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Agencies Notified	Type Notification				Address											
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☐ DCA	Cancellation					DRAT	ION									
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Hudson				(STATE	USE ONLY)	-		Off	ice Building							
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	M No.		Name	of Aba	atement Contr	actor	(9)					
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Street Address	unty (6) udson me of Monitoring Firm Hired by Building Owner (in/A set Address if, State, Zip Code spect Manager for Monitoring Firm int Date (10) ugust 22, 2015 supancy Status During Abatement (Check Only Coupancy Status During Abatement (Check Only Coupand) Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Other – Describe:						Street									
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County (6) Passaic										or if bei	ng demolish	ed)			
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City, State, Zip Code Elmwood Park, NJ	07407			11			City, S	State, Z	ip Code						
Project Manager for Mor Vijay Patel	the same of the sa					n	Telep	hone N	0.	7 01 1	License N	٥.			
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Other – Describe:						_	Way	ne, N	ew Jersey	y 074	70				
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Asbestos-Containing TO BE AB. In Facil (13)	Telephone No. (201) 794-6900 (973) 928-5040 00874 Scheduled Completion Date (11) 9/7/2015 Sky Contracting, LLC g Abatement (Check Only One) ated During Entire Period of Abatement led Outside of Normal Facility Hours Street Address 1385 Valley Road, Suite K	Repair	Encapsulate	Enclosure											
		Street Address 401 Grand Street, Room 524 City, State, Zip Code Paterson, NJ 07505 Name of Contact Mr. Jack Nigro FACILITY INFORMATION g Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, hetc.) Square Feet 4,000 Square Feet 4,000 Square Feet 4,000 Square Feet 4,000 Street Address 1385 Valley Road, Suite K City, State, Zip Code Wayne, New Jersey 07470 Telephone No. (201) 794-6900 Scheduled Completion Date (11) Street Address 1385 Valley Road, Suite K City, State, Zip Code Wayne, New Jersey 07470 Telephone No. (201) 794-6900 Street Address 1385 Valley Road, Suite K City, State, Zip Code Wayne, New Jersey 07470 Telephone No. (201) 794-6900 Scheduled Completion Date (11) Sky Contracting, LLC Street Address 1385 Valley Road, Suite K City, State, Zip Code Wayne, New Jersey 07470 Scheduled Completion Date (11) Sky Contracting, LLC Street Address 1385 Valley Road, Suite K City, State, Zip Code Wayne, New Jersey 07470 Telephone No. (201) 794-6900 Scheduled Completion Date (11) Sky Contracting, LLC Street Address 1385 Valley Road, Suite K City, State, Zip Code Wayne, New Jersey 07470 Telephone No. (201) 794-6900 Street Address 1385 Valley Road, Suite K City, State, Zip Code Wayne, New Jersey 07470 Telephone No. (201) 794-6900 Street Address 1385 Valley Road, Suite K City, State, Zip Code Wayne, New Jersey 07470 Telephone No. (383 Valley Road, Suite K City, State, Zip Code Wayne, New Jersey 07470 Telephone No. (3973) 928-5040 Telephone No. (400 Variety State, Zip Code Wayne, New Jersey 07470 Telephone No. (500 Variety State, Zip Code Wayne, New Jersey 07470	œ												
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2015 AUG 17 4H 8: 42

July 24, 2015

TABLE 1 ESTIMATED QUANTITY OF ACM TO BE REMOVED

Material	Location	Survey Results	Estimated Quantity of AG Assumed ACM be Remove	CM/ M to	ACM Removal Method
Basement	Work Area #1				
Pipe insulation	Basement – Northwestern Space	ACM	7	LF	Glove Bag and/or Intact Removal Using Wrap-and-Cut Procedures within Negative Pressure Tent Enclosure
Basement	Work Area #2				
Pipe insulation	Basement – Center Space	ACM	13	LF	Glove Bag and/or Intact Removal Using Wrap-and-Cut Procedures within Negative Pressure Tent Enclosure
Basement	Work Area #3				
Pipe insulation	Basement – Northeastern Space	ACM	30	LF	
Pipe insulation debris	Basement – Northeastern Space	ACM	20	SF	Negative Pressure Containment Procedures in Accordance with
Pipe insulation	Basement – Crawl Space	ACM	30	LF	N.J.A.C. 5:23, Subchapter 8 Rules and Regulations.
Pipe insulation debris	Basement – Crawl Space	ACM	50	SF	
Basement	Work Area #4				
Pipe insulation	Basement - Boiler Room	ACM	20	LF	Glove Bag and/or Intact Removal Using Wrap-and-Cut Procedures within Negative Pressure Tent Enclosure
Ceiling Transite panel	Basement - Boiler Room	ACM	60	SF	Intact Removal Procedures within Negative Pressure Tent Enclosure
Basement	Exterior				Zarotoga, o
Exterior window cault (9 masonry window openings)	Exterior of Perimeter Walls	ARM	//%	Į¥	Exterior Removal Procedures in accordance with NJ DOL and NJ-DHS8 requirements.
First Floor	Work Area #5				7
Pipe insulation — Exposed and concealed within wall pipe chase	First Floor – West Side	ACM	20	LF	Negative Pressure Tent Enclosure with Remote Decontamination Unit
First Floor	Work Area #6				

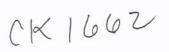
Dey Mansion 199 Totowa Road, Wayne, New Jersey

	V-1914		15.1	
Pipe insulation – Exposed and concealed within wall pipe chase	First Floor – East Side	ACM	20 LF	Negative Pressure Tent Enclosure with Remote Decontamination Unit
First Floor	Exterior			
Exterior window cault (17 masonry window openings)	Exterior of Perimeter Walls	ACM	/440/LF/	Exterior Removal Procedures in accordance with NJ-BOI and NJ-BHSS requirements
Second Floor	Work Area #7			
Pipe insulation – Exposed and concealed within wall pipe chase	Second Floor – West Side	ACM	20 LF	Negative Pressure Tent Enclosure with Remote Decontamination Unit
Second Floor	Work Area #8			
Pipe insulation – Exposed and concealed within wall pipe chase	Second Floor – East Side	ACM	20 LF	Negative Pressure Tent Enclosure with Remote Decontamination Unit
Second Floor	Exterior			
Exterior window cardk (13 masonry window openings)	Exterior of Perimeter Walls	ACM	/285/LF/	Exterior Removal Procedures in accordance with NJ-DOL and NJ-DHSS requirements.
Attic	Work Area #9			==
Pipe insulation — Exposed and concealed within wall pipe chase	Attic – West Side	ACM	5 LF	Glove Bag and/or Intact Removal Using Wrap-and-Cut Procedures within Negative Pressure Tent Enclosure
Attic	Work Area #10			
Pipe insulation — Exposed and concealed within wall pipe chase	Attic – East Side	ACM	5 LF	Glove Bag and/or Intact Removal Using Wrap-and-Cut Procedures within Negative Pressure Tent Enclosure
Attic	Exterior			
Exterior window cauk (4 masonry window openings)	Exterior of Perimeter Walls	AgM/	//65/LF	Exterior Removal Procedures in accordance with NJ-DOL and NJ-DHSS requirements.

- C. The Contractor shall be aware of all conditions of the Project and is responsible for verifying quantities and locations of all Work to be performed. Failure to do so shall not relieve the Contractor of its obligation to furnish all labor and materials necessary to perform the work.
- D. The Contractor shall file abatement notifications with applicable Federal, State and local agencies having jurisdiction over this asbestos abatement project, and obtain abatement permit from the local building department. Failure on behalf of the Contractor to file notifications and obtain permits shall not result in any extension for the timely results of completion of the work set forth in the Contract. The Contractor shall be responsible and shall be required to pay any administrative penalties imposed on the Owner, and the Design Consultant retained by the Owner for actions taken or lack thereof by the Contractor in accordance with N.J.A.C. 12:120-3.5, 8:60-3.5 and 5:23-Subchapter 8.

Dey Mansion 199 Totowa Road, Wayne, New Jersey

Asbestos Abatement 02080-4



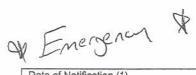
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Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	No.		Name	of Aba	tement Cont	tractor (9	9)					
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Street Address								Addres	TO THE SEC. 100							
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City, State, Zip Code									ip Code	0747	_					
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Project Manager for Mor	litoring Firm			Telepho	ne No.			one N 928-		113	Licens 00874					
Start Date (10)	19	Scheduled		pletion I	Date (11)		Name	of OSH	HA Monitor							
8/18/2015		8/24/201					Sky (Contra	acting, LL	С						
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	pe Notification				lame of Building Owner/Operator (2) Sarry Gruber Private Home Street Address 359 Morris Blvd Jity, State, Zip Code Manahawkin NJ 08050 Jame of Contact Garry FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other file private 8 commercial buildings, howeld) Square Feet John Home ASCM No. Name of Abatement Contractor (9) Pernaco Inc. Street Address PO Box 329 City, State, Zip Code West Berlin NJ 08091 Felephone No. Street Address PO Box 329 City, State, Zip Code West Berlin NJ 08091 Felephone No. Street Address City, State, Zip Code West Berlin NJ 08091 Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (1) and Non-Friable Procedure Non-Exempted (1) and Non-Friable Procedure Non-Exempted (1) and Non-Friable Procedure Abatement Type Abatement Typ										
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	Type Notification														
Date of Notification (1) 8/12/15												ente ette			
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Name of Facility Where Abatement is Taking P Mike Stevens Private Home	Place (3)					8					-	6	17		
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City (5) Manahawkin NJ 08050							Squar	e Feet		Floors				ge	
County (6) Ocean									or if bei	ng demol	ished))			
Name of Monitoring Firm Hired by Building Ow N/A	ner (8)		ASCM	l No.					tractor	(9)	*				
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City, State, Zip Code						100000000000000000000000000000000000000	201 Sept 100		91				54	*0	
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Scope of Work (Check All That Apply)															
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City, State					Dispo		e			A 1906	7.				
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2/5	State of New Notification Of Assignment (Check All That Apply) State of New Notification Of Assignment of Building of Haddon Township (Industrial Plants) Street Address Store Address Store Address Store Amended Michael Moore Pacific Ty INFO (Industrial Plants) Street Address Store New Yearmant, NJ Name of Contact Michael Moore Pacific Ty INFO (Industrial Plants) Separate Use Only (Industrial Plants) Separate Use Only (Industrial Plants) Separate Use Only (Industrial Contact Michael Moore Pacific Ty INFO (Industrial Plants) Separate Use Only (Industrial Contact Michael Contact Moore Use Industrial Contact Moore Industrial Plants) Separate Use Only (Industrial Apply) Separate Use Only (Industrial Apply) Separate Use Only (Industrial Industrial Indust					HO.	736	#002							
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City (5) Haddon Township								\$qua 5,00	etc.) Ma Feat	2	f Floors		Bidg.	Agm	
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City, State, Zip Code Newfield, NJ 08344									ip Code ads, NJ 05	3052					
Project Manager for Month Jim Eberts	lating Firm						Teleph 856-7		270 Lucy 1		00842				
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Scope of Work (Check All	That Apply)	_										10.0		~	-
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Completed by Christina Lynch		Open	alion	Mana	ger	18	SCh .	Sh.	RA)	0.75	0±10 B/12/2	015		

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Date of Notification (1)		N	ame of	Building O	wner/C	perator	(2)	. 51							
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Name of Facility Where Abatement is Taking	Place (3)		TAGI	LITT IN O	XWATT	OIN	Туре	of Facility (4)					71.5-00.5-	
							Пѕ	School (K-12	2)						
Street Address	^ .	,					T S	Subchapter 8	(Othe						
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City (5)	1 0	1 2 12	1				Square	e Feet	# of	Floors		Bld	g. Aç	je	
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County (6)				Code (7)			Currer	t Use (Prior	r if beir	ng demo	lished)				
(CEUI)		(S	IAIE	JSE ONLY)	-	-	M	lone							
Name of Monitoring Firm Hired by Building Or	wner (8)		ASCN	No.				ement Cont	ractor	(9)					
						125000000	77	stries Inc.							
Street Address							Addres	7/1							
							Box 9					_			
City, State, Zip Code							State, Zi	p Code / Jersey 0	8723						1
Project Manager for Manitoring Firm		T	elepho	no No			none No		0720	License	a No				
Project Manager for Monitoring Firm		16	sieprio	ile ivo.		E 9350))899-7		1	01196					
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Facility Closed/Vacated During Entire Pe			nt												
Abatement Performed Outside of Norma						City, S	state, Zij	p Code							
Other – Describe:					-										
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Brick Industries Inc.		10.000	302	140.	oi vva:	ste 8		GROWS	S Inc.						
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Brick, New Jersey						19/15		PA							
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Date of Notification (1) August 12, 2015					Building (Point Po				С	Chec	k #2302	2 /	Ψ p		3
Agencies Notified	Type Notification			Street Ad	ddress Crown P	oint Ro	ad			ž			11 6	4 NA	1
EPA DEP DOL	Initial Amended Amendment	#	_		te, Zip Co Ille, NJ (1.105		in Q	-	
DOH DCA	Emergency (justification) Cancellation	ncluding		Name of Jeff Ze	Contact		20-11			Teleph	one Num	ber		1	
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Name of Facility Where A		Place (3	3)						Facility (4)						
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City (5) Westville								Square 30,000	Feet	# of Flo	oors			\ge	
County (6) Gloucester				County (Code (7) JSE ONLY)			Current	t Use (Prior ∋ry	r if being	demolish	ed)	-	4	
Name of Monitoring Firm EHS Environmenta		wner (8)		ASCN	1 No.				ment Cont ronment						
Street Address 411 Southgate Cou	rt, Suite E							Address Cutler A	Avenue		7				-
City, State, Zip Code Mickleton, NJ 0805	6							State, Zip le Shac	Code le, NJ 08	8052	工	-			
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Start Date (10) August 26, 2015				npletion l	Date (11)		Name	of OSHA	Monitor ytical, Inc			-	پ	<u></u>	
Occupancy Status Durin	n Abatement (Chec			20, 201				Address	(S) (S)					_	
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Facility Closed/Vac Abatement Perform Other – Describe:							255.00	State, Zip	Code on, NJ 08	8077					
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City, State Voorhees, NJ						Dispos 9/25/2	sal Date 2015		City, State Morrisvil						
Completed by Christina Lynch		Title Oper	ration	s Mana	iger	(5	Signatur	Sha	L.		Da 8/		015		

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

Check # 7344

B & G proj. #: 2015-142 Notification of Asbesto (Pursuant to NJAC 8:60-

		Larry Brown Steek Address 18 Collins Avenue City, State, Zip Code Bloomfield, NJ 07003 Name of Contact Larry Brown FACILITY INFORMATION s abstement is taking place (3) Type of Facility (4) Shool (K - 12) Subchapter & (Other (hinate) Commercial Bidgs, Homes, etc. Square Feet # of Floors Bidg. Age County (6) County (Code (7) (State use only) Current Use (Prior if being damolished) residential State of Code County (6) State use only Current Use (Prior if being damolished) Residential Code County (7) State use only Residential Code C											
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Agencies Notified	Type Notificati	on St	reet Add	ress									
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City, State, Zip Coo	de .					_							
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	ate (10)	000000000000000000000000000000000000000			17			n, Inc.					
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Lincoln Park, I	NJ						Tullytown, P.	Telephone Number Type of Facility (4)		v.			
		Title		-1	Signature		(0, (0		100000000000000000000000000000000000000				
Gordana Luna		Secreta	rv/Trea	surer			Gordana Luna		08/13	2/201	5		

CK#24901

			Nan	ne of Buildi	ng Owner/Operato	or (2)	cela Au	1 : 7	£ 14	0	_
V-2241001001001000			_			Van Dy	ke		-1.7	Ö:	U
10.2.22	tion		Stre	et Address	5	40 Wallace	Pd.	1			-
☐ Amended			City	State 7in	Code	T) Wallace	Nu.	1		- 1	(,)
☐ Emergend	y (includ	ing				eton Junction	n, Nj 08550			7	
			Nam		5717		Telephone Nu	mher			
Ahatement is T	akina Dla	00 (3)	FA	ACILITY IN	FORMATION						
						5.0					
						☐ Subchapte	er 8 (Other than K-	12)			
49 1	Wallac	e Rd.				Other (i.e.	, private & commer	cial bu	ilding	s,	
			The second second			Square Feet	# of Floors		Bldg.	Age	
Princeto	on Jun	ction				2200	_ 2	_ _	60		
Mercer			US	inty Code (E ONLY)-	(7) (STATE	Current Use (Prior if being demo	lished)		
m Hired by Buildi	ng Owne	r	ASCN	1 No.	Name of Abaten	nent Contractor	(9)			_	=
MECS								ces. I	nc		
DC D					Street Address			, 1			=
PO Box	341						Box 322			87	
Crosswick	s NI				City, State, Zip C		vm NII 00501			5	
	0,110	I Tel	ephone	No.	Telephone No	Allemov					_
eisgarber		. 100000				59-9688		0049	13		
Sc	heduled	Compl	etion D	ate (11)				0013	_		_
		9/4/	15			N	MECS				
					Street Address	D.O.	5 644				
ed During Entire	mal Faci	itv Hou	ement		City State 7in O		Box 341				_
7am to 3:30	pm	,			City, State, Zip C		wicks NI				
all that apply)				38	W	C1033	WICKS, IVJ		_	_	_
	₩ R	enova	tion		Full Con	tainment with N	egative Pressure				
					☐ Gloveba	a Procedure					
	Is	Locati	on		Non-Exe	empted (*) and N	lon-Friable Procedu		N 1 /	-	
of					20 00 00			'			
Material (ACM)	Ma	intenar	ice/	Asbest			Amount				Т
					thermal systems in	nsulation,	(Specify	₽ P	R	Enca	
		(12)					SF OF LF)	Mov	epai	nsde	
	Yes	No	N/A					<u>a</u>		late	
oom	×			T	ransite Wall F	Board	120 sf	×			-
loom	×				Transite Flue		14 lf	X			-
								1			-
	_									_	-
	-										-
ste Hauler	- -		JDEP V	No.	Cubic Yards of Waste	Name of Reg	istered Landfill				
	es, Inc			No.	of Waste 2CU	_/_/	istered Landfill GROWS Lan	ndfill			
ste Hauler nental Servic			lauler ID	No.	of Waste 2CU Disposal Date	Name of Reg	GROWS Lan				
ste Hauler nental Servic Allentown,			lauler ID	No.	of Waste 2CU	_/_/					
	Type Notifica Initial	Type Notification Amended	Type Notification Initial	Type Notification Initial	Type Notification Initial	Type Notification Initial	Type Notification	Type Notification	Type Notification	Type Notification	Street Address

CK#24902

Date of Notification (1)		Name	of Buildin	g Owner/Operator S	(2) JS Mapleton.	LLC	els Alic	17	4.	ĭ 8			
Agencies Notified	Type Notification			Street	Address			14			- 11		• • • •
EPA EPA	⊠ Initial						75 Mapleton	Rd	* 'e	- 2			
DEP DOL	Amended Amendment #		, [City, S	tate, Zip C		inceton, NJ (08540	* 1-	V	- 17		
M DOH □ DCA	justification) Cancellation	oldanig	,	Name	of Contac	t Adam Pate		Telepho	ne Numb	er			
				FAC	CILITY INF	ORMATION							_
Name of Facility Where							Type of Facility	y (4)				-	
	ne Marillac Car	npus	- Bu	ilding	; # 4		School (K-1		L - 1/ 40				
Street Address	75 Map	leton	Rd.				Subchapter Other (i.e., phomes, etc.)	orivate & c	ommercia	l build	lings,		
City (5)							Square Feet	# of FI		BI	dg. A	7	
(C	Prince	ton,	NJ				15000		3	_	75	+/-	
County (6)	iddlesex				nty Code (in ONLY)	7) (STATE	Current Use (P	rior if being	g demolis	ned)			
Name of Monitoring Firm				ASCM	No.		nent Contractor (
(8) USA Environ	nmental Manag	emen	ıt_				ens Environ	mental S	Service	s, In	c.		
Street Address	44 West State S	Street	t			Street Address	PO I	Box 322	?				
City, State, Zip Code						City, State, Zip C	Code						_
	Trenton, NJ 08	8018	I Tala	-6	NI-	Talanhana Nia	Allentow			_		_	_
Project Manager for Mo	eisgarber		100000	ephone (9) 65	6-8101	Telephone No. (609) 25	59-9688	Licens	se No . ()()493	3		
Start Date (10)		duled C	_	etion Da		Name of OSHA		-		0 100			_
8/24/15			9/4/1	5			DB Env	vironme	ntal				_
Occupancy Status Durin	경우 프로마이 어린 아이를 하게 되었다면 하지 않는데 되었다.			63		Street Address	4 D1-	alas, Dia					
Facility Closed/Vaca					- 1	City State 7in C		eley Pla	ice	_			_
Other - Describe:	d Outside of Norma	i i aciiii	yriou	10		City, State, Zip C	Freehold	d, NJ 07	728				
Scope of Work (Check	all that apply)					□ Full Cor	ntainment with Ne	enative Pre	ecura				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Re De	enovat emolitic			Mini-En Gloveba	closure ag Procedure						
		Isl	ocatio	on		Non-Ex	empted (*) and N	on-Friable	Procedur	100	bate	ment	
1 2 2 2 2 2	- #	N	omally Solel	/		D	£				Тур		
Location Asbestos-Containing	Material (ACM)	Mair	ntenan	ice/		Description of tos Containing Mar	terial (ACM)	Amo	7000			ш	
TO BE ABA	<u>TED</u> v		ustodia Staff?		(i.e.,	thermal systems i surfacing, VAT		(Spe		Remova	Repair	ncap	Enclo
(13)	2		(12)			other miscellane			,	iova	pair	Encapsulate	Enclosure
		Yes	No	N/A								te	Ф
Various A	Areas	×			Th	ermal Pipe In	sulation	24	<u>lf</u>		X		
Northeast, Southe	Northeast, Southeast Stairwell ×						cal Plaster	68			×		
	Northeast Stairwell						tic	136		×			
Air Handling						VAT/Mast		90		×			
Name of Registered Wa		o Tmo	1.6	JDEP V	No.	Cubic Yards of Waste	Name of Reg	1	ndfill VS Land	4611			
Stevens Environ	memai Service	5, 1110	<u>- .</u>	182	292	2 CU Disposal Date	Çity, State/	/ UNU V	vo Lail	11111			
Oily, oldio	Allentown, N	IJ				9/4/15	IN	Morri	isville,	PA			
Completed By	Title	f				Signature	1	/	Date				_
Mahlon E. Ste	evens	Pı	ojec	t Man	ager					8/13	3/15		_



Date of Notification (1)		Na	me of Buildin	Owner/Operat	or (2)						
	3-15	110	THE OF BUILDING		inch	45	ons In				
Agencies Notified Type Notific	ation	Str	eet Address	Po.	Box	5	465	1 1	r d	-/4	
□ EPA Initial □ DEP □ Amend		Cit	y, State, Zip (ode	- 00 /	- 1	165			1.5	-
	Iment # ency (including	- No	me of Contac	Iren	+01	Ν.	30 6	363	8		
DOH justific			Surv	Vinch			Telephone I	Number	مات		
Name of Coalife Many Abotement in	Takina Dlass (2)			FORMATION	Trans		<u></u>		0		
Name of Facility Where Abatement is	amily	_	elling	Bakka		of Facility School (K-					
Street Address	,			Direct		Subchapte	r 8 (Other than k		27		
	Runswi	cK	AUE		' e	tc.)	private & comme	- 13	0		
City (5) Trenton	N.T	080	.38		Squan	e Feet	# of Floors			ge ~	
County (6)	7.0	Co	unty Code (7)		_	1000	ier if being demo	50	-10		
Name of Monitoring Firm Hired by Bui	Idina Owner (8)		ASCM No.	0 1000000000000000000000000000000000000			Barbersh	ρ			
EPC Techno	lesies		N/N	A I	EPC	Te	chnole	e ie	S .	In	36
Street Address Ro. Box	233			Stre	et Addres	200	333	3			
City, State, Zip Code	7.7	- 0	053	2 City	State, Zip	Code	- 11°	7 8	04	- 2	9
Project Manager for Monitoring Firm	, NO	Tol	ephone No.	S N	phone No	Egy	DY M	7.0	8)5	5
Steve Schen	Cen		9758		758		License	03	39	4	
Start Date (10)	Schedule		tion Date (11		e of OSH	A Monitor	. 1				
Occupancy Status During Abatement	(Check Only On	- 7 ⁻	15	Stre	et Address		hnologie	s L	nc		
Facility Closed/Vacated During E	ntire Period of A	batement	:		P-0.	Box	337				
Abatement Performed Outside of Other – Describe:	Normal Facility	Hours			State, Zip		117	00	57	_	
Scope of Work (Check All That Apply)				l l	-	TAYE	7/3	00	53		•
≥3 sf or ≥3 lf	* Control of the Cont	enovation					ent with Negativ	e Pressu	re		
≥160 sf or ≥260 lf		emolition			Glov	-Enclosur rebag Pro	cedure	fable Dec			
	ls	Location			Non	-Exempte	d (*) and Non-Fr	Table Pro	Abate	ement	
Location of	N	ormally Solely b	v	Description		uman umanna a			Ту	pe	-
Asbestos-Containing Material (ACI	Mai	ntenance/ odial Staff	ASDE	stos Containing e. thermal system	ms insulat		Amount (Specify	Re	R	Enca	Enc
In Facility (13)	Odst	(12)		surfacing, \ other miscell			SF or LF)	Remova	Repair	Encapsulate	Enclosure
Spring.	Yes	No N	N/A					=		ate	θ,
1st floor & Porch		X		orTiles	1211	2	100 51	FX			
Basement'	X		Pip	Insula	tion		220 LA	X			
Exterior		2	< Si	ding Shi	ng les	1	1600 SF				
Roof Name of Registered Waste Hauler			R Ro	Cubic Yards	iteria		1000 SF Registered Land	16II			Щ
FA . ~ 1	*.0	Haule	er ID No.	of Waste	11					~ D	λiΔ
EPC Technologicity, State	,	LL	7000	Disposal Da	te	City, Stat	te Manag		· o (. 1	A
New Egypt Completed by	NJ	``		by 9-4.	-15	Morn	isville	PA	-		
Steve Schenker	Title	siden	+	Signatu	ne e	Sel.	-	Date	13-	-15	-
Steve John new	nke	siden	1		MAP)	JUL	ok	8	1.5	1-)



NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1) 8/11/15	-			Eo Eo	Name of Buildi Paulsboro Refi		anv					
Agencies Notified	T	Notification *	Туре		Street Address		21:15 /	UG 17	1 10	7		
NO SERVICE PROPERTY.		NO. 01749-17 - 40-40 - 100-2-1002			800 Billingspor	t Rd		-5/ 1/	119		Š.	
() EPA () DEP		(X) Initial No() Amended		n	City, State, Zip	Code						-
(X) DOL		() Cancelle		11	Paulsboro, NJ			1 1				
(X) DOH		\$ 2						4.1-	+	7		
() DCA					Name of Conta	<u>ict</u>	I	Tal Ni	ımher			
1 - 60) L					Ravi Jarecha				1_			
				FACILITY IN	FORMATION	(1)						
Name of Facility Where Abate		aking Place (3	<u>3)</u>		Type of Facility () School (K-1)							
Paulsboro Refining Company					() Subchapter		an K-12)					
Street Address					(X) Other (i.e.			gs., hom	nes, etc	1		
800 Billingsport Rd					N 6			-				
3-1					Sq. Feet N/A		# of Floor	sN/A		-8		
	ounty (6)		County C									
Paulsboro G	loucester		(State Us	e Only)	Bldg. Age N/ Current Use (p		domoliched)	Oil Po	finan			
					Current Use (p	nor ii being						-
Name of Monitoring Firm Hire	ed by Bldg.	Owner (8)	ASCM No	<u>D.</u>			Name of Co					
KA Industrial Services, LLC. Street Address					Street Address		K A IIIuusiiia	al Selvic	es LLO			_
800 Billingsport Rd					800 Billingspor	t Rd						
Paulsboro, NJ 08066					City State, Zipo Paulsboro, NJ							
Project Manager for Monitoring	ng Firm	Telephone N	Number		Telephone Nur	<u>mber</u>			e Numb	ber		
Scott Dechant		856-224-438	85		856-224-4392			00857				
Scheduled Start Date (10)					Name of OSHA K A Industrial							
7/1/15	atamant (C	8/17/15	0)		Street Address		LC					
Occupancy Status During Ab () Facility Closed/Vacated D () Abatement Performed Out	uring Entir	e Period of A	batement		800 Billingspor							
(X) Other - Describe - Remo		170		rea in outside	City, State, Zip							
areas	IVAI OI ACIV	r within restric	oled Work a	irea iii outside	Paulsboro NJ							
Source of Work (Check all th	at apply)											
() Demolition (X) Renovati	on											
() Large Proj. (160 SF or >26	0 LF ACM) (X) SM Proj	. >25<160	SF or >10 <260		linor Proj. (<25 SF or <10	LF ACM	√I)			
() Full Containment with Neg					bag Procedure		o :/ o=	15)	A1 /			
Location of Asbestos-	Is Loca	tion Normally	Used	Description of		Amount (Specify SF or	LF)	Abate	ment Ty	<u>pe</u>	1
Containing Material (ACM) in		by Maint./Cus	stodiai	thermal systen surfacing, VAT								
Facility (13)	Staff? (NO NO	NA	misc.)	, or other				Rem.	Rep.	Encap	Enclose
0-1	- 120	All the second	1,0,1	Pipe Insulation	n	Approx 4	FIE		X			
Coker unit		X		ripe ilisulation	II.	Applox 4	0 11		^			
	1											
Name of Reg. Waste Hauler		NJDEP Was	ste Hauler I	D#	Cubic Yards of	f Waste				Landfill	5784286 F	
Waste Management, Inc.		17273			6 CY			Glouce	ester Co	ounty La	ndfill	
							Diaz Data			City Ct-	t-0	
<u>City, State</u> South Harrison, NJ							<u>Disp. Date</u> Various			City, Sta South Ha		NJ
Completed by (Print or Type)		Title			Signature			Date				
		(T 1	19		(25000000000				11
ANDREW GREEN		MANAGER	– KA Indus	strial Services	/ /mole	1 Ms	000	8/11/1	5			
					Site C	perations S	Supervisor					
					//		-					
					/							
					I			I				

Mail to: NJDEP-DSHW-BRRTP

401 E. State St., PO 414 Trenton, NJ 08625-0414

Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00

CK 11318

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

Rr. William

Date of Notification (1)			Name o	of Building	Owner/Operator (2	2)	2815 1110 1-				
8/10/	15		Elwy	n New J	ersey		2815 AUG 17	414	ි: ;	2	
Agencies Notified Type Notificat	ion		Street /	Address			维 1 7 :				
⊠ EPA ⊠ Initial		- 1	1667	7 East La	ndis Ave.		87156		1113	1	
☐ DOLWD ☐ Amended Amendment	.+ <i></i>	1	City, St	tate, Zip C	ode		- P	41	,	*	
☐ DCA ☐ Emergency			Vine	land, NJ	08361						
(NJAC 5:23-8) justification			Name	of Contact			Telephone Numb	er			
☐ Cancellation	n		Pete	r Thoma	S						
			FAC	ILITY IN	FORMATION						
Name of Facility Where Abatement is Ta	iking Place	(3)				Type of Facility					
Elwyn New Jersey						School (K-12	:) 3 (Other than K-12))			1
Street Address						Other (i.e., p	rivate and commer		lding:	S,	
1667 East Landia Ave.	4					homes, etc.)		DI	- Λ-		C 7 . F.
City (5)						Square Feet 3000	# of Floors		g. Ag 8 4+	е	
Vineland, NJ 08361			10	t : 0 - d - /7\	VOTATE LICE ONLY	(5) (5) (5)			41		
County (6)			Coun	ty Code (7)	(STATE USE ONLY)	Vacant / Ins	ior if being demolis	neu)			
Burlington	0	0\	ASCM I	Ma	Name of Abatem						
Name of Monitoring Firm Hired by Buildi VERTEX	ng Owner (0)	NA NA	VO.		ironmental Sys					
Street Address			INA		Street Address	ironinental by	sterns				_
700 Turner Way					550 East Uni	on St					
City, State, Zip Code					City, State, Zip C						
Aston, PA 19014					West Cheste						
Project Manager for Monitoring Firm		Tele	phone I	No.	Telephone No.		License No.				
Don Heim		6	0-558	-8902	610-701-9000)	00508				
Start Date (10)	cheduled C	omple	tion Dat	te (11)	Name of OSHA N	Monitor					
8/24/15	9 /	9	_ / _	15	AET						
Occupancy Status During Abatement (C	heck-only-o	one)—			Street-Address-				-		
☐ Facility Closed/Vacated During Entire	e Period of	Abate	ment		28 N. Pennel	Road					
☐ Abatement Performed Outside of No				cribe	City, State, Zip C	ode					
Time of Abatement: 7AMPM	/ <u>3:30</u> PIVI		AIVI		Media, PA 19	9063					
Scope of Work (Check all that apply)					□ Full Cor	tainment with Ne	gotivo Prossura				
☐ >3 sf or >3 lf	☐ Re	novat	ion		☐ Mini-En		gative Flessule				
⊠ ≥160 sf or ≥260 lf	⊠ De	moliti	on			g Procedure	n Erioblo Broody	ro.			
	16	Loca	tion		⊠ Non-Exe	empled () and No	on-Friable Procedu	1	atem	ant T	vne
Location of		Norma	lly		Description	of			1		
Asbestos-Containing Material (ACM)		ed Sol	ely by		stos Containing M	aterial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure
TO BE ABATED IN Facility			Staff?	(i.e	., thermal systems surfacing, VAT		(Specify SF or LF)	ova	=	nsqu	nsc
(13)		(12)			other miscellane		/	_		late	e,
	Yes	No	N/A		3 / N	**		1			
Old Purchasing				VAT			50				
Old Purchasing			\boxtimes	Pipe In:	sulation		125 LF				
Old Purchasing			\boxtimes	Transit	e Pipe		30 LF				
Old Purchasing				Wire W	rap		500 LF				
Name of Registered Waste Hauler		97	NJDEP V		Cubic Yards of		stered Landfill			· · · · · · · · · · · · · · · · · · ·	
David Geppert Recycling		1	lauler II	D No.	Waste 40	Western E	Berks Communi	ty Lar	ndfill		
City, State					Disposal Date	City, State					
Hatfield, PA					TBD	Birdsboro	, Pa				
Completed By (Print or Type)	Title	2017			Signature	M	D	ate /		/	
Mark Griffin	Estima	tor			455	///		3/1	0/	13	

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility	YES	NO	N/A	Decription of Asbestos-Containing Material (ACM)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
,	1153		X			X	T	П	
			X			X			H
Old Purchasing			F	Window Caulk	430 LF	X			
Old Purchasing				Roof Tar	3500 SF	X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
			X			X			
\$ 25 min			X	8		X			
			X			X			
			X			X			
0			X			X			
			X			X			
			X			X			
			X			X			

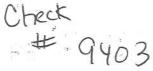
Page 2 - Notification - 1/4/13

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

										** *				
Date of Notification (1)	August 12, 201	5			Name of	f Building (rator (2) Thomas	2	815 / UG 7	2.	24	70	
Agencies Notified [X] EPA DEP	2 2	l Notifi	cation		Street A	11	20 3 73	ox 302	4		*11.1	J: 67	į.	
[x] DOL	Ame	ndment			City, Sta	ate, Zip Coc		George,	NY 12845	411.5.				
[X] DOH [] DCA		ication) ellation			Name o	f Contact Scott	Γhomas		Т	elephone Number				
				FAC	II ITV I	NFORM	ATION							
Name of Facility Where Ab	atement is Taking idence	Place (3)	- 1110		in ordin	7111011	Type of	Facility (4)	School (k-12)				
Street Address	Carter Avenue	е			Q.				[x]	Subchapter 8 (oth Other (i.e., prival homes, etc.)			ial build	lings,
Point Pleasar	nt Beach	Cour	nty (6)		County C	Code (7) USE ONLY	<i>(</i>)	Square 1	feet 600 sf	# of Floors	Bldg	g. Age	50	
2 3 2 1	at Double	Oce	an							being demolished)			,,,	
Name of Monitoring Firm I	the second secon	Owner ((8)		ASCM N	lo.	Name of	Abatemen	t Contractor		Inc.			
Street Address							Street Ac	ldress		oute 9, Unit 61	22.0			
City, State, Zip Code	N.						City, Star	te, Zip Coo	ie	tiver, New Jers	ev 08'	755-1	271	
Project Manager for Monito	oject Manager for Monitoring Firm Telephone N							e Number 9-9932		License N 00624				
Scheduled Start Date (10) 4/13/	15		Scheduled 4/14/		ion Date (1	.1)		OSHA Mo		L. Analytical				
Occupancy Status During A	Abatement (Check lity Closed/Vacated			od of Aba	tement		Street Ac	ldress	2586.80866	elton Road				
[] Abai	tement Performed					9	City, Star	te, Zip Coo						
										way, New Jerse		54		
Scope of Work (Check all t	hat apply)						[]		Containment Enclosure	with Negative Pres	sure			
	for≥3 lf		[]	Renova	33700		[]		ebag Procedu					
[x] ≥160) sf or ≥260 lf		[x]	Demol	ition	- 5	[x]	Non-	Exempted (*) and Non-Friable	Procedu	re		
			Is Location	3580				C			Abat	ement	Гуре	
Location of	of		Normally u				Description estos-Cor			Amount	R	R	E	E
Asbestos-Containing M			Solely by	у		N	laterial (A	CM)		(Specify SF	E M	E P	N C	N C
TO BE ABA' in facility		Mai	ntenance/C Staff	ustodial			, thermal :			or LF)	0	A	A P	L
_ (13)			(12)			IIISU	VAT. c				V	R	S	S
(a) (3) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a						oth	er miscella				A		Ū	U
		YES	S NO	N/A							L		L E	R E
Exterior			X		Asbe	stos sidin	g			1000 sf	X			
27														
Name of Registered Waste	Hauler ntracting, Inc.		NJDEP Was	te Hauler 0223	ID No.	Cubic Ya	rds of Wast		ne of Register R.R.F.	red Landfill				
City, State			2	Dispo	sal Date		City, Sta	ate	,	17				
Toms River, Completed by (Print or Type		TP:41		4/17/					insylvania					
Nicholas Ferr	(A)	Title Proj	ect Manag	er	Signati	ure	110	1	1, /	1	8/12	2/201:	5	



									6.					
Date of Notification (1)	8-13-15	5	1	lame of	Building O	wner/(Operator (2)	John	2K1/R4	12	5.1	, S:	26	
Agencies Notified	Type Notification		5	Street Ac	idress L	12	01:	<u> </u>	Sino	1	_			
□ EPA . □ DEP	Initial Amended		(City, Stat	te, Zip Cod		<u> </u>	1 .11	JIECO	- /	10	5	20	
DOL	Amendment #_ Emergency (inc	cluding	-	lame of	Contact	<u></u>	amber.	tuill	e NJ	Numb) O	ال		'
DOH DCA	justification) □ Cancellation		1.	JC	ha	Ku	Rt2		reconone	77:	,	~ ~		d
Name of Facility Where	Abatement is Taking/F	Place (3)		FACIL	LITY INFO	RMAT		of Facility	(4)		5	F1	*****	
Single	family 1	Dup	le	X				School (K-		2	OP	5		
Street Address	11.1	tree	+				X	Other (i.e.)	r 8 (Other than h private & comme		build	ings,	home	es,
City (5)	linton U	+ L	_	. ^	<i>a</i> –			etc.) re Feet	# of Floors		BI	dg. A	ge	
Lami	cetuille	N	7	0	185	<u>50</u>	0	at Use /De	2	aliaha	a		01	_
County (6) Hun	tendos			County C STATE U	ISE ONLY)	-	Curre	nt Use (Pri	ior if being demo		C1 0) [.*			
Name of Monitoring Firm	Hired by Building Ow	mer (8)		ASCM	No.		Name of Abat	tement Co	ntractor (9)	200			In	
Street Address	2 23	7	1		412		Street Address	b	222	3		0 0		
City, State, Zip Code	DOX JE	7 7	D	00	E 2 '	•	City, State, Zi	p Code	33 T	-	A 1	26	7 9	9
NewE	tays.	<u> </u>	(78	33,	5_	New Telephone No	Egy	Licens	J	0)5	5
Project Manager for Mo	e hen ken			elephor	7 <i>58-</i> 3	365					3	19	4	
Start Date (10)	N-15 S	cheduled	Com		Date (11)	-	Name of OSH	A Monitor			7			
Occupancy Status Durin	g Abatement (Check	Only One		1-1-	<u> </u>		Street Addres		rinorogie	25		ıc		
Facility Closed/Vac							P.O., City, State, Zi		337					
☐ Other – Describe:	ned Outside of Normal	Facility F	HOUIS	••		_	New E		TLA	0	85	33	3	
Scope of Work (Check A	II That Apply)							oll	•					
≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	21	170 Million	novat moliti				☐ Min	i-Enclosur		ve Pre	essur	e		
	3383							vebag Pro n-Exempte	cedure d (*) and Non-F	riable	Proc	ædur	Э	
			ocatio									Abate Ty	ment pe	
Location Asbestos-Containing		Used		y by		os Con	escription of staining Material		Amount	Ī	822		Ш	_
TO BE AB	ATED	Custo		Victoria de la composición dela composición de la composición dela composición dela composición dela composición de la composición de la composición de la composición de la composición dela composición del composición dela composición dela composición dela composición dela composición dela composición dela composició	(i.e. 1	surfa	il systems insula acing, VAT, or	ition,	(Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
(13)			(12)		-88	other	miscellaneous)				val	air	ulate	sure
0	1	Yes	No	N/A	D. 0		Too. I. I	1	145L		ý			
Basemen	- Mauspace	X			Pip)e .	Dosabh	100	1456		~			
			-21.939											
Name of Registered Wa	ste Hauler			JDEP W		Cubic of Wa	Yards aste		Registered Lan			,	_	1. A
EPC Tec	hnologies	15		1700		Dies	osal Date	City, Sta	te Manag	jen	ient	0	E K	H
City, State New E	aunt 1	15	`			8	25-15		usville_	P	A			
Completed by	346	Title	٠, ١	+			Signature	500	1	Date		2	1	
Steve Sche	nner	Pres	sidh	nI			Just P	المال	NA	7	5-1	2	15	

		ā	Aug 12 201	5 09:00am	P001/001
Emergenery/12W	me: NOTIFICATION	of New Jersey OF ASBESTOS A TO NJAC 8:60 and		Chec	9401
Date of Notification (1) 8-11-1	5 Name of	Win Fie	ld Manag	ement 1	LLC
Agencies Notified Type Notification	Street A	ddress 55	Madison	AUE	
DEP Amended Amendment#		te, Zip Cople Mo RRi	1		1960
DOH Emergency (In justification)	Name of	married Late : married	Scott	Telephone Nur	wiber 27
Name of Facility Where Abatument is Taking		LITY INFORMATIO	Type of Facility	(4)	
Stope Fronts and	Apartment	S	☐ School (K	688	-1,
Street Address	WE	·	Subchapte Other (i.e.	r & (Other than K-1; private & commerci	2) al buildings, homes,
City (5) Atlantic Hig	hlands "NJ	07716	Squar∋ Feet	# of Floors	Bldg. Age
Mon mouth	County (Code (7) USE ONLY)	_	nor if being demolisi	ned)
Name of Monitoring Firm Hired by Building On	ener (8) ASCN	No.	Name of Abalement Co		ies Inc
Ro. Bex 3	37		P.O. Box	337	
City, State, Zip Code	N2 08	533	New Equ	14 ta	08533
Project Menager for Mondari graim		758-3365	Telephone No. 33		5394
Start Date (10) Q = 1U - 15	Scheduled Completion		Name of OSHA Monito	hnologies	Inc
Occupancy Status During Abatament (Check	Only One)		Street Address	337	
Facility Closed/Vacated During Entire Po Abatement Performed Outside of Nama	ariod of Abstement		P.Q. Bor City, State, Zlp Code	- J. F	1.0
D Other - Describe:	, 2011		New Egypt	NJ	08533
Scope of Work (Check All That Apply)			10.		
20 ≥ 21 or ≥3 if □ ≥160 sf or ≥260 if	☐ Renovation ☐ Demolition		Mini-Englock	acedure.	:
			U Non-Exempt	ed (*) and Non-Friat	Abatament
	is Location Normaliy	· Des	cription of		Туре
Location of Asbestos-Contelluling Material (ACM) TO BE ABATED In Facility (13)	Used Solely by Maintenance/ Custodial Statt? (12)	Assessos Control (I.e. thermal)	explored Material (ACM) systems insulation, ing, VAT, or is delianous)	Amount (Specify SF or LF)	Enclosur Encapsula Repair Remove

Basement 89-93.	X	1 1	1	MOR	ous pipe Del	onis	100 LF	X		,
Bldg 93 Carwispan	X			Pipe	Ingulation	Debnis	40 LF	X		ě
Day 18 Care		1.5			. ,	l li				<u> </u>
Name of Registered Weste Hauter EPC Technologie	S		DEP V		Cubic Yards of Waste	Wast	eglictered Landi		of P	A
City, State New Equipt	NJ	. ,	P F		Disposal Date Out 9-14-1	City, State	isuille_	PA		
Completed by	PR	esid	ent		Standium	Sch	h	8 day	11-15	<u>.</u>
Steve Schenker	1 Ho	esid	ent		Dleed	علاجره	ha		"	-

NA

Yes

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No

NO CK

Date of Notification (1)			Building ((2)									
08/12/2015				The Vi	illage So	chool, In	ic.		9816 / I	16 1	7				
Agencies Notified	Type Notification			Street Ad	ddress /est Pros	spect St	reet				1 5.3	(; 3	Ü		
× EPA × DEP × DOL	Initial Amended Amendment	#_2	_	City, Sta	te, Zip Co vick, NJ	de			7		- 17	* 3	į		
▼ DOH	Emergency (justification)	including	-		Contact	Series Series			T	Tele	phone Nun	nber			
DCA DCA	Cancellation			Marily	n Larkin										
	1-			FACII	LITY INFO	DRMATIO	N								
Name of Facility Where	Abatement is Taking	Place (3)						Type of I	Facility (4)						
The Village Schoo	1							☐ Sch	ool (K-12)						
Street Address 100 West Prospec	t Street							X Oth	ochapter 8 er (i.e. priv				dings,	home	es,
City (5)								etc. Square F		# of	Floors	IR	ldg. A	ne	
Waldwick								60,000		2	10013	1	936		
County (6)				County 0	ode (7)				/ Use (Prior i		a demolish		500		-
Bergen					JSE ONLY)			Schoo		Den	g demonsi	icu)			
Name of Monitoring Firm	n Hirad by Building (Durner (8)		ASCN	/ No	— Т	Name	and activative and	nent Contra	ector I	(0)				
EnviroVision Cons		Jwilei (o)		0007					racting, I		3)				
Street Address	dilants, inc.			0007				Address	acting, i	110.					
20-21 Wagaraw R	ood Bida 35E								Avenue,	Llni	365				
City, State, Zip Code	oau, blug. 33E							state, Zip C		Om	1 303				
Fair Lawn, NJ 074	1						15.3	on, NJ 0							
Project Manager for Mo				Telephor	no No			none No.	7012	-	License N	^			
Fred Larson	mitoring Firm			(973)	636-914	4	(973	450-95			01036				
Start Date (10) 08/15/2015		Schedule 09/7/20		npletion [Date (11)			of OSHA	Monitor racting, I	nc					
Occupancy Status Durin	na Abatamant (Chan		- 33.24					Address	acting, i	110.	*				
		•							Avenue,	Llni	1365				
Facility Closed/Vac Abatement Perform	cated During Entire F ned Outside of Norm	Period of A	baten	nent		-				OIII	1 000				
	Saturday: 7AM-4PM.	iai raciity	Hours	•				itate, Zip 0 on, NJ 0							
Scope of Work (Check /	All That Apply						Cilit	UII, INU U	17012						
	All That Apply)	- I					×	7	M Parkettino a construction with						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				×	- I un C	ontainment inclosure	with	Negative F	ressu	re		
			Cirion					Glove	bag Proced						
								☐ Non-E	xempted () and	Non-Friab	le Pro			
		ls	Locat	ion										ement rpe	t
Locatio			ormal d Sole				cription		20011030				Γ,	T	
Asbestos-Containing TO BE AB			ntena					Material (A s insulatio			nount pecify	73		Ē	ш
In Fac		Custo		Staff?	(1.6.	surfaci			11,		or LF)	Remova	Repair	cap	nclo
(13))	1	(12)			other mi	iscellar	neous)				oval	air	Encapsulate	Enclosure
		Yes	No	N/A										te	
Crawlspace Abo	ve Auditorium		Χ	X		Pipe I	Insula	ation		32	0 LF	Х			
				-											
Name of Registered Wa			100	IJDEP W lauler ID		Cubic Y of Wast		10.00	lame of Re	0005 00					
Atlantic Carting/JR	Contracting				JA-464	40			IESI PA I	Beth	lehem La	andfil	I Cor	p.	
City, State Wayne, NJ						Disposa TBD	al Date		City, State Bethlehe	m. P	A				
Completed by		Title				A STATE OF THE STA	gnature				_ Da	ite			_
Milena Zoric	utive	Directo	or	1	11	MX	10			8/12/	2015	5			



Date of Notification (1) August 12, 2015				Name of	Building (s Inc.	Ch	eck#N	J/A				
Agencies Notified	Type Notification			Street Ad			, intai o	01 1100	,	17/10	ACC		17/201	2		
X EPA	Initial			2749 L	ockport	Road						1 -	15	c:	32	
DEP X DOL	Amended Amendment		_		e, Zip Co a Falls,		305				7 5	6				
DOH DCA	Emergency (justification) Cancellation	including		Name of Mike La						Tele	ephone N	Number ;				
				FACIL	ITY INFO	RMATI	ON									
Name of Facility Where Armstrong Building				Site				_	of Facility (4) School (K-12							
Street Address 160 Essex Street,	Building #16							×	Subchapter 8 Other (i.e. pr				ildir	ngs,	home	es,
City (5) Gloucester City									etc.) re Feet 000	# 0	Floors		Bld 80	g. A	ge	
County (6)			-1	County C				Curre	nt Use (Prior	r if bei	ng demo					
Camden				1000	SE ONLY)	1			ufacturing							3
Name of Monitoring Firm EHS Environmenta		Owner (8)		ASCM	No.		0.0000000000000000000000000000000000000		tement Cont vironment							
Street Address 411 Southgate Cou	urt Suite E	22					15370.737	Addres Cutler	ss Avenue							
City, State, Zip Code									ip Code ade, NJ 08	8052						
Project Manager for Mo				Telephor			Telepi	none No	0.	7002	Licens					
Jack Carney		0 / 1 /			4-0080		100000000000000000000000000000000000000	755-0	50507)		00842					
Start Date (10) July 20, 2015		Octobe		mpletion [2015	Jate (11)				HA Monitor alytical, Inc	ο.						
Occupancy Status Durin	ng Abatement (Chec	k Only Or	ne)	į.				Addres	ss 130 Nortl	h						
	cated During Entire I						153.3450		ip Code	u .		-				
Other – Describe:		iai i aciiitj	y i ioui			_			son, NJ 08	3077						
Scope of Work (Check /	All That Apply)			-								76.55				1000
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renov Demoli					Mir Glo	I Containme ni-Enclosure ovebag Proce n-Exempted	edure					2	
		1.		tion.				i NOI	II-Exempled	() aii	u Noll-F	nable F			ment	
Locatio	on of	1	Loca Norma	illy		De	scription	n of					_	Ту	ре	
Asbestos-Containing	g Material (ACM)		ed Sole aintena	ely by ance/		tos Cont	taining !	Material			mount Specify	7		1	En	Ш
TO BE AE	ility	Cus	todial (12)	Staff?	(1.6.	surfa	cing, VA	T, or	ation,		or LF)	Remova		Repair	caps	Enclosure
(13))	Yes	No	N/A		other r	miscella	neous)				val		Ħ	Encapsulate	ure
Throug	hout	100	XXX	1000000			Debris			5,0	000 SF	Х	+			
Throug				XXX		Wind	low GI	azing		5	00 SF	Х	T			
Throug	hout		XXX	(Pipe	Insula	ation		1	30 LF	Х	T			
Throug	hout		XXX	(Fittin	g Insu	lation		2	Each	Х				
Name of Registered Wa				NJDEP W		200000000000000000000000000000000000000	Yards		Name of F	Regist	ered Lan	ndfill			53475	
SJ Transportation	Section of the Control of the Contro				No.	of Wa			US Ecol	576	ldaho					
City, State Woodstown, NJ					sal Date 2015		City, State Grandvi		D							
Completed by Christina Lynch		ratior	ns Mana	iger		Signatur	Do	a R	^		Date 8/12/2	20:	15			

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility			Jsed Solely odial Staff?	Description of Asbestos Containing Material (ACM)	Amount (Specify SF or LF)	Removal
300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Yes	No	N/A		30000 FD	
Throughout		X		Floor Tile and Mastic	2,000 SF	Х
Throughout		X		Plaster	1,130 SF	X
Throughout		X		Tar Paper & Leveling Compound	3,600 SF	Х
Throughout		X		Door & Window Caulking	110 LF	X

Care of Notincation (1)		Name	0/9 14 5	- 0 - 0			3	9.
8/12/15		Marine	DI BUILDIN	OmneilOperatory	027041	71016	- 70	
Menses Nouheo Type Noithcason			Address			-11/000	5	
S FA Denovar D Inna C S S S S S S S S S S S S S S S S S S			155	Mr. 50		_ · =	= -1	
Amendment :		Cry.	State. Zip C	. α •				_
☐ Emergency (i			(Sn	EENFIEL?	D 1417			
ZOn [usofication]			ol Caniac			Тенертопе Испол	5-1-00	
		1	nuc	E YSMEU	1216		276	
		FAC	CIUTY INF	ORWATION			= 12	
are of Facily Where Abatement is Takin	g Place (3)				ype of Facility	(4)		
RESIDENCE				r) School (K-12	1		
ee Appress			999			6 (Other tran K-12,		
209 MORNI	VG- 6	-LOR	YA	06	nomes etc)		pulançs	
·1-\$±					Square Feel	# of Floors	الجد ومط	
WILDWOOD					1000		150+	_
0.07 16				1) (STATE	-	for If being demovs	n c c	
CAPE MAY		1	ONLY	Name of Abatemen	VAC.			
STR of Mantoning Firm Hired by Building	D~ne1	ascu	No	Name of Abatemen	iconvicting			
N/A				Sueel Address				
iee Appress				3695	. Spau	if AVE		
				2 2 2 6				_
s. State Zp C∞e				Mo PLE	SHOD	E, N.J.	8:25	
	T	elephone		Talannone No		Loense No		_
at warager to Montoning Firm		incp or a		456-77	1-0472	00-		_
T Scool	gulea Comy	Melph O	ate (11)	Name of OSMA MI	SUVO.			
8/31/15	1/7	117		JOJEPH	KLEN	4 M		
Occupancy Status During Abatement (Chi	eck only one	e)		Sueer Acoress	· ·	- 1 -		
Tracky Closed Vacaled Dunng Enere P	enco of AD	atement		.369 2-	SPMO	LE AVE		
- Casement Performed Outside of Norm	al Faculty H	ours		Cry Suie Zp Co	De,	17		
Towa Describe				MOPLE	- DHUD	6 NJ 0	3:22	_
Score of Mork (Check all that apply)					2.0me0: 440 N	eçaqve Pressure		
	☐ B 400	vauon		Mm. Enc	los ul e			
7 3 51 51 23 1" ₹ 2 65 51 51 2760 11	Demo			Clove ca	mound (1) and I	Non-Frank Proces	ur e	
Z: cc :	1	*****		Nicerca	114.00171		c	
	15 LOC	- 1-		0			,	
cocation of	Used Si Mainte		Aspe	Description of sios Containing Mai	enai (ACM)	Amoun Specifi	_ 7	
Assessos - Containing Material (ACM)	Cust	∞वा	(ı e	TAV gnosnuz	nsulation	SF a _F	Heriston Harris	
in Faorn		2)		ower wiscerianed	(مد		5 £	-
(6 7)	-	HO NI					0.5	5
	1 K	40 10				2000 SF	2 \	
SIDING		X		TRANSITE		_ COOO 3F		_
7. / 100	-							_
		-				_		
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	_	1108	D Mazie	Cubic Yaros	Name of F	Registered Land		
Same of Registered Waste Hauler		наче	OND	- OI Wasie		M.C.M	<u> </u>	
14-EMCO INC.	20.774	1.7	904	2	Ciry State	,		
T . S.y.,		T		Demosi Daie		1000010,~3	= ~: =	
MAPLE SHADE	, N.	، ب				129	,	-
	Tioe	150	,	Signalue	on Ke		8-12-	-15
JOE KLEMM		NEF						-
· Sé -			om lov a st	oesios licensule ere	empieo acuns	63		

NOCK

State of New Johns! NOTIFICATION OF ASSESTED ASATEMENT (Pursuant to NIAC 8:85 and 12:120)

phed 5752

			100		Charles of Manager	1,517		1 4	000			
Date of Notification (1)						46)		-,-				
Agency Notified	Type Nutification		Street A	ddress		20	り AUG Lフ		-	,		
252	III Initial		176	o ll	EST KAN	napo A	lenne	111 ()4	3,	3		
□ EPA □ DEP	☐ Amended		· 'was · 622	the Fin	indo	2						
-BE DOL	Amendment #	o-arist.m				1 074	30	2.5 f	(別		_	
- B DOH	justification)	and the	0.000,000,000		10 ACC		Telephone Num	ber		2		
D DCA	D Cancellation		an interest of the second of the	Amendant with	10		1 -			_		
N ST THE IAMON	m Alentamant in Talrier	DEA TO	- Fall	II'A BEE	J. C.	Your of Facility	(4)					
_												
Street Address						D Subchapter	8 (Other than K-12) -				
	- 0	u Veneza e e e e e e e e e e e e e e e e e e	_		-			al buildis	ygs,			
	KUMAPO A	UENUCE	[Charles and the second residence of the second seco			Bidg	Age	9		
City (5)	1		2		26, 2		1				S	
	1		77.			Current Hea (F	nor if being demol		1	100		
County (6)			Commo	4 AL ME 1 /			•					
DEKGEN	irm Hisad by Rodeline A	MORE SOC	Sig Sen .		Stame of Ataona						_	-
(8)	and the sy beauty Of	7							-			
Street Address			-		P. Control of the Con	The second secon				-	_	
Special Page 1999							St					
City, State, Zip Code					Cay, State, Zip C	bde						
				700 - 0 (20-20)	Fechens:	ock, N.J	. 07601					
Project Manager for M	lonitoring Farn	Telepi	b More and		్ ఇంటర్నెడ్డిన చెందికోంది.		License No.					
		-	a. 2:00 - 2:00				00388				_	
Start Date (15)			Late (11)				a=+5.7					
						JEV LIONA	enral					
		* SET 1881 1	2.0			110 Term C+						
☐ Facility Closed/Vac	ated During Entire Perio	od of Abassus Action Hears	r.t		Las diames and	المحدد	-				_	_
		menty streets	~ ~				,N.J. 07	606	1000			
				n marya semin se								
23 ≤ 3 € 07 ≥ 3 €		_			9 100	Endosee	Negative Pressult					
D 2 160 sf or 2 260 §			.l.eem	office.	الانتناهي	Procedure	· Nain Sainbla Done	adies.				
<u></u>		· · ·			1.143	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	NOOPTHAND PIOC	cutte	A	bate	me	nt
						-						
Local Control	ation of	بالله فيحسده مله	إِن اللهُ الأُواتِ .				Amount		-		10	
TO BE	ABATED				. Say and side of the	is ar forficia,	(Specify		Rer	R	non	Eno
		1.7/2	22				SF or LF)		Nove	phir	nac	084
	(· - /				magazine utilik (mg., m/1)m				=		ate	6
		Yes 4	-								-	_
BASEMENT							105	5=	X		_	_
BASEMENT			×	THE	smyl ruso	LATION	30	ZF	X		1	_
					company of the compan			1,4,4			_	
		1	1		-							
		■ 10.000 (31 433 1	Cr. Services							
Best Kem	107al Inc					dinerva	Enterpr	ises	,	LL	C	
City, State					management of the second	Car, State					_	\dashv
	ck , N.J. 0	7601				10 100	burg. Oh	. 446	88			
Completed by	Type Notification Type Notific											
R-VELDRAN	Es	timarca	Γ*			M		8-1:	3 -	15	*** 2520-0	
100	The second secon	BOT SECOND TO TO THE	Harrie Harrier		1.42 ± 11 - 17	The second					_	_

NO FK

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

RECEIVED

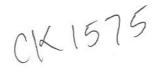
Date of Notification (1) 08/13/15				Name of	Building (Owner/C	perator in Boa	(2) rd of F	duc etij n/	AIIC	17 "	14.0		_		
Agencies Notified	Type Notification			Street A	ddress	OWITOIT	ір Воці	I OI L	adopting i	406	11 5	n 8:	4	7		
X EPA	☐ Initial			428 Sc	chool Str	reet			A 35	73.		E 187	7.9			
DEP X DOL	Amended Amendment				te, Zip Co oridge, N		08	N	A 35 3	: 1 1	CERT	ING	1	t.		
DOH DCA	Emergency justification) Cancellation	3			Contact by D'Ors	i				Tele	ephone I	Vumbe	r			
Name of the second				FACI	LITY INFO	RMATI	ON							100		
Name of Facility Where Mathew Jago Scho		g Place (3)						f Facility (4) chool (K-12							
Street Address 99 Glen Cove Aver	nue							St O	ubchapter 8 ther (i.e. pri	(Othe	er than k & comme	(-12) ercial b	uild	ings,	home	es,
City (5) Sewaren								Square 51,31		# of	Floors			dg. A	ge	
County (6) Middlesex				County (Code (7) JSE ONLY)		4	Curren	t Use (Prior	if bei	ng demo	lished)				
Name of Monitoring Firm Environmental Con		Owner (8)		ASCN 0003					ement Contr cting & E			al Co	nsı	ultin	g, In	c.
Street Address 120 North Warren S	Street							Address								
City, State, Zip Code Trenton, NJ 08608					(4)			tate, Zip ne, NJ								
Project Manager for Mor Mr. Dominick Derco				Telephor	ne No. 92-4200	-	Teleph	none No. 628-92	2		License 00408					
Start Date (10) 07/01/15		Schedul 08/24/		npletion [Date (11)				A Monitor on Consu	Itant	s. Inc.					
Occupancy Status Durin	g Abatement (Chec	k Only O	ne)					Address	-100 22-3-1000-200							\dashv
Facility Closed/Vac Abatement Perform	ated During Entire ed Outside of Norr	Period of a	Abatem / Hours	nent			City, S	tate, Zip			ldg. #3	4A				
Other – Describe:						_	Fair	Lawn,	NJ 07410)						
Scope of Work (Check A ≥3 sf or ≥3 If ≥160 sf or ≥260 If	II I паt Арріу)	-	Renova Demolit				×	Mini- Glov	Containmer Enclosure ebag Proce Exempted	edure					9	
		Is	Locati	on										Abate	ment	
Location			Normal ed Sole				scription					-		Ту	pe	
Asbestos-Containing TO BE AB, In Facil (13)	ATED	Ma	intenar todial S (12)	nce/		thermal surfa				(8	mount Specify or LF)	Kelliokel	Domousi	Repair	Encapsulate	Enclosure
		Yes	No	N/A						267		-	4		(D	
Boiler R	1 5000	X			P	•		sulation	1		4 LF	X				
Boiler R		X				1.07-21.00000000000	r Insula			15	50 SF	X				
Boiler R	oom	X			Boile	er Bree	eching	Insulat	tion	66	SO SF	X				
Name of Registered Was J.R. Contracting & E		onsul.,	Inc H	IJDEP W lauler ID 7819		of Wa	Yards ste		Name of R Grand C							
City, State Wayne, New Jersey			44			Dispos	sal Date	100	City, State Pen Argy	yl, Pe	ennsylv	ania				
Completed by Jerry Bijelonic		Title Proje	ect Ma	anager		S	Signature	n	1			Date 08/13	3/1	5		

NO CK

Date of Notification (1)) 3-13-2015						Owner / Operato	or (2)					
The state of the s	ype Notifica	ation			uire A Addr				2815 AUG 17	£ 16 Q+	2.0		
⊠ EPA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		100				g Avenue			74. O.	4.0		
☐ DEP		(Courtesy				& Zip C			A salid to		e3e3		
□ DOL	Notific ☐ Amer			1 ₀ C.	.i ^	FB 08	C44		& 110Eb	1112	31.		
□ DOH	_	gency	_			ontact	041		7.12.9-1	Telepho		ımho	25
DCA DCA		ellation			3oeh					relebno	ne N) JITIDE	31
			J	30000.31.31.41.3	1100.00 100.000				1919)	1		*	
Name of Facility When	ro Abotomo	nt in Taking Di	000 (2)		CILIT	Y INF	ORMATION	/ A\					
Building 2415	re Abateme	ent is Taking Pi	ace (3))			Type of Facil School (
Street Address							Subchar	oter 8 (Other	than K-12)				
2415 Vandenberg A	venue								commercial build	ings, hom	es, e	tc.)	
011 /51		-	T-				Square Feet	17.1	Floors	Bldg. Ag			
City (5)		County (6)	Cor	inty (Code	(7)	23,000		11	45 yea	rs		
McGuire AFB 08641	l	Burlington							g demolished)				
Name of Monitoring Fi	irm Hirad b	L Building Own	07 (0)		TACC	CM No.	Automotive						
Health & Safety Sen			iei (o)		117				nt Group, LLC				
Street Address PO Box 365							Street Addres		Suite 202				
City, State & Zip Code)						City, State &						
Berlin, NJ 08009							Trenton, NJ						
Project Manager for M Mr. Jim Proctor	lonitoring F	irm	Telepl			ber	Telephone N		License	Number			
Scheduled Start Date	(10)	Scheduled Con	856-8			\	609-977-61: Name of OSI			0118	55		
8/26/2015	(10)		9/02/2		le (11)			boratories Inc				
Occupancy Status Dur							Street Addres						
☐ Facility Closed☐ Abatement Pe				it Aba	ateme	ent	2333 Route						
Describe: 9:			ours				City, State & Union, NJ 0						
Facility Occup							Official, NO 0	1003					
Scope of Work (Check													
			_						Containment with	Negative	Pres	sure	
23 sf or ≥3 lf			\bowtie		ovatio				-Enclosure				
≥160 sf ≥260 l	Ī			Den	nolitio	n			e Bag Procedures		_		
Loca	ation of		le I	ocati	on		Description		Exempted and No.	on-Friable Aba			
	-Containin	9	Norm				Asbestos-Con	tainina	(Specify	Aba	teme	erit i y	ype
	al (ACM)		So	lely b	ру		Material (A	CM)	SF or LF)			四	m
	ABATED		Maint			١.	(i.e., thermal s	ystems		\ en	Re	cap	ncl
	acility 13)		Custo	diai s (12)	starr?	1 8	nsulation, surfactor or other miscell			Remova	Repair	Encapsulate	Enclsoure
`	10)			No	N/A	1	or other miscen	aneousj		=	3000011	ate	-G
Automotive Repair S	Shop		\Box		П	Floor	tile & mastic		1,200 SF		П	П	\neg
Automotive Repair S			Ħ	Ħ	Ħ		Fittings		35 Each		Ħ	H	H
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Name of Registered W	Vaste Haule	er		1000000			Cubic Yards	Name of R	Registered Landfill				_
Resource Management	Group 110	ž.	7/2	-		O No.	of Waste	Consumi	Jen				
	Group, LLC			003	5218		TBD	Grows Lan	security.				
City, State Hamilton, NJ 08619							Disposal Date TBD	City, State Morrisville,					
Completed By (Print or	r Type) Bris	an Hanev		Titl	e. Dro	sident	Signature	0	1	Date 8	2 12	2015	_
- Simple Cod Dy (1 mill Of	ייים לסמליי	and railey		110	o, rie	JIUGIIL	Ligitature	11	1 hr	Date	J- I J-,	2010	
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Date of Notification (1) S	11-15	Plane of Brating Owner(C		
Agantas Noticed Tro			(2)	-
	a Notation	Signat Address	Pinelant Construct	ton
		Guest Actions		1- 21
I TOO ELIC	Unicolod .	-	300 77.4 St	
1 - 4	जन्म के विद्याच्या के विद्या	City, State, Zip Code		
	Haderen (Donain	A CONTRACTOR OF THE CONTRACTOR	Sen-Isle City	
		Name of Contact	VEH ISTE LITY	13
		C C		1212
		PIL	PAK Telephone Number	11 -
Name of Pacing Vinare Abstant	-	FACELITY IN COMMANION		lias
I THE STREET	Sit is leting Fere (3)	A COMPANIES		
Street Astriness		RESIDENT	Type of Feedby (4)	
			_ I School ac aga	
	14	2-7645t		77
City (3)		The same of the sa		, 7m.
	Con	Isk City		्र स्था
County (6)	OCH	4SK LITY	Spine Park Spiriture Edit	Aga_
	CAN	/		9 -
Name of Acres	77 / [County Code (7) (STATE	Curani Use (Frict Theory demolshed)	
Name of Manhoring Farm Fired by (Reining Owner 1			SACTOR SAC
	- Trans	2 O2 bet	II— Sterik Contespor (9)	
Street Address		i _ ANI JU	=11-6	
		: OFECT Addition		
City, Stata, Zip Code		1717	Birlington Are	
		150.00	with was the	
Suitage RA		S CHU.SER OFF	min -	
rojes: Maneger for Monitoring Firm	Telenis	one No. Telephone as	a NJ OSENS	
		000	97/ License No.	
ieri Dete (10)	Schemided Completion	856 55-70	all history	
8-21-15	5-25-15	Date (11) Name of OSHAM	On its	
CORDER States Person at	5 20-15	5	Self	
Pecify GosedVeceted During End Abstract Periodnesi Culsive of N		Street Address	301.	
Alexander Periodned Cubic of N Cina - Despise	remid of Abelemen	Thornes and the second	1	
Cine - Despie:	- new ready Maries	Olly, State, Zip Con	4)	EDIST:
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§ ஆ ല % !!		Con		
160 sf or ≥250 E			Last win Kepine Pressre	-11
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	i fei		Total Kar-Fizh's Faceium	234
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Location of estos-Contacting Metable (ACM)	Seed Sofering	_	Abatement	
1 CO SE PROPERTY		Description of	* * -	21
St Party	Catings Stage	Asissins Containing Metaled (Le., themat systems heats	ACCOUNT OF THE PARTY OF THE PAR	5
	(12)	SUPPORT VAT		-
(13)	S. L. Same J.			
(13)	8 . 8	ofic nicos sensiti	Rep Rep	nd c
(13)	YS NO NA	other miscellaneous)	Repair Re	ngogu
(13)	Consulta NO NA	Outer mage (manua)	Repairement Repair	Endonura
(13)		Outer mage (manua)	Harry B.	Binaojan
(13)	Consulta NO NA	Outer subspeciments)	Tapoulata	ВИПВОВПЕ
(13)	Consulta NO NA	Outer mage (manua)		ВЛТВОГОЦ.
SUTSIDE	Consulta NO NA	Outer mage (manua)		ВИЛВО ВП
SUTSIDE	THE THE PROPERTY OF THE PROPER	1 AUM) SIding		BJIIBO DIII
(19) DUTSIDE Registered Waste Master	THE THE PROPERTY OF THE PROPER	1 AUM). Siding	2,000 ST 400 100 100 100 100 100 100 100 100 100	SANGOJOU.
(19) DUTSIDE Registered Waste Master	THE THE PROPERTY OF THE PROPER	1 AUM) SIDING	2000 ST TOTAL COLLEGE	BANGO (UL)
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Register Wester Houses No Just Lice Delimnico	CATHOLOGY WASHINGTON OF THE PROPERTY OF THE PR	Cable Yards Waste Scy	2000 SF WAR CONTROL OF THE STATE OF THE STAT	SJUBO(UL)
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SUTSIDE Registred Weste Houser NI JUTLIC Delignico SSY JHII	THE THE PROPERTY OF THE PROPER	Cable Yards Waste Scy	2000 SFV	BUIROUPE



Date of Notification (1)			Name of	Building (Owner/Ope	erator	(2)						- 50	
8-10-2015			Alicia J	lones				SMI	file.	1				
Agencies Notified Type Notification EPA X Initial			Street Ad 702 St		nt Avenu	e			1915	5 7	\$13	i i		
EPA X Initial Amended Amendment Emergency (_		te, Zip Co on, NJ 0									A F Brook	
DOH justification Cancellation	iricidaling		Name of Alicia						Tele 86	ephone Nu	imber			
		_	FACIL	LITY INFO	ORMATION	N								-
Name of Facility Where Abatement is Taking Residential	g Place (3)						_	of Facility (4 school (K-12						
Street Address							Пs	Subchapter 8	(Othe					
702 Stuyvesant Avenue								other (i.e. pr tc.)	ivate 8	& commerc	cial buil	dings	home	es,
City (5) Irvington, NJ 07111								e Feet	# of	Floors	1200	8ldg. <i>A</i> 5+	ige	
County (6) Essex			County C	Code (7) ISE ONLY)	_	Currer	nt Use (Prior	r if bei	ng demolis	shed)			
Name of Monitoring Firm Hired by Building (Owner (8)		ASCM	l No.	1	Name	of Abat	ement Cont	ractor	(9)				
Charl Add						Gree	n Env	ironmenta			LC			
Street Address							Addres Virgini	s a Avenue						
City, State, Zip Code							state, Zip	Code , NJ 0730	04					
Project Manager for Monitoring Firm			Telephor	ne No.	185		none No			License I	No.			
Start Date (10) 8-20-2015	Scheduled 8-22-20		npletion [Date (11)	11.0		of OSH e as a	A Monitor						
Occupancy Status During Abatement (Chec	k Only One	2)				Control 1	Addres							_
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of Al nal Facility I	baten Hours	nent S		(City, S	state, Zip	o Code						
Scope of Work (Check All That Apply)						2.500								
≥3 sf or ≥3 if ≥160 sf or ≥260 if	processor .	enova				×	Mini Glov	Containmenti-Enclosure	edure					
	le l						1 1001	-Exempted	() an	I NON-FIIA	bie Pro	V-12-12-12-12-12-12-12-12-12-12-12-12-12-	e emen	
Location of	No	_ocat ormai	lly		Desc	ription	of						ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Custo	ntena	nce/		tos Contain thermal sy surfacir other mis	ning M ystems ng, VA	Material s insulat T, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										ē	
Basement Kitchen	-	X	1		pipe ir		0000000		- //	5 LF	X	-		
		X	-			oleum	n 		1:	50 SF	X			
Exterior		X	-		Si	ding			42	00 SF	X			
Name of Registered Waste Hauler		IN	JDEP W	laste	Cubic Ya	arde		Name of R	Pagisto	rod Landfi	11			
Green Environmental Services		H	lauler ID 034889	No.	of Waste			G.R.O.V						
City, State Jersey City, NJ	8	1			Disposal 8-24-20			City, State Morrisvil		A				
Completed by Liliana Serrano	Title Office	Mar	nager	0	Sig	nature		Ser	علا		ate 3-10-2	015		

CK 2345

g .		(Pu	ırsuant t	to NJAC 8	:60 and	12:120))			3 · · · · · ·				
Date of Notification (1) 08/12/2015	ilia e			Building C Carelli			(2)		E, F. S.	e	8			
Agencies Notified Type Notificat	ion		Street Ad 697 Va	ddress alley Roa	ad, Sui	te 2C			1616	File 11	44	£: ;	29	
EPA Initial Amende Amendm Emerger DOH justificati	ent # ncy (including	_	City, Stat Mapley Name of	te, Zip Coo wood, No Contact	de J 0704	0				abasa Num			51,	
DCA Cancella			Mark S	6. Carelli	Archit	ect			1		'			
Name of Facility Where Abatement is T Church	aking Place (3)	FACII	LITY INFO	RMATIO	NC	Ту	pe of Facility (2)					
Street Address 305 Boyden Ave							×	Subchapter Other (i.e. p etc.)				lings,	home	es,
City (5) Maplewood, NJ 07040							Sq	uare Feet	# of	Floors	В	dg. A	ge	
County (6) Essex			County C (STATE L	Code (7) JSE ONLY)		_	Cu	irrent Use (Pri	or if beir	ng demolish	ed)			
Name of Monitoring Firm Hired by Build Sky Environmental Services Inc			ASCM	1 No.				struction Co						
Street Address 140 Boulevard						Street 235		iress tchung Ave	nue					
City, State, Zip Code Mountain Lakes, NJ 07046								, Zip Code range, NJ 0	7052					
Project Manager for Monitoring Firm Leonid Shereshevsky			Telephor	ne No. 38-4821		Teleph 973-		No. 9-2900		License No 01231	0.			
Start Date (10) 08/12/2015	Schedule 08/12/2		npletion l	Date (11)				SHA Monitor ler Laborato		lobal Inc	•			
Occupancy Status During Abatement (0	Check Only On	e)				Street								
Facility Closed/Vacated During En Abatement Performed Outside of I Other – Describe:	tire Period of A Normal Facility	Abatem	nent			City, S	State	Cary Stree , Zip Code nd, VA. 232						
Scope of Work (Check All That Apply)		387 L S				Mon	1110	110, 771. 202						-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	tenova emolit				>	<	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure	Ü			e	
	1000	Locati		2	D								ement pe	
Location of Asbestos-Containing Material (ACN TO BE ABATED In Facility (13)) Use Ma Cusi	d Sole intena codial S (12)	ly by nce/ Staff?		tos Cont thermal surfac		Mate is ins		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							01.5				
Crawl Space and Basement			X		Pipe	Insula	ioite	n	2	0LF	X			
											\vdash			
Name of Registered Waste Hauler	13.08	JDEP W		Cubic			Name of	Registe	red Landfill					
Be Construction Corporation	F	lauler ID	No.	of Was			Tullyto		cility					
City, State West Orange , NJ						sal Date		City, Star Tullyton		1 1				
Completed by Barbara Reed	Title Presi	dent	5		S	ignatur	é Ec	fair	Ke	20 Da 8/	te 12/20	15		

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

CK 36869

Federal Notification	of As	besto	s Abateme	ent (Pu	irsuant to NJAC 8:6	0-7 a	and 12:120-7)			
Date of Notification					er/Operator	4 1 1	A Partie			
0 8 1 1	5	MAC'	Y'S CORPO	DRATE	SERVICES (FEDER					
Agencies Notified Type of Notification		Stree	t Address		2815 /	EIIC	17 44 8: 29			
USEPA X Initial		Committee Description	ST SEVEN	TH ST	REET		1/ 48 8:29			
X DEP Notification					45.	=				
X DCA/DOL Amended			State, Zip C		Ğ.	11:	Carlon Fil			
X DOH Cancellation		CINC	INNATI, OH	110 4	5202	5-16-2	C41 (192)			
		Name	of Contac	t			Telephone Nun	nber		
						ļ				
			enrich en							
Name of Facility Where Abstract is			TY INFORI	MATIO						
Name of Facility Where Abatement is	ıakın	ig Plac	e		Type of Facility					
BLOOMINGDALES STORE - WILLO	MRR	OOK	ΜΔΙΙ		() School (K-12) () Sub-Chapter 8	(Oth	or than K 12)			
Street Address	/VDI	MOOKI	VIALL		(X) Other (I.e. priv					
					buildings, home					
100 ROUTE 46				SF of			# Floor		Age of	Bldg.
City		ounty (1 MILLION			1	50	+
NAME DEDOEM	S	tate us	e Only	Curre	nt Use (prior if being	demo	olished)			
WAYNE BERGEN	الم ما الم	0	A COM No	Mana	-5.01					
Name of Monitoring Firm Hired by Buil	aing	Owne	ASCINI NO	IName	of Apatment Contrac	ctor				
PENNONI ASSCIATES INC				ACM	CONSULTING CORE	P				
Street Address					Address	1.00 1 00				
515 GROVE STREET SUITE 1B				2450	CTANLEY TEDDA OF	_				
City, State, Zip Code					STANLEY TERRACE State, Zip Code	=				
only, orate, 21p oode			9	Oity, c	otate, Zip Code					
HADDEN HEIGHTS, NJ 08035				UNIO	N, NJ 07083					
Project Manager for Monitoring Firm	Tele	phone	No.	Teleph	none Number		License Numbe	r		
TO DE DETERMANES										
TO BE DETERMINED TO Scheduled Start Date Scheduled C					87-1008		00575			
Scheduled Start Date Scheduled C	omp	letion t	Jale	ivanie	of OSHA Monitor					
8 28 2015 9	1	2015			ANALYTICAL					
Month Day Year Month Da		Year		Street	Address					
Occupancy Status During Abatement (20714	/EOT SOTU OTDEET					
Facility Closed/Vacated During En X Abatement Outside Normal Facili			of Abatem		State, Zip Code	10000				
X Describe: 9:30PM TO 7:00AM	y i ic	Juis		Oity, C	riate, Zip Code					
Other - Describe:				NEW'	YORK, NY 10118					
Scope of Work (Checl Only One)			Abatement	Meth	nd					
Demolition					ontainment with Nega	ative	Pressure			
>3sf or >3lf					inclosure		. , , , , , , , , , , , , , , , , , , ,			
$X \ge 160sf or \ge 260lf$			X	Glovel	bag Procedure					
Renovation					riable Procedure					
			on Normall		Describtion of		Amount to be	Aba	tement	Гуре
Location of ACM Facility	Us		Custodial S		ACM to be		Removed	D	D - 15	JE. J
1ST FLOOR MER ROOM	+-	Yes	NO	N/A	Removed PIPE FITTING		(Specify SF/LF) 40 LF	X	ReplEn	JENCI.
TO THE COUNTY TO THE PARTY OF T	+				I I LITTING	====	TO LI			\vdash
Name of Registered Waste Hauler	1	NJDE	P Waste ID	No	Cubic Yds waste		Name of Registe	ered	Landfill	
TRI-STATE TRANSFER ASSOC., INC.			SW1896		TBD		MINERVA ENTE			NC
City, State	_		sal Date		City, State of Registe					
BRONX, NY	_	TBD			WAYNESBURG, OH					
Completed By (Print or Type)	- 1	Title			Signature	21	. 1		Date]
ANITA SMOLAR		GENE	RAL MANA	GER	(luto)	DN	MAN		8/11/	15

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11	pol	121	171
(1	TIME	17	1.11

		10-10-10-10-10-10-10-10-10-10-10-10-10-1		14100,0000						+1	R	1		0 6	_	
Date of Notification (1) 8/12/15					Building O Peter the				1612							
Agencies Notified X EPA	Type Notification			Street Ad 179 Ba	^{ddress} aldwin R	oad						-	ŀ			
EPA DEP DOL	Initial Amended Beareage (including justification) Cancellation Abatement is Taking Place (including All That Apply) In of BMATED All That Apply)				te, Zip Co pany, N		54		70	ET		1.	÷ 6.			
X DOH X DCA	Amended Amendment # Emergency (including justification) Cancellation Cancellation Cancellation		- 1		Contact ourounji	an				Tele	enhone Ni	umbe	r			
				FACI	LITY INFO	RMATI	ON									
Name of Facility Where A All Saints Academy Street Address		g Place (3)						of Facility (4 School (K-12 Subchapter 8	2)	er than K-	12)				
189 Baldwin Road	Gracellation Facility Where Abatement is Taking Place Ints Academy Ints Academy Iddress Ints Academy Iddress								Other (i.e. pr etc.)	ivate &	& commer					is,
City (5) Parsippany								Squar 2500	re Feet)	3	Floors		BI 60	dg. A)	ge	
County (6) Morris	19.			County ((STATE L	Code (7) JSE ONLY)			Curre	nt Use (Prio	r if bei	ng demoli	shed)				
Name of Monitoring Firm Detail Associates	Hired by Building	Owner (8)		ASCM 0001					tement Cont onmental			С				
Street Address 300 Grand Avenue				-				Addres	ss 33, 4 E Ga	ate D	rive					
City, State, Zip Code Englewood, NJ 076	331								ip Code , NJ 0741	8						
The same of the second control of the second	itoring Firm			Telephoi	ne No.			none No 764-2			License	No.				
Start Date (10) 8/21/15			ed Con		Date (11)				HA Monitor							-
	enue de J 07631 or Monitoring Firm zewski Sched 9/21/ During Abatement (Check Only d/Vacated During Entire Period of erformed Outside of Normal Facilibe: eck All That Apply)						Ctroot	Addres					70 E			
_		12.					Street	Addres	55							
Abatement Perform	ed Outside of Norr					_	City, S	State, Z	ip Code			32312				
Scope of Work (Check A	ll That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demolit	33333				Mir Glo	I Containme ni-Enclosure ovebag Proce n-Exempted	edure	A 5 2000				e	
		le	Locati	ion						1 /					ement	
Location	of		Vormal			Do	scription	of						Ту	ре	
Asbestos-Containing <u>TO BE ABA</u> In Facil	Material (ACM) ATED	Ma Cus	ed Sole intena todial s (12)	nce/ Staff?		os Con thermal surfa	taining N system cing, VA miscellar	Material s insula T, or		(8	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
		res	No	N/A								_				
Room 1	08	-		X	9":	x9" flo	or tile a	& mas	stic	7;	50 SF	X	-			
Name of Registered Waste Hauler				JDEP W			Yards		Name of F	Registe	ered Landi	fill				
Freehold Cartage			13353	lauler ID 5939	No.	of Wa			Western		ks Landt	fill				
City, State Freehold, NJ						TBD	sal Date		City, State Birdsbor					11		
Completed by A. Scott Higgins		Title Pres	ident			3	Signature	1	1	-		Date 8/12/	115			

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Date of Notification (1)			1			g Owner/Operator		and the state of					
8/12/15			- 1	CAL	VARY	EASCOPM	churce	4			- 1		
Agency Notified	Type Notification		1		Address								
□ EPA	A faitial					ONAJ CO	BUE	5.71					
III DEP	☐ Amended				State, Zip								
	Amendment # D Emergency (include	and	į		SMA	T. NJ.	07701						_
IZ DOH	justification)		1		of Conta	-							
□ DCA	☐ Cancellation			FIR	, 50	HIRM		100 -101	107 e	210			
				FAC	ILITY INF	ORMATION							
Name of Facility Where A	11.00 - 11.00 - 11.00 - 11.00 - 11.00 - 11.00 - 11.00 - 11.00 - 11.00 - 11.00 - 11.00 - 11.00 - 11.00 - 11.00				•		Type of Facilit	y (4)					
CALVARY	EPISCOPAL C	240	RC	de			School (K-1						
Street Address	*				•	-13		8 (Other than K-12) rivate & commercia		nas			
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City (5)		2					Square Feet	# of Floors	Bldg				
. SOKH	lit						15500			86	15	>	
County (6)			1) (STATE USE	Current Use (F	rior if being demolis	shed)				
01410	w.		.	ONLY) -		CHUR	2064					
Name of Monitoring Firm I	fired by Building Own	er	ASCM	No.		Name of Abatem							1000
(8)					17	Best Re	moval Ir	10					
Street Address				50		Street Address							
? ?						450 S.		:					
City, State, Zip Code						City, State, Zip C		07(01					
Delicat Manager Co. Man 3	· ·	1		- M-			sack , N	I.J. 07601					_
Project Manager for Monit	omg ram	16	nepno	ne No.		Telephone No.	7///	00388					
Start Date (10)	Scheduled Co	annolof	on Do	40 (94)		201-329- Name of CISHA		00300					_
8/21/15	81					Omega En		ntal		14			
Occupancy Status During						Street Address				-	-	_	_
·						280 Huy	ler St						
☐ Facility Closed/Vacated ☐ Abatement Performed C	outside of Normal Faci	of Adele Selv Hos	enent Enert			City, State, Zip C							
2 Other - Describe: 7 J y	170584	,				S. Hacker	nsack ,	N.J. 0760	6				
Scope of Work (Check all 1	that apply)												
€\$23 at or ≥ 3 E			_	a Ren	ovation	—B Mai-l		Negative Pressure					
□ ≥ 160 sf or ≥ 260 lf				☐ Den	notition	-B-Glove	bag Procedure	d Non-Friable Proce	domo				
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*		0.0	Locati							L	Ty	oe_	_
Location Asbestos-Containing			d Sole		Anha	Description of the Containing Ma		Amount				-	
TO BE ABA	TED		ntenai			, thermal systems		(Specify		Rel	Repair	noa	Enclosure
. '/IN Facili	Ŋ.		State	 , .		surfacing, VAT,		SF or LF)		Removal	pai	nad	180
(13)	1.21		(12)			ourer miscendire	Jus,			=		ate	0
	_	Yes	No	N/A									
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		$\neg \uparrow$										1	
Name of Registered Waste	Hauler	-		Vaste I	lauler	Cubic Yards of	Name of Regi	stered Landfill					
Best Removal	Tnc	ID	No. 1	7109	2	Waste	Cumber1	and Count	y L	an	df	il	1
	T11C		Т.	110:	,	2%267						_	_
City, State	ook M T	7760	1			Disposal Date	City, State	burgh , PA	.17	24	0		
	ack ,N.J. (1/00) T			812215	1164		Date ,		_		
J. Maiorano	Estima	tor				Signature	Sugar	1	R	12	1,	5	
ASB-41			ic for-	n for on	hacter E	enside exempted			01	, -	1 .	2	-
	DO NO.		~ (VIII		mesons at	and a continued	I HOUSE						

CK 1573

ate of Notification (1)				Building Owr		(2)	e.	£ 5 5 5	1100				
e-7-2015 gencies Notified Type Notification		Str	eet Ad	dress					112 17	er C	10		
EPA X Initial Amended Amendment #	•	Cit	ty, State	e, Zip Code City, NJ C					Lite		· J.L.		
Amendment # Emergency (i justification) DCA Amendment # Emergency (i justification) Cancellation	ncluding	Na		Contact				Telep	ohone Numbe	er			
			FACIL	ITY INFOR	MATION	Type	of Facility (4)						\dashv
Name of Facility Where Abatement is Taking Residential Street Address	Place (3)					□ s	chool (K-12)) (Othe	r than K-12) commercial	building	gs, ho	mes,	
40 Webster Avenue City (5)						e e	tc.) e Feet		Floors		. Age		
Jersey City, NJ 07307 County (6)				Code (7)				1000	ng demolishe	d)			
Hudson Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	M No.	Nar Gr	ne of Abareen Env	tement Cont vironment	tractor al Se	(9) rvices, LL()			
Street Address					Stre	eet Addres							
City, State, Zip Code		2000			City	y, State, Z ersey Cit	ip Code y, NJ 073	04					
Project Manager for Monitoring Firm		1	Telepho	one No.	20	lephone N)1-333-8	8855		License No 01174				
Start Date (10) 8-8-2015	Scheduled 8-8-2015		npletion	Date (11)		me of OS ame as	HA Monitor above						
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	Period of Ab	aten	nent s			reet Addre							_
Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf		enova emoli				××××	lini-Enclosur	e cedure	th Negative F e and Non-Friab			e	
	Is	Loca	tion								Abate	ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	ntena	ely by ance/ Staff?	(ie	tos Contain thermal sy surfacine	iption of ning Mater stems insi g, VAT, or cellaneou	ulation.		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/.	Α .				-	120 LF	X		-	
Basement		X			Pipe Ir	nsulation	1		120 LF	, A			
			-										
									1. Jane 3 t 3.	511			
Name of Registered Waste Hauler				P Waste	Cubic Y				istered Land S. North La				
Green Environmental Services		0034	r ID No. 889	2 Disposa	=	City, S	tate		ii lullil				
City, State Jersey City, NJ					8-10-2		Morri	sville		Date			
Completed by Liliana Serrano								171	w	8-7-2	015		

CK 5750

Date of Notification (1)					Name of Building Owner/Operator (2)												
8/13/15					12 JOE SOKOLOWSKE												
Agency Notified	Type Notification					Street Address											
Q EPA	. El Initial				106 HOBART AUE												
II DEP	Amended Amendment#				City, State, Zip Code												
		rgency (includ	ing	į	SUMMIT . NJ Name of Contact Telephone Number												
☐ DCA Lustification) ☐ Cancellation					Marine of Contact MGC. SOKOLOW Slic 9 ? 5?												
				FACILITY INFORMATION													
Name of Facility Where Abatement is Taking Place (3)						LITER	ORMATION	Type of Facilit	v (D)		_	- 3 2	_				
				S.		i											
Street Address								☐ School (K-12) ☐ Subchapter 8 (Other than K-12)									
BUA THABOH 201					,	¥3	ivate & commercial buildings,										
City (5)							homes, etc Square Feet	.)	Bldg.	Age	1	-	_				
SUMME								3000	2	MOYSARS							
County (6)	9-61			1	Count	Code (7	(STATE USE	(Prior if being demolished)									
UNION					ONLY		, (= , , , , , , , , , , , , , , , , , ,	RESIDENCE									
Name of Monitoring Firm	Hired by	Building Own	er	ASC	A No.		(9)		_			-					
(8)						50	ıc										
Street Address							Street Address										
7.5					23		450 S.	5									
City, State, Zip Code						City, State, Zip Code											
								nsack , N.J. 07601									
Project Manager for Monitoring Firm Telepho					ne No.		Telephone No.										
							201-329-										
Start Date (10) Scheduled Completion D																	
8/25/5 8/24/15 Occupancy Status During Abatement (Check only one)							Street Address				_			_			
							280 Huy	ler St.									
☐ Facility Closed/Vacated During Entire Period of Abatemer ☐ Abatement Performed Outside of Normal Facility Hours				emen urs	t .		City, State, Zip C										
20ther - Describe: 71M 7058m					•		S.Hacke	nsack ,	N.J. 0760	16							
Scope of Work (Check all that apply)																	
₽23sfor≥3#					Ren		-El Mini-	Enclosure		en. De							
□ ≥ 160 sf or ≥ 260 lf					☐ Den	olition		ebag Procedure Evernment (*) an	d Non-Friable Proce	ndura							
is Loca					inn	ľ	e rost	and signing () with		ner	rt						
				Vorma	0.000000					-	Type						
. Location of Used Sc Asbestos-Containing Material (ACM) Mainter					Ashe	Description of stos Containing Ma		Amount		1	1	m					
TO BE ABATED			Custodial (i.				, thermal systems	insulation,	(Specify SF or LF)	i	Rem	Re	1000	nol			
(13)				(12)		288	surfacing, VAT other miscellane		SP OF LP)		Removal	Repair	Bulle	Enclosure			
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0.00	90000		Yes	No	N/A	-15/	1141 0 05-1		N 684	2	4	+	+	\dashv			
BASELENT			-	-	-	_	RANSITE		64SF		7	+	+	\dashv			
BASSHENT				1	-	1	STI S KADI		6421	-	7	+	+	\dashv			
			-	-	+						-	+	+	\dashv			
Name of Registered Waste Hauler NJDEP					Marcha L	fautor	Cubic Yards of	Name of Regi	Name of Registered Landfill								
ID No							Waste	1	Land Count	- 17 T .	מנ	дf	; 1	7			
Best Removal Inc 17					7109	,	207	Cumper.	Lanu Count	- у пс	+11	u.1.	4.1				
City, State				Disposal Date City, State Newburgh, PA.					17	17240							
Hackensack ,N.J. 07601										I Dedo							
Completed by	· · · · · · · · · · · · · · · · · · ·						Signature Date 8/13/15										
J.Maiorano Estimator							1/10-	المسرعم د		41.	9	110					

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

Date of Notification (1) 8-12-15					Name of Building Owner/Operator (2)												
					Kathy Griffin												
Agencies Notified Type Notification					Addres	SS		the party of									
[]EPA	[X]Initi	ial		165 Pine Street				till the second of the second									
[]DEP		Lficati	on	itv	State	nde						-					
EU - IEU WARDONAL SANCOLA DEWARDER	[]Ameno	ded		City, State, Zip Code Montclair, NJ, 07042													
[X]DOL	Noti	Lficati	-				,										
[X]DOH	[]EMERO	SENCY	IN.		of Conta		_	Telephone Number									
[]DCA	_	Kat	hy G	rliii	Ln	1		.60									
	[]Cance	SIIATIO	n		EXCTI	TOV THE	FORMATION										
Name of Facility Who	ere Abatem	ent is	Takin	T Plac		TII INI	ORMATION	Type o	f Facili	Ltv (4)				12000			
Same as above					(-)				School								
7.								177 177		ter 8 (Oth	er :	than	K-12	2)			
Street Addres							[X]Other (i.e., private & commer-										
	¥1)									ildings,							
City (5		Con	ntv (E) Page	25	Count	y Code (7)	Square	Feet	# of Flo	ors	Bl	dg.	Age			
City (5 County			штсу (24 CO 20 CO			E USE ONLY)	0	+ 77 /7	2-1 16 2			. 7 2 .	- la 2 1			
								Current Use (Prior if being demolished)									
Name of Monitoring	Firm hired	by Bui	lding	ASC	M No.	l N	ame of Abate	ement Co	ntractor	- (9)							
Owner (8)		2, 201							MANAGEMENT, Inc.								
N/A Street Address		Street Addres					COLUMN TO THE PRODUCTION OF COLUMN SERVICE OF AN AND AND AND AND AND AND AND AND AND										
Street Address									ar St								
							86 Christopher St. City, State, Zip Code										
City, State, Zip Co	de									12							
							Montcla		0 / 0 /								
					/A Telephone Number (973)74												
Scheduled Start Dat	Comple	oletion Date (11) Name of OSHA				Monitor							_				
8-21-15 8-24						IN.	I/A										
Month Day Year Month				ay	Year												
Occupancy Status Du [X]Facility Clo of Abatemer	sed/Vacate					s	treet Addre	ss									
[]Abatement Performed Outside of N									Zip Code								
Hours - Describe: «OffHours Descr []other - Describe: «Other Occupance							= 100 miles	7									
and the second s				Desci	.Ipc»												
Scope of Work (Chec	k all that	apply)					[]Full	Contair	ment wit	th Negativ	re P:	ressu	ire				
[X]≥3 sf or			75.00		vation		[]Mini	-Enclosu	ire								
[]≥160 sf	or >260 lf]]Demo	lition			ebag Pro	cedure Procedu	ro							
		Is					Abater						ype				
Location of					on Y		Descripti					R		E	E		
Asbestos-Containing Material (ACM)				Used olely	.	9	Asbestos-Co Material					E	R	C	C		
TO BE AB	By	Main	-	(:	i.e., therma	77				M	PA	A P	L O				
In Facility				tenance/ Custodial			lation, sur		acing, VAT, LF)			VA	I	S	S		
(13)	Sta Yes	ff (1 No	2) N/A	or	other misc	ellaneou	Llaneous)			L	R	L	R				
Basement			res				Insula	tion	ion 240 1			X		-	E		
					22	ripe	Insula	CIOII	240 11						_		
		-										-	-				
Wann of Barbara				ND			- W	h-	-6 5		30:						
Name of Registered	NJDEP Waste Cubic Yards Hauler ID No. of Waste 1.5				Name of Registered Landfill G.R.O.W.S.												
AZTECH MANAG	ERIEN I	TIVC.	17	040				G.R	.O.W.	J.							
City, State		Disposal Date				City, State											
Montclair, NJ		8-25-15 Morrisville, PA						1	1906/								
Completed By (Print	Or Throat	Title			- 12		Signatur				F	ate					
Constantine V	ide																
Constantine Vivian President								1 (1) (1) 8-12-15									

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QUALITYENVIRONMENTAL

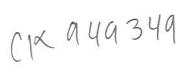
PAGE 82/84

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	140		TON	e of New Jerse of Ashestos NJAC 8:80 en	ABATEN			Check	7	4	7	Anti-tive framework
2 at a of Notification (1)		Ne	Ime of	Building Owner/C	perator	(2)			7		- "	\Box
07-29-2015		F	Res	identic	JI	we	Mino	1	1.0	1		1-
geneiss Notified Type Notific	etion	SR	reet Ad	dress				S	·	1	~	V
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			FACIL	TY INFORMAT	1ON							~
larne of Facility Where Abelemont is						Type	of Facility (4)				-
Residential	Dwell	DIL					School (K-1		_		12	
Street Address	4	1					Subchapter Other (Le. t	5 (Other then K-1 nivate & commerc	2) isi bulk	inas.	home	8.
813 Lambs	Hoos	1				them 1	e(c)					
36y (5)	-11					Squa	re Feet	# of Floors		dg. A	35	
TIUITICA H						10	DU	or If being demolts	are an extensive and	50	J. A.	53
Sound (6) Glouces	Cer.	6	TATE U	Tode (T)	_	CUITE	-	1 1 .		1,0		25
Name of Monitoring Firm Hired by Bo			ASCN		1 Nertho	of Abo	tement Cor	identi	al_			
Quality Environmental Conce		1	None					ital Concepts	A	-		
Street Address	-		1 10110			Addre		sor correction				
1053 North Tuckehoe Road							h Tuckeh	oe Road	2		9	-
Sty, State, Zip Codo							ip Code			1.6		1
Williemstown, New Jersey Of	1094							Jersey 08094				777
reject Manager for Montaning Firm		19	wheep no	na fila		hone N		License	-			
Edward Knorr				9-1166		829-1		01088			-	;;
Start Cate (10)	Schadula	ed Come	elation	Date (11)	Marrie	of OS	HA Monitor					-
07-31-2015		77-	21.	-2015	Qua	lity Er	remnorivi	ntal Concepts				~
Occupancy Status During Abelemen	(Check Only Or			2010	Street	Addra	5.6					
Facility Closed/Vacated Duning	Entire Period of A	\beleme	int		1053	3 Nort	h Tuckah	ige Road				
Abstement Penamed Outside	of Normal Facility	Ногия	31(00)				ip Code					
Other - Desarbe:					Willi	amsto	wn, New	Jersey 08094				
Scope of Work (Check All That Apply	/)										-	
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2180 af or ≥260 If)emoliiio	าก		-		ni-Endosur					
	770				Ė		ovebag Pro at Ezemple	d (") and Non-Fris	ble Pro	cad un		
	In	Localio	6		100						ment	
Location of	I Imm	d Stick			escription	n of			-	Ty	26	_
Asbestos-Containing Michariel (A TO BE ABATED	(ANT)	intenani	se/	Ashestos Co (i.e. therm				Amount (Specify	70		T	57
in Facility	Cus	todial St	#R7		ang, V		entri,	SF or LF)	Reprove	Ropda	Encapsolista	Endosure
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Neme of Registered Waste Hauler			DEP W		o Yards		Name of	Registered Land!	n	•		_
Quality Environmental Conce	pis .		P10		apte		Glou	cester C	CUT	Щ		
City, State		1 15	7 10	Alan	4CY		City, Sta	Solid W	257	lend .		
Villiamstown, Naw Jersey	-			07	S-L	-15		T nosim	1 2500	N	7.	
Completed by	Title		···				10.110	1 10011	laic	لال	4	
Edward Knorr	0.0000000	Presid	lent	Ī	Slowing	Jan-	. ()	to man)	77-	29	-10	5
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CK 113369944

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

Date of Notification (1) 8/10/15					Building Owne Claghorn	r/Operator	r (2)	2015 41	15 7 63 g				
Agencies Notified	Type Notification			Street Ac 300 Ea	idress st 56th Stre	et, Apt 2	22J		- 12 F. C.	-5-1			
× EPA × DEP × DOL	Initial Amended Amendment				te, Zip Code ork, NY 100	22		5	REPORT	To L			
☑ DOH DCA	justification) Cancellation				Contact Claghorn				Telephone Nur	mber			
				FACIL	ITY INFORMA	TION			1				-
Name of Facility Where House	Abatement is Takin	g Place (3)					Тур	oe of Facility (4 School (K-12					
Street Address 18 Country Club Dr	rive						×		8 (Other than K-1: rivate & commerci		lings,	home	es,
City (5) Chatham							Sqi N/	uare Feet A	# of Floors N/A	3660	ldg. A	ge	
County (6) Morris				County C	Code (7) ISE ONLY)		100000	rrent Use (Prio OUSE	or if being demolish	ned)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	l No.			batement Con atement, Inc					
Street Address						Stree 11 F	3/2/1000	ress engren Aver	nue				
City, State, Zip Code		įš.				City,	State	, Zip Code NJ 07512					
Project Manager for Mor	nitoring Firm		T	Telephor	ne No.	Telep		No. 5-8685	License N #00675	lo.			
Start Date (10) 8/24/15		Scheduled 8/25/15	d Com	pletion [Date (11)			SHA Monitor atement, In	c.				
Occupancy Status Durin	ng Ahatement (Cher	k Only One	1			Stree		- 10					
			1					engren Aver	nue				
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D&S Abatement, Inc	C.			auler ID 20996	TE				Management o	of PA			
City, State Totowa, NJ					Dis TE	posal Dat D	e /	City, State 7 Tuulyto					
Completed by Deanna Brkusanin		Title Projec	ct Ma	anager	•	Signatu	Je W	Delverts	7///	ate /10/1	5		



Date of Notification (1) 8/10/15				Name of Mario E	Building Ov	vner/Ope	rator	(2)		25	IN Alle				
Agencies Notified	Type Notification			Street Ad							M AUC ,	1	i br	1. 5	7
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× EPA × DEP × DOL	Amended Amendment				e, Zip Code Caldwell, N		06				& I I	THE Y		1	
⊠ DOH □ DCA	Emergency (i justification) Cancellation	ncluding	100	Name of Mario E						Tele	phone Num	nber)5			
			_	FACIL	ITY INFOR	MATION									
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Street Address							-	☐ St	chool (K-12) bchapter 8	(Othe					
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City (5)					\$ T. T. S.			Square		100	Floors		ldg. A	ge	
West Caldwell								N/A		N/A			/A		
County (6) Essex				County C (STATE U	Code (7) ISE ONLY)		_	Current	: Use (Prior e	if bein	g demolish	ed)			
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Street Address								Address	253						_
			- 15/6					-	en Aveni	ue					
City, State, Zip Code								tate, Zip wa, NJ	O7512						
Project Manager for Mo	nitoring Firm			Telephor	ne No.	1000		one No. 345-86			License N #00675	0.			
Start Date (10) 8/25/15	*:	Scheduled 8/26/15	Cor	mpletion [Date (11)				A Monitor ment, Inc		2				
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D&S Abatement, In			H	Hauler ID	No.	of Waste			Waste N						
City, State Totowa, NJ						Disposal TBD	Date		City, State Tuulytov		Α '				
Completed by Deanna Brkusanin		Title Projec	et Ma	anager		Sigi	natúre	1/000	WAR	ller	- Da	ate 10/1	5	12-12	

CK 1475102198

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

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Date of Notification (1) 7/29/15			- 1	Name of E Doug A	Building O	wner/O	perator	(2)	2610	. E110					
	e Notification			Street Ad					£ 0 16	RU	2.17 (6:	35		
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⊠ DOH	Emergency (ir justification)			Name of		110 01				-	phone Nur				_
DCA DCA	Cancellation			Doug A	ngoff					9		^^			
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247 Underhill Road								E	etc.)						,
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Street Address							Street	Addres	SS		-				
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City, State, Zip Code									ip Code J 07512						
Project Manager for Monitorin	ng Firm			Telephon	e No.		107	none N 345-8			License N #00675	lo.			
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D&S Abatement, Inc.			1.00	Hauler ID 20996	No.	of Wa	iste		Waste N	Mana	gement o	of PA			
City, State Totowa, NJ						Dispo TBD	sal Date	ล ก	City, State Tullytov		Α				
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

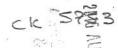
(Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 8/10/15 Jeff Romanowski Agencies Notified Type Notification Street Address 28 Ball Terrace EPA × Initial × City, State, Zip Code DEP Amended × DOL Amendment # Maplewood, NJ 07040 Emergency (including Name of Contact × Telephone Number DOH justification) DCA Jeff Romanowski 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) 28 Ball Terrace × Other (i.e. private & commercial buildings, homes, etc.) City (5) # of Floors Square Feet Bldg. Age Maplewood N/A N/A N/A County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Essex House 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. 973-345-8685 #00675 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8/28/15 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/ TO BE ABATED Encapsulate Enclosure (i.e. thermal systems insulation, (Specify Removal Custodial Staff? Repair In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A basement X duct insulation 130 LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste D&S Abatement, Inc. Waste Management of PA #20996 TBD City, State Disposal Date City, State Totowa, NJ TBD Tuulytown, PA Completed by Signature Date

Project Manager

Deanna Brkusanin

8/10/15

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Agency Netflied PA	Date of Notification ((1)			Name o	f Building	Owner/Operator	(2)	·	-07			
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Abatement Performed Outside of Normal Facility Hours City, State, Zip Code S. Hackensack, N.J. 07606 Scope of Work (Check all that apply) Z 2 3 sf or 2 3 lf Demolition Location of Asbestnes-Containment with Negative Pressure -2 ffini-Enclosure -2 ffini-En	Occupancy Status I	During Abaten	nent (Check only	one)				7 C+					
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Scope of Work (Check all that apply) ### 23 sf or ≥ 3 if ### 2 160 sf or ≥ 250 if ### 25 160 sf or	□ Abatement Perio	med Outside	of Normal Facility	y Hours	84	12	City, State, Zip C	200e	N T 0760	16			
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City, State Hackensack , N. J. 07601 Completed by J. Maiorano Disposal Date 8/29/15 Newburgh , PA. 17240 Signature Signature October 13/13/15	Name of Registere	a Waste Haul	er	ID No.				1		+ 17 T O	nd.	fi	1
City, State Hackensack, N.J. 07601 Completed by J. Maiorano Estimator Disposal Date 8/29/15 Newburgh, PA.17240 Signature City, State Newburgh, PA.17240	Best Remo	oval In	ıc		1710	9	227	Cumber.	land Coun	гу па	IIU.	ГТ	Τ.
Hackensack , N. J. 07601 Completed by J. Maiorano Estimator Hackensack , N. J. 07601 Signature Completed by J. Maiorano Estimator				<u></u>			1	City, State			10		
Completed by J. Maiorano Estimator Signature Oconomy	Hacl	kensack	.N.J. O	7601					wburgh ,P	A.172	40		
J. Maiorano Estimator (Coroner (1/3)13		CHOUCK						1		Date			_
		ano	1	or			1	مصمونه	ا ھـ	8/	13	1	7
	ASB-41	4110			orm for a	shestes I	icensure exempte						

check 5751

Date of Notification (1)		Name o	of Building	, Canad Topada	(2)	14				
8-13-20	15		Co						ě	
Agency Notified	Type Notification		ditiess	filkway		ZETA AUG 1	7 51	18:	16	
Q EPA -	☐ Initial ☐ Amended	27s- 96	ale, To C	102001		-		-	. /2	
- DOL	Amendment#			D, NJ	57/-0	905ESTIL		4	100	
	Q Emergency (including		Ti Darried		0100		11.	() (1)	J.L	
DOH DCA	justification) Cancelation					Telephone Nur	nper	7		
a box	ei Odiacielon		Coyl	war of the second secon				1		
		FACIL	lity Mifc	MARK TRUE						
	Abatement is Taking Fibite (3)		17		Type of Facility	(4)				
W. COYLE	1964			I. Carlotte	Ca School (K-12	22				
Street Address					Q Subchapter 8	(Other than K-12	2)	*		
125 PARKW	AV.			i de		ivate & commerci	ai build	ings.		
City (5)	**/				homes, etc.) Square Feet		DU.	3. Age	_	
			- 60	2.7	en e					
MAYWOOD		The same of the same of the same of		Section 1970 to the subsection of the section of th	1900	12	17	0 4	RE	>
County (6)		County	Cest (7)	TOTAL SE T		nor if being demol	ished)	1		
BERGEN		Olerty	1	F	RESIDE	WCE				
Name of Monitoring Firm	Hired by Building Owner A	SCM No.	Ī	Name of Abates						10-
(8)			and the same	Best Ren	noval In	c		-		
Street Address				Super videss						
		*		Att. Som	h River	S+				
City, State, Zip Code				Chy. Sizza, Zin C	ode	טנ		-		
			and the second	Hackensa	ck N.T	07601				
Project Manager for Moni	toring Farm Tele	ph me oc.		respirate No.	21.0	License No.				-
			The state of	201-329-	7444 -	00388				
Start Date (10)	Schoolded Completion	a Late (111)		eans of John a		00300				
8-24-201	5 18-25-2	2015			nvironme	Teta				
Occupancy Status During	Abatement (Check only one)			المساوية المساوية		-11-01				
D Facility Classed Nameton	During Entire Period of Alaska	2 9 9	į	90	yler St					
Li Abaiement Performed	Dutside of Normal Facility House	T.S. 1	1	or Same, Zigi Ca					_	
- III Other - Describe:	3 Am 5 pm		[,N.J. 07	606	2		
Scope of Work (Check as	Stat apply)				CHBECK	, N. J. 07	000		-	
- B≥3 sfor≥3 lf		Regor	Fa * * *			Negative Pressure	,			
☐ ≥ 160 af or ≥ 260 IF	•	I Luan	Sion		ndosee 23 Procedere					-
				C Care &	Saratad (") and	Non-Friable Proce	dure			
	la La	e ಬೆಂಬ			-			Aba	terne	ent
. Location	6 00	ne fly	: <u>:</u>		NA COL			1	ype	\dashv
Asbestos-Containing	THE PERSON NAMED IN COLUMN TO A STATE OF THE PERSON NAMED IN COLUMN TO A STATE	Curify By Swance/	Asbes to	Constant of the Constant of th	LINE (ACM)	Amount		- 1	-	
TO BE ABA	Cus	to Staff	£e F	der depotrost	ssiation.	(Specify		20 X	Encapaulate	Enclosure
(13)	1 122	20.7		energia de la Maria. Para la compaña media		SFOLE		Removal	100	108
	<u> </u>		1.5			2		9 =		160
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				TOTAL THE PERSON A THE WHEN			***	+	1	_
Name of Registered Waste		P Haste Hau	fer In		Some of Brains	rod Localina				
Best Remov	al Inc DW:		SSE #80000	F	ame of Registe					
		7109		1'12 yo	Minerva	Enterpri	ses	, L	LC	
City, State				10 10	Ty, State					_
Hackensack	, N.J. 07601		F.	1-25-15		01		2.0		
Completed by	- Table			Electronic in the second secon	Waynesb		4468 atte	58		_
9-VELDRAN	Estimato	Y		Vellran			7-13	-2 ^	10	
ASB-41	* Do not use out o		1 61	. Verson		13	15	20	2	

CK 5754

Date of Notification (1)						g Owner/Operator		10 2008 - 0				
21/8/18				R		DEMNIS 1	céce he	N ==	2815			
Agency Notified	Type Notification	*			Address						-14	
Q EPA	Ja initial		-				2164 13	CVO SOFT	=		- 17	
E DEP S DOL	Amended Amendment #		İ	Cay, St	ate, Zip	Code .	.15 0	7016				
	D Emergency (include	ing	-	Name	of Contac	FORES.	73. 6	7016	end.			
☐ DCA	justification) D Cancellation					a ELEHEN		1	2			
LI DOM	a Cancesation							1 / 50 , -				
				FACI	JTY INF	ORMATION		5=	် လုံ		-	_
Name of Facility Where	경기 이번 주시가 되면 어린 경기에 하는 그렇게 되어 하다면 되었다.				•		Type of Facility	(4)	5			
	R. KELEM	: N					School (K-12					
Street Address				•			Subchapter to	3 (Other than K-12) ivate & commercia) I building:	5,		
1161	CENILWORT	H 6	3 6	こう	ř.		homes, etc.)					
City (5)							Square Feet	# of Floors	Bidg. A	-		
· CRAP	of the second				3		2000	2	8	07	61	بوع
County (6)) (STATE USE		rior if being demolis	shed)			
0110	N			ONLY)	•			IDENCE				
Name of Monitoring Firm	n Hired by Building Own	er A	SCM	No.			nent Contractor (9					
(8)		1			-	Best Re	moval In	С				
Street Address			7.	3		Street Address	10					
7.9							River St					
City, State, Zip Code						City, State, Zip (
							sack , N	.J. 07601			-	
Project Manager for Mor	nitoring Firm	Tel	epho	ne No.		Telephone No.		License No.				
						201-329-		00388				
Start Date (10) 9/2/15	Scheduled C	complete 3 L s S	on Da	te (11)	-	Name of OSHA	MonMor vironmen	tal.				
		. 80 DOM:				1	VIIOIIIICII					
Occupancy Status Durin	g Abatement (Check or	ily one)				Street Address 280 Huy	lor St					
G Facility Closed/Vacate				i		City, State, Zip C						-
Abatement Performed Other – Describe: 7/8		any Hou	15		*			N.J. 0760)6			
Scope of Work (Check a						. B. Hacke	nouch,	2,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
•				A Ren			Containment with Enclosure	Negative Pressure	2			
□≥3sfor≥3ff □≥160sfor≥260ff				□ Dem			ebag Procedure		88			
						☐ Non-	Exempted (*) and	Non-Friable Proc	edure	Aba		_
	*	12	Locati		4.5	22					ype	SH.
Locati	on of	E 90.00	ormal I Solo	lly ely by		Description	of		Γ	T		
Asbestos-Containir		Mair	dena	nce/		stos Containing M		Amount (Specify	1		Encapsulate	m
TO BE A	CATED		ustod Staff		fre	., thermal systems surfacing, VAT		SF or LF)	Montowal	60p	apa	clos
(13	3)		(12)			other miscellane	eous)		1		1	ein
		Yes	No	N/A							0	
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BASEMEN		+		15		746410	43610	373	31	+	+	\vdash
-		11							-	+	+	+
		-								+	+	\vdash
								41				
Name of Registered Wa	ste Hauler		No.	Naste H	auler	Cubic Yards of Waste	Name of Regis				٠.	
Best Remova	1 Inc	101	· 1	7109) ,	3420	Cumberl	and Count	ty La	nd	fi	11
City, State Hacken	sack ,N.J.	0760)1			Disposal Date	City, State New	burgh ,PA	A.172	40		
Completed by	Title					Signature /		T	Date	-		-
J.Maiorano	Estima	tor				1	جسمان		8/1.	3/1	5	
						1				-	-	

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)	KIT	449	7		Name of Building Owner/O Delaware Valley Regiona	perator (2)	ol Distric	JG 17	1 12	5.1	1.5
08/12/15 Agencies Notified		Notification '	Type		Street Address	i riigii ociio	OI DISTITO				ਰ
Agencies Notified		IVOLINGATION	1 400		19 Senator Stout Road						
⊠ EPA		☐ Initial Not	ification		City, State, Zip Code						1
□ DCA		☐ Amended			Frenchtown, NJ 0882	.5					
⊠ DOL				cation (including	Name of Contact		Telephor	ne Num	ber		
□ DEP		justification)			Mrs. Daria Wasserbach	- 1)			
⊠DOH		☐ Cancelled	1			1					
				FACILITY INF	ORMATION					-11-21-1	
Name of Facility Where Abateme	nt is T	aking Place (3)	TAGILITTIN	Type of Facility (4)						
Delaware Valley Regiona			<u> </u>		⊠ School (K-12)						
Delawate valley Regiona	ii i iig	11 3011001			☐ Subchapter 8 (other th	an K-12)					
Street Address					Other (i.e. private & comm			es, etc.)			
19 Senator Stout Road					Sq. Feet: # of Floors: Bl	dg. Age:	1960's				
TOTAL FIRST TOTAL COLOR TO THE PROPERTY OF THE STREET OF T					Current Use (prior if being	demolished)	: High Sc	hool			
City (5) Coun				/ Code (7)							
Frenchtown	Hunte	rdon	(State	Use Only)							
100000000000000000000000000000000000000											
Name of Monitoring Firm Hired b	y Bldg.	Owner (8)	ASCM	No.	Name of Contractor (9)						
					D	Custs	lno				
					Panoramic Window & Do	or systems	IIIC.				
Street Address -					Street Address						
					712 Sergeantsville Road						
Oit Otata Zia Cada					City State, ZipCode						
City, State, Zip Code					Stockton, NJ 08559						
Project Manager for Monitoring F	Firm I	Telephone I	Number		Telephone Number		License	Numbe	r		
Project Manager for Monitoring i	11111	relephone	VUITIDEI		P (732)926-0900		01237				
Scheduled Start Date (10)		Scheduled	Completi	ion Date (11)	Name of OSHA Monitor						
08/14/15		09/05/15	00111,0101		IAQ GURU LLC						
Occupancy Status During Abate	ment (0	Check only o	ne)	09	Street Address						
☐ Facility Closed/Vacated Durin	g Entire	e Period of A	batemen	nt	87 Main Street						
□Abatement Performed Outside	of Nor	mal Facility I	Hours -								
Describe					City, State, Zip Code						
⊠Other – Describe: Mon-Sat 7:	00 212	20			Lincoln Park, NJ 07035						
EXOther - Describe: Wion-Sat 7:	00 -3.3	50			Lincom Park, NJ 07035						
Source of Work (Check all that a	apply)										
				F D.		Mini-Enclos	uro				
≥ 3 sf or ≥ 3 lf				⊠ Renova							
	260 lf			□ Demo		□Glovebag Ion-Friable P		=			
					And the second s			A h = 4 =		`	
Location of Asbestos-		cation Norm	ally		sbestos Containing Material mal systems insulation,		ify SF or	Abate	ment 7	ype	
Containing Material (ACM) in		d Solely by nt./Custodial \$	CtoffO	surfacing, VAT,		LF)	ily Si Oi	Remove	Repair E	ncap En	close
Facility (13)	330 570 000	it./Custodiai (Stall?	Surfacing, VAT,	or other misc.)	/					
	(12) YES	S NO	NA								
Exterior of Building	1120	1.0	×	Wine	dow Glaze & Caulk	2970 1	_F	X			
Exterior of Building			_					X			
Name of Rea Wests Haules		NJDEP Wa	ste Haul	er ID #	Cubic Yards of Waste		Name of	f Reaist	ered L	andfill	
Name of Reg. Waste Hauler		0036057	JE Haul	UI ID T	Subje Failed of Wedste		Chrin La			2.211	
Panoramic Window & Dr Sys	nc	000007						1.0			
						Disposal D	ate		ty, Stat		
						56 100 1 1 100 100		Al	lentow	ı, PA	
					\sim 1						
Occupation (Date of France)		Title			Signature / //		Date	_			
Completed by (Print or Type)		Title Consultan	f		Signature /		Date				
Mark M Jovic		Consultan									
					//						
					17						



A FAICE	/ ((Pt	ırsuant t	to NJAC 8	:60 aı	nd 12:120	0)	0	K	501	Q				
Date of Notification (1) 8/12/15					Building C Patters								r.e.			
Agencies Notified	Type Notification			Street Ad	idress d Whalir	na Ro	d.								1	
EPA DEP DOL	Initial Amended Amendment	#		City, Stat	te, Zip Coo Beach Tv	de			- 11				<u></u>			
▼ DOH DCA	Emergency (i justification) Cancellation				Contact					Tel	enhana N		ber 7			
2011	Caricollation				LITY INFO	RMA	TION				-		-			
Name of Facility Where Megan Patterson F		Place (3))	.,,,,,,,					of Facility (4				<u>ن</u>			
Street Address 116 Old Whaling F	ld.	2						×	Subchapter Other (i.e. poetc.)					ings,	home	es,
City (5) Long Beach Twp N	J 08008								re Feet.	# of	f Floors		1000	dg. A 5+	ge	
County (6) Ocean				County C	Code (7) USE ONLY)			Curre	nt Use (Pric	r if bei	ng demo	lishe	200		="	
Name of Monitoring Firm	m Hired by Building (Owner (8)		ASCM	l No.		100000000000000000000000000000000000000		tement Con	tractor	(9)		<u>C</u>			
Street Address								Addres					7.79			
City, State, Zip Code	E						City, S	State, Z	ip Code n NJ 080	01	47		co			
Project Manager for Mo	nitoring Firm			Telephor	ne No.			hone N		<i>3</i> 1	License	e No	15			
St. + D. + (48)		0 1 11					100,000	753-9	SECURITY SECURITY		00727	7				
Start Date (10) 8/13/15		8/17/15	5	npletion i	Date (11)		Sam		HA Monitor							
Occupancy Status Durin Facility Closed/Var Abatement Perforr Other – Describe:	cated During Entire F	Period of A	Abaten	nent		<u> </u>		Addres	ip Code					203553-2		
Scope of Work (Check	All That Apply)													-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	,	Personal Control	Renova Demolit					Mir Glo	Il Containme ni-Enclosure ovebag Prod n-Exempted	edure					е	
		10.00	Locat	557010										Abate	ement	:
Location Asbestos-Containin		Fig. 11	Norma d Sole	-	Ashaa		Description				mount			,,		T
TO BE AF	BATED `illity		intena todial ((12)			therm	ontaining l nal system facing, V/ r miscella	ns insula AT, or	ation,	(8	Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
Exterior	Siding	100	140			Ev	torior C	idina		10	900 SF					
Exterior	Sidilig			X		EX	terior Si	idirig			700 SF		x			
Name of Registered Wa	aste Hauler		F	NJDEP W Hauler ID		of V	vaste		Name of G.R.O.		ered Lan	dfill				
City, State				2459		V2572.0255	oosal Date	e	City, Stat	e	A 1006	7				
Completed by		Title				0/1			IVIOITISV	ille P	4 1900		-			
Anthony T Perna	8	Presi	ident	à			Signatur	1	1			Dat 8/1	e 2/15	5		



Date of Notification (1) 08/14/15					Building C ANAGE			(2)		2	015 A.C	10 1	7	5 14	8: :	5.0
Agencies Notified	Type Notification		- 1	Street Ad												
EPA DEP X DOL	Initial Amended Amendment			City, Stat	e, Zip Coo		701				3 <i>h</i> 三 3	IC		11	G	<u> </u>
≥ DOH DCA	Emergency justification) Cancellation			Name of GOLDI	Contact E ROBE	ERTS				Tele	phone N	Numbe	er			
				FACIL	ITY INFO	RMAT	ION									
Name of Facility Where	Abatement is Takin	g Place (3)						Ту	pe of Facility (4) School (K-12) Subchapter 8	1	er than K	(-12)				
695-701 PARKWA	Y AVENUE							×	Other (i.e. privetc.)	vate &	comme	rcial b	uild	ings,	home	s,
City (5) EWING, NJ								Sq	uare Feet	# of	Floors		Bl	dg. A	ge	
County (6) MERCER COUNTY		٠		County C (STATE U	ode (7) SE ONLY)	_		M	rrent Use (Prior ULTI FAMIL)	Y		lished)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.		1		Abatement Contr AD PROFES							
Street Address							Street 6 Wł		iress E DOVE CO	URT						
City, State, Zip Code	×								, Zip Code OOD, NJ 08	701						
Project Manager for Mor	nitoring Firm			Telephon	ne No.		Teleph 732-		e No. 8-9078		License 1200	e No.				
Start Date (10) 08/24/15	X	Schedule 08/24/1		mpletion [Date (11)				SHA Monitor AD PROFES	SIO	NALS					
Occupancy Status Durin	g Abatement (Che	ck Only One	e)				Street									1
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr						City, S	State	E DOVE COI s, Zip Code OOD, NJ 08							
Scope of Work (Check A							LAN	E V V	OOD, NJ 00	701		-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ш тпас Арріу)	Total Control Control	enova emoli					X	Full Containmer Mini-Enclosure Glovebag Proce Non-Exempted	dure	X 602				e	
		7112232	Locat	000000			-			(/ =				Abate	ment pe	
Location			orma d Sole	lly ely by	Achae		escription		erial (ACM)	Δ	mount			.,		
Asbestos-Containing TO BE AB In Faci (13)	ATED lity	22,000,000	odial (12)	Staff?		therma surfa		ns in	sulation, or	(8	Specify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		14 DIE	NE IN 101		TION		20.1.5						
CRAWL S	SPACE				AC	M PIF	PE INS	ULA	ATION	20	00 LF		X			
Name of Registered Wa	ste Hauler		1112	JDEP W		20,000,000	c Yards		Name of R	egiste	red Lan	dfill				
NEWARK CARTING	3		480	Hauler ID 4509	No.	of Wa	aste ARDS		IESI		1,00					
City, State NEWARK, NJ							osal Date 4/15	Э	City, State BETHLE		1 PA					
Completed by JOSEPH PERLSTE	IN.	Title OWN	ER				Signatur	е				Date 08/1		5		

- CK 13953

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

Date of Notification (1) AUGUST 13, 2015	5			Name of FOX A	f Building AND FO	Owner/O XX DE	perator VELOI	(2) PMI	ENT, LLC				2015	**	Ŧ
Agencies Notified	Type Notification			Street A 940 A	ddress MBOY A	VENU	E, SUI	ITE	101		(Sec	477 °	SON		
EPA DEP DOL	Initial Amended Amendment	#		City, Sta	ate, Zip Co ON, NJ (de 08837									
DOH DCA	Emergency justification) Cancellation				f Contact /IRKOW	'SKI				Tel	onhan- *				3 .
				FACI	LITY INFO	DRMATI	ON			1	h	and the	-		
Name of Facility Where FOX & FOXX DEV	Abatement is Takir VELOPEMENT	ng Place (3 PROPER) RTY					Тур	oe of Facility (4			ļ			
Street Address 11 SYDNEY AVEN	NUE		68					B	Subchapter Other (i.e. pretc.)	8 (Oth			ilding	s, hoi	mes,
City (5) METUCHEN					0	=			uare Feet 536 SF	# 0	f Floors		Bldg 196	Age O	
County (6) MIDDLESEX					Code (7) USE ONLY,)			rrent Use (Prio ORMER RE			ished)			
Name of Monitoring Firm	m Hired by Building	Owner (8)		ASC	/I No.				batement Con g Touch Asl			ment	Cor	o., In	ic.
Street Address							Street 580		ress adway, Unit	t a					
City, State, Zip Code	W 141								, Zip Code anch, NJ 07	7740		10			
Project Manager for Mo N/A	nitoring Firm	-		Telepho	ne No.		Teleph 732.		No. 2.8372		License 00040				
Start Date (10) 8/24/15		Schedule 8/25/1		npletion	Date (11)		Name N/A		SHA Monitor						
Occupancy Status Durin	ng Abatement (Che	ck Only Or	e)				Street	Add	ress						
Facility Closed/Va	cated During Entire med Outside of Norr	Period of A	Abaten				City, S	State	, Zip Code						
Scope of Work (Check	All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			lenova emoli				¥] ;	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure				ure	
		Is	Locat	ion			-		TOTI EXOTIPIO	() (G 11011 1 1			ateme	nt
Locatio	on of	1	Vorma	lly		Des	scription	n of						Туре	
Asbestos-Containin TO BE AF In Fac (13	g Material (ACM) BATED sility	Ma	d Sole intena todial ((12)	nce/ Staff?		tos Cont thermal surfac	aining N	Mater s ins AT, o	r	(Amount Specify F or LF)	Remova	Nepall	Encapsulate	Enclosure
		Yes	No	N/A										le	CD CD
BASEN	MENT			X			VAT			2	28 SF	X			
BASEN		X	PRES	UMED	AC SH	HEE	TVINYL	5	50 SF	X		1			
Name of Registered War			F	JDEP V lauler ID 2058		of Was	ste	27	Name of F		The state of the s		1 (4-)		
City, State LONG BRANCH, N	JJ					With the same and a	sal Date		City, State		N, PA				
Completed by JOSEPH P. MILLE		Title PRE	SIDE	ENT			ignature		Mel.			Date 8/13/	15		
							1001	1.1	10000				-		