Date of Notification (1)						Name o	of Building	Owner/Gies, LP	Operator (2)	1621	PM	9: 5L		
08/02/2012									POHES	100		- 4		
Agencies Notified			otification	veses on		25 Cor	Address mmerce		854ES	ICFA	CONT	ROL		
(X) EPA)Initial No	otification ed Notificat	ion		ate, Zip C				CHIAR	4 %	(C	
(X) DOL (X) DOH) Amende) Cancell		ion		ord, NJ C					1		
() DCA		1) Cariceii	eu			of Contact			Phone	9	*:		
() BOA						Craig	Marschk	(e			_		/	
				-	FACILITY IN									
Name of Facility Where Al							Facility (4							
Pleasure Bay Apartme	ents – Bu	uilding	1#11 (199-216)			ool (K-12)		- K 40)					
Street Address							chapter 8		an K-12) ommercial bld	as hor	mes etc	:)		
245 Atlantic Avenue	On which	<u> </u>		Countrie	2nda (7)	1 (1/0"	ior (i.o. pr	.,,,,,	orran oran oran	901, 1101				
City (5) Long Branch	County (County C		Sq. Fee	t : <u>16,960</u>	SF	No. of Floors	: 2				
Long Branch	WIOTITIO	utii		(Otate of	oc Only)									
							ge: 48 ye		domolished)	Pocido	ontial A	nadmai	ate	
						Current	Use (prio	ir it being	demolished)	Reside	entiai A	partmer	its	
Name of Monitoring Firm	Hired by B	Ida Ow	mer (8)	ASCM N	0	J			Name of Co	ntractor	(9)			
Environmental Health				00140	·.				Superior Al					
Street Address		,	,			Street A	Address							
655 West ShoreTrail						2 Hend	erson Dri	ive, Ste	Α					
City, State, Zip Code							te, Zip Co							
Sparta, NJ 07871						- 71000 ANN 1155-00	aldwell, N		·					
Project Manager for Monit	oring Firm	Te	lephone I			(973) 80	ne Numb	er		00411	e Numb	per		
JP Von Doehren		(9)	73) 729-	5049		(973) 00	70-1010			00411				
Scheduled Start Date (10)		Sc	heduled (Completion	Date (11)	Name o	f OSHA N	/lonitor						
8/20/2012		8/2	24/2012				or Abaten	nent, Inc						
Occupancy Status During	Abatemen	nt (Chec	k only on	e)		Street A		04-						
() Facility Closed/Vacated () Abatement Performed	d During E	ntire Pe	eriod of A	batement		2 Hend	erson Dri	ve, Ste.	A					
(X) Other – Describe: W	ork will be	e nerfoi	med wh	nours – ile building	a is occupied.	City Sta	ate, Zip C	ode						
Construction barriers wi	Il be place	ed to is	olate the	work area	as from the		aldwell, N							
Occupied portion of the														
Source of Work (Check all	that apply	y)						320						
	22													
() Demolition (X) Rer (X) Large Proj. (>160 SF		E A C 8.41)	/ \ QM D	roi (>25<1	60 SE or >10 <2	60 LE AC	M) ()	Minor Pr	oj. (<25 SF or	<10 F	ACM)			
(X) Full Containment with				Mini-Encl	losure (X) Glove	bag Proce	edure ()	Non-frial	ole Procedure	for Ast	estos R	oof Ren	noval.	
Location of Asbestos-Cont				ally Used	Description of			Amoun	(Specify SF	or LF)	Abate	ment Ty		
Material (ACM) in Facility	(13)		y Maint./	Custodial	systems insula		acing,							
		Staff? (1		NO	VAT, or other i	miscell.)					Rem.	Rep.	Encap	Enclose
Boiler Room, Maintenan		NA	YES X	NO	Air Cell and E	Ihows		1,350	I F		X	1	T	T
Shop, Bathroom, Hallwa			^		All Gell alla L			1,000			100			
Laundry Room, Electrica											l		1	
Meter Room, Crawl Space													-	-
Boiler Room, Maintenan			X		Pipe Elbows			72 Ea			Х			
Shop, Hallway & Storage Rooms								1						
Boiler Room			X		Tank Insulation	on		80 SF			Х			
Boiler Room			X		Flue Packing			4 SF			Х			
Crawlspaces			X		Pipe Insulatio	n Debris		430 S	F		Х			
Name of Reg. Waste Haul		10000000		te Hauler I	D#	A CONTRACTOR OF THE CONTRACTOR	ards of W	aste				Landfill		
Service Transport Group	, Inc.	SW	V2117			50				Miner	va Lan	dtill		
City Ctata							Disp. Da	ate						
City, State New Castle, DE							8/24/20			9000 N	Minerva	Road		
Guotio, DE										6000		OH 44	688	
Completed by (Print or Typ	oe)	Titl	e			Signatur	e _	/	1	Date				
Nick Petrovski	7	160,000	esident		i i		1//	///		08/16/2	2012			
eren a mentelo el cur cultivirses etc. el Cristilia el Cr						///	1/1	////	Zm					
						110	NI	10	-m	10/50	00) 465	FOTOO	0// 0	100

Date of Notification (1)					Name	of Building	Owner/	AUG 21	PM C	1:55			
08/02/2012	Notified Notified (X) Initial Notification () Amended Notification () Cancelled Facility Where Abatement is Taking Place (3) e Bay Apartments – Building # 11 (199-216) dress entic Avenue County (6) Monmouth County Code (State Use County Inc.) Monitoring Firm Hired by Bldg. Owner (8) mental Health Investigations, Inc. dress et ShoreTrail e, Zip Code NJ 07871 anager for Monitoring Firm Doehren Telephone Number (973) 729-5649				Home	Propen	iles, EPF	. 100 21	' ' ' '		1		
Agencies Notified	Notified Notification Type					Address mmerce	Drive	BESTOS (CON	TROL			
(X) EPA					City, St	tate, Zip C	Code	& LICEN	2140	3	•		
(X) DOL	1			tion	Cranfo	ord, NJ	07016			<i>®</i>	7,		
(x) DOH		() Cancel	led			of Contac			Phon	e		54 83	
()DCA						Marschl				distribute la la companya di santa di s			
				FACILITY IN			-				- 1		
Name of Facility Where Abatem	ent is T	aking Place (3)			Facility (
	- Build	ling # 11 (199-216)			ool (K-12 chapter 8		an K-12)					
Street Address					(X) Oth	ner (i.e. pr	rivate & c	ommercial bld	gs., ho	mes, etc	.)		
	aty (6)		T County (Code (7)	┤`′	,		2.2					
					Sq. Fee	et : <u>16,96</u> 0	0 SF	No. of Floors	:_2				
					Bldg. A Current	ge: <u>48 ye</u> Use (prid	ears or if being	demolished)	Resid	ential Ap	oartme	nts	
Name of Monitoring Firm Hired	y Bldg.	Owner (8)		lo.				Name of Cor Superior Ab				-	
	stigati	ons, Inc	00140		Stroot /	Address		Superior AD	atcine	110.			
Street Address 655 West ShoreTrail						erson Dr	ive, Ste	A					
City, State, Zip Code						te, Zip Co						WE-1	- 1.0
Sparta, NJ 07871						aldwell, I		· · · · · · · · · · · · · · · · · · ·	Lison	se Numb	or		
Project Manager for Monitoring JP Von Doehren	Firm					one Numb 08-1616	er		00411		ei		
Scheduled Start Date (10) 8/23/2012			Completion	Date (11)		of OSHA N			,				
Occupancy Status During Abate	ment (C	heck only or	ie)		Street A			•					
() Facility Closed/Vacated Duri	ng Entire	e Period of A	batement		2 Hend	erson Dr	ive, Ste.	A					
() Abatement Performed Outside	ie of No	mai Facility	Hours –	a is occupied	City Ct	ate, Zip C	odo						
(X) Other – Describe: Work w	ll be pe	o isolate the	work are	g is occupied.		aldwell, l							
Occupied portion of the build		o isolate the	WOIK die	as from the	West	aluwell, i	10 01 000	\$E					
Source of Work (Check all that a										10,000	110		
() Demolition (X) Renovati	nn.												
(X) Large Proj. (>160 SF or >26	OLF AC	CM)()SMP	roj. (>25<1	160 SF or >10 <2	260 LF AC		Minor Pr	oj. (<25 SF or	<10 LI	ACM)	(5		
(X) Full Containment with Nega	tive Pre	essure (X) Mini-Enc	losure (X) Glove	ebag Proce	edure ()		ble Procedure					
Location of Asbestos-Containing	Is Lo	ocation Norm	ally Used	Description of			Amoun	t (Specify SF o	or LF)	Abater	ment Ty	be	
Material (ACM) in Facility (13)			Custodiai	systems insula VAT, or other		acing,				1			
			NO	V/ (1, or outlor)						-	Rep.	Encap	Enclose
Boiler Room, Maintenance		Х		Air Cell and E	lbows		1,350	LF		X			
Shop, Bathroom, Hallway &												1	
Boiler Room, Maintenance	+	X		Pipe Elbows			72 Ea	•		X			
Shop, Hallway & Storage				liberatives control			1						
Rooms				Tank Insulation	n .		80 SF		-	X		1	1
Boiler Room	-			Flue Packing			4 SF			X			1
Boiler Room Crawlspaces	+			Pipe Insulatio			430 S	F		Х			
Crawispaces	+	- - -		1 ipo incurano		-0.070							
Name of Reg. Waste Hauler	1	NJDEP Was	te Hauler	ID#	Cubic Y	ards of W	aste		Name	of Reg.	Landfill		
Service Transport Group, Inc.		SW2117			50				Mine	rva Land	lfill		
Cit. Chata						Disp. D	ate						
City, State New Castle, DE						9/05/20			9000 1	Minerva	Road		
Hew Castle, DL						1			Wayn	esburgh	OH 44	688	
Completed by (Print or Type)		Title	-		Signatur	e /	/	///	Date				
Nick Petrovski		President				//	///	//	08/02/	2012			
(NACONOSTITA TOTOTOGOSTO)					//	1.1	1/1/1	Brand					
				-9	16	My,	119	C:\WORD\	MYDO	CS\ASB	ESTOS	9/18	3/00

Date of Notification (1)			***************************************		Name	of Buildin	g Owner/	Operator (2)		-	1,3		
08/02/2012					Hom	e Proper	ties, LP	Opprator (2) AUG	21	PM o	/2		
Agencies Notified		Notification	Туре		Stree	Address	e Drive	& LIC		11 9.	58		
(X) EPA		()Initial No				State, Zip (Code	8/10	12 6	Hillo	0		
(X) DOL		(X) Amende		tion		ford, NJ	07016	- LIC	ENSI	NOTE	UL		
(X) DOH		() Cancel	led			of Contac	zt		Phone	46	4 004		
()DCA					111100000000000000000000000000000000000	Marsch	ke				4 66		
				FACILITY I							-		
Name of Facility Where Ab Pleasure Bay Apartme	atement is T	aking Place (3) 225 252\			of Facility							
Street Address	nts - build	uing#09 (233-232)			hool (K-12 ochapter 8		on K 12)					
245 Atlantic Avenue								ommercial blo	lgs., ho	mes, et	c.)		
	County (6)		County	Code (7)	1				52(8) 3.0				
	Monmouth			se Only)	Sq. Fe	et : <u>16,96</u>	0 SF	No. of Floors	: 2				
					Bldg	Age: 48 y	ears						
					Currer	nt Use (prid	or if being	demolished)	Reside	ential A	partme	nts	
Name of Monitoring Firm H	red by Bldg	. Owner (8)	ASCM N	lo.				Name of Co					
Environmental Health I Street Address	nvestigati	ons, Inc	00140		Chron	Address		Superior Al	ateme	nt, Inc.			
655 West ShoreTrail					- STREET, 373	Address derson Dr	ive. Ste	A					
City, State, Zip Code				- Xina		ate, Zip C	-						
Sparta, NJ 07871						Caldwell,							
Project Manager for Monitor JP Von Doehren	ring Firm	Telephone 1 (973) 729-				one Numb 808-1616	per		Licens 00411	e Numb	per		
		8 8			(373)	700-1010			00411	0.00.00			
Scheduled Start Date (10) 8/22/2012		Scheduled (8/30/2012	Completion	Date (11)		of OSHA N or Abater			ĺ		NBO TO	— Miceral	
Occupancy Status During A	batement (C	Check only on	e)			Address	,						
() Facility Closed/Vacated () Abatement Performed O	During Entir	e Period of Al	patement		2 Hend	derson Dr	ive, Ste.	A					
(X) Other – Describe: Wor	rk will be no	ormal Facility i	lo buildin	a is essuried	011 0			(
Construction barriers will	be placed t	o isolate the	work area	g is occupied.		tate, Zip C aldwell, I							
Occupied portion of the be	uilding.				West	aluwell, I	45 07000						
Source of Work (Check all the	nat apply)	Ţ											
() Demolition (X) Reno	vation												
(X) Large Proj. (>160 SF or	>260 LF AC	CM) () SM Pr	oj. (>25<1	60 SF or >10 <2	60 LF AC	CM) ()	Minor Pro	oj. (<25 SF or	<10 LF	ACM)			
(X) Full Containment with N	Negative Pre	essure (X)	Mini-End	osure (X) Glove	bag Proc	edure ()	Non-friab	le Procedure	for Asb	estos R	oof Rer	noval.	
Location of Asbestos-Contai	ning Is Lo	ocation Norma		Description of	ACM (i.e.	thermal	Amount	(Specify SF of	r LF)	Abate	ment Ty	ре	
Material (ACM) in Facility (1		ely by Maint./C f? (12)	Sustodial	systems insula VAT, or other r		acing,							
	NA		NO	VAT, or other i	mscen.)				- 1	Rem.	Rep.	Encap	Enclose
Boiler Room, Old Laundry		X		Air Cell and E	lbows		1,375 [_F		Х			T
Room, Pool Storage Room Electrical Meter Room, Cra												1	
Spaces	IWI								- 1			1	
Boiler Room, Old Laundry		X		Pipe Elbows	- 102		51 Ea.			Х		-	+
Room, Pool Storage Room							Villander et et			Talana caran			
Boiler Room		X		Tank Insulation	n		80 SF			Х			
Boiler Room	_	X		Flue Packing			4 SF		_	Х			
Crawlspaces		X		Pipe Insulation	n Debris		210 SF			Х			
Name of Reg. Waste Hauler		NJDEP Wast	o Hauler II	D# 1	Cubic V	ards of Wa	ooto.		Name o	(D			
Service Transport Group, I		SW2117	U#	50	aius oi vva	asie		Minery					
										a Danc	*****		
City, State						Disp. Da							
New Castle, DE						8/30/201	12		9000 M			(00	
Completed by (Print or Type)		Title			Signatur				Waynes Date	burgh	OH 44	288	
Nick Petrovski		President			Jigriatui	//	///		Date 08/17/2	012			
				Į.	//	1/1/	1///	na (
					10	41	000		1) (5-5-5				
								C:\WORD\	MYDOC	SVASB	ESTOS	9/18/	00



Date of Notification (1)			********		Name	of Buildin	ng Owner/O	Operator (2)	12 AU	G 21	PM c). ~-	
08/02/2012					110111	e r tope	iues, Li	100			111 5	1. 28	
Agencies Notified (X) EPA (X) DOL (X) DOH () DCA		Notification (X)Initial N () Amend () Cancel	lotification ed Notifica		City, S Cran Name	Address ommerc State, Zip ford, NJ of Contact Marsch	Code 07016	AS	& L.		SING	kai e l	
				FACILITY II	NFORMA	TION				_		-	-
Name of Facility Where Abate Pleasure Bay Apartments Street Address 245 Atlantic Avenue					Type (() Sc () Sub	of Facility hool (K-12 ochapter 8	2) 3 (other tha	ın K-12) ommercial blo	dgs., ho	omes, e	tc.)		7)
	unty (6) onmouth			Code (7) Jse Only)	Bldg.	eet : <u>16,96</u> Age: <u>48 y</u> nt Use (pri	ears	No. of Floors		ential A	Apartme	nts	
Name of Monitoring Firm Hired Environmental Health Inv			ASCM 1 00140	No.				Name of Co Superior A					
Street Address					The second second	Address			- 50				
City, State, Zip Code Sparta, NJ 07871			-		City St	ate, Zip C	rive, Ste A code NJ 07006			-		-	
Project Manager for Monitoring JP Von Doehren		Telephone I (973) 729-		100	Teleph	one Numi 808-1616	ACCUSED TO A STATE OF THE STATE		Licens 00411	se Num	ber		
Scheduled Start Date (10) 8/28/2012		Scheduled (Completion	n Date (11)		of OSHA	Monitor ment, Inc.						
Occupancy Status During Abat () Facility Closed/Vacated Du () Abatement Performed Outs (X) Other – Describe: Work v Construction barriers will be	ement (Ch ring Entire ide of Norr vill be per placed to	eck only on Period of Al nal Facility I formed whi	batement Hours – ile buildin		Street / 2 Hend City, St	Address lerson Dr tate, Zip C	rive, Ste. A		He e e e e e e e e e e e e e e e e e e			-	
Occupied portion of the build	-												
Source of Work (Check all that () Demolition (X) Renovat (X) Large Proj. (>160 SF or >2 (X) Full Containment with Neg Location of Asbestos-Containin Material (ACM) in Facility (13)	ion 60 LF ACN ative Presi	sure (X) ation Norma by Maint./C	Mini-Enc ally Used	losure (X) Glove	bag Proc ACM (i.e. ition, surfa	edure () thermal	Non-friabl	j. (<25 SF or e Procedure (Specify SF o	for Asb	estos F	Roof Ren ment Ty Rep.	pe pe	Enclose
Boiler Room, Old Laundry Room, Pool Storage Room, Electrical Meter Room, Crawl Spaces		×		Air Cell and E	lbows		1,375 L	F		х			
Boiler Room, Old Laundry Room, Pool Storage Room		х		Pipe Elbows			51 Ea.			Х			
Boiler Room		X		Tank Insulatio	n		80 SF			Х			
Boiler Room		Х		Flue Packing			4 SF			Х			
Crawlspaces		Х		Pipe Insulation	n Debris		210 SF			Х			
Name of Reg. Waste Hauler Service Transport Group, Inc.		JDEP Wast W2117	e Hauler I	D#	Cubic Ya	ards of W				of Reg. va Lan		L	L
City, State New Castle, DE	· · · · · · · · · · · · · · · · · · ·					Disp. Da 9/12/201			Waynes	linerva sburgh	Road OH 44	688	
Completed by (Print or Type) Nick Petrovski	41 39.3	tle resident			Signatur	Il was	//sh		Date 08/02/2	012			

Date of Notification (1)					TN	(5.0			DE	pro pro	11/10		
08/02/2012					Home	e of Build e Prop	ling Owner/ erties, LP				27.0	#40 C	
Agencies Notified		Notification	on Type		Stroot	Addres		201	7 4110	~ -	PM 9		
								201	4 406	21	PM 9	: 5-	
(X) EPA		()Initial	Notificatio	n			ce Drive					٠ ٠	
(X) DOL		(X) Amer	nded Notif	ication	City, S	State, Zip	o Code	54;	2501	21.25	UNTI		110
(X) DOH		() Cano		ication	Crant	ford, N	J 07016	01	1-01	U5 i	MATI	ini	
()DCA		() Gario	ciicu		Name	of Conta	act		a jent	AF N	SILIO	THE	
					Craig	Marso	hke		1	JE_14.	THE		
No 6 5 - 201 - 140				FACILITY	INFORMA	TION			1'				
Name of Facility Where Ab	atement is	Taking Place	(3)			f Facility	(4)		_				
Pleasure Bay Apartme	nts – Buil	ding # 10	(217-23	4)	() Sch	nool (K-1	(2)						
Street Address		3277			() Sub	chanter	8 (other tha	n K-12)					
245 Atlantic Avenue					(X) Ot	her (i.e.	private & co	ommercial b	ldas be	moo	oto \		
City (5)	County (6)		Count	y Code (7)		(private a co	Jillilei Gai D	iugs., ne	mes,	etc.)		
Long Branch	Monmouth	ì		Use Only)	Sq. Fee	et : <u>16,9</u>	60 SF	No. of Floor	· 2				
			(0.0.00	OSC O(lly)		Wedhale		110. 01 1 1001	<u> 5. </u>				
					Bldg. A	ge: 48	years						
					Current	t Use (pi	rior if being	demolished) Resid	ential	Apartm	ents	
Name of Monitoring Firm H	red by Bldg	. Owner (8)	ASCM	No.				Name of Co	ontracto	r (O)			
Environmental Health I	nvestigat	ions, Inc	00140					Superior A	bateme	nt Inc	•		
Street Address			3,555		Street A	Address			- Control	110, 1110	·		
655 West ShoreTrail							rive, Ste A						
City, State, Zip Code			est-diministrative and		City Sta								
Sparta, NJ 07871					West C	aldwell.	NJ 07006						
Project Manager for Monitor	ing Firm	Telephone	Number		Telepho								
JP Von Doehren)	(973) 729			(973) 80				Licens		nber		
0.1.1.1.0					(0.0,00	0 1010			00411				
Scheduled Start Date (10)		Scheduled	Completic	on Date (11)	Name of	f OSHA	Monitor						
8/23/2012		8/31/2012			Superio	r Abate	ment, Inc.						
Occupancy Status During Al	patement (C	Check only or	ne)		Street A		mone, mo.						
() Facility Closed/Vacated I	During Entir	e Period of A	batement				rive, Ste. A						
() Abatement Performed O	utside of No	rmal Facility	Hours -				, 0.0. /						
(X) Other - Describe: Wor	k will be pe	erformed wh	ile buildir	ng is occupied.	City, Sta	te Zin C	Code		-				
Construction parriers will	oe placed f	o isolate the	work are	eas from the	West Ca	idwall	NJ 07006						
occubied bottion of the pt	ilding.				111001 00	nawon,	143 07000						
Source of Work (Check all th	at apply)										-		
() Domolitica () D													
() Demolition (X) Renov	ation	8					90						
(X) Large Proj. (>160 SF or	>260 LF AC	M)()SMP	roj. (>25<	160 SF or >10 <2	260 LF ACM	A) ()	Minor Proj	(<25 SF or	<101E	ACM)			
A . A . OOLIGINATION AMENIA	egative Pre	ssure (X) Mini-End	closure (X) Glove	ebag Proced	dure ()	Non-friable	Procedure	for Ach	actor I	Poof Do	mound	
200dion of Aspesios-Contain	ing 15 LC	cation Norm	ally Used	Description of	ACM (i.e. th	hermal	Amount (Specify SF of	rIF)	Abate	ement Ty	noval.	
Material (ACM) in Facility (13		ly by Maint./(Custodial	systems insula	ation, surfac	cina.	(speeding of c	" - , ,	Abate	ament i	pe	
		? (12)		VAT, or other	miscell.)	3,							
Pallar Part 1	NA	YES	NO						- 1	Rem.	Ren	Encan	Enclose
Boiler Room, Laundry Room	n,	X		Air Cell and E	Ibows		1,330 LF	:		Х	T	Т	Liiciose
Storage Room, Electrical Meter Room, Crawl Spaces	1						1,100 =		- 1	^	1	1	1
Boiler Room, Laundry Roor									- 1		1	1	1
Storage Room	n,	X		Pipe Elbows		W. 1000	72 Ea.			Х	+	-	-
Boiler Room	_						\$155.000 Files		- 1			1	
Boiler Room		X		Tank Insulation	on		10 SF			Х			-
Crawlspaces		Х		Flue Packing			4 SF	Views to the second second		X		-	+
riawispaces		X		Pipe Insulation	n Debris		350 SF			X			+
lama of Day West II I												-	
lame of Reg. Waste Hauler	1	NJDEP Wast	te Hauler I	D#	Cubic Yar	ds of Wa	aste		Name of	Pog	Londfill		
Service Transport Group, In	c. ;	SW2117			50				Minerv				
City, State								1 '	viillei v	a Lam	um		
						Disp. Da	ite						
lew Castle, DE						8/31/201			0000 Mi	m or	D		
completed by (Print or Type)	11	itle			Signature					Durgh	OH 44	688	
ick Petrovski	100.00	resident			Signature	11	111		Date				
					//	//	///	0	8/17/20	12			
					1///	111	/on	7- 1					
					111.	201	11.00	m					

9/18/00

RECEIVED

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

Date of Notification (1)					Name	of Build	ing Owner/0	2012/4/03	21	DM C	. 50		
08/02/2012					Hom	e Prope	nucs, Er				8000 B) (1		
Agencies Notified		Notificatio	n Type			t Address) Deluc	१ उत्हर ्	US (JUNT	ROL		41
(X) EPA		(X)Initial	Votification	n			SE DITAG	_ & L	CEM	SING			
(X) DOL		() Amend			City, S	State, Zip	Code			.	6	Q.	
(X) DOH		() Cance		auon		ford, N.					W.	ν	
() DCA		Cance	aileu			of Conta			Pho	ne			_
		L		FAOULTY		Marsc	nke	- X					
Name of Facility Where Ab	atement is T	aking Place	(3)	FACILITY		of Facility	(4)						
Pleasure Bay Apartme	nts - Build	ding # 10	(217-234	l)	() Sc	hool (K-1	2)						
Street Address	58				() Sub	chapter	8 (other tha	n K-12)					
245 Atlantic Avenue City (5)	County (6)		T 0	0.1.73	- (X) O	tner (i.e.	private & co	mmercial bl	dgs., h	omes, e	etc.)		
· · · · · · · · · · ·	Monmouth			Code (7) Use Only)	Sq. Fe	et : <u>16,9</u>	60 SF	No. of Floor	s: 2				
					Bldg. A	Age: 48 y	<u>rears</u>	demolished)	Resid	lential	Apartm	ents	
Name of Monitoring Firm Hi	red by Bldg	Owner (8)	ASCM	No				Name of Co					
Environmental Health I	nvestigati	ons, Inc	00140					Superior A					
Street Address 655 West ShoreTrail						Address							
City, State, Zip Code						ate, Zip C	rive, Ste A	<u> </u>					
Sparta, NJ 07871					West C	aldwell,	NJ 07006						
Project Manager for Monitor JP Von Doehren	ing Firm	Telephone (973) 729-		85		one Num 08-1616	ber		Licen 00411	se Num I	ber		
Scheduled Start Date (10) 8/28/2012		Scheduled 9/12/2012	Completio	n Date (11)		of OSHA							
Occupancy Status During At	patement (C	heck only on	e)			or Abate Address	ment, Inc.						
 Facility Closed/Vacated I Abatement Performed Out 	During Entire	Period of A	batement Hours ~				rive, Ste. A						
(X) Other – Describe: Worl Construction barriers will to Occupied portion of the bu	k will be pe be placed to	rformed whi	le buildin	g is occupied. as from the		ate, Zip C aldwell,	ode NJ 07006	-			,		
Source of Work (Check all th		-			<u> </u>			44-23					
() Demolition (X) Renov (X) Large Proj. (>160 SF or 3 (X) Full Containment with N	vation >260 LF AC egative Pres	ssure (X)	Mini-Enc	losure (X) Glove	bag Proce	edure ()	Minor Proj.	(<25 SF or Procedure	<10 LF for Asb	ACM)	Roof Re	moval.	
Location of Asbestos-Contain Material (ACM) in Facility (13		cation Norma y by Maint./C		Description of a systems insula	ACM (i.e.	thermal	Amount (Specify SF o	r LF)	Abate	ment T	уре	
	Staff'	? (12)		VAT, or other n	niscell.)	cirig,							
Boiler Room, Laundry Room	n. NA	YES	NO	Air Cell and El	lhows		1,330 LF			Rem.	Rep.	Encap	Enclose
Storage Room, Electrical Meter Room, Crawl Spaces		1 " 1		All och and El	ibows		1,330 LF			Х			
Boiler Room, Laundry Room Storage Room	n,	X		Pipe Elbows			72 Ea.	×	\neg	Х		1	
Boiler Room		X		Tank Insulation	n		10 SF			Х		-	-
Boiler Room		X		Flue Packing			4 SF			X		-	+
rawispaces		X		Pipe Insulation	n Debris		350 SF			X			<u> </u>
lame of Reg. Waste Hauler		LIDERWood	- UU (I	5.4	0.11.11		<u> </u>						
ervice Transport Group, In		JDEP Wast W2117	e Hauler II	J#	Cubic Ya 50	rds of Wa	aste			of Reg. /a Lan	Landfill dfill		
ity, State					T	Disp. Da							
ew Castle, DE						9/12/201	2			linerva		c00	
ompleted by (Print or Type)	ΙT	itle			Signature	-		77	vaynes Date	burgh	OH 44	088	
ick Petrovski	iii 15(8)	resident			Signature			//	8/02/2	012			
					11/10	1-11	wn	0.11/05=	0.75				
								C:\WORD\M	YDOC	SVASBI	ESTOS	9/18/0	00

(Pursuant to N.J.A.C. 7:26-2.12) RECEIVED

Date of Notification (1)						Name	of Buildin	g Owner/0	Operator (2)					
08/02/2012						Home	Proper	ties, LP	Operator (2)	PM (3: 58			
Agencies Notified		Notifica	ion Typ	ре		Street	Address	D-:						
(X) EPA		()Initia	I Notific	cation		City S	mmerce	ode ⁴³ 3	BESTOS	, i he	19701	-		
(X) DOL				Notification	on		ord, NJ		& LICEN	SIMI	NOL			
(X) DOH		() Car	celled				of Contac		& LIUIN	Phone	2	B		
()DCA							Marsch			FHOR	G NO	i po		
		J			FACILITY II					-				
Name of Facility Where A						Type o	f Facility (\neg				
Pleasure Bay Apartm	ents – Build	ding#8	(253-2	-270)			nool (K-12							
Street Address 245 Atlantic Avenue							chapter 8 her (i.e. p		an K-12) ommercial bld	gs., ho	mes, et	c.)		
City (5)	County (6)			County Co		So Fe	et : 16,96	n SF	No. of Floors	. 2				
Long Branch	Monmouth		(S	State Use	e Only)	34.16	et . <u>10,30</u>	0.01	140. 01 1 10015					
							t Use (pri		demolished)	Reside	ential A	partme	nts	
Name of Monitoring Firm Environmental Health				SCM No.					Name of Cor Superior Ab			-		
Street Address	mvesugau	10115, 1110	100	0140		Street	Address		Superior AL	ateme	iit, iiic.			
655 West ShoreTrail							derson Dr	ive, Ste	4					
City, State, Zip Code Sparta, NJ 07871						100000000000000000000000000000000000000	ate, Zip Co							
Project Manager for Monit	oring Firm	Telepho	ne Num	nber	***************************************	Teleph	one Numb	per		Licens	se Numl	per		
JP Von Doehren	**	(973) 7	29-564	19		(973) 8	08-1616			00411				
Scheduled Start Date (10) 8/21/2012	neduled Start Date (10) Scheduled Completion Date (11)													
Occupancy Status During						1. C. T. S.	Address							
() Facility Closed/Vacated() Abatement Performed						2 Hend	lerson Dr	ive, Ste.	A					
(X) Other – Describe: W					is occupied.	City St	ate, Zip C	ode		\rightarrow				
Construction barriers wi Occupied portion of the	Il be placed						aldwell, I							
Source of Work (Check all	DOTALL WEBSITES													
() Demolition (X) Rer (X) Large Proj. (>160 SF		CM) / \ SI	1 Droi /	/>25/16/	0 SE or >10 <2	60 I E AC	() (AA	Minor Pr	oj. (<25 SF or	~10 I E	(MOM)			
(X) Full Containment with					sure (X) Glove				ole Procedure			loof Rer	noval.	
Location of Asbestos-Cont	aining Is L	ocation N			Description of				(Specify SF o					
Material (ACM) in Facility (ely by Mai	nt./Cust		systems insula		acing,							
	NA NA	ff? (12) YES		NO	VAT, or other i	niscell.)					Rem.	Rep.	Encap	Enclose
Boiler Room, Maintenand		X			Air Cell and E	Ibows		1,325	_F	_	X	Γ	T	T
Shop, Hallway & Storage													1	
Rooms, Electrical Meter														
Room, Crawl Spaces Boiler Room, Maintenand	· A	x	+	-	Pipe Elbows			53 Ea.		-	Х		-	-
Shop, Hallway & Storage		^		Ι.	i ipe Libows			JU La.			^		1	
Rooms														
Boiler Room		X			Tank Insulation	n		80 SF			X			
Boiler Room		X			Flue Packing Pipe Insulation	- Dahaia		4 SF			X			-
Crawlspaces		^			Pipe insulatio	n Debris		210 SF					-	+
Name of Reg. Waste Haule	er I	NJDEP V	Vaste H	lauler ID	#	Cubic Y	ards of W	aste		Name	of Reg.	L Landfill		1
Service Transport Group		50					va Lan							
City, State							Disp. Da	ate						
New Castle, DE							8/28/20			9000 N	1inerva	Road		
				+					,	Wayne	sburgh	OH 44	688	
Completed by (Print or Typ	e)	Title				Signatur	e//	11		Date	040			
Nick Petrovski		Presider	τ			/	//	///		08/17/2	:012			
						11	6/	100	m					
							- 4		C:\WORD\	MYDOO	CSVASB	ESTOS	9/18/	00



Date of Notification (1) 08/02/2012				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name of Bu Home Pro	uilding Owner/ pperties, LP					-	
Agencies Notified (X) EPA (X) DOL (X) DOH () DCA		Notification (X)Initial N () Amend () Cance	lotification ed Notifica		Street Addr 25 Commo City, State, Cranford, Name of Co Craig Mar	Zip Code NJ 07016	&SBES & L	TUS ICE	8.71181	ROL 3	10	
		-		FACILITY I	NFORMATION							
Name of Facility Where Abate Pleasure Bay Apartment Street Address 245 Atlantic Avenue						K-12) ter 8 (other th	an K-12) commercial blo	dgs., ha	mes, et	c.)		
	ounty (6) onmouth			Code (7) Jse Only)	Bldg. Age:	48 years	No. of Floors		ential A	partme	ents	
Name of Monitoring Firm Hire Environmental Health Inv			ASCM N 00140	No.			Name of Co Superior Al	ntracto bateme	r (9) nt, Inc.			
Street Address	*				Street Addre							
City, State, Zip Code Sparta, NJ 07871	1.0				City State, Z	n Drive, Ste						
Project Manager for Monitorin JP Von Doehren	g Firm	Telephone (973) 729-			Telephone N (973) 808-16	lumber		Licens 00411	se Numi	ber		
Scheduled Start Date (10) 8/23/2012		Scheduled 9/05/2012	Completion	n Date (11)	Name of OSI Superior Ab	HA Monitor atement, Inc						
Occupancy Status During Aba () Facility Closed/Vacated Du () Abatement Performed Outs (X) Other – Describe: Work Construction barriers will be	iring Entire side of Nor will be pe placed to	Period of A mal Facility rformed wh	batement Hours – ile buildin		Street Addres 2 Henderson City, State, Z West Caldwe	Drive, Ste.			9			
Source of Work (Check all that () Demolition (X) Renova	apply)										-	
(X) Large Proj. (>160 SF or >2 (X) Full Containment with Neg	260 LF AC						oj. (<25 SF or ole Procedure			oof Dor	moval	
Location of Asbestos-Containing Material (ACM) in Facility (13)	ng Is Lo Solel Staff	cation Norma y by Maint./0 ? (12)	ally Used Custodial	Description of systems insula VAT, or other r	ACM (i.e. them tion, surfacing,		(Specify SF o			ment Ty	/pe	Enclose
Boiler Room, Maintenance Shop, Hallway & Storage Rooms, Electrical Meter Room, Crawl Spaces	NA NA	YES	NO	Air Cell and E	lbows	1,325	LF		X		Liloup	
Boiler Room, Maintenance Shop, Hallway & Storage Rooms		x		Pipe Elbows		53 Ea.			Х			
Boiler Room		X		Tank Insulatio	n	80 SF			X			
Boiler Room		X		Flue Packing		4 SF			Х			
Crawlspaces		X		Pipe Insulation	n Debris	210 SF			X			-
Name of Reg. Waste Hauler Service Transport Group, Inc		NJDEP Wasi	e Hauler I	D#	Cubic Yards o				of Reg. va Lan		L	
City, State New Castle, DE						o. Date 6/2012	1 3		1inerva sburgh	Road OH 44	688	
Completed by (Print or Type) Nick Petrovski	100	Fitle President			Signature	1/1		Date 08/02/2	012			

Date of Notification (1)					Name	of Building		Operator (2)			-		
08/02/2012					Home	Propert	ties, LP	2 AUG 21	PM C). So			
Agencies Notified	200	Notification	Туре	- 1,5 200 n - 4 - 2 c				- NOU 2		10			
(X) EPA		()Initial No	ntification		25 Co	mmerce	Drive	8ESTUS	17 111	1777			
(X) DOL		(X) Amend		tion	Crons	tate, ZIP C	07046	8 1 10EF	CURI	RUL			
(X) DOH		() Cancel				ord, NJ (& LICE	47 MI		Tr -		
()DCA		2 22				Marschi	5		Phone				
		1	and the same	FACILITY IN									
Name of Facility Where A	batement is	Taking Place (3)			f Facility ((4)						
Pleasure Bay Apartm	ents - Buil	ding # 8 (2	53-270)			ool (K-12							
Street Address 245 Atlantic Avenue					() Sub	chapter 8 ner (i.e. pr	other that rivate & c	an K-12) ommercial blo	dgs., hor	nes, etc	c.)		€
City (5)	County (6)		County (Code (7)	1			N			1050		
Long Branch	Monmouth	1	(State U	se Only)	Sq. Fee	et : <u>16,960</u>	U SF	No. of Floors	s: 2				
					Bldg. A	ge: 48 ye	ears						
					Current	Use (pric	or if being	demolished)	Reside	ntial A	partmer	nts	
Name of Monitoring Firm			ASCM N	0.				Name of Co	ntractor	(9)		-	
Environmental Health Street Address	n Investigat	ions, Inc	00140		Louis			Superior Al	batemer	nt, Inc.			
655 West ShoreTrail						Address erson Dr	ive, Ste	A					
City, State, Zip Code Sparta, NJ 07871						ate, Zip Co							
Project Manager for Monit	toring Firm	Telephone I	Number			one Numb			Licens	e Numb	per		
JP Von Doehren		(973) 729-	5649		(973) 8	08-1616			00411				
Scheduled Start Date (10) 8/21/2012)	Scheduled (8/28/2012	Completion	Date (11)		of OSHA N			-				
Occupancy Status During	Abatement (Check only on	e)		Street A		iiciit, iiic						
() Facility Closed/Vacate	d During Enti	re Period of A	batement		2 Hend	erson Dri	ive, Ste.	A					
() Abatement Performed (X) Other – Describe: W	Outside of N	ormal Facility	Hours –	a la accumical	011 01								
Construction barriers wi	ill be placed	to isolate the	work area	s from the		ate, Zip Coaldwell, N							
Occupied portion of the	building.			o nom the	West	aluwell, i	4J 07000						
Source of Work (Check all	that apply)												
() Demolition (X) Rer	novation												
(X) Large Proj. (>160 SF	or >260 LF A	CM)()SMP	roi. (>25<1	60 SF or >10 <2	60 LF AC	M) ()	Minor Pr	oj. (<25 SF or	<10 F	ACM)			
(X) Full Containment with	Negative Pr	essure (X)	Mini-Encl	osure (X) Glove	bag Proc		Non-frial	ole Procedure	for Asb	estos R	oof Ren	noval.	
Location of Asbestos-Conf	taining Is L	ocation Norm	ally Used	Description of	ACM (i.e.	thermal		(Specify SF					
Material (ACM) in Facility		ely by Maint./0	Custodial	systems insula		acing,					5.0	30	
	NA NA	iff? (12) A YES	NO	VAT, or other r	niscell.)				- 1	Rem.	Rep.	Encan	Enclose
Boiler Room, Maintenand		X	110	Air Cell and E	lbows		1,325	LF		X	1	I	T
Shop, Hallway & Storage	•						.,						
Rooms, Electrical Meter												i	
Room, Crawl Spaces Boiler Room, Maintenand	-	 x 		Pipe Elbows			F2 F-			V			-
Shop, Hallway & Storage		^		Fibe Elbows			53 Ea.			Х			
Rooms													
Boiler Room		X		Tank Insulation	n		80 SF			Х			
Boiler Room		Х		Flue Packing			4 SF			Х		500/100	1
Crawlspaces		X		Pipe Insulatio	n Debris		210 SF			Х			
Name of Reg. Waste Haule		NJDEP Was	to Houles I	D# 1	Out to V								
Service Transport Group		SW2117	te naulei i	J#	50	ards of Wa	aste		Name of Minery				
City Ctate													
City, State New Castle, DE						Disp. Da		1			_		
THE TOTAL OUT OF THE TENT						8/28/201	12		9000 M			coc	
Completed by (Print or Typ	ne) T	Title			Signatur				Waynes	burgh	OH 44	880	
Nick Petrovski	A	President			oignatui	///	///		08/17/2	012			
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					00	2/1	100	~					

[D 1 - (1) (C 1) (A)					T			DM O	. 50		
Date of Notification (1)					Home Proper	g Owner/Operatorn(P) ties, LP					
08/02/2012		T 11 00 0			+		- 1-1'41-	Vitte i	INA		
Agencies Notified		Notification			Street Address 25 Commerce	Drive ASBES	LICE	MSINC	A 400	B	
(X) EPA (X) DOL		(X)Initial N		tion	City, State, Zip	Code			6	V	
(X) DOH		() Amende () Cancel		uori	Cranford, NJ						
() DCA		() Garious	ica		Name of Contact Craig Marsch		Phor	ne			
		4-		FACILITY II	NFORMATION					-	
Name of Facility Where Abate	ment is 1	Taking Place	(3)	TAGILITY	Type of Facility	(4)			-		-
Pleasure Bay Apartments					() School (K-12						
Street Address 245 Atlantic Avenue		50th = 2.50 to 210 to				(other than K-12) rivate & commercial b	ildas ha	omes et	ci)		
	unty (6)		County	Code (7)	- (X) Gallor (1.0. p	irrato a commorcial c	rago., m	J.1100, 00	0.7		
	nmouth	e .		lse Only)	Sq. Feet : 16,96	0 SF No. of Floo	rs: 2				
		*	(//	DId- A 40						
			-		Bldg. Age: 48 v	<u>ears</u> or if being demolished) Resid	dential A	partme	nts	
Name of Monitoring Firm Hired	by Bldg	J. Owner (8)	ASCM N	No.		Name of C	ontracto	or (9)			
Environmental Health Inv	estigat	ions, Inc	00140			Superior A	Abatem	ent, Inc.			
Street Address 655 West ShoreTrail	34				Street Address 2 Henderson Dr	tive Ste A					
City, State, Zip Code Sparta, NJ 07871	10				City State, Zip C West Caldwell,	ode		×:			
Project Manager for Monitoring	Firm	Telephone I	Vumber		Telephone Numb		Licer	se Numl	ner		
JP Von Doehren	,	(973) 729-			(973) 808-1616	JC1	0041		JOI		
Scheduled Start Date (10) 8/23/2012		Scheduled 9/05/2012	Completion	n Date (11)	Name of OSHA I Superior Abater						
() Facility Closed/Vacated Du				W	Street Address 2 Henderson Dr	ive, Ste. A		21			
(X) Other – Describe: Work				a is occupied.	City, State, Zip C	ode					
Construction barriers will be Occupied portion of the build	placed t				West Caldwell, I						
Source of Work (Check all that											
() Demolition (X) Renova	ion										
(X) Large Proj. (>160 SF or >2		CM)()SMP	roj. (>25<1	160 SF or >10 <2	60 LF ACM) ()	Minor Proj. (<25 SF	or <10 L	F ACM)			
(X) Full Containment with Neg	ative Pre	essure (X)	Mini-Enc	losure (X) Glove	bag Procedure ()	Non-friable Procedu	e for As	bestos F	Roof Ren	noval.	
Location of Asbestos-Containir	•	ocation Norm			ACM (i.e. thermal	Amount (Specify SF	or LF)	Abate	ment Ty	/pe	
Material (ACM) in Facility (13)		ely by Maint./(Custodial	systems insula VAT, or other r					88		
	NA	ff? (12) YES	NO	VAT, or other i	mscen.)			Rem.	Rep.	Encap	Enclose
Boiler Room, Maintenance		X		Air Cell and E	Ibows	1,325 LF		X		T	T
Shop, Hallway & Storage						1			l	İ	
Rooms, Electrical Meter									1		
Room, Crawl Spaces Boiler Room, Maintenance	_	X		Pipe Elbows		53 Ea.		X		+	+
Shop, Hallway & Storage		^		i ipo Elbono		30 Lu.		^			
Rooms											
Boiler Room		X		Tank Insulation	on	80 SF		X		_	-
Boiler Room	-	X		Flue Packing	- Datais	4 SF		X	-		+
Crawlspaces				Pipe Insulatio	ii Debris	210 SF		Х	-	+	+
Name of Reg. Waste Hauler		NJDEP Was	e Hauler I	D# 1	Cubic Yards of W	Iaste	Name	of Reg.	Landfill		
Service Transport Group, Inc.					50			rva Lan			
City, State		alven			Disp. Da	ate					
New Castle, DE					9/05/20		9000	Minerva	Road		
							Wayn	esburgh	OH 44	688	
Completed by (Print or Type)		Title			Signature	111	Date	0046			
Nick Petrovski		President			11.1	1///	08/02/	2012			
				1	unu	Mu-					

Date of Notification (1)				2000-09-	5	Name o	of Building	Owner/Operate	or (2)	(te C	Elly			
08/02/2012						Home	Propert		0010	_				
Agencies Notified		Notifi	ication	Туре		100000000000000000000000000000000000000	Address	Drivo	2012	AUG 2	T PI	1 9: 5)-	
(X) EPA		()In	nitial No	tification			ate, Zip C						*	
(X) DOL				ed Notificat	ion		ord, NJ (7016	#35	2010	\$ co	NTO	11	
(X) DOH		() (Cancelle	ed			of Contact		ď	butho	ารันา	NC I	<u>'L</u>	
()DCA							Marschl					77.5.5		
		1			FACILITY IN		*			-				
Name of Facility Where At	hatement is	Taking F	Place (3)	PACILITIN		Facility (1)						
Pleasure Bay Apartme							ool (K-12)			33				
Street Address 245 Atlantic Avenue								other than K-12 ivate & commer		as hor	nes. etc	.)		
City (5)	County (6)		-	County C	ode (7)	1				9 ,	1.20			
Long Branch	Monmouth			(State Us		Sq. Fee	t : 16,960	SF No. of	f Floors	: 2				
						Bldg A	ge: 48 y e	are						
								r if being demo	lished)	Reside	ential Ap	partme	nts	
Name of Monitoring Firm H	Hired by Bld	n Owne	r (8)	ASCM No	n		- 9/	Name	e of Cor	ntractor	(9)			
Environmental Health				00140	J.				erior Ab					
Street Address		,				Street A	Address							
655 West ShoreTrail City, State, Zip Code					_ 12 1300-230		erson Dri	ve, Ste A		_				
Sparta, NJ 07871		,				West C	aldwell, I	NJ 07006						
Project Manager for Monite JP Von Doehren	oring Firm			Number		(973) 80	ne Numb	er		Licens 00411	e Numb	er		
		,) 729-		NIKAN III NA	, ,	KIEDOWI I I WOW			00411				
Scheduled Start Date (10) 8/23/2012		8/31/2		Completion	Date (11)		of OSHA Nor Abaten	fonitor nent, Inc.						
Occupancy Status During						Street A								
() Facility Closed/Vacated () Abatement Performed						2 Hend	erson Dri	ve, Ste. A						
(X) Other – Describe: W					is occupied.	City Sta	ate, Zip C	nde			-			
Construction barriers wi	Il be placed						aldwell, I							
Occupied portion of the	building.	100												
Source of Work (Check all	that apply)													
() Demolition (X) Rer	novation													
(X) Large Proj. (>160 SF		ACM) () SM Pi	roi. (>25<1	60 SF or >10 <2	60 LF AC	M) ()	Minor Proj. (<2	5 SF or	<10 LF	ACM)			
(X) Full Containment with	Negative P			Mini-Encl	osure (X) Glove	bag Proce	edure ()	Non-friable Pro						
Location of Asbestos-Cont				ally Used	Description of			Amount (Spec	cify SF	or LF)	Abate	ment Ty	ре	
Material (ACM) in Facility (Custodial	systems insula VAT, or other i		acing,							
	N.	aff? (12) A Y	ES	NO	VAT, or other i	ilisceii.)					Rem.	Rep.	Encap	Enclose
Boiler Room, Laundry Ro		T	Х		Air Cell and E	lbows		1,330 LF		- 1	Х	Ι	T	T
Storage Room, Electrical													1	
Meter Room, Crawl Spac		-	-		Disc Elli			70.5-			Х		-	
Boiler Room, Laundry Ro Storage Room	oom,	- 1	Х		Pipe Elbows			72 Ea.			^			
Boiler Room			Х		Tank Insulation	on		10 SF			Х		 	1
Boiler Room			Х		Flue Packing			4 SF		1	Х			
Crawlspaces			Х		Pipe Insulatio	n Debris		350 SF			Х			
Name of Reg. Waste Haul		VALUE 0000000		te Hauler I	D#	- 1. W. 2 1	ards of W	aste	- 1		of Reg.			
Service Transport Group	, mc.	SW21	117			50				winer	va Lan	ann		
City, State					w-was-		Disp. D	ate						
New Castle, DE							8/31/20		1	9000 N	Minerva	Road		
										Wayn	esburgl	OH 4	4688	
Completed by (Print or Typ	oe)	Title				Signatur	e	1111	1	Date				
Nick Petrovski		Presi	dent				1//			08/17/2	2012	*9)		
						1/1	Illa	//m	n t					
			N			1111	100	//	15 cc 2 V	MYDO	CS\ASE	ESTOS	9/18	/00

Date of Notification (1)					Name Hom	of Buildir e Prope	ng Owner/C	Mara Dag	21 F	PM 9:	59		
Agencies Notified (X) EPA (X) DOL		Notification (X)Initial N () Amende	lotification ed Notifica		25 C	t Address ommerc State, Zip ford, NJ	Code	128E21	US C CENS	UNTI	ROL		
(X) DOH () DCA		() Cancel	lled		Name	of Contact	ct		Phon	е			-
				FACILITY I	NFORMA	TION							-
Name of Facility Where Aba						of Facility					1		
Pleasure Bay Apartmer Street Address	nts – Build	ding # 10 (217-234)		hool (K-12		14.40)					
245 Atlantic Avenue					() Sut	ther (i.e. r	(other than	n K-12) mmercial blo	lae ho	mac at	·		
	County (6)		County	Code (7)	- (1.70	a ioi (i.e. p	mivate a co	minorolal bic	igs., no	11163, 61	.0.)		
	Monmouth			Jse Only)	Sq. Fe	et : 16,96	0 SF	No. of Floors	: 2				
			(Clairo	, , , , , , , , , , , , , , , , , , ,	1						•		
9					Bldg. /	Age: <u>48 y</u> nt Use (pri	<u>rears</u> or if being o	demolished)	Reside	ential A	partme	ents	
Name of Monitoring Firm Hir	red by Bldg	Owner (8)	ASCM I	Vo.	1			Name of Co	ntractor	(9)			
Environmental Health In	nvestigati	ons, Inc	00140					Superior At					
Street Address		e salije			100.000.000.000.000.000	Address							
655 West ShoreTrail							rive, Ste A					ELLER POR	
City, State, Zip Code Sparta, NJ 07871						ate, Zip C Caldwell.	ode NJ 07006						38
Project Manager for Monitori	ng Firm	Telephone I	Number			one Numl			Licens	e Num	ber	_	
JP Von Doehren		(973) 729-			(973) 8	08-1616			00411				
Scheduled Start Date (10) 8/28/2012		Scheduled (Completion	n Date (11)		of OSHA I							
Occupancy Status During Ab	atement (C	9/12/2012	0)			or Abater Address	ment, Inc.						
() Facility Closed/Vacated D () Abatement Performed Out	During Entire Itside of No	e Period of Al mal Facility I	datement Hours -				rive, Ste. A						
(X) Other – Describe: Work Construction barriers will be Occupied portion of the bu	e placed to	o isolate the	work are	g is occupied. as from the	City, St West C	ate, Zip C aldwell, I	ode NJ 07006				.20		
Source of Work (Check all that	at apply)												
() Demolition (X) Renov (X) Large Proj. (>160 SF or ((X) Full Containment with No	>260 LF AC	CM)()SMPr	roj. (>25<1 Mini-End	160 SF or >10 <2	60 LF AC	CM) ()	Minor Proj	. (<25 SF or e Procedure	<10 LF	ACM)	oof Per	moval	
Location of Asbestos-Contain	ing Is Lo	cation Norma	ally Used	Description of			Amount (Specify SF o	r LF)	Abate	ment Ty	/De	
Material (ACM) in Facility (13	Staff	ly by Maint./0		systems insula VAT, or other r	tion, surfa				- /				
Boiler Room, Laundry Roon	_ NA	YES	NO	Air Call and E	11		4 000 11			Rem.	Rep.	Encap	Enclose
Storage Room, Electrical	"',	^		Air Cell and E	ibows		1,330 LI			X			
Meter Room, Crawl Spaces									1		1		
Boiler Room, Laundry Room	n,	X		Pipe Elbows			72 Ea.		1	Х			1
Storage Room													
Boiler Room Boiler Room		X		Tank Insulation	n		10 SF			Х			
Crawispaces		X		Flue Packing Pipe Insulation	- Dabaia		4 SF			Х			-
OTAVIO PAGES		 ^ 		ripe insulation	Debris		350 SF			Х		-	-
Name of Reg. Waste Hauler Service Transport Group, In	c.	NJDEP Wast SW2117	e Hauler I	D#	Cubic Y	ards of W	aste		Name o		L Landfill dfill	<u> </u>	L
City, State New Castle, DE						Disp. Da 9/12/201		1000	9000 M		Road OH 44	600	
Completed by (Print or Type) Nick Petrovski	1.1	Title President			Signatur		11/1		Date 08/02/20		UI 44	V00	
					[1]	7-1	nal	C:\WORD\N	/YDOC	SIASB	ESTOS	9/18/	00

Date of Notification (1)				Name o	of Buildin	g Owner/Opp	tor (2)		107	1,1				
08/02/2012					Home	Proper	ties, LP ZU	ZAUG	21	PM o	_			
Agencies Notified			Notification Type			Name of Building Owner/Operator (2) Home Properties, LP Street Address 25 Commerce Drive				' '' ''	58			
(X) EPA		()Initial Notification				ate, Zip (Code	& 1 10	20	UNT O	ο.			
(X) DOL	(X) Amended Notification			Street Address 25 Commerce Drive City, State, Zip Code Cranford, NJ 07016 Name of Contact Street Address 4 5555105 LICENSING Phone										
(X) DOH () DCA		() Cancelled			Name o	of Contac	it .		Phon	e C	46			
() DCA					Craig I	Marsch	ke		•		■ 109	TO THE	7	
			7024 Million	FACILITY II								1		
Name of Facility Where Abatement is Taking Place (3) Pleasure Bay Apartments – Building # 09 (235-252)						Facility (
Street Address					() School (K-12) () Subchapter 8 (other than K-12)									
245 Atlantic Avenue					(X) Other (i.e. private & commercial bldgs., homes, etc.)									
City (5)				Code (7)	٠	4 . 46 06	0.05 No.		•		(i)			
Long Branch	Monmout	outh (S		(State Use Only)		Sq. Feet: <u>16,960 SF</u> <u>No. of Floors: 2</u>								
						Bldg. Age: 48 years								
				Current Use (prior if being demolished) Residential Apartments										
Name of Monitoring Firm H	lired by Bld	g. Owner (8)	ASCM N	No.	Name of Contractor (9)									
Environmental Health			00140		Superior Aba									
Street Address					Street Address								1/2/2	
655 West ShoreTrail City, State, Zip Code					2 Henderson Drive, Ste A						*******			
Sparta, NJ 07871					City State, Zip Code West Caldwell, NJ 07006									
Project Manager for Monito	Telephone Number			Telephone Number			1	Licens	se Numb	per				
JP Von Doehren		(973) 729-5649			(973) 80	(973) 808-1616			00411					
Scheduled Start Date (10)	Scheduled Completion Date (11)			Name of OSHA Monitor										
8/22/2012	A la	8/30/2012			Superior Abatement, Inc.									
() Facility Closed/Vacated	Occupancy Status During Abatement (Check only one) () Facility Closed/Vacated During Entire Period of Abate				Street Address 2 Henderson Drive, Ste. A									
() Abatement Performed (() Abatement Performed Outside of Normal Facility Hours –				2 Henderson Diffe, Ste. A									
(X) Other – Describe: Work will be performed while building is occupied.				City, State, Zip Code										
Construction barriers will Occupied portion of the b	e work are	work areas from the West Cal			NJ 07006									
Source of Work (Check all														
Source of Work (Crieck all	шасарріу)													
() Demolition (X) Ren	ovation													
(X) Large Proj. (>160 SF or >260 LF ACM) () SM Proj. (>25<160 SF or >10 <2 (X) Full Containment with Negative Pressure (X) Mini-Enclosure (X) Glove				260 LF ACI	M) ()	Minor Proj. (<2	25 SF or	<10 LF	ACM)					
Location of Asbestos-Containing Is Location Normally Used Description				Description of	of ACM (i.e. thermal Amount (Specify			cify SF	y SF or LF) Abatement Type					
Material (ACM) in Facility (1	lely by Maint./Custodial systems insula					/ unount (ope	ony or c	- S. Z.)						
	aff? (12) VAT, or other			miscell.)				1						
Boiler Room, Old Laundry	, N	YES X	NO	Air Cell and E	Ibowo		1,375 LF			Rem.	Rep.	Encap	Enclose	
Room, Pool Storage Roor		^	1	All Cell allu E	IDOWS		1,3/5 LF			Х			I	
Electrical Meter Room, Cr										l			1	
Spaces												1		
Boiler Room, Old Laundry Room, Pool Storage Room		Х		Pipe Elbows			51 Ea.			Х				
Boiler Room		X		Tank Insulation	on		80 SF			X	 	+	 	
Boiler Room		Х	Flue Packing		4 SF					X			1	
Crawispaces		Х		Pipe Insulatio	n Debris	12027	210 SF			Х				
N		1 1115												
Name of Reg. Waste Hauler Service Transport Group, Inc. NJDEP Was SW2117			ste Hauler I	ID#	Cubic Yards of Waste 50				Name of Reg. Landfill Minerva Landfill					
City, State														
New Castle, DE				Disp. Date 8/30/2012			- 1	0000 Minama Bard						
				0/30/2012				9000 Minerva Road						
Completed by (Print or Type) Title			Title I			Signature / / / /			Waynesburgh OH 44688 Date					
Nick Petrovski	President						08/17/2012							
				Million			_ <							
	- I				1	01	0.0	1						

RECEIVED

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

Date of Notification (1) 08/02/2012	Name of Building Owner/Operator (2012 AUG 21 PM 9: 58												
Agencies Notified (X) EPA (X) DOL (X) DOH () DCA	(X)In	Notification Type (X)Initial Notification () Amended Notification () Cancelled			Street Address 25 Commerce Drive City, State, Zip Code Cranford, NJ 07016				STUS CONTROL LICENSING				
			FACILITY II	NFORMATION						-			
Name of Facility Where Abatemen Pleasure Bay Apartments – I Street Address 245 Atlantic Avenue City (5) County	Type of Facility (4) () School (K-12) () Subchapter 8 (other than K-12) (X) Other (i.e. private & commercial bldgs., homes, etc.)												
Long Branch Monmo	outh	(Sta	inty Code (7) ite Use Only)	Bldg. Age: 4	Sq. Feet: 16,960 SF No. of Floors: 2 Bldg. Age: 48 years Current Use (prior if being demolished) Residentia								
Environmental Health Investi	Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Environmental Health Investigations, Inc 00140						ctor (9) ment, Inc.						
Street Address				Street Addres 2 Henderson									
City, State, Zip Code Sparta, NJ 07871													
Project Manager for Monitoring Firm JP Von Doehren		hone Number 729-5649	er	Telephone Nu (973) 808-161	19.000	License Number 00411							
Scheduled Start Date (10)	Scheo	Scheduled Completion Date (11)			Name of OSHA Monitor								
8/28/2012 Occupancy Status During Abateme () Facility Closed/Vacated During () Abatement Performed Outside of	d of Abatem acility Hours	_	Superior Aba Street Addres 2 Henderson										
(X) Other – Describe: Work will to Construction barriers will be place Occupied portion of the building			City, State, Zi West Caldwe	A Contraction			X						
Source of Work (Check all that app () Demolition (X) Renovation (X) Large Proj. (>160 SF or >260 L (X) Full Containment with Negative	F ACM) () e Pressure	(X) Mini-	Enclosure (X) Glove	ebag Procedure		Procedure for A	Asbestos F						
Location of Asbestos-Containing Material (ACM) in Facility (13)	Normally Us	lial systems insula VAT, or other	ACM (i.e. therm ation, surfacing, miscell.)	al Amount (Sp	pecify SF or LF	ify SF or LF) Abateme			Enclose				
Boiler Room, Old Laundry Room, Pool Storage Room, Electrical Meter Room, Crawl Spaces	NA YI	X N	Air Cell and E	lbows	1,375 LF	1,375 LF							
Boiler Room, Old Laundry Room, Pool Storage Room		х	Pipe Elbows		51 Ea.	51 Ea.							
Boiler Room		X	Tank Insulation										
Boiler Room		Х	Flue Packing	4 SF									
Crawispaces		Х	Pipe Insulatio	n Debris	210 SF		X		-	+			
Name of Reg. Waste Hauler Service Transport Group, Inc.	P Waste Hau 17	50		5.56.0000000000000000000000000000000000	Min		me of Reg. Landfill nerva Landfill						
City, State New Castle, DE				V			9000 Minerva Road Waynesburgh OH 44688						
Completed by (Print or Type) Nick Petrovski	lent		Signature	ma 08/0	Date 08/02/2012 9/18/00								