State of New Jersey

PAII) NO			TION	OF ASE	ew Jersey BESTOS ABAT C 8:60 and 5:16		DECE		\mathbb{V}	E	
Date of Notification (1)				Name	of Building	Owner/Operator (2)	AUG 1	8 2	2017	į	1
08 / 15 /	17				and the Property of Property of Party of State o	king & Disposal		and ent.	21	1	7 9	
Agencies Notified Type Notif	ication		-		Address				-	1		
⊠ EPA Initial	ication				Box 136	2		ASBESTOS LICEN)L &	23
⊠ DOLWD ☐ Amend	ed		-		CONTRACTOR ACCORD		L.	LIUEI	ADIIA	<u>u</u>		
□ DOH Amend	ment #	_			tate, Zip C							
	ency (includ	ing	-		I, NJ 077							
(NJAC 5:23-8) justifica					of Contact			Telephone Numb	er			
□ Cancer	lation			Dou								
Name of Earlie Allege Alegaria	T-1: DI	- 10		FAC	CILITY IN	FORMATION	T	(4)				
Name of Facility Where Abatement is	aking Pla	ice (3	3)				Type of Facility					
Residence							School (K-	r 8 (Other than K-12)				
Street Address								private and commerc	ial bu	ilding	S,	
City (5)							Square Feet	# of Floors	Blo	dg. Ag	ge	
Lakewood							1800	1	(35		
County (6)				Coun	ty Code (7)	(STATE USE ONLY)	Current Use (F	Prior if being demolish	ned)			
Monmouth							Residence)				
Name of Monitoring Firm Hired by Bu	ilding Own	er (8)	1	ASCM	No.	Name of Abateme	ent Contractor (9)				
Guardian Contracting, Inc.						Guardian Co	ntracting, Inc					
Street Address						Street Address						_
1889 Rte. 9, Unit 61						1889 Route 9	, Unit 61					
City, State, Zip Code						City, State, Zip Co	ode					
Toms River, New Jersey 0875	55					Toms River,	New Jersey 0	8755				
Project Manager for Monitoring Firm	V		Tele	phone I	No.	Telephone No.		License No.				
Nicholas Fernicola			73	2-349	-9932	732-349-9932		00624				
Start Date (10)	Scheduled	Con	nplet	ion Dat	te (11)	Name of OSHA M	lonitor					
08 /25 /17	08	1	29	/ _	17	E.M.S.L. Ana	lytical					
Occupancy Status During Abatement	(Check on	ly one	e)			Street Address					10.50	
□ Facility Closed/Vacated During Er	ntire Period	of Ab	oater	nent		1056 Stelton						
☐ Abatement Performed Outside of						City, State, Zip Co	ode					
Time of Abatement:AM	PM/		PM-		AM	Piscataway, I	New Jersey 0	8854				
Scope of Work (Check all that apply)						200						
☐ >3 sf or >3 lf		Reno	watio	20				egative Pressure				
≥3 \$1 61 ≥3 11 ≥160 sf or ≥260 lf		Dem	7.7			☐ Glovebag	g Procedure					
			=====			☐ Non-Exe	mpted (*) and N	Ion-Friable Procedure	е			
			ocati	F. 3. 11					Ab	ateme	ent T	ype
Location of			rmal	ly by	0 - 1	Description of			Re	Re	Щ	Щ
Asbestos-Containing Material (AC TO BE ABATED	/(VI)	Maint				stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	cap	Clo
IN Facility	C			Staff?		surfacing, VAT	, or	SF or LF)	val	-	Encapsulate	Enclosure
(13)	Ye		(12) No	N/A	-	other miscellane	ous)				ate	
				-				SF	-		_	-
first floor			\boxtimes		plaster			1500 lf		Ш	Ш	Ш
] [
]										
1]										
Name of Registered Waste Hauler		1000000	JDEP V		Cubic Yards of	Name of Reg	jistered Landfill					
Guardian Contracting, Inc.			110000	auler II 20223		Waste 5	T.R.R.F.					
City, State				20223		Disposal Date	City, State		-54-5			NAME OF
Toms River, New Jersey						08/30/17	Tullytown	n, Pennsylvania				

Completed By (Print or Type)

Nicholas Fernicola

Project Manager

Signature

Date



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		AUG	1 (9_	2017		
	*2 SBE	STO	C/	01	VITA() 8 JC	

D. ((1) (5); (4)									AUG	1 9	21	117	
Date of Notification (1)	45 /	47			1000		ng Owner/Operator (2)				/	lane
	15 /	17			Ma	ryann Rı	ubino		1 5) 4	7	1	
	Type Notific ☐ Initial	ation			Stree	t Address			ASBEST Lic	OS C CENS			- &
Company Committee Committe	☐ Amended				City.	State, Zip	Code						
⊠ DOH	Amendm				2550	arta, NJ (
DCA (NJAC 5:23-8)	Emergen justificati		gnibi		1000	of Contac			Telephone Num	ber			
(16/10 0.20 0)	☐ Cancella				Ma	ryann Rı	ubino		Totophono Ham	501			
					FA	CILITY IN	NFORMATION	-					
Name of Facility Where At	patement is	Taking F	Place	(3)				Type of Facility ((4)			<u> </u>	
Residence								☐ School (K-12					
Street Address								Subchapter 8	(Other than K-12 ivate and comme) .	ildin		
								homes, etc.)	ivate and comme	Clai Di	anamg	15,	
City (5)		•						Square Feet	# of Floors	BI	dg. A	ge	
Lavallette								1800 sf	1		65		
County (6)					Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)			
Ocean								Residence					
Name of Monitoring Firm H	Hired by Build	ding Ow	ner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
N/A							Guardian Co	ntracting, Inc.					
Street Address							Street Address						
							1889 Route 9	, Unit 61					
City, State, Zip Code							City, State, Zip Co	ode					
							Toms River,	New Jersey 087	755				
Project Manager for Monito	oring Firm			Tele	phone	No.	Telephone No.		License No.				
							732-349-9932	() 	00624				
Start Date (10)		Schedule					Name of OSHA M						
					<u> </u>	17	E.M.S.L. Ana	lytical					
Occupancy Status During							Street Address						
☐ Facility Closed/Vacated☐ Abatement Performed C						a mara	1056 Stelton						
Time of Abatement:							City, State, Zip Co						
		/			-	•	Piscataway, I	New Jersey 088	354				
Scope of Work (Check all t	nat apply)						☐ Full Cont	ainment with Neg	ative Pressure				
≥3 sf or ≥3 lf			Rer				☐ Mini-Enc	losure	ativo i rossuro				
≥160 sf or ≥260 lf		\boxtimes] Der	noliti	on		☐ Glovebag	g Procedure mpted (*) and Nor	-Friable Procedu	re			
		T	Is	Loca	ion		Z HOIT EXC	Impled () and itto	1-1 Habie I Tocedu		atem	ant T	VDO
Location of			N	orma	lly		Description o	f		100	1		
Asbestos-Containing M TO BE ABAT		1)			ely by nce/		stos Containing Ma		Amount	Rem	Repair	nca	Encl
IN Facility				odial	Staff?	(1.6	e., thermal systems i surfacing, VAT,		(Specify SF or LF)	Removal	air.	Encapsulate	Enclosure
(13)		-	T	(12)	_	-	other miscellane		J. J. L. /	_		ilate	rë
		Y	'es	No	N/A								
exterior	xterior [os siding		1700 sf				
								П	П	П	П		
		Tr	7	П	П								
			7		<u> </u>					믐			
Name of Registered Waste Hauler						Maata	Cubia Varda af	Manage			Ш	Ш	Ш
Guardian Contracting				1,745	JDEP I lauler II		Cubic Yards of Waste	Name of Regist	ered Landfill				
City, State	9, 1110.				20223		3	T.R.R.F.					
Toms River, New Jers	SAV						Disposal Date	City, State	D				
							09/07/17	Tullytown,	Pennsylvania				
Completed By (Print or Typ	e)	Title					Signature		Da	te	-		
Nicholas Fernicola		Proj	ect	wan	ager			1 etan	7	81	15	11	7

D)	E	C			\mathbb{V}	E	
	-,	AUG	1	8	2011		
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<i>F</i>	1201	=S10	CEN	SIN	VIA VG	OL 8	_
12 E =		55-11					_
Teler	phon	e Niir	nhor				

Date of Notification (1)			Name of Building Owner/Operator (2)							-111		
08/15/	17	-			alph Gian		(2)	ROL	17	7		
Agencies Notified Type Notifi	ication			Stree	et Address			ASBESTO	SC	ONT	ROL	_i_8
⊠ EPA □ Initial									ENS			
☑ DOLWD ☐ Amende ☑ DOH Amende				City,	State, Zip	Code						
□ DCA □ Emerge		udina		Во	onton, N	J 08005						
(NJAC 5:23-8) justifica		Julig		Nam	e of Conta	ct		Telephone Num	hor			
☐ Cancell	ation			Ra	lph Gian	pietro						
				FA	CILITY	NFORMATION		_				
Name of Facility Where Abatement is	Taking F	Place	(3)				Type of Facility	(4)				
Residence							School (K-1	2)				
Street Address							Other (i.e., phomes, etc.	8 (Other than K-12 private and comme) rcial b	uildin	gs,	
City (5)		J					Square Feet	# of Floors	F	ldg. A	ne	
Lavallette							600 sf	1		65	ige	
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	shed)			
Ocean							Residence	3	/			
Name of Monitoring Firm Hired by Bui	lding Ow	ner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)				-	
N/A							ntracting, Inc.					
Street Address						Street Address	<u> </u>		-		_	
						1889 Route 9	, Unit 61					
City, State, Zip Code						City, State, Zip Co	ode				_	
						Toms River, I	New Jersey 08	755				
Project Manager for Monitoring Firm	the second		Tele	phone	No.	Telephone No.		License No.				
						732-349-9932		00624				
	Schedule					Name of OSHA M	onitor					
				_ / .	17	E.M.S.L. Anal	ytical					
Occupancy Status During Abatement (Street Address						
Facility Closed/Vacated During Enti	ire Period	of Al	oater	nent		1056 Stelton						
Abatement Performed Outside of N Time of Abatement:AM	ormal Fa	cility I	Hour:	s - Des	cribe	City, State, Zip Co	de					
			ı ıvı-		Alvi	Piscataway, N	lew Jersey 08	854				
Scope of Work (Check all that apply)						□ Eull Cont	oin-re-t itt bt					
≥3 sf or ≥3 lf		Reno	vatio	on		☐ Mini-Encl	ainment with Neg	lative Pressure				
≥160 sf or ≥260 lf	\boxtimes	Dem	olitio	n		Glovebag	Procedure					
		le L	ocati	on.		⊠ Non-Exen	npted (*) and No	n-Friable Procedur	е			
Location of			rmal			Description of			Ab	atem	ent T	ype
Asbestos-Containing Material (ACN	1)	Used Maint			Asbe	stos Containing Mat	erial (ACM)	Amount	Rer	Repair	En	E
TO BE ABATED IN Facility		Custo			(i.e	, thermal systems in surfacing, VAT,	nsulation,	(Specify	Removal	pair	caps	Enclosure
(13)	1		12)			other miscellaneo	ous)	SF or LF)	<u>a</u>		Encapsulate	лге
4	Y	-	No	N/A			(Ф	
exterior			3		asbesto	s siding		600 sf				
] [
] [
									П	П		
Name of Registered Waste Hauler				DEP V		Cubic Yards of	Name of Regist	ered Landfill				
Guardian Contracting, Inc.			15 A - 17 3 3	uler ID 20223	CONTRACTOR CONTRACTOR	Waste	T.R.R.F.					
City, State		-0223		3 Disposal Date	City, State				-			
Toms River, New Jersey						09/08/17		Pennsylvania				
Completed By (Print or Type) Title						Signature	^	Date	9 /	1	and I work	
Nicholas Fernicola	Proje	ct M	ana	ger		1.5	/	1 8		1,-	7	
SB-41						-	1-1-1	1	113	11	1	

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

Check # 3040

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

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7) [Pursuant to N.J.A.C. 8:60-7 and 12:120-7]																
GAC Project # 060-17				-				<u> </u>		V	<u> </u>					
Date of Notification (1)					Name of Building Owne											
August	15, 20		-		RUTGERS, THE S	STATE UN	IIVERS	A 1 1 1 1	1 1	2017						
Agencies Notified		Notification IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		otion	Street Address	LIEALT				CUII	1					
□ EPA				auon tification #	ENVIRONMENTAL					_						
□ DCA				(including	27 ROAD 1, BLDG City, State, Zip Code	4000, LI	AS	BEST	SCO	TRO	La -					
X DOL			cation)		PISCATAWAY, NJ	08854			ENSI							
☑ DEP- No Longer REQUIR	RED	Cance			Name of Contact	00001	Talor	hone N	ımher							
⊠ DOH					MICHAEL SMITH,	ENV.										
					HEALTH & SAFET	Y	1									
Name of Facility Where Abatem		-i Di (0)		FACILITY IN	FORMATION											
MEDICAL SCIENCE, B					Type of Facility (4) School (K-12)											
mediane colertoe, b	LDO	1201			Subchapter 8 (other that	an K-12)										
Street Address					Solder (i.e. private & co		ildinas ha	mes etc	-)							
NEWARK CAMPUS						# of Floors:				ears						
City (5)	County (6))	Count	y Code (7)												
NEWARK	ES	SEX	(State	Use Only)	Current Use (prior if beir	ng demolishe	ed): AC	ADEMIC								
Name of Monitoring Firm Hired	by Bldg. C	Owner (8)	ASCM	l No.	Name of Contractor (9)											
ATC			009	8	GREENWOOD ABATEMENT CONSULTANTS, INC.											
Street Address		The second second				IEWENI	CONSU	LIAN	IS, INC	;						
3 TERRI LANE					Street Address											
					268 MAIN STREET											
City, State, Zip Code					City State, ZipCode											
	8016				BUTLER, NJ 07405											
Project Manager for Monitoring I BRIAN KEARNY	<u>Firm</u>	Telephone 1			Telephone Number		Licens	se Numb	er							
DRIAN KEARNT		609-386	-8800		973-492-0477	00840										
Scheduled Start Date (10)		Scheduled (Completi	on Date (11)	Name of OSHA Monitor		1 0004									
08/25/17		08/28/17			1	_										
Occupancy Status During Aba	tement ((Sheek only o	20)		ENVIROVISION, IN Street Address	C.										
☐Facility Closed/Vacated Dur				nt												
☐Abatement Performed Outs					20-21 WARGARAW	ROAD										
Describe					City, State, Zip Code											
Other – Describe:																
Schedule: 5PM - 5AM (24	HOURS	& WEEKE	NDS A	S NEEDED)	FAIRLAWN, NJ											
Scope of Work (Check all that ap	pply)															
					1	☐Full Conta	inment w	ith Nega	ative Pre	ssure						
$\square \ge 3$ sf or ≥ 3 If				▼Renovation	_	☐ Mini-Enc		Ü								
\boxtimes \geq 160 sf or \geq 26	60 If			Demolition		Glove ba										
Leasting of Asharts October	1			1 =		X Non-Exe					edure					
Location of Asbestos-Containing Material (ACM) in Facility (13)		cation Normall by by Maint./Cu			pestos Containing Material al systems insulation, surfac	ing (Spe	int cify SF	Abaten	ent Type	2						
	Staff?	(12)		VAT, or other mis-		or LF		Remove	Repair	Encap	Enclose					
	YES	NO	NA													
E-506 Suite		X		VAT		975	SF	X								
Name of Reg. Waste Hauler		NJDEP Was		r ID #	Cubic Yards of Waste:	20 CY		of Regist								
See Hauler Below #1 & 2		See Below					G.R.C	D.W.S.	North I	andfi	iII					
Hauler #1) Greenwood Abateme	ent Consu	ıltants, Inc. –	Butler, 1	NJ 07405		Disposal D	ate_	100	City, Stat	_						
NJDEP # 12561 Hauler #2) Newark Carting, Inc	Namori	NI04500							100 New							
NJ DEP # 4509	, incwark	110 04309			08/28/2017 Rd. Morrisville, F					ra						
					215-736-1700											
Completed by (Print or Type)		tle ENIOR PF			Signature Date											
RAYMOND C. PEDALIN	T	Raymond C. Pe	Edalino	Augu	ıst 15,	2017										
	IV	IANAGER			O Cagmona O. S edulino											

PAID

Date of Notification (1)					Name	e of Buildin	α Oν	vner/Operator ((2)	LLIE	110	,05	_	
8 /	16 /	17						ort Corp.	(2)		7 11	П	7	-
Agencies Notified	Type Notific						-, .	от сотр.		EGE				111
⊠ EPA	☐ Initial	Jation				t Address	۸ ۵	alasas Divid		⟨¹				1
☑ DOLWD	☐ Amende	ed						alzono Blvd		AUG 1	8 20	17		111
⊠ DOH	Amenda	The second control			200	State, Zip (_ MUU	0 20	19	-	-
DCA	☐ Emerger		ıding			mden, No		103		1				
(NJAC 5:23-8)	justificat Cancella					Mayer	A			Lelebfohe M	imbe(I.		&	
					1		IFO	DMATION						
Name of Facility Where A	hatement is	Takina P	lace	(3)	FA	CILITYIN	NFOI	RMATION	Tune of Facility	(4)				
Holtec Pavilion - Fo				(3)					Type of Facility School (K-1)	겠는 당				
Street Address	into: r amp	5 110430	•						Subchapter	8 (Other than K-	12)			
2500 South Broadw	/ay							+	Other (i.e., p	rivate and comm	nercial b	uildin	gs,	
City (5)			17.00						Square Feet	# of Floors	Te	ldg. A	no.	
Camden									oqua.o.r.cot	1	-	50+	ge	
County (6)					Cou	nty Code (7	7)(STA	ATE USE ONLY)	Current Use (Pr	ior if being dem	olished)	-	-	
Camden								*	Former Pur					
Name of Monitoring Firm	Hired by Buil	ding Ow	ner (8)	ASCM	No.	Na	me of Abateme	l ent Contractor (9)	53				
Mott MacDonald					001	40			nvironmental					
Street Address								eet Address						
111 Wood Avenue S	South						1	121 N. Beth	lehem Pike - S	uite 60				
City, State, Zip Code							Cit	y, State, Zip Co	ode					
Iselin, NJ 08830							S	Spring House	e, PA 19477					
Project Manager for Moni	toring Firm			Tele	phone	No.	Tel	ephone No.		License No.				
Thomas J Gulya				100.00		2463	2	15 542 7000		00847				
Start Date (10) 9 / 4 /		Schedule 9				ite (11) 17	1000	me of OSHA N	lonitor					
Occupancy Status During					_ :			eet Address						
☐ Facility Closed/Vacate					ment		Control of the last of the las		ehem Pike - S	uita 60				
☐ Abatement Performed	Outside of N	ormal Fa	cility	Hour	s - Des	scribe				uite 60				
Time of Abatement: 7:	:00AM- <u>5:00</u> F	PM/	_PM-	-	_AM City, State, Zip C									
Scope of Work (Check all	that apply)							pring riouse	5,17 15411					
≥3 sf or ≥3 If				novati	7.7			☐ Full Cont ☐ Mini-Enc	ainment with Neglosure	gative Pressure				
☐ ≥160 sf or ≥260 lf		\boxtimes	Der	nolitio	on			☐ Glovebag	g Procedure mpted (*) and No	n-Friable Proce	dura			
		T	Is	Locat	ion				, , , , , , , , , , , , , , , , , , , ,			atem	ent T	Type
Location				orma	lly ely by			Description o					F	1
Asbestos-Containing N TO BE ABA		1)		ntena				Containing Ma rmal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility		(Custo		Staff?	(1.0	S	surfacing, VAT,	or	SF or LF)	oval	=	nsd	osur
(13)		_		(12)	NI/A	-	oth	ner miscellane	ous)				ate	O
Electrical Panels			es	No	N/A		_					-	_	-
Liectifical Palleis			Iransite	e Pa	nels & asso	ciated Putty	130 SF			Ш				
			1											
]											
]											
Name of Registered Waste	e Hauler			1 7 3 5 7 3	JDEP \		Distribution of the Control of the C	oic Yards of	Name of Regis	tered Landfill		1		-
Geppert Recycling				Н	auler II	O No.	Was	ste	Western B	erks Commur	ntiy Lai	ndfill		
City, State							Disp	osal Date	ate City, State					
Hatfield, PA							9/	30/17	Birdsboro,	PA 19508				
Completed By (Print or Typ	ed By (Print or Type) Title							Signature	e // Date					
Patricia Visco		Offic	e M	anag	ger			Pater	icu VIDSO 3/16/17					

0- 111			s	tate of N	ew Jerse	еу		IINI		6 E	U	M [5 11
MOCH				N OF ASI t to NJAC				K		110 1	0 0	049	
Date of Notification (1) 8-17-17			Name o	of Building	g Owner/	Operator	(2)		A	UG 1	8 2	JI#	1
Agencies Notified Type Notification	1			Address	Dood				ASBES				_&
X EPA X Initial				Hadley						LICEN	SIN	ì	
X EPA X Initial Amended Amendmen				ate, Zip C Plainfie		w Jerse	y 07080		5.0				
➤ DOH justification DCA Cancellatio		3		of Contact				Те	elephone	Numbe	·		
DCA Cancellatio	n			rt Pond									
Name of Facility Where Abatement is Takin	na Place	(3)	FAC	ILITY INF	ORMAT	ION	Town of Footile	/4\					
McCarter Switching Station	ig i lace (.0)					Type of Facility						
Street Address	-						School (K-		ner than	K-12)			
478-492 Central Avenue							X Other (i.e.	private	& comm	ercial bu	uilding	s, hom	nes,
City (5)	Water State of the Control of the Co						etc.) Square Feet	# (of Floors	T	Bldg.	Age	
Newark, New Jersey 07107							100,000	5				ears	
County (6) Essex				Code (7) USE ONLY	n		Current Use (Pr Not in use	ior if be	ing dem	olished)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASC	M No		Name	of Abatement Co	ntracto	r /Q)	0.412.0			
Omega Environmental Services In		6:		., ,,,,,			ercy Group In		(3)				
Street Address 280 Huyler Street							Address Burns Avenu	P					
City, State, Zip Code South Hackensack, NJ 07606	***************************************					City, St	ate, Zip Code						
Project Manager for Monitoring Firm	-		Talaaha				agh NY 1179	3					
Geiser Fajardo			Telepho 201-48	ne No. 31-6209		Telepho 516-8	76-0020		Licens 0108				
Start Date (10) 8-28-17	Schedul 12-31-		npletion	Date (11)			of OSHA Monitor ercy Group Ir	nc	-				
Occupancy Status During Abatement (Chec	ck Only O	ne)				Street A							
Facility Closed/Vacated During Entire Abatement Performed Outside of Norn	Period of	Abaten	nent			3000	Burns Avenue	е					
Abatement Performed Outside of Norm Other – Describe: Facility scheduled for	nal Facilit	y Hours	3	су			ate, Zip Code	12					
Scope of Work (Check All That Apply)	(0)					VVdilla	agh, NY 1179	13					-
≥3 sf or ≥3 lf		Renova	tion			×	Full Containm	ent with	n Negativ	re Press	ure		
≥160 sf or ≥260 lf	×	Demolit	ion			×	Mini-Enclosure Glovebag Pro-	е	Ü				
						×	Non-Exempte		d Non-F	riable Pr	ocedu	re	
		Locati										tement	t
Location of	1,000,000	Normal ed Sole	,			scription o					T-	уре	Τ
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenar	nce/				iterial (ACM) insulation,		mount Specify	70		Ē	m
In Facility (13)	Cus	todial S (12)	Staff?	(0.50	surfac	cing, VAT	, or		or LF)	Remova	Repair	caps	Enclosure
(13)	Yes	No	N/A		otner m	niscellane	ous)			oval	air	Encapsulate	sure
MER Roof Flashing	103	140	X	F	Flashin	g Roof	level	32	20 SF	X	-	"	
Basement through 5th Floor		-15	X			Fittings			71 LF	X	+		
Basement through 5th Floor			X	12							-		
Loose ACM debris			X	12			9 VAT		950 SF	_	-		
Name of Registered Waste Hauler		l NI		aste		ellaneo			20 SF	X			
Horwith Trucks Inc.		H	NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste 6227 300 Minerva Enterprises										
City, State				al Date	City, State	9							
Northampton, PA 18067			12-31		Waynes		ОН						
Completed by Robert Lewin	Title Envir	onme	ntal Co	ordinate		gnature	1			Date 8-17-1	7		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT														
Chall	7 P	A	NOT	BESTOS ABAT AC 8:60 and 5:1		DEG	E							
Date of Notification (1)	1	dille attition	No. of Street, or other Persons		Name	of Buildin	g Owner/Operator ((2)						
	16 /	17	_		1 30		ice Electric and	100 A	AUG AUG	1 8	20	17	1	
Agencies Notified	Type Notific	ation			Stree	t Address				11111			+	
⊠ EPA					400	00 Hadley	Road, Floor 2		ASBESTO	18.0	ONT	BUI		
⊠ DOLWD	Amended				City, S	State, Zip C	Code		Lic	ENS	NING	1101	_ 0	
☑ DOH ☐ DCA	Amendm Emergen	-	oludina		Soi	uth Plain	field, NJ 07080		And the second s	CONTRACTOR DESTRUCTION OF THE PARTY OF THE P	III MARKET CHEST UNI	apaga para mana mingan ka		
(NJAC 5:23-8)	justificati	icy (iiii ion)	ciuuliig	3	Name	of Contac	t		Telephone Num	per				
	☐ Cancella				Ro	n Melosk	ie		1					
		- Mr			FA	CILITY IN	IFORMATION		_ 2		5			
Name of Facility Where A	batement is 7	Taking	Place	(3)		0.2	Ortinativoit	Type of Facility	(4)					
Commercial								☐ School (K-1)	NS. 74					
Street Address								Subchapter	8 (Other than K-12					
246-250 Passaic St	reet							Other (i.e., phomes, etc.	orivate and commer)	cial bu	uilding	IS,		
City (5)			===72					Square Feet	# of Floors	BI	dg. A	ge		
Passaic														
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	rior if being demolis	hed)				
Passaic														
Name of Monitoring Firm	Hired by Build	ding O	wner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9))				-	
Bio Terra Solutions							ALL PRO MA	NAGEMENT L	.LC					
Street Address							Street Address							
P.O. Box 1224							27 Outwater	Lane					l l	
City, State, Zip Code							City, State, Zip Co	ode						
Union, NJ							Garfield, NJ							
Project Manager for Moni	toring Firm	70		Tele	phone	No.	Telephone No.		License No.					
Rick Estaquio				97	73-494	-3762	973-928-4888		1188					
Start Date (10)	18	Sched	uled C	omple	tion Da	te (11)	Name of OSHA M	lonitor	3333				_	
08 /28 /	to the same of the				_ /		ALL PRO MA	NAGEMENT L	LC					
Occupancy Status During	Abatement (Check	only o	ne)			Street Address							
□ Facility Closed/Vacate							27 Outwater I	Lane						
Abatement Performed	Outside of No		A STATE OF THE STA				City, State, Zip Co	ode						
Time of Abatement: _	AM	PN	n/	_PM-		AM	Garfield, NJ 07026							
Scope of Work (Check all	that apply)												_	
☐ >3 sf or >3 lf			Пр	novati	0.0			ainment with Ne	gative Pressure					
≥160 sf or ≥260 lf			☑ De				☐ Mini-Enc							
VIII II							Non-Exer Non-Exer	mpted (*) and No	n-Friable Procedu	е				
				Locat Norma		Ì				Ab	ateme	ent T	уре	
Location Asbestos-Containing I		1)		d Sole		Asha	Description o stos Containing Ma		Amount	R	Re	Щ	Щ	
TO BE ABA	TED	,		intena			., thermal systems i		(Specify	Removal	Repair	Encapsulate	Enclosure	
IN Facilit (13)	У		Cus	(12)	Staff?	88	surfacing, VAT,		SF or LF)	Val	"	Sul	sure	
(13)		1	Yes	No	N/A		other miscellane	ous)				ate		
Roof		□ □ ⊠ Roofing Material 7,430 SF										П	П	
							* 10 may 20 miles (1997) 3 2 de 17							
		-									-	_		
		_								Ш		Ш		
Name of Registered Wast				1323	JDEP \		Cubic Yards of	Name of Regis	stered Landfill					
Century Waste LLC				H	auler II 32797		Waste As Needed	IESI Bethle	ehem Landfill					
City, State					VI		Disposal Date	City, State	ity, State					
Elizabeth, NJ							TBD	Bethlehem	ı, PA					
Completed By (Print or Ty	rpe)	Title					\$ignature/	1	Da	te /	Î			
Allen Monchik		Pr	oject	Man	ager		1(1/1/)	1	_ 5	3/11	0/1	17		

014 011	0		NOT	IFIC	ATIO	State of I	New Jer	sey OS ABAT	TEMENT						
Un 246	D	P	AI					0 and 5:1		MEG	E				
Date of Notification (1)					Nan	ne of Buildi	ng Owne	r/Operator ((2)	11531				11	
	16 /	17			В	ayer Corp	poration	1		AUG	1.8	20	17		
Agencies Notified	Type Notific	cation			Stre	et Address		To provide the second		III LI AGO	1 0	20	1.5	-	
					10	00 Bayer	Road								
☑ DOLWD	☐ Amende	0.00000			_	State, Zip				ASBEST			ROL	. &	
☑ DOH	Amendm	and the second		.	UH 533	ttsburgh		205		LIC	CENS	ING			
☐ DCA (NJAC 5:23-8)	☐ Emerger justificat		iciuain	g	100	ne of Conta				Telephone Nun	nhor				
	☐ Cancella	(5)				ott Krall				· relebilone Hun	ibei				
						ACILITY I		ATION							
Name of Facility Where A	hatement is	Takin	n Place	2 (3)	L/	ACILIT I	NFORIV	ATION	Tues of Facility	. 74)					
Commercial	Datement 13	raking	g r lace	= (3)					Type of Facility	200 St. 50					
Street Address									School (K-1	8 (Other than K-1)	2)				
169 West 52 nd Stree	t								Other (i.e.,)	private and comme	ercial b	uildin	gs,		
City (5)		-							homes, etc.	# of Floors	10	1-1- 1			
Bayonne									Oquale I eet	# 01 F10015		ldg. A	ge		
County (6)					Col	unty Code (7VSTATE	LISE ONLY	Current Use /P	rior if being demoli	الممطاء				
Hudson					00.	anty Code ((I)(OIAIL	USE ONET)	Current Ose (P	nor ir being demoi	snea)				
Name of Monitoring Firm	Hired by Buil	dina ()wner	(8)	ASCN	1 No	Namo	of Abatama	ent Contractor (9	`					
Bio Terra Solutions	,	9		(0)	71001	1110.	1000		NAGEMENT L						
Street Address								Address	MAGEWIENT	LC					
P.O. Box 1224							52522758	Dutwater I	lana						
City, State, Zip Code		-						Enablished Mark Solver							
Union, NJ							275	itate, Zip Co							
Project Manager for Monit	oring Firm	-		Tal	ephone	No.	2000000	field, NJ none No.	07026	Tr					
Rick Estaquio	ornig i nin					4-3762		-928-4888		License No.					
Start Date (10)		Sched	uled C			ate (11)		of OSHA M		1188					
08 /28 / _	17	0	9 /	_2			The Attention of the At		IANAGEMENT LLC						
Occupancy Status During							Street	Address							
Facility Closed/Vacated	d During Enti	re Per	riod of	Abate	ement		27 0	Outwater L	_ane						
Abatement Performed Time of Abatement:	Outside of No	ormal PN					City, S	tate, Zip Co	ode						
			/u	_PM		_AM	Gar	field, NJ (07026						
Scope of Work (Check all	that apply)						_								
≥3 sf or ≥3 If ≥160 sf or ≥260 If			☐ Re ☑ De					☐ Mini-Encl ☐ Glovebag	Procedure	gative Pressure on-Friable Procedu	ire				
14 6				Loca								atem	ent T	vpe	
Location of Asbestos-Containing M		e\		Norma	ally ely by		De	escription of	f			_		_	
TO BE ABAT		1)	Ma	inten	ance/	ASD6	estos Cor e therma	ntaining Mai al systems i	terial (ACM)	Amount (Specify	em	Repair	nca	nclo	
IN Facility	7		Cust		Staff?			acing, VAT,		SF or LF)	Removal	=	Encapsulate	Enclosure	
(13)			Yes	(12) No	N/A	-	other	miscellaneo	ous)		-		late	e.	
Underground					N/A	Transit	te Pipe			200 LF		П	П		
			П				•								
											\perp		Ш	Ш	
			Ц												
Name of Registered Waste			Waste		Yards of	Name of Regis	stered Landfill		1		-				
Century Waste LLC				ŀ	lauler 3279		Waste	leeded	IESI Bethle	ehem Landfill					
City, State		N N			0210		Dispos		City, State						
Elizabeth, NJ				TBD		Bethlehem	i, PA								
Completed By (Print or Typ	Nietze .			Si	gnature//	1		ate_ /	-	1	_				
Allen Monchik		Pr	oject	Man	ager			911	1		8/	161	17	-	



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K						

Date of Notification (1)			Mos		1: 0	(0)	III AI	JG 1	0	2011	9
8/16/	17				ling Owner/Operatorsey City / Job #		The second) (U	2011	
Agencies Notified Type Notif	fication		Stre	et Addres	e		ASBES	TOO	00	TO	AL 0
☑ EPA ☑ Initial			200000		al Ave. 2 nd Floor			ICE			UL &
☑ DOLWD ☐ Amend			City	, State, Zip	Code						
The state of the s	ment #	_	1000	ACT 1000 TO 1000 TO 1000 TO 1000	y, NJ 07307						
(NJAC 5:23-8) justifica	ency (includation)	ing	_	ne of Conta	700		Telephone Nu	mher			
Cancel			D	ebby Wa	itzman		I QUEDITORIO TALL				
			F	ACILITY	INFORMATION						
Name of Facility Where Abatement is	Taking Pla	ce (3)				Type of Facility (4)				
Firehouse #10						School (K-12					
Street Address						☐ Subchapter 8 ☐ Other (i.e., pr			huildi	200	
283 Halladay Street						homes, etc.)	vate and comm	orcial	Dullull	iys,	
City (5)						Square Feet	# of Floors	1	3ldg.	Age	
Jersey City, NJ 07307											
County (6)		71	Cou	inty Code	(7)(STATE USE ONLY)	Current Use (Price	or if being demol	ished)			
Hudson						Firehouse					
Name of Monitoring Firm Hired by Bui		(8)	ASCN	1 No.	Name of Abatem	ent Contractor (9)					
Partner Assessment Corporat	ion				AbateTech,	Inc.					
Street Address					Street Address						
611 Industrial Way West					30 Maple Av	e. PO Box 25					
City, State, Zip Code	,,,				City, State, Zip C	ode					
Eatontown, NJ 07724					Lumberton,	NJ 08048					
Project Manager for Monitoring Firm			ephone		Telephone No.		License No.				
Brian Nemetz				1-9565	609-265-2107	7	00529				
Start Date (10)	Scheduled (ate (11) 17	Name of OSHA N EMSL Analyt						
Occupancy Status During Abatement (Street Address	ioai					
☐ Facility Closed/Vacated During Enti			ment		200 Route 13	O North					
☐ Abatement Performed Outside of No.	ormal Facili	y Hour	s - Des	scribe	City, State, Zip Co						
Time of Abatement:AM	PM/	PM-		AM	Cinnaminson						
Scope of Work (Check all that apply)											
≥3 sf or ≥3 If	⊠ Re	enovati	on		☐ Mini-Enc	tainment with Nega losure		SW			
≥160 sf or ≥260 lf		emolitic				Procedure (U)	ay El Cir	The state of the s			
			250000		☐ Non-Exe	mpted (*) and Non-	Friable Procedu	re			
Location of		Locat Vormal			120 2000 0			Ab	atem	ent T	уре
Asbestos-Containing Material (ACM		d Sole		Ashe	Description o stos Containing Ma		Amount	Re	Re	m	m
TO BE ABATED	Ma	intena todial S			., thermal systems i	nsulation,	(Specify	Removal	Repair	cap	Enclosure
IN Facility (13)	Cus	(12)	otan (surfacing, VAT,		SF or LF)	/al		Encapsulate	sure
	Yes	No	N/A		other miscellaned	ous)				ate	
Basement		\boxtimes		Pipe Ins	sulation		20 LF				
			П					П	П	П	
		П	П					+-			
lame of Registered Waste Hauler		_	IDEP V	Vaste	Cubic Yards of	Name of Register	ed Landfill		Ш	Ш	
AbateTech, Inc.		Ha	auler ID	No.	Waste	G.R.O.W.S. L					
City, State			18750		2 Disposal Date	Variable and the same					
Lumberton, NJ					8/25/17	City, State Tullytown, P.	A				
ompleted By (Print or Type)	Title				Signature		Dai	e i			_
Gwendolyn Trumbetti	Operati	ons C	oordi	nator	710	1 Not	Da	81	110	1.0	7
B-41				- envoltent		N. N.		1	14	11	II .

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Date of Notification (1)	-			_	Mon	no of Duildi	20.0	Owner/Operator	(2)		0 1 0	255	9	111			
	16 /	1	7		100000000000000000000000000000000000000		-	Johnson Hos			G 1 8 Chec		•				
Agencies Notified ☑ EPA ☑ DOLWD	Type Notif ☑ Initial ☐ Amend				0		t W	ood Johnson	Place	ASBES L	TOS C		OL (&			
☑ DHSS	Amend		<u> </u>	_		State, Zip				-							
□ DCA	⊠ Emerge		ncludii	ng				k, NJ 08901		1							
(NJAC 5:23-8)	justifica				1	ne of Conta	200			Telephone	Number						
	☐ Caricer	lation				risten Bel											
					F/	ACILITY II	NFC	DRMATION									
Name of Facility Where A			g Plac	e (3)					Type of Facility								
Robert Wood Johns	on Hospi	tal							☐ School (K-1 ☐ Subchapter		K-12)						
Street Address One Robert Wood J	ohnson P	lace							Other (i.e., phomes, etc.	private and cor		l buildin	ıgs,				
City (5)									Square Feet	# of Floors	3	Bldg. A	Age				
New Brunswick																	
County (6)					Cou	inty Code (7)(ST	1)									
Middlesex									Hospital								
Name of Monitoring Firm F	Hired by Bu	ilding (Owner	(8)	ASCN	1 No.	Name of Abatement Contractor (9)										
Omega Environment	tal						AbateTech, Inc.										
Street Address							Street Address										
280 Huylar Street								30 Maple Ave. PO Box 25									
City, State, Zip Code							Ci	ty, State, Zip Co	ode								
South Hackensack, I	NJ 07606						1	Lumberton, NJ 08048									
Project Manager for Monito	oring Firm			Te	lephone	No.	Te	Telephone No. License No.									
Geiser Fajardo				:	201-489	9-8700	(609-265-2107		00529							
Start Date (10)		Sched	uled C	comp	letion Da	ate (11)	Na	ame of OSHA M	onitor								
_ 8 / _21 / _	17	8	3_ /	_ 2	23 /	17	E	EMSL Analyti	cal								
Occupancy Status During A	Abatement	(Check	only	one)			Str	reet Address									
☐ Facility Closed/Vacated							2	200 Route 130) North								
Abatement Performed C						scribe	Cit	ty, State, Zip Co	de		720-700-			-			
Time of Abatement:	AM	PIN	// <u>5</u> PM	_	AM		(Cinnaminson	, NJ 08077								
Scope of Work (Check all the	nat apply)							_	PAYO WA MARRIYATAN	220 02-							
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			⊠ Re					☐ Mini-Enclo									
			Is	Loca	ation					A THE SALASSA AND SALES AND SALES	T A	Abatem	ent T	vpe			
Location of		.		Norm	ally lely by			Description of		760 18		1					
Asbestos-Containing Ma <u>TO BE ABATE</u>	aterial (ACN =D	1)			ance/			Containing Maternal systems in		Amount (Specify	1 -2	Repair	Encapsulate	Enclosure			
IN Facility			Cus		Staff?	(1.0.	5	surfacing, VAT,	or	SF or LF) a	. =	nsc	sur			
(13)		ŀ	V	(12	The state of	-	ot	her miscellaneo	ous)				ate	(B)			
	Yes	No	N/A														
3 rd Floor Administratio		\boxtimes		Floor Ti	le 8	k mastic		600 SF									
			П	П				× ()			Г	П		П			
		-		П													
Name of Registered Waste	Hauler			_	JDEP /	Naste	Cul	hio Varda of	Name of Paris	torod Landfill			Ш	П			
AbateTech, Inc.	iaulei				Hauler II	. 01.00.000	Wa	bic Yards of ste	Name of Regist G.R.O.W.S.								
					18750	er and the second	4	0), Hites Tester Sundan Pentrus V	. Lanuilli							
City, State								posal Date	City, State								
Lumberton, NJ							8.	/23/17	Tullytown,	PA							
Completed By (Print or Type) Title								Signature	1		Date.		1. /	, 7			
Gwendolyn Trumbetti	erati	ons	Coordi	nator		(XMV	VI		8	10	11	To the same of					

1.60	10				State of	New Jersey			-				
Chay	147	PA				SBESTOS ABA IAC 8:60 and 5:		DEG	5		<u> </u>		
Date of Notification (1)		200	<u> </u>	Na	me of Buildi	ing Owner/Operator	(2)	11111				-1	
8/	15 /	17		F	Robert Wo	od Johnson Hos	spital / Jol	#1708-5199UG	heck	3# 20	17	-	
Agencies Notified	Type Notific	ation		Str	eet Address							Ŧ	
⊠ EPA	☐ Initial	88		C	ne Rober	t Wood Johnson	n Place	ASBESTO	SC	ONIT	BOI	- 0	
☑ DOLWD ☑ DHSS	Amender Amendm	- 3.5		City	, State, Zip	Code		LIC	ENS	ING	HOL	- O	
□ DCA	⊠ Emergen	_	ina	N	lew Bruns	wick, NJ 08901			-		-	-	
(NJAC 5:23-8)	justification	ion)	irig		ne of Conta			Telephone Num	her				
	☐ Cancellat			K	risten Bel	II		i varepriente vian					
				F	ACILITY I	NFORMATION							
Name of Facility Where A			ce (3)				Type of Facility	y (4)					
Robert Wood Johns	son Hospita	al					School (K-1						
Street Address							Subchapter	8 (Other than K-12	2)		110.10		
One Robert Wood J	lohnson Pla	ace					Other (i.e., private and commercial buildings homes, etc.)						
City (5)							Square Feet	# of Floors	E	Bldg. /	Aae		
New Brunswick										3	-3-		
County (6)		11.		Co	unty Code (7)(STATE USE ONLY)	Current Use (P	rior if being demoli:	shed)				
Middlesex					1.5	8.	Hospital	3					
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)													
Omega Environmental AbateTech, Inc.													
Street Address Street Address													
280 Huylar Street 30 Maple Ave. PO Box 25													
City, State, Zip Code						City, State, Zip Co			-				
South Hackensack,	NJ 07606					Lumberton, N							
Project Manager for Monito	oring Firm	-	Tel	ephone	No.	Telephone No.		License No.					
Geiser Fajardo			2	01-48	9-8700	609-265-2107		00529					
Start Date (10)8 /16/	SEVERSE LA	cheduled (Name of OSHA M EMSL Analyti	AND CONTRACTOR OF THE PROPERTY						
Occupancy Status During A			-			0.50	icai						
☐ Facility Closed/Vacated				mont		Street Address	0.11 //						
☐ Abatement Performed C	Outside of Nor	mal Facili	tv Hou	rs - De	scribe	200 Route 13							
Time of Abatement:	AM	_PM/	PM		_AM	City, State, Zip Co Cinnaminson							
Scope of Work (Check all the	hat apply)					П Г. II С t	-1	. 5					
≥3 sf or ≥3 lf		⊠ Re	enovat	ion		☐ Mini-Encl	ainment with Neo osure	gative Pressure					
≥160 sf or ≥260 if		☐ De	emoliti	on		☐ Glovebag	Procedure	n-Friable Procedur					
		Is	Loca	ion		Z Non-Exer	ripted () and 140	II-I Hable Frocedul	-	atem	ent T	VDA	
Location of			Norma			Description of				_		T	
Asbestos-Containing Ma TO BE ABATE			ed Sole intena		Asbes	tos Containing Mat	erial (ACM)	Amount	(em	Repair	inca	ncl	
IN Facility			todial		(i.e.	 thermal systems in surfacing, VAT, 		(Specify SF or LF)	Removal	¥.	squ	Enclosure	
(13)		-	(12)	_	-	other miscellaned		0, 0, 1,	-		Encapsulate	-G	
		Yes	No	N/A			1				(D		
South Building G Level					Floor Til	le & mastic		1,097 SF					
										П	П	П	
Name of Registered Waste I	Hauler			JDEP \		Cubic Yards of	Name of Regist	tered Landfill	_		_	_	
AbateTech, Inc.				auler II 18750		Waste 40	G.R.O.W.S.	Landfill					
City, State				10130		Disposal Date	City, State				_	_	
Lumberton, NJ						8/22/17	Tullytown,	PA					
Completed By (Print or Type) T	itle				Signature	A	Dat	e (į			
Gwendolyn Trumbetti		Operati	ons (oordi	nator	1 (MV	W	3		5	17		
SB-41						0 /1		A		- Alaka	-		

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

MAY 11

ASB-41

PATD STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT

	dille die distribute, distribute			AC 8:60-7 A			Oh	-1	A.	2	7
Date of Notification (1)			-	Building O					· ·	,	10
06 /20 /	17			DEVELOPN							
/ /			Street Ad				110	EG	E	WIS	15
	pe of Notification			IMERCE BL	20000000		1111-			V L	-11
✓ EPA DEP	☐ Initial ☐ Amended			te, Zip Cod			115				
☑ DOH	Amendment	# A	Name of	ADT, NJ 07	072			4.810	4 (7 -	TANK D	111
DOL DOL		// justification		K TUCCI			Lelepno	ne Numb	per Q (201/	Land
	☐ Cancellation										1
		F	ACILITY I	NFORMATI	ON		I AS	BESTO	19 001	ITROL	δ.
							1		ENSIN		A
Name of Facility Where	Abatement is Taking	Place (3)		Type of F	acility (4)		. +		Principle of the last of the last of		
FORMER MERCK UNIO	N										
Street Address					School (K		IZ 40				
1011 MORRIS AVE						ter 8 (Other t ., private & c					
						omes, etc.)	IIIIIeicia	1.			
City (5)	ounty (6)	County Code	(7)	Square F		# Of Floors	()	Buildin	na Aae		
UNION UI	NON		****		,000	3			3 . 3-		
						being demo	lished)	7	40	+	
					PRODUCT	ION					
Name of Monitoring Fir	m Hired by Bldg. Own	er (8)	ASCM NO) I						-10111	
EHI				NODTHE	TAD CONT	DACTING OF	OLID INC				
Street Address				Street Ad		RACTING GR	OUP, INC	J.			_
555 WEST SHORE TRA	IL			Olicot Au	u1033						
City, State, Zip Code				32 William	s Parkway						
SPARTA, NJ 07871					e, Zip Code	,					
Project Mngr. For Monit	toring Firm	Telephone Nu	mber	1							
WILLIAM KIERBIL	10 1 10	973-729-5649			ver, NJ 079	936					
Sheduled Start Date (10	· ·	letetion Date (1	9000000	Telephon	e Number		License	Number			
-07//-05/-				973-88	34-8682				00860		
Occupancy Status Durin	ng Abatement (Check	Only 1)			OSHA Moni	tor			70000		
Facility Close	ed/Vacated During En	ire Period of		NORTHST	AR CONTE	RACTING GR	OUP, INC	٥.			
Abatement				Street Add	dress						
Abatement P	erformed Outside of N	lormal Facility		20 14/11/2	-						
	ribe:7:00 AM-3:30	DM			s Parkway , Zip Code						
Other - Descr	1be	<u>F IVI</u>			ver. NJ 079						
Scope of Work (Check A	All That Apply)			-							
	11 27										
Demolition	\checkmark	Renovation		Full Conta	ainment wi	th Negative F	ressure				
≥3sf or ≥3lf ≥160 sf or ≥2	00.16			Mini - End							
≥100 SI OI ≥2	50 11			_	Procedure	d Non-Friabl	o Proceed	lura			
				INOII-EXCII	ipied () an	id NOII-I Habi	ie Floced	uie			
Location of	ls		Descript	ion of			Abateme	ent Type		11/2	
Asbestos Containin	H프M	As		ontaining			R		E	E	
TO DE ADATED	Normally		Material			Amount	E	R	N	N	
TO BE ABATED in Facility	Used		e., therma		_	(Specify	M	E	C	C	
(13)	Solely by Main-			facing, VAT ellaneous)	,	SF or LF)	0 V	P	A	L	
(10)	tenance/		Acres misc	enaneous)			A	lî	s	s	
	Custodial						L	R	Ū	Ū	
	Staff (12)								L	R	
1/0											
J12		LAB TOPS	10			655 SF	V				
J12 J12		ROOF FLASHIN	SIGNACO			3,557 SF	✓	1 4	1 -	1 -	
/ 1 Au		TAININ FLASHIN	10			100 SF	<u> </u>		1 1	1 -	
lame of Registered Was	ste Haule	NJDEP Waste	Cubic	Name of R	egistered	_andfill					
NEWARK CARTING		Hauler ID No.		I.E.S.I.		om 1981-1995-1995					
			of Waste								
City, State				City. State		0.5					
IEWARK, NJ			Date BETHLEHEM, PA 18105								
completed by (Print or T	'ype)	Title			Signature	/			Date		
	1.5. 1	8.5			1		\)		Date		
teve Stiles		Project Manage	r		40	/H /(1) /		-	1 0	0/47/47	

Location of Asbestos Containing TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Main- tenance/	Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Abateme R E M O V	R E P	E N C A P	E N C L O c	
	Custodia Staff (12)			Ĺ	R	S U L	S U R
	YES NO N/	'A					
J12 - 1ST FL		TANK INSULATION	40 SF	1			
J12 - 2ND FL		TANK INSULATION	100 SF	V			
J12		TRANSIT	850 SF	V			
J12 - ROOF		DUCT TAR	1,100 SF	V			

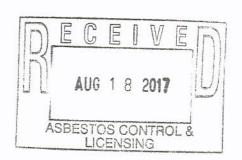


STATE OF NEW JERSEY

	I'A	E				ASBESTOS			1 . 0	1 1	2	10 21		
Date of Notification (1)	-		(PURSU	The Real Property lies with the last of th	JAC 8:60-7 A	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED	1.7	acc		9	9/ 0		
	/17				RUSSO	DEVELOPA	MENT INC.	Fiator (2)	NOTION TO					
/ /						Address			ME	GE		EIN		
	Type of No					MMERCE BI			U		3 0 0	<u> </u>		
✓ EPA DEP		Initi	ial ended			ate, Zip Cod			1)			111 T		
DOH DOH	(<u>)</u>		endment	# 1	_	FADT, NJ 07 f Contact	072	11	ITalanh	AUG. 1	bef 2017	1111		
☑ DOL				w/ justification		CK TUCCI		1	rejebu	one Num	per ceri			
			ncellation					1				and the same of th		
					FACILITY	INFORMAT	ION		ASB		CONTRO	OL &		
Name of Facility When FORMER MERCK UNIO		ent i	is Taking	Place (3)		Type of F	acility (4)	-			10:110			
I ONWER WEIGH ONE	JIN						School (K-12)						
Street Address						一	100 C	ter 8 (Other	than K-12	2)				
1011 MORRIS AVE								e., private &						
				-		858	bldgs., h	omes, etc.)	20 85 82					
	County (6)	ii)		County Code	(7)	Square F		# Of Floors		Buildir	ng Age			
UNION	INION						,500		3	_				
								f being demo	olished)		40 +			
Name of Monitoring Fi	rm Hirad	by E	Ilda Owa	205 (0)	ASCM N		PRODUCT	ION						
Traine or morntoring ()	mineu	Бу Б	nug. Owi	iei (o)	ASCIVIN	91								
EHI						NORTHS	TAR CONT	RACTING GF	ROUP IN	C.				
Street Address						Street Ad			.001,114					
655 WEST SHORE TRA	AIL													
City, State, Zip Code						32 William	ns Parkway							
SPARTA, NJ 07871						City, State	e, Zip Code	Э						
Project Mngr. For Mon WILLIAM KIERBIL	itoring Fii	rm		Telephone No										
Sheduled Start Date (1	0) [Sch	od Com	973-729-5649 Dietetion Date (over, NJ 07	936	li :					
07 / 05 /	17	SCIII	12	30	/ 17	relephon	e Number		License	Number				
 // /·			/	/ /		973-88	34-8682			(00860			
Occupancy Status Duri	ing Abate	men	t (Check	Only 1)			OSHA Mon	itor			70000			
Facility Clos	ed/Vacate	ed D	uring En	tire Period of				RACTING GF	OUP, INC	٥.				
Abatement	E 1820 1	202				Street Add	dress							
Abatement F		I Out	tside of N	Normal Facility		22 1450	D							
Other - Desc		7:00	AM-3:30	DM		32 William City, State								
			7 (101 0.00	1 101		East Hano								
Scope of Work (Check	All That A	pply	y)											
			(2000)											
Demolition			✓	Renovation				th Negative I	ressure					
≥3sf or ≥3lf≥160 sf or ≥2	en If				님	Mini - Enc								
2100 31 01 22	.00 11					Glovebag		e nd Non-Friab	lo Drocod	lura				
					<u></u>	NOII-EXCII	ipted () di	id Non-Filab	ie Proced	ure				
Location of			ls		Descrip	tion of		1	Abateme	nt Type				
Asbestos Containi	ing	85757	cation	As		Containing			R	I	E	E		
70 DE 40 4750			ormally		Material			Amount	Е	R	N	N		
TO BE ABATED			Used			l systems		(Specify	M	E	C	C		
in Facility (13)			Solely Main-			facing, VAT	,	SF or LF)	0	P	A	L		
(13)		100	nance/	or	otner misc	cellaneous)			V	A	P	0		
			stodial						A L	l R	S	S U		
			aff (12)							K	l'	R		
	YES NO N/A									_	+	1		
U14				LAB TOPS				600 SF	7		1			
U14		H	DIC	TRANSITE				65 SF	7	H	1 7			
U14				SILL CAULK				200 LF	7	H	1 1	H		
U14				GLAZING				90 WINDOW			TH			
Name of Registered Wa	ste Haule	r		NJDEP Waste		Name of R				A		A		
NEWARK CARTING				Hauler ID No.	Yards	I.E.S.I.								
City State				4509	of Waste	011 0								
City, State NEWARK, NJ					Disposal Date	City. State	M DO	0.5				Artistan de la companya del companya del companya de la companya d		
						BETHLEHE	IVI, PA 181	U5						
Completed by (Print or Type) Title							Signature	7			Date			
			Y J	VC			Date							
Steve Stiles	er	/}	RE	nde	_		08/	17/17						

08/17/17

Location of	\neg		Is			Description of		A	batem	ent Type		
Asbestos Containing TO BE ABATED in Facility (13)	Location Normally Used Solely by Maintenance/ Custodial Staff (12)				y 1-	Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)		R E M O V	R E P A	E N C A P S	E N C L O S
		St	taff	(12	2)				L	R	L	U R
	tenance Custodi Staff (1: YES NO!											
U14	T		1	T		ROOF FLASHING	1,110 SF	1	1			
U14			1	T		TRANSITE PIPE	115 LF	T	J			
U14 2ND FL			1	T		VAT/MASTIC	500 SF	T	V			
U14			V	T		PIPE FITTINGS	150 EA	T	V			
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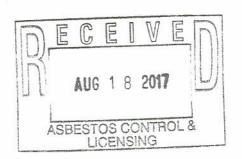
ASB-41

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

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Check & d'	13	6

Date of Notification (1) 06 / 20 / 17									wner / Oper	rator (2)	0-0,				,	<u> </u>	
	$\frac{20}{100}$	/_1/_					Street Ac	DEVELOPN	IENT INC.		Decree 1				2.0		
Agencies	Notified	Type of N	lotif	ica	tion		-	MERCE BL	.VD			E ((5	5	\mathbb{W}	15	M
V	EPA			itial				e, Zip Cod			114			-		- 1	
	DEP	V			nded			ADT, NJ 07	072		lini						11
	DOH DOL					#1 */ ivetification	Name of				Telepho	ne M	J ⊕b€	¥ 8	2017	1	1
	DOL				ellation	w/ justification	DOMINIC	K TUCCI					-			1	Trem spice
							ACILITY I	NFORMAT	ION		T AS	BES	TOS	3 CO	NTR	OL &	
Name of I	Facility Who	ere Abaten	nen	t is	Taking	Place (3)		Type of F	acility (4)				JOE	NSH	10		
FORMER	MERĆK UN	NON		- , -	5	(0)		l'ype or r	domey (4)							-	
Chanat Ad	4							- □	School (K								
Street Ad 1011 MOF	FR 8.73 TO FIRE SOCIETY									er 8 (Other t , private & c							
									bldgs., ho		iiiiieiciai						
City (5)		County (6)			County Code	(7)	Square F	eet	# Of Floors		Buil	lding	Age			
UNION		UNION							,000	1 being demo	I'- IIV	1			•		
				_					PRODUCTI		ilisnea)	1		40	0 +		
Name of I	Monitoring	Firm Hired	by	Blo	ig. Owr	ner (8)	ASCM NO		TROBOOTI								\neg
EUI								NODTUG	NORTHER CONTRACTING CROLLS INC.								
EHI Street Add	drass							NORTHSTAR CONTRACTING GROUP, INC. Street Address									_
655 WEST	SHORE T							Street Au	uress								
	e, Zip Code					20,000		32 William	ns Parkway								
SPARTA,						-		City, State	e, Zip Code								
WILLIAM I	ngr. For Mo	onitoring F	irm			Telephone Nu 973-729-5649	mber	East Hans	war NII 070								
		(10)	Sc	hec	d. Com	oletetion Date (1	1)	East Hanover, NJ 07936 Telephone Number License Number									\dashv
07/	Sheduled Start Date (10) Sched. Completet						17_										
/	/ /	/ 	L	4	/Classia	/		973-88				00	0860				
	y Status Di					tire Period of			OSHA Monit	or ACTING GR	OUR INC						
	Abatemen				9 =			Street Add		AOTINO ON	1001,1140	•			-		\dashv
			d O	uts	ide of I	Normal Facility											
V	Hours - De	escribe: scribe:	7.0	Λ Λ	M 3·30	DM			s Parkway						_		_
	Other - De	scribe	1.0	/U /A	101-3.30	FIVI		East Hano	36								
Scope of \	Work (Chec	k All That	App	oly)										-			
	Demolition			r	_	Denouetion		FII O 4									- 1
	>3sf or >3			L	√	Renovation	✓	Mini - End		h Negative F	ressure						
V	≥160 sf or								Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
							~	Non-Exen	npted (*) and	d Non-Friabl	le Proced	ure					ĺ
	Location of			-	ls		Descript	ion of			Abateme	nt Tv	ne				-
	stos Conta				ation	As	bestos - C				R	I	90	ĮΕ	ĮE		
Τ.	DE ADAT		1		mally	"	Material			Amount	E	R		N	N		
10	in Facility	ED			sed olely		e., therma	l systems facing, VAI	-	(Specify SF or LF)	M	E P		C A	L		
	(13)				Main-			ellaneous)		31 OI LI)	v	A		P			- 1
					ance/						Α	ı		s	s	1	- 1
					todial f (12)						L	R		U	U		- 1
				-	NO N/A	-	-					_	_	L	R		\dashv
U4 LIVLI						VAT & MASTIC	;			480 SF							
U4						DUCT INSULA				175 SF	V						
U4 U4			4			VIBRATION CL RADIATOR MA				7						\Box	
	Registered V	Waste Hau	ler	115	111	NJDEP Waste											\dashv
						Hauler ID No.	Yards	ds I.E.S.I.									
City, State	,		_			4509	of Waste	014 01 1									
NEWARK, NJ							Disposal Date	posal City. State te BETHLEHEM, PA_18105						-			
								JE 11166111		1							
Completed by (Print or Type) Title						Title			Signature	1//	_			Date			٦
Steve Stiles Pro						Project Manage	r	Slex 11 08/17/17									

Location of	T	ls		Description of		Abateme	nt Type		
Asbestos Containing TO BE ABATED in Facility (13)	No l S by ter Cu	Jse Jse Sole Ma nan stoc	ally d ly in- ce/ dial	Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R
	YES	NO	N/A						
J4		7		GLUE DABBS	200 EA	V			
J4		V		CAULK	60 FL	V			
J4		V		ROOF FLASHING	3,500 SF	V			
J4		7		PIPE & FITTINGS	150 EA	V			
J4		1		VAT	7,450 SF	7			
			Ш						
		<u>Ц</u>							
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	1-	Н	4					 	
	1-	Н						 	
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		Н						+ -	1 1
							 	 	



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nd 2411204505	PA		CATIO	N OF ASE	ew Jersey BESTOS / 8:60 and	ABATE		т		E	C	E			
Date of Notification (1)			Name o	of Building	Owner/O	perato	r (2)				AUG	1 8	20	17	
8/17/16	y		PSE8	&G Bayı	way				In C		NUU	1 0	20	8 8	-
Agencies Notified Type Notification				Address	-	=									
⊠ EPA ☐ Initial ☐ Amended				Trenton					Α	SBE		OS C		ROL	&
X DEP ☐ Amended X DOL Amendment	ш			ate, Zip C						-	LIC	ENS	ING		
Emergency		g	a servence contract	beth NJ											
DOH justification)		_		of Contact					T-1	'onhr	ne N	umber			
✓ DCA	I.			el Veille	383	211								_	
Name of Facility Where Abatement is Takir	g Place	(3)	FAU	ILITY INF	ORMATIO	UN	Type	e of Facility	(4)						
PSEG Bayway Reconstruction an			ect					School (K	18/19/01						
Street Address	**						Ħ	Subchapte	er 8 (Oth	er th	an K-	12)			
602 Trenton Ave							\boxtimes	Other (i.e.	private	100 &	nmer	cial bui	ldings	, hom	ies,
City (5)							Squ	etc.) are Feet	# 0	f Floo	ors		Bldg.	Age	
Elizabeth							The substitute of	000	4				50	3	
County (6)				Code (7)	02/7		Curr	rent Use (P	rior if bei	ing d	emolis	shed)			-
Union			STATE	USE ONLY	0		Sw	vitchyard	Contro	l Ho	use	11			
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASCI	M No.				atement Co							
Total Environmetal Solutions	9							nergy Ser	vices l	LLC					
Street Address						Street			200						
1005 St. George Lane								rans Driv	/e			44-14-2			
City, State, Zip Code Landenburg, PA 19350								Zip Code	0005						
Project Manager for Monitoring Firm	<u> </u>		Tolonbo	na Na				oro NJ 0	8085						
Ed Igelesias			Telepho	ne No. 44-4217	7	Teleph		NO. 8099			ense I	No.			
Start Date (10)	Schedu	led Cor		Date (11)				HA Monito		UI	009				115.0
9/4/17	12/31			Julio (11)				/ironmen		ution	ıs				
Occupancy Status During Abatement (Chec						Street		and the second second							
Facility Closed/Vacated During Entire F	Period of	Abaten	nent			1005	005 St. George Lane								
Abatement Performed Outside of Norm Other – Describe: Active Switchvard	nal Facilit	y Hours	5			City, S	ity, State, Zip Code								
					_	Landenburg NJ 19350									
Scope of Work (Check All That Apply)						_									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova				Full Containment with Negative Pressure									
2 - 100 31 01 - 200 II	X	Demolit	ION					ini-Enclosur ovebag Pro							
								n-Exempte		d Nor	n-Frial	ble Pro	cedur	re	
		Locati												emen	
Location of		Normal ed Sole				cription						-	1)	/pe	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	aintenar	nce/		tos Conta thermal s				1 500	mour Specif		R		En	П
In Facility	Cus	todial S (12)	otan?	(,	surfaci	ng, VA	T, or			or L		Remova	Repair	caps	Enclosure
(13)	2000	No.	N/A		other mi	scellan	eous)					oval	air	Encapsulate	sure
	Yes													е	
1st Floor removal of ACM wiring	Х			(Other Mi	scella	neou	as	14	50 L	F	x			
2nd Floor Electrical racks	X				Other Mi	scella	neou	ıs	499	9 Sq	ft.	x			
												-		-	-
ame of Registered Waste Hauler		IN	JDEP W	/aste	Cubic Y	ards		Name of	Registe	red I	andfil				
Vaste Management Of New Jersey		Н	auler ID		of Wast			1 2000 00 00	945.40				OF. 1	Egg!!!	tı.
		1	17273 80 cy			Tullytown Resource Recovery Facility									
ity, State Iewark New Jersey			Disposal Date City, State												
completed by	Title	Telepologiago	12/31/17												
Dan McConnell	X.15, 551, 551, 11	sulation Lead Signatu					Signature Date Daniel Mc Cannell 8/17/17								

UC# 1149				to NJAC						76	GF.	W.		P 4	-	
Date of Notification (1) 08-14-17	•			f Building (onstructi			(2)				3 (7 [-W/		
Agencies Notified Type Notification		- 1	Street A	ddress						Line	AU	G ·	8	201	7	
EPA Initial Amended Amendment #		-	City, Sta	ate, Zip Co	de					L		P9/	···Er			
Emergency (in justification) DCA Cancellation			Name o	f Contact						ASD.		()5 Kar 1	COL	JER G	DL 8	
DCA Cancellation				n Espino		TION						21		NACCHINADO		
Name of Facility Where Abatement is Taking Commercial Building	Place (3)	FACI	ILITY INFO	JKINA	ION	Туре	e of Facility								
Street Address 688 Avenue E			N. N. W.					School (K-Subchapte Other (i.e.	r 8 (Othe				lings,	home	es,	
City (5) Bayonne							Squ	etc.) are Feet	# of	Floors		В	ldg. A	ge		
County (6) Hudson				Code (7) USE ONLY)	_		Curr	ent Use (Pri	or if being demolished)							
Name of Monitoring Firm Hired by Building Ov N/A	wner (8)		ASCN	Л No.		1		atement Con ntracting L		(9)						
Street Address			1			Street 522										
City, State, Zip Code	,		7		-	100.000000		Zip Code y NJ 0708	37	in many						
Project Manager for Monitoring Firm		1	Telepho	ne No.		Teleph 201	none N	No.		Licens 0120						
	Schedul		pletion	Date (11)			Manager and	HA Monitor								
Occupancy Status During Abatement (Check	Only Or	ne)				Street									_	
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	riod of	Abatem / Hours	ent			522 City, S		it. Zip Code								
Other – Describe:						Unio	n Cit	y NJ 0708	37							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renovat Demoliti	olition Mini Glov					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure					9			
Loophing of		Locatio			-									ment pe		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Solel intenan todial S (12)	ice/		os Cor therma surf	escription ntaining Mal systems acing, VA miscellar	Materia s insu T, or	lation,	(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure	
Roof		NA		Po	of Flash	ina		65	0 SF		X					
2nd Floor	×				VAT	iiiig			0 SF		X					
Name of Registered Waste Hauler		I NI	JDEP W	lasts	C. L.	c Yards		Name of	of Registered Landfill							
Delfa Contracting LLC		100000	35240	No.	of Wa			Tullyto	Same			COVE	ery F	acilit	y	
City, State Union City, NJ		Disposal Date City, State 08-30-17 Tullytov					Λ.	o books too								
Completed by Jaime Delgado	Mana					Date 08-14-17										

State of New Jersey

(1/# 1/47	ı		CATION	ate of New OF ASB to NJAC	ESTOS	ABATE		Γ	- Promise	P	A		0		
Date of Notification (1) 08-14-17	Essecuti construir			f Building McCou		Operator	(2)				![,	L.		W [
Agencies Notified Type Notification			Street A	ddress	_					A A	He	1.5	20	479	
EPA Initial			07 01	1 7 A					JU L	1	100	10	20	11/	14
DEP Amended DOL Amendment #				ite, Zip Co town, N		60				ACT	ann -				
Emergency (ir justification) DCA Emergency (ir justification) Cancellation	cluding		Name of	Contact McCour	ong Owney Tea	edulating Laborat		ng at the desired assertation of the period	Tel	ASB:	Klum	hari C	NG	wOL.	&
Essent Senset			FACI	LITY INFO	ORMAT	ION			-				-		
Name of Facility Where Abatement is Taking Private Home	Place (3	3)					Тур	e of Facility (3000						
Street Address								School (K-1 Subchapter Other (i.e.	8 (Oth				lings,	home	s,
City (5) Morristown							Squ	etc.) are Feet	# 0	f Floors		В	dg. A	ge	
County (6) Morris	and the same	T	County (Code (7) JSE ONLY)	hamman and a serve	Cun	rent Use (Pri	or if bei	ng demo	olishe	ed)		out of the period	
Name of Monitoring Firm Hired by Building O	wner (8)		ASCN			Name	of Ab	atement Cor	ntractor	(9)					
N/A								ntracting L			-20-22		(a) 100 (c)		
Street Address						Street 522	7th S	St.							
City, State, Zip Code				111233-07-0-0-1		100000000000000000000000000000000000000		Zip Code ty NJ 0708	37			***			
Project Manager for Monitoring Firm	and a property of		Telepho	ne No.		Teleph 201 2		No. 9603	** ** ** ** ** ** ** ** ** ** ** ** **	Licens 0120			a to the second de to	********	
	Schedule 08-16-		npletion l	Date (11)				SHA Monitor ntracting L	.LC		200720				
Occupancy Status During Abatement (Check	Only Or	ne)	-			Street						-9			
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	riod of	Abaten	nent			522 T		Zip Code			-				
Other - Describe: 7:00am - 5:00pm		rioure		(41-2-11-2-11-2-11-2-11-2-11-2-11-2-11-2				ty NJ 0708	37						ĺ
Scope of Work (Check All That Apply)						_	_			-					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit					M G	ull Containm lini-Enclosure lovebag Pro on-Exempte	e cedure						
	le	Locati	ion		-			on-Exemple	u () air	u Non-r	Habit		Abate	ment	
Location of	1	Normal ed Sole	ly	94 (O) 94		escription							Ту	pe	-
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intenar todial S (12)	nce/	Asbes (i.e.	therma surfa	taining M I systems scing, VA miscellar	s insu T, or		(8	mount Specify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A											te	
1St Floor		х				VAT			11	10 SF		X			
										100000000000000000000000000000000000000					
						000000					_				
Name of Registered Waste Hauler		N	JDEP W	'aste	Cubic	Yards		Name of	Registe	red Lan	dfill				
Delfa Contracting LLC		Н	35240			2		Tullyto	wn Re			COVE	егу F	acilit	y
City, State Union City, NJ						sal Date 18-17		City, Stat		4					
Completed by Jaime Delgado	Title	Mana	ager.			Signature	9	A			Dat 08-	e -14-1	17		

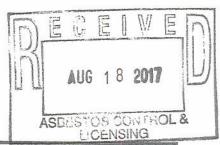
U#5842)	N		CATION	ate of New Jers I OF ASBESTOS to NJAC 8:60 a	BABATE	2022		PAI E W [D		Pr	int Fo
Date of Notification (1) 8/14/17				Name o	f Building Owner	/Operator	(2)	3					and the second
	Notification		+	Street A					AUG	1-8	201	7	111
Ď DOH	Initial Amended Amendment # Emergency (including justification)	uding	-	Passa Name o	ite. Zip Code ic, NJ 07055 f Contact		and the second s		SDESTO:	ENSI		OL	&
DCA	Cancellation			Avi	LITY INFORMA	TION		_	-		1		
Name of Facility Where Abater	nent is Taking Pla	ace (3)					Type of Facility	y (4)					
Street Address —							School (K Subchapt Other (i.e etc.)	er 8 (Oth	er than K-1: & commerci	2) al buil	dings,	home	es,
City (5) Passaic							Square Feet	# 0	f Floors	В	Bldg. A	ge	
County (6) Passaic					Code (7) USE ONLY)		Current Use (F	rior if bei	ng demolisi	ned)			
Name of Monitoring Firm Hired	by Building Own	er (8)		ASCN	1 No.		of Abatement C						
Street Address							Address HITE DOVE (COURT					-
City, State, Zip Code						100000000000000000000000000000000000000	State, Zip Code EWOOD, NJ	08701					-
Project Manager for Monitoring	Firm			Telepho	ne No.	Teleph	none No. 668-9078		License N	0.			
Start Date (10) 8/24/17	1000000	neduled 28/17	Con	pletion l	Date (11)		of OSHA Monito		NALS				
Occupancy Status During Abate Facility Closed/Vacated Do	77.			ant			Address HITE DOVE (COURT					
Abatement Performed Out Other – Describe:	side of Normal F	acility I	Hours	ierit.			tate, Zip Code EWOOD, NJ	08701					
Scope of Work (Check All That	Apply)												
≥3 sf or ≥3 if ≥160 sf or ≥260 if —			nova molit			XXX	Full Contains Mini-Enclosu Glovebag Pr Non-Exempt	ire ocedure	•			e	
1 analysis of			ocati rmall	37.5							Abate Ty		
Location of Asbestos-Containing Materi TO BE ABATED In Facility (13)	al (ACM)	Used Main Custo	Sole! tenar	ly by nce/	Asbestos Cor (i.e. therma surfa		faterial (ACM) s insulation, T, or	(S	mount specify or LF)	Remova	Repair	Encapsulate	Enclosure
WITEDIOS		Yes	No	N/A				2.	2225			ite	O
INTERIOR					F	Loor Til	е	11	00SF	X		8 1	

N#5843	NO	TIFIC (Pur	ATION O	of New Jerse F ASBESTOS NJAC 8:60 an	ABATE	VIENT	Batteldase(C				// [5	Forn
Date of Notification (1) 8/15/17				uilding Owner/ ND AVE LL		(2)	AND THE PERSON NAMED IN	L L AU	G 18	20	17	
Agencies Notified Type Notification		100	treet Add					ASDIL	OS Ö	2, 4 F	OL	8.
EPA X Initial Amended Amendment	#	C	ity, State ong Br	, Zip Code anch, NJ 07	740		Dec		OLIVO	IIVG	MANAGE STATES	naca-sulata
Emergency (justification) DCA Cancellation	ncluding	1 0	lame of C	Contact				1-		87		
			FACILI	TY INFORMAT	ION	Γ +	f Facility (4	·				-
Name of Facility Where Abatement is Taking 34 2nd Ave	Place (3)					Пѕ	of Facility (4 chool (K-12	2)	(2)			
Street Address 34 2nd Ave							ubchapter to other (i.e. pr tc.)	3 (Other than K-1 ivate & commerc	cial buildi			
City (5) Long Branch						Square		# of Floors		lg. Ag	е	
County (6) Monmouth			County Co	ode (7) SE ONLY)		Currer	nt Use (Prio	r if being demolis	shed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.	Name	of Abat	ement Cont	tractor (9) SSIONALS				
Street Address						t Addres	s DOVE CC	URT				
City, State, Zip Code						State, Zi	p Code DD, NJ 08	3701				
Project Manager for Monitoring Firm		1	Telephon	e No.		hone No -668-9		License 1200	No.			
Start Date (10) 8/25/17	Scheduled 8/28/17		pletion D	Pate (11)			A Monitor PROFE	SSIONALS				
Occupancy Status During Abatement (Che						t Addres						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of A	batem	nent i		City,	State, Z	DOVE CO ip Code OD, NJ 0					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova				× Mir	ni-Enclosure	ent with Negative e cedure d (*) and Non-Fri			e	
	114	Locat									ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intena odial ((12)	ely by nce/ Staff?	Asbestos Co (i.e. them su	Description on taining nal syste rfacing, \ er miscell	Materia ms insul /AT, or	ation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A	Bo	iler Ins	ulation		20SF	X			
INTERIOR				50	101 1110							
												-
Name of Registered Waste Hauler NEWARK CARTING		1	NJDEP W Hauler ID 04509		bic Yards Waste	S	IESI	l f Registered Lan	dfill			
City, State NEWARK, NJ				113927.30	sposal Da 28/17	ate	City, Sta BETHL	ite _EHEM PA				
Completed by	Title	VER		<u> </u>	Signat	ure			Date			

Cheere # 1866

Date of Notification ((1)		-	Name of	Building	Owner/Operator (2)									
08/15/2017				Dobc	0										
Agencies Notified	Type Not	tification		Street A	ddress				- Parental	ľi-ť	(°) (E3	ři.	D 17	F23	PENERA
⊠ EPA	X	Initial		30 Ga	lesi Di	ve, Suite 202 A			117	16	GE		W	E	IN
☐ DEP		Amended		City, Sta	te, Zip Co	de			112						
⊠ DOL		Amendment #		Wayn	e, NJ	07470			10					-	
	X	Emergency (including		Name of	Contact		1772	Telepho	ne Number	I A	UG 1	8 2	117	- 1	11
⊠ DOH	İ	justification)		Micha	ael Har	rington					00 1	~ _	019	Ì	1
□ DCA		Cancelation				9.55									
					FA	CILITY INFORMAT	ION		1 /	ASIGNS	000	Out	1510	1 2	
		ment is Taking Place (3)					Type of	Facility (4)			LICEN	SINC	à		
Garden State	Parkw	ay Maintenance Distr	ict 5, 0	Celebri	ty Hou	ise		School (K-12)		N. Walton Street, Co.	TOTAL CONTRACTOR AND ADDRESS OF THE PARTY AND		The state of the s		enconstant
Street Address	200- 00-0	.w roal 6-5						Subchapter 8 (Othe	r than K-	12)					20
Milepost 115.	3, Gar	den State Parkway					X	Other (i.e. private 8		55000	dings, ho	mes,	etc.)		
City (5)							Square	Feet # of Floo	ors	Bldg, Ag	e				
Holmdel							3,000)+ 3		50+					1
County (6)					County (Code (7)	Current	Use (Prior if being demo	lished)						
Monmouth					(STATE U	JSE ONLY)	Resid	ence							
Name of Monitoring	Firm Hire	d by Building Owner (8)				ASCM No.	Names	of Abatement Contractor	(0)				-		-
						ASCIVI NO.			10.0						
Street Address				-			1	orn Contracting Co	ip.					215-275	
Julet vanies							Street A								
City State 7in Code							-	illow Way				-	-		_
City, State, Zip Code							1	ate, Zip Code							
Project Manager fo N	Appitorin	- Cirm			T		-	dland Park, NJ 074	124	1					
r roject manager to is	violitoring	grum			Telepho	ne No.		one No.		License	2000000				
							973-3	333-9176		01331					
Start Date (10)						etion Date (11)	Name o	of OSHA Monitor							
08/18/2017				08/22	/2017		Envir	ovision Consultant	s, Inc.						
Occupancy Status Du	iring Abai	tement (Check Only One)					Street A	Address							
	osed/Va	scated During Entire Perio	d of Ab	atemen	t		20-21	L Wagaraw Rd., Blo	dg. 35-E						
☐ Abatemer	nt Perfo	rmed Outside of Normal I	Facility I	Hours			City, Sta	ate, Zip Code							
□ Other - De	escribe:						Fair L	awn, NJ 07410							
Scope of Work (Chec	k All That	Apply)													
□ ≥3 sf or ≥3	3 If				Renova	ation	X	Full Containment w	ith Negat	tive Pres	sure				- 1
≥ 160 sf or	r ≥260 lf	\$3		\times	Demol			Mini-Enclosure	9		200 20				- 1
								Glovebag Procedur	e						1
							X	Non-Exempted (*)		Friahle P	racadura				
			T	Is Locatio	n			Hon Exempted ()	and reon	Tiable	roccaar		Abat	ement	
	Local	tion of		Normally	,		Desci	ription of					Ty	/pe	
Asbesto	s-Contain	ing Material (ACM)	F 205	ed Solely		Asbesto		ning Material (ACM)		A	mount				
		ABATED	0.98	aintenan stodial St		(i.e. t		ystems insulation,		10	Specity			m	
		acility 13)	Cu	(12)	air			ng, VAT, or scellaneous)		S	F or LF)	Re	_	cap	Encl
	7.5	1.3)	Voc		N:/A		other mi	scellaneous)				Remova	Repair	Encapsulate	Enclosure
			Yes	No	N/A					-		9	1=	16	re e
						SEE NEXT PAG	ı E								
Name of Registered \	Waste Ha	uler		NJDEP V	Vaste Hau	iler ID No.	Cubic Y	ards of Waste		Name of	f Regustere	d Landt	ist		
Unicorn Contra	cting C	orp.		00358			5+				ss Hills L				
City, State		(A)					Disposa	al Date		City, Sta					
Woodland Park	. New	Jersev					TBD	4.	1977	Mary Stevenson	sville, P	A			
Completed by	,	1	Title				1.00	Signature /	- 6	7		Dat	0		
Dimo Golcev				al Man	ager			11/21	11	/			/15/	201	7
Colect			I delici	CI IAICIII	-BC1			11/1	1//			100	177/	CUL.	100

State of New Jersey Notification of Asbestos Abatement Continuation Sheet



Celebrity House

Ociobilty House						T16	ノニン	SING	and the second second
								ement /pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	d Sole intena	ely by nce/ Staff:	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	TO BE ABATED In Facility (13) Yes No N/A Upper Level-Front Entry X Upper Level-Sitting Room C X Upper Level-Chimney X Boiler Room X Boiler Room X						Ф		
Upper Level-Front Entry		X		Black Tile Backing	44 SF	X			
Upper Level-Sitting Room C		Х		Heat Shilding Paper around Radiator	6 SF each	Х			
Upper Level-Chimney	Der Level-Sitting Room C Upper Level-Chimney			Flashing Material	35 SF	Х			
Between Lounge Area A & B	Upper Level-Chimney X ween Lounge Area A & B X			Brick Vinyl Tile	44 SF	Х			
Boiler Room	ween Lounge Area A & B X			Wall Backing Paper	35 SF	Х			
Lounge Area B-Exterior Window	ween Lounge Area A & B Boiler Room ounge Area B-Exterior			Exterior Window Caulking	35 SF	Х			
								255W02000	

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

Ch# 3250

Date of Notification	(1)			I	Nam	e of	Building	Owner / Operato	or (2)			- Opt			
	7/17				Veri				9/35/		Lat E	11		1//	ET
Agencies Notified EPA	Type N	Votifica	ation	1.0			ddress am Stre	eet	PA	m		<u></u>	= 1	(1)	5//
☐ DEP	\boxtimes	Initial		-	_		te & Zip		DI A Y	0.10.10.40			-		911
□ DOL		Amer	nded R#2-8/14				, NJ 07					AUG	18	2017	11
□ DOH			gency	1	Nam	e of	Contact			Material		Tel	ephon	e Nur	nber
☐ DCA		Canc	ellation	1	Alex	Ва	ylor			and the second	ASE				,
					FA	CIL	ITY INI	FORMATION		i.	7.00	LICE	NSIN	G	
Name of Facility Wh	nere Ab	ateme	nt is Taking P	lace (3	3)			Type of Facil							Market Constraint
Market Central O	ffice							School (
Street Address										Other than					
95 William Street										ate & comm				s, etc	.)
City (5)			County (6)	Co	untre	Cas	Jo (7)	Square Feet		# of Floor		Bldg	. Age		
Newark			County (6)	100	unity	C00	de (7)	425000			12		70	0+/-	
Newalk			Essex					Current Use	•		nolisnea)				
Name of Monitoring	Firm H	ired by	/ Building Own	ner (8)		ΤΔ	SCM No				or (Q)				
USA Environmen			, ballaring Own	101 (0)			NOOW IVE	BRISTOL E	NVIR						
Street Address 8436 Enterprise A	Avenu	e						Street Addres		PEET					
City, State & Zip Co								City, State &		150000					
Philadelphia Pa 1								BRISTOL, F							
Project Manager for	Monito	ring F	rm				ımber	Telephone N			Licens	e Num	ber		
Mark Jenkins				215-3			Contract of the Contract of th	215-788-604				(0509		
Scheduled Start Dat 8/16/17			Scheduled Cor 3/30/17	npletio	n Da	ate (11)	Name of OSI- BRISTOL E			AL INC				
Occupancy Status D								Street Addres	THE PARTY OF THE P						
1 0 000			uring Entire P					1123 BEAV		The state of the s					
			tside of Norm	al Hou	ırs –	7an	n to 3pm								
Describe:								BRISTOL, F	PA 190	007					
Facility Occu Scope of Work (Che		0.00	The Charles of State												
		iai ap							\boxtimes	Full Conta	inment wit	h Nega	ative P	ressu	ure
≥3 sf or ≥3 If	f			\boxtimes	Rei	nova	ation			Mini-Enclo	sure				
≥160 sf ≥260	O If				Der	moli	tion				Procedure				
										Non-Exem	pted and I				
Asbesto	os-Con		ē.	Norm	ocat		h	Description Asbestos-Con			Amoun (Specify	t	Abate	ment	t Type
	erial (A		le .		olely		u	Material (A			SF or LF				m
	E ABA			Maint	enar	nce (7.7	(i.e., thermal s	ystems				Ren	Re .	encl
ın	Facility (13)	y		Custo	(12)	Staf	17	insulation, surfactor or other miscella					Remova	Repair	Enclsoure
	(10)			Yes	No	N/	/A	or other miscella	ancous	?'			<u>=</u>		re
1st Floor Generat	tor Ro	om P	T		П	T	7	Transite Bus	Duct		200 SF	-		71	TIT
Basement Cable	Room			X		T	1	Transite Bus			32 S F			fir	fiffi
1 St Floor Switch E	Board	Roon	1	\boxtimes		Ī		Vat/Mast	ic		100SF			٦١Ē	
Basement Cable	Room							ACM Put	ty		5 LF				
			~												
N (D :: .	101 1				Ц] [1						
Name of Registered	vvaste	Haule	Г				P Waste r ID No.	Cubic Yards of Waste	Name	of Registe	ered Landf	fill			
SERVICE TRANSI	PORT	GRO	UP, INC.			990		10	MINE	RVA LA	NDFILL				
City, State						101010		Disposal Date	City, S	State			-		
NEW CASTLE, DE								TBD	WAY	NESBUR	G, OH 44	1688			
Completed By (Print		e)			Tit			Signature	20	0 0	2		ate		
Patrick T. DeCaro)				PF	KOJ	J. MGR.	Patrick	9.1	Or Can	s/gl	7	/17/20)17	

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

Date of Notification	(1) 7/17/17			Na	me	of Build	ing Owner / Ope	erator (2)			EG			\\//
Agencies Notified	Type Notific	cation			rizo	Addres:				<u> </u>	FD (8)	1	- LI	
⊠ EPA	I J po reduit	Jation				liam S				Imi				
☐ DEP		al					ip Code				AUC	1	0	2013
□ DOL		ended R#1-7/	28/17			k, NJ				IL L	****	, 1	0 6	_U!#
□ DOH	☐ Eme	ergency				of Conta				1 1	T - .			
☐ DCA		cellation				aylor	200			AS	Telep	hon	e Nu	mber
Name of Facility Wh	oro Abatam	ont in Takina	Di-	F	AC	ILITY I	NFORMATION			Seminarium and a semina				1
Market Central O	ffice	ent is Taking	Place	(3)			Type of F							
Street Address	11100			-				ol (K-12)	.					
95 William Street							Subc	napter 8 (Other than K	-12)				
oo remain onco							Other	(I.e. priva	te & comme	rcial build			, etc	.)
City (5)		County (6)	10	Count		d= (7)	Square Fe		# of Floors		Bldg. A	Age		
Newark			1	Jouni	у Со	de (7)	425	EWELEN, I	12			70	+/-	
Newark		Essex							being demo	lished)				
Name of Manitorina	Firm Him dh	D 1111 0		-			Commur							
Name of Monitoring USA Environment	Firm Hirea b	y Building Ov	vner (3)	1	ASCM I		batement	Contractor (9)				
Street Address	tai inc.								DNMENTAL	INC				
8436 Enterprise A	Manua						Street Add							
City, State & Zip Coo							1123 BEA							
Philadelphia Pa 1							City, State	& Zip Coo	de					
Project Manager for I		irm	Tale		- 11		BRISTOL		07					
Wark Jenkins	vioriitoring i	11111		-365		umber	Telephone			License				
Scheduled Start Date	(10)	Scheduled Co					215-788-6				005	09		
ON HOLD		onedaica oc	inpict	1011 D	ale ((11)	Name of O		NMENTAL	INIC				
Occupancy Status Du	uring Abatem	nent (Check o	nly or	ne)			Street Add		MINITAL	IIVC				
Facility Close	d/Vacated D	uring Entire F	Period	of Al	bate	ment	1123 BEA		REET					
Abatement Pe	erformed Ou	tside of Norm	al Ho	ours -	- 7ar	n to 3pr	m City, State							
Describe: 5	PM - 1:30	AM					BRISTOL							
Facility Occup							DICIOTOL,	TA 1300	,					
cope of Work (Chec	k all that app	oly)												
								⊠ F	ull Containm	ent with N	Vegative	Pre	SSUL	e
≥3 sf or ≥3 lf			\boxtimes	Re	nova	ation			Mini-Enclosure		3		oour	
≥160 sf ≥260	f			De	molit	tion		Ti o	Blove Bag Pro	cedures				
									lon-Exempted		n-Friable	Pro	cedi	ire
	ation of			Locat			Description	on of		mount			ent T	
	-Containing al (ACM)			nally		d	Asbestos-Co		52	Specify	-	1	T .	T
	ABATED			olely tenar			Material (A		SI	or LF)			m m	m
	acility			odial			(i.e., thermal insulation, surfa		- 1		Rem	Re	cap	Encisoure
	13)		0000	(12)	Otan		or other misce	llaneous)			Removal	Repair	Encapsulate	nos
		ĺ	Yes	No	N/A	A		arroodo)			<u>m</u>		ate	-G
t Floor Generato	Room PI	r	\boxtimes	П		1	Transite Bu	s Duct	2	00 SF				
asement Cable Ro	oom		X	Ħ	T		Transite Bu					H		H
Floor Switch Bo	ard Room		X	Ħ	F	i	Vat/Mas			2 S F		님	님	
asement Cable Ro			X	H	+=	1				00SF				Ц
	70111			H	-	-	ACM Pu	tty		5 LF		니	\sqcup	\perp
			H	H	H							Щ	Щ	Ц
me of Registered W	aste Hauler			NJ	DEP	Waste	Cubic Yards	Name o	f Registered	andfill				Ш
BVICE TRANSPO	DT CDOU	D INC		На	uler	ID No.	of Waste							
RVICE TRANSPO y, State	KI GRUU	r, INC.		20	990		10	-	VA LANDFI	LL				
W CASTLE, DE 1	9720						Disposal Date TBD	City, Sta	ite ESBURG, O	H 44688	2			
mpleted By (Print or	Type)			Title	е	-	Signature			74000	-	-		
trick T. DeCaro	outrous (E)			112-107-21	-	MGR.	D-1- 1	0	Rus	1.	Date 7/17/2	017		
							Patrick	s All	Thurs,	11		311		
17080										1				

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120) 14 3239 Date of Notification (1) Name of Building Owner / Operator (2) 7/17/17 Verizon Agencies Notified Type Notification Street Address \boxtimes EPA0690 95 William Street DEP Initial City, State & Zip Code 18 2017 DOL0669 X Amended Newark, NJ DOH 0706 X Emergency Name of Contact Telephone Number DCA Cancellation Alex Baylor OS CONTROL & ASELS FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Market Central Office School (K-12) Street Address Subchapter 8 (Other than K-12) 95 William Street Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 425000 70+1-Newark Essex Current Use (Prior if being demolished) Communications Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) USA Environmental Inc. BRISTOL ENVIRONMENTAL INC Street Address Street Address 8436 Enterprise Avenue 1123 BEAVER STREET City, State & Zip Code City, State & Zip Code Philadelphia Pa 19153 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Mark Jenkins 215-365-5810 215-788-6040 00509 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7/31/17 8/11/17 BRISTOL ENVIRONMENTAL INC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET X Abatement Performed Outside of Normal Hours - 7am to 3pm City, State & Zip Code Describe: 5 PM - 1:30 AM BRISTOL, PA 19007 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf ≥260 If Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate TO BE ABATED Maintenance or Enclsoure (i.e., thermal systems Remova Repair in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A st Floor Generator Room PIT Transite Bus Duct 200 SF lasement Cable Room X Transite Bus Duct 32 S F St Floor Switch Board Room X Vat/Mastic 100SF asement Cable Room X **ACM Putty** 5 LF ame of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste ERVICE TRANSPORT GROUP, INC. 20990 10 MINERVA LANDFILL Disposal Date City, State EW CASTLE, DE 19720 TBD WAYNESBURG, OH 44688 impleted By (Print or Type) Title Signature Patrick D. D'Erro /jl trick T. DeCaro PROJ. MGR.

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7/17/2017



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City, State Union City, NJ					100	sal Date 25-17	8	City, Stat							
Completed by Jaime Delgado	Title Proj.	Mana	iger.			Signature	16	7			Dat 08	e -11-1	17		

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

I (Pursuant to N.J.A.C. 8:60 and 12:120) Name of Building Owner / Operator (2) Date of Notification Holmdel Realty Development LLC 08-16-2017 Agencies Notified Type Notification Street Address \boxtimes **EPA** 922 Highway 33, Bldg 6, Suite 1 DEP Initial City, State & Zip Code OR CONTROL & \boxtimes DOL Amended Freehold, NJ 07728 DOH Name of Contact Emergency DCA Cancellation Ed Turkot **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Cosmetic Essense Innovation School (K-12) Street Address Subchapter 8 (Other than K-12) 2182 Rt 35. South Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 540,000 Holmdel, NJ Monmouth Current Use (Prior if being demolished) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health and Safety Services Resource Management Group, LLC Street Address Street Address P.O. Box 365 2115 Hamilton Ave, Suite 202 City, State & Zip Code City, State & Zip Code Berlin, NJ 08009 Trenton, NJ 08619 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 856-452-1311 Mr. Jim Proctor 609-914-4279 01185 Name of OSHA Monitor Scheduled Start Date (10) Scheduled Completion Date (11) 8-26-2017 8-30-2017 J&S Environmental Laboratories, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West Abatement Performed during Normal Hours: City, State & Zip Code Describe: 8:00am - 5:00pm Union, NJ 07083 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation \boxtimes Mini-Enclosure ≥160 sf ≥260 lf \boxtimes Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulat Enclosure Removal Maintenance or Repair TO BE ABATED (i.e., thermal systems Custodial Staff? insulation, surfacing, VAT in Facility (13)or other miscellaneous) (12)Yes No N/A M compounding mezzanine \bowtie Fittings 9-10 each X compounding warehouse Fittings 4 each Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Resource Management Group, LLC 0035218 TBD Grows Landfill City. State Disposal Date City, State Trenton, NJ 08619 TBD Morrisville, PA Completed By (Print or Type) Title Signature Date Mr. Brian Haney President 08-16-2017

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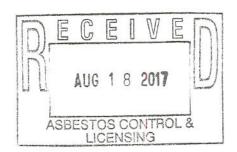
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Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	/ No.			of Abatement Colutions cont						
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Project Manager for Monitoring Firm			Telephor	ne No.			one No. 873-9418		License 1 01301	No.		30	
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Print Form

STATE OF	NEW JERSEY D	EPARTMENT OF L	_ABOR NOTIFICATION OF ASBEST	A CONTRACTOR OF THE PROPERTY O	#000593							
Date of Notification (1) 08/08/2017 * Additional	PAI d ACM mater		Name of Building Owner/Operator (2) Mandelbaum Property Management									
Agencies Notified (X) USEPA (X) NJDEP (X) NJDOL (X) DOH () DCA	(X) Amend Amend	otification ed ment # ency (including ation)	Street Address 301 Commerce Road City, State, Zip Code Linden, NJ 07030 Name of Contact Rick Francis AUG 1 8 2017 ASBESTOS CONTROL & LICENSING									
		FACILIT	TY INFORMATION									
Name of Facility Where Abateme Commercial Building Street Address 301 Commerce Road			Type of Facility (4) () School (K-12) () Subchapter 8 (other than K-12) (X) Other (i.e. private & commercial bldgs., homes, etc. Sq. Feet: 120,000 approx # of Floors 1 Bldg. Age 80									
City (5) Linden	County (6) Union	County Code (7) (State Use Only)	Current Use (if being demolished):									
Name of Monitoring Firm Hired b Industrial Safety & Environmen		ASCM No. N/A	Name of Contractor (9) Industrial Safety & Environmental Solutions, Inc.									
Street Address 3300 Hudson Avenue		N N	Street Address 3300 Hudson Avenue									
City, State, Zip Code Union City, NJ			City State, ZipCode Union City, NJ 07087									
Project Manager for Monitoring F David Camacho	Telephone N 201 325-0		<u>Telephone Number</u> (201)325-0055		License Number 01124							
Scheduled Start Date (10) 08/05/2017	Scheduled C 08/25/20	completion Date (11)	Name of OSHA Monitor Industrial Safety & Environmental Solutions, Inc.									
Occupancy Status During Abater (X) Facility Closed/Vacated Du () Abatement Performed Outs	ring Entire Period	of Abatement	Street Address 3300 Hudson Avenue									
() Other - Describe:			City, State, Zip Code Union City, NJ 07087									
Source of Work (Check all that and () Minor Project (< 25 SF () Small Project (>25 <16 (X) Large Project (>160 SF	or < 10 LF ACM 0 SF or >10 <26	0 LF ACM)	(X) Renovation (X) Full Containment with Neg () Mini-Enclosure with Nega () Glove-bag Procedure and (X) Non-Exempted (*) and No	ative Pressure d/or Wrap and	cut procedure							

Location of Asbestos-Contain-		tion Norma		Description of ACM	Amount (Speci-	Abatement Type					
ing Material (ACM) To be Atated in Facility (13)		Maintenar dial Staff? (ice or Cus- (12)	(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous.)	fy SF or LF)	Re mo val	Rep air	Enca psula te	En clo sur e		
	YES	NO	N/A								
Maintenance Shop			Х	Floor VAT 12"X12"	~ 900 SF	X					
Lab Walls 1 and 2 (Exterior)	X			yellow and white spackle/sheet rock	~ 1870 SF	X					
Lab Walls 1 and 2 (Interior)			Х	Interior wall tape and sheet rock	~ 1800 SF	X					
Exterior facade			X	Transite panels	~ 800 SF	X					
Name of Reg. Waste Hauler Atlas Disposal Option		Waste Ha	uler ID#	Cubic Yards of Waste ~ 40	Name of Reg. Landfill Grand Central Sanitation 1963 Pen Argyl Road						
City, State 311 East Blackwell Street, Dover, NJ 07801				Disp. Date 08/25/2016	City, State Pen Argyl, PA 18072						
Completed by (Print or Type) David Camacho	Title Project Supervisor			Signature Man	Date 08/08/2017						



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Chidoup	N		ICATION	ate of Ne I OF ASB to NJAC	ESTOS /	ABATE					E	discourse and a second	\mathbb{V}			
Date of Notification (1) 08/15/2017								Name of Building Owner/Operator (2) The Dial Corporation c/o Henkel Corporati								
Agencies Notified Type Notification								- с. рс. с.	1	L						
2.53			One H	łenkel V	Vay					ASBES				L &		
▼ DEP			City, State, Zip Code											-		
DOL Amendment Emergency (_ [Rocky Hill, CT 06067												
DOH justification)	inoidaing			f Contact					Telephone Number							
DCA Cancellation			200000000000000000000000000000000000000	drian Gil	3	ON.										
Name of Facility Where Abatement is Taking	Place (3)	FACI	LITY INF	ORMAII	ON	Type	of Facility (4)		-	NEW YORK		-		
Former Tank Pads BE-01 and BE-2							-	School (K-1								
Street Address								Subchapter	8 (Oth							
2 Wood Street								Other (i.e. p etc.)	rivate a	& commer	cial bui	dings	, home	es,		
City (5)								re Feet	# 0	f Floors	E	Bldg. /	Age			
Paterson							200		1		- 1	92				
County (6)			County (Code (7) USE ONLY	1			nt Use (Prid		ng demolis	shed)					
Passaic			· .					rently unu								
Name of Monitoring Firm Hired by Building C BioTerra Solutions	Owner (8)		ASCN	I No.					ontractor (9)							
Street Address								ntracting,	inc.							
1130 West Chester Street			Street Address 1360 Clifton Avenue						ie Unit 365							
City, State, Zip Code	City, State, Zip Coo					Security Andrews										
Union, NJ	Clifton, NJ 07012															
Project Manager for Monitoring Firm	-		Telephor	ne No.		Teleph	none N	0.		License	No.					
Rick Eustaquio		(973)	494-376	2	(973) 450	-9500		001036	6						
Start Date (10)		grand Commence and				e of OSHA Monitor										
08/31/2017	08/31/2	T. T. S. S. S.			ntracting, Inc.											
Occupancy Status During Abatement (Check	e)	Street Add														
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of A	baten	mon				State, Zip Code									
Abatement Performed Outside of Norm Other – Describe:	ai racility	Hours	Clifton, NJ 07012													
Scope of Work (Check All That Apply)	of Parks					Omto	JII, 140	07012	5. 22995.5							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×	Ful Mir Glo	ni-Enclosure ovebag Prod	20.T.							
						P	ı NU	n-Exempled	() and	u Non-Fna	DIE FIC		ement			
Location of	4.	Locati Iormal	22.00		Doo	scription of taining Material (ACM)					3		/ре			
Asbestos-Containing Material (ACM)		d Sole		Asbes					Α	mount			Ш			
TO BE ABATED In Facility	0.000	odial S	Section Contract of	(i.e.	thermal:			ition,		Specify or LF)	Ren	Re	Encapsulate	Enclosure		
(13)		(12)				cing, VAT, or niscellaneous)			31	OI LF)	Remova	Repair	lusc	nso		
	Yes	No	N/A								2		ate	Te		
2 Concrete pads - exterior		X			Tar Wa	aterpro	ofing		20	00 SF	X					
						300	5162									
											+					
											-					
Name of Registered Waste Hauler		IN	JDEP W	aste	Cubic \	Varde		Name of F	Panista	red Landfi	11					
Atlantic Carting		Н	auler ID	No.	of Was		1014 +0400 104 1040 1050 1050 1000 M04400000				Carr					
		N	J-641/J	JA464	30		Grand Central Sanitary Landfill Corp					,.				
City, State					Dispos	al Date	ate City, State Pen Argly, PA									
Wayne, NJ Completed by	Title				TBD	11	1	Pen Arg	jiy, P	-	oto					
Milena Zoric	Directo	or	V	griajure	Z			1	ate 8/15/	2017	25					

8/14/2017

Constantine Vivian

President



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Date of Notification (1)					Name of Building Owner/Operator (2)							1 8 201/			
08/15/	17	_		55		cking & Disposal		132474							
Agencies Notified Type Notifie	cation			Stree	t Address			ASBESTOS CONTROL & LICENSING							
				PC	Box 13	62		L LI	CEN	SIN	à				
☐ DOLWD ☐ Amende				City. S	State, Zip	Code					-				
					II, NJ 07										
DCA Emerge		uding			of Contac			T-1-1-1-1-1							
(NJAC 5:23-8) justifica						X.		Telephone Numb)er						
Cancella	ation			Do			1								
FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4)															
Residence	raking r	iace	(3)					100							
Street Address			-				☐ School (K-12) ☐ Subchapter 8 (Other than K-12)								
Street Address							Other (i.e., p	private and commercial buildings,							
City (5)							Square Feet	# of Floors	DI	da A					
Lakewood							Control & Control Control Control Control	A DATA MANAGE THE PROPERTY OF A DOCUMENT		dg. A	ge				
				10			1500	1		65					
County (6) Ocean				Cour	ity Code (7)(STATE USE ONLY)		ior if being demolis	hed)						
							Residence								
Name of Monitoring Firm Hired by Bui	lding Ow	mer (8)	ASCM	No.	Name of Abateme									
N/A						Guardian Cor	ntracting, Inc.								
Street Address						Street Address									
						1889 Route 9	, Unit 61								
City, State, Zip Code						City, State, Zip Co	ode			S					
						Toms River, I	New Jersey 08	755							
Project Manager for Monitoring Firm			Tele	phone	No.	License No.									
						732-349-9932		00624							
Start Date (10) Scheduled Completion Date						te (11) Name of OSHA Monitor						-			
08/25/17	08	/	29	_ / _	17	E.M.S.L. Anal	ytical								
Occupancy Status During Abatement	Check o	nly or	ie)			Street Address									
☐ Facility Closed/Vacated During Ent	ire Perio	d of A	bater	nent		1056 Stelton									
☐ Abatement Performed Outside of N	lormal Fa	acility	Hour	s - Des	cribe	City, State, Zip Co	nde								
Time of Abatement:AM	PM/_		PM-		AM	Piscataway, N	854								
Scope of Work (Check all that apply)															
☐ >3 sf or >3 lf		Ren	ovoti	20			ainment with Neg	gative Pressure							
⊠ ≥160 sf or ≥260 lf		Den				☐ Mini-Encl									
							Ion-Friable Procedure								
			ocati						Abatement Type						
Location of		Used	ormal			Description of			D	D	т	т			
Asbestos-Containing Material (ACN TO BE ABATED	Л)		tena			stos Containing Mat		Amount	em	Repair	nce	ncl			
IN Facility		Custo			(i.e	., thermal systems i surfacing, VAT,	nsulation,	(Specify SF or LF)	Remova	=	sde	Enclosure			
(13)			(12)		_	other miscellaned	ous)	0. 0. 2.)	_		Encapsulate	Ге			
		res	No	N/A							· · ·				
exterior			\boxtimes		asbesto	s siding		1500 sf	\boxtimes						
	Г	7	7	П					П		П				
Name of Registered Waste Hauler			N.	JDEP V	Vaste	Cubic Yards of	Name of Regis	tered Landfill	1						
Guardian Contracting, Inc.			Ha	auler IE	No.	Waste	T.R.R.F.	A STATE OF THE STA							
City, State						3 Disposal Data	100000000000000000000000000000000000000				_				
						Disposal Date	City, State	D							
Toms River, New Jersey						08/30/17	Tullytown,	Pennsylvania							
Completed By (Print or Type)	Title					Signature		// Dat	e	1					
Nicholas Fernicola	Proj	ject N	lana	ger			7	1 8	115	11-	7				
ASB-41							-	1	1.0	11					