2019 03:21PM NJ Asbestos Col 19-08-19 15:11 INV 37	83h	ade	Envi S ATION Juneuali	i ponmer late of N 4 OF AS nt to NJA	ew Jersey BESTOS AB	AT 5:18	09 633 066 EMENT		A	UG		20
Date of Notification (1) 08 / 19 / 1	9		1	of Buildin an Eider	g Owner/Operati	6r (2	2)		ASE			
Agencies Notified Type Notification			,	Address				-		LIU	ENS	ING
☑ EPA ☑ Initial ☑ Amended					3				F	W6	11	20
⊠ DQH Amendment		-	1000	State, Zip (1	17	21	W
DCA Signature (NJAC 5:23-8) Signature (NJAC 5:23-8)	netudin	9	_	gnolia, N			'	Tolophone I	M/AJA/	EK	4	
☐ Cancalistion			Ry	an Eldor			ļ	Language	Led delde A		131	1 113
		- Constant of the Constant of	FA	CILITY IN	FORMATION			sapht s, a .				
Name of Facility Where Abatement is Takin Elder Residence Street Address	ig Piso	ė (3) ——–					Type of Facility (a School (K-12) Subchapter 8 Other (i.e., pri	(Other than)	K-12) nmercial l	sulfelin	udmi.	
ČRY (5)							homes, etc.) Square Feet	# of Floors				
Megnolia					į		2,663	3	' '	127		
County (6)			Cour	nty Code (7	XSTATE USE ONL	.47	Current Use (Prio	rifbeing de	molished)			
Name of Monitoring Firm Hired by Building	Owner	(8)	ASCM	No.	Name of Abute	DITIG	Résidence nt Contractor (9)					
Management & Enviro. Consulting							nmental, LLC	27				
Street Address PD Box 341				**************	Street Address							
City, State, Zip Code					623 Cutter City, State, Zip	-					-	-
Chesterfield, NJ 08515					Maple Sha		•					
Project Manager for Monitoring Firm Bill Weisgarber			phone 9-298		Telephone No.			License No	ð.			
	duled C		tion Da	0-12-15 No. 11 11 11 11 11 11 11 11 11 11 11 11 11	856-755-00 Name of OSH/		enttar	00842				
08 / 20 / 19	80	21	_/.		EMSL Ana							
Occupancy Status During Absternant (Cher Facility Closed/Vacated During Entire Pr Absternant Performed Outside of Normal Time of Absternant: AM-	riod of	Abate y Hau	s - Dos		Street Address 200 Route City, State, Zip Cinnamine	150 Cod	ie .					
Scope of Wark (Check all that apply) 23 af or 23 if 2180 af or 2280 if		enovati pistome			⊠ Mini-E ⊠ Glove	Enclo	doment with Nega Seure Procedure spied (*) and Non-		•			
Location of	1	S Local Norma	Ily		Descriptio	en cel			-	1	rent T	-
Asbestos-Conteining Material (ACM) TO BE ABATED IN Facility (13)	Ma	ed Sold kintens Itodial (12)	ncg/	Asbe (i.e	stos Containing , thermal system surfacing, Vi other miscella	Mate nts in AT, i	oripi (ACM) esulation, or	Amount (Specify SF or LF	100	Repair	Escapsulate	Enclasure
	Yes	Ng	N/A								2	
Sasoment	0	×		Pipe in	sulation			130 LF	- 1	+-		
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Name of Registered Waste Hauler			JOEP V	Afranta	Cubic Yards of		Name of Registe	Land t no diffe				
Freehold Certage			avier II 15939	No.	Waste 1		Fairless Lar City, State					-
Freehold, NJ					08/21/2019		Morrisville,	PA				
Completed By (Print or Type) Titl Christina Fay		malda	nt of (Operation	Signature 18 Ohil	73	2)		Data			\dashv

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Date of Notification (1) 08 /	19 /	19		A CONTRACTOR OF THE PARTY OF TH			ner/Operator (2 oment Grou		AU(G 23	20	19	200
Agencies Notified ⊠ EPA ⊠ DOLWD ⊠ DOH □ DCA	Type Notifica ☐ Initial ☐ Amended ☐ Amendme ☐ Emergence iustificatio	nt #		City,	t Address O North M State, Zip C tston, PA e of Contac	Code 1864	Street, Suite	101	ASBES'	ICENS		30L 8	2.54
(NJAC 5:23-8)	☐ Cancellati				en Peders				856-692-56				
				FA	CILITY IN	IFOR	MATION						
Name of Facility Where A	batement is T	aking Place	(3)					Type of Facility	y (4)				
Vacant Commercia	Space							School (K-1					
Street Address						23HU39H		☐ Subchapter	 8 (Other than K- private and comm 	12) nercial h	uildin	as	
700 North 2 nd Stree	t							homes, etc		1010101		3-,	
City (5)			181-0		~/	20	2:0	Square Feet	# of Floors	E	Bldg. A	Age	
Millville					()	X	1512	5,000	1		50		
County (6)				Cou	nty Code (7	7)(STA	TE USE ONLY)	Current Use (F	rior if being demo	olished)			
Cumberland								Commerci	al Building				
Name of Monitoring Firm	Hired by Build	ing Owner ((8)	ASCN	l No.	Nar	ne of Abateme	ent Contractor (9	9)			7,000	\$200 E.S.
TTI Environmental,	15			000	03	S	hade Enviro	onmental, LLC					
Street Address			-	1		Stre	et Address						
1253 North Church	Street					6	23 Cutler Av	venue					
City, State, Zip Code			3005			City	, State, Zip C	ode					
Moorestown, NJ 08	057					1 3	laple Shade						
Project Manager for Mon			TT	elephone	No.		ephone No.		License No.				
Mike Stocku	itoring Firm			856-84		1	56-755-0099	1	00842				
	Τ.	abadulad C					ne of OSHA N						
Start Date (10)		cheduled C		06/			MSL Analyt						
Occupancy Status During	ed During Entir	e Period of	Aba	tement		1	eet Address 00 Route 13	0 North					
Abatement Performed Time of Abatement: _				ours - De M	scribe _AM		, State, Zip C innaminsor						
Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	I that apply)	⊠ Re		ation ition			☐ Mini-End	closure g Procedure	egative Pressure	dure			
		1		cation	T					А	bater	nent T	ype
Location Asbestos-Containing TO BE AB/ IN Facil (13)	Material (ACM ATED) Use Ma	ed S inte todi	nally olely by nance/ al Staff? 2)	(i.e	e., the	Description of Containing Ma rmal systems surfacing, VAT her miscellane	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Kemovai	Repair	Encapsulate	Enclosure
(1.0)		Yes	-	lo N/A	<u> </u>						_		-
Open Store Space					Mastic				4,473 SF				
										L	1 _	1111	11
2)													
Name of Registered Was Freehold Cartage	ste Hauler		-1	NJDEF Hauler 159;		Cut Wa		Name of Reg	gistered Landfill Landfill		. (2000)		
City, State Freehold, NJ						Dis	posal Date 9/06/2019	City, State Morrisvil	le, PA				1000 M
Completed By (Print or T Christina Fay	ype)	Title Vice P	resi	dent o	Operation	ons	Signature	Day		Date 8/10	116	7	

Chipapa			NOTI	FICATION	State of N DN OF AS nt to NUA	BESTOS	ABAT	EMEN 20)	Т	m	EC	E I	\mathbb{V}	E	m
Date of Notification (1)	1	71		Name	of Buildin	g Owner	/Operat	or (2)		110			-		
08/20/2019	MUIDA	20		Texa	as Éaste	rn Trar	smiss	sion, L	P		AUG	23	2010	3	$\mathbb{I} \mathbb{J}$
Agencies Notified	Type Notification	1		100707-00055	Address						MUU	()	ZUI:	9	1
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DOL	Amended Amendmen	t #2			State, Zip (ham, M/		1				ASBESTO LIC	a GU ENSII	vin VG	ルは	
П рон	Emergency justification	(includin	g		of Contac					l Te	lephone No	ımhar	5A. 190 04 5LD	at survey to sure.	in the legal of the
DCA	Cancellation				MCHAN	-				1 5.000	36.683.6				
Name of Facility Whore	Abatamantia Tali	Di	(0)	FAG	CILITY IN	ORMAT	ION								
Name of Facility Where A	OMPRESSOR	ng Place STATI	(3) ON					Тур	e of Facilit	y (4)					
Street Address		017111							School (K	(-12)	ner than K-	10)			
1325 NJ ROUTE 17	79							×	Other (i.e	. private	& commerc	ial bu	ildings	s, hon	nes,
City (5)								Squ	etc.) are Feet	# 0	of Floors	-	Bldg.	Age	
LAMBERTVILLE								1		1			Diag.	· ·gc	
County (6) USA				County	Code (7)	N		Curi	rent Use (F	rior if be	ing demolis	hed)			-
Name of Monitoring Firm	Hired by Building	Owner (S			M No.	<i>''</i>					TATION				
TRC Environmental		Owner (c	")	ASC	IVI NO.			e of Ab SDI L	atement C LC	ontractor	(9)				
Street Address								t Addre	77,770						
41 Spring Street City, State, Zip Code							1		oia ave						
New Providence, N.	J 07974						(1) (2) (2)		Zip Code MA 0180	11					
Project Manager for Moni				Telepho	one No.			hone N		J 1	License N	lo			
Gail Lage	***				01.5741		100000000000000000000000000000000000000	.250.6			02002	v O.			
Start Date (10) 08-15-19				npletion	Date (11)				HA Monito	or					
Occupancy Status During	Abatamant (Chan	9-13-1						cey Pa							
		and the second		on the gar				Addre	Street						
■ Abatement Performe	d Outside of Norm	reriod of nal Facilit	Abaten y Hours	nent S					Zip Code						
Other – Describe: _									idence,	NJ 079	74				
Scope of Work (Check All	That Apply)	204 Sept.						WD.							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova				F	Fu	II Containn	nent with	Negative F	ressu	re		
2100 31 01 2200 11			Demolit	ion				Glo	ni-Enclosu ovebag Pro	re ocedure					
		1			1		>	인 No	n-Exempte	ed (*) and	Non-Friab	le Pro	10 to 10 to 10		
Location		1000	Locati											ement rpe	
Asbestos-Containing N	Material (ACM)	Use	d Solel	y by	Asbes	Des tos Conta	scription aining N		I (ACM)	A	mount				
TO BE ABA In Facility		V/10/10/10	todial S			thermal		s insula		(S	pecify	Re	Z.	inca	Enc
(13)			(12)			other m				SF.	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								<u> =</u>		ate	Гe
exterior				x		Trans	site Pa	anel		20,	000 sf	x			
exterior				Х		Ca	aulking	9		15	00 If	х			
exterior				Х		G	lazing			36	00 If	х			
Name of Registered Wester				Х		feet of		coveri	•) FT	Х			
Name of Registered Waste	: nauler			IDEP Wauler ID		Cubic \ of Was			E4	850	ed Landfill				
Wast Management			0 2000	273					Minerv	a Enter	prises, L	LC			
City, State Lafayette, NJ						Disposa		2/4.0	City, Stat						
Completed by		Title				8/15/1			Wayne	burg, C					
Amanda Medeiros			ct Co	ordinat	tor	510	gnature	n art	In 1	11	Dat	e 20/19			
		-1-				1/2	YVVI	MIN	WAL	All	MUX 012	-0/18			

no ch	٨	TOM		ATIO	N OF AS	BESTOS ABATAC 8:60 and 5:1	6)	<u>ege</u>		<u> </u>		
Date of Notification (1) 7 /19 /	19	_				g Owner/Operator on munications	(2)	AUG 2	3 21	019		السا
☐ DCA ☐ Emerge	ed nent # <u>1-4</u> ncy (incl			City,	State, Zip (PA 15212	and physicines	ASBESTOS (LICEN	CONT	ROL	. &	
(NJAC 5:23-8) justificat	127711118				e of Contac thony Po			Telephone Num 412-633-402				
						IFORMATION		412-000-402	- 1			
Name of Facility Where Abatement is Verizon Market Central Office Street Address 95 William Street		Place	(3)				Type of Facility (School (K-12) Subchapter 8 Other (i.e., pri	(Other than K-12	?)	uildin	as.	
City (5)							homes, etc.) Square Feet	# of Floors		ldg. A		
Newark							425,442	12	"	+-50	200	
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pric	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	shed)	. 00		
Essex							Verizon Com					
Name of Monitoring Firm Hired by Buil	Iding Ow	ner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
TTI Environmental						BRISTOL EN	VIRONMENTAL	, INC.				
Street Address						Street Address					9. 65	
1253 North Church Street		5200.0				1123 BEAVER						
City, State, Zip Code						City, State, Zip Co						-
Moorestown, NJ 08057						BRISTOL, PA	19007					
Project Manager for Monitoring Firm Kris Smith				ephone		Telephone No.		License No.				-
	0-1-11	10		09-313		215-788-6040		00509				
_8 / _5 / _19	Schedule 8			etion Da	and the second second	Name of OSHA M BRISTOL EN	onitor VIRONMENTAL	, INC				211245
Occupancy Status During Abatement (Street Address		•			-	
☐ Facility Closed/Vacated During Enti	ire Period	d of A	Abate	ment		1123 BEAVER	RSTREET					
Abatement Performed Outside of No. Time of Abatement:AM	ormal Fa PM/ <u>5</u>	cility 5:00 F	Hou PM- <u>1</u>	rs - Des :30AM	scribe	City, State, Zip Co						
Scope of Work (Check all that apply)						BRISTOL, PA						
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		Ren Den	novati			☐ Mini-Encl ☐ Glovebag	ainment with Nega osure Procedure npted (*) and Non-		re			
			Locat orma						Ab	atem	ent T	ype
Location of Asbestos-Containing Material (ACM TO BE ABATED IN Facility (13)	(Used	Sole Sole	ely by		Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaned	rerial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Basement HSB #2					VAT / Ma	astic		700 SF				
Basement Corridor #1					VAT / Ma	astic		450 SF				
Basement Elevator Lobby				\boxtimes	VAT / Ma	astic		540 SF			П	П
Basement Storage Area					VAT / Ma	astic		900 SF				
Name of Registered Waste Hauler SERVICE TRANSPORT GROUP			0.000	JDEP V	Waste No.	Cubic Yards of Waste	Name of Registe	ered Landfill				Ш
City, State	**			20990		Disposal Date	City, State			14/11/55		
YARDLEY, PA						TBD	WAYNESBU	BC On				
Completed By (Print or Type)	Title					Signature		15.				
Dillan DeCaro	Estir	mato	or			Della	- Ol Care,	In Da	te //9	/19		
ASB-41 DD 190 44	* Do	not u	ise th	is form	for ashesto	s licensure exempt						

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

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

Date of Notification (1)					Mar	f D . !!-!!	0 10		-					
	19	/1	9				ing Owner/Operator	(2)	M					
Agencies Notified EPA 4(69 DOLWD 4(76	Type Not ⊠ Initial □ Amen	ided			Stre 1	et Address 5 East Mo	entgomery St	The second secon		Pauls while something	23	and a state of		-
DOH4(52 DCA	☐ Emerg	dment : gency (ing	P		PA 15212	Ĺ	Musikhtaneg	ASDEST LI	GENSI	NG	TOL.	±
(NJAC 5:23-8)	justific	cation)				ne of Conta nthony Po	(B.C.)			Telephor				
	4					-	NFORMATION			412-6	33-402	1		
Name of Facility Where			ng Pla	ce (3)	10/2/	-		Type of Fa	cility ((4)				-
Verizon Market Cer Street Address	ntral Offic	e						School	(K-12)				
95 William Street								☐ ○ Other (.e., pr	(Other the	an K-12) commer) rcial l	huildir	201
City (5)				-				nomes	etc.)			Olul I	ounun	igs,
Newark								Square Fe 425,442		# of Floo	ors	E	3ldg. /	
County (6)					Cou	unty Code (7)(STATE USE ONLY)	Current Us		12	d 1*		+-5()
Essex						•	,	Verizor	Com	municat	demolis	hed)		
Name of Monitoring Firm	Hired by Bu	uilding	Owne	r (8)	ASCN	No.	Name of Abatem	ent Contract	or (9)	mamoat	.1011		-	
TTI Environmental							BRISTOL EN			, INC.				
Street Address 1253 North Church	Ctunnet						Street Address					-		
City, State, Zip Code	Street						1123 BEAVE							
Moorestown, NJ 086	057						City, State, Zip C		118-30-3		7			
roject Manager for Monit				Tel	ephone	No	BRISTOL, PA	19007		1				
Kris Smith	•			1	117	3-8218	215-788-6040			License				
itart Date (10)				3 200										
, ,		Sched	duled (Comple	etion Da	ate (11)	Name of OSHA M			00509	3			
_8 / _5 /	25		8	/ _2	etion Da		Name of OSHA N	lonitor	NTAL.		3			
8 / 5 / ccupancy Status During	Abatement	(Check	8 k only	/ _ 2.	3_ /		A STATE OF THE STA	lonitor	VTAL,		3		i	
8 / 5 / ccupancy Status During Facility Closed/Vacated	Abatement d During En	(Check	k only	one) Abate	ment	19	Name of OSHA M BRISTOL EN	lonitor VIRONMEI	NTAL,		3		(1)	
8 / 5 / Ccupancy Status During Facility Closed/Vacated Abatement Performed	Abatement d During En Outside of I	(Check	k only riod of Facili	one) Abate	ment	19	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co	lonitor VIRONMER R STREET	NTAL,		3			47
8 / 5 / Occupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement:	Abatement d During En Outside of t	(Check	k only riod of Facili	one) Abate	ment	19	Name of OSHA N BRISTOL EN' Street Address 1123 BEAVER	lonitor VIRONMER R STREET	∜TAL,		j			
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8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: cope of Work (Check all 1)	Abatement d During En Outside of t	(Check	k only riod of Facili M/5:00	one) Abate	ment rs - Des :30AM	19	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA	R STREET de 19007 ainment with osure Procedure	Nega	, INC	ure			
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8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: cope of Work (Check all is 23 sf or 23 lf 2160 sf or 2260 lf	Abatement d During En Outside of tAM that apply)	(Check tire Per Normal PM	k only riod of Facilit M/5:00	one) Abate ty Hou DPM-1 enovat emolitic S Local	ment rs - Des :30AM	19 scribe	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Mini-Encl Glovebag Non-Exer	R STREET de 19007 ainment with osure Procedure npted (*) and	Nega	, INC	ure	Ab	ateme	ent T
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8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: Cope of Work (Check all in the cope of Work) 2 3 sf or 23 lf 2 160 sf or 260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility	Abatement d During En Outside of iAM that apply) of laterial (ACI	(Check tire Per Normal PM	k only riod of Facility M/5:00	one) Abate ty Hou DPM-1 enovate Control S Local Norma ed Sole intena	ment rs - Des :30 AM fon ion lly sly by nce/	19 scribe	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Glovebag Non-Exer Description of stos Containing Mat , thermal systems is surfacing, VAT,	R STREET de 19007 ainment with osure Procedure npted (*) and erial (ACM) nsulation, or	Nega	tive Pressu	ure ocedure ot	_	ateme	
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8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: cope of Work (Check all 1) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13)	Abatement d During En Outside of iAM that apply) of laterial (ACI	(Check tire Per Normal PM	k only riod of Facility M/5:00	one) Abate ty Hou DPM-1 enovate molitic S Local Norma ed Sole intena todial (12)	ment rs - Des :30AM ion ion lly sly by nce/ Staff?	19 scribe	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Glovebag Non-Exer Description of stos Containing Mat , thermal systems is surfacing, VAT, other miscellaneo	R STREET de 19007 ainment with osure Procedure npted (*) and erial (ACM) nsulation, or	Nega	tive Pressu Friable Pro Amoun (Specif SF or Li	ocedure	A Removal		Encapsulate
8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: Cope of Work (Check all 1) 23 sf or 23 lf 2160 sf or 260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) Assement HSB #2	Abatement d During En Outside of iAM that apply) of laterial (ACI	(Check tire Per Normal PM	8 k only k only riod of Facilities of Facili	one) Abate ty Hou DPM-1 enovat emolitic S Locat Norma ed Sole intena (12) No	ment rs - Des :30AM ion ion lly lly by nce/ Staff?	19 Asbes (i.e.	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Mini-Encl Glovebag Non-Exer Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaned	R STREET de 19007 ainment with osure Procedure npted (*) and erial (ACM) nsulation, or	Nega	tive Pressu Friable Pro Amoun (Specif SF or LI	ocedure ot fy F)	A Removal	Repair	Encapsulate
8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: Cope of Work (Check all 1) 3 sf or ≥3 If ≥160 sf or ≥260 If Location of Abatement M TO BE ABAT IN Facility (13) Assement HSB #2 Assement Corridor #1	Abatement d During En Outside of IAM that apply) of laterial (ACI	(Check tire Per Normal PM	8 k only riod of Facilit Facil	one) Abate ty Hou DPM-1 enovat emolitic S Local Norma ed Sole intena todial (12) No	ment rs - Des :30AM ion ion lly sly by nce/ Staff?	Asbes (i.e.	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Mini-Encl Glovebag Non-Exer Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaned	R STREET de 19007 ainment with osure Procedure npted (*) and erial (ACM) nsulation, or	Nega	tive Pressure Amount (Specific SF or LITT 700 SF	ocedure	A Removal		Encapsulate
8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: cope of Work (Check all 1) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) assement HSB #2 assement Corridor #1 assement Elevator Lole	Abatement d During En Outside of IAM that apply) of laterial (ACI	(Check tire Per Normal PM	8 k only riod of Facilities Record Re	one) Abate ty Hou DPM-1 enovate emolitie s Local Norma ed Sole intena todial (12) No	ment rs - Des :30AM on ion illy sly by nce/ Staff?	Asbes (i.e.	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Glovebag Non-Exer Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaned astic astic	R STREET de 19007 ainment with osure Procedure npted (*) and erial (ACM) nsulation, or	Nega	Amour (Specif SF or LI	ocedure ot fy F =	Removal 🛛 🕅	Repair	Encapsulate
8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: Cope of Work (Check all is 3 > 3 sf or > 3 lf 3 > 160 sf or > 260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) Assement HSB #2 Assement Corridor #1 Assement Elevator Loles Assement Storage Are Time of Registered Waste	Abatement d During En Outside of IAM that apply) of laterial (ACI ED bby a Hauler	(Check tire Per Normal Ph	8 k only riod of Facilities Record Re	one) Abate ty Hou DPM-1 enovat emolitie s Local Norma ed Sole sintena todial (12) No	ment rs - Des: 30 AM ion on lly by nce/ Staff? N/A	Asbes (i.e. VAT / Ma VAT / Ma VAT / Ma VAT / Ma	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Glovebag Non-Exer Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaned astic astic	R STREET de 19007 ainment with osure Procedure mpted (*) and erial (ACM) nsulation, or nus) Name of R	Negar d Non-	Friable Pro Amoun (Specif SF or Li 700 SF 450 SF 900 SF	ocedure ot fy F = =	A Removal	Repair	Encapsulate
8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: cope of Work (Check all 1) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) assement HSB #2 assement Corridor #1 assement Elevator Lole assement Storage Are time of Registered Wastersen SERVICE TRANSPOR	Abatement d During En Outside of IAM that apply) of laterial (ACI ED bby a Hauler	(Check tire Per Normal Ph	8 k only riod of Facilities Record Re	one) Abate ty Hou DPM-1 enovat emolitie s Locat Normal (12) No D No	ment rs - Des :30 AM on ion lly ely by nce/ Staff?	Asbes (i.e. VAT / Ma	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Mini-Encl Glovebag Non-Exer Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaned astic astic cubic Yards of Waste	Name of R	Negar d Non-	Amoun (Specif SF or Li	ocedure ot fy F = =	Removal 🛛 🕅	Repair	Encapsulate
8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: Cope of Work (Check all is 23 sf or 23 lf 2160 sf or 2260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) assement HSB #2 assement Corridor #1 assement Elevator Lole assement Storage Are ame of Registered Waste SERVICE TRANSPOR by, State YARDLEY, PA	Abatement d During En Outside of IAM that apply) of laterial (ACI ED bby a Hauler RT GROUI	(Check tire Per Normal Ph	8 k only riod of Facilities Record Re	one) Abate ty Hou DPM-1 enovat emolitie s Locat Normal (12) No D No	ment rs - Des :30 AM on ion lly sly by nce/ Staff?	Asbes (i.e. VAT / Ma	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Mini-Encl Glovebag Non-Exer Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaned astic astic astic cubic Yards of	R STREET de 19007 ainment with osure Procedure npted (*) and erial (ACM) nsulation, or ous) Name of R MINERY City, State	Negari di Non-	Amoun (Specif SF or Li 700 SF 450 SF 900 SF ed Landfill	ocedure ot fy F = =	Removal 🛛 🕅	Repair	Encapsulate
8 / 5 / Decupancy Status During Facility Closed/Vacated Abatement Performed Time of Abatement: Cope of Work (Check all 1) 23 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) assement HSB #2 assement Corridor #1 assement Elevator Lole assement Storage Are ame of Registered Waste SERVICE TRANSPOR	Abatement d During En Outside of IAM that apply) of laterial (ACI ED bby a Hauler RT GROUI	(Check tire Per Normal Ph	8 k only riod of Facilities Record Re	one) Abate ty Hou DPM-1 enovat emolitie s Locat Normal (12) No D No	ment rs - Des :30 AM on ion lly sly by nce/ Staff?	Asbes (i.e. VAT / Ma	Name of OSHA M BRISTOL EN' Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaned astic astic astic Cubic Yards of Waste Disposal Date	Name of R	Negari di Non-	Amoun (Specif SF or Li 700 SF 450 SF 900 SF ed Landfill	ocedure ot fy F = =	A Removal	Repair	Encapsulate

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Date of Notification (1) 8-16-2019	34			Building C		perator	(2)			AUG	232	019	A CONTRACTOR OF THE PARTY OF TH	
Agencies Notified Type Notification EPA Initial		1000	Street Ad 200 W	ddress ashingto	n Stre	et			A	SBESTO	S CON	TRO	- &	=
DEP Amended Amendment #				te, Zip Coo en, NJ 0						LIC	ENSING	i		
▼ DOH ▼ Emergency (in justification)	cluding		Name of	Contact			de call		Tel	ephone N	umber			
DCA Cancellation				Loconte	DMATI	ON			20	1-786-3	098			
Name of Facility Where Abatement is Taking I Commercial	Place (3)		1 AOII	2111 1111 0	T CONTRACTOR	OII	Тур	e of Facility						
Street Address							H	School (Kashapte	er 8 (Oth					
480 East 30th Street							×	Other (i.e. etc.)						as,
City (5) Paterson, NJ							183	iare Feet 36	1 1	f Floors	15-55	ldg. A 5+	.ge	
County (6) Passaic		10.00	County C	Code (7) USE ONLY)			Cur	rent Use (P	rior if bei	ing demol	ished)			
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCM	1 No.				nvironme			LLC			
Street Address			1			Street 235		ress inia Aven	ue					
City, State, Zip Code						0.200		Zip Code Sity, NJ 07	304					
Project Manager for Monitoring Firm			Telephor	ne No.		Telepi 201-		No. -8855		License 01174	No.			
	Scheduled 3-26-20		npletion [Date (11)		2617780160		SHA Monito		rvices, l	LLC			
Occupancy Status During Abatement (Check	Only One	9)		81		Street		ress inia Aven						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:						City, S	State,	Zip Code		othes - Contract				
Scope of Work (Check All That Apply)						Jers	ey C	City, NJ 07	7304					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				-	N	Full Contain Mini-Enclosu Glovebag Pr Non-Exempt	ire ocedure				e	
	0 2700	Locati	1000									Abat	ement /pe	Į.
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair	ormal d Sole ntenar odial S (12)	ly by nce/		os Cont thermal surfa	scription taining f system cing, VA niscella	Mater ns insi AT, or	•	(:	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Deef	Yes	No X	N/A		Doofi	ng ma	torio		57	760 SF	X	-	-	
Roof Basement/ Electrical room		X	-	(emen				28 SF	X		1	
Basement Electroan room			+											
Name of Registered Waste Hauler Green Environmental Services	,	H	IJDEP W lauler ID 034889	No.	Cubic of Wa 7	Yards ste		100000000000000000000000000000000000000	of Regist ss Lan	ered Land dfill	Ifill			
City, State Jersey City, NJ						sal Date 2019	9	City, St Morris	ate sville, F	PA .				
Completed by Liliana Serrano	Title Office	Mai	nager		S	Signatur	e	wSer	LAW.		Date 8-16-2	019		

			Property.		d lease-		St. Sell					Pi	rint F
Chan3		NOTIF	Pursuan	ate of New Je N OF ASBEST t to NJAO 8:60	OS ABATE and 12:12	Ø)	F	RIVI	G		V	E 7	
Date of Notification (1) 8/20/19	19-		Name o	of Building Own s Baltodan	er/Operator	r (2)			AUG :	23	2019)	
Agencies Notified Type Notification EPA DEP Amended Amended			City, St	Address ate, Zip Code				ASBI	ESTOS LICE	S COI)L &	
DOL Amendmen Emergency justification DCA Cancellation	(including		1000000	of Contact				Teleph	one Nu	mber			
			100-11-01-01	ILITY INFORM	ATION								
Name of Facility Where Abatement is Takir house	ng Place (3)					of Facility (4						
Street Address						×	School (K-12 Subchapter 8 Other (i.e. pri	(Other th			dings,	, hom	es,
City (5) Fords							etc.) re Feet 0	# of Flo	oors	- 1	Bldg. A	\ge	
County (6) Middlesex			County (STATE	Code (7) USE ONLY)		Curre	ent Use (Prior ne	if being o	demolish	hed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASC	M No.			tement Contr ronmental		s, LLC				
Street Address					Street			2 400					
City, State, Zip Code	**************************************				City, S	tate, Z	Drive, PO I ip Code I, NJ 0741		3				
Project Manager for Monitoring Firm			Telepho	ine No.	Teleph		0.		cense N	0.			
Start Date (10) 8/23/19	Schedule 8/30/1		npletion	Date (11)	Name	of OSH	HA Monitor				1-25-4111		
Occupancy Status During Abatement (Chec	k Only Or	ne)			Street	Addres	SS						
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norn Other – Describe: basement	Period of A	Abatem Hours	nent		City, S	tate, Zi	p Code						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	× R	Renova Pemolit	tion ion		×	Min Glo	l Containmen i-Enclosure vebag Proced n-Exempted (dure	73			<u>.</u>	
Location of	1	Locati Vormali d Sole	ly		Description			7 4114 110	111100	Gr.		ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intenar odial S (12)	nce/	sui	ontaining M nal systems facing, VA r miscellan	insula T, or		Amou (Spec SF or L	ify	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A							3		ate	6
basement			Х	pip	e insulat	ion		75 LI	F	Х			
Name of Registered Waste Hauler		N	JDEP W	aste Cub	ic Yards		Name of De	aioto - a - l	andfil				
Newark Carting		H	auler ID 4509		/aste		Name of Re Grand Ce			/ Lan	dfill		
City, State Newark. NJ				Dis _F	osal Date		City, State Pen Argy	I. PA					
Completed by A. Scott Higgins	Title Presi	dent			Signature		1		Dat	te 20/19	ì		

Ch19772	N	IOTIFIÒ	State of N ATION OF AS suant to NJA	lew Jersey BESTOS /	ABATE	EMENT (R	E C	E 19] <u> </u>		ript
Date of Notification (1)	1/12	Na Na	ame of Buildin	g Owner/C	perator	r (2)	TARC	AUG	129	201	9	
8/20/19	<u>u</u>		005 Berger	nline Ave	nue V	VNY LLC						
Agencies Notified Type Notific	ation	101	reet Address	aor Door	4 Cuit	- 404	A	SBEST	OS CC	NTR	OL 8	
EPA X Initial DEP Amend	ed		00 Challeng		ı, Suit	e 401 [LI.	CENSI	NG		NAME OF TAXABLE PARTY.
X DOL Amend	ment #		lidgefield Pa		07660)		10 ¹²				
X DOH Emerg	ency (including ation)	Na	ame of Contac	:t			Tel	ephone N	lumber			
DCA Cancel	lation	E	milio Amad				20	1-845-2	2555	(137		
Name of Facility Where Abatement is	Taking Place (3))	FACILITY IN	FORMATIO	NC	Type of Facilit	v (A)			51		
Building	3					School (K						
Street Address						Subchapt	ter 8 (Othe	er than K	-12)			
5005 Bergenline Avenue						Other (i.e etc.)	. private 8	k comme	rcial bu	ildings	, hon	nes,
City (5) West New York		11 511				Square Feet		Floors		Bldg.	Age	
County (6)		Co	unty Codo (7)			2000	2			80		
Hudson			unty Code (7) TATE USE ONL			Current Use (F	rior if beir	ng demol	ished)			
Name of Monitoring Firm Hired by Buil	ding Owner (8)	1	ASCM No.		Name	of Abatement C	ontractor	(9)		D/ (12)	11565	
						Environmen			_C			
Street Address						Address						
City, State, Zip Code						30x 483, 4 E	Gate Dr	rive				
,,, <u> </u>						tate, Zip Code wood, NJ 07	7418					
Project Manager for Monitoring Firm		Tel	ephone No.		_	one No.	110	License	No.		- 1011	
					973-	764-2276		703				
Start Date (10) 8/21/19		d Comple	etion Date (11))	Name	of OSHA Monito	or	-11111111111111111111111111111111111111				
Occupancy Status During Abatement (9/13/19 Check Only One	.)			Ctroot	A alalas a s						
Facility Closed/Vacated During Er					Street	Address						
Abatement Performed Outside of Other – Describe:	Normal Facility F	Hours	S		City, St	tate, Zip Code						
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novation molition	l.		X	Full Containr Mini-Enclosu Glovebag Pro Non-Exempto	re ocedure	17.0			e	
	100000000000000000000000000000000000000	ocation								Abate	emen	t
Location of Asbestos-Containing Material (ACM		rmally Solely b	v		ription					Ty	ре	
TO BE ABATED	/ Main	tenance/ dial Staff	Asbes	stos Contai . thermal s	ining M ystems	aterial (ACM) insulation,		nount pecify	R		Enc	ū
In Facility (13)		(12)			ng, VAT	Γ, or		or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No N	J/A	outer mi.	scellarie	eous)			Val	¥.	ulate	sure
first floor	103	1000		ıll plaster	OD W	and lath	100	0 SF				
first floor					or tile	OOU IAUI			X			
second floor			X			11.0) SF	X			
				III plaster	Senat des	ood lath	400) SF	Х			
basement Name of Registered Waste Hauler			X P Waste	floo Cubic Ya	or tile			SF	Х			
Newark Carting		0.0000000000000000000000000000000000000	er ID No.	of Waste			Registere Central			ndfill		
City, State Newark, NJ	The second second			Disposal TBD	Date	City, Sta				1/24/20		
Completed by	Title			100000000000000000000000000000000000000	nature	Pen Al	rgyl, PA	-	ate			
A. Scott Higgins	Preside	ent		Joig		IL	$\overline{}$		ate /20/19	9		

INV13034

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

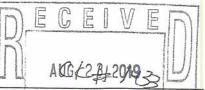
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Date of Notification (1)			Name	of Bu	ilding	Owner / Operato	r (2)	ASBESTO			JL &		1
	8/15/2019						stems LLC	- Institutes	LIC	DENSI	entresidente NG	rumannini.	registante (APRIL)	iosal.
	ype Notifica	ation			t Addr									
⊠ EPA □ DEP		i				Zip C	ge Court							
DOL	Amer					NJ 07								
☑ DOH	Emer	rgency			of Co					Те	lepho	ne N	umb	er
☐ DCA	Canc	ellation		Mike	Triza	no				100	1 220			
				FA	CILIT	Y INF	ORMATION				Lucia			
Name of Facility Whe	re Abateme	ent is Taking P	lace				Type of Facili	ity (4)						
Residence							School (I	A - 84						
Street Address				0.0				ter 8 (Other th						
			17	XI	50		Name of the latest terms o	e. private & co			-	_	etc.)	
Cib. (5)		(C(C)		0 1	2-1-/	71	Square Feet	# of Flo	oors	Bld	g. Ag			
City (5)		County (6)		ounty (Code ((1)	1500	(D-in-life balan	1			50÷		
Wall Twp		Monmout	n				Current Use ((Prior if being	aemoiisnea)					
Name of Monitoring F	irm Hired h	y Building Ow	ner (8	8)	TASC	M No.	Name of Aba	tement Contra	octor (Q)		-		- Contract	
Traine of Monitoring I	iiiii i iiieu b	y ballaling Owl	101 (0	"	1	AVI INO.		ronmental, L						
Street Address							Street Addres						THE	
							PO Box 829				//			
City, State & Zip Code	9						City, State & Trenton, N.							
Project Manager for M	lonitoring F	irm	Tele	phone	Numb	er	Telephone No 609-847-295	umber	Licens			2		
Scheduled Start Date	(10)	Scheduled Cor	mnlet	ion Da	te (11)		Name of OSH	THE RESERVE OF THE PARTY OF THE			0122	4	-	
08/24/2019	8	8/27/2019			te (11)	-	EMSL Analy	ytical						
Occupancy Status Du Facility Closed					otomo	nt	Street Addres							
Abatement Pe		7 N TO 1					200 Route 1 City, State & 2							
Describe:	monnou ot	atolde of reciti	ai iii	Juis	rani to	Opini		on, NJ 08077	7					
Facility Occup	ied During	Abatement						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Scope of Work (Check	k all that ap	pply)										_		
≥3 sf or ≥3 lf				Por	novatio	n			ntainment wit	th Neg	jative	Pres	sure	1
≥160 sf ≥260 l	lf		A		nolitio				Bag Procedur	29.				
				00.		•			cempted and		riable	Dro	oodu	ıro
Loca	ation of		Is	Locat	ion		Description		Amoun		-		ent T	
	s-Containing	g	1 1000	mally l			Asbestos-Con		(Specif		7100			ypo
	ial (ACM)			Solely I			Material (AC		SF or LI	F)	Z Z		En	Ш
	-ABATED -acility			ntenan todial			(i.e., thermal synsulation, surface				Remova	Repair	Encapsulate	Enclsoure
	(13)		Cus	(12)	Jiaii:	1	or other miscella				ova	air.	sula	oure
			Yes		N/A								te	w
Exterior							Siding		1000sf		\boxtimes			
Name of Registered Was	Name of Registered Waste Hauler						Cubic Yards of	Name of Regis	stered Landfill					
ALPHA ENVIRONM			uler ID 0333	00000000	Waste 10	Grows Lan	dfill							
City, State							Disposal Date	City, State						
Trenton, NJ							various	Morrisville	, PA					
	Completed By (Print or Type)						Signature				Date			
Rod Richardson				5.5	oject anage		Rod Richardson			1	08/1	5/2	019	

Ch 1433

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



Date of Notification	44-11-11-11-11-11-11-11-11-11-11-11-11-1	2_	Nar	ne of Build	ing Owner/Operator (2)			-+				3	
8/20/19	JUNIOUS:			arie Gle					ASRESTOS CO	NO INTERNA	erroccoro CO I		numan.
Agencies Notified	Type Notification		Stre	et Address					LICENS			Č.	
□ EPA								banana and			Hilbertogs	nucusius	annes.
□ DEP	☐ Amended		2000	State, Zip				100000				7/21/2	
⊠ DOL	Amendment #		_		nge, NJ 07052								
⊠ DOH	Emergency (includin	ıg	100000	e of Conta				Telephone Num	ber				
□ DCA	justification) Cancelation		IIVIa	rie Gle	maud								
	Currectation			F	ACILITY INFORMAT	ION							_
Name of Facility Wh	ere Abatement is Taking Place (3)					_	e of Facility (4)						
Residence								12)					
Street Address						10		r 8 (Other than	K-121				
						X			nercial buildings, h	omes	etc	1	
City (5)							other (i.e.	private & comm		onies	, etc.	ı,	
West Orange, N	11.07052					Squ	are Feet	# of Floors	Bldg. Age				
	07032					-)92 SF	2	128.				
County (6)					/ Code (7) : USE ONLY)	Curr	rent Use (Prior if b	eing demolished)					
Bergen		-		(SIAIL	OSE ONET/								
Name of Monitoring	Firm Hired by Building Owner (8)				ASCM No.	Nam	ne of Abatement (Contractor (9)					
						Uni	icorn Contrac	ting Corp.		- 5-5-0			
Street Address						Stree	et Address						
					h.	32	Willow Way						
City, State, Zip Code						City,	State, Zip Code						
						Wo	odland Park,	NJ 07424					
Project Manager fo M	Ionitoring Firm			Telepho	one No.	Teler	phone No.		License No.				
						973	-333-9176		01331				
tart Date (10)			Sched	uled Comp	letion Date (11)	Nam	e of OSHA Monito	г				-1.20	-7
3/29/19			8/30	/19		Env	irovision Con	sultants, Inc.					
	ing Abatement (Check Only One)					Stree	t Address						
	sed/Vacated During Entire Pe			nt	×.	20-2	21 Wagaraw I	Rd., Bldg. 35-E					
☐ Abatement	Performed Outside of Norma	al Facility	Hours			City, S	State, Zip Code						
☑ Other - Des						Fair	Lawn, NJ 07	410					
cope of Work (Check	All That Apply)												
≥3 sf or ≥3 l	lf		\boxtimes	Renova	ation		Full Contains	ment with Nega	tive Pressure				
≥160 sf or ≥	:260 If			Demoli	ition	X	Mini-Enclosu	ıre					
						X	Glovebag Pro	ocedure					
							Non-Exempt	ed (*) and Non-	Friable Procedure				
			Is Location	333						T	Abat		it
Ashestos-C	Location of Containing Material (ACM)		Normall Ised Solely				cription of			-	! 17	/pe	T
	TO BE ABATED		/aintenan	1 (2)			ining Material (AC systems insulation		Amount (Specity	1			
	In Facility	Cı	stodial St	aff?			ing, VAT, or		SF or LF)	l m		Enca	m
	(13)		(12)		oth	ner m	iscellaneous)			Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A						_	air	ate	ure
	Basement	-	X		Pi		nsulation		80 LF	X			_
	Basement	-	X			EI	bows		25 ea	X			
		+				_				-			
TON-12-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1													
me of Registered Was				aste Haule			ards of Waste		Name of Regustered				
icorn Contracti	ng corp.		00358	44	1-	_		1	Fairless Hills Lar	ndfill			
, State	Managain and a construction of the constr				La Constantina		al Date	1	City, State				
oodland Park, N	lew Jersey	т —			TE	BD	/		Morrisville, PA	_			
npleted by		Title					Signature		<i>-</i> .	Date			
ivko Nikolov		Preside	ent				1			8/20)/19		

CKILOUPS			NOTII	FICATIO	tate of N N OF ASI t to NJA	BESTOS	y ABATEMENT d12:120)	Г	D)-	EC	El	\mathbb{V}	7 [M
Date of Notification (1) 08/16/2019	12101			Name of Dunell	of Building en Board	Owner/	Operator (2)		M	Chec	ck Alog 1	643	9	Total designation	
Agencies Notified	Type Notification Initial			High a	Address Ind Leigh					LODEOR		No other lates	Metamic south		
⊠ DEP ⊠ DOL	☐ Amended Amendment #_ ☑ Emergency (inc	ludina		City, St Dunell	ate, Zip C en, New	ode Jersey	08812	L	***************************************	ASBEST LI	GENSI	VIA IG	UL.	OX.	
☑ DOH ☐ DCA	justification) □ Cancellation	idding			of Contact Mosely					elephone 32-968-33					
Name of Facility Where	e Ahatement is Takir	n Place (3	8)	FAC	ILITY INF	ORMAT	Type of Fa	cility (4)							
Dunellen High Scho	ol	9 1 1400 (0	·/				☑ School								
Street Address 411 1st Street								apter 8 (Oth	er than & comn	n K-12) nercial bu	ıildings,	home	es, e	tc.)	
City (5) Dunellen, New Jerse	ey 08812	×					Square Fee 60,000	et	2	of Floors		Bldg 50+		е	
County (6) Middlesex					Code (7) USE ONLY	n	Current Use	e (Prior if be High Sc		molished)				
Name of Monitoring Fir Environmental Conn		Owner (8)		ASCI 0005	M No. 57		Name of Ab Lilich Corp	atement Co oration	ontracto	or (9)					
Street Address 120 North Warren S	treet						Street Addre								
City, State, Zip Code Trenton, New Jersey	08608				5		City, State, 2 Woodland	Zip Code Park, Nev	/ Jerse	Эу					
Project Manager for Mo Dominick Dercole	onitoring Firm			Telepho 609-39	one No 92-4200		Telephone N 973-225-84			Licens 01104			100000 N. P.		
Start Date (10) 08/16/2019		Schedule 08/19/2	ed Co 019	mpletion	Date (11)		Name of OS Iris Environ			ories, LL	С				
Occupancy Status Duri		•					Street Addre								
☐ Abatement Perform☐ Other – Describe:		Period of A al Facility	baten Hours	nent			City, State, 2 Union, NJ (:						
Scope of Work (Check	All That Apply)							20 14 IV							
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	*		lenova emolit				□ Mi ⊠ Gl	II Containme ini-Enclosur love Bag Pr n-Exempted	re ocedur	e / Limite	d Contai	nmei	nt &	Tent	
		Is	Locat	ion				LXOMPTO	7 () () (Amour	nt	25.023	atem	nent	
Location		_ N	lorma d Sole	lly			Description of			(Specif SF of L			Туре	9	
Asbestos-Containin TO BE Al	BATED	Ma	intena	nce/ Staff?	Asbe the	rmal syst	taining Materi ems insulation VAT, or	n, surfacing	e. ,			Removal	Repair	Encapsulate	Enclosure
(13)	Yes	No	N/A		othe	er miscellaneo	ous)				oval	air	sulate	sure
1st Floor Hallway at N	lain Office		X			Р	ipe Insulation	n		7.5 LF	,		1		
						P. 6-20 (0-10)									
Name of Registered Wa Lilich Corporation	aste Hauler		H	IJDEP W lauler ID 18724		of Was		Name of Fairless	10721 107		dfill				
City, State Woodland Park, New	Jersey			2:01:04 52	,	Dispos 07/05/	al Date 2019	City, Stat	te Ile, PA						
Completed by Adriana Olejarova		Title Pre	siden	t		S	gnature	(0)			Date 08/16	/201	9		

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

In	WE	BI	2
Ch	271	201	
Date	J C	tion (1)	

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

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Data of Notification (1)	Ĭ,				1				TO STATE OF THE ST		A1	IG 2	3 2	010	All more
Date of Notification (1)	40 /	40						wner/Operator	(2)	fmi fa				U-1-U	
	19 /	19			Pu	roclean	Mid	dlesex		-	Land to the same of	- 3	-	20	4
Agencies Notified	Type Notifi	cation			Stree	t Address					ASBES				- &
⊠ EPA	☐ Initial				43	2 Lincolr	Bl	vd.		IND-GREAT COMM	THE REAL PROPERTY AND ADDRESS.	LICEN	CHAC	CORNELLO NOM	Transmission (St.
☑ DOLWD	☐ Amende Amendr	000000			City,	State, Zip	Cod	е						00-1-	
□ DCA	☐ Emerge		cludin	-	Mi	ddlesex,	NJ	08846							
(NJAC 5:23-8)	justificat	tion)	Judin	9		e of Contac				Teler	hone Nur	mher	_		
	☐ Cancella				Cr	istina Mu	noz	z			2-366-93				
								RMATION		, 0	2-000-00				
Name of Facility Where A	batement is	Taking	Place	(3)		OILII I II	41 0	KWATION	Type of Equility /	4)					
Residence				- 1-7					Type of Facility (- ☐ School (K-12)						
Street Address							-		☐ Subchapter 8	(Othe	r than K-1	2)			
									Other (i.e., pri	ivate a	nd comm	ercial b	uildin	gs,	
City (5)									homes, etc.)	44	<u> </u>	15			
Maplewood						ULI	NI	(i)	Square Feet 3000		Floors	B	ldg. A	ge	
County (6)					Cou	nty Code (TVST	ATE USE ONLY)	10-00-00-00-00-00-00-00-00-00-00-00-00-0	2			80		
Essex					000	nty code (1)(01	ATE USE UNLT)	Current Use (Price Residence	or it be	ing demoi	ished)			
Name of Monitoring Firm	Hired by Bui	ildina O	wner	(8)	ASCM	No	Ne	ama of Abotama	ent Contractor (9)						
Guardian Contractin		iuiig C	*******	(0)	AGGIVI	INO.	1								
Street Address	.5,							reet Address	ntracting, Inc.						
1889 Rte. 9, Unit 61									Unit C4						
City, State, Zip Code							-	1889 Route 9					0.071		
Toms River, New Je	rsev 0875	5						ty, State, Zip Co							
Project Manager for Monit				Tel	ephone	No		elephone No.	New Jersey 087	-					
Nicholas Fernicola	g				32-349		1 50	732-349-9932		2000	nse No.				
Start Date (10)		Schedu	iled C	(8)			-	me of OSHA M		00)624				
09/_03/						19		E.M.S.L. Anal							
Occupancy Status During									yucai				10		
☐ Facility Closed/Vacated					mont			reet Address							
☐ Abatement Performed	Outside of N	lormal F	acility	Abate 7 Hou	rs - Des	cribe		1056 Stelton							
Time of Abatement:	AM	PM	/	_PM		AM		ty, State, Zip Co							
Scope of Work (Check all								Piscataway, N	lew Jersey 088	54					
	inat apply)								ainment with Nega	tive P	PERSITE				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			Re						osure	uvo i i	Cooure				
△ ≥100 Si di ≥200 li		l	_ Der	molitie	on			☐ Glovebag	Procedure	Crichi	. D	0.0020			
			Is	Loca	ion				ripted () and Non-	-rnabi	e Procedi				
Location of			N	lorma	lly			Description of					atem		ype
Asbestos-Containing N TO BE ABAT		A)	Use	d Sole intena	ely by	Asbe	stos	Containing Mat	erial (ACM)	Ar	mount	Removal	Repair	Enc	Enc
IN Facility					Staff?	(i.e	., the	ermal systems in surfacing, VAT,	nsulation,		pecify	VOC	ar	aps	Enclosure
(13)				(12)				ther miscellaned		SF	or LF)	<u>m</u>		Encapsulate	Гe
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master bedroom				\boxtimes		asbesto	os c	ontaining pla	ster	20	60 sf		П	П	
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			_	_									Ш	П	Ш
Name of Registered Waste				30.00	JDEP V		The British	bic Yards of	Name of Registe	ered La	andfill				
Guardian Contractin	g, Inc.			H	auler II 20223		Wa 6	ste	T.R.R.F.						
City, State					20220		-	posal Date	City, State						
Toms River, New Jer	sey					1		9/06/19	Tullytown, P	enns	vlvania				
Completed By (Print or Typ	e)	Title					7. 28	Signature				ate /	- 1		
Nicholas Fernicola	3	Pro	ject	Man	ager			3.3			. 0	8/1	01	19	
SR 41		0.000000		2000/00/200	J - 1			$\perp \qquad \qquad$	1-1-	natural Pro-		0/1	111	7	

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

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		AUG	2	J	2019		

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Date of Notification (1)					Name	of Buildin	g Ov	ner/Operator ((2)	ILL AL	IG 2	3 2(119	Long
	20 /	19			Re	sipro				12	17/) -	l	
Agencies Notified	Type Notific	ation			Stree	Address				ASBES	STOS C	ONT	ROL	. &
⊠ EPA					363	0 Peach	tree	Road NE Su	ite 1500		LICEN			ternal and that
⊠ DOLWD	Amended	7010 GWWWYSE			City, S	State, Zip (Code			74				
☑ DOH ☐ DCA	Amendm		10 7007		Atl	anta, GA	303	26						
(NJAC 5:23-8)	☐ Emergen justificati		Juani	3		of Contac				Telephone Nu	mher			
,	☐ Cancella				Ga	ry Hagop	ian			917-586-25				
								RMATION						
Name of Facility Where A	Abatement is 7	Taking	Place	(3)	- ' '	OILITT III		MATION	Type of Facility	(4)			1 1 1 1 1 1 1	
Residence		J		1-7					School (K-12					
Street Address								7 / (☐ Subchapter 8	Other than K-				
					/	27/	16	M	Other (i.e., pi	rivate and comm	ercial b	uilding	js,	
City (5)						110	-1	V	Square Feet	# of Floors	B	dg. A	ne .	
Woodbridge									2000 sf	1		70	90	
County (6)		-31			Cour	nty Code (7	YSTA	ATE USE ONLY)	Current Use (Pri			-		
Middlesex							/1	,	Residence	ior ii bonig domo	nonou)			
Name of Monitoring Firm	Hired by Build	ding O	wner ((8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)	·		10.00		
Guardian Contracti	ng, Inc.								ntracting, Inc.					
Street Address							-	eet Address	,g,					
1889 Rte. 9, Unit 61							1	1889 Route 9	. Unit 61					1/4
City, State, Zip Code							-	y, State, Zip Co	<u> </u>					
Toms River, New Je	ersey 08755						100		New Jersey 08	755				
Project Manager for Moni	toring Firm			Tele	phone	No.		lephone No.		License No.				_
Nicholas Fernicola				7	32-349	-9932	7	32-349-9932		00624				
Start Date (10)	8	Schedu	uled C	omple	tion Da	te (11)	Na	me of OSHA M	lonitor	United Control (Control (Contr				
08 / _30_ /	_19_	_ 09	9_/	_ 03	3_ /	19	E	.M.S.L. Ana	lytical					
Occupancy Status During	Abatement (Check	only o	one)			Str	eet Address						
□ Facility Closed/Vacate	d During Entir	re Peri	od of	Abate			1	056 Stelton						
☐ Abatement Performed	Outside of No	ormal F	Facility	y Hou	rs - Des	cribe	City	y, State, Zip Co	ode					
Time of Abatement: _	AM	PM	/	_PM		AM			New Jersey 08	854				
Scope of Work (Check all	that apply)			77-02-										
			⊠ Re	novet	ion				ainment with Neg	ative Pressure				
☐ ≥160 sf or ≥260 lf		İ		moliti				☐ Mini-Enc ☐ Glovebag						
								☐ Non-Exe	mpted (*) and No	n-Friable Proced	ure			
				Loca							Ab	atem	ent T	уре
Location Asbestos-Containing N		n			ely by	Asha	ctoc	Description o Containing Ma		A	R	Re	Щ	Щ
TO BE ABA	TED	,		intena		(i.e	., the	ermal systems	insulation,	Amount (Specify	Removal	Repair	cap	Enclosure
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basement						achaeta	ne n	ipe insulatio		60 If				
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			П	П	П									
Name of Registered Wast	e Hauler		_		JDEP \	Vaste Vaste	Cul	oic Yards of	Name of Regis	tered Landfill			П	
Guardian Contractin				1.01	lauler II	No.	Wa	ste	T.R.R.F.	Co. Cu Lanum				
City, State					20223	}	Dis	posal Date						
Toms River, New Je	rsev							9/03/19	City, State	Donnovis !-				
Completed By (Print or Ty		Title					0		Tullytown,	Pennsylvania				
Nicholas Fernicola	he)	Title	oioot	Man	2005			Signature			Date	1		
.violiolas i ettiloola		Fr	oject	ividn	ayer				L- I		5/	10/	19	

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Date of Notification (1) Thy 393	0			of Building (lin Ham					Ш	Α	UG-	2.	3 2	J19	- Ena
Agencies Notified Type Notification EPA Initial				Address awthorn	e Drive	Э				ASBE	EST(OS C	ONT	ROL	&
DEP Amended Amendment				ate, Zip C erset, NJ		3				5					
▼ DOH Emergency justification) □ DCA Cancellation	***************************************	g	(E. 1936) 133	of Contact Lattima					Tel	ephone	Nun	nber			
Name of Facility Where Abatement is Takin	g Place ((3)	FAC	ILITY INF	ORMAT	ION	Tyn	e of Facility (4)						
FRANKLIN HAMILTON GARDENS	3							School (K-1	2)						
Street Address 29 Hawthorne Drive							×	Subchapter Other (i.e. petc.)					dings	, hom	es,
City (5) Somerset							Squ	are Feet	# 0	f Floors		E	Bldg.	Age	
County (6) Somerset				Code (7) USE ONLY	0		Curi	ent Use (Pri	or if bei	ng dem	olish	ed)			
Name of Monitoring Firm Hired by Building 0	Owner (8	3)	ASCI	M No.				atement Cor							
Street Address						Street	Addre	THE RESERVE AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRES							
City, State, Zip Code						City, S	tate,	Zip Code	2.10.110.130.01						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-6	one N		5/01	Licens),	-		
Start Date (10) 09/01/2019	Schedu 09/02/		mpletion	Date (11)		Name	of OS	HA Monitor	2010						
Occupancy Status During Abatement (Check	7.100.100	THE STATE OF THE S				Street		D PROFE	33101	NALS					
Facility Closed/Vacated During Entire F	eriod of	Abater	ment				250,000	DOVE CO	URT					9	
Abatement Performed Outside of Norm Other – Describe:	ai Facilit	y Hour	S		_			Zip Code OD, NJ 08	3701						
Scope of Work (Check All That Apply)	-						,								
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	-	Renova Demoli				×	Mi Gl	II Containme ni-Enclosure ovebag Prod on-Exempted	edure					۵	
		Locat							() == (110111			Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole aintena todial ((12)	ely by nce/		tos Cont thermal surfa		ateria insul T, or	ation,	(S	mount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A		OM D		1.0							te	
INTERIOR				F	AÇM Pi	pe Insi	ulatio	on	6	LF		x			
Name of Registered Waste Hauler			IJDEP W	/aste	Cubic	Varde		Name of F) o aisto	and I an	4611				
NEWARK CARTING		Н	lauler ID 4509		of Was			Name of F	vediziei	eu Lan	aill				
City, State NEWARK, NJ					Dispos 09/02	al Date /2019		City, State BETHLE		PA					
Completed by IOSEPH PERLSTEIN	Title OWN	NER			S	ignature	l.		20		Date 08/	21/1	9		

Inv#1	3940)			00										
V 1778	PAI	D	NOT		MOITA		BES	Jersey STOS ABAT :60 and 5:10		0) E C			\mathbb{V}	E	7
Date of Notification (1)	2.5.0000016			(, ,											
	21 /	19			1		200	ner/Operator (of Bloomfield	,	ILI AU	: 2 .	3	20 19		
Agencies Notified	Type Notifica	ation			Street	Address				ASBEST	000	011	for the case		1
☑ EPA ☑ DOLWD	☐ Initial	,			1 N	lunicipal	Plaz	za		LI	CENS		HO!	L&	
☑ DOH	Amendme	-				State, Zip (The second	-	- Contraction	MS TO THE PARTY NAMED AND
☐ DCA	☐ Emergen	cy (in		,		omfield,	CONTRACTOR AND	07003							
(NJAC 5:23-8)	justification Cancellat				13535415356	of Contac		F07		Telephone N					
	□ Caricellat	1011				nn Dome				973-418-	2978				
Name of Facility Where A	botoment is T	- Islan	- DI	(0)	FA	CILITY IN	FOF	RMATION	r=						
Commercial	voatement is i	aking	Place	(3)					Type of Facility						
Street Address									☐ School (K-1) ☐ Subchapter		(-12)				
14 Lackawanna Pla	ce								Other (i.e., p	orivate and com		l bu	ilding	s,	
City (5)				55 H	_				homes, etc. Square Feet	# of Floors		DI	ia Ac	10	
Bloomfield									Square Feet	# OI FIOOIS		BIL	ig. Ag	le	
County (6)					Cour	nty Code (7	VSTA	TE USE ONLY)	Current Use (Pr	rior if being den	nolishe	d)			
Essex						, (A	,		nor ir boring don	ionorio	۵,			
Name of Monitoring Firm	Hired by Build	ling C	wner	(8)	ASCM	No.	Nar	me of Abateme	ent Contractor (9))					
Mark Jovic Consult	ing LLC						A	LL PRO MA	NAGEMENT L	.LC					
Street Address							Stre	eet Address							
87 Main Street, Suit	e A				243		2	7 Outwater I	Lane						
City, State, Zip Code							City	y, State, Zip Co	ode						
Lincoln Park, NJ 07				_				Barfield, NJ	07026						
Project Manager for Moni Mark Jovic	toring Firm			1	phone			ephone No.		License No					
Start Date (10)	10	`abad	ulad C		73-650 tion Da	OTTO THE		73-928-4888		1188					
_08 / 30 /	5-570) /			me of OSHA M	onitor NAGEMENT L	1.0					
Occupancy Status During		315			_ ' -	10_		AND DESCRIPTION	NAGEWIENT	.LC			18		
☐ Facility Closed/Vacate					ment		5000	eet Address 7 Outwater L	222						
☐ Abatement Performed	Outside of No	ormal	Facility	/ Hour	s - Des	cribe		, State, Zip Co							
Time of Abatement: _	AM	PN	Λ/	_PM-		AM		arfield, NJ							
Scope of Work (Check all	that apply)														
☐ >3 sf or >3 lf			⊠ Re	novati	ion			☐ Full Cont ☐ Mini-Encl	ainment with Ne	gative Pressure	9				
⊠ ≥160 sf or ≥260 lf			☐ De					☐ Glovebag	Procedure						
		_	le	Local	ion			☐ Non-Exer	mpted (*) and No	n-Friable Proc		2000			
Location	of		1	Vorma	lly			Description of	f		-		ateme	100.0	F -
Asbestos-Containing I)		d Sole intena				Containing Mat	terial (ACM)	Amount		Ren	Repair	Enc	Enc
TO BE ABA IN Facilit			177700000000000000000000000000000000000	todial	Staff?	(i.e		rmal systems i urfacing, VAT,		(Specify SF or LF)		Removal	air	apsı	Enclosure
(13)	•			(12)	1	-		her miscellane		Or or Er y		=		Encapsulate	Ге
Main Stairwell			Yes	No	N/A	Dadas		4 4 1 - 1			-	_		_	-
2 nd Floor Baseboards								t material		600 SF					
2 Floor Baseboarus						Red cer	nen	t material		100 SF	-	\boxtimes		П	
1															
Name of Registered Was	te Hauler			7.4	JDEP \		10077755	oic Yards of	Name of Regis	stered Landfill					
Newark Carting	19-11-11-11				lauler II 0283	. או כ	Was	ste s Needed	Grand Cer	ntral Sanitary	/ Lanc	lfill			
City, State						- 1	Disp	posal Date	City, State	Market State			72557		
Newark, NJ		-					Т	BD	Pen Argyl	, PA					
Completed By (Print or Ty	/pe)	Title						Signature		,	Date				
Allen Monchik	366-06-7	P	roject	Man	ager			Allen	Monchik	é.	8/21	1/1	9		

		N	OTIFICA	State of New	Jersey		[EC	E		W	E	
Date of No. 12			(Purs	uant to NJAC 8:	60 and 12:	IEMENT 120)	$ U _{\Gamma}$			<u>U</u>	U	5	
Date of Notification (1) August 22, 2019		3 	Na No	me of Building Ov IDOT	vner/Operat	tor (2)		AUG	2 3	3 21	110		
Agencies Notified Type Notif	cation			eet Address			find Essal			J C	010		
EPA Initial			10	35 Parkway A		ASBEST	78.0	ON13	וממי	_			
X DOL Amen	dment# 2		City	, State, Zip Code	25				JENS			Č	
DOH Emergijustific	ency (inclu	iding		enton, NJ 086	25							MAGE	
DCA Cance	llation		Ka	rl Bevans				Telephone	Numb	per			
Name of Facility Where Abatement is	Tokin- Di		F	ACILITY INFOR	MATION			609-530	-3513	3			
Nobol - Route / Wittpenn Br	idge - Co	ce (3) Intract	4			Type of Fac	ility (4)					_	
Street Address	•					School	(K-12)						
Route 7						Subcha	apter 8 (C	other than lite & comm	K-12)				
City (5) Kearny						etc.) Square Feet			erciai i				
County (6)						N/A	#	of Floors		Bld	g. Ag	9	
Hudson			Coun	ty Code (7) TE USE ONLY)		Current Use	(Prior if b	eina demo	liched				
Name of Monitoring Firm Hired by Buil	ding Owner	(8)				Utilities			moneu	,			
IN/A	ang Owner	(0)	AS	CM No.	Name	of Abatement	Contract	or (9)			-	_	
Street Address				Street	ge Harms (Constru	ction Co	., Inc.					
City State 7:- 0					Address ellowbrook i	Road							
City, State, Zip Code				tate, Zip Code									
Project Manager for Monitoring Firm	T = -		Howe	ell, NJ 0773	1								
	Telepi	none No.	Teleph	one No.		License	No.						
Start Date (10)						751-2089		01055					
	pril 8, 2019 October 3					of OSHA Monit	or						
Occupancy Status During Abatement (C	heck Only	One)	8		Street A	Address							
Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe: Utility Justicialist		f Abate	ment										
dinty installation	ornai Faci	пу нош	rs		City, Sta	ate, Zip Code							
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or >260 lf		Renova	ation										
≥160 sf or ≥260 lf	×	Demoli				Full Contains Mini-Enclosu	ment with	Negative	Pressu	ure			
					×	Glovebag Pr							
200	1	s Locat				Non-Exempted (*)) and Non-Friat		ble Procedure Abatem			
Location of Asbestos-Containing Material (ACM)	Us	Normal ed Sole		D	escription of	f					уре Уре	U	
TO BE ABATED	TO BE ABATED Maintena				ntaining Mat al systems in	terial (ACM)		nount			m		
In Facility Custodia (13) (12			otan:	surf	acing, VAT.	or		pecify or LF)	Removal	Re	Encapsulate	1	
	Yes	No	N/A	other	miscellaneo	ous)		58	oval	Repair	sula	THEOLOGIA	
Gas Mains	_	-	X	Mari							ite	a	
	_		\ \ \	iviastic	on Gas N	Лаin	50	0 LF	X				
me of Registered Waste Hauler		l N	DED									_	
orge Harms Construction Co., I	nc.		IDEP Wa		Yards ste			ed Landfill				_	
/, State			885	TBD		Waste I	Manage	ement					
well, NJ					al Date	City, State						_	
mpleted by	Title			TBD	,	Tullytow	n, PA			,			
m Hahn	110	ct Eng	ineer	S	ignature Xeww	1 11/2	/	Date	11	1 >-	1	_	

Print Form