A 13458			Sta	ate of New	Jerse	v						L		
CKITH PAI				OF ASBES to NJAC 8:				A Committee of the Comm		E G I	El	\mathbb{W}	Ľ,	i frances
Date of Notification (1) 08/06/2019				Building Once Town				1.6	M		. 1	74.1	the Alberta Carry	
Agencies Notified Type Notification E EPA Initial			Street Ad 2565 F	ddress Princeton	Pike			To control		7.3	- -	JIJ	The special section of the section o	+4
DEP X Amended Amendment				te, Zip Cod nceville,		3648		A Part of the Part	A	SBESTO LIC	S CUN ENSIN	ITRO G	L. &i	
Emergency (justification) DCA Cancellation	including		Name of Thoma	Contact as Eldridg	ie								a. 20020-a.	-
				LITY INFO	S	ION								
Name of Facility Where Abatement is Taking Lawrence Middle School	g Place (3)							And the entertain						
Street Address 2455 Princeton Pike		110,0						Subchapte Other (i.e.	er 8 (Othe			dings,	hom	es
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County (6) Mercer			County C	Code (7) USE ONLY)			Curre	ent Use (Pr	ior if bei	ng demoli				_
Name of Monitoring Firm Hired by Building C TTI Environmental, Inc.	Owner (8)		ASCM 0000				of Aba	itement Co	ntractor	(9)			<u> </u>	_
Street Address 1253 North Church St			0000			Street	Addre	ss						-
City, State, Zip Code Moorestown, NJ 08057						City, S	State, Z	ip Code	7035					
Project Manager for Monitoring Firm Michael R. Keehn			Telephor	ne No. 10-8800		Telep	hone N	0.	,, 000		No.			
Start Date (10) 07/15/2019	Schedule					Name	of OS	HA Monitor						
Occupancy Status During Abatement (Check							Addre							200
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	Period of A	baten				22 T	roy L	ane						_
Other – Describe: Scope of Work (Check All That Apply)						1			7035					_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit					Mi Gle	ni-Enclosu ovebag Pro	re ocedure				· a	
		Locat						T Exompte	1	3 1 10 11 11		Abat	emen /pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	d Sole intena	ely by nce/ Staff?	(i.e. t	s Con herma surfa		Materia is insul AT, or	ASBESTOS CONTROLLICENSING Telephone Number 609-671-5420 ype of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings etc.) quare Feet # of Floors Bldg. 04,000 3 67 urrent Use (Prior if being demolished) //iddle School Abatement Contractor (9) Safety LLC dress y Lane e, Zip Code Park, NJ 07035 e No. License No. 6-0099 01317 OSHA Monitor Safety LLC dress y Lane e, Zip Code Park, NJ 07035 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement (ACM) Amount	Repair	Encapsulate				
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Name of Registered Waste Hauler Service Transport Group		H	NJDEP W Hauler ID SW2117	No.	of Wa			5740300000000000000000000000000000000000			fill			
City, State Yardley, PA					Dispo	sal Date	9			'A				
Completed by Vanco Petkov	Title	ot NA	anager		The second	Signatur	-	15	757			/2010	a	_

Inv # 136/5 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 08/06/2019 Joanne Love Agencies Notified Type Notification Street Address **EPA** Initial ASBESTOS CONTROL & LICENSING City, State, Zip Code × DEP Amended × DOL Amendment # Bernardsville, NJ 07924 Emergency (including Name of Contact Telephone Number DOH justification) DCA Cancellation Joanne Love FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) House School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Bernardsville N/A N/A N/A County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Somerset Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) D&S Abatement, Inc. Street Address Street Address 11 Rosengren Avenue City, State, Zip Code City, State, Zip Code Totowa, NJ 07512 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 9733458685 01311 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor 08/20/2019 08/21/2019 D&S Abatement, Inc. Occupancy Status During Abatement (Check Only One) Street Address 11 Rosengren Avenue Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Occupied Totowa, NJ 07512 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure × Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Remova Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A X Garage Transit Paneling 80 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Atlantic Carting Grand Central 26085 TBD City, State Disposal Date City, State Wayne, NJ TBD Pen Argyl, PA Completed by Signature Date Oliver Hegedis Project Manager 08/06/2019

Print Form

State of New Jersey 1476707149 PATTO NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 08/06/2019 Lisa Basile AUG 12 2019 Agencies Notified Type Notification Street Address **EPA** ACRESTOS CONTROL & Initial × City, State, Zip Code DEP Amended LICENSING × DOL Amendment # Maplewood, NJ 07040 Emergency (including Name of Contact DOH Telephone Number justification) Lisa Basile DCA Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) House School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, × etc.) City (5) Square Feet # of Floors Bldg. Age Maplewood N/A N/A N/A County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Essex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) D&S Abatement, Inc. Street Address Street Address 11 Rosengren Avenue City, State, Zip Code City, State, Zip Code Totowa, NJ 07512 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 9733458685 01311 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/19/2019 08/20/2019 D&S Abatement, Inc. Occupancy Status During Abatement (Check Only One) Street Address 11 Rosengren Avenue Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Occupied × Totowa, NJ 07512 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ =ncapsulate TO BE ABATED Enclosure (i.e. thermal systems insulation, (Specify Remova Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement X Pipe insulation 135 LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Atlantic Carting **Grand Central** 26085 TBD City, State Disposal Date City, State Wayne, NJ TBD Pen Argyl, PA Completed by Title Signature Date Oliver Hegedis Project Manager 08/06/2019

· INV #136/9

SH Inv#1362 Notification (Pursuant to

State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) NON Sub 8

Check # 9484

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Date of Notification	3/45	N	lame of Bui	lding Own	er/Operator (2)		In E C		\mathbb{W}	E		PRATIC CONTRACT
10 18 1/10 19		.	South Pl	ainfield \$	School Dist	rict		113			AL / SAME	and the same	-Camara-
Agencies Notified	Type Notificati	on S	treet Addre					III III AU	g 12	2019	Table 1	W	
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X DOH	_	N	ame of Con	tact					ne Number		annesia diper chia	ada aya	_
☐ DCA	☐ Cancella	ition	Tom Wi	ggins		*		908-7	54-4620	x 82	70		
				FAC	ILITY INFORM	IATION				1.000-30-3			
Name of facility wh	nere abatement is	taking pla	ice (3)					Type of Facility			V-11-211-211		
Franklin Elem	entary Schoo	I (NON S	Sub-chap	ter 8)					ol (K - 12) hapter 8 (O	thar th	an K	.12\	
Street Address									(Private/Co			12)	
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Name of Monitorin	g Firm Hired by E	Bldg. Owne	er (8)		ASCM No.	1	Name of Abatement	1	3000)				_
		-		- 1			B & G Restorat	ion, Inc.					
Street Address						-	Street Address						
							105 Ryerson F	coad					
City, State, Zip Coo	le					l ľ	City, State, Zip Code Lincoln Park,	NJ 07035			.02		
Project Manager fo	r Monitoring Firm		Ph	one Numb	er		Telephone Number		License		er		
							(973)696-686		00	378			
Scheduled Start Da	ate (10)	Sched	. Completic	n Date (1	1)		Name of OSHA Mon B & G Restorat	57551 575					
08/19/2019		08/2	23/2019				Street Address						
Occupancy Status							105 Ryerson R						
	d/vacated during erformed outside						City, State, Zip Code						
Describe: Other-Descri	be:					-11	Lincoln Park, N	J 07035					
Scope of Work (ch		1)											
Demolition	X	Renovation	n			☐ F	ull Containment w/ne	gative pressure	Glove	oag pr	oced	ire	
> 3 sf or $> 3 $ if	X	≥160 sf or	≥260 lf				lini-enclosure		X Non-fr		proce	dure	
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asbestos-cor material to b	е	staff(12)			Descript material		sbestos-containing	(Specify	SF or	m o	p a	c	C
abated in fac	cility (13)	Yes	No	N/A				LF)		v e	i	p	L
Room 23				X	VAT & m	astic		755 sf		X			
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Registered Waste I B & G Restora	Hauler	NJD	EP Hauler I 19563	D# C	Dubic Yards of 9	Waste	Name of Registered Grand Ce	I Landfill Intral Landfill		-11			
City, State				Disposal I	Date		City, State Pen Argy						
Lincoln Park,		Tin		08/2	3/2019 Signature		L	Ι, ΓΛ	Date				
Completed by (Prin		Title Secreta	ry/Treasu	ırer			Gordana Luna			9/201	19		

Int 13 62 State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) NON Sub 8 Check# 9485 Date of Notification (1) Name of Building Owner/Operator (2) 10 18 1/10 19 1/11 19 1 South Plainfield School District Agencies Notified Type Notification Street Address ☐ EPA Initial 125 Jackson Avenue DEP City, State, Zip Code LICENSING X DOL Amendment South Plainfield, NJ 07080 X DOH Name of Contact Telephone Number Cancellation □ DCA Tom Wiggins 908-754-4620 x 8270 **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) John E Riley Elementary School (NON Sub-chapter 8) School (K-12) Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial 1000 Morris Avenue Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 50,0000 sf 50+ (State use only) South Plainfield Union Current Use (Prior if being demolished) school (non sub 8) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Phone Number Telephone Number License Number (973)696-6869 00378 Scheduled Start Date (10) Sched. Completion Date (11) Name of OSHA Monitor 08/19/2019 B & G Restoration, Inc. 08/23/2019 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-City, State, Zip Code Describe: Other-Describe: Lincoln Park, NJ 07035 Scope of Work (check all that apply) ☐ Demolition X Renovation Full Containment w/negative pressure Glovebag procedure >3 sf or >3 If ¥ ≥160 sf or ≥260 lf Mini-enclosure Non-friable procedure Is location normally used solely Location of by maintenance/custodial asbestos-containing Description of asbestos-containing e staff(12) е material to be Amount n m n abated in facility (13) material (ACM) (Specify SF or p C Yes 0 C No a N/A a Room 7 VAT & mastic 766 sf X

Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill B & G Restoration, Inc. Grand Central Landfill City, State Disposal Date City, State Lincoln Park, NJ 08/23/2019 Pen Argyl, PA Completed by (Print or Type) Signature Gordana Luna Gordana Suna Secretary/Treasurer 08/09/2019

In#13618 B&G proj.#: 2019-157 ID A T

State of NJ

Notification of Asbestos Abatement

	Notification of As
OF	(Pursuant to NJAC
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		II. A		D .						Check	(# 9464				_
Date of Notification	n (1)	11	Name of	Building Ov	vne	er/Operator (2)	1	***************************************	T	\ F /	2 F	תוח ח	IC	production of	1
0 18 1/10 18	1/11/91			Robin		,,, operator (2)	rei				GE		E	-1	
Agencies Notified	Type Notificat	ion	Street Ad	dress	-		-		11:-	7 I				111	111
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Name of facility wh	here abatement i	s taking pl	ace (3)					1	Туре	of Facility	(4)				
David Robin		•							1		ol (K - 12)				
_					_						hapter 8 (0			-12)	
Street Address											(Private/C		rcial		
									Squ	are Feet	# of Floo		BI	dg. Ag	ge
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Fair Lawn, N	J 07410	Ве	ergen				(Sta	te use only)		rent Use (F idential	Prior if bein	g dem	olishe	ed)	
Name of Monitorin	ng Firm Hired by	Bldg. Own	er (8)		T	ASCM No.		Name of Abatement					-		_
).To	US 153					B & G Restora		re-cause texts					
Street Address					-1-			Street Address	don, n						
								105 Ryerson i	Road						
City, State, Zip Cod	le							City, State, Zip Code							
								Lincoln Park,	NJ 07	035					
Project Manager for	r Monitoring Firm	1		Phone Nun	nbe	er		Telephone Number (973)696-686	69		License	Numb)378	er		
								Name of OSHA Mor							-
Scheduled Start Da	ite (10)		- 0	etion Date ((11))		B & G Restora		ic.					
08/19/2019			23/201					Street Address	dox-						
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X Facility closed	d/vacated during erformed outside							City, State, Zip Code	9						
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				ly used sole	alvl		Ш "					TR	R	E	
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material to be	е	staff(12)		Т	-	material (spesios-containing		(Specify	SF or	m	p a	c a	c
abated in fac	ality (13)	Yes	No	N/A						LF)		v e	i	р	L
basement				X		VAT (no m	nastic)		950 sf		X			
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Registered Waste F B & G Restoral			EP Haul 19563	er ID#	Cu	ibic Yards of V 10	vaste	Name of Registered Grand Centra							
City, State				Disposal				City, State					and the same of th	-	
Lincoln Park, N				_	J8/	/23/2019		Pen Argyl, PA						Λ.	
Completed by (Prin		Title	ry/Tree	SUITAT		Signature	(Gordana Luna			Date 08/0	8/201	9		

CK# 13612 CK9700044319 P

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Date of Notification (1) 08/06/2019			Name of	f Building hbein	Owner/0	Operator	r (2)		AU	G 12	2019	20,000	IJ	
Agencies Notified Type Notification			Street A	ddress				113 113	, 10		2010	-i_consti	200	
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▼ DOL Amendment ▼ Emergency (wood, N	1J 0704	40		L		ephone Nu	en principalities	enteresticistation		-
DCA Cancellation			Eli Fisi		00111									
Name of Facility Where Abatement is Taking	g Place (3	3)	FAGI	LITY INFO	ORMAT	ION	Туре	of Facility (4)					
House								School (K-12						
Street Address								Subchapter (Other (i.e. pr				dings,	hom	es,
City (5)							- 6	etc.) re Feet	# o	f Floors		Bldg. A	ae	
Maplewood							N/A		N/	170	1	N/A		
County (6) Essex			County (Code (7) USE ONLY,)		Curre Hous	nt Use (Prio Se	r if be	ng demolis	hed)			
Name of Monitoring Firm Hired by Building (N/A	Owner (8)		ASCM	No.				tement Cont ement, Inc		(9)				
Street Address				*		100	Addres	ss gren Aven	ue					
City, State, Zip Code			3-1-00-00	1,000		City, S	State, Zi	p Code J 07512						
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph	none No	D.		License N	lo.			
Start Date (10)	Schedule	ed Cor	mpletion (Date (11)			of OSE	IA Monitor		01311				
08/16/2019	08/17/2		inpicuoii c	Sale (11)				ement, Inc						
Occupancy Status During Abatement (Check			557				Addres	s Iren Aveni	10					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Occupied	eriod of A al Facility	Abater Hour	nent s			City, S	tate, Zi	p Code J 07512						
Scope of Work (Check All That Apply)					-	1010	wa, iv	001012	-					
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	Yes	No	N/A								=		ate	.e.
Basement		X			Pipe	insula	tion		7	5 LF	Х			
	-										-	-		
Name of Registered Waste Hauler		I	JDEP W	aste	Cubic	Yards		Name of R	eaiste	red Landfill				
Atlantic Carting		F	lauler ID 6085		of Was			Grand C	100					
City, State Wayne, NJ					Dispos TBD	sal Date	ş	City, State Pen Argy	/I, P	4				
Completed by Oliver Hegedis	Title Proje	ct Ma	anager		S	ignature	77	A.	- epinelism	With community and the same of	ite 3/06/2	2019		

State of New Jersey NOTIFICATION OF ASSISTOS ABATEMENT (Pursuant to NJAC 8:59 and 12:120) All				1								
Date of Notification (1) Agencies Notified Type Notification BPA BPA BPA BPA BOL Assestory control & Licensing Notification BPA BOL Brainded Amended Amended Amended BOL Assestory control & Licensing Notification BRAIN BOL Brainded Amended Amended BOL Assestory control & Licensing Notification BRAIN BOL Brainded BOL Brainded Amended BOL Amended Amended BOL Brainded Brainded BCOL Brainded BoL Brainded BCR	# 13610						72.11/2002				Pr	int
Date of Notification (1) Sireel Address Sireel Address Sireel Address Sireel Address Sireel Address City, State, Zip Code Lakewood, NJ 08701 Sireel Address Sireel Address City, State, Zip Code Lakewood County (6) Cocan Name of Facility (4) Sireel Address Sireel Address Sireel Address City, State, Zip Code Lakewood County (6) Cocan Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Sireel Address Sir	LK 8637- PA	NO.	TIFICATIO	N OF ASBES	TOS ABATE) E C		\mathbb{V}	E	Tabana Tabana
EPA Manager Manager More Mo	Date of Notification (1)	The second second	Name	of Building Ow	ner/Operato	r (2)		AUG	10	2019)	Britains and Co
City, State, Zip Code	Agencies Notified Type Notification		Street	Address			200	1				1
City, State, Zip Code	T EDA VI Initial			ACCOMPANY PROPERTY.				ASRESTO	18 00	NTD	71 8	1
Same of Facility Where Abatement is Taking Place (3) School (K-12) Schoo	DEP Amended						-	LIC	ENSI	VG	71 C	
Street Address Stre					8701				- vormer	***************************************	***************************************	CONT. N. C.
Street Address Str	DOH justification Cancellation	5	Name	of Contact				Telephone Nu	ımber		Settle - CF	
Street Address School (K-12) Subchapter 8 (Other than K-12) Other (in. private & commercial buildings. homes, etc.) Other (FAC	CILITY INFOR	MATION							
Street Address City (5) Lakewood County (6) Coean County (7) Coean Name of Monitoring Firm Hirad by Building Owner (8) Street Address City, State, Zip Code Lakewood City, State, Zip Code Lakewood City, State, Zip Code Lakewood City, State, Zip Code Lakewood, NJ 08701 Project Manager for Monitoring Firm Telephone No. Titlephone No. Titleh	Name of Facility Where Abatement is Takir	ig Place (3)				Type of Fa	cility (4)			,		
City (5) Lakewood County (6) Ocean Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) AAA LEAD PROFESSIONALS Street Address Street Addre	Charact Address											
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NAME of Registered Waste Hauler
NEWARK CARTING

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City, State
NEWARK, NJ

Disposal Date
08/21/19

Date
08/08/19

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エハレザ 1360 ら State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) Name of Building Owner / Operator (2) AUG 08/08/2019 2019 Beverly Bohanek Agencies Notified Type Notification Street Address X EPA ASBESTOS CONTROL & DEP Initial City, State & Zip Code X DOL LICENSING Amended Carteret, NJ 07008 DOH Emergency Name of Contact DCA Telephone Number Cancellation Beverly Bohanek FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Beverly Bohanek School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 1740 67 Carteret Middlesex Current Use (Prior if being demolished) Residential Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health & Safety Services Resource Management Group, LLC. Street Address Street Address P.O. Box 365 2115 Hamilton Avenue, Suite 202 City, State & Zip Code City, State & Zip Code Berlin, NJ 08009 Trenton, NJ 08619 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Jim Proctor 856-839-2432 609-914-4279 01185 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8/22/2019 8/29/2019 J&S Environmental Laboratories, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West X Abatement Performed: During regular operating hours - 8am to City, State & Zip Code 5pm Describe: Union, NJ 07083 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf ≥260 If Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate TO BE ABATED Maintenance or Enclosure (i.e., thermal systems in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A Basement Pipe Insulation 65 LF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Resource Management Group, LLC TBD 0035218 Grows Landfill City, State Disposal Date City, State Trenton, NJ 08619 TBD Morrisville, PA Completed By (Print or Type) Title Signature Date Mr. Brian Haney President 08/08/2019

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Project Manager for Monitoring Firm			lephone No.		Teleph 856-		lo. 9800		License 00727				
Start Date (10) 8/16/19	Schedule 8/26/19		etion Date (1	1)	Name Sam		HA Monitor			8			
Occupancy Status During Abatement (Ch	eck Only One	e)			Street	Addre	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	Period of A rmal Facility	batemen Hours	t		City, S	tate, 2	Zip Code						
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Toms River, New Je	ersey 08755						To	ms River,	New	Jersey 08	755					
Project Manager for Moni	toring Firm		Τ.	Tele	ohone I	No.	Tele	phone No.			License N	No.				
Nicholas Fernicola				73	2-349-	9932	73	2-349-9932	2		00624					
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

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

Total From

Date of Notification	1(1)			Mon	on of Duite	1: 6				1	IC	C. F	П	71//	P
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Project Manager for	Monitoring Fir	m	Tolor		NI. I		Trenton, N								
Mr. Mike Panepr	esso.	1112					Telephone	Number		Lice	ense N	Number			
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8-8-2019		cheduled Cor	npletic	on Da	te (11)	(1)	Name of OS	SHA Mor	itor	-	-		Personal Security	Control of the last	
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Date of Notification (1) 08/06/2019 Check # 3422				Building O			(2)		AUG TA	2019	and of shalls proper to	السا	and the same of th
Agencies Notified Type Notification EPA INITIAL			Street Ac 25 N 7		3		E-Assignation	AS	SBESTOS CO	NTRO	L&		- Andread and the same
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DOH justification) DCA Cancellation		- 1		Contact Thomas					Telephone Nu 973-432-59				
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Street Address N/A						426 6	Address 69th st						
City, State, Zip Code N/A						Gutte	tate, Zip Co enberg, N		93				
Project Manager for Monitoring Firm N/A			Telephor N/A			201-9	none No. 916-7813	E	License 1 01074	No.			
Start Date (10) 08/16/2019	08/18/2	2019	npletion [Date (11)		N/A	of OSHA N	Monitor					
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe: 9am	Period of A	Abaten		ė	_	N/A	Address	ode					_
Scope of Work (Check All That Apply)		Renova Demolit					Mini-Er Gloveb	nclosure ag Proce	nt with Negative edure (*) and Non-Fria			e	
Location of		Locat	lly		De	scription	of					emen pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole sintena todial ((12)	nce/	(i.e. ti	nermal surfa				Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
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K3421 PA			Pursuant	to NJAC	8:60 an	nd 12:120	0)		E	CE		<u> </u>		
Date of Notification (1) 08/02/2019 Check # 3421			Name of Holy T	f Building (rinity	Owner/	Operator	(2)		The state of the s	AHG 1	122	N1Q	Action to the street	
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DOH Emergency justification)	(including		Name of	f Contact				L	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ephone N	lumber	NAME OF TAXABLE PARTY.	en with the con-	in any of the same
DCA Cancellation			i i i i i i i i i i i i i i i i i i i	t Brewer		ION			908	3-400-5	315			
Name of Facility Where Abatement is Takin Holy Trinity	g Place (3	3)					Type of Fa	1000						
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City (5) Westfield							Square Fe 10,000+		# of	Floors		Bldg 50+	Age	
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Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM N/A	l No.			of Abateme Services	nt Contr	actor	(9)				
Street Address N/A						0.0000000000000000000000000000000000000	Address 39th st							
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Project Manager for Monitoring Firm N/A			Telephor N/A	ne No.		4.7	none No. 916-7813			License 01074				
Start Date (10) 8 / 19 / 2019	Schedule 0 /2		mpletion [Date (11)		Name N/A	of OSHA M	onitor						
Occupancy Status During Abatement (Chec	- 5		mont			Street N/A	Address			43				
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe: 9am	nal Facility	/ Hour	S		_	City, S N/A	tate, Zip Co	de						
Scope of Work (Check All That Apply)														
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City, State Bronx, NY					Dispo	sal Date		y, State aynesb	ourg,	ОН				
Completed by Michael Fajardo	Title Offic	e Cle	erk			Signature	M	1			Date 08/02	/2019	9	

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification Name of Building Owner/Operator (2) 08/08/2019 Preakness Reformed Church Agencies Notified Type Notification Street Address 131 Church Lane **EPA** Initial IXI DEP Amended City, State, Zip Code DOL Wayne, New Jersey 07470 Amendment # Emergency (including Name of Contact X DOH Telephone Number 973-632-3086 SING justification) Thomas Powers DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Preakness Reformed Church П School (K-12) Street Address Subchapter 8 (Other than K-12) 131 Church Lane Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Wayne, New Jersey 07470 30,000 50± County (6) County Code (7) Current Use (Prior if being demolished) Passaic (STATE USE ONLY) Church Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Detail Associates Inc. Lilich Corporation Street Address Street Address 560 Sylvan Avenue, Suite 3065 246 Union Boulevard City, State, Zip Code City, State, Zip Code Englewood, New Jersey 07632 Totowa, New Jersey 07512 Project Manager for Monitoring Firm Telephone No Telephone No. License No. Anthony Valentine 201-569-6708 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/13/2019 08/15/19 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Union, NJ 07083 Scope of Work (Check All That Apply) □≥3 sf or ≥3 If X Renovation Full Containment with Negative Pressure ⊠≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure / Limited Containment Tent X Non-Exempted and Non-Friable Procedure Is Location Abatement Description of Normally Туре Location of Asbestos Containing Material (ACM) Used Solely by Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, Amount Maintenance/ Encapsulate TO BE ABATED surfacing, VAT, or (Specify Remova Custodial Staff? Repair In Facility other miscellaneous) SF or LF) (12)(13)Yes No N/A Cafeteria Pipe Insulation (Wrap & Cut) X 250 LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Lilich Corporation 18724 10 Fairless Landfill City, State Disposal Date City, State Totowa, New Jersey 08/15/2019 Morrisville, PA Completed by Title Signature Date Adriana Olejarova President 08/8/2019

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DOH justification) Cancellation			John						1			i b			
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Name of Facility Where Abatement is Taking	Place (3))					Туре о	of Facility (4)							
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Project Manager for Monitoring Firm		1	Telephon	e No.		Teleph	none No	i.		License	e No.				
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basement floor			х		Floo	or tile o	only		6	600 sf		x			
plaster outside wall of dinning rm															
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City, State						sal Date		City, State		A 4000	27				
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State of New Jersey

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Date of Notification (1)	3. 20301202					ng Owner/Operator		IMEC		7	W	E	3
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Agency Notified Ty	ре моппсатиоп			Street	Address			1111	12	1 01	1975		the factor in
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	Cancellation				ole.	CORDEC	_		(10m) (10m) (10m)		· Cana		redge.
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Name of Facility Where Abat							Type of Facility	(4)					
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Street Address						12		8 (Other than K-12)					
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City (5) .						1.2	Square Feet	# of Floors	Bldg.	Age			
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County (6)) (STATE USE	Current Use (P	rior if being demoli	shed)				
BERGEN	J .			ONLY)			J.ZES	SI CONCE	100				
Name of Monitoring Firm Hir	ed by Building Own	ег	ASCM	No.		Name of Abaten	nent Contractor (9)					
(8)						Best Re	moval In	c					
Street Address						Street Address							
						450 Sou	th River	St					
City, State, Zip Code						City, State, Zip C							
	9/2					Hackens	ack, N.J	. 07601					
Project Manager for Monitori	ng Firm	Te	elephor	ie No.		Telephone No.	-,,,	License No.					
	15:11:6	Ц.,				201-329		00388	-,,,-				
Start Date (10) 8 22 19	Scheduled C			te (11)		Name of OSHA		ontol					
Occupancy Status During At	8 Z 2					Street Address	Environm	entar			27/10/1		
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☐ Facility Closed/Vacated D ☐ Abatement Performed Out						City, State, Zip C	Code						-
2 Other - Describe: 8:50				-				,N.J. 07	606	100			
Scope of Work (Check all the	at apply)												
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☐ ≥ 160 sf or ≥ 260 lf				□ Den		Ja Glov	ebag Procedure		17				
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IN Facility		7	Staff?			surfacing, VAT		SF or LF)		Removal	Repair	Encapsulate	Enclosure
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UNION Name of Monitoring Firm	Hired by Building	Owner (8			USE ONLY)	Name	Churc	h/Scho						
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

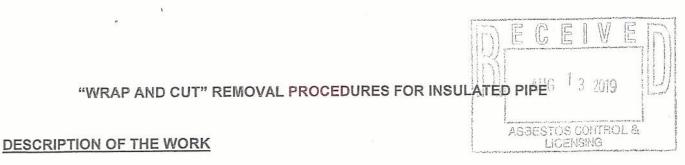
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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Trenton, NJ 08618						BRISTOL, PA	19007		97			
Project Manager for Monitoring Fi	m			ephone		Telephone No.		License No.	-			
William Weisgarber					6-8101	215-788-6040		00509				
Start Date (10)					ate (11)	Name of OSHA M	onitor					
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Occupancy Status During Abatem	ent (Check	only o	one)			Street Address						
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Abatement Performed Outside Time of Abatement: 7:00AM-3	of Normal F	acilit	y Hou	rs - Des	scribe	City, State, Zip Co	de					
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ASB-41 BS19100

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This Section describes the procedures to remove asbestos containing insulating materials utilizing "wrap and cut" methods.

PRODUCTS

- Amended Water
- Wettable/Adhesive Lagging Cloth
- Encapsulant (if specified in Section "Scope of Work")
- Disposal Bags
- Six mil polyethylene sheeting
- HEPA vacuum
- Duct Tape
- "Saw-zall"

DESCRIPTION OF THE WORK

All work shall be conducted in strict accordance with applicable federal, state and local regulations and shall be coordinated through the Owner's representative.

Bristol Environmental Inc. shall adequately wet all ACM with amended water and wrap all exposed thermal system insulation with two individual layers of 6-mil polyethylene sheeting. Each layer shall be sealed with high grade duct tape, and "candy-striped" around the pipe system to the best seal possible.

Upon the wetting, wrapping and sealing of thermal system insulation Bristol Environmental Inc. shall cut the pipe in existing spatial openings into sections no greater than ten (10) linear feet. These wetted, wrapped and sealed sections shall be properly labeled and disposed of as asbestos waste.

Where no spatial openings are present, Bristol Environmental Inc. shall perform glove bag abatement to remove approximately six (6) inches of ACM thermal system insulation to facilitate the cutting of the pipe as described.

Bristol Environmental Inc. shall remove all asbestos containing materials from the work site in double 6-mil polyethylene waste bags or impermeable packages. All asbestos materials shall be adequately wet with amended water using a fine low pressure sprayer or other wetting mechanism. The surfactant used by Bristol Environmental Inc. shall be available at all times at the work site. Bristol Environmental Inc. shall assure that all asbestos waste materials are sufficiently saturated with amended water to prevent fiber emission and/or visible emissions.

All asbestos waste bags, pipe sections and other waste packages shall be labeled with the prescribed Federal OSHA warning signs and shall include site specific waste generator information.

Bristol Environmental Inc. shall provide a fully enclosed, watertight waste container complete with a locking device for storage of all contaminated waste removed from the site. The waste container shall have asbestos warning signs affixed to all sides and doors

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County (6) Bergen			County (Code (7) JSE ONLY)			ent Use (P		ing demol	ished)			
Name of Monitoring Firm Sky Environmental	***		ASCM	1 No.				tement Co		(9)				
Street Address 140 Boulevard	200 E202 ON O 23					Street 44 Ki		ss Street						
City, State, Zip Code Mountain Lakes, NJ 07406							10.70	ip Code NJ 070)57	70				
Project Manager for Monitoring Firm Leonid Shereshevsky			Telephor	ne No. 38-4821		Teleph 973-8	one N	0.		License 01361	No.			
	Schedule August			Date (11)		Name	of OSI	HA Monito	r					
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Inv#13628 State of New Jersey Initial Notification NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Check #: 7503 Name of Building Owner/Operator (2) IC, Un 0 8 / 0 6 1/1 1 9 Tewksbury Board of Education Agencies Notified | Type Notification Street Address AUG 1 ⊃ 2019. []EPA 173 Old Turnpike Road [X]Initial Notification City. State, Zip Code [X] DEP ASBESTOS CONTROL & X1DOL []Amended Califon, NJ 07830 LICENSING Notification Telephone Number Name of Contact [X] DOH []Cancellation []DCA Chuck Miles 908-439-2010 x. 4289 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) X]School (K-12) Old Turnpike Middle School Street Address Square Feet 171 Old Turnpike Rd. 20,000 County Code (7) (STATE USE ONLY) City (5) County (6) Current Use (Prior if being demolished) Califon, NJ 07830 School Hunterdon Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building TASCM No. Owner (8) Four Strong Builders, Inc. Ahera Consultants, Inc. Street Address Street Address 180 Sargeant Avenue P.O. Box 385 City. State. Zip Code City, State, Zip Code Clifton, NJ 07013-1935 Oceanville, NJ Telephone Number License Number Project Manager for Monitoring Firm Telephone Number John Smoyer (609) 652-1833 973-614-0377 00807 Sched. Completion Date (11) Name of OSHA Monitor Scheduled Start Date (10) | 0 | 8 | / 1 | 6 | / 1 | 9 | | 0 | 8 | / 1 | 9 | / 1 | 9 | |

Occupancy Status During Abatement (Check only one) | 0 | 8 | / | 1 | 9 | / | 1 | 9 | | Month / Day / Year Four Strong Builders, Inc. Street Address XJFacility Closed/Vacated During Entire Period 180 Sargeant Avenue of Abatement]Abatement Performed Outside of Normal Facility City, State, Zip Code Hours - Describe: []Other - Describe: Clifton, NJ 07013 Scope of Work (Check all that apply) |Full Containment with Negative Pressure []Renovation |Mini-Enclosure []Demolition [X]>3 sf or >3 lf []>160 sf or >260 lf []Glovebag Procedure [X]Non-Friable Procedure Abatement Type Location Description of Asbestos-Containing Normally NCA N C T. Location of Asbestos-Containing Used Amount E RE Material (ACM)
(i.e., thermal systems
insulation, surfacing, VAT,
or other miscellaneous) M (Specify Material (ACM) TO BE ABATED Solely by Main-0 P 0 SF or V in Facility tenance/ SURE AIR (13) Custodial AL U Staff(12) L Yes No N/A 50 SF VAT & associated mastic Kitchen area Name of Registered Landfill Name of Registered Waste Hauler Cubic Yards Hauler ID No. of Waste G.R.O.W.S., Inc. Four Strong Builders, Inc. 12609 Disposal Date City. State Tullytown, PA Clifton, NJ Completed By (Print or Type) Bilyana Kulakovska Office Administrator 8/6/19

ASB-41

13627

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

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, 26 ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf		- Carley Co		□ Dem		☐ Glov	ebag Procedure	d Non-Friable Proce	dure	Al	pater	men
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(NJAC 5:23-8)	☐ Cancella	75							Telephone Nun				
	- Gariociia				Raip	h Copp	0018		973-265-97	63			
					FA	CILITY IN	NFORMATION						
Name of Facility Where A		Taking	Place	(3)				Type of Facility	(4)				
Macy's Menlo Parl	k							School (K-1					
Street Address									8 (Other than K-1:		.71.45	_	
55 Parsonage Roa	ad							homes, etc.	orivate and comme	ercial bu	moing	S,	
City (5)					- 37/2			Square Feet	# of Floors	BI	dg. Ag	ne e	
Edison								1,333,989	2	1 2 3 3 3	959	-	
County (6)					Cour	nty Code C	7)(STATE USE ONLY)		rior if being demol		200		_
Middlesex					088		MOTATE USE UNLY)	Current Use (Pi	nor it being demol	isned)			
lame of Monitoring Firm	Hirad by Duit	dina O	upo- "	2)		193930	Non					2011/2	_
Pennoni Associate		ung O	wrier ()	ASCM	NO.	Name of Abatem	2.00)				
	25						ACM Consul	ting Corp.					
treet Address							Street Address						
15 Grove Stree	t Suite 1E	3					2150 Stanle	ey Terrace					
City, State, Zip Code		0000					City, State, Zip C	ode					
laddon Heights	. 40	0803	35				Union, NJ 0	7083					
roject Manager for Mon	itoring Firm			Tele	phone	No.	Telephone No.		License No.				
Ralph Coppola				973	3-265	-9763	908-687-100	8	00575				
tart Date (10)	15	Schedu	ıled Co		tion Da		Name of OSHA N						
08 / 07 /	2019	12	1		1		EMSL Analy						
occupancy Status During	Abatament (Street Address	licai					_
Facility Closed/Vacate					mont			th Ctract					
Abatement Performed	Outside of No	ormal f	acility	Hour	nem e - Dec	criha	307 West 38						_
Time of Abatement: _	AM-	PM	/ 9:30	PM-	6:30	AM	City, State, Zip Co						
							New York, N	Y 10118					
cope of Work (Check all	I that apply)						VI Full Con	tainmant with Ala					
⊇ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			☐ Rer ☐ Der				☐ Mini-End ☐ Gloveba	g Procedure	on-Friable Procedu	ıre			
			ls	Locat	ion						atem	ent Ty	vne
Location				orma			Description of				_		_
Asbestos-Containing		1)		i Sole ntena	ely by		stos Containing Ma		Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABA					Staff?	(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	ova	₹.	psu	Dec
(13)	-2			(12)			other miscellane		01 01 11)	=		ılatı	a
			Yes	No	N/A							(U	
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ame of Registered Was				100000	JDEP \ auler IC		Cubic Yards of Waste	Name of Regis					
ri-State Transfe	r Associa	tes,	Inc		W1896		TBD	Minerva E	Enterprise				
ity, State							Disposal Date	City, State					
ronx, NY							TBD	Waynesbu	ıra. Ohio				
ompleted By (Print or Ty	vpe)	Title			-		Signature	// //		ate		-	_
Sina Smolar	1.57	15000000	0-01	11/	nager		2.33.0.0		1	/6/20	10		
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In #	13550	2						Former	F7 ()		7 D	normanum u	D/OCHUNEC 	NEW WHITE SERVICE
CK 142	18 PA	Contraction		FICATIO Pursuan	t to NJAC	8:60 ar	ABATEMENT nd 12:120)) E C					
Date of Notification (1 08/08/2019)						Operator (2) chool District	CECUTA CONTRACTOR	Check(No.1 2	.128()	19		
Agencies Notified	Type Notification				Address dgewood	Road		- No. Charles					- Autotrania	
☑ EPA ☑ DEP ☑ DOL	☐ Initial ☐ Amended				ate, Zip Co		on, New Jerse	ov 07676	ASBEST LI	OS CO		301	8.	
⊠ DOL	Amendment # Emergency (i justification)				of Contact	asimigu	on, New Jerse	ey 0/6/6	Telephone	Numb	er			
⊠ DCA	☐ Cancellation			Mario	Cofini				201-664-0			כ		
Name of Facility When Westwood Middle S	e Abatement is Takir	g Place (3	3)	FAC	ILITY INF	ORMAT	Type of Fac	cility (4)	· · · · · · · · · · · · · · · · · · ·					
Street Address 23 Third Street				-			School Subcha Other (i.	(K-12) pter 8 (Other the.e. private & co	nan K-12) mmercial bu	uildings	, hom	ies, e	tc.)	
City (5) Westwood, New Jer	rsey 07675						Square Fee 30,000	t	# of Floors		Bldg 50+	g. Ag +	е	
County (6) Bergen					Code (7) USE ONLY		Current Use	e (Prior if being Middle S)				
Name of Monitoring Fi AHERA Consultants		Owner (8)		ASCI 0005	M No. 57		Name of Aba Lilich Corpo	atement Contra oration	ictor (9)					
Street Address P.O. Box 385							Street Addre 246 Union I				0.0.00			
City, State, Zip Code Oceanville, New Jer	rsey 08231						City, State, Z Totowa, Ne	Zip Code ew Jersey 075	512					
Project Manager for M Eric D. Clarkson	onitoring Firm			Telepho 609-65	one No 52-1833		Telephone N 973-225-84		Licens 01104					
Start Date (10) 08/12/2019		Schedule 08/19/20		mpletion	Date (11)		Name of OSI Iris Environ	HA Monitor mental Labor	atories, LL	.C				
Occupancy Status Dur		7					Street Addres							
☑ Facility Closed/Va☐ Abatement Perfort☐ Other – Describe:	med Outside of Norm	eriod of Al al Facility I	batem Hours	ent			City, State, Z Union, NJ 0	Zip Code		- 3			75.00	
Scope of Work (Check	All That Apply)		25.00		770 - 1770				-					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			enova emolit				☐ Mir	Il Containment ni-Enclosure ove Bag Proced n-Exempted (*)	dure / Limite	d Cont	tainme	ent &	Tent	
		10000	Locat						Amou (Speci	nt		oaten		
Locati Asbestos-Containin <u>TO BE A</u> In Fa (13	ng Material (ACM) BATED cility	Use Mai	lorma d Sole intena odial (12)	ely by		stos Cor mal syst	Description of ntaining Materia tems insulation VAT, or er miscellaneon	, surfacing,	SF of L	.F) -	Removal		Encapsulate	Enclosure
		Yes	No	N/A							2772		ite	Ф
itchen & Storage attic	ouzeuro		X		Pipe & Fitt Pipe & Fitt					O LF	X			
	mii		X		ripe & ritt	ing msula	iuon		13	0 LF	Х			
										+				
Name of Registered W Lilich Corporation	aste Hauler		H	JDEP W lauler ID 18724		Cubic of Was		Name of Reg	50. 500000	dfill				
City, State Totowa, New Jersey	,					130.70	sal Date /2019	City, State Morrisville,					- 1120	
Completed by Adriana Olejarova		Title Pre	sider	nt		S	ignature	1 Que		Date 08/0	08/20	19		

page 1

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant is NIAC 8-26 and 12-120)

Date of Notification (1) 08/08/2019	}			Nama of 8	Building O	Wher/O	perator (2) nool District	C	Héck No. 16	2DA	7		
Agencies Notified	Type Notification		+	Street Add	rass			<u>F</u>		_			-
E EPA E DEP n DQL	☐ Initial ☐ Amended Amendment #	 ,	-	City, State	wood Residence		n, New Jersey	07876	1	1			Name of Street
e dôh e dca	図 Emergency (in justification) □ Cancellation	ciuding		Name of Co				201	phone Numba -684-8880 x	2010	11.)	
				FACIL	TY INFOR	PITAMI					1110/1		二
Westwood Middle S	re Abatement is Yakire Achbol	g Place (3)					Type of Facility El School (K-	12)					
Street Address 23 Third Street							☐ Olher (l.e.	r a (Other then k p lysta & comma	egnibliud lalon		_		
City (5) Wastwood, Naw Je	rsey 07676						Squara Feat 30,000	3	Floora	50+	Age .		
County (6) Bergen				County C (STATE U			_	neb eniéd it ton' orb3 elbbiM	ol .				
Name of Monitoring F AHERA Consultant	im Hired by Building I s, Inc.	(8) 1enwC		ASCM 00057			Name of Abster Lilich Corpora	ment Contractor	(8)				
Syeet Address P.O. Box 385							Street Address 246 Union Bo						
City, State, Zip Code Oceanville, New Ja	ersey 08231					\$2VIII.8	City, State, Zip Totowa, New	Code Jereey 07512	1				
Project Manager for h Eric D, Clarkson	donkoring Firm			Telephon 509-652			Telephone No. 973-225-8400	3	License No. Q1104				
Start Date (10) 08/12/2019		Scheduled 08/19/20		mpletion [) ats (11)		Name of OSHA Iris Environm	Manitor ental Laborato	ries, LLC				
	uring Abatement (Cher scated During Entire)						Street Address 2333 Route 2	2 West					
Abstament Parid Other - Describe	rmed Outside of North	nal Facility H	lours	·			City, State, Zip Union, NJ 07	Cade 083					
Scope of Work (Che	ok All That Apply)		1								***		
다 23 af or 23 if 점 2180 af or 2280	1f		enovi empli				D Mini	Containment wit -Enclosure re Bag Propodur Exempted (*) en	e / Limited Cor	atainme	ent &	Tent	
			700s					20011,0000	Amount (Specify			ient s	•
Asbestos-Contai TO 85	ation of Iring Material (ACM) I ABATED Facility (13)	Use Mal	nten.	lely by ance/ I Staff?	Asber ther	mal 6ye	Description of maining Weterlah eleme Insulation, VAT, or her miscellangou	auriecing.	\$FofLF)	Remova	Repair	Encapsula	Enclosum
		Yes	No	NIA								র	
Kitchen & Storege an			×		Pipe & Fitt				280 LF		_	_	-
Nurse's Suite & Rest	floom .		X	+	Pipe & Fitt	ing insu	lation		130 LF	X	-	-	+
											T		L
Name of Registered	Weste Heuler		1	NJDEPV			c Yarda	Name of Regis	rieręd Landfill				1
Lillich Corporation	l			18724	No.	10	reste	Fairless Lan					
City, State Totowa, New Jer	zay					08/-	osal Date 19/2019	City, State Memisville, F					
Completed by Adriana Olejarov	/â	Title	esid	ent			Signature	1 Que	Det	te 5/08/2	019		
255 11 10 78 131							מחו לחת מולם	this form for each	estos licensura	exam	oted	activ	Him

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1199 114		(\mathbb{D}	C	E		\mathbb{V}		m
Date of Notification (1) 08/08/2019			520.20	of Building ark Publi			r (2)		KI						
Agencies Notified Type Notification				Address		7010				AUG	1	7-2	019	-	1
		9		/luhamm	ad Ali	Avenu	е	Gileade	[4-1 [m]					ST-D-ST	
□ Amended			City, St	ate, Zip C	ode			- di	A	SBEST	'OS	CON	TRO	LA	0000000
DOL Amendment			Newa	rk, NJ 0	7108				E ^A	L	CEN	ISIN	3		-
DOH justification)	iriciaairi	a a	11/1/20 Per 12/10	of Contact					Tel	lephone	Nun	ber			
DCA Cancellation				min Ola	~ ,				97	73-938	-754	14			
Name of Facility Where Abatement is Taking	n Place	(3)	FAC	ILITY INF	ORMAT	ION	Tuno	of Facility	. (4)						
Gladys Hillman-Jones Middle	9 / 1000 /	(0)													
Street Address								School (K Subchapte		er than l	K-12)			
24 Crane Street								Other (i.e.					dings,	hom	es,
City (5)								etc.) re Feet	# o	f Floors		ТВ	ldg. A	ae	
Newark, NJ 07104							26,3		4			11	08	•	
County (6) Essex				Code (7) USE ONLY)		Curre	nt Use (P	rior if bei	ing demo	olishe	ed)			
Name of Monitoring Firm Hired by Building (Owner (8)	ASC	vi No.		Name		tement Co	ontractor	(9)					
Whitman Street Address							c Cor				240 5				
7 Pleasent Hill Road							Addres North	s Midland	d Ave						
City, State, Zip Code		Adres di N				100000000000000000000000000000000000000		p Code		155					
Cranbury, NJ 08512 Project Manager for Monitoring Firm			Talaalaa					ook, NJ	07663						
Kevin Lovely			Telepho 732-39	ne No. 90-5858			one No 791-6			Licens 01110					
Start Date (10)				Date (11)				A Monitor				297722			
08/13/2019 Occupancy Status During Abatement (Check	08/19/					EMS Street		lytical, l	lnc.				71 - 10 - 10		
								s on Rd							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	al Facilit	v Hour	nent s			City, St					_			-	
Other - Describe: Facility occupied duri	ng abate	ment			_			y, NJ 08	3854						
Scope of Work (Check All That Apply)								LO-101							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli						Containm		Negativ	e Pr	essur	е		
	L .	Jerrion	uon				Glov	i-Enclosur vebag Pro	cedure						
	1					X	Non	-Exempte	ed (*) and	d Non-Fr	riable		C 57		
	E .	Locat Norma	100										Abate Ty		
Location of Asbestos-Containing Material (ACM)	Use	ed Sole	ly by	Ashest		scription aining M		(ACM)	Δ,	mount					
TO BE ABATED	1 2 2 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A	intena todial			thermal	systems	insulat		(S	pecify		Re	R	Enca	Enc
In Facility (13)	4.707.7	(12)	- 10.11			cing, VAT niscellan			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A				/					/al	=	late	ıre
Rooms # 103,105 ,422		X			Flo	or Tile	s		Appr.2	2,068 5	SF	Х			
Name of Registered Waste Hauler		100	JDEP W	2000	Cubic			Name of	Registe	red Land	dfill				
SMAC Corp.		100	lauler ID 8590	No.	of Was			Grows	Landfi	lle					
City, State			0000			al Date		City, Sta							
Saddle Brook, NJ						/2019		Morris		Д					
Completed by	Title	OELON TO THE								Date			Determination		
Borce Gjorsoski	Title Signature Date President Boeung Granung 08/08/2019														

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

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Inv#1310/10PA	ATD	NO.				BESTOS ABA AC 8:60 and 5:1		Club-4	3	60	22	
Date of Notification (1)	Horas			Nam	e of Buildir	ng Owner/Operator	(2)		The approximate			Optionwape
8 / 7	-	9		Pr	inceton L	Jnivertsity - Office		d Construction				
	lotification	n		Stree	et Address			8		10-09-0		The Carlo
☐ EPA ☐ Initi	778 m			20	0 Elm Dri	ive		1111	17	001	0	of Division
	ended endment	#		City,	State, Zip	Code	- L	I LI AUG	+ 0	- 201	y	Long
The State of the S	ergency (- Ia	Pri	inceton, l	NJ 08544		A40.00				CONTINUE
(NJAC 5:23-8) just	ification)		3	Name	e of Contac	ot		Telephone Num	ber)	ONTE	OL 8	3.
☐ Car	cellation			Ro	bert Orte	go		609-258-484	ANS	NG		-
				FA	CILITY IN	NFORMATION	house	a managarou do delace anticomen	derivativa de la constanta		AND COLUMN	NAME OF STREET
Name of Facility Where Abateme	nt is Taki	ng Plac	e (3)				Type of Facility (4)				
Princeton University- Eng	neering	Quad	lrangl	е			School (K-12)					
Street Address							Subchapter 8	(Other than K-12				
Olden Street							Other (i.e., printing homes, etc.)	ivate and comme	rcial b	uildin	gs,	
City (5)							Square Feet	# of Floors	Tp	ildg. A	.00	
Princeton							Oqualo i col	# 01 1 10015		nug. r	ye	
County (6)				Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Price	I f heing demolis	shed)			-
MERCER						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		or it being derrions	silcuj			
Name of Monitoring Firm Hired by	Building	Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
TTI Environmental Inc	3		,,,				VIRONMENTAL	INC				
Street Address						Street Address	VIKORWIERTAL	., INC.				
1253 N Church Rd						1123 BEAVE	R STREET					
City, State, Zip Code	S-1-27-11-11-11-11-11-11-11-11-11-11-11-11-11					City, State, Zip Co			1700			
Moorestown, NJ 08057						BRISTOL, PA						
Project Manager for Monitoring Fi	m		Tele	phone	No	Telephone No.	13007	License No.				
Michael Keehn			7450		-8800	215-788-6040	1	00509				
Start Date (10)	Sche	duled C	1		ite (11)	Name of OSHA M		00509				
8/22/19	_	8 /					VIRONMENTAL	, INC.				
Occupancy Status During Abatem						Street Address						
Facility Closed/Vacated During	Entire Pe	eriod of	Abate	ment		1123 BEAVE	R STREET					
☐ Abatement Performed Outside Time of Abatement: 7:00AM-3	of Norma	ıl Facilit	y Hour	s - Des	scribe	City, State, Zip Co	ode					-
			IVI	AIVI		BRISTOL, PA	19007					
Scope of Work (Check all that app	ly)							ras: Aret				
≥3 sf or ≥3 If		⊠ Re	novati	on		☐ Full Cont	tainment with Nega	tive Pressure				
≥160 sf or ≥260 lf			molitic			☐ Glovebag	Procedure					
		т.					mpted (*) and Non-	-Friable Procedur	e			
Location of		100	Locat Norma	535.00		D			AŁ	atem	ent T	уре
Asbestos-Containing Material (ACM)	Use	d Sole	ly by	Asbes	Description o stos Containing Ma		Amount	Re	Re	En	E
TO BE ABATED	•		intena todial :			., thermal systems i	insulation,	(Specify	Removal	Repair	cap	Enclosure
IN Facility (13)		Cus	(12)	Jian :		surfacing, VAT, other miscellane		SF or LF)	/al		Encapsulate	ure
(10)		Yes	No	N/A		other miscenane	ous)				te	
E218			\boxtimes		Floor til	e		44 SF		П		
E226					Floor til	e		86 SF				
E230			\boxtimes		Floor til	e		44 SF		П		
E232				П	Floor til	e		49 SF				
Name of Registered Waste Hauler				JDEP V	Naste I	Cubic Yards of	Name of Registe					
BRISTOL ENVIRONMENTA	L, INC.		100000000000000000000000000000000000000	auler IE 18706	No.	Waste	FAIRLESS L					
City, State						Disposal Date	City, State					
BRISTOL, PA 19007							FAIRLESS H	IILLS, PA				
Completed By (Print or Type)	Title	е				Signature	100 000	Dat	e			
Brian Scafiro	E	stima	tor			Brian	1 Scalino	/OK 8	7	7-1	9	

ASB-41 B519096

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

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

N()()			(P	ursua	nt to NJ	AC 8:60 and 5:1	6)				: 1
Date of Notification (1)				Nam	e of Buildin	ng Owner/Operator	(2)	K			711
8 /	8 / _	19		Sh	adrall Mo	oorestown, LP -	Metro Comme	rcial AUG	1 2 20	10	ALLEGATION OF THE PROPERTY OF
Agencies Notified	Type Notificat	ion		Stree	t Address		1	and food [10	1
⊠ EPA ⊠ DOLWD	☐ Initial			30	7 Fellows	ship Road, STE 3	800			-	
☑ DHSS	Amended Amendmer	nt #1		City,	State, Zip	Code	-	ASBESTOS LICE	NSING	iol 8	
□ DCA	☐ Emergency	C. V. C. T. C.	a	Mt	. Laurel, I	NJ 08054	L-		Manufacture of the second	-	THE REAL PROPERTY.
(NJAC 5:23-8)	justification		5	Name	e of Contac	at		Telephone Numi	ber		
	☐ Cancellatio	n		Ad	am Wolo	sky		856-222-305	8		
				FA	CILITY IN	NFORMATION					
Name of Facility Where A	batement is Ta	king Plac	e (3)				Type of Facility	(4)			
Kmart Moorestown							School (K-1				
Street Address							Subchapter	8 (Other than K-12) private and commer) soiot build	nan	
401 Route 38							homes, etc.)	ciai bullo	ings,	
City (5)							Square Feet	# of Floors	Bldg.	Age	
Moorestown, NJ 08	057						100,000	1	45	, 	
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (P	rior if being demolis	hed)		
Burlington							Vacant	878			
Name of Monitoring Firm	Hired by Buildir	g Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)			
Vertex				NA		Alliance Envi	ronmental Sy	stems			
Street Address						Street Address					
700 Turner Way						550 East Unio	on St.				
City, State, Zip Code						City, State, Zip Co	ode				-
Aston, PA 19014						West Chester	, PA 19382				
Project Manager for Moni	toring Firm		Tele	ephone	No.	Telephone No.		License No.			
Dave Turotsy			6	10-558	-8902	610-701-9000		00508			
Start Date (10)		neduled C				Name of OSHA M	onitor				
8 / _19_ /		9_/	_ 27	<u> </u>	19	AET					
Occupancy Status During						Street Address					
☐ Facility Closed/Vacate	d During Entire	Period of	Abate	ment		28 N. Pennel	Road				
Abatement Performed Time of Abatement: 7/	Outside of Norr	nal Facilit	y Hou	rs - Des	scribe	City, State, Zip Co	de				_
		5.30PW		AIVI		Media, PA 19	063				
Scope of Work (Check all	that apply)					-		2862 3023			
≥3 sf or ≥3 lf		⊠ Re	novati	ion			ainment with Ne	gative Pressure			
≥160 sf or ≥260 lf			molitic			☐ Glovebac	Procedure				
	-	Т.				☐ Non-Exer	mpted (*) and No	n-Friable Procedure	9		
Location	of	1.0	Locat Vorma	1000000		D			Abate	ment 1	Гуре
Asbestos-Containing N		Use	d Sole	ely by	Asbes	Description of stos Containing Mat	rerial (ACM)	Amount	20 Kg	m m	E
TO BE ABA			intena todial		(i.e.	., thermal systems i	nsulation,	(Specify	Removal	cap	Enclosure
IN Facilit (13)	y	Jous	(12)	Otan:		surfacing, VAT, other miscellaned		SF or LF)	/al	Encapsulate	ure
0.50.00		Yes	No	N/A	1	outer missenance	,43)			te	
Main Sales Floor					Floor Ti	le / Mastic		70,000 SF			\dagger
Expansion Joint Caul	k				Back Ex	cterior Wall		120 LF			H
Vibration Damper					Generat	tor Room		8 SF			뉴
			П	$\overline{\Box}$					-	-	12
Name of Registered Wast	e Hauler		I N	JDEP V	Masta	Cubic Yards of	Nome of Desig	A 1611			
Richard Burns & Co			144 . 330	auler I	10000000	Waste	Name of Regis				
City, State				19955	i	100		erks Community	Landfi	11	
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Project Manager for M	onitoring Firm			Telepho	ne No.		Teleph	one		7 000	Licens 0130					
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Facility Closed/Va Abatement Perfor Other – Describe:	ncated During Entire med Outside of North	Period of Amal Facility	Abaten Hours	nent	50 		City, S	tate,	Zip Code					-		
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Richard Cristofol		Presi	dent			8	Signature	1//	1-1-1		>	Date 8/Q/				

State of New Jersey otification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) Date of Notification (1) Name of Building Owner/Operator (2) 8/8/19 # 2938) Hamilton Township School District Agencies Notified Notification Type Street Address ASBESTOS CONTROL & 90 Park Avenue LICENSING X EPA ☐ Initial Notification City, State, Zip Code □ DCA ☐ Amended # Hamilton, NJ 08690 **⊠** DOL Name of Contact Telephone Number □ DEP justification) Susan Lombardo (609) 631 - 4100 ext 5073 **IDOH** ☐ Cancelled Board President FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Hamilton High School West School (K-12) ☐ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings., homes, etc.) 2720 South Clinton Avenue Current Use (prior if being demolished): High School Grades 9-12 City (5) County (6) County Code (7) Hamilton Mercer (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) Panoramic Window & Door Systems Inc. Street Address Street Address 712 Sergeantsville Road City City State, Zip Code Stockton, NJ 08559 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number P (732)926-0900 x102 01237 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8/12 /19 IAQ GURU LLC Occupancy Status During Abatement (Check only one) Street Address ▼ Facility Closed/Vacated During Entire Period of Abatement 4 Beaverbrook Road Suite 130 Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Lincoln Park, NJ 07035 Source of Work (Check all that apply) \geq 3 sf or \geq 3 lf □ Renovation ☐ Mini-Enclosure ≥ 160 sf or ≥ 260 lf □ Demolition □Glovebag Procedure ☑ Non-Friable Procedure Location of Asbestos-Is Location Normally Description of Asbestos Containing Material Amount Abatement Type Containing Material (ACM) in Used Solely by (ACM) (i.e. thermal systems insulation, (Specify SF or Facility (13) Maint./Custodial Staff? surfacing, VAT, or other misc.) LF) Remove Repair Encap (12)Enclose YES NO NA Exterior Window Systems XX Exterior window caulk 3760 lf X X Exterior Window Systems XX Transite Panels adjacent to wooden window 510 SF X systems. Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Cubic Yards of Waste Name of Registered Landfill 0036057 Chrin Brothers Sanitary Landfill Panoramic Window & Dr Sys Inc Disposal Date City, State Easton, PA Completed by (Print or Type) Signature Date Mark M Jovic Project Manager 8/8/19

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1889 Route 9, Unit 61					1889 Route 9						
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Toms River, NJ 08755					Toms River,	New Jersey 08	755				
Project Manager for Monitoring Firm		10000	lephone		Telephone No.		License No.				
Nicholas Fernicola			32-349		732-349-9932	2	00624				
Start Date (10)	Scheduled				Name of OSHA N	Monitor					
08/08/19	08	/ _0	9 /	19	E.M.S.L. Ana	lytical					
Occupancy Status During Abatemen					Street Address				George III		
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Project Manager for Monitoring	g Firm				phone		Telephone No.		License No.				
Nicholas Fernicola					32-349		732-349-9932	2	00624				
Start Date (10)	50 00				tion Da		Name of OSHA N	Monitor			Carrier C	A 11.	
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SOMERSET			(STATE	USE ONLY) _		Curre	nl Use (Prio	r if being dem	olished)			
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MCORESTOWN, NJ 04	1057						p Code					
Tolect Manager for Monitoring Firm	505 1		Telepho	ne No			07011					
ELENA SHERIFF		- 1		832-39		none No 253-8), 828 -	Licens				
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Other - Describe:	ai Facility	Hours			City, S	lale, ZI	p Code					
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	Name of Facility Where Abatement is Taking Single Family Di Street Address	Place (Wel		G	jakage		Type of Facility ☐ School (K			900		
	City (5)				J		Other (i.e. etc.)	er 8 (Other than private & comm		ildings	, hom	ies,
	North Plaint	le	ld	County	UT 070)60	Square Feet	# of Floors		Bldg.	Age O+	_
7	Name of Monitoring Firm Hired by Building O	wner (8)	(STATE	USE ONLY)		Current Use (P	ege.	olished)			
FREEN	Street Address	-	50		N/A	Street A	Address	chnol	egie	S	Ir	16
26	City, State, Zip Code	2 7	<u> </u>	AO	E 2 2		o. Sox ate, Zip Code	337		9	即 執	
- 10	Project Manager for Month rigg Firm	IV &		Telepho	•	Telepho	one No.	Licens	e No.	20	33	5
Clos			ed Con	ouy opletion 3/-	758-3365 Date (11)		58-334 f OSHA Monitor	. 1	<u>, U,</u>	בכ	T.	
ひてこ	Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Pe		ne)		17	Street A	ddress	.hnologii	es 1	مر		7
۶ -	Abatement Performed Outside of Norma Other – Describe:	I Facility	y Hours	i i			ate, Zip Code	ALT	(18	53	3	
7	Scope of Work (Check All That Apply) ≥3 sf or ≥3 If		Renova	tion			Full Containm	ent with Negation				
	≥160 sf or ≥260 lf		Demoliti	ion			Mini-Enclosur Glovebag Pro	e			re	
	Location of	I	Location	у	De	escription o				Abat	ement	t
	Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Ma	ed Solel iintenar todial S (12)	ice/		I systems i	insulation, , or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	(13)	Yes	No	N/A	other	miscellane	ous)		oval	air	sulate	sure
	Garage exterior walls			x	Siding	Shi	igks	400 5	FX	-		
	(a)											
	Name of Registered Waste Hauler			JDEP W		Yards ste	1000000000	Registered Lan				_
	City, State			1700		sal Date	City, Stat			to	e P	M
	Completed by	Title	. ^		by S	3-31-1	9 Morn	isville	PA	0		
Ŀ	Steve Schenker	MRE	side	nT		Dless	eDOL	ohn	8	-9-	17	

¥							01-00	K		٠, ،	
In	1#	13	000	tate of New Jers	ev		Chec	ľΛ	75	4	9
CK 10754 P	ATT	NOTIF	ICATIO	N OF ASBESTOS at to NJAC 8:60 at	ABATEME	NT [TER			F	F
Date of Notification (1)	9		Name	of Building Owner	<u> </u>	<u> </u>		15 L	U	<u>L</u>	
Agencies Notified Type Notification	1,11		Street	Address	Cook	<u>e</u>	AUC	12	2019		11
☐ EPA			City, St	tate, Zip Code				100		S and other	local
DOL Amendment Emergency (_		Fair	Have	2	J JOBBE TO	33	yep	1.8	
DOH justification) □ DCA □ Cancellation	1.,		Name o	of Contact	Ke		Telephone	Numbe		PER	Jetan Burgana
Name of Facility Where Abatement is Taking	Place	(3)	FAC	ILITY INFORMAT		pe of Facility	(4)				
Street Address JE	14	D	wel	ling		School (K-	12)				
)	×	Subchapte Other (i.e. etc.)	r 8 (Other than private & comm	K-12) ercial bu	ildings	, hom	es,
City (5) Fair Haven		Λ	J	07704	Sq	uare Feet	# of Floors		Bldg.	Age ') -⊁-	 -
County (6) Monmouth				Code (7) USE ONLY)		rrent Use (Pr	ior if being dem	olished)	اربيا	1/10	
Name of Monitoring Firm Hired by Building C	-		ASCI	M No.	Name of A	batement Co	a (2	y v	MC!	11/19	
Street Address	17	433		8 - 48-3	Street Add	ress	innol 222	391E	4		36
City, State, Zip Code	N.		09	5.33	City State	Zip Code		TA	96	2	2
Project Manager for Monthridge irm		- 1	Telepho		Telephone	No.	Licens	e No.	20	U	100°
	Schedul		pletion	758-3365 Date (11)	Name of O	8-336 SHA Monitor	. 1	JU.	ונ	7	
Occupancy Status During Abatement (Check	Only O	ne)	21-	19	Street Add	ess lec	hnologie	es I	مر		
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal	eriod of	Abatem y Hours	ent .		P.O City, State,		337	57			
Other - Describe: Scope of Work (Check All That Apply)				·	New	Egypt	TU	08	53	3	
≥3 sf or ≥3 If		Renova	tion			ull Containm	ent with Negativ	o Proce			
≥160 sf or ≥260 lf		Demoliti		**	> > N	lini-Enclosure lovebag Prod				pr 870	
£ 7	ls	Location	on			OII-Exemple	1 () and Non-Fi	lable Pi	Abate	ement	
Location of Asbestos-Containing Material (ACM)		Normall ed Solel		Des Asbestos Cont	scription of	al (ACM)	A		Ту	pe .	\vdash
TO BE ABATED In Facility	10.5	intenar todial S	54050000 magazini	(i.e. thermal			Amount (Specify	Rer	R	Encapsulate	Enc
(13)		(12)	,		iscellaneous)	SF or LF)	Removal	Repair	psula	Enclosure
0	Yes	No	N/A							te	6
Basement	X				Schoolin	, WRap	50 L	-			
12+ 219 Floon Akeas		X		Flour	rles	-	.300 Si	= x			
							ž.				
Name of Registered Waste Hauler			JDEP Wauler ID				Registered Land		-	_	
EPC lechnologies			1700	Dispos	al Date	City, State	e Manag	enen	tol	= P	14
New Equat 1	JJ Title	3		by 8	7-31-19		isuille	PA			
Completed by Schen Kerk		Side	nt	Si	gnature	Sel.		Date	9-1	9	

Inv# 13465	ATT	NOT	IFICATION	State of New Jers ON OF ASBESTO	SABATE	EMENT (
Date of Notification (1)		<i>D</i> 1	(Pursuai	nt to NJAC 8:60 a	nd 12:12	20)	m 1	EC	E	$\overline{\mathbb{V}}$	E	n
8-6-2019			Mary	of Building Owner Ann Schneide	r/Operato r	or (2)	M					
Agencies Notified Type Notification	n		Street	Address				AUG	1 2:	2019	halles an value of	1
DEP Initial Amended Amendme				State, Zip Code		es de la comp		Chenne				
X Emergenc	y (includia	ng		ewood, NJ 074	150				ENSIN	G	L&	
DCA justification Cancellation			I Company of the Company	Ann Schneide	r		Te	elephone N	Number		- Constitution	Total Surgician and
Name of Facility Where Abatement is Tak	ing Place	(3)	FAC	CILITY INFORMA	TION	Type of Facilit	v (4)					
Residential Street Address		We 22				School (K	(-12)					
City (5)						Subchapt	ter 8 (Oth	her than K- & comme	-12) rcial bu	ilding:	s, hon	nes,
Ridgewood, NJ 07450				÷(*)	(Square Feet 2458	2	of Floors		Bldg. 75+	Age	
County (6) Bergen			County (STATE	Code (7) USE ONLY)		Current Use (F	Prior if be	ing demol	ished)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASC	M No.	Name	of Abatement C	ontractor	r (9)				
Street Address					Street	Address		ervices, l	LLC			
City, State, Zip Code						Virginia Aven	ue					
Project Manager for Monitoring Firm			Telepho	one Ne	Jerse	ey City, NJ 07	7304					
889			Telepho			one No. 333-8855		License 01174	No.			
Start Date (10) 8-7-2019	8-7-20	019	mpletion	Date (11)	000000000000000000000000000000000000000	of OSHA Monito n Environme	The same of the sa	rvices I	I C			
Occupancy Status During Abatement (Che					Street	Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	Period of nal Facili	Abater ty Hour	nent s		City, St	/irginia Avenu		-				-
Scope of Work (Check All That Apply)					Jerse	ey City, NJ 07	304					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli			×	Full Containn Mini-Enclosu Glovebag Pro	re ocedure					
		s Locat	ion			Non-Exempte	ed (*) and	d Non-Fria	ble Pro	17310	re ement	t
Location of Asbestos-Containing Material (ACM)		Normal ed Sole	ly		scription				_		/pe	
TO BE ABATED In Facility (13)		aintena stodial S (12)		Asbestos Cont (i.e. thermal surfac other n	aining Ma systems cing, VAT niscellane	insulation, , or	(S	mount specify or LF)	Remova	Repair	Encapsulate	Enclosure
A III	Yes	No	N/A						8		ate	re .
Attic		X		Ve	rmiculit	е	68	B SF	Х			
									-			
					-			-	+			
Name of Registered Waste Hauler Green Environmental Services			JDEP Wauler ID					red Landfil	ı		1	\dashv
City, State		1000000	34889	1	*****	Fairles		fill				
Jersey City, NJ				8-7-20	al Date 019	City, Stat Morrisv		4				
Completed by Liliana Serrano	Title Office	e Man	ager	90.	gnature		1.720	Da	ate -6-201	19		
			1878	V	- vell	our Til	1 - F. F. F. A.	/ /		~		- 1

TO	业	31	180)									-		706	
CK34353 P	AII	TINO	TIFIC	Sta ATION	te of New OF ASBE NJAC 8:6	Jersey STOS ABA 0-7 and 12	ATEME :120-7)	ENT			G		1	42	3	
Date of Notification (1)						Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORP. AUG 1 2 2019									And distributions	
8 / 7 /2019						Street Address										
Agencies Notified Type Not	126 E. LINCOLN AVENUE, P.O. BOX 2000 BY28-414															
EPA X Initi	al Notifica	ation			City, State, Zip Code										F.	
DEP Amended Notification X DOL Cancellation						NAY, NEW JERSEY 07065 LICENSING									untanium in 4 min	
X DOH On	Name of	e of Contact Telephone Number														
DCA EM			JOHNSON Telephone Number 732-594-7746													
	FACIL		NFORMATION													
Name of Facility Where Abatement is Taking Place (3)						Type of Facility (4)										
MERCK SHARP & DOHME CORPO	RATION				School (K-12) Subchapter 8 (Other than K-12)											
						X Other (ie. priv						2) alda	s ho	mes a	etc)	
Street Address 126 EAST LINCOLN AVENUE - BUII	DINO		3000		Square Feet # of Floors								g. Age			
at the	inty (6)			_		98,320 7								71		
RAHWAY	ON			(S	County C TATE US	ode (7) F ONLY)	de (7) Current Use (Prior if being demolished) ONLY) RESEARCH LABORATORY AND OFFICE FA									
Name of Monitoring Firm Hired by	Building	Owne	r (8)	1 (9		SCM No.	Nam	me of Abatement Contractor (9)								
ENVIRONMETAL HEALTH INVESTIG	GATIONS	, INC.				104	PAR	ENVIRON	ENVIRONMENTAL CORPORATION							
655 WEST SHORE TRAIL					et Address		240	-0.4								
City, State, Zip Code			313 SPOOK ROCK ROAD City, State, Zip Code													
SPARTA,			SUFFERN, NEW YORK 10901													
Project Manager for Monitoring Firm WILLIAM S. KERBEL, CIH	oer		Telephone Number License Number													
Expected State Date (10)	Date (11)			369-7500	7500 1101 OSHA Monitor											
8 / 17 /19	31	/19		RISCI LAE			NC		# *	11480						
Month Day Year	ay	Year				7111201			т.	11400						
Occupancy Status During Abatement (Check only one) X Facility Closed/Vacated During Entire Period of Abatement								t Address	LOTDE	СТ						
Abatement Performed Outside of Normal Facility Hours X Other - Describe: SATURDAY 7AM-5PM					- Describ	e:	117.6	117 EAST 30TH STREET								
						City, State, Zip Code NEW YORK, NEW YORK 10016								\neg		
Scope of Work (Check all that apply)						TFull Conta	 ainman	NEV	V YORK	(, NEW	YOF					
Demolition X Renovation						Mini Enclo , Vac							Vacu		Hepa	
>3SF OR LF >160 SF OR 260 LF						Glovebag Non-Friab	Proce	dure								
Location of		s Loca	ation	1	Descr					-	_	A 1				
Asbestos-containing	1 (0.000)	rmally	used		Description of Asbestos- Containing Material (ACM) Amount						6			ent Ty	pe E	
Material (ACM)		solely			(ie. Thermal systems				(S	CONTROL	0	EP,	NO			
TO BE ABATED in Facility (13)	Ma	int/Cu Staff (stodia 12)	1	insulation, surfacing, VAT, or other miscellaneous)				SF or LF) 궁			٦	PAIR	APS	5	
		s No			OI OIII	er miscella	ineous,	10)			2			NCAPSUL	CLOSUR	
3RD FL ROOM 319			х	FIRE	PROOFIN	G DUST			10 SF		X					
STUELOOD DOOM SEE						PROOFING DUST					X					
STH FLOOR ROOM 617 X FIREF						20051110 21102					X					
6TH FLOOR ROOM 621 X FIRE						PROOFING DUST					X					
6TH FLOOR ROOM 629			X						10 SF		X				\neg	
Name of Registered Waste Hauler	NI 15															
Name of Registered Waste Hauler FREEHOLD CARTAGE, INC. NJDEP Waste Cul Hauler ID No.					Yards of \	Waste		of Registe			205					
825 HIGHWAY 33 15939					3 LYCOMING COUNTY RESOURCE MANAGE 447 ALEXANDER DRIVE/ROUTE 15					MEN'	SE					
City, State					sal Date		City, State						\dashv			
FREEHOLD, NEW JERSEY Completed by (Print or Type)	Title		-	8/17/1	9-12/30/19		MONT	ONTGOMERY, PA 17752								
BENJAMIN SANCHEZ	DIRECTO	OR OF	OPF	RATIO	Signa	ature	1	AX		Da	ate (11	7/	19		

11/16)

Date of Notification (1) 0 8 / 0 7 / 1 9 Agencies Notified Type Notifica Initial Amended Amendment #	tion	Name of Bu Phil Pam Street Addre	(Pursu	cation of As uant to NJA ner/Operator (2	c 8:6 13	os Abatement 0 and 12:120)	denomination of the part of th	ASBESTO		TRO	White the second	Communication Indiana	Parketistandenistandenistanden brand dalamante Bishasippinkanden d		
DOH (including justification)		Name of Co				Telephone Number									
Cancellatio	n	Phil Pan													
Name of facility where abatement	io takina al	(2)	FAC	ILITY INFORM	MATIO	V	11-								
	is taking pi	ace (3)					11,	ype of Facility (4	4) I (K - 12)						
Residential		Subchapter 8 (Other than K-12)													
Street Address		Other (Private/Commercial													
					88		Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age								
City (5)	Cou	nty (6)				inty Code (7)	01 70								
Clifton, NJ 07013	Clifton, NJ 07013 Passajc							State use only) Current Use (Prior if being dem							
Name of Monitoring Firm Hired by	200000			ASCM No.	4	Name of Abateme		Residential htractor (9)							
N/A						KLOMAX, LI	LC.	Const							
Street Address		Street Address													
01.00.			309 W. End Ave												
City, State, Zip Code		City, State, Zip Code													
Project Manager for Monitoring Firm	er		Hopatcong, NJ 07843 Telephone Number License Number												
		1	833-455-6629												
Start Date (10)	1)	_	Name of OSHA Monitor												
08/23/19	08/26	5/10				KLOMAX, LLC									
Occupancy Status During Abatemen			A		-	Street Address 309 W. End Ave									
Facility closed/vacated during						City, State, Zip Code									
Abatement performed outside Describe:		facility hour	S-												
Other-Describe: NORMAL H	210				-	Hopatcong, N	J 078	43							
Scope of Work (check all that apply 3 sf or >3 if						-		Containment w/	negative	press	ure				
≥ 160 sf or ≥ 260 lf	Renovatio					ř	-	i-enclosure rebag procedure	9						
	Demolition							-Exempted (*) a		_	_	edure			
Location of asbestos-containing	by mainte	n normally u enance/cust	ised solely odial	1	.	a kon ayar tarahan ayar ayar		Amount		e e	R	E	E		
material (acm) to be	staff(12)			material (sbestos-containing		(Specify SF	or	m o	p a	С	n		
abated in facility (13)	Yes	No	N/A					LF)		٧	i	a p	L		
Garage		X		Paper Duct	Insul	ation		100 SF		e	6				
Registered Waste Hauler	INJO	P Hauler II	# I C	ubic Yards of V	Masta	INome of Desister	2012	Jell			Ц	Ш			
KLOMAX, LLC		8241	CONTRACTOR OF THE PROPERTY OF	yds	14315	Name of Register TULLYTOWN			COVER	Y					
City, State		1	Disposal D	ate		City, State									
Hopatcong, NJ 07843 Completed by (Print or Type)	771		TBD	Cianatira	\neq	TULLYTOW	N, PA								
Paige Roylan	Title			Signature	A				Date						

Proj. #: 19-163 Date of Notification (1) 0 8 / 0 6 / 1 9 Agencies Notified Type Notified Initial EPA Initial DEP Amended Amendment DOL Emergence (including justification pushification of the company of the comp	ation #:y	Bob & I Street Add City, State, Ridgew Name of Co	(Purs) Building Ov Don Chic ress , Zip Code	fication of Assuant to NJA Thus vner/Operator (sekering) 07450	C 8:	NJ tos Abatement 60 and 12:120)	AS AS	AUG T	201 CONTR SING	9			
				CILITY INFORM	// ATIC	NN.							
Name of facility where abatement Residential Street Address	is taking p	blace (3)					☐ Sub	y (4) ool (K - 12) chapter 8 (0 er (Private/Co s./Homes, el	ommerc)		
City (5)	I Cou	unty (6)			T 0-		Square Feet	# of Floor		Bldg.	Age		
Ridgewood, NJ 07450	Be	ergen			unty Code (7) ate use only)	2,400 SF 02 50 Current Use (Prior if being demolished) Residential							
Name of Monitoring Firm Hired by N/A Street Address City, State, Zip Code	Bldg. Owr	ner (8)		ASCM No.		Name of Abatement KLOMAX, LLO Street Address 309 W. End Ave							
Project Manager for Monitoring Firm	n	Ph	-	City, State, Zip Code Hopatcong, NJ 07843 Telephone Number License Number 833-455-6629 02007									
Start Date (10) 08/20/19 Occupancy Status During Abateme	08/2 nt (Check o	only one)	Name of OSHA Monitor KLOMAX, LLC Street Address 309 W. End Ave										
Facility closed/vacated during Abatement performed outside Describe: Other-Describe: NORMAL F	of normal	iod of abate facility hour	ment.		_	City, State, Zip Code Hopatcong, NJ (7843	0					
Scope of Work (check all that apply	Renovation Demolition	n					Full Containment Mini-enclosure Glovebag procedu Non-Exempted (*	ıre			====		
Location of asbestos-containing material (acm) to be abated in facility (13)		n normally usenance/cust		1		sbestos-containing	Amount (Specify s LF)	SF or	R e e m p o a v i	E n c a p	E n c L		
Basement				Pipe Insulati	ion		740 LF		e r	d =	t		
Basement		X		Boiler Insula	ation		65 SF			唱	昌		
Registered Waste Hauler KLOMAX, LLC	NJDE 003	P Hauler II 8241	- 100 m	ubic Yards of W	aste	Name of Registered TULLYTOWN, I		ECOVERV			出		
City, State Hopatcong, NJ 07843			Disposal Da TBD	ate		City, State TULLYTOWN,		- CO TENT					
Completed by (Print or Type) Paige Boylan	Title Owner	-	1 14	Signature	1	料		Date 09/06/10	1				

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) 22 Princeton University-Office of Design and Const. Agencies Notified Type Notification Street Address ☐ EPA 200 Elm Dr □ DOLWD City, State, Zip Code ☑ DHSS Amendment #1-8/6/19 Princeton, NJ 08544 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Numbering □ Cancellation Robert Ortego 609-258-1841 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Princeton University-University Store School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 36 University Place homes, etc.) City (5) Square Feet # of Floors Bldg. Age Princeton County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) MERCER Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) TTI Environmental Inc BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 1253 N Church Rd 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Moorestown, NJ 08057 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Michael Keehn 609-386-8800 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8 / 1 / 19 8 / 9 / 19 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-4:30PM/_ PM-BRISTOL, PA 19007 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure $\boxtimes \ge 3$ sf or ≥ 3 If □ Renovation Mini-Enclosure ≥160 sf or >260 If ☐ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Encapsulate Remova Enclosure Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, Custodial Staff? (Specify IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement X Pipe Fitting Insulation 29 LF Basement X Floor tile and mastic 220 SF Basement X Pipe 500 LF П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill BRISTOL ENVIRONMENTAL, INC. Hauler ID No. Waste FAIRLESS LANDFILL 18706 City, State Disposal Date City, State BRISTOL, PA 19007 FAIRLESS HILLS, PA Completed By (Print or Type) Title Signature Brian Scafiro Estimator ASB-41

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

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