State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

				(P		AC 8:60-7 and 1			100	The o	SV	•			
Date of Notification (1) 08/16/13					Name of Building Owner/Operator (2) Princeton University										
Month/Day/Year									1201 1	4.7					
Agency Notified	Type Notif	ficati	on		Street Add	ress									
EPA		Initi	al		P.O. box 21	158									
DEP			ificati	on	City, State	, Zip Code						W-1			
DCA	x #1	Ame	nded		Princeton !	NJ 08543									
DOH		•	ificati	on	Name of Co	ontact		To	elephone Nu	mber	Sev				
	Total Comment	Can	ellatio	on	Robert Ote	ego		-							
. On the second		,			FACILIT	Y INFORMAT	TION		-	-					
Name of Facility Where Abate Princeton University	ement is Tak	cing P	lace ((3)				Type of Facility (4) School (1)		than V	12)				
Street Address									e. Private &						
156 Alexander Street									s, homes, etc.		ciai				
100 / Hexander Street									of Floors	Bldg.	Age				
City (5)		Com	nty (6)		County Code	(7)	5000	Age						
Princeton			, (0	<i>t</i>		(STATE USE ONL		Current Use (Prior	if being dem	50+ olished	D	2000			
								University			,				
Name of Monitoring Firm His Pennoni Associates Inc	red by Build	ing C	wner	(8)		ASCM No.		of Abatement Contra							
Street Address							Street	Address							
515 Grove Street Suite 1B							98 La0	Crue Avenue							
City, State, Zip Code		-					City S	, State, Zip Code							
Haddon Heights NJ								en Mills, PA 19342							
Project Manager of Monitori Alan Lloyd	ng Firm				Telephone 856-547-05		100000000000000000000000000000000000000	one Number 54-9622		Liceno 1103	e Numb	er			
Scheduled Start Date (10)			Sche	d. Co	mpletion Date	(11)	Name	of OSHA Monitor			-				
08/05/13					10/31/13	()		ion Labs							
Month/Day/Year		N	ionth/Day/Yea	r	Critical	Iou Dubs									
Occupancy Status During Aba	atement (Ch	eck o	nly on		TOBER DAY I CA		Street	Address							
Facility Closed/Vacate					batement			rogresive Drive							
x Abatement Performed								State, Zip Code							
Hours - Describe:								lem PA 19020							
Other - Describe:											90				
Scope of work (Check all that						-	Ц	E-II C	143. Nr 41	n					
x Demolition	appiy)			x	Renovation	io.		Full Containment with Negative Pressure Mini - Enclosure							
>3 sf or >3 if				^	Renovation			Glovebag Procedure							
77															
x >160 sf or >260 lf							х	Non-Friable Proced	NORMAN CO.						
			Is			9 19 91			Ab	atemen					
Location of	1		cation			ription of		DOMESTIC STATE OF THE STATE OF	_		E	E			
Asbestos - Containing Material (ACM)	1		rmally sed	0.5		s-Containing		Amount	R	n	N	N			
TO BE ABATED			sea lely			ial (ACM) rmal systems		(Specify SF or	E M	R	CA	C L			
In Facility			Main-		The second second	rmai systems surfacing, VAT	,		10.00	P	P	1,7700			
(13)			ance/			suriacing, VA1 miscellaneous)	,	LF)	O V	A	S	o s			
(10)	1		stodia	ř	or other i	miscenaucous			A	I	U	U			
	- 1	1000	ff (12)	201	1				l î	R	L	R			
		Yes		N/A	1				~		~	E			
roof of 156 Alexander Street			x		roofing mat	terials		800 SF	x						
								Carrier				-			

			-			****		4 10	-		-	<u> </u>			
Name of Registered Waste Hauler NJD					EP Waste	Cubic Yards		Name of Pagistaved Landfill							
					er ID No.	of Waste		Name of Registered Landfill GROWS							
City, State			Disposal Date		City, State										
Trenton NJ						As needed		Morrisville PA							
Completed By (Print or Type) Title							ure //			Date					
					ect Manager		Mark John 81								

ABS-41 JUN 95

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

				Name of	Building (Owner/Operator (2		011 00 11	<i>7</i> · (C	_						
Date of Notification (1)	20 / 12			Name of Building Owner/Operator (2) JC Penney Corporation Inc.												
	20 / 13	_		30 F6	illiey oc	mportation into:	4010 /	- 8 8				_				
Agencies Notified	Type Notification			Street A												
☑ EPA	☐ Initial		8		Legacy I	AND AND A COMMENT OF THE PARTY										
☑ DOLWD	Amended Amendment #3			90000	te, Zip Co		£0.70									
☑ DHSS	☐ Emergency (inc			PLan	o, TX 75	024						_				
□ DCA (NJAC 5:23-8)	justification)	.uug		Name of	Contact			Telephone Number	- /-							
(10.10 0.20 -/	☐ Cancellation			Soy 1	Thomas											
	1			FACI	LITY INF	ORMATION										
Name of Facility Where	Abatement is Taking	Place (3)				Type of Facility (4)									
Ocean County Mal							School (K-12)									
Street Address							☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings,									
1201 Hooper Aven	II.						homes, etc.)	ar buildings,								
City (5)							Square Feet # of Floors E									
Toms River							150000	2	75	5						
				County	Code (7)	(STATE USE ONLY)	ed)									
County (6)					, , ,,	Control of the Contro										
Ocean Name of Monitoring Firm	a Hirad by Building (wner (8	8) [ASCM N	lo T	Name of Abateme	ent Contractor (9)									
and the second of the second o		wilei (c	"	62252	WEYE.	JVN Restora										
Hillmann Consulti	ng LLC			02202	-											
Street Address						Street Address 47 Foster Road										
1600 Route 22 Eas	St					o execution the read file control										
City, State, Zip Code						City, State, Zip Code Staten Island										
Union NJ 07083			Tolo	phone N	lo.	Telephone No. License No.										
Project Manager for Mo	nitoring Firm		1)8-956-	CONTRACTOR OF THE PARTY OF THE	718-605-6256 00774										
Tom Rubino			100			Name of OSHA Monitor										
Start Date (10)7 /10	1			tion Dat		Testor Tech	viorinto									
	200		7			Street Address										
Occupancy Status Duri				ment		10 59 Jackso	on Avenue									
☐ Facility Closed/Vaca ☐ Abatement Performe	ated During Entire Pe	Facility	v Hou	rs - Desc	cribe	City, State, Zip C										
Time of Abatement:	AMP	M/10:0	<u>0</u> PM-	6:00AN	<u>I</u> AM	LIC, NY 1110										
			_			2.0,										
Scope of Work (Check	all that apply)						ontainment with Negative Pressure									
≥3 sf or ≥3 lf		Re				☐ Mini-En	ebag Procedure									
≥160 sf or ≥260 lf		☐ De	moliti	on		⊠ Non-Ex	empted (*) and N	on-Friable Procedure	e							
		Is	Loca	tion					Aba	ateme	ent Ty	/pe				
Location	on of		Norma			Description	of	Amazint	R	R	пЭ	Щ				
Asbestos-Containin				ely by ance/	Asbe	estos Containing M e., thermal systems	laterial (ACM)	Amount (Specify	Removal	Repair	cap	Enclosure				
TO BE A		5000	todial	Staff?	(1.6	surfacing, VA	T, or	SF or LF)	val		Encapsulate	ure				
(13		1000	(12	0.8993	1	other miscellan	eous)				ate					
		Yes	No					40.00005		П						
1 st Level Furniture	Dept.				VAT/M	ASTIC		10,000SF			브	-				
2 nd Fl Optical/Photo	o Shops				VAT/M	ASTIC		2,360SF			Ш					
2 nd FI Dressing Ro					VAT/M	ASTIC	44-	200SF	X							
			П													
Name of Registered W	/aste Hauler		1	NJDEP	Waste	Cubic Yards of	Name of Reg	istered Landfill								
Global Waste Ind				Hauler I		Waste 80	G.R.O.W	S., Inc.								
City, State				140-24	2141	Disposal Date	City, State									
Hackettstown, N.	J					9/30/13	Morrisvil	le PA	1							
		tle	-			Signature	1	Da	te	20	, -	_				
Completed By (Print o John Tardy		3950	r Pro	ject Ma	nager	179	auch	4	81	20	1 -	5				
ASB-41					-	1		1			1					
MAY 11		* Do no	t use	this forn	n for asbe	stos licensure exe	mpted activities.	1								

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

No Check

						CD. IIII	0	/Onereter/		AD COLOR							
Date of Notification (1)						786		er/Operator (2									
08 /	/	13	_		Cou	nty of Mo	orris	2017	Alter 5								
Agencies Notified	Type Notification	on				Address rt Street;	PO			1							
⊠ EPA ⊠ DEP	☐ Amended			-	2000	ate, Zip C	108 //800			-							
☑ DCA (NJAC 5:16)	Amendmen	nt #				ristown,		7963									
☐ DHSS	☐ Emergency		uding	1		of Contact				Telephone Nur	mber			\neg			
□ DCA (NJAC 5:23-8)	justification Cancellatio							nd									
(1,0/10 0.22 0/		33				hen Han	-			1							
					FAC	ILITY IN	FORI	MATION	True of Socility (4)								
Name of Facility Where									Type of Facility								
Morris County Pub	olic Safety Cor	mple	x/Old	l Buil	ding	+24			School (K-12	School (K-12)							
Street Address									☐ Subchapter 8 (Other than K-12) € ☐ Other (i.e., private & commercial buildings,								
500 West Hanover	r Avenue								homes, etc.								
City (5)							Square Feet	# of Floors	- VI 8	ig. Ag	le						
Parsipanny, NJ 07					d t	80,000 Sf.	2		10								
County (6)					Coun	ty Code (7))(STAT	E USE ONLY)		ior if being demo							
Morris										ublicSafetyCo	omplex-						
Name of Monitoring Firm	n Hired by Buildin	ng Ov	wner (8)	ASCM I	No.	Nam	e of Abateme	ent Contractor (9))							
Briggs Associates					0000	4	APS Contracting Inc.										
Street Address		-		Stre	et Address												
3 Crosswicks Stre				15	5-161 Penr	nsylvania Avenue											
City, State, Zip Code				City,	State, Zip C	ode		77-									
Bordentown, NJ 0				Pa	aterson, NJ												
Project Manager for Mor	Tele	phone I	No.	Tele	phone No.		License No.										
Mike Hoodak		9-298		973-754-1980 00875													
Start Date (10)		tion Dat		Name of OSHA Monitor													
09 / 03_ /					/		EI	MSL ANAL	YTICAL, INC								
								et Address									
Occupancy Status Durin					ment		10000000	56 SHELT	ON AVE								
☐ Facility Closed/Vacat	ted During Entire	rmal F	Facility	Hour	s - Des	cribe								-			
Time of Abatement:		PM	1/	_PM-		AM	100000	City, State, Zip Code PISCATAWAY NJ 08854									
* occupied Bl	da.							SUMINA	11 140 00004			====		-			
Scope of Work (Check a	all that apply)								tainment with Ne	gative Pressure	*						
≥3 sf or ≥3 lf			☐ Re				☐ Mini-Enclosure☐ Glovebag Procedure										
≥160 sf or ≥260 lf			⊠ De	molitio	on			☐ Gloveba	g Procedure empted (*) and N	on-Friable Proce	dure						
			le	Locat	ion		-	23 11011				atem	ent T	уре			
Locatio	n of		1	Vorma	lly			Description of	of		71	П	Ш	m			
Asbestos-Containing				d Sole intena		Asbe	stos (Containing Ma	aterial (ACM)	Amount	Removal	Repair	nca	Enclosure			
TO BE AB	BATED				Staff?	(i.e., the	rmal s	systems insul VAT, or	ation, surfacing,	(Specify SF or LF)	ova	¥	ıpsι	unsc			
IN Fac (13)				(12)			oth	er miscellane	eous)		_		Encapsulate	G,			
(10)			Yes	No	N/A									6 9			
ust = 1 001 D 4	the Office	-	П			Floor T	iles			650 sf.							
1 st Floor - CSI Detec	tive Office				24-33	1 1001 1	1103										
							10.0				\perp	Ш	Ц				
	Name of Registered Waste Hauler						Cub	ic Yards of	Name of Reg	istered Landfill							
		IJDEP \ lauler II		Cubic Yards of Name of Registered Landfill Waste Grows Landfill													
Atlantic Carting, I		2608) Yards						- 7						
City, State					Disposal Dat				City, State	o DA							
Wayne, NJ 07470									Morrisvill	E, FA	D. (
Completed By (Print or Type) Title						- 10k - 10k		Signature	// /	1.12	Date /	, 1					
Svetozar Savreski		President						Att	Milone	if h	3/14	111	3				

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

D&S Proj. #: MS 13-297 pp 2of 2

Date of Notification (1)	ame of Bu	ilding Own	er/Operator	(2)			12				otto enes			-								
0 8 / 1 5 / 1 2 1	1:			. SCHOOI	_ DIST	TRI	CT															
Agencies Notified Type Notifica	Si Si	reet Addre	ess																			
☐ DEP ☐ Amended	11.	***************	K AVENU	Æ																		
→ Amendment	#: C	ity, State,	Zip Code																			
Emergency			ON, NJ 0	8690																		
DOH (including justification	n) Na	ame of Co	ntact						Telephor	ne Nur	nber											
DCA Cancellation	on	MICHA	EL KRIS	HER								_										
			FAC	ILITY INFOR	RMATIC	N																
Name of facility where abatemen	t is taking pla	ice (3)							Type of Facility	(4)	40)											
SUNNYBREA ELEMENTA	ARY SCHO	OL			School (K - 12) Subchapter 8 (Other than K-1								12)									
Street Address									Other	(Priva	te/Con	nmer										
166 ELTON AVENUE								-	Bldgs Square Feet	./Home	es, etc	-г	Blo	g. Ag	10							
City (5)	I Cour	ity (6)			To	oun'	ty Code (7)		Square reet	# 01 1	10015	- 1	Dic	9.75	, .							
Ony (5)	1	.5 (0)			(S	Current Use (F	Prior if	being	demo	olishe	d)											
HAMILTON TWP.	1,000,000,000	RCER	¥		_		-5.6.	Current Use (Prior if being demolished)														
Name of Monitoring Firm Hired by	Bldg. Owne	er (8)		ASCM No.		П	Name of Abatemen															
WESTCHESTER ENVIRO	NMENTAL	LLC		00127			D & S RESTORATION, INC.															
Street Address			1	Street Address																		
307 NORTH WALNUT ST				20 California A		9.																
City, State, Zip Code							City, State, Zip Code															
WEST CHESTER, PA 193							Paterson, NJ 0		03													
Project Manager for Monitoring Fire	hone Numb	per			Felephone Number 973-345-8020				ense N 169	umb	er											
MATTHEW ABRAHAM	10-431-7			-	Name of OSHA Mo	_	OF.	01	107													
Start Date (10)	Sched	. Complet	ion Date (1	1)		П.	D & S Restora															
08/19/13	08/22	2/13				3	Street Address															
Occupancy Status During Abatem	V.*S					11	20 California A	lve	nue													
Facility closed/vacated during Abatement performed outside						0	City, State, Zip Cod	е														
Describe: NORMAL	HOURS						Paterson, NJ 0	75	03													
Scope of Work (check all that ap						ш		1F	ull Containment	w/neg	ative p	ress	ıre									
>3 sf or >3 lf		n						N	fini-enclosure													
≥160 sf or ≥260 lf ☐	Demolition						L		lovebag proced lon-Exempted (*		Non-fri	able	proce	dure								
Location of	Is location	n normally	used solel	у				_ ''	TOTAL EXCHIPTION (7 4114		R	R	E	E							
asbestos-containing	by mainte staff(12)	enance/cu	stodial	Descri	iption of	f as	bestos-containing		Amount			e m	e p	n	n							
material (acm) to be abated in facility (13)		l	T	materi	al (ACN	VI)			(Specify LF)	SF or	- 1	0	a	a	C							
abatos in tability (10)	Yes	No	N/A	1			66					v e	ı r	р	_							
ROOM K 14/CLOSETS		$\square X$		PLUS COVE	BASE & A	NY	LOOSE COVE BASE MAS	STIC	84 L FT		_	\boxtimes										
PASS THROUGH STORE ROOM		$\square X$		DOUBLE L	AYER FI	LOC	OR TILE + MASTIC		90 SQ FT			\boxtimes			H							
				PLUS ALL COV	E BASE & A	ANY L	OOSE COVE BASE MASTIC		40 L FT		_		ᆜ	ᆜ	닏							
				_		_		_			_		ᆜ	님	片							
Desistant Marks Haulan		EP Hauler	JD# 1.	Cubic Yards	of Mac	to	Name of Registere	24 1	andfill			Ш	Ц	Ш								
Registered Waste Hauler D & S RESTORATION, INC	8 YDS	UI VVAS	ıc		WN, RESOURCE RECOVERY																	
City, State	al Date City, State																					
PATERSON, NJ 07503	5/12 TULLYTOWN, PA					PA		-														
Completed by (Print or Type)	Signature	9					1 5	ate 3/15/1	2													
BOGDAN JOLDZIC	exemn	oted	activities.			100	13/1															
0.1-11.45	1 41 1 11 11 11 11 11 11 11 11 11 11 11																					

Notification of Asbestos Abatement

D&S Proj. #: MS 13-297 pp 1 of 2

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

D&S Proj. #: MS 13-297 pp 1 o	12	(Pursuant to NJAC 8:60 and 12:120)													
	te production of the productio									1701	الالا		1		
Date of Notification (1)					Operator (2)										
0 8 / 1 5 / 1 2 Agencies Notified Type Notification				2. 8	SCHOOL D	ISTR	UC.	Γ							
EPA Initial	11000	et Addre													
DEP Amended	11		AVENU	JE										-	
Amendment #:_		97.	Zip Code								45				
DOH Emergency		RENTO	ON, NJ C)86	90		-			Telephone I	Number		_		
justification)															
DCA Cancellation	<u>N</u>	/ICHA	EL KRIS	HI	ER						-	_			=
			FAC	ILI	TY INFORMA	TION	1								
Name of facility where abatement is	taking place	(3)							Тур	e of Facility (4)					
SUNNYBREA ELEMENTAR	v schoo	T.								Subchap		har th:	n K-	12)	
SUNNYBREA ELEMENTAR Street Address	1 SCHOO	L		-						Other (P				12)	
Street Address										Bldgs./H	omes, etc	D		- ^-	
166 ELTON AVENUE			-	_					Sc	uare Feet #	of Floors		Bla	g. Ag	е
City (5)	County	(6)					County Code (7) State use only) Current Use (Prior if being dem							4)	
HAMILTON TWP.	MER	CER				(Ota	ato u	isc only)		unent ose (Fric	i ii beilig	demi		-,	4.00
Name of Monitoring Firm Hired by E	_			1	ASCM No.		Na	me of Abatemen	t Conti	actor (9)					
WESTCHESTER ENVIRONM				0	00127		I	& S RESTOR	RATIO	ON, INC.					
Street Address							Str	reet Address	98					2011-0-004	
307 NORTH WALNUT STRE	EET						_	20 California A							
City, State, Zip Code							City	y, State, Zip Cod							
WEST CHESTER, PA 1938						_	-	Paterson, NJ C			License	Numb	٥r		
Project Manager for Monitoring Firm Phone Number							lie	973-345-802			01169	- TOTAL			
MATTHEW ABRAHAM			10-431-7			_	Na	ame of OSHA Mo							
Start Date (10)	Sched. 0	Completi	on Date (1	11)				D & S Restora	tion, l	inc.					
08/19/13	08/22/						Sti	reet Address					Hazers (W)		
Occupancy Status During Abatemen							-	20 California A		e		_	_		
Facility closed/vacated during Abatement performed outside	of normal fa	l of abati cility hou	ement. ırs-				Cit	ty, State, Zip Coo	ie						
Docaribo:						-		Paterson, NJ (07503						
Other-Describe: NORMAL H							١.			Containment w/	negative	press	ure		
Scope of Work (check all that apply >3 sf or >3 If	Renovation									enclosure					
≥ ≥ 160 sf or ≥ 260 lf	Demolition							Ę		ebag procedure -Exempted (*) a		friahle	nroc	edure	
	Is location	normally	used sole	ely				<u>L</u>	7 14011	-Exempted () e	ind river	R	R	E	Е
Location of asbestos-containing	by mainten	ance/cu	stodial		Descripti	on of	asbe	estos-containing		Amount		e m	e p	n	n
material (acm) to be abated in facility (13)	staff(12)		1	-1	material	(ACM	1)			(Specify SI LF)	- 01	0	a	a	L
abated in facility (13)	Yes	No	N/A									е	· ·	р	
ROOM K 12/CLOSETS		X						ILE + MASTIC		600 SQ FT			무	片	쓔
		X						TILE + MASTI		380 SQ FT 84 L FT			H	片	쓔
		X		4				OOSE COVE BASE MA		600 SQ FT			片	H	片
ROOM K 14/CLOSETS		X	#-	4				TLE + MASTI LOOR TILE+MAS		380 SQ FT			Ħ	H	盲
Registered Waste Hauler	INIDE	P Haulei	ID#	CI	ibic Yards of	Waste	e I	Name of Register	red Lar	dfill		1			1
D & S RESTORATION, INC.	1350			8	YDS			TULLYTOW	N, RE	SOURCE RE	COVE	RY			
City, State			Disposa					City, State TULLYTOW	N DA						
PATERSON, NJ 07503		08/15/12 Signature					Date								
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDI	Title PRESIDENT						08/15/13							
ASB-41	* Do not use	this form	n for asbe	sto	s licensure e	xempl	ted a	activities.							
MOD-41															

APPROVED

D&S Proj. #: MS 13-297 pp 1 of 2

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

35. 7 (i ·					2.	NJ Dept of He	aith & So	enior (Servic	es		
Date of Notification (1)		Name, of E	Building Ow	mer/	Operator (2)				8	(signature)		•		_	
0 8 / 1 5 / 1		HAMII	TON TW	/P. S	SCHOOL D	ISTRI	CT i		Date: 8/15	ID TI	me:	30	25		
Agencies Notified Type I	Votification	Street Add	ireas								į				
DEP Ame			RK AVEN	-			1					INIA PRO-			
Amend	lment #:	- 11	a, Zip Code				,								
- IZI Eme	ergency uding		TON, NJ	086	590				Telephone I	Number		**0	-		
Just	fication)	Name of C	ontact				N.		(e)epilona i	100IIIIIIPI	7				
DCA Car	cellation	MICH	IAEL KR	ISH	ER					· ·	7				
			F#	CILI	TY INFORMA	MOITA									
Name of facility where aba	itement is tel	(Ing place (3)							Type of Facility (4) School	(K - 12)					
SUNNYBREA ELEM	ENTARY	SCHOOL	WIT I			W. T. T. T. CO.			Subchap				2)		
Street Address				,		19.			Other (P	rivate/Co	mmer c	cial			
166 ELTON AVENU	E						*			of Floors	Alexander	Bld	g. Ag	е	
City (5)		County (6)		an i d			ty Code (7)								
17.4 % Att 1994% of 1995 1994		MERCER				(State	(State use only) Current Use (Prior if being demolished)								
HAMILTON TWP. Name of Monitoring Firm	Hired by Bldd			-	ASCM No.		Neme of Aba	tement C	Contractor (9)				2000		
WESTCHESTER EN			1		00127		D&SRE	STORA	TION, INC.						
Street Address	7 1100 1111 111				Street Addres			-man//		-	No.				
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City, State, Zip Code		City, State, Zi	p Code												
WEST CHESTER, P.		Paterson	CARLES AND ADDRESS OF THE PARTY	503	~			,							
Project Manager for Monito		Telephone N 973-34			License 01169	Numb	er								
MATTHEW ABRAIL	AM		610-431		The second secon		Name of OS	10.00	tor	01105			-		
Start Date (10)		Sched. Comp	detion Date	(11))		D&SR								
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abated in facility (13	2)	Yes N	0 N	A			Ì		LF)		V	1	p	L	
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D & S RESTORATION	N, INC.	NJDEP Hai 13506	uler ID#		YDS	***			RESOURCE RE	COVE	ξŸ				
City, State Disposal Date PATERSON, NJ 07503 08/15/12						City, State							, Care - 11 c		
PATERSON, NJ 07			08/	15/1			TULLY	TOWN	, PA	Theta		on a viet		·	
Completed by (Print or Ty BOGDAN JOLDZIC		Title PRESIDENT			Signature					Date 08/15	/13				
ASB-41		o not use this	form for as	besto	os ! cansure e	xemple	d activities.			1		Principal Service		`` `	

Notification of Asbestos Abatement N.I Dept. of Health & Senior Services (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 13-297 pp 2012 similarin e Name of Building Owner/Operator (2) Date of Notification (1) 0 8 /1 5 /1 2 HAMILTON TWP. SCHOOL DISTRICT Agencies Notified Type Notification Street Address EPA initial 90 PARK AVENUE Amended DEP City, State, Zip Code. Amendment #: DOL X **Emergency** TRENTON, NJ 08690 Telephone Number (including Name of Contact \boxtimes DOH lustification) DCA MICHAEL KRISHER Cancellation FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) SUNNYBREA ELEMENTARY SCHOOL Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg, Age # of Floors Square Feet 166 ELTON AVENUE County Code (7) City (5) County (6) (State use only) Current Use (Prior if being demolished) HAMILTON TWP. MERCER Name of Abatement Contractor (9) Name of Monitoring Firm Hirad by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. 00127 WESTCHESTER ENVIRONMENTAL LLC Street Address Street Address 20 California Ave. 307 NORTH WALNUT STREET City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 WEST CHESTER, PA 19380 License Number Telephone Number Project Manager for Monitoring Firm Phone Number 01169 973-345-8020 610-431-7545 MATTHEW ABRAHAM Name of OSHA Monitor Sched, Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 08/19/13 08/22/13 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment winegative pressure Mini-enclosure >3 af or >3 If Renovation Glovebag procedure >160 af or >260 ff Demolition Non-Exempted (*) and Non-friable procedure is location normally used solely Loostion of E by maintenance/oustedial 0 . n asbestos-containing Amount Description of asbestos-containing m n staff(12) p ¢ (Specify SF or material (acm) to be material (ACM) C 0 8 8 abated in facility (13) Yes No N/A V p 84 L FT X ROOM K 14/CLOSETS PLUS COVE BASE & ANY LOOSE COVE BASE MASTIC DOUBLE LAYER FLOOR TILE + MASTIC 90 SO FT PASS THROUGH STORE ROOM 40 LFT PLUS ALL COVE BASE & ANY LOOSE COVE BASE MASTIC Cubic Yards of Waste Registered Waste Hauler NJDEP Hauler ID# Name of Registered Landfill D & S RESTORATION, INC. 13506 TULLYTOWN, RESOURCE RECOVERY 8 YDS Disposal Date City, State City, State 08/15/12 PATERSON, NJ 07503 TULLYTOWN, PA Completed by (Print or Type) Signature Palled Lin 01/15/13 **BOGDAN JOLDZIC** PRESIDENT Do not use this form for asbestos licensure exempted activities. ASB-41

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

D&S Proj. #: 2013

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Date of Notification (1)		ame of Build		er/Operator (2)										
Agencies Notified Type Notificati		reet Addres												
EPA Initial Amended		183 MON	TCLAIR	AVENUE										
DEP Amendment #:	1	ty, State, Zi								-3,		371		
DOL Emergency		MONTCI	LAIR, NJ	07042						5				
DOH (including justification)	Na	me of Cont	tact					Telephor	e Number		i.			
DCA Cancellation		BRUCE	REPETT	0							÷.			
La canconation			FACII	LITY INFORM	ATION						15			
Name of facility where abatement i	s taking pla	ce (3)					Ту	pe of Facility						
BRUCE REPETTO								_	ol (K - 12) apter 8 (C		an K.	12		
Street Address				(A)			1		(Private/C			,		
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183 MONTCLAIR AVENUE	Coun	tv (6)			Cour	ty Code (7)	- s	quare Feet	# of Floo	15	וום	ig. AÇ	,0	
City (5)	(a)								rior if bein	g dem	olishe	d)		
MONTCLAIR	ESS	(C)						•						
Name of Monitoring Firm Hired by	Bldg. Owne	r (8)		ASCM No.		Name of Abateme								
					_	D & S RESTO	DRATI	ON, INC.						
Street Address						Street Address	A							
City, State, Zip Code						20 California City, State, Zip Co					_			
City, State, Zip Code						Paterson, NJ						107		
Project Manager for Monitoring Firm	n .	. Ph	one Numb	er	-	Telephone Number			License	Numb	er	_		
					- 11	973-345-80	20	15.6		1169	Ţ,	3 10	= 44	
Start Date (10)	Sched	. Completio	on Date (11	1)		Name of OSHA N							10	
N.50) N.E.	00/20	V12				D & S Restoration, Inc. Street Address								
08/19/13 Occupancy Status During Abateme	08/30					20 California	Aveni	10						
Facility closed/vacated during	A50		ment.			City, State, Zip Co				-			7	
Abatement performed outside														
Describe:NORMAL I	HOURS				_	Paterson, NJ	07503							
Scope of Work (check all that app							Full	Containment	w/negative	press	ure			
≥3 sf or ≥3 lf	Renovation	n						-enclosure rebag proced	150					
≥160 sf or ≥260 lf	Demolition	ı						rebag proced i-Exempted (*		-friable	proc	edure	ſ.	
Location of	Is location	n normally i	used solely	у		63				R	R	E	E	
asbestos-containing material (acm) to be	staff(12)	enance/cust	todiai	Descript material	ion of as	sbestos-containing	g	Amount (Specify	SF or	m	р	n c	n	
abated in facility (13)	Yes	No	N/A	material	(ACIVI)			LF)		o v	i	a	L	
2 (27) (7) (7)	_			PIPE INSU	TI ATI	ON		155 L FT		e	r	П	\vdash	
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City, State			Disposal I	Date		City, State							200	
PATERSON, NJ 07503		/	08/19/1			TULLYTOV	WN, PA	<u> </u>	1=					
Completed by (Print or Type)	Title	NEXT.		Signature	Date 08/08/ 2013									
BOGDAN JOLDZIC	* Do not us		for ashest	tos licensure e	xempte	d activities.			-00/00	, 201.				

D&S Proj. #: 2013

State of NJ Notification of Asbestos Abatement

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

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Date of Notification (1)	Name of Bu	ilding Owne	r/Operator (2)	7		10	12.27	ill fige	Es			
10 8 / 0 7 / 1 3	PAUL L	OCHER						1191	7.			8
Agencies Notified Type Notification Type Notification Initial	n Street Addre	ess										
DEP Amended	586 UPF	ER MOUN	NTAIN AVE	NUE								
Amendment #:	City, State,	Zip Code										
DOL Emergency	MONTO	CLAIR, NJ	07042									
DOH (including	Name of Co	ntact				X-1-227-227-3X	Telepho	ne Numbe	r ै			
justification)	DAIII I	LOCHER										
Cancellation	TAOLI	LOCITER						- 1			_	_
		FACIL	ITY INFORMA	TION		· · · · · · ·						
Name of facility where abatement is	taking place (3)					Ту	pe of Facility					
PAUL LOCHER							=	ol (K - 12)	507			
Street Address	THE STATE OF THE S					4		hapter 8 (0 (Private/0			-12)	
								./Homes,		Clai		
586 UPPER MOUNTAIN AVI	ENUE			Action Profile		S	quare Feet	# of Floo	ors	Blo	dg. A	ge
City (5)	County (6)				ity Code (7)	7 L						
	Baaba		1	(Stat	e use only)		Current Use (Prior if bei	ng dem	olishe	ed)	
MONTCLAIR Name of Monitoring Firm Hired by Bl	ESSEX		100141		Name of Abateme	1 -	tractor (0)				-	
Name of Monitoring Firm Fired by Bi	lag. Owner (6)		ASCM No.									
				-11	D & S RESTO	DRATI	ON, INC.					
Street Address						v.						
City, State, Zip Code				_	20 California City, State, Zip Co							
City, State, Zip Code												
Project Manager for Monitoring Firm		hone Numbe		-	Paterson, NJ Telephone Number		0 84	License	a Numb	or	_	
:		HOHE NUMBE	21		973-345-802				01169	CI		
				I	Name of OSHA M	-						
Start Date (10)	Sched. Complet	ion Date (11)		D & S Restor	ration,	Inc.					
08/20/13	08/22/13			_	Street Address							
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Facility closed/vacated during e					City, State, Zip Co	ode					-	
Abatement performed outside of Describe:		IIS-		_							-, 14	
Other-Describe: NORMAL HO	DURS			-	Paterson, NJ	07503			22.000	Selection.		
Scope of Work (check all that apply))				. [=	Containment	w/negativ	e press	ure		
$\boxtimes > \underline{3} \text{ sf or } > \underline{3} \text{ If}$	Renovation				<u> </u>		-enclosure	8				
≥160 sf or ≥260 lf I	Demolition				i		rebag proced i-Exempted (n-friable	proc	edure	9
Location of	Is location normally								R	R	Е	E
asbestos-containing	by maintenance/cu staff(12)	stodial	Description	n of as	sbestos-containing	,	Amount	05	e m	e p	n	n
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abated in raemty (10)	Yes No	N/A							v e	r	р	
BASEMENT			PIPE INSU	LATI	ON		150 L FT					
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City, State PATERSON, NJ 07503		08/21/1:			TULLYTOW	VN PA						
	Title		Signature		1 TODE I TOW	11,11	-	Date				
20 m () : [10] [10] [10] [10] [10] [10] [10] [10]						72013						
	PRESIDENT Do not use this form	n for asbesto	os licensure ex	empted	d activities.						1000	