CK 16941

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

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Agencies Notified Type Notification X EPA X Initial			Street A	ddress Blackwo	od Cl	emento	n R	d.		ASBES L	TOS ICEN	SIN	VIR IG	DL 8:	
DEP Amended Amendment	#			ate, Zip Co enton No		21					322-11/20				
DOH Emergency (i justification) DCA Cancellation	ncluding		Name o	f Contact						ephone I 19-381-					
			FACI	LITY INFO	ORMA	TION									
Name of Facility Where Abatement is Taking Entenmanns Bakery Inc.	Place (3	3)					Ty	pe of Facility (School (K-1							
Street Address 1468 Blackwood Clementon Rd.							X	Subchapter Other (i.e. p etc.)				build	lings,	home	es,
City (5) Clementon NJ 08021	7.0							uare Feet 000+	# o	f Floors			ldg. <i>A</i> 5+	ge	
County (6) Camden				Code (7) USE ONLY)		Cu	rrent Use (Pri	or if bei	ng demo	lished	i)			
Name of Monitoring Firm Hired by Building C	wner (8)		ASCN	/ No.				batement Cor	ntractor	(9)					
Street Address				***************************************		Street		ress 329							
City, State, Zip Code					-	City, S	State	Zip Code						-	
								erlin NJ 080	091						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 856-		No. 3-9800		License 00727					
Start Date (10) 8/30/18	Schedule 9/7/18	ed Com	pletion	Date (11)		Name Sam		SHA Monitor	k Parkin						
Occupancy Status During Abatement (Check	Only Or	ie)				Street	Add	ress				-			
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of A al Facility	Abatem Hours	ent		<u> </u>	City, S	state,	Zip Code							
Scope of Work (Check All That Apply)				180		L	-								
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solel intenar odial S (12)	ice/		tos Cor therma surfa		Mater s ins T, or		(S	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
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City, State Elm NJ					Dispo	sal Date	2 - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -	City, State Morrisv		4 1906	7				
Completed by Anthony T Perna	Title Pres	ident				Signature	R		N. S. or annual surprise		Date 8/20)/18	3		

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

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Date of Notification (1) 8/20/18					f Building Linda P			r (2)			TO BE STATE OF THE STATE OF THE STATE OF		L.J.	The same	The same	To the second
Agencies Notified	Type Notification			Street A	ddress				1441	AU	624	20	18	1	111	
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DCA	justification) Cancellation			Vanes						16	сппоне	extran	TIES!	THE RESERVE AND ADDRESS.		
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Name of Facility Where Keith Linda Private		g Place (3	3)					Тур	e of Facility	(4)						0.5
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County (6) Ocean	V				Code (7) USE ONLY	, <u> </u>			rent Use (Pri	or if bei	ng demo	olishe	d)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	/ No.		1		atement Cor	ntractor	(9)					
N/A Street Address							12/1/2	naco				- 0.00				
Street Address							Street	t Addr Box								
City, State, Zip Code						-			Zip Code							
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Project Manager for Mon	itoring Firm		T	Telepho	ne No.		Telep	hone I	No.		Licens	e No.				2001
							856	-753	-9800		0072	7				
Start Date (10) 8/30/18		Schedule 9/7/18	ed Con	npletion	Date (11)		Name		SHA Monitor							
Occupancy Status During	g Abatement (Chec	k Only On	ie)			~	Street	Addr	ess							
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Other - Describe:							O.k.y.	Julio,	2.p 0000							
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Completed by	·	Title							Morrisy	rille PA	1906		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT E G E V E M

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Agencies Notified	Type Notification		-	Street A			1		AUC	24	2018		1			
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DOH DCA	Emergency justification)			Name of	f Contact						ephone N	lumbe		į		
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Name of Facility Where Gary Jandersit Pri		ig Place (5)					Typ	e of Facility (4	1)						
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Street Address								岗	Other (i.e. p				uild	ings,	home	es,
C:+. /5\				VA					etc.)							
City (5) Manahawkin NJ 08	2050								are Feet		f Floors			dg. A	ge	
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Ocean				County (USE ONLY))			rent Use (Prio	r if bei	ng demoi	isned)				
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City, State, Zip Code							Jii.	70.700	Zip Code							
									erlin NJ 080	91						
Project Manager for Mor	nitoring Firm		1	Telepho	ne No.		Telepi	none	No.		License	No.	-			
									-9800		00727	,				
Start Date (10)		Schedul	ed Con	npletion l	Date (11)		Name	of O	SHA Monitor							
8/30/18		9/7/18					Sam	ne								
Occupancy Status Durin	g Abatement (Ched	k Only Or	ne)				Street	Addr	ess					17-12-2		
▼ Facility Closed/Vac	ated During Entire	Period of	Abaten	nent												
Abatement Perform	ned Outside of Norr	nal Facility	/ Hours	\$			City, S	State,	Zip Code							
Other – Describe:						_										
Scope of Work (Check A	III That Apply)						_									
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Anthony T Perna		Pres	ident					R		-		8/20	18	ĕ		

NOTIFICATION OF ASBESTOS ABATEMENT Check#3144 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 08 21 / 18 Eli Bosnick Agencies Notified Type Notification Street Address ПЕРА ✓ Initial **⊠** DOLWD ☐ Amended ASSESTOS CONTROL & City, State, Zip Code X DHSS Amendment # LICENSING Belleville, NJ 07109 DCA Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number Cancellation Eli Bosnick **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house School (K-12) Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Belleville, NJ 07109 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Essex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 09 / 01 / 18 09 / 03 / 18 Envirovision Consultants.Inc Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _____AM-___PM/ PM_ Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 If ≥ 160 sf or ≥260 If Renovation Mini-Enclosure Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Demolition Is Location Abatement Type Normally Location of Description of Repair Used Solely by Removal Encapsulate Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A Basement Pipe insulation 100 LF П П Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City. State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date Teutic Wenad N.Jevtic 08/21/18 Owner ASB-41

State of New Jersey

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

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Date of Notification (1)						_		ner/Operator (2		120	1.1				oles Lucia
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Agencies Notified	Type Notifica	tion			Street	Address	~~~		1 1	AU5 2	4 20	18	Total Company	13	A STATE A
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☐ DCA	☐ Emergend		uding			yton, NJ of Contact		12		Telephone N	MG			O Table	1
(NJAC 5:23-8)	justificatio				3 (1 10 10 10 10 10 10 10 10 10 10 10 10 10	or Contact s Youne	•			relephone N	umber				
					FAG	CILITY IN	FOR	MATION							
Name of Facility Where	Abatement is T	aking P	Place	(3)					Type of Facility	(4)			-		
Residence									☐ School (K-12						
Street Address									☐ Subchapter ☐ Other (i.e., phomes, etc.)	rivate and com		l bu	ilding	s,	
City (5)							-		Square Feet	# of Floors	_	Blo	lg. A	ge .	
Clayton									1.900	3			30	J:	
County (6)			-		Cour	itv Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being dem	nolishe	d)			
Gloucester							Manager		Residence						
Name of Monitoring Firm	Hired by Build	ling Ow	mer (8)	ASCM	No.	Nan	ne of Abateme	nt Contractor (9))					
Management & En	viro. Consult	ing Se	ervio	es			S	hade Enviro	nmental, LLC						
Street Address							Stre	et Address							
PO Box 341								23 Cutler Av							
City, State, Zip Code								, State, Zip Co							
Chesterfield, NJ 08								laple Shade,	NJ 08052						
Project Manager for Mor	nitoring Firm			100000	phone			ephone No.		License No					
Bill Weisgarber			- 10	2000	9-298			56-755-0099	- 4	00842					
Start Date (10) 08 / 30 /		chedul		33				ne of OSHA M							
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Occupancy Status Durin							7.5	et Address	2 N41-						
□ Facility Closed/Vacate □ Abatement Performed						cribe	0.300	00 Route 13							
Time of Abatement:			The state of the s					, State, Zip Co innaminson							
Scope of Work (Check a	Il that annly)							111111111111111111111111111111111111111	, 143 00077						
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TO BE ABA	ATED	<i>'</i>		intena	nce/ Staff?		., the	rmal systems i	nsulation,	(Specify		Removal	Repair	Encapsulate	Enclosure
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		[-								
Name of Registered Was	ste Hauler			1,500	JDEP 1		F11-111/e(2)	ic Yards of	Name of Regi	stered Landfill					
Freehold Cartage				Н	15939		Was	ste	Fairless L	andfill					
City, State								oosal Date	City, State						
Freehold, NJ							09	9/04/2018	Morrisville	e, PA					
Completed By (Print or T	ype)	Title						Signature			Date)	
Christina Lynch		Vic	e Pr	eside	ent of	Operation	ns	Chible			8/	20	109	1	

ASB-41 JAN 13

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

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Chilasii					Jersey	IN E	GEH	Check	#163	47	
	/头 排制法				ESTOS ABATEMENT 0-7 and 12:120-7	11/1/1	Annual Company of the Park		-	STATE OF THE STATE	
Date of Notification	(1)				g Owner/Operator	(2)					
8/21/2018			Kare	n Big	os	[1] [1] A	UG 2.4 20	18	3		89
Agencies Notified	Type Notificat	ion	Street A	ddress		T State of the sta		1	- 1		
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[]DEP	Notificat	ion	City, St	ate, Zi	p Code	Local and the same transfer of the same and the same transfer of the sam	LICENSING		1		
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[X]DOH	Notificat		Name of (Contact		Telenho	ne Number				
[]DCA	[]EMERGENCY		Karer			reacpino	THE THUMBEL				
	[]Cancellati	on				4					
-					INFORMATION						
Name of Facility When	re Abatement i	s Takin	g Place	(3)		Type of Facil	Lity (4)	7770			
Karen Bigos						[]School					
Street Addres			,				oter 8 (Othe (i.e., priva			(S)	
							ouildings, h				
City (5						Square Feet	# of Floo	ors Bl	.dg.	Age	
CITY (5	Cc	unty (5) Essex	1.00	ounty Code (7) STATE USE ONLY)						
Millburn	H.	ssex		,		Current Use	Prior if be	ing de	molis	hed)
Name of Monitoring Fi			ASCM N	0	Name of Abate	ment Contracto	r (9)				
Owner (8)			10011	•		ANAGEMENT					
N/A Street Address					Street Address		,				
Joseph Tidales						topher St					
City, State, Zip Code	<u>, </u>				City, State,						
and the state of t						r, NJ 070	42				
Project Manager for M	fonitoring Firm	Tele	phone N	mber	Telephone Numl			icense	Numb	or	
		N/2			(973) 744		Ī	0037		GI	
Scheduled Start Date			tion Dat		Name of OSHA 1	Monitor					
	8 9		Th (1)-70	.8	N/A						
Month Day Yes Occupancy Status Duri [X]Facility Close of Abatement	ng Abatement (Check c	nly one)		Street Address	3					
[]Abatement Peri	formed Outside ibe:«OffHours I			lity	City, State, 2	Zip Code					
[]other - Descri	ibe: «Other Occi	ipancy 1	Descript	<u>»</u>							
Scope of Work (Check	all that apply)			ר ו ביים ו	Containment wi	th Nogative	Dwage			
[X]>3 sf or > []>160 sf or		27000	Renovat: Demolit:		[X]Mini-] [X]Glovel	Containment wi Enclosure bag Procedure riable Procedu		Pressi	ire		
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TO BE ABAT	-		Main- nance/		(i.e., thermal	10.75	SF or	0	PA	PS	0 8
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		Yes	No N/	A	NAME OF STREET	•) i	L		L ·	R E
Basement			X	Pip	e Insulation	on	80 LF	X			
Name of David Land											
Name of Registered War AZTECH MANAGE		Hau	EP Waste ler ID N 040		ubic Yards E Waste 1.0	Name of Regi		Fill			
City, State				D	sposal Date	City, State					
Montclair, NJ	07042				9/4/18	Bronx,	NY, 1047	4			
Completed De (Dei-t	m Mamo c \ lm - 1 -				I=	1 . ,	}				
Completed By (Print of Constantine Vi-		siden	+		Signature	- 1 1/	24 -	Date 8/21/	2010		
AT	·	Taen			E as	whive // 1	no	3/21/	7010	- Company	

CK25671

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Date of Notification (1)	/2018			Name of	f Building	Owner/C		r (2) sserot		1			A 20 -	^	
Agencies Notified	Type Notification		-	Street A	ddress	-	vvas	36100			AUG	24	20	8	111
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DEP X DOL	Amended Amendment			City, Sta	ite, Zip Co		mson,	NJ 0	7760		ASSEST: LK	JS UC JEHSI		KDL d	
⊠ DOH	Emergency (i	including		Name of	f Contact	10.000			33 ********	Tel	ephone Nu	mber			
DCA	Cancellation				Charle			V		1					
Name of Facility Where	Ahatement is Taking	Place (3)	FACI	LITY INFO	ORMATI	ON	Type	of Facility ((A)					
	dential) 1 1doc (c	,						School (K-1						
Street Address								×	Subchapter Other (i.e. petc.)	8 (Oth			dings,	home	es,
City (5)	n, NJ 07760							Squa	re Feet 2500	# 0	f Floors 2		ldg. A	_	
County (6) Monmou	ıth			County (Code (7) USE ONLY)		Curre	ent Use (Pri	or if bei	ng demolis	hed)			
Name of Monitoring Firm	n Hired by Building C	Owner (8)		ASCM	No.				tement Cor			Inc			
Street Address PO Box	341						Street	Addres	ss						
City, State, Zip Code	d, NJ 08515					- 11 TO 5-00	City, S	State, Z	ip Code , NJ 0850	11					
Project Manager for Mor	37	337-2-4777-0		Telephor		0	Telepi	hone N	0.	, 1	License N	lo.			
Bill Weisgarber Start Date (10)		Schedul	ed Cor		298-407 Date (11)	0		259-9	HA Monitor		00493				
8/17/2018			8/20	/2018	Date (11)		MEC	S							
Occupancy Status Durin			Santania Santania					Addres							
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire P ned Outside of Norm	eriod of a	Abaten y Hours	nent s			City, S	State, Z	ip Code eld, NJ 08	515					
Scope of Work (Check A	All That Apply)						Onc	3101110	,ia, 140 oc	010					
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		-	Renova Demolit				2	Mir Glo	Il Containmoni-Enclosure ovebag Produces n-Exempted	e cedure				e	
		Is	Locat	ion						()		1	Abate	ement	
Location			Normal ed Sole		27/20		scription						Ту	ре	
Asbestos-Containing TO BE AB In Faci (13)	ATED lity	Ma	intena todial ((12)	nce/				s insula AT, or		(5	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								-		ite	е
Crawl s	oace	X				Pipe	Insula	ation			65 If	Х			
		-													
N															
Name of Registered Wa Stevens Environmen				JDEP W lauler ID 18292	No.	of Was	Yards ste 2 cu		Fairless		ered Landfil Ifill				
City, State Allentown, NJ 0850	1						sal Date 20/18	1	City, Stat Morrisv		A				
Completed by Mahlon E. Stevens		Title	Projec	ct Mana	ager	S	Signature		41/		Da	ate 8/16	/18		

08/18/2018 1:1SPM FAX

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				D NJAC 6:89			ļ.			DOL	- 1	a D	ΛV	
Date of Notification (1) 8/16/2018			Name of	Building Owne		(2) sero	.	+				The same	1	7
Agencies Notified Type Notification		-+	Street A	ddrasa	4 # 03-2	Zei Ç	-	-		- On book processing and			150	4
D EPA D Initial								į	ASBE:	STOS Q	CHT.	QL8	3/	200000
DEP Amended		T	City, Sta	te, Zip Code				7		111 -115	-	1	en e	
X DOL Amendment X Emergency		— <u>L</u>			Rumson,	MJ	077E	1	141	ANTE	MAD	20	711	
DOH justification)			Name of					1	Tab	nhane M.	in har	7 14	A 5'	
DCA Cancellation	1		2400	Charles W		v			13.					
Name of Facility Where Abatement is Takir	p Pisce (3	1	FACE	LITY INFORM	ATION	Tyni	e of Fa	idify:	(4)					_
Residential							Scha	11 TO 12 TO	********					
Street Address		_					Subc	aptin	B (Othe	than K-	12)			
						K	Other	(1.6.1	privete &	commer	clal bul	dings	וחסת.	39.
City (5)						Squ	are Fe	it.	# of	Floors		Bidg. A		_
Rumson, NJ 07780 Caunty (6)							2500			2		804	-	
Monmouth			County C	lae only		Curi	ert Li	h (Fri	or II beir	illameb gr	(baria			
Name of Monitoring Firm Hired by Building	Owner (8)		TASON	No.	Name	of Ah	atome	IT CO	ntractor	(9)				-
MECS	1-1			ent di Tallin						ervices.	inc.			
Street Address PO Box 341					PO		70.70700							
City, State. Zip Code			-				Zip Ci	fe						
Chasterfield, NJ 08515							, NJ		01					
Project Manager for Monitoring Firm Bill Welsgarber		T	Telephor (609) 2	ne No. 195-4070	Telep		Vo. 9688			License 00493	No.			_
Start Date (10) 8/17/2018	Schedule				Name MEC		HAN	initor						-
Occupancy Status During Apatement (Che	ck Only On				Streat		RNA					g>	-	_
			nent		PO									
Facility Closed/Vacated During Entire Abatement Performed Outside of Nort Other – Desembe:	nal Facility	Hours	3				Zip Či ald,		3515					
Scope of Work (Check All That Apply)													-	
≥3 of or ≥3 if ≥180 of or ≥260 if		enova emoli			-	MG	ini-Er	tosur	e cedure	Negative 1 Non-Fria				
	la	Locat	inn			14	-11 bar	4117.00	7 10110	21001-1110	1	0.00	emen	t
Location of	l N	dorma	lly		Description	ı of					-	T	rpe	_
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai Cust	(12)	nce/ Staff?	91	ontaining P nal system Macing, VA er Miscella	T, or	neilal	M)	(8	nount pacify or LF)	Remad	Repair	Escapculate	Endidading
	Yes	No	N/A									_	100	
Crawl space	×		-	P	pe Insula	ation				35 If	X	-	-	-
		a				-					+	+	-	-
												1		1
Name of Registered Waste Haufer	A.		JUDEP W		bic Yarda	-	1			red Landf	nii -			-
Stevens Environmental Services		1,	18292		2 cu		F	Irles	elend	TH				
Oity, State Allentown, NJ 08501				Die	8/20/18	7//		y, sta	te ville, P	Δ.				
Completed by	Tillo				Signatur	1	-4	+-	/		3sta	-		
Mahion F Stavens	1	min	of Mann	MOF	1	7 //	- 1	1 7			m/4	AHA		

Do not use this orn for aspector ilconsure exempted activities.



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

Date of Notification (1) 08/13/2018				of Building Onsack Board			To the children property and the children are	Check No. 1171				
Agencies Notified Type Notification		1		Address cond Street		加星	GE	The second secon				
☒ EPA ☐ Initial ☒ DEP ☒ Amended ☒ DOL Amendment	#_1_			ate, Zip Cod sack, New J		07601	AUG 2 A	2018				
☐ Emergency justification				of Contact				Telephone Numb	oer			-
☑ DCA ☐ Cancellation			Robert	Blanchard		ASI	SESTOS CO	201-646-0363				
No. of Figure 11	. 51 (6)		FAC	ILITY INFO	RMATI	ON	LICENSIN	g				
Name of Facility Where Abatement is Tak Hackensack Middle School	ing Place (3)					Type of Fac	cility (4)					
Street Address				772		⊠ School						
360 Union Street						☐ Other (mmercial building	s, hom	nes, e	etc.)	
City (5) Hackensack, New Jersey 07601						Square Fee 15,000	et	# of Floors 2	50-	g. Ag	je	
County (6) Bergen				Code (7) E USE ONL)	n	Current Use	e (Prior if being Middle S					
Name of Monitoring Firm Hired by Buildin The Whitman Companies	g Owner (8)		ASCI	M No.		Name of Ab Lilich Corpo	atement Contra ration	ctor (9)				
Street Address 7 Pleasant Hill Drive			1			Street Addre	507(07)					
City, State, Zip Code Cranbury, New Jersey 08572						City, State, 2 Woodland P	Zip Code ark, New Jerse	у				
Project Manager for Monitoring Firm Kevin Lovely			Telepho 732-390			Telephone N 973-225-840		License No. 01104	o o			
Start Date (10) 07/23/2018	Scheduled 08/20/2018		pletion	Date (11)		Name of OS Iris Environn	HA Monitor nental Laborato	ries, LLC				
Occupancy Status During Abatement (Ch	eck Only One)				Street Addre						
☐ Facility Closed/Vacated During Entire	Period of Aba	ateme	ent			2333 Route	22 West					
☐ Abatement Performed Outside of Nor ☐ Other – Describe: Occupied	mal Facility Ho	ours				City, State, 2 Union, NJ 0						
Scope of Work (Check All That Apply)						Official, 140 O	7000					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		novati molitic				□ M	ini-Enclosure	with Negative Pre				
								ure / Limited Con and Non-Friable			I ent	
	ls L	ocatio	on					Amount		bater		
Location of	No	rmall	у		D	escription of		(Specify SF of LF)		Тур	e	
Asbestos-Containing Material (ACM) TO BE ABATED	Used Main	tenan				ntaining Materal systems ins					m	ш
In Facility	Custo	dial Si (12)	taff?	(1.0.	surf	acing, VAT, o	r		Removal	Repair	Encapsulate	Enclosure
(13)		(12)			other	miscellaneou	s)		oval	ar.	sular	sure
	Yes	No	N/A								O	
Boiler Room (Special Services)	X			Boiler Insula	tion, Ga	skets, Fire Bric	ks & Mortar	800 SF	Χ			
Boiler Room	X			Breech Insul	ation			100 SF	Χ			
Boiler Room	Х			Pipe Insulati	on Inc F	iberglass & Elb	ow & Joints	200 LF	Χ			
Large Boiler Room	×			Boiler 1, 2, E	nd Cap	Insulation		800 SF	Χ			
Large Boiler Room	X			Breech Insul	ation			1000 SF	Χ			
Large Boiler Room	Х			Tank Insulati	ion			1000 SF	Χ			
Large Boiler Room	X			Pipe Insulation	on Inclu	ding Elbows &	Joints	500 LF	Χ			
Name of Registered Waste Hauler		10 13253	JDEP V	C. 10.2 C. 10. C	Cubic of Was		Name of Reg	gistered Landfill				
Lilich Corporation		10.000	8724		30		Fairless Lan	dfill				
City, State Woodland Park, New Jersey					Dispos 08/20/2	al Date \	City, State Morrisville P	Α				
Completed by Adriana Olejarova	Title Presid	dent				iginature /	L UZ	Date	13/201	8		
ASB-41 (R-06-08)					-	* Do not use	this form for as	bestos licensure		C-200	ctiviti	ies.

nock

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

Date of Notification (1) 08/20/2018)			Name Hacker	of Building Owner	Operator (2) C E	Check No. 117	1			
Agencies Notified	Type Notification			Street	Address econd Street	Annual Annual Processor Control of the Control of t					
⊠ DEP ⊠ DOL	☐ Initial ☑ Amended Amendment# ☐ Emergency (in				tate, Zip Code nsack, New Jerse	y 97601 AUC 2 4	2018				
☑ DOH ☑ DCA	justification) Cancellation	cluding		Robert	of Contact Blanchard	The second of th	Telephone Nun 3201-646-0363	ber			
Name of Facility When	e Ahatement is Takin	n Place (3)	FAC	CILITY INFORMAT	TION Type of Facility (4)					
Hackensack Middle So	chool	g i lace (5)								
Street Address 360 Union Street			1.2			School (K-12) Subchapter 8 (Other Other (i.e. private & €)		igs, hom	ies, e	etc.)	
City (5) Hackensack, New Jers	sey 07601					Square Feet 15,000	# of Floors 2	Bld 50-	lg. Ag	je	
County (6) Bergen				County (STATE	Code (7) E USE ONLY) _	Current Use (Prior if beir Middle	g demolished) School	8			
Name of Monitoring Fi The Whitman Compan	rm Hired by Building (lies	Owner (8)	1	ASC	M No.	Name of Abatement Cont Lilich Corporation	ractor (9)				
Street Address 7 Pleasant Hill Drive						Street Address 606 McBride Ave					
City, State, Zip Code Cranbury, New Jersey						City, State, Zip Code Woodland Park, New Jers	sey				
Project Manager for M Kevin Lovely	onitoring Firm			Telepho 732-390	0-5858	Telephone No. 973-225-8400	License No 01104	O.			
Start Date (10) 07/20/2018		08/29/20	18	mpletion	Date (11)	Name of OSHA Monitor Iris Environmental Labora	tories, LLC				
Occupancy Status Dur	cated During Entire P	eriod of A	batem	ient		Street Address 2333 Route 22 West					
☐ Abatement Perforr ☑ Other – Describe: Scope of Work (Check	med Outside of Norma Occupied All That Apply)	II Facility	Hours		_	City, State, Zip Code Union, NJ 07083					
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			Renova Demolit			☐ Mini-Enclosure☐ Glove Bag Proce	at with Negative Projective / Limited Co. *) and Non-Friable	ntainme	ent &	Tent	
Locati	on of		Locat			Description of	Amount (Specify	1 2/2	baten Typ		
Asbestos-Containin <u>TO BE A</u> In Fa (13	ng Material (ACM) BATED cility	Use Ma	ed Sole intena todial ((12)	ely by nce/	Asbestos Co (i.e. therm	ontaining Material (ACM) nal systems insulation, rfacing, VAT, or er miscellaneous)	SF of LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A						te	()
Boiler Room (Special Servi	ces)	X			Boiler Insulation, G	Gaskets, Fire Bricks & Mortar	800 SF	Х			
Boiler Room		Х			Breech Insulation		100 SF	Х			
Boiler Room		Х			Pipe Insulation Inc	Fiberglass & Elbow & Joints	200 LF	Х			
Large Boiler Room		Х			Boiler 1, 2, End Ca	p Insulation	800 SF	Х			
Large Boiler Room		х			Breech Insulation		1000 SF	Х			
Large Boiler Room		Х			Tank Insulation		1000 SF	Х			
Large Boiler Room		Х			Pipe Insulation Inc	luding Elbows & Joints	500 LF	Х			
Name of Registered W Lilich Corporation	aste Hauler		Н	IJDEP W lauler ID 18724		aste / \	egistered Landfill				
City, State				10124		sal Date City, State					
Woodland Park, New J Completed by	ersey	Title			08/29	(2018) Mórrisville)	PA				
Adriana Olejarova		Title Pres	sident		T T T T T T T T T T T T T T T T T T T	Signature	Date 08	e /20/201	8		

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



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)



Date of			nn.	Name of B	uilding Own	ner /	Operator (2) (3 6 11 1	y E I	11	
Agencie	County (6) Trenton Of Monitoring Firm Hired by Building Owner (8) Address Oad Street State & Zip Code wan, NJ 07747 It Manager for Monitoring Firm Clauded Start Date (10) 9/1/18 Paolino Street Active Scheduled Completion Date (10) 9/1/18 Paolino FACII City, Statt Trenton Name of Paolino FACII County (6) Mercer County (6) Mercer Telephone Numan Numa				The second secon	_	11-41	de el Carle de Carres de la del Marie	5 [8	1 1 1	
Agencie		Emei	gency Notifica		1688				The section of	To produce the second s	
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X		Contraction of the contraction o				•				4.0	
x				1			Forest March 1997	overne (seeding experiment)	omenios periodo	Tolophon	e Number
^		Canc	challon	Paolino A				TOS CONT LICENSING	ROL &	Leiebuor	e Number
					TY INFOR	RMA					
Name o	of Facility Wh	ere Abateme	ent is Taking Pl	ace (3)	T	Гуре	e of Facility (4)	~~~~			
		Vacar	nt Residence				School (K-12)				
Street A	Address						Subchapter 8 (0	Other than h	(-12)		
						X	Other (i.e., priva	ate & comm	ercial build	dings, home	es, etc.
					S	Squa	are Feet	# of Floors		Bldg. Age	2
City (5)			County (6)	County Code	(7)		2,500	2			80
	Trento	n	Mercer			Curr	ent Use (Prior if	being dem	olished)	-	
							idential	3	35		
Name o	of Monitoring	Firm Hired b	y Building Owr	ner (8) AS	CM No. N	Vam	e of Abatement	Contractor	(9)	318	
Enviro	nmental Ta	actics, Inc	T) (3)				bal Abatemer				
Street A	Address				S	Stre	et Address				
					4	143	Schoolhouse	Road			
							State & Zip Co				
						Vlor	roe Townshi	p, NJ 0883			
		Monitoring F	irm	Telephone Num 732-290-2217			phone Number -605-9062		License	Number 0071	4
		e (10)	Scheduled Cor			-	e of OSHA Mor	nitor			
	9/1/18			9/5/18			bal Abatemen		, LLC		
					1.0	10000	et Address Schoolhouse	Road			
	Abatement F	Performed Ou	utside of Norma	al Facility Hours	The same of the sa		State & Zip Cod				
	Describe:	Area Isolat					roe Townshi		31		
			nlu)								
		ck all triat ap		ion			Full Cont	ainmant wit	h Nagativa	Dransura	
	Large Project	+	A Reliovat	1011			Mini-Enc	ainment wit	n wegative	Pressure	
		3 SF or ≥ 3	LEACM					g Procedure			
			260 LF ACM					Non-friabl			
		cation of	200 LI AOM	le Location	1	D.				Abatar	mont Typo
		os-Containin	n .	Is Location Normally Used	As		escription of stos-Containing		Amount Specify		ment Type v: Removal,
		erial (ACM)	9	Solely by	/ 10		aterial (ACM)		uare Feet		ncapsulation
		E ABATED		Maintenance or	(i.e		hermal systems		or		nclosure)
		Facility		Custodial Staff?			on, surfacing, VA		ear Feet)		
		(13)		(12)	or c	othe	r miscellaneous	s)			
		Basemen	t	N/A	-		TSI Pipe		80 LF	Po	moval
			-	IVA			. or i ipc		OU LI	IVE	novai
		Waste Haule	er	NJDEP Waste F			Cu. Yds. of Wa			istered Lan	dfill
	ehold Cart	ing		186	93		8		RF		
City, Sta							Disposal Date		, State	_	
	nton, NJ	- ·	1				9/5/18	Tu	lytown, l	Pa	
	ted By (Print ninick Trin		Pres.				Signature Dominick T	ringali			Date 8/20/18
						_					

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			NOTIFI	State of New CATION OF ASBE	Jersey	Title coales	-	ويواج والمعاومة الماركة والمعاومة والمعاومة	or working makes	Minister en	with anti-company	ero to a company contra mon
0. 01: 10			(I	ursuant to NJAC 8	:60 and 12:1	120)	The state of the s	ÌE	CI] W	
Date of Notification (1)			1	Name of Building Ov	mer/Operato	or (2)	514		orthida e ofranci	the Name of Street, or other teams	promite de la companione de la companion	-
Agencies Notified 5 Type Notif	ication		IS	treet Address	h.				UG.	24	2018	3
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17 201	ded dmenr#		C	ity, State, Zip Code	4.70	1	- 1	ASBE	STO	s co	NTRI	DL &
☐ Emerg	ency (includ	ing	- N	Sewell ame of Contact	NJ	08080	n L	eroter and the second	derive temployee	ENSI	VG	AMERICAN ACTIONS
☐ DOH justific ☐ Cancel			1	les 5				Telephon			c a	Ann
Name of Facility Where Abatement is Ta	leine Blass (2			FACILITY INFOR	MATION			60	9 -	307	4	711
18 Wats	1000 20 100		oral.	el C		Type of Faci	lity (4)					
Street Address	wherse	-	1 :060		-	School Subcha	pter 8 (O	ther than K	-12)			
City (a)		Į.	he			Square Feet		e & comm			gs, non	
County (6) ULISh / Afron T	eur Ship	7	i Con	mty Code (7)		Community						
Name of Monitoring Firm Hired by Buildir	0 (0)		(STA	TE USE ONLY		Current Use (I	Prior if b	eing demol	ished)			
	ig Owner(8)		A	SCM No.	Name A	of Abatement Co	ni i		1	7	Ĺ	110
Street Address					Street A	Address		ilent T	<u>اوڭ را</u> \	17:11	1127:	/ [[
City, State, Zip Code						2 Di 21 tate, Zip Code	120	icin t	J.			
Project Manager for Monitoring Firm			[T.1.	,	1:1	s Lilico		150	130	:)(
			lelep	hone No.	Telepho	ine No. 7-344C	911-	License	No.	77:		
Start Date (10), 6/3c/18	Schedul	ed Co	mpletion	Date (11)	Name of	FOSHA Monitor	- 12 ;2	1				
Occupancy Status During Abatement (Check		-30	1		Street Ad	idress						
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norma Other – Describe:	Period of Aba al Facility Ho	itemen Durs	it		City Star	te, Zip Code						
Scope of Work (Check All That Apply)] 5.19, 5121	ec sip code						i
□ ≥3 sfor≥3 lf	П - В	lenova	tion									
2 ≥160 sf or ≥260 lf		emoli		10.1	<u> </u>	Full Containme Mini-Enclosure	2	Negative Pr	essure			-
	-1			,		Glovebag Proce Non-Exempted	edure (*) and i	Non-Friable	e Proce	dure		
Location of	2	Locati	100 100		-				1	Abat	tement	
Asbestos-Containing Material (ACM) TO BE ABATED	Use	i Solei ntenar	yby	Asbestos Conta	scription of aining Materi	iai (ACM)	An	זהנוסת	-	1	ype	\dashv
In Facility (13)	Custo	dial S	tafī?	(i.e. thermal syste	JAT, or	-		ecify or LF)	Ren	Re	Binca	Enc
(12)	Yes	No	N/A/	other n	iscellaneous	ī)			Removul	Repair	Encupsulate	Enclosure
ingle	+++	1.0	/	714/2	1 14		900	c r.				_
ext:01	11			Car Ala	ing ri		100) /		- 1	1	
				LAWIEC.			80	1-1	1/1		+	
ne of Registered Waste Hauler									-	\dashv	+	
Adia la - 1 1 0			DEP Was ller ID N			Name of Reg	istered I	andfill				
TALL SIZE CO		1 2	947			ILM .	<u>>+</u>	KA .				
DELLANCE M.				Disposal 1	Date ED	City, State	LI (CC)	n [7	100		
Jean Thill.	V. Rit	3de	Ent.	Sign	arure	1	7	Date	8/2	2//	118	
1 1 (R-06-08)	800				= Do not	t use this form fo	r asbesto	s licensure	evenn	led se	tivitie	
					E-1000 1000 1000 1000 1000 1000 1000 100			- Heeliguit	Cremb	CU CC	TIAITIES	21

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10.00		NO	TIFICATION	ate of New J FOF ASBES to NJAC 8:6	TOS ABA	TEMENT 20)		EC	E		
Date of Notification (1). Agencies Notified	7 / 0		Name of I	Building Own	er/Operator	()/		AUG	24	201	8
É EPA DEP DOL DOH DOCA	Type Notification Initial Amended Amendment #_ Emergency (inc justification) Cancellation	cluding	City, State	Zip Code	NS BE	080 G	7	ASSESTO LIC	DS COI	NTO	
Name of Facility Where Abo	tement is Taking Plac	te (3)	FACILI	TY INFORM	LATION	. =		69	303	40	72
Street Address, City (5)						☐ Subcha	(K-12)	than K-12) commercial b	ouildings	, home	es, etc.)
County (6)	tic City					Square Feet	# of	Floors	Bldg	z Age	
Atlant	<u> </u>		County Code (STATE USE	(7) ONLY		Current Lise (Prior if being	demolished)			
Name of Monitoring Firm Hir Street Address	ed by Building Owner	(8)	ASCM No	•	Name of	Abatement C	Contractor (9)	1 1	iir j	27: 1	/((
City, State, Zip Code					1217	2 130 /2/1	120 /2:	h Au	2		
Project Manager for Monitorin	g Firm	7	elephone No.		Telephon	121100 ne No. 4354-4	1	License No.			
Start Date (10) 4/30 K Occupancy Stalus During Abate	-	30/	etion Date (11)	Name of	OSHA Monito				-	
Facility Closed/Vacated D Abatement Performed Out Other – Describe:	uring Entire Period of	Ahatement			City, State	c. Zip Code					
Scope of Work (Check All That	Apply)										
☐ ≥3 sfor≥3 lf .☐ ≥!60 sfor≥260 lf		Renovation Demolition		200		Full Containm Mini-Enclosur Glovebag Proc Non-Exempted	e edure				The second secon
Lecation of		Is Location Normally				.voii-Exempled	() and NOR	-rnaole Proce	Abate Typ		
Asbestos-Containing Materii TO BE ABATED In Facility (13)	1	Maintenancel Custodial Staff (12)	(i.e. ti	nestos Contai nermal system V	eription of ning Materi is insulation AT, or scellaneous	r, surfacing	Amou (Speci SF or L	fy =	! !	1	Enclosure
2nd Luci	120m 12	1 /	may me	ortal As	Sociah	eff Course	2 Hlas 80 SI				
			Yell	W blue	er We	5/1 	25 Si	FI		-	\dashv
Name of Registered Waste Hauler		NJDEP Hauler	ID No.	Cubic Yar of Waste	ds	Name of Re	gistered Land	dfiii	***************************************		The second secon
City, State Completed by Completed by	U. I	1 208	10	Disposal D	(D)	City, State,	ot 17 Włowin	Pie			Transmission Process
- Jeph T Hill	. K	RENdent	- .	5.510		4		Date 8/	21,	118	

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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.IAC 8-60 and 12-120)

2 2				to NJAC				CALL THE CALL AND A		Andrew Leader	AUG	0 .	90	10	Office of the second particular and the second second	The state of the s
Date of Notification (1) 06/12/2018				f Building erating		perator	(2)	REST POST OF THE PERSONS	11-1	Christian Inchine	AUG	<u> </u>	<u> </u>	10		
Agencies Notified Type Notification			Street A	ddress	Street			and of the same		ASI	BESTO	S CC		HOL		W. 10760.0
EPA Initial Amended Amendment #		_		ite, Zip Co				L	er (in Prince communication)	an or a second stee	other store in the second			nadic galestichi	no leste ¹ er	and mare \$.
DOH Justification) Cancellation	ncluding		Name of	f Contact lemal						2	elephon					
			FACI	LITY INF	ORMATIO	ON										
Name of Facility Where Abatement is Taking Old Rite Aid Store/ Market Halsey E							Typ	e of Fa	-							
Street Address 165 Halsey Street	****						7	Subc	hapte	8 (O	ther than			dings.	hom	es,
City (5) Newark								etc.) iare Fe 0000	et	100000	of Floor	S		lldg. A	ge	-
County (6) Essex				Code (7) USE ONLY)		Cur	rent Us	se (Pi	ior if b	eing der	molish	ed)			
Name of Monitoring Firm Hired by Building O RK Occupational & Environmental,	wner (8) Inc.)	ASCN 0009			Name Bako	of Al	pateme	nt Co	ntracto	or (9) estorai	tion.	nc.			
Street Address 401 St. James Ave.			1		The state of the s	Street	Addr									
City, State, Zip Code Phillipsburg, NJ 08865					and the second	City, S	tate,		de	**********						
Project Manager for Monitoring Firm Jon Gilbert			Telephoi	ne No. 34-6316		Teleph 973-		No. -7010			Licer 066	nse No).			
Start Date (10) 06/25/2018	Schedul 08/25/	ed Con 2018	npletion !	Date (11)		Name	of O	SHA M	2000		estorat		nc			
Occupancy Status During Abatement (Check						Street							110.			
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Mon-Fri: 3:00pm-11:3	I Facilit	Abatem Hours	ent		t.	City, S	tate,		de)					
Scope of Work (Check All That Apply)						10101	vva,	NJ 07	512							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Portage 1	Renova Demoliti				7 7 7	l N	lini-End Iloveba	dosui g Pro	e cedure	th Nega e nd Non-				٥	
	ls	Locati	on				2							Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normali ed Sole iintenar todial S (12)	ly by nce/		tos Conta	systems ing, VA	lateri s inst T, or	lation,	vI)		Amount (Specify SF or LF		Remova	Repair	e Encapsulate	Enclosure
	Yes	No	N/A										_		ite	0
Old Rite Aid/Market St. Side		Х		Ce	eiling/co	lumn	plas	ter		15	,000 S	F	Х			
Basement B-3 near tank Room	Х		Pipe	insulat	ion an	d el	bows		4	20 LF		Х				
Basement B-3 Near freight Elevator	X		Pipe	Insulat	ion an	id E	lbows		1	40 LF		Х				
Name of Registered Waste Hauler	1	IDED II	in a la	10111	, ,											
Bako Constr. & Rest. Inc/ Newark Ca	irting	H	JDEP W auler ID 0889/4	No.	of Wast			1			tered La esourc		COV	ery F	acili	ty
City, State Totowa, NJ/ Newark, NJ					Disposa TBD	al Date			, Sta llyto	te wn, P	PΑ				***************************************	
Completed by Damir Valjevac	Title Proje	ect Ma	ınager		100	gnature		Ker	/r			Date 06	e /12/2	2018		

DECEIVEPRINFORM

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			ICATION	tate of Ne N OF ASB to NJAC	ESTOS	ABATE			E G AUG	******	1	W OIR		P	nt Fo
Date of Notification (1) 08/20/2018				f Building erating		perator	(2)	1 L	BEST	And Section			and the second		1
Agencies Notified Type Notification EPA Initial			Street A 112 W	ddress /. 34th S	Street	-		- arterior and a second	LIC	ENS	ing Ing	ho	Le		-
DEP Amended Amendmen				ate, Zip Co York, NY											
DOH justification) DCA Cancellation		and to come of the	Name o	f Contact Jemal					Teleph 212-						
Name of Facility When Shakement is Tabi	Di (FACI	LITY INFO	ORMATI	ON									
Name of Facility Where Abatement is Takin Old Rite Aid store/Market Halsey I		3)					Тур	e of Facility (4)							
Street Address 165 Halsey Street			-			-	7	School (K-12 Subchapter 8 Other (i.e. pri	(Other t	han Komme	-12) rcial	build	dings.	home	es,
City (5) Newark			***************************************					etc.) are Feet 0000	# of FI	oors	XII- 1-1-1	522	ldg. A	lge	
County (6) Essex		-		Code (7) USE ONLY)	_		rent Use (Prior ice Building		demol	ishe	d)			
Name of Monitoring Firm Hired by Building RK Occupational & Environmenta)	ASCA 0009			Name Bakı	of Ab	nstruction &	ractor (9) Resto	ratio	n, Ir	nc.			
Street Address 401 St. James Ave.						Street 265		ess oute 46 Suit	e 3D		Ole I de la constante de la co				
City, State, Zip Code Phillipsburg, NJ 08865					The same of the sa			Zip Code NJ 07512		**************************************					
Project Manager for Monitoring Firm Jon Gilbert	and the same		And the same of th	34-6316		Telepi 973-		No. 7010	1000	cense 666	No.				
Start Date (10) 06/25/2018	Schedul 10/31/			Date (11)	7			SHA Monitor Instruction &	Resto	ration	n, in	ic.			
Occupancy Status During Abatement (Che	ck Only O	ne)				Street		ess rute 46 Suite	- 2D						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Mon-Fri: 3pm-11:30	nal Facilit	Abater y Hour	ment s		and of the second	City, S	tate,	Zip Code NJ 07512							The state of the s
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demoli				X X X	M	ull Containmen ini-Enclosure lovebag Proce on-Exempted	dure					e	
Location of	1	Local Norma	lly	Andrew Control of the	Des	cription	of				West Charles of the State of th			ement	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intena todial (12)	nce/ Staff?		thermal	system ing, VA	s insu T. or	and the same of th	Amo (Spe SF or	cify	and annual section of the Parket Parket	Removal	Repair	Encapsulate	Enclosure
Basement B-2	Yes	No	N/A	9	Callir	ng Pla	ctor		17,000	10E	-	X		fe	
Basement B-2	X	-	Pine	Insula			lhowe	1500		-11	X				
	+			1 100	- modia				1300	LI	1	^			
Name of Registered Waste Hauler		1	NJDEP W	/aste	Cubic '	Yards		Name of Re	eaistered	Land	fill				
Bako Constr. & Rest. Inc/Newark C	arting		Hauler ID 10889/4		of Was	te		Tullytown				cove	ery F	acili	ty
City. State Totowa, NJ/ Newark, NJ					TBD	al Date		City. State Tullytown	n, PA						
Completed by Damir Valjevac	Proje	ect M	anager		S	gnature	ur	- Kulsa			Date 08/2		2018		A STATE OF THE PERSON NAMED IN

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

pg-1		NOT		OITA	OF AS	BESTOS ABAT AC 8:60 and 5:1		D), EG	E		V	E
Date of Notification (1)				Name	of Buildin	g Owner/Operator ((2)			- SHOW-PERMI		
7 / 30	/1	88		Ve	rizon Co	mmunications		ШЩ AUG	2 1	20	10	A CANADA
Agencies Notified Type N	otification	1		Stree	t Address			-	6- 4	CU	1 <u>0</u>	4
⊠ EPA ⊠ Initi				51	Old Ledd	gewood Road	Í	ACCE	Marine Sales			E STATE OF THE STA
☑ DOLWD ☑ Am					State, Zip			ASBESTO	S.00	NTR	ŌL R	nd
	endment a				nders, N			Int Ci	ENSI	VG_	- Pateria	
	ergency (i ification)	including	3		of Contac	ALCO DE CONTRACTOR DE LA CONTRACTOR DE CONTRACTOR DE CONTRACTOR DE CONTRACTOR DE CONTRACTOR DE CONTRACTOR DE C		Telephone Numb	or			THE REAL PROPERTY.
	cellation				rk Jenkir			215-365-587				
	Tooliation					NFORMATION		215-365-567	U			
Name of Facility Where Abateme	nt is Takir	ng Place	(3)	- 17	CILITIII	AI OKWATION	Type of Facility	(4)				
Verizon Netcong C.O.		•					School (K-12					
Street Address							Subchapter 8	Other than K-12				
51 Old Ledgewood Road								ivate and commer	cial bu	iildin	gs,	
City (5)							Square Feet	# of Floors	RI	dg. A	ne.	_
Flanders, NJ 07836							+-10,000	1	3 5528	ug. / +-50	-	
County (6)				Com	nty Code /	7)(STATE USE ONLY)		or if being demolis	- 1	-50		
Morris				Cou	ity code (MOTATE USE ONLY)	Verizon	or it being demolis	neu)			
Name of Monitoring Firm Hired by	, Building	Owner	/9\	ASCM	No	Name of Abateme						
USA Environmental Mana			(0)	ASCIVI	INO.							
Street Address	gement,	IIIC.		<u> </u>			VIRONMENTA	_, INC.				
8436 Enterprise Ave						Street Address	D OTDEET					
						1123 BEAVE						
City, State, Zip Code						City, State, Zip Co						
Philadelphia, PA 19153			1=			BRISTOL, PA	19007					
Project Manager for Monitoring Fi	irm			lephone		Telephone No.	o.	License No.				
Mark Jenkins				215-365		215-788-6040		00509				
Start Date (10)8	(DNI	H	letion Da		Name of OSHA N BRISTOL EN	lonitor VIRONMENTAI	_, INC				
Occupancy Status During Abatem						Street Address						
Facility Closed/Vacated During						1123 BEAVE	R STREET					
Abatement Performed Outside					scribe	City, State, Zip Co	ode					
Time of Abatement:AN	/IF	21VI/ <u>5:00</u>	PIVI-	2:00AM		BRISTOL, PA	19007					
Scope of Work (Check all that app	oly)					M Full Cook						
≥3 sf or ≥3 lf		⊠ Re	nova	ation		☐ Mini-Enc	tainment with Neg losure	ative Pressure				
≥160 sf or ≥260 lf		☐ De	molit	tion		Gloveba	g Procedure					
		1 10	1.00	ation	т	∐ Non-Exe	mpted (*) and Nor	n-Friable Procedur	7			
Location of			Norm			Description o			Ab	atem	ent T	уре
Asbestos-Containing Material	(ACM)			lely by	Asbe	stos Containing Ma		Amount	Re	Repair	Enc	Enc
TO BE ABATED		10000		ance/ I Staff?	(i.∈	e., thermal systems		(Specify	Removal	air	àps	Enclosure
IN Facility (13)		Ous	(12			surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
()		Yes	No	N/A		other miscellane	ous)				te	
Ice #7 Fios Room					VAT/Ma	astic		350 SF		П	П	П
Fios Maintenance Room #6		10	astic		300 SF				П			
SSADC Room #5		\vdash_{\Box}	П		VAT/Ma	astic		250 SF				
CFO Office #2		10	П		VAT/Ma	astic		300 SF		П		
Name of Registered Waste Haule	г		T	NJDEP	1	Cubic Yards of	Name of Regis		1-			_
SERVICE TRANSPORT GR		IC.	1 6	Hauler II	D No.	Waste	MINERVA I					
City, State				20000		Disposal Date	City, State				-	
NEW CASTLE, DE						TBD	WAYNESB	URG, OH				
Completed By (Print or Type)	Tit	le				Signature		Dai	te			
Dillan DeCaro	1000000	Estimat	tor			Dielar	DeCaro	19nc s	2-2	00-	-18	>
						1 will	1 12000	(//)	2		1 -	

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

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Date of Notification (1)					Name	of Buildin	g Owner/Operator (2	2)	NAME OF TAXABLE PARTY.			Total Park	111
	30 /	18			Ver	rizon Cor	mmunications	Telephone	AUG 24	2018	2		
Agencies Notified	Type Notifica	ation			Street	t Address			1 400 5 4	2010	-	11	1
⊠ EPA					200 A	Action Commission (Commission)	jewood Road	7				direct of	er.
□ DOLWD		d				State, Zip (ASPESTOS CO		OL &		- 1
□ DOH	Amendm	ent # <u>1-</u>	-8/20/	18	0.000	nders, N.		Lucian	LICENSI	NG	e-Military to	taiminatua	1
☐ DCA	☐ Emergen	cy (incl	luding						1				
(NJAC 5:23-8)	justificati					of Contac			Telephone Num				
	☐ Cancellar	tion			1000000	rk Jenkir			215-365-587	0			
					FA	CILITY IN	NFORMATION						
Name of Facility Where A		Taking	Place	(3)				Type of Facility					
Verizon Netcong C.	0.							School (K-12	2)				
Street Address									8 (Other than K-12 rivate and comme		ilding	10	
51 Old Ledgewood	Road							homes, etc.)		olal be	and an is	,5,	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Flanders, NJ 07836								+-10,000	1		+-50		
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	shed)	1728-9110	******	
Morris								Verizon		A. 000 46			
Name of Monitoring Firm	Hired by Build	ding Ov	vner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)				-	_
USA Environmental							The second secon	VIRONMENTA					
Street Address					-		Street Address		_,				
8436 Enterprise Ave	e.						1123 BEAVER	STREET					
City, State, Zip Code	-						City, State, Zip Co						
Philadelphia, PA 19	153						BRISTOL, PA						
Project Manager for Moni				Tol	ephone	No	Telephone No.	19007	Linaman Ma				
Mark Jenkins	tornig riiiti			0.00	15-365				License No.				
	10	Cabad	lad C	U. 32	etion Da		215-788-6040		00509				
Start Date (10) 8 / 13 /			V /	1.5	1	_	Name of OSHA M						
				- 5	to L		BRISTOL EN	VIRONMENTA	L, INC				
Occupancy Status During							Street Address						
☐ Facility Closed/Vacate							1123 BEAVER	R STREET					
Abatement Performed Time of Abatement: _						scribe	City, State, Zip Co						
Time of Abatement			3.00	- IVI- <u>Z</u>	.00AW		BRISTOL, PA	19007					
Scope of Work (Check all	that apply)												
≥3 sf or ≥3 lf		r	⊠ Rer	ovat	ion			ainment with Neg	gative Pressure				
≥160 sf or ≥260 lf			Der					Procedure					
	GNL SQUENTE-TIME								n-Friable Procedu	re			
				Loca						Ab	atem	ent T	уре
Location		.		orma	ally ely by		Description of	01		D	70	Ш	ш
Asbestos-Containing N TO BE ABA		1)			ance/		stos Containing Mai		Amount (Specify	Removal	Repair	nca	nclo
IN Facilit			Cust	4 1 2 3 3 4 2 5 3 3 4	Staff?	(surfacing, VAT,		SF or LF)	oval	=	Encapsulate	Enclosure
(13)		-	T	(12)		-	other miscellaned	ous)				late	Ф
			Yes	No	N/A								
Room #1					\boxtimes	VAT/Ma	astic		150 SF				
Construction PPM Ro			\boxtimes	VAT/Ma	astic		200 SF	\boxtimes					
Hallway			\boxtimes	VAT/Ma	stic		320 SF						
		[10000						
Name of Registered Wast	e Hauler		-	IN	NJDEP I		Cubic Yards of	Name of Regis	tered Landfill				
SERVICE TRANSPO	RT GROUP	P, INC.		H	lauler II 20990		Waste	MINERVA					
City, State							Disposal Date	City, State					
NEW CASTLE, DE					TBD	WAYNESB	URG, OH						
Completed By (Print or Ty		-			Signature		, Da	te	-				
Dillan DeCaro		Est	timat	or			Dillan	DeCano	192 8	7-2	0-	18	

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

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Date of Notification (1)		4.0			1		g Owner/Operator	(2)					
	30 /	18			Ve	rizon Co	mmunications	A A	UG 2 4 2018		13		
Agencies Notified	Type Notific	cation			Stree	t Address		14 6			1	-	
⊠ EPA . ⊠ DOLWD					51	Old Ledg	gewood Road		e o production and the second			COM FOUND	
⊠ DOH	Amende				City,	State, Zip	Code	ASBE	STOS CONTRO	il di	25.31	1	
DCA	☐ Emerge			g	Fla	nders, N	J 07836	Employa and the control of the contr	LICENSING	gogdije wich	p. training in the second		
(NJAC 5:23-8)	justificat	tion)			Name	of Contac	t t		Telephone Numb	er			-
	Cancella	ation			Ma	rk Jenkir	ns		215-365-587	0			
					FA	CILITY IN	FORMATION						
Name of Facility Where A		Taking	Place	(3)				Type of Facility	2000				
Verizon Netcong C.	0.							Subchapter	?) 3 (Other than K-12)				
Street Address	Б							Other (i.e., p	rivate and commer	cial b	uildin	is.	
51 Old Ledgewood	Koad							homes, etc.)				105M 	
City (5)								Square Feet	# of Floors	В	dg. A	ge	
Flanders, NJ 07836 County (6)					T 6			+-10,000	1		+-50		
Morris					Cou	nty Code (/	(STATE USE ONLY)	The State of the S	or if being demolish	ned)			
Name of Monitoring Firm	Hirod by Ruil	Idina C)	(0)	ASCM	Ne	I Name of Aboten	Verizon					
USA Environmental				(0)	ASUM	NO.	Name of Abateme	200					
Street Address	Managem	ent, i	nc,					VIRONMENTA	L, INC.				
8436 Enterprise Ave							Street Address 1123 BEAVE	D STREET					
City, State, Zip Code						8 1 1 1 1 1 1 1 1 1							
Philadelphia, PA 19	153						City, State, Zip Co BRISTOL, PA						
Project Manager for Monit		-	-	Tel	ephone	No	Telephone No.	(13007	Tioner No.			يص	
Mark Jenkins	ioning i inin				15-365		215-788-6040	,	License No. 00509				
Start Date (10)	1	Sched	uled C		tion Da		Name of OSHA M		00509				
8/13/				and the same	1_ /			VIRONMENTAI	INC				
Occupancy Status During							Street Address	THO THE LITTLE					
☐ Facility Closed/Vacate					ment		1123 BEAVE	PSTDEET					
Abatement Performed	Outside of N	ormal	Facility	Hou	rs - Des	cribe	City, State, Zip Co						
Time of Abatement:	AM	PN	N <u>5:00</u>	PM-2	:00AM		BRISTOL, PA						
Scope of Work (Check all	that apply)							10007					
			N 5		¥0.00±0.00		Full Cont	ainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re	novat moliti	107.00		☐ Mini-Enc	losure Procedure					
							☐ Non-Exe	mpted (*) and No	n-Friable Procedure	9			
				Loca		0.0000000000000000000000000000000000000				Ab	atem	ent T	уре
Location of Asbestos-Containing M		a\		lorma d Sol	lly ely by	Asha	Description o			-	_	Tonas a	
TO BE ABA		")	Mai	intena	ince/		stos Containing Ma ., thermal systems i		Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility (13)	4		Cust	(12)	Staff?		surfacing, VAT,		SF or LF)	Val	7	usc	sure
(13)		1	Yes	No	N/A		other miscellane	ous)				ate	
Ice #7 Fios Room						VAT/Ma	stic		350 SF				
Fios Maintenance Roc	om #6					VAT/Ma			300 SF				
SSADC Room #5						VAT/Ma			250 SF	-			
CFO Office #2		$\frac{\Box}{\Box}$		VAT/Ma			va posta managari s						
Name of Registered Waste	Hauler	1			JDEP V		Cubic Yards of	Name of Regis	300 SF	\boxtimes	Ш	П	Ш
SERVICE TRANSPORT GROUP, INC.						No.	Waste	MINERVA I					
City, State					20990		Disposal Date	City, State					
NEW CASTLE, DE							TBD	WAYNESB	URG, OH				
Completed By (Print or Type					Signature		Date	e			-		
Dillan DeCaro		Es	timat	ог			Dillan	1 Delan	0/92) - :	30	-18	9

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

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Date of Notification (1)					1		g Owner/Operator	(2)	131	and the same of th			
7 / _	30 /	18	_		Vei	rizon Cor	nmunications	and the state of t		1/2 0	ve		Anticipies Se ratas
Agencies Notified	Type Notific	ation			Street	t Address		1	JUL AL	16 2 2	20	8-	111
⊠ EPA					51	Old Ledg	jewood Road	A CONTRACTOR OF THE PERSON OF	£.				1
⊠ DOLWD	☐ Amended	13,52,60			City, S	State, Zip (Code		ASBES	TOS O	341700	and a second	2003
Ø DOH	Amendm		_			nders, N		j Loope		JCENS	JNTH MG	ULS	Š.
DCA (NJAC 5:23-8)	☐ Emergen		cluaing	1		of Contac			Telephone N	THE RESERVE AND ADDRESS OF THE PARTY AND ADDRE	1111		The Williams
(10/10 0.20 0)	☐ Cancella				Ma	rk Jenkir	IS		215-365-				
							IFORMATION		1 2.0 000				
Name of Facility Where A	Abatement is	Taking	Place	(3)	10	OILIT III	TORMATION	Type of Facility	(4)				
Verizon Netcong C		, orang	. 1000	(0)				School (K-1)					
Street Address								☐ Subchapter	8 (Other than h	(-12)			
51 Old Ledgewood	Road							Other (i.e., p	private and com	mercial l	building	js,	
City (5)	1000							Square Feet	# of Floors	- T	71-1- A		
Flanders, NJ 07836								+-10,000	1	,	3ldg. A +-50		
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr		moliobod'			
Morris					Oou.	ity oode (i	NOTHIE OUT ONE!	Verizon	nor it being der	nonsneu			
Name of Monitoring Firm	Hirad by Build	ding O	unor (8) 1	ASCM	No	Name of Abatem		,				-
USA Environmenta	3.77			,	NOOIVI	140.		VIRONMENTA	5				
Street Address	i manageme		10.	1			Street Address	ALLOMAITMA	L, 1140.				
8436 Enterprise Av	•						1123 BEAVE	D STDEET					
City, State, Zip Code	-												
Philadelphia, PA 19	14.50						City, State, Zip C						
				T-I	phone	Na	BRISTOL, PA	19007	1:-				
Project Manager for Moni Mark Jenkins	noning ritti				pnone 15-365		Telephone No. 215-788-6040	No.	License No).			
Start Date (10)	16	Cabad.	ulad C		tion Da		Name of OSHA N		00509				
8 /13 /	10				/			VIRONMENTA	LINC				
		1000		0.1110	_ ′ -	10		VIRONIMENTA	L, INC				
Occupancy Status During			- 2		200-00 - 0		Street Address						
 ☐ Facility Closed/Vacate ☒ Abatement Performed 						ariba	1123 BEAVE				-		
Time of Abatement:	AM-	PM	1/5:00	PM-2	:00AM	dine	City, State, Zip Co						
							BRISTOL, PA	19007					
Scope of Work (Check all	that apply)						⊠ Full Con	tainment with Ne	native Proceur	•			
≥3 sf or ≥3 lf			⊠ Re				☐ Mini-End	losure	gative Flessuit	3			
≥160 sf or ≥260 lf			☐ De	molitic	n			g Procedure	- 5444 - 5				
			10	Local	ion	1	☐ Non-Exe	mpted (*) and No	n-Friable Proc				
Location	of			lorma			Description of	of.		A	batem	1 250	
Asbestos-Containing I	Material (ACM	1)			ely by		stos Containing Ma	terial (ACM)	Amount	1 6	Repair	E	E
TO BE ABA IN Facilit				intena odial	Staff?	(i.e	., thermal systems surfacing, VAT		(Specify		air	aps	Enclosure
(13)	ıy			(12)			other miscellane		SF or LF)	<u> </u>		Encapsulate	lie
			Yes	No	N/A			,				e	
Room #1					\boxtimes	VAT/Ma	stic		150 SF	×			n
Construction PPM Ro	oom #13					VAT/Ma	stic		200 SF		-		
Hallway			П	П	×	VAT/Ma	stic		320 SF		-	П	
			$\overline{\Box}$		1								
Name of Registered Wast	te Hauler				JDEP V	Naste.	Cubic Yards of	Name of Regis	stered Landfill		110		
SERVICE TRANSPO		, INC		1000	auler II	O No.	Waste	1	LANDFILL				
City, State					20990)	Disposal Date	City, State					
NEW CASTLE, DE							TBD	WAYNESE	BURG. OH				1
"eted By (Print or Ty	(ne)	Title					Signature	1		D-+			
~ro	(PG)	100000	timat	or			M' A	DOP.	1000	Date	71	-11	>
_			- unid			,	Dula	n DeCar	0/4/1	7-	0.	10	

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

df 2473

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

PAID			ICATIO	tate of New N OF ASBES t to NJAC 8:	STOS	ABATE			EG	E		<u> </u>		The second second
Date of Notification (1) 08/17/2018			Name o	of Building O	wner/O	perator	(2)	American and a second and a sec	AU(2	4 20	18	Act of the control of the]]
Agencies Notified Type Notification IN EPA IN DEP IN DOL IN DOL IN Emergency justification)		-	City, St Nutle	Address rate, Zip Code y NJ 07110 of Contact			TELEPHONE PRODUCTION OF THE PROPERTY OF THE PR	-	ASBEST	CENS	SING	ROL	2	See and the second seco
DOH justification) Cancellation			Josep	h Wishnea					releprio	ne nu	Tibel			
Name of Facility Where Abatement is Takin Residence	g Place ((3)	FAC	ILITY INFOR	RMATIC	N	Type of Fac	cility (4)						
Street Address							Subch		(Other that			dings	, hom	es,
City (5) Nutley							Square Fee 1,308	t	# of Floo	ors		ildg. A	Age	
County (6) Essex				Code (7) USE ONLY)		_ [Current Use	(Prior	if being de	emolish	ned)			
Name of Monitoring Firm Hired by Building 6 A. Seine Lighthouse Solutions	Owner (8)	ASCI	M No.			of Abatemen s Tank Se							7.5
Street Address PO Box 354							Address Liberty Av	enue/						
City, State, Zip Code South Orange, NJ 07079							tate, Zip Cod de, NJ 072							
Project Manager for Monitoring Firm Sarah Calandra	- 11	Telepho 201-3	ne No. 49-2666			one No. 162-7465		Lice 013	ense N	0.				
Start Date (10) 08/28/2018	Schedul 09/14/		npletion	Date (11)			of OSHA Mo ine Lighth	0.000	Solution	s				
Occupancy Status During Abatement (Chec			200 mg %			Street /	Address ox 354			71				
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	al Facilit	y Hours	nent i		_	City, St	ate, Zip Cod n Orange,		079					
Scope of Work (Check All That Apply)			***							La facility				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renova Demolit				×	Full Conta Mini-Enclo Glovebag Non-Exer	osure Proced	lure				e	
		Locati Normal										Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole aintenar todial S (12)	ly by nce/	(i.e. the	Conta ermal s surfaci		aterial (ACM insulation, r, or		Amour (Specif SF or Li	y	Removal	Repair	Encapsulate	Enclosure
Basement	Yes	No X	N/A		Elo	or tile	Z	_	696 S	_	**		le	
Datomont				FIC	or the		-	090 3		X				
N														
Name of Registered Waste Hauler Newark Carting		Н	JDEP W auler ID 1509	1916.27°	Cubic Y of Wast		W02523		gistered L Inageme		andfil	I		
City, State East Orange, NJ				0	Disposa	al Date		State n Arg	yle, PA					
Completed by Alison Lamers	Title Offic	e Man	ager		Sig	nature	a mo	NS.	<u> </u>	Dat 08	te /17/2	2018		

CK2471

	State of New Jersey
4 1 8 2	NOTIFICATION OF ASBESTOS ABATEMENT
	(Pursuant to N.IAC 8:60 and 12:120)

	The Colored Colored Assessed to	woman and devi			Pri	nt Form
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KI	No String or comments of the c	*****	******	-		
	A11/-) n	2010	-		
n m	AUC	4	4010	***************************************	17	
-				200	- A	\neg

Date of Notification (1)	7777-2-222			Nome	6 Duilding	0	2	- (0)		AII		1/110	The state of the s		
08/20/2018				Resid	f Building ence	Owner/0	Operator	(2)		AU	5 2 4 7	2018	Charlesoff Colores	y	-2.774000000
Agencies Notified	Type Notification			Street A	Address				I Ac	************	TOS CON	TOOL			- Controller
× EPA × DEP	× Initial		-	City St	ate, Zip Co	odo			Fig	1	ICENSIM	3	- Ch		
× EPA × DEP × DOL	Amended Amendmen	-	_		wood, I		040			T-HUTTLEHILLINI-	- and and a resident of the first	######################################	SOTTON, Sept. Sign	eduseitzewi	
X DOH	Emergency justification)				f Contact	1000				Tel	ephone Nu	nber			
☐ DCA	Cancellation	1			lubenste	2000									
Name of Facility Where	Abatement is Takir	ng Place (3)	_	FACI	LITY INF	ORMATI	ION	Type	of Facility (4	4)					
Residence								-	School (K-1)						
Street Address								×	Subchapter Other (i.e. p etc.)	8 (Oth	er than K-1: & commerci	2) al build	dings,	home	es,
City (5)								Squa	re Feet		Floors	В	ldg. A		
Maplewood County (6)				County	Code (7)				662 ent Use (Prio	*	3		40	2	
Essex				(STATE	USE ONLY,			00000000	•			iea)			
Name of Monitoring Firm A. Seine Lighthouse		Owner (8)		ASCN	/I No.				atement Con nk Service		(9)				
Street Address PO Box 354							Street 1256		ss rty Avenu	е					
City, State, Zip Code South Orange, NJ (07079								Lip Code IJ 07205						
Project Manager for Mon Sarah Calandra	nitoring Firm			Telepho	ne No. 19-2666		Teleph 844-	none N	lo.		License N 01316	0.			
Start Date (10) 08/31/2018		Scheduled	Con				Name	of OS	HA Monitor	0 1					
Occupancy Status During	a Abatement (Chec	09/19/20					A. Street		ighthouse	5010	tions				_
➤ Facility Closed/Vac	— · · · · · · · · · · · · · · · · · · ·			ent			PO E		77.0						
Abatement Perform Other – Describe:	ed Outside of Norm	nal Facility I	Hours	i		_			ip Code ange, NJ 0	7079					
Scope of Work (Check A	II That Apply)						Joan		90, 110	,, ,, ,					-
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			nova				×	Mir Glo	Il Containme ni-Enclosure ovebag Proc	edure					
		Τ		8				J No	n-Exempted	(*) and	Non-Friab	_		e ement	
Location	n of	107300-00	ocati ormal	2000		Des	scription	of						ре	
Asbestos-Containing	Material (ACM)	Used Main	Sole			tos Cont	aining N	1ateria			mount	_		Щ	
TO BE ABA		Custo			(i.e.		cing, VA	T, or	ation,		pecify or LF)	Removal	Repair	Encapsulate	Enclosure
(13)				Т		other n	niscellar	neous)				oval	air	sulat	sure
		Yes	No	N/A										Ф	
Basem	ent		Χ	-		Pi	pe wra	р		3	7 LF	X			
				-								_			
				-								_			
Name of Registered Was	ete Hauler		NI	JDEP W	lasto	Cubic	Varda	BACK A NO.	Nome of F	Dogist-	red Landfill				
Newark Carting	no i idulci		Н	auler ID		of Was			000000 00 100		red Landiii jement L		H		
City, State			04	4509		Dienos	sal Date		City, State		, on toll L	ai iuiii			
East Orange, NJ						Dispos	W 9229		Penn Ar		PA				
Completed by Alison Lamers							ighature		MIN	5	Da	te 3/20/2	2018		
				.50			11/	UW	11-01			0, 2			

CK3/164

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

						117	and the second		1
Date of Notification (1)					Name of Building Owner/	Operator (2)	II AI	J6 2 4 2018	
August 21, 2018					R.C. Diocese of Pa	terson	1	00 4 4 4010	1
Agencies Notified		Notification			Street Address	1			-
		Initial	Notifica	ation	777 Valley Road	į.	A CITY	TAAAAA	_
X EPA		⊠Amend	ed Cert	ification # 1	City, State, Zip Code		620 White	STOS CONTROL &	a j
x DCA		□ Emerc	encv (including	Clifton, NJ 07013	L		FICENDING	wheremone and
x DOL			cation)		Name of Contact		Telenho	one Number	
X DEP		☐ Cance			Rebeca Ruiz-Ulloa			777.8818	
x DOH		- Carlot	cu	FACILITY IN	FORMATION		010.7	77.0010	
Name of Facility Where Abate	ement is Tal	king Place (3)		TAGILITTIN	Type of Facility (4)				
Friendship Corner II					School (K-12)				
Ctt Add					Subchapter 8 (other that	n K-12)			
Street Address 186 Butler Street					Other (i.e. private & cor		ings, hom	es, etc.)	
100 Butlet Street					Sg. Feet: Unknown				5
<u>City (5)</u>	County (6	-		y Code (7)					
Paterson	Passai	С	(State	Use Only)	Current Use (prior if being	g demolished):		
Name of Monitoring Firm Hire		Santa Santa	ASCM		Name of Contractor (9)				
EnviroVision Cons	ultants	inc.	0007	79	CREENIMOOD ARAT	CENTENITO	OMELII	TANTO INC	
Street Address					GREENWOOD ABAT Street Address	EMENIC	ONSUL	TANTS, INC.	
20-21 Wagaraw Road	l Blda#	344			Street Address				
20-21 Wagaraw Koac	i, Diag ii	0-17-1			511 MAIN STREET				
City, State, Zip Code					City State, ZipCode				
Fairlawn, NJ 07410					Butler, NJ 07405				
Project Manager for Monitorin	ig Firm	Telephone N	Number		Telephone Number		License	Number	
Fred Larson		973-636	-9145						
01 11 101 10 1 10				5 1 711	973-492-0477		00840		
Scheduled Start Date (10)		Scheduled (Name of OSHA Monitor				
August 27, 2018		Septemb	er 9, 2	2018	EMSL inc.				
Occupancy Status During A	batement (Check only o	ne)		Street Address				
☑ Facility Closed/Va				atement					
Abatement Performed					1056 Stelton Road				
Describe					City, State, Zip Code				
Other – Describe:					Diagramme N. I. 000	054			
					Piscataway, NJ 08	554			
Course of Mode (Obsole all the	t . \				L				
Source of Work (Check all that	at apply)					y Full Conto	inmont wi	ith Negative Pressur	_
≥ 3 sf or ≥ 3 l	f			x Renovation		Mini-End		ith Negative Pressur	-
□≥ 160 sf or ≥ 2				Demolition	лі	Glovebag F			
<u> = 100 31 01 2 2</u>	200			Demonition		Non-Exemi	oted (*) ar	nd Non-Friable Proce	edure
Location of Asbestos-Contain	ing Is Lo	cation Norma	lly Used	Description of As	bestos Containing Material	Amour		Abatement Type	-
Material (ACM) in Facility (13)	1000000	ly by Maint./C	ustodial		nal systems insulation, surfaci		y SF	Remove Repair Encap	Enclose
	Staff YES	f? (12) S NO	NA	VAT, or other mis	scell.)	or LF)	1	Remove Repail Encap	Eliciose
Classroom #C70 0			INA	Digoton Celli	n a	2 000	05 1	VI I	
Classroom # 6,7,8, &	9	X		Plaster Ceili	ilg	2,800	SI I	XI	
Name of Reg. Waste Hauler		NJDEP Was	te Haule	r ID #	Cubic Yards of Waste:		Name of	f Registered Landfill	
See Hauler Below # 1 &	2	See Below		110#		u.yds.		wfill Landfill	1
occitation bolow in Ta	-	000 20101	•		40 6	u.yus.	G.R.O.		
							0		
Hauler #1) Greenwood A	Ahatomor	nt Consulta	nte Inc	- Butler NIA	7405	Disposal Da	te	City, State	
NJ DEP # 12			1113, 1110	– Datiel, NJ U	7-100	Septemb	-	Route 2, Box 6	8
Hauler #2) Newark Carti	기계(조기기) 중(경기) [7		04509 N	NJ DEP # 19551		2018	,	Bridgeport, WV	Ά
	5,		,1					304-842-2784	
Completed by (Print or Type)	T-	Title	72H0474 124		Signature		Date		
Marin Graure		SENIOR P	ROJE	CT				st 21,2018	
	1.2	MANAGER		52 693	Maria Graus	re			
CAC#2017 (56			•						



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

	PAID				N OF ASE t to NJAC					E	0	P	Π'n	D F	3 10-	
Date of Notification (1) 08/14/2018	5				of Building			58		5	C	<u>E</u>		<u> </u>	7.0	Same and the same
Agencies Notified	Type Notification			Street A	Address			Seil	114	1	406	2.4	201	8	Transfer Street	\mathcal{H}
EPA EPA	× Initial		Į.	0.1. 01	1 7 0				İ	1					1.00	
× DEP × DOL	Amended Amendment				ate, Zip C ont NJ 0				i	ASBI	ESTO	S C)NTR	01.8		District Co.
X DOH	Emergency (justification)	includin	7	Name o	of Contact					Tel	ephor	ne Nur	nber	v integration	Allera un un	
☐ DCA	Cancellation				ina Lam					1						
Name of Facility Where	Abatement is Taking	Place (3)	FAC	ILITY INF	ORMAT	ION	Туре	of Facility (4)						
Residence									School (K-1							
Street Address								×	Subchapter Other (i.e. p etc.)					dings,	home	es,
City (5) Dumont								Squa 1,20	re Feet 00	# o	f Floo	rs	1973.63	ldg. <i>A</i> 18	ge	
County (6) Bergen					Code (7) USE ONLY)		Curre	ent Use (Pri	or if bei	ng de	molish	ied)			
Name of Monitoring Firm A. Seine Lighthouse)wner (8)	ASC	M No.				atement Cor nk Service		(9)					
Street Address PO Box 354							Street 1256		ss rty Avenu	ie						
City, State, Zip Code South Orange, NJ (7079							ip Code IJ 07205								
Project Manager for Mon Sarah Calandra	itoring Firm		Telepho 201-34	ne No. 49-2666		Teleph 844-				Lice 013	nse N	0.				
Start Date (10) 08/28/2018		Schedu 09/18/		npletion	Date (11)	X			HA Monitor Lighthous	e Solu	itions	S				
Occupancy Status During	g Abatement (Check	Only O	ne)				Street	Addre	ss							
Facility Closed/Vaca Abatement Perform	ated During Entire P	eriod of	Abatem	nent			PO E		54 ip Code							
Other - Describe:		ar r doint	y i louis			_			ange, NJ (07079						
Scope of Work (Check A	II That Apply)							_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	Min	Il Containme ni-Enclosure ovebag Prod n-Exempted	edure	8.77.9				e.	
		Is	Locati	on						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			T -	Abate	ment	
Location Asbestos-Containing			Normal ed Sole		Ashaa		scription		. (0.000)			4:		ГУ	ре	
TO BE ABA In Facili (13)	ATED	1007.0	intenar todial S (12)					s insula T, or		(S	moun specify or LF	y	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A				11 1000000					_		ite	Ф
Baseme	Basement					Pi	pe wra	р		10	00 LF	=	X			
						7.0						5-70116-				
Name of Registered Was	te Hauler	100000	JDEP W		Cubic			Name of	Registe	red La	andfill					
Newark Carting		auler ID 1509	NO.	of Was	ste		Waste I	Manag	geme	ent La	andfil	1				
City, State East Orange, NJ					Dispos	sal Date		City, State Penn A		PA						
Completed by Alison Lamers		Title Offic	e Mar	ager		S	igriature	PA	NUS			Da 08	te /14/2	2018		

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 08/17/18 Bill McGowan Agencies Notified Type Notification Street Address FPA Initial City, State, Zip Code DEP Amended X ASSESTOS CONTROL & DOL Amendment # Glen Ridge, NJ 07028 LICENSING Emergency (including Name of Contact Telephone Number DOH iustification) DCA Cancellation Bill McGowan **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private House School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, X etc.) City (5) # of Floors Square Feet Bldg. Age Glen Ridge County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Essex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Competent Supervisor Academy Construction Inc. Street Address Street Address 205 Route 46 Suite 14 City, State, Zip Code City, State, Zip Code Totowa NJ 07512 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973 832 4244 01155 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/26/18 08/31/18 Same as above Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or >3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure X Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, Enclosure (Specify Remova Custodial Staff? Repair In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A First Flr Kitchen X Pipe Insulation 10 lf X X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Academy Construction Inc **GROWS Landfill** 0034422 3 City, State Disposal Date City, State

TBD

Signature

Title

Supervisor

John Geleski

Totowa NJ

Completed by

Date

08/17/18

Tullytown PA

MOCK

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

	7010-200-2		1			10 0.00 and 5.1	' !!!	1)1	9 6		\mathbb{W}		m
Date of Notification (1)				Consumer.		g Owner/Operator ((2)	111				1	Parties of the Control of the Contro
8 / 22 /	2018	_		Ch	evron			Table of the state	AUG 2) 1 00	10	THE PERSON NAMED IN	
Agencies Notified Type Notified	ation		-	100000000000000000000000000000000000000	t Address		- 1	Street E	100	4 4	18		
■ EPA ■ Initial	0.40			187	7 Abse	con Boulevar	d	L				Part of	9-104
■ DOLWD					State, Zip C			6	SBESTOS LICEN	CONTE	ROL	2	and a
□ DCA □ Emerger		uding		Atla	ntic City	y, NJ 08401	-	-	LICEN	ISING		~ £	and the same
(NJAC 5:23-8) justificat				Name	of Contac	t			Telephone N	umber	The same of the sa	1000	reserved.
☐ Cancella	ition												
				FA	CILITY IN	IFORMATION							
Name of Facility Where Abatement is	Taking P	lace (3)				Type of Facil		4)				
Chevron Site 211699							School (K		Other than K-	12\			
Street Address									ate and comr		uildin	gs,	
1877 Absecon Boulevard							homes, e						
City (5) Atlantic City, NJ 08401							Square Feet N/A		# of Floors		ldg. A I/A	ge	
County (6)				Cour	nty Code /7)(STATE USE ONLY)		/Drio		- 91	1//		
Atlantic County				Cou	ity Code (/	NOTATE OSE ONLY)	Industria				da c	lah	
Name of Monitoring Firm Hired by Buil	dina Ow	ner (8	1	ASCM	No	Name of Abateme			icinty-iorri	ווטו וטוו	uy s	lab	
Arcadis	anig Oil	(0	80 M	141	110.	Abscope En			Inc				
Street Address						Street Address	TVII OTTITIOTT	LCI,	1110.				
10 Friends Lane						10521A Indi	ıstrial Par	k R	2d				
City, State, Zip Code			2112			City, State, Zip Co					_		_
Newtown, PA 18940						White Marsh		62					
Project Manager for Monitoring Firm		-1	Tele	phone	No.	Telephone No.	.,		License No.	-			
David Hilinski			26	7-685	5-1711	410-796-720	00		01194				
Start Date (10)	Schedule	d Cor	mple	tion Da	te (11)	Name of OSHA M	onitor						-
9 / 10 / 2018	9	_ / _	21	/ _	2018								
Occupancy Status During Abatement (Check or	nly on	e)			Street Address							
Facility Closed/Vacated During Enti	re Period	of Al	oater	nent									
Abatement Performed Outside of No. Time of Abatement:AM	ormal Fa	cility I	Hour	s - Des	cribe	City, State, Zip Co	de						
AINIAIVI			r IVI-		AIVI								
Scope of Work (Check all that apply)						ПЕНО							
≥3 sf or ≥3 lf		Reno	ovatio	on		☐ Full Cont	ainment with N osure	legat	tive Pressure				
■ ≥160 sf or ≥260 if		Dem	olitio	n		☐ Glovebag	Procedure						
		la I	ocati			Non-Exer	mpted (*) and I	Non-	Friable Proced				
Location of			rmal			Description of	F			Ab	atem		1
Asbestos-Containing Material (ACN	1)	Used			Asbes	stos Containing Mat			Amount	Ren	Repair	Enc	Enc
TO BE ABATED IN Facility		Main Custo			(i.e.	 thermal systems i surfacing, VAT, 			(Specify	Removal	ia a≕	aps	Enclosure
(13)			(12)			other miscellaned			SF or LF)	1 20		Encapsulate	lre
	Y	es	No	N/A			70.00 .0 09					О	
south corner of former building	slab [] [x	12	"x12" VAT and	Mastic		550SF	×			
center of former building sla	b [] [x	9'	"x9" VAT and N	//astic		100SF	X			
Center and west of former bldg	slab [] [x	9"x9	" Black VAT an	d Mastic	T	100SF	x			
West side of former building s	lab [] [x	Brow	n Vapor Barrie	r Material		250SF	х			
Name of Registered Waste Hauler			10000	DEP V		Cubic Yards of	Name of Reg	gister	red Landfill				
Clean Harbors			Ha	auler ID	No.	Waste	Atlantic	Cit	ty Utilitie	s Aut	hor	ities	S
City, State						Disposal Date	City, State	76.1					
						//	6700 Delilah	Roa	d Egg Harbo	or Towns	ship, N	1J 08	234
Completed By (Print or Type)	Title	nessor				Signature	6 //	1	1	Date	1		
Jason Haller	VP N	Лid	Atl			110	My,	6	2 8	3/23/2	201	8	

ASB-41 JAN 13

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

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) AUG 2 4 2018 8 / 22 / 2018 Chevron Agencies Notified Type Notification Street Address EPA Initial 1877 Absecon Boulevard ASBESTOS CONTROL & **DOLWD** ☐ Amended City, State, Zip Code LICENSING Amendment # ■ DOH Atlantic City, NJ 08401 ☐ Emergency (including ☐ DCA justification) Name of Contact (NJAC 5:23-8) Telephone Number ☐ Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Chevron Site 211699 School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 1877 Absecon Boulevard homes, etc.) City (5) Square Feet # of Floors Bldg. Age Atlantic City, NJ 08401 N/A 0 N/A County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Atlantic County Industrial Facility-former bldg slab Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Arcadis 141 Abscope Environmental, Inc. Street Address Street Address 10 Friends Lane 10521A Industrial Park Rd City, State, Zip Code City, State, Zip Code Newtown, PA 18940 White Marsh, MD 21162 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. David Hilinski 267-685-1711 410-796-7200 01194 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 9 / 21 / 2018 9 / 10 / 2018 Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-__AM Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ >3 sf or >3 If ☐ Renovation ☐ Mini-Enclosure ≥160 sf or ≥260 lf ☐ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Encapsulate Used Solely by Remova Repair Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)other miscellaneous) Yes No N/A south corner of former building slab х 12"x12" VAT and Mastic x 550SF × center of former building slab 9"x9" VAT and Mastic X 100SF Center and west of former bldg slab П х 9"x9" Black VAT and Mastic 100SF х West side of former building slab Brown Vapor Barrier Material 250SF × Cubic Yards of Name of Registered Waste Hauler NJDEP Waste Name of Registered Landfill Hauler ID No. Waste Clean Harbors Atlantic City Utilities Authorities City, State Disposal Date City, State 6700 Delilah Road Egg Harbor Township, NJ 08234 Completed By (Print or Type) Title Signaturé Date Jason Haller VP Mid Atl 8/23/2018

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

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Date of Notification (1) 08/21/2018				Name o Jasor	f Building (Fragom	Owner/(eni	Operato	r (2)	E Summer	3	2.2		050 0			A CONTRACTOR OF THE PROPERTY O	Company of the Compan
Agencies Notified	Type Notification			Street A	ddress				1		At	10 2	4	2018			#
× EPA × DEP × DOL	Initial Amended Amendment	#		City, Sta Booto	ate, Zip Coon,NJ,070	de 005		•	a-citation distances	A		STOS)L &	- Paris	transferdable of set for
DOH DCA	Emergency justification) Cancellation			Name o Jhon	f Contact					-demonstrate		LICEN			nethylikija, a det	Property Congression	
				FACI	ILITY INFO	RMAT	ION										
Name of Facility Where Ab Private House	atement is Takin	g Place (3	3)					Type		cility (. = 53/6	Mac Cont	
Street Address								X (er than & comm			dings,	hom	es,
City (5) Booton								Squar N/A			N/	032		1	ldg. A	ge	
County (6) Morris					Code (7) USE ONLY)	\ <u></u>		Curre PRI	nt Use VATE	e (Prio	or if bei JUSE	ng dem	olish	ed)	2200 - 100		
Name of Monitoring Firm H N/A	lired by Building	Owner (8)		ASCN	A No.		Name EHV	of Abat N ABA	temer TEN	nt Con IENT	tractor LLC	(9)					
Street Address								Addres		STF	REET						
City, State, Zip Code					(4)			State, Zi ERSC			524						
Project Manager for Monito	oring Firm		Telepho	ne No.			hone No -333-5				Licens 0127).				
Start Date (10) 08/30/2018		Schedule 08/31/			Date (11)			of OSH V ABA			LLC						
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Scope of Work (Check All 7							1741	Littoo	714,14	0,07							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	**************************************	Annual Control	tenova emolii				2	Min Glo	i-Encl	losure Proc	edure	Negati				ρ	
		Is	Locat	ion						T	7 2.11		1100		Abate	ement	
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In Facility (13)			(12)				cing, VA niscellar				SF	or LF)		Remova	Repair	Encapsulate	Enclosure
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Basemen	ıt		Χ			Pipe	insula	tion			6	00 If		х			
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EHW ABATEMENT LL			Н	IJDEP W lauler ID 037095	No.	Cubic of Was TBD					e Trar	red Lar nsfer	natili				
City, State Paterson,NJ						Dispos TBD	sal Date	/		State				- 1000			
Completed by Victor Espíritu		Title Proje	ct Ma	anager	8	S	ignature	M) l	u	1		Date 08	e /21/2	2018	1	

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

MOCC.	ě			N OF ASB				1	E	CE	$\overline{\mathbb{N}}$	7 E		
Date of Notification (1) 8/23/18				of Building Clinical			(2)				authors in prompts a few com-		A CONTRACTOR OF THE PERSON OF	Annual and
Agencies Notified Type Notification				Address US-202					4	AUG 2	4 20	18—	Loss	1
DEP Initial Amended	167	+		ate, Zip Co				J-15 Aut	LAS!	BESTOS (TAOC	ROL	<u></u>	College and the same
DOL Amendment Emergency		-		n, NJ 08	869			and the second s		LICEN	ISING	mental exposit	Carl State of the	
DOH justification) DCA Cancellation				a Nicules	cu					ephone Nu 8-218-86				
Name of Facility Where Abatement is Takin	a Diana (C		FAC	ILITY INF	ORMATI	ON								
Ortho Clinical Diagnostics	g Place (3	>)						of Facility (
Street Address 1001 US-202								School (K-1 Subchapter Other (i.e. p	8 (Oth			dings	, hom	es,
City (5) Raritan, NJ 08869								etc.) re Feet 00	# o	f Floors		Bldg. A	. 2	
County (6) Somerset				Code (7) USE ONLY)			ent Use (Prio maceutica		ing demolis	market 48			
Name of Monitoring Firm Hired by Building NA	Owner (8)		ASCI	M No.				tement Cor			re II	C		
Street Address						Street			ity Ot	milacio	5, LL			
NA						2400	Mair	n Street E	Exten	sion, Su	ite 10)		
City, State, Zip Code NA								ip Code , NJ 088	72					
Project Manager for Monitoring Firm NA	_		Telepho			Teleph 732-				00750	No.			
Start Date (10) 8/15/18	Schedule 8/27/18		npletion	Date (11)		Envir	onme	HA Monitor ntal Tactio	es,Inc					
Occupancy Status During Abatement (Chec	k Only Or	ie)							treet A	ddress				
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm	Period of A	Abaten	nent			64 B		St ip Code						
Other – Describe:								NJ 07747						
Scope of Work (Check All That Apply)				6		-								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit					Mir Glo	Il Containme ni-Enclosure ovebag Prod	e cedure					
	Is	Locati	ion				II NO	n-Exempted	ı (*) an	d Non-Fria	ble Pro	33.00 E VV	re ement	1
Location of	1	Normal d Sole	ly	-		scription						Ty	/pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intena todial \$ (12)	nce/				insula T, or		(5	mount Specify For LF)	oval	air Rem	late	sure
	Yes	No	N/A											
Pipe on top of roof of Bldg A	X			Therma					15 LF	Ä	Y			
Pipe on top of roof of Bldg A	X			1	nal insul					50 sf			X	
Pipe on top of roof of Bldg A	X			Insulation	on on Cl	hilled V	Vater	Pipe	100 L	F	γ			
Name of Registered Waste Hauler		N	JDEP W	Vaste	Cubic `	Varde		Nome of	Do=!-1	rod! to				
Freehold Cartage Inc		H	lauler ID		of Was	885, 1987, 178		G.R.O.V		ered Landfil				
City, State Freehold NJ					Dispos 8/27/1	al Date		City, State Morrisvi		4				
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ASB-41 (R-06-08)	dan	— — ;	ext	inzi	nor-		<i></i>	()					

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

GAC Project # 060-18 Name of Building Owner/Operator (2) Date of Notification (1) August 17, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) X EPA MAmended Notification #4 -74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS X DCA City, State, Zip Code DCA approved New Start & X DOL PISCATAWAY, NJ 08854 Completion Dates ON THE THE TANK THE DEP- No Longer REQUIRED Name of Contact ☐ Emergency (including Telephone Number X DOH 848-445-2550 MICHAEL F. SMITH, ENV. justification) **HEALTH & SAFETY** ☐ Cancelled FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) RWJMS RESEARCH TOWER, BLDG# 3688 School (K-12) Subchapter 8 (other than K-12) ASSECTOS CONTROL & Street Address Other (i.e. private & commercial buildings, homes, retc.) \G RBHS PISCATAWAY CAMPUS Sq. Feet: N/A # of Floors: 8 Bldg. Age: 60+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC PISCATAWAY MIDDLESEX (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/20/2018 09/03/2018 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E Abatement Performed Outside of Normal Facility Hours - 7am -3pm City, State, Zip Code Describe: Schedule: 3PM - 5AM (24 HRS. & WEEKENDS AS FAIRLAWN, NJ 07410 NEEDED) X Facility Occupied During Abatement Other-Describe: Scope of Work (Check all that apply) Full Containment with Negative Pressure × > 3 sf or > 3 lf Renovation Mini-Enclosure $\square \ge 160 \text{ sf or} > 260 \text{ lf}$ ☐ Demolition Glove bag Procedure / Wrap & Cut Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Staff? (12) VAT, or other miscell.) or LF) Enclose NO YES NA R-B66 X TSI 80 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 10 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 09/03/2018 19067 NJ DEP# 4509 215-736-1700 Completed by (Print or Type) Title Signature RAYMOND C. PEDALINO SENIOR PROJECT August 17, 2018 Raymond C. Pedalina MANAGER



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

GAC Project # 060-18 Name of Building Owner/Operator (2) Date of Notification (1) June 22, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Notification Type Agencies Notified Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) Initial Notification M EPA 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS MAmended Notification #3 -DCA Postponed until DCA approval City, State, Zip Code DOL. PISCATAWAY, NJ 08854 New Start & Completion Dates DEP- No Longer REQUIRED Name of Contact Telephone Number To Be Determined 国 DOH MICHAEL F. SMITH, ENVE 1848-445-2550 ☐ Emergency (including HEALTH & SAFETY ! justification) ☐ Cancelled FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) RWJMS RESEARCH TOWER, BLDG# 3688 School (K-12) Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) RBHS PISCATAWAY CAMPUS Sq. Feet: N/A # of Floors: 8 Bldg. Age: 60 years City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC MIDDLESEX (State Use Only) **PISCATAWAY** Name of Monitoring Firm Hired by Bldg Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BURLINGTON. NJ 08016 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor ENVIROVISION, INC. TBD TBD Occupancy Status During Abatement (Check only one) Street Address 20-21 WARGARAW ROAD, BLDG# 35E Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - 7am -3pm City, State, Zip Code Describe: Schedule: 3PM - 5AM (24 HRS. & WEEKENDS AS FAIRLAWN, NJ 07410 NEEDED) Ex Facility Occupied During Abatement Other- Describe: Scope of Work (Check all that apply) Full Containment with Negative Pressure Renovation ☐ Mini-Enclosure ≥ 3 sf or >3 lf Demolition Glove bag Procedure / Wrap & Cut $\square \ge 160 \text{ sf or } \ge 260 \text{ lf}$ Non-Exempted (*) and Non-Friable Procedure Description of Asbestos Containing Material Is Location Normally Used Amount Abatement Type Location of Asbestos-Containing (Specify SF Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, Remove Repair Encap Staff? (12) VAT, or other miscell.) or LF) Enclose NO NA YES R-B66 R TSI 30 SF 130 Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 10 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below City, State Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date 100 New Ford Will NJDEP # 12561 Rd. Morrisville, Pa Hauter #2) Newark Carting, Inc., Newark, NJ 04509 TEC MJ DEP#4509 215-736-7700 Signature Completed by (Print or Type) SEMIOR PROJECT June 22, 2018 RAYMOND C. PEDALINO Raymond (5 Petation MANAGER



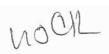
11: Måssättn of Asossätt Altsäsmand Gersand - <u>MJA.C</u>. 3:66-7 and 12:129-7)

Date of Motification (1)	5000				Name of Building Owner/ORUTGERS, THE ST	Deceio (2) *点面信用编辑	viersi.	rzofk	اق		-
June 15, Agencies Notified 교 EPA		Notification Initial I	Vohilica	llon ication # 2 –	Street Address ENVIRONMENTAL 74 STREET 1603, E	MEALTH	£ SAF	ety de	FT. (F	EHS PUS	1
DOL			& Com	pletion Dates	City, State, Zip Code FISCATAWAY, MU						
쩳 DEP-No Longer REQUIRE	3		cation)		Name of Contact RECHAEL F. SRETP HEALTH & SAFET			none Mumi		7 17	
Name of Facility Where Abatemer RWJMS RESEARCH TO	nt is Takin WER, I	g Place (3) BLDG参3	688	FACILITY INF	Type of Facility (4) School (K-12)		AUS	2.4	1016		
Street Address RBHS PISCATAWAY CA	AMPUS			and the second s	Subchapter 8 (other that Other (i.e. private & con Sq. Feet; WA #	n K-12) nmercial build <u>of Floors:</u>	lings, hor	nes, etc.) <u>. Age:</u> . 6	04 yes	3	
	ounty (6) AMDOL			Code (7) se Only)	Current Use (prior if being	g demolished	d): ACĀ	DEIGIC	9		
Name of Monitoring Firm Hired by ATC	Bldg. Ov	rner (8)	ASCM (Name of Contractor (9) GREENWOOD ASA	Tement (CONSU	LTAMTS	, MC.		
Street Address 3 TERRI LANE		and the second second		and the first state of the first	Street Address 511 MAIN STREET						
City, State, Zip Code BURLINGTON, NJ 08	3016				City State, ZipCode BUTLER, NJ 07405						
Project Manager for Monitoring Fi BRIAN R. KEARNEY		Telephone 609-386	Number -8800		Telephone Number 973-492-0477		Licens 0084	e Number			
Scheduled Start Date (10) 06/22/18		07/9/18		n Date (11)	Name of OSHA Monitor ENVIROVISION, IN	C.					
Occupancy Status During Abate Facility Closed/Vacated During	ng Entire	Period of A	batemen	t	Street Address 20-21 WARGARAW	ROAD, B	LDG# 3	15E			
MAbatement Performed Outsi Describe: Schedule: 3PM - 5 NEEDED) MFacility Occupied During About 19 Other-Describe:	AM (24	mai Facility MRS. & M	IEEKEN	7am -3pm DS AS	City, State, Zip Code FAIRLAWN, NJ 078	10					
Scope of Work (Check all that ap	plv)					30.00		:th 31		0.150	
$\square \ge 3 \text{ sf or } > 3 \text{ lf}$ $\square \ge 160 \text{ sf or } \ge 260$) If			Renovation Demolition	£	Full Conta Mini-Enc Glove bag Non-Exem	losure J Procedi	ıre / Wrap	& Cut		lure
Location of Asbestos-Containing Material (ACM) in Facility (13)		ation Norma by Maint./C (12) NO		Description of As (ACM) (i.e. therr VAT, or other mis	bestos Containing Material nal systems insulation, surfac	Amo	unt cify SF	Abateme Remove Enclose	ent Type		
R-B66				TSI		80	SF				
Name of Reg. Waste Hauler See Hawler Below #1 & 2		NJDEP Wa		r ID #	Cubic Yards of Waste:	10 GV		of Registe O.W.S. 1			1
Mariar #1) Grasswood Abniam PUDEF # 12561 Mariar #2) Naverik Carriog, Ios PU DEF # 1800		linois, Inc.		MJ 07405	.1	Disposal E		1	ity. Stat 90 Mew d. Morr 9067 ::E-733-	Ford (isville	
Completed by (Print or Type)	S S	tle E.O.C.A. I.A.O.A.G.E		F. 47	Stoneiure Raymond C. G	Edutoro	Dais Justi	\$ * 2, 12	* ½		



(Pursuent to M.J.A. Q. 2:60-7 sud highligh-7)

AC Project#060-12					Mame of Building Owner/Op-	erator (2)				
ate of Motification (1)	1.9				RUTGERS, THE STA	TE UN	VERSIT	vof N	a ^l	
June 8, 201	14				Street Address					
gencies Notified		cation T			ENVIRONMENTAL H	521 TH	3.3376	TYGE	PT. (PU	EMS)
			lotificatio		74 STREET 1603, BL	==== ಗಾಗ್ಲಿಪಟ್ಟ	3 1 11/10	RATEU	I CAM	PUS
B) EPA				ation#1	14 SIREEI 1000, EL	PA 5011	Lg = 12.15 V	26 Tai 1 20 II		
图 DCA	New	Start o	& Comple	etion Dates	City, State, Zip Code	A. ST. A.				
M DOL	DE	merae	ency (inc	luding	PISCATAWAY, NJ 04	1824.		Mumi	201	
DEP- No Longer REQUIRED		ustifica			Name of Contact	NEWS (1) 19	Teleph	one Numl	<u>)er</u>	
M DOH		ancelli		1	MICHAEL F. SMITH, (ent,		45-155	579 I	
21001		ancem	30		HEALTH & SAFETY:	1.	作 厚	1 W	15 li	111
				FACILITY INFO					- 1	111
Name of Facility Where Abatement i	is Taking Pla	co (3)		77101217171	Type of Facility (4)				- 11	
RWJMS RESEARCH TOW	VED DIF	M248 20	ବ୍ୟର		School (K-12)					
TAMING MESEWATER LAW	فتاحا استروا واخال	18 H. 61	4 ~ ~		Subchapier 8 (other than t	(-12)	100	1	11	
Of alderso					Other (i.e. private & comm	ercial huil	linas, hom	es, etc.)	7	4
<u>Street Address</u> RBHS PISCATAWAY CAP	MENA				Sa. Feet: WA #0	f Floors:	2 Blda	Age: 3	0- หล่ อเ	re i
Kens fisherent var	(1111_15) OS				Su. Feet. No.	1110010.		- 1812 - 1814	51.2.	
City (5) Cour	nty (6)	1	County Co		Current Use (prior if being o	demolishe	d): ACA			
PISCATAWAY M	HODLESE	en l	(State Use	Only)	Caneni ose (bilor il penig c	2011/0/1011/0	.,	4 1 0 × 6 7 8× 5 =		
1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2										
1	N.L.	(2)	ACCEA III-		Name of Contractor (9)	-				
Name of Monitoring Firm Hired by B	uda. Owner (01	ASCM No	1						
ATC		avoid#	00098		GREENWOOD ABATE	EMENT	CONSU	LTANTS	3, MC.	
					Street Address					
Street Address					Officer Modicas					
3 TERRI LANE					511 WAIN STREET					
City, State, Zip Code	transaction (1990)				City State, ZipCode					
BURLINGTON, NJ 080)16		2007		BUTLER, NJ 07405		1 11	- Mumbar		
Project Manager for Monitoring Firm	n Tele	phone N			Telephone Number		Licens	e Number	-	
BRIAN R. KEARNEY	60	9-386	-8800		250 160 0.150		0084	ពីរ		
					973-492-0477		1 3004	<u>U</u>		
Scheduled Slari Date (10)			Completion	Date (11)	Name of OSHA Monitor					
06/15/18	06/	27/18)		ENVIROVISION, INC.	0				
Occupancy Status During Abater	ment (Check	coniv o	ne)		Street Address		a po ek ti -	a (=		
Facility Closed/Vacated During	a Entire Peri	od of A	batement		20-21 WARGARAW R	ROAD, E	LDG# 3	SE		
Abatement Performed Outside	e of Mormal	Escility	Hours - 7a	em -3nm						
Describe: Schedule: 3PM - 5A	SO GA ME	S 2. 10	SEEKEND	SAS	City, State, Zip Code	_				
	State from a new	C1- 62 00	Con Con H of Cop P C Cop	for \$ 1405	FAIRLAWN, NJ 0741	U				
NEEDED)										
EFacility Occupied During Abat	ement									
Other- Describe:		***								
										SHIE
Scope of Work (Check all that appl	<u>[v]</u>				Ist	TEUR Coo	ainmení w	iih Neoa	live Pres	
	<u>(v)</u>		-	-			ainmení w	iith Nega	live Pres	
Scope of Work (Check all that appl	<u>[v)</u>		-	Renovation		3 Mini-En	closure			
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3 sf or >3 lf			-	Demolition	©] Mini-En Glové ba Non-Exe	closure g Procedi npted (*)	ure / Wra and Non-	p & Cut Friable F	rocedu
 3 sf or >3 lf ≥ 160 sf or ≥ 260	If Is Location	n Norma	Illy Used	Demolition Description of As	spestos Containing Material] Mini-En Glové ba Non-Exe Am	closure g Procedo mpted (*) ount	ure / Wra and Non-	p & Cut	rocedu
© ≥ 3 sf or >3 lf □ ≥ 160 sf or ≥ 260 Location of Asbestos-Containing	If Is Location Solely by I	Maint./C	Illy Used	Demolition Description of As (ACM) (i.e. there	bestos Containing Material	Mini-En Glové ba Non-Exe Am ng, (Sp	closure g Procedu mpted (*) ount ecify SF	ure / Wra and Non- Abatem	p & Cut Friable F	rocedu
 3 sf or >3 lf ≥ 160 sf or ≥ 260	Is Location Solely by I Staff? (12)	Maint./C)	ally Used Custodial	Demolition Description of As	bestos Containing Material] Mini-En Glové ba Non-Exe Am	closure g Procedu mpted (*) ount ecify SF	ure / Wra and Non- Abatem	p & Cut Friable F lent Type	rocedu
© ≥ 3 sf or >3 lf □ ≥ 160 sf or ≥ 260 Location of Asbestos-Containing	If Is Location Solely by I	Maint./C	Illy Used	Demolition Description of As (ACM) (i.e. there	bestos Containing Material	Mini-En Glové ba Non-Exe Am ng, (Sp or I	closure g Procedo mpted (*) ount ecify SF F)	and Non- Abatem	p & Cut Friable F lent Type	rocedu
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© ≥ 3 sf or >3 lf □ ≥ 160 sf or ≥ 260 Location of Asbestos-Containing	Is Location Solely by I Staff? (12)	Maint./C)	ally Used Custodial	Demolition Description of As (ACM) (i.e. there	bestos Containing Material	Mini-En Glové ba Non-Exe Am ng, (Sp or I	closure g Procedo mpted (*) ount ecify SF F)	and Non- Abatem	p & Cut Friable F lent Type	rocedu
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©≥ 3 sf or >3 if □≥ 160 sf or ≥ 260 Location of Asbestos-Containing Material (ACM) in Facility (13) R-B66 Name of Reg. Waste Hauler See Hauler Below #1 & 2 Hauler #1) Greenwood Abatement MADIEF # 12561 Strater #2) Newsylt Cardag, Inc. Ptd DIEF # 4232	Is Location Solely by I Staff? (12) YES NILL SE SE CORRURA NILL SE	DEP Was Refo	illy Used Custodial NA Saste Hauler	Description of As (ACM) (i.e. them VAT, or other mi	Sbestos Containing Material mal systems insulation, surfacing scell.) Cubic Yards of Waste:	Mini-En Glové ba Glové ba Non-Exe Amng, (Sp or I	closure g Procedu mpted (*) ount ecify SF F) Name G.R	Abatem Remove Enclose of Regis O.W.S.	p & Cut Friable F ent Type Repair I tered Lar Morth 1 City, Stat 100 New (d. Norwys)37	Encap Encap Indfill Landfill Sord Parista,
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©≥ 3 sf or >3 if □≥ 160 sf or ≥ 260 Location of Asbestos-Containing Material (ACM) in Facility (13) R-B66 Name of Reg. Waste Hauler See Hauler Below #1 & 2 Haufer #1) Greenwood Abatement Manual #1 (256) Elsever #2) Newbork Cardag, Les. Pla DIEF # 4836	Is Location Solely by I Staff? (12) YES Note that I Staff?	Maint./C) NO DEP Wasse Relo	Illy Used Custodial NA	Description of As (ACM) (i.e. therr VAT, or other mi	Sbestos Containing Material mal systems insulation, surfacing scell.) Cubic Yards of Waste:	Mini-En Glové ba Non-Exe Non-Exe Am ng, (Sp or I 20 CY	closure g Procedu mpted (*) ount ecify SF F) Name G.R Date	Abatem Remove Enclose of Regis O.W.S.	p & Cut Friable F ent Type Repair I I tered Lar Morth I City, Stat 100 New 34, Morty 9337 115-738-	Encap Encap Indfill Landfill Sord Parista,



AC Fraissit Vall-16				Name of Building Owner	Congrati	n: (2)				7.10	STATE OF THE PARTY
Date of Motification (1) May 29, 20	i.F			RUTGERS, THE S	TATE	THAIN!	ingn	iv of N	IJ		
Agencies Motified EPA BI DCA MI DOL	Notification Minitial Amen Ener	Motificat ded Notifi gency (li ication)	ion : fication # ncluding	Street Address ENVIROUMENT &L TA STREET 1603, I City, State, Zip Code PISCATAWAY, MJ	BLDG	2113, L		ETY DE	U CAR	(EKS) (FUS	
图 DEP- No Longer REQUIRED。 图 DOH	□Cance	died		Name of Contact MICHAEL F. SMITI MEALTH & SAFET		- 1		145-255			
Appendix provides the fourth and a second se			FACILITY INF	ORMATION							
Name of Facility Where Abatement in RWJMS RESEARCH TOW	Taking Place (3 ER, BLDG&	3686		Type of Facility (4) School (K-12) SSubchapter 8 (other the	an K-12))					
Street Address RBMS PISCATAWAY CAR	iPUS			Other (i.e. private & co	mmercia # of Flo	al buildin oors: 8	gs, hon <u>Blda.</u>	nes, etc.) <u>. A.ge:</u>	0- ys	irs	
	i <u>v (6)</u> IDDLESEX		Code (7) Ise Only)	Current Use (prior if bein	ng demo	olished):	ACA	CERNIC			
Name of Monitoring Firm Hired by B ATC	dg. Owner (8)	ASCM 1 0002		Name of Contractor (9) GREENWOOD ASA	TEME	INT CC	MSU	LTANTS	i, NiC		
Street Address 3 TERRI LAME				Street Address 511 MAIN STREET							
City, State, Zip Code BURLINGTON, NJ 080				City Stale. ZipCode BUTLER, NJ 07405	3			e Number			
Project Manager for Monitoring Firm BRIAN R. KEARNEY	Telephone 609-38	Number 6-8800		Telephone Number 973-492-0477			0084				
Scheduled Start Date (10) 06/08/18	D6/20/1	8	in Dale (11)	Name of OSHA Monitor ENVIROVISION, IN	IC.						
Occupancy Status During Abatem Facility Closed/Vacated During	Entire Period of	Abatemen	t	Street Address 20-21 WARGARAV	V ROA	D, BLI	OG# 3	5E			
■ Abatement Performed Outside Describe: Schedule: 3PM - 5Al NEEDED) ■ Facility Occupied During Abate □ Other- Describe:	va (24 HRS. &	iy Hours - WEEKER	7am -3pm IOS AS	City, State, Zip Code FAIRLAWN, NJ 074	310	and a second					
Scope of Work (Check all that apply)			1	(S) Fig.	Contain	ment vi	nih Negal	ive Pre	ssure	-
			Renovation Demolition		☐ Mir	ni-Enclos /e bag F	sure Procedu	ure / Wrap and Non-	c & Cut Friable	Proced	иге
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Norm Solely by Maint. Staff? (12) YES NO	nally Used 'Custodial NA	Description of As (ACM) (i.e. therr VAT, or other mis	bestos Containing Material nal systems insulation, surfa scell.)		Amour (Specifi or LF)	rt	Abatem	ent Typo Repair	2	
R-866			TSI			80 8	}F		1		
			<u> </u>						+	-	-
Name of Reg. Waste Hauler See Flauler Below #1 & 2	NJDEP V	laste Haule	l er ID#	Cubic Yards of Waste:	100	CY	Name G.R.	I e of Regist .O.W.S.	l ered La North	ndfill Landf	310
Hauter #1) Greenwood Abatemen MJDEF # 12561 Hauter #2) Plant of Cardog, Ivc., MJ DEF # 2598	Consultants, Inc	. – Builer,	NJ 07405			oosal Da			Dity, Sta 100 New Rd, 640F 12037 113-739	r Ford (visville	
Completed by (Print or Type)	Title			Signature Raymond & S	Redak	Wo-	Date Sit.	122, 20	9E		

Copies To: Rungers, KEHS, Attn: Mike Smith and ATC, Attn: Brian Keamey



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

GAC Project # 060-18

GACTIOJCCC # 000-10												
Date of Notification (1) August 17	7 2018				Name of Building Owner RUTGERS, THE S		VEDS	ITV O	ENI			
Agencies Notified EPA	1	Notification Initial	Votifica	tion tification # 1-	Street Address ENVIRONMENTAL 74 STREET 1603, B	HEALTH	& SAI	ETY	DEP.	T. (F		
D DCA	10.0	TYPO Lo			City, State, Zip Code							
DEP- No Longer REQUIRED	,		gency (cation)	including	PISCATAWAY, NJ Name of Contact	08854,	Teter	hone N	i l mhe	η η (7 (**)	affiliaming of the purpose in the purpose
⊠ DOH		□Cance			MICHAEL F. SMITH			445-2				
				FACILITY INF								
Name of Facility Where Abatement DOUGLASS DISABILITIE			LDG#	8370	Type of Facility (4) School (K-12) Subchapter 8 (other that	n K-12)	The W. Law Street, San Law Str	AUG	24	2018	3	W
Street Address DOUGLASS CAMPUS					Other (i.e. private & co	mmercial build of Floors:	dings#9	inescet	N804	ITR(OL &	Alloy Stranger
	unty (6) VIIDDLE	ESEX		Code (7) Use Only)	Current Use (prior if being			the Control of the Co		erander-store	Mestales	name and a second
Name of Monitoring Firm Hired by	Bldg. Owr	ner (8)	ASCM		Name of Contractor (9)							
ATC			0009	18	GREENWOOD ABA	TEMENT	ONSI	II TAN	ו פדו	NC		
Street Address					Street Address	I LIVILIA I C	ONSC) L P()	110, 1	140.		
3 TERRI LANE					511 MAIN STREET							
City, State, Zip Code BURLINGTON, NJ 080	016				City State, ZipCode							
Project Manager for Monitoring Firm		elephone I	Number		BUTLER, NJ 07405 Telephone Number		Licens	se Numb	per	700	-	
BRIAN R. KEARNEY	1000	609-386			973-492-0477		0084	encrese :	-			
Scheduled Start Date (10) 08/17/18	1000	Scheduled (3/20/18	Completio	on Date (11)	Name of OSHA Monitor ENVIROVISION, INC	5.						
Occupancy Status During Abater Facility Closed/Vacated During	g Entire P	Period of A	batemen	t	Street Address 20-21 WARGARAW	ROAD, BL	.DG# 3	35E				
☐Abatement Performed Outside Describe:					City, State, Zip Code FAIRLAWN, NJ 074	10	00 11 F 0F 11 E 12 E 1					
⊠ Other- Describe: Schedule: WEEKENDS AS NEEDED)	5PM – 5	iAM Daily	y (24 HC	OURS &	FAIRLAWN, NO 074	10						
Scope of Work (Check all that appl	y)					***************************************				-		-
D> 2 of or > 2 if				٠,		Full Contain		ith Nega	ative F	ress	ure	
$\square \ge 3 \text{ sf or } > 3 \text{ lf}$ $\boxtimes \square \ge 160 \text{ sf or } \ge 260$	lf		ı	Renovation Demolition	72	I Mini-Enclos Glove bag		ure / Wr	ran &	Cut		
	**					Non-Exem			100		roced	lure
Location of Asbestos-Containing Material (ACM) in Facility (13)		tion Normal by Maint./Co 12) NO			pestos Containing Material al systems insulation, surfaci cell.)	ing, (Specior LF)	fy SF	Abate Remov	5,000		ncap I	Enclose
Room 110		X		VAT		300	SF	X	T	T		
Name of Reg. Waste Hauler See Hauler Below #1 & 2		See Belov		r ID#	Cubic Yards of Waste:	10 CY		of Regi				11
Hauler #1) Greenwood Abatemen	t Consulta	ants, Inc	Butler,	NJ 07405		Disposal Da	te		City.	ALCOHOLD STREET, STREE		*:11
NJDEP # 12561 Hauler #2) Newark Carting, Inc., NJ DEP # 4509	Newark, l	NJ 04509				08/20/20	18			lorris 7	ord N sville, 700	
Completed by (Print or Type)	Title	-	DO :=:	\	Signature		Date			4.0		
RAYMOND C. PEDALING		NIOR P NAGEF		<i>)</i> [Raymond C. Po	dalino	Aug	ust 17	, 20	18		

Copies To: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney



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

GAC Project # 060-18

Date of Notification (1)					Name of Building Owner/							
August Agencies Notified	7, 201	8 Notification	Typo		RUTGERS, THE ST	TATE UNI	VERS	ITY O	F N.	J		
		X Initial		ation	Street Address ENVIRONMENTAL	HEALTH	& SAF	ETY	DEF	т. (REH	S)
□ EPA				ification#	74 STREET 1603, E							
DCA				including	City, State, Zip Code							
DOL DEP- No Longer REQUIR	PED		cation)		PISCATAWAY, NJ	08854	Γ= .			28.74		
DOH DOH	(ED:	□ Cance	lled		Name of Contact MICHAEL F. SMITH	I ENV		hone N 445-2		-	marriage, again, and	~
					HEALTH & SAFET			F 1		E	In	1
				FACILITY IN	FORMATION	1107 12		L T		افسددورمرو	-11	
Name of Facility Where Abatem				0070	Type of Facility (4)	IIII	Room Control of the C				Delication of the second	A COLOR MAN
DOUGLASS DISABILI	HES C	ENIEK, B	LDG# (5370	School (K-12) Subchapter 8 (other than	110011	1110	2 A	20	18		
Street Address					Other (i.e. private & co		AUI.	mes et	c.)	10	diam'r.	-
DOUGLASS CAMPUS					Sa. Feet: N/A #	of Floors: 2	2 Bldc	. Age:	80	+ ye	ars	4400
City (5)	County (6			Code (7)	Current Use (prior if being		SBES	TOS C	ONT	ROL	. &r.	
NEW BRUNSWICK	MIDE	LESEX	(State I	Jse Only)	Current Use (prior if being	g demolished): AC	ADEMIC	INC	A apparation	Laurent de la company	en de de meio
	***					Land of the party	A STATE OF THE STA				4 C	
Name of Monitoring Firm Hired ATC	by Bldg.	Owner (8)	0009		Name of Contractor (9)							
AIC			0009	10	GREENWOOD ABA	TEMENT C	ONSU	ILTAN	TS,	INC		
Street Address					Street Address							
3 TERRI LANE					511 MAIN STREET							
City, State, Zip Code					City State, ZipCode							
	08016				BUTLER, NJ 07405							
Project Manager for Monitoring	Firm	Telephone			Telephone Number		Licens	se Numb	oer			
BRIAN R. KEARNEY		609-386	6-8800		973-492-0477		0084	LO.				
Scheduled Start Date (10)		Scheduled	Completio	on Date (11)	Name of OSHA Monitor		0007	10		-		VI - 10
08/17/18		8/20/18			ENVIROVISION, INC	C				200000000		
Occupancy Status During Aba					Street Address	DOAD BI	DC# 2					
☐Facility Closed/Vacated Du ☐Abatement Performed Outs				ıt	20-21 WARGARAW	KUAD, BL	DG# 3)SE				
Describe:	3100 01 140	ormai r domey	riours -		City, State, Zip Code							
Other- Describe: Schedul		 5AM Dail 	y (24 H	OURS &	FAIRLAWN, NJ 074	10						
WEEKENDS AS NEEDEL	D)											
Scope of Work (Check all that a	apply)				_				97			
D . 2.424				V D		Full Contain		ith Nega	ative	Press	sure	
$\square \ge 3 \text{ sf or } > 3 \text{ lf}$ $\boxtimes \square \ge 160 \text{ sf or } \ge 2$	en If			■Renovation Demolition		I Mini-Enclos I Glove bag		uro / Wr	ran 8	Cut		
<u> </u>	.00 11			Demonton		Non-Exemp					Proced	lure
Location of Asbestos-Containin		ocation Norma			bestos Containing Material	Amour	nt	Abate				
Material (ACM) in Facility (13)		ely by Maint./C f? (12)	ustodial	(ACM) (i.e. therm VAT, or other mis	nal systems insulation, surfact	ing, (Speci or LF)		Remov	e Re	epair E	ncap	Enclose
	YES		NA		,	0. 2. ,						
Room 4-124 Suite		X		VAT		300	SF	X				
Name of Reg. Waste Hauler		NJDEP Wa		r ID #	Cubic Yards of Waste:	10 CY		of Regi				
See Hauler Below #1 & 2		See Belo	70					O.W.S				11
Hauler #1) Greenwood Abater NJDEP # 12561	nent Cons	sultants, Inc	- Butler, I	NJ 07405		Disposal Da	<u>te</u>			. State	Ford N	/iiii
Hauler #2) Newark Carting, In	nc., Newa	rk, NJ 04509			11	08/20/20	18		Rd.	Morri	sville,	
NJ DEP# 4509						50/20/20			190	67 -736-1	700	
Completed by (Print or Type)	T	Title			Signature		Date					
RAYMOND C. PEDALI	and the second s	SENIOR P	ROJE	CT	Raymond C. To	Delation-	and the same of th	ust 7,	201	18		
	and the second	MANAGE			Raymona V. De	aaaaa						

Copies To: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney



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

GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) August 20, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address □Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) ☐ EPA ☐ Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS DCA ■ Emergency (including City, State, Zip Code X DOL PISCATAWAY, NJ 08854 justification) DEP- No Longer REQUIRED Name of Contact Telephone Number \// **X**Cancelled X DOH MICHAEL F. SMITH, ENV. 848-445-2550 **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) LOUIS BROWN ATHLETIC CENTER, BLDG# 4156 School (K-12) ☐Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) LIVINGSTON CAMPUS # of Floors: N/A Bldg. Age: 60+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): Exterior Trench Duct Bank **PISCATAWAY** (State Use Only) MIDDLESEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/20/18 09/10/18 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 3PM - 5AM Daily (24 HOURS & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure $\square \ge 3 \text{ sf or } > 3 \text{ lf}$ X Renovation ☐ Mini-Enclosure \ge 160 sf or \ge 260 lf Demolition Glove bag Procedure / Wrap & Cut ☑Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Conduit Duct Bank (Exterior X Transite 400 LF X Trench) NJDEP Waste Hauler ID # Name of Reg. Waste Hauler Name of Registered Landfill Cubic Yards of Waste: 200 CY See Hauler Below #1 & 2 G.R.O.W.S. North Landfill See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509

Signature

Raymond C. Pedalino

09/10/2018

Date

19067

August 10, 2018

215-736-1700

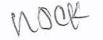
MANAGER

SENIOR PROJECT

NJ DEP# 4509

Completed by (Print or Type)

RAYMOND C. PEDALINO



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

GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) August 1, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ☑Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) **EPA** ☐ Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS DCA ■ Emergency (including City, State, Zip Code X DOL PISCATAWAY, NJ 08854 justification) DEP- No Longer REQUIRED Name of Contact □Cancelled Telephone Number-X DOH MICHAEL F. SMITH, ENV. 848-445-2550 **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) AUG 2 4 2018 LOUIS BROWN ATHLETIC CENTER, BLDG# 4156 School (K-12) Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) LIVINGSTON CAMPUS # of Floors: N/A Bldg. Age: 60+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): Exterior Trench Duct Bank **PISCATAWAY** (State Use Only) MIDDLESEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/10/18 09/10/18 ENVIROVISION, INC. Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E ■Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 3PM - 5AM Daily (24 HOURS & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure $\square \ge 3 \text{ sf or } > 3 \text{ If}$ **X** Renovation ☐ Mini-Enclosure X ≥ 160 sf or > 260 lf Demolition ☐ Glove bag Procedure / Wrap & Cut X Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Description of Asbestos Containing Material Is Location Normally Used Amount Abatement Type Material (ACM) in Facility (13) (Specify SF Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Conduit Duct Bank (Exterior X Transite 400 LF X Trench) Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cubic Yards of Waste: 200 CY See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 09/10/2018 19067 NJ DEP# 4509 215-736-1700 Completed by (Print or Type) Signature SENIOR PROJECT RAYMOND C. PEDALINO August 1, 2018 Raymond C. Pedalino MANAGER



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

GAC Project # 060-18												
Date of Notification (1)	7 204	0			Name of Building Owne							
August 1 Agencies Notified	7, 201	Notification	Type		Street Address	SIAIE	JNIVERS	SITY)F N	IJ		
		MInitial		ation	ENVIRONMENTAL	HEAL	TH & SA	FETY	DE	PT /	REH	S)
□ EPA				tification #	74 STREET 1603,							
D DCA		☐ Emer	gency ((including	City, State, Zip Code		,					
☑ DOL ☑ DEP- No Longer REQUIRED	,		cation)		PISCATAWAY, NJ	08854	-	Zintali a samilarinasi		-	and produced the graph of	No beliance to see
DOH DEP- NO Longer REQUIREL	, [□ Cance	lled		Name of Contact			phone I			\mathbb{W}	
					MICHAEL F. SMIT HEALTH & SAFET		848	-445-2	2551	0	Leaf (
				FACILITY IN	FORMATION	Y						
Name of Facility Where Abatemen	t is Taki	ing Place (3)		771012177711	Type of Facility (4)			AUG	2	4 2	018	115
CORWIN LODGE, BLDG	# 834	0			School (K-12)		-			100	17 (17)	1. Table
Street Address					Subchapter 8 (other that	an K-12)	[L	Personal and the			TOTAL TOTAL SPACE	<u></u>
DOUGLASS CAMPUS					Other (i.e. private & co	ommercial # of Floo	buildings, k	omes, e a. Age	te.)	CON D∓lye	ROL ars	&t
	unty (6)		County	Code (7)				*		**************************************	and the second	
NEW BRUNSWICK	MIDDL	LESEX	(State	Use Only)	Current Use (prior if beir	ng demolis	shed): AC	ADEMI	С			
Name of Monitoring Firm Hired by	Blda Os	wner (8)	ASCM	No	Name of Contractor (9)							
ATC	Diag. O	WHICH (U)	0009		Name of Contractor (9)							
					GREENWOOD ABA	TEMEN	T CONS	ULTAN	NTS	, INC		
Street Address 3 TERRI LANE					Street Address	X-10-2						
City, State, Zip Code					511 MAIN STREET							
	016				City State, ZipCode BUTLER, NJ 07405							
Project Manager for Monitoring Fire		Telephone i	Number		Telephone Number		Licer	se Num	ber	-		
BRIAN R. KEARNEY		609-386	-8800		973-492-0477							
Scheduled Start Date (10)		Scheduled (Completic	on Date (11)	Name of OSHA Monitor		008	40				
08/27/18		8/30/18			ENVIROVISION, IN	C.						
Occupancy Status During Abater				720	Street Address							
☐Facility Closed/Vacated During ☐Abatement Performed Outside				nt	20-21 WARGARAW	ROAD,	BLDG#	35E				
Describe:	OI NOII	mai Facility	nouis -		City, State, Zip Code	2-2404						
Other- Describe: Schedule:	3PM -	5AM Daily	/ (24 H	OURS &	FAIRLAWN, NJ 074	10						
WEEKENDS AS NEEDED)												
Scope of Work (Check all that apply	у)					_						
X ≥ 3 sf or >3 lf				⊠ Renovation			ntainment v	with Neg	gativ	e Pres	sure	
$\square \ge 160 \text{ sf or } \ge 260$	lf			Demolition		Mini-En	iciosure bag Procei	duro (M	Iron	9 Cut		
							empted (*)					ure
Location of Asbestos-Containing		ation Normal			bestos Containing Material	An	nount			t Type		
Material (ACM) in Facility (13)	Solely Staff?	by Maint./Cu (12)	istodial	(ACM) (i.e. therm VAT, or other mis	nal systems insulation, surfac		pecify SF LF)	Remov	e R	epair E	ncap	Enclose
	YES	NO	NA				_1 /					
Room 005, 006		X		TSI		<	9 LF	X	Т			1
								-	\dashv			
Name of Reg. Waste Hauler		NJDEP Was		r ID #	Cubic Yards of Waste:	5 CY	-	of Regi				
See Hauler Below #1 & 2		See Below					G.R.	O.W.S	. No	rth L	andfi	II
Hauler #1) Greenwood Abatement NJDEP # 12561	t Consul	Itants, Inc. –	Butler, N	NJ 07405		Disposal	Date			. State		
Hauler #2) Newark Carting, Inc., 1	Newark.	NJ 04509				00/00/	0040				Ford N sville,	
NJ DEP# 4509	100	50				08/30/	2018		190	67	. 9-2	
Completed by (Brief or True)	771	u =			I o: .		T =		215	-736-1	700	
Completed by (Print or Type) RAYMOND C. PEDALINO) It	<u>le</u> ENIOR PI	SUIEC	`T	<u>Signature</u>	an	Date	uct 47	7 2	040		
	45	ANAGER			Raymond C. Ti	rdalino	Aug	ust 17	, 2	UIO		
			70		L							



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

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Date of Notification (1) 08/17/2018					f Building (ummit C		Operator	r (2)	(), <u>E</u>	G I		W L	27		O Christian Company	
Agencies Notified	Type Notification			Street A 720 St	ddress ummit A	venue		D-A-46-24		WG.	2 4 2	018	and the second		- Carried Color (San	
× EPA × DEP × DOL	Amended Amendment		_		ite, Zip Co nsack, N		01	and and and and and and	100			and the second second	Character		entition of all the	
DOH DCA	Emergency justification) Cancellation				Contact Bill Vor	Huse	n	Manual Procession	ASSE		ephone 1-906-				a constraint of the constraint	
				FACI	LITY INFO	RMATI	ON									
Name of Facility Where A Church	Abatement is Takin	g Place (3	3)					Тур	e of Facility (4 School (K-1)	(2)						
Street Address 720 Summit Avenue	Э							×	Subchapter Other (i.e. p etc.)				uild	ings,	home	es,
City (5) Hackensack								Squ N/A	are Feet	# o	f Floors A			dg. A	ge	
County (6) Bergen				County (Code (7) USE ONLY)				rent Use (Pric	or if bei	ing demo	lished)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN	1 No.		100	of At	patement Con atement, In		(9)					
Street Address							Street 11 R	North Artes	ess ngren Aver	iue						
City, State, Zip Code									Zip Code NJ 07512							
Project Manager for Mon	itoring Firm		Telepho	ne No.		Telepl	hone			License 01311			-			
Start Date (10) 08/28/2018		Schedule 08/29/2		mpletion I	Date (11)				SHA Monitor atement, Inc	C.						
Occupancy Status During	Abatement (Chec	k Only Or	ne)				Street									
Facility Closed/Vaca Abatement Perform									ngren Aven	iue						
Other – Describe:	Occupied						00000		NJ 07512							
Scope of Work (Check A	ll That Apply)								2.50					22335		
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Asbestos-Containing TO BE AB/ In Facili (13)	ATED	Ma	intena todial (12)	ince/		thermal surfa		is insu AT, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
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Daseille	3111		^				VAI			4;	50 SF	1	2			
Name of Registered Was			15/35	NJDEP W Hauler ID		Cubic of Wa	Yards		Name of F							
D&S Abatement, Inc				0996	140.	TBD	3.6		Waste N	/lana	gemen	t of P	Α			
City, State Totowa, NJ						Dispo: TBD	sal Date) /	City, State Morrisvi		A					
Completed by Oliver Hegedis		Title Proje	ect Ma	anager		S	Signature		1/_	Name and Address of the Owner, where the Owner, which is the Ow		Date 08/1	7/2	018		



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

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Date of Notification (1) 08/20/18	Check # 3238				f Building (Charter			(2)			er en	U11-1-01			Antoningerpressible to be historically to be the second of	The Section prompts of the Control o	
Agencies Notified	Type Notification			Street A	ddress nerman /	Ave			The second	And the state of t	AUG	2.4	201	8	To have	James	
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□ DOH	Emergency (i justification)	ncluding			Contact	aaanh	<u> </u>	10000	Louis		Tet	ephone	Num		CLIII ARTONIA	Sune I	
☐ DCA	Cancellation			ILADIC PINCTO G	George J						20	1-798	-790	0			
Name of Facility Where	Abatement is Taking	Place (3	3)	FACI	LITY INFO	RMAII	ON	Typ	e of F	acility (4)						
METS Charter Sch										ool (K-1							
Street Address 211 Sherman Ave								×	Sub	chapter er (i.e. p	8 (Oth				lings,	home	s,
City (5) Jersey City				-				881345	uare F	eet	# of	f Floors	1		ldg. A 0+	ge	
County (6) Hudson				County (Code (7) USE ONLY)		_		rent (Jse (Pri	or if bei	ng den	nolish	ed)			
Name of Monitoring Firm N/A	Hired by Building C	wner (8)		ASCN	1 No.	-	Name EA S			ent Cor	ntractor	(9)					
Street Address N/A							Street 426										
City, State, Zip Code N/A							City, S Gutte			ode NJ, 07	093					-1.5-1.6-7-1	
Project Manager for Mor	nitoring Firm			Telephor	ne No.		Teleph					Licen).			
N/A Start Date (10)		Cahadul	ad Ca	N/A	Date (11)		201-			O Monitor		0107	74				
08/21/18		08/23/	18	mpledorri	Date (11)		N/A			VIOITILOI							
Occupancy Status Durin	5	23					Street N/A	Addr	ress								
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire P ned Outside of Norma 11am	eriod of all Facility	Abater y Hour	ment s		_	City, S	State,	Zip C	ode				2500			
Scope of Work (Check A	III That Apply)																
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		le le	Loca	tion			Ķ	<u> </u>	NOTI-L	Kemple	u () air	u IVOII-	Habi		Abate		
Location	n of	1 1	Norma	lly		Des	scription	of							Ту	ре	
Asbestos-Containing <u>TO BE AB</u> In Faci (13)	ATED lity	Ma	ed Sole aintena todial (12)	ance/ Staff?		tos Cont thermal surfa	aining N	Mater s insu T, or	ulation		(5	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A			(6)									(D	
Room :	308	-	Х			ACM	l Floor	Tile	9		3	SF		X			
		-															
Name of Registered Wa	ste Hauler			NJDEP W	/aste	Cubic	Yards		IN	ame of	Registe	ered La	ndfill				
Tri-State Transfer A				Hauler ID 9551		of Was	ste		N	linerva	a Entr						
City, State Bronx, NY	Minera III					Dispos TBD	sal Date		OV	ity, Stat Vayne		, ОН					
Completed by		Title				S	Signature		20	1			Dat				
Gina Betances		Offic	e Ma	nager					Plu	W		MF	08	/20/	18		



State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

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Date of Notification (1) 08/20/18	Check # 3239				Building O			(2)		A I I I	2 2 /	2010	Management of the second	The state of the s		
Agencies Notified	Type Notification		1 7	Street Ad 156 Ha	dress ncock A	ve		The state of the s	II LI	HOI	0 2 4	F 4010	- Paragram	201		
DEP DOL	Initial Amended Amendment #				e, Zip Cod City, NJ,)7	Common opening Co.	F		ICENS					
DOH DCA	Emergency (in justification) Cancellation	cluding		Name of Rev. G	Contact eorge Jo	seph						one Nun 798-790				
				FACIL	ITY INFO	RMATI	ON									
Name of Facility Where Saint Paul of the C		Place (3)						Тур		ol (K-12)						
Street Address 156 Hancock Ave								×	Subch Other etc.)	napter 8 (i.e. priv	(Other t	han K-12 ommercia) al build	ings,	nomes	3,
City (5) Jersey City									uare Fe 0,000+	et	# of FI 2	oors	22.53	dg. Aq)+	je	
County (6) Hudson				County C	Code (7)			5 (6) (7) (6)	irrent Us hurch	e (Prior i	if being	demolish	ed)			
Name of Monitoring Fir	m Hired by Building Ov	vner (8)		ASCM	No.		Name EA S			nt Contra	actor (9))				
Street Address N/A		-1					Street 426									
City, State, Zip Code									, Zip Co	de J, 0709	33					
N/A	- it - it Fire			Telephor	no No		Telepi		0.	0, 0700		icense N	0			
Project Manager for Mo N/A				N/A			201-	295	5-1700		1 88	1074				
Start Date (10) 08/21/18		Scheduled 08/23/18		npletion [Date (11)		Name N/A	of C	OSHA M	onitor						
Occupancy Status Dur							Street N/A	t Add	iress							
Facility Closed/Va Abatement Perfor Other – Describe:	acated During Entire Permed Outside of Norma 12am	I Facility	Hours	nent		_	City, S		e, Zip Co	ode						
Scope of Work (Check	All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit						Mini-En Gloveba	closure ag Proce	dure	legative F			2	
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		Yes	100000	INA		ONE	Nin n In		ation.		0	LF	X			
Base	ment		X	-	A	CIVI F	Pipe In:	sula	ation		9		Δ			
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Name of Registered V	Vaste Hauler		1000	NJDEP V			c Yards		Na	ame of R	egistere	ed Landfil	I T			
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City, State Bronx, NY					1	TBD				ty, State /aynest						
Completed by Gina Betances		Title Office	е Ма	nager			Signatu	re	BX				ate 8/20/	18		