use (P	rior if being demolis	hed)			
Monmouth						Residence					
Name of Monitoring Firm Hired by Build	ing Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)		-100		
Guardian Contracting, Inc.					Guardian Co	ntracting, Inc.					
Street Address					Street Address						
1889 Rte. 9, Unit 61					1889 Route 9	, Unit 61					
City, State, Zip Code					City, State, Zip Co		2.000				
Toms River, New Jersey 08755						New Jersey 08	3755				
Project Manager for Monitoring Firm		10000	phone		Telephone No.		License No.				
Nicholas Fernicola			32-349		732-349-9932	2	00624				
Start Date (10) S	cheduled 0	11.7		- W & .	Name of OSHA N E.M.S.L. Ana						
Occupancy Status During Abatement (C	Check only	one)			Street Address						
☐ Facility Closed/Vacated During Entir	e Period of	Abate			1056 Stelton						
Abatement Performed Outside of No					City, State, Zip Co	ode					
Time of Abatement:AM	PIVI/	PIVI-		AIVI	Piscataway, I	New Jersey 08	8854				
Scope of Work (Check all that apply)					☐ Full Cont	tainment with Ne	gative Pressure				
≥3 sf or ≥3 if		enovat			☐ Mini-Enc	losure	gativo				
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Asbestos-Containing Material (ACM TO BE ABATED		ed Sole			stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler		0.000	JDEP V		Cubic Yards of		stered Landfill	•			
Guardian Contracting, Inc.			lauler II 2022		Waste 3	T.R.R.F.					
City, State					Disposal Date	City, State	D				
Toms River, New Jersey			2		8/11/17	Juliytown	, Pennsylvania			- 1	
Completed By (Print or Type)	Title				Signature	/ / -	// Da	te /		1,-	-7
Nicholas Fernicola	Projec	t Man	ager			11-		1/6	27	11	1

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Date of Notification (1)							g Owner/Operator	(2)	U	AI	UG	1	201		Sources
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Name of Facility Where	Abatement is 7	Taking I	Place	(3)				Type of Fa	cility (4)						
Residence								School							
Street Address								□ Subcha □ Other (i				buil	dinas		
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City (5)								Square Fee	et # 0	of Floors		Bldg	g. Age	е	
Toms River Twp.								800 sf		1		6	5		
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Us	e (Prior if b	eing dem	nolished	d)			
Ocean								Boat Ho	ouse						
Name of Monitoring Firm	Hired by Build	ding Ov	vner ((8)	ASCM	No.	Name of Abatem	ent Contracto	or (9)						
N/A							Guardian Co	ntracting,	Inc.						
Street Address							Street Address								
							1889 Route 9	9, Unit 61							
City, State, Zip Code							City, State, Zip C	ode							
24-24-24-24-24-24-24-24-24-24-24-24-24-2							Toms River,	New Jerse	y 08755						
Project Manager for Mon	itoring Firm			Те	ephone	No.	Telephone No.		100000	cense No					
	1 -			L,			732-349-9932			00624					
Start Date (10)	0.000				etion Da	and the second second	Name of OSHA N								
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Abatement Performed Time of Abatement: _							City, State, Zip C								
				-0.00			Piscataway,	New Jerse	y 08854						
Scope of Work (Check al	I that apply)						□ Full Con	tainment with	Negative	Pressure					
≥3 sf or ≥3 lf			Re				☐ Mini-End	closure		i iessuie					
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Name of Registered Was					NJDEP		Cubic Yards of	Name of F	Registered	Landfill					
Guardian Contracti	ng, Inc.				Hauler I 2022:		Waste 3	T.R.R.I	F.						
City, State							Disposal Date	City, State	9		M				
Toms River, New Je	ersey						8/14/17	Tullyto	wn, Peni	nsylvani	ia				
Completed By (Print or Ty	ype)	Title			0.5		Signature			0	Date	1		1	
Nicholas Fernicola		Pro	ject	Mar	nager				2	1	_) [2-	1/	7

Ch1098			FICATIO	tate of No N OF ASI t to NJAC	BESTOS	ABATE			EGE	3 [W		M
Date of Notification (1) 07/31/2017				of Building		Operato	r (2)		1110	7 /	0017	-	
Agencies Notified Type Notification			_ 00 00 00 00 00 00 00 00 00 00 00 00 00	Address				111	AUG -	- / 2	2017	1	
				eeland	Ave. Sı	uite 35		to manual data					
EPA Initial Amended				ate, Zip C				and the same of th	ASBESTOS			11 &	
DOL Amendment			100 Total	va NJ. 0				<u> </u>	LICE	NSIN	<u> </u>	-	
DOH justification)	including	g	Name o	of Contact				1	Telephone N				
DCA Cancellation			Frank	Fusaro	1								
Name of Facility Where Abatement is Takin	D	(0)	FAC	ILITY INF	ORMAT	ION							
PRIVATE	g Place ((3)					Type of F	acility (4)					
Street Address								ool (K-12)	Other than K-	12)			
							Othe	r (i.e. priv	ate & commerc	cial bu	ildings	, hon	nes,
City (5)							etc.) Square Fe	not T	# of Floors		DIda	Λ	
North Haledon NJ							1,600	Jet	2		Bldg. 9	Contract Contract	
County (6)			County	Code (7)			- 1	se (Prior i	f being demolis	shed)		10	
NA 101 AV			(STATE	USE ONLY)			N/A	3	,			
Name of Monitoring Firm Hired by Building (Owner (8)	ASCN	И No.		Name	of Abateme	ent Contra	ctor (9)				
N/A						NOF	TH EAS	T ENVIF	RONMENTA	AL LL	C.		
Street Address							Address 5 - 51 ST.						
City, State, Zip Code						City, S	tate, Zip Co	ode					
	-27					NOR	TH BER	GEN NJ	.07047				
Project Manager for Monitoring Firm			Telepho	ne No.			one No.	8	License 1	No.			
Chart Data (40)	0 1 1						776.0642		01300				
Start Date (10) 08/09/2017	08/09/	2017		Date (11)			of OSHA M IRO - PR						
Occupancy Status During Abatement (Check							Address						112
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of	Abater	nent				IBERTY	HERE					
Other – Describe:	ai Facilit	y Hour					tate, Zip Co UCHEN I						
Scope of Work (Check All That Apply)	-	-											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	PRODUCTION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRE	Renova Demolii				×	Mini-End Gloveba	closure g Procedu	with Negative I ure and Non-Frial				
	le	Locat	ion				1 HOIT EX	impled ()	and Mon-1 has	JIE FIC		emeni	t
Location of	1	Normal	ly		Dos	scription	of					ре	
Asbestos-Containing Material (ACM)		ed Sole			tos Conta	aining M	aterial (ACI	M)	Amount			ш	
TO BE ABATED In Facility	1	todial S		(i.e.		systems ing, VA	insulation,		(Specify SF or LF)	Rer	Re	nca	Enc
(13)		(12)				niscellan			SF OI LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A							<u>a</u>	,	ate	Ге
BASEMENT		X		ı	PIPE IN	ISULA	TION		90 LF.	Х			
Name of Registered Waste Hauler		N	JDEP Wa	aste	Cubic \	Yards	Nar	ne of Reg	istered Landfill				
TRI-STATE ASSOC INC.		Н	auler ID I 9951		of Was	te	1		ENTERPR		NC.		
City, State BRONX N.Y.					Disposa)	M	, State AYNESE	BURG OHIO),			
Completed by	Title				Si	gnature	Egnu	11	MO Da	-	-		
CARLOS ESQUIVEL	SAFE	ETY N	IANAG	ER		1 45	gnu	min	07	7/31/2	2017		

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) CHECK# 23915/23925/24001/24174/24335/24338/244

OB-03-17 Agencies Notification BPA DDP Annended Annended DDP Annendede	Date of Notification (1)			Name of	f Building O				4001/24.	1/4/2	posts	243.	12	п	0/03	
EPA DOL Amended Amended Amended Amended City, State, Zip Code City, State, Zip Code City State, Zip Code City, State, Zip Code Cit	08-03-17			Unilev	er	,,,,,,,,,,	perator	(-)) <u>[</u>	G	E		\mathbb{V}	E,
City, State, Zip Code	Agencies Notified Type Notification					enue					1					17.4
DOH Cancellation Name of Contact Nohnish Joshi School (K-12) Subchapter 8 (Direct April 1986) School (K-12) Sch	DEP X Amended			City, Sta	te, Zip Cod	le				111	À	AUG	-	7 2	017	7 5 6
Sure Address Facility Where Abatement is Taking Place (3) FACILITY INFORMATION	Emergency		-				1								_	1
Street Address	X DOH justification)	*V01707-017-017-01 70													-)L &
School (K-12) Subchapter 8 (Other than K-12) Subchapter 9 (O				119141232110401123		RMATIO	ON			-		T-TS		1	-1	P to an owner
Subchapter 8 (Cibret han K-12) Tool Sylvan Aveue City (5) Englewood Cliffs County (6) Bergen County (7) County (8) Bergen County (8) Bergen County (8) Bergen County (7) County (8) Bergen County (9) Bergen County (Name of Facility Where Abatement is Takin	g Place (3)														
Square Feet	Street Address		-1/19-5			1 1 1 1					er than	K-12	i.			
County (6) County (7) Current Use (Prior if being demolished)	700 Sylvan Aveue									orivate	& comr	nercia	build	dings,	hom	es,
County (6) Bergen Bergen Rame of Monitoring Firm Hired by Building Owner (8) ALC Environmental Street Address 200 Broad Street City, State, Zip Code New York, NY 10001 Project Manage for Monitoring Firm Shawn Waldron Telephone No. (212) 675-5544 (212) 675-5544 Cocupanory Status During Abatement (Check Only One) Start Date (10) And Completion Date (11) Cocupanory Status During Abatement (Check Only One) Telephone No. (212) 675-5544 Street Address 200 Broad Street City, State, Zip Code Carlstadt, NJ 07072 Telephone No. (212) 675-5544 201-939-6565 00756 Correct Address 10-39-8-655 00756 Correct Address Street Address 201-939-6565 00756 Correct Address County Status August And Intervention of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Location of Abatement Performed Outside of Normal Facility Hours Asbestos-Containing Material (ACM) To BE ABATED In Facility (13) Building D: 2nd Floor Building D: 1st Floor Sured Address Street Address 10-59 Jackson Avenue City, State, Zip Code Location of Asbestos-Containing Material (ACM) (18) Minitenancy Custodial Staff? (12) Full Containment with Negative Pressure Mini-Enclosure Giovabag Procedure Containing Material (ACM) (18) Manually Location of Asbestos-Containing Material (ACM) (19) Maintenancy Custodial Staff? (12) Fireproofing 11,000SF x In Firep								Squar	re Feet	# 0	f Floors	5	В	ldg. A	ge	
ASCM No. Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Pinnacle Environmental Corp.			Т	County (Code (7)			Curre	nt Use (Pri	or if bei	ng den	nolishe	ed)			_
ALC Environmental Pinnacle Environmental Corp. Street Address 121 West 27th Street, Suite 402 City, State, Zip Code New York, NY 10001 Project Manager for Monitoring Firm Shawn Waldron Start Date (10) 03-18-17(2)04-04-17 (7)11-30-17 Scheduled Completion Date (11) O3-18-17(2)04-04-17 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normally Facility Hours Cother - Describe: Cother - Describe: Scope of Work (Check All That Apply) 23 sf or 23 if Demolition Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Abbestos-Containing Material (ACM) To BE ABATED Outs - Describe: Location of Asbestos-Containing Material (ACM) To BE ABATED Outs - Describe: Location of Asbestos-Containing Material (ACM) To BE ABATED Outs - Describe: Scope of Work (Check All That Apply) Asbestos-Containing Material (ACM) To BE ABATED Outs - Describe: Outs - Describe: Scope of Work (Check All That Apply) Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Abbestor Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Building D: 1st Floor A Specify State Name of Registered Landfill Hauler ID No. 24310 Name of Registered Landfill Minova Entreprises Nine of Registered Landfill Minova Entreprises Nine of Registered Landfill Minova Enterprises Nine of Registered Landfill Minova Entreprises Disposal Date Disposal Date Disposal Date Disposal Date City, State				(STATE L	JSE ONLY)	-	_									
200 Broad Street 200 Broad		Owner (8)		ASCN	1 No.											
New York, NY 10001																
Telephone No. Telephone No. 201-939-6565 Dicense No. 00756										2						
Start Date (10) 03-18-17(2)04-04-17 (7)11-30-17 Scheduled Completion Date (11) 03-18-17(2)04-04-17 (7)11-30-17 Street Address 10-59 Jackson Avenue City, State, Zip Code Long Island City, NY 11101 Scope of Work (Check All That Apply) 23 sf or ≥3 if X ≥180 sf or ≥260 if Scheduled Completion Date (11) X ≥3 sf or ≥260 if Street Address 10-59 Jackson Avenue City, State, Zip Code Long Island City, NY 11101 Scope of Work (Check All That Apply) 23 sf or ≥3 if X ≥180 sf or ≥260 if Scope of Work (Check All That Apply) 24 sf or ≥3 if X ≥180 sf or ≥260 if Scope of Work (Check All That Apply) 25 sf or ≥3 if X ≥180 sf or ≥260 if Scope of Work (Check All That Apply) 26 solely by Maintenance/ Custodial Staff? Custodial Staff. Cus						ie i	C. CONTRACTOR				10.33350000000					
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe:			d Con				Name	of OSH	A Monitor							
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe:		. ,						ocholecul ris								
Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf X				ent						nue						
23 sf or ≥3 lf ≥160 sf or ≥260 lf	Abatement Performed Outside of Norm					_ [100 100			Y 111	01					
Demolition Demolition Demolition Demolition Demolition Demolition Demolition Demolition Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Nament Nament Non-Exempted (*) and Non-Exempted (*) and Non-Friable Procedure Abatement Type Nament Non-Exempted (*) and Non	Scope of Work (Check All That Apply)							_								
Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A							×	Min	i-Enclosure vebag Prod	e cedure	2				2	
Location of Asbestos-Containing Material (ACM) Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A		ls I	ocati	on					LXOIIIPIO	() () ()	2 1 1011 1	nabil		Abate	ment	
Maintenance/Custodial Staff? (12) Maintenance/Custodial Staff? (12) Maintenance/Custodial Staff? (12) Yes No N/A Maintenance/Custodial Staff? (12) Yes No N/A Fireproofing 11,000SF X Fireproofing 11,000SF X Fireproofing 125SF X Maintenance/Custodial Staff? (12) Yes No N/A Fireproofing 11,000SF X Maintenance/Custodial Staff? (12) Yes No N/A Maintenance/Custodial Staff? (12) Yes No N/A Fireproofing 11,000SF X Maintenance/Custodial Staff? (13) Yes No N/A Fireproofing 11,000SF X Maintenance/Custodial Staff? (13) Yes No N/A Fireproofing NATIONAL STAFF Yes No N/A Yes NATIONAL STAFF Yes NATIONAL STAFF Yes NATIONAL STAFF Yes		N	ormall	y								4		Ту	ре	
Building D: 2nd Floor	TO BE ABATED In Facility	Mair	ntenar odial S	nce/	(i.e. th	nermal s surfac	systems ing, VA	insula T, or		(5	specify		Removal	Repair	Encapsulat	Enclosure
Building D: 1st Floor		Yes	No	N/A											Ф	
Building D: 1st Floor x Pipe Insulation 16LF x Building D: 3rd Floor x Fireproofing 11,000SF x Name of Registered Waste Hauler ATC, Inc. / JBT (50071) 24310 City, State Pipe Insulation 16LF x Name of Registered Insulation 16LF x Cubic Yards of Waste TBD No. 24310 Minerva Enterprises Disposal Date City, State								ng								
Building D: 3rd Floor x Fireproofing 11,000SF x Name of Registered Waste Hauler ATC, Inc. / JBT (50071) 24310 City, State Reproofing 11,000SF x Name of Registered Landfill of Waste TBD Minerva Enterprises Name of Registered Landfill Minerva Enterprises City, State		-														
Name of Registered Waste Hauler ATC, Inc. / JBT (50071) NJDEP Waste Hauler ID No. 24310 Name of Registered Landfill Minerva Enterprises Disposal Date City, State				2000			_					-				
ATC, Inc. / JBT (50071) Hauler ID No. 24310 of Waste TBD Minerva Enterprises	•		1.51	2000	- T	100		ng					Х			
City, State Disposal Date City, State	ATC, Inc. / JBT (50071)		Н	auler ID I	No.	of Was										
	City, State Shirley, NY / Bronx, NY		-			Disposa	al Date	2-			OH 4	4688	3			
Completed by Title Signature Date	Completed by Richard Doran	100000	t Ma	nager		ADDED NO.	gnature		Am), ~		Date	:	7		

Title Of Project: 700 Sylvan Avenue, Englewood Cliff, NJ
Additional Materials / Floors
ASPESTOS COPGED &

			JOENSIÑ(? '	
Location of	Is Location Normally	Description of	Amount	Abatement Type
Asbestos-Containing	Used Solely by	Asbestos-Containing	(Specify	(Specify:
Material (ACM)	Maintenance or	Material (ACM)		Removal, Repair,
TO BE ABATED	Custodial Staff?	(i.e., thermal systems	or	Encapsulation or
in Facility (13)	(12)	insulation, surfacing, VAT or other miscellaneous)	Linear Feet)	Enclosure)
(13)		or other miscenaneous)		
Building D: 2nd Floor	N/A	Pipe & Fittings	1,400LF	Removal
Building D: 3rd Floor	N/A	Pipe & Fittings	1,400LF	Removal
Building B: Basement	N/A	Fireproofing	144SF	Removal
Building B: 2nd Floor	N/A	Mastic	1,200SF	Removal
Building A: Ground Floor	N/A	Pipe Insulation	6LF	Removal
Building A: Ground Floor	N/A	Pipe Insulation	11LF	Removal
Building A: Ground Floor	N/A	Pipe Insulation	10LF	Removal
Building A: Ground Floor	N/A	Debris	100SF	Removal
Building A: 1st Floor	N/A	Pipe Insulation	6LF	Removal
(2)Under Pedestrian Bridge between Bldgs. B&C	N/A	Pipe Insulation	60LF	Removal
(2)Under Pedestrian Bridge between Bldgs. A&B	N/A	Pipe Insulation	65LF	Removal
(3) Building A: 3rd Floor	N/A	Glue Dots	15,000SF	Removal
(5) Building B: 2 Level Cafeteria	N/A	Mastic	8,000SF	Removal
Building B: 1 st Floor	N/A	VAT	200SF	Removal
Building A: 2 nd Floor	N/A	Mastic	100SF	Removal
Building A: 4 th Floor	N/A	VAT	8,000SF	Removal
(6)Building D: 3rd Floor	N/A	Fireproofing	120SF	Removal
(6)Building D: 2nd Floor	N/A	Floor Mastic	200SF	Removal
(6)Building D: 2nd Floor	N/A	Wall Mastic	100SF	Removal
(6)Building D: 2nd Floor	N/A	Pipe Insulation	4LF	Removal
(7)Building D: Level 3	N/A	ACM Window Caulking	400LF	Removal
(7)Building D: Level 2	N/A	ACM Window Caulking	400LF	Removal

1 10 6 1		(10 1107	10 0.00 ai	10 12.12	0)	CHECK	#5948			
Date of Notification (1) 08-03-17			e of Buildi v Jersey			r (2) f Transportatio	n (F) [C			/ F
Agencies Notified Type Noti		440	et Address Benign	o, Suite	A1						
X DOL Ame	nded ndment #_1		State, Zip mawr, N				2	AUG	- 7	201	7
DOH justif	rgency (including ication) cellation	10 m S200000000000	e of Conta Tobias I		RE		1			F	ROL
		FA	ACILITY IN	FORMAT	ION				w entraction		
Name of Facility Where Abatement	is Taking Place (3)					Type of Facility					
Street Address Route 295 & 42 / I-76 Direct	Connect					School (K-Subchapte Other (i.e. etc.)	12) r 8 (Other than private & comm	K-12) ercial bu	uilding	s, hon	ies,
City (5) Bellmawr, NJ 08031						Square Feet 2500SF	# of Floors		Bldg. 253		
County (6) Camden			ty Code (7 E USE ON		_	Current Use (Pri	or if being demo	olished)			
Name of Monitoring Firm Hired by B ACER Associates, LLC	uilding Owner (8)	AS	CM No.			of Abatement Cor acle Environm					
Street Address 1012 Industrial Drive,					Street	Address Broad Street					
City, State, Zip Code West Berlin, NJ 08091					City, S	tate, Zip Code)				
Project Manager for Monitoring Firm Matt DePalma			hone No.) 809-12	02	Teleph	one No. 939-6565	Licens 00756				
Start Date (10) 08-07-17(1)Project Postpone	Scheduled d 08-30-17	Completio	8		Name	of OSHA Monitor L Analytical, In		,		-	
Occupancy Status During Abatemen	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					Address					
Facility Closed/Vacated During Abatement Performed Outside of Other – Describe:	Entire Period of Ab of Normal Facility H	atement lours			City, St	Vest 38th Stre					
Scope of Work (Check All That Apply)				New	York, NY 1001	18				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	× Rei	novation molition			×	Mini-Enclosure Glovebag Proc					
	ls Lo	ocation	T			TVOIT-Exempled	() and Non-Fi	lable Pit	Abat	ement	
Location of Asbestos-Containing Material (AC	M) Used	rmally Solely by	Acho		cription		***************************************	-	Ty	/pe	
TO BE ABATED In Facility (13)	Custoo	enance/ lial Staff? 12)		thermal surface			Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Pridge Pose Deile	Yes	No N/A								te	w
Bridge Base Rails		X		(Caulk		208LF	х			
Name of Registered Waste Hauler		NJDEP \		Cubic	Yards	Name of R	legistered Land	fill			
Newark Carting, Inc.		Hauler II 04509	O No.	of Was	te	100000000000000000000000000000000000000	entral Sanita		ndfill		
City, State Newark, NJ 07105				Disposa	al Date	City, State Pen Arg	yl, PA 18072				
Completed by oseph Patrick	Title Project	Manager		Si	gnature	M	1	Date 08-03-	17		
		_			1	100			5.70		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) THE TRUSTEES OF STEVENS INSTITUTE OF TECHNOLOGY Date of Notification (1) Street Address /17 CASTLE POINT ON HUDSON Type Notification Agencies Notified City, State, Zip Code EPA Initial Notification HOBOKEN, NEW JERSEY 07030 Amended Notification DEP #2 DOL Cancellation Name of Contact CONTROL DOH On Hold EMERGENCY NOTIFICATION DAVID FERNANDEZ NISING DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) STEVENS INSTITUTE OF TECHNOLOGY Other (ie. private & commcl. bldgs., homes, etc.) # of Floors Bldg. Age Square Feet Street Address 20,000 60 1 CASTLE POINT TERRACE 1 County Code (7) Current Use (Prior if being demolished) Pharm. Lab. City (5) County (6) (STATE USE ONLY) COLLEGE/UNIVERSITY HOBOKEN HUDSON Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) 99 PAR ENVIRONMENTAL CORPORATION LANGAN ENGINEERING Street Address Street Address 313 SPOOK ROCK ROAD 300 KIMBALL DRIVE City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 PARSIPPANY, NEW JERSEY 07054 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 845-369-7500 1101 201-398-4544 VIJAY PATEL Name of OSHA Monitor Sched, Completion Date (11) Expected State Date (10) QUALITY ENVIRONMENTL 15 8/ 17 7 / Year Year Month Day Month Day Occupancy Status During Abatement (Check only one) Street Address 1376 ROUTE 9 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: MONDAY-FRIDAY 7AM-3:30 PM City, State, Zip Code Other - Describe: WAPPINGERS FALLS, NY 12590 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclo. Wrap and Cut Renovation Demolition Glovebag Procedure X >3SF OR LF Non-Friable Procedure >160 SF OR 260 LF x Abatement Type Is Location Description of Asbestos-Location of normally used Containing Material (ACM) Amount ENCAPSULE **ENCLOSURE** Asbestos-containing REPAIR REMOVAL (Specify Material (ACM) solely by (ie. Thermal systems Maint/Custodial insulation, surfacing, VAT, SF or LF) TO BE ABATED or other miscellaneous) Staff (12) in Facility (13) Yes No N/A **BOILER BREECHING** 2,100 SF X X 1ST FL. POWERHOUSE X PIPE INSULATION 165 LF X 1ST FL. POWERHOUSE X X 100 LF 1ST FL. POWERHOUSE PIPE FITTING 510 SF X X TANK INSULATION 1ST FL. POWERHOUSE X 25 SF 1ST FL. POWERHOUSE X PIPE FLANGE GASKET 200 SF BOILER BREECHING EXTERIOR POWERHOUSE X X X 150 SF PIPE INSULATION TRENCH-EXTERIOR POWERHOUSE X 650 SF X BUILT UP ROOFING ROOF -POWERHOUSE 600 SF X X ROOF MASTIC **ROOF-POWERHOUSE** X X FOUNDATION SEAM CAULK 45 LF POWERHOUSE EXTERIOR WALL

PIPE INSULATION

Disposal Date

Cubic Yards of Waste

160

NJDEP Waste

Hauler ID No.

913

POWERHOUSE -THROUGHOUT

Name of Registered Waste Hauler

NEWARK CARTING

City, State

369 RAYMOND BLVD

35 LF

GRAND CENTRAL SANITARY LANDFILL

Name of Registered Landfill

City, State

NEWARK, NEW JERSEY 07105

Completed by (Print or Type)
BENJAMIN SANCHEZ

Title
DIRECTOR OF OPERATIONS

PLAINFIELD TOWNSHIP PA

Date



		NOT	IFICAT Pursuan	State of ION OF A	ASBE	Jersey STOS ABA 0-7 and 12:	ATEME 120-7)	ENT						
Date of Notification (1)				Nar	ne of	Building	Owner	/Operator	r (2)					
					200		F STE	VENS INS	STITUTE OF	TECH	NOI	LOGY	/	and the latest parties
7 / 21 /17 Agencies Notified Type Notifica	ation			222200		dress				E	ŋ	6	I W	
						POINT ON		SON	1117				u _/	
	Notificat led Noti					te, Zip Cod		V 07000	11					
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X DOH X On Hole	2.00					Contact			3 8				_	
DCAEMERG	GENCY	NOTI	FICATION	ON DAY	/ID FI	ERNANDE	Z			_			ITE	ROL
Name of Factor and Association			FA	ACILITY I	NFOF	RMATION				L	JOE	ENSI	NG	UL
Name of Facility Where Abatement is	Taking	Place	(3)				Тур	e of Facili						
STEVENS INSTITUTE OF TECHNOLOG	ΞY						-	School (I						
							X		ter 8 (Other . private & co					-4- \
Street Address							-	uare Feet			Did		ig. Ag	
1 CASTLE POINT TERRACE							0.000	20,000	1			2.0	60	
City (5) County		1000				ode (7)	Curr	ent Use (F	rior if being	demolis	shed	d) Pha	arm. L	ab.
HOBOKEN HUDSC Name of Monitoring Firm Hired by Buil		Junor	/01	(STAT	_	E ONLY)			IVERSITY					
ANGAN ENGINEERING	iding C	wner	(0)		A	SCM No. 99	Nam	e of Abat	ement Cont	ractor	(9)			
Street Address						- 00		et Address		UKPUI	KAI	ION		
300 KIMBALL DRIVE									OCK ROAD					
City, State, Zip Code								State, Zip						
PARSIPPANY, Project Manager for Monitoring Firm	NEW J								W YORK 10					
/JAY PATEL			ohone N 398-454				100000	ohone Nur	nber			Vumbe	er	
Expected State Date (10)	Sch	-		on Date ((11)			369-7500 e of OSH <i>A</i>	Monitor	1101				
7 / 24 17		7		15		/18	100000000000000000000000000000000000000		RONMENT	L				
Month Day Year Occupancy Status During Abatement (Ch		onth		Day		Year		HOMESON ENGINEERS						
Facility Closed/Vacated During	a Entire	Period	d of Aba	atement				t Address ROUTE 9						
Abatement Performed Outside	of Nor	mal Fa	cility Ho	ours - De	scribe	e:	13/6	ROUTES	t .					
X Other - Describe: MONDA							City,	State, Zip	Code					
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) THE TRUSTEES OF STEVENS INSTITUTE OF TECHNOLOGY Date of Notification (1) /17 Street Address Type Notification CASTLE POINT ON HUDSON Agencies Notified EPA Initial Notification City, State, Zip Code DEP Amended Notification HOBOKEN, NEW JERSEY 07030 DOL Cancellation Telephone NumberOS CONTROL DOH On Hold Name of Contact DCA **EMERGENCY NOTIFICATION** DAVID FERNANDEZ CENSING **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) STEVENS INSTITUTE OF TECHNOLOGY Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 CASTLE POINT TERRACE 20.000 60 County (6) County Code (7) Current Use (Prior if being demolished) Pharm. Lab. HOBOKEN HUDSON (STATE USE ONLY) COLLEGE/UNIVERSITY ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) LANGAN ENGINEERING 99 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 300 KIMBALL DRIVE 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code PARSIPPANY, NEW JERSEY 07054 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number VIJAY PATEL 201-398-4544 845-369-7500 1101 Name of OSHA Monitor Expected State Date (10) Sched. Completion Date (11) 7/ 24 17 7 / 15 /18 QUALITY ENVIRONMENTL Month Year Month Day Year Day Occupancy Status During Abatement (Check only one) Street Address 1376 ROUTE 9 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY-FRIDAY 7AM-3:30 PM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation X Mini-Enclo. Wrap and Cut >3SF OR LF X Glovebag Procedure >160 SF OR 260 LF Non-Friable Procedure Is Location Description of Asbestos-Abatement Type Location of normally used Containing Material (ACM) Amount Asbestos-containing **ENCAPSULE ENCLOSURE** REMOVAL REPAIR Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) Staff (12) in Facility (13) or other miscellaneous) Yes No N/A 1ST FL. POWERHOUSE X BOILER BREECHING 2,100 SF X 1ST FL. POWERHOUSE X PIPE INSULATION 165 LF X 1ST FL. POWERHOUSE X PIPE FITTING 100 LF X 1ST FL. POWERHOUSE TANK INSULATION 510 SF X X 1ST FL. POWERHOUSE X PIPE FLANGE GASKET 25 SF X X BOILER BREECHING 200 SF EXTERIOR POWERHOUSE PIPE INSULATION 150 SF X TRENCH-EXTERIOR POWERHOUSE X X X ROOF -POWERHOUSE BUILT UP ROOFING 650 SF X 600 SF ROOF -POWERHOUSE ROOF MASTIC X FOUNDATION SEAM CAULK 45 LF X POWERHOUSE EXTERIOR WALL POWERHOUSE -THROUGHOUT X PIPE INSULATION 35 LF X Name of Registered Waste Hauler NJDEP Waste Name of Registered Landfill Cubic Yards of Waste NEWARK CARTING Hauler ID No. 160 GRAND CENTRAL SANITARY LANDFILL 369 RAYMOND BLVD 913

Disposal Date

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Project Manager for Moni	toring Firm			Tele	phone	No.	7elepho			License No 01127	D .			
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\SB-41														

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check# 2846 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 08 01 / 17 Valery Montgomery ASBESTOS CONTROL & Type Notification Agencies Notified Street Address X EPA X Initial LICENSING ☐ Amended **⋈** DOLWD City, State, Zip Code Amendment # X DHSS East Orange, NJ 07017 Emergency (including T DCA Name of Contact Telephone Number justification) (NJAC 5:23-8) Cancellation Valery Montgomery FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age East Orange, NJ 07017 County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Essex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 01127 973-638-1777 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor 08 / 14 / 17 08 / 12 / 17 Envirovision Consultants, Inc. Occupancy Status During Abatement (Check only one) Street Address X Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM- PM/ PM_ AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure ≥ 3 sf or >3 If ≥ 160 sf or ≥260 If Mini-Enclosure Renovation Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Demolition Is Location Abatement Type Normally Location of Description of Repair Used Solely by Remova Encapsulate Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)other miscellaneous) (13)Yes No N/A X Basement Pipe insulation 200 LF X \boxtimes Boiler insulation 80 SF Basement Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date N.Jevtic 08/01/17 Owner ASB-41

State of New Jersey

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City, State							al Date		City, State						
Garfield, NJ		<u> </u>				TBD			Morrisvi	lle, P	A				
Completed by		Title				S	anature				Dat	6		-	-

Tina Caporino

Secretary

Date

8/52/17

Signature

Capone

				(Pu	rsuan	t to NJA	C 8:60 and 5:16	5)	1111	_ 7	2017	,	
Date of Notification (1)					Name	of Building	Owner/Operator (2)	LI L AUG		CULL		THINKS
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Agencies Notified	Type Notifica	ation			Street	Address		-	ASBESTO	000	NTR	OL 8	3.
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(NJAC 5:23-8)	Cancellat	520				t Kelly			T TO OF TO THE				
					FAC	CILITY IN	FORMATION						
Name of Facility Where A	batement is T	aking P	lace ((3)				Type of Facility	(4)				
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Street Address								Subchapter Other (i.e., r	8 (Other than K-12 private and comme	?) rcial bu	ildina	S	
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Cumberland								Building					
Name of Monitoring Firm	Hired by Build	ding Own	ner (8	3)	ASCM	No.	Name of Abateme	ent Contractor (9)				
N/A							Guardian Co	ntracting, Inc.					
Street Address							Street Address						
							1889 Route 9	, Unit 61					
City, State, Zip Code							City, State, Zip Co						
		5.					Toms River,	New Jersey 08	3755				
Project Manager for Moni	toring Firm			Tele	phone	No.	Telephone No.		License No.				
							732-349-9932		00624				
Start Date (10)		Schedule					Name of OSHA N						
08 /14 /		80	_ /	15	_ / _	17	E.M.S.L. Ana	lytical					
Occupancy Status During	Abatement (Check o	nly or	ne)			Street Address						
☐ Facility Closed/Vacate						2.	1056 Stelton						
Abatement Performed Time of Abatement:							City, State, Zip Co			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
				_ rivi-		AIVI	Piscataway, I	New Jersey 08	3854				
Scope of Work (Check all	that apply)						☐ Full Cont	tainment with Ne	gative Pressure				
≥3 sf or ≥3 lf			Ren	ovati	on		☐ Mini-End	closure	gative i ressure				
≥ 160 sf or ≥260 If		\boxtimes	Den	nolitio	on			g Procedure	on-Friable Procedu	150			
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TO BE ABA IN Facilit			-	7.5	Staff?	(i.e	., thermal systems surfacing, VAT		(Specify SF or LF)	ova	₩	psu	uso
(13)	,			(12)			other miscellane		0, 0, 2, ,	-		llate	9
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exterior				\boxtimes		asbesto	s siding		625 sf	\boxtimes			
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City, State				_	20223	,	Disposal Date	City, State		100000000000000000000000000000000000000			
Toms River, New Je	rsey						08/16/17	Tullytown	, Pennsylvania				
Completed By (Print or Ty	rpe)	Title					Signature	1	7 10	ate	_	/	
Nicholas Fernicola	one SC	Pro	ect	Man	ager			~ .	V	8/	2/	17	,

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State of New Jersey

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Date of Notification (1) 8/2/17				of Building Fletcher		Operator	(2)		(m)	1			17.0	O1 6
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Street Address							H	School (K-1 Subchapter		or than V	12)			
ottoot / tool oo							×	Other (i.e. p				ldings	, hom	es.
City (5)								etc.)	1 11			51.1		
Toms River							Sq	uare Feet	# 01	Floors		Bldg.	Age	
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Street Address						Street	Add	ress					-	
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Project Manager for Monitoring Firm			Telepho	ne No.		Teleph				License	No.			
						732-6	668	-9078		1200				
Start Date (10)		ed Cor	npletion	Date (11)				SHA Monitor	5 2 -					
8/4/17	8/7/17					AAA	LEA	AD PROFE	SSIO	VALS				
Occupancy Status During Abatement (Chec	k Only Or	ne)				Street								
Facility Closed/Vacated During Entire F	Period of	Abaten	nent		1			DOVE CO	JURI					
Abatement Performed Outside of Norm Other – Describe:	ial Facility	/ Hours	S					Zip Code	0704					
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×		uli Containme Ini-Enclosure		Negative	Pressu	re		
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TO BE ABATED	Ma	intena	nce/		thermal			ial (ACM)		nount pecify	Z	_	Enc	Щ
In Facility	Cus	todial S (12)	staπ?		surfac	ing, VA	T, or			or LF)	Removal	Repair	Encapsulate	Enclosure
(13)			1		otner m	iscellan	eous	5)			va	air	ulat	sure
	Yes	No	N/A										е	
INTERIOR					Trans	ite Par	nels	;	15	OSF	x			
	+						3-3-			2000				
Name of Registered Waste Hauler		Lai	IDED I	leate	Continu	Vacd-		I November	200-1	سرد الدم				
		200000	JDEP W auler ID		Cubic \ of Was			Name of F	kegistei	ed Landfi	II			
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City, State					Dispos			City, State						
NEWARK, NJ					8/7/17	8		BETHLE	EHEM	PA				
Completed by	Title				Si	gnature			201111111111111111111111111111111111111	D	ate			
JOSEPH PERLSTEIN	OWN	EK			18					1				

Print Form

State of New Jersey NOTIFICATION ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 8/2/17 City of Camden Street Address ASBESTOS CONTROL & Agencies Notified Type Notification SS Jackson 87 W of 9th Street Initial **EPA** City, State, Zip Code Amended DEP X DOL Amendment #_ Camden NJ Emergency (including Telephone Number DOH DCA justification) Name of Contact Cancellation James Rizzo FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Industrial Building Subchapter 8 (Other than K-12) Street Address Other (i.e., private 8 commercial buildings, SS Jackson 87 W of 9th Street homes, etc.) Square Feet Bldg. Age # of Floors City (s) 3500 SF 50 yrs Camden NJ Current Use (Prior if being demolished) County Code(7) (STATE USE ONLY) County (6) Abandoned Warehouse Camden Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner ASCM No. AEi2, LLC (8) Street Address Street Address 361 E. Fleming Pike City, State, Zip Code City, State, Zip Code Hammonton, NJ 08037 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 00689 609-481-2122 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) AEi2, LLC 8/3/17 Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 361 E. Fleming Pike City, State, Zip Code Hammonton, NJ 08037 Abatement Performed Outside of Normal Facility Hours Other - Describe:

Scope of Work (Check all that apply)					Full Con	tainment with N	legative Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Re	enovati emolitic	ion on		Mini-Enc Gloveba Non-Exe	g Procedure	ion-Friable Proced	иге			
		_ocatio	700					F	Abate Typ		
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Mair	d Solel ntenan ustodia Staff? (12)	nce/ al	Asbe: (i.e	Description of stos Containing Mate ., thermal systems in surfacing, VAT, other miscellaneo	erial (ACM) sulation, or	Amount (Specify SF or LF)	R e m o v a	Repair	H n u u P u u l	Enclosur
	Yes	No	N/A					1		a t	e
Roof			X	F	lashing		100 SF	X			
								-	-		-
Name of Registered Waste Hauler AEi2, LLC		1	NJDEP Hauler II 21376		Cubic Yards of Waste	Name of Reg	istered Landfill				
City, State			1370		Disposal Date	City, State	1				
Hammonton, NJ					TBD	TBD	1 100				
Completed By Wm. Minnick	Title Progran	n Mg	gr.		Signature	mi	Date 8/2/17				
ASB-41					7						

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Ch1814		ITON	FICAT	tion ase	New Jersey ESTOS ABATE 58:60 and 12:12	MENT O)	DOL	PE S	JG VIO LIC	50	.01
Date of Notification (1) 7/30/17			Nei	ne of Build	ing Owner/Operato	r (2)	AUG		- 71	17	
Agencies Notified Type Notifi	eston		_	ike Albar	The second secon		DÁA	\leq	\bigcup		
EPA DEP Amende Amende	rent# I			State, Zip			WARTER	Section 1987	PA	(1)	1.1
DOH DEMORPH	ney (includ	ng	Ne	me of Co	NJ 08034		BIGARAGE BIO	ledray.			
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Name of Facility Where Absternent is	Taking Pla	cs (3)	P	MATE IN	FORMATION	Type of Fac	inty (4)		-		-MARINE
Street Address						School (I	ter 8 (Other than K-	12) sia! bui	Idina	a.	
City (a) Cherry Hill, NJ 08034					B-1-1	Square Fact 1800 SF	o., private 8 commerces: 160,)	1 1	sidg.	Age	
County (5) Camden: NJ			Ga US	unity Code E ONLY)	(7) (STATE	Current Use Residence	(Phot if being demo	shed)		,	Marie
Name of Monitoring Firm Hired by Sull (8)	ding Owner		ASCN	No.	Name of Adalant AEi2, LLC	ent Contracto	(9)				Management
Street Address	solution and re- barries	menter.			Street Address 36) E. Flemin	a Bilea					STATE OF THE PARTY OF
City, State, Zip Code					City, State, Zig	Code		Co in the Co		-	las IV
Project Manager for Monitoring Fir	m	Tel	eph and	No.	Hammonton, 1 Telephone No. 609-481-212		License No. 00689			Constant of the last	
	cheduled (Somple	stan O	ate (11)	Name of OSMA A AEi2, LLC	The same of the sa	3000)	NAME OF STREET	angueu Sacrati	No.	occidental
Occupancy Status During Abstament (Facility Closed/Vacated During Ent	Check only	(ane)		The complete sea	Street Address		District Control of the Control of t	CONTRACTOR OF THE PARTY OF THE			
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Scope of Work (Check ell that apply)						Title Control of the	Negative Pressure				
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Name of Registered Waste Hauler ABI2, LLC	Taxable Control of the Control of th	M	Joep v auler (C 1376	Vasis No.	Cubic Yeres of Weste	Name of Re	astered Landill				-
DIY, SIME	and the second second second	-14	17.70		Lieboasi Date	City, State				- Contraction	

. Do not use this form for appeatos licensure exempted activities.

	1			FICATIO	State of N ON OF AS nt to NJA	BESTOS	SABATE			ME	C I	EI	\mathbb{V}	TE
Date of Notification (1) 08/01/2017			-	Name East	of Buildir Brunswic	ng Owner ck Public	Operator School	· (2)		l n c	heck#	‡ 4856		The same of the sa
Agencies Notified	Type Notificatio	n			Address Route 18						UG	- 7-	201	Z
⊠ EPA ⊠ DEP ⊠ DOL	☐ Initial X Amended Amendme	nt #_1		City, S	State, Zip Brunswic		3816			ASBE	STOS LICE	S CO ENSI	NTR VG	OL
☑ DOH ☑ DCA	Emergency justification)				of Contac d Schen					-				
Name of Facility When	e Abatement is Tak	ing Place ((3)	FA	CILITY IN	FORMAT	ΓΙΟΝ	Type of Facili	ity (4)					
Street Address 380 Cranbury Road				-				☐ Other (i.	oter 8 (Other than K- ate & commer	12) cial bu	ildings	s, hon	nes,
City (5) East Brunswick								etc.) Square Feet		# of Floors		Bldg.		-
County (6) Middlesex				County (STATE	Code (7)) .Y)		Current Use (Prior if	being demoli	shed)			-
Name of Monitoring Fir Environmental Design	rm Hired by Building gn, Inc	Owner (8)	ASC	M No.		Name Lilich	of Abatement (Corporation	Contrac	ctor (9)				
Street Address 5434 King Ave								Address IcBride Ave	-					
City, State, Zip Code Pennsauken, NJ 081	109						City, S Wood	tate, Zip Code land Park, Ne	ew Jer	sev			-	
Project Manager for Mo Jay Murray	onitoring Firm			Teleph 856-6	one No 16-9516		Teleph	one No. 25-8400		License I	No.			
Start Date (10) 08-14-2017		Schedul 08-22-2	ed Co 2017	mpletion	Date (11)	Name Iris En	of OSHA Monit	or _abora				AUST	2 2 1/2
Occupancy Status Duri Facility Closed/Va Abatement Perform Other – Describe:	cated During Entire	Period of	Abate	ment			Street / 2333 F	Address Route 22 Wes		4				
Scope of Work (Check							Unic	n, NJ 07083						
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			Renova Demoli	10719700 014				Mini-Enclos Glovebag P	ure rocedu	vith Negative I re and Non-Frial			•	
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Asbestos-Containing TO BE AE In Fac (13)	BATED ility	Ma	intena	ince/ Staff?	Asbe (i.e	thermal surfa	taining M I systems cing, VAT niscellane			Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
in t		Yes	No	N/A				A			<u>ai</u>	7	late	ire
Kitchen freezer area				Х	TSI(asl	bestos&	knon-as	bestos)	500	LF	Х			
Kitchen freezer area	1			X	VAT/N	lastic		4	170	SF	X			
Name of Registered Wa	ste Hauler		l N	JDEP W	lasto	Culti	Vari							
Lilich Corporation			H	lauler ID 18724		Oubic of Was		G.R.O.N		stered Landfill Indfill				
City, State Woodland Park, N	lew Jersey					Dispos	sal Date	City, St		orrisville, PA				
Completed by Momo Glavatovic		Title Pro	ject r	manage	r	S	ignature	AA		Da		2017		

Date of Notification (1) 08/01/2017				Name Livin	of Building gston Bo	Owner/ ard of E	Operator Education	(2)		chec	k# 486	64		
Agencies Notified	Type Notification	1			Address xcroft Dri	ve	1		Prop)_[(E		\mathbb{V}	
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1				FAC	CILITY INF	ORMAT	ION			ASBES	TOS	CON	TRO	1-8
Name of Facility Where A Mt. Pleasant Middle so	Abatement is Taki chool	ng Place (3)					Type of Facilit			ICEN			
Street Address 11 Broadlawn Drive								School (K ☐ Subchap ☐ Other (i.e	ter 8 (Oth	ner than K- & commerc	12) cial bu	ildings	, hom	ies,
City (5) Livingston								Square Feet	# 0	of Floors		Bldg.	Age	58 14.
County (6) Essex					Code (7))		Current Use (F	Prior if be	ing demolis	shed)			
Name of Monitoring Firm Garden State Environ	Hired by Building mental	Owner (8		ASC	M No.		Name of Lilich (of Abatement C Corporation	Contracto	r (9)				
Street Address 555 S.Broad Street								Address cBride Ave						
City, State, Zip Code Glen Rock, NJ 07452							City, St.	ate, Zip Code and Park, Ne	w Jerse	v				
Project Manager for Moni Bruce Wolf	itoring Firm			Telepho 201-65	one No 52-1119		Telepho			License I	No.	-		
Start Date (10) 08-10-2017		Schedul 08-11-2	ed Co	mpletion	Date (11)		Name o	of OSHA Monito	or aborato					
Occupancy Status During							Street A				SS-58910			
☐ Abatement Performe ☐ Other – Describe:	ed Outside of Norn	Period of nal Facility	Abater / Hour:	ment s			City, Sta	ate, Zip Code n, NJ 07083	-					
Scope of Work (Check All	That Apply)							Stati Davis and Samuel Samuel						
≥3 sf or ≥3 lf⇒160 sf or ≥260 lf			Renova Demolit				X	Full Contains Mini-Enclose Glovebag Pro Non-Exempte	ire ocedure/	Tent			2	
		ls	Locat	tion					1				ement	t
Location			Norma			De	scription o	of			-	Ty	уре	
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		Yes	No	N/A							_		te	0
Room # 201				Х	Glue da	abs			8 SF		X			
Room # 201				X	VAT/M	astic			24 SF		Х			
Room # 201				X	Table to	ор			16 SF		X			
Name of Registered Waste														
Lilich Corporation	e Hauler		Н	IJDEP W lauler ID 18724		Oubic of Was		100000000000000000000000000000000000000	f Registe	red Landfill				
City, State Woodland Park, Ne	w Jersey					Dispos	sal Date	City, Sta	ate	risville, PA				
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Name of Facility Where A	Abatement is Taking	Place (3)					Тур	oe of Facility	1.71000						
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Cape May				(STATE	USE ONLY				ffice Buildi		•					
Name of Monitoring Firm	Hired by Building O	wner (8)	ASC	√l No.				batement Co	ntractor	(9)	3274-77				
N/A									Inc.							
Street Address							Street PO I									
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Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	none	No.		Licens	e No				
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Abatement Performe Other – Describe:	ed Outside of Norma	I Facility	y Hours	ent			City, S	tate,	Zip Code			20,221,20				
Scope of Work (Check Al	l That Apply)			-							6					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoliti				×	N G	Full Containm Mini-Enclosur Blovebag Pro Ion-Exempte	e cedure	2				a	
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In Facili		Cus	todial S	staff?	(1.6.	surfa	systems cing, VA	T, or	Jiation,		pecify or LF)		Remova	Repair	cap	nclo
(13)			(12)				niscellan				5%		ova	oair	Encapsulate	Enclosure
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											2 12 2 2 1 2 2 2					
	No.									i,						
Name of Registered Was	te Hauler		45.00000	JDEP W	STATE OF THE STATE		Yards		Name of	Registe	red Land	dfill				
Transformation			- 1	auler ID 3952	No.	of Wa	ste		Cape I	Иау Со	ounty l	and	fill			
City, State						_	sal Date		City, Stat	e				1111-20-E		
Egg Harbor NJ						8/22/	17		Woodb	ine N.	0827	90				
Completed by		Title				S	Signature	20	1			Date				
Anthony T Perna		Pres	ident				()	_				8/1	/17			

01600111		NOT	IEICATI	State of New Jers	sey					E		Print F
Date of Notification (1)		NOT	(Pursua	ON OF ASBESTO nt to NJAC 8:60 a	nd 12:12	20)	NT				<u>U</u>	
07/31/17				eph Brown, Jr.	Operato	or (2)			AUG	-	7 21)17
Agencies Notified Type Notification	n		-	Address				Next inst				
EPA Initial								L	BEST	08.0	CON	TROL
DEP Amended	eren.			State, Zip Code				1	LI	CEN	SIN	3
_ Fmergenc		ng		kell, NJ 07420				To the second second		ALCOHOL SECTION		
DOH justification	1)	19		of Contact				Telephone	Numbe	r	-	
☐ DCA ☐ Cancellation	on		0.00/4000000	k Abate						_		
Name of Facility Where Abatement is Tak	ing Place	(3)	FA	CILITY INFORMA	TION	Tur	pe of Facility (4	1				
Private House		• *				I y		15				
Street Address						H	School (K-12 Subchanter	2) 8 (Other than I	< 12\			
						×	Other (i.e. pr	ivate & comm	ercial bu	uilding	s, hor	nes,
City (5)						Sar	etc.) Jare Feet	# of Floors				
Haskell										Bldg.	Age	
County (6)			County	/ Code (7)		Cur	rent Use (Prio	r if being demo	olished)			
Passaic			(STATE	USE ONLY)					(34)			
Name of Monitoring Firm Hired by Building Competent Supervisor	Owner (8)	ASC	M No.	Name	of At	patement Cont	ractor (9)				
Street Address					Acad	dem	y Construct	ion Inc.				
Street Address					Street							
City, State, Zip Code							16 West Sui	te 14				
- ig, state, zip sode							Zip Code					
Project Manager for Monitoring Firm			Teloph	one No.			NJ 07512					
•			releptin	one No.	Teleph 973		No. -4244	License				
Start Date (10)	Schedu	led Co	mpletion	Date (11)			SHA Monitor	01155)			
08/12/17	08/19	/17	100 A 20 20 20 20 20 20 20 20 20 20 20 20 20	()	1		above					
Occupancy Status During Abatement (Che-	ck Only C	ne)			Street	120000						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of mal Facili	Abater y Hour	nent s		City, S	tate, 2	Zip Code	-				
Scope of Work (Check All That Apply)												
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		Renova				Fu	ıll Containmen	t with Negative	e Pressi	ire		
		Demoli	tion		×	Mi GI	ini-Enclosure ovebag Proce on-Exempted (dure			re	
		s Locati									emen	t
Location of	He	Normal ed Sole	ly by	Des	scription	of			_	T	уре	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	aintena	nce/	Asbestos Cont (i.e. thermal	aining M	ateria	I (ACM)	Amount			m	
In Facility (13)	Cus	todial 8 (12)	Staff?	surfac	cing, VA7	r, or		(Specify SF or LF)	dem	Repair	cap	ncl
(10)				other n	niscellane	eous)		55	Removal	pair	Encapsulate	Enclosure
_	Yes	No	N/A								ite	Ф
Basement			X	Pipe	Insulat	ion		75 LF	X		X	
										-		
lame of Registered Waste Hauler		N.	JDEP W	aste Cubic	/arde		Name of D	aiotor- d I	30			
cademy Construction Inc.		H	auler ID	No. of Was				gistered Landf	Ш			
ity, State		03	34422	2			GROWS	Landfill				
otowa, NJ				Dispos	al Date		City, State	5.				
completed by	Title			TBD	an a t		Tullytown	, PA				
ilip Geleski		rvisor		51	gnature	T	20.6		ate)7/31/1			

CK 1203

			-	D 711: 0	10	(2)		—— <u> </u>		77	П	77	
Date of Notification (1)	Na	ome of	Building O	wner@pe		JRCH O	FLE	D. E. 6			\mathbb{V}		
Agencies Notified Type Notification		Str	reet Ad	dress		CCIC	0,000				-		
					Fo	NET L	-EE (KD	UU AUG	_	7 0	017	1
EPA Initial DEP Amended		Cit	ty, Stat	e, Zip Code							1-0	UIT	
DOL Amendment #_		-		LEO	NIA	. ~	J. 0	760	5				
DOH Emergency (inc justification)	luding	Na	ame of	Contact					Telephone Number	ds (CON	TRO	L &
DCA Cancellation		1	R. 6	PETEL	SHAL	740							
		1	FACIL	JITY INFO	RMATI	ION	Type of Facil	1:6. (4)					
Name of Facility Where Abatement is Taking Place				1721									
PRESCYTERIAN CHURC	4 07	LE	041	A			Subchar		ther than K-12)				
Street Address 181 FORT LEE	= 00			%.	12	ī	Other (i	i.e. private	e & commercial by	uilding	gs, hor	nes, et	tc.)
City (5)					· ·		Square Feet		# of Floors	Bl	dg. A	ge	\neg
LEONIA							6000		1	1	90	/	
County (6)		Co	ounty C	ode (7)		(eing demolished)				
BERGEN		(57	TATE U	SE ONLY)			CHUR	CH/6	PREK SCH	100			
Name of Monitoring Firm Hired by Building Own	er (8)		ASCM	I No.			Abatement (
DETAIL ASSOCIATES			0	0013	-	3=	st le	MOU	AC INC				
Street Address						Street Ac							
300 GRAND AVE								SSS11	JEK ST				
City, State, Zip Code	. –		~ · ·			City, Sta	te, Zip Code		· VI	17	, ,	1	
ENGLEWOOD	, NJ.							+ CK	. Eu .	5 60	a 0		
Project Manager for Monitoring Firm			lephon		.0	Telephor	ne No.	261	License No.	12	80		
ANTHONY VALENTINE		20	1-56	59-670	3 (20	OSHA Mon	-194	4 00		-		
Start Date (10) 8/19/17	Scheduled C	omplet 26	tion Da	te (11)		22.500			ron Men	TAC			
Occupancy Status During Abatement (Check Only		20	011			Street Ac		0 711	0.0 1 1010		_		
							30 Huy	YLER	ST				
Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Fa						City, Sta	te. Zip Code						
☐ Other – Describe:					_	Sou	TH HAC	CHENS	ACK. NJ		07	600	6
Scope of Work (Check All That Apply)													
□ ≥3 sf or ≥3 lf	Ren	ovation	n				Full Conta	ainment w	rith Negative Press	ure			
≥160 sf or ≥260 lf	☐ Den	nolition	1			, Table 1	Mini-Encl Glovebag		•				
							Non-Exem	npted (*)	and Non-Friable P	rocedi	ure		
	Is I.	ocation									Abate		
Location of	Not	rmally			Des	scription o	of		~		Ту	pe	-
Asbestos-Containing Material (ACM)		Solely by tenance					terial (ACM) tion, surfacin		Amount (Specify	×		En	100
TO BE ABATED In Facility		dial Stat	ff?	(i.e. ther		VAT, or	tion, surfacin	15,	SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	((12)			other r	miscellane	ous)		***	val	ur	ulate	sure
	Yes	No	N/A										
BOLEK ROOM/CRAWL SPACE			×	THECMA	L Sus	STEMS I	NSULATI	المقا	350 LF	×			
/ 2		_		107	0 07-	710.10				•			
		+											
								-					
						., .	1.55	- CD	stored Tandell				
Name of Registered Waste Hauler		V 10300 20 CT	DEP Wa		Cubic of Was				stered Landfill				
NEWARK CARTING			45			5475	G4	and ci	entrac saw	TAN	74	NOF	icu
					Dispos	al Date	City,	, State		1	1	2	
NEWARK . NJ					8/	126/17	1 1	ENA	ARGYL,		1.1	507	2
Completed by	Title				S	ignature	0 10		Q Date	01.	1.	-	
Completed by J. MAIORANO	ES	TIM	LAT	TOR		V 7	forion		<u> </u>	0/4	11		
						1	1		u ashastaa Haaa	ra aur	mated	antivi	ities
ASB-41 (R-06-08)						()*1	Do not use th	us form fo	or asbestos licensu	c exe	mpted	activi	illes.

Ch411	le4	NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)											\mathbb{V}	E	
Date of Notification (1)		&==_N		1101				vner/Operator (UG -	7	2017		
	31 /	17			Ru	nnemede	Sc	hool District		IL A	UU	1	2011		-
Agencies Notified	Type Notific	ation			Stree	t Address									
⊠ EPA					505	West Th	nird	Avenue		ASBES	STOS	COI	VTR	OL 8	3.
☑ DOLWD	Amende				City,	State, Zip (Code			1	LICEN	SH	lG		
☑ DOH ☑ DCA	Amendm Emerger	The state of the s			Ru	nnemede	, NJ	J 08078							
(NJAC 5:23-8)	justificat	ion)	iciaaiii	9	Name	of Contac	t			Telephone	Number				
100	☐ Cancella	tion			Fra	nk Hines									
					FA	CILITY IN	IFOI	RMATION					3		
Name of Facility Where A				(3)					Type of Facilit	y (4)					
Aline Bingham Eler	nentary Sc	hool							School (K-		14.40)				
Street Address										r 8 (Other than private and co		lbu	ildino	S	
100 Orchard Avenu	ie								homes, etc				nunig	٥,	
City (5)									Square Feet	# of Floor	s	Blo	lg. A	ge	
Runnemede									50,000	2			90		
County (6)					Cour	nty Code (7)(STA	ATE USE ONLY)	Current Use (F	Prior if being de	emolishe	d)			- 50.7
Camden									School						
Name of Monitoring Firm	Hired by Buil	ding (Owner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)					
ATC Group Service	s, LLC			1	0009	98	5	Shade Enviro	onmental, LL	С					
Street Address				· ·			Str	eet Address							
3 Terri Lane							6	323 Cutler Av	/enue						
City, State, Zip Code							Cit	y, State, Zip Co	ode			-			
Burlington, NJ 0801							IV.	Maple Shade	, NJ 08052						
Project Manager for Moni	toring Firm	lephone No.		License N	lo.		1-11								
John R. Lutz				60	9-386	-8800	8	56-755-0099		00842					
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor															
08 /14 /	17	MSL Analyti	ical, Inc.												
Occupancy Status During	Abatement (Check	conly o	one)			Stre	eet Address						0.0	
☐ Facility Closed/Vacate							2	00 Route 13	0 North						
Abatement Performed							City	y, State, Zip Co	ode			- 17	/		
Time of Abatement:	Aivi-	P	VI/	_PIVI-		AIVI	C	innaminson	, NJ 08077						
Scope of Work (Check all	that apply)								N2 W 2021	1 197 1/21					
			⊠ Re	novati	on			☐ Full Cont Mini-Enc	ainment with Ne	egative Pressu	re				
☐ ≥160 sf or ≥260 lf				molitic					Procedure						
								☐ Non-Exe	mpted (*) and N	lon-Friable Pro	cedure				
4.0000004.0000			0.000	Locat Norma					2			Aba	teme	nt Ty	/pe
Location of Asbestos-Containing N		1)		d Sole		Ashe	stas	Description o Containing Mar		Amoun		Re	Re	E I	E
TO BE ABA	TED	,	0.000	intena				ermal systems i		(Specify	y	Removal	Repair	cap	Enclosure
IN Facility	у		Cus	todial ((12)	stan?			surfacing, VAT,		SF or LF	=)	<u>a</u>		Encapsulate	ure
(13)			Yes	No	N/A	1	Oti	her miscellane	ous)					te	
Boiler Room						Pipe Ins	sula	tion		170 LF	=	X	П	\Box	П
Stairs						Pipe Ins				33 LF		<u> </u>	П		
Storage Room			П			Pipe Ins				30 LF		7		$\overline{\Box}$	\exists
			П	П	П						- 1	=	H	П	
Name of Registered Waste	e Hauler			N	JDEP V	Vaste	Cub	oic Yards of	Name of Red	I istered Landfill					
Freehold Cartage					auler IE		Was	ste		North Landfil					
City, State					15939		1 Dist	0 posal Date	City, State						
Freehold, NJ								8/18/2017	Morrisvill	e, PA					
Completed By (Print or Ty	pe)	Title	9					Signature			Date	_			
Christina Lynch	SN 28	Vi	ce Pr	eside	nt of (Operation	15	Christ	els		7/	31	11:	7	

State of New Jersey

Data as National (4)								Ch	eck#	119	75			
Date of Notification (1)	ugust 1, 20	17				ding Owner / rica Mortga		or (2)						
	Type Notific				et Addres		ge			TEG		W	7	
□EPA □DEP				112	5 Route 2	2 West								1
⊠DOL	✓ Initia	al		City	State & Z	Zip Code				LI AUG	-/	201	1	i consec
⊠DOH	100 mm (100 mm)	ended endment #		Brid	gewater,	NJ 08807				İ				1
DCA		cellation	_	Nam	ne of Cont	act			_	ASBEST	25 G	MT	101	<u>.</u>
1 () () () () () () () () () (-								<u> </u>	L	elepho	NG	umb	er
				F.	ACILITY	/ INFORM	IATION							
Name of Facility Where Bank of America Mort	Abatement	is Taking	Place (3)			Ту	pe of Fa							
Street Address	.gage					_	-	ol (K-12)						
1125 Route 22 West							_	napter 8 (Other than			· ·			
						E S		r (i.e., private & c			E	17 7 OCA -	etc.)	
City (5)							uare Fee		oors 2	B	dg. Ag	e 34		
Bridgewater						Cu		e (Prior if being den		d)		34		
County (6)		10	`t O	1 - /71		Off	fice Buil	lding						
Monmouth			County Coo											
Name of Monitoring Firm	m Hired by B	uilding Ov	wner (8)		ASCN	No. Na	me of Al	patement Contracto	r (9)					
Arcadis US Inc. Street Address						Syı	natech,	Inc.						
655 Third Avenue							eet Addr Radio							
City, State & Zip Code								& Zip Code						
New York, NY 10017 Project Manager for Mor	nitorina Eirm		IT.		N			Harbor, NJ 08087						
Victor Cheban	intorning Firm		10000	elepnone 16-617-10	Number 059		ephone 9-296-69			License Nur	nber 0081	7		
Scheduled Start Date (1		Schedule	d Complet					SHA Monitor			0001	,		
August 12, 20 Occupancy Status Durin		ot (Chack		nber 12,	2017		natech, I							
Facility Closed/	Vacated Du	ring Entire	Period of	Abateme	ent	10000000	eet Addr							
Abatement Per	formed Outs	ide of Nor	mal Hour	s				& Zip Code				_		
Other - Describ								Harbor, NJ 08087						
Facility Occupie														
Scope of Work (Check a	all that apply))												
П								Full Containment	with N	egative Pres	sure			
≥3 sf or ≥ 50 lf ≥160 sf or ≥260 lf			H	Renovat	*.=:0.5		⊵	Mini-Enclosure						
△ ≥160 St of ≥260 if			Ш	Demoliti	on			Glovebag Proced						
Location	on of		Tis Locati	on Norm	ally Used		<u> </u>) and N	lon-Friable P				
Asbestos-Containin	g Material (A	ACM)	Solely b	y Mainte	nance or	1	Descrip	Containing	Amo	unt (Specify	Ab	atem	ent T	ype
TO BE AN			Custo	dial Staf	f? (12)	İ	Material	(ACM)	S	F or LF)				
(13								al systems rfacing, VAT					Ē	
								cellaneous)			Ren	Re	ncap	incl
			.,								Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A						3	,	ate	ē
oading Dock Area and	HV Room				Х	Flo	or Tile a	nd Mastic		350 SF	X			
											"			
lane of D														
lame of Registered Was	ste Hauler		NJDEP V Hauler ID		Cubic Y	Yards of Was	ste	Name of Registe	red La	ndfill				
ynatech, Inc.			mention statement (Feb. 3)	429	5			Fairless Hills						
ity, State					Disposa	al Date		City, State						
ittle Egg Harbor, NJ 0	8087				Senter	nber 13, 201	7	Morrisville, PA						
ompleted By		Title			Signatu		01		ate					
iane Aloia		Executiv	a Admini	trata-	1()	are C	100	4		.072720220				
	Aloia Executive Administrator							A	ugust '	1, 2017				

Date of Notification (1) 07/31//2017	7/31//2017						Operator of Edu	(2) ication		AUG	ch# 4	7858	17	
© EPA C	ype Notification Initial Amende	ed		500	10-2500.909	oad Stre	eet		A	SBEST	os c	ONT	ROI	- &
⊠ DOL @	Amendmen Emergency			City, Eli:	State, Zip zabeth,	Code NJ 072	.08			L	CEN	SING		-
DOH DCA	(including justification Cancellation				e of Conta				T +-1	NI	··mha	c		
				F/	CILITY	NFORMAT	TION				200-			
Name of Facility Where Aba Terrence Reilly school	itement is Takir o1 # 7	ng Place	(3)			TO THINK		Type of Facility	y (4)					******
Street Address 436 First Ave								Other (i.e.	pter 8 (Otl	her than h	(-12) cial bu	ildings	, hon	nes,
City (5) Elizabeth					301-101-101-101-101-101-101-101-101-101-			etc.) Square Feet	# of	Floors	Т	Bldg.	Age	
County (6) Union				Count	ty Code (7	") / YI		Current Use (P	rior if bein	ng demoli	shed)			
Name of Monitoring Firm Hir	ed by Building	Owner (8	3)		CM No.			school					li.	Name of the last
Detail Associates, In	c				OW 110.		Lilich	of Abatement Co Corporatio	ontractor (n	(9)				
300 Grand Ave							Street A	Address IcBride Ave	2					
City, State, Zip Code Englewood, NJ 072		2 1					City, St Wood	ate, Zip Code land Park, N	VJ 0742	04				energy
Project Manager for Monitoria Anthony Valentine	ng Firm			Teleph 201-5	none No.)8	Telepho			License I	Vo.			
Start Date (10) 08-11-2017		Schedu 08-13	uled Co 3-201	mpletion 7	n Date (11)	Name o	of OSHA Monitor	r					
Occupancy Status During Ab	atement (Checi						Street A	vironmenta	u Laboi	ratories	, LL	C		
Facility Closed/Vacate Abatement Performed Other – Describe: U	ed During Entire	Period	of Aba	uro	w='		2333 F	Route 22 We	est					
Scope of Work (Check All Tha		art 5 pii	ı, saı-	sun /ar	n		Union,	, NJ 07083						
≥3 sf or ≥3 lf © ≥160 sf or ≥260 lf	ас Арріу)		(X) (6)	Renova Demoliti			© © X		ure rocedure	LIMITED	CON	TAINA	1ENT	
			s Loca	tion	T		<u>©</u>	Non-Exemp	oted (*) an	d Non-Fr	iable F			
Location of Asbestos-Containing Mate	arial (A CM)	No	rmally Solely	Used		Des	scription o	ŕ				Abate Ty		
TO BE ABATED In Facility (13))	Ma	aintena stodial (12)	ance/ Staff?	Asbe (i.e	thermal: surfac	aining Ma systems i sing, VAT, iiscellaned	or	(Spe	ount ecify or LF)	Remova	Repair	Encapsulate	Enciosure
ym area		Yes	No	N/A	ļ.,						==		ate	će.
sym area		-	X	-	pipe i	nsulatio	n		126 LF		X			
<u> </u>				-										
Name of Registered Waste Ha ilich Corporation	uler		H	JDEP Waller ID 3724	Vaste No.	Cubic Y		Name of I						
city, State Voodland Park, New J	ersey					Disposa	al Date	City, State Morrisv	9					-0.00
Completed by 1omo Glavatovic		Title projec	t mar	nager		Sig	gnature	Nons	— FA	Dat	e 31/2	017		1
	,						- (TO.		077	31/2	01/		

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) | Check #: 6990

G4667

		34 NO						A START STATES	- / Office	7. 0330		п	7.0	
Date of Notification			IIN	ame d	f Bu	ildi	ng Ow	ner/Operat	or (2)	Intel) E		W	E
0 7 / 3 Agencies Notified			11	Vorth			18. Bisc	orhees R.I	H.S.Ď.					
	TAbe Worlt	TCGCTON	113	creet	. Auc	iress				IIIII AL	IG -	7.	2017	
	[X]Initi	al ication	1.4	1445 I			- 8-	,		End beach				
[X] DEP			11	ity.						ASBES	TOS	CO	NTR	OL 8
X1DQL	{ }Amend Notif	ed ication	11	Annar				1			LICE	NSI	VG_	
(X)DOH	[]Cance	llation	N	ame d	of Co	ontac	t		Te.	Lephone Numb	er			
[]DCA			V	Villiar	n Mo	wery	, Fac	ilities Direc	tor					
				F	ACI	LITY	INFOR	MATION						
Name of Facility W	nere Abatem	ent is T	akin	g Pla	ice	(3)			Type of Faci	lity (4)				
Voorhees High Scho	ol					•			[]Subc	ol (K-12) hapter 8 (Ot r (i.e., pri	vate	8 00	ommer	2)
256 Route 513									Square Feet	# of Floor				_
City (5)		Count	y (6	1	-			Code (7)	50,000	2		50		
Clas Cordson N.I.00	000					(S	TATE	USE ONLY)	Current Use	20.4	ing	demo.	lishe	ed)
Glen Gardner, NJ 08 Name of Monitoring Owner (8)		Hunte			M No	<u>. </u>	Nan	e of Abate	School Buildi	ng or (9)				
Briggs Associates.				004	!		For	ur Strong B	uilders, Inc.					
3 Crosswicks St.	ode						180	Sargeant y, State,	Avenue Zip Code					
Bordentown, NJ 0850 Project Manager for	05 Monitoria	g Firm [Tele	phone	Nur	nber	Clif	ton, NJ 070	013-1935	Lice	nse	Numbe	er	
Michael Hoodak, EPA	A Project De	esigner 6	09-	298-5	520	(11)	973 Nam	3-614-0377		0080)7			
0 8 / 1 1 / / Month / Day / Occupancy Status Du	1 7	0 8 / Month /	1 4	1/12	1 7	_1	Fou	ur Strong B	uilders, Inc.					
(X) Facility Close of Abatement [] Abatement Feri Hours - Descri	ed/Vacated	During E	ntir	e Per	iod		180	Sargeant y. State.	Avenue					
[]Other - Descri						_	Clif	ton, NJ 070	013					
Scope of Work (Chec	k all that	apply)					11		. Containment	with Magatin	o D=			-
[]Demoliti [X]>3 sf or []∑160 sf	>3 1f		×]Renc	vati	lon		[]Mini []Glov	-Enclosure rebag Procedure -Friable Proce	2	6 11	-554		
Locati Asbestos-C Material TO BE A in Faci	No by te Cu St	Is cation rmall Used olely Main nance stodi aff(1	y 	i	بر i.e. nsula		aining	Amount (Specify SF or LF)	R E M O V A L	REPALR	E N C A P S U L .	ENCI. OSURE		
Green House behind	the school			X		Trans	side p	anels, tray	s and racks	1,200 SF	X			
	•										-			
		dia					-			+				
Name of Registered	Waste Haul	er		JDEP auler				c Yards aste	Name of Regi:	stered Landf	111	<u> </u>		
Four Strong Builders	, Inc.		1.	2609			0==	00-1 N-1:	G.R.O.W.S., I	nc.				
orti. State							DISD	osal Date	City, State					
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Completed By (Print	or Type)	Title	S 62 W 5 T =					Signature	At .	1	Da	ate		
Bilyana Kulakovska		Office Ad	lmin	istrat	or			(D)	du	//	7/	31/1	7	
ASB-41 JUN 95										/			V-0	

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

Check #: 6990

G4667

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Date of Notification	on (1)] Na	ame c	of Bo	uildin	ig Qw	ner/Operat	0	or (2)	M	EG	ET	W	E	I
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Name of Facility W	here Abatem	ent is Ta	akin				INFOR	MMITON.	П	Type of Faci	lity	(4)				-
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Voorhees High Scho	101									⊠10the	er (i	er 8 (Ot	vate	8 00	mmer	.)
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256 Route 513		County	7 (6	1		Cou	unty	Code (7)		50.000		2		50		
	1212121							USE ONLY)		Current Use		or if be	ing o	iemo]	ishe	d)
Glen Gardner, NJ 08		Hunte			MN		INan	e of Ahata		School Build	ing	(9)				
Owner (8)	PILM MILCO	Di Duii	u.r.r.g	, and	W. 1. 1.	٠.										
Briggs Associates.				004	4		For	ur Strong B	3u	ilders, Inc.						
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							1	ton, NJ 070		ement consequences						
Bordentown, NJ 085 Project Manager to	UD r Monitorin	g Firm [Tele	phon	e Nu	mber		ephone Nur				Lice	nse	Vumbe	r	
Michael Hoodak, EP	A Proiect De	esigner le	309-2	298-5	5520)	973	3-614-0377	7			0080)7			
Scheduled Start Da	te (10) S	ched.Com	plet	ion l	Date	(11)	Nan	e of OSHA	1	Monitor			-			
Month / Day /	1 7 Year	0 8 / .	Day	1/1.	1 7 Yea	<u>-</u> 1		ur Strong B								
X Facility Close																
of Abatement []Abatement Per							1180	Sargeant State.	-	Avenue Zip Code					_	
Hours - Descr []Other - Descr	ibe:					_				-						
Scope of Work (Che		annlyl					Cli	ton, NJ 070	0	13						
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Name of Registered	Waste Haul	er		JDEP				c Yards		Name of Reg	iste	red Landf	111			
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Four Strong Builders	s, Inc.		11.	2609		_	Dist	osal Date		G.R.O.W.S., City. State						
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Bilyana Kulakovska		Office A	umin	iistra	LOF			14	2	du	~	/_]7/	31/1	7	
JUN 95											,				20/8/20	

NOTIFICATION OF ARBESTO'S BASE STEMBARY (Pursuant to NIAC 5:50 et al 21:23) O1/31/2017 O2/31/2017 O3/31/2017 O4/31/2017 O5/31/2017 O	07/31/2017 16:20 FAX	Control	609.6	533,066	4		page	2	B	EC				3/0	004
Agencies Notified Type Notification Cere Ce	CK4860		NOTIF (F	Pursuan	N OF ASB	ESTOS 8:80 en	ABATER d 12:120) ,					-		
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City, Siste, Zie Code DOA Amendment size Energy projecteding Demonstration DOA DOA DOA DOA DOA DOA DOA DOA DOA DOA	© EPA									.811	-/<	1012	4-	\top	-
Name of Facility Whete Abstermant is Taking Piace (S) Facility IMPORMATION Type of Facility (4)	DOL Amended Amendment			City, St Aberd	ate, Zip Co een, NJ	0774	7	1		0171.	1	7111	İ	+	
Name of Facility Where Abstermant is Taking Place (3) Type of Facility (4) Type of Fa	DOM justification)	- -		Name	of Contact			1		15.76.702	A A HAMOS	Auchhar	7	+	
Lloyd Road School Sixest Address School (K-12) School	N- 47 W. 140 41 4 11 5 11					ORMAT	ON							_	
Size Address 401 Lloyd Road © Subcipater 8 (Other than K-12) Other (i.e., private & commercial buildings, homes etc.) Other (i.e., private & commercial buildings, homes etc.) Other (i.e., private & commercial buildings, homes etc.) Supra Feet E of Ficors Blig, Age County Gode (7) (STATE Luss ONLy) Current Use (Prior if being demolished) School Separa Feet E of Ficors Blig, Age County Gode (7) (STATE Luss ONLy) School Environmental Connection ASOM No. Name of Abatement Constractor (9) Lilich Corporation Sizes Agdress Condition Condition Condition Sizes Agdress Condition Condition Condition As a size of the condition Sizes Agdress Condition As a size of the condition Sizes Agdress Condition As a size of the condition As a size of the condition Sizes Agdress Condition As a size of the condition	Lloyd Road School	Place (3	3)											10	410
Square Feet F of Floors Blgs, Age	Street Address 401 Lloyd Road							99	Subchar Ther (i.e.	ter & (O	ther than	K-12) erciel bui	ldinge.	home	96
Name of Monitoring Firm Hired by Building Owner (B) ASCM No. Name of Abatement Contractor (9)	Matawan									* 0	of Floors		Bldg.	lge.	
Street Address 120 North Warren Street CRy. State. Zip Code Trenton, NJ 0808 Project Manager for Monitoring Firm Rollite Jones Street Address COS McBride Ave City, State. Zip Code Woodland Park, NJ 07424 Project Manager for Monitoring Firm Rollite Jones Size of Manager for Monitoring Firm Rollite Jones Size of Manager for Monitoring Firm Rollite Jones Size of Manager for Monitoring Firm Rollite Jones Size of Manager for Monitoring Firm Rollite Jones Size of Manager for Monitoring Firm Rollite Jones Size of Manager for Monitoring Firm Rollite Jones Size of Manager for Monitoring Firm Rollite Jones Size of Manager for Monitoring Firm Rollite Jones Facility Cicses/Ivaceted During Entire Period of Abatement Discension of Abatement Paramed Cyteside of Normal Fecility Hours Sope of Work (Check All That Apply) Sope of Work (Check All That App	Monmouth			County (STATE	Code (7) USE ONLY)	_	Schoo	nt Usa (Pi I	rior if be	ing dem	ilshed)	-	die.	
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Project Menager for Monitoring Film Rollie Jones G9-273-1396 Rollie Jones G9-273-1396 G9-2	1						Street 606 N	Addres 1cBri	de Ave	;					
Project Manager for Montoring Film Telephone No.	Chy. Sigte, Zip Gode Trenton, NJ 08608						City, S Wood	tate, Zi Iland	Code Park, N	NJ 074	124				
Sign Date (10) O8-03-2017 O8-03-2017 O8-04-2017 O8-04-2018 O8				Telepho 609-2	73-139	5						e Na.		486	
Street Address Street Address 2333 Route 22 West	Start Date (10) 08-03-2017	Schedul 08-04-	2017	mpletion	Date (11)		Name Iris Er	of OSH	A Monito	l Lab	oratori	es. LL	<u></u>		
Absternment Performed Quitables of Normal Fecility Mours Other - Describe: Start 4 pm Scope of Work (Check All That Apply) Example of Work (Check All That Apply)	12.						Street	Addres			,				
Scope of Work (Check All That Apply) Sale of valid of	Abatement Performed Outside of Non	nal Facili	ity Hou	irg		_				-					
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Location of Asbestos-Containing Material (ACM) TO BE ARATED In Facility (13) Yes No N/A Meme of Registered Waste Hauler Lilich Corporation Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Meme of Registered Waste Hauler Lilich Corporation Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Meme of Registered Waste Hauler Lilich Corporation Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.e. thermal systems in surfacing, VAT, or other miscellaneous) Normally Used Asbestos Containing Material (ACM) (i.							05) D8) D	ilni-Encio Biovebag	Procedu	1re 0.8	M work		dure	
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Mame of Ragistered Waste Hauler Lilich Corporation Name of Ragistered Waste Hauler Lilich Corporation Name of Ragistered Waste Hauler Lilich Corporation Name of Ragistered Waste Hauler Hauler ID No. 18724 Disposal Date City, State Woodland Park, New Jersey Completed by Tille Signature O Deta	Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Ma	Solely i intens todial i	by nca/ Staff?	Asbes (i.e.	tos Cont thermal surfa	sining M systems cing, VA	aterial insulat T. or	(AÓM) Ìon,	(\$	Specify	Remov			Enclas
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City, State Woodland Park, New Jersey Completed by Tille Heuler ID No. 18724 GROWS Landfill GROWS Landfill GROWS Landfill City, State Morrisville, PA	O THIN WAS			+						JU LI		-	-		
City, State Woodland Park, New Jersey Completed by Tille Heuler ID No. 18724 GROWS Landfill GROWS Landfill GROWS Landfill City, State Morrisville, PA		1													
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Completed by Title Signature Date	City, State Woodland Park, New Jersey		118	0/24		المرادات الم	al Date		Cliv Sta	10					
	Completed by		t mai	nager		\$	ignature		DA	V111¢, .		D≱ts)7/31/3	2017		11

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Ch485	59	NO.	TIFICAT (Puisu	ION OF	f New Jers ASBESTOS JAC 8:60 a:	ARATE	EMENT		AliG		201	
Date of Notification (1) 07/31/2017			Marr	e of Build	ding Owner	Operato	r (2) School Distric					
Agancies Notified Type Notificati	ion		Stre	et Addres est Way	A			1	EOT	K# 48	MITE	OL
☑ DEP ☐ Amender ☑ DOL Amendm	ent #		City, Abe	State, Zi rdeen, N	p Code IJ 07747			JUL) T	201		
☑ DOH justification) ☐ DCA ☐ Cancellat		18		e of Cont	act			Talasta	-: 17 -:	1	V	
Name of Facility Where Abatement is Ta Ravine Drive Elementary school	king Place	(3)	-I. F/	CILITY	NFORMAT	ION			1 1 1 1 mm and			
Strest Address 170 Ravina Drive							Type of Facility School (K	-12)				
Dity (5)							Lete)	er 8 (Other that private & com	in K-1;2 Imercia	l build	חם, חם	imes
Vietawan County (6)							Squara Feet	# of Flao	75	Bli	g. Age	
lonmouth			(STAT	ly Code (1 E USE ON	7) /LY)]	Current Use (P school	rior if being de	molishe	d)		
ame of Monitoring Firm Hired by Buildin hvironmental Connection treat Address	g Owner (8)	AS	CM No.		Name Lilion	of Abatement Co Corporation	ontractor (8)				
20 North Warren Street						Street 606 M	Address CBride Ave					
ity, Stale, Zip Code renton, NJ 08608						City. St	ate, Zip Code and Park, Nev			~~~		
roject Manager for Monitoring Firm ollie Jones			Teleph 609-2	Tone No 73-1396		Telephi	one No	Licer	138 No.			
art Date (10) 3-02-2017	Schedu 08-03-	led Co 2017		n Date (1		Name	5-8400 of OSHA Monitor	0110				· .
ccupancy Status During Abatement (Che						Street A	vironmental La	boratories, L	LC			
Facility Closed/Vacated During Entire Abatement Parlormed Outside of Nor Other - Describe: <u>start at 4 pm</u>	Périod of Mai Facilit	Abate y Hour	ment S			2333 F	Route 22 West					
cope of Work (Check All That Apply)						Unio	n, NJ 07083					
≥3 sf or ≥3 lf ≥160 \$f or ≥260 lf		Renov: Damoli				<u> </u>	Full Containm Mini-Enclosure Glovebag Prod	9 Medium				
Location of		Locat					Non-Exampted	(") and Non-F	riable P		ire atemer	nt .
Asbastos-Contsining Material (ACM) TO BE ABATED In Facility (13)	Us: Ma	od Sole intens todial ((12)	ely by	Asbe (l.e	estos Conta a, thermal s surfaci	ysterns i ng, VAT,	terial (ACM) neulation,	Amount (Specify SF or LF)		T	Type	- 1
	Yea	No	N/A	1	other mi	cellane	one	J. 472.7		Removal	Encapsulate	Enciosure
floor	-		Х	Fitting	insulatio	n		30 LF		+		<u> </u> -
	1		-									+-
ne of Registered Wasta Hauler										+	+	
ch Corporation		H	JDEP W aular ID 18724	Nasta Na	Oubic Years		Name of F	Registered Lan	dfill			<u> </u>
. State Woodland Park, New Jersey					Disposel	Date	City, State					
nplated by omo Glavatovic	Title Pro	lect m	anager		Sign	alura	-04	Morrisville,	Date			<u>.</u>
3-41 (R-05-08)						6	AL.		07/3	1/201	7	:" ::

page 1

41 31 2017 04:07PM NJ Asbestos Control 609.633.0664

^{*} Do not use this form for asbestos ligensure exempted activities.

State of NJ Notification of Asbestos Abatement

B & G proj. #: 2017-106

(Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #:	2011 100			(1 0.000	***EMER	GEN	CY***		Check	# 8516				
Date of Notification	1 (1)	11	Name of	Building Owr	ner/Operator (2)			In E			W	E	
0 18 1/10 12	1/117			SCHOOL SCHOOL STATE	ard of Educa									
Agencies Notified	Type Notifica	tion	Street Ad					_	11111	1110	7	201	7	
☐ EPA	X Initial		One E	East Front	Street					AUG	- /	20	1	-
☐ DEP	☐ Amend			e, Zip Code					L	BESTO	0.01	TIAC	201	2
X DOL	L Amend		Comments Institute	ington, N	J 07888 —————					110	ENS	INIC	101	
X DOH	☐ Cancel	-220 M	Name of (Telenhor	- Nilliam				
DCA			Mike	Angeloni					111			=	_	
				FAC	CILITY INFORM	IATIO	٨							
Name of facility wh	nere abatement	is taking p	lace (3)						Type of Facility School	(4) ol (K - 12)				
Port Colden S	School ***	** NON	SUB 8 *	***						apter 8 (C		han K	-12)	
Street Address							2		Other	(Private/C	omme			
30 Port Colde	en Road							-		/Homes, e	0.00	BI	dg. A	ge
City (5)		Cor	unty (6)			Cou	inty Code (7)			2	2532	60+	507501 00	
Washington 1	Townshin	W	/arren			(Sta	ate use only)		Current Use (P		g den	nolish	ed)	
Name of Monitorin					ASCM No.	<u> </u>	Name of Abatemen	t C	NON-SUB 8					
RK Occupati	(FN - (P) 하면서 100 [SH)(H) ((H) - (H) (H)				0090	1	B & G Restora							
Street Address						-	Street Address							
401 St Jame	s Avenue						105 Ryerson	_	pad					
City, State, Zip Cod Phillipsburg,	e NJ 08865						City, State, Zip Code Lincoln Park,		IJ 07035					
Project Manager for	r Monitoring Firr	n		Phone Num	ber		Telephone Number			License		oer		
Jonathan Gi	lbert			856-625	-2045		(973)696-68	_		1 00	378			
Scheduled Start Da	ite (10)	Sche	ed. Compl	etion Date (1	1)		B & G Restora							
08/03/2017			/08/201				Street Address	_						
Occupancy Status I							105 Ryerson F		ad 					
	d/vacated during erformed outside						City, State, Zip Code							
	be: limited oc	cupancy				=	LincolnPark, N	۱J	07035					
Scope of Work (ch	eck all that appl	ly)	164			_								
☐ Demolition	X	Renovat				-	Full Containment w/ne	ega		Glovel				
> <u>3</u> sf or > <u>3</u> lf	X	-				Ш	Mini-enclosure			X Non-fr	T R	R		
Location of asbestos-con	ntaining	by main	tenance/o	ly used solel ustodial		on of a	sbestos-containing		Amount		е	е	n E	E n
material to be abated in fac	9	staff(12)			- material				(Specify S	F or	o	p a	a	C
abated in fac	ility (13)	Yes	No	N/A							v e	r	р	
Short Hall				×	VAT & ma				1400 sf		X			H
Long Hall			4	X	J VAT & ma	astic			850 sf		X		ዙ	卄
			#=	-	1						H	H	H	怙
			1		1									T
Registered Waste H B & G Restorat		NJE	DEP Haule 19563	er ID#	Cubic Yards of	Waste			andfill Resource & Re	ecovery	Cent	er		
City, State Lincoln Park, N				Disposal I	Date /08/2017		City, State Tullytown							
Completed by (Print	t or Type)	Title Secreta	ary/Trea	surer	Signature		Gordana Luna	in ove		Date 08/02	2/201	7		

State of NJ

Design of Notification (1) O 18 / (1) O 12 / (1 17 1 17 1	8 & G proj. #:	2017-106		×.			:60-	s Abatement 7 and 12:120-7)	Check	# 8516 ^{AU}	G -	7 2017
Canal Part Can	Date of Notification	(1)	11	Name of B	Suliding Own	ar/Operator (2)						ACCUTEDO.
Agriculture Notification Street Address Canal East Front Street City, State, 2 jp Cose City Color Canal Station	0 18 1/10 12	1/11/1	- 11							ASBES	ICEN	LUNING
DBS DOL Arrandment Washington, NJ 07888		Type Notifica	nou	Street Add	résa	the second	and Date					
DOL		Inidal		One E	ast Front	Street			14			
Talaphone Number Talaphone Number	_ DEP			City, State	, Zip Code	We would be the second of the						
DOA	E DOL	Amano	ment	Washi	ington, NJ	07888						
Mike Angelon	E DOH			Name of C	ontact				Talephon	e Number		
Name of facility where abstement is taking place (ii) Port Colden School ****** NON SUB 8 **** 30 Port Colden Road City (5) Washington Township Warren Warren Warren Warren Washington Township Warren Warren Washington Township RK Occupational & Environmental Coso RK Occupational & Environmental Coso Street Address 401 St. James at Bendering Firm Hird by Brig. Owner (ii) RK Occupational & Environmental City State, 2g Cose Philipseburg, NJ 08885 Priper Meager for Mentioring Firm Jonathan Gilbert Scheduck Similar Data (iii) Os/03/2017 Os/03/	DCA	L Cancal	lation	Mike A	Angeloni							
School (K-12) Subchapper 8 (Other than K-12) Other (Phi-abs/Commercial Bidgs Alfores) at 12 Subchapper 8 (Other than K-12) Other (Phi-abs/Commercial Bidgs Alfores) at 12 Subchapper 8 (Other than K-12) Other (Phi-abs/Commercial Bidgs Alfores) at 12 Other (Phi-abs/Commercial Bidgs Alfores) Other (Phi-abs/Commercial Bidgs Alfores) at 12 Other (Phi-abs/Commercial Bidgs Alfores) at 12 Other (Phi-abs/Commercial Bidgs Alfores) Other (Phi-abs/Commercial Bidgs Alfor				100	FAC	ILITY INFORM	ATIO	ν.		1		-
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Street Address 30 Port Colden Road Oay (5) Washington Township Warren Name of Montanta Firm Hirds by Brig. Counts (6) RK Occupational & Environmental Street Address ACT St. James Avenue City, State, 2p Gods Philipsburg, NJ 08865 Project Manager for Mendaring Firm Johathan Gilbert Johathan Gilbert Johathan Gilbert OB/O3/2017 Ob/	7.				**							
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A 20438			FICATION	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE		T .	Dr.	E C				7000
Date of Notification (1) 8/3/2017				of Building				s		AUG	- 7	20	17	
Agencies Notified Type Notification X EPA X Initial	1			Address ELAWAF	RE AVE	NUE			AS	BESTO	OS C	ONT	ROL	&
■ DEP ■ Amended × DOL ■ Amendmer				ate, Zip Co RSON,		03					ENS	ING		
)	g		of Contact E MORI					Telen	hone Nu	mber			
		(0)	FAC	ILITY INF	ORMATIC	NC	Γ							
Name of Facility Where Abatement is Taki	ng Place ((3)						e of Facility (
Street Address							×	School (K-1 Subchapter		than K-1	2)			
448 MAIN STREET								Other (i.e. petc.)				ldings	, hom	es,
City (5) PATERSON							Squ	are Feet	# of F	loors	E	Bldg. A	Age	
County (6) PASSAIC				Code (7) USE ONLY	n		Curr	ent Use (Prid	or if being	demolis	hed)			
Name of Monitoring Firm Hired by Building TTI ENVIRONMENTAL, INC.	Owner (8	3)	ASC	M No.				atement Cor OTHERS			IG, IN	NC.		
Street Address 1253 NORTH CHURCH STREET	8					Street 11 V		ess LAND AVI	ENUE					
City, State, Zip Code MORRISTOWN, NJ 08057								Zip Code A, NJ 0751	2					
Project Manager for Monitoring Firm JIM GUILARDI			Telepho 856-84	ne No. 40-8800		Teleph 973-		No. -8700		icense N	lo.			
Start Date (10) 8/17/2017	Schedu 8/31/2		mpletion	Date (11)			150 - 717	SHA Monitor S (9) ABO	VE					
Occupancy Status During Abatement (Che	ck Only O	ne)				Street	Addre	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: UNOCCUPIED	Period of mal Facilit	Abater y Hour	ment 's		_	City, S	tate, 2	Zip Code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	_	Renov: Demoli				×	Mi Gl	ull Containme ini-Enclosure lovebag Proc on-Exempted	e edure	3			·e	
Location of		s Loca Norma	lly		Des	cription	-000		(/ 4.10)	1011		Abate	ement /pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintena stodial (12)	nce/ Staff?		tos Conta thermal s	ining N systems ing, VA	fateria s insul T, or	lation,	Amo (Spe SF o		Remova	Repair	Encapsulate	Enclosure
OL ADDROOM 5	Yes	No	N/A								=		ate	- e
CLASSROOM 5		X		W	ALL PLA	ASTE	RON	NLY	1,000) SF	X			
Name of Registered Waste Hauler		100	JDEP W		Cubic Y	′ards		Name of F	Registere	d Landfill				
WO BROTHERS CONTRACTING	3	8	Hauler ID 18743	No.	of Wast			WASTE	E MANA			S.R.C).W.S	3.
OTOWA, NJ	VIII-				Disposa 8/31/2			City, State		, PA				
Completed by /IVECA RAMOS	Title PRO	JECT	COOF	RDINAT	OR Sig	natúre	40	ia Co		Da 8/3	te 3/201	17		

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Date of Notification (1)	7201				Nan	ne of Buildi	ng O	wner/Operator	(2)		l Asi	10	7	2017	,	
8/	3 /	17			Н	oly Angel	s Pa	arish		L	AU	16	1	2017		
Agencies Notified	Type Notific	cation			Stre	et Address										
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☑ DOLWD	Amende Amendn	3277			City	State, Zip	Code	е				ICE	1511	16	-	
⊠ DCA	☐ Emerge	_		- a	W	oodbury,	NJ	08096								
(NJAC 5:23-8)	justificat	tion)		9	Nan	ne of Conta	ct			ΙT	elephone	Numb	er			
	☐ Cancella	ation			R	obert Cur	tis			_						
		741.02			F.	ACILITY I	NFO	RMATION								
Name of Facility Where A		Taking	Place	e (3)					Type of Facili	ty (4)						
Holy Angels Cathol	ic School								School (K-							
Street Address									☐ Subchapte☐ Other (i.e.,	er 8 (C	ther than	K-12)	ا اما	.nun.	2724	
211 Cooper Street									homes, et	c.)	te and co	mmerc	iai D	ıllain	gs,	
City (5)									Square Feet	- 1	# of Floor	S	В	dg. A	ge	
Woodbury									50,000		2			90		
County (6)					Co	unty Code (7)(ST	ATE USE ONLY)	Current Use (Prior i	f being de	molish	ned)			
Gloucester									School		:5		å			
Name of Monitoring Firm	Hired by Bui	Iding C	wner	(8)	ASCI	ЛNo.	Na	ame of Abateme	ent Contractor ((9)						
Horizon Environme	ntal Group	, Inc.			000	073		Shade Enviro	onmental, LL	С						
Street Address							St	reet Address		E3 E7F			_			
301 9th Street							1	623 Cutler Av	/enue							
City, State, Zip Code							Cit	ty, State, Zip Co	ode						1	
Thorofare, NJ 08086	3						1	Maple Shade	, NJ 08052							
Project Manager for Monit	toring Firm			Te	ephon	e No.	Te	lephone No.		1	icense N	0.				
Steve Flannigan				8	56-84	8-0800	8	856-755-0099	1		00842					
Start Date (10)08 /28 /						ate (11) 17	100000	me of OSHA MEMSL Analyt								
Occupancy Status During	Abatement (Check	only o	one)			Str	eet Address								
☐ Facility Closed/Vacated								200 Route 13	0 North							
Abatement Performed	Outside of N	lormal	Facilit	у Нос	ırs - De	scribe	Cit	y, State, Zip Co	ode		100000000000000000000000000000000000000					
Time of Abatement: 7:	00AM- <u>5:00</u>	PM/	P	M	AN	1		Cinnaminson								
Scope of Work (Check all	that apply)						k								-	
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re □ De	nova molit				Mini-Encl Glovebage								
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Location of				Norma				Description o	f				_	atem		
Asbestos-Containing M TO BE ABAT		Λ)			ely by ance/			Containing Ma			Amount		Removal	Repair	nca	Enclosure
IN Facility				todial	Staff?	(1.6		ermal systems i surfacing, VAT,			(Specify SF or LF		ova	air	psu	nso
(13)		-		(12)		_	ot	her miscellaned	ous)		0, 0, 2,	'	_		Encapsulate	9
			Yes	No	N/A										350	
Boiler Room						Pipe In	sula	tion Fittings			75 LF					
								A Secretary of the last of the								
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Name of Registered Waste	Hauler			1	JDEP	Waste	Cul	oic Yards of	Name of Reg	istere	d Landfill		_	_		_
Freehold Cartage				ŀ	lauler 1593		Wa 5		GROWS I			I				
City, State					1050	3	-	posal Date	City, State							
Freehold, NJ							0	9/01/2017	Morrisvill	e, PA	1					
Completed By (Print or Typ	oe)	Title						Signature	_			Date				
Christina Lynch		Vic	e Pr	eside	ent of	Operation	าร	Omoto	وله	>		8,	/3/	17		

& Emergency &

Date of Notification (1) 8/3/17	-				of Building				CIN) E	G		W	E
Agencies Notified	Type Notification				den City	Sch	ools Dist	trict				(b) [1	= U	D	
	Type Notification			100000000000000000000000000000000000000	Address N. Front	Ctros	.4			IIn	1				11
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X DOL	Amendmen	t#			den NJ					-	leni /	400	1		1.
☑ DOH	Emergency		3		of Contact		-								
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					CILITY INF	ODBAA	TION			i ,	第二十四位位				
Name of Facility Where	Abatement is Takir	ng Place ((3)	IAC	VILLI I HAT	OKWIA	TION	Typ	e of Facility	(4)					
Woodrow Wilson H	igh School							X	School (K	1005 500					
Street Address								H	Subchapte		er than	K-12)			
3100 Federal Stree	et								Other (i.e.	private	& comm	nercial b	uilding	s, hon	nes,
City (5)								Sai	etc.) are Feet	T# 0	f Floors		Dida	۸۵۵	
Camden NJ 08102									00+	2	1110013		Bldg.	-	
County (6)				County	Code (7)			11.5	rent Use (Pi		ing dom	olichod			
Camden			- 1	(STATE	USE ONLY)		Oui	Ont 036 (1)	nor ii be	ng dem	olistieu,			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASC	M No.		Name	of Ah	atement Co	ntractor	· (Q)				
SMITHCO. ENGINE				1			Perr			nici dotoi	(3)				
Street Address							Street								
808 Market Street,	Suite 336						POE								
City, State, Zip Code									Zip Code						-
Camden, New Jerse	ey 08102								rlin NJ 08	091					
Project Manager for Moni	toring Firm		T	Telepho	ne No.		Teleph				Licens	e No			
Sean Smith					65.9111				9800		0072	Ser Constitution			
Start Date (10)		Schedul	ed Co	mpletion	Date (11)		100000000000000000000000000000000000000		SHA Monitor		0012				on.
8/3/17		8/4/17					Sam								
Occupancy Status During	Abatement (Chec	k Only Or	ne)				Street	Addre	ess						
Facility Closed/Vaca	ted Durina Entire F	Period of	Abater	nent			1.0000000000000000000000000000000000000			ě					
I Abatement Performe	d Outside of Norm	nal Facility	Hour	s			City, St	tate, 2	Zip Code			-			
Other - Describe: a	ttyer 4 pm					-			2.5						
Scope of Work (Check All	That Apply)														
≥3 sf or ≥3 lf		⊠ F	Renova	ation] Fi	ıll Containm	ent with	Megativ	o Droce	LIFO		
≥160 sf or ≥260 lf		processor .	emoli					Mi	ni-Enclosur	e	ivegativ	re Fless	sure		
							×		ovebag Pro on-Exempte		l Non E	riable D			
		la	Lanat				1	1 140	n-Exemple	u () and	I NOH-FI	lable P		re tement	
Location	of	13.74	Locat Vormal			_								ype	1
Asbestos-Containing N			d Sole		Asbes	اط tos Cor	escription ntaining M	ot ateria	I (ACM)	Δι	mount		1	T	
TO BE ABA			intena odial S		(i.e.	therma	al systems	insul	ation,		pecify	7	, I	Enc	四
In Facility (13)	У		(12)	- 10111		surf	acing, VAT miscellane	T, or		SF	or LF)	Remova	Repair	Encapsulate	Enclosure
X 1		7/		Τ		outer	mocenant	eous)				val	#	ulat	sure
		Yes	No	N/A										е	
Library			×		floo	r tile ma:	stic		2	0 sf	x				
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Name of Posisters 4144	Llaula-		-							- 12					
Name of Registered Waste	e mauier		100000	JDEP W auler ID	777573750	Cubic of Wa	Yards		Name of	Register	ed Land	ffill			
United Roll Off			100000	2459	140.	1	isle.		G.R.O.	W.S.					
City, State						1 22	sal Date		City, State	9					
Elm NJ						8/4/1			Morrisv		1906	7			
Completed by		Title					Signature	7/7				Date			_
Anthony T Perna		Presi	dent			1		V		-		8/3/17	7		
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Date of Notification (1) 8 - 1	1-17	Name o	f Boilding Owner/	operator (2)	An	Je esoly	- 7	20	17	
Agencies Notified DEPA DOL DOL DOH DOH DOA DOA DOA DOA DOA DOA DOA DOA DOA DOA	ed nent # ency (including tion)	Name o	ddress ate, Zip Code Pounc f Contact Heyv LITY INFORMAT	BRO	oK, 1		ENS OC	ONT	ROL	. &
Name of Eacility Where Abatement is 7 Street Address	aking Place (3) Ty Dwe	2/ling		T)	Subchapte			dings,	home	es,
County (6) Sumersex		County	088c	75	uare Feet	# of Floors for if being demolish		Ida A	ge) / -	_
Name of Monitoring Firm Hired by Build		ASCM	No.	Name of /	Abatement Co	ntractor (9)	ie:		In	
Ro. Box	337	A A		P.O	. Box	337		m s	10 SA	6
Project Manager for Month ril gt Firm	, NJ	Telephor	335 ne No. 758-33 65	Telephone	DE GY	License N	0	39)3 4	
Start Date (10) 8-17-17	Scheduled Co	mpletion 1	Date (11) - /7	Name of C	PC Tec	hnologies	I	مر	-	
Occupancy Status During Abatement (Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe:	tire Period of Abate			City, State	ress Box Zip Code Egypt	337 ALT (183	53	3	
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renor Demo				Full Containm Mini-Enclosur Glovebag Pro		ressu	re		
	Is Loca Norm							Abate	ement pe	!
Location of Asbestos-Containing Material (ACM TO BE ABATED In Facility (13)	Head So	lely by ance/ I Staff?)	Asbestos Con (i.e. therma surfa	escription of staining Mate I systems ins acing, VAT, o miscellaneou	sulation, ·	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Basement	X		Pipe]	Ensul	ation	100 LF	X			
Name of Registered Waste Hauler EPC Technolog City, State	ies NJ	NJDEP W Hauler ID	No. of Wa	Yards aste 2 asal Date -18-1	Was	Registered Landfill teManager te u'sville f	nen!	60	e P	A.
New Egypt Completed by Steve Schen Kea	Title Presid	len+		Signature Sleen)Sch	Da Da		4	- Manageria	7

			(F	ursuant	t to NJAC	8:60 an	d 12:12	0)			CA	#	Ω	67	31
Date of Notification (1) 08/02/17					of Building Verona				LC [5 1	W	E	01
Agencies Notified	Type Notification				Address tate Hig	ghway 1	17 Sou	th		Dr	5 6		<u>\\\\</u>	11-3	
EPA DEP DOL	Amended Amendmen		_		ate, Zip C -Ridge,		075				AUG	- 7	201	7	ارسا
▼ DOH DCA	Emergency justification Cancellation)			of Contact ean Hie	7				Te	lephone Nu	ımber		101	3.
Name of Facility Where	Abatamantia Tati	DI (FAC	ILITY INF	ORMAT	ION				LIU	ENG	3	-	
Name of Facility Where Annin Lofts	Abatement is Takii	ng Place (3	5)						of Facility						
Street Address 141-163 Bloomfield	l Avenue							×		er 8 (Oth	er than K-1 & commerc		dings,	home	es,
City (5) Verona									re Feet	# o 2	f Floors	1003	8ldg. <i>A</i> 60 +	\ge	
County (6) Essex					Code (7) USE ONL	n			ent Use (P ehouse	rior if bei	ing demolis	hed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	Л No.				tement Co		(9) onmental	Cons	ultin	g, In	С.
Street Address							Street	Addres	ss						
City, State, Zip Code									ip Code J 07470	8					
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	none N	0.		License N	10.			
Start Date (10) 08/12/17		Schedule		npletion I	Date (11)		Name	of OSH	HA Monito						
Occupancy Status During		k Only On	ie)				Street	Addres	SS		5:				
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire ed Outside of Norr	Period of A nal Facility	Abaten Hours	nent			City, S	tate, Zi	p Code		ldg. #35E	-			
Scope of Work (Check Al	I That Apply)						Fair i	Lawn,	, NJ 074	10					
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	personne	enova				×	Min Glo	i-Enclosu vebag Pro	re ocedure	Negative I			0	
Location	of	N	Locati	ly		Doc	scription		LXCIIIpte) and	a INOII-I Hat	716 1 10	Abate	ement pe	
Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM)	Mai	d Sole ntenar odial S (12)	nce/		tos Conta thermal surfac	aining M	laterial insula T, or		(S	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
Exterio	nr.	Yes	No	N/A X		Mindo	w Cou	lking		41	0.05			te	
Extend	,,			^		Windo	w Cau	iking	-	1	0 SF	X			
Name of Registered Wast	e Hauler		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	JDEP W		Cubic `	Yards		Name of	Registe	red Landfill				
J.R. Contracting & Er	nvironmental C	onsul., Ir		auler ID I 7819	No.	of Was			Grand	Centra	l Landfill				
City, State Wayne, New Jersey						Dispos	al Date		City, Sta Pen Ar		nnsylvar	nia		102 1030-11	
Completed by		Title				Si	gnature	7	1		Da				

Project Manager

Jerry Bijelonic

08/02/17

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

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Date of Notification (1)	- A-C-CILLIAN IXXII - M			Building	Owner / Operato	or (2)		ME	GEI	l W li	3,1
7/17/17 Agencies Notified Type Notif	ication	200000000000000000000000000000000000000	izon	d							
Agencies Notified Type Notif	ication		et Add	aress m Stre	et				UG - 7	2017	
☐ DEP ☐ Init	ial	and the same of th		& Zip (hed bear 14	100	CUIT	-
	ended R#1-7/28/1	ALCOHOLD BY THE REAL PROPERTY OF THE PERTY O		NJ 071							
□ DOH □ Em	ergency			Contact				ASRF	37020	A NIPMA	1000
☐ DCA ☐ Cal	ncellation	Alex	х Вау	lor							
	**************************************	F	ACILI	TY INF	ORMATION						
Name of Facility Where Abater	ment is Taking Plac		10121		Type of Facil						
Market Central Office Street Address					School (W		IZ 40\			
95 William Street					Other (i.	oter 8 (Otl			inge home	os oto)	
33 William Street					Square Feet		of Floors	STATE OF THE STATE OF THE STATE OF	Bldg. Age	Control of the Contro	
City (5)	County (6)	County	Code	(7)	42500			12		'0+/-	
Newark	Essex	l a a		. (.)	Current Use					0.1-	
	Loocx				Communic		omig don	ionoriou)			
Name of Monitoring Firm Hired	by Building Owner	r (8)	IAS	SCM No			ontracto	r (9)			
USA Environmental Inc.	,	(-)			BRISTOL E						
Street Address					Street Addres	SS		1100 married 200 mm			
8436 Enterprise Avenue					1123 BEAV						
City, State & Zip Code					City, State &						
Philadelphia Pa 19153	F: I=				BRISTOL, I		7				
Project Manager for Monitoring Mark Jenkins	- ACCOUNTS	elephon			Telephone N			License	Number		
Scheduled Start Date (10)	Scheduled Comp				215-788-604 Name of OSH	10.5000	\r		00509	,	
ON HOLD	Scrieduled Comp	netion D	ale (1	1)	BRISTOL E			AL INC			
Occupancy Status During Abat					Street Addres						
Facility Closed/Vacated	Andrews of the state of the sta				1123 BEAV						
Abatement Performed		Hours -	- 7am	to 3pm	City, State &	15					
Describe: 5 PM - 1:					BRISTOL, F	PA 19007	7				
Facility Occupied Durin Scope of Work (Check all that a											
Scope of Work (Check all that a	appiy)					⊠ Fu	II Conta	inment with	Negative I	Pressure	د
≥3 sf or ≥3 lf	Γ	⊠ Re	enovat	ion			ni-Enclo		rioganio i	1000010	
≥160 sf ≥260 lf	Ĭ		emoliti					Procedures	3		
	-	 '.				the same of the sa		pted and No		Procedu	ıre
Location of		Is Loca			Description			Amount	Abat	ement T	уре
Asbestos-Containi	~	Normally			Asbestos-Con			(Specify			
Material (ACM) TO BE ABATED	San I I I I I I I I I I I I I I I I I I I	Solely Naintena		r	Material (A) (i.e., thermal s			SF or LF)	R	T Inc	E
in Facility	10 707	ustodial			insulation, surface				Remova	Repair	Enclsoure
(13)		(12)			or other miscell				Val	Encapsulate Repair	ure
		es No	N/A	1							
1st Floor Generator Room			14	_	Transite Bus			200 SF			Ц
Basement Cable Room			11		Transite Bus			32 S F			
1 St Floor Switch Board Roo			$+$ μ	-	Vat/Mast			100SF			H
Basement Cable Room			+ $+$ $+$	-	ACM Put	ity		5 LF			H
	L	러님	+H								
Name of Registered Waste Hau	ıler L	N	JDEP	Waste	Cubic Yards	Name of	f Registe	ered Landfill			
-		Н	auler	ID No.	of Waste						
SERVICE TRANSPORT GR	OUP, INC.	2	0990		10	MINER		IDFILL			
City, State NEW CASTLE, DE 19720					Disposal Date TBD	City, Sta		G, OH 446	88		
Completed By (Print or Type)		Ti	itle		Signature	1		,	Date		
Patrick T. DeCaro				MGR.	D-1- 1	1	Dero	/ '.	7/17/2	017	
					Patrick	1.4) (u	10/10			
PD 17080								1			-

(Pursuant to N.J.A.C. 8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) 7/17/17 Verizon Agencies Notified Type Notification Street Address EPA0690 95 William Street DEP Initial City, State & Zip Code DOL0669 X Amended Newark, NJ ASBESTOS CONTROL & DOH 0706 \boxtimes Emergency Name of Contact LIC Telephone Number DCA Cancellation Alex Baylor **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Market Central Office School (K-12) Street Address Subchapter 8 (Other than K-12) 95 William Street Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 425000 12 70+/-Newark Essex Current Use (Prior if being demolished) Communications Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) USA Environmental Inc. BRISTOL ENVIRONMENTAL INC Street Address Street Address 8436 Enterprise Avenue 1123 BEAVER STREET City, State & Zip Code City, State & Zip Code Philadelphia Pa 19153 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Mark Jenkins 215-365-5810 215-788-6040 00509 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7/31/17 8/11/17 BRISTOL ENVIRONMENTAL INC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Hours - 7am to 3pm City, State & Zip Code Describe: 5 PM - 1:30 AM BRISTOL, PA 19007 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf ≥260 If Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) TO BE ABATED Maintenance or (i.e., thermal systems Removal Enclsoure Repair in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A 1st Floor Generator Room PIT Transite Bus Duct 200 SF Basement Cable Room X Transite Bus Duct 32 SF 1St Floor Switch Board Room X Vat/Mastic 100SF Basement Cable Room **ACM Putty** 5 LF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste SERVICE TRANSPORT GROUP, INC. 20990 10 MINERVA LANDFILL City, State Disposal Date City, State NEW CASTLE, DE 19720 TBD WAYNESBURG, OH 44688 Completed By (Print or Type) Title Signature Date Patrick D. O'Care/jl Patrick T. DeCaro PROJ. MGR. 7/17/2017

PD 17080

NOTIFICATION OF ASBESTOS ABATEMENT

		NO		ATIO	N OF AS	New Jersey SBESTOS ABA AC 8:60 and 5:1				7 7	<u>W</u>	
Date of Notification (1)				Nam	e of Buildi	ng Owner/Operator	(2)	HALL AL	U	1 6	2017	- -
	8 / 1	7		C	nthia Ho	pkinson		2	2	3-	12	
	pe Notification	1		Stree	et Address			ASBES	TOS LICEI	COL		DL &
	Initial							1	-10-1	10111	-	
⊠ DOH	Amended Amendment #	ш		City,	State, Zip	Code			-3			
	Emergency (i		-	Fo	rked Riv	er, NJ 08731						
(NJAC 5:23-8)	justification)	ricidani	g	Nam	e of Conta	ct		Telephone Nun	nber		-	
	Cancellation			Су	nthia Ho	pkinson						
				FA	CILITY	NFORMATION			-			
Name of Facility Where Abat	tement is Takin	ng Plac	e (3)				Type of Facility (4)				
Residence							School (K-12)	15				
Street Address							Subchapter 8 Other (i.e., pri	(Other than K-1)	2) ercial b	uildin	ıgs,	
City (5)							homes, etc.) Square Feet	# of Floors		Mat	•	
Lakewood							900 sf	# of Floors	В	Bldg. A	-ge	
County (6)			-	Cou	nty Code (7)(STATE USE ONLY)	Current Use (Price	1 .	- l IV	65		
Ocean					ini, oodo (MOTATE OUR ONET)	Residence	ii ii being demoi	isnea)			
Name of Monitoring Firm Hire	ed by Building	Owner	(8)	ASCM	l No	Name of Abateme				_		
N/A	,	150000-03057-101	(-)				ntracting, Inc.					
Street Address						Street Address	macing, mc.					
						1889 Route 9	Unit 61					
City, State, Zip Code		7.1.2				City, State, Zip Co						
							New Jersey 087	55				
Project Manager for Monitorin	ng Firm		Tel	ephone	No.	Telephone No.	55.65, 55.	License No.	-			
						732-349-9932		00624				
Start Date (10)	Sched	duled C	omple	etion Da	ate (11)	Name of OSHA M	Ionitor		-			-
08 /10 /1	7(08_ /	1	1_ /	_17	E.M.S.L. Anal	lytical					
Occupancy Status During Aba	atement (Check	k only	one)			Street Address						
□ Facility Closed/Vacated Deletion	uring Entire Pe	riod of	Abate	ment		1056 Stelton						
Abatement Performed Out	side of Normal	Facilit	y Hou	rs - Des	scribe	City, State, Zip Co	ode					
Time of Abatement:	_AMPI	W/	PM		_AM		New Jersey 088	54				
Scope of Work (Check all that □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	t apply)	□ Re 図 De	moliti	on		☐ Mini-Encl			re			
Location of		100	Loca Norma			<u>v</u> e se se			Ab	atem	ent T	уре
Asbestos-Containing Mate TO BE ABATED IN Facility (13)		Use Ma	d Sol	ely by	Asbe (i.e	Description of estos Containing Mat e., thermal systems i surfacing, VAT, other miscellaneo	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							0	
exterior					asbesto	os siding		900 sf				
										П	П	
Name of Registered Waste Ha	ıuler		N	JDEP V		Cubic Yards of	Name of Registe	red Landfill				
Guardian Contracting, I	nc.		Н	auler II		Waste	T.R.R.F.					
City, State				20223		3 Disposal Date	City, State					
Toms River, New Jersey	/					08/14/17	Tullytown, P	ennsylvania				

ASB-41 JAN 13

Completed By (Print or Type)

Nicholas Fernicola

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

Project Manager

Signature

Date

CICH 4273

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N		AUG	-	7	2017		U

			(Fur	Suant to NJA	C 8:60 and 12:12	1	į.			i	
Date of Notification (1)	-76-17			Name of Build	ding Owner/Operato	ECH CO	ASBESTOS	CON	TRC)L &	
Agencies Notified	Type Notifica	tion		Street Addres		-200			delle delle		=
	Initial Amended		-	City, State, Zir		1 30			-241	-	=
₩ DOL	Amendme		_		REENFIE	CO MI.	T 087	30			
Вон	Emergence justification		ing	Name of Cont		CIS M.			_		
□ DCA	Cancellatio		1.		LUCE		Telephone Nu	riber			
				FACILITY II	NFORMATION						
Name of Facility Where			ce (3)			Type of Facil					
	ESIDEN(School (K	-12) er 8 (Other than K-	12)			
Street Address							, private & commer		ilding	S,	
City (5)	11.	,—				Square Feet	# of Floors	E	3ldg	000	
	ILLVILL	<u> </u>		County Code	/7) /STATE	2000	Prior if being demo	Eabod)	5) +	_
	STEL			USE ONLY)		- VA	CANT	usneu)			
Name of Monitoring Firm (8)	Hired by Buildin	g Owner	A	SCM No.	Name of Abaten						47-01-0
	VIA					EMCO I	NC		_		_
Street Address					Street Address	C 5 ma	NCC IAL.				
							UCE ALE				_
City, State, Zip Code					City, State, Zip C	E SHAK	E M.J	08	20	2	
Project Manager for Mon	itorina Firm		Telepi	hone No.	Telephone No.		License No.				_
	atoring ram					9-0472	_004	44			
Start Date (10)		eduled (on Date (11)	Name of OSHA N	Monitor NI D					
Occupancy Status During					Street Address	14					_
Facility Closed/Vacate				ent							
Abatement Performed					City, State, Zip Co	ode					
Other - Describe:											
Scope of Work (Check al	I that apply)				☐ Full Con	tainment with Ne	egative Pressure				
>3 sf or ≥3 lf		Re	enovation		Mini-End	losure	9-11011000010				
∑≥160 sf or ≥260 lf		Ø De	emolition			g Procedure moted (*) and N	on-Friable Procedu	ire			
		ls L	ocation	7	191.101.1				bate	ment	
			ormally		D				Ту	œ	
Location of Asbestos-Containing Ma			Solely batternance		Description of tos Containing Mate	erial (ACM)	Amount			m	
TO BE ABATE		Cu	ustodial		thermal systems in	sulation	(Specify	Re	D	nca	Enclosure
IN Facility	 s:	1	Staff? (12)		surfacing, VAT, other miscellaneous		SF or LF)	Removal	Repair	pst	losi
(13)		-	(12)	_	Other Trascendaries	45)		val	-	Encapsulate	Jre
		Yes	No 1	N/A							
SIDIWI	6			X	RANSIT		2250SF	X			_
	5/										
								-			_
			LAUDI	EP Waste	Cubic Yards	Name of Reg	stered Landfill				
Name of Registered Waste	_			er ID No.	of Waste	/ tume of reag	7 2 V	11			
(Ctmco	INC		-112	904	Disposal Date	City, Staté	I.C. M.U.				=
City, State MAPLE SHA	ADE IN	. T				WOO	DBINE				
Completed By	Title		- 0		Signature	17	Date	-76	-1	7	
MICHAU KU	CMM	51	JP.		Mull	VV		- 6	1		_

(CALLAI)	(F	ursua	nt to <u>I</u>	V.J.A.C	<u>:.</u> 8:60 and 12:1:	20)	F 6	= n n	n r		Sac.
Date of Notification (1) 07-28-2017		Nam	e of B	uilding	Owner / Operato	or (2)	DEG	3 1	<u> </u>		1
Agencies Notified Type Notification		Stree	et Add	ress	le Road		III) and	= 7 20	17		
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☐ DOL ☐ Amended((start					08648						
date&Scope)							ASBESTO	S CONT	ROL	. &	
☑ DOH☑ Emergency☑ Cancellation				ontact			1 1/2	מאאמתו	h		- 1
Gancellation			Valter		ORMATION						_
Name of Facility Where Abatement is Takin	g Place	(3)	ACIL	I I IIMI	Type of Faci	lity (4)					
Rider University-Maurer Physical Education Build	ding-1 st flo	or office	es/class	srooms	School						
Street Address						pter 8 (Other					
2083 Lawrenceville Road							commercial buildin			tc.)	
City (5) County (6	1)	County	Codo	(7)	Square Feet 25,000	# of F		Bldg. Ag	je		
1 No. 10	"	Journey	Code	(1)				57			
Lawrenceville, NJ 08648 Mercer						(Prior if being loation Buildir	demolished)				
Name of Monitoring Firm Hired by Building (Owner (8)	IAS	CM No	Name of Aba	atement Conti	ractor (0)				
Pennoni & Associates	o,,,,o,	,	001			anagement G					
Street Address			-		Street Addre						
515 Grove Street						on Avenue, Si	uite 202				
City, State & Zip Code Haddon Heights, NJ 08035					City, State &						
Project Manager for Monitoring Firm	Tel	ephone	Num	her	Trenton, NJ (Telephone N		License I	Number			-
Brian Clark		-547-0		DCI	609-977-615		License	0118	35		
Scheduled Start Date (10) Scheduled 8/8/2017 9/8/	Complet /2017	ion Da	te (11))	Name of OSI	HA Monitor mental Labora	atories Inc				
Occupancy Status During Abatement (Chec	k only on	e)			Street Addres		210.100 1110				
Facility Closed/Vacated During Entir		of Aba	temer	nt	2333 Route 2						
Abatement Performed during Norma	al Hours				City, State &						
Describe: 8:00AM – 6:00PM Mond Facility Occupied During Abatement		y– inclu	ding w	eekends	Union, NJ 07	083					
Scope of Work (Check all that apply)	v										
							ontainment with N	Negative	Pres	sure	
≥3 sf or ≥3 lf	\boxtimes	Rer	novatio	on		☐ Mini-E	Enclosure				
≥160 sf ≥260 If		Der	molitio	n		Glove	Bag Procedures				
							exempted and Nor	n-Friable	Prod	edur	е
Location of Asbestos-Containing		s Locat rmally			Description Asbestos-Con		Amount	Ab	atem	ent T	ype
Material (ACM)		Solely			Material (A		(Specify SF or LF)			Ш	п
TO BE ABATED		intenar			(i.e., thermal s	ystems		Ren	Re	nca	Enclosure
in Facility (13)	Cus	todial (12)	Staff?		insulation, surface			Removal	Repair	Encapsula	OSL
(10)	Yes		N/A	1	or other miscell	arieous)		<u> </u>	¬	la	re
Class rooms:127,126,125,124,122-124,110,0109,	108			Sheeti	ock & Joint Compo	ound	2,910 SF				
& Hallway by rooms 111-118 Class rooms:127, 126, 125, 122-124, 110, 111, 10	9, 🔲			Eigeur	e Ceiling Tile	300	2 200 05	57			
108 & Hallway by rooms 111-118				1 13341	e Celling The		3,300 SF		Ш		
Class rooms:127, 126, 125, 122-124, 110, 111, 10 108 & Hallway by rooms 111-118	9, 🗆			Cove b	pase mastic		624 SF				
Class rooms:127, 126, 125, 122-124, 110, 111, 10	9, 🗆			Floor t	ile/mastic(grey stre	eaks)	3,306 SF				
108 & Hallway by rooms 111-118 Class rooms(#127, 126 & 109)	-	-		Challch	and Olive Date		100.05				
5.000 1001110(IF121, 120 & 100)				Chaikt	ooard Glue Dots		190 SF				
	ᆜ븝										
		17									
Resource Management Group, LLC		00	25240		TDD	0	ıcıı				
		00	35218		TBD	Grows Lan	atili				
City, State Hamilton, NJ 08619					Disposal Date	City, State	DA				
Completed By (Print or Type) Brian Haney		Tir	lo: D-	olds-1	TBD	Morrisville,	PA	To :	07.0	0.00	-
our protoco by (i fint of Type) brian Halley		111	e. Pie	sident	Signature	- Andrews		Date	11-28	5-201	1

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Date of Notification		8-201	7		Nam Ride	e of B r Unive	uilding ersity	Owner / Operato	or (2)						
Agencies Notified EPA	Туре	Notif	cation			et Add		le Road			AUG -	7 201	7		/
☐ DEP	\boxtimes	Init	al		_		& Zip (1	-
□ DOL		Am	ended					08648		AS	BESTOS C	CONTR	ROL	8.	
□ DOH			ergency				ontact				LICEN	FUND			
□ DCA		Car	ncellation			Valter						-			
N					F	ACIL	ITY INF	ORMATION							
Name of Facility Wh Rider University-Maure	ere A	baten	nent is Taking Pl	ace (3	3)			Type of Faci							
Street Address	er Priy	Sical E	ducation Building-	1 100	r office	es/class	srooms	☐ School			11				
2083 Lawrenceville I	Road							Subcha	pter 8 (C	Other than K-	12)				
	1000							Square Feet		te & commer # of Floors				tc.)	
City (5)			County (6)	C	ounty	Code	(7)	25,000		7		ldg. Ag 7	je		
Lawrenceville, NJ 08	3648		Mercer			0000	(,)		/D-i if	L		1			
								Current Use Physical Edu			isned)				
Name of Monitoring	Firm I	Hired	by Building Own	er (8)		110000000000000000000000000000000000000	CM No	. Name of Aba	tement	Contractor (9	9)				
Pennoni & Associate	S			1		001	102	Resource Ma		ent Group, Ll	_C				
Street Address 515 Grove Street								Street Addre							
City, State & Zip Cod	10	-						2115 Hamilto							
Haddon Heights, NJ		5						City, State &		e ·					
Project Manager for I			Firm	Tele	nhone	Numl	her	Trenton, NJ (Telephone N			I ioonaa Ni	una la a u			
Brian Clark				856-	547-0	505		609-977-615	9		License N	0118	35		
Scheduled Start Date 7/31/2017			Scheduled Cor 8/31/20	npletio 17	on Da	te (11))	Name of OSI J&S Environs			nc				
Occupancy Status Di	uring	Abate	ment (Check on	ly one	:)			Street Addres			110				
☐ Facility Close	ed/Va	cated	During Entire Pe	eriod o	of Aba	temer	nt	2333 Route 2	22 West						
	erforr	ned d	uring Normal Ho	urs				City, State &		е					
Describe:	8:00A	M – 6	:00PM Monday-S	unday	– inclu	ding we	eekends	Union, NJ 07	083						
Scope of Work (Chec	pied L	Juring	Abatement												an an in
ocope of work (Chec	JN all	liial a	ppiy)						⊠ F	Tull Contains	ما ما ماند با مسم		D		
≥3 sf or ≥3 lf				\boxtimes	Ren	novatio	nn		20 10 10	Full Containn Mini-Enclosu		galive	Pies	sure	
≥160 sf ≥260	lf					nolitio	2000			Glove Bag Pr	10 . T 10.				
	**			ш	DCI	HOHILIO	11			272		Talalala	D		
Lo	cation	of		ls	Locat	ion	T	Description		Non-Exempte	Amount		atem		
Asbesto	s-Co	ntaini	ng		mally			Asbestos-Con			(Specify	Abi	atemi	SIIL I	ype
	erial (A				olely			Material (A			SF or LF)	T)		Ш	Ш
TO B	Facili					ice or		(i.e., thermal s		_		Removal	Repair	Encapsula	Enclosure
11.1	(13)	ity		Cust	(12)	Staff?		insulation, surfactor or other miscell				VOI	pai	apsı	JSC
	(,			Yes	No	N/A	1	or other miscen	aneous			<u>n</u>	,	alla	re
Class rooms:127,126,12 & Hallway by rooms 111	25,124	,122-1	24,110,0109,108				Sheetr	ock & Joint Compo	ound		8,960 SF				
Class rooms:127, 126, 1 108 & Hallway by rooms	125, 12		, 110, 111, 109,				Fissure	e Ceiling Tile			5,850 SF				
Class rooms:127, 126, 1 108 & Hallway by rooms	125, 12	22-124	, 110, 111, 109,				Cove b	ase mastic			1,022 SF				
Class rooms:127, 126, 1	125, 12	22-124	, 110, 111, 109,			×	Floor ti	le/mastic(grey stre	aks)		1,500 SF				
	8 & Hallway by rooms 111-118 ass rooms(#127, 126 & 109)							oard Glue Dots			270 SF				-
Class room 124						-	le/mastic			200 SF					
								.c.mada			200 01		П	ᆸ	
Resource Manageme	ent G	roup,	LLC		00	35218		TBD	Grows	Landfill					
City, State				-				Disposal Date	City, St	tate					_
Hamilton, NJ 08619								TBD		ville, PA					
Completed By (Print of	ir Typ	e) Bri	an Haney		Titl	e: Pre	sident	Signature	***************************************			Date ()7-18	-201	7

2nd Amended

	-0 CE		ं										
	08-04-2017			Nan	ne of E er Univ	Building versity	Owner / Operat	tor (2)	ECEI	WE	1		
Agencies Notified EPA	Type Notific	ation		Stre	et Ado	dress	lle Road						
☐ DEP	☐ Initia			City		& Zip			-400 - 7.2	017	11	4	
□ DOL	⊠ Ame	nded:2 nd Amend	lment	Law	rence	ville, N.	J 08648	A. Carrier					
	=Sta Scor	rt date & increa	sed					L A	SBESTOS CON	ITROL	2		
□ DOH		rgency		Nam	ne of C	Contact		- 1	LICENSIN	Falant	G	NI .	
□ DCA	Can	cellation		100000000000000000000000000000000000000		Eddy				relepr	one	Numi	ber
							FORMATION						-
Name of Facility Whe	ere Abateme	ent is Taking P	lace (3)			Type of Fac						
Rider University-Maure Street Address	i Physical Ed	ucation Building-	-1° floo	or offic	es/clas	srooms		(K-12)					
2083 Lawrenceville R	Road						Subcha	apter 8 (Other th	nan K-12)				
							Square Fee	i.e. private & co	mmercial buildin			etc.)	
City (5)		County (6)	C	ounty	Code	(7)	25,000	t # of FI	CONTROL OF A	Bldg. A	ge		
Lawrenceville, NJ 086	348	Mercer		,	0000	(.)				57			
	3 10	INICIOCI					Physical Ed	(Prior if being ucation Building	demolished)				
Name of Monitoring F	irm Hired b	y Building Own	er (8)	(AS	CM No		atement Contra					
Pennoni & Associates	3					102		anagement Gro	oup LLC				
Street Address					-		Street Addre	ess	, LLO				
515 Grove Street City, State & Zip Code							2115 Hamilt	on Avenue, Sui	te 202				
Haddon Heights, NJ (City, State 8						
Project Manager for M		irm	Tele	nhone	e Num	hor	Trenton, NJ Telephone N		1				
Brian Clark	.cci.iig i i			547-0		bei	609-977-615	lumber 19	License N				
Scheduled Start Date	(10)	Scheduled Cor)	Name of OS			011	00		
8/7/2017		8/28/20	17		•			mental Laborat	ories Inc				
Occupancy Status Du	ring Abatem	nent (Check on	ly one	∌)			Street Addre						
☐ Facility Closed ☐ Abatement Pe	d/Vacated D	uring Entire Pe	eriod	of Aba	atemer	nt	2333 Route :						
Abatement Pe	ODAM = 4.3	ring Normal Ho	ours 1	Shif	t		City, State &	Zip Code					
☐ Facility Occup	ied Durina	Abatement	unday	– inclu	iaing w	eekend	s Union, NJ 07	7083					
Scope of Work (Check	k all that app	oly)											
		•							ntainment with N	egative	Pres	Sure	
≥3 sf or ≥3 lf			\boxtimes	Rei	novatio	on			closure	-3		00.0	
≥160 sf ≥260 l	f			Der	molitio	n		☐ Glove E	Bag Procedures				
		<u> </u>							empted and Non	-Friable	Prod	cedur	re
Loc	ation of s-Containing			Locat			Descriptio	n of	Amount			ent T	
	ial (ACM)			mally solely			Asbestos-Cor Material (A		(Specify			1	
	ABATED				ice or		(i.e., thermal s		SF or LF)	R	ת	E	E
	acility		Cust		Staff?		insulation, surfa-			Removal	Repair	ta p	clos
((13)		Van	(12)	11/0	-	or other miscel	laneous)		val	₩.	Encapsula	Enclosure
Class rooms:127,126,125	5.124.122-124	1.110.0109.108	Yes	No	N/A	Sheetr	ock & Joint Comp	ound	0.000.05	-			
& Hallway by rooms 111-	118	8 8 8				Oncei	ock & Joint Comp	ound	8,960 SF		Ш	Ш	
Class rooms:127, 126, 12 108 & Hallway by rooms	25, 122-124, 1 111-118	110, 111, 109,			\boxtimes	Fissure	e Ceiling Tile		5,850 SF				
Class rooms: 127, 126, 12	25, 122-124, 1	10, 111, 109,				Cove b	pase mastic		1,022 SF			П	
108 & Hallway by rooms 1 Class rooms:127, 126, 12	111-118	10 111 100	_								П	П	
108 & Hallway by rooms 1	111-118	10, 111, 109,				Floor t	ile/mastic(grey stre	eaks)	2,550 SF				
Class rooms(#127, 126 &	109)	-				Chalkb	oard Glue Dots		270 SF			П	
											П		
											7	H	님
												1	
Resource Managemei	nt Group, L	LC		003	35218		TBD	Grows Landf	ill				
City, State												COLOR	
lamilton, NJ 08619							Disposal Date TBD	City, State Morrisville, P	Δ				
completed By (Print or	Type) Brian	Haney		Titl	e. Pre	sident	Signature	orrisville, P	^	Det	00.4	204=	
5				110	J. 116	JIGGIIL	oignatule			Date (18-4-	2017	

Completed By (Print or Type) Mr. Brian Haney

State of New Jersey

						BESTOS A .C. 8:60 and		m_ec		\mathbb{V}		n
-, 3 .0 0	u	130	aam	. to <u>r</u>	۷.٥.٨	. <u>c.</u> 0.00 and	1 12.120)				20	
Date of Notification (1)						Owner / Opera	tor (2)	II L AUG	- 7 :	2017		U)
08-04-2017 Agencies Notified Type Notification				e Parl		ments, LLC		ind has 7100			- 1	- company
☐ EPA			-		ness on Ave			L				
☐ DEP ☐ Initial			-		& Zip	Code		ASBESTO			کالـ لا	
	ate)		Clifto	n, NJ	07013			LIC	ENSIN	19		
□ DOH □ Emergency □ DCA □ Cancellation				e of C Campl	ontact bell				Talanh	ono l	lml	201
			F	ACILI	ITY INI	ORMATION						
Name of Facility Where Abatement is Taking	Pla	ce (3)	7 (OIL		Type of Fac						
North Arlington Apartments-Bldg 205						School						
Street Address 20 – B Ridge Park Drive						Subcha	apter 8 (Other this.e. private & co	nan K-12) ommercial buildin	as, hor	nes	etc.)	
011 (5)		_				Square Fee			Bldg. A		010./	
City (5) County (6)		Co	ounty	Code	(7)	10,400	2		2577 10	70	ß	
North Arlington, NJ Bergen						Current Use Apartment E	(Prior if being	demolished)				
Name of Monitoring Firm Hired by Building On	wne	r (8))		CM No	. Name of Ab	atement Contra					
Health and Safety Services Street Address				117	7		lanagement Gro	oup, LLC				
P.O. Box 365						Street Addre	ess on Ave, Suite 2	202				
City, State & Zip Code						City, State 8		.02				
Berlin, NJ 08009						Trenton, NJ						
Project Manager for Monitoring Firm Mr. Jim Proctor			ohone 452-1	Num	ber	Telephone N 609-914-427		License N				
Scheduled Start Date (10) Scheduled Co					1)	Name of OS			011	85		
8-7-2017	08	-11	-2017		' /		mental Laborat	tories, Inc.				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire	only	on	e)	atau.		Street Addre						
Abatement Performed during Normal	Hou	irs.	OI AD	ateme	ent	2333 Route City, State &						
Describe: 8:30am - 6:00pm						Union, NJ 07						
Facility Occupied During Abatement Scope of Work (Check all that apply)	_										-117,	
osope of work (offect all that apply)							⊠ Full Co	ntainment with N	enative	Pro	celire	2
≥3 sf or ≥3 If		\boxtimes	Rei	novati	on			closure	cgative	, 1 16.	SSUIC	*
≥160 sf ≥260 If			Dei	molitic	n		☐ Glove B	Bag Procedures				
							☐ Non-Ex	empted and Non	-Friabl	e Pro	cedu	ıre
Location of Asbestos-Containing	١,		Loca			Description	on of	Amount	Ab	atem	ent T	ype
Material (ACM)	1		olely	Used		Asbestos-Cor Material (A		(Specify SF or LF)				
TO BE ABATED	N			nce or		(i.e., thermal		SF OI LF)	Re	Z	inc	E
in Facility			odial	Staff?		insulation, surfa			Removal	Repair	aps	clos
(13)	_		(12)	T		or other miscel	laneous)		val	¥	Encapsula	Enclosure
Boiler Room	Y	es	No	N/A							# _	(0
Boiler Room	I	+	H		-	Insulation		274 LF				
Meter Room	1	╡╢	Η		Elboy			12 each			H	
Meter Room	1 -	╡╢	H		Elboy	Insulation		253 LF			H	
Wicker Room	1	=	H		EIDOV	VS		8 each		H	H	님
	1	7	౼	H					ㅂ	H	H	님
Name of Registered Waste Hauler	1 -		N	DEP I	Waste	Cubic Yards	Name of Roo	istered Landfill			Ш	
Resource Management Group, LLC			Ha	uler II	O No.	of Waste						
City, State			100	35218)	TBD	Grows Landfi	11				
Trenton, NJ 08619						Disposal Date TBD	City, State Morrisville, P	Ą				

Title

President

Signature

Date

08-04-2017

Date of Notification (1)	T	Name	of B	uilding	Owner / Operato	or (2)	111 11	1110	7 /	047	_	111			
07-19-2017	1	Ridge	Parl	Aparl	ments, LLC	0, (2)	J 1	AUG	- 7 2	UH		semand !			
Agencies Notified Type Notification		Stree		ress in Ave				To the for Management of the Control			i				
☐ DEP ☐ Initial				& Zip	Code			SPESTOS		1 1 1 text	1 8				
				07013			Control of the	LICE	NSIN	3					
□ DOH □ Emergency □ Cancellation	100			ontact				I	elepho	ne N	umb	er			
☐ DCA ☐ Cancellation	,	Jerry (Jamp	bell				- 2							
		F	ACIL	ITY IN	FORMATION										
Name of Facility Where Abatement is Taking F North Arlington Apartments-Bldg 205	Place (3	3)			Type of Facil										
Street Address					School (Other than K-	12)							
20 - B Ridge Park Drive					Other (i.	e. privat	te & commer	rz) cial building	s. hon	nes. e	tc.)				
					Square Feet		# of Floors		dg. Ag						
City (5) County (6) North Arlington, NJ Bergen	Co	unty (Code	(7)	10,400		2			70					
					Current Use Apartment B	ldg									
Name of Monitoring Firm Hired by Building Ow Health and Safety Services	ner (8)		AS 117	CM No	The Arms of the Control of the Contr										
Street Address			111		Resource Ma Street Addres		ent Group, Li	_C							
P.O. Box 365					2115 Hamilto	on Ave, S									
City, State & Zip Code Berlin, NJ 08009					City, State &		le				the ex				
Project Manager for Monitoring Firm	Telep	hone	Num	her	Trenton, NJ (License Nu	ımhar						
Mr. Jim Proctor	856-4	52-13	311		609-914-427	9		LICCHSC IV	0118	5					
Scheduled Start Date (10) Scheduled Con 8-14-2017 Scheduled Con	mpletio 08-17-		te (11)	Name of OSI J&S Environr			Inc.							
Occupancy Status During Abatement (Check o	nly one)	50	53	Street Addres	ss									
☐ Facility Closed/Vacated During Entire F ☐ Abatement Performed during Normal H	eriod o	of Aba	ateme	ent	2333 Route 2										
Describe: 8:30am – 6:00pm	ours.				City, State & Union, NJ 07		е								
 Facility Occupied During Abatement 															
Scope of Work (Check all that apply)							Carataian			_					
≥3 sf or ≥3 lf	\boxtimes	Ren	ovati	on			Full Containm ⁄Iini-Enclosur		gative	Pres	sure	£			
≥160 sf ≥260 If			nolitic				Blove Bag Pr	(T)							
1				_			Non-Exempte				_	_			
Location of Asbestos-Containing		ocati			Description Asbestos-Con		1	Amount	Aba	teme	ent T	ype			
Material (ACM)		olely b			Material (A			(Specify F or LF)			Ш	П			
TO BE ABATED	Maint	enan	ce or		(i.e., thermal s	ystems		/	Ren	Re	nca	incl			
in Facility (13)	Custo	dial S (12)	staff?		insulation, surfactor or other miscella				Removal	Repair	Encapsulat	Enclosure			
(10)	Yes	No	N/A	1	or other miscen	aricous)			<u>a</u>		lat	Ге			
Boiler Room				Pipe	Insulation			274 LF		П	П	П			
Boiler Room				Elbo	- 02 (2 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A			12 each							
Meter Room			\boxtimes	Pipe	Insulation			253 LF							
Meter Room				Elboy	WS			8 each							
Name of Registered Waste Hauler	П	NIII)ED	Monto	e Cubic Yards Name of Registered Landfill										
reame of registered waste flauler															
Resource Management Group, LLC			5218		TBD Grows Landfill										
City, State					Disposal Date	City, S									
Trenton, NJ 08619					TBD	Morrisv	/ille, PA								
Completed By (Print or Type) Mr. Brian Haney		Title	e sider		Signature				Date	001-	,				
		110	sidel	it.		_			07-19	-2017	55)				
		1			1										

CH 2697

	State of New Jersey FIFICATION OF ASBESTOS ABATE Pursuant to <u>N.J.A.C.</u> 8:60 and 12:1	
***	Name of Building Owner / Operator (2) Ridge Park Apartments, LLC	AUG - 7 2017 11
on	Street Address 1122 Clifton Ave	

Date of Notification		Ridge Park Apartments, LLC										11								
Agencies Notified	gencies Notified Type Notification EPA DEP Initial					ddre		ients, LLC		II I	106 - /	201	İ.	1	4					
	☑ EPA ☐ Initial						Ave		The state of											
☐ DEP		d					Zip C	ode		ASBE	STOS C	ONTE	TROL & Grand School Number omes, etc.) Age 70							
□ DOL		nded(Start Dat	e)				7013		and the same of th	,,,,,,,	LICENS	ING								
⊠ DOH				17.7			ntact		har distance		T	elepho	ne N	lumb	er					
□ DCA	☐ Can	cellation		Jerry	Can	npbe	ell				-				1					
					AC	ILIT	YINF	ORMATION												
			lace ((3)				Type of Facil												
	rtments-Bldg	195	-					School (
	Drive							☐ Subchap	oter 8 (Other th	an K-12) I building	a ham		·+- \						
20 - billage Faik	Dilve							Square Feet	# of Flo					elC.)						
City (5)		County (6)	Co	ounty	Cod	de (7)	10,400	2	0015	DI	uy. Ay								
North Arlington, NJ		Bergen				(. ,		(Prior if being	demolish	ned)		10							
V.F.C								Apartment BI												
		y Building Own	ner (8)			M No.		tement Contra											
	ervices				1	117			nagement Gro	oup, LLC	:									
								Street Addres	TOTAL CONTRACTOR CONTR	02										
	de							City, State &	n Ave, Suite 2	02										
Berlin, NJ 08009								Trenton, NJ 0												
	lim Proctor eduled Start Date (10) Schedul				e Nu		er	Telephone No		L	icense Nu	mber								
	eduled Start Date (10) Schedul 8-3-2017				1311	-		609-914-4279				0118	5							
	ect Manager for Monitoring Firm Jim Proctor eduled Start Date (10) 8-3-2017 upancy Status During Abatement (0) Facility Closed/Vacated During				ate ((11)		Name of OSH												
	8-3-2017 cupancy Status During Abatement (C Facility Closed/Vacated During I							Street Addres	nental Laborat	ories, in	C.									
	DEP				pate	mer	nt	2333 Route 2												
	Abatement Performed during No Describe: 8:30am – 6:00pm Facility Occupied During Abatem							City, State & 2												
Describe:	☐ Facility Closed/Vacated During E ☐ Abatement Performed during No ☐ Describe: 8:30am – 6:00pm							Union, NJ 070												
												CHY VIII								
Scope of vvork (Che	ck all that ap	opiy)								ntainma	nt with No	antivo	Dro	ouro						
≥3 sf or ≥3 lf			\boxtimes	Re	nov	atio	n		☐ Mini-En		iit with the	egative Pressure								
				53555	mol					Bag Proc	edures									
A - 17		Wr									and Non-	Friable	e Pro	cedu	re					
				Loca				Description		1	nount	Aba	ateme	ent T	ype					
		g		mally		ed		Asbestos-Con			pecify			-						
				olely ntena		or		Material (A((i.e., thermal sy		55	or LF)	Remo	R	inc	Enclo					
				odial			i	nsulation, surfac				mo	Repair	apo	clos					
	(13)			(12)				or other miscella				oval	₩.	Encapsulat	sure					
			Yes	No	N	/A								7	1,5					
Laundry Room					_			nsulation		17	72 LF									
Laundry Room							Elbow			6	each	\boxtimes								
Meter Room					_			nsulation		13	7 LF									
Meter Room					_		Elbow				each									
Storage Room						_		nsulation)2 LF									
			Ш	Ш			Elbow		T		each									
Name of Registered	Waste Haul	er						Cubic Yards	Name of Reg	istered l	_andfill									
Resource Managem	Resource Management Group, LLC				3352		S10545010001	of Waste TBD	Grows Landfi	11										
City, State		*						Disposal Date	City, State											
Trenton, NJ 08619								TBD	Morrisville, P.	A										
	ompleted By (Print or Type)				tle			Signature				Date								
Mr. Brian Haney				Pi	resid	dent		7/	\ ~			08-4-2	2017							
								12	\ / '											

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) 07-19-2017 Ridge Park Apartments, LLC Agencies Notified Type Notification Street Address EPA 1122 Clifton Ave DEP City, State & Zip Code Initial ASBESTOS CONTROL & DOL Amended Clifton, NJ 07013 \boxtimes DOH Emergency Name of Contact DCA Cancellation Jerry Campbell FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) North Arlington Apartments-Bldg 195 School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) 20 - B Ridge Park Drive Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 10.400 70 North Arlington, NJ Bergen Current Use (Prior if being demolished) Apartment Bldg Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. Health and Safety Services Resource Management Group, LLC 117 Street Address Street Address P.O. Box 365 2115 Hamilton Ave, Suite 202 City, State & Zip Code City, State & Zip Code Berlin, NJ 08009 Trenton, NJ 08619 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Mr. Jim Proctor 856-452-1311 609-914-4279 01185 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8-7-2017 08-11-2017 J&S Environmental Laboratories, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West Abatement Performed during Normal Hours: City, State & Zip Code Describe: 8:30am - 6:00pm Union, NJ 07083 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure M ≥160 sf ≥260 If Glove Bag Procedures Demolition Non-Exempted and Non-Friable Procedure Amount Location of Is Location Description of Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsula Enclosure Remova Repair TO BE ABATED Maintenance or (i.e., thermal systems Custodial Staff? insulation, surfacing, VAT in Facility or other miscellaneous) (13)(12)Yes No N/A Laundry Room Pipe Insulation 172 LF Laundry Room M \boxtimes Elbows 6 each Meter Room Pipe Insulation 137 LF X Meter Room Elbows 6 each Storage Room \boxtimes Pipe Insulation 302 LF \boxtimes Storage Room Elbows 8 each Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill of Waste Hauler ID No. Resource Management Group, LLC 0035218 TBD Grows Landfill City, State Disposal Date City, State Trenton, NJ 08619 TBD Morrisville, PA Completed By (Print or Type) Title Signature Date Mr. Brian Haney President 07-19-2017

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Date of Notification (1) 08-4-2017				Owner / Operatoments, LLC	r (2)		<u> U V</u>					
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Street Address P.O. Box 365				Street Addres								
City, State & Zip Code Berlin, NJ 08009				City, State & 7	Zip Code							
Project Manager for Monitoring Firm Mr. Jim Proctor	Teleph 856-45			Telephone Nu 609-914-4279	umber	License No	umber 0118	5				
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Storage Room			Elbo	ws		5 each						
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City, State Trenton, NJ 08619				Disposal Date TBD	City, State Morrisville, PA							
Completed By (Print or Type) Mr. Brian Haney		Title Presid	dent	Signature			Date 08-4-2	2017				

State of New Jersey

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(Pursuant to <u>N.J.A.C.</u> 8:60 and 12:120)		C		-	\mathbb{V}		[[]		
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Date of Notification	(1) 07-19-201	7					Owner / Operatoments, LLC	or (2)			1 0 0					
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Street Address							☐ Subchar	oter 8 (Othe	r than K-	12)						
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Project Manager for Mr. Jim Proctor	Wonitoring	Firm		phone 452-1		iber	Telephone N 609-914-427			License N	Number 01185					
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Completed By (Print	or Type)			Tit	le eside	venus	Signature /	y <u>h</u>			Date					
Mr. Brian Haney							/ _				07-19	}-201	7			
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Project Manager fo	Monitoring Firm			Telepho	one No.	Telepi	hone No.		License No.								
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	uring Abatement (Check Only One)		Street Address														
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	ent Performed Outside of Normal					City, S	State, Zip Code										
	Describe: 7-4	i demey .	Name of Building Owner/Operator (2) St. Joseph Regional Medical Center Street Address 703 Main Street City, State, Zip Code Paterson, NJ 07503 Name of Contact Matthew Barkho FACILITY INFORMATION FACILITY INFORMATION Type of Sacility (4) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other file. private & Commercial buildings, homes, etc.) Square Feet 30,000+ 3+ 50+ (STATE USE ONLY) Hospital ASCM No. Name of Abatement Contractor (9) Unicorn Contracting Corp. Street Address 32 Willow Way City, State, Zip Code Woodland Park, NJ 07424 Telephone No. Te														
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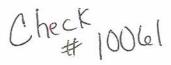
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Steve Sche	n Kee	Pitte	sid	ent			Signature	sel	h	Date	-4	-1-	1

Hauler ID No. of Waste Newark Carting 22253 Cumberland Co./ BFI / GROWS / TRRF City, State Disposal Date City, State Newark, NJ 9/1/17 Newburg / Imperial / Morrisville, PA Completed by Date

Title Michael Cooper President

7/31/17

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Date of Notification (1) 8/1/17					of Building		r/Operato	r (2)	T	1		/		1 6		1
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Vacant home	toatement is Taking	g Place	(3)					Тур	e of Facility	(4)		2012018			The same of	-
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City (5)									etc.)							
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County (6) Bergen					Code (7) USE ONLY)			rent Use (Pr		ng den	nolis	ned)			
Name of Monitoring Firm	Hired by Building C)wner (8	3)	ASC	M No.	O NOTES	Name		atement Co	longon and a second	(9)					
Street Address									rironmenta	al Servi	ices,	LLC				
							Street PO E		ess 183, 4 E (Sate Dr	ive					
City, State, Zip Code									Zip Code d, NJ 074	110						
Project Manager for Monit	oring Firm			Telepho	one No.		Teleph			+10						
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Start Date (10) 8/10/17		Schedu 9/10/1		mpletion	Date (11)		Name	of OS	HA Monitor							
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Facility Closed/Vacate Abatement Performed	ed During Entire P	eriod of	Abater	ment												
Other - Describe:		n raciiii	y Hour	S			City, St	tate, 2	Zip Code					-1111100000		
Scope of Work (Check All	That Apply)															
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		T						I NO	n-Exempted	d (*) and	Non-F	riabl	1			
Location o	f	955	s Locat Norma			D.	scription								ement pe	
Asbestos-Containing M	laterial (ACM)		ed Sole aintena		Asbesto	os Cont	taining Ma	ateria	I (ACM)	Am	ount					
TO BE ABAT In Facility			todial 3		(i.e. t	hermal	systems cing, VAT	insula	ation,		ecify		Re	R	Encapsulate	Enc
(13)			(12)				niscellane			SF (or LF)		Removal	Repair	nsdi	Enclosure
		Yes	No	N/A									a		late	re
boiler room behind 20	3 Faller Drive			X			ng plast	-		240	SF		х			
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Name of Registered Waste	Hauler	ı	N	JDEP W	/aste	Cubic	Yards		Name of F	Registers	dlas	4fil				
ABS Environmental Se			Н	auler ID	No.	of Was			Minerva			uiil				
City, State			11	U4Z48		TBD	sal Date									
Glenwood, NJ						TBD	ai Date		City, State Waynes)H					
Completed by		Title					ignature		//	July, C	711	Date				
A. Scott Higgins		Presi	dent					5	K			8/1				

CN # 1434			CATIO		BEST	sey OS ABATE and 12:12)。	C		W	
Date of Notification (1) 08/02/2017			Name Charl	of Building les Guzr	Owne man	er/Operato	r (2)		A CONTRACTOR OF THE PARTY OF TH	Colomorphic Colomo	UG ·	- 7	2043	West of the second
Agencies Notified Type Notification			Street	Address					1000	1	00	_/_	2017	7 \$
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DOL Amendment				tate, Zip C Arlingto		J 07031					L CEI	VSIN	HPIC G	L&
Emergency justification)	includin	g		of Contact					T_	lanhana			THE REAL PROPERTY.	THE REAL PROPERTY.
DCA Cancellation			Charl	es Guzr	nan									
Name of Facility Where Abatement is Takin	g Place	(3)	FAC	ILITY INF	ORMA	ATION	Type	of Facility	(4)					
House							(money	School (K-						
Street Address							×	Subchapte Other (i.e.	r 8 (Oth	ner than I & comme	K-12) ercial b	uilding	s, hon	nes,
City (5) North Arlington			\$=\$===================================	***************************************				etc.) ire Feet	# o	of Floors		Bldg N/A	Age	
County (6) Bergen				Code (7) USE ONL)	0		Curre	ent Use (Pr		100.5	olished)		-	
Name of Monitoring Firm Hired by Building (Owner (8)		M No.		Name	Hou of Aba	se itement Co	ntractor	(9)				
N/A Street Address	100					D&S	Abat	ement, Ir	nc.	(0)				
Street Address						100000000000000000000000000000000000000	Addre osen	ss gren Ave	nue					
City, State, Zip Code								ip Code J 07512						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	none N	0.		License	e No.			
Start Date (10)	Cabadi	10000		D 1 (44)		200000000000000000000000000000000000000	345-8			01311				
08/12/2017	08/13/	2017	npietion	Date (11)				HA Monitor ement, Ir						
Occupancy Status During Abatement (Check						Street								
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of al Facilit	Abaten v Hours	nent					gren Ave	nue					
Other – Describe:					_			J 07512						
Scope of Work (Check All That Apply)							-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	arrester .	Renova Demolit					Ful Mir	l Containm	ent with	Negativ	e Press	ure		
						×	Glo	vebag Pro	cedure	d Non-Fr	iable P	roced	ıre	
	110	Locati Normal											temen	t
Location of Asbestos-Containing Material (ACM)	Use	ed Sole	ly by	Asbes		escription ntaining M		(ACM)	А	mount		T	T	
TO BE ABATED In Facility		intenar todial S		(i.e.	therm	al systems facing, VA	insula	tion,	(S	Specify or LF)	X er	Re	Enca	End
(13)		(12)				miscellan			0,	OI LI)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										ite	Ф
Exterior of the House		X			Trai	nsit Shin	gles		20	00 SF	Х	-		
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Name of Registered Waste Hauler		1000	JDEP W		Cubi	c Yards		Name of I	Registe	red Land	fill	_		Н
D&S Abatement, Inc.			auler ID 1996	No.	of W			Waste !						
City, State Totowa, NJ					Disp	osal Date	8	City, State Morrisvi		Α				
Completed by	Title					Signature	3	1	, . 7		Date			
Ned Joksimovic	Proje	ct Ma	nager					TA			08/02	201	7	

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Date of Notification (1) 08/02/2017					of Buildin Itzkovito		/Operato	r (2)	No. Treatment		AU	G -	7	2017	,	
Agencies Notified	Type Notification	1		Street	Address				- Cale	-					-	
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Name of Facility Where A	Abatement is Takir	ng Place	(3)	FAC	CILITY IN	FORMAT	ION	Τ	C P							
House		.5 . 1400	(0)					-	of Facilit							
Street Address								H	School (K Subchapt	(-12)	har tha	o 1/ 1	2)			
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City (5)									etc.) are Feet		of Floor					The same of the
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Bergen				(STATE	USE ONL	y)		Hou	se (i		ing der	HOHS	(leu)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8	3)	ASC	M No.				itement C ement,		r (9)					
Street Address							Street	Addre	ss							
011							11 R	osen	gren Av	enue						
City, State, Zip Code				1,100					ip Code							
Project Manager for Manager	. =						Toto	wa, N	J 07512	2						
Project Manager for Monit	oring Firm			Telepho	one No.		Teleph				Licer		0.			
Start Date (10)		Cabadi	la d O				973-3				0131	11				
08/15/2017		08/16/		mpletion	Date (11)				HA Monito							
Occupancy Status During	Abatement (Chec			200-200-2					ement, I	nc.						
Facility Closed/Vacat		37	107500				Street A	10 D440000000000000000000000000000000000	ss gren Ave	anua						
Abatement Performe	d Outside of Norm	nal Facilit	y Hours	nent s					p Code	riuc						
X Other – Describe: Od	cupied								J 07512)						
Scope of Work (Check All	That Apply)															
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Location of	7.5.		Normal			Des	scription	of						Ту	ре	
Asbestos-Containing N TO BE ABAT		100000000000000000000000000000000000000	ed Sole aintenar		Asbes	tos Conta	aining Ma	aterial	(ACM)	1000	mount				m	
In Facility		Cus	todial S	Staff?	(i.e.	thermal surfac	systems ing, VAT		tion,		pecify or LF)		Ren	Re	nca	End
(13)			(12)		Ē		niscellane				01 21)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									=		ate	e e
Basemer	nt		Х			Pipe	Insulat	ion		1	5 LF		Х			
						20104										
Name of Registered Waste	Hauler		l Kr	IDEDIT	oots.	0 11	, .									
D&S Abatement, Inc.	, laulot		500.5	JDEP W auler ID	7.070, V-55.0	Cubic Y			Name of	13						
				996	2000	TBD			Waste	Manag	emen	t of	PA			
City, State Totowa, NJ						Disposa TBD	al Date	/1	City, Stat Morrisv		4					
Completed by		Title	1.50			C VIVIDAGE CO	gnature	13/	7//	-, , ,		Date	2			_
Oliver Hegedis		Proje	ct Ma	nager			7/	6					02/2	017		

CIL#1435		NOT	(Pursuar	ON OF AS	C 8:60 a	S ABATE nd 12:12	MENT 0)	Trans.	E			W	
Date of Notification (1) 08/02/2017			Name Deni	of Buildir se Brow	g Owner	/Operato	r (2)			MEST I COMMENTED	C. C. C. C. C.		-C-120-ray
Agencies Notified Type Notificatio	n			Address					AL AL	G -	7-2	017	
EPA Initial Amended			City C	tota Zin	On de								-
X DOL Amendmer				State, Zip Orange		018			ASBES	TOS	CON	THC	儿品
Emergency justification)	ıg	Name	of Contac	t			4		- 01-1	40114	New York	
DCA Cancellation	n			ent May									
Name of Facility Where Abatement is Taki	ng Place	(3)	FAC	CILITY IN	FORMAT	TION	Type of Facility	y (4)					
House Street Address							School (K	(-12)					
							Subchapt Other (i.e etc.)	er 8 (Oth . private	er than K- & commer	12) cial bu	ilding	s, hon	ies,
City (5) East Orange							Square Feet N/A	# o N//	f Floors A		Bldg. N/A	Age	
County (6) Essex				Code (7)			Current Use (P House	rior if bei	ing demoli	shed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8	3)	ASC	M No.		Name D&S	of Abatement C Abatement,	ontractor	(9)	==10			
Street Address	·					Street	Address					15-1	
City, State, Zip Code						City, S	osengren Ave tate, Zip Code	7				Tiles en E	
Project Manager for Monitoring Firm			Telepho	ana Na			va, NJ 07512	2					
	,		1011 CARRO #01 (10)				one No. 345-8685		License 01311	No.			
Start Date (10) 08/16/2017	Schedu 08/17/			Date (11))	1	of OSHA Monito Abatement, I	57					
Occupancy Status During Abatement (Chec	ck Only O	ne)					Address	110.					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	Period of	Abater	ment				sengren Ave	enue					
X Other – Describe: Occupied	nai Facilit	y Hour	S				ate, Zip Code va, NJ 07512						
Scope of Work (Check All That Apply)					Victoria de la composición dela composición de la composición de la composición dela composición dela composición dela composición dela composición de la composición de la composición de la composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición dela composición d								
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	Comments	Renova Demoli				×	Full Containn Mini-Enclosus Glovebag Pro Non-Exempte	re ocedure					
	Is	Locat	ion				TTOTI Exchipte	a () and	I IVOIT-I IIA	DIE FIC		ement	
Location of Asbestos-Containing Material (ACM)	Use	Norma ed Sole	lly ely by	A-6		scription				-	Ty	ре	
TO BE ABATED In Facility		intena todial		(i.e	thermal	systems	aterial (ACM) insulation,	18.00	nount pecify	R	71	Enc	Ш
(13)		(12)				cing, VAT niscellane		SF	or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							<u>a</u>	-	late	Iге
Basement		Х			Pipe	Insulati	ion	11	0 LF	Х			
Name of Registered Waste Hauler			JDEP W		Cubic	Yards	Name of	Register	ed Landfil				
D&S Abatement, Inc.	181		auler ID 0996	No.	of Was	te	A 2000 PM - 12		ement o				
City, State Totowa, NJ					Disposa TBD	al Date	City, Stat Morrisv		V ₀				
Completed by Oliver Hegedis	Title Proje	ct Ma	nager		Si	gnature	D/X		Da 08	ite 3/02/2	2017		4

State of New Jersey



UC# 7685

Date of Notification (1) 7/26/17	ion	Name of Bu	uilding Owne	r / Operator (2)			
Type Notifica Agencies Notified	ion	Genon Re					ELVEN
	ergency Notification	Street Addr					SUW ENTIN
	al Notification				11731		7. 02 00
	ended Notification	City, State 8			Control of the Contro	AUG .	- 7 2017 IIUI
	cellation	Houston, Name of Co				MUU	- Indian
DCA	Conducti	Frank Mie					Telenhana Mumbar
		FACILIT	TY INFORM	IATION	ASE	HOE	- NSING
Name of Facility Where Abatem	ent is Taking Place			pe of Facility (4)	Interestation of the last of t	- VL	IN OIL TO IN THE TOTAL THE
	ior Pipe Rack	(0)	1' y	School (K-12)			
Street Address				Subchapter 8 (Other than K-1	12)	
415 Ri	egelsville Road		X	Other (i.e., priva	ate & commer	cial build	dings, homes, etc.
	-				# of Floors		Bldg. Age
City (5)	County (6)	County Code ((7)	N/A	1		85 +/-
Milford	Hunterdon		Cu	rrent Use (Prior if	being demoli	shed)	
				terior Pipe Rad			
Name of Monitoring Firm Hired	by Building Owner (me of Abatement			
Environmental Tactics, Inc Street Address		004		obal Abatemer	t Services,	LLC	
64 Broad Street			2000000	eet Address	ъ.		
City, State & Zip Code	0			State & Zin Co.			
Matawan, NJ 07747				y, State & Zip Coonnoe Townshi			
Project Manager for Monitoring		ephone Numb		ephone Number	p, 110 00001	License	Number
Tom Geiger		2-290-2217	733	2-605-9062			00714
Scheduled Start Date (10)	Scheduled Comple			me of OSHA Mon			
8/3/7		9/17	Glo	bal Abatemen	t Services,	LLC	
Occupancy Status During Abate	ment (Check only o	ne)	1500000	eet Address	Park Park		
Facility Closed/Vacated				3 Schoolhouse			
Abatement Performed C Describe: Area Isola	tod During Abote	Clity Hours -		, State & Zip Coo			
	terior	ement	IVIO	nroe Township	o, NJ 08831		
Scope of Work (Check all that a						-	
Demolition	X Renovation			Full Conta	ainment with N	Vegative	Pressure
Large Project				Mini-Encl		9 - 11 - 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
X Quantity is ≥ 3 SF or ≥ 3				X Glovebag			
Quantity is ≥ 160 SF or	≥ 260 LF ACM				Non-Friable		
Location of		Location		escription of	Am	nount	Abatement Type
Asbestos-Containir Material (ACM)	•	rmally Used		estos-Containing		ecify	(Specify: Removal,
TO BE ABATED	1/2/22	Solely by ntenance or		aterial (ACM)		re Feet	Repair, Encapsulation
in Facility		todial Staff?		thermal systems on, surfacing, VA		or ar Feet)	or Enclosure)
(13)		(12)		er miscellaneous		ii i eet)	
Dina Dank		N1/ A					
Pipe Rack		N/A		TSI Pipe	50	LF	Removal
Name of Registered Waste Haul	er NJD	EP Waste Ha	uler ID#	Cu. Yds. of Was	ste Name	of Regis	stered Landfill
Global Abatement Services	LLC	S3240		3	TRRE		Acrea Lariann
City, State Monroe Twp, NJ 08831				Disposal Date	City, S		
Completed By (Print or Type)	Title			8/9/17	Tully	town, P	
Dominick Tringali	Title Pres.			Signature	- p-		Date
gan	1103.			Dominick S	ringali		7/26/17
SP 41 IIIN OF CASS7							

11/4,3047		NOTIF	ICATIO	tate of New N OF ASBE t to NJAC 8:	STOS A	BATEN	MENT (5)	E	3 E I	nn	Fr⇒	femme 1	y con
Date of Notification (1) 7/31/2017 Check # 30 4				of Building O t the King				<u> </u>	J IC U	W	E	F-12	The same of the sa
Agencies Notified Type Notification			Street A	Address				AU	IG - 7	2017	,		
EPA Initial				Voodside .		е			9 1	CU11	-		- Interest
DEP Amended Amendment	#			ate, Zip Cod				QREQ"	OS CON	. \			
Emergency (,	100000000000000000000000000000000000000	rk, NJ 07	104			e retired :	CENCIN		AL &		
DOH justification) DCA Cancellation				no Fernan	dez							NOTES CONTRACT	need .
				ILITY INFOR		N		_				-	
Name of Facility Where Abatement is Taking Christ the King Elementary School	Place (3)		7.50			Type of Facility	(4)					
Street Address							School (K-				32		
239 Woodside Avenue							Other (i.e.	private a	er than K-1: & commerci	2) al buil	ldings	hom	es,
City (5)							etc.) Square Feet		f Floors		Bldg. /	V	
Newark							Oquare r eet	# 0	1 110015	,	olug. /	-ige	
County (6) ESSEX				Code (7) USE ONLY)			Current Use (Pr	ior if bei	ng demolish	ned)	7		
Name of Monitoring Firm Hired by Building C	wner (8)	ASCN	л No.		Name o	of Abatement Co	ntractor	(9)				_
N/A	8	20)					ervices Corp		0.770.75				
Street Address							Address 69th Street						
City, State, Zip Code				7.000	(City, St	ate, Zip Code						
						Gutte	nberg, NJ 07	093					
Project Manager for Monitoring Firm			Telepho	ne No.	11 "	Telepho			License N	0.			
Start Date (10)	C-b-d-1			D + 244)		- paragonia	95-1700		01074				
08/12/17	08/14/		npletion	Date (11)			of OSHA Monitor as above						
Occupancy Status During Abatement (Check	000000000000000000000000000000000000000						ddress						
Facility Closed/Vacated During Entire P	eriod of	Abaten	nent										
Abatement Performed Outside of Norm Other – Describe: Starting 8 AM	al Facility	/ Hours	3		- (City, Sta	ate, Zip Code						- 77.
Scope of Work (Check All That Apply)											-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Full Containm Mini-Enclosur Glovebag Pro	e cedure					
	1	1 e					Non-Exempte	d (*) and	Non-Friab	le Pro	- Marie 1997	e ement	
Location of	1000	Locati Vormal			Dagar	ription o						ре	
Asbestos-Containing Material (ACM)		d Sole intenar			s Contair	ning Ma	aterial (ACM)		mount			Ш	
TO BE ABATED In Facility		todial S			ermal sy surfacin		insulation, . or		pecify or LF)	Ren	Repair	Encapsulate	Enclosure
(13)		(12)			ther mis			(67)	/	Removal	pair	sula	osur
	Yes	No	N/A							-		ate	æ
Basement Boiler Room			x		Pipe In	nsulati	on	2	LF		х		
Hallway-3rd Floor		Х			Plaste	r ceili	ng	2	SF		Х		
Name of Registered Waste Hauler		0.00000	JDEP W	171,200.00 E	Cubic Ya		Name of	Register	red Landfill				
Tri-State Transfer Assoc.		55.000	auler ID 9551	030-4775	of Waste ΓBD	Ę	Minerv	a Ente	rprises, Ir	nc			
City, State					Disposal	Date	City, Stat	е					
Completed by	Title				Siar	nature/	m	1	Dat	e			
Gina Betances	Office	e Mar	nager			le	Thuas	_	100000	31/20	017		

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

Initial Non-Friable Notification

6561-NJ		(Pu	rsuar	it to	NJA	C 8:6	0-7 a	nd 12:12	0-	7) Check #:	6985				
()(# log	8.5		Wand	o F	Buil	dina	Owner	/Operato	r	(2)					-
Date of Notification		7						nees R.H.		- powers FI	GE I	\mathbb{W}		The same	avortanist.
Agencies Notified				eet &			V 0011	1000 11.11		一块			1000	Andreas (A)	The same of the same of
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(×)DOH	Notific		Nam	e of	Con	tact			- 1	Telep	hone Number	iv Attac	علاما سياس		-
[]DCA	[]Cancell	ation	Wil	liam	Mow	ery, F	aciliti	es Directo	or	L					
							FORMA"								_
Name of Facility W	here Abatemer	nt is Tak	ing	Plac	e (3	7			T	ype of Facilit					
North Hunterdon Re	gional High Sc	chool								[]School []Subchar	ter 8 (Othe	r th	an K	-12)	
Street Address	gioriarriigiro	511001								⊠]Other	i.e., priva	mes.	etc	.)	_
1445 Rt. 31 S.									Si	quare Feet	of Floors	Bla	50	ge	
City (5)		County	(6)			Cour	ty Co	de (7) E ONLY)	10	50,000 urrent Use (P:	2 rior if bein	g de		shed)
Annandale, NJ 0880	11	Hunter	don			1011			0	School Building				.8	
Name of Monitoring	Firm Hired	by Build	ing	ASC	No.	-	Name	of Abate	me	nt Contractor	(9)				
Owner (8)				004			Four	Strong B	uilo	ders, Inc.					
Briggs Associates. Street Address				1004		1	Stree	t Addres	S						
3 Crosswicks St.							180 5	Sargeant	Av	renue					_
City. State. Zip	Code]1						State,							
Bordentown, NJ 08	505 or Monitoring	Firm T	elep	hone	Num	ber	Clifto	n, NJ 070	nbe	3-1935 r	Licen		ımber		
Michael Hoodak El	PA Project Des	signer 6	09-2	98-5	520		973-6	614-0377			00807				
Scheduled Start D.	ate (10) 50	ned. Comp	Terr	OII D	arc	(11)									
0 8 / 0 5 / Occupancy Status	1 7		Day	1/12	Year	1	Four	Strong B	Buil	ders, Inc.					_
Occupancy Status (X) Facility Clo	During Abatem	ent (Che	ck o	nly	one)										
of Abatement []Abatement Fe						v	180 :	Sargeant . State.	Z	venue ip Code			_		
Hours - Desc	ribe:	tue or me				-	1								
[]Other - Desc		200[11]			•		Clifto	on, NJ 07						100 Per 10	
Scope of Work (Ch		abbră)		Reno	vati	on		[]Min	1-	Containment was					
[]Demoli [X]>3 sf	or >3 lf if or >260 lf		<i>V</i> .					[]Glo []Non	ve -F	bag Procedure riable Proced	ure WRap) 2 (ut		
[15160 s				Is								Abat	emen		7pe E
T 000	tion of			catio				escripti				R	_	E	N
Asbestos	-Containing		Ţ	Jsed	-		Ma	stos-Con terial (AC	M)	Amount (Specify	EM	R E P	C A P	T.
TO BE	ABATED		by	Main	1-	iı	nsulat	thermal	rfa	cing. VAT.	SF or LF)	0 0	A	S	0 S U
	(13)		Cus	stod:	ial (2)		or c	ther mis	sce	ellaneous)		A L	R	L	R
			Yes	No	N/A	ממ בו	ttings	la (O a a			40 LF	X		<u> </u>	E
Room 110, 111, Guidance Hallway,		n Entrance	-			22 11	turigs	-WRap	B	cuc	1.0 -				
			-	-	-										
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Name of Register	ed Waste Haul	er		JDEP			Cubic	Yards		Name of Regis	tered Landf	ill			_
				aule		No.	of Wa	este		G.R.O.W.S., Ir	nc.				
Four Strong Build	ers, Inc.			2609			Disp	osal Date		City, State	,				_
Extraction and the second										Tullytown, PA					
Clifton, NJ Completed By (Pr	int or Type)	Title					1	Signatu	re			р	ate		
		Office A	dmi	nistra	ator			1	(111-		7	/25/	17	
Bilyana Kulakovsl		Office P	WITH	ijoti c											
JUN 95														G46	667

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Check #: 6985

Initial Non-Friable Notification

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Date of Notification	n (1)		Nan	ne o	Bui	lding	Owne	r/Operato	01	r (2)	I pour) E	(P)	F I	1 17/	7 15	2 pm:
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[]EPA			114	45 F	Rt. 31	S.							AUG	- "	201	7	1
(X) DEP	[X]Initial	l cation	1 1				Code								100000		There
⊠] DOL	[]Amende		Ar	nan	dale,	NJ 08	8801					ASB	387O	9 00	au FE	\sim 1	
(×) DOH	Notifi		Na	me o	f Con	tact				T	elep	hone	Numbe	ENSI	NG	WE.	
[]DCA	[]Cancel	lation	IIw	illian	n Mov	verv.	Facili	ties Direct	tc	or					-	PER PERSONAL PROPERTY.	Province
			Ш				NFORM		_								
Name of Facility W	here Abateme	nt is Ta	king	Pla	ce (3	17			П	Type of Fac	ilit	y (4)					
North Hunterdon Re	gional High S	chool								[]Sch []Sub 	chap er (i.e.,	(Oth priv	ate 8	eto	mer-	
1445 Rt. 31 S.										Square Feet	1	of F	loors	Blo	ig. P	ge	
City (5)		County	(6)		-			ode (7) SE ONLY)		50,000 Current Use	(P+	2	f bei	ng de	50	shed	<u>1)</u>
Annondolo NII 0000	4	Hunto	rdon			(51	MIE O	SE UNLI)		School Build						340	
Annandale, NJ 0880 Name of Monitoring Owner (8)	Firm Hired	Hunte by Build	ling	ASC	M No	-				ment Contrac	tor	(9)					-
Briggs Associates.				004	<u> </u>			Strong B		uilders, Inc.							_
3 Crosswicks St.							180	Sargeant	: /	Avenue							
City, State, Zip C		2					-	on, NJ 07									
Bordentown, NJ 085 Project Manager fo	or Monitoring	Firm	Teler	phone	≥ Num	ber	Tele	phone Nu	m	ber			Licer	se N	umbe	5	
Michael Hoodak, EF	PA Project De	signer (009-2	298-5	5520 Date	(11)	1	614-0377		Monitor			0800	7			
0 8 / 0 5 / Month / Day / Occupancy Status I	1 7 Year	0 8 /	0 7 Day	l/l_	1 7 Year one)	1		Strong E		uilders, Inc.							
	ed/Vacated I formed Outs:	Ouring E	ntire	e Per	riod		City			Zip Code							
[]Other - Desci		200111		_	-		Clift	on, NJ 07	_			_					
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		-	Т	Is										Abat	emen	t Ty	ype E
Asbestos Materi TO BE in Fa	cion of -Containing al (ACM) ABATED cility 13)		No. by te Cu St	rmal Used olel Mai nanc stod aff(ly y n- e/ ial		Asbe Mi (i.e. nsula		A L	aining ACM)		(Spe	unt cify or F)	R E M O V A L	R E P A I R	NCAPSUL .	NCI. OSURE
Room 110, 111, Guidance Hallway, Al	letics &Health Office, Main	Entrance	163	X		22 Fi	ttings	- WROP	8	e cut		40 LF		X			
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		-	+														
			+	T													
Name of Registere	d Waste Haul	er			Wast r ID		Cubi of W	c Yards aste		Name of Re	. 		Landf	ill			
Four Strong Builde	rs, Inc.		1	2609	9		Disp	osal Date	e	G.R.O.W.S		C				_	
City. State							2125	July Date	-								
Clifton, NJ		T#12-1						Signatur	r/	Tullytown,	PA			ın	ate	_	
Completed By (Pri		Title						A	/	7						_	
Bilyana Kulakovska	a	Office A	Admir	nistra	ator			1	7	un	_	\bigcirc		17	/25/1	7_	
ASB-41 JUN 95												/				G46	667

CK 4197

Date of Notification (1)				lame of	Building ()wner/O	perator (2)	bones	NO -						
7/28/17				7	SACT	Œ	SKR	DRATIO	NIT		11	C n	S) f)	FP		
Agencies Notified Type Notification				treet A	ddress					JI L	0	5 [W			
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DEP DEP DOL	☐ Amended	(lity, Sta	te, Zip Cod	le		00000	11	11. A		- 7	201	7			
IN DOL	Amendment #_ Emergency (inc	Inding	- $lacksquare$	15	3E (1,V)	. 1	00.	08830	1	-m: 14		1	CUI			
Z DOH justification) I DCA Cancellation					Contact .				Tek	mhone Num	MAT.			Office.		
□ DCA		KYLE SMITH FACILITY INFORMATION														
Name of Facility Where A	hatement is Taking Pla	œ(3)		FACI	LITY INF	ORMAT	ION	Type of Facility (4)								
BASF		(-)						School (K-12)								
Street Address					-	·.		Subchanter 8 (Other than K-12)								
25 MIDDLESEY ESSEX TO					PILE.			Other (i.e. private & commercial buildings, homes, etc.)								
City (5)								Square Feet	Floors	E	idg. A	ge				
15=40								100,000 3 - 627EA								
County (6)				County Code (7)				Current Use (Prior if being demolished)								
	DOVESEY		6	STATE !	USE ONLY)		-	100 E	FFICE	LAB	3	8				
Name of Monitoring Firm	Hired by Building Own	ner (8)		ASCM No.				of Abatement Cont	ractor (9)							
EHI							Best Removal Inc									
Street Address					8		Street Address									
655 WEST SHORE TRAIL							450 South River Street									
City, State, Zip Code				W 100000 - 100000			City, State, Zip Code									
	NJ. 0787)					Hackensack, NJ 07601									
Project Manager for Monitoring Firm					Telephone No.			Telephone No. License No. 201-329-7444 00388								
J. P. JON DOEHREN					729.5	219										
Start Date (10) 8 12 17 Scheduled Con							Name of OSHA Monitor									
Occupancy Status During Abatement (Check Only One)					<u>/</u>		Omega Environmental Street Address									
					*		280 Huyler Street									
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours			IIS		1355	≼	City, State, Zip Code									
Abatement Performed Outside of Normal Facility Hours Other - Describe: 700 60 500 500			PA			.	Sc	outh Hackens	sack, 1	JJ 07606		-				
Scope of Work (Check All	That Apply)		-								,					
⊿ ≥3sfor≥3lf		PI R	enovatio	n			Ė	☐ Full Containment with Negative Pressure								
≥160 sf or ≥260 if		D	emolitio	n.	17			Mini-Enclosur	8							
							E	Glovebag Proc Non-Exempted	conce l (*) and l	Non-Friable Procedure						
		I e	Location			18				Abatement						
Location	n of		locmally		-	De	scription	of			Тур		pe)C		
Asbestos-Containing	Material (ACM)	120,000,000	d Solely intenance	kely by Asbestos Cont				aterial (ACM)	A	_		5	m			
, TO BE ABA			odiał Sta	i Staff? (i.e. mermal syst					. (S	Removal	Repair	cap	Enclosure			
(13)			(12)	2) other								=	Encapsulate	sure		
		Yes	No	N/A		-			1.							
LAB 226					L432	ENCH	4 70	9-	12 5F		×					
LAB 312					TRANS	V-100	C215		80 SF		70					
LODOM & DOCIL					THERMA	SYST	EM 18	you water	65	×						
Name of Registered Waste		DEP W		Cubic			of Registered Landfill									
					No. 09	of Was	44	4 1/2 cy Minverva Enterprises, LLC								
City, State Hackensack, NJ 07601							al Date 28 1	[19] (이 프리크						··		
Completed by		Title					ignature	1	0-9-9-70	Da	te .					
J. Maiorano		Es	timate	or				Monora 7/28/17								
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ASB-41 (R-06-08)							V :	Do not use this for	m for ast	estos licensi	ne car	mpted	activi	ties.		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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NOTIFICATION OF (Pursuant to NJ											A CONTRACTOR OF A CONTRACTOR O				
Date of Notification (1)	2)	12,120)		AUG -7	2017										
7/24/17															
Agencies Notified Type Notification		Stre	et Addres	Board of Educa	COII		I AS	SBESTOS CO	N. F.W	19	1				
⊠ EPA ☐ Initial		13	7 East	Central Avenue				LICENSIN		0-6	.M.				
DEP X Amended		50%	, State, Zi					And an analy Processing Control of the Control of t	distribution of the last	********	*******				
■ DOL				, NJ 07885											
☐ Emergency (inclu ☑ DOH justification)	laing		ne of Cont	mmarata		Telephone Number									
□ DCA □ Cancelation															
Concellation				FACILITY INFORM	AATIO	VI.									
Name of Facility Where Abatement is Taking Place (3)			TACIETT IN ORK		ATION Type of Facility (4)									
Marie V. Duffy Elementary School	1 -		12)												
Street Address															
137 East Central Avenue							er 8 (Other than								
City (5)						J Other (i.e.	private & Com	mercial buildings, h	nomes,	, etc.	.)				
Wharton, NJ 07885						uare Feet	# of Floors	Bldg. Age							
						5,000+	3	50+							
County (6)				ty Code (7)		rrent Use (Prior if b	eing demolished)								
Morris			(STAT	E USE ONLY)		hool									
Name of Monitoring Firm Hired by Building Owner (8) ASCM No.						Name of Abatement Contractor (9)									
Westchester Environmental, LLC				0027		nicorn Contra									
Street Address						Street Address									
307 North Walnut Street		32 Willow Way													
lity, State, Zip Code		City, State, Zip Code													
West Chester, PA 19380		Woodland Park, NJ 07424													
Project Manager fo Monitoring Firm Telephone No.						phone No.	143 07424	liana N							
Paul F. McCaa	894-4841	i de la companio	973-333-9176 License No.												
tart Date (10) Scheduled Completion Date (11)						Name of OSHA Monitor									
7/5/17 8/4/17					Envirovision Consultants, Inc.										
occupancy Status During Abatement (Check Only One)						Street Address									
▼ Facility Closed/Vacated During Entire	Period of Ab	pateme	nt			20-21 Wagaraw Rd., Bldg. 35-E									
☐ Abatement Performed Outside of Nor	rmal Facility	Hours					Ku., Blag. 35-6								
Other - Describe:					11000000	City, State, Zip Code Fair Lawn, NJ 07410									
ope of Work (Check All That Apply)					- Irali	Lawn, NJ 07	410								
≥3 sf or ≥3 lf		X	Renov	vation	ভো										
≥160 sf or ≥260 If			Demo		Full Containment with Negative Pressure										
			Dellio	iition	☐ Mini-Enclosure										
					☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure										
		is Locatio	n .	1		Non-Exempt	ed (*) and Non	-Friable Procedure							
Location of		Normall			0	scription of			Abatement Type						
Asbestos-Containing Material (ACM)	10000	ed Solely		Asbe		scription of aining Material (A)	Amount		1 1	pe					
TO BE ABATED	1 2000	aintenan stodial St				systems insulation		(Specity							
In Facility (13)	Cus	(12)	arre			cing, VAT, or	SF or LF)	æ		Enca					
	Yes	No	N/A	1	other n	niscellaneous)		Removal	Repair	Encapsulate					
terior Windows	163	X	I IV/A	Window Caulk				va	air	ate					
		^		window Caulk				448 LF	X						
ne of Registered Waste Hauler															
icorn Contracting Corp.	1		aste Haul	er ID No.	Cubic 1	Yards of Waste		Name of Regustered		10-14-00					
, State		00358	44		+			Fairless Hills Lar	ndfill						
oodland Park, New Jersey					1	al Date		City, State							
pleted by	T				TBD	T		Morrisville, PA							
no Golcev	Title	w.		Signature Date											
no doicev	l Mana	ager			11	1 1/	7/24/17								

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PAGE 02/03

Green # 9553

CIL# 9553	end of Hon Johns H Of Abbertob Honjac 8:60 an	ADATE d 12:12	19)	г.	***********	D	01	·			-	7				
Date of Notification (1)	Name of Building Owner/Operator (Z)								-	-		M. 7.7.7.7	***	7]		
7/27/17				ALFRED	ro						1					
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DOH (ustification)		-				-							_]			
STATE OF THE PARTY	98		FAC	LITY INFORMAT	CON CON	11 0		-						{		
Name of Facility Where Abelement is Telling	-	Type of Facility (4)														
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Street Address	4					Substrain Other file	Mar S A	Other th	on K-1	4	н	b	. 1			
Secretaria de la companya del la companya de la com		eventuring		egt.)	m. Busus	en Chi	neres C	en our	unga,	поли	PG.					
City (B)	•				Square Feet 1 of Fleers Bido Age									- Com		
COUNTY (6)	- Commission of					1820 E 188V E								F		
400		i i	COUMY	Code (7)		Current Uses (Pilor III boths demodel food) RESTANTIFIELD										
Name of Montiuring Firm Hired by Building O	Samer (A)		LASC		N-	-4.85	F-65 attended (DAL.		market and					
	arrest for	•	1	11 140.	A.M/	AC C	omiracii	no in	CL (III)	AU	G -	7	201	7		
Street Address			1	,	Street						-	-	-	-	Intellig	
					land Av	d Ave ASBESTOS GONTA										
City, State, Zip Code	Name and Address of the Owner, where					Op Code	\top		DES.	100	COO N	10	K.			
		******		,	erk, N.	K, NJ DIESZ LICENSING							ALL PROPERTY.			
Project Manager for Monitoring Firm			Telepho	ne No.		elephone No. Liberise										
Start Date (10)	Fa 7 2 2		-1-4-	<u> </u>	1)262-5841 00156											
7/27/17		26		Date (11)	of OSHA Monitor aga Environmental Services Inc.									9		
Occupancy Status During Abelement (Check	Control	<u> </u>	Street Address						ittelitet Seratoes tile:							
		280 Huyler St					set									
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