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Print Form

State of New Jersey NOT:FICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 8-7-14		0.000	lame of B				(2)			2014 AU	G 18	Ari	7:	56
Agencies Notifieed Type Notification		S	Street Add	ress	ompa				4	1	IC.		1	\ \ \ .
EPA Initial DEP Amended DOL Amendment	#	C	City, State	Zip Co								1		
Emergency (justification) DCA Cancellation			lame of C Richard		nka				Tele	ephone Nu	mber			
Name of Facility Where Abatement is Taking	g Place (3)		FACILI	TY INFO	RMATIC	NC	Type	of Facility (4	- -		-			
The Okonite Company Street Address 955 Market ST	g · · · · · · · · · · · · · ·							School (K-12 Subchapter Other (i.e. pr	2) 8 (Oth	er than K-1 & commerc	2) ial build	lings,	tome	₃s,
City (5) Paterson NJ 07513	-			<u> </u>				etc.) re Feet)0	# of	Floors	5:	ldg. A	Э	
County (6) Passaic County	110011		County Co				Curre	nt Use (Prio	r if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Building SKY Environmental Service	Owner (8)		ASCM N	No.				tement Con		(9)			-	
Street Address 140 Boulevar ave						Street	Addres					0811	-	
City, State, Zip Code Mountain Laikes				-		City, S	tate, Z	ip Code NJ 07502					-	
Project Manager for Monitoring Firm Leonid Shereshvsky	,	47	Telephone			Teleph 973-9				License I	No.			
Start Date (10) 8-27-14	Scheduled 9-27-14	1000				Name	of OSI	HA Monitor						
Occupancy Status During Abatement (Chec	ck Only One)					Street	Addre	SS						***************************************
Facility Cla:sed/Vacated During Entire Abatement Performed Outside of Norr Other – De:scribe: out site storage oil to	nal Facility H				24.	City, S	tate, Z	ip Code					-	
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 *f ≥160 sf or ≥260 lf		novat				×	Min	II Containme ni-Enclosure ovebag Prod n-Exempted	e edure					
	ls Lo	ocatio	on				ı No	n-Exempled	1 () al	IU NOII-I IId	DIE 110	Abate Ty	nen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Maint Custod	tenan	ly by nce/		tos Cont thermal surfa		Materia s insul T, or	ation,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							F00-f			te	
out sitte storage tank		X	-	the	rmal sy	ystem	insula	ation	1	500sf	X			
Name of Registered Waste Hauler DYV Enterprises LLC		Ha	JDEP Wa auler ID N		Cubic of Wa 30yar			Name of Waste		ered Landf gment	ill			<u></u>
City, State Paterson NJ @7502	and and an experience of the second		207110	•		sal Date		City, Stat			y			
Completed by Yanet Carpio	Title OWNE	- D	,		/	Signatur		> //	1	-	ate 3-7-14			

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

Date of Notification (1) 08/14/14		-11. W. Co			Building O Y REAL		perator	(2)			i.::(.7 -	1 .		ś	
Agencies Notified	Type Notification		2		NTRAL						4 AUG					
DEP DOL	Amended Amendment #				e, Zip Cod Y CITY					<u>.</u>	, , , , , , , , , , , , , , , , , , ,	•			7.1	
☑ DOH DCA	Emergency (in justification) Cancellation	cidaling	1803	ame of 0	Contact SERBAS	SIO				Tele	ephone N	dîmh.)r	.G		
				FACIL	ITY INFO	RMATI	ON									
Name of Facility Where Street Address	Abatement is Taking	Place (3)						Sc Su	Facility (4 shool (K-12 abchapter (2) 8 (Othe	er than K	(-12)				
286 CENTRAL AV	E							⊠ Ot etc	her (i.e. pr c.)	rivate d	comme	erciai i	Juliai	ngs,	nome	5,
City (5) JERSEY CITY								Square 6000	Feet	# of 3	Floors		Bk	ig. A	ge	
County (6) HUDSON				County C	ode (7) SE ONLY)			Current RETA	Use (Prio	r if bei	ng demo	lished	i)			
Name of Monitoring Firm	m Hired by Building O	wner (8)		ASCM	No.				ment Cont							
Street Address				W. 644		***	0.0000000000000000000000000000000000000	Address	OVE CC	URT						
City, State, Zip Code		11						State, Zip	Code D, NJ 08	3701						
Project Manager for Mo	nitoring Firm		Т	elephon	e No.		Teleph	none No. 668-90			Licens 1200	e No.				
Start Date (10) 08/24/14	The state of the s	Scheduled (Comp	pletion D	ate (11)		Name	of OSHA	Monitor PROFE	SSIO	5,555,654,55				10	
Occupancy Status Durin							38 50130996	Address								-
-			tom	ont					OVE CC	DURT						
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire Pened Outside of Norma	al Facility H	ours	ent		_		State, Zip EWOO	Code D, NJ 08	8701				-		
Scope of Work (Check /	All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			ovati nolitio				>	Mini- Glov	Containme Enclosure ebag Proc Exempted	e cedure					ρ	
		l		1				14011	LXCITIPLEC	2 () an	d Holl I	TIGDIO			ement	
Locatio	n of	ls Lo	mally			De	escription	n of						Гу	ре	
Asbestos-Containin TO BE Al In Fac (13	g Material (ACM) BATED cility	<u> </u>	enan	ice/		os Con therma surfa	ntaining I	Material (ns insulat AT, or		(mount Specify F or LF)		Removal	Noball.	Encapsulate	Enclosure
BASEM	MENT	X	-				TSI		-		40SF		X			
	Name of Registered Waste Hauler											-1611				
Name of Registered War	H	JDEP W auler ID 1509		of Wa	c Yards aste		Name of IESI	regist	ereu Lar	iaiili						
City, State NEWARK, NJ				Dispo	osal Date 4/14	e	City, Stat BETHL		и РА		W					
Completed by JOSEPH PERLSTE	ΞΙΝ	Title OWNE	R				Signatur	re				Date	9			

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

Date of Notification (1) August 15, 2014				ne of Building (akhurst Cou						í.;	· .	į.			
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendment # Emergency (iii		City Cr	eet Address N 4000 Fors , State, Zip Co anbury, NJ me of Contact	de				1.	4 AUG	3 18	AH	7:	06 -	
DOH DCA	justification) Cancellation		7.0775	MIE LOPEZ	Z				1 - 616	ebilone,	Nonin	ы ;	1.,	٤_,	
			F	ACILITY INFO	DRMAT	ION									
Name of Facility Where OAKHURST COU	Abatement is Taking NTRY DAY CAM	Place (3) P					□ s	of Facility (4 School (K-12 Subchapter	2)	or than	K 12\				
128 MONMOUTH	ROAD							Other (i.e. proto.)	rivate 8	& comm	ercial				es,
City (5) OAKHURST							5000		2	Floors		10	dg. A	ge 	
County (6) MONMOUTH			(ST)	inty Code (7) ATE USE ONLY			COL	nt Use (Prio JNTRY D	AY C	AMP	olished	1)			
Name of Monitoring Firm N/A	n Hired by Building C	wner (8)	^	ASCM No.				ement Con G TOUCH			OS AE	BATE	ME	NT	
Street Address							Addres BROA	s ADWAY, L	JNIT	A					
City, State, Zip Code		2			=		State, Zij IG BR.	p Code ANCH, N	IJ 077	740	10				
Project Manager for Mor	nitoring Firm	6	Tele	ephone No.			none No -222-8			Licens 0004	se No. 10				
Start Date (10) AUG 25, 2014		Scheduled AUG. 31		tion Date (11)	N	Name N//A		A Monitor							
Occupancy Status Durin	ng Abatement (Check	Only One)		· · · · · · · · · · · · · · · · · · ·		Street	Addres	s					-		
	cated During Entire P ned Outside of Norma					City, S	State, Zij	p Code							
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)		ovation nolition				Min Glo	Containme i-Enclosure vebag Proc n-Exempted	edure					e	
	10-21 20	Is Lo	cation						- War (10 - 20 - 20 - 20 - 20 - 20 - 20 - 20 -			P		ment	9
Locatio Asbestos-Containing TO BE AB In Faci (13)	g Material (ACM) BATED ility	Used S Mainte Custod	mally Solely benance/ ial Staff 12)	/ Asbes	tos Con therma surfa	escription Itaining N I system acing, VA miscellar	Material s insula AT, or		(5	mount Specify or LF)		Removal	Ty	e Encapsulate	Enclosure
		Yes 1		X X										Ф	
1ST, 2ND F	1ST, 2ND FLOORS					VAT			50	00 SF		X			
Name of Registered Wa	100000000000000000000000000000000000000	EP Waste er ID No. 58	Cubic of Wa 20 C			Name of F			ndfill						
City, State LONGF BRANCH,	N .			Dispo 9/05	sal Date /14	ı	City, State MORRI		LE, PA	Ą					
Completed by JOSEPH P. MILLER	3	Title PRESI	DENT		<	Signature	e 	29 2	WW	di	Date 8/1	5/14			

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

Date of Notification (1) 7-26-2014					of Building Cleaning					110 1	0 6	w 7.		- 2		
Agencies Notified	Type Notification			Street A	Address spect Str				(U19 R							
DEP X DOL	Amended Amendmen				ate, Zip Co rk, NJ 07			N.	3)	. LIO	- 1 - 0 - 1 - 0	,,.G	١.٠	_		
DOH DCA	Emergency justification) Cancellation			Name of Ben R	of Contact Raabe			11.5		Te	ephone	Numr	er			
Name of Facility Where Residential	Abatement is Takir	ng Place (3)	FAC	ILITY INFO	ORMATI	ON	Туре	of Facility (100				-	
Street Address 527 Mt. Prospect A	venue							×	Subchapter Other (i.e. petc.)	8 (Oth	er than & comn	K-12) nercial	buile	ding	, hom	es,
City (5) Newark, NJ 07104					Code (7)			412		3	f Floors		7	ldg. 5+	∖ge	
County (6) Essex	40.1 (A))		Cu.r	ent Use (Pri	or if be	ng den	nolishe	:)			
	Hired by Building		ASC	M No.				atement Cor vironmen								
Street Address						235		nia Avenu	е							
City, State, Zip Code				_				Zip Code ty, NJ 073	304							
Project Manager for Mon	itoring Firm			Telepho			Teleph 201-	333-8	3855		Licen 0117	se No. '4				
Start Date (10) 7-26-2014		7-26-20	14	npletion	Date (11)				HA Monitor above	******	11					
Occupancy Status During			200				Street	Addre	ss				- 1			
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norn	Period of A nal Facility	baten Hours	nent		_	City, S	tate, 2	ip Code				_			
Scope of Work (Check A ≥3 sf or ≥3 If ≥160 sf or ≥260 If	ll That Apply)		enova emolit				×	Mi	Il Containme ni-Enclosure ovebag Prod n-Exempted	edure					0	
Location		N	Locati ormali Sole	ly		Des	cription							A1	ment pe	
Asbestos-Containing TO BE ABA In Facili (13)	ATED	Mair	ntenar odial S (12)	rice/	Asbest (i.e.	tos Conta thermal :	aining M systems ing, VA	tateria insula T, or	I (ACM) ation,	(8	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
0.15		Yes	No	N/A											e	æ
3rd floo		-	X			pipe i	insulat	tion		4	0 LF		x			
	2nd floor x						insulat	tion		4	0 LF		x			
1st floo	or		X	-		pipe i	insulat	tion		4) LF		:]	-		
Name of Registered Was	te Hauler		N.	JDEP W	aste I	Cubic Y	/ards		Name of F	Pogiata		7511				
Tri-State Transfer As			H	auler ID A456		of Wast			Minerva			IOTIII				
City, State Bronx, NY		3	-		Disposa 7-26-2			City, State Wynesb		——)Н	722- 75	· ·		_		
Completed by Liliana Pedraza		Title Office	man	ager		Sig	gnature			J.		Date 7-21	2	• [

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:69 and 12:120)

	12-14	- I make of	Building Owned Ope	rator (2) CL	20h 2011	Ma
A	lification		- Charles - Char	OTE	Phan A	the rex
DEPA Platin		Street Add	CITESS .			
□ Amen	led	City State	, Zip Code	1236	Shore K	21 1
Amen	dment# ency (including	. Oldis	s, ∠ib rodde .	1 9	1 1	-13-1-16
I man a li misuno	≆fion)	Name of C	Ontact	arial alex,	Linu	road RJ
Cancel	ation		Bennerli		Telephone N	lumber .
Name of Books, tar.		FACILITY	INFORMATION			
Name of Facility Where Abatement is	Taking Place (3)	-		Type of Facility		
Street Address	nt.	56				
2 WABA	-10			U School (K-1)	R / Whore there to a	
City (5)	in the			- Actes 108 Di	TUPLIA & PARTIE	i2) \$31 buildinas
Linwood				Square Feet	# of Floors	
County (6)			22		B GI FROIS	Bldg. Age
1 . Ocean		County Code	(7) (STATE USE	Current Use (Pri	of if hains downs	Par T
Name of Monitoring Firm Hirad by State	Ing Comer 1 50	1			•	:अस्तिह्य
	ASI	CM Ne.		nant Contractor (9)		<u> </u>
Streat Address			Har	Ju= LL	C	
City, State, Zip Code	2		Street Address	Bustmetin	No.	
, Geate, ZJP Cods			City Stein Zin A	-1-		
Project Manager for Monitoring Farm		658 1005-005-0	1 0	cima i	NIOSO	25
· · · · · · · · · · · · · · · · · · ·	. Teleph	one No.	1 Teleph	The state of the s		_
	1		Telephone No.	. 11	inance bla	
Start Date (10) Scho	fitfori Completion 2	0	856 524 09	17/	icense No.	2 .
Cells	duled Completion O	0	SSC S2+CA Name of OSHA Mil	17/		
Occupancy Status During Abatherent (Ci	scir only one)	ste (11) : '.	SSC S24 CG	17/		, , ,
Occupancy Status During Abatement (Cr	iscit only one)	ste (11) : '.	856 524 09	onitor 6		
Occupancy Status During Abatement (Ci Pacifity Closed/Vacated During Entire I Attatement Performed Outside of Normal Other - Describe:	iscit only one)	ste (11) : '.	SSC 52+C4 Name of OSHA No Street Address	onitor Self-		20
Occupancy Status During Abatement (Ci Pacifity Closed/Vacated During Entire I Attatement Performed Outside of Normal Other - Describe:	iscit only one)	ste (11) : '.	SSC S24 CG	onitor Self-		2011
Occupancy Status During Abstratant (Ch Facility Closed/Vacated During Entire if A tratement Parlomed Outside of Norm Other - Describe; Cope of Work (Check all that apply)	eck only one) Period of Abatement all PscRy Hours	ste (11)	SSC 524 CA Name of OSHA Ni Street Address Cäy, State, Zip God	onitor Self-	01070	
Occupancy Status During Abatement (Cl Pacifity Closed/Vacated During Entire I Attatement Parlement Outside of Norral Other - Describe; Coppe of Work (Check all that apply)	eck only one) Period of Abatement Period of Abatement Period of Abatement	ste (11)	SSC S2+CA Name of OSHA Mi Street Address City, State, Zip Cod	onitor Self	01070	20th AUS I
Occupancy Status During Abstratant (Ch Facility Closed/Vacated During Entire if A tratement Parlomed Outside of Norm Other - Describe; Cope of Work (Check all that apply)	eck only one) Period of Abatement Period of Abatement Period of Abatement	ste (11)	Street Address Cay, State, Zip God	onitor Self-	CN 6 7 C	2011 AUS 118
Occupancy Status During Abatement (Cl Facility Closed/Vacated Ouring Entire if I Attatement Parlamed Outside of Norm I Other – Describe; icope of Work (Check all that apply) I 23 of or 2 3 if 2 160 of or 2 260 if	Period of Abatement Period of Abatement In Pacific Hours	ato (11)	Street Address Cay, State, Zip God	onitor Self	CN 6 7 C	20th AUS 18 E
Occupancy Status During Abatement (Cr 2 Facility Closed/Vacated During Entire I 2 Abatement Performed Outside of Norm 3 Other – Describe: Cope of Work (Check all that apply) 2 2 2 of or 2 3 if 2 150 af or 2 250 if Location of Asbestos-Containing Material (Access	Is Location Normally Used Solety	ate (11)	Street Address Street Address Cäy, State, Zip God G Full Com G Mini-Ens G Glovebag D Non-Exer	tainment with Negs tourne Procedure	CN 6 7 C	2011 AUS 18
Occupancy Status During Abatement (CI 2 Facility Closed/Vacated During Entire 2 Attatement Performed Outside of Norm 3 Other - Describe; Copp of Work (Check all that apply) 2 2 2 or 2 3 ii 2 160 sf or 2 260 ii Lecation of Asbestos-Containing Material (ACM) TO BE ABATED	Is Location Normally Used Solely Maintenance	ate (11) : Repovation Demolition n by Aspestos	Street Address Street Address Cäy, State, Zip God G Full Com G Mini-Enc G Glovebag Description of Cartsinian at status	tainment with Negationare procedure	CN 670	Abatoment Type
Occupancy Status During Abatement (Cr 2 Facility Closed/Vacated During Entire I 2 Abatement Performed Outside of Norm 3 Other – Describe: Cope of Work (Check all that apply) 2 2 2 of or 2 3 if 2 150 af or 2 250 if Location of Asbestos-Containing Material (Access	Is Location Normally Used Solely Maintenanc Custodial Starry	ate (11) : Renovation Demolition n by Asbestos (i.e., th	Street Address Street Address City, State, Zip Cod City, State,	tainment with Negationare procedure	CN 6 7 C	Abatoment Type
Coupancy Status During Abatement (CI Facility Closed/Vacated During Entire Athatement Performed Outside of Norral Other - Describe; Coppe of Work (Check all that apply) 2 2 2 or 2 3 ii 2 160 of or 2 260 ii Lecation of Asbestos Containing Material (ACM) TO BE ABATED IN Facility	leck only one) Period of Abelement Sel Facility Hours Is Location Normally Used Solely Maintenanc Custodial Starr (12)	ate (11) : Renovation Demolition n by Asbestos (i.e., th	Street Address Street Address Cäy, State, Zip God G Full Com G Mini-Enc G Glovebag Description of Cartsinian at status	tainment with Negationare procedure	CN 676	Abatoment Type
Cocupancy Status During Abatement (CI 2 Facility Closed/Vacated During Entire I 2 Abatement Performed Outside of Norm 3 Other – Describe: Cope of Work (Check all that apply) 2 35 or 2 3 ii 2 160 at or 2 250 ii Location of Asbestos Containing Material (ACAN) TO BE ABATED IN Facility (73)	Is Location Name of Na	Ste (11): Demovation Demovation Aspestos (i.e., the	Street Address Street Address City, State, Zip God G Full Com G Mini-Ens G Glovebag D-Non-Exor Description of S Containing Material surfacing, VAT, or ther miscellaneous)	tainment with Negationare procedure	CN 6 7 C	Abatoment Type
Coupancy Status During Abatement (CI Facility Closed/Vacated During Entire Athatement Performed Outside of Norral Other - Describe; Coppe of Work (Check all that apply) 2 2 2 or 2 3 ii 2 160 of or 2 260 ii Lecation of Asbestos Containing Material (ACM) TO BE ABATED IN Facility	Is Location Name of Na	Ste (11): Demovation Demovation Aspestos (i.e., the	Street Address Street Address City, State, Zip God G Full Com G Mini-Ens G Glovebag D-Non-Exor Description of S Containing Material surfacing, VAT, or ther miscellaneous)	tainment with Negationary (7) and Non-	CN 6 7 C	2011 AUS 18 Enclosure Enclosure Romoval
Cocupancy Status During Abatement (CI 2 Facility Closed/Vacated During Entire I 2 Abatement Performed Outside of Norm 3 Other – Describe: Cope of Work (Check all that apply) 2 35 or 2 3 ii 2 160 at or 2 250 ii Location of Asbestos Containing Material (ACAN) TO BE ABATED IN Facility (73)	Is Location Name of Na	Ste (11): Demovation Demovation Aspestos (i.e., the	Street Address Street Address City, State, Zip Cod City, State,	tainment with Negationary (7) and Non-	CN 6 7 C	2011 AUS 18 Enclosure Enclosure Romoval
Occupancy Status During Abatement (CI Facility Closed/Vacated During Entire I Athatement Performed Outside of Norm Other - Describe: Copp of Work (Check all that apply) 28 of or 2 3 ii Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Name of Na	Ste (11): Demovation Demovation Aspestos (i.e., the	Street Address Street Address City, State, Zip God G Full Com G Mini-Ens G Glovebag D-Non-Exor Description of S Containing Material surfacing, VAT, or ther miscellaneous)	tainment with Negationary (7) and Non-	CN 6 7 C	2011 AUS 18 Enclosure Enclosure Romoval
Cocupancy Status During Abatement (CI Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other - Describe: Cope of Work (Check all that apply) 2 35 or 2 3 ii 2 160 af or 2 250 ii Location of Asbestos Containing Material (ACAN) TO BE ABATED IN Facility (13) OUTSILE	is Location Normally Used Solar Custodal Starr (12) Yes No N	Repovation Demolition n by Asbestor (i.e., in	Street Address Street Address City, State, Zip God City, State,	tainment with Negationary (7) and Non-	CN 6 7 C	2011 AUS 18 Enclosure Enclosure Romoval
Cocupancy Status During Abatement (CI Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other - Describe: Cope of Work (Check all that apply) 2 35 or 2 3 ii 2 160 af or 2 250 ii Location of Asbestos Containing Material (ACAN) TO BE ABATED IN Facility (13) OUTSILE	is Location Normally Used Solely Maintenanc Custodial Staff? (12) Yes No M	ate (11): Reprovation Demolition Aspestos (i.e., the of the control of the cont	Street Address Street Address City, State, Zip God City, State,	de d	CN 6 7 C	2011 AUS 18 Enclosure Enclosure Romoval
Occupancy Status During Abatement (CI Facility Closed/Vacated Ouring Entire I Athatement Performed Ouriside of Norm Other - Describe: Copp of Work (Check all that apply) 28 of a 3 ii 12 160 of or 2 260 ii Lecation of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (73) OUTSULE of Registered Waste Hattler In Its LLC	Is Location Normally Used Solely Maintenanc Custodial Starr (12) Yes No N	Repovation Demolition n by Asbestor (i.e., in	Street Address Street Address City, State, Zip God Grul Com Glim-Ene Glovebag Description of S Containing Materia surfacing, VAT, or ther miscellaneous) Siding Siding Name	tainment with Hegs leave Procedure moted (7) and Non-	Amount (Specify SF or LF)	2011 AUS 18 Enclosure Enclosure Romoval
Occupancy Status During Abatement (CI Facility Closed/Vacated Ouring Entire I Athatement Performed Ouriside of Norm Other - Describe: Copp of Work (Check all that apply) 28 of a 3 ii 12 160 of or 2 260 ii Lecation of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (73) OUTSULE of Registered Waste Hattler In Its LLC	Is Location Normally Used Solely Maintenanc Custodial Starr (12) Yes No N	ate (11): Renovation Demolition n by Asbestos (i.e., tin of WA Heliu Was	Street Address City, State, Zip Cod City,	tainment with Negs Secure Procedure includ () and Nen- elion.	CN 670 Stive Pressure Finable Procedur Amount (Specify SF or LF)	2011 AUS 18 Enclosure Enclosure Romoval
Occupancy Status During Abatement (CI Facility Closed/Vacated During Entire I Athatement Performed Outside of Norm Other - Describe: Copp of Work (Check all that apply) 28 of of 3 ii Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (73) OUTSULE Outsule of Registered Waste Hatder Location of L	Is Location Normally Used Solely Maintenanc Custodial Starr (12) Yes No N	ate (11): Renovation Demolition n by Assestes (i.e., th of WA ALL Dispress Disp	Street Address City, State, Zip Cod City,	tainment with Negs Secure Procedure includ () and Nen- elion.	CN 670 Stive Pressure Finable Procedur Amount (Specify SF or LF)	2011 AUS 18 Enclosure Enclosure Romoval
Cocupancy Status During Abatement (CI Facility Closed/Vacated During Entire I Anatement Performed Outside of Norm Other — Describe: Coppe of Work (Check all that apply) 2 35 or 2 3 ii 2 160 at or 2 250 ii Location of Asbessios Containing Material (ACAN) TO BE ABATED IN Facility (T3) OUTSILE OUTSILE De GRegistered Waste Hattler M. Location of Locatio	Is Location Normally Used Solely Maintenanc Custodial Starr (12) Yes No N	ate (11): Renovation Demolition n by Assestes (i.e., th of WA ALL Dispress Disp	Street Address City, State, Zip God City,	tainment with Hegs leave Procedure moted (7) and Non-	CN 670 Stive Pressure Finable Procedur Amount (Specify SF or LF)	2011 AUS 18 Enclosure Enclosure Romoval

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

			Name of Bui	lding Owner/Operator	and Children	of Linde	The state of the s	200
te of Notification (1)	8-13-14	د منسسسسس	Teamer trace	سنتازمانسستمتها بالتعاضية		2012	AUG 18	610
Anthony Special and Strangers of the Confession of	AND THE PROPERTY AND ASSESSED.		Street Addre	255 2: A	1 Wood	ATH.	, 400 1Q	F.M
ency Notified	Type Notification	1	- 	301 1	wood	7100		
EPA	12 Initial	T T	City, State,	Zip Code Linden N	IT ES	07036	7:4	1
DEF	Amended Amendment#	1		Linden N		Telephone Num		G
DOT .	O Emergency (molud	Eing	Name of Co	intact // ·/	//	Tompicon .		-
DOH	inchileation)	- 1		John Hudai				
DCA	☐ Cancellation			INFORMATION				
					Type of Facility	(4)		
ime of Facility When	a Abatement is Taking Pl	1CE/	Bldc.		School (K-12		a)	
	Knopf	100/			LO Other (La. Pr	rate & commerce	al buildings.	
root Address	- 1/: 06	C+			homes, etc.		Bidg Age	
13	BUDGE				Square Feet	# of Floors	70	
ty (S)					1700	1	1 /	
ıy (ə)	Linden			TO MYSTE HEE	I I I I	rior if being demo	(Ished)	
			County Co	de (7) (STATE USE	0.	CFICE.	0199.	_
ounty (6)	nion		Oleri		ment Contractor (9)	71	1 1
	- 15 has Building Ca	mer ASC	M No.	Name of Augus	In- Minte	nentlew	rolitical	
ame of Monitoring I	Irm Hired by Building Cw	.		1 101 -	CE HDAIC	Juck.		
» . <u></u>				Cotrant Districts		. ^		
treet Address				12125	velintan			
				Cay, State, Zip	Godo) J C.50	525	
lity, State, Zip Code		28		· Delx	PVICE	License No.		
		Tolon	hone No.	Telephone No.			, 💉	
roject Manager for	Monitoring Farm	. Lesela		1000	10971	0107	-	
				1 1 7 7 7 7	4 - 11	THE RESERVE OF 1		
		<u> </u>			4 0971 A Monitor	11		
Start Date (10)	Scheduler	d Completion	Date (11) :		A Montor	elt.		
Start Date (10)	14 9-	25 -	14	· . Name of OSH	A Montror	elt.		
Start Date (10)	14 9-	25 -	14		A Montror	elt.		
Occupancy Status I	14 9-	25 -/	ent :	Name of OSH Street Addres	A Monitor	elt.		
D Facility Closed/V	Juring Abstracent (Check aceted During Entire Per mond Outside of Normal I	25 -/	ent :	Street Address City, State, Zi	A Monator			
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Occupancy Status I Facility Closed/M Attatement Perfo Other - Describe Scope of Work (Ch U 2 9 st or 2 3 ff C 2 160 st or 2 261 Asbesios-Cor	During Abatement (Check acated During Entire Period Cutside of Normal I eck all that apply) If Acation of training Material (ACM) BE ABATED IN Facility (13)	is Land Maint Cases	C Removed to the control of the cont	Street Address City, State, Zi vation Gify Description Asbestos Containing (i.e., thermal system surfacing, the miscoel Add (w. 17)	A Monator Code Code Containment with Endosure lovebag Procedur on-Exempted (*) an of Material (ACM) ms insulation, /AT, or /AT, or /AT, or /AT, or	Amour (Special SF or L	Ramoval Ramoval	T De
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Occupancy Status I D Facility Closed/M D Attacement Perform Other - Describe Scope of Work (Ch. D > 3.st or ≥ 3 if D ≥ 150 st or ≥ 251 Asbestos Cor TO MVL(N. TS A > CTV Name of Registers	During Abstracting (Check aceted During Entire Perisment Outside of Normal I seck all that apply) Discontinuous Material (ACM) BE ABATED IN Facility (13) CONTINUE CONTINU	Is Lo Noil Used Maint Care Yes	Parent Pa	Street Address City, State, Zity Asbestos Containing (i.e., thermal system surfacing, Verter miscel ACLW FIG. PLASAING Dispossi Dat Dat Dispossi	A Monator Code Code Containment with Endosure Coverage Procedur Con of Material (ACM) Institution, (AT, or sancous)	Amour (Special SF or L	Romoval Romoval	T De
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

CNK#22859

1			v. (5.00		56-E277///C2159			A CONTRACTOR OF THE CONTRACTOR		2 -			
Date of Notification (1) 08 /	12 /	14			200000000000000000000000000000000000000		ng Owner/Operator (of Greenwich-Pro	nerty Maintena	ince Office				
Annaire Natified	T N116	41							2014 AUG 18	f 18	_		
Agencies Notified	Type Notifica				V 1975V	et Address 3 West E	road Street	2.		I.H	1:	02	
□ DEP □ DCA (NJAC 5:16)	Amended				City,	State, Zip	Code ,	- 27			11		
DHSS	Amendme Emergen		luding		Gi	bbstown	, NJ 08027		4 LIGIT.	w13.	, ,		
☐ DCA	justification	on)			Nam	e of Conta	ct		Telephone Num				
(NJAC 5:23-8)	☐ Cancellat	ion			W	ill Durhai	n						
				-1.654.9000	F	CILITY I	NFORMATION		i a				
Name of Facility Where		aking	Place	(3)	151		25	Type of Facility ((4)				
Estate of Joseph M	I. Covici	10.00						School (K-12		. \			
Street Address									(Other than K-12 ivate & commerci		ing	,	
600 West Broad St	reet				lles de la comp			homes, etc.)					
City (5) Gibbstown								Square Feet 16,000	# of Floors	1	ig. 50+	\ge	
County (6)					Co	inty Code	(7)(STATE USE ONLY)	C	or if being demoli				
Gloucester	Gloucester						(1)(0)(1)(1)	Vacant	or in boiling dolllon	onea,			
Name of Monitoring Firm	ame of Monitoring Firm Hired by Building Owner (8)						Name of Abateme	ent Contractor (9)			_		
Clancy & Associate	Clancy & Associates, Inc.						Diamond Hu	ntbach Constru	etion Corpora	tion			
Street Address							Street Address				_		
601 Asbury Avenue	treet Address 601 Asbury Avenue						500 East Luz	erne Street					
City, State, Zip Code			2500				City, State, Zip C	ode			_		
National Park, NJ 0	8063						Philadelphia	PA 19124					
Project Manager for Mon	itoring Firm			Te	lephon	e No.	Telephone No.		License No.				
Jim Clancy						3-7306	215-739-8166	3	00646				
Start Date (10)						ate (11)	Name of OSHA N						
	14	_0	8_ /	2	27_ /	14	SAME AS AE	BOVE					
Occupancy Status During	T: 110			1050		Ti .	Street Address	e li					
 ☐ Facility Closed/Vacate ☐ Abatement Performed 						a a sila a		man and a second					
Time of Abatement: 7						escribe	City, State, Zip C	ode					
Scope of Work (Check a	Il that apply)										_		
	ii tiiat appiy)							tainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			☐ Re 図 De				Mini-End	closure g Procedure					
⊠ ≥ 100 31 01 ≥200 11		5	<u> </u>	HIOIII	lion			empted (*) and No	n-Friable Procedu	ıre			
				Loc	ation		•			Ab	ater	nent T	уре
Location Asbestos-Containing		n			lely by	Ach	Description of estos Containing Ma		Amount	R	7	m	ш
TO BE ABA		'			ance/	(ie th	ermal systems insul		(Specify	Removal	керап	nca	nclo
IN Facil	ity		Cus	(12	I Staff?		VAT, or		SF or LF)	oval	=	Encapsulate	Enclosure
(13)			Yes	No	N//	A .	other miscellane	ous)				ate	Œ
First Floor -rear bay	area					Ceilin	g Plaster		750 SF	\boxtimes	С	To	
Bathrooms - 6 each a	Bathrooms - 6 each apartments						nic wall tile glue n	nastic	1,800 SF		Е	\Box	
Second floor Apartm				VAT 1	2" 12" floor tile		250 SF		Е	\Box			
First floor Commerci		\boxtimes		VATR	led floor tile		150 SF		E				
Name of Registered Waste Hauler						P Waste	Cubic Yards of	Name of Regis	tered Landfill				
Diamond Huntbach Construction						ID No. 89	Waste 40 Cv	Minerva					
City, State					130		Disposal Date	City, State					
Philadelphia, PA 19	Philadelphia, PA 19124						08/31/14	Waynesbu	rg, OH 44688				
Completed By (Print or T	Completed By (Print or Type) Title						Signature	20 1	1 /2	ate	_		
Charles F. Imbimbo		Pr	oject	Ma	nager		1 La	1 Johnson	toff (08/	//	41	4

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



Date of Notification (1)						Owner/Operator (
	12 /	14		Tow	nship o	f Greenwich-Pro	perty Maintena	nce Office	is sales	1		
Agencies Notified	Type Notifica	ation		Street	Address		ti d	Die erra				
	☐ Initial			403	West Br	oad Street	ζ	014 AUG 18	AM T	: 1	2	
☐ DEP☐ DCA (NJAC 5:16)	☐ Amended			City, S	tate, Zip C	Code						
DHSS	Amendme			Gib	bstown,	NJ 08027	j.	· · · · · · · · · · · · · · · · · · ·				
☐ DCA	justification	on)	9	Name	of Contac	t	25	Telephone Num	per G		33	
(NJAC 5:23-8)	☐ Cancellat	ion		Will	Durham	ľ	Ų.					
				FAC	ILITY IN	FORMATION		-			_	
Name of Facility Where A	Abatement is T	aking Place	e (3)				Type of Facility (4)				
Estate of Joseph M	l. Covici		•				School (K-12)					
Street Address								(Other than K-12				
600 West Broad Str	reet						homes, etc.)	ivate & commerci	ai bullo	ing.,		
City (5)							Square Feet	# of Floors	Blo	dg. A	ge	
Gibbstown							16,000	3		50+		
County (6)	-			Coun	ty Code (7)(STATE USE ONLY)	Current Use (Prid	or if being demolis	shed)			
Gloucester							Vacant					
Name of Monitoring Firm	Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Clancy & Associate	es, Inc.					Diamond Hu	ntbach Constru	ction Corporat	ion			
Street Address						Street Address						
601 Asbury Avenue	9					500 East Luz	erne Street					
City, State, Zip Code		10,000,00	170-56000			City, State, Zip C	ode					
National Park, NJ 0	8063					Philadelphia,	PA 19124					
Project Manager for Mon	itoring Firm		Tele	phone I	No.	Telephone No.	79.	License No.		7		
Jim Clancy			85	6-853	-7306	215-739-8166	3	00646				-
Start Date (10)		Scheduled (- 15 T	Name of OSHA N	Monitor					
08 /13 /	14	08		_ / _	14	SAME AS AE	BOVE					
Occupancy Status During	Abatement (Check only	one)		V2000	Street Address						
☐ Facility Closed/Vacate												
Abatement Performed Time of Abatement: 7				s - Des	cribe	City, State, Zip Co	ode					
Scope of Work (Check al	I that apply)	*										
☐ ≥3 sf or ≥3 lf			enovati			Mini-Enc	3047 (T175 VT0)	ative Pressure				
⊠ ≥160 sf or ≥260 lf		M D	emolitio	on			g Procedure empted (*) and Nor	n-Friable Procedu	re			2
			s Locat							atem	ent Ty	уре
Location		110	Norma ed Sole			Description of			71	Ţ	m	m
Asbestos-Containing TO BE ABA		M:	aintena	nce/		stos Containing Ma rmal systems insula		Amount (Specify	Remova	керап	Encapsulate	Enclosure
IN Facili		Cus	stodial (12)	Staff?		VAT, or		SF or LF)	ova	=	psu	osui
(13)		Yes	T in	N/A		other miscellane	eous)		-		ilate	è
Exterior Roof			×		Roof M	embrane	1,2,1	7,350 SF				
	1									E		
										E		
				\Box		· · · · · · · · · · · · · · · · · · ·			$\forall \Box$	П		
Name of Registered Was	te Hauler			JDEP V	Vaste	Cubic Yards of	Name of Regis	tered Landfill	1-	<u> </u>		-
Diamond Huntbach		on	1020	lauler IC	No.	Waste	Minerva					
City, State				19689		40 Cy Disposal Date	City, State		100-5			
Philadelphia, PA 19	124					08/31/14		rg, OH 44688				
Completed By (Print or T		Title				Signature	200	- 1	ate			
Charles F. Imbimbo		Projec	t Man	ager		Signature	ul 1	John .	30	1.	2 [0
	10			-30.			1 1	100	08	11	41	/

(K 2254

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) 08/14/2014			0.00000000000	e of Buildir	ng Owner/Operato enberg	· · · · · · · · · · · · · · · · · · ·		814	o. 0	,			
Agencies Notified Type Notification			500000000000000000000000000000000000000	et Address Lackawa	anna Drive	2014 /	NUG 18		<u>9: </u>		-		
DEP Amended Amendment #		_	105.0	State, Zip dover, NJ			110		G			-	
DOH justification justification	loidanig			e of Contac Louvenb				hone Nur					
			FA	CILITY IN	ORMATION						-		
Name of Facility Where Abatement is Taking D. Louvenberg Portable Toilet Street Address	g Place	(3)				Type of Facili School (K-Subchapte	12)	than K-1	2)				
285 Lackawanna Drive				Tra :		Other (i.e., homes, et		commerc	cial bu	ildin	s,		
City (5) Andover						Square Feet 10,000		Floors		Blag N/A	33	P	10
County (6) Morris				inty Code (E ONLY)	7) (STATE	Current Use (I	Prior if bei	ng demo	lished	1)		1000	
Name of Monitoring Firm Hired by Building C (8) Bio-Terra Environmental Solutions L			ASCM N/A	l No.		ment Contractor (ociates, LLC	(9)						
Street Address					Street Address						-		
P.O. Box 1224					145 Mill Str								
City, State, Zip Code Union, NJ 07083		8			City, State, Zip Paterson, I								
Project Manager for Monitoring Firm Rick Eustaquio			ephone	No. -3762	Telephone No. 973-553-53	.74		nse No. 108					
	uled Co	_			Name of OSHA		- 01	100	-	_	=		
	0/201					ociates, LLC							
Occupancy Status During Abatement (Checi					Street Address	1					_		
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal					145 Mill Stre				_		_		-
Other - Describe:					Paterson, N								
Scope of Work (Check all that apply) >3 sf or >3 If >160 sf or >260 If	Ren De		on ition		Mini-Er Goveb	ntainment with Noclosure ag Procedure xempted (*) and	o - 		edure				
9		catio				Actipios () and	1401111111	DIC 1 100		Aba			
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Used S Mainte Cus sta	Sole	y by ce/		Description of containing Mathermal systems surfacing, VAT other miscellane	terial (ACM) nsulation, , or	Amo (Spe SF or	ecify	Remova	T	pe	Encansulate	Enclosure
	Yes	No	N/A							-	Ļ	D	
Exterior	-	X	Asbesto	s Contaminate	d Debris	40 Yd		X	1	4	_		
								_	-	+	-		
					***************************************		_	+	+	+	+	-	
Name of Registered Waste Hauler		N	JDEP \	Vaste	Cubic Yards	Name of Reg	stered La	ndfill		_			-
Service Transport Group	H:	auler 10 20990	No.	of Waste 40 Yd	Minerva La	andfill							
	No. of the Control of										-		
City, State New Castle, DE					Disposal Date 09/20/14	City, State Waynesbur	rg, OH						

ASB41

[•] Do not use this form for asbestos licensure exempted activities.

CKININ

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

Date of Notification (1) 08 /	14 /	14					Owner/Operator (2 nstruction Co.	2)		n. i 🐷			
Agencies Notified	Type Notifica				SCORES .	Address			2014 AUG 11	8 A	1 8	20	\dashv
☐ EPA	⊠ Initial					Haledon	Avenue					-0	
☑ DOLWD	☐ Amended			1	City, S	tate, Zip C	ode			11/	í		\neg
□ DOH	Amendme					rson, NJ			ti LIO	* * * * * * * * * * * * * * * * * * *	G		8 1
☐ DCA (NJAC 5:23-8)	☐ Emergend justification		luding	ł		of Contact			Telephone Numb				
(NJAC 5.23-8)	☐ Cancellat					ny Mued							
					FAC	ILITY IN	FORMATION						
Name of Facility Where A	Abatement is T	aking	Place	(3)				Type of Facility (4)				
Father English Con	nmunity Cer	nter					1	School (K-12)					
Street Address			-						(Other than K-12) ivate and commerce		laina		
435 Main Street								homes, etc.)	ivate and commen	Jai Duli	icing.	٥,	
City (5)								Square Feet	# of Floors	Bld	c. Ac	е	
Paterson													
County (6)					Coun	tv Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)	-		
Passaic						2 . ()		,					
Name of Monitoring Firm	Hired by Build	dina O	wner (8)	ASCM I	Vo.	Name of Abateme	ent Contractor (9)					
EnviroVision			,	-/		7		NAGEMENT LI	_C				
Street Address							Street Address						-
20-21 Wagaraw Ro	ad						27 Outwater	l ane					
City, State, Zip Code	uu						City, State, Zip Co				-		
Fair Lawn, NJ 074:	10						Garfield, NJ						
Project Manager for Mon			-	Tolo	phone I	No	Telephone No.	07020	License No.				
Fred Larson	noning rinn				3-636-		973-928-4888	1	1188				1
Start Date (10)	To	Schod	ulod C	1	tion Dat	1255 - 1874 - 1	Name of OSHA N		1100				-1
	I			(3)	/ _	- C - C - C	South production of the control of	NAGEMENT LI	_C				
Occupancy Status During	Abatement (Check	only	ne)			Street Address	5		11/10/00/1909			
☑ Facility Closed/Vacate	TX				ment		27 Outwater	Lane					
☐ Abatement Performed							City, State, Zip Co	ode			-		
Time of Abatement: _	AM	PN	Λ/	_PM-		AM	Garfield, NJ						
Scope of Work (Check a	Il that apply)						1				1		
F7 . 0 . 1 . 0 . 1					2027			tainment with Neg	ative Pressure				
≥3 sf or ≥3 If ≥160 sf or ≥260 If				novati			☐ Mini-End ☐ Gloveba	g Procedure					
									n-Friable Procedur	е			
				Locat						Aba	eme	ent Ty	/ре
Location				Norma ed Sole			Description of		Amount	Z.	Z)	щ	Щ
Asbestos-Containing TO BE ABA		n)		intena			stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facil			Cus	todial	Staff?		surfacing, VAT	, or	SF or LF)	Val	7	Sul	Sure.
(13)			Yes	(12) No	N/A		other miscellane	eous)				ate	
Storage Room						ACM P	pe Insulation		80 LF		T		П
Storage Room					-	Aomin	pe madiadon			-	H		
												Ш	Ш
Name of Registered Was	ste Hauler			1	JDEP V		Cubic Yards of	Name of Regis	stered Landfill		_	-	
ALL PRO MANAGE				H	lauler II		Waste	IESI Landf	ill				
City, State					00348	360	As Needed Disposal Date	City, State		-	_		
Garfield, NJ							TBD	Bethlehem	ı. PA				
	· · · · · · · · · · · · · · · · · · ·	Tiel		_						ate ;	-	í	
Completed By (Print or T Ted Veskov	ype)	Title	M				Signature	101ha	- I I	2/1	111	111	,
5-1- Folia		Ι.					1 (00	WIN)		0//	14	7	
ASB-41 JAN 13		*	Do no	use ti	his form	for asbes	tos licensure exem	pted activities.			•	′	

D&S Proj. #: 2014-328

State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

					9014	ALIC I	8 AM 8:					
Date of Notification (1)	Name of E	Building Owne	er/Operator (2)		2017	NOO 1	U KII U.	1 1 2				
0 8 / 1 1 / 1 4 Agencies Notified Type Notificati		MATTHEY	WS				5 311 7	-				
Agencies Notified Type Notificati	Street Add				5		Ġ					
DEP Amended			IN AVENU	E								
Amendment #:	City, State	, Zip Code										
Lmergency		CLAIR, NJ	07042						-			
DOH (including justification)	Name of C	contact			22		Telephone	Number				
☐ DCA ☐ Cancellation	STEV	E MATTHE	EWS									
CONTRACTOR OF STREET		FACII	LITY INFORMA	NOITA						W-Se'- To		
Name of facility where abatement is	s taking place (3)					Туре	of Facility (4					
STEVE MATTHEWS					51		=	(K - 12)		an K	12\	
Street Address				-				apter 8 (C Private/C			12)	ts.
Oli Cot Address							Bldgs./l	Homes, e	tc.			
152 SO. MOUNTAIN AVEN						Squ	are Feet	# of Floor	s	Blo	lg. Ag	je
City (5)	County (6)				ity Code (7) e use only)	<u> </u>	rrent Use (Pr	ing if bala			٩/	_
MONCLAIR	ESSEX			(State	e use only)	Cui	rrent Use (Pr	ior ii bein	g der i	Olishe	u)	
Name of Monitoring Firm Hired by B		 -T	ASCM No.	П	Name of Abatemer	nt Contra	ctor (9)	_				
					D & S RESTO	RATIO	N. INC.					
Street Address					Street Address							
					20 California	Ave.						
City, State, Zip Code				-	City, State, Zip Cod	ie						
					Paterson, NJ (07503						
Project Manager for Monitoring Firm		Phone Number	er		Telephone Number			License		er		
					973-345-802			0	1169			
Start Date (10)	Sched. Compl	etion Date (11)		Name of OSHA Mo		_					
08/28/14	09/15/14				D & S Restora	ition, in	c.		-			
Occupancy Status During Abatemer			A MARKET REPORT	$ \parallel$	20 California A	Avenue						
Facility closed/vacated during		atement.		1	City, State, Zip Cod	POWER PROPERTY.					-	
Abatement performed outside	of normal facility h	ours-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Describe: NORMAL H	OURS			-11	Paterson, NJ (07503						
Scope of Work (check all that apply						Full Co	ontainment w	/negative	press	ure		
\boxtimes >3 sf or >3 lf	Renovation						nclosure					
≥160 sf or ≥260 lf	Demolition						pag procedur exempted (*)		friable	proce	edure	
Location of	Is location norma	lly used solely	1			11000	otomptoo ()		R	R	Е	
Location of asbestos-containing	by maintenance/o staff(12)		2000 00 00	on of as	bestos-containing		Amount	_	e m	e p	n	E n
material (acm) to be abated in facility (13)			material (ACM)			(Specify S LF)	F or	0	a	a	C
abated in lability (10)	Yes No	N/A							v e	r	р	
BASEMENT LAUNDRY, BOILER, CLOSET CRAWL SPACE			PIPE INSU	LATI	ON	1	78 L FT					
												Ш
									10			
									Ш.		ᆜ	1
				M1	D 75 1		20			Ш	Ш	
Registered Waste Hauler D & S RESTORATION, INC.	NJDEP Haul 13506	73 (3.55)	ubic Yards of V YDS	vaste	Name of Register TULLYTOWN	ed Land	IIII DURCE RE	COVE	RY			
City, State		Disposal D			City, State	.,			-			
PATERSON, NJ 07503		08/29/1			TULLYTOW	N, PA			-07-			
Completed by (Print or Type)	Title		Signature					Date			1000000	
BOGDAN JOLDZIC	PRESIDENT							08/11	/2014			
100 44	* Do not use this fo	rm for achaete	ne liceneure ev	empter	activities							

CK 00 6312

State of NJ

D&S Proj. #: 2014-327							in It		1 /			
Date of National (4)	IINa	me of Ru	ilding Owne	Pipe Paterson, NJ 07503 Paterson, NJ 07503								
				si/Operator (2	,			IO AN E	5 :	3		
☐ EPA ☑ Initial	Name of Building Owner/Operator (2) Shotification (1) 1 1 1 1 1 1 1 1 1)	111	٠							
	Notified Type Notification Initial Amended Amendment #: 189 kerriga boulevard 189 kerriga bou		Control Manager	- 01110								
M DOI	DEP											
Emergency	EPA	o Number	_			Des Are						
justification)	michael stokes Street Address Street Address Street Address Street Address Street Address Subchapt Set Address Set Address Subchapt Set Address Se	5 Number										
DCA Cancellation	Щ.	michael	stokes						==			
	DOH					١	·					
michael stokes	e (3)					School Subcha	(K - 12) apter 8 (Othe			·12)		
Street Address									me r	cial		
189 kerriga boulevard										Blo	ig. Aç	je
City (5)	Count	y (6)							_			
Newark	ESSI	ΞX			(Sta	ate use only)	Current Use (Pr	ior if being d	en c	olishe	d)	
2.10.1100.21				ASCM No.	-	Name of Abatement	Contractor (9)			_		
						D & S RESTOR	ATION, INC.					
Street Address					_				==			
						20 California A	ve.					
City, State, Zip Code					_	City, State, Zip Code						
						Paterson, NJ 07	7503					
Project Manager for Monitoring Firm		P	none Numbe	er	_					er		
								011	69			
Start Date (10)	Sched.	Completi	on Date (11)								
08/22/14	09/10/	14				The second secon	ion, Inc.			-	-	
		Y-10-10-10-10-10-10-10-10-10-10-10-10-10-	to de accessorations				Venue					
			ement.						==			
	of normal fa	cility hou	irs-									
Other-Describe: NORMAL H	IOURS				_	Paterson, NJ 07	7503					
Scope of Work (check all that apply	County Code (7) County Cod											
	Renovation					to the second						
>160 sf or >260 lf	Demolition					×			hle	nroce	adure	
Location of	Is location	normally	used solely				Non-Exempted ()			$\overline{}$	_	
asbestos-containing	by mainter				ion of a	asbestos-containing		r			10000	-0.00
material (acm) to be		APR 500	T					SF or	0	30.		С
abated in facility (13)	Yes	No	N/A							į	р	_
BASEMENT BOILER, REC. LAUNDRY RMS		X		PIPE INSU	JLAT	ION	72 L FT		3			
BASEMENT BOILER RM		X		BOILER I	NSUL	ATION	30 SQ FT		3			
]			
Registered Waste Hauler			ID# C	ubic Yards of	Waste			COVERY	8			-
City, State	1330	Ю	Disposal D	ate	en Juliana		KESOUKCE KE	COVERY				
PATERSON, NJ 07503			1.50			7020	, PA					
Completed by (Print or Type)	Title		1	Signature				Date				
BOGDAN JOLDZIC		ENT						2014				

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

ASB-41

CK 00 6313

D&S Proj. #: 2014-324

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

						j		30.00			
Date of Notification (1)	Name of Bu	uilding Owne	er/Operator (2)					* i .			
0 8 / 0 8 / 1 4	COUNT	Y OF BER	GEN		100	2014	110				
Agencies Notified Type Notification EPA Initial	Street Addr	ess					00 10	A.S	8:	10	
□ DEP □ Amended	1 BERG	EN COUN	TY PLAZA			્રન્	- 8			1.)	
Amendment #:	City, State,	Zip Code				ζ.,	<u> </u>	. · ·	I_{n}	_	
DOL Emergency	Hacken	sack, NJ 07	7601				Lio	~ 12e	G''		
DOH (including justification)	Name of Co	ntact				Telephone	Number				
DCA Cancellation	ALAN	KOENIG					-1043			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		FACII	LITY INFORMA	ATION							
Name of facility where abatement is ta	king place (3)			-		Type of Facility (4					
						School	(K - 12)				
RESIDENTIAL BUILDING							pter 8 (O			12)	
Street Address							Private/Co lomes, et		rcial		
218 BOULEVARD							of Floors		Blo	dg. Ag	ge
City (5)	County (6)				nty Code (7)						
				(Stat	e use only)	Current Use (Pri	or if being	g dem	olishe	ed)	
ELMWOOD PARK	BERGEN		100111		Name of Abstament Co	entractor (Q)					
Name of Monitoring Firm Hired by Bldg	J. Owner (8)		ASCM No.		Name of Abatement Co						
				_	D & S RESTORA	FION, INC.					
Street Address											
City State 7in Code				_	20 California Ave City, State, Zip Code				_		
City, State, Zip Code						22					
Project Manager for Monitoring Firm	To	hone Numbe	or.	- -	Paterson, NJ 0750 Telephone Number)3	License	Numb	er	_	
Project Manager for Monitoring Pinn		HOHE NUMBE	3 1	- 11	973-345-8020			1169	OI.		
		5 : ///		_	Name of OSHA Monito	r					
Start Date (10)	Sched. Complet	ion Date (11)		D & S Restoration	n, Inc.					
08/25/14	08/29/14				Street Address						
Occupancy Status During Abatement (C		5 W			20 California Ave	nue					
Facility closed/vacated during ent Abatement performed outside of					City, State, Zip Code	0					
Describe:		113-		_	D 311.055	20					
Other-Describe: NORMAL HOU	RS			<u>- 11</u>	Paterson, NJ 0750						
Scope of Work (check all that apply)						III Containment w/	negative	press	ure		
	enovation					ini-enclosure ovebag procedure	9				
≥160 sf or ≥260 lf De	emolition					on-Exempted (*) a				edure	
Location of	location normally maintenance/cu							R	R e	E n	Е
	aff(12)	stodiai	Description material (sbestos-containing	Amount (Specify Sf	= or	m	p	C	n
abatad in facility (42)	Yes No	N/A	material (ACIVI)		LF)		O V	a i	a p	L
D. A. GETT GETT IM			DIDE DICT	T A TEXT	ON CHTTPMOS	410 I ET		e N	r	_	
BASEMENT			PIPE INSU	LAII	ON (FITTINGS)	<10 L FT			님	片	ዙ
						-		片	屵	H	+
		-	-					片	믐	믐	H
		-	ļ					믐	屵	片	片
Registered Waste Hauler	NJDEP Hauler	ID# I C	ubic Yards of V	Vaste	Name of Registered L	andfill			Ц_		
D & S RESTORATION, INC.	13506	-5700	YD .		TULLYTOWN, R		COVER	Y			
City, State		Disposal D			City, State	334					
PATERSON, NJ 07503		08/26/1			TULLYTOWN, I	PA					
Completed by (Print or Type)			Signature				Date	/2014			
	RESIDENT	for ashast	o licencure cu	omnto	1 activities		08/08/	2014			

الساحب بالمحاجب

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

9014	AUG 18	Date of Notification (1)	/13/14			Name		ng Owner/Operato	x (2) .	1000	`		_
, j.		Agencies Notified	Type Notificatio	n		Stree	Address 300		-14 ST,				_
	. Jù	N COL	Amended Amendment Emergency		0	City.	State, Zip SED		TY , N . J .	08243			_
		Ø DOH □ ∞A	justification				of Conta		וֹס	Telephone Numbe	1	eles	
			1			FAC	או רדש:	FORMATION					_
		Name of Facility Where	Abatement is Taking	ng Place G	e (3)				Type of Facility School (K-12 Subchapter	2) 8 (Other than K-12)			
	. ·		03 Octo	301	Da				Other (i.e., p homes, etc.) Square Feet	nyate & commercial) # of Floors		ngs. g. Ag	æ
		City (5)	ALON				1-				_		=
		County (6) C A r C=	MAY			Cour	ity Code (ONLY)	7) (STATE	VA	for if being demotish	ed)		=
		Name of Monitoring Firm (8)	Hired by Building	Owner		ASCM	No.	- Ki	meni Contractor (9				_
		Street Address	*	T					is, spruc	€ duē.			==
		City, State, Zip Code							Code PLE SHO-		080	52	=
		Project Manager for Mo				phone			9-0472	License No.	14		=
		Stan Date (10)	Scre	duled C	omple	eO nai	ie (11)	Name of OSHA	Monitor KL	EHM			==
		Occupancy Status Durin Status Closed/Vacar	ng Abatement (Che	eriod of	one) Abates	ment		Sueel Address	is, Spa	· ut 2 vc.			=
		Abatement Performe Other - Describe:	d Outside of Norma	al Facilit	y Hour	rs		Ciry, State, Zip	Code APLE SI	IDDE, N.	5.0	280) <u>:</u>
		Scope of Work (Check : 23 sf or 23 lf 2160 sf or 2260 if	all that apply)		enovali emotito			Mini-E	ontainment with Ne nclosure pag Procedure xempted (*) and No	gative Pressure			
		0-			Localk						A	Daten Typ	
	,	Location Asbestos-Containing TO BE ABA IN Facility (13)	Matenal (ACM) TED	Used Mair	omally Solet ntenan ustodia Staff? (12)	y by ce/	Asbes (i.e	Description stos Containing M thermal systems surfacing. VA other miscelland	aterial (ACM) insulation, I, or	Amount (Specify SF or LF)	Removal	Repair	CIRcapsulaib
				Yes	Но	N/A		04116175		1000 SF	X	\neg	
		51011	va	-		Х		RANSITE					_
											_		_
		Name of Registered Wa	ste Hauler			UDEP V		Cubic Yards of Waste	Name of Reg	istered Landfill	,		520
		K L&MCO City. State	INC.		- N	1790	94	Disposal Date	City, State		. 7		
		MAPE	S 1+0 1		N .		===	Signature	1/ 1	DE 1	3/	114	
	• •	Completed By JOSEPH K	LEMM _	\	1/1			-1- Jan	a Color	m 0/	9/		_

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

Date of Notification (1) 8/12/2014				ner/Operator ETUCHEN		* * · · · · · · ·				
Agencies Notified Type Notification EPA Initial		Street Ad P.O. Bo				2014 AUG	18 /	M	1: 3)
DEP Amended Amendment #_ Emergency (in			e, Zip Code CHEN, No Contact			Telephone Nu	umber	0	'nξ	
DOH justification) Cancellation			GURAL	CHUK		1				
75 27 140 4	21 (2)	FACIL	ITY INFOR	MATION	Type of Facility (4	\				
Name of Facility Where Abatement is Taking I SAINT MARY ELEMENTARY SCHO					School (K-12					
Street Address 351 MECHANIC STREET	30.00				Subchapter 8	Other than K- ivate & commer		dings,	home	s,
City (5) PERTH AMBOY					Square Feet	# of Floors	E	ldg. A	ge	
County (6) MIDDLESEX		County C	ode (7) SE ONLY)		Current Use (Prio	r if being demoli	shed)			
Name of Monitoring Firm Hired by Building Ov N/A	vner (8)	ASCM	No.		of Abatement Cont) BROTHERS (NG, IN	IC.		
Street Address					Address					
				250	RUTHERFORE	BLVD.				
City, State, Zip Code					State, Zip Code FTON, NJ 0701	4				
Project Manager for Monitoring Firm		Telephor	ne No.		hone No. -956-8700	License 00494				
	Scheduled Co 3/27/2014	ompletion [Date (11)		of OSHA Monitor ME AS (9) ABO	/E				
Occupancy Status During Abatement (Check	Only One)			Street	Address					
Facility Closed/Vacated During Entire Pe	riod of Abate I Facility Hou	ement irs		City, S	State, Zip Code					
Other – Describe:										
Scope of Work (Check All That Apply)		100		Г	7	at with Nagotive	Droces			
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Renov Demo				Mini-Enclosure Glovebag Proc	nt with Negative edure (*) and Non-Fria			9	
	1-1	- Fi	-		3 Non-Exempted	() and Non-rin	able FTC	Abate		
Location of	ls Loca Norm	ally		Description	n of			Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used So Mainten Custodia (12	nance/ I Staff?	(i.e. th		Material (ACM) as insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes No	N/A							Φ	
THROUGHOUT SCHOOL	X			MOVAL OF		42 SF	X			
			V.	ARIOUS R	OOMS					
		NID==		O. H. V. I	N	Dogiotosad Las d	611			
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING		NJDEP W Hauler ID 18743		Cubic Yards of Waste 2	0,000,000	Registered Land MANAGEM		G.R.C).W.	S.
City, State CLIFTON, NJ				Disposal Date 8/27/2014		SVILLE, PA				
Completed by VIVECA RAMOS	Title PROJEC	CT COOF	RDINATO	Signatur	- \	T 1	Date 8/12/2	014		

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

Date of Notification (1) 8/13/2014 Chec	ck#2659			me of Building			(2)	1		* * * * * * * * * * * * * * * * * * * *	-		
Agencies Notified	Type Notification	122	100	reet Address 36 South Li	vinasto	n Aven	ue		20	i 4 AU (18	I.F	7: .
EPA DEP DOL	Initial Amended Amendment # Emergency (ii		_ Li	y, State, Zip C vingston, N	ode J 0703				i i	i. L	ic.	115	.G
DOH DCA	justification) Cancellation	.o.aag	0.00000	ame of Contac ev. Joseph				Te	lephone i	Number	Ö.		
Name of Facility Where Church Rectory	e Abatement is Taking	Place (3)		FACILITY IN	FORMAT	ION	Type of Facility	(4)					
Street Address 386 South Livings	ton Avenue						School (K-Subchapte Other (i.e. etc.)	r 8 (Oth			ilding	s, hom	es,
City (5) Livingston, NJ 070	039	i.					Square Feet 2,000 SF	2 # 0	of Floors		Bldg. 50+	Age	
County (6) ESSEX				ounty Code (7) TATE USE ONL		_	Current Use (Pr Church Rect		ing demo	olished)			
Name of Monitoring Fir N/A	m Hired by Building O	wner (8)		ASCM No.			of Abatement Co Services Corpo					·	
Street Address							Address 69th Street						
City, State, Zip Code							State, Zip Code enberg, NJ 07	093					
Project Manager for Mo	onitoring Firm		Te	lephone No.			none No. 295-1700		License 01074				
Start Date (10) 8/13/2014		Scheduled 8/14/201		etion Date (11)		of OSHA Monitor e as above		<u> </u>		-	-	
Abatement Performance Other – Describe:	ncated During Entire Permed Outside of Norma 5:30 PM	eriod of Ab	atemer	nt			Address State, Zip Code						
Scope of Work (Check ≥3 sf or ≥3 If ≥160 sf or ≥260 If			novatio molition		***************************************		Full Containm	ent wit	h Negativ	e Press	ure		
						Ê	Glovebag Pro Non-Exempte			iable Pr	ocedu	re	
Location		No	ocation rmally Solely I			escription						temen ype	t
Asbestos-Containin TO BE Al In Fac (13	BATED cility	Maint Custoo	enance dial Star (12)	ASDE	e. therma surfa			(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Second Floor-Bath	Ye Second Floor-Bathroom-Rectory Off				Pipe	e insula	ition		6 LF	x	-	0	
			+								+		
Name of Registered Wa	aste Hauler		NJD	EP Waste	Cubic	Yards	Name of	Registe	ered Land	1611			
Freehold Carting	0.0000000000000000000000000000000000000	ler ID No.	of Wa		4	100 to	thLand						
City, State Freehold, NJ			Dispo tbd	sal Date	City, Star Morrisv		A				\neg		
Completed by Gina Salvador		Title Office I	Vlanaç	ger		Signature	Qual	7		Date 8/13/1	4		

NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) August 12, 2014	1	Name of Building	Owner/Operator (2) Pennsauken Public Sc	hools i	1.9	2 -7	
Agencies Notified Type of Notificat [X] EPA [X] Initial	ion Notification	Street Address		14 AUG 18 AM	7:22	A /	
[x] DOL Amer [x] DOH [] Emer	nded Notification adment # gency (including cation)	City, State, Zip Co	Pennsauken, NJ 08110	ocitio i pr	Int_		
I DCA	ellation	Name of Contact Jack I	Killion	Telephone Number	2		^
Name of Facility Where Abatement is Taking		CILITY INFORM					
Pennsauken High S			Type of Facility (School (k-12)			
Street Address 800 Hylton Road		7	[] [x]	Subchapter 8 (oth Other (i.e., privat homes, etc.)			ildings,
City	County (6)	County Code (7) (STATE USE ONL	Square feet Y) 50,000 sf	# of Floors	Bldg. A	ge 60	
Pennsauken	Camden	(0.1112 002 0112	Current Use (Price	or if being demolished) School		00	
Name of Monitoring Firm Hired by Building (N/A	Owner (8)	ASCM No.	Name of Abatement Contrac		Inc		
Street Address			Street Address		me.		
City, State, Zip Code			City, State, Zip Code	Route 9, Unit 61			
Project Manager for Monitoring Firm	Telephone Number	f	Tom Telephone Number 732-349-9932	s River, New Jerse License N 00624		-1271	
Scheduled Start Date (10) 8/25/14	Scheduled Comple 9/26/14	tion Date (11)	Name of OSHA Monitor	S.L. Analytical			
Occupancy Status During Abatement (Check of	only one)		Street Address				
	During Entire Period of Ab Outside of Normal Facility H		City, State, Zip Code	Stelton Road			
Other – Describe	100			ataway, New Jerse	y 08854		
Scope of Work (Check all that apply)				ent with Negative Press	sure		
[] >3 sf or ≥3 lf	[X] Renov	ration	Mini-Enclosur Glovebag Proc				
[X] ≥160 sf or ≥260 lf	[] Demo	lition	[X] Non-Exempted	d (*) and Non-Friable F	rocedure		
	Is Location		Description of		Abateme	ent Type	
Location of	Normally used		bestos-Containing	Amount	R R E E		E N
Asbestos-Containing Material (ACM) TO BE ABATED	Solely by Maintenance/Custodia		Material (ACM) ., thermal systems	(Specify SF or LF)	M P	22	C
in facility	Staff		ulation, surfacing,	l s	O I	P	o s
(13)	(12)	oth	VAT, or ner miscellaneous)		A	U	U
	YES NO N/A				L	L	R E
Exterior	X	100 windows		100	х		
					$\vdash \vdash$	_	-
						+	
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Haule	er ID No. Cubic Y	ards of Waste Name of Reg	istered Landfill			
City, State	osal Date	City, State Tullytown, Pennsylva					
Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola	7 Title Project Manager	Signature	for the sylva	ина /	Date 8/12/2	014	

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

NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)		1			Name	of Building	Owner/Oper	rator (2)	10.10 .1	-			
A	August 13, 201	i			Tume	or Bunding		huln Family Tr	ust	0	440	930	0
Agencies Notified [X] EPA [] DEP [X] DOL	Ame	al Notifi ended N endment	otification #			Address State, Zip Co		agle Rock Aven Orange, NJ 070	ue	M 7			
[X] DOH [] DCA		rgency (fication)	including		Nama	of Contact							
[] bea		ellation			Name	John			Telephone Number		٠.		
N				FAG	CILITY	INFORM	ATION						
Name of Facility Where Aba War	atement is Taking ehouse	Place (3)					Type of Facility (School (k-12)				
Street Address	Hackensack S	Street						[]	Subchapter 8 (Other (i.e., priv				ldings,
City		Cour	ity (6)			Code (7)		Square feet	homes, etc.) # of Floors	Bio	ig. Age		
Fact Duth ouf-		_			(STAT)	E USE ONL	Y)	6000 sf	1		2.740	60	
East Rutherfo	ord	Ber	gen						r if being demolishe house	d)			
Name of Monitoring Firm H					ASCM	No.	Name of	Abatement Contract					-
Street Address	rdian Contrac	ting, Ir	ıc.				Charact A 1		dian Contracting	g, Inc.			
1889	Rte. 9, Unit	61					Street Ad		Route 9, Unit 6	1			
City, State, Zip Code Tom	s River, NJ 0	8755					City, State	e, Zip Code	River, New Jer		2755-1	271	
Project Manager for Monitor Nicholas Ferni			Telephone					e Number	License	Number		2/1	
Scheduled Start Date (10) 8/14/14	COIA		732-349 Scheduled 8/15/	Complet	ion Date ((11)	732-349 Name of 0	OSHA Monitor	00624		F-1		
Occupancy Status During Ab	patement (Check	only one	(2)	14			Street Add	E.M.:	S.L. Analytical				
	ty Closed/Vacated ment Performed								Stelton Road				
	- Describe	Outside	oi Normai r	acinty Ho	ours		City, State	e, Zip Code Pisca	taway, New Jers	ev 08	854		
Scope of Work (Check all tha	at apply)						[]		nt with Negative Pre	v.e.•. ×>	5076V		
	. BIG. T-EV						[]	Mini-Enclosure		ssure			
	or ≥3 lf		[x]	Renova			[x]	Glovebag Proce	dure				
[] ≥160 s	sf or ≥260 lf		_	Demoli	tion		[]	Non-Exempted	(*) and Non-Friable	Proced	ure		
							6			Aba	tement	Туре	201
Location of		,	Is Location				Description			R	R	E	Е
Asbestos-Containing Ma		1	Normally u Solely by				estos-Cont laterial (A)		Amount (Specify SF	E	E	N	N
TO BE ABATI		Main	tenance/C				, thermal sy		or LF)	M	PA	C	C L
in facility (13)			Staff			insu	lation, surf			0	I	P	0
(13)			(12)			othe	VAT, or er miscellar			V	R	S	SU
		YES	NO	N/A		our	or misceria	icous)		A L	1	L	R
1 st -floor			X	Γ	Asbe	stos pipe	insulation		50 lf	X	-	Е	E
										1		_	\vdash
Name of Registered Waste Ha		1	JDEP Wast		ID No.		ds of Waste		tered Landfill				-
Guardian Cont City, State	racting, Inc.		2	0223 Dispos	al Data	2	City State	T.R.R.F.					
Toms River, N	ew Jersey			8/18/			City, State	e wn,∕Pennsylvani	a s				
Completed by (Print or Type)		Title			Signat	ure	1 /	7	1	Date			
Nicholas Fernic	cota		ct Manag	33		VII	Kit	1	7	8/13	3/2014	1	
		*1	o not use	this form	for asb	estos licen	sure exemp	ted activities.					

NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) August 13, 20	14	Name of Building	Owner/Oper Ron K		'5-3	7-9	-2	5	
	ation al Notification ended Notification	Street Address	761 M	ary Street	2014 AUG	18 ,	CM 7	::39	
[x] DOL Am [x] DOH [x] Em	endment #ergency (including	City, State, Zip Co		Amboy, NJ 0886	<u> </u>		Ī	nc.	
I Den	ification) cellation	Name of Contact Ron 1	Kopi		Telephone Number				
		ACILITY INFORM	MATION						
Name of Facility Where Abatement is Takin Residence	g Place (3)		00000	Type of Facility (4)	School (k-12)				
Street Address 761 Mary Street		57.02.030 <u>6.33</u>		[]	Subchapter 8 (oth Other (i.e., privat homes, etc.)			al build	ings,
City	County (6)	County Code (7) (STATE USE ONI	V	Square feet	# of Floors	Bldg	. Age		
Perth Amboy	Middlesex	(STATE USE ON	-1)	2000 sf Current Use (Prior Reside	if being demolished)		6	60	
Name of Monitoring Firm Hired by Building		ASCM No.	Name of	Abatement Contracto	or (9)				
Guardian Contract Street Address	cting, Inc.		Street Ad		ian Contracting,	Inc.	-		
1889 Rte. 9, Unit	61				Route 9, Unit 61				
City, State, Zip Code Toms River, NJ (08755		City, Stat	e, Zip Code Toms	River, New Jers	ev 087	55-1	271	
Project Manager for Monitoring Firm Nicholas Fernicola	Telephone Numb 732-349-9932		Telephon 732-34	e Number	License N 00624				
Scheduled Start Date (10)	Scheduled Comp		_	OSHA Monitor					
8/13/14 Occupancy Status During Abatement (Check	8/14/14 c only one)		Street Ad		L. Analytical	-			-
_ _	ed During Entire Period of A			1056	Stelton Road				- 1
Other – Describe	Outside of Normal Facility		City, Stat	e, Zip Code Piscat	away, New Jerse	y 088:	54		
Scope of Work (Check all that apply)		***************************************	[]	Full Containmer	nt with Negative Pres	sure	-	<i></i>	
[X] >3 sf or ≥3 lf	[X] Ren	ovation	[] [x]	Mini-Enclosure Glovebag Proces	dura				
[] ≥160 sf or ≥260 lf	1 1	nolition	[]		(*) and Non-Friable l	Procedu	re		
		T				Abate	ement	Гуре	\equiv
7 2 6	Is Location		Descriptio			R	R	Е	Е
Location of Asbestos-Containing Material (ACM)	Normally used Solely by		sbestos-Con Material (A		Amount (Specify SF	Е	E P	N C	N C
TO BE ABATED	Maintenance/Custod	ial (i.	e., thermal s	systems	or LF)	M	Α	A	L
in facility (13)	Staff (12)	ln:	sulation, sur VAT, o			v	I R	P S	S
			her miscella			A		U L	U R
	YES NO N/A					L		E	E
Basement	X	Asbestos pip	e insulation	n	100 lf	X			
									\vdash
					-				\vdash
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Hau 20223		ards of Wast	e Name of Regis T.R.R.F.	tered Landfill	1			
City, State	Dis	posal Date	City, Sta	ite					
Toms River, New Jersey Completed by (Print or Type)	Signature A	Tullyto	own, Pennsylvan	7	Date				
Nicholas Fernicola	Project Manager	1 V(0	that	'tel	/		/2014	1	
and of more at the filter for the second	orm for asbestos lice	nsure exem	pted activities.						

08/12/2014 15:43

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Date of Netification (1) August 12, 2014				Building Owns ersey Dapt.			on /	7	Chec	H 8 1	9 / (DAY		17
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DOH justification)		M	eme a	Contact				WAR	THE NAME	P	20	1/5	7	1/
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Name of Facility Where Abatement in Takin	19 1004 (3)					Type	of Facility	(4)		-	-			1
Street Address	. 🖥 📖					D 8	ichool (K-			4				
Dunns Mill Road							Hor (I.c.	or 8 (Other the private & con	nn K-12 nmordi	E) Aj	linge	, hon	et.	
City (5)	1-		_				Foot	I & of Floor	10.00		ldp.			
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County (6) Burdington				Code (7) USE ONLY)		Currer	nt Use (Pr	or If baing de	moësh	edil	+		-	
Name of Monitoring Firm Hired by Suliding	Char (B)		ASCN		T N		lenance			-	\perp			
Environmental Connections, Inc.	(0)	1	MON M	INQ.	Shar	de Env	imani Ca Ironnoi	ntractor (9)		HIE.A				
Street Address						Address				-	+	_	-	
120 N. Warren Street	t.						Avenue		VV-9421-42-18-4-18-4-18-4-18-4-18-4-18-4-18-	Ŋ				
City, State, Zip Code Trenton, NJ 08629						ilele. Zip	code de. NJ C	18052						
Project Manager for Monitoring Firm		Tel	laphor	ne No.		none No			nes No		_			
Ryan Broadwater				2-4200		755-00		008						
Bion Date (10) August 20, 2014	August 2	19, 201		Date (11)			A Monitor Dretonos				Т			
Occupancy Blatus During Abeloment (Chec	t Only One					Address	of the common or a				_	_		
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Olher - Describe:	MI LACIMA	ADDIE.				izie, Zip	on, NJ 0	8077						
Scope of Work (Check All That Apply)			-		- J	41111104	247, 144 0	-			_	_		
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Asbestos-Containing Material (ACM)	rule:Nd	onanca Nai Staff	i l	Asbasios Co. (i.e. thermi				Amoun (Epecif		20	_	7	g	
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Exterior		XX	**	Window Gi	azino er	nd Cau	lking	408 LF	-	X		,-		
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City, State		_		spel Date		Olly, State	500 Deliver et al 100 CO	-			estateliki	\dashv		
Freehold, NJ				6/29	/2014		Birdsbo						1	
Completed by Christina Lynch	Operati	one M	anag	jer (mu	Pagal	Re		Dete	2/201	4			

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Data of Northernian (1) August 13, 2014	νĈĿ.		Name	of Buildin	g Owner	Operator	(2) O Communi	Daam.	 			_	
Agendes Notified L. Type Notificeto			Street	Address	1000		- Community	TY PROMIN	- IAIBUAR	اماح	DOCK	# 13	190
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DCA Consultation	in			Gallagh		02651							
Name of Facility Where Apalement is Tak	ing hace	(3)	- FAI	CILITY IN	FURMAT	ION	Type of Facili	ly (4)					
Bayelde Condominiums							School (K-12)					
27-31 Annepolis Avenue							Offine (i.e	ter 6 (Olly	er Dian K-1 Boommerc	2) 32) 32)	dkding	ia, hor	nae,
City (5) Atlantic City	1						alc.) Square Feel 6,000	2	Floors	T	Bldg.	000000000000000000000000000000000000000	*
County (8) Atlantic	¢:		County (#F47E	Code (7)	n		Current Use (i	Prior if bel	ng demolis	hao)			
Name of Manijoring Firm Hirad by Bullding American Environmental Speciali	Owner (Bla LLC	8)	ASC	M No.		Shad	of Abstement C	entector	(P) .C				
Iraa Address 118 Westbury Court			***			Street /	Address Lutter Avenu				-		\neg
City, State, Zip Code Mariton, NJ 08053							Shade, NJ	₫ 8 052		-	_		
relact Manager for Mondoring Firm Murray Snyder			Telaphi 656-9	one No. 85-2886	i	Telepha	ne No.		License N	g,			
lan Date (10) August 18, 2014	Schodu	120 co	mplation	Dste (11)		Name o	Laboratoria		04042		-		
Coupancy Status During Abatement (Cha	rli Only C	ine)				Street A				_	_		
Pacifity Closed/Vecated During Entitle Abatoment Parformed Outside of Non Other - Oceahbe:	Period of mai Facili	Abata Ny Hour	nerd a				loute 130 No	onh					
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Asbautus-Conteining Material (ACM) <u>TO BEARATED</u> In Facility (13)	IA.	stritera (galla) (12)	rice/		shome:			(50	าอบกเ มะเห็ง or LFJ	Removal	Rapair	Encapadely	Enclasure
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WLETTER (K1592

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

		(Pu			JAC 0			1.12		1	-1	1
Date of Notification (1)			Na	me of E	Suiding (Owner/Operator ((2)	Z-2014 AUG 1	· 🖛 🕺	٠.,	1	
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Agencies Notified	Type Notification		Str	est Ad		/ TH A	VE .	1 406 J	8 A	M	7: 0	1
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Name of Facility Where	Abatement is Taking P	face (3)					Cabont (K-12	P).				T
							C Calaborder	R (Other than K-12)				
Street Address / /	711 1.15						Other (i.e., p	rivate & commercial o	ATHORNA	js.		
8046	ANE						homes, etc.	# of Floors	Bldg	Age	_	-
C\$-(5)	1 12 00	11					Square Feet	/		D		١
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County (6) // A/	MOUTH		1	USE Ó	MLY)		VACAN		4 4)	7_	_	=
			TAS	SCM No	, ī	Name of Abater	nent Contractor (9)(0.00)	1	,	_	
	m Hired by Building Ov	niei	1	JANE 1 VA	-	BRICK		STRIES		N	<u>··</u>	_
(8)			1-			Street Address						-
Street Address						1.15 N	ATICK	TR.				_
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Project Manager for M	Ionitorina Firm		elepi	none N	0.	Telephone No.	n d./n	011100	5			
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BL + D-4- (20) -	Schedu	iled Con	pletin	on Date	(11)	Name of OSHA	Monitor					and the same of
Start Date (10)8_/	8.14 8	-16								_	_	=
			_			Street Address	3					
Occupancy Status Du	ing Absternent (Chec	country of		nent	100		500000					=
☐ Facility Closed/Var	cated During Entire Per	FOOL OF AL	dictil.	estil.		City, State, Zip	Code					
☐ Abatement Perform	ned Outside of Normal	racinty i	MUCHES	•		0.0, 0.00, -	200707					
Other - Describe:						<u> </u>						
Scope of Work (Chec	ck all that apply)					☐ Futi C	containment with N	legative Pressure				-
		□ Ren	ovatic	חנ		Mini-E	Enclosure					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Den	olition	ì		Glove	shag Procedure	Non-Friable Procedur	e			
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IN Fa	city		aff?			other miscella	neous)		Removal	=	Encapsulate	Enclosure
(1:		(12)			Outot mason	10 miles		-		6	
		Yes	No	N/A					1./	<u></u>	-	-
		\vdash		-	10	ANSITE.		1200 SF	- V			_
EXTERIOR	SIDING			1	17/	7113/16			T			1
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									+	-	-	-
		+-1		1								_
			-	UDEP	Waste	Cubic Yards	Name of R	egistered Landfill		•		
Name of Registered	Waste Hauter	111	1.	Hauter B	D-Nh.	of Waste	- G.R	O. W.S.				
BRICK /	NDUSTRIES	1//	9	210	002							
	1					Disposal Date		PA				
City, State BRICK	, M7.					8-18-		Contra		-		_
Commission Dr.	TIE	e o				Signatur	re Ma	Date	-/4	_	10	
Completed By	CACKIS_	" Br	-			_ CE	estlack	2 6			-/	_
ERIC P	MIC1012 -		_									

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

		NOTIFIC	ATION O	of New FASBES NJAC 8	Jersey STOS ABATEME :60 and 12:120)	ENT	1	:0	71		
					Owner/Operator (2)	2016 000			-	F
Date of Notification (1)	8-14-14		LOF	RRAL	NE LH	TZKE	- 2014 AUG	18	£4	75	+
Agencies Notified	Type Notification		Street A	ddress	31/ 74 5	T. SOU!	74 A.		741	/:	1
I EPA I DEP	☐ Amended	1	City. Sta	te. Zip Co	ide		ELI	F	I.,	Ìm	7
M DOL	Amendment # Emergency (incl	ludina	BR	1G F	NTIN		Telephone Number	-11	24.		4-
□ DOH	justification)	9	Name of ER	Contact	PLACK	15	relephone returned		,,		
DCA	LI Carbellaton				ORMATION	 ,]
CE TA JAPAN	re Abatement is Taking	Place (3)	PAGE	DI 1 844 4		Type of Facility (-
						School (K-12)	(Other than K-12) ivate & commercial	buildin	gs,		-
Street Address	IN STREE	T 50	OTH			homes, etc.)	# of Floors		. Age		\dashv
City (5) BRIG				Vice and the second		Square Feet	/		29		_
	1 1		Count	y Code (7) (STATE		or if being demolish	ed)			-
	EATH HTLI		1		Name of Ahatan	nent Contractor (9)					٦
	irm Hired by Building C	wner	ASCM N	60.	BRICK	INDUST	SIEZ INC	. 1			_
Street Address					Street Address	NATICK	TR.				_
an Older To Code							08724				
City, State, Zip Code					Telephone No.	R. 710.	License No.		-		=
Project Manager for	Monitoring Firm	Te	elephone l	No.	132-89	9-1499	0119	6		_	_
Start Date (10)	1 -	duled Comp	oletion Da	te (11)	Name of OSHA	Monitor					_
8-2:		30-1			Street Address						
Occupancy Status I	During Abatement (Che acated During Entire Pe	eriod of Aba	etement							==	=
Abatement Perfo	rmed Outside of Norma	al Facility H	ours		City, State, Zip	Code					
Other - Describe	:										
Scope of Work (Che	eck all that apply)				Full C	ontainment with No inclosure	egative Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260	NF.	Renor	vation dition		<u></u>	t The diese	Ion-Friable Procedu	re			
		T Is Loc		I	1110011	Jacob Company ()		A	bates Typ		
		Nom Used S	nally	1	Description	of				П	
Loca Achaetra-Contail	ation of ning Material (ACM)	Mainte	nance/	Asbe	estos Containing N e., thermal system	laterial (ACM)	Amount (Specify	70	70	Ence	Filotoparia
TO BE	ABATED actify		iff?	(Le	surfacing, V/ other miscellar	T, or	SF or LF)	Removal	Repair	Encapsulate	-
	(13)	(1	2)	4	other miscena	ieuus)		B		ate	
	3	Yes	No N/A			/40:	6451	-	-		
UTILITY RO	0 M		/	VIA		TING/MAS	1	+	-		T
Rook			1	ASP		GIE RULFIN	111 SF	+	\vdash	Г	T
FURNALE VENT	TELASUS ON ROTO	F		-	NG MASTIC		LIND SF	1	T		T
SIDING			I NUDE	// R/	QNSITE Cubic Yards		egistered Landfill				
Name of Registere BRICK /N	DUSTRIES	N C		DNa 002	of Waste /		.O.W. S				=
O'L. Chele	·. N.J.				Disposal Date						_
Completed By	11	itle			Signatur	6. HU 1	Date	- 14	-13	/	
Completed By ERIC PL	ACKIS	PRES	·			West, Carre	====				

NOTIFICATION OF ASBESTOS ABATEMENT

					my pro				
Date of Notification (1) August 14, 2014	4	Name of Building (ator (2) Contracting, Inc.	reu d	\ \	43	1	
L	ion Notification Ided Notification	Street Address	Castle	Contracting, Inc.	14 AUG 18	Ma	e ji 🛢	A-	1
[x] DOL Amen	ndment # gency (including	City, State, Zip Coo		Ridge, NJ 07028	& LICENS	CIT	kOL.		
I I DCA	ication) ellation	Name of Contact Dan		Те	lephone Number				
	FA	CILITY INFORM	LATION						
Name of Facility Where Abatement is Taking Residence	Place (3)			Type of Facility (4)	School (k-12)	41	l. 12)		
Street Address 413 Ludlow Avenu	ue		,	[x]	Subchapter 8 (oth Other (i.e., private homes, etc.)			al buildi	ings,
City	County (6)	County Code (7) (STATE USE ONL)	Y)	Square feet 1500 sf	# of Floors 2	Bldg.	Age 6	0	
Spring Lake	Monmouth			Current Use (Prior if) Residen	ce				
Name of Monitoring Firm Hired by Building Guardian Contract		ASCM No.			9) n Contracting,	Inc.			
Street Address 1889 Rte. 9, Unit 6	61		Street Ad	1889 Ro	oute 9, Unit 61				
City, State, Zip Code	0755		City, Sta	te, Zip Code	iver, New Jerse	os, 087	55_10	71	
Toms River, NJ 08 Project Manager for Monitoring Firm	Telephone Numbe	r	Telephor	ne Number	License N		33-12	2/1	
Nicholas Fernicola	732-349-9932			9-9932	00624			~ 22-21-1	
Scheduled Start Date (10) 8/14/14	Scheduled Comple 8/15/14	etion Date (11)	Name of	OSHA Monitor E.M.S.L	. Analytical				
Occupancy Status During Abatement (Check			Street A	ddress	146.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00				
	d During Entire Period of Al			1056 St	elton Road				
Abatement Performed (Outside of Normal Facility I	lours	City, Sta	te, Zip Code Piscatav	vay, New Jerse	y 088:	54		
Scope of Work (Check all that apply)			[]	Full Containment v	with Negative Pres	sure			
[X] >3 sf or ≥3 lf	[X] Reno	vation	[x	The reference of the second se	re				
[] ≥160 sf or ≥260 lf	I I I I I I I I I I I I I I I I I I I	olition]	Non-Exempted (*)	and Non-Friable l	Procedu	re		
	10 to 10 12 10 10 10				4	Abate	ement '	Гуре	
	Is Location		Description			R	R	E	Е
Location of Asbestos-Containing Material (ACM)	Normally used Solely by		bestos-Co Material (A		Amount (Specify SF	E	E P	N C	N C
TO BE ABATED	Maintenance/Custodia		e, thermal		or LF)	M	A	A	L
in facility	Staff	ins	ulation, su			0	I	P	0
(13)	(12)		VAT,			V	R	S	S
	YES NO N/A	1	ner miscell	aneous)		A L		L E	R E
Basement	X	Asbestos pipe	insulatio	on	185 lf	Х			
Name of Registered Waste Hauler	NJDEP Waste Haul		ards of Was		l red Landfill		L		
Guardian Contracting, Inc.		2	C	T.R.R.F.					
City, State Toms River, New Jersey		oosal Date 8/14	City, S Tully	tate town, Pennsylvania	Ti .				
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	10/	Jel		Date 8/14	1/201	4	
		Y 15 /	11/10/						

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

NO CK

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

		(1 41	Juai	11 6	14.0		. 0.00 and	12 12	LU)	iti.		s. J .				
Date of Notification	(1) 4/11/14						wner / Operator Education	r (2)	20	114 AL	IG 18	3 AM	7: 2	2		
Agencies Notified	Type Notifica	ation	Sti	reet /	Addres	S										
☐ EPA					rospe				A	1		· Paper	T:	-		
DEP	☐ Initial		20.20		tate & Z					٥,	Lice		i G	U L.		
⊠ DOL	(<u>2005)</u>	nded R#4-8/13/1			on, NJ		8				2101					
□ DOH □ DCA		gency	1 2812		of Cont							Te	lepho	ne N	Jmbe	74
☐ DCA	☐ Cano	ellation	IM	r. Ev	erett (U. Co	llins					1				
				FAC	ILITY	INFO	RMATION			Til Til						
Name of Facility Wh Grace Dunn MS	nere Abateme	ent is Taking Plac	ce (3)				Type of Faciliti		NON SU	ВСНА	PTER	8 8				
Street Address							Subchap	ter 8 (Other tha	an K-1	2)					
401 Dayton Stree	et						Other (i.e	e. priva	ate & cor	nmerc	ial bu	ildings	, hom	es, e	tc.)	
							Square Feet		# of Flo	ors		Blo	lg. Ag	9		
City (5)		County (6)	Cour	nty C	ode (7)											
Trenton		Mercer					Current Use ((Prior i	f being d	lemolis	shed)					
							School	700	50		53					
Name of Monitoring	Firm Hired b	v Building Owne	r (8)		ASCN	No.	Name of Abat	temen	t Contrac	ctor (9)					
Environmental C		,	. (-)		3-10-33	20100000	Bristol Envi				,					
Street Address							Street Addres									
120 North Warre	n Street						1123 Beave	r Stre	et							
City, State & Zip Co	de						City, State & 2	Zip Co	de							
Trenton, NJ 0801	0						Bristol, PA	19007	7							
Project Manager for	Monitoring F	- CONTROL			Numbe	r	Telephone Nu					se Nu	mber			
Steven Fairess			09-39				(215)788-60				0050	9				
Scheduled Start Da		Scheduled Comp			e (11)		Name of OSH									
Back on site -			8/14/1	12000			Bristol Envi		nental li	nc.						
Occupancy Status I							Street Addres									
[1] - [1] - [1] - [1] - [2] -		During Entire Per			tement		1123 Beave						-			
		utside of Normal	Hour	S			City, State & 2									
	7:00 AM -						Bristol, PA	19007								
	upied During			-				-			-					_
Scope of Work (Che	eck all that ap	opiy)						П	Full Cor	ntainm	ent w	ith Ne	gative	Pres	sure	
≥3 sf or ≥3 l	f		\boxtimes	Ren	ovation			H	Mini-En				gauro		04.0	
≥160 sf ≥26					olition			Ħ	Glove B			ires				
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L	ocation of		Is Lo	ocatio	on		Description	n of			Amou				ent T	
	tos-Containin	g	Norma				Asbestos-Con		3		(Spec					
	erial (ACM)			ely b			Material (A0			S	F or L	_F)	D		E	ш
	BE ABATED		Mainte		NOTE: 123.25		(i.e., thermal sy						em	Rep	cap	ncls
	n Facility (13)	1	Custoo	มลเ 5 12)	taπ?		sulation, surfactor other miscella						Remova	Repair	Encapsulate	Enclsoure
	(13)	h		No No	N/A		of Other Hiscone	aricou	3)				-		ate	(D)
D 24 D 20 D 40	D 44						Nailcret			-	355	00	+	\boxtimes		
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N	110/4-11-1			L		4_ T	Ouble Veeds	Mari	e of Reg	iotore	41	4611			Ш	Ш
Name of Registered	i vvaste Haul	er			DEP Wuler ID		Cubic Yards of Waste	Ivam	e of Reg	listere	u Lan	aiiii				
Bristol Environm	nental Inc			40.70000	706		10 Cu yds.	Grov	ws Lan	dfill						
City, State	iornai, IIIC.			101			Disposal Date		State	J. 111		-				
Bristol, PA						'	Jispusai Dale		risville,	PA						
Completed By (Prin	t or Type\			Title	Δ		Signature		,				Date			
Gino Pizzigon				0000000	oject	1	11.	90 7 E	•		.0		6/	. 1	1.1	
Jillo I IZZIGOII				12000	nager		Lino Per	zeg	roue	1 7	K		8/1	3/	1	

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

Date of Notification	ate of Notification (1) 4/11/14						Owner / Operate	or (2)							<u> </u>
Associate Metified		-41					of Education								
Agencies Notified EPA	Type Notific	cation				dress									- S. 100/2
DEP	☐ Initia	st.	1			ospect									
DOL	arrange .	nded R#3-8/1	1/1/4			e & Zip (
Ø DOH		ergency				, NJ 08	538								
D DCA		cellation	- 1			contact rett O. (Nallina				Te	lepho	one N	lumb	er
								0					500	500	
Name of Facility W	here Ahatem	ent is Taking I	Dlace (CIL	ITY INF	ORMATION	114 . (4)							
Grace Dunn MS	icic Abateii	ient is raking i	lace (3)			Type of Faci			BCHAPTER	0				
Street Address									(Other th		. 0				
401 Dayton Stree	of.									mmercial bui	ldin = =	L			
401 Buyton Gue							Square Feet		# of Flo					elc.)	
City (5)		County (6)	C	ounty	Cod	0 (7)	Square reet	S	# OI FIG	oors	Bia	g. Ag	e		
Trenton		Mercer	100	Julity	Cou	C (1)	Currentille	/D-:	· · · · · · · · · · · · · · · · · · ·						
remon		wercer					Current Use School	(Prior	if being o	iemolished)					
Name of Monitoring			ner (8))	Α	SCM No		ateme	nt Contra	ctor (9)					
Environmental C	onnection						Bristol Env	vironi	mental,	Inc.					
Street Address							Street Addre							- 8	
120 North Warre						8	1123 Beav	30.00	THE PROPERTY OF THE PARTY OF TH				er seen as a		
City, State & Zip Co							City, State &								
Trenton, NJ 0801			T-1-	- b			Bristol, PA								
Steven Fairess	even Fairess 6			phone 392~			Telephone N (215)788-66		г	Licens 00509		nber			
	neduled Start Date (10) Scheduled Comp			Carlo Carlo Carlo		(5)(1)	Name of OS		onitor	00303					
Back on site -	Back on site - 8/11/14			3/14			Bristol Env	/ironr	nental l	nc.					
Occupancy Status I							Street Addre		-						
		During Entire I			aten	nent	1123 Beave								
		utside of Norm	nal Ho	urs			City, State &								
Describe:							Bristol, PA	1900	7						
Facility Occ															
Scope of Work (Che	eck all that a	ppiy)							Eull Co	atainmantii	u	_4	D		
☐ ≥3 sf or ≥3 l	f		\boxtimes	Ren	nova	tion		H	Mini-En	ntainment wit	ın iveg	alive	Pres	ssure	
≥160 sf ≥26				Der				H		lag Procedur					
M = 100 31 = 20	<i></i>		ш	DCI	HOIII	1011		\forall		empted and		واطماء	D		
Lo	cation of		Is	Locat	ion	T-	Descriptio	n of	NOTIFICA	Amoun	t INOII-F	Aha	atom	ent T	ire
Asbest	os-Containir	ng	0.00000	nally i		d	Asbestos-Cor		a	(Specif		700	ZIGITI	CIIL I	ype
	erial (ACM)		S	olely i	by	*	Material (A		J	SF or LI				m	-
	BE ABATED		AN 1188 GA	tenan		2000	(i.e., thermal s				35	Rer	20	Са	inc
ır	Facility (13)		Cust	odial (Stan	r?	insulation, surfa	cing, \	/AT			Remova	Repair	Encapsulate	Enclsoure
	(13)		Yes	(12) No	N/	A	or other miscel	ianeou	18)			<u>a</u>	_	ate	l e
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Name of Registered	Waste Haul	er	_ 	NJ	DEF	Waste	Cubic Yards	Nam	ne of Reg	istered Land	fill				با
	0.2 • 40					ID No.	of Waste				100000000				
	ristol Environmental, Inc.				706		10 Cu yds.		ws Lan	dfill					
City, State Bristol, PA							Disposal Date		State risville,	DA					1100-110
					lo.		Cianoti	IAIOI	i isville,	FA	1-				
	ompleted By (Print or Type)				le oior	.4	Signature	μ		1 - 1	10	Date	1	1. 1	
Gino Pizzigoni				100000000000000000000000000000000000000	ojec anag		Time Pa	m	soui.	1-11		81	////	14	
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GI 14068								16.							

NO CK

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

PROJECT COMPLETE

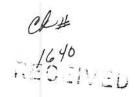
Date of Notification	(1) 7/23/14		Name Old F	of Build	ing Ov	vner / Operator (ship Board of I	2) Education	9	DIA ALL	3.10		
Agencies Notified	Type Notifica	tion	Street	Address	S				HI RUE	3 18 A	14 7	: 46
EPA	Type (voimes	a.c.	Patri	ck Torr	e Adn	ninistration Blo	dg, County	Route 516				_
☐ DEP				State & Z					0 1	1.3.00	1.1	CL
□ DOL		ided 3		wan, N.		47			-	ICE !!		
□ DOH		gency		of Cont					relepi	ione ivui	libei	
☐ DCA	☐ Cance	ellation	Mr. F	rank Fr	razzit	ta			1			
			FA	CILITY	INFO	RMATION						4
Name of Facility W	here Abateme	ent is Taking Pla	ace (3)		3.9	Type of Facility	(4)	D CUADTED	0			
Virgil Grissom E	lementary S	chool				School (K-			0			
Street Address						Other (i.e.	r 8 (Other the	nmercial build	dinas ha	omes, etc	c.)	
1 Sims Avenue						Square Feet	# of Flo		Bldg.			
O': (E)		County (6)	County	Code (7)	· ·	50000	11 01110	1		40÷		
City (5)		County (6)	County	Code (1)		Current Use (P	rior if being o	demolished)				
Old Bridge		Middlesex				School	nor ii bog c					
	Fig. 1 Feed b	Decilding Our	25 (8)	ASCN	1 No	Name of Abate	ment Contra	ctor (9)				
Name of Monitorin	g Firm Hirea b	y Building Own	er (o)	ASCIV	1140.	Bristol Enviro						
Street Address	Connection					Street Address						
120 North Warre	en Street					1123 Beaver	Street					_
City, State & Zip C				-17.00	City, State & Zi							
Trenton, NJ 080	10				Bristol, PA 19		Ti tanan	- Niversia			\dashv	
	Manager for Monitoring Firm			Numbe	er	Telephone Nun		00509	e Numb	ei		
Jim Frisbee			609-392-			(215)788-604 Name of OSHA		00303				-
Scheduled Start D		Scheduled Con	8/13/14	ate (11)		Bristol Envir		nc.				
8/11/1		mant (Charle or				Street Address						
Occupancy Status	buring Abate	During Entire P	eriod of Al	atemen	t	1123 Beaver						
	t Performed ()	utside of Norma	al Hours -	7am to	3pm	City, State & Zi		10				
Describe:	7:00 AM -			-		Bristol, PA 1						
	cupied During											_
Scope of Work (C								ontainment wi	th Nogo	tivo Pres	CUITA	
			-			Į.	annual Control	nclosure	III Nega	live i ies	Suic	İ
≥3 sf or ≥3			_	novation		L		Bag Procedu	res			
≥160 sf ≥2	260 If		□ Бе	emolition		L F		xempted and		able Prod	cedure	e
	I		Is Loca	ation		Description		Amour		Abateme		
	Location of estos-Containing	na	Normally			Asbestos-Conta		(Speci	fy			
	aterial (ACM)	.9	Solely			Material (AC		SF or L	.F)	Z _	Enc	m
	BE ABATED		Maintena			(i.e., thermal sy				Removal	aps	clso
	in Facility		Custodia (12	Manneton and the same		nsulation, surfaci or other miscella				air	Encapsulate	Enclsoure
	(13)		Yes No			or other missena	110000)				ਰ	
Dailer Daam						Boiler Rib Pa	cking	10 SI	F			
Boiler Room						20.101 1.112 1						
			HH									
			甘甘芹									
			HHE	ili								Ц
			THI								Ш	Ш
Name of Register	red Waste Hau	uler				Cubic Yards	Name of Re	egistered Land	dfill			
3			0.00	Hauler ID	No.	of Waste	Minerva L	andfill				
Service Transp	ort Inc.		2	20990		2 Cu Yd		anomi				
City, State						Disposal Date	City, State Waynesbu	ıra Ohio				
New Castle, Di				=		8/14/14	aaayiiesbi	arg, Onio	Tr	ate		
Completed By (P				Γitle Project		Signature		1'0		7/23/14		
Gino Pizzigo	oni			Vlanage Vlanage		Line Prz	negone	11				
1			1		• •	1	1 1	/ //				

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

Q#2669

Date of Notification (1)		Namo	of Building	Oursel Osessa	(0)				_		
7/23/14		Old	Prides To	Owner / Operat	or (2)						
Agencies Notified Type Notific	ation	Stroot	Address	wnship Board	of Education	1					
☐ EPA	ation			A	D		122				
☐ DEP ☐ Initia	ř .	City	CK TOTTE	Administration	Blag, Count	ty Route 51	6 -				
= 4 - 4 - 1 =	nded		State & Zip								
		Iviata	wan, NJ ()//4/					W		
	rgency cellation		of Contact				Tele	enho	ao Al		***********
L DCA L Cand	enation	Mr. F	rank Fraz	zitta			7				
		FA	CILITY IN	FORMATION							
Name of Facility Where Abatem		(3)		Type of Fac	ility (4)						
Virgil Grissom Elementary	3chool				(K-12) NON SI	JB-CHAPTE	R 8				
Street Address					pter 8 (Other ti						
1 Sims Avenue					.e. private & co		ildinas	home	ac a	tc)	
				Square Feet				. Age			
City (5)	County (6)	County (Code (7)	5000		4	Diag				
Old Bridge	Middlesex	oounty c	Jouc (1)			1			40+	Oliveral.	
Old Bridge	INITIOUIESEX				(Prior if being	demolished)					
No. of Marie St. Co. 15 and 15	5 " " 6	(0)	1	School							
Name of Monitoring Firm Hired b	y Building Owner ((8)	ASCM N		atement Contra						
Environmental Connection					vironmental,	Inc.					
Street Address				Street Addre							
120 North Warren Street				1123 Beav	er Street						
City, State & Zip Code				City, State &	Zip Code				7-72.5	219	
Trenton, NJ 08010				Bristol, PA	19007						
Project Manager for Monitoring F			Number	Telephone N	lumber	Licen	se Num	ber			
Jim Frisbee	609	9-392-4	200	(215)788-6	040	0050					
Scheduled Start Date (10)	Scheduled Comple	tion Dat	e (11)	Name of OS							-
8/11/14		14/14	3 5		rironmental I	nc.					
Occupancy Status During Abater	nent (Check only o	ne)		Street Addre							
Facility Closed/Vacated [tement	1123 Beave							
Abatement Performed Ou				City, State &							_
Describe: 7:00 AM -		.ou.o	am to opin	Bristol, PA							
Facility Occupied During				Bristoi, FA	19007						
Scope of Work (Check all that ap								-			
Coope of Work (Orlean dir that ap	P137				M Full Co	ntainment wi	th None	stines [Oron		
≥3 sf or ≥3 If		Ren	ovation			nclosure	III ivega	ilive i	ress	sure	8
☐ ≥160 sf ≥260 lf			olition								
	L.	Dell	IOIILION			Bag Procedu		2 202 V			
Lanation of		- 1 1:				empted and	-				
Location of Asbestos-Containing		s Location		Description		Amour	nt	Abat	eme	nt T	ype
Material (ACM)				Asbestos-Con		(Specif				anguard.	
TO BE ABATED		Solely b intenance		Material (A		SF or L	F)	20	_	Ē	Ш
in Facility		stodial S		(i.e., thermal s insulation, surface				Remova	Repair	Encapsulate	Enclsoure
(13)	Jour	(12)	tuii:	or other miscell		1		8	air	us	no
(/	Yes		N/A	or outer missen	aricous)			=		ate	ē
Boiler Room		1		Dailer Dik D		10.05		57	\dashv		
Boller Rooffi	 		H -	Boiler Rib Pa	acking	10 SF	-			Ш	Ц
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Name of Registered Waste Haule	r	NJE	EP Waste	Cubic Yards	Name of Reg	istered I and	fill				
		37/25/25/25	ler ID No.	of Waste	1	iotorou Luriu					
Service Transport Inc.		209		2 Cu Yd	Minerva La	ndfill				20	
City, State		1		Disposal Date	City, State						
New Castle, DE				8/14/14	Waynesbur	a Ohio					
		7:4			Trayilesbur	g, Ollio					
Completed By (Print or Type)		Title		Signature	0.	1 .	1000000	ate			
Gino Pizzigoni			ject	Lino	Pizzigon	118	7/	/23/	14		
		Mai	nager	reno	1 Lilla	17					1

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



Date of Notification	(1)		N	ame	of Build	ding C	wner / Operator	(2)	20	14 AUG	G 18	AM	7.	6.	
	8/10/2014		D	engl	ar De	molit	ion								
Agencies Notified	Type Notifica	ation	S	treet	Addres	ss			۵	÷ L		1310	7 .	_	
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DOL	Ame	nded			entow										
☐ DOH ☐ DCA		rgency	100		of Con						Tele	ephor	ie Ni	ımbe	it.
☐ DCA	☐ Cano	ellation	P	aul I	Dengl	er									
				FAC	CILITY	INF	ORMATION								
Name of Facility W	here Ahatem	ent is Taking Pl	ace (3)				Type of Facilit	v (4)				-10-1		39,550	
Firehouse	nere Abatem	citio raking r	400 (0	,			School (K								
Street Address					-			er 8 (Other th	an K-12	2)					1
2nd and Honber	nor.							. private & coi			lings,	home	es, et	(c.)	
Ziiu aiiu noiibei	ger						Square Feet	# of Flo				. Age			
City (E)		County (6)	Col	enty C	code (7	1	2000		1				50		
City (5)			1000	arity C	ouc (r	,	Current Use (F	Prior if being	demolis	hed)			-		\neg
Roebling		Burlington					Current Ose (i	riloi ii beilig (acmons	ricu)					1
			(0)		Lance	4 61 -	Name of Abot	Cantro	otor (O)		-				_
Name of Monitoring	g Firm Hired b	by Building Owr	ner (8)		ASCI	VI No.									
							Alpha Envir		ervices	5					_
Street Address							Street Addres 2129 Route								
0: 0: 0 7: 0							City, State & Z								-
City, State & Zip C							Hamilton, N								
D. : - 4 M	ect Manager for Monitoring Firm				Numb	or	Telephone Nu		TI TI	icense	- Num	her			_
Project Manager to	ect Manager for Monitoring Firm				Numb	CI	609-847-295		1	_100110		0122	2		
Cabadulad Ctart D	ata (10)	Scheduled Cor	mplotio	n Dai	to (11)		Name of OSH				-				
Scheduled Start Da 8/20/20		8/31/2014	Tipletio	пра	le (11)		EMSL Analy								
Occupancy Status			nly one	7/			Street Addres								
general	buring Abate	During Entire F	Period (of Aha	atemer	nt	107 Haddon								
		outside of Norm					City, State & 2								
Abatement Describe:	Periornieu C	diside of North	ai 1100	113 -	raili to	Opin	Westmont,								
	aumiad During	Abatamant					AAGSTIIIOIIT,	142 00 100							
Scope of Work (Ch	cupied During													-	
Scope of Work (Cr	ieck all triat a	ppiy)						Full Co	ontainme	ent wit	h Neg	ative	Pres	sure	,
≥3 sf or ≥3	If			Ren	ovatio	n			nclosure		Ĭ				
≥160 sf ≥2			\bowtie	33,3753	nolition				Bag Pro	cedur	es				
□ = 100 SI = 2	00 11			50.	i ionao.	i.			xempte			riable	Dro	codu	ıre
							Description		Xemple:						
	ocation of			Locat			Description Asbestos-Conf	6 (T.C.)	F 10 500	Specify		Auc	ile i i i	2111	ype
	stos-Containii	ng		nally l			Material (AC			F or LF				m	_
	iterial (ACM) BE ABATED		CONT. 202		ice or		(i.e., thermal sy				,	Removal	Z,	Encapsulate	Enclsoure
10	in Facility		A 55.50 Sept. 1		Staff?		insulation, surfac					Non	Repair	psu	Ison
	(13)		-	(12)			or other miscella					/a	=	lat	ure
	, ,		Yes	No	N/A									æ	
Exterior				\boxtimes			Roof (silver	Coat)	26009	sf		\boxtimes			
Storage							Wall plas		600sf	•			5000		
Storage							Mastic under		700sf	•					
kirchen							12" VA		120sf						
Name of Registere	d Waste Ha	ıler		N.	JDEP V	Vaste		Name of Re			fill				
Ivallie of registere	u vvasto nat	1101		100000	auler ID		of Waste								
ALPHA ENVIRONMENTAL				00	03333	30	4	Grows Lar	ndfill						
City, State						WEN	Disposal Date	City, State							
City, State															
Trenton, NJ							various	Morrisville	e, PA						
Completed By (Pri	nt or Type)		0.000	Tit	tle		Signature			- N		Date	COS -	22/22	
Rod Richardson				Pi	roject		Rad Richardson					8/10)/20	14	

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2tate of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:86 and 12:129)

2014 AUG 18 AM 7: 24

Oate of Notification (1) 08/14/2014				R	ame of 8	uliding Or Indian	anen'Ope Hills Re	rator (2 eg Bo) and of	Education	án .	. i u			ict	
Agencies Notified	Type	Notification		1		rpo Ave						& Lice		WG	1	-
EPA DEF X DOL		Amended Amendment				, Zip Cod 1, NJ 07										
DOH DOA		Emergency () Justification) Cancellation	ncisaing	N F	rank C	contact eurvels	BA, BS	3			Tele	phone Num	ber			
					FACIL	TY INFO	RMATION	(E			_		-	\dashv
Name of Facility Where Ramapo High Scho Street Andress	Abate col 2	ment is Taking 00 Wing Ph	ase II					I	× 3c	Facility (4) hoo! (K-12 bchapter 8) (Other	er than K-12	,	V0047-1112		
331 George Street									Othetic	.)		Floors		ngs, r		ā. —
Oty (5) Franklin Lakes															-	
County (6) Passaic					STATE U	ode (7) SE ONLY)		-	High S	School		ng demolish	ea)			
Name of Monitoring Fire Not Applicable NC	n Hire	ed by Building (Owner (8)		ASCM	No.				ment Cont Window		(9) or Systen	ns Inc			
Street Applicable TVC		050	- Comme						Address Temina	g Street						
City, State, Zip Code							-	City, St	ate, Zip	Code	- A		-			
					Telephon	e No			taway	. NJ 088	54	License N	3			
Project Manager for Mo	ect Manager for Monitoring Firm Schedi								26-09	00 Monitor		01237				
Start Date (10) 08/18/2014	art Date (10) Schedi				pletion (Date (11)		Mark	Jovic	Consulti	ng LI	LC				
Occupancy Status Duri									Address ain Str							
Facility Closed/Va Abatement Ferfor Other - Describe:	med (During Entire Ductice of North	Penod of Almai Facility	batem Hours	ent	æ	_		iste, Zip oln Par	code k, NJ 07	035					
Ocope of Work (Check	Al: TI	as Apply1	pa-1		verson:				1			n Negative F				
☐ 23 sf or 23 ff 図 2160 sf or 2260 ff				enova emoliti				×	Mini	-Enclosure	edure				•	
			ls	Locati	ion				1,100		, , , _	A CONTRACTOR OF THE PARTY OF TH	T	Abati	men pe	:
Locati Astestos-Containt TO BE A In Fa	EATE		Use	d Sole intenar odari ((12)	iy by nce: Staff?		thermal	system: ing, VA	Asterial s thsulai .T, or			Amount Specify IF or LF)	Removal	Rapar	Encapsulate	Enclosure
	15 1		Yes	No	N/A X	Achast	ne Con	tainin	n Cæil	k/Glaze		800LF	Х		-	\vdash
200 Wing V Rooms 217B			-		+^-	ASDES	.05 0011	Lanter	g Cau	n. Oddec	_					\vdash
Rooms 2116	-211	,213,213	+													
							Louis	Yards		Name of	Regir	tered Landf	J.			
Name of Registered W Waste Managmen			ia		NJDEF V Hauter IC		of Was			T.R.R.I	AC-117-10					
City, State Tullytown, PA		•					Dispos	Date		City, 8th						
•	Completed by Tibe Mark M Jovic Con:						13	ignaple	e //	11111			ate	2014		

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

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Data of Nationality		- I N	lame of F	Building Owner/Op	perator (2)	1: 1	17	1			
14 AUG 18 AM 7: 8-15-1	4.	"		zaung omnono		Charle	s Proo	d		200	
Agencies Notified Type Notification		S	treet Add	dress 30	Do	loine	Stree	+			
DEPACE IN G Initial Amended	, i 1000	- 0	ity, State	e, Zip Code		1		1/2	<u></u>	<u> </u>	
DOL Amendment #				La	mbe	etuille	- NJ (JB	<u>50</u>	0	
DOH justification)		N	lame of 0		i Rood	0	Telephone Numb	per			
				ITY INFORMATION	NC						
Name of Facility Where Abatement is Taking	Place (3)	7	1-11	Cac		ype of Facility (4				.5	
Street Address	Y 1	A.	Jell	·5		Subchapter	8 (Other than K-12)	L.		2	_
30 Deleve	· Ω	5	Reet	4		etc.)	rivate & commercial				s,
City (5)	X	1	-0	0521	S	quare Feet	# of Floors	Ble	dg. Ag	ge () 1	_
County (6)			County C			urrent Use (Pric	or if being demolishe	ed)	10	01	
			STATE U	SE ONLY)							
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.	Name of	Abatement Con	tractor (9)	ie.S	, ,	In	R
Street Address	3	<u> </u>		1-10-6	Street Ac	. 6	227			# G V	-
1.0. Box 3.	> †					e, Zip Code	33 T				_
City, State, Zip Code	NJ	7 (08	533	Ne	2 Equ	at M	0		13	3
Project Manager for Monitori g Firm			Felephon		Telephor		License No	. 9	10	u	
Steve Schenken	Schedule			758-3365 Date (11)		58 - 336 OSHA Monitor	S OC		דנ	1	
Start Date (10) 8-25-14	A	-2	5-	14	E		hnologies	I	nc		
Occupancy Status During Abatement (Check				,	Street Ad	ddress O. Bok	337				
Facility Closed/Vacated During Entire P	eriod of A	batem	ent		City, Sta	te, Zip Code	JU 1			-3	
Other - Describe:						U Egypt	NJC	185	53	3	
Scope of Work (Check All That Apply)	•				_	- (•			_		
23 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit				Mini-Enclosure		essur	е		
	2000 SSS				7	Glovebag Prod Non-Exempte	cedure d (*) and Non-Friable	e Pro	cedur	e	
		Locati								ement pe	
Location of	Use	Normal d Sole	ly by	De Asbestos Con	scription o		Amount			m	_
Asbestos-Containing Material (ACM) TO BE ABATED		intenar todial S		(i.e. therma		nsulation,	(Specify SF or LF)	Remova	Repair	ncap	Enclosure
In Facility (13)		(12)			miscellane		,	oval	air	Encapsulate	sure
	Yes	No	N/A							4	
Basement	هر			ripe -	Insu	lation	100 LF.	X	_		_
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All of Decisions of Miles to Haviley		I N	JDEP W	laste Cubic	Yards	Name of	Registered Landfill,	1	1		J
Name of Registered Waste Hauler	•		lauler ID	No. of Wa			te Managen		f .	e f	A
EPC Technologies City, State			170	Dispo	sal Date	City, Sta	te			- 1	
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Steve Schen Kee	Title	اء: ع	lent		Signature	Sol.		දී-	15	5 - l	4
DRUE JUIENTHER	LIKE	210	VII								

A. Mac Asbestos

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Guen Rock.	-					1,253	o]	eng deminishen)	E T. s. con.	,)		_
miy(6) ·		(Esc	mby Cor ave 45	SCHETAN		or Alexandr	CESIDE	NCE	مجسنني	-		-
Bersey Four First by Britishing Company	James (8)	T	ASCE	Wo.	A.H	RE Contract	ng line		r			_
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r, State, Zip Cuda	<u> </u>	****				Prot M.	1004	Licenson No.	5.0-			
ged Manager for Manhandy Fran		·	स्थित्रके		723	1-287-6841	-	00156				=
at Date (10) 8/13/14	Scheduled	STEP 1		ip (11)	i Name	e of CSEA B					-	240
- 8/13/14	ACCUPATION OF THE PARTY OF THE		n de principitation		3 -010c	Address Hoger Shee	₫					
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empany Status history Abelianust (City S Facility Closes Nacies Dusing House Abelianus Festiment Consider of view	ack Only Orei Period of Air mat People 11	र्गसम्बद्धाः भूषमञ्जूष	NE		THE REAL PROPERTY.	State, Zp C Sparsk, Kl) (U/60/6					100
And Describe	eck Only Orac Period of Ab	r alement out:	it .		THE REAL PROPERTY.	GRANDIK, PA	A Chilateries	ah Republika Pis	Sump.			-
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And the Control Control of the Contr	To the last		MA NA	Achestos (Se Ales	Pesciji Pesciji Pesciji	E For Con II Sind For II Character II Charac	deinestiv desus of Freeding empted (5)	PARTIES STATES	Proces	Typ	. io	_
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And State of	To Fee		MA NA	P P	Desta de la constante de la co	I Foll Can	ACIA)	330 SE /00 SE 320 SE	Taranta /	Topal-	. io	_
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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2014	AUG	18	Pto	7.	_
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Date of Notification (1) 8/14/14			No	e of Building theastern		Operator	(2)	2	014 AUG	18	P.o.	7	
Agencies Notified	Type Notification			et Address 33 Long M	leadow	Road		A			07	1: 2	3
EPA DEP DOL	Initial Amended Amendment	#		State, Zip C untainside		7092			& LI	CE:10	G	'nί	
Ď DOH DCA	Emergency justification) Cancellation		- File 200	ne of Contac		77		Те	lephone N	umber			59
	Caricciation		- 14	ACILITY IN		ION				-			-
Name of Facility Where Street Address 1533 Long Meado		g Place (3)						(K-12) pter 8 (Otl	ner than K- & commer		lings,	home	es,
City (5) Mountainside	= 2						Square Feet 2600	2	of Floors	B 6	idg. A	ge	
County (6) Union				nty Code (7)			Current Use	(Prior if be	eing demol	ished)	1		
Name of Monitoring Fire	m Hired by Building	Owner (8)	TA	SCM No.			of Abatement Environme			_C			,
Street Address				****			Address Box 483, 4	E Gate D	Drive				
City, State, Zip Code							State, Zip Code wood, NJ						
Project Manager for Mo	ect Manager for Monitoring Firm						hone No. 583-8500		License	No.		- 3	
Start Date (10) 8/25/14	-	Scheduled 9/12/14	Comple	tion Date (1	1)	Name	of OSHA Mor	nitor	1	-00		i e	
Occupancy Status Duri Pacility Closed/Va Abatement Perfor Other – Describe: Scope of Work (Check ≥3 sf or ≥3 lf	cated During Entire med Outside of Non exterior work	Period of Abamal Facility H	atement				Address State, Zip Cod		th Negativ	e Pressu			
≥160 sf or ≥260 lf		Der	molition					Procedure	e nd Non-Fr	iable Pro	cedu	e	
		Isla	ocation									emen	t
Locati Asbestos-Containir <u>TO BE A</u> In Fac (13	ng Material (ACM) BATED cility	No Used Maint Custoo	rmally Solely b tenance dial Staff (12)	i Aso	estos Cor e. therma. surf		Material (ACM ns insulation, AT, or		Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
exte	rior			х	duc	t insula	ation		35 SF	х			
													_
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.i	lanta Llavila		NID	EP Waste	C	c Yards	Non	e of Regin	stered Land	dfill	L		
Freehold Cartage	ame of Registered Waste Hauler reehold Cartage				of W		TBI	Antonia Colonia Colonia di Sala	stered Lan	J.IIII			-
City, State Freehold NJ					Disp TBD	osal Date	e City	State					
Completed by A. Scott Higgins		Title Owner	/Presid	dent		Signatu	re // ~			Date 8/14/1	4		
10 12 13							w_			-		1	-

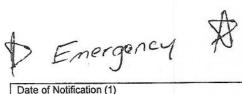
State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1)			N	ame of	f Building	Owner/Operator	(2)	- obs 5.2011	10			
8-12-14			1	$=\chi\chi$	10 111	Obil Enu	vonment	FAULY AND 148 CA	4 7		1	
Agency Notified	Type Notification	49.00 (02 - Lo	S	treet A	ddress	_	+1001		- 2000			
Ø EPA	Initial		-		ate, Zip C	HAM D	lifter	A	- 1	TY		\dashv
DEP DOL	Amended Amendment #		1 -		11	mA Da	149	a LICEN,	G		-	-
ſ	☐ Emergency (inclu	ding		7/01	f Contact		'1 1 /	Telephone Number				\dashv
□ DOH □ DCA	justification) Cancellation		"	Mil		jeci		, diaphone riames				
					-	RMATION						
Name of Facility Where				10-1	. (1 . 1	Type of Facility	(4)		70		
FORMER BALL Street Address	DOANE LUBI	16911	0	MA	9.1	1401	☐ School (K-12					
1 · 1	1				U		Other (i.e. pr	3 (Other than K-12) ivate & commercial bui	ldings,			
1 Huenne							homes, etc.)					
City (5)							Square Feet	# of Floors BI	dg. Ag	е		
Bayonne,							2,250	100 CON 100 CO			-00 B	
County (6)				OUNTY	Code (7)	(STATE USE		rior if being demolished	1)			
Hud Son						None of Abotes	nent Contractor (9	ETANK				_
Name of Monitoring Firm	1		SCM N	NO.			·		111	1		1
Street Address	etila lechnolo	345				Street Address	MITALAIN	in Dervices,	u	_	-	\dashv
123 N. Tea R	1 POBOX3	515				5787 S	tadium i	Orive				
City, State, Zip Code	1.120 110	19	1000	-1164-55-5	2	City, State, Zip	Code	0009				
South Hamol	V - [] 1	on and Maria				KALAMAN	m/.4					
Project Manager for Mor			phone		7/7	Telephone No. 269-375-	aras	License No.	8			
Start Date (10)	Scheduled				217	Name of OSHA		1				-
9-2-14		26 - 1		(,		ANAUNTICO	. / / '	+ Consultin	3 Se	Tre	11/1	0
Occupancy Status Durin			1			Street Address	, 4		1			
☐ Facility Closed/Vacate	have a restant was as		ment			14625 De	oster Ko	£.				
☐ Abatement Performed						City, State, Zip	Code		00	111000		
☐ Other – Describe:	11.4					Plainwa	ed, micr	+16AN 450	10	1000		
Scope of Work (Check a	II that apply)		9722	20020	100			Negative Pressure				
□ ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf				Reno	ovation olition		-Enclosure rebag Procedure					
E = 100 SI OI = 200 II								d Non-Friable Procedu				
		10000	ocatio	2000					'		eme ype	nt
Locatio	on of	33 25 25 25	rmally Solely	1255		Description						
Asbestos-Containin		Main	tenand	ce/		tos Containing M thermal systems		Amount (Specify	20	T	Enc	g
TO BE A			stodia Staff?	1	(1.6.	surfacing, VA	T, or	SF or LF)	Removal	Repair	apsı	Enclosure
(13	5)		(12)			other miscellan	eous)		\sigma	=	Encapsulate	ure
		Yes	No	N/A		Water and the same						
TANK # 99		X			TAN	K Coatin	iC)	2,250SF	X			
						-	~			1	_	
											-	Ш
						0.11.11	T.0. 75	-td c - dell			_	
Name of Registered Wa	. 1 . /	IDA		aste H	auler	Cubic Yards of Waste	Name of Regi	/	16	1		
HAZMAT Enui	runmental6	OF	166	5		30		Acres Land	1+11	//		
City, State	1	1				Disposal Date	City_State	+ NIM				
Buttalo N	7					9/30/14	Fair po	Da	10			
Completed by	O Title Direction	RA B	1/01	tin	NAT	Signature	(X'-71		3-12	~ /	4	
ASBET 10/10			s form	for asl	bestos lic	ensure exempted	activities.	100	, 10	-1	ı	

Aug 13 14 02:32p Resource Management

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2014 AUG 18 AM 7: 500	OTIFICATIO (Pursuant	n of as	lew Jersey BESTOS AE .C. 6:60 and	3ATEMEN 12:120)	DOL.	- 10	DA	Y			
Date of Nettication (1)			Owner / Operate	. 1		4)	/				
	Ken	nedy Univ	ovally Hospital	or (2)	+ 1019/	SI	14	7			
Agencies Notified Type Notification	Street	Mt Address	-		1 60 116	11/1		=			
1 ==	ZZZ97	State & Zip	Ill Campus		WAIVER	ממם	2				
DOL Initial (2°°) DOL Amended (2°°) DOH Semergency Consolidate	Che	rry Hill, NJ	08002			ITA	UV	ED			
DCA Cancellation	Nam			15	"@lamba	ana l	larent				
☐ DCA ☐ Cancellation	Ma.	Sharon Pe	ters		32						
Name of Emplits Marines And	FA	CILITY IN	FORMATION			+					
Name of Facility Where Absternant is Taki Kennedy University Hospital	ing Place (3)		Type of Faci	lity (4)		1		_			
Street Address			School (<i>'</i> :					
2201 Chapel Hill Campus			Diber (I	oter B (Other	inan K-12) Ommerciel buildin						
			Square Feet	# DIF				9tc.)			
City (5) County (Code (7)	250.00		3	Bidg. Age					
Cherry Hill, NJ 08002 Camde	n				demolished)	1	52				
Name of Manifestor The Life of the			Hospita			1					
Name of Monitoring Firm Hirad by Building Criterion Laboratories, Inc.	Owner (8)	ASCM No		tement Contr	actor (8)						
Street Address			Resource	Managemen	t Group, LLC	ļ.					
3370 Progress Drive, Suite J			Street Addres		- 885		-				
City, State & Zip Code			2115 Hamilton Ave, Ste 202 City, Stete & Zip Code								
Bensalem, Pa. 19020			Trenton, N.	J 08619							
Project Manager for Monitoring Firm	Telephone			Telephone Number License Number							
Mr. Mike Panepresso Scheduled Start Date (10) Scheduled	215-244	-1300	609-977-81			0118	15				
DB-14-2014 Scheduled	Completion Da		Name of OSI	A Monitor		-		-	Trans.		
Occupancy Status During Absternent (Che	CS-28-2014	1	JES Enviro	nmental Le	boratories inc			_			
racility Closed/Vacated During Ent	ire Period of Ah	atement	Street Address 2333 Route								
Abatement Performed Cutside of N	lormai Hours:		City, State &	City, State & Zip Code							
Describe: 8:30pm-12:30am			Union, NJ 0								
Facility Occupied During Abatemer Scope of Work (Check all that apply)	18										
23 sf or 23 if 2160 ef 2260 if	Der	sevetion holiton		Mini-E Glove Non-E	ontainment with No notasure Bag Procedures rempted and Non-						
Asbestos-Containing	Normally I	ion Ised	Description		Amount (Specify	Aby	tem	ent 7	ype		
Material (ACM)	Solaly I	של	Material (Ad	As bestos-Contairing Material (ACM) (I.s., thermal systems sulation, surjecting, VAT x other miscellaneous)			1 900		T		
TO BE ABATED	Maintenan Custodiai	CE Or	(l.e., thermal s			Reginari	2	Encapsulate	Enchowe		
(13)	(12)	270111	or other miscell:			SAGIS	Resport	psul	P. P. C.		
	Yes No	N/A				1		9	4		
and Floor			ACM Coating o	n beem	18 LF	X	7	T			
Srd Floor 3rd Floor			ACM Coating o	m beam	16 LF		7	H	1		
and 1 land		-	ACM Coating o	n beam	19 LF	X					
		-			-			П			
	1717	1			+	1					
Name of Registered Waste Hauter	NJ	DEP Waste	Cubic Yards	Name of Re	ilstered Landfill	لللا					
Resource Management Group, LLC	Ha	uler ID No.	of Wests						-		
Chy, State	1000	35218	TBD .	Grows Lan	dfill						
Frenton, NJ 08619			Disposal Date	City, State							
ompleted By (Print or Type)	Titl	В	Signatury	Morrisville	, PA			-			
Wr. Brian Haney		eddont	Don	Xhi	100	08/1.	3/20	14			



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

CR 4280

Date of Notification (1) 8/13/14					uilding Own Brown Pr					1050	· . / .	i	فر	
Agencies Notified Type Notification FPA Initial				reet Add 05 N la	iress incaster A	ve			201	4 AUG I	8 AA	1 7.	٠.	
EPA DEP DOL	Amended Amendmen			Street Address 205 N lancaster Ave City, State, Zip Code Margate NJ 08402									31	
X DOH	Emergency justification) Cancellation		Name of Contact Telephone Number Inc.											
				FACILI	TY INFORM	IATION								
Name of Facility Where A Barbara Brown Priva		ng Place (3)					☐ Sc	Facility (4 chool (K-12 ubchapter 8	2)	er than K-1	2)			
Street Address 205 N lancaster Ave	1						⊠ Ot et	ther (i.e. pr c.)	ivate 8	commerc	ial buildi			8,
City (5) Margate NJ 08402								177	ldg. Age 5+					
County (6) Atlantic	-		C	County County County County	ounty Code (7) Current Use (Prior if being demolished) TATE USE ONLY)									
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	No.		of Abate	ement Con	tractor	(9)				
Street Address						1 2 2 2 2 2 2	t Address Box 329							
City, State, Zip Code			×				State, Zip	Code NJ 080	91		-			
Project Manager for Monitoring Firm				elephon	e No.	Telep	ohone No	No. License No.						
				Completion Date (11) Name of OSHA Monitor										
8/14/14 8/15/14				Same Street Address										
Occupancy Status During Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire	e Period of A	batem	ent			State, Zip							
Scope of Work (Check A	II That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoliti				Min Slo	Containmoi-Enclosure vebag Production-Exempte	e cedure				е	
		le le	Locati	on			1101				The state of the s	Abate	ement	t
Location	n of	117.553	Normal	6298		Description	on of				-	1)	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used Maint Custod				nce/	(i.e. th	Containing ermal syste surfacing, \	ning Material (ACM) An ystems insulation, (S		Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
Kitchen	area	Yes	No	X		Pipe Insu	lation			24LF	x			
2nd floor b	edroom					pipe Insu	lation			8 LF	x			
				-							-	-		
Name of Desistered 18/2	ento Haudar		L .	I IDED W	Vaste	Cubic Yards		Name of	Regis	tered Lanc	ifill			
Name of Registered Waste Hauler United Containers			H	NJDEP Waste Hauler ID No. 22459 Cubic Yard of Waste			G.R.O.W.S.							
City, State Elm NJ						Disposal Da 8/15/14	Date City, State Morrisville PA 19067							
Completed by Anthony T Perna		Title Pres	ident			Signet	Date 8/13/14			4				



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

Date of Notification (1) 8/14/14		Name of Building Owner/Operator (2) Township Of Pemberton																	
Agencies Notified Type Notification				Street Ad 500 Pe	dress mberton	- Brow	vns M	ills Rd	2014 A	UG	18 A	H 7	: 5	2					
EPA DEP DOL	Initial Amended Amendment #		_ [City, State, Zip Code Pemberton NJ 08068					A. Silon Inc.										
DOH DCA		Name of Contact Telephone Number Phil Sager																	
V (F " 114		DI (0)		FACIL	ITY INFO	RMATIO	N	-	(F. 712 (4)			****	Santa						
Name of Facility Where a Fire Damage Home		Place (3)						Parents.	Facility (4)										
Street Address 316 Seminole Trail								SI SI	ubchapter 8	(Othe			buildi	ings,	home	s,			
and the state of the control of the state of								et	c.)										
City (5) Pemberton NJ 080	68			Square Feet 1000+					-	1	Floors		35		ge 				
County (6) Burlington	93 33			County Code (7) Current Use (Prior if being d						ng demo	nolished)								
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCM No. Name of Abatement Contract Pernaco Inc.						actor	(9)	K-12) hercial buildings, homes, Bldg. Age 35+ holished) se No. 27 tive Pressure Friable Procedure Abatement Type Removal Removal							
Street Address			<u> </u>				Street	Address											
City, State, Zip Code								Box 329											
Oity, Otato, Zip Oode									NJ 0809	1									
Project Manager for Monitoring Firm				Telephor	ie No.			phone No. License No. 6-753-9800 00727											
Start Date (10) Scheduled (10) 8/27/14 9/1/14				Completion Date (11) Name of OSHA Monitor Same															
Occupancy Status Durin	e)	Street Address																	
Abatement Perform	cated During Entire P ned Outside of Norm	eriod of A al Facility	batem Hours	ent		ŀ	City, S	State, Zip	Code			_							
Other – Describe:						-													
Scope of Work (Check /	All That Apply)						-	7							,				
				rovation Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proce															
		Τ.						i Non	-Lxempted	() ain	1 14011-1	Tiable							
Locatio	n of		lormal	Solely by tenance/ (i.e. thermal system				on of						Ту	ре				
Asbestos-Containing TO BE AB In Fac	g Material (ACM) BATED	Mai	intenar					ing Material (ACM) stems insulation,		(5	mount Specify		Rer	Re	Enca	End			
(13)			(12)	,			surfacing, VA other miscellar				OI LI)		noval	pair	sulat	osure			
		Yes	No	N/A											TO.				
Exterior Sidind				x Exterio			erior Siding			12	00 SF		x						
																_			
			iv.	-			*									_			
Name of Registered Wa	aste Hauler		N	JDEP W	/aste	Cubic `	Yards		Name of F	Registe	ered Lan	ndfill				L			
United Containers			100000	lauler ID 2459	No.	of Was	ste	G.R.O.W.S											
City, State Elm NJ						Dispos 9/1/14	al Date	Oate City, State Morrisville PA 19067											
Completed by Anthony T Perna Preside						s	ignatur	e l				Date 8/1	e 4/14	1		Enclosure			

VIA U.S. HAil

Cu# 1093

State of New Jersey NOTIFICATION: OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:50 and 12:120)

1	o . m 7: 54	A CO	Pursuant to NJAC	8:60 and 12:12	. (0)		
2014 AL	JG 18 FM 7: 34	1111		Owner/Oberake.	2) (116	
	Date of Notification (1)	3/14/14	Street Askiness	1130	4 honey	1	: *
1	Miles of the same	e Notification	P.O. 3	0x 269	8 :-	· · ·	
	FELV 101	nilial Amended	City, State, Zip (Today . M.	0. 67691 =	2698	
	DDOL D	Arnendineni# Smeriency (including	Name of Guntac	1 1	i plesteine	one Number	
	G DOH .	pistification) ancellation	IND H.	MANONE	4		
	LIDUA	•	FACILITY INF	ORMATION .	Type of Facility (4)		
	Name of Facility Where Abate	ament is Taking Place (3)		C School (K-12)	Boom IC-121	
	A Administration of the Control of t				D Subchapter & (Other D Other (i.e. private & c	commercial buildings.	
	Street Address CUMDE	RIAND C	WI SI	-	nomes, etc.) Source Feet # of F	loors Bidg. Age	
	CRy (5)	CU L			Current like (Pdor if be	A KO	——
	County (6)	to koto.	County Code (7) (STATE USE	CESIL	YEUT	
	JUNU.)	ASCM No.	Name of Abaten	rent Contractor (9)		
	Name of Mordoring Firm Hist (8)	et by binning Comm		NOUAL Street Address	=ch loc		-
	Street Address	:.		120. KG	× 814		
	City, State, Zip Code			City, State, Zip	DIMOR No	D. 08857	
			Telephone No.	Telephone No.	39x7500	3080G -	
	Project Manager for Manifold			Name of OSH	BEOURIUS .	3000	•
	Start Date (10)	Scheiduled Gorn	plusion Date (11)	1 AUCU	Edn INC	<u> </u>	
	08/25/14 Occupancy Status During A	betenrent (Chuck only o	me)	Street Address	0x 214.	•	
	1 4	man Barbari At i		City, State, Zip	Code NOE No	J.088S7	
	COthet - Describe:	• .		1010 B	Containment with Nega		-
	Scope of West (Check all 8	ent supply)	D Renovation	· FAI Mile	i-Enclosure · · ·		-
	02350231 021605022601	3 2	9 Demoition	- D No	webag Procedure n-Exempted (*) and Non	-Priekle Procedure	Abelement Type
	H210031312	-:	is Location			•	
	Location		Normally Used Solely by Maintenance	Description bestos Containing	SAR-PROPERTY (UPV-PUIT)	Amount (Specify	Encapsulate Repair
٠	Asheming Containing	TED	Custodial Staff?	Le., themal system suifacing. V other miscali		SFor LF)	sulfate ovat
	IN Facility (13)	y .	- (12)	Cilies Represe	-	•	444
			Yes No NA	989	HOOR ILL	20 5/-	H
			XX	TUNEWY	- TADWAY)	30 S/F	
	12+100KL			<u> </u>			
			NJDEP Waste Haufer	Cubic Yards	of Name of Registers	d Landill	
	Name of Registered Wash	Hauter	78501	Waste (US:	
	NOVATECH	1 bit		Disposal Dat	Y Tongeson	JE YA.	4
	Cay, State Boil	GE 123	, G88S7	09 26/	h // (Deales	3/14/14
	Combisted by	NO THE YOU	SIDENT	1 40	Himto		1
	CARLOS HME	Do mot	use this form for asbesh	s icensure enam	mou attended		a I