

### State of New Jersey

PAND	1	State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)  Name of Building Owner/Operator (2)										Commence of the contract of th		
Date of Notification (1) 08/04/2018	************			Building			(2)	- 1 Li		AUC.	201	8	11	#
Agencies Notified Type Notification		$\dashv$	Street A		, acrio	OIS							-	-
☑ EPA ☐ Initial		L Greek		road St					ASB	ESTOS CO	DNTR	OL 8		
▼ EPA     ▼ DEP     ▼ DOL     ▼ Amended     Amendment	#14	and the same	The second secon	ite, Zip Co rk NJ 0				+		and the second of the second		-wanan-k	townser	
Fmomoney /				f Contact	77 102	***************************************			Tele	phone Numi	hor			
DOH justification Cancellation		-	Cristo	pher Ce	rf				2	3-733-733				
Name of Facility Where Abatement is Taking	Plane /	21	FACI	LITY INFO	ORMATI	ON	7	of English da	-					
Newark Vocational School	) Flace (	3}					annesses.	of Facility (4	600					-
Street Address							X	School (K-12 Subchapter (	(Othe					1
301 W Kinney St								Other (i.e. pr etc.)	ivate ê	k commercia	l buildir	igs, ho	mes.	- Automotive
City (5) Newark NJ 07103								re Feet	1	Floors	1	g. Age	)	-
County (6)			C	Cada (T)			N/A		N/		N.	A		_
Essex				Code (7) USE ONLY	)			ent Use (Prio hool	r it bei	ng demolish	ed)			-
Name of Monitoring Firm Hired by Building (	Owner (8)	)	ASC	A No.		Name		atement Con	tractor	(9)				-
Whitman Environmental Consultar	at .					1		ntracting L		<b>1-1</b>				Į
Street Address							Addre	277 cm						
7 Pleasant Hill Road							BOX							
City, State, Zip Code Cranbury NJ 08512								tip Code d Park NJ	0740	А				
Project Manager for Monitoring Firm			Telepho	na No			none h		U14Z	License N	0	-		
Kevin Lovelly				90-5858			692-			01266				
Start Date (10)	ed Co	mpletion	Date (11)		Name	of OS	HA Monitor		<u></u>					
07-05-2018	11-31-		1			1		ntracting L	TC					
Occupancy Status During Abatement (Chec							Addre							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm												*******		
Other - Describe: OCCUPIED BUILDIN		y 11001	1 7					odland Park NJ 07424						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 if ≥160 sf or ≥260 if	STATE OF THE PARTY	Renova Demoli					Full Containment with Nega Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-						<b>3</b>	
	ls	Local	tion								-	Abate	ment	
Location of		Norma				escriptio		n-p-en-man			-	Ty	pe	
Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Asbestos-Containing Material (ACM)  TO BE ABATED  In Facility  Used  Main  Custo								\$	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Northern Corridor near Gym area			×		Accou	stical	Ceilli	ıg	2	500 SF	X			
			1					-						
		+	2 10 10 10 10 10 10 10 10 10 10 10 10 10								556	-	+	
		1							esemble on the later	26 (2004) 20 (2004)	1 200	-	-	
Name of Registered Waste Hauler		1	UDEP V	Vaste	LON	Yards		Name	Ranie	tered Landf		1 (800)		1
	1	lauler ID	No.	of W	iste		5airies			-				
Amax Contracting LLC	10	03618	4	4 cy	CONTRACTOR OF THE PERSON									
City, State Voodland Park NJ 07424					And the second second	sal Dal 8-201								
Completed by	Title					Signalia	9	, ,	7	Date				
ome Maslarkov	Proje	ct M	t Manager // //							08/04	201	8		

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Date of Notification (1) 08/04/2018			T			Owner/Operato	r (2)	- Indiana	Inch Stage	The Article Control of			710	7
Agencies Notified	Toma Marifican		_			Schools			£	ASBESTO	SC	ONT	ROL	1
- 1	Type Notification		1	Street A	ddress road St					LIC	ENS	ING	300	T
EPA DEP	Initial  Amended		-		te. Zio Co	4.							tempore	十
X EPA X DEP X DOL	Amended Amendment	#15			rk NJ 0	37						5		1
	Emergency		—  -		Contact	1102			Tel	phone Numbi	00			-
DOH DCA	justification) Cancellation		1		pher Ce	rf			1	3-733-7333				-
	Edd Control				•	RMATION								-
Name of Facility Where A	batement is Takin	g Place (3)	)	170	THE MEL	CATHOLI COLO	Type c	d Facility (4)	)					1
Newark Vocational	School						Пѕ	chool (K-12)	1					-
Street Address		***************************************			************		T X S	ubchapter 8	(Oth	er than K-12)				/acceptance
301 W Kinney St							1111	ther (i.e. pri tc.)	vate å	commercial	buildin	igs, ho	mes,	1
City (5)				·············			Squan		# of	Floors	Bid	g. Age	,	7
Newark NJ 07103							N/A		NI	A	N	A		1
County (6)				County	Code (7)		Currer	t Use (Prior	if bei	ng demolishe	d)			
Essex			1	(STATE	use only		Sch	ool						
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	d No.	Nam	e of Abat	ement Conti	ractor	(9)				
Whitman Environme						Am	ax Con	tracting L	LC					
Street Address					zoterenne	Stree	et Addres	s		<del></del>				-
7 Pleasant Hill Roa	ad					PO	BOX 7	34						
City, State, Zip Code				*************		City.	State, Zi	Code		W	<del></del>			
Cranbury NJ 08512	)					3		Park NJ (	0742	4				
Project Manager for Moni		***************************************		Telepho	ne No.	Tele	phone No	) <u>.</u>		License No.				
Kevin Lovelly			1		90-5858		3-692-6			01266				
Start Date (10)		Schedule	ed Cor	moletion	Date (11)	Nam	e of OSH	A Monitor		<u> </u>			-	_
07-05-2018		11-31-			,,,	Arr	ax Con	tracting L	LC					
Occupancy Status During	Abatement (Che	ck Only On	18)			Stre	et Addres	s				ACCEPTANCE.		-
						PO	BOX 7	34						
Facility Closed/Vaca Abatement Performs	ed Outside of Non	mat Facility	Hour	e Liment		City	State, Zi	p Code						_
Other - Describe: S	OCCUPIED BUILD	ING				- W	oodland	Park NJ	0742	4				
Scope of Work (Check Al	That Apply)									****				-
		[7] s	lenov:	nnite			⊠ Full	Containme	ni wii	h Negative Pr	essur	ssure		
23 sf or ≥3 ff 2160 sf or ≥260 ff			emoli				L Min	i-Enclosure	'e					
								vebag Proc		nd Non-Friabl	a Don	-artists		
					T		Small 1940	- LAGINDUG	3 10	10 11071 11001	-		ment	
			Local					1				Ty		
Location				ely by	Acho	Descripti stos Containin		MON		Amount .			-	
Asbestos-Containing TO BE ABA			intens			, thermal syste				(Specify	2	20	Encapsulat	EUCIOSONS
în Facili		Cus	todiai (12)	Staff?		surfacing, other misce			Ş	if or LF)	Removal	Repair	18QI	ADS
(13)			,,,,,		4	Other misce	namenus)	-			1	100	late	Buf
		Yes	No	N/A				1						_
1st Fkoor Culii	nany area			X	1	Accoustica	I Cellin	9 -222	1	500 SF	X			
ISE PROOF CUIE	saly area	-		+-	+	late Grand and a	08/1580014400	98-98282899-0-9	10.00	e iga tereb	1			
						60,000,000,000					+-	-		-
									-S21883		1		-	_
				T			i gir				432			
Name of Registered Was	lo Havier		TI	NJDEP	Weste	Cubic Yard	ls.	Name of	Regis	tered LandSI	Miles			-3/1/5
7			1	Hauter II	D No.	of Waste	e de la compania del compania del compania de la compania del compania del compania de la compania del compania	Fairles		Professional Contraction				
Amax Contracting LI		003618	34	4 cy		S CONSTRUCTION						questri		
City, State				Disposel D		City, Sta		DΑ						
	7424			,	12-08-20	100 Per 100 Pe	Morris	AIIIG		000	-		-	
Woodland Park NJ 0							Signature					Carrier 1		
Woodland Park NJ 0 Completed by	1 424	Title		lanage	1,438	Signa	ture /	0 1	-	Company of the Company of the Company	1 1000	1004	3	100

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

									1 2.7				1	111
Date of Notification (1) 08/01/18	Check # 322	5			of Building as Regio					AUG -	9 2	018	And the second	
Agencies Notified	Type Notification	1			Address Villiamso	n St				ASSESTU!	CON	ITRO	1.8	
DEP  DOL	Initial Amended				ate, Zip Co		1		1		P (5,1%)	G		
N DOL	Amendmen Emergency		_		peth, NJ,	0/202	-							
DOH DCA	justification Cancellation	) `			of Contact Samura	ı				Telephone No. 732-357-6				
				FAC	ILITY INFO	ORMATI	ON						-100-1100-	
Name of Facility Where A Trinitas Regional Mo	Abatement is Taki edical Center()	ng Place ( 2nd site	3) )					Type of Fa	87 (1959)					
Street Address		anava i para na						Subch	ol (K-12) hapter 8	Other than K-	12)			
655 East Jersey St								Other etc.)	(i.e. priv	ate & commer	cial bui	ldings	, hom	ies,
City (5) Elizabeth								Square Fee	et	# of Floors 8	1.0	3ldg. /	Age	
County (6)					Code (7)			Current Us	e (Prior i	f being demolis				
Union					USE ONLY)		_	Hospital			115			
Name of Monitoring Firm N/A	Hired by Building	Owner (8	)	ASCI N/A	M No.			of Abatemer ervices	nt Contra	ctor (9)				
Street Address N/A								Address 9th St						
City, State, Zip Code								tate, Zip Cod	de				-	
N/A								enberg, N		3				
Project Manager for Moni N/A	toring Firm			Telepho N/A	ne No.			one No. 295-1700		License I	Vo.			
Start Date (10) 08/03, 08/10, 08/17/	2018	Schedul 08/28/		mpletion	Date (11)		_	of OSHA Mo						
	ccupancy Status During Abatement (Check Only One)						2000000000	Address						
Facility Closed/Vaca Abatement Performe Other – Describe: D	ted During Entire	Period of	Abaten	nent			N/A							
Abatement Performe Other – Describe: D	ed Outside of Norr uring 3 weekends	nal Facility only (3 ph	/ Hours ases) 8	s Bpm		_	tate, Zip Coo	de						
Scope of Work (Check All	That Apply)						N/A							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demolit				×	Mini-Encl	ull Containment with Negative Pressure ini-Enclosure lovebag Procedure					
		1			T					and Non-Fria	ole Pro			
4 50	_	100	Locati										emen pe	t
Location Asbestos-Containing N		Use	d Sole	ly by	Asbest		cription aining M	of aterial (ACN	1)	Amount			Ì	
TO BE ABA In Facilit	TED		intena todial S			thermal s		insulation,	"	(Specify	Re	Z.	Enca	Enc
(13)	,		(12)			other m				SF or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A				(060)			<u>n</u>		ate	Ге
Basement Co	orridors		X		ACM I	Floor T	ile (No	ne Mastic	:)	1,600 SF	Х			
		-												
									-					
The first control of the control of					/aste	Cubic Y		Nam	ne of Reg	istered Landfil				
					Hauler ID No. of Waste 19551				erva E	ntreprise				
City, State Bronx, NY						Disposa TBD	al Date		State vnesbu	rg, OH				
Completed by		Title		S-50 - 540-500 - 500			gnature	12)11	1		ate			$\dashv$
Gina Betances		e Mar	nager				PYI	ias.	- ME 0	3/01/1	18			

Print Form



.9.	1 Bushing		(1-1	iisuaiit	to NJAC 0	o.oo anc	112.120)	may [	E P	FI	N/7 F	2	7
Date of Notification (1 08/6/2018	)			Name of West O	Building C range Bo	Owner/O ard of E	perator (2) Education		Chec	k# 1205	W L	1	
Agencies Notified	Type Notification			Street Ad 179 Eag	ddress gle Rock	Avenue	9		AU(	9 - 9 2	018	Alexandra de la constanta de l	
□ EPA 図 DEP 図 DOL	□ Initial □ Amended Amendment #_		.	City, Sta West O	te, Zip Coo range, Ne	de ew Jers	sey 07052	A	SBEST	OS COM	ROLa	3	distribution of the second
☑ DOH □ DCA	☐ Emergency (inclinity justification)☐ Cancellation	uaing		Name of Robert	Contact Csigi			1	Tele	ephone Nur 3-669-5400	nber		- !
				FACI	LITY INFO	RMATI							
Name of Facility When Kelly Elementary So	re Abatement is Taking chool	Place (3)	)				Type of Facili	1500 0					
Street Address 555 Pleasant Valley	y Way						☐ Subchap ☐ Other (i.e	ter 8 (Oth			ngs, ho	mes, e	tc.)
City (5) West Orange, New J	lersey 070522						Square Feet 20,000		# of 2	Floors		dg. Ag )+	e
County (6) Essex					Code (7) USE ONLY)		Current Use of Elementary		ing dem	olished)			
Name of Monitoring F AHERA Consultant	irm Hired by Building C s, Inc.	wner (8)		ASCN 0005			Name of Abat Lilich Corpor		ntractor	(9)			
Street Address P.O. Box 385							Street Addres 606 McBride						
City, State, Zip Code Oceanville, New Je	rsey 08231						City, State, Zip Woodland P		Jersey	′			
Project Manager for N John Smoyer	Monitoring Firm			Telepho 609-652			Telephone No 973-225-840			License N 01104	lo.		
Start Date (10) 08/16/2018		ed Con 018	npletion	Date (11)		Name of OSH Iris Environn			ries, LLC				
	uring Abatement (Check						Street Addres 2333 Route						
	Vacated During Entire formed Outside of Norr e:				3pm		City, State, Zi Union, NJ 0						
Scope of Work (Chec	k All That Apply)												
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>		2002	Renova Demolit				⊠ Min □ Glo	i-Enclosur ve Bag Pr	e ocedure	Negative F  / Limited C d Non-Frial	Contain	ment &	&Tent
		ls	Locat	on								Abate	34 C. S. C.
Loca	tion of	1	Normal	iy		De	scription of					Тур	ре
Asbestos-Contain TO BE	ing Material (ACM) ABATED acility 13)	Ma	ed Sole intena todial ( (12)	nce/		thermal surfa	taining Material systems insula cing, VAT, or niscellaneous)		(S	mount pecify or LF)	Remova	Repair	Enclosure
		Yes	No	N/A							1		· ·
Hallway			Х		Ceiling F	Plaster/	Spray On (O	&M)	4 X 5	Area	X		
Hallway	X		Ceiling F	Plaster	(M&O)		12" x 1	2" Area	X				
Name of Registered \	0.50	JDEP W		Cubic of Wa	Yards	Name of	Registe	ered Landfil	ı				
Lilich Corporation			1	18724	/ INO.	2	53122	Fairless		fill			
City, State Woodland Park, Ne	ew Jersey					08/17	sal Date 7/2018	Gity, Sta Morrisv		PA			
Completed by Adriana Olejarova						19	Signature	10	W.		ate 08/06/	2018	



#### State of New Jersey - Notification of Asbestos Abatement

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

Date of Notification (1) July 17, 2018						Name of Building Owner RUTGERS, THE S			TY OF NJ				
Agencies Notified		Notif	fication	Туре		Street Address							
		12	Initia	al Notif	ication	ENVIRONMENTAL	HEALTH	& SAF	ETY DEPT.				
X EPA		DA	mende	ed Certi	fication	27 ROAD 1, BLDG							
x DCA					including	City, State, Zip Code	1000, 210	110011	or oran oo				
x DOL				ation)	iricidality	PISCATAWAY, NJ	08854						
X DEP						Name of Contact	00034	Tolonk	none Number				
xDOH		110	Cance	llea		Michael Smith ENV HEA	ALTH &		445.2550				
					FACILITY INI	SAFETY							
Name of Facility Where Abate	ment is T	Taking Pla	ace (3)		PACILITITIN	Type of Facility (4)	1		The state of the s				
Rutgers Busch Camp				alth Co	ntor	School (K-12)		) E	CEIVER				
Bldg # 4157	JUS LIV	mgsto	JII I I C	aitii Ge	ritei	Subchapter 8 (other	than 1/ 1/21	1.5					
Street Address								\$1.	27-24-3				
						Other (i.e. private & co	mmercial build	lings, hon	nes, etc.)				
Busch Campus						Sq. Feet: 3,000 # of	Floors: 1 E	siag. Age	eti (60 years 11 )				
City (5)	County	(6)		County	Code (7)	1			- Semano				
Piscataway	MIDD	LESE)	X		Use Only)	Current Use (prior if being	g demolished	): Acad	emic				
							1	ASBE	ESTOS CONTROL &				
Name of Monitoring Firm Hire	d by Bldg	. Owner	(8)	ASCM	No.	Name of Contractor (9)		7 1 107 207 10	LICENSING				
ATC ASSOCIATE				0098			1 - 2044	*************	Consideration with the extraction which are the extraction $\mathcal{L}_{ij}$ and $\mathcal{L}_{ij}$ and $\mathcal{L}_{ij}$ are the extraction $\mathcal{L}_{ij}$ and $\mathcal{L}_{ij}$ are the extract				
in choocing	0					GREENWOOD ABA	TEMENT C	ONSU	LTANTS, INC.				
Street Address						Street Address							
3 TERRI LANE													
			2777			511 MAIN STREET							
City, State, Zip Code						City State, ZipCode							
BURLINGTON, NJ 08						Butler, NJ 07405							
Project Manager for Monitorin	g Firm	1	phone N	-		Telephone Number		License	e Number				
BRIAN KEARNY		609	-386-	3800		070 400 0477							
Cabadulad Ctad Data (40)		0.4	11.10	1.0	D 1 (14)	973-492-0477		0084	0				
Scheduled Start Date (10) August 2, 2018					n Date (11)	Name of OSHA Monitor							
August 2, 2016		Aug	gust 1	, 2018		Envirovision, Inc.							
Occupancy Status During A	hatemen	t (Check	only or	ne)		Street Address			77110				
Facility Closed/Vacate			23/23/2012/10/2012	700000000000000000000000000000000000000	ment	91100111000							
Abatement Performed						20-21 Bldg E Wagar	aw Road						
Describe	1) 0 <del>1</del> 10 10 10 10 10 10 10 10 10 10 10 10 10			,		City, State, Zip Code							
☑Other – Describe: 4	pm-5a	am -24	hrs&\	Veeke	nds as	FILE							
	Neede					Fairlawn, NJ							
Y.	Facilit	v Occi	unied	during	g abatement	t							
Source of Work (Check all tha		, 0000	иргоц	daring	g abatomont	(L)							
	СОРРИ						x Full Co	ntainme	nt with Negative Pressure				
≥ 3 sf or ≥ 3 lf					X Renovation	on.	Mini-En		ne with regative r resource				
					Demolition				duro				
					Demonitori			ag Proce	and Non-Friable Procedure				
Location of Asbestos-Containi	ng Is	Location	Normall	y Used	Description of Asl	pestos Containing Material	Amou		Abatement Type				
Material (ACM) in Facility (13)		lely by M			(ACM) (i.e. therm	al systems insulation, surfac							
200 S SH		aff? (12)			VAT, or other mis	cell.)	or LF)		Remove Repair Encap Enclose				
	YI	ES .	NO	NA									
1st Floor Room		[	X		Linoleum		475	sf	X				
110,110D													
Name of Reg. Waste Hauler See Hauler Below # 1 & 2									of Registered Landfill WS North Landfill				
Hauler #1) Greenwood	Abatem	ent Co	nsulta	nts, Ind	c. – Butler, NJ 0	, NJ 07405 Disposal Date City, State							
Address of the Control of the Contro	NJ DEP # 12561						August	, 2018	Road, Morrisville, PA				
Hauler #2) Newark Cart	ler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 1955								19067				
							215-736-1700						
Completed by (Print or Type)		Title				Signature Date							
Raymond C. Pedali	no	SENI	OR PI	ROJEC	CT	Raymond C. Pedalino	1	July	17, 2018				
		MANA	AGER			- Tripinion Or 1 simulation	75						

GAC # 2018-060

#### State of New Jersey - Notification of Asbestos Abatement



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

Date of Notification (1)					Name of Building Owner/0	Operator (2)		_			_
August 3, 2018					RUTGERS, THE ST		/ERSIT	OFN	IJ		
Agencies Notified		Notification Initial I		ation	Street Address ENVIRONMENTAL						
X EPA		<b>X</b> Amend	ed Noti	ification # 1-	27 ROAD 1, BLDG	4086. LIVII	VGSTO	N CAN	<b>IPUS</b>		
x DCA	1	New Start	& Con	npletion Dates	City, State, Zip Code	,				N. N.	
x DOL	1	☐ Emerg			PISCATAWAY, NJ	08854					
X DEP	1		cation)	morading	Name of Contact	70001	Telepho	ne Num	her	- 172- 273 (4.20)	
xDOH		☐ Cance			Michael Smith ENV HEA SAFETY	LTH &		45.25		E	In
	-			FACILITY IN	FORMATION		1		COURSE AND IN		
Name of Facility Where Abateme Rutgers Busch Campu Bldg # 4157			alth Co	enter	Type of Facility (4) School (K-12) Subchapter 8 (other t		4.		0 201	8	100000000000000000000000000000000000000
Street Address					Other (i.e. private & con	nmercial buildi	ngs, homes	s, etc.)			Care Care
Busch Campus					Sq. Feet: 3,000 # of	Floors: 1 Bl	dg. Age:	60 y	ears UNTR	OL &	J
10.00	Ounty (6)			/ Code (7) Use Only)	Current Use (prior if being	demolished)	: Acaden	nic CEN	SING	y sycamore energies	and the later
Name of Monitoring Firm Hired b	y Bldg. O	wner (8)	ASCM		Name of Contractor (9)	17					
ATC ASSOCIATES			0098		GREENWOOD ABAT	EMENT C	ONSULT	[ANTS	, INC.		
Street Address					Street Address						
3 TERRI LANE					511 MAIN STREET						
City, State, Zip Code					City State, ZipCode						
BURLINGTON, NJ 080	16				Butler, NJ 07405						
Project Manager for Monitoring F BRIAN KEARNY	irm	Telephone N			Telephone Number		License I	Number			
DRIAN NEARINT		609-386-	0000		973-492-0477		00840				
Scheduled Start Date (10)		Scheduled C			Name of OSHA Monitor						
August 8, 2018	3	August 1	3, 201	8	Envirovision, Inc.						
Occupancy Status During Abat	tement (C	Check only or	ne)		Street Address						
Facility Closed/Vacated Abatement Performed O Describe					20-21 Bldg E Wagara	aw Road					
Other – Describe: 4p	m–5am	-24hrs&\	Neeke	nds as							
	eded				Fairlawn, NJ						
		Occupied	during	g abatement							
Source of Work (Check all that a	pply)					F. # O					
$\geq$ 3 sf or $\geq$ 3 lf				X Renovati			ntainment	WITH ING	egative i	ressu	ire
					74.	Mini-End					
$\boxtimes \geq 160 \text{ sf or } \geq 260$	)			Demolition			g Procedu		Talabla F		
Location of Asbestos-Containing	I le Loc	cation Normal	ly Head	Description of As	bestos Containing Material	Non-Exemp				rocea	ure
Material (ACM) in Facility (13)		y by Maint./Cu			nal systems insulation, surfaci			batemer	цтуре		
, , , <u>, , , , , , , , , , , , , ,</u>	Staff? YES	? (12)	NA	VAT, or other mis		or LF)	R	lemove I	Repair Er	ncap E	nclose
1st Floor Room		X		Linoleum		475 s	of D	X			
110,110D											
Name of Reg. Waste Hauler	NJDEP Was See Below	ID#	Cubic Yards of Waste:		Name of						
See Hauler Below # 1 & 2		20 GROWS North Landfill									
Hauler #1) Greenwood Ab NJ DEP # 1256	c. – Butler, NJ 0	07405	Disposal Da August 1		10	y, State 0 New F					
Hauler #2) Newark Carting	NJ DEP # 19551				19	oad, Morr 067 5-736-17		ΓA			
Completed by (Brief or Type)	Т	itle			Signature		Date				
Completed by (Print or Tyne)		ranati i			A 10 0040						
Completed by (Print or Type) Raymond C. Pedaline	2 5	ENIOR P	RO.IFC	T:	Raymond C. Pedalino		Διιαιι	ct 2 2	018		

no ox

#### State of New Jersey - Notification of Asbestos Abatement

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

Date of Notification (1)   July 19, 2018   Notification Type   Mame of Sullding Owner/Operator (2)   RUTGERS, THE STATE UNIVERSITY OF NJ   Street Address   Street Address   ENVIRONMENTAL HEALTH & SAFETY DEPT. 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS     Z ROAD 1, BLDG 4086, LIVING
Notification Type   Initial Notification   Image: Address   Initial Notification
X EPA
X EPA X DCA X DCA X DCL X DEP X DOH
x DCA x DOL x DEP xDOH  I Emergency (including justification) I Cancelled  I Emergency (including justification) I Emergency (including subtification) I School (K-12) I School (K-12
x DOL
X DEP XDOH  Cancelled  Cancelled  Name of Contact Michael Smith ENV HEALTH & 848,445.2550 SAFETY  FACILITY INFORMATION  Name of Facility (4)  Rutgers Busch Campus – Richardson Apartments  Bldg# 3842  Street Address  Busch Campus  City (5)  Piscataway  Name of Monitoring Firm Hired by Bldg. Owner (8)  ATC ASSOCIATES  City State Use Only)  Street Address  3 TERRI LANE  Telephone Number Michael Smith ENV HEALTH & 848,445.2550 SAFETY  FACILITY INFORMATION  Type of Facility (4)  School (K-12)  Subchapter 8 (other than K-12) AUG 9  Other (i.e. private & commercial buildings, homes, etc.)  Sq. Feet: # of Floors: 3 Bldg. Age: 80 years  Current Use (prior if being demolished): Academic State Use Only)  Name of Monitoring Firm Hired by Bldg. Owner (8)  ATC ASSOCIATES  Street Address  3 TERRI LANE  City State, Zip Code  BURLINGTON, NJ 08016
Cancelled   Michael Smith ENV HEALTH & SAFETY   SUbchapter 8 (other than K-12)   Subchapter 8
Michael Smith ENV HEALTH & SAFETY   S
Name of Facility Where Abatement is Taking Place (3)   Rutgers Busch Campus – Richardson Apartments   School (K-12)   School (K-12)   Subchapter 8 (other than K-12)   AUG – 9     Other (i.e. private & commercial buildings, homes, etc.)   Sq. Feet: # of Floors: 3   Bldg. Age: 80 years     Sq. Feet: # of Floors: 3   Bldg. Age: 80 years     Sq. Feet: # of Floors: 3   Bldg. Age: 80 years     Current Use (prior if being demolished): Academic     Current Use (prior if being demol
Name of Facility Where Abatement is Taking Place (3) Rutgers Busch Campus —Richardson Apartments Bldg# 3842  Street Address Busch Campus  City (5) Piscataway  Name of Monitoring Firm Hired by Bldg. Owner (8) ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  Type of Facility (4) School (K-12) Stree facility (4) School (K-12) Street Facility (4) School (K-12) Street Address Subchapter 8 (other than K-12) AUG — 9 Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: # of Floors: 3 Bldg. Age: 80 years Current Use (prior if being demolished): Academic  Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address
Rutgers Busch Campus –Richardson Apartments Bldg# 3842  Street Address Busch Campus  City (5) Piscataway  Name of Monitoring Firm Hired by Bidg. Owner (8) ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  Discataway  Street Address Busch Campus  County (6) MIDDLESEX  County Code (7) (State Use Only)  County Code (7) (State Use Only)  ASCM No. 0098  Reserved Current Use (prior if being demolished): Academic  Name of Contractor (9)  GREENWOOD ABATEMENT CONSULTANTS, INC.  Street Address 511 MAIN STREET City, State, Zip Code BurlingTon, NJ 08016
Bldg# 3842  Street Address Busch Campus  City (5) Piscataway  Name of Monitoring Firm Hired by Bldg. Owner (8)  ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  Sq. Feet: # of Floors: 3 Bldg. Age: 80 years  Sq. Feet: # of Floors: 3 Bldg. Age: 80 years  Sq. Feet: # of Floors: 3 Bldg. Age: 80 years  Current Use (prior if being demolished):: Academic  Current Use (prior if being demolished): Academic
Street Address Busch Campus  City (5) Piscataway  Name of Monitoring Firm Hired by Bldg. Owner (8)  ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  Street Address  Sq. Feet: # of Floors: 3 Bldg. Age: 80 years  AGBEST Current Use (prior if being demolished): Academic  Current Use (prior if being demolished): Academic  Name of Contractor (9)  Remainder of Contractor (9)  Street Address
Other (i.e. private & commercial buildings, homes, etc.)  Street Address Busch Campus  City (5) Piscataway  Name of Monitoring Firm Hired by Bldg. Owner (8) ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  Other (i.e. private & commercial buildings, homes, etc.)  Sq. Feet: # of Floors: 3 Bldg. Age: 80 years  Current Use (prior if being demolished):: Academic  Street Address  GREENWOOD ABATEMENT CONSULTANTS, INC.  Street Address  511 MAIN STREET  City, State, Zip Code Butler, NJ 07405
Street Address Busch Campus  City (5) Piscataway  Name of Monitoring Firm Hired by Bldg. Owner (8) ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  Street Address  Sq. Feet: # of Floors: 3 Bldg. Age: 80 years Current Use (prior if being demolished): Academic  Sq. Feet: # of Floors: 3 Bldg. Age: 80 years  Current Use (prior if being demolished): Academic  Street Address  Name of Contractor (9)  GREENWOOD ABATEMENT CONSULTANTS, INC.  Street Address  Street Address  Street Address  Street Address  Butler, NJ 07405
Busch Campus  City (5) Piscataway  Name of Monitoring Firm Hired by Bldg. Owner (8) ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  County (6) MIDDLESEX  County Code (7) (State Use Only)  ASCM No. 0098  Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.  Street Address 511 MAIN STREET City, State, Zip Code BURLINGTON, NJ 08016
City (5) Piscataway  Name of Monitoring Firm Hired by Bidg. Owner (8) ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  County (6) MIDDLESEX  County Code (7) (State Use Only)  ASCM No. 0098  Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC.  Street Address 511 MAIN STREET City, State, Zip Code BURLINGTON, NJ 08016
Piscataway  Name of Monitoring Firm Hired by Bldg. Owner (8) ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  ASCM No. O098  ASCM No. O098  RAME of Contractor (9)  GREENWOOD ABATEMENT CONSULTANTS, INC.  Street Address 511 MAIN STREET  City State, ZipCode Butler, NJ 07405
Piscataway  Name of Monitoring Firm Hired by Bldg. Owner (8) ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  ASCM No. O098  ASCM No. O098  RAME of Contractor (9)  GREENWOOD ABATEMENT CONSULTANTS, INC.  Street Address 511 MAIN STREET  City State, ZipCode Butler, NJ 07405
Name of Monitoring Firm Hired by Bldg. Owner (8) ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  ASCM No. 0098  RASCM No. 0098  GREENWOOD ABATEMENT CONSULTANTS, INC.  Street Address 511 MAIN STREET  City State, ZipCode Butler, NJ 07405
ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  GREENWOOD ABATEMENT CONSULTANTS, INC.  Street Address 511 MAIN STREET  City State, ZipCode Butler, NJ 07405
ATC ASSOCIATES  Street Address 3 TERRI LANE  City, State, Zip Code BURLINGTON, NJ 08016  GREENWOOD ABATEMENT CONSULTANTS, INC.  Street Address 511 MAIN STREET  City State, ZipCode Butler, NJ 07405
Street Address   Street Address     3 TERRI LANE   511 MAIN STREET
Street Address         Street Address           3 TERRI LANE         511 MAIN STREET           City, State, Zip Code         City State, ZipCode           BURLINGTON, NJ 08016         Butler, NJ 07405
3 TERRI LANE  511 MAIN STREET  City, State, Zip Code  BURLINGTON, NJ 08016  City State, ZipCode  Butler, NJ 07405
City, State, Zip Code         City State, ZipCode           BURLINGTON, NJ 08016         Butler, NJ 07405
City, State, Zip Code         City State, ZipCode           BURLINGTON, NJ 08016         Butler, NJ 07405
BURLINGTON, NJ 08016 Butler, NJ 07405
Project Manager for Monitoring Firm Telephone Number License Number License Number
BRIAN KEARNY 609-386-8800
973-492-0477 00840
Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor
August 2, 2018 August 13, 2018
Envirovision, Inc.
Occupancy Status During Abatement (Check only one)  Street Address
y Eacility Closed/Vacated During Entire Period of Abatement
Abatement Performed Outside of Normal Facility Hours - 20-21 Bldg E Wagaraw Road
Describe City, State, Zip Code
Xi Other Describe: 8am_8pm24hrs&Weekends as
Needed Fairlawn, NJ
Needed
Source of Work (Check all that apply)
x Full Containment with Negative Pres
> 3 sf or ≥ 3 lf   X Renovation Mini-Enclosure
∑ > 160 sf or ≥ 260 Demolition Glovebag Procedure
Non-Exempted (*) and Non-Friable Proc
Location of Ashestos-Containing Is Location Normally Used Description of Ashestos Containing Material Amount Abatement Type
Material (ACM) in Facility (13)   Solely by Maint./Custodial   (ACM) (i.e. thermal systems insulation, surfacing,   (Specify SF
Staff? (12) VAT, or other miscell.) or LF)
YES NO NA
Rms Vinyl Sheet & VAT 1,600 sf
161,162,163,164,173,
174,175 & 176
174,175 & 176       Name of Reg. Waste Hauler       NJDEP Waste Hauler ID #       Cubic Yards of Waste:       Name of Registered Landfill
Name of Reg. Waste Hauler     NJDEP Waste Hauler ID #     Cubic Yards of Waste:     Name of Registered Landfill       See Hauler Below # 1 & 2     See Below     30     GROWS North Landfill
174,175 & 176  Name of Reg. Waste Hauler See Hauler Below # 1 & 2  See Below  See Below  Cubic Yards of Waste:  See Hauler #1) Greenwood Abatement Consultants, Inc. – Bufler, NJ 07405  Disposal Date  City, State
174,175 & 176   Name of Reg. Waste Hauler   See Hauler Below # 1 & 2   See Below   See B
174,175 & 176   Name of Reg. Waste Hauler   See Hauler Below # 1 & 2   See Below   See B
174,175 & 176   Name of Reg. Waste Hauler   See Hauler Below # 1 & 2   See Below   See B
174,175 & 176   Name of Reg. Waste Hauler   See Hauler Below # 1 & 2   See Below   See B
Name of Reg. Waste Hauler   See Hauler Below # 1 & 2   See Below   See Below
Name of Reg. Waste Hauler   See Hauler Below # 1 & 2   See Below   See Below   See Hauler #1)   Greenwood Abatement Consultants, Inc. – Butler, NJ 07405   NJ DEP # 12561   Hauler #2)   Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551   Signature   Date   Completed by (Print or Type)   Title   Signature   Duble   Cubic Yards of Waste:   Name of Registered Landfill   GROWS North Landfill   GROWS North Landfill   GROWS North Landfill   GROWS North Landfill   City, State   100 New Ford   Road, Morrisv   19067   215-736-1700   Completed by (Print or Type)   Title   Signature   Date   Completed   Date   Completed   Completed   City, State   100 New Ford   Road, Morrisv   19067   215-736-1700   Completed   Complete
Name of Reg. Waste Hauler   See Hauler Below # 1 & 2   See Below   See Below

#### State of New Jersey - Notification of Asbestos Abatement



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

August 3, 2018  Agencies Notification   Committee   Co	Date of Notification (1)					Name of Building Owner/C			05.111			
Initial Notification #1-New Start & Completion Dates   Envergency (including   Lost	August 3, 2018						ATE UNIV	ERSITY	OF NJ			
EPA	Agencies Notified							0	V DED-			
New Start & Completion Dates   Emergency (including   justification)   Cancelled   Can			Initial N	Votificat	ion							
PISCATAWAY N. J. 08854   DEMERSION PROPERTY   DEMERSION PROPERTY   DEMERSION			X Amend	led Noti	fication #1 –	27 ROAD 1, BLDG 4	1086, LIVIN	IGSTON	CAMPUS			
DEMENDER DISCATAWAY, NJ 08854  Name of Facility Where Abatement is Taking Place (3)  Rutgers Busch Campus —Richardson Apartments  Bigg# 3492  Street Address  Busch Campus — Richardson Apartments  Busch Campus — Richardson Apartments  Street Address  Busch Campus — Richardson Apartments  Busch Campus — Richardson Apartments  Street Address  Busch Campus — Robert Res (2)  Street Address  Street Addr			New Start	& Com	pletion Dates	City, State, Zip Code						
ADDIT						PISCATAWAY, NJ 0	8854					
Mame of Facility Where Abatement La Taking Place [3]					lolaaling			Telephone	e Number			
Name of Facility Where Abatement is Taking Place (3)   Rutgers Busch Campus —Richardson Apartments   Discount Campus —Richardson Apartments   Discount Campus — Richardson Apartments — Richar	xDOH					Michael Smith ENV HEA	LTH &	848.44	5.2550			
Name of Facility. Where Abdresses IT Taking Pisce (3)  Street Address Busch Campus  Street Address Busch Campus  Street Address Busch Campus  Street Address Busch Campus  County (5) Piscataway  Name of Monitoring Firm Here by Bide, Owner (8) ATC ASSOCIATES  Name of Monitoring Firm Here by Bide, Owner (8) ATC ASSOCIATES  Street Address 3 TERRI LANE  Street Address 3 TERRI LANE  Street Address					FACILITY INFO			7 E /	7 6	+++-	ii vers	
Rutgers Busch Campus —Richardson Apartments Bidg# 3842  Sized Address Busch Campus  Civ 15 Ci	Name of Facility Where Abate	ment is Tal	king Place (3)				111	11_15	5	W IE	3 /1	
Street Address Busch Campus    County (6)   MiDDLESEX   State Use Only				Apartmo	ents	☐ School (K-12)	1 1	41	***	-	7111	
City 59 Piscataway    Name of Monitorina Firm Hirds by Bisd, Owner (8)   ASCM No.   O998    ATC ASSOCIATES   Street Address	•	, , , , , , ,		-qo-on-on-o		The state of the s	han K-12)					
Sured Address Busch Campus  Current Use (prior if being demolished): Academic Current Use Current Use (prior if being demolished): Academic Current Use (prior if being demolished): Academic Current Use	D149# 3042							ds homes.	etc.)	0.26		
City 5    County (6)   County (7)   County Code (7)   Code (	Ctroat Address									716	11	
City. (5) Piscataway  Name of Monitoring Firm Hired by Bildo. Owner (8) ATC ASSOCIATES  Sireet Address 3 TERRI LANE  Sireet Address 4 Street Address 5 Street						A THE RESIDENCE OF THE PARTY OF		Territoria com				
Name of Monitorina Firm Hired by Bildo, Owner (8)   ASCM No.   1098   GREENWOOD ABATEMENT CONSULTANTS, INC.	Busch Campus					Current Use (prior if being	demolished)	Academ	ic	terror company		
Name of Monitorina Firm Hired by Bildo, Owner (8)   ASCAI No.   0098   ASCAI No.   0098   GREENWOOD ABATEMENT CONSULTANTS, INC.	City (5)	County (6	)	County	Code (7)	Ourion Goo (prior il polity		13791259	HOL COND	ROLS		
Name of Monitoring Pirm Hired by Bidg. Owner (8)   0098   O098		MIDDL	ESEX	(State L	Ise Only)			7	Elvinty in	N. 111		
Street Address 3 TERRI LANE Street Address Street Addres											potablica produce	
Street Address 3 TERRI LANE Street Address	Name of Monitoring Firm Hire	d by Bldg.	Owner (8)	ASCM N	Vo.	Name of Contractor (9)					- 1	
Sireet Address 3 TERRI LANE  Site Address 3 TERRI LANE  Site Address 5 Site Address 7 Seeduled Start Date (10) August 20, 2018  Seeduled Start Date (10) August 20, 2018  Seeduled Start Date (10) August 20, 2018  Occupancy Status During Abatement (Check only one)  x Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hour- Describe Source of Work (Check all that spoly)  Source of Wor				0098								
3 TERRI LANE  S11 MAIN STREET  City. State. Zip Code BURLINGTON, NJ 08016  Telephone Number 609-386-3800  Scheduled Start Date (10) August 20, 2018  Coupancy Status During Abatement (Check only one) x Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe BUCher - Describe: 8am - 8pm - 24hrs&Weekends as Needed  Source of Work (Check ell that apply)  Source of Work (Check ell that apply)  Source of Work (Check ell that apply)  Source of Work (Check ell that special (ACM) in Facility (13) Solely by Maint/Custodial Staff (12) YES NO NA  Rms  161,162,163,164,173, 174,175 & 176  Rms  161,162,1							EMENT CO	DNSULTA	ANTS, INC			
Sity. State. Zip Code BURLINGTON, NJ 08016  Butter, NJ 07405  I telephone Number 609-386-8800  973-492-0477  Name of OSHA Monitor  Envirovision, Inc.    Streat Address   Streat Address   Streat Address   Streat Address	Street Address					Street Address						
City State, Zip Code BURLINGTON, NJ 08016  Project Manager for Monitoring Firm BRIAN KEARNY  Scheduled Start Date (10) August 8, 2018  Cocupancy Status During Abatement (Check only one) X Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Describe  EXIOther − Describe: 8am−8pm -24hrs&Weekends as Needed  Source of Work (Check all that apply)  ≥ 3 sf or ≥ 3 lf EXI Renovation Demolition Demolition Material (ACM) in Facility (13)  Raterial (ACM) in Facility (13)  Rems 161,162,163,164,173, 174,175 & 176  Name of Reg. Waste Hauler See Hauler Below # 1 & 2 See Below  Name of Reg. Waste Hauler NJ Dep # 12561 Hauler #2) Newark Carting, Inc. − Newark, NJ 04509, NJ DEP # 19551  Licensen for Monitor Itelephone Number Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number Telephone Number (1) 14 License Number 00840  Steet Address 20-21 Bldg E Wagaraw Road City, State, Zip Code Fairlawn, NJ   x Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedu	3 TERRI LANE					E44 MAIN OTDEET						
BURLINGTON, NJ 08016  Protect Manager for Monitoring Firm 509-386-8800  Scheduled Start Date (10) August 8, 2018  Scheduled Completion Date (11) August 8, 2018  Occupancy Status During Abatement (Check only one)  x Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describle    Solution of Assestos-Containing Material (ACM) in Facility (13)   Status											-	
Telephone Number   G93-386-8800   Scheduled Completion Date (11)   August 8, 2018   Scheduled Start Date (10)   August 8, 2018   Scheduled Start Date (10)   August 8, 2018   Scheduled Start Date (10)   August 20, 2018   Envirovision, Inc.											- 1	
BRIAM KEARNY  Scheduled Start Date (10) August 8, 2018  Scheduled Completion Date (11) August 20, 2018  Cocupancy Status During Abatement (Check only one)  x Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe  Source of Work (Check all that apply)  2 3 sf or ≥ 3 lf  Example 160 sf or ≥ 260  Source of Work (Check all that apply)  Location of Asbestos-Containing Material (ACM) in Facility (13)  Rems 161,162,163,164,173, 174,175 & 176  Name of Rec. Waste Hauler Bellow # 1 & 2  See Bellow  Rems 161,162,163,164,173, 174,175 & 176  Name of Rec. Waste Hauler Bellow # 1 & 2  See Bellow  Rems 161,162,163,164,173, 174,175 & 176  Name of Rec. Waste Hauler Bellow # 1 & 2  See Bellow  Title See Bellow  Raymond C. Pedalino  Scheduled Completion Date (11)  Name of City Mannotr  Remove Repair Encap Enclose  Scientary  Name of Rec. Pedalico  Pale  August 20, 2018  Name of Rec. Pedalico  Pale  August 3, 2018									- Land			
Scheduled Start Date (10) August 8, 2018    Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (11) August 20, 2018   Scheduled Completion Date (12) August 20,		g Firm				Telephone Number		License IV	umber			
Scheduled Start Date (10)   August 8, 2018   Scheduled Completion Date (11)   August 20, 2018   Scheduled Completion Date (11)   August 20, 2018   Scheduled Start Date (10)   August 20, 2018   Scheduled Start Date (11)   August 20, 2018   Scheduled Sched	BRIAN KEARNY		609-386-	8800		072 402 0477		00840				
August 8, 2018  August 20, 2018    Cocupancy Status During Abatement (Check only one)   X Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe   Izl Other – Describe: 8am – 8pm - 24hrs & Weekends as Needed   Izl Containment with Negative Pressure Mini-Enclosure   Glovebag Procedure   Signature	0.1.1.1.01.1.0.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.1.10.10		Cobodulad	Completion	2 Data (11)			000-10	-			
Source of Work (Check all that apply)   Sou						Name of Corra World						
Street Address   Street Address	August 6, 2016		August	20, 2010	,	Envirovision, Inc.						
x Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe  Source of Work (Check all that apply)  Source of Work (Check all that apply)  ≥ 3 sf or ≥ 3 lf  □ ≥ 160 sf or ≥ 260  Location of Asbestos-Containing Material (ACM) in Facility (13)  Rems 161,162,163,164,173, 174,175 & 176  Rame of Reg. Waste Hauler See Below  Rome of Reg. Waste Hauler See Below  NJDEP Waste Hauler ID # See Below  NJDEP Waste Hauler ID. = Cubic Yards of Waste: See Below  NJDEP # 12561  Hauler #1) Greenwood Abatement Consultants, Inc. – Newark, NJ 04509, NJ DEP # 19551    Completed by (Print or Type) Raymond C. Pedallino    Completed by (Print or Type) Raymond C. Pedallino   City, State, Zip Code   Fairlawn, NJ	Occupancy Status During A	batement	Check only o	ne)								
Abatement Performed Outside of Normal Facility Hours - Describe					ement							
Describe							aw Road					
Source of Work (Check all that apply)   Source of Work (Check all that apply)   X Full Containment with Negative Pressure   Solid					500	City, State, Zip Code						
Source of Work (Check all that apply)    Source of Work (Check all that apply)   X   Full Containment with Negative Pressure   X   Solor ≥ 3 lf   X   Renovation   Demolition   Glovebag Procedure   Non-Exempted (*) and Non-Friable Procedure   Non	Other - Describe:	Bam-8pi	m -24hrs&	Weeke	nds as	Fairlawn, N.J						
x Full Containment with Negative Pressure    ≥ 3 sf or ≥ 3 lf		Needed				Fairlawn, NJ						
x Full Containment with Negative Pressure    ≥ 3 sf or ≥ 3 lf												
E	Source of Work (Check all that	at apply)										
Demolition   Clovebag Procedure   Non-Exempted (*) and Non-Friable Procedure   Non-Exempted (*) and Non-Friable Procedure							x Full Co	ntainment v	with Negative	Pressu	ıre	
Demolition   Demolition   Glovebag Procedure   Non-Exempted (*) and Non-Friable Procedure   Non-Exempted (*) and Non-Exempted (*) and Non-Friable Procedure   Non-Exempted (*) and Non-Exempted (*) an	> 3 sf or > 3 lf				X Renovation	on	Mini-End	losure				
Non-Exempted (*) and Non-Friable Procedure					Demolition		Gloveba	g Procedu	re			
Material (ACM) in Facility (13)  Solely by Maint./Custodial Staff? (12) YES NO NA  Rms 161,162,163,164,173, 174,175 & 176  Name of Reg. Waste Hauler See Hauler Below # 1 & 2  Hauler #1) Greenwood Abatement Consultants, Inc. — Butler, NJ 07405  Hauler #2) Newark Carting, Inc. — Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Remove Repair Encap Enclose  (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)  (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)  (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)  (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)  (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)  (ACM) (i.e. thermal systems insulation, surfacing, vat, or LP)  (ACM) (i.e. thermal systems insulation, surfacing, vat, or LP)  (ACM) (i.e. thermal systems insulation, surfacing, vat, or LP)  (ACM) (i.e. thermal systems insulation, surfacing, vat, or LP)  (ACM) (i.e. thermal systems insulation, surfacing, vat, or LP)  (Specify SF or LF)  Remove Repair Encap Enclose  (ACM) (i.e. thermal systems insulation, surfacing, vat, or LP)  (Specify SF or LF)  Remove Repair Encap Enclose  (ACM) (i.e. thermal systems insulation, surfacing, vat, or LP)  (Specify SF or LF)  Remove Repair Encap Enclose							Non-Exemp	oted (*) and	Non-Friable	Proced	lure	
Rms 161,162,163,164,173, 174,175 & 176  Name of Reg. Waste Hauler See Hauler Below # 1 & 2  Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405 NJ DEP # 12561 Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Remove Repair Entable Entable Librate  VAT, or other miscell.)  Or LF)  Remove Repair Entable	Location of Asbestos-Contain	ing Is L	ocation Norma	lly Used	Description of Ast	pestos Containing Material		A. 1907 - 190	atement Type	£		
Rms 161,162,163,164,173, 174,175 & 176  Name of Reg. Waste Hauler See Hauler Below # 1 & 2  Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405 NJ DEP # 12561 Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Raymond C. Pedalino  Vinyl Sheet & VAT  1,600 sf  Cubic Yards of Waste: 30  City. State 100 New Ford Mill Road, Morrisville, PA 19067 215-736-1700  Completed by (Print or Type) Raymond C. Pedalino  Signature Raymond C. Pedalino  Date August 3, 2018	Material (ACM) in Facility (13			ustodial			ing, (Specif	y SF	move Renair I	Encap E	nclose	
Rms 161,162,163,164,173, 174,175 & 176  Name of Reg. Waste Hauler See Hauler Below # 1 & 2  Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405 NJ DEP # 12561 Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Raymond C. Pedalino  Vinyl Sheet & VAT  1,600 sf    Mame of Registered Landfill   Cubic Yards of Waste: 30   GROWS North Landfill   City, State   100 New Ford Mill   Road, Morrisville, PA   19067   215-736-1700    Date   August 3, 2018		11			VAT, or other mis	cell.)	or LF)	100	inove repair	2110019		
161,162,163,164,173, 174,175 & 176  Name of Reg. Waste Hauler See Hauler Below # 1 & 2  Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405 NJ DEP # 12561 Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Raymond C. Pedalino  NJDEP # 12561  See Below  Cubic Yards of Waste: 30  Disposal Date August 20, 2018  City. State 100 New Ford Mill Road, Morrisville, PA 19067 215-736-1700  Date August 3, 2018		YE		NA T	101 1	0 1/4 7	4 600	- IV	1			
Name of Reg. Waste Hauler   See Hauler Below # 1 & 2   See Below			IXI		Vinyl Sheet	& VAI	1,000	Si	4			
Name of Reg. Waste Hauler See Hauler Below # 1 & 2  Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405  NJ DEP # 12561  Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Raymond C. Pedalino  NJDEP Waste Hauler ID # See Below  Cubic Yards of Waste:  GROWS North Landfill  Disposal Date August 20, 2018  City, State 100 New Ford Mill Road, Morrisville, PA 19067 215-736-1700  Date August 3, 2018	161,162,163,164,173,											
See Hauler Below # 1 & 2  See Below  See Below  See Below  See Below  Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405  NJ DEP # 12561  Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Raymond C. Pedalino  See Below  See Below  See Below  See Below  30  GROWS North Landfill  Disposal Date  August 20, 2018  Scity, State 100 New Ford Mill Road, Morrisville, PA 19067 215-736-1700  Date August 3, 2018	174,175 & 176											
Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405  NJ DEP # 12561  Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Raymond C. Pedalino  SENIOR PROJECT  Disposal Date August 20, 2018  City, State 100 New Ford Mill Road, Morrisville, PA 19067 215-736-1700  Date August 3, 2018	Name of Reg. Waste Hauler		-		ID#	Cubic Yards of Waste:		Name of I	Registered La	<u>ndfill</u>	1	
NJ DEP # 12561 Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Raymond C. Pedalino  August 20, 2018  100 New Ford Mill Road, Morrisville, PA 19067 215-736-1700  Signature Raymond C. Pedalino  Date August 3, 2018	See Hauler Below # 1 &	2	See Belov	N		30	-					
NJ DEP # 12561 Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Raymond C. Pedalino  Title SENIOR PROJECT  August 20, 2018  Road, Morrisville, PA 19067 215-736-1700  Date August 3, 2018	Hauler #1) Greenwood	Abateme	ent Consult	ants. Inc	c Butler, NJ 0	7405						
Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551  Completed by (Print or Type) Raymond C. Pedalino  Title SENIOR PROJECT  Signature Raymond C. Pedalino  Date August 3, 2018							August 2	20, 2018				
Completed by (Print or Type) Raymond C. Pedalino  Title Senior Project Resumend C. Pedalino  Title Resumend C. Pedalino  August 3, 2018			Nawark N	1.04509	NI DEP # 19551					MISVIIIC	, , ,	
Completed by (Print or Type) Raymond C. Pedalino  SENIOR PROJECT  Raymond C. Pedalino  Signature  Raymond C. Pedalino  August 3, 2018	Hautet #2) Newark Car	ing, inc.	- Hemain, IN	0 0430),	1.0 1/1/031					1700		
Raymond C. Pedalino SENIOR PROJECT Raymond C. Pedalino August 3, 2018												
Raymond C. Pedalino SENIOR PROJECT Raymond C. Pedalino August 3, 2018	Completed by (Print or Type)	T	Title			Signature		Date				
Commont of Columns				ROJE	CT				st 3, 2018			
	Naymond G. I edal					zaymona C. readuno						



Date of Notification (1)				Name of Building Owner/Operator (2)								-
6 /27	_ / _	18		Ru	tgers Uni	iversity	/ Job#	1805-2318 C	hk. #	NA		
Agencies Notified Typ	e Notifica	ation		Street	t Address			1/18	11.	12		
	Initial			33	Knightsb	ridge Road	- H		1	ţ		
	Amended			City, S	State, Zip (	Code	1999	7. (S. 1. (4) (H. ))	,Q	- 6		
	Amendme					NJ 08854		A Marie		7		
DCA (NJAC 5:23-8)	Emergen justification	cy (includ	ng		of Contac			Telephone Numb	ner			
	Cancellat			100000000000000000000000000000000000000	an Stanto	(T)		848-445-241				
		37700				IFORMATION		040 440 241				-
Name of Facility Where Abate	ment is T	aking Pla	ce (3)		OILII I III	ii Ortinariioit	Type of Facility	(4)				
Building #3716 & 3717			20 50				School (K-12					
Street Address	(0112.2)	01201110	,				Subchapter	(Other than K-12)	1			
581 Taylor Road							Other (i.e., p homes, etc.)	rivate and commer	cial bu	ilding	s,	
City (5)							Square Feet	# of Floors	Ble	dg. A	ne e	
Piscataway							1875	1	1 .	50	90	
County (6)				Cour	nty Code (7	)(STATE USE ONLY)		ior if being demolis				
Middlesex					,	(C 2 002 0112.1)	Vacant	ioi ii beilig delliolis	ilicu)			
Name of Monitoring Firm Hire	d by Build	lina Owne	r (8)	ASCM	No	Name of Abateme		r				_
Criterion Laboratories	a by band	ang owne	. (0)	/100W	140.		d Mold Service					
Street Address						Street Address	a Mola Selvice	ъ, согр.				
400 Street Road						3859 Sylon B	oulovard					
City, State, Zip Code						City, State, Zip Co	Control of the State Sta					
Bensalem, PA 19020						Hainesport, N						
Project Manager for Monitorin	a Firm		Tel	ephone	No	Telephone No.	10 00000	License No.				-
Mike Panepresso	3			15-244		609-702-0400	ř.	00862				
Start Date (10)	S	cheduled		** W -012/2000 12 - 10		Name of OSHA M		00002				
7 / 13 / 18				0 /		EMSL Analyt						
Occupancy Status During Aba	tement (0	Check only	one)			Street Address						$\neg$
☐ Facility Closed/Vacated Du	ring Entir	e Period	of Abate	ement		200 U.S. Rou	te 130 North					
☐ Abatement Performed Outs						City, State, Zip Co	ode					_
Time of Abatement:	_AM	PM/	PN	l	AM	Cinnaminsor						
Scope of Work (Check all that	apply)							ative Deserves				
≥3 sf or ≥3 lf		⊠ F	Renova	tion		☐ Mini-Enc	tainment with Neg losure	jative Pressure				
≥160 sf or ≥260 lf			Demolit	ion			g Procedure					
			I. I		1	⊠ Non-Exe	mpted (*) and No	n-Friable Procedur			ureno un reci	
Location of			Is Loca Norma			Description			Ab	atem	ent T	уре
Asbestos-Containing Mate	rial (ACM		sed So	lely by	Asbe	Description o stos Containing Ma		Amount	Rer	Repair	Enc	En
TO BE ABATED	25	17	lainten etodial	ance/ Staff?		., thermal systems	insulation,	(Specify	Removal	Dair	aps	Enclosure
IN Facility (13)			(12			surfacing, VAT other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
(1.0)		Ye	s No	N/A		other miscellane	ous)				te	
Exterior 3716					Transit	e Siding		1875 SF				
Exterior 3717					Transit	e Siding		1875 SF				
										П	П	П
						Cubic Yards of	Name of Regis	stered Landfill				_
Champion			1	Hauler II		Waste	Grand Cen					
City, State				32707		5 Disposal Date	City, State					
Hainesport, NJ						8/10/18	Penn Argy	le, PA				
Completed By (Print or Type)		Title				Signature	1	Da				
Kimberly Trumbetti		Office	Coor	dinato	r	(XO)		6	3-6	-18		
						T X X	I/		~	. 0		

ASB-41 MAY 11

OK 2019	AL RETER	~ <sub>0</sub>		State of	New Jers								Print
Date of Notification (1)	AII	NOT	(Pursua	ON OF A	AC 8:60 a	S ABAT	20)	and desired spherite	ME	C			$\mathbb{V}$
08/08/2018			Name	e of Build ntclair S	ing Owner tate Uni	r/Operato	or (2)		M				
Agencies Notified Type Notificati	on		Stree	t Address	3	voroity				AUG		) 21	018
X DEP Amended Amended	ent#			State, Zip	Code IJ 07043	2		rintenco	ASI	BEST			
DOH Emergence justification Cancellat	n)	ng	Name	of Conta	oct			<u>[</u> _	elephone N	-	CENS	SING	Bestandere
Gariocitat				ry Orno	vitz NFORMAT	TION		9	73-655-5	457			
Name of Facility Where Abatement is Ta Richardson Hall	king Place	(3)		olenn n	II OINMA	ITON	Type of Facility	/ (4)					
Street Address 1 Normal Avenue							Other (i.e	er 8 (Ot	her than K	-12) rcial b	uilding	s, hor	mes
City (5) Montclair							Square Feet		of Floors		Bldg.		
County (6) Essex			County	y Code (7	)		Current Use (P	rior if be	eina demoli	shed)			
Name of Monitoring Firm Hired by Buildin	g Owner (	8)		E USE ON	LY)		university						
Detail Associates Inc Street Address			001			VMC	of Abatement Co Company In	ontracto C	r (9)				
300 Grand Avenue		1					Address Piaget Avenu	2					
City, State, Zip Code Englewood, NJ 07631						City, S	State, Zip Code on NJ 07011						
Project Manager for Monitoring Firm Steven Jaraczewski			Teleph	one No. 669-670	0	Teleph	none No.		License	No.			
Start Date (10) 08/17/2018	Schedu	ıled Co		Date (11			253-8828 of OSHA Monitor		00704				
Occupancy Status During Abatement (Che	Ck Only	127	120	218		VMC	Company Ind						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: 2 weekends work	Period of	Abate	T-de	lam			Address late, Zip Code						
Scope of Work (Check All That Apply)	7711110	.oopin	1011.7.00	Jam									
≥3 sf or ≥3 If × ≥160 sf or ≥260 If	×	Renova Demoli	ation tion			×	Full Containm Mini-Enclosur Glovebag Pro						
Landing C		s Locat					14011-Exemple	J ( ) and	i Non-Friat	ole Pro		e ement	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Us	Norma ed Sole aintena	lv bv	Asbe:	stos Conta	scription of	aterial (ACM)	٨	mount	-	Ту	ре	
In Facility (13)		todial (12)		(i.e	thermal: surfac	systems sing, VAT siscellane	insulation,	(S	pecify or LF)	Remova	Repair	Encapsulate	Enclosure
4 Attic Fan Rooms	Yes	No	N/A							<u>m</u>		ate	Ire
4 Roof Fan Rooms						e fitting			0 EA	×			
200 100000118				Pipe	e fitting	S	80	EA	х				
Name of Registered Waste Hauler													
Newark Carting Inc	H	JDEP W auler ID 5409		Cubic Y of Wast		Name of F		ed Landfill	-				
City, State Newark, NJ			Disposal Date City, State										
Completed by Voytek Roszkowski	Title	2 <b>4</b> *******	Signature			Worrisvi	orrisville, PA						
-1.0051/OW3//I	dent	nt Did oo				Date 08/08/2018							

Date of Notification (1)				Nam	e of Buildir	ng Owner/Operator	(2)				
8/	7 / 1	88		1,000,000	ate of Ne		Printed and	#1808 2332	Chk. #5	107	
Agencies Notified	Type Notification  ☑ Initial	n			et Address	111			Total City and Changes		
☑ DOLWD	☐ Amended					ay Avenue	111	0.010	The state of the s		
☑ DHSS	Amendment	#			State, Zip	1 -4	Li Auto	3 2018			
☐ DCA	☐ Emergency (	includir	ig		enton, NJ		17	439	-		
(NJAC 5:23-8)	justification)			HONGE YOUR	e of Contac		ASBESTOS	Telephone Nu	mber		
	Cancellation			-		uatermas	LICE	N 609-530-41	156		
Name of Facility Where A	hatement is Taki	na Plac	2 (2)	FA	CILITY IN	NFORMATION	1-				
NJ DOT West Trento							Type of Facility  ☐ School (K-1)				
Street Address		o rui						· 8 (Other than K-1	12)		
780 Bear Tavern Ro	ad						Other (i.e.,	private and comm	ercial build	lings,	
City (5)							homes, etc				
Ewing							Square Feet	# of Floors	Bldg	. Age	
County (6)				Cou	-h . Ol - /	7\/07475.1105.0411.4		1			
Mercer				Cou	nty Code (/	(STATE USE ONLY)	,	rior if being demo	lished)		
Name of Monitoring Firm I	dired by Building	Owner	(0)	ACCN		T.,	Maintenan				
Environmental Conr		Owner	(0)	ASCM	NO.	Name of Abatem					
Street Address	lection, inc.						d Mold Servic	es, Corp.			
120 North Warren St	root					Street Address					
City, State, Zip Code	ieet					3859 Sylon I					
Trenton, NJ 08625						City, State, Zip C					
Project Manager for Monito	oring Circo		1=1			Hainesport,	NJ 08036				
Roland Jones	oning Firm			ephone		Telephone No.		License No.			
Start Date (10)	Caba	4.1.16			2-4200	609-702-0400		00862			
8 /16 / _					ate (11) 18	Name of OSHA MEMSL Analys	theritana art		president of the second		
Occupancy Status During						Street Address					
☐ Facility Closed/Vacated	During Entire Pe	eriod of	Abate	ment		200 U.S. Rou	te 130 North				
Abatement Performed (	Outside of Norma	I Facilit	y Hou	rs - Des	scribe	City, State, Zip C					-
Time of Abatement:	P	M/	PM		_AM	Cinnaminsor					
Scope of Work (Check all t	hat apply)					22 - 20 - 20 - 20 - 20 - 20 - 20 - 20 -					-
≥3 sf or ≥3 lf		⊠ Re	novat	ion		Full Con	tainment with Ne	gative Pressure			
☐ ≥160 sf or ≥260 lf		De				☐ Mini-End	g Procedure				
						Non-Exe     Non-Exe	mpted (*) and No	on-Friable Procedi	ure		
2 12		1000	Loca						Abate	ment T	ype
Location of Asbestos-Containing M			Norma	ely by		Description of				1 100	
TO BE ABAT	ED	Ma	intena	ince/		stos Containing Ma , thermal systems		Amount (Specify	Remov	nca	nclo
IN Facility		Cus	todial (12)	Staff?	(	surfacing, VAT	, or	SF or LF)	Removal	Encapsulate	Enclosure
(13)		Yes	No.	NI/A	1	other miscellane	ous)			late	Ø.
Office & Breakroom		l es		N/A	Floor Ti	le & Mastic		252.05		-	
Mechanical Rom			100					650 SF		1	
Building 1402					Transite			4 LF			
Danumy 1402			Suspen	ded Ceiling Grid	1	150 SF					
Name of Registered Waste	Harden		Ц								
Waste Management	nauler		1000	JDEP V	2-350	Cubic Yards of Waste	Name of Regis				
				17273	20042000000	5	Grand Cer	ntral			
City, State						Disposal Date	City, State				
Lafayette, NJ						8/24/2018	Penn Argy	le, PA			
Completed By (Print or Type		9				Signature			ate		
Kimberly A. Trumbett	i O	ffice (	oord	linator	i .	K		1000	8-7-1	0	
ASB-41						KIJ	V		0 1 1	ð	
MAY 11	*	Do not	use th	is form	for asbesto	s licensure exemp	ted activities.				

**MAY 11** 

Date of Notification (1)					Name of	Building	Owner/Operator (	217	EGE	计划员	117/1			
8 /	7 / 1	18				Mission	5.1		ob #1808-23	A ST. OF THE PARTY	5106			
Agencies Notified	Type Notification	n			Street A	ddress		11	M ALIC	9 2018	11111			
□ EPA	Initial     Initial				99 Ea	st Main	Street		11 A00	5 2010	1 constant			
☑ DOLWD	☐ Amended			-	City Sta	te, Zip Co	ode	_						
□ DHSS	Amendment					on, NJ 0			ASBESTOS	S CONTROL &	ž			
☐ DCA	☐ Emergency		ding	-	0.0000000000000000000000000000000000000	f Contact	Supplemental Control of the Control			Telephone Num		4		
(NJAC 5:23-8)	justification)								-	856-983-041				
	☐ Cancellation					Gilmore				000-000-04	-			
N	Ab stancest in Tak	ina Di	200 (3	1	FACI	LITY IN	FORMATION	Tv	pe of Facility (4	3)				
Name of Facility Where	Abatement is Tak	ing Pi	ace (3	)				1	School (K-12)	,				
Wiley Community								10	Subchapter 8	Other than K-12	2)			
Street Address										vate and comme	ercial bui	ldings		
93 East Main Stree	ŧt							_	homes, etc.)	T., 55	DIA	- ^-		
City (5)									uare Feet	# of Floors		g. Ag	3	
Mariton									1500	3		5+-		
County (6)		44-19-			County	/ Code (7)	(STATE USE ONLY)	Cu	irrent Use (Prio	r if being demol	ished)			
Burlington									Vacatn					
Name of Monitoring Firm	n Hired by Buildin	g Owr	ner (8)	I	SCM N	0.	Name of Abatem	ent (	Contractor (9)					
Criterion Laborato							Asbestos an	nd N	lold Services	s, Corp.				
Street Address							Street Address							
New Street							3859 Sylon B	Bou	levard					
City, State, Zip Code						-	City, State, Zip C		2 1 1 20 20 20 20 20 20 20 20 20 20 20 20 20					-
Bensalem, PA							Hainesport,							
	nitarina Eirm			Tala	phone N	lo.	Telephone No.			License No.				
Project Manager for Mon	milling Film				5-244-		609-702-040	0		00862				
Mike Panepresso	10-1		-4 00		tion Date		Name of OSHA		itor					
Start Date (10) 8 / 20 /							EMSL Analy							
Occupancy Status Durin		eck o	nly on	e)			Street Address							
☐ Facility Closed/Vaca					ment		200 U.S. Ro	ute	130 North					
☐ Abatement Performe						ribe	City, State, Zip C							
Time of Abatement:	AM	_PM/		PM-	P	M	Cinnaminso							
Scope of Work (Check a		21-0-3								. 5				
1 12 10 10 10 10 10 10 10 10 10 10 10 10 10			7	4:			☐ Full Co		ment with Neg		140	L		
≥3 sf or ≥3 lf     ≥160 sf or ≥260 lf			Ren Dem				Gloveb	ag P	rocedure		12 cu			
		_					☐ Non-Ex	cemp	ted (*) and Nor	n-Friable Proced	dure			
			ls l	ocat	tion						Ab	atem	ent Ty	уре
Locatio	on of			orma		6) 	Description				R	Re	Щ	En
Asbestos-Containing					ely by ance/		estos Containing M			Amount (Specify	Removal	Repair	cap	clo
TO BE A			100		Staff?	(1.€	e., thermal systems surfacing, VA			SF or LF)	oval	=	Encapsulate	Enclosure
IN Fac				(12)			other miscellar						ate	(D
(10)			Yes	No	N/A									
Interior					$\boxtimes$	Duct w	rith asbestos w	rap		30 LF				
					$\boxtimes$									
			П											
Nome of Desistered M	acta Hauler			NJDEP I	Naste	Cubic Yards of	П	Name of Regis	stered Landfill					
Name of Registered W Waste Manageme				Hauler II	No.	Waste		Grand Cen						
					17273	3	5 Disposal Date	-	City, State		7-2 (200-00-00)			
City, State							8/20/18		Penn Argy	le. PA				
Lafayette, NJ									i cilii Aigy	,	Data			
Completed By (Print or		Title		3			Signature	, 6	1 _		Date	.10	,	
Kimberly A. Trum	betti	Of	tice (	oor	dinato	r					8-7	-18		

**MAY 11** 

OK 547

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

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Date of Notification (1)  08 /	07 /	18			1	e of Buildin	-	wner/Operator (	(2)	们		L L	-	The same of the sa	The state of the s
Agencies Notified										111 4	UG -	9 2	018	-	
EPA	Type Notific	ation			200200000	t Address	000000000	■ entralement	7	1-2		-	010	4-6002/41	ment
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☑ DHSS	Amendm					State, Zip (				ASBE	STOS			. &	
☐ DCA	☐ Emerger	ncy (inc	cluding	9		hite Plain		NY 10601	L		LICEN	SING		Pilota Parrol.	
(NJAC 5:23-8)	justificati				Name	e of Contac	t			Telepho	ne Numi	per			
	☐ Cancella	tion			Dir	no Nappi				516-9	72-880	9			
Name of Facility 18th and 1	h - 4 4 ! - *		-	(0)	FA	CILITY IN	IFO	RMATION							
Name of Facility Where A	batement is	laking	Place	(3)					Type of Facility						
Bank of America									School (K-12		on V 10	v :			
Street Address									Other (i.e., p				uilding	IS.	
186 Newark									homes, etc.)					20115	
City (5)									Square Feet	# of Flo	ors	BI	dg. A	ge	
Jersey City, NJ										1			45		
County (6)					Cou	nty Code (7	7)(ST/	ATE USE ONLY)	Current Use (Pr	ior if being	demolis	hed)			
Hudson															
Name of Monitoring Firm		ding O	wner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)						
New York Environm	ental						١.	JVN Restorat	tion Inc						
Street Address							Str	reet Address							
88 Harbor Road							4	47 Foster Ro	ad						
City, State, Zip Code							Cit	y, State, Zip Co	ode						
Port Washington, N	Y 11050							Staten Island	NY 10309						
Project Manager for Monit	toring Firm			Tele	phone	No.	Te	lephone No.		License	No.				_
Michael Baudo				1		-9500	1 12	18-605-6256		0077					
Start Date (10)	5	Schedu	ıled C	omple	tion Da	ite (11)		me of OSHA M			•				
08/18/						18		Testor Tech	iornicor.						
Occupancy Status During															
☐ Facility Closed/Vacated					mont		1	eet Address							
						scribe		10- 59 Jackso							
Time of Abatement:	AM-1:0	0PM/9	:30PI	VI	AM	Johnson	1 :	y, State, Zip Co							
Scope of Work (Check all	that apply)							IC NY 11101							
Scope of Work (Check all	triat apply)							☐ Full Cont	ainment with Neg	ative Pres	SUITA				
≥3 sf or ≥3 lf			⊠ Re					☐ Mini-Encl	losure	janvo i 103	Suic				
≥160 sf or ≥260 lf		[	_ De	molitic	on			Glovebag	Procedure						
			le	Locat	ion	Т		⊠ Non-Exer	mpted (*) and No	n-Friable F	rocedur	1			
Location of	of			Norma				Description of	f			Ab	atem	ent T	уре
Asbestos-Containing N		1)		d Sole		Asbe	stos	Containing Mar		Amo	unt	Rei	Repair	Enc	E
TO BE ABAT				intena	nce/ Staff?	(i.e		ermal systems i		(Spe		Removal	oair	ap	Enclosure
IN Facility (13)	У		Ouoi	(12)	otan:			surfacing, VAT, her miscellaned		SF or	LF)	a		Encapsulate	ure
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1st Floor			П	$\boxtimes$		Wall Pa	Iste	r		120	SE.		П	П	П
								•		120	<u> </u>			_	
														Ш	
Name of Registered Waste	N	JDEP \	Vaste	Cut	oic Yards of	Name of Regis	tered Land	Ifill				_			
Newark Carting				H	auler II		Wa	ste 5	IESI						
City, State								posal Date	City, State						
Newark, NJ								9/30/2018	Bethlehem	,PA					
Completed By (Print or Ty	pe)	Title						Signature/ /	1 111		Dat	e			_
Ralph Barnhardt	N2025#2	251807	oject	Man	ager			MI	h /hh	10	-		۵.7	-19	3

ASB-41 MAY 11

#### State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)				Name	of Buildin	g Owner/Operator	(2)	9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	18 /	18		SA	F 427 Blo	oomfield, LLC	AUG 7	Job #1807-2322		Chk.	#NA	
Agencies Notified	Type Notifica	ation		Street	Address		No. of Contrast		· ·			
☑ EPA	☐ Initial			339	Jefferso	n Road	ASBESTOS C	CONTROL &	5			
☑ DOLWD				City, S	State, Zip C	Code	LICEN					
□ DHSS	Amendm			Par	sippany.	NY 07054	Name of the Control o	**************************************	o desired			
DCA (NJAC 5:23-8)	☐ Emergen justification		9	-	of Contac			Telephone Numi	ner		_	
(110/10 0.20 0)	☐ Cancellat			The Shirt	thew Rir			973-953-235				
				FA	CILITY IN	IFORMATION						
Name of Facility Where A	batement is 7	Taking Place	(3)				Type of Facility (	(4)				
Office							School (K-12					
Street Address							Subchapter 8	(Other than K-12)	) roial bu	ildina		
427 Bloomfield Ave	nue						homes, etc.)	ivate and comme	Ciai Di	manig	ιο,	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Montclair							30,000	4		1910		
County (6)				Cour	ity Code (7	)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Essex							Office					
Name of Monitoring Firm	150	ding Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
Finog Environmenta	al					Asbestos an	d Mold Service	s, Corp.				
Street Address						Street Address						
617 Stokes Rd., Sui	te 4-318					3859 Sylon E	Soulevard					
City, State, Zip Code						City, State, Zip C	ode	100			12	
Medford, NJ 08055						Hainesport, I	NJ 08036					
Project Manager for Monit	toring Firm		Tele	phone	No.	Telephone No.		License No.				
Rebecca Rubnitz					5-2211	609-702-0400	<u>l</u>	00862				
Start Date (10)		Scheduled C				Name of OSHA N						
8/3/.	18	8 /	4	_ / -	18	EMSL Analyt	ical, Inc.					
Occupancy Status During				24		Street Address						
☐ Facility Closed/Vacate						200 U.S. Rou	te 130 North					
Abatement Performed Time of Abatement:						City, State, Zip Co				12		
Scope of Work (Check all	that apply)					CilillatitiisOi	1, 143 00077					
☐ ≥3 sf or ≥3 lf		⊠ Re	novati	on		☐ Full Con	tainment with Neg	ative Pressure				
≥160 sf or ≥260 lf			molitic				g Procedure					
						☐ Non-Exe	mpted (*) and Nor	n-Friable Procedur	e			
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Location of Asbestos-Containing N			Norma		Acho	Description o stos Containing Ma		Amount	Re	Re	En	<u>n</u>
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IN Facility	y	Cus	todial (12)	Staff?		surfacing, VAT		SF or LF)	val		Encapsulate	Enclosure
(13)		Yes	No.	N/A		other miscellane	ous)				ate	
4 <sup>th</sup> Floor		П		×	Carnet	& Floor Tile		800 SF				
11001					Carpet	a 11001 Tile		000 31				
				-				74.5 				
N										Ш	Ш	
Name of Registered Wast			100000	JDEP \ auler II		Cubic Yards of Waste	Name of Regist					
Waste Management				17273		5	Grand Cen	trai				
City, State						Disposal Date	City, State					
Lafayette, NJ		1				8/4/18	Penn Argyl	e, PA				
Completed By (Print or Ty		Title	_			Signature		Da	7.2	1	0	
Kimberly A. Trumbe	ττι	Office	Coord	linatoi		(et )			8-6	7-1	Ö	

ASB-41 **MAY 11** 



#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 7 26 / 18 Mr. Robert Cerenzo / Job #1806-2311 Chk. # Type Notification Agencies Notified Street Address **⊠** EPA ☐ Initial **⊠** DOLWD ASBESTOS CONTROL & City, State, Zip Code **⊠** DHSS Amendment #2 LICENSING Hamilton, NJ 08690 ☐ Emergency (including ☐ DCA Name of Contact (NJAC 5:23-8) justification) Telephone Number ☐ Cancellation Robert FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residential School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Hamilton 1500 1 78 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Mercer Residential Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Finog Environmental Asbestos and Mold Services, Corp. Street Address Street Address 617 Stokes Rd., Suite 4-318 3859 Sylon Boulevard City, State, Zip Code City, State, Zip Code Medford, NJ 08055 Hainesport, NJ 08036 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Rebecca Rubinitz (888) 715-2211 609-702-0400 00862 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8 / 6 / 18 8 / 10 / 18 EMSL Analytical, Inc. Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 200 U.S. Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_AM-\_\_\_PM/\_\_ Cinnaminson, NJ 08077 Scope of Work (Check all that apply) □ Renovation ☐ >3 sf or >3 lf ☐ Mini-Enclosure ☐ Glovebag Proc ≥160 sf or ≥260 lf □ Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Encapsulate Enclosure Used Solely by Remova 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 SF or LF) (12)(13)other miscellaneous) Yes No N/A Rasement  $\boxtimes$ Floor Tile & Mastic 375 SF X  $\boxtimes$ Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Waste Management **Grand Central** 17273 5 City, State Disposal Date City, State Lafayette, NJ 8/10/2018 Penn Argyle, PA Completed By (Print or Type) Title Signature Date

ASB-41 MAY 11

Kimberly A. Trumbetti

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

8-10-18

Office Coordinator

(K, 47)4

			I M	ama of E	Building Ow	mer/Onerat	tor (2)	- 1:1-	9	GE	1	W	51	M
Date of Notification (1)			IN.		PRANC			ACR		9 13				
Agencies Notified	Type Notification		St	reet Add	lress		7.5	111		AUG -	0 0	nig.	and the same of	
□ EPA	Initial ·								111	AUG	U E.	010	- 1	
DEP	☐ Amended .		C	ity, State	, Zip Code			15	ر <u>ا</u> م	6			-	
DOL	Amendment #_  Emergency (in	chiding	- L	H.	AWTH	ORNE	5 . N	NJ. 0	750	phone Number	DON	TRO	<u>. 0.</u>	_
ET DOH	justification)	ciuumg	N	ame of C					lele	onone Number				-
□ DCA	☐ Cancellation				- ACR									-
" " "	· · · · · · · · · · · · · · · · · · ·	(2)		FACIL	ITY INFOI	RMATIO	N T	ype of Facility (4	)					$\neg$
Name of Facility Where Al		ice (3)						School (K-12	)					
Street Address						8		Subchapter 8 Other (i.e. pr	(Other t	han K-12) commercial b	uilding	s, hon	ies, etc	:.)
City (5)	F# 389 (55)					i.		quare Feet	# of	Floors	1	ig. Ag		
HAUTHE	SIDE			1,				1800	<u></u>	2	1	7	35	
County (6) PAS				County C	ode (7) SE ONLY)		10	Current Use (Prior						
			(				-	Abatement Contra						$\dashv$
Name of Monitoring Firm	Hired by Building Ow	mer (8)		ASCM	No.									
						B	est Street Ad	Removal	Inc					-
Street Address						1.5		South Ri	TOR	Straa	+			
				_				te, Zip Code	ver	DLIEE				
City, State, Zip Code								ensack,	NT C	7601				
5 : 36 6 36 :				elephon	e No		Telephon		INO C	License No.				
Project Manager for Monit	ect Manager for Monitoring Firm									0038	ρ			
Ctual Data (10)	rt Date (10) Schedu					I N	Name of	3 2 9 – 7 4 4 4 OSHA Monitor		00.70	<u></u>			
Start Date (10)	, 8	R	21		()		lm 0 00	a Enviro	nmai	1 + 2 1				
Occupancy Status During		ly One)		, 0		S	Street Ac	idress	111111111111111111111111111111111111111	- Colored				
The state of the s	ated During Entire Peri		ement			2	.80 I	Huyler S	tree	et				
Danie	d Outside of Normal I	Pacility Hou	TC			C	City, Sta	te, Zip Code						
Other - Describe: _	8:30 AH TO	2:5	201,	-		- s	outl	h Hacken	sacl	c, NJ	076	06		
Scope of Work (Check Al	l That Apply)								•					1
≥3 sf or ≥3 lf		-ET R	enovati	on				Full Containme		Negative Pres	sure			1
□ ≥160 sf or ≥260 lf			emoliti	on			4	Mini-Enclosure Glovebag Proce	edure					
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TO BE AF			odial S		(i.e. then		ns insula AT, or	tion, surfacing,		F or LF)	Remova	Repair	aps	Enclosure
(13			(12)			other mi	iscellane	ous)			val	Ħ.	Encapsulate	sure
0.00,5.0.4		Yes	No	N/A	1									
BASEMEN			press.	V	-11-01			I SILL ATION	-	25 UF	×			
13 FDET LER				+	THERMA	K 2821	CH2 1	NOITALION						
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Name of Registered Wast	te Hauler		1	JDEP Wauler ID		Cubic Ya		Name of	Register	ed Landfill				
	1 T		H			UL Waste	2	eTS Mine	rva	Enter	pri	ses		LLC
Best Remova	1 Inc			171	19	Disposal		City, Star					8	
1	NI 07/01						21/1	8 Wayn	eshi	irg. O	H 4	468	8.8	
Hackensack, Completed by	NJ 0/601	Title				Sig	gnature	0		Da Da	ite 1	1	.0	
Maria	J. Maiorano Es						V	orsus	سرد	5	ď	16	18	
J. Harorano		1 200					$\Lambda$			10 100 1200		Ĺ		
4SR_41 (R_06_08)							J	Do not use this fo	rm for a	sbestos licens	ure ex	empte	i activ	ities.

40	AID					TOS ABATEMENT 7 and 12:120-7	,	F	- FP G	O P	n	\\//	ET
Date of Notification	n (1)		_			Owner/Operator			1 12 (	2 E	-11	W	BIP
8/6/2018			Je	remy	Car	lisle							
Agencies Notified	Type Notifica	tion	Stree	t Addı	ess				iii Ai	UC -	0	2018	
[ ]EPA	[X]Initial								PV	Q1.		2010	l hour
[ ]DEP	Notifica	tion	City,	State	, Zip	Code			L				A Partie
[X]DOL	[ ]Amended		0.37000		22	NJ,07042			ASBE	STOS	CO	NTRO	L &
[X]DOH	Notifica	ne-en-week	Name	of Cor	tact		Tel	ephone	Number	Luville	101	4 W	-
[ ]DCA	[ ]EMERGENCY	4.0				lisle	101	epiione	Number				
	[ ]Cancellat	ion		4									
						INFORMATION							
Name of Facility Wh Jeremy Carlis		s Takır	ng Pla	ace (3	)		Type of I	Facilit	y (4)				
ociemy carrie	.16							hool (K	-12) r 8 (Othe	or th	an i	r_12)	
Street Addres							[X]Oth	ner (i.	e., priva	ate &	CO	mmer-	
							c	ial bui	ldings, 1	homes	, e	tc.)	
City (5	10	ounty (	(6) Fee	207	Con	nty Code (7)	Square Fe	eet	# of Floo	ors	Blo	lg. Ag	e
0201 (0		ouncy (	(0) 232	CA		ATE USE ONLY)	Cummont I	Inc. (De	i i 6 h			-1 b -	- 41
Montclair	E	ssex					Current U	Jse (Pr	lor ii be	eing o	iemo	olisne	30)
Name of Monitoring	Firm hired by B	uilding	J ASC	CM No.		Name of Abate	ment Contr	cactor	(9)				
Owner (8) N/A						AZTECH M	IANAGEM	ENT,	Inc.				
Street Address			!_			Street Addres	s						
						86 Chris	topher	St.					
City, State, Zip Co	de			Olloc		City, State,	Zip Code						
						Montclai	r, NJ	07042	2				
Project Manager for	Monitoring Fir	m Tel	ephon	e Numb	er	Telephone Num	ber		þ	Licens	se :	Number	<u> </u>
		N/	A			(973)744	-8800			003	371	L	
Scheduled Start Date	e (10) Sched	. Compl	etion	Date	(11)	Name of OSHA	Monitor						
9 4	18 9		6	18		N/A							
Month Day Y Occupancy Status Du	Cear Mon		ay	Year	:	Street Address							
[X] Facility Clo	sed/Vacated Dur					Street Addres	S						
of Abatemen	t erformed Outside	of No	rmal 1	Facili	tv	City State	7in Code						
Hours - Desc	ribe: «OffHours	Descrip	pt»		-1	City, State,	alp code						
	ribe: «Other Occ		Desc	ript»									
Scope of Work (Check	k all that appl	у)				[ ]Fu]]	Containmer	nt with	Negative	Dres	2911	re	
[X]≥3 sf or	The state of the s	- 6	65.0	vation		[X]Mini-	Enclosure		noguozvo		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
[ ]≥160 sf	or <u>&gt;</u> 260 lf	1	]Demo	olition	n		bag Proced riable Pro						
		Т.	Is	nn				T		A	bat	ement	Туре
Location Asbestos-Con			ormal	Ly		Description Asbestos-Con			Amount		R	p E	N
Material	(ACM)		Used	Į.		Material (	ACM)		(Specify		E	E C	L
TO BE AB		te	y Mair enance	≘/	in	<pre>(i.e., thermal sulation, surfa</pre>			SF or LF)		0	A	0
(13)	1553		stodi aff (:			or other miscel		'	LLE)		A	R	J U
Q1 t		Yes	No	N/A									Ē
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Name of Basis	7		DES -										
Name of Registered WANAG		. 1250	DEP W uler	aste ID No.	1000000	oic Yards Waste .5		Registe	ered Land	ifill			
	minini, inc		7040				STATE OF THE STATE	W. 100 S.					
City, State	07042					sposal Date	City, St		104	71			
Montclair, NJ	07042				9	/7/18	bron	x, NY	, 104	14			
Completed By (Print	or Type) Titl	e				Signature		10		Dat	e		
Constantine V	ivian Pre	side	nt			Court	artine.	1/ M	Ban	8/6	5/2	018	
						LIVING	NINC	e ser	1110				



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AHC	Q	2019	

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Date of Notification (1)		Name of Bu	ilding Owner/Operato		STRUCTI	ON	JTR	71 9	
Agencies Notified   Type Notification	1	Street Addr	ess			NSIN			
□LEPA M Initial			300 7	774 51.	N.T.				
DEP Amended Amendment	¥	City, State,		0.176	NITO	82	112		
Emergency (i			4 ISLE	CITY			4	) t	_
		Name of Co	PRAWIC		Telephone Num	ber			
<u> </u>			INFORMATION		1				
Name of Facility Where Abatement is Takin	ng Ptace (3)			Type of Facilit	y (4)				
RESIDENC				School (K-					
Street Address	-				r 8 (Other than K-1; private & commerci :.)		tings	Ě	
City (5) SAM TS) 1	- CIT	}		Square Feet	# of Floors	100	dg. A	ge +	
County (6)			e (7) (STATE	Current Use (F	rior if being demolis	shed)			_
CAPE WAY		USE ONLY,			ACHRIT				_
Name of Monitoring Firm Hired by Building	Owner	ASCM No.	Name of Abater	nent Contractor (	7 No. 1922				
(8) N/A			Street Address	MCO MI	INC				=
Street Address			369	S. SPI	RUCE AU	-			
City, State, Zip Code			City, State, Zip C	Code					
OX, Out. Of Con-			MAP	IE SH	ADE N.	(	100	250	2
Project Manager for Monitoring Firm	Tele	phone No.	Telephone No. 856-27	9-0472	License No.	37-	1		_
Start Date (10) Scheo	Juled Complet	tion Date (11)	Name of OSHA	Monitor					
8-70-18	3-27-	-18	1-	N	4				_
Occupancy Status During Abatement (Chec	x only one)		Street Address	ž.					
Facility Closed/Vacated During Entire Pe	riod of Abater	nent s	City, State, Zip C	ode					_
Abatement Performed Outside of Normal Other - Describe:	r acuity rious								
Scope of Work (Check all that apply)			□ Eu® Cor	ntainment with Ne	egative Pressure				
	Renovation	on	Mini-En	closure	,904,01,1000010				
≥351 01 ≥311 ≥160 sf or ≥260 lf	Demotition	1	☐ Gloveba	ag Procedure empted (*) and N	on-Friable Procedu	re			
7	Is Location	n	,,,,,,,				-	ment	
	Normally Used Solely	by	Description of	rii		_	Тур	~	-
Location of Asbestos-Containing Material (ACM)	Maintenand	xe/ Asb	estos Containing Mat	terial (ACM)	Amount (Specify	_		E E	Ē
TO BE ABATED	Custodial Staff?	(i.	<ul> <li>e., thermal systems i surfacing, VAT,</li> </ul>	or	SF or LF)	Removal	Repair	Encapsulate	Enclosure
IN Facility (13)	(12)		other miscellaneo	ous)		oval	바	sulat	sure
,	Yes No	N/A			193			в	
2 101012	-+-+	X	TRANSI	TE		X			
SIDING									
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Name of Registered Waste Hauter		DEP Waste	Cubic Yards	Name of Reg	istered Landfill	1000			
- 1	Ha	7904	of Waste	CM.	C.MU.A.				
City, State		1101	Disposal Date-	City, State \$		. ~			
MAPLE SHADE	MI. J	52080	.	1 W001	OBINE 1	1.1	·		=
Completed By Tibe	c		Signature -	100	Date	- 1	-1	8	
MICHAEL CLOMM	SUP.		nu	mn					_



PAID

Agencies Notified    Type Notification   Street Address   Type Notification   Street Address   Type Notification   Type Notifi	=
BPA	
Amended Amendment # Emergency (including justification) Cancellation  Name of Contact  FACILITY INFORMATION  Name of Facility Where Abatement is Taking Place (3)  RESIDENCE  School (K-12) Subchapter 8 (Other than K-12)	-
DOH justification   Name of Contact   Telephone Number	
DCA   Cancellation   BRUCE	_
Name of Facility Where Abatement is Taking Place (3)  RESIDENCE  Type of Facility (4)  School (K-12)  Subchapter 8 (Other than K-12)	
Name of Facility Where Abatement is Taking Place (3)  RESIDENCE  School (K-12)  Subchapter 8 (Other than K-12)	
RESIDENCE Subchapter 8 (Other than K-12)	
homes, etc.)	
City (5) Square Feet # of Floors Bldg. Age	
County Code (7) (STATE   Current Use (Prior if being demolished)	_
ATCANTIC USE ONLY) VACANT	_
Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9)  (8) ALIA  KLUM CO INC	
Street Address	_
369 S. SPRUCE ALL	_
City, State, Zip Code  City, State, Zip Code  WAPLE SHADE NI, TO8052	
Project Manager for Monitoring Firm  Telephone No.  Telephone No.  Telephone No.  1 Telephone No.	
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor	_
8-10-18 8-17-18 W/A	_
Occupancy Status During Abatement (Check only one)  Street Address	
Facility Closed/Vacated During Entire Period of Abatement  Abatement Performed Outside of Normal Facility Hours  City, State, Zip Code	=
Other - Describe:	_
Scope of Work (Check all that apply)  Full Containment with Negative Pressure	
□ >3 sf or >3 lf □ Renovation □ Mini-Enclosure	
≥160 sf or ≥260 lf Non-Exempted (*) and Non-Friable Procedure	
Is Location Abatement Type	
Used Solety by Description of	
Asbestos-Containing Material (ACM)  Asbestos-Containing Material (ACM)  Asbestos Containing Material (ACM)  Custodial  Asbestos Containing Material (ACM)  (i.e., thermal systems insulation,	Enc
Staff? surfacing, VAT, or SF or LF) 3 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Enclosure
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SIDING X TRANSITE - X	
Name of Registered Waste Hauler NUDEP Waste Cubic Yards Name of Registered Landfill	
KIMICO INC 17904 3 ACUA	_
City, State  Disposal Date  City, State  DI DIASIA, IT VIII IF	
MAPLE SAMPLE ICI	
MICHAEL KLEMM 50P. Signature. Signature.	_



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Date of Notification (1)					Building (			Section 1	1111/17	177	9 L	<u>. il</u>	197	IS	11	111
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Agencies Notified	Type Notification		1	Street A	adress					Å	JG -	0 9	018		111,	Second .
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Name of Facility Where		g Place (3)	)					Тур	e of Facility (4	4)						
Jackie Croft Private	e Home								School (K-1							
Street Address									Subchapter Other (i.e. p				ouild	inas	home	25
									etc.)			olar i		-		,
City (5)	24.0								are Feet		Floors		10000	dg. A	ge	
Turnersville NJ 080	J12		-	0	D- d- (7)			20.50	00 +	2		Patrical	100	0+		
County (6) Gloucester				County ( (STATE L	JOGE (7) JSE ONLY)			Cur	rent Use (Pric	or if beli	ng aemo	lisned	1)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No		Name	of Al	patement Con	tractor	(9)					_
Traine of Montoning 1 mi	r r med by Banaring	Owner (o)		7,001	1110.			naco		tractor	(0)					
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							PO	Box	329							
City, State, Zip Code							City, S	State,	Zip Code				A. 1115-	- 35		-
							Wes	st Be	erlin NJ 080	91						
Project Manager for Mor	nitoring Firm			Telephor	ne No.		Telepi	hone	No.		License	e No.				
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Start Date (10)		Schedule		npletion [	Date (11)		CONTRACTOR OF THE PARTY OF THE		SHA Monitor							
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Other – Describe:		nar r domity	riouro	***			Oity, c	Jiaic,	Zip Code							
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≥160 sf or ≥260 lf			emolit				F	- N	/lini-Enclosure	•	rrogani	0110	oou.			
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TO BE AB			odial S		(i.e.		al system				Specify or LF)		₹em	Repair	cap	nclo
(13)			(12)	-10			miscella						Remova	pair	Encapsulate	Enclosure
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Name of Registered Was	ste Hauler			JDEP W lauler ID		300000000	ic Yards /aste		Name of		ered Lan	atıll				
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City, State						100000000000000000000000000000000000000	osal Date	9	City, State							
Elm NJ						8/2	4/18		Morrisv	rille P	A 1960	)				
Completed by		Title					Signatur	e	1-			Date				
Anthony T Perna		Presi	dent				-	_ (			-	8/6	/18			

rav			ICATION	N OF ASB	ESTO	SABATE			och		17	8	90	)	
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DOH justificat	on)			of Contact				ASSE	S Gelé	phone	Nun	bêr		API HAM	
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Name of Facility Where Abatement is T	aking Place (	3)	TAC	ILIT INFO	OKWA	HON	Туре	e of Facility (	(4)		-				
home								School (K-1							
Street Address							×	Subchapter Other (i.e. petc.)					dings	, hom	es,
City (5) Springfield							Squa 220	are Feet	# of 2	Floors			ldg. A	Age	
County (6)				Code (7)				ent Use (Pri		ig demo	olish	1			
Union  Name of Monitoring Firm Hired by Build	ing Owner (8		ASCN	A No.		Namo	hor of Ab	ne atement Cor	atrootor /	(0)					
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Street Address						100000000000000000000000000000000000000	Addre Box 4	ess 183, 4 E G	Sate Dr	ive					
City, State, Zip Code								Zip Code	140			10-0-5			
Project Manager for Monitoring Firm			Telepho	ne No.		Telepi		d, NJ 074 No.		License	e No	0.			
Start Date (10)	Cohodul	ad Can	anlatia.	Data (11)				2276		703					
8/16/18	8/25/1		npietion	Date (11)		Name	of OS	HA Monitor							
Occupancy Status During Abatement (C	- 55					Street	Addre	ess							
Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe:	ire Period of Iormal Facilit	Abatem y Hours	nent			City, S	State, Z	Zip Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf  × ≥160 sf or ≥260 lf	processor.	Renova Demolit					Mi GI	ıll Containme ini-Enclosure ovebag Prod	e cedure						
	le le	Locati	00				_ No	on-Exempted	d (*) and	Non-Fr	riable			e ement	
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In Facility (13)	Cus	todial S (12)	Staff?		surf	acing, VA	T, or			or LF)		Remova	Repair	Encapsulate	Enclosure
13-7	Yes	No	N/A		oute	misociiai	icous					val	=	ılate	ure
kitchen			х			floor tile	)		300	0 SF		X			
Name of Registered Waste Hauler		L	IDED W												
Tonys Cleanup & Hauling	Н	JDEP W auler ID 7787	CT 1710 TO 171	of W			Name of Chrin B	(T)			Lar	ndfill			
City, State Bridgewater, NJ			, , , , ,		Disp	osal Date		City, State	e						
Completed by	Title				TBE	Signature	2	Easton	, PA		Date				
A. Scott Higgins		ident				o ignature		0		-		/18			



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Date of Notification (1) 8/6/18					f Building Falana		Operator	r (2)	NE	C	EI	W		F		
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Name of Facility Where	Abatement is Takir	g Place (3)	7					Туре	of Facility (	4)						
home								П	School (K-1	21						
Street Address									Subchapter		er than k	(-12)				
									Other (i.e. p	rivate 8	& comme	ercial	build	dings,	home	es,
City (5)									etc.) re Feet	1 # 64	Floors		Тр	Ida A	~~	
South Orange								2200		2	FIOUIS			ldg. A 3	ge	
					0 1 (7)								1000	S		
County (6) Essex				County (	Jode (/) JSE ONLY)				nt Use (Prid	or if bei	ng demo	olishe	ed)			
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Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.		1 - 12 TO 1 CO 1		tement Con							
							ABS	Envir	onmenta	Serv	ices, L	LC				
Street Address								Addres								
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City, State, Zip Code							City, S	State, Zi	ip Code							
							Gler	nwood	, NJ 074	18						
Project Manager for Mon	itoring Firm		Telephor	ne No.		Telepl	none No	0.		License	e No					
	- spect manager for informating Firm						973-	764-2	276		703					
Start Date (10)		Schedule	d Con	noletion I	Date (11)		Name	of OSF	A Monitor				-			
8/17/18		8/26/18			()		,,,,,,,,	0, 00,	D ( 111011110)							
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X Other - Describe:	basement	nai i aomity	iouio			1102000	City, S	nate, Zi	h code							
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	и тнас Арріу)						-									
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TO BE ABA		Custo	ntenar	0.7-70	(i.e.	thermal	system	s insula	ition,	(S	pecify		Re	æ	nc	En
In Facil (13)	ity		(12)	AGIII.			cing, VA niscellar			SF	or LF)		Remova	Repair	sde	Enclosure
(10)		-				othern	liscellai	leous)					<u>val</u>	₹.	Encapsulate	ure
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baseme	ent			×		pipe	insula	tion		7	0 LF		Х			
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A. Scott Higgins		Presid	dent					A				8/6	/18			
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Date of Notification (1) 8/6/18					of Building al Czajka		Operato	r (2)	D 1.574g	EC	EI	$\overline{\mathbb{W}}$		m	
Agencies Notified	Type Notification			Street A	Address				11.77		EMILIE TO THE				200
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ĭ DOH	Emergency justification)			Name o	of Contact				1	Teleph	one-Nur	nber-			-
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Scotch Plains								210	0	2		(	60		
County (6) Union				County (STATE	Code (7) USE ONLY	)		Curre	ent Use (Prio	or if being	demolish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	M No.		Name	of Aba	atement Con	tractor (9)			-		
									ronmental						
Street Address							Street	Addre	ss						
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							Gler	wood	i, NJ 074	18					
Project Manager for Mon	itoring Firm		Telepho	ne No.			none N -764-2		4 65	cense No	ο.				
Start Date (10)		Schedule	d Con	npletion	Date (11)		Name	of OSI	HA Monitor			L/H2yr			
8/17/18		8/27/18													19
Occupancy Status During	Abatement (Chec	k Only One	e)				Street	Addre	SS			201-242			
Facility Closed/Vaca	ated During Entire F	Period of A	baten	ent											
Abatement Performe  × Other – Describe: b	ed Outside of Norm pasement	al Facility	Hours				City, S	State, Z	ip Code						
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Michael Perlow	Data of National (4)											111	11	L	6	E	11	//	5 [
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FACILITY INFORMATION	(NJAC 5:23-8)											T	elep	hone	· Num	ber			Division in contract of
Name of Facility Where Abatement is Taking Place (3)   Same		☐ Cancella	tion										_						
School (K-12)   School (K-12	Name of Equility Where	Abatament is '	Talvia	- DI	- (2)	F	A	CILITY IN	NFO	RMATION	T=								
Subchapter 8   Clifer than K-TV-Vec   Same		Abatement is	raking	Place	3 (3)						The state of the s								
Same							_		_	-			Other	thar	1 K-12	)			
County (6)	500000000000000000000000000000000000000										Other (i.e., p	riva					uildin	gs,	
County (6)					-050								# 05	Elec		Tp	lda /		
Name of Monitoring Firm Hired by Building Owner (8)   ASCM No.   AE.S.L								_				,		FIOOI	S	В		ige	
Name of Monitoring Firm Hired by Building Owner (8)   ASCM No.   ASCM No.   CPR ENVIRONMENTAL SERVICE						C	oun	ty Code (	7)(ST	ATE USE ONLY)	100		f bei	ng de	emolis	shed)			
A.E.S.L   Street Address   Street Add																			
Street Address   2200 Patterson Plank Rd. Unit 7   Street Address   8421 Hegerman Street	The second secon	Hired by Buil	ding C	Owner	(8)	ASC	M	No.											
2200 Patterson Plank Rd. Unit 7	NEWSTERN STATE									CPR ENVIRO	NMENTAL SE	RVI	ICE						
City, State, Zip Code	, 10 March 200 - 110 - 10 - 10 - 10 - 10 - 10 - 10								St	reet Address									
North Bergen NJ 07047		nk Rd. Unit	7						1	3421 Hegern	nan Street								
Project Manager for Monitoring Firm   Carmelo Altamonte									Cit	y, State, Zip C	ode								
Carmelo Altamonte					_					Philadelphia	PA 19136								
Start Date (10)		Control of the Contro			1							1							
O8													01	328	1				
Occupancy Status During Abatement (Check only one)  ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe ☐ Time of Abatement:AMPMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAM	\$ 350 mm m	1 manual his									Monitor	7.7.4							
Sacility Closed/Vacated During Entire Period of Abatement   Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM- PM/ PM- AM						)5	_	18	1	A.E.S.L									
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/AM				10. a. (2000) (400)	2010/01/2018				Str	eet Address									
Time of Abatement:AMPM/PMAM									2	2200 Patters	on Plank Rd. U	nit	7						
Scope of Work (Check all that apply)    Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that apply)   Scope of Work (Check all that the Non-Friable Procedure   Scope of Work (Check all that in Non-Friable Procedure   Scope of Work (Check all that in Non-Friable Procedure   Scope of Work (Check all that in Non-Friable Procedure   Scope of Work (Check all that in Non-Friable Procedure   Scope of Work (Check all that in Non-Friable Procedure   Scope of Work (Check all that in Non-Friable Procedure   Scope of Work (Check all that in Non-Friable Procedure   Scope of Work (Check all that Non-Friabl	Time of Abatement	AM-	ormal PN	Facilit //	y Ho	urs - L	eso)	Cribe AM	Cit	y, State, Zip C	ode								
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So st or ≥3 if   Some period of   Demolition   Description of   Asbestos Containing Material (ACM)   Amount   (Specify SF or LF)   Demolition   Demolition   Description of   Description of   Asbestos Containing Material (ACM)   Amount   (Specify SF or LF)   Demolition   Demolition   Demolition   Description of   Asbestos Containing Material (ACM)   Amount   (Specify SF or LF)   Demolition   Demolition   Demolition   Description of   Asbestos Containing Material (ACM)   Amount   (Specify SF or LF)   Demolition   Demolition   Demolition   Demolition   Demolition   Description of   Demolition   Demolition   Description of   Description	Scope of Work (Check all	that apply)								□ Eull Con	tainmant with Na-		D				enie Pale		
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)  First floor  Name of Registered Waste Hauler Republic Services  Name of Registered Waste Hauler Republic Services  City, State New Brunswick NJ  Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A  Normally Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Ababestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  NAME OF Registered (*) and Non-Friable Procedure  Abatement Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  NAME OF Registered Landfill Waste Management- G.R.O.W.S  Completed By (Print or Type)  Title  Signature  Description of Asbestor Containing Material (ACM) Amount (Specify SF or LF)  NAME OF Registered Landfill Waste Management- G.R.O.W.S				⊠ Re	nova	ation						jativ	/e Pi	essu	ire				
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Normally Used Solely by Maintenance / Custodial Staff? (12)   Yes   No   N/A		necession es elec		ls	Loc	ation			-	☑ NOII-EXE	impled ( ) and No	n-Fr	riabil	e Pro	ceau				
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)  First floor  Name of Registered Waste Hauler Republic Services  NJDEP Waste Hauler ID No. 2798  Date  Name of Registered Landfill Waste Management- G.R.O.W.S  City, State New Brunswick NJ  Name of Registered By (Print or Type)  Title  Nabestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Absentos Containing Material (ACM) (i.e., thermal systems insulation, surfacing,	Location	of		1	Vorm	ally				Description of	of						-	T	1
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First floor    Yes   No   N/A		y			(12	2)							SF	or Li	-)	<u>m</u>		ulat	Гe
Name of Registered Waste Hauler Republic Services  City, State New Brunswick NJ  Name of Registered Landfill Hauler ID No. 2798  Disposal Date  City, State New Brunswick NJ  Completed By (Print or Type)  Disposal Date  Signature  Date		1201		Yes	No	N/	Α											O O	
Name of Registered Waste Hauler Republic Services  NJDEP Waste Hauler ID No. 2798  Disposal Date  Norrisville PA  Completed By (Print or Type)  Disposal Date  Date	First floor							VAT					45	59SF					
Name of Registered Waste Hauler Republic Services  City, State New Brunswick NJ  Name of Registered Landfill Hauler ID No. 2798  Disposal Date  City, State Morrisville PA  Completed By (Print or Type)  Title  Completed By (Print or Type)  Title  Cubic Yards of Waste Waste Subjected Landfill Waste Management- G.R.O.W.S  City, State Morrisville PA				П	П	Тп										Tn	П	П	П
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Name of Registered Waste Hauler Republic Services  NJDEP Waste Hauler ID No. 2798  City, State New Brunswick NJ  Completed By (Print or Type)  NJDEP Waste Hauler ID No. 2798  Cubic Yards of Waste Waste Management- G.R.O.W.S  City, State Morrisville PA  Signature  Date					_	-						_				부	닏		
Republic Services  Hauler ID No. 2798  Waste Management- G.R.O.W.S  City, State  New Brunswick NJ  Completed By (Print or Type)  Title  Waste Management- G.R.O.W.S  City, State  Morrisville PA	Name of Pagistared West	a Haular		Ц														Ш	Ш
City, State  New Brunswick NJ  Completed By (Print or Type)  Disposal Date  City, State  Morrisville PA  Signature  Date		е пашег				Haule	ID		THE STATE							D.W.S	S		
New Brunswick NJ  Completed By (Print or Type)  Title  Signature  Date	City, State					2/9	ŏ_		Dis	posal Date	116					ACOUNT THE			
Completed By (Print or Type) Title Signature Date	New Brunswick NJ								5	, , , , , , , , , , , , , , , , , , , ,		РΔ							
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		5,76			Mai	nager				Anh	lover To	التعارات	-8"				3 /	R	



		(F	ursuant	to NJAC 8	3:60 and	12:12	0)		1	1 [	5 (6	F	3 [	1///	Ē
Date of Notification (1) 08/03/2018	-			of Building C Lorenzo		erator	(2)					7 II.		141	
Agencies Notified Type Noti	fication		Street A	Address							/\!	e .	0	2018	- 1
			Palisa	ate, Zip Coo ades Park		650	880		-	A	SBES		wheen		-
DOH justifi	cation) cellation			of Contact Lorenzac	0				Tel	ephor	e Nur	nber	NSin	G_	a teri 200 erre a Bajo.
Name of Facility Where Abatement i	s Taking Place (	3)	FAC	ILITY INFO	RMATIO	N	Tyr	e of Facility (4							
House								School (K-12	*						
Street Address							×	Subchapter (i.e. pretc.)	(Oth	er tha & com	n K-12 merci	) al buil	dings	, home	es,
City (5) Palisades Park							Squ N/A	are Feet	# of N/A	f Floor	'S		Bldg. A	∖ge	
County (6) Bergen			County (STATE	Code (7) USE ONLY)		_		rent Use (Prio use	r if bei	ng de	molish	ed)			
Name of Monitoring Firm Hired by Br N/A	uilding Owner (8)		ASCN	M No.				atement Cont atement, Inc		(9)					
Street Address					4.3	Street 11 R		ess ngren Aven	ue						
City, State, Zip Code								Zip Code NJ 07512							
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph		No. 8685		Lice 013	nse No	),			
Start Date (10) 08/16/2018	Schedul 08/17/2		npletion	Date (11)				SHA Monitor Itement, Inc	l		00.0253				
Occupancy Status During Abatemen	t (Check Only Or	ne)				Street		75							-
Facility Closed/Vacated During Abatement Performed Outside of Other – Describe: Occupied	Entire Period of of Normal Facility	Abaten / Hours	nent		(	City, S	tate,	ngren Aveni Zip Code NJ 07512	ue						
Scope of Work (Check All That Apply	/)					10101	ıva,	NJ 0/512		-	<del></del>	11-2			
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	10000	Locati	Sal areas						7 4110	11011	Habi	110	Abate	ement	
Location of Asbestos-Containing Material (A)	Ilea	Normal d Sole		A-b		iption						_	1 9	ре	
TO BE ABATED In Facility (13)	Cus	intena todial 8 (12)	Staff?	(i.e. th	os Contair hermal sy surfacin other mis	stems	insu T, or	lation,	(S	nount pecify or LF		Removal	Repair	Encapsulate	Enclosure
2nd Floor	Yes	No	N/A		ГІ	A:1 -			- 40	0.05				Ф	
Basement		X			Pipe Ir	or tile				0 SF 6 LF		X			
					i ipe ii	Isulai	liOii		- 15	J LF		Λ			
Name of Registered Waste Hauler		l N	JDEP W	aste l	Cubic Ya	arde		Name of R	agista	red La	ndfill				
D&S Abatement, Inc.		Н	auler ID 0996	No.	of Waste			Waste M				PA			
City, State Totowa, NJ				199	Disposal TBD	Date		City, State Morrisvill	e, PA	Α					
Completed by Ned Joksimovic	Title Proje	ct Ma	nager		Sigr	nature	1	W			Dat 08		2018		

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Date of Notification (1) 08/03/2018					of Building rd Park	Owner/	Operato	r (2)		A	U(		118			1
Agencies Notified	Type Notification			Street /	Address				1					A Laboratory	1	-
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x DOL	Amendmen Emergency		<u> </u>		nt, NJ 0	7628			1		1					
DOH	justification)	Ī			of Contact					Tel	ephone	Numbe	ar			
☐ DCA	Cancellation	1			rd Park					1			٨			
Name of Facility Where	Abatement is Takir	ng Place (	3)	FAC	ILITY INFO	ORMAT	ION	Type	of Facility (	4)						
House		.ga.oo (	٥,													
Street Address									School (K-1 Subchapter		er than l	K-12)				
								×	Other (i.e. p	rivate	& comm	ercial b	uild	lings,	hom	es,
City (5)									etc.) e Feet	T # 0	f Floors		BI	dg. A	\ae	
Dumont								N/A		N/A				/A	.90	
County (6)					Code (7)			Currer	nt Use (Pri	or if bei	ing dem	olished	)			
Bergen				(STATE	USE ONLY	)	<del>- Control</del>	Hous								
Name of Monitoring Firm N/A	Hired by Building	Owner (8)	)	ASC	И No.				ement Cor		(9)					
								24-64-64-6	ement, In	C.						
Street Address								Addres	_	2110						
City, State, Zip Code									ren Aver	lue						
Oity, Otato, Zip Oode								State, Zij	J 07512							
Project Manager for Mon	itoring Firm		Т	Telepho	ne No.		100000	none No			Licens	e No	_			
								345-86			0131					
Start Date (10)				npletion	Date (11)		Name	of OSH	A Monitor							
08/15/2018		08/16/2	2018				D&S	Abate	ement, In	C.						
Occupancy Status During	Abatement (Chec	k Only Or	ne)					Address					-			
Facility Closed/Vaca	ated During Entire	Period of	Abaten	nent					ren Aver	nue						
Abatement Performe  Other – Describe: C	ed Outside of Norn Occupied	nal Facility	/ Hours	5			100000000000000000000000000000000000000	state, Zip								
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D&S Abatement, Inc.			0.000	auler ID 1996	No.	of Wa	ste		Waste N	/lanag	gemen	t of P	Д			
City, State							sal Date		City, State	(2)			_	- 679		
Totowa, NJ						TBD	Jan Date		Morrisvi		Α					
Completed by		Title				5	Signature		120 1	500		Date				
Ned Joksimovic		Proje	ct Ma	nager				-	10			08/03	3/2	018		

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Print Form

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Date of Notification (1) 08/03/2018			Name of John A	f Building Ov Naker	vner/O	perator	(2)	1		AU	3	e e	2018	}	The state of the s
Agencies Notified Type Notif	fication		Street A	ddress										113-111-111-1	
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Emer	ndment # rgency (including	128		ck, NJ 076	666										
▼ DOH justifi	ication)	194.0		Contact					Tele	ephone	Numbe	er			
DCA Cand	cellation		John A	in a conscience											
Name of Facility Where Abatement i	is Taking Place (3)	0	FACII	LITY INFOR	MATIC	ON	Tyne	of Facility (	(A)						_
House															
Street Address							×	School (K-1 Subchapter Other (i.e. p	8 (Othe			uild	ings,	home	es,
City (5)								etc.) re Feet	# of	Floors		BI	dg. A	ne.	
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County (6)			County C	Code (7)			Curre	nt Use (Pri			lished	)			
Bergen  Name of Monitoring Firm Hired by Bo	ildia - O (0)		(STATE U	ISE ONLY)			Hou	se							
N/A	unuing Owner (8)		ASCM	I NO.				tement Cor ement, In		(9)					
Street Address			9,				Addres	ss gren Avei	nue						
City, State, Zip Code								ip Code				-	-		
								J 07512							
Project Manager for Monitoring Firm			Telephon	ne No.			none No 345-8			License 01311	2011/12/2014				
Start Date (10) 08/14/2018	Scheduled 08/15/20		pletion D	Date (11)	+	Name	of OSH	HA Monitor ement, In							
Occupancy Status During Abatemen						Street			U						
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Facility Closed/Vacated During Abatement Performed Outside of Other – Describe: Occupied	entire Period of At of Normal Facility I	oatem Hours	ent		-	City, S	tate, Zi	p Code							
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Scope of Work (Check All That Apply	<i>(</i> )					-	-								
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Location of	No	ormally	y		Des	cription	of						Ту		
Asbestos-Containing Material (AC		Solel		Asbestos	Conta	ining M	laterial	(ACM)	Ar	nount				ш	
TO BE ABATED In Facility	Custo	dial St	2010021	(i.e. the		systems ing, VA		tion,		pecify or LF)	T C I C V C	Don	Re	Encapsulate	Enclosure
(13)		(12)				iscellan			OI.	or Li )	5		Repair	lusc	nso
	Yes	No	N/A								1 2	-		ate	9
Basement		Χ		F	Pipe I	Insula	tion		22	0 LF	2				
						v salill									
Name of Registered Waste Hauler			IDEP Wa auler ID N		ubic Y f Wast			Name of F							
D&S Abatement, Inc.			996	D1033000   1.0000	BD	C		Waste N	Manag	ement	of P	4			
City, State Totowa, NJ			772	1.1	isposa BD	al Date		City, State Morrisvi			(AE 2)				
Completed by	Title					gnature	_	NOTTION.	110, 17		Date				
Ned Joksimovic	Projec	t Mar	nager		Sig	griature	X	W		- 1	08/03	3/20	018		

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	PAIL		(F	ursuant	t to NJAC	8:60 a	nd 12:12	(0)	) <u>E</u> (	CE		V	E	M	- Contraction of	
Date of Notification (1) 08/03/2018					of Building Vallace	Owner	/Operator	r (2)					All Company Lands	The state of the s	A CANADATANA	
Agencies Notified	Type Notification	N:		Street A	Address				J A	<del>U(</del>	<del>9</del> 20	118	A STANSON OF THE PERSON OF THE	1	Segue	
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DOH DCA	Emergency justification)		'		of Contact			herman			ephone	Num	ner	nedations.		
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Name of Facility Where	Abatement is Takir	g Place (	3)	FAG	ILIT INC	ORIVIA	ION	Туре	of Facility (	(4)					-	
House Street Address									chool (K-1							
offeet Address								x C	ubchapter other (i.e. p	orivate	er than i & comm	K-12) ercia	build	dings	, hom	es,
City (5)								Square	tc.) e Feet	# 0	f Floors		В	ldg. A	Age	
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County (6) Bergen				(STATÉ	Code (7) USE ONLY	·		Hous	nt Use (Pri e	or if bei	ing demo	olishe	ed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8	)	ASC	M No.				ement Cor ment, In		(9)					
Street Address								Address Roseng	ren Ave	nue						
City, State, Zip Code								State, Zip	Code 07512							
Project Manager for Mon	itoring Firm	28.000		Telepho	ne No.		Teleph	hone No 345-86	•		Licens 0131		er e			
Start Date (10)				npletion	Date (11)				A Monitor		0101				-	
08/13/2018		08/14/			D 480				ment, In	C.						
Occupancy Status During				4.				Address	en Aver	nue						
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norn	nal Facility	Abaten y Hours	nent			City, S	State, Zip	Code					-		
Scope of Work (Check A	II That Apply)						1010	wa, NJ	07512							_
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>			Renova Demolit				×	Mini-	Containme Enclosure ebag Prod	edure						
		le	Locati	on			<u> </u>	⊻ Non-	-Exempted	d (*) and	d Non-Fi	riable			e ement	t
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Asbestos-Containing TO BE ABA	Material (ACM) ATED	Ma	ed Sole	nce/	Asbes (i.e.	tos Con	itaining M I systems	Aaterial ( s insulati	ACM)		mount Specify		R		E	Ш
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Name of Decide 1144										-11						
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City, State			20	0996		TBD	nal Dete		Waste I		jemen	011	A			
Totowa, NJ						TBD	sal Date		City, State Morrisvi		Α					
Completed by Ned Joksimovic		Title	ct Ma	nager		15	Signature		Fr			Date		018	(	
		10,0	2	agcı					100			00/1	1312	010		

### IN CONJUNCTION WITH ANNUAL NOTIFICATION CHECK 1721

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

CHECK# 1752

Date of Notification (1) 08/06/2018	P	AID	N	ame o	of Building LEWOO	Owner/ D III L	Operato LC	or (2)		E C	EI	$\mathbb{W}$	EI	-1	
Agencies Notified	Type Notification	工 以 頂 量」	S		Address MAPLE	WOOI	DRI	VF			er has de among age	10		1174	
DEP DOL	Initial Amended Amendment	ш	С	ity, Sta	ate, Zip C	ode				A11/	2 - 9 9	018	The second second		
☑ DOH	Emergency justification)	(including	N	ame o	of Contact		0005		7.0	∃ Tel	ephone Nu	mber	2.	-	
☐ DCA	Cancellation			FAC	ILITY INF	ORMAT	ION		31	85	6-206-2	196		************	
Name of Facility Where PARK CROSSING	Abatement is Takin APARTMENT	g Place (3) HOMES			5.1			Тур	oe of Facility	1 5					-
Street Address 50 EVERGREEN	CIRCLE UNIT I	)						2	School (K-1 Subchapter Other (i.e. p etc.)	8 (Oth	er than K-1 & commerc	2) ial buil	dings	, hom	es,
City (5) MAPLE SHADE					-			Squ 80	uare Feet	# of	f Floors		3ldg. /	Age	
County (6) CAMDEN					Code (7) USE ONLY	)		Cur	rent Use (Pri	or if bei	ng demolis ARTMEN	hed)	Zalliki a Karinti		
Name of Monitoring Firm ACER ASSOC.	n Hired by Building	Owner (8)		ASCN	/I No.		Name AS	e of Ab SURI	patement Cor ED ENVIR	ntractor ONME	(9) ENTAL S	ERVI	CES	INC	·.
Street Address 1012 INDUSTRIAL	DRIVE							t Addr	ress EMS RUN						
City, State, Zip Code WEST BERLIN NJ	08091						City,	State, LLIC	Zip Code A HILL NJ	08062	 2				
Project Manager for Mor MATT DEPALMA	nitoring Firm				ne No. 09-1202	!		hone -304	No. -4676		License N 01145	lo.			
Start Date (10) 08/07/2018		Scheduled 08/09/20		letion I	Date (11)		Name EM:		SHA Monitor						
Occupancy Status Durin		March College College						t Addr	ess 130 NORT	Ή				8.	
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire F ned Outside of Norm	Period of Abnal Facility H	atemer lours	nt			City, \$	State,	Zip Code /INSON N		77				
Scope of Work (Check A	II That Apply)							_							47
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		person	novatio molition					$\frac{1}{G}$	ull Containme lini-Enclosure liovebag Prod lon-Exempted	e edure					
			ocation				has		on-Exemples	( ) and	1 NON-1 Hat	le Fio	Abate	ement pe	t
Asbestos-Containing	Material (ACM)	Used :	rmally Solely I enance		Asbesi	tos Cont	scription aining I	Materia	al (ACM)		mount		1,		
TO BE AB, In Facil (13)		Custoo	lial Sta 12)		(I.e.	thermal surface other n	cing, VA	AT, or		(S SF	pecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A					'			/al	=	ılate	ure
BATHRO	DOM			Х	J	OINT (	COMF	OUN	ND	30	0 SF	Х			
Name of Registered Was	to Haules		LNID	EDVA		0.11									
ASSURED ENVIRO		RVICES	Hau	EP Water ID 184895	No.	of Was					red Landfill NDFILL				
City, State MULLICA HILL NJ							al Date /2017		City, State		RG, OH				
Completed by RON SWANSON		Title GENEI	RALN	JANA	AGER	S	ignatu	Kan	celow	CHOO	M Da		2018		



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	N	(Pu	rsuant i	to NJAC 8:	:60 and		IN E P	P D W	R	-1		
Date of Notification (1) 08/06/2018		N	lame of St. Jar	Building O nes AME	wner/O Devek	perator (2) opment Co		Check No	n. 1778	A CONTRACTOR OF THE PARTY OF TH		
Agencies Notified Type No		S	Street Ac	ddress Washingto	on St	Property of Australia	U U AU	9 - 9 2018				2-10-10-11-
⊠ DEP □ Ar	itial nended nendment#			te, Zip Cod , NJ 0710						Children of Service		
	nergency (including	A.	lome of	Contact		1	ASBEST	OS CONTRO Telephone Nur	nber	0		
	stification) ncellation		evan Se			L		973-643-312		-		
U DCA NA CO	Поснавин		FACIL	LITY INFOR	RMATIC	NC						
Name of Facility Where Abatem St. James AME Towers	ent is Taking Place (3)					Type of Fa						
Street Address 440 Washington St	Management of the State of the					☐ Subch	napter 8 (Other th (i.e. private & cor	an K-12) nmercial buildir	ngs, home	es, et	c.)	
City (5) Newark, NJ 07102						Square Fe		# of Floors High-rise	Bidg 50+		9	
County (6) Essex				Code (7) ISE ONLY)	_	Current Us	se (Prior if being Ap	demolished) - Bldg				
Name of Monitoring Firm Hired Environmental Tactics, Inc	by Building Owner (8)		ASCM	No. 0045		Name of Al Lilich Con	batement Contra poration	ctor (9)				
Street Address 64 Broad Street				mme y <sup>w</sup>		Street Add 606 McBr		<b></b>				
City, State, Zip Code Matawan, NJ 07747						City, State, Woodland	Zip Code I Park, New Jei	rsey				
Project Manager for Monitoring Thomas P. Geiger	Firm		elephor 32-290			Telephone 973-225-8		License N 01104	lo.			
Start	ELED Scheduled 08/ 13 /2	d Com	pletion I	Date (11)		Name of O	SHA Monitor onmental Labor	atories, LLC				
Occupancy Status During Abate						Street Add 2333 Rou	ress te 22 West					
□ Facility Closed/Vacated Do     □ Abatement Performed Outs     □ Other – Describe:	inng Entire Period of At- lide of Normal Facility H	lours				City, State Union, No	Zip Code 07083				2 - 1   1   1   1   1   1   1   1   1   1	
Scope of Work (Check All That	Apply)							14 - A-1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
☐ ≥3 sf or ≥3 if ☑ ≥160 sf or ≥260 if		enovati emolitic					Full Containment Mini-Enclosure Glove Bag Proce Ion-Exempted (*)	dure / Limited (	Containm	ent 8	Teni	ŧ
4		Location or all		100		- at agrammings		Amount (Specify SF of LF)		bate: Typ		
Location of Asbestos-Containing Mater TO BE ABATED In Facility (13)	ial (ACM) Used Main Custo	d Solel ntenan odial S (12)	y by ice/		stos Co therm sur	Description of ontaining Mai nal systems in facing, VAT, r miscellaneo	terial (ACM) nsulation, or	0. 0. 1.)	Removal	Repair	Encapsulate	Enclosure
apartment- 218	Yes	No	X	Popcorr	n ceili	ng		1300 SF	X			
apartment- 21B			X	VAT and	d Mas	tic		1300 SF	X			
Market 1												
Name of Registered Waste Har	uler	Н	JDEP V auler ID		Cubic of Wa	: Yards iste 5		gistered Landf		.1		-
Lilich Corporation City, State Woodland Park, New Jerse	v		18724			sal Date 3/2018 (	Fairless L City, State Morrisville					
Completed by Adriana Olejarova	Title	siden	ŧ			Signatura	艾门流		)ate 08/06/20	18		
ASB-41 (R-06-08)					I	* Do not u	se this form for a	sbestos licensu	ıre exemi	oted:	activi	ties.

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

Name of Building Owner/Operator (2)
St. James AME Development Corp Date of Notification (1) 07/ 20 /2018

	ECELVEDI
A CONTRACTOR OF THE PARTY OF TH	AUG - 9 2018
L AS	BESTOS CONTROL & LICENSING
	Telephone Number 973-643-3128

	decision and the second		1					111 111	AUI - 4 90	10 1	11 1	11	
Agencies Notified	Type Notification				Address O Washino	gton St			AUG - 9 20	IQ	Lad		
⊠ EPA ⊠ DEP ⊠ DOL	☑ Initial ☐ Amended Amendment #				tate, Zip Co rk, NJ 071			ASBI	STOS CONTE LICENSING	IOL&		en dahiritikan	
☑ DOH ☐ DCA	☐ Emergency (in justification) ☐ Cancellation	ncluding			of Contact Seltzer	************			Telephone Nur 973-643-3128		-40	!	
				FAC	ILITY INFO	ORMAT	ION						
Name of Facility Whe St. James AME To	ere Abatement is Takir wers	ng Place (3)					Type of Fac						
Street Address 440 Washington St	t							pter 8 (Other	than K-12) ommercial buildin	gs, hom	es, e	tc.)	
City (5) Newark, NJ 07102							Square Fee	t	# of Floors High-rise	Bld 50-	g. Ag	je	
County (6) Essex					Code (7) USE ONLY	) _	Current Use	(Prior if being	demolished) OF Bida		11.51-2-15		
Name of Monitoring F Environmental Tac	Firm Hired by Building tics, Inc	Owner (8)		ASC	M No. 0045		Name of Aba Lilich Corpo	atement Contr	·				
Street Address 64 Broad Street							Street Addre						
City, State, Zip Code Matawan, NJ 07747						ь	City, State, Z Woodland	Zip Code Park, New Je	ersey				
Project Manager for M Thomas P. Geiger	Monitoring Firm			Telepho 732-29	one No 90-2217	-	Telephone N 973-225-84		License N 01104	0.			
Start 08/06/2018		Schedule 08/ 13 /2		npletion	Date (11)		Name of OS Iris Environ		ratories, LLC				
Occupancy Status Du	uring Abatement (Chec	ck Only One	e)				Street Addre						
<ul><li>☑ Facility Closed/V</li><li>☐ Abatement Perform</li></ul>	rmed Outside of Norm	Period of Al al Facility F	oatem lours	ent			2333 Route City, State, Z	Zip Code					
☐ Other – Describe:				_			Union, NJ 0	07083					
Scope of Work (Chec	k All That Apply)												
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>	•	10 mm 1 m	enova emoliti				☐ Mi	ni-Enclosure ove Bag Proce	with Negative Predure / Limited Co and Non-Friable	ontainm		Tent	t
		0.000	Locati	170370					Amount (Specify	. А	bater		
Asbestos-Contain TO BE	tion of ing Material (ACM) <u>ABATED</u> acility 13)	Used Mair	ormal d Sole ntenar odial S (12)	ly by		estos Co e. therm sur	Description of ontaining Mater al systems insi facing, VAT, or r miscellaneous	ulation,	SF of LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A						-		te	е
apartment- 21B				Х	Popcor	n ceili	ng		1300 SF	X			
apartment- 21B				Х	VAT an	d Mas	tic		1300 SF	X			
Name of Registered V	Vaste Hauler		100	IJDEP V		P1000000000000000000000000000000000000	Yards	Name of Re	egistered Landfill				
Lilich Corporation City, State	nu lorgov			lauler ID 18724			sal Date	Fairless L City, State	11.10.10.10.10.10.10.10.10.10.10.10.10.1				
Woodland Park, Ne Completed by Adriana Olejarova		Title	siden	ıt			3/2018 Signature	Morrisville	Da	te 7/20/20	118		

Date of Notification (1) 8 1 7 / 18	LA A J		NE	W CV	g Owner/	Operator LLC	(2)	Kime	ERG	KV		W	E
Agencies Notified  EPA DEP DEP DOL  Type Notification  Type Notification  Amended  Amended  Amendme			Po E	Address SOX 21 tate, Zip (	Code	011 -12		100	AU6	-	9 2	718	A Company of the Associated and
DOH Emergence justification Cancellation	y (including	l	Name	of Contact	it ORE		TON 9	Te	lephone N	umber 143	ONT.	ROL 109	Tel
Name of Facility Where Abatement is Tak	ing Place (3	3) @ S <sub>1</sub>			FORMAT	ION	Type of Facili	ty (4)	od - Gible	delac			The Sandaharana
Street Address  800 MORRIS TURN City (5)					4 4		Subchar Other (i.etc.)	oter 8 (Oth e. private	er than K- & commerc	12) cial bu	ildings	s, hon	ies,
SHORT HILLS County (6)			County	Code (7)			Square Feet 2000 5 Current Use (	F	f Floors		Bldg.	Age YK	5
Name of Monitoring Firm Hired by Building	Owner (9)		(STATE	USE ONL			RETAI	4	. <del>.</del>	sileu)			
NIA	Owner (6)	15	ASCI	M No.		FIN	of Abatement (	Contractor	(9) ASBEST	OS A	BI-78	MEN	11 Co.
Street Address  City, State, Zip Code						Street /	Address THO/UPCOM			,	011-	. 70.	
Control of the Contro							ate, Zip Code	BLA	NCH .n	151	77	764	f
Project Manager for Monitoring Firm			Telepho			Telepho	one No. 2-222-8		License N	Vo.	<i>,</i> , ,		
Start Date (10)  8 18 18  Occupancy Status During Abatement (Che	Schedule B/a	1011	npletion	Date (11)	)	1	of OSHA Monit	or					
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	Period of A	haten	nent			Street A	ate, Zip Code						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Contract of the Contract of th	enova emolit		14		XI X	Full Contain Mini-Enclose Glovebag Pr Non-Exempt	ure ocedure					
Location of	N	Locati	y		Des	cription o			THOM I HOL		Abate	emen pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Maii	d Sole ntenar odial S (12)	nce/	Asbes (i.e	stos Conta thermal: surfac	aining Ma	iterial (ACM) insulation, , or	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
SPACE 104	Yes	No	N/A	Mai	IN FLO	OA		190	0.56	X		ate	Ф.
				, ,,,,	77 7 20	-		1700	JP	^			
Name of Registered Waste Hauler		1000000	JDEP W		Cubic Y	1	Name o	f Register	ed Landfill				
FINISHING TOUCH ASBESTOS A City, State WEST LONG BRANCH, Y		27/	1205		5 d	Ly al,Date	City, Sta	ate	LAND		-		
Completed by BRANCER, MILLER	ME	DEN	7		8/20 Sig	gnajure Wulk	A PALL	~ ~	UE, P		//.	ę	
ASB-41 (R-06-08)	. ,				1	Do not i	use this form fo	or asbesto	s licensure	exem	pted a	activit	ies.

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Date of Notification (1) 8/6/18					f Building			(2)		assr	0	0010			And the Control of th
Agencies Notified	Type Notification		+	Street A						_ AUto	<u> </u>	_/018		land of	Total State
EPA DEP X DOL	Initial Amended Amendment				ite, Zip Co Creek, N		 092		AS	SBEST	OS CC CENSI		)L &		COVID-BARRAGO
DOH DCA	Emergency ( justification) Cancellation	including	100	Name of Joyce	f Contact Lynn		Harana and Aria			V. 1 (100 (100 (100 (100 (100 (100 (100 (	ohone N -296-0		MERCE COLUMN A PRO	ale na englisary a	
bloom of Facility Valley	At-1	D1 (0)		FACI	LITY INFO	ORMA	TION								
Name of Facility Where Street Address	Abatement is Takin(	g Place (3)			**			I ype	School (K-1: Subchapter Other (i.e. pretc.)	2) 8 (Other			ldings	, hom	es,
City (5) Manahawkin							267	Squi 976	are Feet	# of F	loors		Bldg.	Age	
County (6) Ocean	***************************************				Code (7) USE ONLY)			Cun	ent Use (Prid	or if being	g dernol	ished)			
Name of Monitoring Firm	n Hired by Building (	Owner (8)		ASCN	1 No.				atement Con D PROFE						
Street Address							Street 6 WI		oss DOVE CC	DURT					
City, State, Zip Code				-			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		Zip Code OD, NJ 08	3701					
Project Manager for Mor	nitoring Firm	- PHILIPPENDING TRANS		Telepho	ne No.		Teleph 732-			111 3	License 1200	No.			
Start Date (10) 8/16/18		Scheduler 8/21/18		npletion	Date (11)		1		HA Monitor D PROFE	SSION	IALS	1199			
Occupancy Status Durin	g Abatement (Chec	k Only One	∌)				Street		DOVE CC						
	ated During Entire F ned Outside of Norm						City, S	State,	Zip Code OOD, NJ 08						
Scope of Work (Check A	All That Apply)						LAN			3701					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		A Carllington &	enova: emoliti					M	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure				re	
The state of the s		10.000	Locati	[[[ [ [ [ ]									Aba	emen ype	t
Location Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Used Mair	ormall I Solel ntenar odial S (12) No	ly by nce/		tos Co therma surf	escription ntaining N al system acing, VA miscellar	Aateria s insu T, or	lation,	(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
EXTER	IOR	+					Siding	-		250	0SF	X	+		
Name of Registered War NEWARK CARTING		(1	H	JDEP W auier ID 1509		of W	c Yards aste		Name of F	Registere	ed Land	till			
City, State NEWARK, NJ						Disp	osal Date /18		City, State		PA			*******	
Completed by JOSEPH PERLSTE	IN	Title OWNI	ER				Signature	a ———			] [	Date			



Data of Natification (4)	7888		T				The contract of	E C F I	W	E	$  \cap \rangle$	No.
Date of Notification (1)			1000		g Owner/0	Operato	r (2)	15 9			the second	2000
August 06, 2018 Agencies Notified Type Notifical	tion		Dr. Jac				11.5%				1	Marketon Company
Agencies Notified Type Notifical	nor.		Street A	Address				AUG - 9	3018		12	521
EPA Initial	4		011-01				- 1					9
DEP Amende Amendm				ate, Zip (	Code				with!"	1 8		
Emerger	ncy (including	3	Princeto					- 17 STATE OF STATE O	ra i			
DOH justificati			100 m	of Contac				TelephoneN	umber			
Cancella	tion		Project			ION						
Name of Facility Where Abatement is Ta	aking Place (	(3)	FAC	ILIT IN	FORMAT	ION	Type of Facility	(4)				
house	173											
Street Address							School (K- Subchapte	12) er 8 (Other than K-	12)			
							Other (i.e.	private & commer		dings	, hom	ies,
City (5)							etc.)	4-4-5		21.1		
Princeton							Square Feet	# of Floors	1	3ldg.	Age	
County (6)			County	Code (7)			Current Hea /Pr	ior if being demoli	-			
Mercer				USE ONL			Current Ose (Pi		snea)			
Name of Monitoring Firm Hired by Build	ing Owner (8	)	ASCN	A No.		Name	of Abatement Co	house				
AET, Inc	•		0021			toresis i mo						
Street Address			0021		-		MACK Group, I Address	LC.			W 855	
28 North Pennell Road						200000000000000000000000000000000000000		CTE 200				
City, State, Zip Code				-			Kings HWY N State, Zip Code	, STE 209				
Media, PA 19063								) A				
Project Manager for Monitoring Firm			Telepho	ne No.			y Hill, NJ 0803 hone No.	License	No		-	
Ron Khachadourian			(800) 96		Т		759 - 5000	00781	INO.			
Start Date (10)	Schedu	led Co	mpletion	4 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1		-	of OSHA Monitor			370-10		_
8/20/18			9/30/18				ACK Group, I					
Occupancy Status During Abatement (C	heck Only O	ne)	3,00,1				Address					
Facility Closed/Vacated During Ent	ire Period of	Ahate	ment			1500	Kings HWY N	STF 209				
Abatement Performed Outside of N	ormal Facilit	y Hou	rs				State, Zip Code	012 200				
Other-Describe:							y Hill, NJ 0803	4				
Scope of Work (Check All That Apply)							,, 0000					
≥3 sf or ≥3 lf	$\boxtimes$	Renov	ation				X Full Containm	ent with Negative	Praceii	ra.		
≥160 sf or ≥260 lf		Demol	ition				Mini-Enclosur	e	1 10350	16		
							Glovebag Pro	cedure f (*) and Non-Friabl	a D			
							Non-Exemple	( ) and Non-Friabl	e Proce	***************************************	emen	+
Location of		s Loca Norma									ype	ŗ
Asbestos-Containing Material (ACM)	Use	ed Sol	ely by	Asbe		scriptior aining N	of Material (ACM)	Amount		T	T	T
TO BE ABATED	10	aintena todial	ance/ Staff?	(i.e	e. thermal	system	s insulation,	(Specify	Z	71	Enc	l in
In Facility (13)		(12)				cing, VA		SF or LF)	Remova	Repair	Encapsulate	Enclosure
3 € 5000 M		1	1		011101111	noocha			val	≅.	ulate	пе
	Yes	No	N/A								(D	
boiler	X				boiler	r insula	ation	115 sf	X			
-"-	X				a	askets		4 sf	X			
100000000000000000000000000000000000000	/\				9			7 31	//	-	-	-
		-	-						-	_	-	
Name of Decistors 1111												
Name of Registered Waste Hauler			NJ DEP W Hauler ID		Cubic of Was		Name of	Registered Landfil	I		-	
Freehold Carting		-	159		U. vvas	1.2	GROWS	6 / TRRF Landi	611			
City, State			107.	-/	Dispos	al Date	City, Stat		111			
Freehold, NJ						/30/18						
Completed by	Title					ignaturé			ate			
Michael Cooper	Presid	dent				1			5/18			