

Date of Notification (1) August 21, 2014				Building Owne ninson Boar			k # N/A		_			
Agencies Notified	Type Notification		Street Ad				7 .				(100) (100)	
EPA DEP DOL	Initial Amended Amendment			te, Zip Code ninson, NJ (08077	AUG 2	F ONTA			*		
X DOH	Emergency justification)		Name of Mark T			A(1)(7 Z	Telenh	none Num	h			
□ DCA	Cancellation		The second second second	THE CONTRACTOR OF THE CONTRACT	71011							
Name of Facility Where	Ahatement is Takin	n Place (3)	FACII	LITY INFORMA	ATION	Type of Facility	(4)	_				- 50
Memorial School	Abdicino it is Takin	g 1 1000 (0)	373			School (K-1						
Street Address 905 US 130				*		Subchapter Other (i.e. petc.)				lings,	home	es,
City (5) Cinnaminson				32		Square Feet 10,000	# of FI 2	oors	700	ldg. A	ge	
County (6) Burlington		¥7	County C	Code (7) JSE ONLY)		Current Use (Pri School	ior if being	demolish	ed)			
Name of Monitoring Firm Management & En			ASCN	l No.	76.000000000	of Abatement Co de Environmer						
Street Address PO Box 341	3				Street	Address Cutler Avenue			-20-30			
City, State, Zip Code Chesterfield, NJ 08	2515				City, S	State, Zip Code le Shade, NJ (-	
Project Manager for Mo	100000000000000000000000000000000000000		Telepho		Telepi	hone No.	TL	icense No).			
Lou Lauretti Start Date (10)		Scheduled (98-4070 Date (11)	3040000000	755-0099 of OSHA Monitor		0842			-	
August 29, 2014		Septembe				L Laboratories	S					
Occupancy Status Durin	ng Abatement (Che	ck Only One)				Address	rth.					
	cated During Entire ned Outside of Norr				City, S	Route 130 Noi State, Zip Code naminson, NJ (<u> </u>	
Scope of Work (Check	All That Apply)				Oilli	14711175071, 740						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		The state of the s	ovation olition			Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	re ocedure				e	
		lala	cation				l James			Service Secretary	ement	t
Locatio	n of		nally		Description	o of				Ту	pe	
Asbestos-Containin TO BE AB In Fac (13)	g Material (ACM) BATED illity	Mainte Custodi (1	olely by enance/ al Staff? 2)	Asbestos C (i.e. therr su	cntaining !	Material (ACM) is insulation, AT, or	Amo (Spe SF o	ecify	Removal	Repair	Encapsulate	Enclosure
Boiler F	Room	XXX	10/1	Pipe Insu	ılation (V	Vrap & Cut)	20	LF	Х			
Name of Registered Wa	aste Hauler		NJDEP W		bic Yards	Name of	Registere	d Landfill				
Freehold Cartage			Hauler ID 22253	No. of \ 5	Waste	Wester	rn Berks	Commu	unity	Lan	dfill	
City, State Freehold, NJ				10000000	posal Date 2/2014		ite oro, PA			30062		
Completed by Christina Lynch		Title Operati	ons Mana	iger	Software	and 2	~	Da 8/2	te 21/20)14		

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Check #: 6026

Initial Notification

Date of Notification	n (1)			Name	of B	uild	ing	Owner/G	Operato	ī (2)						
0 8 / 1		4	1	1				nools						5 8	1.5		
	Type Notif			Street			10000	10013			26	114 A	JG 22				
(X)EPA	-4			200	edar (Strac	at				(37. 1		16 22	4.11		55	
	[X]Initi	al icat	ion	1				Code									
(X) DEP	[]Amend		1	New	ark,	N.I.O	7102	,				0.5			1.,		
(X) DOL	Notif	icat	ion		of						Teleph	one i	lumber	12.	!		
(X) DOH	[]Cance	llat	ion			Dlan	ا ا	us Adı	min		6						
[X]DCA				Dou				us. Adı									-
			- Pa	ring b				FORMAT:	ION	Ty	pe of Facility	y (4)					77
Name of Facility W	ihere Abatem	ent	15 14	ring i					1	-	Nicebee!	(K-12	١.		. v.	121	
Mount Vernon Elem	entary Scho	ol									[]Subchap	ter 8	orival	ce &	COMMI		
Street Address									1	200	min T his	11011	gs, hor	nes.	err.	,	
142 Mt. Vernon Pla	ce									1	-000	,		80			
City (5)			County	(6)	(V.S 11)			TE USE		C	rrent Use (Pr	ior i	f bein	g den	olis	hed)	
Newark, NJ 07106		į	Essex							s	chool	755					_
Name of Monitoring	g Firm Hire	d by	Build	ing	ASCM	No.		Name o	f Abate	emer	it Contractor	(9)					
Owner (8)					0000			Four S	Strona E	Build	ders, Inc.		232				_
TTI Environmental,	eet Address				0000	3	-1	Street	Addre	ss				57-8-9			
	53 North Church Street						1	180 S	argeant	: Av	enue						
1253 North Church	53 North Church Street ty. State. Zip Code							City.	State,	Zi	p Code						
	N 1 00057							Cliftor	n, NJ 07	013	3-1935		Licens	No.	-50-		
Project Manager E	porestown, NJ 08057				one	Numb	er	Telep	none Nu	mbe	r.				MDCL		
Jim Guillardi			18	356-84	40-88	300		973-6	14-037	7			00807				_
Scheduled Start D	ate (10)		ed.Com					Name	of OSHA	. Mo	nitor						
0 8 / 2 0 / Day	114	Min	1 8 1 / l	nav	/ 1	LEGL		Four	Strong I	Buil	ders, Inc.						
Occupancy Status	During Ada	ceme	nt (Cn	eck of	UTA C	me !		Stree	t Addre	285							
[]Facility Clo	sed/Vacated	1 Du	ring E	ntire	Per	Loa		180 5	Sargean	t A	venue						
[]Abatement Fe	erformed Out	tsid	le of N	ormal	Fac:	ilit	Y	City.	State.	. 21	ip Code						
Hours - Desc Other - Desc							_	Clifto	n, NJ 0	701	3						
Scope of Work (C	heck all th	at a	pply)						(X)Fu	11 (Containment wi	th N	egative	Pre	ssur	e	
[1Demol	ition			[X]	Reno	vati	on		r\mathbf{IMi}	ni-l	Enclosure bag Procedure						
(1)3 sf	or >3 lf sf or >260	1f							No	n-F	riable Procedu	ıre					
				Т	Is	П								Abat	emen	E	E
Too	ation of				mall				escript	ion	of	Am	ount	RE	R	N C A	C I
Asbesto	s-Containin	g			Jsed olely			Ma	stos-Co terial	(AC	M)	(Sp	ecify F or	MO	R E P	A P	1.
TO B	E ABATED				Main		i	nsulat	therma	rra	cing, var.		LF)	V A	A	S	5
in F	acility (13)			Cus	stodi aff()	al		or o	ther mi	.sce	llaneous)			î	Ř	Ĺ	B
**************************************				Yes	No	N/A		. 14				1.00	0 SF	X		•	-
Gymnasium					X		3 8000	ring Ma		_		275		\Diamond	-	-	-
Auditorium Stage	•				X			ring Ma				120		\Diamond	_	-	\vdash
Hallway			1.		X		Pipe	Insula	tion w/	ass	ociated fittings	120	LF		-	-	+
											Name of Regis	FOTO	Tandf	111	_		L
Name of Register	red Waste H	aule	r	N	JDEP	Was r ID	te No.	of Wa	Yards aste		Name of Regis	, cere	a panac				
Carrona Build	dore Inc			1	2609	9				3	G.R.O.W.S., I	nc.					_
Four Strong Build	uers, inc.			<u>'۔۔ا</u>				Dispo	osal Da	te	City. State	-300					
	9										Tullytown, PA						
Clifton, NJ Completed By (P	rint or Typ	e)	Title						Signat	une e				D	ate		Sur-
18				: مدام ۸	nictra	ntor			129		A, , -	_		8	3/19/	14	
Bilyana Kulakov	ska		Office	Admi	HISIT	2101							-			615116 6111 - 611	
ASB-41 JUN 95																G4	667

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

6HEEK 1001

Date of Notification (1) 7/17/14			f Building Owner/C SSA WALTON		(2)	e			- Trees	
Agencies Notified Type Notification			Address E. HAZELWOC	D AVE						
EPA Initial Amended Amendment			ate, Zip Code NAY, NJ			JUL 24	2014	11		
DOH Emergency (justification) Cancellation	moduling	Name o	of Contact ESSA	AU	G Z = Z() A	Telephone	Number			
		FAC	ILITY INFORMAT	ON					į	
Name of Facility Where Abatement is Takin ONE FAMILY	g Place (3)				Type of Facility (4) School (K-12)) 1				
Street Address 280-E. HAZELWOOD AVE.					Subchapter 8 Other (i.e. prietc.)			lings,	home	s,
City (5) RAHWAY					Square Feet 900	# of Floors 3		ldg. A -50	ge	
County (6) UNION	8		Code (7) USE ONLY)		Current Use (Prior N/A	if being dem	olished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASC	M No.		of Abatement Contr AGO ENVIRON		D.			
Street Address N/A					Address LAFAYETTE ST	TREET		-		
City, State, Zip Code N/A			SISSIFICATION CONTRACTOR OF THE PROPERTY OF TH		state, Zip Code VARK, NJ 0710	5				
Project Manager for Monitoring Firm		Teleph	one No.		none No. -491-0877	Licens 0124	se No. 10		5	
Start Date (10) 7/30/14	Scheduled 0 7/30/14	completion	Date (11)	Name EHS	of OSHA Monitor		3005.01			
Occupancy Status During Abatement (Chec	k Only One)			Street	Address					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm	Period of Abat	tement		743	2-WHITEPINE F	ROAD				
Other – Describe:	nai i dointy i io				HMOND VA. 23	237				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	✓ Reno	ovation		F	Full Containme	nt with Negati	ive Pressu	re		
≥160 sf or ≥260 lf	Dem	olition		21 21	Mini-Enclosure Glovebag Proce Non-Exempted	edure (*) and Non-F	Friable Pro	cedur	е	
	lala	cation				1		Abate		
Location of	1100	nally	D.	escription	o of			Ту	ре	_
Asbestos-Containing Material (ACM)		olely by nance/	Asbestos Cor	taining I	Material (ACM)	Amount			Ш	_
TO BE ABATED In Facility		al Staff?	(i.e. therma	l system acing, V	s insulation,	(Specify SF or LF)	Ren	Repair	ıcap	incl
(13)	(1	2)		miscella		J. J. J.	Remova	pair	Encapsulate	Enclosure
N. 10	Yes N	lo N/A	7				_		ite	e
BASEMENT .		X	PIPE INS	SULAT	ION (TSI)	110'	Х			
	+	_		- <u> </u>						
Name of Registered Waste Hauler TRI STATE INC.		NJDEP Hauler I		Yards aste	Name of F	Registered La	ndfill	*		
City, State			Dispo	sal Date	City, State				(Are. 27)	
Completed by	Title			Signatur	£ /_	_	Date	iA		
CARLOS GOMES	PRESI	DENT		1			7/17-	14		

08/28/2014 14:21

NO.000 8002

		HOTIFICATIO	Demo of New Jets XN OF ASHESTO! M (o NJAC 8:50 a	ABLATE			DOL	- 1	0 0)AY
Date of Natification (1) August 20, 2014			of Building Owner a Levinson	Operato		heck # 141	5 AUG		· ·	1/1
Agencies Notices Type Not DEP Type Not Ame			Address Court				10	411	47	,
E DOL Ame	ended endmont \$ engency (including	Haind	ints, Zip Code sport, NJ 0803	8	AUG 2 9	ZUIAWA	AIVER	AF	PR	OVE
E DOH _ junti	fication) colletion	Bruce	el Comisel e Lavinson			Talaphor	is Numbe			
Name of Facility Where Abstament Residence	is Takina Piaca (:	FAC	LITY INFORMAT	HON	Type of Facility	(e)				
Sirest Address 36 Pine Street					Bohqof (K. Subchapti Offier (I.e.	-12) of 6 (Ciner sha or Note & com	n K-12) marcial bi	ild Ing	ı, Kor	MA,
City (8) Mount Hally					3,600	S of Floor	-	B/dg. 130	Age	
County (6) Burlington		Brate	Code (7)		Residence		nalished)			
Name of Monitoring Firm Hind by 5 Miznagement & Enviro. Cons Breat Address	ulting pervice	A.BC	M No.	Shad	of Absternent Co de Environme				0.00000	
PO Box 341				623	Address Culler Avenus					
Chesterfield, NJ 08516		7-1-1		Map	inte, Zip Code e Shado, NJ (
ob Laurali		Telepho 609-2	98-4070	856-	1606 Ng. 755-0099 of OGHA Manitor	008	150 No. 12			
lugust 23, 2014 coupancy Status During Abatemen	August	25, 2014	Oate (11)	EMS	L Laboratorie					
Paciny Closes/Vacated Duning Abatomoni Performed Outside Other - Desaribe;	Enum Period of A	hatemani		200 F	Addrese Route 130 No: Inta, Zip Code amineon, NJ (A			
cope of Work (Check All That Apph 1 25 sfor 28 if 2 2000 sfor 2200 if		enovation enovation			Full Containm Mini-Enclosur Glevotag Pre	ont with Megat				
Location of	N	Lucetion crinally 1 Spiety by	De	scription		72-3-7-1		Abst	emen pe	
Anthemos-Containing Majorial (AC 10 BE ADATED In Facility (13)	Maid	rienance/ odial Staff? (12)			insulation.	Amount (Specify BF as LF)	Rempus	Repair	Encapeulete	Endosun
Basement	Yes	NO NA	Pipe	Insulati	lon	150 LF		_	8	
						. 30 11				d
D. dD. dansadiv										\dashv
ma of Registered Waste Hauler sehold Cartage		NJDEP W Hauler ID 22253				Registered Lar Berks Cor		Lend	1Fill	
y, Siete eahold, NJ			Dispos 8/25/2	al Dule 1014	City, State Birdabo					\neg
mplemed by Instina Lynch	Titie Opera	tiona Mana	ger	man	780		Date 8/20/20	014		

ABB-41 (R-06-09)

^{*} Do not use this form for asbeatige ticensure exempted activities.

Check # 9067

										CHECK	\ m = 0	1001		
Date of Notification (1) Jugust 21, 2014				of Buildin		er / Operator (2)	*		es es			
Agencies Notified	Type Notification			_	Address									
□EPA □DEP				73 Mai	n Street			AUG	2 5 20	14				
⊠DOL				City, S	tate & Zip	Code								
⊠DOH	Amend	ded dment #_		New E	gypt, NJ	08533	3							
DCA	Cance		25	Name	of Contac	ct				Tele	ephor	ne Nu	mbe	er
e e				Ryan S	Schnupp					Lis.	1/2			
	I			FAC	CILITY	INFO	RMATION					-		
Name of Facility When Bank of America	re Abatement is	Taking F	Place (3)				Type of Facili							
Street Address							Subchap	oter 8 (Other th	nan K-12)					
73 Main Street							Other (i			cial buildings	, hor	ne, e	tc.)	
Oit (5)				- T			Square Feet		Floors	Bldg	. Age			
City (5) New Egypt							Current Use (Prior if being o	1 demolished	4)		81		-
					55		Bank	, nor in boining o	2011101101101101	-/				
County (6) Ocean		5 2 2 3 3	ounty Code	(7)										
Name of Monitoring F			ner (8)		ASCM	No.	Name of Abat Synatech, Inc	tement Contra	ctor (9)					
Street Address	nvironmental Testing Consultants, LLC treet Address						Street Addres							
413 North Black Hors City, State & Zip Code							829 Radio Ro						20025	
Runnemede, NJ 080							City, State & 2 Little Egg Ha	rbor, NJ 080	87					
Project Manager for M	lonitoring Firm			lephone N			Telephone Nu	umber		License Numb				
Howard Zenobi Scheduled Start Date	(10)	'ahadulaa	85 Completi	6-482-131			609-296-6916 Name of OSH				0081	7		
September 6,		criedulec	110~0.00 10 [일 [일] [인] [인]	per 6, 201			Synatech, Inc							
Occupancy Status Du Facility Close	ring Abatement			Abatemer	nt		Street Addres 829 Radio Ro	100						
	erformed Outsid						City, State & 2				-			
Other – Desc	ribe: pied During Aba	tomont					Little Egg Ha	rbor, NJ 080	87					
Scope of Work (Check		nement				-			***************************************				77.59A	
Coope of Work (officer	(all triat apply)						П	Full Containm	ant with N	legative Pressu	II A			
≥3 sf or ≥ 50 If				Renovatio	on		H	Mini-Enclosur		ecgative i resst	110			
≥160 sf or ≥260) If			Demolitio	n			Glovebag Pro						
				- 1			\boxtimes	Non-Exempte	ed(*) and I	Non-Friable Pro	ocedu	re		Ш
	ation of	OLA)		on Norma			Descripti			t (Oif-	Ab	atem	ent 7	Гуре
Asbestos-Contain TO BE	ABATED	CIVI)		y Mainten dial Staff			Asbestos-Co Material (ount (Specify SF or LF)				
IN F	acility						(i.e., thermal			79			m	
	(13)						insulation, surf	ellaneous)			ᇛ	, Z	Encapsulate	Enclosure
177						-					Removal	Repair	nsd	losu
			Yes	No	N/A				1		<u>a</u>	7	ate	le le
Exterior	Windows				Х		Window	Caulk		132 LF	Х			
				V222222222										
Name of Registered V	Vaste Hauler		NJDEP \	No.		Yards o	of Waste	Name of Reg	Appropriate the second	andfill				
Synatech, Inc.		-	27	429	2 Dispos	al Data		Grows Land	dfill					
City, State					Dispos	ai Date	3	City, State						
Little Egg Harbor, NJ	08087				Octobe		014	Morrisville,						
Completed By		Title			Signatu	ıre	11		Date					
Diane Aloia		Executiv	e Admini	strator	LA	Une	Mer	_	August	21, 2014				

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Nicholas Fe	ernicola		ct Manager		for ash	estos licer	CATO	mnte.	d activities		-	8/2	1/14		
Completed by (Print or T		Title		8/26/1	Signati	ure 1	Tully	town	n, Pennsylva	nia	-	Date			
	Contracting, Inc.		202	Disposa		2	City, S		T.R.R.F.		-				
Name of Registered Was	te Hauler	N	UDEP Waste		D No.		rds of Wa	ste	Name of Reg		dfill				
													_		-
Exterior			A		113003	, coo ordin	0								
Exterior		YES		N/A	Asbes	othe	er miscell	laneo	ous)	140	0 sf	A L X		L E	R E
Location Asbestos-Containing TO BE AB. in facili (13)	Material (ACM) ATED	N	is Location ormally used Solely by enance/Cust Staff (12)			Asb M (i.e. insu	Description estos-Conflaterial (A, thermal lation, su	ntain ACM syste arfaci or	ing () ems ing,	(Sp	mount ecify SF or LF)	R E M O V	R E P A I R	E N C A P S	E N C L O S U
1 1	that apply) sf or ≥3 lf 60 sf or ≥260 lf			enovatio			[] [] [x]		Full Containme Mini-Enclosure Glovebag Proce Non-Exempted	edure			re		
[] Ab			f Abater	nent	,	Street Ad	idress	E.M.S 1056	S.L. Ana Stelton I taway, N		y 088:	54			
Project Manager for Moni		Celephone Nur		Date (11	,	732-34	9-99			00624					
City, State, Zip Code			.			City, Stat		Toms		lew Jerse		55-12	71		
Street Address	•					Street Ad		1889	Route 9,	Unit 61					
Name of Monitoring Firm		wner (8)		A	SCM No.		Name of	Abate	ement Contracto	or (9)	racting,	Inc.			
City Manahawkii	n	County (6)		ounty Coc TATE U	de (7) SE ONLY)			1500 sf rrent Use (Prior Reside		1	Bldg.	Age 60)	
Street Address	Susan Lane								[x]	Subcha	pter 8 (other i.e., private			buildir	ngs,
Name of Facility Where Al		lace (3)	1	ACIL	111111	TORMA		Тур	e of Facility (4)	School	(k-12)				
[] DCA	justifica [] Cancell	62				Frank Torontact		1		1 elephone	Number	<i>i</i> v ·			
[] DEP [x] DOL [x] DOH	Amend [X] Emerge	ment # ency (inch				, Zip Code	Richmo	ond,	VA 23225	AUG 2	5 2014				
Agencies Notified [x] EPA	and the second s	n Notificatio ed Notific		Si	treet Addi	ress	3006 M	Iarlb	oro Drive				r)		
Date of Notification (1)	August 21, 2014			N	ame of Bi	uilding Ow	Frank T			/II'' (24	99	12		



Date of Notification								wner / Operator	(2)							
Agencies Notified	7/18/14 Type Notifica	tion		treet				f Education			7	ace t	-	_		
EPA	Type Notifica	itiOH	(4.3)				ect S	treet		AUG 2	Ü	2014				1
□ DEP							Zip Co									
□ DOL		ded R#3-8/20/1					086									
☑ DOH	[1] - [1] - [1] - 이번 (1) [1] 11 (1) (1)	gency		lame		-						Tel	ephor	e Ni	mbe	er
☐ DCA		ellation	N	۸r. E	ver	ett	O. C	ollins							0	
				FAC	CIL	ITY	INFO	DRMATION								
Name of Facility WI		ent is Taking Pla	ce (3)				Type of Facility								
Woodrow Wilson	1 ES							School (K-								
Street Address										Other than K-		.,	4			
175 Girard Ave										te & commer	cial b				(C.)	
						74.2		Square Feet		# of Floors		Bia	g. Age			
City (5)		County (6)	Cou	unty C	Cod	e (7)	70,000						60+	52000	
Trenton		Mercer						Current Use (P	rior it	being demol	ished	1)				
		المستنب						School		<u> </u>	-					
Name of Monitoring		y Building Owne	er (8)		A	SCI	M No.	Name of Abate Bristol Envir		C 27))					
Street Address	onnection							Street Address		entai, mo.						
120 North Warre	n Street							1123 Beaver		et						
City, State & Zip Co				-				City, State & Z	ip Co	de				500000000		
Trenton, NJ 0801								Bristol, PA 1			_					
Project Manager for	r Monitoring F			hone			er	Telephone Nur			- CAR CO CO	ense Nur	nber			
Richard Beach				392-4				(215)788-604		14	005	909				
Scheduled Start Da 7/29/14	7800000M00000M0	Scheduled Com	8/20		te (11)		Name of OSHA Bristol Envir								
Occupancy Status			-			_		Street Address		ontai moi	-					
Facility Clos	sed/Vacated [During Entire Pe	eriod (of Aba	ater	men	it	1123 Beaver		et						
		utside of Norma						City, State & Z	ір Со	de						
Describe:	7 AM to 3:3	30 PM						Bristol, PA 1	9007	1						
	upied During						-2.00									
Scope of Work (Ch	eck all that ap	ply)						Г	\neg	Full Containr	nent	with No	aviter	Pres	SIIFA	
☐ ≥3 sf or ≥3	ıf		\boxtimes	Rer	201/2	afior	2	L T		Mini-Enclosu		Willi NC	gative	1 100	Juic	
≥160 sf ≥26				Der				ı İ		Glove Bag P		dures				
2100 31 = 20	70 II		ш	201				Ì	\exists	Non-Exempt			riable	Pro	cedu	ire
L	ocation of		Is	Locat	ion			Description	of		Amo		Aba	teme	ent T	уре
	tos-Containin	g		nally l		d		Asbestos-Conta			(Spe				000000	Г
	terial (ACM)			olely				Material (AC			SF o	r LF)	20	חד	Enc	Ē
	n Facility			tenan				(i.e., thermal sy nsulation, surfaci					Remova	Repair	aps	clso
	(13)		Oubit	(12)	Ola,			or other miscella					Va.	air T	Encapsulate	Enclsoure
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Name of Registere	d Waste Haul	er					No.	of Waste	INam	e or Register	su La	ariumi				
Bristol Environn	nental. Inc.			100000	87		110.	120 cu yds	GRO	WS Landfi	II					
City, State								Disposal Date	City,	State						
Bristol, PA								8/2/14		risville, PA						
Completed By (Prir	nt or Type)			10000000	tle			Signature			:0.V/	0	Date			
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		10000000		M	ana	age	r	Men 12	gre	our / J	_					

Cl# 2677

Date of Notification (1)	7/18/14			Nam	e of l	Building	Owner / Opera	ator	(2)					<u>'</u>	
	pe Notifica	ation				dress	of Education	n							
EPA	pe riotine	3001					Street		SHA	2.5	2014				
	Initial					e & Zip		_	1100						
		ded R#2-7/28	3/14			, NJ 08									
		gency				Contact						Toloph	ina N	1	
□ DCA [ellation					Collins				. '	Teleph	one r	Numi	ber
				FA	CIL	ITY IN	FORMATION								
Name of Facility When		ent is Taking P	lace (3)			Type of Fa								
Woodrow Wilson E	S						School	ol (K-	-12) NON SI	JB 8					
Street Address							Subch	napte	er 8 (Other th	an K-1	2)				
175 Girard Ave							Other	(i.e.	private & co	mmerc	ial buildin	gs, hor	nes,	etc.)	
							Square Fe	et	# of Flo	ors	E	Bldg. Ag	je		
City (5)		County (6)	Co	ounty	Cod	e (7)	70,0	00		2		8.774 63	604	H	
Trenton		Mercer							rior if being	demolis	shed)				_
							School	0812110822							
Name of Monitoring Fir	m Hired b	y Building Ow	ner (8)	A	SCM N	o. Name of A	bate	ment Contra	ctor (9)	-	di de la filia		
Environmental Con	nection								onmental,		2 1				
Street Address							Street Add								
120 North Warren S	North Warren Street						1123 Bea								
City, State & Zip Code	State & Zip Code						City, State	& Zi	p Code						
Trenton, NJ 08010	nton, NJ 08010						Bristol, P								
	ject Manager for Monitoring Firm					mber	Telephone				License N	lumber			
	hard Beach					0	(215)788-	_			00509				
Scheduled Start Date (10)	Scheduled Co			ate (1	11)	Name of O								
7/29/14			8/28						onmental I	nc.					
Occupancy Status Duri							Street Add								
Facility Closed							1123 Bear								
Abatement Per			al Ho	urs –	/am	to 3pm									
Describe: 7 / Facility Occupie							Bristol, P.	A 1	9007						
Scope of Work (Check										-2					
Coope of Work (official	un that ap	P137						Г	7 Full Co.	ntainm	ent with N	enative	Dra	cour	_
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≥160 sf ≥260 lf			Ħ		molit	CALIFORNIA .		7	_		cedures				
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Name of Registered Wa	iste Haule	r					Cubic Yards	1	lame of Reg	istered	Landfill				
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	ai, iiic.			1/1	0/0	0	120 cu yds	_	ROWS La	nariii					
City, State Bristol, PA							Disposal Date 8/2/14	100	City, State Morrisville,	PA					
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Date of Notification (1)				Nam	ne of E	uildin	g Owner / Opera	ator (2)						
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	e Notific	ation		Stre	et Ado	ress		··-		- AUC	3 2 5	2014			
☐ EPA				149	0 Pro	spec	t Street				3 3.	See to 1 1 1			
DEP		**		City,	State	& Zip	Code	-							· _
□ DOL □	Ame	ended R#1-7/2	8/14		nton,										
☑ DOH □	Eme	rgency		Nam	e of C	ontac	t								1
☐ DCA ☐	Can	cellation					Collins					Telep	hone	Nur	4pd
				F	ACILI"	TY IN	FORMATION								
Name of Facility Where	Abatem	ent is Taking F	Place ((3)			Type of Fa		4)						
Woodrow Wilson ES							⊠ Schoo			SIIR					
Street Address			31.33						8 (Other		2)				
175 Girard Ave							Other	(i e pr	ivoto P o	aii I\- i	2)				
							Square Fe	(i.e. pi	rivate & c	ommerc	iai buliqi			, etc	.)
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Tremen		mercer					Current Us	e (Pric	or if being	demolis	shed)				
Name of Monitoring Firm	Hirod b	Duilding O			14.0		School								
Environmental Conne		y building Ow	ner (8)	AS	CM N		batem	ent Contr	actor (9))				
Street Address	CHON						Bristol Er		mental,	Inc.					
	Warren Street						Street Addr	· · · · · · · · · · · · · · · · · · ·							
	Warren Street						1123 Beav								
	e & Zip Code						City, State	& Zip (Code						
Trenton, NJ 08010	A		T=-				Bristol, P								
	anager for Monitoring Firm					ber	Telephone		er		License	Numbe	er		
Richard Beach					4200		(215)788-6				00509		10		
Scheduled Start Date (10) [Scheduled Cor	mpletio	on Da	te (11)	Name of OS			*					
ON HOLD							Bristol En	viron	mental	Inc.					
Occupancy Status During	Abater	nent (Check o	nly on	e)			Street Addr	ess							
Facility Closed/Va							1123 Beav	er St	reet						
Abatement Perfor	med Ou	itside of Norm	al Ho	urs –	7am to	o 3pm	City, State &	Zip C	ode						
Describe: 7 AM							Bristol, PA	1900	7						
Facility Occupied															
Scope of Work (Check all	tnat ap	piy)													
≥3 sf or ≥3 If				Б.					Full Co	ntainme	nt with h	Vegativ	e Pr	essur	е
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≥160 sf ≥260 lf			Ш	Den	nolition	1			Glove !	Bag Prod	cedures				
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ristol Environmental,	Inc.				706	0.0000000000000000000000000000000000000	120 cu yds	GRO	OWS La	ndfill					
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ristol, PA							8/2/14		state risville,	DA					
empleted By (Print or Type	e)			Title			7.63 (3.53)	INIOI	isville,	FA		-			
ino Pizzigoni							Signature	*	€8	1	٠_	Date			
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Date of Notification (1)	And a Market State of the Control of	IN	ame of F	Building	Owner / Ope			1 1000			
7/18/		T	renton	Board	of Educati	erator (2)		100			_
Agencies Notified Type N	otification	S	treet Add	dress	or Educati	on		*		225	
□ EPA			490 Pro		Street		4110 =	10	. 16	10	_
	Initial	C	ity, State	& Zin C	ode.		AUG 25 00	1.4			
I I	Amended	T	renton,	NJ 086	328		-~	1.3.			
DOH9630	Emergency	N	ame of C	Contact					:		
DCA DCA	Cancellation	W	r. Ever	ett O. C	ollins			Telep	ohone	Nui	m
Name of Facility 14/hours Al			FACILI	TY INF	ORMATIO	N					
Name of Facility Where Aba	atement is Taking P	lace (3)			Type of F				_		_
Woodrow Wilson ES					Scho	ool (K-12) NON	SHR				
Street Address					□ Subc	chapter 8 (Other	than K 12\				
175 Girard Ave					Othe	r (i e private &	commercial build	J			
					Square F	eet # of	Floors	aings, h	omes	, etc	.)
City (5)	County (6)	Cour	nty Code	(7)	- 0	1	rioors	Bldg.	Age		
Trenton	Mercer			(.)		000	2		60)+	
					Current	se (Prior if bein	g demolished)				
Name of Monitoring Firm Hir	ed by Building Own	ner (8)	IAS	CM No.	School						
Environmental Connect	ion		1.10	0141 140.		Abatement Cont	ractor (9)				
Street Address					Street Add	nvironmenta	, Inc.				
120 North Warren Street											
City, State & Zip Code						ever Street					
Frenton, NJ 08010					Briefal S	& Zip Code					
Project Manager for Monitori	ng Firm	Telepho	ne Num	her	Bristol, F	A 19007					
Richard Beach		609-39	2-4200	Del	Telephone	Number	License	Numbe	er		
Scheduled Start Date (10)	Scheduled Com	pletion	Date (11	1	(215)788-		00509				
7/28/14		8/28/1)	Name of C	SHA Monitor					
Occupancy Status During Ab	atement (Check on				Bristol E	nvironmental	Inc.				
☐ Facility Closed/Vacat	ed During Entire Pe	eriod of	Ahatamo	mi	Street Add						
Abatement Performed	Outside of Norma	l Hours	7	- 0		ver Street					
Describe: 7 AM to	3:30 PM	i riours	- /am to	o 3pm	City, State	& Zip Code					100
Facility Occupied Dur					Bristol, P	A 19007					
cope of Work (Check all tha											
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≥3 sf or ≥3 If		⊠ R	enovatio	n		- Full Co	ontainment with	Negativ	e Pre	ssur	е
≥160 sf ≥260 If			emolition				nclosure				
			oontion	•		☐ Glove	Bag Procedures	.			
Location of	T	Is Loc	ation			Non-E	xempted and No	n-Friabl	le Pro	cedi	ure
Asbestos-Contain	ning	Normall	Lised		Descripti	OHO	Amount	Ab	atem	ent 7	Γvi
Material (ACM)	Solel	y by	,	Asbestos-Co	nitaining	(Specify	-	T		T
TO BE ABATE	0 1	Maintena	ance or	-	Material (, i.e., thermal	nulvi)	SF or LF)	_		E	1
in Facility		Custodia	I Staff?	ins	ulation, surfa	acing VAT		Removal	Re	Encapsulate	1
(13)		(12		or	other misce	ellaneous)		J Š	Repair	psu	1
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stol Environmental, Inc.			18706		0 cu yds	GROWS La	ndfill				
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chylele

State of New Jersey NOTIFICATION ASBESTOS ABATEMENT

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

Date of Notification (1)						ng Owner/Operator	(2)					
8/22/1				Micl	hael Bre	nnan						
Agencies Notified	Type Notificati	ion			t Address W. Brow	vning Road	1	UG 2 3 2014	1			
DEP DOL	Amended Amendmer	nt #	_		State, Zip	Code d, NJ 08107						
⊠ DOH	Emergency justificator	/ (including n)	9	-	e of Con			Telephone Num	per	=	==	_
DCA	Cancellatio				ael Bren		-	1	69.70			
	·			FAG	CILITY IN	FORMATION						
Name of Facility Where Supervisor Residen		king Place	(3)				Type of Facility					
Street Address Knight Park							Other (i.e.,	8 (Other than K-12 private 8 commerci		dings		
City (s)							Square Feet	# of Floors	ΙB	ldg.	Age	
Collingswood,							1700	1		0 yrs		
County (6) Camden				Cou	nty Code	(7) (STATE	Current Use (P Residence	rior if being demoli	shed)			
Name of Monitoring Fire	n Hired by Buildi	na Owner	_	ASCM	No.	I Name of Abater	ment Contractor (9)				_
(8) N/A	ii riii ea by buildii	ng Owner		A30IVI	140.	AEi2, LLC		1				
Street Address						Street Address 300 S. Lenola						
Cit. State 7ia Code						City, State, Zi						_
City, State, Zip Code						Maple Shade						
Project Manager for I	Monitoring Firm	1	Tel	ephone	No.	Telephone No. 609-481-212	22	License No. 00689				_
Start Date (10) 9/1/14	10 10 10 10 10 10 10 10 10 10 10 10 10 1	cheduled C	omple	etion Da	ite (11)	Name of OSHA AEi2, LLC	Monitor					
Occupancy Status Duri			one)			Street Address				_		
Facility Closed/Vaca	100			tement		300 Lenola						
Abatement Performe Other - Describe:						City, State, Zip Maple Shade	Code e, NJ 08052					
Scope of Work (Check	all that apply)					☐ Full Co	ontainment with N	legative Pressure			-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Re	enovat emoliti	ion on		Mini-Er	nclosure pag Procedure	Non-Friable Proced	ure			
			ocati							Abate		í
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TO BE ABA			Staff?		(i.e.	surfacing, VAT	, or	SF or LF)	m	e p	a P	1 0
(13)			(12)			other miscellane	eous)		v a	a i	s u	u
		Yes	No	N/A			8		1	r	a t	e
Exterior		163	140	X	Transit	te Shingles		700 SF	X		e	Γ
						114						
Name of Basistara 196	anta Haular			NJDEP	Waste	T Cubic Yards	I Name of Rec	stered Landfill				
Name of Registered Wa	aste nauter		11	Hauler II		of Waste	TBD	, Z Zuum				
AEi2, LLC			_ 2	21376		1 Disposal Date	City, State	7				
City, State Maple Shade, NJ						TBD /	TBD					
Completed By		Title				Signature	hannin	Date				
Wm. Minnick		Program	n Mg	ŗ.		0/1/1	mil	£ 8/20/1	4			-



CK 4306

Date of Notification (1) 8/21/14						Building Ov Clare Pri			(2)	7 01/13/2007	7						
Agencies Notified EPA		Notification Initial		3	treet Add 35 Wes	t Sail				AUG 2	5 00	11.5	79		-		
EPA DEP DOL		Amended Amendment				e, Zip Code on NJ 08				7100 -							
DOH DCA		Emergency (i justification) Cancellation	ncluding	388	lame of 0 Eric	Contact				53		phone N					
Name of Facility Where			Place (3)		FACIL	ITY INFOR	RMATIC	ON	Type of	f Facility (4)						
Daniel Clare Private Street Address 35 West Sail	e Hor	ne			2				Si × O	chool (K-12 ubchapter of ther (i.e. process)	8 (Othe	r than K- commer	-12) rcial bu	ildir	ıgs, h	omes	3,
City (5) Tuckerton NJ 0808	7							1 1	Square 1000-	Feet	# of 1.5	Floors	100	Bld 35	g. Ag	е	
County (6) Ocean			10		County C	ode (7) SE ONLY)			Curren	t Use (Prio	or if bein	ng demol	ished)				
Name of Monitoring Firm	n Hired	by Building (Owner (8)		ASCM	No.			of Abate	ement Con	tractor	(9)					
Street Address									Address Box 32								
City, State, Zip Code					-				state, Zip t Berlin	Code NJ 080	91						
Project Manager for Mor	nitorin	Firm	T	Telephor	ne No.	-	(0.00 (0.00 eV)	none No 753-98			License 00727						
Start Date (10) 8/25/14			ed Com	pletion [Date (11)		Name Sam		A Monitor								
Occupancy Status Durin	ng Aba	tement (Chec	k Only On	e)		-		Street	Address	S				Cilia I			
Facility Closed/Vac Abatement Perform Other – Describe:	ned O	Ouring Entire utside of Norn	Period of Anal Facility	Abatem	ent		_	City, S	State, Zij	o Code							
Scope of Work (Check	All Tha	t Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Total Control	Renova Demoliti					Min Glo	Containm i-Enclosure vebag Pro n-Exempte	e cedure	Ī				3	
			Is	Locati	on		-		INOI	1-LXemple	u () an	a Non-1	Iddici		Abate	ment	
Locatic Asbestos-Containin <u>TO BE Af</u> In Fac (13	g Mate BATED cility		Use Ma	Normal ed Sole intenar todial S (12)	ly ly by nce/		os Con therma surfa	systen	Material ns insula		(5	mount Specify F or LF)	Reinova	Domoval	Repair	Encapsulate	Enclosure
Throug	h-ou		res	NO	X		F	loor T	ile		5	00 SF	×				
		-															
7.									in the second				_				
Name of Registered W	aste H	auler			JDEP V	Vaste	Cubic	Yards		Name of	Regist	ered Lan	ıdfill				
United Containers		12		H	lauler ID 2459		of Wa	530000000	252	G.R.O							
City, State Elm NJ							Dispo 8/29	osal Dat /14	e	City, Sta Morris		A 1906	67				
Completed by Anthony T Perna			Title Pres	ident				Signatu	re?				Date 8/21	/14			

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		CONTRACTOR OF THE PARTY OF THE	200	養陽陽景
	(27)			
GROUND FLOOR?	1 Sal	540 NG A-1100	24.50	
	12/200	PACING CFILING	30 SF	
		· · · · · · · · · · · · · · · · · · ·	31	
			3	
	D In.	Calle York of 7 Perils Of Page		
Best Removal Inc	17109	3/4 YD Minery	a Enterprise	s
Heckenspek, N.J.	7601	8-19-14 Waynes	-1/	
Englishers and	1/OUT	8-19-19 MEYES		
R VELDRAN Betime	ter	P. Valdran	8-	5-14
AND THE PARTY OF T				-

State of New Jersey

40 mil

NOTIFICATION OF ASBESTOS ABATEMENT

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

· Date of Notification (1)	august 20, 201	4	2		Name o	of Building (ator (2) auken Public S	Schools			976	7	
Agencies Notified [X] EPA [] DEP		l Notifica	ation tification		Street A	Address	1695 I	Hylton Road		AUG 25	2014	ļ.	1	
[x] DOL [x] DOH	Amer	ndment #			City, St	ate, Zip Coo		auken, NJ 081	10					
[] DCA	N20: (25:1)	ication) ellation			Name o	of Contact Jack K	Cillion		Tele	phone Number			1	
				FA	CILITY	INFORM	ATION							
Name of Facility Where Above Penn	atement is Taking nsauken High							Type of Facility] s	chool (k-12)				
Street Address 800	Hylton Road		15					[x] 0	ubchapter 8 (of other (i.e., priva omes, etc.)			ial build	lings,
City		Coun	y (6)		County C (STATE	Code (7) USE ONL	Y)	Square feet 50,000 s		# of Floors	Bld	g. Age	50	
Pennsauken	*	Cam	den					Current Use (P	rior if bei)			
Name of Monitoring Firm H N/A		Owner (8	8)		ASCM N	No.	Name of	Abatement Contr	ractor (9)	Contracting	Inc.			
Street Address							Street Ac	dress		te 9, Unit 61				
City, State, Zip Code							City, Sta	e, Zip Code		er, New Jers		755-1	271	
Project Manager for Monito	ring Firm		Telephone	Number			Telephon 732-34	e Number		License N 00624				
Scheduled Start Date (10) 8/25/14			Scheduled 9/26/		ion Date (1	11)		OSHA Monitor	M.S.L. 2	Analytical				
Occupancy Status During A	batement (Check ity Closed/Vacated			od of Ab	atement		Street Ac	dress	DV-8 04 23	on Road				
[X] Abate	ement Performed r – Describe	_					City, Sta	e, Zip Code		y, New Jerse	-v 088	254		
Scope of Work (Check all th	nat apply)						[]			h Negative Pre	•••			_
[] >3 ef	or ≥3 lf		[x]	Renov	ation		[]	Mini-Enclos Glovebag Pr						
4 4	sf or ≥260 lf		[]	Demoi			[x]			d Non-Friable	Procedi	ıre		
					T						Aba	tement	Туре	
Location o	f	1	Is Location	23			Descriptio estos-Cor			Amount	R	R	E	E
Asbestos-Containing Ma			Solely by	y			Material (A			(Specify SF	E M	E P	N C	N C
TO BE ABAT		Main	tenance/C Staff	ustodial			, thermal:			or LF)	O	A	A	L
in facility (13)			(12)			inst	ilation, su VAT, c	-			V	I R	PS	O S
(30)			(1-2)			oth	er miscella				Α	1 2000	U	U
		YES	NO X	N/A							L		L E	R E
Exterior		100 v	windows				100	x						
2014														
Name of Registered Waste F		1	NJDEP Was		ID No.	Cubic Ya	rds of Wast			Landfill				
Guardian Cor City, State	macing, inc.		4	0223 Dispo	sal Date	1 00	City, Sta	T.R.R.	г					
Toms River, 1				9/29	/14		Tully	wn, Pennsylv	/ania//		,			
Completed by (Print or Type Nicholas Fern		Title Proje	ct Manag	er	Signat	ure 20	hot	()0 /	X		8/2) 0/201	4	

*Do not use this form for asbesto's licensure exempted activities.

Date of Notification (1)		Building Owner/Operat	tor (2)	c# 1414				
August 20, 2014	10-20-09/00/19	ninson Board of Ed	ucation Check	(# 1414				_
Agencies Notified Type Notification	Street Ad 7197 R	dress iverton Road		_				
EPA Initial DEP Amended DOL Amendment #		e, Zip Code ninson, NJ 08077	A	UG 2 5 20) [4			
Emergency (incli				Telephone N	Number			-
DOH justification) DCA Cancellation	Mark T							
_ BOA _ Carlocalators	FACIL	ITY INFORMATION					1	
Name of Facility Where Abatement is Taking Pl	ace (3)		Type of Facility (4)				
Memorial School			School (K-1		(40)			
Street Address 905 US 130			Other (i.e. p	8 (Other than K rivate & comme		ings, l	nome	s,
City (5)			etc.) Square Feet	# of Floors	Blo	dg. Ag	ie .	-
Cinnaminson			10,000	2		00		
County (6)	County C	Code (7)	Current Use (Prio	or if being demo	lished)			
Burlington Name of Monitoring Firm Hired by Building Owr	193		me of Abatement Cor	ntractor (9)				
Management & Enviro. Consulting Se			nade Environmen					
Street Address PO Box 341			eet Address 3 Cutler Avenue					
City, State, Zip Code Chesterfield, NJ 08515			y, State, Zip Code aple Shade, NJ 0	8052				
Project Manager for Monitoring Firm	Telephor	ne No. Tel	ephone No.	License				
Lou Lauretti	609-29		66-755-0099 me of OSHA Monitor	00842				
August 29, 2014 Se	eptember 2, 2014	E	MSL Laboratories	i				
Occupancy Status During Abatement (Check O	only One)		eet Address	46				
Facility Closed/Vacated During Entire Peri	iod of Abatement		00 Route 130 Nor	un				
Abatement Performed Outside of Normal Other – Describe:		7.5000	y, State, Zip Code innaminson, NJ 0	8077				
Scope of Work (Check All That Apply)								
≥3 sf or ≥3 lf	X Renovation			ent with Negativ	e Pressur	e		
≥160 sf or ≥260 lf	Demolition		Mini-Enclosur Slovebag Pro					
			0.010003	d (*) and Non-F	riable Prod	cedure)	
	Is Location				1 19	Abate Ty		1
Location of	Normally .	Descrip				1 9	pe	
Asbestos-Containing Material (ACM)	Used Solely by Maintenance/	Asbestos Containir (i.e. thermal syst		Amount (Specify	الما		En	m
TO BE ABATED In Facility	Custodial Staff?	surfacing	VAT, or	SF or LF)	Removal	Repair	caps	Enclosure
(13)	(12)	other misce	ellaneous)		oval	air	Encapsulate	sure
	Yes No N/A						Ф	
Boiler Room	XXX	Pipe Ins	ulation	20 LF	X		20	
					_			-
								-
Name of Registered Waste Hauler	NJDEP W	Vaste Cubic Yar	ds Name of	Registered Lar	ndfill			
Freehold Cartage	Hauler ID 22253			rn Berks Cor		Land	dfill	
City, State Freehold, NJ		Disposal E 9/2/2014		te oro, PA				4
Completed by Christina Lynch	Title Operations Mana	ager	Man De		Date 8/20/20)14		

Check # 9068

Date of Notification (1) lugust 20, 201	4			of Buildir		ner / Op	erator (2	2)		One	<i>γ</i> (π ε	,000		
Agencies Notified	Type Notificat				Address	<u> </u>						7			
□EPA □DEP	20			1345 (Chews La	anding	Road		A	UG 25	2014	1			
⊠DOL	Initial			City, S	tate & Zi	o Code	!								
⊠рон	Amen Amen	ded dment #_		Laurel	Springs	, NJ 0	8021				ν.				
DCA		ellation	-	Name	of Conta	ct					· Te	lephor	ne Nu	mbe	r
				Ryan	Schnupp										
				FA	CILITY	INFO	RMA	TION		Di Di					
Name of Facility When Bank of America	re Abatement is	Taking F	Place (3)					of Facilit School (F							
Street Address							-1	-	Sec. 10 (10 (10)	er than K-12	2)				
1345 Chews Landing	Road								.e., privat	e & comm	ercial building	s, hor	ne, e	tc.)	
City (5)							Squa	re Feet		of Floors	Bld	g. Age			
Laurel Springs							Curre			1 ng demolish	ned)		58		
County (6) Camden			ounty Cod				Dunk								
Name of Monitoring Fi	rm Hired by Bu	ilding Ow			ASCM	No.				ntractor (9)					
Environmental Testin Street Address	ig Consultant	s, LLC						tech, Inc					-		
413 North Black Hors							829 F	Radio Ro	ad						
City, State & Zip Code Runnemede, NJ 080								State & Z	Zip Code rbor, NJ (19097					
Project Manager for M Howard Zenobi				lephone N 6-482-131			Telep	hone Nu 296-6916	mber	76067	License Num	ber 0081	7		
Scheduled Start Date		Scheduled	Complet	on Date (11)		_		A Monitor	-		0001	_		
August 30, 2 Occupancy Status Du		(Check o		ber 30, 2	014		_	tech, Inc							
	d/Vacated Duri erformed Outsi				nt		201200100	Radio Ro State & Z	****						
Other - Desc	ribe:		nai rioui.	•					rbor, NJ (8087					
Scope of Work (Check	oied During Ab	atement													
Coope of Work (Officer	an macappiy)							П	Full Conta	inment with	Negative Press	ure			
≥ 3 sf or ≥ 50 If				Renovation	n				Mini-Enclo		nogao				
≥160 sf or ≥260) If			Demolitio	n				Glovebag	Procedure					
										npted(*) and	Non-Friable P				
Loca Asbestos-Contair	ition of ning Material (A	CM)		on Norma y Mainten				Description estos-Co		A	mount (Specify	Ab	atem	ent T	уре
TO BE	ABATED	,		dial Staff			M	Naterial (A	ACM)	1.0	SF or LF)				
	acility 13)							thermal:	systems acing, VAT					Ш	_
	10)					2			llaneous)			Ren	Re	ncap	ncl
												Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A							<u>=</u>		ate	ГĒ
Exterior	Windows			Х		ν	Vindow C	Caulk		120 LF	Х		П		
]				
Name of Registered W	aste Hauler		NJDEP V		Cubic	ards o	of Wast	е	Name of I	Registered	Landfill				_
Synatech, Inc.			Hauler II) No. 429	2				Grows La	andfill					
City, State		× 1			Dispos	al Date	1		City, State						
Little Egg Harbor, NJ	08087				Octobe	r 4 20	11.4		Morrisvi	lo DA					
Completed By	00007	Title			Signatu		. A	1	Morrisvil	Date					
Diana Alaia		Fue "				NO	//	In							
Diane Aloia		⊏xecutiv	e Admini	strator	1/01	une	- 00			Augu	st 20, 2014				

APPROVED: CINDY MITCHELL, NJOH

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

					-					5,000,000				
Date of Notification (1) 8 /	20 / _	14		N			T.	ner/Operator (2 vnship Scho		9.7				
Agencies Notified EPA	Type Notifica			S		Address Box 428	Scho	ool Street	AUG 2	2 5 2014				
☑ DOLWD	☐ Amended			C	City, S	tate, Zip C	Code					9		
⊠ DOH	Amendme		_			odbridge		07095				è		
DCA (NJAC 5:23-8)	☐ Emergene justification		ng	N		of Contac	3			Telephone Numb	er			
(110/10/0.20/0)	☐ Cancellat				clo	Dominic	k De	rcole	*	- 1				
					FAC	CILITY IN	IFOR	MATION	k		_			
Name of Facility Where	Abatement is T	aking Pla	ce (3)	1	1.1010				Type of Facility (4	4)				
Woodbridge High S									School (K-12)	•				
Street Address									Subchapter 8					
1 Samuel Lupo Pla	ce								Other (i.e., priv homes, etc.)	vate and commer	cial bu	ııldıng	ļs,	
City (5)							- 7		Square Feet	# of Floors	Ble	dg. A	ge	
Woodbridge, NJ														
County (6)					Coun	ty Code (7	7)(STAT	TE USE ONLY)	Current Use (Prio	r if being demolis	hed)			
Middlesex									Educational I	Facility				
Name of Monitoring Firm	Hired by Build	ding Owne	r (8)	A	SCM	No.	Nan	ne of Abateme	ent Contractor (9)					
Environmental Cor	nection, Inc	:.					В	ristol Enviro	onmental, Inc,					
Street Address							Stre	et Address						
120 North Warren S	Street						11	123 Beaver	Street					
City, State, Zip Code					-	2000 N. 200 -	City	, State, Zip Co	ode					
Trenton, NJ 08608							В	ristol, PA 19	9007					
Project Manager for Mon	itoring Firm		T	eleph	hone	No.	Tele	ephone No.		License No.				
Dominick Dercole				609	-392	-4200	2	15-788-6040	3	00509				
Start Date (10)	18	Scheduled	Com	pletic	on Da	te (11)	Nan	ne of OSHA M	lonitor					
8 / 20 /	14	8	1	20	_ / _	14	В	ristol Enviro	onmental, Inc.					
Occupancy Status During	Abatement (Check onl	v one)			Stre	et Address						
☐ Facility Closed/Vacate	하는 이 경영을 막게 되었다. 그렇게			t.,,,	ent			123 Beaver	Street					
						cribe		, State, Zip Co						
Time of Abatement: _	AM	PM/3:	30PM	- <u>12:</u>	<u>00</u> AN	1	1 .	ristol, PA 19						
Scope of Work (Check al	Il that apply)				w/ 1									
F7	8, 800	5							ainment with Nega	tive Pressure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			Renov Demo					☐ Mini-Enc	osure g Procedure					
								☐ Non-Exe	mpted (*) and Non-	-Friable Procedur	е			
			Is Lo					999 - 30 - 60	*		Ab	atem	ent T	ype
Location Asbestos-Containing		, U	sed S	mally Solely		Acho	notoc (Description of Containing Ma	22	Amount	Re	Re	ш	ш
TO BE ABA		" 1	/lainte	enand	ce/			rmal systems		(Specify	Removal	Repair	cap	Enclosure
IN Facili		C	ustodi 1	ial St I2)	aff?		SI	urfacing, VAT	, or	SF or LF)	\sigma	-	Encapsulate	sure
(13)		Ye		No	N/A	-	oth	ner miscellane	ous)				ate	-
AD Office Air Handle	r Closet]		Pipe In:	sulat	ion		2 LF	\boxtimes			
Tunnel Beneath AD (Office		TE			Pipe In:	sulat	ion		2 LF				
		7							\Box			\Box		
	Ŧ								1		П	П		
Name of Registered Was	te Hauler					Vaste	Cub	ic Yards of	Name of Registe	ered Landfill				
Service Transport (Hau	uler IC	No.	Was	ste	Minerva Lar					
City, State				2	0990		Disp	osal Date	City, State					
New Castle, DE							1	21/14	Waynesburg	g, OH				
Completed By (Print or T	vpe)	Title					1	Signature		, Da	te ,		(8)	·
Gino Pizzigoni		Estin	ator					H: L	igzigoni /		1/20	0/1	4	
go			10.500.500.500					Lours 1	egregon 1	7		1.		

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

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

Date of Notification	(1) 8/14/14							wner / Operator	(2)	a 15						
Agencies Notified EPA DEP DOL DOH		ation aded R#1-8/19/ gency	14	City, S H OF I	BE\ State	VERL & Zip	CC STA	ROAD,B5-337A ode TES, ILLINOIS		AUC	, 25	2014 Tele	ephor	ie Nu	ımbe	er
DCA DCA		ellation	- 1			JAC		S				1.5	, p			
				FA	CILI	TY IN	VFC	RMATION								
Name of Facility W	here Abateme	ent is Taking Pl	ace (3					Type of Facility	y (4)							
KMART STORE				(0)				School (K								
Street Address										Other than K-			22		S - 180	
213 HIGHWAY 3	7 EAST									te & commer	cial buil				(C.)	
								Square Feet		# of Floors		Bldg	, Age			
City (5)		County (6)	Co	unty	Code	e (7)		33000		2			7	0+/-		
TOMS RIVER		OCEAN						Current Use (F	Prior if	being demo	lished)					
								RETAIL STO								
Name of Monitoring		y Building Own	ner (8)		AS	SCM I	No.	Name of Abate BRISTOL EN								
Street Address	_							Street Address		DEET						
318 12TH STREE								1123 BEAVE City, State & Z								
City, State & Zip Co								BRISTOL, P								
Project Manager for		irm	Teler	hone	- Nu	mber		Telephone Nu		101	Licens	se Nun	ber			
JIM PROCTOR	i Montoning i	11111	609-					215-788-604					0050	9		
Scheduled Start Da	ate (10)	Scheduled Cor						Name of OSH	A Mor	itor	-					
8/20/1			8/21		•			BRISTOL EN	VIR	ONMENTAL	_ INC					
Occupancy Status	During Abate	ment (Check or During Entire P	nly on	e) of Δh	aten	nent		Street Address 1123 BEAVE		REET						
		utside of Norm					nm	City, State & Z								
and the second of the second	9:00 PM -		ai iio	uis	ran	. 10 0	,,,,	BRISTOL, P.								
	cupied During							Diction of the	A							
Scope of Work (Ch						- 1777		1								
Scope of From Co.										Full Contain		ith Neg	ative	Pres	sure	;
≥3 sf or ≥3	If		\boxtimes	Re	nova	ation			\boxtimes	Mini-Enclosi						
≥160 sf ≥2	60 If			De	moli	tion				Glove Bag F				_		
			88 89							Non-Exemp						
	ocation of			Loca				Description			Amou		Aba	teme	ent I	ype
10 A C C C C C C C C C C C C C C C C C C	stos-Containin	g		mally solely		d		Asbestos-Cont Material (AC			(Speci SF or L		4		ш	_
	terial (ACM) BE ABATED			itena		or		(i.e., thermal sy		,	0, 0, 2	. ,	Remova	끖	Encapsulate	Enclsoure
	in Facility		1. 2.13.7500 6.693.9	odial		0.000	i	nsulation, surfac	ing, V	AT			von	Repair	nsd	SOL
	(13)			(12)				or other miscella	aneou	s)			<u> </u>	7	late	9
			Yes	No		0.7.01					4.05		N	\Box	_	\vdash
BREAK ROOM				Ш		4	Dr	wall with mas	stic p	ucks	4 SF			H	H	H
					L								님	무	무	뉴
													님	무	님	ዙ
													H	님	님	ዙ
													ዙ	무	님	井
									1			1011	Ш	Ш	Ш	
Name of Registere	ed Waste Hau	ler		100		P Wa r ID N		Cubic Yards of Waste		e of Register		ати				
SERVICE TRAN	SPORT GR	DUP, INC.		2	099	0				ERVA LAN	DFILL					
City, State NEW CASTLE, I	DE 19720							Disposal Date TBD		State NESBURO	s, OH 4	14688				
Completed By (Pri		+	-	T	itle	<u> </u>		Signature					Date			
PATRICK T. Dec				1		J. MG	R.		P.K	Ge Caro /	il		8/14/	14		

(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1) 8/14/14			Nam	e of	Buildin	ng Ov	wner / Opera	tor (2)						w		
Agencies Notified Type Notif	cation				ddress		3 CORP									
☐ EPA							OAD,B5-3	27 A								
☐ DEP ☐ Init	al		City,	Sta	te & Zi	p Cod	de	7/1	-		-			-		
[] [[] [] [] [] [] [] [] [] [ended						TES, ILLIN	OIS		AUG	25	2014				
	ergency	Ĭ	Name	e of	Conta	ct				BU/05	/ 5		Telepi	none	Num	her
☐ DCA ☐ Car	ncellation		GER	AL	D JAC	OBS	S					1.	ююр	10110		
Name of Facility Where Abater	nent is Taking I	Diago (FA	CIL	ITY II	NFO	RMATION									
KMART STORE 3071	ient is raking i	lace (3)				Type of Fac								4	
Street Address				-					(Other t	han K	12)					
213 HIGHWAY 37 EAST							Other (i e nriv	vate & co	mmer	ial h	wilding	ac ho	mac	oto \	
							Square Fee		# of FI		Jidi D		ldg. A		eic.)	
City (5)	County (6)	Co	unty	Cod	de (7)		3300		0	2		ا	iug. A	70·	L/	
TOMS RIVER	OCEAN				5-275 (- 5-1 - 6-1		Current Use	122	if being		shed	<u></u>		70	-/-	
							RETAIL S				0.100	,				
Name of Monitoring Firm Hired	by Building Ow	ner (8)		A	SCM	No.	Name of Ab	ateme	nt Contra	actor (9	1)					
HEALTH & SAFETY Street Address							BRISTOL									
318 12 TH STREET							Street Addr									
City, State & Zip Code							1123 BEA									Learner I and
HAMMONTON, NJ 08037							City, State 8									
Project Manager for Monitoring	Firm	Telen	hone	Nu	mber	-	BRISTOL, Telephone I				Lino	nac Ni				
JIM PROCTOR		609-	704-8	385	0		215-788-60		ı		Lice	nse N	umbei 005			
Scheduled Start Date (10) 8/19/14	Scheduled Co			te (11)		Name of OS									
Occupancy Status During Abate	ment (Check o	8/20		_			BRISTOL		ONME	NTAL	INC					
Facility Closed/Vacated	Durina Entire F	Period (s) of Aba	aten	nent		Street Addre		TDCC							
Abatement Performed C							1123 BEA\ City, State &									
Describe: 9:00 PM -	6:00 AM	, , , , ,			i to opi	- 1	BRISTOL,									
Facility Occupied During	Abatement	0.5				- 1	DINIOTOL,	FA 13	007							
Scope of Work (Check all that a	pply)													-		
N									Full Co	ntainm	ent w	vith Ne	gativ	e Pre	ssure	9
≥3 sf or ≥3 lf		\boxtimes	Ren					\boxtimes	Mini-Er	closure	е		-			
≥160 sf ≥260 lf			Dem	nolit	ion				Glove E							
Location of		1-1							Non-Ex	_			Friabl	e Pr	ocedu	ıre
Asbestos-Containir	a	Norm	ocati	70.00	4	٨	Descriptio			1 55.50	mou		Ab	aten	ent T	ype
Material (ACM)	•	So	lely b	у	1	^	sbestos-Cor Material (A		3		Spec F or I				ш	-
TO BE ABATED		Maint	enand	ce o		(i.	e., thermal s	system	s		OI I	-1 /	Re	٦	nce	Enclsoure
in Facility (13)		Custo		Staff	?	insu	ılation, surfa	cing, V	AT				Remova	Repair	Encapsulate	Siso
(13)			(12) No	N/A	A	or	other miscel	ianeou	s)) à	=	late	ure
BREAK ROOM		\Box	\Box	X		rvwa	all with ma	stic n	ucke		4 SF			\vdash		
		ПI	Ħ		il	. ,	All With High	suc p	ucks		4 31		묶	H	H	H
		市	Ħ	Ħ	it						-		╁┼	H	₩	H
		n	Ħ	Ħ	í I						-		+片	ዙ	H	H
			n	Ī				-					卄片	H	H	H
													Ħ	H	H	H
ame of Registered Waste Haul	er		NJE	DEP	Waste	e Cul	bic Yards	Name	e of Reg	stered	Land	Hill				
ERVICE TRANSPORT GRO	LIP INC		209		ID No.	of V	Vaste	BRINIT	-DV4 1	ANIDE						
ity, State	01,1110.		203	30		Die	nosal Data		ERVA L	ANDF	ILL					
EW CASTLE, DE 19720						TB	posal Date D		State 'NESBU	JRG. C)H 4	4688				
ompleted By (Print or Type)			Title				nature	-					Date			
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D14081										0	/	-				100

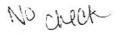
word

Date of Notification (Owner / Operato							
Agencies Notified	4/28/14 Type Notification	ation		Sta	te d	of No	ew Je	rsey Departm	ent of Huma	ın Serv	ices		- 1		
PA EPA	Type Nounca	ation				Addre		22 South Warı	on Ctroot	AUG	2 5 20	114			
☐ DEP							Zip C		en Street	7100	4 - 20	17			-
⊠ DOL		nded R#2-8/19					J 086								
⊠ DOH	Santa and Santa	gency					ntact	123			- T	Telepho	no N	umb	or
☐ DCA		ellation	100			arla					ı	relepric	ne N	umb	ei
				F	AC	LIT	Y INF	ORMATION			-				
Name of Facility Who	ere Abateme	ent is Taking P	lace (3)				Type of Facili	ity (4)		+				
Trenton Psychiatr	ric Hospita	I - Haines B	ldg					School (I	K-12)						
Street Address							E900		ter 8 (Other th						
100 Sullivan Way	PO Box 75	500							e. private & co	mmercia	al buildin	gs, hom	es, e	tc.)	
0.1								Square Feet	# of Flo	oors	E	Bldg. Ag	е		
City (5)		County (6)	Co	unty	y Co	de (7)	75000		3			40+		
West Trenton		Mercer						1	(Prior if being	demolisi	ned)				
								Various Sei							
Name of Monitoring F	irm Hired by	y Building Owr	er (8)			ASC	M No.		tement Contra						
Environmental Co	llection								ironmental,	Inc.					
Street Address 120 North Warren	Ctroot							Street Addres							
City, State & Zip Cod								1123 Beave							
Trenton, New Jers								City, State & 2 Bristol, PA							
Project Manager for M		irm	Telep	hor	ne N	lumb	er	Telephone No		- II	icense N	umber			-
Ryan Broadwater			609-				0.	(215)788-60			0509	unibei			
Scheduled Start Date	(10)	Scheduled Con	npletio	on D	ate	(11)	11-11/11/1-1-10	Name of OSH	A Monitor				0-00-		
5/12/14			H NC		D			Bristol Envi	ironmental I	nc.					
Occupancy Status Du	uring Abaten	nent (Check or	nly one	e)				Street Addres	S						
		Ouring Entire P						1123 Beave				_			
A STATE OF THE PARTY OF THE PAR		itside of Norma		urs -	- 7a	m to	3pm	City, State & 2							
Describe:		M - 12:30 AN	/I					Bristol, PA	19007						
Facility Occup Scope of Work (Chec			- 30-00		_						-				
Coope of Work (Office	m all triat ap	piy)							☐ Full Co	ntainme	nt with N	enative	Pres	SIIFA	
≥3 sf or ≥3 lf	*		\boxtimes	Re	enov	/atio	n		Mini-En			oguavo	1 100	Juic	8
≥160 sf ≥260	lf		П	De	emo	lition	1			Bag Prod	edures				
										-	and Non	-Friable	Pro	cedu	re
Loc	ation of		ls l	Loca	ation	n T		Description			nount		teme		_
	s-Containing		Norn					Asbestos-Cont	aining		pecify		$\neg \neg$		-
	rial (ACM) E ABATED		Main	olely				Material (AC		SF	or LF)	الم		핅	ш
	Facility		Custo				i	(i.e., thermal synsulation, surfac				Removal	Repair	ap	ıcls
	(13)			(12				or other miscella				ova	활	Encapsulate	Enclsoure
			Yes	No	1	N/A								9	
Throughout				\boxtimes			Pipe	Insulation (w	rap & cut)		7 LF				
Throughout	0.8832						0.000	Pipe Insula	tion		LF				
Throughout				\boxtimes				Pipe Insula	tion	5	0 LF		\boxtimes		
		7													
									anzesta and a second						
Name of Registered V	Vaste Haule	r		100000			Carlo	Cubic Yards	Name of Reg	istered l	andfill	and the second s			
Bristol Environme	ntal Inc			9 (99)	870	er ID	7110 V004014-0 [8]	of Waste 1 Cu yd	GROWS La	ndfill					
City, State	ai IIIC				010	,,,		Disposal Date	City, State	nunn	1				
Bristol, PA								5/14/14	Morrisville,	PA					
Completed By (Print of	or Type)			T	itle			Signature				Date			
Gino Pizzigoni	must be	5.9		10000		ect		H. D	,	1.0		4/28	/14		
45				IV	lan	agei	r	Home Piez	zecond	1					
CT 1001E 1								0	01						

Date of Notification (1) 4/28/14	+	Name of I	Building	Owner / Operator	or (2)	n Comisso			,	
Agencies Notified Type Notificat	tion	Street Ad	dress	ersey Departin	ient of Huma	200				
☐ EPA				22 South War	ron Stroot	ALIG 2	5 2014	į.		
☐ DEP ☐ Initial		City, State	e & Zip (Code	Ten Street	Noo				
		Trenton,							88	*6
□ DOH □ Emergence □ Emergence		Name of					Telepho	one N	lumb	201
☐ DCA ☐ Cance		Pam Hai					E.	JIIC IN	IUIII	1-1
		FACIL	ITY INF	ORMATION			-1			
Name of Facility Where Abatemer		3)		Type of Faci					0.00	3 (2)
Trenton Psychiatric Hospital	- Haines Bldg			School (
Street Address 100 Sullivan Way PO Box 750	00				pter 8 (Other the	nan K-12) mmercial build	lings hon	noo o	· • · ·	
		33		Square Feet			Bldg. Ag		etc.)	
City (5)	County (6) Co	unty Code	e (7)	75000		3	Diug. Ag			
	Mercer	, ooa.	· (.)		(Prior if being		L	40+		
				Various Se		demonshed)				
Name of Monitoring Firm Hired by	Building Owner (8)	AS	SCM No	. Name of Aba	tement Contra	ictor (9)				_
Environmental Collection					rironmental,					
Street Address			CHIMINESAN	Street Addre						
120 North Warren Street				1123 Beave	er Street					
City, State & Zip Code				City, State &						
Trenton, New Jersey 08608				Bristol, PA				_ipapp		
Project Manager for Monitoring Fir Ryan Broadwater		ohone Nur 392-4200		Telephone N (215)788-60		License 00509	Number			
	cheduled Completio			Name of OSI		100000				
5/12/14	ON H	OLD			ironmental l	nc.				
Occupancy Status During Abatem			78	Street Addres					800	
Facility Closed/Vacated Du				1123 Beave						
Abatement Performed Out		urs – 7am	to 3pm	City, State &	Zip Code					
Describe: 4 PN Facility Occupied During A	M – 12:30 AM batement			Bristol, PA	19007					
Scope of Work (Check all that app										
	5.5				☐ Full Co	ntainment with	Negative	Pres	sure	3
≥3 sf or ≥3 lf ≥160 sf ≥260 lf	\boxtimes	Renovat	tion			closure	•			
≥160 sf ≥260 lf		Demoliti	ion		Glove E	Bag Procedures	s			
					Non-Ex	empted and N	on-Friable	e Proc	cedu	ire
Location of		Location		Description		Amount	Aba	ateme	ent T	ype
Asbestos-Containing		nally Used	1	Asbestos-Con		(Specify		П		T
Material (ACM) TO BE ABATED		olely by tenance o		Material (At (i.e., thermal st		SF or LF)	70	_	En	ш
in Facility		odial Staff	2.50	nsulation, surfac			en	Repair	ap	cls
(13)		(12)		or other miscella			Removal	a.	Encapsulate	Enclsoure
	Yes	No N/A)			-		ite	0
Throughout			Pip	e Insulation (v		7 LF				
Throughout				Pipe Insula		5 LF				
Throughout				Pipe Insula	tion	50 LF		\boxtimes		
Name of Registered Waste Hauler				Cubic Yards	Name of Reg	istered Landfill				
Bristol Environmental Inc		Hauler 18706	Aller and the property of	of Waste 1 Cu yd	GROWS La	ndfill				
City, State		1.5,00		Disposal Date	City, State					
Bristol, PA	22.00			5/14/14	Morrisville,	PA				
Completed By (Print or Type)		Title		Signature	0.	,	Date		-	-
Gino Pizzigoni		Projec	9.9	4.	Pa	. / 7	4/28	/14		
2		Manag	jer	Hind	1 2 sign	m/p				

Cl#2611

Date of Notification (1) 4/28/14						Owner / Operatorsey Departm		Human Sor	vices		1/2		-
Agencies Notified Type Notifi	cation			ddre		isey Departin	ent or	numan ser	VICES		-		
EPA		P.O	. Bo	ox 70	00, 22	22 South War	ren Str	eet					
DEP Initi					Zip C			AUG	S 2 SOI-	4			- 2
	ended	-			J 086	25			1-				
	ergency scellation			f Con arla r					[1	elepho	ne N	IImp	٦٢
	YE 1940 (1940)					2011471011							
Name of Facility Where Abaten	nent is Taking Pla		ACII	LIIY	INF	Type of Facili	ity (A)						-8
Trenton Psychiatric Hospit						School (
Street Address							77.5	Other than K-1	12)				
100 Sullivan Way PO Box 7	7500					Other (i.e				Control State of Control	0.000	tc.)	
(Cit. (5)	To : :0	16 -	_			Square Feet	- 1	# of Floors	В	ldg. Ag	е		
City (5)	County (6)	County	/ Co	de (7	")	75000		3			40+		
West Trenton	Mercer					Current Use (Various Ser		being demoli	sned)				
Name of Monitoring Firm Hired	by Building Owne	er (8)	1	ASCA	M No.	Name of Aba		Contractor (0	<u> </u>				
Environmental Collection	by building build	J. (U)	ľ	1001	vi 140.	Bristol Env			,				
Street Address						Street Addres	ss						
120 North Warren Street						1123 Beave		2892					
City, State & Zip Code Trenton, New Jersey 08608	1					City, State & Bristol, PA		le					
Project Manager for Monitoring		Telephor	ie Ni	umbe	er	Telephone No			License No	ımber	CCC		
Ryan Broadwater		609-392				(215)788-60			00509	annoci			
Scheduled Start Date (10)	Scheduled Com			(11)		Name of OSH							
5/12/14		5/14/14				Bristol Envi		ental Inc.					
Occupancy Status During Abate Facility Closed/Vacated	ment (Check on) During Entire Pe	y one) riod of A	hate	men	t	Street Addres	1000						
Abatement Performed C						City, State & 2							
	PM - 12:30 AM				ор	Bristol, PA		•					
☐ Facility Occupied During	Abatement												
Scope of Work (Check all that a	pply)							- " 0			_		
≥3 sf or ≥3 lf		⊠ R€	nov	ation	r.			Full Containm ⁄lini-Enclosur		egative	Pres	sure	1
☐ ≥160 sf ≥260 lf				lition				Blove Bag Pro					
							Brown Co.	Non-Exempte		Friable	Proc	edu	re
Location of		Is Loca				Description		1		Aba	teme	nt T	уре
Asbestos-Containii Material (ACM)	ng	Normally Solely		ed		Asbestos-Cont Material (AC			Specify F or LF)			m	
TO BE ABATED		Maintena		or		(i.e., thermal sy		3	i oi Lir)	Re	_D	nca	Enc
in Facility	(Custodial		ff?		sulation, surfac				Remova	Repair	Encapsulate	Enclsoure
(13)	.	(12 Yes No		I/A		or other miscella	aneous)			<u>a</u>		late	re
Throughout				7	Pine	Insulation (w	ran &	cut).	7 LF		П		
Throughout				4	1 ipe	Pipe Insula		cuty	5 LF		H	H	뉘
Throughout				5		Pipe Insula			50 LF	H	X	Ħ	Ħ
													一
							2- 00-20						
Name of Registered Waste Hau	ler	1 10000		P W	100000000000000000000000000000000000000	Cubic Yards of Waste	Name	of Registered	Landfill				
Bristol Environmental Inc		120	870		22233	1 Cu yd	GROV	VS Landfill					
City, State					_	Disposal Date	City, S	하면 하면 다른 사람이 하면 하면 살아 있다면 나를 했다.				_	
Bristol, PA	17					5/14/14		sville, PA					
Completed By (Print or Type)		100	tle		1	Signature			1	Date	1000		
Gino Pizzigoni			roje			Geno Rig	2	ic /	D.	4/28	/14		
		IV	iana	ager		some ly	Lado	xe / 1	1				



Date of Notification (1)				120	Name	of Buildin	na Owi	ner/Operator (2)				
8 /	11 /	14			10000			ceton Unive	W-154		0 "		
Agencies Notified	Type Notin	fication			Stree	Address				AUG	2 5 20	1	
□ EPA						MacMil	llan B	uilding					
□ DOLWD	⊠ Ameno					State, Zip		unung				· ·	
☐ DHSS		ment #		775		nceton,		1544					
☐ DCA (NJAC 5:23-8)	☐ Emerg justific	ency (in	cluding	3		of Conta				Telephone Num	nher		-
(160/10 0.20-0)	☐ Cance				Control of the Con-	bert Orte	1777			relephone Ivan	ibei		
			100					BEATION		_			
Name of Facility Where A	Abatement i	e Takin	Dlace	(3)	FA	CILITY	NFOR	RMATION	Time of Facility /				
Princeton University		s rakiii	riace	(3)					Type of Facility (☐ School (K-12)	200			
Street Address	Ly		- 3000	0000					Subchapter 8		2)		
5 Ivy Lane									Other (i.e., pri			ngs,	
City (5)									Square Feet	# of Floors	Bldg.	Δαρ	
Princeton									Oquare 1 eet	# 01110015	Blug.	Age	
County (6) MERCER					Cour	nty Code ((7)(STA	TE USE ONLY)	Current Use (Price	or if being demoli	ished)		
Name of Monitoring Firm	Hired by Br	uilding (Owner ((8)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)				
Cardno ATC		1.70		3 57			1		VIRONMENTAL	INC.			
Street Address								et Address		,			
Bromley Corporate	Center, 3	Terri I	Lane,	Ste	. 12		1	123 BEAVE	R STREET				
City, State, Zip Code							City	, State, Zip C	ode				
Burlington								RISTOL, PA					
Project Manager for Mon	itoring Firm		V. Talliana	Te	lephone	No.	Tele	ephone No.		License No.			
Mike Keehn				1	609-386	-8800	2	15-788-6040	1	00509			
Start Date (10)		Sched	luled C	omp	letion Da	te (11)	Nan	ne of OSHA N	lonitor	-		V	-
_8 / _21 /	_14		N	H	OLO		В	RISTOL EN	VIRONMENTAL	, INC.			
Occupancy Status During	Abatemen	t (Check	c only c	one)	11214		Stre	et Address					
☐ Facility Closed/Vacate							1	123 BEAVE	R STREET				
Abatement Performed Time of Abatement: 7	Outside of :00AM-3:3	Normal OPM/_	Facility PI	у Но М	urs - Des AM	cribe		, State, Zip Co					
Scope of Work (Check al	I that apply)							THOTOL, TA	. 15007	1000 000			
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Re □ De					☐ Mini-End	tainment with Nega losure g Procedure mpted (*) and Non		ıre		
		-	Is	Loc	ation				() = ()		Abate	ment T	Type
Location		W 2 2 2 2 1 1 2			ally			Description of					1
Asbestos-Containing I TO BE ABA		CM)			olely by nance/			Containing Ma		Amount	Remov	nca	ncl
IN Facili				todia	I Staff?	(1.6		rmal systems urfacing, VAT		(Specify SF or LF)	Removal	Encapsulate	Enclosure
(13)				(12		-	oth	er miscellane	ous)	,	-	late	d)
No. Side Rear Ext Ro	of Parane	t Wall	Yes	No			-0.5-00 %						
THO: Olde Real Ext No	or rarape	t wall				Stucco	on R	Roof		150 SF			
											ПП	П	П
Name of Registered Was	te Hauler			-	NJDEP		Cub	ic Yards of	Name of Registe	ered Landfill		- -	1-
BRISTOL ENVIRON		INC.			Hauler II	No.	Was			NORTH LAND	FILL		
City, State BRISTOL, PA 19007	City, State BRISTOL, PA 19007						Disp	osal Date	City, State	LE, PA 19067	8		
Completed By (Print or Ty		Title						Cianatura	MONTONI				
Brian Scafiro	(PC)	0.2753	stimat	tor				Signature	Scolero	Di	ate 19 1	4	

ASB-41 MAY 11 B 514078

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

CR#2684

Date of Notification (1)		2-25			Nom	of Duildie		- 10	,			-		
	11	/14	ı		698			ner/Operator (-	- 0 1 5			
Agencies Notified	Type No	tification			Stree	t Address			(1)	ig 25	2014			
□ EPA	Initial					MacMil		Building	T/C	, .				
DOLWD8019	Amer					State, Zip								
□ DHSS 8002		ndment # gency (ir		-	Pri	nceton, l	NJ 0	8544		94	*			
(NJAC 5:23-8)		ication)	icidalii	9	Name	of Contac	ct			Telephone	Number	-		
	☐ Cano	ellation			Ro	bert Orte	ega		**					
		2000			FA	CILITY II	NFO	RMATION		-				
Name of Facility Where A	Abatement	is Takin	g Place	e (3)					Type of Facility (4	4)				
Princeton Universit	ty								School (K-12)					
Street Address									Subchapter 8					
5 Ivy Lane									Other (i.e., pri homes, etc.)	vate and co	mmercia	build	ings,	
City (5)				-					Square Feet	# of Floor	s	Blda	Age	
Princeton														
County (6)					Cou	nty Code (7)(STA	TE USE ONLY)	Current Use (Price	or if being de	emolished	4)		West Server
MERCER														
Name of Monitoring Firm	Hired by I	Building	Owner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)					
Cardno ATC							E	BRISTOL EN	VIRONMENTAL	, INC.				
Street Address			-				Str	eet Address		<u> </u>	-			
Bromley Corporate	Center,	3 Terri	Lane,	Ste.	12		1	123 BEAVE	R STREET					
City, State, Zip Code							City	y, State, Zip Co	ode					-
Burlington							E	BRISTOL, PA	19007					
Project Manager for Moni	toring Firm	n		Te	ephone	No.	Tel	ephone No.	-	License N	10.			
Mike Keehn				€	09-386	-8800	2	15-788-6040		00509				
Start Date (10)		Sched	duled C	ompl	etion Da	ite (11)	Nar	me of OSHA N	lonitor	-				
_8 / _21 /	14	_	9 /		1/	14	B	BRISTOL EN	VIRONMENTAL	, INC.				
Occupancy Status During	Abateme	nt (Chec	k only	one)			Stre	eet Address						-
☐ Facility Closed/Vacate							1	123 BEAVE	R STREET					
Abatement Performed Time of Abatement: 7								, State, Zip Co BRISTOL, PA						
Scope of Work (Check all	that apply	()						7110101,17	10007					
		,							ainment with Nega	tive Pressu	ге			
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re					☐ Mini-Enc	losure g Procedure					
				, i i i i i i	011				mpted (*) and Non-	-Friable Pro	cedure			
				Loca							Τ.	Abate	ment	Гуре
Location		014)		Norm	ally ely by			Description o			.	g :	<u> </u>	Īm
Asbestos-Containing N TO BE ABA		CM)			ance/			Containing Ma rmal systems i		Amoun (Specifi	t	Removal	nca	nclo
IN Facility			Cus	todial (12	Staff?		s	urfacing, VAT,	or	SF or LF	=)	<u> </u>	Encapsulate	Enclosure
(13)			Yes	No		1	oth	ner miscellane	ous)		1		ate	"
No. Side Rear Ext Roo	of Paran	at Wall		-	-							_		\perp
No. Side Real Ext No.	oi raiapi	et wan	\boxtimes			Stucco	on F	Roof		150 SF	= 0	3 [
										2 20 1	Ī	710		
												- -		1
Name of Registered Wast	- Haulas		\Box	1	NJDEP I	N	10	in Manda of	100-100-11	11 150	علب	715	111	
BRISTOL ENVIRONI		, INC.		1000	lauler II	No.	Was	oic Yards of ste	Name of Registe G.R.O.W.S.			L		
City, State					18706		Disr	osal Date	City, State			9.50 		
BRISTOL, PA 19007							Dial	Jour Date	MORRISVIL	LE, PA 19	067			
Completed By (Print or Ty	oe)	Title					1	Signature			Date	, ,		
Brian Scafiro		E	stima	tor				Brian	Scofero /	il	8/	1//	4	

ASB-41 MAY 11 B S 14078

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

ck/941

Date of Notification (1) 08-20-2014					Owner / Operator rsity Hospital	r (2)									
Agencies Notified Type Notification	St. 22	reet A 201 C	Addre Chap	ess el Hi	II Campus		AL	JG 25	2014						
☐ DEP ☐ Initial ☐ Amended (2 nd)				Zip (ode 08002										
DOH ☐ Emergency		ame o			08002			T	elenho	ne N	umh	oer .			
DCA Cancellation	1000	r. Bu						1000	U.	ile iv	ui				
		FAC	ILIT	Y INF	ORMATION										
Name of Facility Where Abatement is Taking F	Place (3)				Type of Facili										
Kennedy University Hospital Street Address					School (F										
2201 Chapel Hill Campus							Other than K-12) ate & commercial				4- \				
and i diapoi im dampus					Square Feet	s. pilve	# of Floors		dg. Age		(C.)	-			
City (5) County (6)	Cour	nty Co	ode (7)	250,000)	2	100	ag. Age	52					
Cherry Hill, NJ 08002 Camden		•	S-0000 (0000)				f being demolish	ed)							
					Hospital		· ·								
Name of Monitoring Firm Hired by Building Ow	ner (8)		ASC	M No	Name of Abat	temen	t Contractor (9)								
Criterion Laboratories, Inc.					Resource M	lanag	ement Group,	LLC							
Street Address					Street Addres										
3370 Progress Drive, Suite J					2115 Hamilt										
City, State & Zip Code Bensalem, Pa. 19020					City, State & Z					6					
Project Manager for Monitoring Firm	Talanh	h	l b		Trenton, NJ	0100010000000									
Mr. Mike Panepresso	Telepho				Telephone Nu 609-977-615		Li	cense Nu	mber 0118	5					
Scheduled Start Date (10) Scheduled Con	NAME AND ADDRESS OF THE PARTY O				Name of OSH		nitor								
09-02-2014	09-23-20	014	, ,				tal Laboratorio	es Inc							
Occupancy Status During Abatement (Check o	nly one)			- 20	Street Addres										
Facility Closed/Vacated During Entire F			emer	nt	2333 Route										
Abatement Performed Outside of Norm Describe: 3:30pm-12:30am	ial Hours	urs: City, State & Zip Code Union, NJ 07083													
Facility Occupied During Abatement					Union, NJ U	7083									
Scope of Work (Check all that apply)												-			
	1	Full Containme							t with Negative Pressure						
≥3 sf or ≥3 lf		Reno					Mini-Enclosure								
≥160 sf ≥260 lf		Demo	olition	1			Glove Bag Proce			_					
Location of	ls Lo	cation	n		Description	⊠_	Non-Exempted a	and Non-			7 TO TO THE	1737			
Asbestos-Containing	Norma		1000		Asbestos-Cont			pecify	Aba	teme	ent T	ype			
Material (ACM)		ely by			Material (AC	CM)	SF	or LF)	_		g	m			
TO BE ABATED in Facility	Mainter Custodi		2.5		(i.e., thermal sy nsulation, surfaci				Remova	Repai	cap	ncls			
(13)	The second secon	12)	aii:		or other miscella				ova	air	Encapsulate	Enclsoure			
	Yes N	1 or	V/A								é	· CO			
T-4 Area					Flooring Ma	stic	18	3 SF							
T-4 Area		X		-	ACM Coating o		am 30) SF							
T-5 Area			Ш		Flooring Ma			SF							
T-5 Area					ACM Coating o	n bea	am 30) SF							
	HH	411	4						141	님	님				
Name of Registered Waste Hauler		N IDE	EP W	Vacto	Cubic Yards	Name	e of Registered L	andfill				Ш			
		Haule			of Waste	IVallic	e or registered L	arium							
Resource Management Group, LLC		0035	218		TBD	Grov	vs Landfill								
City, State Trenton, NJ 08619					Disposal Date TBD	City,									
Completed By (Print or Type)		Title				INIOLL	isville, PA		Det						
Mr. Brian Haney	nt	Signature	,	Nove	31	Date 08/2 ()/20)14							
					1/	v									

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

Date of Notification (1)					Name of Building Owner/Operator (2)											
8-15-14				Rob McDonald												
Agencies Notified	Type Noti	ficat	ion	Stre	et Addr	ess			69							
[]EPA	[X]Init	ial		71	7 Bo	ulev	ard	E		0016						
[]DEP	Not	ificat	ion	City	, State	, Zip	Code		UA	G 2 5 2014			-	77		
[X]DOL	[]Ameno		.	We	ehau	ken,	NJ,O	7086								
[X] DOH	Not	Lficat	lon	Name	of Con	tact		-	Telepho	one Number				-		
[]DCA	[]EMERO	SENCY			b Mal		ld		/200				Ä			
	[]Cance	ellati	.on													
					FACI	LITY	INFORM	ATION								
Name of Facility Who		ent is	Taki	ng Pl	ace (3))			Type of Faci	lity (4)						
Same as above	1								[]School				20 40			
Street Addres									[14] 69 500 Table 10	pter 8 (Othe (i.e., priva						
				3						buildings, h						
Oi to 15		-							Square Feet	# of Floo	ors	Blo	dg.	Age		
City (5		Co	unty	(6)Es	sex			ode (7) SE ONLY)								
									Current Use	(Prior if be	ing o	dem	olis	shed)	
Name of Monitoring I	Firm hired	by Br	ildin	σ Δ S	CM No.		Namo	of Abato	ment Contract	or (9)		_				
Owner (8)		J 20		.9	, dar 110.		The second second		ANAGEMEN'							
N/A Street Address								t Addres		,	_					
Durac mades									topher Si	_						
City, State, Zip Coo	de							State,				_				
ordy, beate, mrp coe	46						-		r, NJ 070	142						
Project Manager for	, mo	lopho	ne Numb			hone Num					371					
rroject hanager for	200	/A	ne Numi	ber	1	73) 744	The state of the s	- 1	icen 003			ber				
Scheduled Start Date	2 (10)	Sahad		hineto.com	n Date	(11)		of OSHA			-	< ·	_			
8-25-14	3 (10)		-26-		n Date	(11)	N/A		MONITOR							
	ear	Mont	h i	Day	Year	:	1,,									
Occupancy Status Dur [X]Facility Clo of Abatemen	sed/Vacate						Stree	t Addres	5						10.25	
[]Abatement Pe	rformed Ou													- 1000		
Hours - Desc []other - Desc	ribe: <u>«OffH</u> ribe:«Othe	r Occ	Descri	<u>pt»</u> Desc	ript»											
Scope of Work (Check							1	-/								
		11 1		86255 W					Containment w	ith Negative	Pres	ssu	re			
[X]>3 sf or []>160 sf or			37		ovation olition				Enclosure bag Procedure							
									riable Proced	ure				15, 4		
Location	ı of			Is ocati		*	De	escriptio	n of		A	ba	teme	nt T	Type	
Asbestos-Cor	ntaining		N	Used	i -			stos-Cont		Amount		R E	R	N	N	
Material TO BE AR			E	Solel Sy Mai				aterial (, thermal		(Specify		M	E	A	010	
In Facil				enanc		in			acing, VAT,	LF)		v	A I	S	S	
(13)			Staff (12) or other miscellaneous) Yes No N/A									A L	R	L	U R	
Basement			163	110	X	Boi	ler			25 SF	X		-	•	E	
					-					1001		-			-	
					1					ļ	-				-	
Name of Registered Waste Hauler NJD					Waste	Cul	bic Ya	rds	Name of Rec	istered Land	fill					
AZTECH MANAGEMENT INC Haule					ID No.		Waste		G.R.O.W							
City, State				Disposal Date					City, State							
Montclair, NJ 07042					8-27-14 Morrisville, PA 19067											
													53			
Completed By (Print		Title					S	Signature			Dat					
Constantine V	ivian	rre	resident ()						U C~ 8-15-14							



Date of Notification (1) 08/20/14			Name of Building Owner/Operator (2) SHLOMO HOROWITZ													
Agencies Notified	Type Notification			Street Ad	idress DGE A\	/ENU	 E			AUG	2 5	2014			7.	
DEP DOL	Initial Amended Amendment #	<u> </u>			te, Zip Co VOOD,		701							*	:	
⊠ DOH DCA	Emergency (in justification) Cancellation	ncluding		Name of	Contact				4	Tele	ephone N	Numbe	er		. 4	
				FACIL	ITY INFO	RMAT	ION									
Name of Facility Where Street Address	Abatement is Taking	Place (3)							of Facility (4 School (K-12 Subchapter	2)	er than K	(-12)		58		
195 RIDGE AVENU	JE							E e	other (i.e. pr			ercial b				es,
City (5) LAKEWOOD, NJ								1000		3	Floors			dg. A	ge	
County (6) OCEAN				County C	code (7) ISE ONLY)			Curre	nt Use (Prio	r if bei	ng demo	olished)	4		
Name of Monitoring Firm	n Hired by Building C	wner (8)		ASCM	No.				ement Con							
Street Address				1			Street	Addres	s		14,120					
City, State, Zip Code							1000000	HIIE L State, Zi	DOVE CC	JURI			_	-		
	7.1.5			T-1		¥8	300000000000000000000000000000000000000		DD, NJ 08	3701	Lisans	a Nia				
Project Manager for Mo	nitoring Firm			Telephor	ne No.		7.1	668-9			Licens 1200	e No.				
Start Date (10) 08/31/2014		Schedule 08/31/2		npletion [Date (11)		1/23/2/2005		IA Monitor PROFE	SSIO	NALS					
Occupancy Status Durin	ng Abatement (Check	Only One	e)					Addres				-				
Facility Closed/Vac Abatement Perform	cated During Entire P ned Outside of Norm	eriod of Al	bater Hour	ours City, State, Zip Code								-	_	20000		
Other – Describe:				LAKEWOOD, NJ 08701									- 1			
Scope of Work (Check A	All That Apply)	_														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoli					Min Glo	Containme i-Enclosure vebag Prod n-Exempted	edure	Ü				a.	
		Is	Locat	tion					I-Exemple:	/ / an	a Holl I	Tidole	-0.0110-3	Abate	ment	i
Locatio		N	orma	lly		D	escription	n of				-		Ту	pe	
Asbestos-Containing TO BE AB In Fac (13)	BATED	Mair	ntena	Staff?		therma surf	ntaining Mal system acing, VA miscella	is insula AT, or		(5	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
EXTER	RIOR						SIDING	3		12	00 LF	2				
								11 - 12 11								
													23 -			
				LIDEDIA	f= - 1 -	T 0h:	- Vd-		Nome of	Dagist	red Lon	4611				
Name of Registered Wa			1	NJDEP W Hauler ID 14509		of W	c Yards aste ARDS		Name of IESI	regisi	eleu Lali	IGHII				
City, State NEWARK, NJ						Disp	osal Date 1/2014		City, State		/I PA					
Completed by JOSEPH PERLSTE	NER Signature Date 08/20/2014															

Date of Notification (1) 08/20/14	Name of Building Owner/Operator (2) KATHY CSASZAR															
	ype Notification			Street Ac						A 1 1	C 2	-	nns e		10	-
			1 2		IIGHWAY	77				AU	G 2	D.	2014			10
EPA DEP DOL	Initial Amended Amendment #				te, Zip Code		13									Î
▼ DOH	Emergency (in justification)				Contact					Tele	phone	Num	ber			j
☐ DCA ☐	Cancellation									1_						
Name of Facility Where Aba	atement is Taking	Place (3)		FACIL	LITY INFOR	RMATI	ON	Type	of Facility (4	1	100 100 100	-				
Traine of Facility Where Abe	Rement is Taking	i lace (o)						-	100							
Street Address						<u>U</u>			School (K-12 Subchapter 8		er than	K-12)	r			
1578 HIGHWAY 77								×	other (i.e. pr					lings,	home	es,
City (5) DEERFIELD, NJ								Square 1000		# of 2	Floors		В	ldg. A	ge	
County (6) CUMBERLAND				County C	Code (7) ISE ONLY)			Currer	nt Use (Prio	r if bei	ng dem	olishe	ed)		40	
Name of Monitoring Firm Hi	red by Building O	vner (8)		ASCM	No	1000-11-20	Name		ement Cont	ractor	(9)	-				
	led by ballaring of	writer (6)		AOOW	140.		14 (E12)		PROFES		*					
Street Address							100.000.000	Addres	s DOVE CO	URT						
City, State, Zip Code								State, Zi	p Code DD, NJ 08	3701						
Project Manager for Monitor	ring Firm			Telephor	ne No.		Teleph	hone No 668-90),		Licens 1200).			
Start Data (10)	1.	Cabadula	d Com	nlotion (Data (11)				A Monitor		1200					
08/30/2014	art Date (10) Schedule 08/30/2						March 1995 and the second seco		PROFES	SSIO	NALS		5			
Occupancy Status During A	batement (Check	Only On	e)	6 WHITE DOVE C												
Facility Closed/Vacate Abatement Performed				ement												
Other – Describe:		100 000			DD, NJ 08	3701										
Scope of Work (Check All T	hat Apply)					76	100									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emoliti	100000000000000000000000000000000000000			2	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
		I						_i Nor	i-Exempted	(") and	Non-r	-паон		Sections	ement	
		1 70	Location Lormall				9 9								ре	
Location of Asbestos-Containing Ma		Used	d Solel	y by	Asbesto		scriptior taining N		(ACM)	А	mount				m	
TO BE ABAT			ntenar odial S	227.00.00		hermal	system	s insula		(8	Specify		Re	D	inca	En
In Facility (13)		J	(12)				cing, VA niscellar			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
()		Van	NI-	NI/A		Ourior i	moodiidi	110000)					'al	-	late	ле
5.05.15		Yes	No	N/A				-							1022	
BASEMEN	П						TSI			1(00 LF		X			
Name of Registered Waste	Hauler		5 + 0 1	JDEP W	STATES OF SALE		Yards		Name of F	Registe	red La	ndfill				
NEWARK CARTING			10000000	auler ID I509		of Wa	RD		IESI	15			W		22	
City, State NEWARK, NJ							sal Date 0/2014		City, State BETHLE		1 PA					11
Completed by		Title				5	Signatur	е				Dat				
JOSEPH PERLSTEIN	ER															



& Emergence

K Flyce.	J		(P	ursuant 1	to NJAC	8:60 and	112:12	0)	OK	4	293	5			
Date of Notification (1) 8/20/14					Building				<u> </u>						
	e Notification	12		Street Ad 120 Eu	ddress Iclid Av	enue			AHG	,) F	2014		-		
DEP DOL	Amended Amendment		_		te, Zip Co nfield N		3			Line .	2000				
DOH DCA	Emergency (justification) Cancellation	**************************************		Name of Tom	Contact					Tele	hone Nu				-
				FACIL	LITY INF	ORMATI	ON								
Name of Facility Where Abate Michael & Lauren Regir	ment is Takin na Private I	g Place (3 Home)					Towns .	of Facility (4) School (K-12)		10				
Street Address 120 Euclid Avenue								X	Subchapter 8 Other (i.e. private.)	(Other vate &	than K-1 commerc	2) ial buil	dings	, home	es,
City (5) Haddonfield NJ 08033									e Feet	# of F	loors		31dg. <i>1</i> 35+	∖ge	
County (6) Camden				County C	Code (7) ISE ONLY)		Curre	nt Use (Prior	if being	g demolis	hed)			
Name of Monitoring Firm Hired N/A	d by Building (Owner (8)		ASCM	No.			of Abai	ement Contr	actor (9)				
Street Address				1			Street	Addres	is		-				
City, State, Zip Code							City, S	State, Zi	p Code n NJ 0800	Ω					
Project Manager for Monitoring	g Firm	- 62 - 112 62 -	T	Telephor	ne No.		Telepi	hone No).		License N	10.			
Start Date (10) 8/21/14				npletion [Date (11)		Name		IA Monitor		00727				
		8/24/14					Sam								
Cocupancy Status During Aba Facility Closed/Vacated I Abatement Performed Or Other – Describe: home	During Entire I utside of Norm owner will be I	Period of A	Abatem	nent				Addres							
Scope of Work (Check All Tha	t Apply)		- 10				31800				******				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		STREET, STREET	tenova emolit				>	Mir	Containmen i-Enclosure vebag Proce n-Exempted (dure	2000 <u>-</u> 201625-101			'e	
		Is	Locati	on								T	7000	ement	
Location of		1	lormal	ly		Des	scription	n of					Ty	/ре	
Asbestos-Containing Mate TO BE ABATED In Facility (13)		Ma Cus	d Sole intenar odial S (12)	nce/	Asbes (i.e.	tos Cont thermal surfac	aining N	Material is insula AT, or	(ACM)	(Sp	ecify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										O	
2nd floor bathroom &	Bedroom			X		F	Plaster	r		200	SF	x			
Ceiling										- 13	-				
						-	5				-	1			
Name of Registered Waste Ha	ıuler		100	JDEP W		Cubic			Name of Re	egister	ed Landfi	1		1	
United Containers				lauler ID 2459	NO.	of Was	A-1769	či.	G.R.O.W	.S.					
City, State Elm NJ						Dispos 8/25/1	al Date	•	City, State Morrisvill	e PA	19067		11		
Completed by Anthony T Perna		Title Presi	dent			S	ignature	2				ate /20/1	4		

Check # 1552

Date of Notification (1) 08/18/2014	7 - 4				f Building (ETH FO		perator	(2)						
Agencies Notified	Type Notification			Street A 21 RE	ddress MSTER	VILLE I	ROAD	AUG	2 5	20 M				
DEP DOL	Initial Amended Amendment	#			ate, Zip Co OSTOW		8098			2				
DOH DCA	Ernergency (justification) Cancellation	ncluding			f Contact ONES				Tele	phone M	er			
	_			FACI	LITY INFO	ORMATIC	ON							
Name of Facility Where RESIDENTIAL HO		Place (3)						Type of Facility (4						
Street Address 49 REMSTERVILL	E ROAD							Subchapter Other (i.e. p etc.)	8 (Other			lings,	home	es,
City (5) WOODSTOWN								Square Feet 2300	# of l	Floors	338	ldg. A 00+	ge	
County (6) SALEM					Code (7) USE ONLY)		Current Use (Price RESIDENTIA						
Name of Monitoring Firm	n Hired by Building (Owner (8)		ASCN	M No.			of Abatement Con URED ENVIRO			ERVIO	CES	INC.	
Street Address	,							Address CLEMS RUN				163		
City, State, Zip Code								tate, Zip Code LICA HILL NJ	08062	<u> </u>	Name of			
Project Manager for Mor	nitoring Firm		1	Telepho	ne No.		100000000000000000000000000000000000000	one No. 304-4676		License N	No.			
Start Date (10) 09/03/2014		Schedule 09/09/2	ed Completion Date (11) Name of OSHA Monitor EMSL											
Occupancy Status Durin	- 1		8)					Address RT. 130 NORT	——— Н					
Abatement Perform	ated During Entire F ned Outside of Norm RESIDENTIAL - VAC	al Facility	batem Hours	ent			City, S	tate, Zip Code		7)		
Scope of Work (Check A	All That Apply)						CIIVI	AZIVIII VOON, IV.	0001	<u> </u>				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emoliti	5000000			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				-	
		ls	Locati	on		100110000		a Non-Exempled	() and	NOII-FIIA	DIE FIO	Abate	ment	
Locatio Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Used Mai	ormall d Solel ntenar odial S (12)	ly by nce/		tos Conta thermal surfac		faterial (ACM) s insulation, T, or	(Sp	nount pecify or LF)	Remova	Ty Repair	e Encapsulate	Enclosure
		Yes	No	N/A									te	Ф
OUTSIDE	HOUSE			X	ASBES	STOS T	RANS	SITE SIDING	300	00 SF	X			
Name of Registered Wa		<u> </u>	1	JDEP V auler ID		Cubic of Was		Name of	Register	ed Landfi	II			
SERVICE TRANSP City, State	ORT GROUP IN	IC.	11	aulei ID		40	al Date	A&L SA		E INC.				
NEW CASTLE, DEL	AWARE	T =				09/10	(2014)	LISBON		1				
Completed by RON SWANSON		PRO	IECT	COOL	RDINAT	1	ignature	val D	LM.		ate 8/18/2	2014		
ASB-41 (R-06-08)							ر ا Do no	ot use this form for	asbesto	s licensu	re exen	npted	activi	ties.

State of NJ Notification of Asbestos Abatement Pursuant to NJAC 8:60-7 and 12:120-7) 2014-113 B & G proj. #: Check # 6706 *** Additional footages *** ^ Name of Building Owner/Operator (2) Date of Notification (1) College Avenue Redevelopment Associates LLC 10 18 1/11 18 1/11 14 1 Type Notification AUG 6019 Agencies Notified Street Address ☐ EPA 120 Albany Street Initial ☐ DEP City, State, Zip Code Amendment New Brunswick, NJ 08901 X DOL X Telephone Number On hold Name of Contact X DOH Cancellation David Christiansen ☐ DCA FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) Vacant Building Other (Private/Commercial X Street Address Bldgs./Homes, etc. Bldg. Age 17 Seminary Place # of Floors Square Feet County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) New Brunswick, NJ 08901 Middlesex residential housing Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. The Louis Berger Group, Inc. Street Address Street Address 105 Ryerson Road 412 Mount Kemble Avenue City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Morristown, NJ 07960 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 00378 (973)696-6869 973-407-1000 Craig Napolitano Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 08/29/2014 07/11/2014 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: X Bldg Demolition with acm contaminated Scope of Work (check all that apply) debris using wet methods under ☐ Glovebag procedure Full Containment w/negative pressure Renovation Demolition controlled conditions Non-friable procedure Mini-enclosure ≥160 sf or ≥260 if 3 sf or > 3 lfIs location normally used solely E e e n Location of by maintenance/custodial Amount n m Description of asbestos-containing asbestos-containing p C (Specify SF or staff(12) material (ACM) 0 a material to be abated in facility (13) P N/A Yes No X 21,000 sf non-friable roofing roof X 300 sf tar on metal beams above ceiling Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler Tullytown Resource & Recovery Center 19563 120 yards B & G Restoration, Inc. Disposal Date City, State Tullytown, PA 08/15/2014 - 08/29/2014 Lincoln Park, NJ Signature

Ciordana Luna

08/18/2014

Completed by (Print or Type)

Gordana Luna

Secretary/Treasurer

JONEMERGENCY.

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Persuant to NJAC 8:69 and 12:120)

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Date of Notification (1)	-20-11		Name	of Bui	RDO	P. V	IDA	12.	- AU	J Z J			=	14
Agencies Notified	Type Notification		Street	Addin	\$\$ C7 /	LINC	OLN	PLAC	E					
□ EPA	☐ Initial ☐ Amended	-		State	Zin Cod	e /	1/1	32.1	728					
DEP DOL	Amendment # Emergency (inch	urling	_7	-R	EE	HOLD	11/5		Telephone N			•		
☐ DOH	justification) /			RIC		LACK	15	\		1	y ş	14		
□ DCA	TO Canada					RMATION		7		'/		_		
Name of Facility Where	Abatement is Taking	Place (3)					100	of Facility (4 chool (K-12)						H
Positie of Folding Street				_			- 1	a	(Other than vate & comm	K-12) nercial bu	ildings	i.		
Street Address	LINCOLN	PLA	TCE				_ l h	omes, etc.)	s of Floors		3ldg./		-	
		1//				•	120	500 SI	2	-		0	_	1
FRE	EHOLD	140	TO	ounty C	ode (7)	STATE	Cum	ent Use (Pri	or if being de	OPER	TY			-
	MITOUTH		U	SE ON	LY) _	Name of Aba	element C			1.			100	1
	rm Hired by Building C	MANUEL	ASC	M No.		BRIG	CK 1	NDUS	TRIES	/NC.		==	_	4
(8) Street Address			_			Street Addre	NAT	ick Ti	RAIL					
			_		=	City State 2	ip Code	NI	0812	/		100		
City, State, Zip Code								//	I Timeseepa	No.	_			+
Project Manager for I	Monitoring Firm	T	elepho	one No.		Telephone N	99-14	1.99	0	1199	0	_	_	-
	*:	duled Com	pletion	Date (11)	Name of OS	HA Monib	or						_
Start Date (10) \ _						Street Addi	ress			-			0.000	
Occupancy Status D	uring Abstement (Che acated During Entire P	ck only on wind of Ab	e) aleme	ant	-									+
☐ Facility Closed/Va	med Outside of Norma	al Facility I	loues			City, State,	Zip Code							_
Other - Describer			==		_	<u> </u>		- and suite M	egative Pres	sure				
Scope of Work (Che	ck all that apply)	TV Rena	nestima.			T M	ini-Endos	ure .		3.				1
≥3 sf or ≥3 # ≥160 sf or ≥260	If .	Dem	office	•		□ N	lovebag P on-Exemp	ted (") and h	ion-Friable F	rocedure	AF	alen	ent	\dashv
LIZ		IsLo	cation	T							74	Тура		\dashv
l and	tion of	Used S	melly Solely	by	Salas	Descriç stos Containi	na Materia	el (ACM)	Amou				ᄪ	E
Achestos-Contain	ring Material (ACM) ABATED	Maint Cus	andial .		(i.e	, thermal sys	VAT. OF	sation,	(Spec		Removal	Repair	Encapsulate	Enclosura
IN F	acily 13)		aff? 12)			other misc	ellaneous)			ě	=	late	2
	,	Yes	No	N/A	/.				90	1 Pr		-	-	
THERMAL	INSUCATI	eN.		V	THE	RMAL IN	SULAT	TON		UNIS				
BASE	Name and Address of the Owner, where the Party of the Owner, where the Party of the Owner, where the Owner, which is the O									LF				
Name of Register	ad Waste Hauler			DEP		Cubic Ya	A 11 6		.O.W		*	4.5		1
BRICK	INDUSTRIE	3 /40	<u>: • </u>	2/6	002	Disposal	7	City, State						
City Cheles							5-14		P.A.	Theh				_
BRICK Completed By		Title Q				Sign	Salue	Hear	h	Date	- 2	0	-/	4
ERIC	PLACKIS	Γĸ	E 3	<u>:</u>			me	puro.						Č.

ASB-41

^{*} Do not use this form for esbestos licensure exempled ectivities.

Print Form

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

Ch#8178

Date of Notification (1) August 11, 2014			Name of Building Owner/Operator (2) Honeywell														
Agencies Notified	Type Notification			Street A					- A	UC-	2 5 2	714		NOTATION OF STREET			
EPA	☐ Initial			101 C	olumbia	Road			70.								
X EPA X DEP X DOL	Amended Amendment				te, Zip Co town, N		sey 07	962						2			
DOH DCA	Emergency (injustification) Cancellation	ncluaing	3	Name of Dan H	Contact arris					Tel	ephone N	i persis a -	- Common on				
N				FACIL	LITY INFO	ORMAT	ION										
Name of Facility Where Honeywell SA6 Site		Place (3)						-	of Facility (4								
Street Address				**********			*******		School (K-12 Subchapter 8		er than K-	12)					
60 Kellogg Street									Other (i.e. pr etc.)	ivate	& commer	cial bui	dings	hom	ės,		
City (5)	A STATE OF THE STA		***************************************	************					re Feet	#0	f Floors		Bldg. A	Age			
Jersey City County (6)				2)-d- (7)			<u> </u>	-111- (52)		A 12	emen el					
Hudson					Code (7) ISE ONLY)			ent Use (Prior	r if bei	ng demoli	snea)					
Name of Monitoring Firm	Hired by Building C	wner (8)		ASCM	No.		Name		tement Cont	ractor	(9)						
Emilcott							Slave	co Co	nstruction	Inc.							
Street Address 190 Park Ave.							Street 164 (Addres Getty	7 5%								
City, State, Zip Code Morristown, NJ 079	160		······································						ip Code w Jersey	0701	1-1802						
Project Manager for Mor			Telephone No. Telephone No. License No.								No.						
Dave Tomsey			365	973-538-1110 973-478-4848 00724													
Start Date (10) August 13, 2014		Scheduled August 2			Date (11)				HA Monitor Instruction	Inc.	=		W-33 M(F/S)				
Occupancy Status Durin	g Abatement (Check	Only One)				Street		7.7				_				
Facility Closed/Vac	ated During Entire P	eriod of Ab	atem	ent			164 (
Other - Describe:	ed Outside of Norm Monday-Friday 7:00a	m-3:30pm	nours				13538577		ip Code ew Jersey	0701	1-1802						
Scope of Work (Check A	II That Apply)							•						-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		5.07(7)	novat molitic	200000		70		Mir	l Containmer ni-Enclosure		Negative	Pressu	ire				
		Sex per a series					×		vebag Proce n-Exempted		d Non-Fria	able Pro	cedu	e			
		21903.200	ocatio	115.0										ement	t		
Location Asbestos-Containing		No Used	Solel		Anhaa		scription		(40)			-	T	/pe			
TO BE AB	ATED	Main Custo	tenan		(i.e.	thermal	taining M systems	insula	ation,	(5	mount Specify	Re	Z	Enca	Ē		
In Facil (13)	101 5 (0)	230000000000000000000000000000000000000	(12)				cing, VA niscellar			SF	or LF)	Removal	Repair	Encapsulate	Enclosure		
		Yes	No	N/A								a		late	Гe		
South Side of	Kellogg St			x		12"tr	ansite	pipe		1	00LF	X					
South Side of	Kellogg St.	D	x 12 Transite pipe 100LF X														
				х								x					
				х		- 24 S-24	0.00					x					
Name of Registered Was			1000	JDEP Wauler ID		Cubic of Wa	Yards		Name of R	-VIE0		fill					
Slavco Construction	Inc.		100000	508		TBD	902(3):53.		G.R.O.W		andfill.						
City, State Clifton, New Jersey	07011-1802					TBD	sal Date		City, State Morrisvil		а						
Completed by		Title				5	ignature		M	Trought of		Date		001			
Vivian D. Jurcevic		Office	Man	ager		10	Jul	an	N. AL	Mu	w	Augus	t 11,	2014	4		

State of them jeisey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) August 20, 201		Name of Building	Owner/Ope First H		24	197	3						
	tion I Notification	3 ,,	Street Address		Laurel Avenue, Su	nite 104							
[x] DOL Ame	ndment # rgency (inclu		City, State, Zip Co		irt, NJ 08750	WO 2 5	2014		,				
I DCA	ication) ellation		Name of Contact Christ	tian Pepe		Telephone Number		=					
		FAG	CILITY INFORM	ATION					i.				
Name of Facility Where Abatement is Taking Residence	Place (3)				Type of Facility (4)	School (k-12)							
Street Address 1525 Boulevard					[] [x]	Subchapter 8 (oth Other (i.e., private		132.0	uildings,				
City	County (6)	County Code (7) (STATE USE ONL	Y)	Square feet 1800 sf	homes, etc.) # of Floors	Bldg. A	Age 60					
Westfield	Union				Current Use (Prior i	f being demolished)							
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM No.	Name of	Abatement Contractor Guard	(9) an Contracting,	Inc.						
Street Address				Street Ac	1889 F	Route 9, Unit 61							
City, State, Zip Code			City, State, Zip Code Toms River, New Jersey 08755-1271 ber Telephone Number License Number 732-349-9932 00624										
Project Manager for Monitoring Firm		lephone Number					umber						
Scheduled Start Date (10) 8/21/14		heduled Complet 8/22/14	tion Date (11)	E.M.S.L. Analytical									
Occupancy Status During Abatement (Check [X] Facility Closed/Vacate		ire Period of Aba	atement	Street Address 1056 Stelton Road									
Abatement Performed Other – Describe	Outside of N	formal Facility H	ours	City, State, Zip Code Piscataway, New Jersey 08854									
Scope of Work (Check all that apply)						5/3	(T.)	r.					
scope of work (Check all that apply)				[]	Mini-Enclosure	with Negative Pres	sure						
[] >3 sf or ≥3 lf]] Renov		[]	Glovebag Proced								
[X] ≥160 sf or ≥260 lf	L	x] Demol	lition	[x]	Non-Exempted (*) and Non-Friable I	rocedure						
				272	52		Abatem	ent Type	5				
Location of	1,000	Location mally used		Description bestos-Cor		Amount		R E	S				
Asbestos-Containing Material (ACM)		olely by	1	Material (A	ACM)	(Specify SF	1 .	E N P C	10 100000 11				
TO BE ABATED	Mainten	ance/Custodial		., thermal		or LF)	[M]	A A	L				
in facility (13)		Staff (12)	ins	ulation, su VAT, c			1 1	I P R S	S				
(13)		(12)	oth	ner miscell			A	U					
	NO N/A					L	LE	RE					
Exterior	X	Asbestos sidir	ng		1600 sf	X							
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJD	EP Waste Hauler	250	ards of Wast		ered Landfill							
City, State		20223 Dispo	sal Date	City, St	T.R.R.F.								
Toms River, New Jersey		8/25	/14		own, Pennsylvania	a							
Completed by (Print or Type) Nicholas Fernicola	Title Project l	Manager	Signature	del) (]		Date 8/20/1	4					

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

BRICK INDUSTRIES, INC.

732 899 2866

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	· (Pur	ment to NUAC	k(6) and 12:120)			
Date of Notification (1) 8	19-14	Named Bridge	FRENC	Hou	52 13	
Appendix Name of the		Street Address	9 OA	K 57	1/4	
		Ch), Sale, Ca) Ca	EAN SE	URG	WAINER	APPROVED
	Management (Andrews)	ERIC	PERCE		100 to 10	- 4
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Name of Food y Chara About	STE THE PER (J)			1) po of Passay ((Olivertian K-12)	F
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Management of the last	OUTH	ANGEL RIE	Maria of Almian	(1)		2/55 /
(8)			BRIC			SIEZIN
Street Address			145	The state of the s	ck Tk	
Clay, Shinbs, Zip Code			BRI		NJ E	8 124
Proper Unique la Charles	Pies 16	Sphero NE.	732-8	99- July	3011	96
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Coppens Sins Daily All	Sand Catalitany and		Street Actions			
Pacific CountYacuted Du Abstances Performed Out	ing tinks Period of Alas his of Normal Pecility Ho		CV, 25, 25	200		
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THANK YOU!

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Date of Notification	20/19		Nan		ng Owner/Operato	× (2) . 0 ~ 5 T R U A	μβ., 2 5 2014	. `		
Agencies Notified	Type Notification	on	Stre	el Address	,					
MA M	Amended Amendmen Emergency justification Cancellation	(including	Nam	ne of Conta	TYLF ()	,	UP2 43	ber		
0.00				-1 DE H	FORMATION	71	L			
	ere Abatement is Tak					Type of Facility School (K-1	0.004 (00.00)	21		
Street Address	32 487	571				Other (i.e., phomes, etc.	orivate & commerci)	al buik		
City (5)	SGA ISU	E 5.14				Square Feet	# of Floors		dg. A	ge
County (6) C A r C	MAY			inty Code (E OWLY)	7) (STATE	Current Use (Pr	for if being demok	shed)		
Name of Monitoring F	im Hired by Building	Owner	ASCH	(No.	1.7	heni Contractor (9	ā			
Street Address	*					S,SPRUC	= duz.			_
City, State, Zip Code					City, State, Zip C	ode CC SHD-	2 5 10 12 -	080	57	<u></u>
Project Manager for M	lonitoring Firm	Te	lephone	No .		9-0472	License No	74		
Stan Date (10)	Sche	oduled Compl		ate (11)	Name of OSHA	JOH KL	EMM			_
Occupancy Status Du Facility Closed/Vac Abatement Perform Other - Describe:	ated During Entire P	eriod of Abat	ement		Street Address 3 6 9 City, State, Zip C	≪le.	.VE ZUE.	J. (08	= 0 S
Scope of Work (Check 23 st or 23 if 2160 st or 2260 if	k all that apply)	Renova		11	Mini-End	o Procedure	gative Pressure	re		_
		is Local							Date:	
Location Asbestos - Containing TO BE AB IN Facil (13)	Matenal (ACM) ATED ity	Used Sole Maintena Custodi Staff? (12)	y by nœ/ al	Asbesi (i.e.,	Description of os Containing Mat thermal systems in surfacing, VAT, other miscellaneo	erial (ACM) nsulation, or	Amount (Specify SF & LF)	Removal	Repair	Encapsulate
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517	IN Q		1		77.77.7					_
								\vdash	_	_
Name of Registered W	aste Hauler		ANDED A	No.	Cubic Yards of Waste	Name of Regi	stered Landfill			
K LEMCO	INC.		1790	24	Disposal Date	City, State				
MAPE	E SHAD		15		Signature	1 1000	Date 1	. ر _{: د} ر		=
Completed By TOSEPN	(15mm)	V/1	P		Jours	in Kalum	n 8/	20/	13	$\stackrel{\checkmark}{=}$

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Date of Notification (1)	120/14		Na		ng Owner/Ope	CONSTRUC	TION -	•		
Agencies Notified	Type Notificatio		10	reel Addres						
	March 1988 and the		30	300		TH ST.		12		
M BA M DEP M DOL	Initial Amended							-	_	
Z C C	Amendment	Ħ	Cx	y, State, Zip		7: 11:5	. 08243			
Ø mr	Emergency (1_	SEA	TYLF	<u>- 177, N. 1</u>	105475			- 3
Поон	justification)		Na	me of Conta	cl		Telephone Numb	er		O Victoria
□ ∞A	Cancellation		1	FROUR	- EDUA	1201	1			
							3	=		
				ACILITY IN	FORMATION					
Name of Facility Where	Abatement is Taki	ng Place (3)			Type of Facilit				
	SIDERC					School (K-	12)			
Street Address							r 8 (Other than K-12)			
311661 YOURS 246	8571 5	ST				Domer (i.e.,	private & commercia	Dund	mys.	
- 39	0)					Square Feet	# of Floors	T Bk	g A	oe o
City (5)	1 - 11.0.2.	1 - 0				340010 7001	# 01 1 100 I		3	M 5
2100	ME HARM	2010					Service demotes	1=	=	
County (6) N			- C	ounty Code	7) (STATE	Current Use (F	rior if being demotis	160)		
CAPE	MAY		10	SE ONLY)		- I - V A	10/101			
Name of Monitoring Firm		Owner	TASC	:M No.	Name of Aba	atement Contractor (9)			
	A SUMMER	O III III			V	LEMCOI				
(8)	A		1_		Sueel Addre		7007			
Street Address							- 1			
	A.					695,5 Pruc	-e 2000 '			=
Oir Crate Tie Code					City, State, Z	ip Code				
City, State, Zip Code					N	LOPLE SHA	DEINIJI	000	2 5	-
			-1	- 10	Telephone N		License No.			
Project Manager for Mon	illoring Firm	1	elephor	ne no		779-0472		14		8
									==	=
Crad Data (10)	Sche	duled Comy	pletion	Date (11)	Name of OS	HA Monitor				
Stan Date (10)		177		-1	2	OSEPH KI	EMM			
1 / / / /	1	100	1.	<u> </u>	Street Addre	945				-
Occupancy Status Durin	g Abatement (Che	ck only one	9)		The second secon	69 S, SP,	200 200.			
Facility Closed/Vacate	d During Entire Pe	eriod of Aba	temen					==		=
Abatement Performed	Outside of Norma	I Facility H	ours		City, State, Z	üp C∞de	٠, -	τ,	2 5	~ <
Other - Describe:				*************	\sim	1APLES	HODE, N.	١ ، ر	0	
A SO SO SOURCE TO SO									-377	
Scope of Work (Check a	II that apply)				□ Full	Containment with N	egative Pressure			
		Renov	ation			-Enclosure				
≥3 s1 or ≥3 l1		Demo			Glo	vebag Procedure	E in the December			
_ ≥160 sf or ≥260 ff		D			Non	-Exempled (*) and N	Ion-Frable Procedu	-	bater	-
		is Loca	ilion					^	Typ	
		Norma	ally		20 0 00	51 88 9 51			. 7 P	_
Location o	1	Used So			Description	Material (ACM)	Amount	1 1		۳
Asbestos-Containing M	latenal (ACM)	Mainten		Asbes	hemal system	me insulation	(Specify	D	n	2
TO BE ABAT	ED	Custo Staff		(1.6	surfacing, V	AT or	SF or LF)	Removal	Repair	Encapsulate
IN Facility		(12		1	other miscella	aneous)		8	율.	ula
(13)	22			4				-		6
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	Tierles	1	NIDE	Waste	Cubic Yards	Name of Red	pistered Landfill			
Name of Registered Was	te Hauter		Hauter	ID No.	of Waste	1 0 0	1, C, M.U. A			
KLEMCO	INC		17	904						=
Si Sinia					Disposal Dat	e City, State	- T	7		
City. State	= SHAD	G, A	1,5			1 100	OF BINE ,	. ز ، ز		=
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Date of Notification (1)				Name	of Building	Owner/Operator (2	2)			00		
08/18	14	<u> </u>		Prin	ceton U	niversity						
Agencies Notified Type No	tification	V		Street	Address							
				ΕA	MacMilla	an Building		. =	0014			
☑ DOLWD ☐ Amer				City, S	tate, Zip C	Code		AUG 25	100			
1.00	dment #					J 08544		110				
DCA Emer					of Contac	PI A SAN SAN SAN SAN SAN SAN SAN SAN SAN S		Telephone Nu	mhor	152735		
(NJAC 5:23-8) justifi	cation)					ı		relephone Nu	ITIDEI			
Li Cano	ellation				Ortega	EODMATION		<u> </u>				_
Name of Facility Where Abatement	is Takin	g Place	(3)	FAC	JILII Y IN	FORMATION	Type of Facility (4)				
191 Hartley Ave Residence		9 1 1400	(0)				School (K-12)					
Street Address							Subchapter 8		12)			
							Other (i.e., pr	ivate and comm	nercial bu	ilding	s,	
191 Hartley Ave.							homes, etc.)					
City (5)							Square Feet	# of Floors	10000	lg. Ag	je	
Princeton							2200	2		50		
County (6)				Coun	ity Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished)			
Mercer							Faculty Resi	idence (Empt	ty)			
Name of Monitoring Firm Hired by	Building	Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Pennoni Associates				0000	13	Luzon, Inc.						
Street Address				-		Street Address						
515 Grove Street, Suite 1B						8451 Executi	ve Ave.					
City, State, Zip Code			12			City, State, Zip Co				-0.55-0.00		
Haddon Heights, NJ 08035						Philadelphia						
Project Manager for Monitoring Fire	n		Tele	phone	No.	Telephone No.	,	License No.				
Craig Wilson				6 547		267-284-1050	ĺ	01109				
Start Date (10)	Sche	duled C	omple	tion Da	te (11)	Name of OSHA M	Ionitor			99		
9 / 2 / 14		10 /				Joseph Maro						
Occupancy Status During Abateme	nt (Chec	ck only o	ne)			Street Address						
□ Facility Closed/Vacated During				ment		8451 Executi	ve Avenue					
☐ Abatement Performed Outside	of Norma	I Facility	/ Hou	s - Des	cribe	City, State, Zip Co			-			_
Time of Abatement: 7:00AM-4	00PM/_	PI	M	AM		Philadelphia,						
Scope of Work (Check all that appl	y)					Fleno					*****	
☐ >3 sf or >3 lf		⊠ Re	novat	ion		⊠ Full Con	tainment with Neg	ative Pressure				
⊠ ≥160 sf or ≥260 lf		☐ De					g Procedure					
						Non-Exe Non-Exe	mpted (*) and Ne	n-Friable Proce	dure			
#* 15555 - 20		0.0	Loca						Ab	ateme	ent T	ype
Location of			Norma	lly ely by		Description of			ZD.	Re	Щ	Щ
Asbestos-Containing Material (A	ACM)		intena			estos Containing Ma e., thermal systems		Amount (Specify	Remova	Repair	Ca	l Clo
IN Facility	163	Cus		Staff?	(1.0	surfacing, VAT		SF or LF)	Va	Ξ.	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A	-	other miscellane	ous)				ate	æ
Various Locations throughou	ıt	1000000		100000	D===:	I/ loint Comme		1250 SF				
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Ti and the second secon				\boxtimes		No.	- *					
Exterior				\boxtimes	Windov	w Glazing		1360				
Name of Registered Waste Hauler			N	IJDEP \	Waste	Cubic Yards of	Name of Regis	tered Landfill				
Luzon, Inc.			H	lauler II		Waste	Grows Lan					
City, State	-			32587		40 CYS. Disposal Date	City, State					
Tullytown Pa.						10/12/14		DΛ				
	1-2					10/12/14	Tullytown,	FA				
Completed By (Print or Type)	Tit	1056				Signature	, 0	-1.0	Date /			
Piyush Patel		Progra	m Ma	nager		I Ti	nest P	ate	8/1	8/	i 4	
ACD 44								The second secon	- 1			

ASB-41 MAY 11

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

Date of Notification (1) 8/22/14						Owner/C			rocureme	nt Off	ice	دا ور	A.		******
Agencies Notified	Type Notification		Sti	reet Ado	dress	Building					G 25 in	ئي أ			
EPA DEP DOL	Initial Amended Amendment		Cit	ty, State	, Zip Co				ar i	J.		i	nu	. 1	
▼ DOH □ DCA	Emergency (justification) Cancellation	including	- A S S S S S S S S S S S S S S S S S S	me of C						Těle	phone Nur	mber	L		
				FACILI	TY INFO	ORMATI	ON								
Name of Facility Where Residence	Abatement is Taking	Place (3)		9				-	of Facility (4						
Street Address 167 Hartley Avenu	е							×	Subchapter Other (i.e. p etc.)	8 (Othe			dings	hom	es,
City (5) Princeton									re Feet	# of	Floors	100	Bldg. A	\ge	
County (6) Mercer				unty Co)	_		ent Use (Pric			ned)			
Name of Monitoring Firm Pennoni Associate		Owner (8)		ASCM N	No.			of Aba	atement Con es, LLC					W	
Street Address 515 Grove Street,	Suite 1B						Street	Addre		nway	Suite 50	n			
City, State, Zip Code Haddon Heights, N							City, S	state, 2	Zip Code 19341						
Project Manager for Mo R. Alan Lloyd				lephone			Teleph 484-	none N	lo.		License N	0.			
Start Date (10) 9/8/14	art Date (10) Schedul 8/14 9/26/1-						200	of OS	HA Monitor		01101				
Occupancy Status Durir	ng Abatement (Check						Street		98						
➤ Facility Closed/Vac	cated During Entire F	eriod of Aba	atemen	it			200 (US 13	30 North				9		
Other - Describe:	Hours: 8 am - 4:30 p	m				_			son, NJ 0	8077					
Scope of Work (Check A	All That Apply)														1000
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		_	novation molition				×	Mi	Il Containme ni-Enclosure ovebag Proc	edure					
		lelo	ocation				<u> </u>	i NC	n-Exempted	() and	i Non-Friad	le Pro		e emen	t
Locatio	n of	Nor	rmally			Des	scription	of					Ту	ре	
Asbestos-Containing TO BE AB In Faci (13)	Iity	Mainte Custod	Solely benance dial State (12)	e/		tos Cont thermal surfac	aining M	fateria s insul T, or	ation,	(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes I	No	N/A										Ф	2550
Windo		1		Х			dow gla	-			SF	Х			
Kitche				X			on si	200			SF	Х			
Interior Walls	s / Ceiling		-	X	Joir	nt Com	pound	on G	SWB	262	20 SF	X	<u></u>		
Name of Registered Wa	ete Heuler		LNUD	EP Was	1.	0.1:					11 150				
Waste Management			100000000000000000000000000000000000000	ler ID No	303070	of Was			GROWS		red Landfill				
City, State Trenton, NJ						Dispos TBD	al Date		City, State Morrisvi		4				
Completed by Jack Bally		Title Sr. Proj	ject M	lanage	er	S	ignature		sally	600	Da 8/2	te 22/14	1		
ASB-41 (R-06-08)		-					7		this form for	asbesto	os licensure	exen	npted	activi	ties.

Date of Notification (1) 8/22/14					Building C					4					
	7 11 00				l Aviatio	ıı Aam	шиѕтга	IIION							
Agencies Notified EPA	Type Notification		11.7	Street Ad One Av	dress viation P	laza			ŁUT.	AUG	25	L.,	ن		
DEP DOL	Amended Amendment #	:2			e, Zip Coo a, NY				الما والمح			line	- L	199	
	Emergency (in			Name of						0.00	phone Nun	``	-	- *	
☑ DOH □ DCA	justification) Cancellation		100		l Mulliga	an				1					
				FACIL	ITY INFO	RMATI	ON			1					
Name of Facility Where Teterboro Air Traffi		Place (3)						Тур	e of Facility (4 School (K-12						
Street Address 225 Fred Wehran I	Drive							×	Subchapter Other (i.e. p	8 (Othe			lings,	home	es,
City (5) Teterboro	4 2							Squ 5,0	etc.) lare Feet 00	# of	Floors		dg. A		
County (6)				County C	ode (7)			Cur	rent Use (Pric	r if bei	ng demolish		,,,,		
Bergen Name of Monitoring Firm	n Hired by Building C	wner (8)		ASCM				of Ab	ntrol Tower		(9)				
AET Street Address							ecos		ces, LLC		-				
28 N. Pennell Road	d						407	W. L	incoln High	nway,	Suite 500	0	_===		
City, State, Zip Code Media, PA 19063						45	Exto	n, P	Zip Code A 19341				77.	2 - 21	
Project Manager for Mo Eric Houseknecht	nitoring Firm		- 1	Telephor 610-89	ne No. 1-0114		Teleph 484-		No. -8884		License N 01161	0.			
Start Date (10) 9/3/14		Scheduled 9/12/14	Com	pletion D	Date (11)		Name EMS		SHA Monitor						
Occupancy Status Durin	ng Abatement (Check	Only One	;)				Street		ess te 130 Nort	h					
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire P ned Outside of Norm After midnight	eriod of Al al Facility	batem Hours	ent			City, S	State,	Zip Code						
Scope of Work (Check /							Cinr	iami	nson, NJ (10077		-	-	-	
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	That Apply)	_	enova emoliti				>	- N	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				e	
		0.000	_ocati										Abate		t
Locatio Asbestos-Containing TO BE AB In Fac (13)	g Material (ACM) BATED ility	Used Mair	ormali I Sole ntenar odial S (12)	ly by nce/		tos Con thermal surfa		Mater is insi AT, or		(8	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A						71.00				(D)	
Elevator Mac	hine Room	Х			F	loor ti	le and	mas	stic	13	38 SF	Х			
											_				
Name of Registered Wa	neto Haules		1 6	JDEP W	lasts	C.,5:-	Yards		Nama of	Pegistr	ered Landfil				
ecoservices, LLC	iste Haulef		0.02502	lauler ID	5335355	of Wa			GROW			EX.			
City, State Exton, PA			_			Dispo TBD	sal Date	•	City, Stat Morrisv		'A				
Completed by Jack Bally		Title Sr. Pr	oject	t Mana	ger	5	Signatur		Beille		Da	ate /22/14	4		
ASB-41 (R-06-08)						12	7)	,,,,	e this form for	-	tos licensur	e exer	npted	activ	ities.

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galloway.pdf		1 of1						1 2		tana espi
	=		NO		CATION	ite or New Jersey OF ASBESTOS A o NJAC 8:60 and	ABATEME		25	يَ أَمَا أَر
	3	Date of Notification (1) 8/21/14			lame of Rdl	Building OwneriC	perator (2	2) · L L L	, L 15	NI)
SULV AUG 25	in Libe	Agencies Notified Type Notification C BPA Initial X DEP Amended X DOL X Amendment	,	1	35 St d City, St	Address eelmanville ate, Zip Code arbor Twp., N	17 0022			
0.7	j T	X DOH Emergency justification) DCA Cancellation	(induding)	: N	lame of	Contact Cerrels	17 0023	*	Tei	ephone Nu
		Name of Facility Where Abatement is Takin Old Lenox China Building Street Address 545 Tilton Road	ng Place (3)		FACI	ITY INFORMATI	ON		K-12) ter 8 (Othe	er than K-12 B. commerc
		Cty(5) Galloway, NJ 08205						Square Feet 400,000	#0	of Floors
		County (6) Atlantic				ode (7) ISE ONLY)		Current 'se (F Abandone	rior if bein	ig demolish
		Name of Monitoring Firm Hired by Building Health and Safety Services	Owner (8)		ASCM	No.		of Abatement C Enterprises		(9)
		Street Address 318 12th Street						Address 2th Street		
		City. State. Zip Code Hammonton, NJ 08037						tate, Zip Code monton, N.	08037	
		Project Manager for Monitoring Firm James Proctor		6	000 HEAD	4-8550		567-1250		License N
		Start Date (10) 7/22/2014	Scheduled 10/22/2	2014	letion D	ate (A-Y)		n and Jaret		es
		Occupancy Status During Abatement (Cher Facility ClosedNacated During Entire F Abatement Performed Outside of Norr Other — Describe:	Period of Abai	temen	t		318 1 City, St	Address 2th Street ate, Zip Code monton, N.	1 00037	
		Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf X ≥160 sf or ≥260 lf	X Rer Der	novatio molition			Ž	Full Contain Mini-Enclos Giovebag Pr Non-Exemp	nment witi ure rocedure	n Negative
		Location of Asbestos-Containing Material (ACM) TO BE ABATED In Fadility (13)	No. Used 9 Maint Custoo	ocation smally Solely I tenance dial Sta (12)	by e/	Asbestos Con (i.e. therma surfa		aterial (ACM) insulation, , or	(5	mount Specify or LF)
		– '-Warehouse 7	Yes 1	No 1		745-4	11 7		-73	
		Office 2	_		x		v caulkir e and m	-	F-4	50 sf
		Various -		-	X		e ano m e Fittino	a Carlos de la carlo de la	7	.80 sf 300
		Various	+	-	200200					
		Name of Registered Waste Hauler Site Enterprises, Inc.		Hau	X DEP Was pler ID N 35220	ste Cubic	OE Wrands Yards ste y	Name	Anna Marcoll	ed Landfill ty Utilitie
		City, State Hammonton, NJ 08037				Dispos	al Date DUS	City, St Egg H	ate Harbor, N	נו
	A contraction of the contraction	Completed by Thomas Rock	Title PM				Signature Then	- Real	1	De 8
		AST3-41 (R-06-013)					'Do not t	use this form fo	or asbesto	s.licensure

Date of Notification (1) 8/21/14	***************************************	10			Building C Park LLC	Owner/Ope	erator	(2)		į.	Č .	1/3	*	
Agencies Notified	Type Notification			Street Ad 94 Park	dress Street					žUI4 j	aug g	5 ,		: 6.
EPA DEP DOL	Amended Amendment #		11/2/0		e, Zip Co air, NJ					<u>ښ.</u>			i	
DOH DCA	Emergency (i justification) Cancellation	ncluding	17000	Name of Earl Sa					Tele	phone Nu	Inter L	ن ۱۲	iiv Ġ	116
	1 ==			FACIL	ITY INFO	RMATION	4							
Name of Facility Where Detached Garage	Abatement is Taking	Place (3)						Type of Facility (4 School (K-12	2)					
Street Address 94 Park Street								Subchapter 8 Other (i.e. pretc.)	ivate &	commerc	ial buil	dings	home	es,
City (5) Montclair		12		0,				Square Feet 225	# of 1	Floors	1 7 2	ildg. A	\ge	
County (6) Essex		£:		County C (STATE U	ode (7) SE ONLY)		_	Current Use (Prio Garage	r if bein	g demolis	shed)			
Name of Monitoring Fin Omega	m Hired by Building C	wner (8)		ASCM	No.			of Abatement Cont RSave	ractor	(9)				
Street Address 280 Huyler Street				L				Address /est Street						
City, State, Zip Code South Hackensack	c. NJ 07606							tate, Zip Code mfield, NJ 0700	13					
Project Manager for Mo Geiser Fajardo				Telephon	e No. 9-8700			none No. 680-0088		License I	No.			
Start Date (10) 9/5/14		Scheduled				1		of OSHA Monitor						
Occupancy Status Duri	cated During Entire F	eriod of Ab	atem	ent		3	Street	Address						
Abatement Performance Other – Describe:	med Outside of Norm	al Facility F	lours			_ [City, S	tate, Zip Code						
Scope of Work (Check ≥3 sf or ≥3 lf	All That Apply)	□ Re	nova	tion				Full Containme	nt with	Negative	Pressu	ıre		
≥160 sf or ≥260 lf			molit					Mini-Enclosure Glovebag Proc	edure			160	••	
		T					12	Non-Exempted	(*) and	Non-Fria	able Pro		emen	t
Locati	on of	(A)	ocati rmal	5750000		Desc	ription	of					уре	
Asbestos-Containin TO BE A In Fac	ng Material (ACM) BATED cility	Custo	tenar	nce/		tos Contai	ning N ystem ng, VA	Material (ACM) s insulation, T, or	(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									6	
Ro	Roof					Shi	ingle	S	2	50sf	X			
Name of Registered W	ne of Registered Waste Hauler					Cubic Y		Name of F	Registe	red Landf	ill			
Atlas	99000	lauler ID 8262	No.	of Waste	е '	Tullytow	n Re	source f	Recov	ery				
City, State Dover, NJ						Disposa	I Date	City, State Tullytov		\				
Completed by Kevin Stack	mpleted by Title					Sig	natur				Date 3/21/1	4		

Date of Notification (1)	 			Nam	e of Buildir	ng Owner/Operator (2)	<u> </u>	*	4 4 -	· a		
08 /21	/ _ 1	4			eil Hillsbe		,						
□ EPA ☑ Initi			-	54	et Address Withers State, Zip	ooon Road		4	404 AUS 25				
	ergency (i		na na	Cli	ifton, NJ	07013	98		at Liver	UINE	à		
(NJAC 5:23-8) just	ification)		.9	Nam	e of Contac	ct			Telephone Num	nhor			
	cellation			Ne	il Hillsbe	rg							
				FA	CILITY II	NFORMATION							
Name of Facility Where Abateme Residential House	nt is Takir	g Plac	e (3)				1000	of Facility School (K-12	• •				
Street Address								Subchapter 8	8 (Other than K-1	2)			
54 Witherspoon Road							\boxtimes	ther (i.e., p	rivate and comme	ercial b	uildin	gs,	
City (5)								omes, etc.)			1.1. 6	COST.	
Clifton							Squ	are Feet	# of Floors	B	ldg. A	ge	
County (6)				Cou	inty Code (7)(STATE USE ONLY)	Cur	ant Line (De	ior if being demol	- 1 - 0			
Passaic				000	inty Code (INSTATE USE UNLT	Curi	ent use (Pri	ior it being demoi	isnea)			
Name of Monitoring Firm Hired by	Building	Owner	(8)	ASCN	No.	Name of Abateme	ent Co	ntractor (9)					-
Bio Terra Solutions						ALL PRO MA	NAG	EMENT L	LC				
Street Address						Street Address							
P.O. Box 1224						27 Outwater	Lane						
City, State, Zip Code						City, State, Zip Co	ode						
Union, NJ						Garfield, NJ	0702	6					
Project Manager for Monitoring Fi	rm -		Tel	ephone	No.	Telephone No.			License No.				
Rick Eustaquio			- 4-5		4-3762	973-928-4888			1188				
Start Date (10)08 /31 /14					ate (11) 14	Name of OSHA M			ıc	-335-5			
Occupancy Status During Abatem	Jan 1984					Street Address		EMILITY E					
☑ Facility Closed/Vacated During				ement		27 Outwater I	ana						
☐ Abatement Performed Outside	of Norma	l Facili	ty Hou	rs - De	scribe	City, State, Zip Co				11			
Time of Abatement:AN	P	M/	PM		_AM	Garfield, NJ		6					
Scope of Work (Check all that app	ily)	7				- Janiora, No	0,02	<u> </u>					
 ≥3 sf or ≥3 If ≥160 sf or ≥260 If 			enovat			☐ Mini-Encl☑ Glovebag	losure Proc	edure	ative Pressure	ıre			
		55	Loca							Ab	atem	ent T	уре
Location of Asbestos-Containing Material (TO BE ABATED IN Facility (13)	ACM)	Use Ma	aintena	ely by ance/ Staff?		Description of estos Containing Mar e., thermal systems i surfacing, VAT, other miscellaneo	terial nsula or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
2		Yes	No	N/A	1			77				1772	
Basement					Pipe In:	sulation			20 LF	×		M	
					э.								
								\$ 1.00 S					
							19				П		
Name of Registered Waste Hauler		T		JDEP	Waste	Cubic Yards of	Nar	ne of Regist	tered Landfill				
ALL PRO MANAGEMENT L	LC		F	lauler II		Waste	1	SI Landfi					
City, State				00348	860	As Needed Disposal Date		, State	1000				_
Garfield, NJ						TBD		ethlehem,	PA				
Completed By (Print or Type)	Title				7,00	Stanotura	1	canonem,		110	N	-	
Allen Monchik		M .				JUD Q	1	~	Da	ate 🗸	12	1/1	14
SB-41 AN 13		Do not	use th	nis form	for asbest	os licensure exemp	ted a	tivities.			1-	1	

NO CK

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

Date of Notification (1)					Name of Buildi		Operator (2)			-10-1-10		
August 21, 2014					Hess Corporat	ion	ปักรา	e				
Agencies Notified	1	Notification [*]	Type	1	Street Address	3	CELL.	400	25 h.	1 .		
			- 10		1 Hess Plaza				14.	ي ٠٠		
(x) EPA		() Initial No (x) Amendeo		_	O't Otata 7:	0.4.	Farin					
(x) DOL		(x) Amended () Cancelle		ווכ	City, State, Zip Woodbridge, N		c	211	Chall	1116	_	
(x) DOH	1	() Gariociio	•		vvoodbridge, iv	01033		-10	F117718	٧Ġ		
() DCA					Name of Conta	act		Tel. N	umber			
					David Dolnick			t	-	79		
				FACILITY IN	FORMATION							
Name of Facility Where Abate	ment is Tak	king Place (3	<u>3)</u>		Type of Facility							
Hess Corporation Refinery					() School (K-1 () Subchapter		an K-12)					
Street Address					(x) Other (i.e. p			s., hom	es, etc.			
750 Cliff Road					1000 man at 1000		-					
					Sq. Feet5	12,943	# of Flo	ors <u>NA</u>				
	unty (6) ddlesex		County Co		Bldg. Age 5	5 vears						
Port Reading Wild	duesex		(State Use	e Only)	Current Use (p		demolished)	Refiner	v			
Name of Monitoring Firm Hired	by Bldg. C	Owner (8)	ASCM No				Name of Co					
Bureau Veritas							Brandenburg	Indust	rial Servi	ce Comp	pany	
											00000-31-00	
Street Address 110 Fieldcrest Avenue					Street Address 2217 Spillman							
.110 Fleidcrest Avenue						Dr.						
City, State, Zip Code						Code		-				
Edison, New Jersey 08837						18015						
Project Manager for Monitoring		Telephone N			Telephone Nur				e Numbe	<u>er</u>		
Kirit H. Vora	7	732-225-604	40		(610) 691 - 180	00	1	00721				
Scheduled Start Date (10)		Scheduled C	Completion	Date (11)	Name of OSHA	Monitor						
Demolition – February 4, 2014		Demolition -			INAMINE OF COST IP	- IVIOTILOI						
Asbestos – July 7, 2014		Asbestos – A										
Occupancy Status During Aba					Street Address							
(x) Facility Closed/Vacated Du												
() Abatement Performed Outs	side of North	nai Facility i	Hours -		City, State, Zip	Cada						
Describe - Removal of ACM in	closed/shu	ıtdown refin	nery		City, State, Zip	Code						
	F: 700		0									
Other – Work Hours will be Mo Source of Work (Check all that		0 am - 5:30	pm, Sat 7:0	00 - 3:30								
Source of Work (Check all that	apply)											
(x) Demolition () Renovati	on											
(x) Large Proj. (>160 SF or >2					0 LF ACM) () Minor Pro	j. (<25 SF or	<10 LF	ACM)			
() Full Containment with Neg					vebag Procedure	<u> </u>						
Location of Asbestos- Containing Material (ACM) in		on Normally / Maint./Cus		Description of thermal system		Amount (Specify SF or	LF)	Abatem	ent Type	<u>e</u>	
Facility (13)	Staff? (12		louiai	surfacing, VAT								
	YES	NO	NA	miscell.)	,				Rem.	Rep. E	Encap E	nclose
FCC/Gas Comp			X	Transite		9,900 SI			X			
Utility			X	Transite		5,750 SF			X			
Utility			X	Pipe Insulatio	n	10 LF			Х			
Utility			X	Floor Tile		275 LF			X			
Fuel Gas Comp.			X	Drum Insulation	on	150 SF	-		X			
Millwright Shop Warehouse	-		X	Floor Tile Floor Tile		1,000 SF			X	-		
Warehouse			x	Tape and Join	nt Compound	48 SF		-+	X			
Warehouse						300 LF			x			
Warehouse						6,000 SF	:		X			
I&E Shop	Shop X Floor Tile					384 SF			X			
I&E Shop			Х	Tape and Joir	nt Compound	120 SF			X			
I&E Shop					k	102 LF			Х			
I&E Shop			Х	Pipe Insulatio	n	90 LF			X			
Firehouse/Locker Room			X	Floor Tile		3,954 SF			X			
Firehouse/Locker Room Firehouse/Locker Room			X	Black Roof Fl		20 SF			X			-
FILEHOUSE/LOCKER ROOM	1		I A	L DURCK KOOT ME	aienai	1 4 050 51	7		IÄ		Di .	1

Name of Reg. Waste Hauler Brandenburg Industrial Service Co.	NJDEP Waste Hauler ID #	Cubic Yards of Waste 160 NT			Name of Reg. Landfill IESI
City, State Bethlehem, PA	Disp. Date July 9, 2014				<u>City, State</u> Bethlehem, PA
Completed by (Print or Type) Jennifer Strobel	Title Contrac	t Manager	Signature	<u>Date</u> 08/21	
-					
Mail to: N.IDEP-DSHW-BRE	Telepho	ne 609-984-6620		C:\WC	ORD\MYDOCS\ASBESTOS

401 E. State St., PO 414 Trenton, NJ 08625-0414

9/18/00

CX#21622

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

Date of Notification (1)	/21/14			Name	e of Buildin	ng Owner/Operator	(2) Berry	Z814 /	AUG g	25	hi Î	٠,٠	
Agencies Notified	Type Notification	n		Stree	t Address	5	2 W. Union S	Street				į.	
DEP	Amended Amendment	#		City,	State, Zip (Code			Liu	LI	Ulsi	G II	
⊠ DOH	Emergency justification)	g	Name	e of Contac		nbertville, NJ	U8530 Telephone	Numb	er	e e allum		_
DCA	Cancellation					Karen Berry		L <u></u> _				-	_
Name of Facility Where	Abatament in Tak	ing Diag	2 (2)	FA	CILITY INF	FORMATION	Tune of Facility	(4)					
Street Address	222	sidenti					Type of Facility School (K-1) Subchapter	2)	n K-12)				
	52 W.	Jnion	Stree	et	·		Other (i.e., p	rivate & com			dings	,	
City (5)	Lambe	ertville	e, N.	I			Square Feet 1600	# of Floo 2	rs	В	10 10	ge)+/-	
County (6)	ınterdon			Cou	nty Code (7) (STATE	Current Use (Pr	ior if being d	emolisi	ned)			
Name of Monitoring Firm		Owner		ASCM	No.	Name of Abaten	nent Contractor (9)					_
(8)	MECS						ens Environi	nental Se	rvice	s, Ir	ıc.		i i
Street Address	PO Box 3	41				Street Address	PO E	30x 322					
City, State, Zip Code	rosswicks, NJ	0851	5			City, State, Zip C	ode Allentowi	n NI 085	 .01				
Project Manager for Mo		0001		phone	No.	Telephone No.	7 III CIII O W	License !	-	-			
Lou I	Laureti		_		8-4070	(609) 25	59-9688		00)49:	3		
Start Date (10) 9/3/14	Sch	eduled (9/6/1		ite (11)	Name of OSHA.		ECS	13 8				
Occupancy Status Durin	ng Abatement (Ch			7		Street Address			-				
Facility Closed/Vaca	1.77							ox 341					
☐ Abatement Performe		ai Facili	ty Hou	rs		City, State, Zip C	ode Crosswick	s, NJ 085	515				
Scope of Work (Check	all that apply)					☐ Full Cor	ntainment with Neg	ative Pressu	ure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Re De	enovat emolitic	ion on		☐ Mini-End ☑ Gloveba		1.00)			
(A)		9800	Locatio								bate:	nent e	
Location Asbestos-Containing I			Solel ntenan		Asbest	Description of os Containing Mat		Amount	I				
TO BE ABA' IN Facility	TED		ustodia Staff?	al		thermal systems in surfacing, VAT,	nsulation,	(Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
(13)			(12)			other miscellaneo		or or ar		oval	=-	psula	sure
		Yes	No	N/A								te	
Baseme	ent		×		The	ermal Pipe Ins	sulation	75 lf		×			
											_	-	
										\dashv		\dashv	_
				JDEP V		Cubic Yards	Name of Regis	tered Landfil					
Stevens Environmental				auler ID 182	No. 192	of Waste 2 CU		TR.R.F.	F., Inc)			
City, State Allentown, NJ						Disposal Date 8/15/14	City, State	Tullytov	wn P	A			_
Completed By	Completed By Title					Signature	1-1	Da	ite				=
Mahlon E. Ste	evens	Pr	oject	Man	ager				8	3/21	/14		

ASB-41

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

Date of Notification (1) 08/19/2014					f Building resbyter				rristown	+ .	4 3				
Agencies Notified	Type Notification			Street A	2.50				2014 A						
DEP DOL	Initial Amended Amendment	#		City, Sta	ite, Zip Co	ode)		ja.,	.00 (July July	1 2:	زرن		
DOH DCA	Emergency justification) Cancellation			Name of	f Contact ret M. H				EE .	Tak	onhone N	himHar	ا ند		
					LITY INFO		ON						-		
Name of Facility Where In The Presbyterian C				FAGI	LITTINE	JAMAIN	OIN	Тур	e of Facility (4 School (K-12	5			2000		
Street Address 65 South Street								×	Subchapter 8 Other (i.e. pr	(Othe			lding	s, hom	es,
City (5) Morristown								Squ	etc.) are Feet	# of	Floors		Bldg.	Age	
County (6) Morris		-			Code (7) USE ONLY,)	_		rent Use (Prior urch	r if bei	ng demol	ished)			
Name of Monitoring Firm Brinkerhoff Environ	Hired by Building mental Service	Owner (8) s Inc.		ASCM 0010					atement Cont nstruction ((9)				
Street Address 1805 Atlantic Avenu	ue						Street 205 F		ess e 46 Suite	15					
City, State, Zip Code Manasquan, NJ 08	736	3							Zip Code NJ 07512						
K	ct Manager for Monitoring Firm						Teleph 973-3	one	No.		License 01034				
Start Date (10) 08/29/2014	art Date (10) Schedu						Name	of OS	SHA Monitor nstruction (Corn	01004				
Occupancy Status Durin	a Abatament (Chae	, :	Tool to the control			-				Joih					
Facility Closed/Vac	ated During Entire	eriod of A	batem	nent				Rout	e 46 Suite	15					
Abatement Perform Other – Describe:		nal Facility	Hours	-		_			Zip Code NJ 07512						
Scope of Work (Check A	II That Apply)														
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		-	enova emoliti	20700 000			×	M G	ull Containmer lini-Enclosure lovebag Proce on-Exempted	edure				ıre	
		lel	ocati	on					Un Existing to a	/ / 4111		ubic i i		temen	t
Location	n of	30F336	ormali	F-100 (100)		Des	cription	of					_ 1	уре	
Asbestos-Containing TO BE AB. In Facil (13)	Material (ACM) ATED	Mair Custo	Sole ntenar odial S (12)	nce/ Staff?		tos Conta thermal surfac	aining M	lateri s insu T, or		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
First floor janit	ors closet	Yes	No	N/A			VAT		-	6	0 SF	x	-	+	
Basement	ceiling	X			Т	SI - pi	pe inst	ulati	on	8	LF	X	+	x	
Name of Devistors J Mrs	4-11-1-			IDED											
Name of Registered Waste Hauler Savic Construction Corp				JDEP W auler ID 2253		of Was			Name of R		red Land	fill			
City, State Totowa NJ						- 10	al Date /2014	1	City, State Morrisev	ile, F	PA				
Completed by Milos Savic		Title Projec	t Ma	nager		Si	ignature	1				Date 08/19/	2014	1	

NO CK

Date of Notification (1) 6/23/14 Amended 8/14/14 Name of Building Owner/Operator (2) Passaic Valley Sewerage Commission										$\lambda_{\mu\nu} \hat{j}^{\mu}$				
Agencies Notified Type Notification		Street Address 600 Wilson Ave 2014 AUG 25 AH 2: 53												
EPA Initial DEP Amended Amendment #				e, Zip Code , NJ 07105	e in the	¥ 1 11	Į	n.	L.					
Emergency (i justification) DCA Cancellation	ncluding	3553,550		Contact AcCarthy			Telei	hone N	Water 2 x 1.3					
			FACIL	ITY INFORMATI	ON									
Name of Facility Where Abatement is Taking						Type of Facility	(4)							
Passaic Valley Sewerage Commiss	sion					School (K-								
Street Address					Subchapte Other (i.e.					h				
600 Wilson Ave						Other (i.e. etc.)	private a	Comme	iciai bullo	iiigs,	Home	5,		
City (5)						Square Feet	200000000000000000000000000000000000000	loors	В	ldg. A	ge			
Newark, NJ 07105						4575	4575 2			971				
County (6) Essex				ode (7) SE ONLY)		Current Use (Prior if being demolished) Office/locker room								
Name of Monitoring Firm Hired by Building C	wner (8)	1	ASCM	No.	Name	of Abatement Co	ntractor (9)						
Briggs Associates, Division of H&R E	nvironme	ital (0004		New	States Cont	States Contracting, LLC							
Street Address					Street	Address								
3 Crosswicks Street							eet Extension, Suite 10							
City, State, Zip Code Bordentown, NJ 08505					tate, Zip Code 'eville, NJ 08	872								
Project Manager for Monitoring Firm Michael Hoodak		ephon 9-298	e No. 3-5520		Telephone No. License No. 732-525-0100 00749									
Start Date (10) 7/8/14	Comple	etion D	Pate (11)	Tige	of OSHA Monitor					22				
Occupancy Status During Abatement (Check			1,571,5	Sho	Daaldaa aaf	Street Add	tress			0.				
					16 W	/ Elizabeth A	ve							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm: Other – Describe:				City, S	tate, Zip Code									
Other - Describe:			- 200			en, NJ 07036								
Scope of Work (Check All That Apply)				NO STOCKE OF THE PARTY OF THE P										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	novation nolition	1		N H H	Full Containn Mini-Enclosu Glovebag Pro	re ocedure								
				E-	II Non-Exempte	ed (*) and	Non-Fri	riable Procedure Abatement						
	37.5	ocation rmally							Type					
Location of Asbestos-Containing Material (ACM)	2000.00	Solely b	y	De Asbestos Conf	scription									
TO BE ABATED		enance	Sales III	(i.e. thermal			2000	ount ecify	공	æ	inca	Enclosure		
In Facility		lial Staf 12)	17	surfa	cing, VA	T, or	10	or LF)	Remova	Repair	sde	clos		
(13)	-			other r	niscellar	ieous)			/al	=	Encapsulate	lre		
	Yes	No I	N/A				1		1					
Solids Handling Maintenance Bldg	X			Thermal Pipe is	nsulatio	on	300 lf		x					
				Added Scope-C	lean a	nd Wipe	1000 sf				XX			
	1 1	\dashv		1000sf of duct				+			, ,			
						N prop								
Name of Registered Waste Hauler			EP Wa				Register	ed Land	fill			0 0		
Freehold Cartage		1593	ler ID I 39	No. of Was	ste	Wester	n Berks							
City, State				Dispos	sal Date									
Freehold, NJ				8/18/			oro, PA	19508						
Completed by	Title			S	ignatore	1 1/	7 . 1		Date			_		
Michael Migliore	chael Migliore Sr Acco					chall	ufu	2	8/14/14					

CHECK # 8535

Date of Notification (1)	Name of Building Owner/Operator (2)															
8/21/14		ST. ANTHONY'S ORTHODOX CHORCH ?									2	3	ţ.			
Agencies Notified Type Notification		Street Address														
☐ EPA ☐ Initial		385 IVY LANE City, State, Zip Code BELGEN FIELD , N.J 07621 LILLIN Name of Contact Telephone Number									ſ	NU	1_			
DEP Amended		City,	State, Zip Co	ode)				F W	- 5	1. 24.4	ć ,	itu (
DOL Amendment			BERGE	W FIE	ELD .	N.J	0	762	165 -	.1061	4 00	,,,,				
DOH Emergency (ii	nciuaing	Nam	e of Contact					Tele	ephone	Numbe	r					
DCA Cancellation			BRIAN	Sc	HEID	LE		1								
		FA	ACILITY INF		ON											
Name of Facility Where Abatement is Taking						Type of I	Facility (4))								
CHURCH / DAY	CARE		,				iool (K-12									
Street Address /							chapter 8 er (i.e. pri				ildi	nas.	home	es.		
385 IVU LANE					1	etc.)									
Oity (0)						Square F		# of	Floors			-	Age			
BERGEN FIELD							00		1			+5	0			
County (6)		Cour	nty Code (7)	2		Current I	Jse (Prior			1-6 200						
BERGEN	-010-1								ARE/	SCHO	OC					
Name of Monitoring Firm Hired by Building O	wner (8)	AS	SCM No.			Name of Abatement Contractor (9) A.MAC Contracting Inc.										
DETAIL ASSOCIATES, IN	ر		12				racting	inc.		Ü						
Street Address					Street A				500 TOOL	1 AUB 25						
300 G LAND AVE . City, State, Zip Code						owell R				£						
						ate, Zip (2				roj				
ENGLEWOOD N.5 07												-				
Project Manager for Monitoring Firm		phone No.		Telepho				Licens			-		Agr.			
STEPHEN JARACZEWSKI	(30	1) 569 - 6	708		(201)262-5841 00156 Q								-			
Start Date (10)	Completi	on Date (11)					tal C	ndoor	100	-	, 0	-	wy			
STEPHEN JARACZEWSKI Start Date (10) 8/30/14	07/14				Omega Environmental Services Inc.											
Occupancy Status During Abatement (Check	Only One)					80 Huyler Street										
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma			ement				NUMBER OF THE PROPERTY.				-					
Abatement Performed Outside of Norma Other – Describe:	a Facility Ho	ours					ode NJ 076	SOF								
				Паске	erisack,	140 070										
Scope of Work (Check All That Apply)			П - по													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	STREET, STREET	ovation olition				Full Containment with Negative Pressure Mini-Enclosure										
2160 St 01 2260 ti	Dell Dell	ondon	Glovebag Procedure													
						Non-Exempted (*) and Nor										
		cation								İ	Abateme Type					
Location of		mally solely by			scription o	ning Material (ACM) Amou				-	Туре					
Asbestos-Containing Material (ACM)		enance/							Amount (Specify		,		En	ш		
TO BE ABATED In Facility	1	al Staff?	(i.e.		systems insulation, cing, VAT, or				or LF)	200		Repair	cap	nclo		
(13)	(1	2)		other m	niscellane	eous)				0 4 4		air	Encapsulate	Enclosure		
	Yes N	lo N/	Α										e l			
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BOILTR ROOM.			-	FIFE	1030	JC4 110	2		TO CIT	-	+					
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							+									
-					72											
Name of Registered Waste Hauler	NJDER	^o Waste	Cubic '	Yards	I N	ame of R	egiste	red Lan	dfill							
Rovic Transport		ID No.	of Was	ste	11	ESI PA	Beth	lehem	Land	ill (Corp).				
		20785)	5:	1						-	a 65				
City, State	30%				sal Date		ity, State Bethlehe		Δ 120	15						
Riverdale, NJ 07457	1				30/14		·	,, r	7 100							
Completed by Joseph Vocaturo	Vice Pre	acidant		S	ignature	1	/m +	0		Date						
JUSEPH VUCALUIU	-510611	-		J. Vocature 8/21/1							14					

CHECK# 8535

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

Date of Notification (1)		Name of	f Building Owner		'-' /- I d	CH	00	33							
8-21-14	THE INSERMANCE AND AUGUST AND AUG														
Agencies Notified Type Notification	n	Officer / Madress													
EPA Initial		725 CUTH BERT BLUD													
DEP Amended Amendmen		City, State, Zip Code													
Emergence	CONTRACTOR CONTRACTOR	CHERRY HILL WLITER OR 8002													
DOH justification	n)	Name of Contact KEVIN Down. Telephone Number													
DCA Cancellation	on .														
Name of Facility Where Abatement is Tak	ing Place (3)	FAGI	LITY INFORMAT		of Facility (4	1)	-			-					
DELANEY HOMES CO Street Address SOFIELD AVE. E CH.	MMUNITY	CENTE	X BLDG.		School (K-1 Subchapter Other (i.e. p	8 (Other	r than K-12 commercia) I build	ings,	home	es,				
City (5)	AM BEIL CAI	N A	UE	Saua	etc.) ire Feet	# of l	Floors	BI	dg. A	g. Age					
PERTH AMBOU					000		2		+5	175 NO.					
County (6)		County	Code (7)		ent Use (Pric	or if bein	g demolishe	ed)							
MIDDLESEX		(STATE	USE ONLY)		RES.	SIDENTIAL.									
Name of Monitoring Firm Hired by Building	Owner (8)	ASCN	A No.	1. The Control of the	lame of Abatement Contractor (9)										
				A.MAC C	ontracting	Inc.									
Street Address				Street Address 105 Lowe											
City, State, Zip Code					ity, State, Zip Code										
D. i. I.M	Talaaba	No	17	en Rock, NJ 07452						1.00					
Project Manager for Monitoring Firm	Telepho	ne No.		201)262-5841 00156											
Start Date (10) 9/02/14	ompletion	Date (11)		omega Environmental Services Inc.											
Occupancy Status During Abatement (Ch	30/19		Street Addre	eet Address :											
	ement		280 Huyle	yler Street											
Abatement Performed Outside of No	rmal Facility Hou	ırs			, State, Zip Code										
Other – Describe:				Hackensa	ensack, NJ 07605										
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Reno Demo	vation olition													
	1				JII EXOMPTO	1 / 4.1.0	1101111100		t						
l	Is Loc Norm			escription of											
Location of Asbestos-Containing Material (ACM)	Used So			ntaining Materia	I (ACM)	An	nount			ш					
TO BE ABATED In Facility	Mainter Custodia			al systems insulacing, VAT, or	ation,		oecify or LF)	Remova	Re	Encapsulate	Enclosure				
(13)	(12	2)		miscellaneous)		0.	J. L. ,	ova	Repair	·ia	Sur				
	Yes No	o N/A								ਰ	W				
CRAWL SPACES #1 & # 7		/	PIPE	INSULATI	0N	25	OLF	V							
STEAM TUNNER (EXTERIOR)		V	Pipe	INSU CAMO	w	1,40	HOLF	~	_						
DNP FLOOR OFFICE		V	VAT			12	OSF	V							
ROOF (BTWN UPPER: LOWER)	/	Roof	FLUSHIN	5	50	OSF									
Name of Registered Waste Hauler	NJDEP V		c Yards	No. of the contract of the con	- 10 To the contract of the co	ed Landfill									
Rovic Transport		Hauler ID No. of Waste 20785 IESI PA Bethlehem Landfil							Cor	p					
City, State Riverdale, NJ 07457				osal Date	City, State Bethleh		A 18015								
Completed by	Title			Signature	1		Da	te_/	. 1	i e					
Joseph Vocaturo	Vice Pre	sident		J. V	oratu	0		8/3	71/	14					

CK 6007-6

PRESIDENT

Do not use this form for asbestos licensure exempted activities.

`SB-41

State of NJ Notification of Asbestos Abatement

D&S Proj. #: 2014-343 (Pursuant to NJAC 8:60 and 12:120) 2014 AUG 25 Ad 2: 50 Name of Building Owner/Operator (2) Date of Notification (1) 0 8 / 2 0 / 1 4 ROBERT LOEFFLER Agencies Notified Type Notification Street Address X Initial ☐ EPA Amended 535 DOREMUS AVENUE ☐ DEP City, State, Zip Code Amendment #: DOL Emergency GLEN ROCK, NJ 07452 **⋈** DOH (including Name of Contact Telephone Number justification) □ DCA 7720 ROBERT LOEFFLER Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) ROBERT LOEFFLER Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 535 DOREMUS AVENUE Square Feet # of Floors Bldg. Age County (6) County Code (7) (State use only) Current Use (Prior if being demolished) GLEN ROCK BERGEN Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Telephone Number License Number Phone Number 973-345-8020 01169 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. 08/30/14 09/18/14 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure \times >3 sf or >3 lf Mini-enclosure □ Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely E Location of E е by maintenance/custodial asbestos-containing n Amount Description of asbestos-containing n m staff(12) p C material (acm) to be (Specify SF or material (ACM) 0 a abated in facility (13) Yes No N/A BASEMENT BOILER RM PIPE INSULATION 26 L FT Registered Waste Hauler Cubic Yards of Waste NJDEP Hauler ID# Name of Registered Landfill D & S RESTORATION, INC. 13506 TULLYTOWN, RESOURCE RECOVERY 1 YD Disposal Date City, State City, State PATERSON, NJ 07503 08/30/14 TULLYTOWN, PA Completed by (Print or Type) Signature Title Date BOGDAN JOLDZIC

08/20/2014

(K006724

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

D&S Proj. #: 2014-341

Raines							14: -	- 1	i w tari					
Date of Notification (1)	Name o	of Building Ow	ner/Operator (2))			2014 AUG 3	25 AP	2: (3				
0 8 / 2 0 / 1 4	BET	ΓY PERKIN	IS				Loi, noo			33753				
Agencies Notified Type Notification Initial	Street A	Address					52		in	J 6				
DEP Amended	125]	HAMILTON	NROAD		e l'Urivanie									
Amendment #:	City, St	ate, Zip Code						**						
☑ DOL ☑ Emergency	RID	GEWOOD,	NJ 07450											
DOH (including justification)	Name o	f Contact					Telephon	e Numbe	r					
DCA Cancellation	BET	TY PERKI	NS					nui Ein						
Cancellation			CILITY INFORM	IATION										
Name of facility where abatement is	taking place (3)					П	ype of Facility (
BETTY PERKINS	***************************************							i (K - 12) apter 8 (C		an K.	12)			
Street Address						-	☐ Subchi	1.5			12)			
Street Address								Homes,						
125 HAMILTON ROAD						_ [Square Feet	# of Floo	rs	Blo	ig. Ag	е		
City (5)	County (6)			1000 5515	nty Code (7)	٦ L								
				(Sta	Current Use (Prior if being demolished)									
RIDGEWOOD,	BERGEN	V	Tuggithi	L.,	Name of Abatom	201 00	ntractor (9)							
Name of Monitoring Firm Hired by E	liag. Owner (8)		ASCM No.		Name of Abatement Contractor (9) D & S RESTORATION, INC.									
					D & S RESTO	DRAT	TON, INC.			_				
Street Address						A								
St. Chata Zin Code				_	20 California City, State, Zip Co				-			-		
City, State, Zip Code							12							
Project Manager for Monitoring Firm	nber	_	Paterson, NJ Telephone Numb		13	TLicense	Numb	er						
Toject Manager for Monitoning Firm	ilbei		973-345-80			1169								
	1	/2.2		Name of OSHA N										
Start Date (10)	Sched. Com	pletion Date	(11)		D & S Resto	ration	, Inc.							
08/23/14	08/29/14				Street Address									
Occupancy Status During Abatemen					20 California		nue							
Facility closed/vacated during Abatement performed outside					City, State, Zip Co	ode								
Describe: NORMAL H	OURS			_	Paterson, NJ	0750)3							
Scope of Work (check all that apply						ΠFu	II Containment v	v/negative	e press	ure				
D	Renovation						ni-enclosure							
≥160 sf or ≥260 lf	Demolition						ovebag procedu		fulabla		aduro.			
	Is location norm	nally used sol	ely			No	on-Exempted (*)	and Non	R	R	E	_		
Location of asbestos-containing	by maintenance		1	ion of a	sbestos-containing	a	Amount		e m	е	n	E n		
material (acm) to be	staff(12)		material		spesios-containin	9	(Specify S	SF or	0	a	c a	С		
abated in facility (13)	Yes N	N/A					LF)		v e	i	р	L		
KITCHEN			PIPE INSU	ЛАТ	ION		10 L FT		Ď					
ILI CILA						~								
		-							ī					
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			+								市			
Registered Waste Hauler	NJDEP Ha	auler ID# T	Cubic Yards of	Waste	Name of Registe	ered L	andfill		-1		_			
D & S RESTORATION, INC.	13506		1 YD				ESOURCE RI	ECOVE	RY					
City, State		Disposa			City, State									
PATERSON, NJ 07503		08/24			TULLYTOV	VN, P	'A							
Completed by (Print or Type)	Title		Signature					Date 08/2	0/2014	Ĕ				
BOGDAN JOLDZIC	PRESIDENT		estos licensure e	vemnto	d activities			00/2	0/2014	_	-			
ACD A1	LACTION USE THIS	TOTH TOT ASDE	salua illerialite e	VEHIDIE	a dollyllies.									

D&S Proj. #: 2014-339

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

Date of Notification	1 (1)	11	lame of B	uilding Ow	ner/Operator	(2)		2014 /	AUG 25	kil 2:	1.4			
0 8 / 2 0							~ 0							
Agencies Notified EPA	Type Notificati Initial	on S	Street Addr	ress				27 W. S	7.	111	الاند			
	Amended		165 117	H STRE	-MainG									
☐ DEP	Amendment #:		City, State,	Zip Code										
☑ DOL	☐ Emergency		PISCA'	TAWAY,										
□ DOH	(including	IN	lame of Co		hone Number									
□ DCA	justification)		TIEL EV	N BYLIC										
	Cancellation		HELE			to a second			4:					_
				FAC	CILITY INFOR	RMATION								
Name of facility wi	here abatement is	s taking pla	ace (3)					Тур	of Facility	(4) ool (K - 12)				
HELEN BYLIC	CIKI							11.	=	1/2/2		V	40\	
Street Address	CKI							-	3 <u></u>	hapter 8 (0 r (Private/0			12)	
Olicel Address									Bldgs	s./Homes,	etc.			1000000
165 11TH STR	REET							Squ	are Feet	# of Floo	ors	Blo	lg. Ag	je
City (5)		Cou	nty (6)				nty Code (7)							
DICCATATIA	V	l M	DDI ECI	.v		(Stat	e use only)	Cu	rrent Use (Prior if bein	ng dem	olishe	ed)	
PISCATAWA Name of Monitorin		20000000	DDLESE	EA	ASCM No		Name of Abateme	ent Contra	ctor (9)					
Name of Monitorin	ig i iiii i iiied by i	Diag. Own	C1 (O)		ASCIVITIO									
Street Address					<u> </u>		D & S RESTO	JRATIO	IN, INC.					
Street Address							20 California	Δνο						
City, State, Zip Coo	le						City, State, Zip Co			***************************************				
ony, onato, Esp ood							Paterson, NJ							
Project Manager fo	r Monitoring Firm		TF	hone Num	ber		Telephone Number			License	Numb	er		
The state of the s							973-345-80	20			1169			
Start Date (10)		ISched	d. Comple	tion Date (11)		Name of OSHA N	/lonitor				1-0-01		
				,			D & S Restor	ration, In	ic.			-		-
09/03/14		09/1	-				Street Address	70-10-10-10-10-10-10-10-10-10-10-10-10-10						
Occupancy Status	During Abatemer d/vacated during		100 100 1 00 100 100 100 100 100 100 100 100 100	tomont			20 California							
	erformed outside						City, State, Zip Co	oae						
Describe:	NOPMAI H	OURS					Paterson, NJ	07503						
							Taterson, 143		ntainmant	w/pagathy	n proce	uro		
Scope of Work (ch								=	nclosure	w/negativ	e press	uie		
		Renovation					,	Glovel	oag proced					
≥160 sf or ≥2	260 17 🔲	Demolitio			-			Non-E	exempted (*) and Non	-friable	proce		_
Location of asbestos-cor	ntaining		enance/cu	y used sole istodial	999.0				Amount		е	e	E n	E
material (acr	n) to be	staff(12)	_			ption of as al (ACM)	sbestos-containing	9	(Specify		m o	p a	C	C
abated in fac	cility (13)	Yes	No	N/A					LF)		V	i	a p	L
BASEMENT			X	1	PIPE IN	SULATI	ON	1	08 L FT		e	ń		П
DASEMENT				-	THEIN	JOLATII		- -	OODII		卄	Ħ	౼	Ħ
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			-	-	1		NAME OF TAXABLE PARTY.				市	H	Ħ	T
				-	1				The state of the last		H	Ħ	Ħ	n
Registered Waste F	lauler	NJD	EP Hauler	r ID#	Cubic Yards	of Waste	Name of Registe	ered Land	fill					
D & S RESTOR			506		2 YD		TULLYTOW			RECOVE	RY			_
City, State				Disposal			City, State							
PATERSON, N				09/04/			TULLYTOW	VN, PA		15:				
Completed by (Prin BOGDAN JOL		Title PRESIL	ENT		Signature					Date 08/20	/2014			
ASR-41	LIC			n for asbes	stos licensure	exempted	d activities.			00/20	, 2017			-

CX 006327

D&S Proj. #: 2014-342

State of NJ

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

Name of Building Owner/Operator (2) Date of Notification (1) 0 8 / 2 0 / 1 4 ANNALISA JONS Agencies Notified Type Notification Street Address **Initial** ☐ EPA & Lilicia 58 BROADVIEW AVENUE Amended DEP City, State, Zip Code Amendment #: DOL MAPLEWOOD, NJ 07040 Emergency (including DOH Telephone Number Name of Contact justification) DCA ANNALISA JONS Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) ANNALISA JONS Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. # of Floors Bldg. Age 58 BROADVIEW AVENUE Square Feet County (6) County Code (7) (State use only) Current Use (Prior if being demolished) MAPLEWOOD ESSEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Telephone Number License Number Phone Number 01169 973-345-8020 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. Street Address 08/29/14 09/16/14 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure \times >3 sf or >3 lf Mini-enclosure Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely E Location of E е е by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing m n p staff(12) (Specify SF or C material (acm) to be material (ACM) C 0 a a LF) abated in facility (13) 1 Yes N/A No p e X PIPE INSULATION 64 L FT BASEMENT BARE HEATING PIPES 15 L FT BASEMENT Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# D & S RESTORATION, INC. 13506 TULLYTOWN, RESOURCE RECOVERY 1 YD Disposal Date City, State City, State 08/30/14 PATERSON, NJ 07503 TULLYTOWN, PA Completed by (Print or Type) Signature Title 08/20/2014 **BOGDAN JOLDZIC** PRESIDENT

Do not use this form for asbestos licensure exempted activities.