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Date of Notification (1)	6/13		Nan	ne of Bu	ulding Owner/Operator	(2) 1 Ti	= Dr	EDGING			_
Agencies Notified	Type Notification		Stre	el Addr	0 \$5		E 1 , -	2	J	n.	
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U 001	Amendment #_				LIO GRA	NDI	\leq , N , J	.08210	7	10	-
_ 000	Emergency (incl	uding .	=	ne of Co			Tel	ephone Number			4
□ DOH .	justification)		Nan	The or a	4 NEMINO	~ W/	14 10	And the last of th			L
□ ∞	Carcolator			_ Y						-,	
			F	ACILIT	INFORMATION		10				\dashv
	Taking	Dlace (1)					of Facility (4)				
Name of Facility Where	Abalement is Taxing	BCC (3)				O Sc	chool (K-12)	5			
1,59	IDENCE						porapler a (O	her than K-12) a & commercial b	uildings.		- }
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			C	ounty C	ode (7) (STATE	00	VACA	NT			
County (6)	may	2020000	10	ISE ONL		1	onimator (9)				
		AU GI	ASO	CM No.	Name of Abate	meni Co	TNC	, ,	B.	V	_
	m Hired by Building O			250.200							-
(8)	7/1				Sueet Address	- 1	SPRUCE	= Ave.			
Street Address	7				369	7.	7710000				=
†					Ciry, State, Zip	C∞e		NJ.O.	805 4	_	2
City, State, Zip Code					MA	PLIE	SHODE	1000			=-
CN), SER. OF				- No	Telephone No.	-		License No.	4.		
Project Manager for N	Jonitoring Firm	. \.\.1	elebu	one No.	856-7	7/9.	-0472	0044			=-
Project mensy		<u>:</u> `			LISTE OF OSH	A Moning	04	2 10			
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-1.1.		1261	1/3		Sveet Addre						
8/12/13	uring Abatement (Che	ck only on	e)		369	\tilde{c}	PILUCE	105			
Occupancy Status U	uring Abatomic Force Pe	nicod of Ab	atem	ent							
S Facility ClosedVa	scaled During Entire Pe	J Facility h	tours		City, State, Zi	p Code	CHARE	,.N.J.	0805	2	
Abatement Perfor	med Outside of Norma				_ M2	Pie	JANDE	11111			-
Other - Describe							ment with Neg	anve Pressure			
Scope of Work (Che	ck all that apply)				□ Full	Contain Enclosi	meur wiin nea				
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Name of Register	ed Waste Hauter			Hauler K	5		100			22	
KUEI	400 INC.			1/4	O'sposal ()ale	City, State	· .:= .	こころ		
	V-92340		c.	5	-		W.00	DBINE,			
Ciry State	SHADE, N	,5,0	80	12	Sign	alure	. 10		8/6/		
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Completed By	1/ .=	0	1	ER		A.					
JOSEPH	(LEMM_					\mathcal{O}_{-}	and activities				
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Date of Notification (1)	1.0	V.	Nam	e of Buildin	g Owned Operator	(2)	1.65	1			
8-6-13	•		N	· HG	RNANDEZ	<u> </u>			87.		
Agency Notited	Type Notification			Address BE	RGEN 5	TREET	5º (1/2)		4.4		
EPA DEP	■ Initial □ Amended		Ciby	State, Zip	Code ·		2		1	1	
PDOL	Amondment #	na	G	EN R	ock, NI	0745	Telephone Numi	101	7		
EDOH ·	justification) D. Cancellation	-			1AW 052		1		:	L	
BPCA					ORMATION	,					
Name of Facility Where	Abatement is Taking Pla	ice (3)				Type of Facility	(4)				
N. HERNAN				, ; ; , , , ,		☐ School (K-1	2) 8 (Other than [K-12)				
Street Address		(15°45)		,	: .	III Other (i.e. p	rivate & commorcial	buildir	gs,		
CON SERGER	STREET					Square Feet		Bidg.	_	_	٠.
GLEN Rock	· · ·					1825	2		1/R	S	
County (6)			Cos	mity Code (7 LY)) (STATE USE	Reside	nor if being demois				
BERGEN Name of Manifesing Fire	n Hined by Building Out	er I A	SCM No		Name of Abates	neat Contractor					
						emoval :	Inc				
Street Address					Street Address	River St	ŧ				
City, State, Zip Code					City, State, Zip C	Codo					
		1 9.7			Hacken Telephone No.	sack, N	J. 07601				
Project Manager for Me	HIDING ITHIN	ies	iphone N	0.	201-329-	7444 -	00388				
Start Date (10)	Scheduled C	ompletio	a Date (1	1)	Name of OSHA Omega En	Monitor	stal Inc				
8-16-13 Occupancy Status During			>	<u> </u>	Street Address	VILOUME	Ital Inc			-	_
	.•				280 Huy	ler St			05_08T		
© Facility Closed/Vacati © Abatement Performe	d Outside of Normal Fac	By Hous	11121A 3 .		City, State, Zip C	Code		760	ż		
Diction - Describe: Scope of Work (Check a			···				k, N.J. 0		0		-
@23sfgr23f	m ame affert)		⊕ F	tenovation	III Mini-	Englosage	Negative Pressure				
12≥160 af ar ≥ 260 lf	/3		0.0	emolition ·	@-Glow	shap Procedure Executed (*) as	d Nen-Friable Proce	eduro			į
ii.	· · · · · ·	Isl	ocation	T			·		Ab		ant
Locati	on of		countly Sciely is	.	Description (of			П	T	F
Ashestes-Contains TO BE A	g Material (ACM) RATIFO	· Main		Asbo	stes Containing Ma	atorial (ACM)	Amount (Specify		3	. 5	9
				· —	sprincing, VAT	, es	SF or LF)		Removal		Enclosure
l cas	,,,,	-	(12)		GERN HESPERAN)			2	18	8
43 cm 2 cm		Yes	No N		sempl 1050	(ATrad)	60	1F	Y	十	Н
BASEMENT			+	7146	PEGNIFE 1030	1-0911000		-		十	H
											Ц
Name of Registered We		NJD ID N	EP Wast e	e Hauler	Cubic Yards of Waste	Name of Regi	2.50				Antonia
Best Remova	II Inc		109		1/2 40	1	Enterpri	ses			\dashv
Cay, Same Hacker	sack, N.J.	0760	1		8-17-13	Waynes!	burg , Oh				
Completed by	Completed by Title Signature 0										
R. VELDRAL	, ESCIE	GLUI			K NOVEN	wi -		0		_	

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B-6-13 Name of Building Country Countr										
Agency Notified Type Notification	Street Address	ST FORES	TPING	F (7)	,					
DEPA Control DAmended	63. C-4. S-	Anda		7.2	2		97			
Amondments Grant Special Spec	ROC.	FUE PO	HEK, N	Telephone Music	iber					
GPDOH : justification) Up DCA Up Connectiation	す、Sc						· 			
	FACILITY III	POTENATION	,							
Name of Facility Where Abstracts is Taking Place (3)	, ,		Type of Facility		12					
J. SCARPA	·· * · · ·	:	2 School (K-12 2 Subchapter	5 (Other than K-12 bate & common) . d badding					
28 EAST FOREST PLACE			faccous, etc.)	\$ of Floors	Eldg. A					
CONST.			Square Feet	2	72		•			
ROCHELLE PARK	County Code (7) (STATE USE	Current Use (P	per if being demail	1 -					
Bergen	CHILY) .		RESIDE							
Name of Monthsing From Hired by Building Owner ASS	CM No.		enoval I	\$3						
Sijust Address		Street Address	•							
(1) 11 (Cary, Same, Zo Codo		Chr. Shite. Zip (River St							
		Hacken	sack, N.	J. 07601						
Project Manager for Maniholog Film Telepi	home No	Telephone No. 201-329-	7444 .	Usuase No. 00388						
Start Date (19) Scheduled Completion		Moreo of OSHA	Monitor							
8-15-13 8-16-13 Occasion States During Administration (Check only one)	· · · · · · · · · · · · · · · · · · ·	Omega 51	vironmen	tal inc						
- C: Pacify Closed/Vacated During Entire Period of Abatem	ment .	280 Huy	ler St							
Abstract Performed Cutaids of Normal Facility Hours Char-Describe: & Am 5 PM	•	City, State, Zip (ookan ea c	k, N.J. (7606					
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	* · · ·	2 Non-	Encupted (*) and	Non-Pinklo Pres		Ale de	anout			
Is Lec		Danielia .	_		F	7	<u> </u>			
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		series, VA1	'et_'	Seath)	AGM	100				
(C)		Carrier Busseculine			=		중중			
BASEMENT		ROMAL INSC	Chertal	35	LFX					
71.56.113						П	\Box			
		· ·			\dashv	H	+			
	Waste Houler	Cubic Yards of	Name of Regis	ared Land						
Best Removal Inc 171		1/2 40	Minerva	Enterpri	ises					
City, State		Disposal Date	Waynesh	urg , Oh						
Hackensack, N.J. 07601		8-16-13	ــــــــــــــــــــــــــــــــــــــ		Date		-			
R. VELDRAN Estimator		R. Valdr	an		8-6-	13				

NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 2:00 and 12:120) 4592

8-6-13	141 •		T			NNEDY	(2)	2 ,	V,				
Agency Nother 7	po Natification	·	\dashv	Shoot	Addanas	MSEY TE	mark			1 42.	ç		
	initial LAmendad		ŀ	Cay.S	teda Zin i	Code .			ed j		-7		
S DEP	Amondment# Energency (nebd	lina		FA	HRL	AWN, N	J 0	74/0 Telephone Man	nber		-		
E DOH .	jgs(lication) Cancellation			Name	DOU	GAW							
				FAC		CRMATION	,						
Name of Facility Where Ale		ace (3)	6 2 17		, ,·		Type of Fedil						
T KENNEDY		•		. *		:	T Codeshards	& (Citor than K-1) pilote & comment	() of build	Ings.,			
	Y TERRAC	<u>e</u>					Square Feet	:)		. Age	,		
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BERGEN			· despendent between	Count	y Code (7) (STATE USE	RESIL		ishod) ·	.:			
Name of Monitolog Flow H	ned by Building Out	*	ASC	Mo.	·	1	contractor						
Street Address						Street Address	Removal						
City, State, 2p Code						450 S.	River S	t		_		_	
Cay. Cas. 29 Cas.						Hacken	sack, N	.J. 07601					
Project Manager for Manager	Phylipset Minanger for Manifeding Film Telephone No. Telephone No. 201–329–7444 - 00388												
8-20-13	8-21	-/		(11)		Name of OSHA	Medier Vironne	ntal Inc					
Occupancy Status During A	bahasat (Chock or					Street Address							
G Facility Chand Messed C G Ababasant Performs Co	lucing Entire Period	of Abou	ement			280 Huy							
Con-Deside: 8A	m 5pm	any sac		· . ·		South H	ackensa	ck, N.J.	0760	6			
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BASEMENT				^	TITEA	more ins	OFBIION	100	61	H	Ť	H	
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Best Removal		DI				1'/4 YO		Enterpri	ises				
Cay, Shale	ck, N.J.	0760	01			Disposal Date	Cay. San Waynesi	ourg , Oh					
Completed by	Title					0-01-13			8-0		?	\dashv	
RVELDRAN	Estim	ato	<u> </u>			R Velena	n		0-6	0-1	2		

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Date of Notification (1)		ing Owner/Operator (2)	. 9 ,
8-6-13 Agency Notlind Type Motification	Street Address	OCDSTEIN)	- * V * * W.
	613	WINTHROP ROI	40
D DEP D Amended	Cay, State, Zi		
☐ Emasjancy (inclu	ding EHWEC	CK, NJ 076	Telephone Museum
D DCA justification)		DLOSTEIN	
		FORMATION .	
Name of Facility Where Abstract is Taking P	lace (3) ·	Type of Faci	7(9
M. GOLDSTEIN.		□ School (K	ne St. (Pitthere them Ku19)
613 WINTHROP R	oAD	Ciber (i.e. feetes, o	private & commercial buildings, (c.)
Cay (5)		Square Feet	# of Floors Bidg. Ago
TEANECK	1 August August	2200	2 78.4125 (Prior 8 being described)
BERGEN	ONLY)	RESI	DEIXE
Mains of Manifoling Firm Hand by Stalking Out (6)	ner ASCM No.	Name of Abalament Contracts	
Street Address		Best Removal	ine
2.37		450 S.River S	t
Cay, State, Zp Code		Hackensack, N	1 07601
Project Manager for Monitoring Firm	Telephone No.	Telephone No.	Linema No.
		201-329-7444	- 00388
	Completion Date (11) 7 - 13	Name of OSHA Mealor Omega Environme	ntal Inc
Occupancy Status During Abahament (Check or	nly one)	Street Address	
G Pacifity Closed/Vacated During Entire Paried G Abatement Parlemmed Guiside of Normal Pac	of Abatement	280 Huyler St	
B Other - Describe: 8 Am 5 PM	allly flours .	Cay, Sante, Zo Code South, Hackensa	ab W T 07606
Scope of Week (Check all fint apply)			
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GE HUWEZANE ,	Q Demonson	Clavebys Procedur 2 Non-Economical (*) o	nd Man-Rizble Procedure
	Is Location		Abatement
Location of Asherin Control (ACM)	Used Solely by	Description of	-
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(13)	. (12)	other miscellaneous)	2 2 2 1
	Yes No NIA		
KITCHEN	X THE	PEMPL INSULATION	10 LF X
· .			
		•	
Name of Registered Waste Heater	I NJDEP Waste Haster	. Cable Yards of Name of Rea	ishmed Land
Best Removal Inc	17109	Whate	a Enterprises
City, State	07601	Disposal Date Chy, State	burg , Oh
Hackensack, N.J.	0/001	011-	
R. VELDRAN Estim	ator	RVeldran	8-6-13

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Date of Madication (1)		TAS RIDGELOCOD U.C.											
8-6-13 Agency Hellad Typo NetBadisa		Chan	Address			v) n	4		***	4			
DEPA Shilbi					RIVEN				-				
S DEP SAmended Amendment#	ina	U	·SAGDL	5 RN 5	e, NJ	07458			7.5				
B DOH · · justification)			ef Central ·			(GEBRUS WEIGH				_			
BBCX		1	LITY INFOR	MOTEN	,								
Union of Facility Wilnes Abstract in Taking Fi	(3)		•		Type of Facility								
JAS RIDGEWOOD. LL	<u> </u>				2 School (K-1 2 Schoologha	2) 8 (Citar tina K-12) nich & commen							
125 LEWOX AUG	FUUC	_	- T	• *	homes, etc)							
COVE					Square Foot	Set Floors .	41	.ago 5 Yi	25	٠.			
RIDGE WOOD		. Com	by Codo (?) (S	TATE USE	2100	Pater If being december		70					
BERGEN		CHIL	Ď.	:	RESIG	ENCE	•						
Rame of Manholing Firm Hand by Saliding Out	er AS	CM No.	26		enoval								
Stinet Address			S	met.Address	•								
Cibr, States, Zip Code		•		450 S.	River St	<u>: </u>				_			
		•		Hacken	sack, N.	J. 07601							
Project Manager for Manhaing Film	Telej	dens No		isphene No.)1–329–		00388							
	empletion	Date (11)	1 00	THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRE	Manillar				-				
8-19-13 8-2		3		ega Kil estAddress	vironmen	TEST INC	·		-	_			
Ca Paintly Closed Macainel During States Period	200	ent	.2	280 Huy									
Charles Patent Out of Name Par	Hours			y, State, Zp C		k, N.J. 0	760	6					
Schoo of West (Check all that apply)						Mogatho Pressure				\neg			
@23de25F @2100de220F			nonation notion	CO Allinois	Enclosum	d Nan-Richle Posco	•			in the second			
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and the state of t	Yes N	b MA		`		1		1	8				
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	+	+	-				\dashv	+	H	H			
Home of Registered Waste Hauter	NUDE ID No.	P Waste I	facility Cul	ait Yards of	Name of Regit					7			
Best Removal Inc	171		3/	4 40		Enterpri	ses		-				
Hackensack, N.J.	07601		8	-20-13	Waynesh	urg , Oh							
Completed by 18th	implicated by Title Signature Date 12												
R. VELDRAN Estim	ator		IR	·Veldr	an		8-6	-13	_				

ORIGINAL CHECK # 0220 NEW WORK! NEW CHECK # 0224

Date of Notification (1)			- 1		Building Ov			(2)			Žia.				
8-5-2013					evelopm	ent Gr	oup				70				
Agencies Notified	Type Notification			reet Add 28 W. 3	iress 86th Stre	et, Su	ite 80	0	Ç	<	. 4	<i>3</i> :			
EPA DEP	Initial Amended		1000		e, Zip Code			ñi.		4		;			
▼ DOL	Amendment #		. 1	Vew Yo	ork, NY	10018							f 		
™ DOH	Emergency (in justification)	naduling	1	ame of (į.				Tele	phone Num	ber			
DOH DCA	Cancellation		F	Robert											_
	at Table	Diago (2)		FACIL	ITY INFO	RMATIC	N	Type of	Facility (4	3				1	-
Name of Facility Where Building # 16	Abatement is Taking	Place (3)						1/450300000000000000000000000000000000000		92 101					
Street Address		****				- 1		T St	thool (K-12 ubchapter	8 (Othe	r than K-12)			
29 Mantoloking Ro	nad							Of		rivate 8	commercia	l buildi	ngs,	nome	s,
City (5)				_				Square		# of	Floors	Ble	ig. A	ge	\neg
Mantoloking, NJ 0	8738						1								
County (6)				ounty C				Current	Use (Prio	r if beir	ng demolish	ed)			
Ocean			(3	STATE U	SE ONLY)		-								
Name of Monitoring Firm	n Hired by Building C	Owner (8)		ASCM	No.				ment Con						
n/a				n/a			Lozr	nica Ma	nageme	ent Co	rporation				
Street Address				***************************************				Address							
n/a								roy La							
City, State, Zip Code	ing press and a manufacture of the control of the c							tate, Zip	rk, NJ 07	7025					
n/a								one No.		033	License No			_	
Project Manager for Mo		1	elephon n/a	e No.			706-79			01193					
27/37/	n/a								A Monitor						
Start Date (10) 8-5-2013	İ	Scheduled 8-16-20		piedon D	ale (11)					ent Co	rporation				
Occupancy Status Durin	ng Abatement (Chec							Address							
	cated During Entire F			ent		1	22 T	roy La	ne						
Facility Closed/Vac Abatement Perform	ned Outside of Nom	al Facility h	lours	JIII.			City, S	state, Zip	Code						
Other – Describe:					-Ancie	-	Linc	oln Pa	rk, NJ 07	7035	230-24				
Scope of Work (Check	All That Apply)						_	_							
23 sf or ≥3 lf			novat				F				Negative P	ressur	е		
≥160 sf or ≥260 lf		X De	moliti	on			E	Glov	-Enclosure rebag Prod	edure					
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		ls L	ocatio	on										ement pe	
Location	on of		Solel				scription					-			
Asbestos-Containin TO BE A	g Material (ACM)		itenan					Material is insulat		-	mount Specify	20	70	Enca	<u>n</u>
In Fac		Custo	dial S (12)	taff?	(surfac	cing, V/	AT, or	12850	SI	or LF)	Remova	Repair	Encapsulate	Enclosure
(13	3)		(,_,			otner n	nisceila	neous)				<u>a</u>	=	late	Гe
		Yes	No	N/A								-			
Ro	of			-X	Ro	ofing,	Flashi	ing & T	ar	3,0	000 SF	X			
Wind	ows			×		Wind	ow Gl	azing		(1)	Vindows	X	_	_	-
*New Work	c: Exterior		177 O.S.	X		18 inc	h Flue	e Pipe		:	35 LF	X	_	_	
Name of Registered W	100	JDEP Wauler ID		Cubic of Wa	Yards ste		St.	encorpose.	ered Landfil						
Loznica Management Corporation				03313		TBD			GROV		natili				
City, State							sal Dat	е	City, Sta		PA 19067				
Lincoln Park, NJ 07035				2		TBD			WOTTS	ville,		ate	-		
Completed by		Title					Signatu	/ \	50	^		3-5-20	13		
E. Cirovic		Secre	нагу				<u> </u>	W	JOU	~					

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



Date of Notification (1)		5	ne of Building				· · Alle				
08/01/15			HTTHE	M C	LINE						_
Agencies Notified Type Notification			et Address		. ~	1		9/1/2			
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DOL Amendmen		- Pion	LOOM I	NGL) ALE,	NJ 01	Telephone Num	ber			
Ď DOH justification		1			INIE		. Cooperation		-0.07		
□ DCA □ Cancellation		1941 F	ATTHEW ACILITY INF	ORMAT	ION				-		-
Name of Facility Where Abatement is Takin	ng Place (3)	•	MOILT IN		Ту	pe of Facility (4)				
RESIDENTIAL PROPERTY						School (K-12					
Street Address					}d □	Subchapter i	8 (Other than K-12) rivate & commercia) I build	inas	home	S
17 SOPHIA ST.						etc.)					7.
City (5)						quare Feet	# of Floors	-1	dg. A		
BLOOMINGDALE		7.455				200	2		50	1	
County (6)			inty Code (7)		1		or if being demolishe	ed)			
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Name of Monitoring Firm Hired by Building	Owner (8)	A	SCM No.		1	Abatement Con					
NIA							ices inc	•			
Street Address					Street Add		AIR				
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City, State, Zip Code							117 070	< 7			
. Manifestor Firm		I Tol	ephone No.	.v	Telephone	e No.	License No).			
Project Manager for Monitoring Firm		1.61	ерпопе 140.			06-7341					
Start Date (10)	Scheduled	Comple	etion Date (11	1)		OSHA Monitor	1000				
08/10/13	08113			5 4 ())	LESL	AU NAL	PILCO				
Occupancy Status During Abatement (Che					Street Ad	dress			3-1-1		
★ Facility Closed/Vacated During Entire			t		156 M	A PLE A	fuE ·				
□ Abatement Performed Outside of Nor	mal Facility F	lours									
☐ Other – Describe:					WALL	INGTON	Ny 0105	57			
Scope of Work (Check All That Apply)	8										
Ž ≥3 sf or ≥3 lf		novation				Full Containme Mini-Enclosure	ent with Negative P	ressu	re		
□ ≥160 sf or ≥260 lf	□ De	molition			×	Glovebag Prod	edure				
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	ls L	ocation							Abate Tv	ement pe	
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TO BE ABATED In Facility	100	dıal Stal (12)	ff? "	surf	facing, VAT,	or	SF or LF)	Removal	Repair	aps	Enclosure
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	Vancous Company							1			
	***************************************	1	ED Me-t-	LOUE	is Vords	Nome of	Registered Landfill	-			
Name of Registered Waste Hauler			EP Waste ler ID No.		ic Yards /aste						
NEWARK CARTING INC.		409	one on the contract of the con	(r.0, w.s					
City, State	City, State				osal Date	City, Stat					
NEWARK, NY.			08	113113	HOR	MISVILLE,	PA				
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LESLAW NALODILA	SID	EIUT	***************************************		Northel	_ 0	130	011	13		

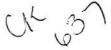
State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-13 Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ August 6, 2013 Agencies Notified Notification Type **ENVIRONMENTAL HEALTH & SAFETY DEPT.** ☑ Initial Notification ☐ EPA 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS DCA ☐ Amended Notification City, State, Zip Code X DOL ■ Emergency (including PISCATAWAY, NJ 08854 ▼ DEP- No Longer REQUIRED justification) Telephone Number Name of Contact X DOH □ Cancelled MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) ROTC, BLDG# 3072 Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **COLLEGE AVENUE CAMPUS** # of Floors: 3 Bldg. Age: 80+ years Sq. Feet: N/A County (6) County Code (7) City (5) (State Use Only) Current Use (prior if being demolished): ACADEMIC **NEW BRUNSWICK MIDDLESEX** Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Contractor (9) ASCM No. 0098 Cardno ATC GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City, State, Zip Code City State, ZipCode BUTLER, NJ 07405 BURLINGTON, NJ 08016 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number 609-386-8800 **BRIAN KEARNY** 00840 973-492-0477 Scheduled Completion Date (11) Name of OSHA Monitor Scheduled Start Date (10) 08/16/13 08/19/13 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ⊠Other - Describe: Shift Hours: 5:00 PM - 5:00 AM FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure Mini-Enclosure □ Renovation ≥ 3 sf or ≥ 3 lf Glovebag Procedure > 160 sf or > 260 Demolition Non-Exempted (*) and Non-Friable Procedure Abatement Type Amount Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used (Specify SF (ACM) (i.e. thermal systems insulation, surfacing, Material (ACM) in Facility (13) Solely by Maint./Custodial Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) NO NA YES X Rooms 100, 105, 001, 003 860SF X VAT 9 LF X Room 004 X TSI 15 CY Name of Registered Landfill Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Cubic Yards of Waste: G.R.O.W.S. North Landfill See Below See Hauler Below #1 & 2 City, State Disposal Date Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 100 New Ford Mill 08/19/13 NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Horizon Disposal Services, Inc., Trenton, NJ 08611 19067 NJ DEP# 22612 215-736-1700 Date Completed by (Print or Type) SENIOR PROJECT Raymand C. Pedalino August 6, 2013 RAYMOND C. PEDALINO MANAGER

Date of Notification (1) 8/06/2013 Check			Building Ow en Cathol			(2)		6',	S			10-3-14 X				
Agencies Notified	Type Notification		1 -	treet Ad 555 7th	dress n Street				44	s a_s	10	10: 5	,			
EPA DEP DOL	Initial Amended Amendment #		1000		e, Zip Code en, NJ 07				3.0	**,						
DOH DCA	Emergency (in justification) Cancellation	ncluding		lame of Ron Ze	Contact				1	Tele	ephone N	umber	,	24		
				FACIL	ITY INFOR	MATI	ON	-								
Name of Facility Where A Hoboken Catholic S		Place (3)						× s	of Facility (4) School (K-12))						
Street Address 555 7th Street									Subchapter 8 Other (i.e. pri etc.)				ildin	gs, h	ome	s,
City (5) Hoboken, NJ 07030)							Squar 20,00		# of 2	Floors		Bldg 60-	g. Ag F	е	
County (6) HUDSON				County C	code (7) ISE ONLY)			Currer	nt Use (Prior ool	if bei	ng demol	ished)				
Name of Monitoring Firm	Hired by Building C	wner (8)		ASCM	No.				ement Contr es Corpora		(9)					
Street Address								Addres 69th S		DX 15.5						
City, State, Zip Code								State, Zi enberg	p Code g, NJ 0709	93						
Project Manager for Mor	Project Manager for Monitoring Firm						Telepl	none No 295-1).		License 01074					
Start Date (10) 8/7/2013	Scheduled 8/8/13	Com	pletion [Date (11)			of OSH	A Monitor				1				
Occupancy Status Durin	a Abatement (Check						Street	Addres	SS						8.	
Facility Closed/Vac	ated During Entire F	eriod of Ab	atem	ent			City, S	State, Zi	p Code							
Scope of Work (Check A	100															_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		0 1000	novat noliti				>	Mir Glo	I Containment ni-Enclosure nvebag Procented	edure					a	
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First Floor	Corridor	163	x	1477			Plaste	r			6 SF	x	1			
Name of Registered Wa	7/070	JDEP W	000000		c Yards		Name of F	Regist	ered Land	dfill			20			
Freehold Carting	37,28	auler ID 5939	000000	of Wa			Waste N		gement	t 						
City, State PO Box 5010						tbd	osal Date		City, State Tullytow		ndfill					
Completed by Gina Salvador Title Office				nager			Signatur	Ch.	uas	-		Date 8/6/2	01:	3		

		(Pı	ırsuant	to NJAC	3:60 and	1 12:120)			2010				
Date of Notification (1) 08/06/13 CK#2764 \$200				Building (Brunswi				d of Educ			(K)	~ ()		
Agencies Notified Type Notification			Street A	ddress Id Georg	ies Ro	ad	V-112				7			? ? :
EPA Initial Amended		-	City, Sta	ite, Zip Co	de					4.	X.,			- 7
DOL Amendment Emergency (Brunswi f Contact	ck, Ne	w Jers	ey 08	3902	Telephon	e Nun	her	77.	(· ·	7
区A justification) □ Cancellation				n J. O'C	onnor				Теюрие	io i vali				
Name of Facility Where Abatement is Taking	Place (3	3)	FACI	LITY INFO	RMATI	ON	Type	of Facility ((4)					
John Adams School								School (K-1						
Street Address 1450 Redmond Street									8 (Other tha orivate & com			dings,	home	es,
City (5) North Brunswick, New Jersey 0890)2						20,0		# of Floor		5	ldg. A 5+	ge	
County (6) Middlesex	13			Code (7) USE ONLY		Vi.	Curre		or if being de	molish	ed)			
Name of Monitoring Firm Hired by Building (Briggs Associates	Owner (8)		ASCN	/I No.				atement Cor poration	ntractor (9)					
Street Address 3 Crosswicks Street						Street 606 I		ess ride Avent	ue					
City, State, Zip Code Bordentown, New Jersey 08505							Zip Code d Park, Ne	ew Jersey	0742	4				
Project Manager for Monitoring Firm Michael Hoodak		Telepho 609-29	ne No. 98-5520		Teleph 973-2			Lice 011	nse N	0.				
Start Date (10) 08/22/13	Schedul 08/25/		pletion	Date (11)		Name	of OS	HA Monitor	Labs				-	
Occupancy Status During Abatement (Chec		1050				Street	Addre	ess	200000000000000000000000000000000000000					
Facility Closed/Vacated During Entire R Abatement Performed Outside of Norm Other – Describe: Thurs 3:30PM-11PN	al Facility	/ Hours		7AM 3DN		City, S	tate, Z	te 22 We Zip Code						
Scope of Work (Check All That Apply)	, i naoat	/AIVI-1	ir wi,our	17AIVI-OI IV	<u></u>	Unio	n, Ne	ew Jersey	07083					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit				×	Mi Gl	ini-Enclosur ovebag Pro					e	
	Is	Locati	on					-				Abate	ement	
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Ashes		scription		al (ACM)	Amoun	ıt	-	',		
TO BE ABATED In Facility (13)		todial ((12)			thermal surfa	systems cing, VA niscellar	s insul T, or	lation,	(Specif SF or LI	y	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A				- September						e	
Boiler Room	X					Insula			100 SI		X			
Boiler Room	X		-		Fitting	g Insula	ation		10 Eac	n	Х			
Name of Registered Waste Hauler	1	JDEP W			Yards		Name of	Registered L	andfill					
Lilich Corporation	1000	auler ID 3724	No.	of Wa 2	ste		G.R.O.	W.S Landf	fill					
City, State Woodland Park, New Jersey				Dispo: 08/27	sal Date 7/13		City, Stat Morrisv	te ville, Penns	sylvar	nia				
Completed by Tatiana Kalenikova	Presi	dent		5	Signature	11	un lle	lileon	Da 08	te /06/1	13			

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



Jr 3	NO	TIFICA (Purs	TION OF	of New Jer ASBESTO NJAC 8:60	rsey OS ABATER and 12:120	MENT		313/1	,		٠, ٠.	ili Storage
		Na	me of Bu	ııldına Own	er/Operator	(2)						
Date of Notification (1)					ASSO		RP 0	F NT	ن	1		
O 8 O 2 13			eet Addr		100			75		194	10.	
		1	00	MANH	ATTAN	AVE	20 10	*4G/23				
EPA Initial Amended				Zip Code		7,00		×,	-			1
DEP Amended Amendment#_		5			Y N.	7				G T	17	
☐ Emergency (inc	luding		me of C			J		Telephone Number	er_		- 14	-
B DOH justification) □ DCA □ Cancellation		F	RANK	ALE	550					-		
u bea 2 saisting				Y INFORM		,	= 32 (1)					\dashv
Name of Facility Where Abatement is Taking F	lace (3)					Type of	Facility (4)					
COMMERCIAL PROPERT						□ Sc	hoo! (K-12)	(Other than K 12)				
Street Address						15L Ot	benapter 8 her (i.e. pri	(Other than K-12) vate & commercial	buildir	ngs, h	omes	
1153 FARM RD.						eto	:.)					
City (5)						Square		# of Floors	1	ig. Ag		
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County (6)			ounty Co			1		if being demolished				
HUDSON		(S	TATEUS	EONLY) _		CON	MER	CIAL PRO	PE	rty		
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCM I	No.			ment Contr					
NIA					100000000000000000000000000000000000000			ES INC.				
Street Address					200000000000000000000000000000000000000	et Address						
							DLE A	VE.		112		
City, State, Zip Code						State, Zip				2		
Oity, Citato, E.P.					WA	ALLIN	16 TO A	License No.	25,		-	-
Project Manager for Monitoring Firm		T	elephone	No.		phone No.		1				
		i					- 7341	01107				_
Start Date (10)	Schedule	d Com	oletion D	ate (11)	4 (000000000	e of OSH						
08119113	0310		13					CODILA				
Occupancy Status During Abatement (Check	Only On	e)			10 TO TO THE REAL PROPERTY.	et Address						
M Levilly Closed Vacated During Entire Pe	enod of A	bateme	ent		15	State, Zip	APLE	AVE.				
Abatement Performed Outside of Norma Other – Describe:	l Facility	Hours						NJ. 070	57.			
Scope of Work (Check All That Apply)	_											
	□ R	enovat	เกก			□ Full	Containme	ent with Negative Pr	essur	e		
☐ ≥3 sfor ≥3 lf ☑ ≥160 sfor ≥260 lf		emoliti					-Enclosure					
2 2100 31 01 2200 11	/					Glov	vebag Proc -Exempted	(*) and Non-Friable	e Prod	cedur	9	
	1					/				Abate	ment	
		Location Normall			m					Ty	pe	
Location of	Use	d Solel	y by	Asbesto	Descripti s Containing	Material	(ACM)	Amount			ᄪ	Е
Asbestos-Containing Material (ACM) TO BE ABATED		intenar todial S		(i e: th	nermal syste	ems insula	tion,	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
In Facility	Cus	(12)	lant		surfacing, \ other miscel		Ī	SI OI LI /	3401	pair	sub	Sur
(13)	-						Love Malare		=		ate	0
	Yes	No	N/A							-	-	
FLAT ROOF MATERIAL			*	Lo	OFINE	MATE	MIAL	180005	74	-		_
			*	E	oor t	ILES	,	49'0 SF.	+			
MEZZANINE	1				PE. IN			680 LF.	+			
THROUGHOUT			*	FI	F C. 110	J 0 - /-		001-11	1			
		IN	JDEP W	aste	Cubic Yard	\$	Name of	Registered Landfill	1			
Name of Registered Waste Hauler		H	lauler ID	No.	of Waste	mer S						
NEWARK CARTING INC.		10	7540	5	60			o.W.S				
City, State		-			Disposal Di		City, Stat		_			
NEWARIL, NJ.					090		140	MULSVILL	E,	PA		
Completed by	Title				Signa	ture	.11				,	0
LESLAU NALODILA	P	LE S	IDE	IUT		4	NM		18/	02	11	2

40 mile



08/06/13				Name o Readi	f Building (ngton To	Owner/O ownshi	Operator (ip Public	2) C Schools	(0)		~ 'y	A	00	
Agencles Notified EPA	Type Notification			Street A	ddress 30x 807					FLY;		1	45,	·
X DOL	Amended Amendment		_	City, Sta Whitel	ate, Zip Co house St	de tation,	New Je	ersey 08887	7		44	9	4	
DOH DCA	Emergency (justification) Cancellation	including			f Contact horton				Te	ephone N	umber			
Name of Facility Miles				FAC	ILITY INFO	RMAT						-	-	
Name of Facility Where A Three Bridges Scho	.batement is Taking	g Place (3	3)					Type of Facility	(4)					
Street Address 480 Main Street						************		School (K- Subchapte Other (i.e. etc.)	8 (Oth			dings	, hom	es,
City (5) Three Bridges, New	Jersey 08887				~			Square Feet 20,000	# 0	f Floors		3ldg. /		
County (6) Hunterdon	× × × × × × × × × × × × × × × × × × ×				Code (7) USE ONLY)			Current Use (Pri School	or if be	ing demoli	shed)			
Name of Monitoring Firm T&M Associates	Hired by Building (Owner (8)		ASC	M No.		Name of Lilich	of Abatement Co Corporation	ntractor	(9)				
Street Address 11 Tindall Road		**********		-	~		Street A	Address AcBride Aveni	ne					
City, State, Zip Code Middleton, New Jers	ey 07748						City, St.	ate, Zip Code lland Park, Ne	w Jei	sev 074	.24			
Project Manager for Monli Kevin Burns							Telepho			License 01104				
Start Date (10) 08/12/13	ed Cor	npletion	Date (11)		Name o	of OSHA Monitor Invironmenta								
Occupancy Status During	Abatement (Chec	k Only Or	10)				Street A		Labs	,				
	ted During Entire F	erlod of	Abaten	nent				Route 22 We	st					
Other – Describe:	d Outside of Norm	al Facility	/ Hours	3				ate, Zip Code I, New Jersey	0708	3				
Scope of Work (Check All	That Apply)													
≥3 sf, or ≥3 if ≥160 sf or ≥260 if	* 1		Renova Demolii				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				·e	
		Is	Locat	ion					4 / / 411	<u> </u>	10.0110		emen	
Location	of		Vormal			De	scription	of I				T	ре	
Asbestos-Containing I <u>TO BE ABA</u> In Facilit (13)	TED	Ma	d Sole intena todial 8 (12)	nce/	Asbest (l.e.	os Con thermal surfa	taining Ma	aterial (ACM) Insulation, , or	(5	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							=		ate	œ'
Boiler Ro	om	X			WhiteN	latrixB	BlockBoi	lerFlueInsul	30	00 SF	х			
Boiler Ro	om	X						oilerHeader		4 LF	Х			
				-		AssocWith								
V				usGla	ssPipeli	nsulation	3							
Name of Registered Wast Lilich Corporation	H	JDEP W lauler ID 8724		Cubic of Wa 10	Yards ste	Name of G.R.O.		ered Landi andfill	ill '					
City, State Noodland Park, New	Jersey						sal Date	City, Stat	е	ennsylva	onle			
Completed by Fatiana Kalenikova	Presi	dent		5	Signature				ania ate 8/0					
	. 100	GOIIL		1	ales	no. Kol	a lilia	وحدا 0	8/06	5/1	3	1		

Date of Notification (1) 07/29/13 CK#275	7 \$200	SANS	0.00		of Building lington T				ols	Q. ,		9	5.5			
Agencies Notified	Type Notification			Street	Address Box 807					4	۷.,			3.5,		
EPA DEP DOL	Amended Amendment	#		City, St White	tate, Zip Ce house S	ode Station	New J	lersey 08	 3887		3 - 1	10.1	1			
DOH DCA	Emergency justification) Cancellation	3			of Contact Thorton					Tel	ephone	Numb	er	1		
Name of Facility Where	Abatement is Takin	a Place (21	FAC	ILITY INF	ORMAT	ION							•		
Three Bridges Sch	ool	y Flace (٥)					Type of		8)	66.5					
Street Address 480 Main Street								Sub Oth	nool (K-1 ochapter er (i.e. p	8 (Oth	er than & comm	K-12) ercial	buil	dings	, hom	ies,
City (5) Three Bridges, Nev	v Jersey 08887	ll l						Square F 20,000	eet	# of	f Floors			3ldg. /		10000000
County (6) Hunterdon					Code (7) USE ONLY	,		Current I School	Jse (Prid	or if bei	ng dem	olishe	d)			
Name of Monitoring Firm T&M Associates	Hired by Building	Owner (8	1	ASC	M No.		Name Lilich	of Abatem Corpor	nent Con ation	tractor	(9)		+ 56W.			
Street Address 11 Tindall Road		-					Street	Address McBride		ie.						
City, State, Zip Code Middleton, New Jer	sey 07748		-				City, S	tate, Zip C dland Pa	ode		sev 07	7424				
Project Manager for Mon Kevin Burns	itoring Firm			Telepho	one No. 47.4396		Teleph	none No. 225-840		11 001	Licens 01104	e No.				
Start Date (10) 08/12/13		Schedul 08/15/	ed Cor		Date (11)		Name	of OSHA I	Monitor	Labo						
Occupancy Status Durin	g Abatement (Chec							Address	Tieritai	Labs,	LLC		_			
Facility Closed/Vac	ated During Entire F	Period of	Δhater	nent			2333	Route 2		t		Year September 1				
Scope of Work (Check A	AM-11PM	iai racility	Hour	S		_		tate, Zip C n, New c		07083	3					
≥3 sf or ≥3 if ≥160 sf or ≥260 if	п тпат Арргу)	Division man	Renova				×	Mini-Ei Gloveb	entainme nclosure pag Proc exempted	edure					P	
	65		Locat	(TI)			22,019-20			1./				Abate	ement	t
Location Asbestos-Containing	of Material (ACM)		Vorma d Sole			De	scription	of				-		Ту	pe	_
TO BE ABA In Facili (13)	ATED	Cus	intena todial ((12)	Staff?	(i.e.	thermal surfa	systems cing, VA niscellan	laterial (AC insulation T, or eous)	OM)	(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
Boiler Ro	nom	Yes	No	N/A	\A/hitaA	fotols D	la el Del					_	_		Ф	
Boiler Ro		X	_	-				ilerFluel			0 SF	X				
		^		-				oilerHean AssocV		4	LF	X				
		-		-								-	_			
Name of Registered Was	te Hauler		TN	JDEP W		Cubic		nsulatio	me of R	n minte		1611				\Box
Lilich Corporation			H	auler ID 3724		of Was			.R.O.W			21111				
City, State Woodland Park, New	Jersey					Dispos 08/19	al Date /13		ty, State orrisvil	le, Pe	nnsylv	/ania		i		\neg
Completed by Tatiana Kalenikova		Title Vice I	Presid	dent		1.0.6	ignature	70.5	Kal	1		Date 07/2	9/1	3		

MO#21208157234

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

				(P	ursua	nt to NJ	AC 8	8:60	and 5:1	6)	L					
Date of Notification (1)	*******				Nam	e of Buildir	ng Ov	wner/(Operator (2)					-	
	06	13			Roh	Chivertor	,		2	7/3 _{///2}						
Agencies Notified	Type Notific	ation	-			et Address	1			-9////	7			- 77		
☐ EPA	✓ Initial				332	West End	Pos	h	Y	-	10/11/10: 2.					
□ DOLWD	Amended				-	State, Zip				et la	· /					
☑ DHSS	Amendm	_		9	25 8781				0	4 1.70 pt -						
DCA (NJAC 5:23-8)	Emergen justificati		cluding	3		h Orange, e of Conta		0/0/	9	£ 1.702/11	Arrest High					
(110/10/03/20-0)	Cancella	100									Telephone	Numbe	٢			
	ouncella	1011		_	_	Chivertor										
Name of Engility Whore A	\ b = 4 = - + - + ' - "	T.1:	Di	(6)	F/	CILITY	NFC	RMA	TION							
Name of Facility Where A	Abatement is	laking	Place	(3)						Type of Facility	. 16) 50					
Private house Street Address										School (K-1	2) 8 (Other than I	V 4 2)				
CONTRACTOR AND										Other (i.e.,	o (Other than i	(-1 2) mmerci:	al bi	iildina	10	
332 West End Road							- 500			homes, etc	.)	THI TO LONG	a, De	and nig	,5,	
City (5)										Square Feet	# of Floors	5	BI	dg. A	ge	
South Orange, NJ 0707	79															
County (6)					Cou	nty Code (7)	(STA	ATE U	SE ONLY)	Current Use (F	rior if being de	molishe	ed)			
Essex																
Name of Monitoring Firm	Hired by Build	ding O	wner	(8)	ASCN	No.	Na	ame c	f Abateme	ent Contractor (9	9)				3	
							Gr	Tecl	h LLC							
Street Address							St	treet A	Address							
							57	6 Va	lley Rd#	283						
City, State, Zip Code							_		ate, Zip Co							
							Wa	avne.	NJ 0747	70						
Project Manager for Monit	toring Firm			Tele	phone	No.			ne No.		License No	0.				
							973	3-638	3-1777		01127					
Start Date (10)						ate (11)			f OSHA M	Ionitor	01127					
	13	_ 08	3_/	1	5 - /-	13				nsultants,Inc						
Occupancy Status During	Abatement (0	Check	only c	ne)			Str	reet A	ddress	nsultants,inc						
□ Facility Closed/Vacate	d During Entir	re Peri	od of	Abate	ment					D 1 D1 1 "	25 5					
	Outside of No	ormal F	acility	Hou	s - De	scribe	Cit	tv. Sta	ite, Zip Co	Road, Bldg .#	35 E					
Time of Abatement:	AIVI	PM	/	PM_		_AM	1		vn, NJ 0							
Scope of Work (Check all	that apply)						1 al	Lav		and decontami	nation					
>3 sf or >3 If		_	-					Н	Full Cont	ainment with Ne	gative Pressure	e				
≥ 160 sf or ≥260 lf			Re	novati molitic	on				Mini-Encl	osure						
		L		HOHEIC	N I			M	Non-Exer	Procedure mpted (*) and No	l ent with Nega	ative Pr	ess	ure		
		T	ls	Locat	ion	T		=		inprod () and ite	ni-i nable Froc	-		1		
Location of				lorma	*			Des	scription o	f		-	Aba	teme	nt T	уре
Asbestos-Containing M TO BE ABAT	laterial (ACM) r∈n)		d Sole ntena		Asbe	stos	Conta	ining Mat	erial (ACM)	Amount		Re	Re	Enc	E
IN Facility					Staff?	(1.€	e., the	ermal surfac	systems in	nsulation,	(Specify		Remova	Repair	Encapsulate	Enclosure
(13)		-		(12)			ot	ther m	iscellaned	ous)	SIF or LF)		à	7	sula	ure
			Yes	No	N/A		54000								te	
Basement]			\boxtimes	Pipe ins	ulat	ion			85 LF	ſ	X		П	П
		1	7	П				1011			63 LF	-		ᆜ	닐	닏
		- -	_]_[-								Ш		
		L		Ш	Ш			<u> </u>								
									"			Г	7			
Name of Registered Waste	Hauler			NJD	EP Waste	Hauler ID No.	Cub	ic Yard	ds of Waste	Name of Regis	tered Landfill					
Gr Tech LLC				0	03378	25										
City, State				10	03310		-	TBD posal		T.R.R.F. Inc						
Vayne, NJ 07470								**		City, State						
Completed By (Print or Typ	10)	Tiele	_				-	TBD		Tullytown, PA	4					
	/e)	Title						Sign	atur	1		Date				
l.Jevtic		Owne	r						1200	he Wen	ad l	08/06/	201	3		

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

2013 AUG. 6 6333

Date of Notice 7/30/13

	ite of Notice 7/30						
Type Notific	ation	Name of Build Mark Rosha		Operator (2)	Ć.		970: ; ,
Agencies Notified		Street Addres	SS		-	α_{i}	.,
	mergency Notificat	ion 910 Amboy	Avenue			14. 77.	11/1
	itial Notification	City, State &				14	r 14
	mended Notification	20000000	2516				
	ancellation	Name of Con			4	7.	Telephone Number
A STATE OF THE STA	ancenation	Mark Rosha					1000000
DCA							
			/ INFORM				
Name of Facility Where Abate	ement is Taking Pla Residence	ace (3)	Тур	e of Facility (4) School (K-12)			
	Nesidence			Subchapter 8		(-12)	
702	Old Davidson Das	_	V				ngs, homes, etc.
783	Old Raritan Roa	a			# of Floors		Bldg. Age
				are Feet	# of Floors		
City (5)	County (6)	County Code (7		2000	2		60
Edison	Middlesex		Curi	rent Use (Prior	r if being demo	olished)	
	mana mana sa Amasa a mana a sa 122		Res	sidence			
Name of Monitoring Firm Hire	ed by Building Own	er (8) ASCI	M No Nan	ne of Abateme	nt Contractor	(9)	
Environmental Tactics, I		J. (0)		bal Abatem			
The state of the s	iic .			et Address		-,	
Street Address				Schoolhou	co Bood		
64 Broad Street							
City, State & Zip Code				, State & Zip C			
Matawan, NJ 07747				nroe Towns			
Project Manager for Monitoring	ng Firm	Telephone Number		ephone Numbe	er	License	
Tom Geiger		732-290-2217		-605-9062			00714
Scheduled Start Date (10)	Scheduled Con	npletion Date (11)	Nan	ne of OSHA M	onitor		
8/3/13		8/6/13	Glo	bal Abatem	ent Services	s, LLC	
0 0 0 0	-t	· · · · · · ·	Ctro	et Address			
Occupancy Status During Ab	atement (Check or	nly one)		Schoolhou	as Bood		
X Facility Closed/Vacat			1.000				
Abatement Performe	d Outside of Norma	al Facility Hours -	E 0.000	, State & Zip 0			
Describe: Area Is	olated During A	batement	Mo	nroe Towns	hip, NJ 0883	31	
Other - Describe:							
Scope of Work (Check all tha	t apply)						
X Demolition	Renovat	ion		Full Co	ontainment wit	th Negative	Pressure
	Nellovat	1011			nclosure		
Large Project	0154014				pag Procedure		
X Quantity is ≥ 3 SF or				120 A 120 MARINE AND AND	생각하는 사람이 그 아이에는 뭐이면 하지 않았다.		
Quantity is ≥ 160 SF	or ≥ 260 LF ACM				Non-friable		
Qui de managaga de se de s		Is Location		Description of		Amount	Abatement Type
Location of	ining	Normally Used		estos-Containi		(Specify	(Specify: Removal,
Asbestos-Conta			N /			winere Foot	Repair, Encapsulation
Asbestos-Conta Material (ACI	M)	Solely by		laterial (ACM)		quare Feet	
Asbestos-Conta	M)	Solely by Maintenance or	(i.e.,	thermal system	ms	or	or Enclosure)
Asbestos-Conta Material (ACI	M)	Solely by	(i.e., insulat	thermal systemion, surfacing,	ms VAT Lii		
Asbestos-Conta Material (ACI <u>TO BE ABAT</u> I	M)	Solely by Maintenance or	(i.e., insulat	thermal system	ms VAT Lii	or	
Asbestos-Conta Material (ACI <u>TO BE ABAT</u> in Facility (13)	M) ED	Solely by Maintenance or Custodial Staff? (12)	(i.e., insulat	thermal system ion, surfacing, er miscellaned	ms VAT Lii	or near Feet)	or Enclosure)
Asbestos-Conta Material (ACI <u>TO BE ABAT</u> in Facility	M) ED	Solely by Maintenance or Custodial Staff?	(i.e., insulat	thermal systemion, surfacing,	ms VAT Lii	or	
Asbestos-Conta Material (ACI <u>TO BE ABATI</u> in Facility (13)	M) ED nent	Solely by Maintenance or Custodial Staff? (12) N/A	(i.e., insulat or oth	thermal systerion, surfacing, er miscellaned	ms VAT Li	or near Feet) 80 LF	or Enclosure) Removal
Asbestos-Conta Material (ACI <u>TO BE ABAT</u> in Facility (13)	M) ED nent	Solely by Maintenance or Custodial Staff? (12) N/A NJDEP Waste Ha	(i.e., insulat or oth	thermal systemion, surfacing, er miscellaned TSI Cu. Yds. of	ms VAT Lindus)	or near Feet) 80 LF	or Enclosure)
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Asbestos-Conta Material (ACI TO BE ABATI in Facility (13) Baser Name of Registered Waste Freehold Cartage	M) ED nent	Solely by Maintenance or Custodial Staff? (12) N/A NJDEP Waste Ha	(i.e., insulat or oth	thermal systemion, surfacing, er miscellaned TSI Cu. Yds. of 5 Disposal Da	Waste Na TF	or near Feet) 80 LF ame of Regices RRF ty, State	or Enclosure) Removal stered Landfill
Asbestos-Conta Material (ACI TO BE ABATI in Facility (13) Baser Name of Registered Waste Freehold Cartage City, State	M) ED nent	Solely by Maintenance or Custodial Staff? (12) N/A NJDEP Waste Ha	(i.e., insulat or oth	thermal systemion, surfacing, er miscellaned TSI Cu. Yds. of 5	Waste Na TF	or near Feet) 80 LF ame of Regi	or Enclosure) Removal stered Landfill
Asbestos-Conta Material (ACI TO BE ABATI in Facility (13) Baser Name of Registered Waste Freehold Cartage City, State Freehold, NJ	M) ED ment lauler	Solely by Maintenance or Custodial Staff? (12) N/A NJDEP Waste Ha	(i.e., insulat or oth	thermal systemion, surfacing, er miscellaned TSI Cu. Yds. of V 5 Disposal Da 8/6/	Waste Na TF	or near Feet) 80 LF ame of Regices RRF ty, State	or Enclosure) Removal stered Landfill
Asbestos-Conta Material (ACI TO BE ABATI in Facility (13) Baser Name of Registered Waste Freehold Cartage City, State Freehold, NJ Completed By (Print or Type)	ment Hauler	Solely by Maintenance or Custodial Staff? (12) N/A NJDEP Waste Ha 1869	(i.e., insulat or oth	thermal system ion, surfacing, er miscellaned TSI Cu. Yds. of V 5 Disposal Da 8/6/ Signature	Waste Na TF te Cit 13	80 LF ame of Regices, State ullytown, I	r Enclosure) Removal Istered Landfill Pa
Asbestos-Conta Material (ACI TO BE ABATI in Facility (13) Baser Name of Registered Waste Freehold Cartage City, State Freehold, NJ	ment Hauler	Solely by Maintenance or Custodial Staff? (12) N/A NJDEP Waste Ha	(i.e., insulat or oth	thermal system ion, surfacing, er miscellaned TSI Cu. Yds. of V 5 Disposal Da 8/6/ Signature	Waste Na TF	80 LF ame of Regices, State ullytown, I	or Enclosure) Removal Istered Landfill

State of New Jersey

Check # 10623

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) 2913 1.05 -3 40×10:31 Name of Building Owner/Operator (2) Date of Notification (1) Susan Lehay 8-5-13 Street Address Type Notification Agencies Notified 12 Franklin Place [X] Initial []EPA Notification City, State, Zip Code []DEP Maplewood, NJ, 07040 []Amended [X] DOL Notification Telephone Number Name of Contact [X] DOH Susan Lehay [] EMERGENCY []DCA []Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) []School (K-12) []Subchapter 8 (Other than K-12) Same as above [X]Other (i.e., private & commercial buildings, homes, etc.) Street Addres Bldg. Age # of Floors Square Feet 85 2 County Code (7) 1650 County (6) Essex Current Use (Prior if being demolished) (STATE USE ONLY) City (5 Name of Abatement Contractor (9) Name of Monitoring Firm hired by Building ASCM No. AZTECH MANAGEMENT, Inc. Owner (8) Street Address N/AStreet Address 86 Christopher St. City, State, Zip Code City, State, Zip Code Montclair, NJ 07042 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 00371 (973) 744-8800 N/A Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) N/A 8-21-13 8-20-13 Year Day Month Occupancy Status During Abatement (Check only one) Year Street Address [X]Facility Closed/Vacated During Entire Period City, State, Zip Code []Abatement Performed Outside of Normal Facility of Abatement Hours - Describe: «OffHours Descript» []other - Describe: «Other Occupancy Descript» []Full Containment with Negative Pressure Scope of Work (Check all that apply) []Mini-Enclosure [X]Renovation $[X] \ge 3$ sf or ≥ 3 lf [X]Glovebag Procedure []Demolition []Non-Friable Procedure []>160 sf or >260 lf Abatement Type Is Description of NCAPSU NCLOSUR Location Amount REPAIR Normally Asbestos-Containing Location of (Specify MOV Used Asbestos-Containing Material (ACM) Solely SF or (i.e., thermal systems Material (ACM) By Main-LF) insulation, surfacing, VAT, TO BE ABATED tenance/ AL Custodial or other miscellaneous) In Facility Staff (12) (13)N/A Yes No X 160 LF Pipe Insulation X Basement Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler G.R.O.W.S. of Waste 2.0 Hauler ID No. AZTECH MANAGEMENT, INC. 17040 City, State Disposal Date Morrisville, PA/19067 8-22-13 City, State Montclair, NJ 07042 Signature Date Title 8-5-2013 Completed By (Print or Type)

President

Constantine Vivian

											Carter	170		_		
Date of Notification (1) 8/6/2013	Check#247	74			Building O			(2)			~°°,	9 ,		810		
Agencies Notified	Type Notification		S	Street Ad	dress					£ ,	12.00	147	10			
	122		1	11 Gre	y Street					14			٠.	· ; .		
DEP DOL	Initial Amended		-	City, Stat	e, Zip Cod	le					1			1		
X DOL	Amendment	#			k, NJ 07						. 4	1.1				
20000	Emergency (including		lame of	Contact	-				Tele	phone N	umber				
DOH DCA	justification) Cancellation		1575		seph Kv	wiatko	wski			T		_				
L DCA	Caricellation			3574 (370)	ITY INFO					1		-	_			
Name of Facility Where	Abatement is Takin	g Place (3)		PAGIL	ATT INFO	MAIN		Type	of Facility (4)						
St Rose of Lima Ch		9					.09	process.								}
Street Address						-			School (K-12 Subchapter 8		er than K-	12)				
11 Grey Street									Other (i.e. pr				ildi	ngs, l	nome	s,
<u> </u>								— е	tc.)	T 41 - 12	Flaces		Dia	l α Λ .	-	
City (5)								40,00	e Feet	1	Floors		80	ig. Ag ∔	je	
Newark, NJ 07107								100		1				T		
County (6)				County C					nt Use (Prior	r if bei	ng demoli	ished)				
ESSEX			(STATE	SE ONLY)	-	_	Chur	ch					-11-20		
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.				ement Cont		(9)					
Omega Environmer						- 1	EA S	Service	es Corpor	ation			5			
Street Address				-			Street	Addres	S			(/ = = \	2.60			7000
280 Huyler Street							426	69th S	Street							
City, State, Zip Code							City S	State, Zi	p Code	-						$\overline{}$
South Hackensack	N.I.07606					- 1			g, NJ 070	93						
		-		Falanhar	no Nio	-	100000000000000000000000000000000000000	hone No	•		License	No	_			-
Project Manager for Mor	nitoring Firm			Telephor	1-6209	- 1		295-1			01074					
											01074		_			
Start Date (10)		Schedule		pletion [Date (11)				A Monitor							
8/15/13		8/17/20	3535					e as a								
Occupancy Status Durin	g Abatement (Che	k Only On	e)				Street	Addres	SS							
Facility Closed/Vac	ated During Entire	Period of A	batem	ent												
Abatement Perform	ned Outside of Norr	nal Facility	Hours				City, S	State, Zi	p Code							
Other - Describe:	12:00 - Noon			-		_										
Scope of Work (Check A	All That Apply)									122						
Permi		X P	enovat	tion] Ful	I Containme	nt with	Negative	e Pres	sure	9		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			emoliti					☐ Min	i-Enclosure		. , , o g a a			-110		
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Asbestos-Containing			d Solel ntenar			os Cont				2.0	mount	١.	.		Ē	ш
TO BE AB			odial S	3000000000000	(i.e.	thermal	system cing, V/		ation,		Specify F or LF)	1		Re	cap	ncl
(13)			(12)					neous)	2		· - · /	Xellova		Repair	Encapsulate	Enclosure
(/		Vaa	Nie	N/A	ů.							1	-	35.1	ate	.e
		Yes	No	IN/A								-	-			
Basement bo	oiler room		Х			Stea	m Line	∋ -8"-			8 LF	x		1		
				_												
				-									4			
Name of Registered Wa	ste Hauler		100	JDEP W			Yards		Name of I	Registe	ered Land	dfill				
Freehold Cartage				auler ID	No.	of Wa	ste		Waste I	Mana	gement					
1 rection Cartage			1:	5939		tbd			93930503		M.S.					
City, State	9-22						sal Date	е	City, State		ndfill					
PO Box 5010					55,000	tbd	31.7000		Tullytov	vn La	nanıı					
Completed by		Title				5	Signatur	re A	uas-			Date	0.4	0		
Gina Salvador		Office	e Mar	nager				STA	ulas -	3		8/6/2	UT	3		

	(1			7,000.000		(2)		 				7
te of Notification (1) 8/05/13 CK#2763 \$200		Bor	rough o	f Eatont	er/Operator own	(2)		NO SE	100			+
gencies Notified Type Notification			et Addre					47	Alin	<u> ;</u>		1
EPA Initial Amended		City	State, Z	ip Code	ersey 07	724		Carry March				
DOL Amendment #_ Emergency (inc	luding		ne of Cor					Telephone Number	r	6		
DOH justification)			n Bran							_		-
DCA E		1	FACILITY	Y INFORM	IATION	Type of Fa	acility (4)					
ame of Facility Where Abatement is Taking R Eatontown Fire Department treet Address	Place (3)				-	Scho	ol (K-12)	(Other than K-12) vate & commercial t	ouilding	js, ho	mes,	
treet Address To Broad Street						etc.)		# of Floors	Bldg	. Age		-
city (5) Eatontown, New Jersey 07724						3,500		2	55+	٠,		_
County (6)		Co (S1	unty Coo	le (7) E ONLY)		Current U		if being demolished	1)			
Monmouth Name of Monitoring Firm Hired by Building O	wner (8)	1	ASCM N	0.		e of Abatem		ractor (9)				
T&M Associates						et Address	allon					
Street Address					0.000	6 McBride	Avenu	9				_
11 Tindall Road City, State, Zip Code		-			City,	State, Zip Coodland Pa	Code ark, Ne	w Jersey 07424				
Middleton, New Jersey 07748 Project Manager for Monitoring Firm			elephone		Tele	phone No.		License No 01104				
Dan Shaefer		_	08-268			3-225-840 ne of OSHA		01104				
Start Date (10) 08/26/13	Scheduled 08/29/13		oletion Da	ate (11)	J&	S Environ	mental	Labs				_
Occupancy Status During Abatement (Chec	k Only One)			Stre 23	eet Address 33 Route	22 Wes	st				12
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: 3:30PM- 12AM Unno		ateme -jours	ent		City	y, State, Zip nion, New	Code					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If	× Re	enovat				Mini-	Enclosur	ent with Negative P e cedure d (*) and Non-Friab	le Prod	cedure	<u> </u>	
	le	Location	on								ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	N Used Mai	ormall d Sole ntenar odial S (12)	ly by nce/ Staff?	Asbest (i.e.	thermal sys surfacing	otion of ng Material (tems insulat i, VAT, or cellaneous)	(ACM) ion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
	Yes	No	N/A		Elb	ows		50 Each	Х			
Main Bay			X			SI	(1981) (1981) (1981)	31 LF	X			T
Main Bay			X	-		(O&M)		20 each	1	Х		
Boiler Room	X		-	-	LIDOWS	, (00,)			T			I
		L_,	NJDEP V	Vaste	Cubic Ya	irds		of Registered Landf	ill			
Name of Registered Waste Hauler Lilich Corporation		l i	Hauler ID 18724		of Waste		11547070404-00).W.S Landfill				
City, State Woodland Park, New Jersey					Disposal 08/30/1		City, St Morris	sville, Pennsylv				<u> </u>
Completed by	Title	-			Sign	nature			Date 08/05	/13		
Tatiana Kalenikova	Vice	Pres	sident			Jal-	eme	caure-				-

13-0656

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

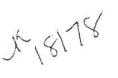
ANNUAL NOTIFICATION

Date of Notification						Name of B	uilding Ow	ner / Opei	rator (2)	`#/j	As.					
08 / 06	/13					Honeywell Street Add	ress				77 (n)					\neg
Agencies Notified	Type of N	otificat	ion	_		60 Kellogg				70.0		9	1			
☑ EPA	□ ype of K	Initial	1011			City, State,	The second of th			- C	<i>*************************************</i>		17/)		
two con-	l H	Amen	ded				NJ 07305			14/			.0			
☑ DEP ☑ DOH		Amen	dme	nt#		Name of C	ontact			Telephor	ne Nu	imber	96	7		
☑ DOL DCA		Emerg	genc	y w/	justification	David Amb	rose		4			=	4			
DCA		Cance	llati	on												_
					FA	ACILITY INF	ORMATION	ı								
Name of Facility W	here Abaten	nent is	Taki	ng P	Place (3)		Type of Fac	ility (4)			- 39.23					
Honeywell, Site 125							п :	School (K	(-12)		à					
Street Address									er 8 (Other	than K-12	2)					
60 Kellogg Street						- 1			, private &	cmmercia	al					
City (5)	County (6	3		-	County Code (7)	Square Fee		mes, etc.)	3 3	Bui	lding	Age	_	-	
200		,		- 1	County Court		22,5	00	2							
Jersey City	Hudson								being demo	olished)			48 (1	965)		
							Office / War		Contractor	(0)						
Name of Monitorin	g Firm Hired	by Blo	ig. C	wne	er (8)	ASCM NO	Name of Al	atement	Contractor	(9)						
J&S Environmental	Lab, LLC						Slavco Con	struction I	nc.							
Street Address							Street Add	ress				127				1041-11-0
2333 Route 22 Wes							164 Getty A	venue								
City, State, Zip Coo	le						City, State,	Zin Code					-			_
Union, NJ 07083	Barattanina F			_	Telephone Nu				,							
Project Mngr. For I Sheryll Gelsomino	nonitoring i	-irm			908-206-0073	ilibei	Clifton, NJ	07011								
Sheduled Start Dat	e (10)	Sched	d. Co	mpl	etetion Date (1	1)	Telephone	Number		License	Num	ber	7			
08 / 20	/13	A	09	- /	08 /	12	973-478-48	48		00724						
/	/		761	<u>/</u>	/		Name of O	2.71	itor				_		-	
Occupancy Status	During Aba	tement	(Che	Ent	only 1) ire Period of		Slavco Con									
✓ Facility Abatem		iteu Du	ııııg	LIIL	ile i ciloa di		Street Add							- 1140		
		ed Outs	side	of N	ormal Facility		164 Getty A	venue								
	Describe: _						•	A CONTRACTOR OF THE CONTRACTOR					_		_	
✓ Other - I	Describe:	Mon -	Fri /	:00	am to 3:30pm		City, State, Clifton, NJ									
Scope of Work (Ch	eck All That	Apply)													
☐ Demolit	ion		V		Renovation	П	Full Contai	inment w	ith Negative	Pressur	е					
>3sf or					Kellovation	H	Mini - Encl		a							
	or ≥260 If						Glovebag									
	-					V	Non-Exem	pted (*) a	nd Non-Fria	ble Proce	edure	9				
		_	lo.			Descripti	on of		T	Abateme	ent T	vpe			_	
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in Facil	ity	s	olely	1	0.0000000	ılation, surl		,	SF or LF)		P		A		L	
(13)		0.000	Mai		or	other misc	ellaneous)		1	V	ļ.		P		o s	
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		YES									I					
Warehouse Roof				-	Roof Flashing				200 SF	V	1		4			
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			Ш						-		+	<u> </u>	╁	┽┤	-	
Name of Device-	d Monte He	ulo:	Ш		NJDEP Waste	Cubic	Name of R	egisterer	Landfill		_			لــــــــــــــــــــــــــــــــــــــ	_	
Name of Registere		uiel			15939	Yards	WM G.R.O	= 0								
Freehold Cartage, I	nc.				19939	of Waste			ur candilli							
City, State						Disposal Date	City. State									
Freehold, NJ						TBD	Morrisville,	PA					31			
Completed by (Pri	nt or Type)				Title			Signatur		10			Date			1
Vivian Jurcevic					OFFICE MGR			7/11	mass	Chin	MI	Ш	A	ugust	6, 2	2013

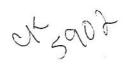
STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7 13-0656 ANNUAL NOTIFICATION Name of Building Owner / Operator (2) Date of Notification (1) 13 Honeywell 06 Street Address Agencies Notified Type of Notification 60 Kellogg Street **EPA** City, State, Zip Code Initial 1 Jersey City, NJ 07305 DEP Amended 1 7 DOH Name of Contact Telephone Number Amendment # DOL Emergency w/ justification 1 David Ambrose Cancellation DCA FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Honeywell, Site 140 School (K-12) Subchapter 8 (Other than K-12) Street Address V Other (I.e., private & cmmercial 80 Kellogg Street bldgs., homes, etc.) County (6) # Of Floors City (5) County Code (7) Square Feet **Building Age** 25,650 Jersey City Hudson Current Use (Prior if being demolished) 48 Yrs, (1965) Office / Warehouse Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM NO Name of Abatement Contractor (9) J&S Environmental Laboratories, LLC Slavco Construction Inc. Street Address Street Address 2333 Route 22 West 164 Getty Avenue City, State, Zip Code Union, NJ 07083 City, State, Zip Code Project Mngr. For Monitoring Firm Telephone Number Clifton, NJ 07011 Sherrill Gelsomino 908-206-0073 License Number Telephone Number Sheduled Start Date (10) Sched. Completetion Date (11) 08 13 09 00724 973-478-4848 Occupancy Status During Abatement (Check Only 1) Name of OSHA Monitor Facility Closed/Vacated During Entire Period of Slavco Construction Inc. 4 Abatement Street Address Abatement Performed Outside of Normal Facility 164 Getty Avenue Hours - Describe: 1 Other - Describe: Mon - Fri 7:00 am to 3:30pm City, State, Zip Code Clifton, NJ 07011 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Demolition 1 Renovation Mini - Enclosure >3sf or >3lf 1 >160 sf or >260 If Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure 1 Abatement Type Location of Is Description of Location Asbestos - Containing R Asbestos Containing N Normally Material (ACM) Amount E R Material (ACM) C E C (Specify M TO BE ABATED Used (l.e., thermal systems P insulation, surfacing, VAT, SF or LF) 0 Solely in Facility or other miscellaneous) V A 0 by Main-(13)S S 1 tenance/ A U R Custodial Staff (12) YES NO N/A ☑ ☐ ☐ Brown Wall Mastic 2,300 SF Dead Storage Area 1 NJDEP Waste Name of Registered Landfill Name of Registered Waste Hauler Cubic Yds Yds / Waste Freehold Cartage, Inc. 15939 WM G.R.O.W.S. North Landfill

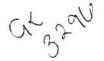
TBD City. State City, State Disposal Date Morrisville, PA Freehold, NJ TBD Completed by (Print or Type) Title Signatore Date man D. Jescuic OFFICE MGR. August 6, 2013 Vivian Jurcevic



Date of Notification (1) 8/6/2013		Na N	ame of B	uilding Ow	ner/Ope	rator (2) COLL	EGE			(F) 3 AU	'n			
Agencies Notified Type Notification		St 2	reet Add	ress OODBR	IDGE A	AVENU	E, P.O.	вох			`9	47	t.	
EPA Initial Amended Amendment#_		Ci	ity, State	, Zip Code I, NJ 088	1					Kity,			G.;	/
Emergency (int justification) DCA Emergency (int justification) Cancellation	cluding	1000	ame of C	ontact FUCHS	3			4	Telepho	one Numb	oer/	e X	- ,:	
DCA Cartellation			FACILI	TY INFOR	MATIO	N .								
Name of Facility Where Abatement is Taking & MIDDLESEX COUNTY COLLEGE - Street Address	Place (3) PERFO	RMI	NG AR	TS CEN	TER		Subch	l (K-12)	(Other th	nan K-12) mmercia	buildir	ngs, h	omes	s,
2600 WOODBRIDGE AVENUE							etc.) quare Fee	st.	# of Flo	nors	Bld	lg. Ag	e	
City (5) EDISON							urrent Us					5		
County (6) MIDDLESEX			County Co STATE US	ode (7) SE ONLY)		-					-u,			
Name of Monitoring Firm Hired by Building Ox	vner (8)		ASCM	No.	1	Name of	Abatemer 3ROTH	nt Contr	actor (9)	ΔCTIN(3			
ENVIRONMENTAL CONNECTION,	INC.							EKS C	JONTA	ACTIV			_	1 7 7 7
Street Address 120 NORTH WARREN STREET							UTHER		BLVD					
City, State, Zip Code TRENTON, NJ 08608						스 없이 경투에 위한 얼마인데 했다.	te, Zip Co ON, NJ		4					
Project Manager for Monitoring Firm RICK BEECH			elephon	e No. 2-4200		Telephor 973-95	ne No. 56-8700		100	icense No 10494).			
Start Date (10)	Schedule		pletion D	ate (11)			OSHA M		/F					-3.6
0/1//2010	8/19/20					Street Ad		7100						
Occupancy Status During Abatement (Check X	eriod of A	batem	ent			City, Sta	te, Zip Co	ode				_		
Scope of Work (Check All That Apply)							177							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enovat emoliti				×	Mini-En Gloveba	closure aa Proce	edure	egative F			е	
		30			do di		TYOH EX	OTTIPIO G	1			Abate	ment	C :
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai Cust	Location of the control of the contr	ly ly by nce/ Staff?	Asbest (i.e.	os Conta thermal : surfac	cription of aining Ma systems i sing, VAT niscellane	iterial (AC insulation , or	:M) ,	(Sp	ount ecify or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A		FIDE	OLIDTA	A IN I	-	500) SF	X		_	_
THEATRE		X	-		FIRE	CURTA	AIN		500) SF			_	
			-											
Name of Registered Waste Hauler			JDEP W		Cubic		1000			ed Landfil				
TWO BROTHERS CONTRACTING	;	1000	lauler ID 8743	No.	of Was					AGEME	ENT G	S.R.(D.W.	S.
City, State CLIFTON, NJ					Dispos 8/19/2	sal Date 2013		ity, State	e ISVILL					
Completed by VIVECA RAMOS	Title PRO	JEC ⁻	r coo	RDINAT		Signature UU	ileu	R	um	1	ate /6/20	13		



Date of Notification (1)							wner/Operator (2	2)	U/JAIL				
08/	05 /	13	-		Norw	ood Publi	ic School Dist	ric	(1)3 _{A(1)3} ~9				y)
Agencies Notified ☑ EPA	Type Notificatio	on			Street A	Address Summit St	reet		* ₇	4/1/0:	3,		
☑ DOLWD	☐ Amended				City, Sta	ate, Zip Cod	е			5			
☑ DHSS	Amendmen	100			2.63	vood, NJ (· 4/4	1. 1.			
	☐ Emergency justification		laing	-	Name o	of Contact		6*	Telephone Nur	nber		D	
(NJAC 3.25-0)	☐ Cancellatio				Luis	Napolitan	0						
					FAC	ILITY INFO	DRMATION						
Name of Facility Where	Abatement is Ta	king P	Place (3)				Type of Facility (4)				
Norwood Public S								School (K-12)	Other then K 1	2)			
Street Address					-			Subchapter 8Other (i.e., pr	ivate and comm	ercial bui	Iding	5,	
177 Summit Stree	et							homes, etc.)					
City (5)		0.00						Square Feet	# of Floors		lg. Ag	e	
Norwood NJ 0764	18							120,000	1		50+		
County (6)	-				Count	y Code (7)(S	TATE USE ONLY)	Current Use (Pri	or if being demo	lished)			
Bergen								school					
Name of Monitoring Fir	rm Hired by Buildin	ng Ow	vner (8	3)	ASCM N	No. N		ent Contractor (9)					
EnviroVision Cor	nsultants, Inc			88	0007	9	New America	n Restoration,	Inc	25			- 6
Street Address						5	Street Address			4			
20-21 Wagarow R	Road -Bidg 35E						421-423 Stra	ight Street					
City, State, Zip Code						(City, State, Zip C						
Fair Lawn NJ 074	110						Paterson NJ	07501		2			
Project Manager for M	onitoring Firm	76	22		phone N		Telephone No.		License No.				
Gary Laverance		15		1	73-636-		973-925-1303		00805				
Start Date (10)	1 2000				tion Dat		Name of OSHA N		les a				
08 /19	/ _13_	08	_ /	30	_ / _	13	New America	an Restoration	, inc				
Occupancy Status Dur							Street Address						
☐ Facility Closed/Vac	ated During Entire	Perio	od of	Abate	ment		421-423 Stra						
Abatement Perform Time of Abatement	ned Outside of No t: <u>7</u> AM- <u>4</u> PM/ <u>4</u> PM-	rmal F - <u>12</u> AN	-acility /I	Hour	's - Des	cribe	City, State, Zip C Paterson NJ						
Scope of Work (Check	(all that apply)	0.000		27 232		70	F15.110		native Dragoviro				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			⊠ Re □ De				☐ Mini-En	tainment with Ne closure g Procedure empted (*) and No		dure			
		T	Is	Loca	tion						atem	ent T	уре
Locati				Norma	illy ely by	Ashest	Description tos Containing M		Amount	Rer	Repair	Enc	Enclosure
Asbestos-Containi TO BE A		'	Ma	intena	ance/	(i.e.,	thermal systems	insulation,	(Specify	Removal	air	Encapsulate	losu
IN Fa	acility		Cus	todial (12)	Staff?		surfacing, VAT		SF or LF)	<u>m</u>		ulat	ē
(1:	3)		Yes	No	N/A		Other miscellan	5545)				0	
Attic 1 & 2	2412					Pipe Inst	ulation		1800 LF				
Attic 1 & 2	,				\boxtimes	Attic Fib	erglass Insula	tion	19500 SF				
4													
Name of Registered V	Vaste Hauler				NJDEP !		Cubic Yards of		stered Landfill				
New American R				1	lauler II 30399		Waste 20	G.R.O.W.	3.				
City, State					0000		Disposal Date	City, State			was to		
Paterson		50					TBD	Morrisville	e PA 19067				
Completed By (Print of	or Type)	Title					Signature	110		Date	,		
Igor Jezdimirovi		V.	Pres	idení	:		1			08/	05/	20	7/3



Date of Notification (1) 08/05/2013					Building O of Char				th	<	4/3 AU	'n.				
Agencies Notified	Type Notification		100	Street Ac						er i		`````````	44			
DEP DOL	Initial Amended Amendment		1752		te, Zip Coo nt Statio		07961				4/6/2			io:	1	10
	Emergency justification)	including	10.53		Contact					Tel	enhone	Numl	per_	-7/		
DOH DCA	Cancellation		1	Kevin E	Bremer				- 4799 <u> 51</u>					,		
				FACIL	ITY INFO	RMAT	ION	T	. F : : : : /	4)		_		+		
Name of Facility Where A Sisters of Charity Ad									of Facility(School (K-1 Subchapter	2)	er than l	√ -12\				
Street Address 2 Convent Road									Other (i.e. p	orivate (& comm	ercia	build			s,
City (5) Morristown									e Feet		f Floors			dg. A	ge	
County (6) Morris County					Code (7) USE ONLY)	-			nt Use (Pri inistratio			olishe	ed)			
Name of Monitoring Firm T&M Engineers & 0	[[[[[[[[[[[[[[[[[[[[[Owner (8)		ASCN	No.		100000000000000000000000000000000000000		ement Cor ci Corpor		(9)					
Street Address 11 Tindall Road	•				1.0			Addres Watch	s ung Ave							
City, State, Zip Code Middletown, NJ 077	/AQ		1		-1127				p Code ge NJ 0	7052						
Project Manager for Mon				Γelepho			Teleph	none No).		Licens					
Kevin Burns Start Date (10)		Scheduled	- me to 3		76-1725 Date (11)		_	of OSH	872 IA Monitor		0117	1				\dashv
08/19/2013		08/23/20)13	piction	Sale (11)		Schr	eider	Laborato							
Occupancy Status During								Addres W. C	s ary Stre	et						
Facility Closed/Vaca Abatement Perform Other – Describe: V	ed Outside of Norr	nal Facility I	Hours	ent		_			p Code VA 2322	20						
Scope of Work (Check A	II That Apply)											•				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enovat emoliti					Min Glo	Containm i-Enclosur vebag Pro n-Exempte	e cedure					e	
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100 March	702		.ocatio			_								Ту	ре	
Location Asbestos-Containing TO BE AB/ In Facil (13)	Material (ACM) ATED	Used Mair	Solel ntenar odial S (12)	y by nce/		tos Co therma surf	escription ntaining M al system acing, VA miscellar	Material s insula T, or		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							0015				Ф	
Basement: Me				X			ion& pip				60lf		x			
Basement: Ce	ntral Area			X	pipe in	sulat	ion& pip	oe fitti	ng ins.		215lf		x			
Name of Registered Was	ste Hauler		5/5	JDEP W		750 100 100 100	c Yards		Name of	Regist	ered La	ndfill				
Kielczewski Corpora	tion		H	auler ID	No.	OT VV	aste		Cones		.andfill					
City, State West Orange, NJ							osal Date		City, Sta Morgai	te ntown	, PA					
Completed by Slawomir Kielczewsl	ki	Title Presid	dent				Signatur	iolon	enst.			Dat 08	1000	2013		
	<u> </u>						7 00	· CV	7 9 00							

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

CL#2483

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

Date of Notification (1)					Т	Name	of Building	a Ov	wner/Operator (2)	· J	13.	· · · ·		
5 /	23 /	13			1			-		رم of Design and (Construction	,	Źġ, ,	0	
Agencies Notified	Type Notific	ation			۱,		Address					ilty)	,		
⊠ EPA	I pe rectific	auon			1,		Elm Dr.				· (20	**	510:
☑ DOLWD		d			-		State, Zip C	2040				٢.	L.	-	
☑ DHSS	Amendm		100000000000000000000000000000000000000		- '		nceton, N								
DCA	☐ Emerger		cluding	9	-		of Contac	-	70544		Tolonhous None				4
(NJAC 5:23-8)	justificati				'			7.0			Telephone Num	ber			
	L Cancella	Lion					pert Orte								
Name of Facility VAII.						FA	CILITY IN	IFO	RMATION						
Name of Facility Where A			70.	(3)						Type of Facility (Q250				
Princeton Universit	ty-Firestone	Lib	rary							☐ School (K-12) ☐ Subchapter 8	(Other than K-12	Y.			
Street Address Washington Rd										Other (i.e., pri			uilding	js,	
City (5)						-				Square Feet	# of Floors	Тв	dg. A		
Princeton										Oquale I eet	# 01 110015		ug. A	ge	
County (6)			-30.27 m/A			Cour	nty Code (7	')(ST	ATE USE ONLY)	Current Use (Price	or if being demolis	hed)	-		
MERCER										Library					
Name of Monitoring Firm	Hired by Buil	ding (Owner	(8)	A	SCM	No.	Na	ame of Abateme	ent Contractor (9)		-0.			
ATC Associates Inc	: .					0009	98		BRISTOL EN	VIRONMENTAL	, INC.				
Street Address								St	reet Address						
Three Terri Center									1123 BEAVER	R STREET					
City, State, Zip Code								Cit	ty, State, Zip Co	ode					
Burlington, NJ 0801	16							1	BRISTOL, PA	19007					
Project Manager for Moni	toring Firm	100		Te	elepi	hone	No.	Te	elephone No.		License No.			-	
Michael Keehn					609	-386	-8800	:	215-788-6040		00509				
Start Date (10)		Sched	luled C	omp	oletic	on Da	te (11)	Na	ame of OSHA M	onitor	<u> </u>				
6 / 5 /	13		8 /		31	_ / _	13	1	BRISTOL EN	VIRONMENTAL	, INC.				
Occupancy Status During	Abatement (Check	c only	one)			**************************************	Str	reet Address						
☐ Facility Closed/Vacate									1123 BEAVER	RSTREET					
Abatement Performed	Outside of N	ormal	Facilit	у Но	urs	- Des	cribe	Cit	ty, State, Zip Co	de					
Time of Abatement: 7 Then + Wed 8/6 + 8/7	(A 004 WC	PM/	5 P	M	ON	_AM	1 M		BRISTOL, PA	19007					
Scope of Work (Check all	that apply)	~ 1	12-)		F/II	_ a	7/"								
□ >3 cf or >3 lf			⊠ p.		_4:					ainment with Nega	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re	moli	ation	1			☐ Mini-Encl						
	15									mpted (*) and Non	-Friable Procedu	e			
759 3			1000	Loc								Ab	atem	ent T	уре
Location Asbestos-Containing I		• \		Norm			A = h = -		Description of			70	Z,	щ	ш
TO BE ABA		''	Ma	inter	nanc	ce/			Containing Mat ermal systems i		Amount (Specify	Removal	Repair	car	Clo
IN Facilit	у		Cus	todia (12		aff?			surfacing, VAT,	or	SF or LF)	<u>a</u>	-	Encapsulate	Enclosure
(13)			Yes	N	-	N/A	İ	OI	ther miscellaned	ous)				ate	1
Level 1 work area #Ni	F1A		\boxtimes		-		Plaster				4 SF				
First Floor Hallway				\boxtimes			Floor Ti	ile			260 SF				

												П	П	П	
Name of Registered Wast	e Hauler						Vaste	Cu	bic Yards of	Name of Registe	ered Landfill	1-		_	_
SERVICE TRANSPO		INC			Hau	uler IE 0990	No.	110000000000000000000000000000000000000	aste	The same and the same of the s	NORTH LAND	FILL			
City, State	***							Dis	sposal Date	City, State					
NEWARK, DE 19720)									MORRISVIL	LE, PA 19067				
Completed By (Print or Ty	pe)	Title							Signature		Da	te			
Brian Scafiro		E	stima	tor					Brian	Scaline 1	6	8/6,	1,3		

ASB-41 **MAY 11**

长女

B513055-A

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

Ck# 2483

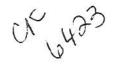
Date of Notification (1)				١	Name	of Building	Owi	ner/Operator (2)	J		Α,	· \ -	
	13				Prir	ceton U	nive	rsity-Office	of Design and	Construction 6	1	i ja	ئر`	· O" .
Agencies Notified Type Notif	cation			5	Street	Address					76.			1/1
					200	Elm Dr.						, ·		· .
☑ DOLWD ☑ Amend				(City, S	tate, Zip C	ode					15	1.0	
☑ DHSS Amend	100				Prin	ceton, N	J 08	3544				(
□ DCA □ Emerging (NJAC 5:23-8)		ciuaing	3	I		of Contact			3	Telephone Numb	er			-
Cancel					Rob	ert Orte	ga				_			
					FAC	CILITY IN	FOF	RMATION						
Name of Facility Where Abatement is	Taking	Place	(3)					-	Type of Facility	(4)				
Princeton University-Firesto	e Lib	rary							School (K-12					
Street Address					-				Subchapter	8 (Other than K-12) rivate and commer	oial bu	ildina		
Washington Rd									homes, etc.		CIAI D	mamg	J S,	
City (5)									Square Feet	# of Floors	BI	dg. A	ge	
Princeton														
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	rior if being demolis	hed)			
MERCER									Library					
Name of Monitoring Firm Hired by Bo	ilding (Owner	(8)	A	SCM	No.	Nar	me of Abateme	ent Contractor (9))				
ATC Associates Inc.					0009	8	В	RISTOL EN	VIRONMENTA	L, INC.				
Street Address							Stre	eet Address						
Three Terri Center							1	123 BEAVE	R STREET					
City, State, Zip Code	7/4 - V							, State, Zip Co						
Burlington, NJ 08016							2000	RISTOL, PA						
Project Manager for Monitoring Firm	8-10-000	100	Te	elepi	hone	No.		ephone No.		License No.				
Michael Keehn			1 0	San San		-8800		15-788-6040)	00509				
Start Date (10)	Sched	luled C	omp	oletic	on Da	te (11)	Nar	ne of OSHA M	/onitor					
6 / 5 / 13			350			13	В	RISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During Abatemen	(Chec	k only	one)				Stre	eet Address						
☐ Facility Closed/Vacated During E	tire Pe	riod of	Aba	tem	ent		1	123 BEAVE	R STREET					
☐ Abatement Performed Outside of						cribe	City	, State, Zip Co	ode					
Time of Abatement: 7:00AM-3:3 Two +Wed 8/6 -8/7 (400	PM/_	5 P	M-2	-1	-AM	- 14M	В	RISTOL, PA	19007					
Scope of Work (Check all that apply)	Z W	OKK	MES	ورو	FIL	- A11.	8							
									tainment with Ne	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		⊠ Re							osure g Procedure					
2										on-Friable Procedu	e			
			Loc			20-1-17-1-17-1					Ab	atem	ent T	ype
Location of			Norm					Description of			Z,	ZD.	ш	Щ
Asbestos-Containing Material (AC TO BE ABATED	M)	17.000	inter		-	Asbe:	stos the	Containing Ma rmal systems	insulation	Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility		Cus	todia (12		aff?		S	urfacing, VAT	, or	SF or LF)	<u>≤</u>	-	Sul	sure
(13)		Yes	N		N/A	-	oti	ner miscellane	ous)	•			ate	
Various locations on level 1		⊠		-	N/A	pipe ins	· · · loé	Hon		59 LF				
			-	-				7/L)						
Exterior						window		loose debris	12600SF	5,000 LF				
Above ceiling level 1 main lobl	У			-		Areal	20000	of duct wo	**************************************	100 SF			브	
Level A		\boxtimes				(unisula	bete	١		8,220 SF				
Name of Registered Waste Hauler					DEP \ uler I[Vaste	Cut	oic Yards of	Name of Regis					
SERVICE TRANSPORT GOU	P INS	; 			0990		100000			S. NORTH LAND	FILL			
City, State NEWARK, DE 19720							Dis	posal Date	City, State	ILLE, PA 19067				
	-							Cincot	MORRISA			10		
Completed By (Print or Type)	Title							Signature	Scalira	/ `0 Da		6/1	2	
Brian Scafiro	=	stima	tor					prian	scapero	17	0/	4/1		

0		
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1000		
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Date of Notification (1)			-	Nan	ne of Build	ing Owner/Operator	(0)	10		1) 			
1	23 / 1	3				University-Office		Construct			145			
Agencies Notified	Type Notification	Ξ.					or besign and	Construct	tion			5		
	Initial	•		10-001-003-00	et Address 00 Elm Di				4,	7		-	4/2	
				-		<u> </u>		- 25		Κ,			10,	
☑ DHSS	Amendment				City, State, Zip Code Princeton, NJ 08544									
☐ DCA (NJAC 5:23-8)	☐ Emergency (justification)	includir	ng	_							14	, '	2.7	
	Cancellation				ne of Conta			Telephone	Numbe	_	200000		•	
					obert Ort					7				
Name of Facility Where Ab	atement in Takir	on Die	- (2)	F	ACILITY	NFORMATION								
Princeton University			e (3)				Type of Facility							
Street Address	The storie Li	Jiaiy					School (K-1:	2) 8 (Ohbas Abas	16 400					
Washington Rd							Other (i.e., p	o (Other than	n K-12) ommercia	al bu	ildina	2		
City (5)							homes, etc.)				٠,		
Princeton							Square Feet	# of Floor	rs	Blo	ig. A	ge		
County (6)														
MERCER				Co	unty Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being de	emolishe	d)				
Name of Monitoring Firm Hi	red by Building	<u> </u>	(0)	1000			Library							
ATC Associates Inc.	red by Building	Owner	(8)	ASC		Name of Abateme							300	
Street Address				000	98		VIRONMENTA	L, INC.						
Three Terri Center						Street Address								
City, State, Zip Code						1123 BEAVE								
Burlington, NJ 08016						City, State, Zip Co								
Project Manager for Monitor	in Firm		1=			BRISTOL, PA	19007							
Michael Keehn	ing riim		1 8	lephone		Telephone No.		License N	No.					
Start Date (10)	Caba	ماريات ما ر			6-8800	215-788-6040		00509						
6 / 5 /					ate (11)	Name of OSHA M				050				
				- /	13	BRISTOL EN	VIRONMENTAI	L, INC.						
Occupancy Status During Al						Street Address								
☐ Facility Closed/Vacated I ☐ Abatement Performed Out	utside of Norma	Priod of	Abat	ement		1123 BEAVER								
Time of Abatement: 7:00	DAM-3:30PM/	P	M-	urs - De AM	scribe I	City, State, Zip Co				-				
					9) 	BRISTOL, PA	19007							
Scope of Work (Check all the	at apply)					□ Euli Cont	-i							
☐ ≥3 sf or ≥3 lf		⊠ Re				☑ Full Conta	tainment with Negative Pressure closure							
≥ 160 sf or ≥260 lf		☐ De	molit	ion		☐ Glovebag	Procedure							
		1 10	Loca	ntion .			npted (*) and Nor	n-Friable Pro	cedure		_			
Location of			Norm			5				Aba	teme	nt T	уре	
Asbestos-Containing Mat		Use	d So	lely by	Asbe	Description of stos Containing Mat	erial (ACM)	Amount	. [ZD T	Z I	m.	E.	
TO BE ABATE	<u>D</u>	Cus	inten	ance/ Staff?	(i.e	e., thermal systems in	nsulation,	(Specify	,	Removal	Repair	car	Clo	
(13)			(12			surfacing, VAT, other miscellaneo		SF or LF)	<u> </u>	-	Encapsulate	Sure	
0000-1440		Yes	No	N/A	1	outer misochaneo	,,,,,		- 1			è		
Various locations on lev	rel 1	×			pipe in	sulation		5015	-	7	_			
Exterior				吉	window			59 LF		-	-		Ш	
	in labelia		-	+=-			20000	5,000 LI	F	3			Туре	
Above ceiling level 1 ma	in lobby			10	Areal	o of loose debris(100 SF						
Level A		\boxtimes			(union)	lemo of duct work	k	8,220 SI	FD	3 1	П			
Name of Registered Waste H				NJDEP '	Waste	Cubic Yards of	Name of Regist	ered Landfill					긕	
SRVICE TRANSPORT	OURP INS		1	dauler II 20990		Waste	G.R.O.W.S.	NORTH LA	NDFIL	L				
City, State						Disposal Date	City, State			-			_	
NEWARK, DE 19720							MORRISVIL	LE. PA 190	067					
Completed By (Print or Type)	Title					Signature			Dete			_	_	
Brian Scafiro	E	stimat	or			Bus	Scolors / Il 6/4/13							
B-41 A (12 n 6	6 0					prian)	Scofers /	pc		'/'				
NY 11 B 5 / 3 0 5	U/1 *1	Do not	use tl	his form	for asbest	os licensure exempte	ed activities.							

Date of Notification (1)				Nam	e of Buildin	ng Owner/Operator	Tion Type of Facility (4)						
	/ _1	3						Construction	n	જ. '	٠,		
	otification	1		Stree	et Address			140	."		-		
☐ EPA ☐ Initia				20	0 Elm Dr				4.1		10	1/2	
_	ndea ndment	#1-6/4/	13	City,	State, Zip	Code						<u> </u>	
☑ DCA ☐ Eme	rgency (NJ 08544				2 7 20			
. II - 10 - 10-10-10-10-10-10-10-10-10-10-10-10-10-1	ication)				e of Conta	7753		Telephone N	umber	MAC	¢		
Li Can	ellation			Ro	bert Orte	ega							
Alama of Facility Mileson Abets				FA	CILITY	NFORMATION					-0000000		
Name of Facility Where Abatement Princeton University-Firest		-	e (3)										
Street Address	one Li	orary					School (K-1	2) 8 (Other than K	12\				
Washington Rd							Other (i.e.,	private and com	-12) mercial t	uildir	gs,		
City (5)								<u> </u>			Action	_	
Princeton							Square Feet	# of Floors	E	Bldg. /	\ge		
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (P	rior if being dem	olished)				
MERCER	2-2-2								,				
Name of Monitoring Firm Hired by	Building	Owner	(8)	ASCM	No.	Name of Abatem)		-		-	
ATC Associates Inc.				000	98	1	20						
Street Address						Street Address							
Three Terri Center						1123 BEAVE	R STREET						
City, State, Zip Code						City, State, Zip C	ode						
Burlington, NJ 08016						BRISTOL, P.	A 19007						
	n			ephone		Telephone No.		License No.					
	10.		1		6-8800	215-788-604		00509					
	Sche					Name of OSHA I	03/00/01/04/01/01						
						BRISTOL EN	IVIRONMENTA	L, INC.					
						Street Address							
					ariba		C.A. PROBLEM STATE						
Time of Abatement: 7:00AM-3:	30PM/_	P	M	AM	cribe	City, State, Zip C							
Scope of Work (Check all that appl	<i>(</i>)									_			
□ >3 ef or >3 lf		⊠ pa	novat	ion		⊠ Full Cor	tainment with Ne	gative Pressure					
≥160 sf or ≥260 lf													
						☐ Non-Exe	empted (*) and No	n-Friable Proce	dure				
		0.00		58565				Al	Abatement Type				
	CM)	Use	d Sol	ely by	Ashe	Description of the Containing Ma	The same construction of the same construction	Amount	20	R	m	П	
TO BE ABATED						., thermal systems	insulation,	(Specify) a	pair	cap	CIO	
(13)			(12)			surfacing, VAT other miscellane		SF or LF)	<u>a</u>		sula	ure	
		Yes	No	N/A			.020,				6		
evel 1 work area #NF1A					Plaster			4 SF	×			С	
										П	П	Г	
										+-		-	
		-	30-22	1					ᆛᆣ	-	1	-	
Jame of Registered Waste Hauler		I,u	_	JDEP V	Nasta	Cubic Yards of	Nome of Davi	de sed t an deu	\sqcup		Ш	L	
	UP INC	;	22 (24%)	auler (C	No.	Waste			ייום				
City, State				20990		Dianacal Data		. NORTH LAN	UFILL			_	
						Disposal Date		I I E DA 4000	7				
	Titl			-		Oiamat	MOKKISVI						
		1 10000	0.5			Signature	1 1-	1.	Date /	11	, 2		
with over110	#ichael Keehn If Date (10) 6		-71							/			

Do not use this form for asbestos licensure exempted activities.



Date of Notification (1)	20 20			_	Owner/Operator (€.	ومير	- X				
01/2	26 / 20	15	M	lartu	Blume	en Stei	0	14/2	1				
Agencies Notified	Type Notification		Street	Address			`\v.		·				
□ EPA	☐ Initial		2	197	renton	Avenue	>		"/				
	Amended		City, S	State, Zip C	ode	1110110		7					
					inaton	TIM	7.0080						
		iciuaing		of Contact		180	Telephone Nu						
(140/10/03.20-0)	☐ Cancellation		100000000000000000000000000000000000000		Blumen	ctoin		in ibon					
	1		<u> </u>		FORMATION	310111							
Name of Facility Where A	Ahatement is Taking	Place (3)	IA	OILII I IIV	LOURINITION	Type of Facility	(A)						
						School (K-1:	202						
Street Address	uai Dae	my		-		☐ Subchapter	8 (Other than K-						
	ct - P	160					private and comm	nercial buildir	ngs,				
City (5)	अहा ।	116				homes, etc. Square Feet	# of Floors	Bldg.	۸۵۵				
	atan					1400	2						
County (6)	10011		Cour	aty Code /7)(STATE USE ONLY)		rior if being demo	7(J				
	<u>, </u>		Cour	ity Code (/	JUSTATE USE UNLT)	Reside		olisnea)					
		Dumor (9)	ASCM	No	Name of Abateme	ike							
	85.75 BF75	JWITET (0)	ASCIVI	INU.	_	하는 맛있었다면 사람들의 방비를 해 되었다.	S	C	4-				
	€				Street Address	EUNIO	nmenia	Conce	PIS				
Street Address						The surrouse was trained	- L D	7 - 1					
City State Zin Code					10221	ance m	Thoe Road						
City, State, Zip Code					City, State, Zip Co	- NIT C	000011						
Project Manager for Man	itarina Firm	17-1		NI-	Willia	mSTOW	111111	7 <u>803</u> ,	†				
Project Manager for Mon	itoring Firm	Tel	ephone	NO.	Telephone No.	00 11/1	License No.	20					
Start Data (10)	Cohoo	Iulad Camal	D-	4- (44)	Name of OSHA M	27-1166	aic	00					
	17 Sched	1ulea Comple フ / 29	ation Da	i Z				110	+				
			<u> </u>	10	Quality	EUNIL	3nmen	CICO	nceps				
					Street Address	1		13	,				
에 집에 가게 되는 요즘 아이들은 이 것이다. 사이지는 사람들이 아프리스 아이들이 되었다고 하는데 모든데 없다.				oribo	1053 N City, State, Zip Co	1. LUCKE	ance Kc	<u>rad</u>					
									, .				
					Willia	mslou	in Ni	GE03	4				
Scope of Work (Check all	that apply)				☐ Full Cont	ainment with Ne	native Pressure						
⊠ ≥3 sf or ≥3 lf		Renovat	☐ Full Containment with Negative Pressure ion ☑ Mini-Enclosure										
☐ ≥160 sf or ≥260 lf	Agencies Notified □ EPA □ Initial □ Amended □ Amended □ Amended □ Amended □ Amended □ Amended □ Amended □ Emergency (includir □ justification) □ Cancellation Cancellation Cancella		on		Glovebag								
		101000	tion.	г	Non-Exe	mpted (*) and No	on-Friable Proced						
Location	of	Is Loca Norma			Description of				nent Type				
		Used Sol	ely by	Asbes	Description of stos Containing Mar		Amount	Remova	Enclosure				
TO BE ABA	TED	Maintena Custodial			., thermal systems i	nsulation,	(Specify	nov	dos				
	ty	(12)			surfacing, VAT, other miscellane		SF or LF)	<u>a</u>	Enclosure Encapsulate				
(1.0)		Yes No	N/A		otrici missenarie	5 43)			6				
Bathram is	St Elean			1:00	leumonius	. i i	30sF	Z C					
Bash 19	54 F:												
				4.×4	Flortile		40SF						
Basement/1st	Floor		Ø	Ductu	xxK them	700 LDS	20sf	E					
Chimney R	of flashim				itarando		GSF						
	te Hauler] [JDEP V	Vaste	Cubic Yards of	Name of Regis							
Quality En	Monday	tal 1	lauler II	No.	Waste ICV	Tillist	town L	F					
City, State	VICIAINIC				Disposal Date	City, State	10011						
1 11111 4	aun n.	T			TBD	h 4	isville.	TIM					
Completed By (Print or Ty	(pe) Title	3			Signature	1, 1011		Date					
			000	Fral	200	(DW		07100	iz				
ASB-41	N COLL V	10011	2210	JEIL	Locale	W H	new	11100	13				

Date of Novincation (1)	0/6/0012			Na	me of B	uilding Ow	ner/Oper	ator (2 Site (2) Contractors	, Inc.	7	à		7			
Agencies Notified	8/6/2013 Type of Notification			St	reet Add					-		1	71	_			
[X] EPA [] Initial Notification [] DEP [] Amended Notification [X] DOL Amendment #					ity, State	, Zip Code	940 Par	-	New Jersey	08701	- \- \- \- \- \- \- \- \- \- \- \- \- \-		کی۔ ج	2:-			
[x] DOH	justific	ation)	luding	N	Name of Contact Irving Perlstein Telephone Number									(),			
[] DCA	[] Cancel	lation		THOM:	COTATA TA	FORMA								<u>.</u>			
Name of Facility Where Al	batement is Taking idence	Place (3)		FACIL	II Y IIN	IFURINA	TION	Тур	e of Facility (Scho Subc	ol (k-12) hapter 8 (other	er thank	(-12)				
Street Address	Ridge Avenue								[x]	home	r (i.e., private es, etc.)			l buildi	ngs,		
City		County	(6)	Co (S	County Code (7) (STATE USE ONLY)			0000.50	1200 sf		f Floors	Bldg.	Age 60				
Lakewood	Ocean						Current Use (Prior if beingdemolished) Residence-garage										
Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address					SCM No).	Name of Abatement Contractor (9) Guardian Contracting, Inc. Street Address										
						1889 Route 9, Unit 61 City, State, Zip Code											
	Telephone Nu	ımhar			10-20	Toms River, New Jersey 08755-1271 lephone Number License Number											
Project Manager for Moni				Date (1	1)	732-349-9932 00624 Name of OSHA Monitor											
Scheduled Start Date (10) 8/7/13 Scheduled Complete (10) 8/8/13 Scheduled Start Date (10) 8/8/13					E.M.S.L. Analytical Street Address												
Occupancy Status During Abatement (Check only one) [X] Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility [] Other – Describe					Abatement / Hours City, State, Zip Code Piscataway, New Jersey 08854							54					
Scope of Work (Check al	l that apply)						[Full Containr Mini-Enclosu		Negative Pre	ssure					
[] >3	sf or ≥3 lf 60 sf or ≥260 lf		F 3	Renovatio Demolitic	ovation [] Glovebag Procedure							:dure					
												Abat	ement	Гуре			
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)			Is Location Formally use Solely by tenance/Cus Staff (12) NO	ed	insulation, s VAT other misce			Containing (ACM) al systems surfacing, C, or		(:	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	ENCAPSULE	E N C L O S U R E		
Exterior			X		Asbe	stos sidir	ıg			1	000 sf	X					
ZATO.										-							
			NJDEP Waste	Lauler	ID No.	Cubic Y	ards of W	aste	Name of R	egistered :	Landfill						
	ste Hauler Contracting, Inc.)223 Dispos		3	City.	State	T.R.R.	F							
Completed by (Print or 7	r, New Jersey	Title	ant Mars - Co	8/9/13		hure	Tull	ytow	n, Pennsylv	vania	,	Dat 8/6	e 5/2013				
Nicholas Fe	ernicola		ect Manage Do not use t		for asl	pestos lice	nsure ex	empte	ed activities.								

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

		(Pursuar	IL TO INJI	10 0.00								
			Name o	f Building O	wner/Operat	or (2)	-4-	3	2 11			1
of Notification (1)			1,44		Raymon	d Darge	nto	m 23	211			+
August 6, 2013			Street A	Address			1	€ .	`			
ncies Notified Type of Notification	5	7 Old Chester Road								٦		
PA [] Initial Notifi	City	tate, ZipCod	e	0-8000		No.		· O.	•			
DEP Amended 14	t #		City, 5	itate, Esp	Parsipp	any, NJ	07054	10				_
DOL [x] Emergency	(including	5	-	of Contact			Tele	ephone Number	ATT .			
] DOH justification	1)		Name	Ravm	ond Darge	nto				•		
] DCA [] Cancellation	n			550-201 2 001								_
		FA	CILITY	INFORM	ATION	Type of	Facility (4)					
me of Facility Where Abatement is Taking Plac	e (3)						г٦	School (k-12) Subchapter 8 (other t	han k12	3		
Residence		7-2-2-2				ř		Other (i.e., private &	comme	rcial b	uilding	g
							[x]	homes, etc.)				_
reet Address 313 4 th Avenue						Square	feet	# of Floors F	3ldg. Ag	ge		
Co	ounty (6)		Count	ty Code (7) TE USE ON	(Y.)	10	onn ef	1		60		-
ity			(S1A	TE OSE OT	/	Current	t Use (Prior if	being demolished)			100	933
Ortley Beach	cean		1				Residen	(ce				
	mer (8)		ASC	M No.	Name o	f Abateme	ent Contractor	an Contracting, In	ıc.			_
Jame of Monitoring Firm Hired by Building Ow			Street A									
N/A			1889 Route 9, Unit 01							-		
Street Address			City, St	tate, Zip C	Code	New Jersey	0875	5-127	1			
City, State, Zip Code				River, New Jersey 08755-1271 License Number								
	nber	0.000	Teleph	phone Number 00624								
Project Manager for Monitoring Firm Telephone N				2-to (11)	Name	of OSHA	Monitor					
Scheduled Start Date (10) Scheduled C 8/8/13				Jate (11)		12.07	E.M.S	.L. Analytical				
8/7/13	-lv. one)				Street	Address	1056.9	Stelton Road				
Occupancy Status During Abatement (Check of X) Facility Closed/Vacated	niy one) During En	tire Period	of Abaten	nent		. Sec. 0. 57 V	4	1 1				_
[X] Facility Closed/ Vacated of Abatement Performed Or	utside of N	Normal Faci	lity Hour	S	City,	State, Zip	Code	away, New Jerse	y 0885	4		
Other – Describe					-							
	1.							ent with Negative Pre-	ssure			
Scope of Work (Check all that apply)]] N	/lini-Enclosure	- dura				
	1	r 1 F	Renovatio	n	Ĩ	Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
[] >3 sf or ≥3 lf			Demolitio		[]	x] N	von-Exempled	() and	Abatement Type			
[x] ≥160 sf or ≥260 lf												
					Descri	ption of		Amount	R	R E	E N	
	Is	S Location ormally use	.d		Asbestos	-Containi	ing	(Specify SF	E M	P	C	
Location of	No	Solely by	-		Materi	al (ACM)) mc	or LF)	O	A	A	
Asbestos-Containing Material (ACM)	Mainte	nance/Cus	stodial		(i.e., ther	mai sysic	ng.	1000000	V	I R	PS	
TO BE ABATED in facility		Staff			V	on, surfacing, AT, or			A		U	
(13)		(12)			other mi	scellaneo	ous)	1	L		LE	
(/	1700	NO	N/A							+-	+-	_
	YES			1 1	aiding			1000 sf	X		+-	_
Paterior		X		Asbesto	Salding					1	-	_
Exterior	1											_
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	+	1				OTTY.	Name of R	egistered Landfill				
	1	NJDEP Was	te Hauler	ID No.	Cubic Yards	of Waste	T.R.R.	F				_
Name of Registered Waste Hauler Guardian Contracting, Inc		2	20223		3	City, State		74148				
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Toms River, New Jersey				1				,	0.000			_
Completed by (Print or Type) Nicholas Fernicola	Title	ect Mana	ger		VI	12	ted activities					