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

GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) August 23, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Notification Type Street Address Agencies Notified □Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) **P**EPA ☑Amended Notification #1 -74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS D DCA Typo Scope of work City, State, Zip Code X DOL PISCATAWAY, NJ 08854 (description of material & X DEP- No Longer REQUIRED Name of Contact location name) Telephone Number X DOH MICHAEL F. SMITH, ENV. 848-445-2550 ■ Emergency (including **HEALTH & SAFETY** justification) □Cancelled FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) VOORHEES HALL, BLDG# 3013 School (K-12) Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **COLLEGE AVENUE CAMPUS** Sq. Feet: N/A # of Floors: 3 Bldg. Age: 80+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC **NEW BRUNSWICK** MIDDLESEX (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/24/18 8/25/18 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 5PM - 5AM Daily (24 HOURS & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) Full Containment with Negative Pressure X > 3 sf or >3 If X Renovation Mini-Enclosure $\square \ge 160 \text{ sf or} \ge 260 \text{ lf}$ Demolition ☐ Glove bag Procedure / Wrap & Cut ■Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Room 103A, 103B FOYERS X Plaster 24 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cubic Yards of Waste: 5 CY See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill Hauler #2) Newark Carting, Inc., Newark, NJ 04509 Rd. Morrisville, Pa 08/24/2018 19067 NJ DEP # 4509 215-736-1700 Completed by (Print or Type) Signature RAYMOND C. PEDALINO SENIOR PROJECT August 23, 2018 Raymond C. Pedalino MANAGER

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

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

GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) August 15, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address Initial Notification
 ■ ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) ☐ EPA ☐ Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS D DCA ☐ Emergency (including City, State, Zip Code X DOL PISCATAWAY, NJ 08854 justification) ■ DEP- No Longer REQUIRED □Cancelled Name of Contact Telephone Number X DOH 848-445-2550 MICHAEL F. SMITH, ENV. **HEALTH & SAFETY** 110 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) VOORHEES HALL, BLDG# 3013 ☐ School (K-12) AUG 27 Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) COLLEGE AVENUE CAMPUS Sq. Feet: N/A # of Floors: 3 Bldg. Age: 80+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC **NEW BRUNSWICK** MIDDLESEX (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/24/18 8/25/18 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E ☐Abatement Performed Outside of Normal Facility Hours -Describe: City, State, Zip Code FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 5PM – 5AM Daily (24 HOURS & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure □≥ 3 sf or >3 If **X**Renovation ☐ Mini-Enclosure X ≥ 160 sf or ≥ 260 lf Demolition ☐ Glove bag Procedure / Wrap & Cut Non-Exempted (*) and Non-Friable Procedure Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Room 103A, 103B & FOYER X VAT 24 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 5 CY Cubic Yards of Waste: See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 08/24/2018 NJ DEP# 4509 19067 215-736-1700 Completed by (Print or Type) Signature RAYMOND C. PEDALINO SENIOR PROJECT Raymond C. Pedalino August 15, 2018 MANAGER

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

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

Date of Notification (1)				Nama	of Duilding	0	/0	(0)	1117	11			-	
8/24/18					of Building ers Unive			(2)	IUI	11 4	UG	0 7		
Agencies Notified	Type Notification	1		Street	Address					1	100		2018	1
□ EPA	☑ Initial			Living	gston Car	mpus	#21 Ro	ad # 1	ĺ	L				1
□ DEP	Amended			City, S	tate, Zip Co	de				ASBEE	705	COAL	770.0	
☑ DOL	Amendmen			Pisca	ataway, N	J 08	854		and the same of the same of the same		LICEA	SINC	TRO]	- G
DOH DCA	Emergencyjustification			Name	of Contact				Tele	phone N			to the property of the land	
☐ DCA	Cancellation			Frank	k Cocilov	0				2-932-2				
N- CE III				FAC	ILITY INFO	DRMA	TION						- 3.3-4-	
Name of Facility Where	Abatement is Takir	ng Place (3)					Type of Facility	(4)					
Language Departm	ient Auxilliary E	Bldg		_				School (K	-12)					
Street Address								Subchapt	er 8 (Other	r than K-	12)			
12 Morrell St								Other (i.e etc.)	private &	commerc	cial bui	ldings	, hom	es,
City (5)								Square Feet	# of I	Floors		Bldg.	Age	-
New Brunswick, NJ								3,000	2			50+	0	
County (6)					Code (7)			Current Use (P	rior if being	g demolis	shed)	0.000		
Middlesex				(STATE	USE ONLY)	_		Unoccupied						
Name of Monitoring Firm	Hired by Building	Owner (8)	N .	ASC	M No.		Name	of Abatement C	ontractor (9)				
ATC Group							Yanr	nuzzi Environ	mental S	Services	s, Inc			
Street Address 3 Terri Lane								Address						
							135 H	Kinnelon rd. S	Suite 102	2				
City, State, Zip Code							1550	tate, Zip Code		77				
Burlington, NJ							Kinne	elon, NJ 0740	05					
Project Manager for Mon	itoring Firm			Telepho	one No.			one No.	1000	License I	Vo.			
Start Date (10)								218-0880		01228				
9/4/18				npletion	Date (11)		- 1	of OSHA Monito					10000	
Occupancy Status During	Abatamant (Oh	9/17/1						uzzi Environ	mental S	Services	s, Inc.	iii		
		- 88	155					Address		_				
Facility Closed/Vaca Abatement Performe	ited During Entire	Period of	Abaten	nent				Kinnelon Rd.	Suite 10	2				
Other – Describe:	ed Outside of Norn	nai Facility	Hours	5			A 570 cm	ate, Zip Code						
Scope of Work (Check All	I That Apply)						Kinne	elon, NJ 0740)5					
	і тпас Арріу)						Free Control	ř						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		- Desirated	enova emolit				XXX	Full Containn	nent with N	legative l	Pressu	re		
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Location	of		lormal d Sole			De	escription	of				1 1 1	ре	$\overline{}$
Asbestos-Containing I TO BE ABA	Material (ACM)	Mai	ntena	nce/	Asbesto	os Cor	ntaining Ma	aterial (ACM) insulation,	10.07100	ount	_		Ш	
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(13)			(12)			other	miscellane	eous)			Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							-		ate	(i)
first & 2nd	floor			х		VA	T & mas	tic	200	3 sf	-			-
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througho									Х	-		\vdash		
unought	_	X	mua mui	ngs c	on t/g pip	e insulation	12	25	Х					
Name of Registered Wast	e Hauler		LNI	IDEDIA		0 11								
			60.69	JDEP W auler ID	300007 100	of Wa	Yards este	Name of	Registere	d Landfill				
Yannuzzi Group, Inc.		3.76	7467		40	ve10. 44	Waste	Manage	ment F	airles	SS			
City, State							sal Date	City, Sta	te					-
Kinnelon, NJ						9/11/	118		s Hills P	Α				
Completed by		Title				5	Signature	11 1Y	1 1	Da	ite			\neg
John Mucha		AHEF	KA Pr	oject [Designer		J&	the / /	ulle	8/	24/18	3		

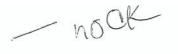
* Do not use this form for asbestos licensure exempted activities.

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

Date of Notification (1 08/22/2018)		(1	Name	of Building	Owner/	Operator (2)	Chor	ck No. 122	7			
Agencies Notified	Type Notification				Address	II OI LO	ideation	Cited	JK INO. 122	1		945	
□ EPA	□ Initial				road Stre	et	V C	NECE		B C			
☑ DEP ☑ DOL		# <u>1</u>		City, Si Bloon	tate, Zip C nfield, Ne	ode w Jerse	y 07003	A G IS	3 U W		A STATE OF THE PARTY OF THE PAR		
☑ DOH ☑ DCA	☐ Emergency (i justification) ☐ Cancellation	ncluding		Name of Bert P	of Contact etrik		Annual Contraction	III AUG [Telenhone I 973-680	Number 0-8501)x2	018	3
Name of Facility When	o Abstancet is Taki	Di (0	,	FAC	ILITY INF	ORMAT	ION	į		2001	i i		
Demarest Elementa	ry School	ng Place (3)					acility (4) ESTOS	CONTRO	L&	2000		
Street Address 465 Broughton Aver	nue						☐ Subc	hapter 8 (Other th (i.e. private & con	an K-12)	ildings, h	omes	, etc	.)
City (5) Bloomfield, New Jer	rsey 07003						Square Fe 50,000		# of Floors 2		Bldg. 50+	Age	
County (6) Essex					Code (7) USE ONLY)	Current U	se (Prior if being o School	lemolished)				
Name of Monitoring Fi Briggs Associates	rm Hired by Building	Owner (8)		ASC	M No.		Name of A Lilich Cor	batement Contract poration	tor (9)				
Street Address 3 Crosswicks Street							Street Add 606 McBr						
City, State, Zip Code Bordentown, New Je	ersey 08505						City, State, Woodland	, Zip Code d Park, New Jers	sey				
Project Manager for Mo Michael Hoodak	onitoring Firm			Telepho 609-29	one No 98-5520		Telephone 973-225-8	No. 3400	License 01104				
Start Date (10) 08/31/2018		Schedule 09/04/20		mpletion	Date (11)			SHA Monitor onmental Labora	tories, LL0	5			
Occupancy Status Dur	ing Abatement (Che	ck Only On	e)				Street Add						
☐ Facility Closed/Vac ☐ Abatement Perform ☑ Other – Describe:	cated During Entire I ned Outside of Norm 3 PM Start Fri U	al Facility F	lours	ent			City, State, Union, NJ	Zip Code					
Scope of Work (Check					- (- 2)		Omon, No						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			enova emoliti				□ N ⊠ (full Containment w Mini-Enclosure Glove Bag Proced on-Exempted (*) a	ure / Limited	d Contail	men		∍nt
Location	on of	N	Locati	ly			Description of	of	Amoun (Specif SF of LI	у	Abat T	eme /pe	nt
Asbestos-Containin <u>TO BE Al</u> In Fac (13	BATED cility	Maii	i Sole ntenar odial S (12)	nce/		al systen	ntaining Mate	erial (ACM) (i.e. surfacing, VAT,		, inches	Repair	Encapsulate	Enclosure
		Yes	No	N/A								e	
Basement Hallway Name of Registered Wa	anto Havila-			X	I Barresson		1 0 0	ebag Procedure					
Lilich Corporation	aste Hauler		Н	JDEP W lauler ID 18724		of Was	C. Carlo Carlos III.	Name of Regi		fill			
City, State Woodland Park, New	/ Jersey					Dispos 09/04	al Date /2018	City, State Morrisville, F	PA				
Completed by Adriana Olejarova		Title Pres	siden	t		S	gnatore	1 68		Date 08/22/	2018		

ASB-41 (R-06-08)

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



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

Date of Notification (1) 08/14/2018)			Name o	f Building field Boar	Owner/C	Operator (2)	Check	NG. 122:	2		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	her /	on-distribuni.
Agencies Notified	Type Notification			Street A	ddress oad Stree	et						distantant.	AND OF SALE	2
□ EPA ☑ DEP ☑ DOL	☐ Initial ☐ Amended Amendment #_ ☐ Emergency (inc	ludina			ate, Zip Co field, Nev		y 07003 .		AUG 2		-	SAUGRAN		Authorite Authorite Communication of the Communicat
☑ DOH ☑ DCA	☐ Emergency (indiginal justification) ☐ Cancellation	Juding		Name of Bert Pe	f Contact etrik			ASS	lephone I 73-580	Jumber -850	Pk	201	.8	A ORON - APPL
				FAC	ILITY INFO	DRMATI	ON	and consequences on a consequence	Andrew Continue Paris					
Name of Facility Wher Demarest Elementa	re Abatement is Taking ary School	Place (3)			ita	Type of Faci	, , ,						
Street Address 465 Broughton Aver	nue			Constitution of the Consti				pter 8 (Other than e. private & comm	nercial bui		20			
City (5) Bloomfield, New Jer	rsey 07003						Square Feet 50,000	2	of Floors		Bldg 50÷	. Ag	е	
County (6) Essex					Code (7) USE ONLY)		Current Use	(Prior if being der School	molished)					
Name of Monitoring Fi Briggs Associates	rm Hired by Building C	wner (8)		ASC	/ No.		Name of Aba Lilich Corpo	tement Contracto ration	г (9)					
Street Address 3 Crosswicks Street							Street Addres							
City, State, Zip Code Bordentown, New Je	ersey 08505						City, State, Z Woodland F	ip Code Park, New Jerse	у					
Project Manager for M Michael Hoodak	onitoring Firm			Telepho 609-29			Telephone No 973-225-84		License 01104					
Start Date (10) 08/27/2018		Schedule 08/31/2		npletion	Date (11)		Name of OSH Iris Environr	HA Monitor mental Laborato	ries, LLC	5				
Occupancy Status Dur	ing Abatement (Check	Only On	e)				Street Addres			71				
☐ Facility Closed/Va☐ Abatement Perfort☑ Other – Describe:		Facility	Hours	ent			2333 Route City, State, Zi Union, NJ 0	ip Code						
Scope of Work (Check							37,000,000,000							
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	All Hat Apply)		lenova emolit				☐ Mir 図 Glo	I Containment with i-Enclosure ove Bag Procedur -Exempted (*) and	e / Limited	d Contai	nme		Tent	
Locati	ion of	0.000	Locat lorma				Description of		Amour (Specif SF of Li	nt fy	Ab	aten Type		
Asbestos-Containin TO BE A In Fa	ng Material (ACM) BATED cility	Ma	d Sole intena odial s (12)	nce/	Asbe therma	al systen	ntaining Materians insulation, sincer miscellaneous	urfacing, VAT,	OI OI LI		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A									ė	
Basement Hallway				X	Pipe Insu	lation	Tent/Gloveb	ag Procedure)	20 L	F X				
Name of Registered W Lilich Corporation	aste Hauler			IJDEP W lauler ID 18724		Cubic of Was 5		Name of Registr		Ifill				
City, State Woodland Park, Nev	w Jersey			.0,2-7			sal Date /2018	City, State Morrisville, PA						
Completed by Adriana Olejarova	siden	t			ignature	TOX		Date 08/14	/20	18				

ASB-41 (R-06-08)

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

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Date of Notification (1) 08/22/18	ek	并 283kg	1		Name of Building Owner/O		The second secon	AHC	0.7	2010	order-party
Agencies Notified		Notification	Type		Street Address	1	디니	Alvo	27	2018	
⊠ EPA		Initial No	tification		16 School Road City, State, Zip Code	-					- 10
□ DCA		☐ Amende	d #		Hibernia, NJ 07419		AS	BESTO	SCO	ONTRO)L&
⊠ DOL				ication (including	Name of Contact	i		one Nun			
☐ DEP 図DOH		justification Cancelle			Donnamarie Palmiere Administrator	Board	973-62			Parallel Control Control Control	POSTORY SIR LANG.
				FACILITY IN	FORMATION		1				
Name of Facility Where A Stony Brook Eleme	batement is entary Scl	Taking Place	(3)		Type of Facility (4) School (K-12)						
Street Address 44 Sto	The state of the s		away,	NJ 07866	Other (i.e. private & comme Sq. Feet: # of Floors: 3 Bl	ercial build dg. Age:	1947		āli .		
City (5)	County (6)		Count	y Code (7)	Current Use (prior if being of	iemolisnea): Elemei	ntary Sc	nool		
Rockaway	M	orris	(State	Use Only)							
Name of Monitoring Firm	Hired by Blo	g. Owner (8)	ASCM	1 No.	Name of Contractor (9)						
					Panoramic Window & Doo	r Systems	Inc.				
Street Address					Street Address 712 Sergeantsville Road						
City, State, Zip Code Trenton, NJ 08608					City State, Zip Code Stockton, NJ 08559						
Project Manager for Moni	toring Firm	Telephone	Number		Telephone Number P (732)926-0900		License 01237	Numbe	Ţ		
Scheduled Start Date (10 08/24/18)	Scheduled 08/29/18	Complet	ion Date (11)	Name of OSHA Monitor						
Occupancy Status During Status During Facility Closed/Vacate	d During Ent	(Check only or	bateme	nt	Street Address 87 Main Street						
□Abatement Performed C Describe	Outside of No	ormal Facility F	Hours		City, State, Zip Code						
□Other – Describe:					A15-2-3-2-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-						
Dottler - Describe.					Lincoln Park, NJ 07035						
Source of Work (Check al	I that apply)										
≥ 3 sf o	r > 3 lf			⊠ Renova	ation Π N	/lini-Enclos	ure				
⊠ ≥ 160 sf	or ≥ 260	If		□ Demo	18.70°C	IGlovebag		·e			
	20.5					n-Friable P					
Location of Asbestos-		ocation Norma	ally		sbestos Containing Material	Amou		Abate	ment 7	Туре	
Containing Material (ACM Facility (13)		d Solely by nt./Custodial S	toff?	(ACM) (i.e. therr surfacing, VAT, of	mal systems insulation,		fy SF or	Remove	Renair	Encap Enc	close
r domity (10)	(12)		lan!	surfacing, VAT, C	or other misc.)	LF)		Kumovo	ropun	Lifety Life	,,,,,,,
YES NO NA											
					dow Caulking and Glazing	790 If		X			
Name of Reg. Waste Hauler NJDEP Waste Hauler ID # 0036057					Cubic Yards of Waste			f Regist	ered L	andfill	
Panoramic Window & Dr	Sys Inc				Chrin La	ındfill					
				isposal D	ate		ty, Sta				
Completed by (Print or Ty	pe)		Signature // /		Date						
Mark M Jovic		Title Project Mar	nager		TIVUY		08/22/1	8			

APPROVED BY;

Tom Voochees, POC NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Chl # 3424

	10.10								Parasalf-dela [2]	garact.	5.0	Les :
Date of Notification (1) 8 /	21 /	18		Contract Profession		g Owner/Operator (niversity-Office		Construction	La La		W	11
Agencies Notified	Type Notifica	ation		Stroot	Address							- 11
□ EPA				433.33	Elm Dri	ve		AU	7	7 2	018	1
☑ DOLWD ☑ DHSS	Amended Amendme			City, S	State, Zip (Code						1
□ DCA	⊠ Emergend			Pri	nceton, N	J 08544		NOVE ST	104	141		
(NJAC 5:23-8)	justification		9	Name	of Contac	t		Telephone Numi				
	☐ Cancellat	ion		Rol	pert Orte	go		609-258-184	1			
				FA	CILITY IN	IFORMATION						
Name of Facility Where A	Abatement is T	aking Place	(3)				Type of Facility ((4)				
Princeton University	ty						School (K-12					
Street Address	***************************************							(Other than K-12		21.40.0		
81 University Place	•						homes, etc.)	ivate and commer	ciai bi	ullaing	JS,	
City (5)							Square Feet	# of Floors	В	dg. A	ae	
Princeton							27			-3	J-	
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)			
MERCER												
Name of Monitoring Firm	Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
TTI Environmental						BRISTOL EN	VIRONMENTAL	_, INC.				
Street Address						Street Address			700-700			X WEST
1253 N Church Stre	eet					1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip C	ode					
Moorestown, NJ 08	057					BRISTOL, PA						
Project Manager for Mon			Tele	phone	No.	Telephone No.		License No.			-	
Michael Keehn	•		1.344.010.00	09-386		215-788-6040)	00509				
Start Date (10)	Is	Scheduled C				Name of OSHA N		1 00000	-			
8 / 22 /					18		VIRONMENTAL	., INC.				
Occupancy Status During	Abatement (Check only	one)			Street Address						-300
☐ Facility Closed/Vacate	property of the second		33300000000	ment		1123 BEAVE	R STREET					
					scribe	City, State, Zip C						
Time of Abatement: 7						BRISTOL, PA						
Scope of Work (Check al	I that apply)			11717		DICIOIOL, FA	13007					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	, truct approy		enovat emolitic				g Procedure	ative Pressure	re			
			s Loca	tion	T					atem	ent T	vne
Location	of	1000	Norma			Description of	of		-	-	1	Ť .
Asbestos-Containing			ed Sole aintena			stos Containing Ma		Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABA		1	todial	1917 Tilbren	(1.6	 thermal systems surfacing, VAT 		(Specify SF or LF)	ova	= -	psu	Insc
(13)			(12)			other miscellane		J. J. 2. /			late	-G
		Yes	No	N/A								
Kitchen			\boxtimes		Pipe In	sulation		30 LF				
									П	П	П	П
Name of Registered Was	te Hauler		I	JDEP I	Waste	Cubic Yards of	Name of Regis	tered Landfill				
BRISTOL ENVIRON		IC.		lauler II	D No.	Waste	FAIRLESS					
City, State					3	Disposal Date	City, State		2000			
BRISTOL, PA 19007	7						FAIRLESS	HILLS, PA				
Completed By (Print or T	ype)	Title				Signature		Da	ite			
Brian Scafiro	reconstruction of the Control of the	Estima	tor			Bain	, Scolin	Mr 8	7-5	21	-1	8

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

Name of Building Owner/Operator (2)

Date of Notification (1) 8/22/18				Building O River Re				1	C				27	Contraction of the Contraction o	
Agencies Notified Type Notification EPA Initial			Street Ad 1144 H	ldress looper A	venu	е		A Commence of the commence of	Allí	2 2 7	20.	18	A CAMPACATION AND A CAMPACATIO	-	
DEP Amended Amendment #				e, Zip Cod River NJ		3	10		Not	J - 1 1	2000		School Control	4,430,44	
	cluding	1		Contact Jordan	3.5			P	SBTele 732	phone N	lumb 1950	erol. -34	а 03		
				ITY INFO	RMAT	ION	2007	landar speciments		The second second second	-tarette com-				-
Name of Facility Where Abatement is Taking Toms River High School South	Place (3)		TAGE				_	of Facility (
Street Address		e Marine					\Box	School (K-1 Subchapter	8 (Othe			71.0			
55 Hyers Street							ш,	Other (i.e. p		70.000 000000 10000	rciai				s,
City (5) Toms River NJ 08753							Squa 100	re Feet 0+	# of 1	Floors			dg. Aq 5+	ge	
County (6)			County C	ode (7)			Curre	ent Use (Pri	or if bein	ng demol	lished	1)			
Ocean	(0)			55	1		-£ A b -	tt C		(0)					
Name of Monitoring Firm Hired by Building Ov Health & Safety Services Inc.	vner (8)		ASCM	No.			or Aba	tement Cor nc.	itractor	(9)					
Street Address							Addre								
PO Box 365 City, State, Zip Code							Box 3	ip Code						-	
Berlin NJ 08009								lin NJ 080	091						
Project Manager for Monitoring Firm James Proctor			Telephor 856-45	ne No. 52-1311			none N -753-9			License 00727					
TAKE STATE OF THE	Schedule 8/24/18		pletion [Date (11)		Name		HA Monitor							
Occupancy Status During Abatement (Check						100000000000000000000000000000000000000	Addre	ee							
						Street	Addre	33							
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: After 3 PM					_	City, S	State, Z	ip Code							
Scope of Work (Check All That Apply)			-			X	(INP	T WRGD	+ 0	cT					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoliti				Σ	Fu Mi Gl	II Containm ni-Enclosure ovebag Pro on-Exempte	ent with e cedure	Negative				4	
	1-1	41							- ()					ment	
Location of	l N	Location	y		De	escription	n of				1		Ту	ре	
Asbestos-Containing Material (ACM)		d Sole			os Cor	taining N	Materia	I (ACM)		mount	1			ш	m
TO BE ABATED In Facility	2000	odial S	37773344	(i.e.		I system		ation,		pecify or LF)		Ren	Re	ncar	ncl
(13)		(12)				miscella			O.	01 11 7	- 1	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									_		ate	Ø.
Custodian Office	х			TSI		vs on fi		-		15		х			
				wet v	vrap ar	nd cut	./'								
Basement			TSI		vs on fi				3 LF	-					
						love-Ba	ag /		D			X			
Name of Registered Waste Hauler		Н	JDEP W lauler ID	1200	of Wa	e Yards aste		Name of		red Land	atili				
Pernaco Inc.		2	1787		1			G.R.O							
City, State West Berlin NJ					8/24	osal Date /18)	City, Star		A 1906	7				
Completed by	Title	ا د ماد				Signatur	27	,			Date	2/18	2		
Anthony T Perna	ident									0/2	4/10				

Accession to	State of New Jersey
	NOTIFICATION OF ASBESTOS ABA
E. R. III.	(Pursuant to NJAC 8:60 and 12

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Drint	Form
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0, -	PAID	N		ATION	OF ASBE	STOS	ABATE		NT .				W.		The second secon
Date of Notification (1)			1,000		Building C			0.00	1.1		AUG	9	2018		11/
8/10/2018	Check #3235			ACCOUNT OF THE PARTY	dy og G	uadal	upe So	cho	ool	1 11	Nou			ATL DE	المسادرة
Agencies Notified	Type Notification		- 4	Street A	ddress enter Str				Contract of the same	-	Andrew State - providenter	and state and		1 0	
EPA	✓ Initial							_		P	SBESTO	S CO	VI HIL	N. GL	
DEP DOL	Amended Amendment #				te, Zip Coo eth, NJ (agains and an artist of the con-	had O	Carlo Carlo	shariant Paineris	- which is the property of	and arrest republications
-	Emergency (in				Contact	71202				Tel	ephone Nu	mber			
DOH DCA	justification) Cancellation			Sandra						11 (0.55)	8-352-74				
				FACII	LITY INFO	RMATI	ON								
Name of Facility Where		Place (3)					Т	ype of Facility	(4)					
Our Lady of Guada	lupe School							×				٥.			
Street Address								F	Subchapte Other (i.e.				dinas.	home	s.
227 Center Street								_	etc.)				55 65		
City (5) Elizabeth									quare Feet 5,000	2	Floors	1 8	ldg. A	ge	
County (6)				County C	Code (7)				Surrent Use (Pr	1 -	ng demolis				
UNION			(STATE	ISE ONLY)	1			School						
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCM	No.				Abatement Co						
N/A Street Address							Street		rvices Corpo	oration					
Street Address									oress 9th Street						
City, State, Zip Code							City, S	Stat	e, Zip Code						
									berg, NJ 07	093					b
Project Manager for Mor	nitoring Firm		1	elephor	ne No.		Teleph				License 1	No.			
					564400 0040000				95-1700		01074				
Start Date (10) 8/22/2018	77			pletion [Date (11)			2000	OSHA Monitor						
Occupancy Status Durin		8/24/1	F-1				Street		as above						
		65		2002			Sireet	Au	iuress						
	ated During Entire Pe led Outside of Norma 9 AM			ent		_	City, S	Stat	e, Zip Code						
Scope of Work (Check A	III That Apply)							Uay);							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renovat Demoliti	27.00			2	~	Full Containn Mini-Enclosus Glovebag Pro	re	Negative	Pressu	re		
						· · · · · ·			Non-Exempte	ed (*) an	d Non-Fria	ble Pro	cedur	е	
			Locatio											ement pe	
Location		Voneta Si	Normall	A Colonia Colonia	0.0000000000000000000000000000000000000		scription				NO 00000 00000	-	1		\Box
Asbestos-Containing TO BE AB		Ma	intenan	ce/					erial (ACM)	300	mount Specify	N N	70	Encapsulate	Ē
In Faci	lity	Cus	todial S (12)	taff?			cing, VA			SI	or LF)	Removal	Repair	apsı	Enclosure
(13)						other	niscella	nec	ous)			l va	=:	ılate	ure
		Yes	No	N/A		0.0			20		205		-		
Youth C		X			170070	Floor		e 		8 SF	X				
Boiler R	oom	X				Elbow	_			1 LF		X			
									-		+	-			
Name of Registered Wa	ste Hauler	l N.	JDEP W	/aste	Cubic	Yards		Name o	Reaiste	ered Landfi	ill	1			
Tri-State Transfer A		H	auler ID	3333337	of Wa			6,000,000,00		erprises					
City, State		18	9551			sal Date	9	City, Sta							
Bronx, NY				TBD			Wayne		, ОН						
Completed by		Title				Signatur	e	1211	1		ate				
Gina Betances		Offic	e Mar	nager				1	fulas	1 —	(08/08/	18		

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

Date of Notification (1		lomo	of Duildi	0		01	-			С	heck #	908	37		
	8/21/18						Operator (2) niversity	distriction of	DEGE		B In				
Agencies Notified [] EPA [] DEP	Type of Notification			Address Norma		/eni	ue	S. Contract of the Contract of	AUG 2	7 2018	The September of Landson				
[X] DOL	[] Emergence [] Amended	y C		tate, Zip er Mon			IJ 07043	Profit was In case	14.6						
[X] DOH	Notificatio		lame (of Conta	ct	-		_	ASBESTOS C	Phone Numb	per		_		_
[] DOX	[] Cancellation	on A	My	Ferdir	nand	l				3-655-436	I				
					FAC	ILITY	YINFORMATION								
Name of Facility Whe Richardson Hall	re Abatement is T I, Montclair S	aking Pla tate Ur	ice (3) niver	sitv					Type of Facility (4) [] School (K-	12)					
Street Address 1 Normal Avenu									Other (i.e. homes, et	12) er 8 (Other th private and oc.)	an K-12) commercia	l buildi	ngs	,	
City (5)		County					nty Code (7)		Square Feet 80000	# of Floors 2	~	dg. Ag 50	е		
Upper Montclair		Essex				(STA	ATE USE ONLY)		Current Use (Prior i educational	f being demo	olished)				
Name of Monitoring F		ing Owne		ASCM N	lo.				ent Contractor (9)	V: 12 128	ISSV 40				
Detail Associate Street Address	es, Inc.			00		4	Street Address	J	upiter Environm	ental Ser	vices, li	nc.	-11		
300 Grand Ave.								3	23 Changebridg	ne Road	Suite 10	00			
City, State, Zip Code	07001						City, State, Zip (Co	ode	go rtoda,	ounte 10	,,,			
Englewood, NJ Project Manager for M		Tala		Monates		_	T.		Pine Brook, NJ (07058					
Anthony Valenti				Numbe 9-6708			Telephone Num		er 973-575-8700		License I		r 08	52	
Scheduled Start Date 8/31/18	(10) Sche	ed. Comp		Date (1			Name of OSHA	M	lonitor				00.	JZ	
Occupancy Status Du	ring Abatement (C	heck onl	v one))		-	Street Address	11	ris Environment	ai Labora	atories, I	LC			
[] Facility Close	d/Vacated During erformed Outside	Entire Pe	eriod o	of Abater	ment			23	333 Route 22 W	/					
Desc	ribe: cribe: partially vac						City, State, Zip C		ode Jnion, NJ 07083	3					
Scope of Work (Check	all that apply)								70 K					-	_
[] Demolition [] ≥3 sf or ≥3 lf [x] ≥160 sf or ≥2	60 If			[X]	Rei	nova	tion		[x] Mini – E [x] Gloveba	ntainment wi Enclosure ag Procedure riable Proce	Э	e Pres	sure		
			Locat mally				Desc	rir	otion of			Ab	ate	mer	t
Location Asbestos – C		S	Solely				Asbestos	_	Containing		Amount	R	R	Е	Е
Material (A	ACM)		al Staf				(i.e., then	m	I (ACM) al systems		(Specify SF or LF)	E M	E P	N	NC
TO BE AB In Faci			Т					rfacing, VAT, cellaneous)		38%	O V	A	A	L	
(13)	Yes	No	N/A								A	R	S	S	
Mechanical Room &	2nd Floor		Х		TSI	"Wr	ap and Cut"			20	0 LF	X		U	U
								_							
Name of Registered W Jupiter Environm		es Ha	DEP V uler IE 04782				vic Yards Vaste 5		Name of Registered Alliance Landt						
City, State Pine Brook, NJ	the state of the s					oosal Date 20/18 +		City, State Taylor, PA							
Completed By (Print or Pane Repic	Title Gene	eral	Manag	ger	012	Signature		R		Date 8/21/	18		777		
SB-41 lote:	1							1				-		_	



<i>U</i>	N		CATION	OF ASBES	STOS	ABATE		NT	EC	E					
Date of Notification (1) 08/06/18 Check # 3	234			Building Ov						San	**************************************	. santaugrau	The state of the s	And the second second	
Agencies Notified Type Notific		5	Street Ac			leritary	30	1100	A L	<u>n 1</u>	2()18	and	-some	The state of the s
EPA X Initial DEP Amend X DOL Amend		(City, Stat	oodside A te, Zip Code k, NJ, 07	е		10.00		ASBES	ราบร อ	ONI	ROI	. 3:		And the second of Philad
	ment # ency (including ation)	1	Name of	Contact	104				Tele	ephone N	lumb	er	Charles and the second	arias es constigado en	1
DCA Cancel	lation	(Chris						97	3-483-0	1033	5			
Name of Facility Where Abatement is Christ the King Elementary	Taking Place (3))	FACIL	LITY INFOR	RMAT	ION	_	pe of Facility							
Street Address 239 Woodside Ave							×	Subchapte Other (i.e.	er 8 (Oth			build	ings,	home	s,
City (5) Newark								etc.) quare Feet 0,000+	# 01	f Floors		77.55	dg. A	ge	
County (6) Essex			County C	Code (7)			Cı	urrent Use (P		ng demo	lishe				
Name of Monitoring Firm Hired by Bui	ding Owner (8)		ASCM				of A	Abatement Co	ontractor	(9)					_
N/A Street Address						Street	Ad								
N/A City, State, Zip Code	2000					426 City, S		th e, Zip Code						-	
N/A Project Manager for Monitoring Firm			Telephor	ne No		Gutte	10000	perg, NJ, 0	7093	License	e No.				_
N/A	Ochodul		N/A			201-	29	5-1700 OSHA Monito		01074					
Start Date (10) 08/25/18	08/27/1	18	ipietion L	Jate (11)		Sam	ie a	as above							
Occupancy Status During Abatement Facility Closed/Vacated During E			ent			Street	Ad	dress							
Abatement Performed Outside of Other – Describe: 9am					_	City, S	State	e, Zip Code							
Scope of Work (Check All That Apply)							-62								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovat Demoliti					×	Full Contains Mini-Enclosu Glovebag Pr Non-Exempt	ire ocedure					е	
	1,000	Location												ment pe	
Location of Asbestos-Containing Material (AC TO BE ABATED In Facility (13)	M) Use	Normall d Solel intenar todial S (12)	ly by nce/		os Co herma surf		Matens in	erial (ACM) sulation, or	(5	Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											w	
Bsmt Library		X		S	Spray	ed on (Cei	iling		3 SF			X		
Name of Registered Waste Hauler Tri-State Transfer Associates		Н	IJDEP W lauler ID 9551	2000	of W			10.1.00 (0.00)	va Entr	ered Lan eprise	atill				
City, State Bronx, NY		-			Disp	osal Date)	е	City, St	_{ate} esburg	, OH					
Completed by Gina Betances	Title Offic	e Mar	nager		Signatur	re /	(B)	W	2	Date 08/	e '02/1	18			

6586 - NJ

NOTIFICATION OF ASBESTOS ABATEMENT Initial Notificat (Pursuant to NJAC 8:60-7 and 12:120-7) Check #: 7255

Initial Notification

Dono of National	/*\		1 (50-	28 W	1 22	- Our	n/0nc===	73					
Date of Notification	100000 100000000	8 .	Na	me or B	ulldir	ng Uwne	r/Operato	1 1	GEIV	11	1	1	
0 8 / 2		-5175.746-14004-57		idgefield					11.0 11.0	1 12	-11	1	
Agencies Notified	Type Notifi	cation	St	reet Ad	dress						111		
[X] EPA	[X]Initia	1					h Floor`		AIIG 9 7 3	018	. 1	3	9
[X] DEP	Notifi	cation	CI	ty. Sta	te, Zi	ip Code		4					
₩100L	[]Amende	ed cation	N	ew York	, NY 1	0018				runt	.,1		
(×) DOH			Na	me of C	ontact	t		Tel	ephone Numbe	r	-11		
[]DCA	[]Cancel	lation	IIM	arc Pop	owitz			(21)	2) 697-0450				
			П.,			INFORMA	TION						
Name of Facility W	here Abateme	ent is Ta	aking				11014	Type of Facil	ity (4)				_
D: 1 5 11 6 1							1	[]Schoo	1 (K-12)				
Ridgefield Gardens								[]Subch	apter 8 (Oth	ner t	han & co	K-12)
Street Madress							1		buildings, 1	nomes	. et	c.)	
952 Banta Place									7	2 27	.ag. 50	nye	
City (5)		County	7 (6)		Co.	unty Co	de (7) E ONLY)	20000 Current Use (Prior if be	ing c		ishe	d)
Ridgefield, NJ 07657	7	Berge	n					Residential bu	ildinas				
Name of Monitoring Owner (8)				ASCM N	No.	Name	of Abate	ment Contracto					
Particular (1997)	Caianasa Ind					Four	Strong R	uilders, Inc.					
S&S Environmental	ociences, inc	<u>. </u>				Stree	t Addres	is					-
98 Sand Park Road						180 5	Sargeant.	Δνεημε					
City. State. Zip C	ode					City.	State,	Zip Code			-		
Cedar Grove, NJ 070	000					Clifto	n, NJ 070	113-1935					
Project Manager fo	r Monitoring	g Firm	releg	phone Nu	umber	Telep	hone Num	ber	Lice	nse N	lumbe	r	
Prakash Khaitan		ls	973-8	357-7188	8	973-6	314-0377		0080	7			
Scheduled Start Da	te (10) S	ched.Com					of OSHA						
0 9 / 0 4 / Day /	1 8 1	0 9 / Month /	2 4	1/11/	8	Four	Strong B	uilders, Inc.					
Occupancy Status D	Year I	ment (Ch	eck c	only one	ar 2)		t Addres						7
[]Facility Clos	ed/Vacated	During E	ntire	e Period	1	180.5	Sargeant	Avenue					
of Abatement []Abatement Per	formed Outs	ide of No	ormal	l Facili	Lty			Zip Code					
Hours - Descr	ibe: Residêntia	l buildings				Ol:ft-	- NI 070	140					
Scope of Work (Che				·		Γζίιπο	n, NJ 070	713				-	
			~	Panauat	rion			. Containment w	with Negativ	e Pre	essu	e	
[]Demolit []>3 sf o	r >3 1f		W.	Renovat	11011		[X]GLov	Enclosure rebag Procedure					
[X1≥160 sf	o r ≥260 lf						[]Non-	Friable Proced	iure				
			Loc	Is cation						Aba	emer	it T	ype
	ion of Containing		Non	rmally Jsed			scriptic		Amount	RE	R	N	N
Materia	1 (ACM)		Sc	olely		Mat	erial (A	ACMI)	(Specify	M	E	CA	T
IN Fac	ABATED ility		ter	Main- nance/	i	nsulati	thermal	acing, VAT,	SF or LF)	V	PA	PS	S
. (1	3)			stodial	200	or ot	her misc	ellaneous)		A	R	U	R
				No N/A	_	,			0.00015	1	_		E
Building No. 1, 2, 6,	& 7 - Crawl	Space	X		Pipe	Insulati	ion		2,839 LF	X			
													L
Name of Registered	Waste Haul	er		DEP Was		Cubic of Was	Yards	Name of Regis	tered Landf	ill			_
Newark Carting, Co				509		1		Grand Central	Sanitary Lan	dfill			
City. State	·		140	503		Dispos	al Date	City. State	January Lai	MIIII	_		-
Manuari NU								Dan Azzal AA	10070				
Newark, NJ Completed By (Prin	t or Tunel	Title				1	Signature	Pan Argyl PA	18072	10:	ate		
95.52% D-95 -51 D1 D005				20 20 40			K	(N)	, _	0.			
Bilyana Kulakovska		Office A	dmin	istrator			0	region		8/	21/1	8	
ASB-41 JUN 95													

6586 - NJ

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Check #: 7255

	20.20.00							Cit	CON	m. 1200				
Date of Notification			Na	me of Bu	ildir	ng Owl	ner/Operati	or (2)		5 12 n F	/7 Ī1	1 1	-	
0 8 / 2	11/11	8	R	idgefield	Gard	ens					y li	7 1	1	
Agencies Notified	Type Notifi	cation		reet Ado										
[X]EPA	[X]Initia	1	18	West 40	th Str	eet, 1	1th Floor`		A	MG 27 2	018		11	
(X)DEP	Notifi	cation		ty. Stat				4						
X1DOL	[]Amende Notifi	d cation	N	ew York,	NY 1	0018				The same of the same	nio)			Vi)
(×) DOH	[]Cancel		Na	ame of Co	ontac	ŧ			Tele	phone Number	F			, all
[]DCA	1 100		M	larc Popo	witz			-	(212) 697-0450				
				FACI	LITY	INFOR	MATION							
Name of Facility W	here Abateme	nt is T	aking	g Place	(3)			Type of Fa	acili	ty (4)				
Ridgefield Gardens					-			X10	ibcha ther	k (K-12) apter 8 (Oth (i.e., prinouildings,	vate	8 00	mme	2)
952 Banta Place								Square Fee	et	# of Floor	s 81	dg.	Age	
City (5)		Count	y (6))	Co	unty	Code (7) USE ONLY)	20000	20 (1	2 Prior if be	ing	50		100
Ridgefield, NJ 07657	7	Berge	n		1,5	THIE	USE UNLI)	Residentia			rug c	I CILIO I		/
Name of Monitoring Owner (8)	Firm Hired	by Buil		ASCM N	٥.			ement Contra	actor	(9)				
S&S Environmental	Sciences, Inc) <u>. </u>					eet Addres	uilders, Inc.						
98 Sand Park Road	ode					180 Cit	Sargeant y. State.	Avenue Zip Code						
Cedar Grove, NJ 07	009 F Monitoring	Firm	Tele	phone Nu	mber	Clif	ton, NJ 070	013-1935 aber		Lice	nse h	umbe	r	
Prakash Khaitan Scheduled Start Da	te (10) Sc			357-7188			8-614-0377 e of OSHA			0800	7			
0 9 / 0 4 / Month / Day / Occupancy Status D	Year Muring Abatem	0 9 / lonth /	2 4 Day	1/1/8 Yea	1	Fou	ur Strong B	uilders, Inc.	_					
[]Facility Clos of Abatement []Abatement Per Hours - Descr	ed/Vacated D formed Outsi ibe:	uring E	ntire	e Period		180	Sargeant y. State.	Avenue Zip Code						
X]Other - Descr						Clif	ton, NJ 070	013						
Scope of Work (Che []Demolit []>3 sf o [X]>160 sf	ion	арріу)	×]Renovat	ion		[X]Mini [X]Glov	Containment Contai	dure	ith Negativ ure	e Pro	essu	e	
	ion of Containing		No	Is cation rmally Used olely		Asb	Descriptionestos-Cont	aining		Amount (Specify	R E M	R E	E N C	ype N C
TO BE	ABATED		ter Cus	Main- nance/ stodial aff(12) No N/A		(i.e.	. thermal tion. surf			SF or LF)	O V A L	PAIR	PSUL	C S U
Building No. 1, 2, 6,	& 7 - Crawl 5	Space	X	NO N/A		Insul	ation			2,839 LF	X		·	Ľ
	*		-					· · · · · · · · · · · · · · · · · · ·						H
Name of Registered	Waste Haule	r	IN.	JDEP Was	te	TCubi	c Yards	Name of R	egis	tered Landf				
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Newark, NJ								Pan Argyl,	PA	18072				
Completed By (Prin	t or Type)	Title				1	Signature		/		Da	ate		
Bilyana Kulakovska		Office A	dmin	istrator			(1)	Co	1		8/	21/1	8	
ASB-41 JUN 95											101			

X Dell

Date of Notification (1)

08/14/2018

EPA

DEP

DOL

DOH

DCA

PRIVATE Street Address

VERONA NJ. County (6)

City, State, Zip Code

Start Date (10)

08/24/2018

Project Manager for Monitoring Firm

Other - Describe:

≥160 sf or ≥260 lf

≥3 sf or ≥3 lf

Scope of Work (Check All That Apply)

Location of

Asbestos-Containing Material (ACM)

TO BE ABATED

In Facility

(13)

BASEMENT

Name of Registered Waste Hauler

ROVIC Transport

60 Riverdale

CARLOS ESQUIVEL

City, State

Completed by

City (5)

X

×

Agencies Notified

PAID

Type Notification

Initial Amended

Name of Facility Where Abatement is Taking Place (3)

Name of Monitoring Firm Hired by Building Owner (8)

Occupancy Status During Abatement (Check Only One)

Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours

Amendment #

iustification) Cancellation

Emergency (including

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

Scheduled Completion Date (11)

Renovation

Demolition

Is Location Normally

Used Solely by

Maintenance/

Custodial Staff?

(12)

No

X

NJDEP Waste

Hauler ID No.

SAFETY MANAGER

1000 353 PAE

Yes

Kiverdale

08/25/2018

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NOTIFICATION OF ASBESTOS ABATEMENT Check#3145 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 08 23 Frank Aversa Agencies Notified Type Notification Street Address X EPA ✓ Initial **⊠** DOLWD ☐ Amended City, State, Zip Code ASBESTUS CONTROLA X DHSS Amendment # Whitehouse Station, NJ 08889 ☐ DCA Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number Cancellation Frank Aversa FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Whitehouse Station, NJ 08889 County (6) County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Hunterdon Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. License No. Telephone No. 01127 973-638-1777 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor 09 / 03 / 18 09 / 05 / 18 Envirovision Consultants,Inc Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/ PM___AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 If 2 160 sf or 260 If Renovation Mini-Enclosure Glovebag Procedure Tent with Negative Pressure Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Encapsulate Used Solely by Removal Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A \boxtimes 12 LF Basement Pipe insulation X 320 SF 1st floor VAT -floor tiles Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date leuke Wenad 08/23/18 N.Jevtic Owner

State of New Jersey

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Date of Notification (1) 8/23/18					f Building (r (2))) E	CE	N W	7 [6		11
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Name of Facility Where A Mavis Tire Supply	Abatement is Taking	Place (3)					T	ype of Facility School (K	2.2					
Street Address 547 Durie Avenue								×	Subchapt	er 8 (Oth	er than K-1 & commerci		dings,	home	es,
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Start Date (10) 8/30/18		Schedul 9/30/1		pletion	Date (11)				OSHA Monito	or	703				
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Scope of Work (Check A	ll That Apply)														
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City, State Bridgewater NJ						Dispo	sal Date		City, Sta						
Completed by A. Scott Higgins		Title Pres	ident				Signature	е	U		Da 8/	te 23/18	3		



State of New Jersey

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Date of Notification	on (1)			Name o	f Building	Owner/0	Operato	or (2)					3 0	760 mman a	
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City, State Freehold NJ						Dispos	al Date)	City, Stat						

A. Scott Higgins

Completed by

Title

President

Date

8/20/18

Signature

PAIL

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Date of Notification (1)		Name of	Building Owner/		1 11					
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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) 8/9/18 Johns Manville Agencies Notified Type Notification Street Address EPA 437 N. Grove Street DEP Initial City, State & Zip Code TUS CONT LICENSING $\overline{\boxtimes}$ X DOL Amended-#2 - 8/22/18 Berlin, NJ 08009 \boxtimes DOH Emergency Name of Contact Telephone Number DCA Cancellation Tim Logsdon FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Johns Manville School (K-12) Street Address Subchapter 8 (Other than K-12) 437 N Grove Street Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 100000 Various 85 Berlin Current Use (Prior if being demolished) Camden Manufacturing Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Finog Environmental, Inc. BRISTOL ENVIRONMENTAL INC Street Address Street Address 617 Stokes Road 1123 BEAVER STREET City, State & Zip Code City, State & Zip Code Medford NJ 08055 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Mark Rubnitz 609-868 - 1676 215-788-6040 00509 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8/20/18 8/29/18 BRISTOL ENVIRONMENTAL INC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Hours - 7am to 3pm City, State & Zip Code Describe: 7:00am - 4:00pm BRISTOL, PA 19007 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure ≥160 sf ≥260 If Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate Enclsoure Remova Repair TO BE ABATED Maintenance or (i.e., thermal systems Custodial Staff? insulation, surfacing, VAT in Facility (13)(12)or other miscellaneous) Yes No N/A Hazardous Room **Transite** 2800 SF Office VAT 4 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste 20990 SERVICE TRANSPORT GROUP, INC. 15 MINERVA LANDFILL City, State Disposal Date City, State NEW CASTLE, DE 19720 WAYNESBURG, OH 44688 TBD Completed By (Print or Type) Title Signature Date

Estimator

8/22/18

atrick T. DeCarol

PATRICK T. DeCARO



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

CR # 3420

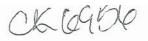
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437 N Grove Street						1					ial buildir			etc.)	
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City, State & Zip Code							ty, State &	-					1 1111-		
Medford NJ 08055							RISTOL,								
Project Manager for Monitorin	ig Firm	Teleph				1	elephone N				License N				
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Describe: 7:00am						BI	RISTOL, I	PA 190	007						
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Scope of Work (Check all tha	(apply)							\square	Full Cor	toinm	ent with N	lonativa	D		
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City, State						-7-5-7	sal Date	City, S							
NEW CASTLE, DE 19720						TBD				RG, C)H 4468	8			
Completed By (Print or Type)			Title			Signa	ture	0	0		,	Date			
PATRICK T. DeCARO			Est	imat	or	1	trick	1	O'Co	2)	10	8/14/	18		
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Chc# 3417

Date of Notification (1)			Nam	ne of I	Buildin	Owner / Opera	tor (2)		77 °				
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						Square Fee	t.e. priva	# of Floo	mercial buildir			etc.)	
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						Manufactu		being de	anolished)				
Name of Monitoring Firm Hired	by Building Own	ner (8)		AS	SCM No			Contrac	tor (9)				
Finog Environmental, Inc		:0:				BRISTOL							
Street Address		- 29h				Street Addre	ess						
617 Stokes Road City, State & Zip Code						1123 BEA\							
Medford NJ 08055						City, State &							
Project Manager for Monitoring	Firm	Tolon	hana	Misse		BRISTOL,		07					
Mark Rubnitz	11111	Telep 609-8				Telephone N 215-788-60			License N				
Scheduled Start Date (10)	Scheduled Cor					Name of OS		itor		005	09		
8/20/18		8/25/		10 (1	1)	BRISTOL E			TAL INC				
Occupancy Status During Abate	ment (Check or	nly one	2)			Street Addre		714141214	IAL INC				
Facility Closed/Vacated	During Entire P	eriod c	of Aba	atem	ent	1123 BEAV	ER ST	REET					
Abatement Performed O	utside of Norma	al Hou	ırs –	7am	to 3pm	City, State &	Zip Coc	le					
Describe: 7:00am – 4 Facility Occupied During	l:00pm					BRISTOL,	PA 190	07					
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Name of Registered Waste Haule	er .	ш	NIF	JED /	Macto	Cubic Yards	Mana	-(D : (
	 					of Waste	Name	of Regist	ered Landfill				
SERVICE TRANSPORT GRO	UP, INC.		209			1	MINE	RVA LAI	NDFILI				
City, State						Disposal Date	City, St						
NEW CASTLE, DE 19720						TBD			G, OH 44688	3			
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CK T. DeCARO			Est	imat	or	Patrick	11	PA	, /m	8/9/18	3		
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Date of Notification (1) 8/23/18			Name	e of Building	Owner/Opera	tor (2)				4	=	
Agencies Notified Type Notificati	on				rivate Hom	е	Y.				1	
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Name of Facility Where Abatement is Tal	king Place ((3)	FA	CILITY INFO	DRMATION	Type of Facil	Str. (4)					
Ted Grovatt Private Home Street Address City (5)						School Subcha	60 808	er than I & comm	<-12) ercial b	uilding	js, ho	mes,
Harvey Cedars NJ 08008	i)					Square Feet 1000+	# 0	f Floors		Bldg 35+	. Age	
County (6) Ocean			County (STATE	y Code (7) E USE ONLY)		Current Use (ng demo	lished)			
Name of Monitoring Firm Hired by Building N/A	g Owner (8))	ASC	CM No.	Nam Per	e of Abatement on aco Inc.	Contractor	(9)				
Street Address	7.					t Address Box 329						
City, State, Zip Code						State, Zip Code st Berlin NJ (8091			- 10 - 1001		
Project Manager for Monitoring Firm			Teleph	one No.	Telep	hone No. -753-9800	1	License				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Start Date (10) 9/5/14	Schedule 9/14/18		mpletion	Date (11)		of OSHA Monit	or	00121				
Occupancy Status During Abatement (Che	ck Only On	e)				Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of A mal Facility	bater Houn	ment s			State, Zip Code			25-32	-		
Scope of Work (Check All That Apply)												
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TO BE ABATED In Facility (13)		dial S (12)		(i.e. th	ermal systems surfacing, VA other miscellan	insulation, T. or	(Sp	ecify or LF)	Remova	Repair	Encapsulate	Enclosure
E	Yes	No	N/A						3	,	ate	re
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Exterior	-		Х		Transit Boa	ırd	30	00	х			
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City, State Elm NJ					isposal Date /14/18	City, Sta	te ville PA	10007				
Completed by	Title				Signature	7 WOITIS	ville PA		ate			
Anthony T Perna	Presid	ent			(-	1000	23/18	3		

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NIAC 2:00 and 5:10) State of New Jersey

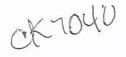
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)			Name	of Buildin	g Owner/Operator (2) (0)	WETA			<u> </u>	
08/23/	18		Ja	cobs Den	nolition	(2) RSS Lin LI		34	71	(7
Agencies Notified Type Notifi	cation		Stree	t Address	1111	AUG 6.7 (noin III III				
☑ EPA ☑ Initial			PC	D Box 9		AUG 27 2	2016 11:27				
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DCA Emerge (NJAC 5:23-8) justifica	ncy (includiation)	ng		e of Contac			Telephone Num	her	/ -		
☐ Cancell			Lin				732-528-380				
					FORMATION		702-020-000	,,,		-	
Name of Facility Where Abatement is	Taking Plac	o /3\	ГА	CILITI	IFORIVIATION	T 5 E 170 - 1	(4)				
Residence	raking riak	,e (3)				Type of Facility (
Street Address						School (K-12) 3 (Other than K-12	2)			
						Other (i.e., pr	rivate and comme	rcial b	uilding	js,	
City (5)						homes, etc.)	# - 6 51				
Manasquan						Square Feet 800 sf	# of Floors		ldg. A	ge	
County (6)			Com	nty Code ()(STATE USE ONLY)				65		
Monmouth			Cour	nty Code (/	MOTATE USE ONLY)	Residence	or if being demoli	snea)			
Name of Monitoring Firm Hired by Bui	Idina Owne	(8)	ASCM	No	Name of Abateme						
January III.	iding Owne	(0)	AGGIVI	140.		ntracting, Inc.					
Street Address					Street Address	nuacung, inc.					
					1889 Route 9	Unit 61					
City, State, Zip Code					City, State, Zip Co			-			
January Electrical States						New Jersey 081	755				
Project Manager for Monitoring Firm		Tel	ephone	No	Telephone No.	ivew Jersey Uo					
, , , , , , , , , , , , , , , , , , ,		100	phone	140.	732-349-9932	î	License No. 00624				
Start Date (10)	Scheduled	Comple	etion Da	te (11)	Name of OSHA M	Mi	00024				
09 / 05 / 18			7 /	1.0	E.M.S.L. Ana	N. Walter College					
Occupancy Status During Abatement											
☐ Facility Closed/Vacated During Ent			ment		Street Address 1056 Stelton						
☐ Abatement Performed Outside of N				scribe		-d-					
Time of Abatement:AM	PM/	PM		AM	City, State, Zip Co	ode New Jersey 088	254				
Scope of Work (Check all that apply)		-			riscataway, i	vew Jersey U88	554				
☐ ≥3 sf or ≥3 lf						ainment with Neg	ative Pressure				
⊠ ≥160 sf or ≥260 lf		enovat emoliti			☐ Mini-Enc	losure g Procedure					
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City, State			20223	,	3 Disposal Date	City, State					-
Toms River, New Jersey					09/07/18	- Andrews Control of the Control of	Pennsylvania				
Completed By (Print or Type)	Title				Signature	7	Da	ate	/	1	
Nicholas Fernicola	Projec	t Man	ager		1	1		8/	23	/10	5

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Date of Notification (1) 8/22/18				of Building Co			(2)	1		A	UG	2	7 20	110	
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□ DOH □ DCA □ DCA □ Emergen □ justification □ Cancellar				f Contact no Horowi	itz					ephone 2-363-				er outsiden dan geste	
Name of the second			FACI	ILITY INFO	RMATI	ON					020	_			
Name of Facility Where Abatement is Ta	iking Place (3)					Typi	school (K-1 Subchapter Other (i.e. p	2) 8 (Oth				dings,	home	es,
City (5) Lakewood							Squ 163	etc.) are Feet 80	# of	Floors		В	ildg. A	\ge	11-21-11-11
County (6) Ocean				Code (7) USE ONLY)	-		Curr	rent Use (Prio	or if bei	ng dem	olishe	ed)			
Name of Monitoring Firm Hired by Buildin	ng Owner (8)		ASCN	Л No.				atement Con							
Street Address						Street 6 WH		ess DOVE CO	DURT						
City, State, Zip Code								Zip Code OOD, NJ 08	8701			-			
Project Manager for Monitoring Firm		T	Telepho	ne No.		Teleph 732-6				Licens	e No				
Start Date (10) 09/02/18	Schedule 09/07/1		npletion	Date (11)				HA Monitor D PROFE	SSIO	NALS					
Occupancy Status During Abatement (Cl Facility Closed/Vacated During Enti Abatement Performed Outside of N Other – Describe:	re Period of A	baten	nent			City, S	HITE	DOVE CO							
Scope of Work (Check All That Apply)						LAKE	EVVC	OD, NJ 08	8/01						
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		enova emolit				×	M GI	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure					e	
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair	Sole ntenar odial S (12)	nce/	(i.e. th	s Conta	aining M systems ing, VA	lateria s insul T, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler		N	JDEP W	laste T	Cubic Y	/arde		Name of F	Dogista	rod l a-	4611				
NEWARK CARTING		Н	auler ID 4509	No.	of Wast			IESI	vegisie	ieu Lan	uiiii				
City, State NEWARK, NJ					Disposa 09/07/			City, State		PA					
Completed by JOSEPH PERLSTEIN	Title OWNi	ER			Sig	gnature		1			Date		18		



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Date of Notification (1) 08/22/18				of Building Propert			(2)	The second	-	AU	0 0	-,	004		And the second second
Agencies Notified Type Notification EPA Initial				Address rincewo	ood Ave	·			Therese and the same	AU	0		<u> </u>	-	
DEP Amended Amendment				ate, Zip C vood, N		1			AS	BEST	OS C	ON	ITR()L 8	
□ Emergency justification) □ DCA □ Cancellation		15.	Name o	of Contact					Tele	phone	the state of the party of	-	Park and a	A PARTIE AND A	Phononical
Non-of-Facility Name At 1			FAC	ILITY INF	ORMAT	ION									
Name of Facility Where Abatement is Takin	g Place (3)					Type of Fa	11. 12.000							
Street Address		8					Subo	ol (K-12) hapter 8 r (i.e. pri	(Othe			uildi	ings,	hom	es,
City (5) Toms River							Square Fe 1720	et	# of 2	Floors		Blo	dg. A	ge	
County (6) Ocean				Code (7) USE ONLY	n		Current Us Home	se (Prior	if bein	g demo	olished)				
Name of Monitoring Firm Hired by Building	Owner (8)	1	ASCN	M No.			of Abateme								
Street Address						100000000000000000000000000000000000000	Address HITE DO\	/E COI	JRT		-0.00				
City, State, Zip Code							tate, Zip Co EWOOD,		701						
Project Manager for Monitoring Firm			Telepho	ne No.			none No. 668-9078		T	License	e No.				
Start Date (10) 09/02/18	Schedule 09/05/		npletion	Date (11)			of OSHA M LEAD PF								
Occupancy Status During Abatement (Chec		25			111	Street	Address								
Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours	nent S			City, S	tate, Zip Co EWOOD,	de		12					
Scope of Work (Check All That Apply)								145 007					-	Tay Car	3720
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit				×	Full Con Mini-End Gloveba Non-Exe	closure g Proced	dure	8					
Location of		Locati Vormal			Doc	scription							bate	ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intenar todial S (12)	nce/	Asbes (i.e.	tos Cont thermal surfac	aining M	aterial (ACI) insulation, T, or	и)	(Sp	ount ecify or LF)	Kemova		Repair	Encapsulate	Enclosure
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City, State NEWARK, NJ					Dispos 09/05/	al Date /18	1 1 1 1 1	, State THLEH	HEM	PA					
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Date of Notification (1)			7.2			,	11-4-	Che	ap	4	73	2.17
8-22-2018			Nam	e of Building Owner/	Operator (2	2)		,	19	5	- []	13
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Agencies Notified Type Notificatio	n .		Stree	t Address	•		1 1 1	2	1110			
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DEP			City	State, Ztp Code					-			
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□ DCA □ Cancellatio			1.1	DE BC	FR		, retering to					
N			FA	CILITY INFORMA		-						
Name of Facility Where Abatement is Taking	Place (3)			THE OTHER	11011	Type of Facilit	v (4)		-		-	
1. DE BOER							. 100					
Street Address						☐ School, (I	(-12)					
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RIDGEWOOD					* 1	Square Feet	# of Floor	rs		Bldg.	Age	
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Name of Monitoring Firm Hired by Building ((0)					PES!	DENCE	_				
The of Montesting Paris Place by Building (wner (8)		ASO	CM No.	Name o	f Abatement Co	ntractor (9)				_	
Street Address												
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City Santa 71- C. 1					450	South R	iver St					
City, State, Zip Code					City, Sta	ate, Zip Code	TAGE DE	ree	Ľ_	_		
							NT 076					
Project Manager for Monitoring Firm			Teleph	one No.	Telephon	ne No	NJ 076	U L nse No.				
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Start Date (10)	Schedul	ed Com	pletion I	Date (11)	Name of	329-744 OSHA Monitor	4 0	038	8			
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□ ≥160 sf or ≥260 lf		Demolit			翩翩	Full Containm Mini-Enclosur	ent with Negativ	e Press	ure			
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(13)		(12)			iscellaneou	ıs) ·	Sr of Lr)		Removal	Repair	Encapsulate	Enclosure
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Best Removal Inc			1710	10 17		Mins			6			
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Date of Notification (1) 8/20/2018	(TATALON)				of Building oh Franc		perator	(2)	A	110 n	7 0	110		Office and pro-	
Agencies Notified	Type Notification	1		This is investigated	Address	CONTRACTOR LABOUR	0.77 		B	<u>UG_2</u>	1 4	110	W. T. W. W.	-	4
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DOH DCA	Justification Cancellatio)	g	Name o	of Contact			İranı dan Layaba	Te	lephone	Numbe	ſ	-	her intro	Dill. Jan
	113 Cancellatio				ILITY INFO		าม		- J.	this out of the		-			
Name of Facility Where	Abatement is Taki	ng Place	(3)	170	761111111	ONMATIC	JN	Type of Facility	(4)	· · · · · · · · · · · · · · · · · · ·		er seen	71-17-7500-1	W-W	
Street Address	Wings and State of the Control of th		A-1-1-1		ACCUMANTO A			School (Konda) Subchapte Other (i.e.	er 8 (Oth	er than F & commo	K-12) ercial b	uildii	ngs, l	iome	35,
City (5) Union City	TO COLUMN THE LEAST OF STREET	the same of the sa			**************************************			etc.) Square Feet 700 SF	# 0	f Floors		Blo	g, Ag	e	THE NAME
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Hudson Name of Monitoring Fire	m Hired by Building	Owner /8	,		USE ONLY,		Nama	of Abatement Co	ntracts	70)		e deservation			M-0117-0-04
CA Environmental	Times by bollong	Owner (c	,	Medi	VI IVO.		Supe	r LLC	ntractor	(8)					
Street Address 2200 Paterson Pla	nk Road							Address Belmont Ave							
City, State, Zip Code North Bergen, New	Jersey, 07047	men mentilma nyan yannya bah	N PARTIES SALES	OT STANLAS OF CHES	***************************************			ate, Zip Code Ion, NJ 0750	8	***************************************		(Marie)		amm	-
Project Manager for Mon Carmelo Altomonte		T 184-15-01-04		Telepho 201 86	ne No. 34-6583		Telepho		***************************************	License 01195				WPWF.D	Part
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Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire	Period of	Abaten	nent		1		elmont Ave	: Section (Inc.)		********				
		nei raum	y Hour	•	Managara v A			ate, Zip Code Ion, NJ 0750	В						
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419 Bldg. Fron	nt end roof		** (848 × 1790)	X		Roof	Materi	ial	35	0 SF	X	+	-	+	-
419 Bldg, Bac	k end roof			X			Materi	-	TALLEST SALES	0 SF	X				
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City, State Haledon, NJ	The second second second		100		6.90	Disposal TBD	Date	City, Stat Morrisv	е						er to carrie
Completed by Failor Dominguez	D. W Marin Barrier and Company	Title Proje	ct Ma	nager		The second secon	nature	A	7		Date 8/20/2	2011	3	- 5230-3	18.00
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Print Form

Agencies Notified Type Notification Stroot Address Stroot Address City, State, Zip Code Franklin Lakes, NJ, 07417 ASSESTOS CONTHOL & LICENSING	Date of Notification (1) 8/20/2018	- 100 (10 PM) - 2 F - 17 L					Owner/Ope	rator (2	2)	M						- Particular con-
EPA Amended Amended Amended Amended Pranklin Lakes, NJ, 07417 Cancellation C	The second secon	vne Notificatio	n				0	allinaria decem			AU(3 2	1	2018	}	l lum
DOH	EPA DEP	Initial Amended Amendmen	nt #	~~~	City, S	itate, Zip C		17	-		ASBEST	ros ICEN	CO ISIN	NTRI VG	S.JC	Charleston,
Street Address Stre	DOH DCA	justification	1)	g	Justin	n Ginorio)		THE RESERVE ASSESSMENT	414 × 1144 ×	Telephone	Num	ber	-		
School (K-12) Subchapter & Coller than K-12 Subchapter & Coller th	Name of Facility Where Aba	atement is Taki	no Place	(3)	FAC	CILITY INF	ORMATION		tune of Easil	itu (A)						
Union City County (6) Hudson Name of Monitoring Firm Hired by Building Owner (8) CA Environmental Street Address 2200 Paterson Plank Road City, State, Zip Code North Bergen, New Jersey, 07047 Project Manager for Monitoring Firm Carmelo Althomothe 201 864-6583 203 386/477 Telephone No. Carmelo Althomothe 201 864-6583 201 3360-477 Disposition Date (11) Street Address 203 Bellmont Ave City, State, Zip Code Halledon, NJ 07508 Start Date (10) 973/2018 Scheduled Completion Date (11) 973/2018 Scheduled Completion Date (11) Street Address 203 Bellmont Ave City, State, Zip Code Halledon, NJ 07508 Street Address 201 3360-477 Disposition Date (11) Street Address 203 Bellmont Ave City, State, Zip Code City, State, City Cit	Street Address City (5)		- Was				190 740 440		School (Subchar Other (i. etc.)	(K-12) oter 8	(Other than rate & comm	nercia	bui			nes,
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9/3/2018 9/12/2018 Super, LLC Occupancy Status During Abatement (Check Only One) Facility Closed/Nacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Abatement Performed Outside of Normal Facility Hours		ing Firm									U. 10 (200) (10 (10 (10 (10 (10 (10 (10 (10 (10 (10		-		****	
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Haledon, NJ 07508 Scope of Work (Check All That Apply) \$\gequiv 3 \text{ of or 23 if} \text{ Pomolition} \$\frac{1}{2} Po					mpletion	Date (11)	100			or				CaddoN cadros	and the section of	Principle of the Control of the Cont
Abatement Performed Outside of Normal Facility Hours Other ~ Describe: Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥ 180 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Ves No N/A 411 Bidg. Front end roof Annual Facility For the Procedure Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Annual Facility (13) Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Roof Material Annual (Specify Specify Spe		patement (Che	ck Only Or	ne)	The State of the S		Str	eet Ad	dress		- Automatical Table	- CATHAIN	Without a	etti de tas sade	-051-04	
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A 411 Bldg. Front end roof Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler Hauler ID No. 0034893 Disposal Date TBD Date Abbetment Type Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Name of Registered Landfill G.R.O.W S., Waste Management Disposal Date TBD Date	led No.		X C					×	Mini-Enclos Glovebag P	ure roced	ure				9	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A 411 Bldg. Front end roof Name of Registered Waste Hauler Guper, LLC Signature Name of Registered by Completed by Completed by Completed by Completed by Completed by Completed by Custodial Staff? (12) Yes No N/A Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asterior Cubic Parks Asterior Cubi	Lasation of								ATTENNESS SALVES	ui de giones de con			-	Abate	men	
A11 Bidg. Front end roof X Roof Material 360 SF X Name of Registered Waste Hauler Super, LLC NJDEP Waste Hauler ID No. 0034893 Disposal Date TBD City, State Ialedon, NJ Completed by Completed by City Department Date Date	Asbestos-Containing Mat TO BE ABATE! In Facility	erial (ACM) Q	Use Ma Cust	d Sole intena lodial t (12)	ly by nce/ Staff?	Asbest (i.e.	los Containin thermal syste surfacing,	g Mate ems in: VAT, c	sulation, or		(Specify		Removal	Repair	Encapsulate	Enclosure
Name of Registered Waste Hauler Super, LLC NJDEP Waste Hauler ID No. O034893 Disposal Date TBD City, State Ialedon, NJ Completed by Title Signature Name of Registered Landfill G.R.O.W S., Waste Management City, State Morrisville, PA	411 Bldg. Front er	nd roof	ND	4	S. 11-11-11-11	Roof Ma	aterial	I	-	360 SF	-	,		. EP		
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City, State Caledon, NJ Completed by City, State TBD City, State Morrisville, PA Date	Super, LLC			Н	auler ID	No.	of Waste	76	0.0000000000000000000000000000000000000				age	emer	nt	
Completed by Title Signature Date	City, State Haledon, NJ			1	Part Span Selegar Sp. 7		Disposal Da	ate	City, St	ale	With the state of the state of		wittum			-
I DIZUIZUID	Completed by allor Dominguez		1923	ct Ma	nager		Committee & Secretary and Committee	ure	110111	1			/20	18		





State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

			(1	Pursuant	to NJAC	8:60 an	d 12:120)		1 11	AU	6 2	/ 2	118	Annual Control
Date of Notification (1) 8/20/2018					f Building h Franc		Operator (2	Andrew Constitution		ASBEST	TOS C	CIAC	BO!	0
Agencies Notified	Type Notification			Street A	ddress	TOWNSHIP	******	L		L	ICENS	SING	13.42	Ct
X EPA DEP X DOL	Initial Amended Amendment		oonine is a	City, Sta Frankl	ate, Zip C Iin Lake	ode s, NJ, (07417	eranica can sala con		*		**************************************		Printer and
Ĭ DOH □ DCA	Emergency (i justification) Cancellation	ncluding	1	Name o	f Contact Ginoric				Tel	ephone f	Number			
Name of Facility When	e Abatement is Taking	Place (3)	FACI	LITY INF	ORMAT	Commission of the Commission o	'ype of Facility	(4)			CALL STORY		
	•						-	School (K-	1000					
Street Address								Subchapter Other (i.e.) etc.)	8 (Oth orivate	er than K & comme	-12) rcial bu	ilding:	s, hom	es,
City (5) Union City				TOP EMPEROR HAVE			3	quare Feet ,790 SF	2	f Floors		Bldg.	Age	1000
County (6) Hudson				County (Code (7) USE ONLY	n		Current Use (Pri	or if bei	ng demo	lished)	A A SOCIAL COLOR		
Name of Monitoring Fla CA Environmenta		wner (8))	ASCM	/ No.		Name of Super,	Abatement Cor LLc	ntractor	(9)	PAUDON (D			
Street Address 2200 Paterson Pla	ank Road				AUTONO		Street Ac 203 Be	dress Imont Ave	Total Control				Backs (Unif 44)	, William State (st.)
City, State, Zip Code North Bergen, Nev						Assertative Control		e, Zip Code n, NJ 07508		e di ferio di agraphi di agas Tand	OL AL STEINS ALL JA			
Project Manager for Mo Carmelo Altomont				Telephor 201 86	ne No. 34-6583		Telephor 201 33		-	License 01195				TOTAL CONTRACTOR
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Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph 856-		No. 9800		Licen:).			
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and the second s			22	2459		30			G.R.O.							
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S Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A	DOL							>	<				l Non-	Friabl	e Pro	cedur	9	
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Agencies Notified EPA DOLWD 9400 Mendment # Emergency (including justification) Cancellation Name of Facility Where Abatement is Taking Place (3) Housing Unit 9A Street Address 9 A Lyle Place Edison Housing Authority Street Address 14 Rev. Samuel Carpenter Boulevard City, State, Zip Code Edison, NJ 08820 Name of Contact Mark Webb Telephone Number 908-202-3535 FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors homes, etc.) Square Feet # of Floors Housing Edison Square Feet # of Floors Housing Edison Square Feet # -1500 2 #-30					Cot	inty Code ((1)(STATE USE ONLY)	1226	for if being demol	ished)		
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^{*} Do not use this form for asbestos licensure exempted activities.



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Middlesex					Cour	nty Code (7	')(STATE USE ONLY)	Current Use (Pi	rior if being demo	olished)			
Name of Monitoring Firm	n Hired by Build	ding O	wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9))				-
Environmental Co	nnection, Inc	.					BRISTOL EN	VIRONMENTA	L, INC.				
Street Address							Street Address						
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City, State, Zip Code							City, State, Zip Co						
Trenton, NJ 08608 Project Manager for Mor	itorina Eirm			Tale		NI-	BRISTOL, PA	19007					
Dominick Dercole	mornig Filli			-	ephone 09-392		Telephone No. 215-788-6040		License No. 00509				
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8 /13 /					1 /			VIRONMENTA	L, INC				
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Exterior						Transite			1500 SF				_
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SERVICE TRANSPO	JKT GKUUP	, INC			20990		Disposal Date	MINERVA City State	LANDFILL				_
NEW CASTLE, DE							TBD	City, State WAYNESB	URG, OH				
Completed By (Print or T	ype)	Title Es	timat	or			Signature	1 Dollar	n /m	Date 8 - 0	21-	18	
ISB-41 AN 13 DD 18066		* D	o not	use th	nis form	for asbest	os licensure exemp	ted activities.	7/7/-	2 7 0	-		-

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



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

Date of Notification (1)					ne of Buildin	11111							
8 / 1	1 / 18				dison Ho	A	ye ,	7	201	8			
Agencies Notified Type No	Type Notification				et Address	1							
I and the second					14 Rev. Samuel Carpenter Boulevard			ASSESTOS CONTROLS					
	Amended Amendment #1-8/9/18				State, Zip	<u> </u>	ICE:	SIA)	2	A			
			Edison, NJ 08820										
DCA Emergency (including justification)					Name of Contact Telephone Number								
☐ Cancellation					ark Webb	38		908-202-3535					
								900-202-35.	30		Saute -		
Name of Facility Where Abatemen	is Takir	n Plan	0 (3)	ГА	ACILITY II	NFORMATION	T. (F ::: (
Housing Unit 9A							Type of Facility (4) ☐ School (K-12)						
Street Address							School (K-12) Subchapter 8 (Other than K-12)						
9 A Lyle Place							Other (i.e., pri	private and commercial buildings.					
City (5)					homes,			c.)					
Edison					Square Feet	# of Floors	E	ldg. A	ge				
							+-1500	2		+-30)		
County (6)					inty Code (7	7)(STATE USE ONLY)	Current Use (Prior if being demolished)						
Middlesex							Home						
					SCM No. Name of Abatement Contractor								
Environmental Connection, Inc.						BRISTOL ENVIRONMENTAL, INC.							
Street Address						Street Address							
120 North Warren Street						1123 BEAVER STREET							
City, State, Zip Code						City, State, Zip Code							
Trenton, NJ 08608						BRISTOL, PA 19007							
Project Manager for Monitoring Firm Telepho					ne No. Telephone No.			License No.					
					2-4200	215-788-6040	00509						
Start Date (10) Scheduled Completic					ate (11)	Name of OSHA M	onitor						
8/13/18					18	18 BRISTOL ENVIRONMENTAL, INC							
Occupancy Status During Abatement (Check only one)					Street Address						10000		
 ☑ Facility Closed/Vacated During Entire Period of Abatem ☐ Abatement Performed Outside of Normal Facility Hours 					nt 1123 BEAVER STREET								
Time of Abatement: 8:00AM-4:00PM/PM					AM City, State, Zip Code BRISTOL, PA 19007								
Scope of Work (Check all that apply)	200920 ES							,	-10-2-	-		
□ ≥3 sf or ≥3 if ☒ Renovation ☒ ≥160 sf or ≥260 if ☒ Demolition					E min Enclosere								
					☐ Glovebag Procedure ☑ Non-Exempted (*) and Non-Friable Procedure								
		ls	Loca	tion	I	⊠ Non-Exer	npled () and Non-	Friable Procedur	-	2007	2000		
Location of Normall				lly		Description of			Ab	atem	ent T	уре	
Asbestos-Containing Material (ACM)			d Sol	ely by	Asbes	stos Containing Mat	erial (ACM)	Amount	Re	Repair	En	回	
TO BE ABATED IN Facility Maintenal Custodial S					(i.e.	, thermal systems in	nsulation,	(Specify	Removal	pair	cap	Enclosure	
(13)			(12)			surfacing, VAT, or other miscellaneous)		SF or LF)	a)		Encapsulate	ure	
		Yes	No	N/A			,,,,,				te		
1 st Floor					ACM Lir	noleum		750 SF				П	
st Floor				⊠ ACM FI		portile Only		750 SF					
^{2nd} Floor				\boxtimes	ACM Flo	portile Only		750 SF					
Exterior				\boxtimes	Transite	Siding		1500 SF		П	П	П	
1 (A)				JDEP V	Vaste	Cubic Yards of	Name of Registe	red Landfill				믜	
2					No.	Waste	MINERVA LANDFILL						
City, State						Disposal Date	City, State					-	
NEW CASTLE, DE						TBD WAYNESBURG, OH							
Completed By (Print or Type) Dillan DeCaro Title Estimator						Signature			ρ				
							De Cans/M 8-9-18						
						NUUSIN	M COVA)/	7/	- 1	(()	- 1	

ASB-41 PD 18066

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

					N OF ASBES t to NJAC 8:6			C	K#	: 17	94	E		W	E
Date of Notification (1)					of Building Ow				11	1		545-3		-	
8/22/18				Clare	mont Cons	struction G	Group	Inc							ŧ
Agencies Notified EPA	Type Notification				Address oute 202						Aut	4	7 1	U10	-
DEP X DOL	Amended Amendment				ate, Zip Code lills, NJ 079					A39	5,71	1-1	Lind Lind	:40	
₩ DOH	Emergency justification)	(includin	g		of Contact				Tel	ephone	Nur	her	Sint	-	
DOH DCA	Cancellation									орлоло					
Name of Facility Where	Abatament in Tuli	- DI	(0)	FAC	ILITY INFORI	MATION									
Abandoned Resid	ential House So	ng Place	(3) d for l	Jama			Туре	of Facility	(4)						
Street Address	01111111 1 10030 00	riedale	u 101 L	Jemo				School (K-							
138 Kinderkamacl	k Rd						×	Subchapter Other (i.e. p	orivate 8	er than & comm	K-12 tercia) I buil	dings	, hom	es,
City (5)								etc.) ire Feet	# of	Floors		TE	Bldg.	Age	
Park Ridge							200		2	1 10013			50+	nge	
County (6)			T		Code (7)		Curre	ent Use (Pri	or if bei	ng dem	olish	- 1			
Bergen					USE ONLY) _		Res	sidential H	House			- 8500			
Name of Monitoring Firm	m Hired by Building	Owner (8	1)		VI No.	40		tement Cor							
Street Address				n/a			mony t Addre	Contract	ing Inc	:					
n/a								ss ade Ave							
City, State, Zip Code								ip Code			_				
n/a								NJ 07026							
Project Manager for Mo	nitoring Firm	3000		Telepho	ne No.	7 - 7/2103236	hone N			Licens	se No			-	
n/a Start Date (10)		0 1 1		n/a			460.6			0125	5				
8/31/18		9/25/1		npletion	Date (11)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		HA Monitor	!						
Occupancy Status Durin	ng Abatement (Chec						t Addres	Contracti	ng inc						
	cated During Entire F	Walter a Transportation		nent				ade Ave							
Abatement Perform	ned Outside of Norm Abandoned Schedule	al Facilit	v Hours	5		City, 8	State, Z	ip Code							
		1 for Dame				Gar	field, î	NJ 07026							
Scope of Work (Check A	All That Apply)	25000				907	2009								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		PROGRAM.	Renova Demolit	100000000000000000000000000000000000000			Mir Glo	l Containme ni-Enclosure ovebag Proc n-Exempted	edure					e	
		· Is	Locati	on							1		Abate	men	
Location		4.0	Normal ed Sole	-		Description	n of						Ту	pe	
Asbestos-Containing TO BE AB		Ma	intenar	nce/	Asbastos (Containing I rmal system	Material	(ACM)	700000	nount		71		E	m
In Faci (13)		Cus	todial S (12)	Staff?	s	surfacing, VA	AT, or			or LF)		Removal	Repair	cape	ncto
(10)		Yes	No	N/A	our	ner miscellar	neous)					val	air	Encapsulate	Enclosure
Basement / C	rawispace	103	140	X	P	Pipe Insula	ation		qq) LF	-	_			
Crawlsp		1		x		taminated		is		0 SF	-	٨.			-
1st Floor, back		+		X		9x9 Floor				SF	_	٧.			_
Back Apartme		1		X		Linoleur						Κ			
Name of Registered Was			Ň	JDEP W	aste Ci	ubic Yards	11	Name of F		2 SF		K			
Harmony Contractir			Н	auler ID 33085	No. of	Waste BD		GROW	2000		um				
City, State Garfield, NJ		-				sposal Date		City, State Morrisv		4					
Completed by		Title				Signature	e			1	Date				
E. Cirovic		Secr	etary			E. Coz						2/18	3		



CK# 1795

Date of Notification (1)					Building O					F		6				
8/22/18			0	Clarem	ont Con	struct	ion Gr	oup Ind				$\left(\left[\right] _{n}\right]$	F		W	B
Agencies Notified	Type Notification		St	reet Ad	dress						? ****	*****	4-1		-	1
I EPA	X Initial		1		ite 202		01/20-			Hil						
DEP X DOL	Amended		1		e, Zip Cod							AUG	2	7 2	018	1
X DOL	Amendment		F	ar Hill	s, NJ 07	931									1.40	
DOH DOH	Emergency (i	nciuaing	N	ame of	Contact					Tele	phone N	the second				
DCA	Cancellation										.1881	431			W.	. ii:
				FACIL	ITY INFO	RMATI	ON					-41	11:	4.5		
Name of Facility Where								Type of	Facility (4)							
Abandoned Comm	ercial Building for	or Demo							chool (K-12							
Street Address									ubchapter 8 ther (i.e. pri	(Othe	r than K	-12)	mildi	nas h	omes	
87 Madison St									c.)	vale G	Continue	i Gigi i	1011011	.go, .	.0	"
City (5)		THE RESIDENCE PROPERTY.			The second second second	A LOW OF STREET		Square	Feet	# of	Floors		Blo	g. Ag	е	
Park Ridge		38						9600	SF	1			50)+		
County (6)				ounty C		-		Curren	t Use (Prior	if beir	ng demo	lished)			
Bergen			(8	TATE U	SE ONLY)			Com	mercial B	uildir	ig			911091100	50000152-10-0	
Name of Monitoring Firm	Hired by Bullding (Owner (8)	٦Т	ASCM	No.		Name	of Abate	ment Contr	actor	(9)					
n/a				n/a			Harr	nony C	Contractin	g Inc						
Street Address							Street	Address								
n/a							360	Palisa	de Ave							
City, State, Zip Code							City, S	tate, Zip	Code	0.00						
n/a							Garf	ield, N	J 07026							
Project Manager for Mor	nitoring Firm		T	elephon	e No.		Teleph	one No			License	e No.				
n/a			ì	n/a			9734	460.60	26		0125	5				
Start Date (10)	1	Scheduled (Comp	oletion D)ate (11)		Name	of OSH	A Monitor							
8/31/18		9/25/18					Harr	nony C	Contractin	ig Inc	;	AC YAMIN I KI KI KI				
Occupancy Status Durin	ng Abatement (Chec	k Only One)					Street	Address	3							
Facility Closed/Vac	cated During Entire I	Period of Aba	iteme	ent			360	Palisa	de Ave							
Abatement Perform	ned Outside of Norm	nal Facility Ho	ours				City, S	state, Zip	Code							
X Other – Describe:	Abandoned Schediled	for Demo				-	Gar	field, N	J 07026							
Scope of Work (Check A	All That Apply)															1
≥3 sf or ≥3 lf		☐ Ren	ovati	on					Containme	nt with	Negativ	e Pre	ssur	Э		
≥160 sf or ≥260 if		X Den	nolition	าก			ļu	Glo	-Enclosure rebag Proce	oduro						
10.75 (2.00)							2		-Exempted		d Non-Fi	riable	Proc	edure	3	
		lala	catio										-		ment	
1			mally			ne	scription	of.						Ту	pe	
Locatio Asbestos-Containing		Used S			Asbest			Material	(ACM)	Α	mount				ш	pare.
TO BE AS	BATED	Maint Custod			(i.e. 1			s insula	tion,		Specify		Remova	ಸ್ಥ	Encapsulate	Enclosure
In Fac	5.0(5.0)		12)				icing, VA miscella			51	or LF)		von	Repair	psu	uso
(13)	,					outer.		,					<u>a</u>	-1	ate	6
		Yes	No	N/A												
Roo	of			X		Flash	ning Ma	aterial		6	30 SF		<			
	mana di Santa Banda di Antonio di															
		+	-													
												-	-			
						- · ·			Name of S	3 - t - t	- I how	-den				
Name of Registered Wa	aste Hauler		100000	JDEP Wauler ID		of Wa	Yards aste		Name of F			Idilli				
Harmony Contracti	ng INc		1	33085		TBD			GROW	S La	ndfill					
City, State						Dispo	sal Date	9	City, State							
Garfield, NJ						TBD)		Morrisv	ille, F	PA					
Completed by		Title					Signatu					Date				
E. Cirovic		Secret	ary				E. Co	min	,			8/2	2/1	8		
			-	-	-			-					-			250

IN CONJUNCTION WITH ANNUAL NOTIFICATION CHECK 1721

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

CHECK# 1753

Date of Notification (1) 08/20/2018	PAI	No.		Name of MAPI	of Building LEWOO	Owner/0	Operator _C	r (2)					Photos delatates		
Agencies Notified	Type Notification			Street A				/E	10.5				The same of the sa		
EPA DEP DOL	Initial Amended Amendment			City, Sta MAPI	ate, Zip Co _E SHAI	ode DE NJ	08052			AUG	2 7 20	018	TANK THE PARTY OF		
DOH DCA	Emergency (justification) Cancellation	ncluding		Name o	of Contact				AS	OL	ephone N 6-206-2	umber 2196		20 - 1220 at 1500	
Name of Facility Where	Abatement is Taking	Place (3)		FAC	ILITY INF	ORMAT	ON	Tv	pe of Facility	and the second	ENSING	Mento (1242.55)	4.5.6.		
PARK CROSSING	APARTMENT F	IOMES						Г	School (K-	7007					
Street Address 2 ASHWOOD COU	JRT UNITA							~	Subchapte Other (i.e. etc.)	r 8 (Oth	er than K- & commer	12) cial bui	ldings	, hom	es,
City (5) MAPLE SHADE									uare Feet 00	# o	f Floors		3ldg. / 50+	Age	
County (6) CAMDEN					Code (7) USE ONLY)		Cu R	rrent Use (Pri ESIDENTI	or if bei	ng demoli ARTME	shed) NTS			
Name of Monitoring Firm ACER ASSOC.	Hired by Building C	wner (8)		ASCN	/i No.		Name ASS	of A	batement Co ED ENVIR	ntractor ONM	(9) ENTAL S	SERVI	CES	INC	
Street Address 1012 INDUSTRIAL	DRIVE			•			Street 570		ress EMS RUN						
City, State, Zip Code WEST BERLIN NJ	08091						City, S MUL	State _LIC	, Zip Code CA HILL NJ	08062	2				
Project Manager for Mon MATT DEPALMA	itoring Firm			Telepho 856-8	ne No. 09-1202		Teleph 610-		No. 1-4676		License 01145	No.			
Start Date (10) 08/21/2018		Scheduled 08/22/2	Con 018	pletion	Date (11)		Name EMS		SHA Monitor						
Occupancy Status During	g Abatement (Check	Only One)		***************************************		Street								
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire Peed Outside of Norma	eriod of Ab al Facility I	atem Hours	ent			City, S	tate,	130 NORT						
Scope of Work (Check A	II That Apply)					_	CINI	NAI	MINSON N	J 0807	77				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Santana de la constanta de la	novat moliti						Full Containmondini-Enclosure Glovebag Prod Non-Exempted	e cedure				•	
		is L	ocatio	on					von-Exemple	ı () aiic	I NOII-FIIA	DIE PIO		ement	
Location		No Used	rmall Solei				cription					-	Ty	ре	
Asbestos-Containing TO BE ABA In Facili (13)	ATED	Main Custo	tenan	ice/		thermal surfac		s ins T, or		(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								<u>a</u>		ate	Ге
LIVING R	MOC			X		NF1 FL	OOR	TIL	E	40	00 SF	Х			
LIVING R	MOC			X		NF1	MAST	ΓIC		6	8 SF	X			
Name of Registered Was				JDEP W		Cubic '	Yards		Name of	Registe	red Landfi	11			
ASSURED ENVIRO	NMENTAL SER	VICES		auler ID 034895		of Was					NDFILL				
City, State MULLICA HILL NJ							al Date /2018		City, State WAYNE		RG, OH				
Completed by RON SWANSON		Title GENE	RAL	MANA	AGER	Si	gnature	Ka	xelbu	CU106		ate 08/20/	2018		

State of New Jersey NUTIFICATION OF ASSESTOS ABATEMENT Check#3143 (Pursuant to NJAC 8:80 and 5:15) Date of Notification (1) Name of Building Owner/Operator (2) - 10 DAY 08 La Vern Bohannon Agencies Notified Type Notification Street Address ☐ EPA | Initial M DOLWD Amended City, State, Zip Code X DHSS Amendment # DOA Emergency (including East Orange, NJ 07017 (NJAC 5:23-8) ustification) Name of Contact Cancellation La Vern Bohannon FACILITY INFORMATION Name of Facility Where Abatement is Taking Pl ce (3) Type of Facility (4) Private house School (K-12) Street Address Subchapter 8 (Other than K-1 2) Other (i.e., private and commercial buildings, homes, atc.) Square Feet # of Floors Bldg. Age East Orange, NJ 07017 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior II being demolished) Name of Monitoring Firm Hired by Suilding Cwn ir (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Adcress Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Schecule Completion Date (11) Name of OSHA Monitor 08 / 22 / 18 08 / 23 / 18 Envirovision Consultants, Inc Occupancy Status During Abatement (Chaok on / one) Street Address Executive Closed/Vecated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Far lity Hours - Describe City, State, Zip Code Time of Abatement: ____AM-_ PI-II PM Pair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontemination with negative pressure Full Containment with Negative Pressure >3 sf ar >3 If > 160 at or >260 If - anovation Mini-Enclosure Temolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure le Location Abatement Type Location of Normally Description of Asbestos-Containing Material (ACM) ned Solely by Asbestos Containing Material (ACM) Renwa Repair Encapsulate Amount TO BE ABATED /aintenance/ (i.e., thermal systems insulation, Custodial Staff? (Specify IN Facility surfacing, VAT, or SIF or LF) (12)other miscelleneous) Y No N/A Basement \boxtimes Pipe insulation 90 LF X П Name of Registered Waste Hauler NUCEP Wasta Hauler ID No. | Cubic Yards of Waste Name of Registered Landfill Gr Tech LLC 0033785 TRD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date N.Jevtic Heute Wenad OWEEL 08/21/18 A38-41

* 1)0 191 use this form for ashestox licensure exempted activities.

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Date of Notification (1)				Name	of Buildin	g Owner/	Operator (2) ;;;	TEGI	E	V/		171
08	22 /	18		Iconr	o Mikolo	iomile		And the second	4r			7	
Agencies Notified	Type Notifica	etion		-	a Mikola t Address	JCZUK		100 mm	111			11	1 11
⊠ EPA	✓ Initial			Otroo	. ridaress			the total of the color of the c	[] AUG	2 7 20)18	Appropriate to the second to t	
□ DOLWD	Amended	i		City	State, Zip (Code		1	1	- 14 G L-2+ S / S /		200	المقيادة
□ DHSS	Amendme	ent #					2	-	L		to to a secondary		
☐ DCA	☐ Emergen		ng		City, NJ				ASBESTO			Ĝ.	
(NJAC 5:23-8)	justification				of Contac	50		L	Telephone N	mber	Barren Laboratoria	sio-energia	أحصيت
	Cancellat	ion		Joann	a Mikolaj	jczuk			11				
				FA	CILITY IN	NFORMA	TION						
Name of Facility Where A	Abatement is T	aking Plac	ce (3)					Type of Facility	(4)			-	
Private house							1	School (K-1		J0000			
Street Address									8 (Other than K- private and comr		ildina	c	
								homes, etc.		nercial be	marrig	э,	
City (5)								Square Feet	# of Floors	BI	dg. Ag	ge	
Jersey City, NJ 07304								報					
County (6)				Cour	nty Code (7)	(STATE U	SE ONLY)	Current Use (P	rior if being dem	olished)			
Hudson							1		(5)	2 2 - 1			
Name of Monitoring Firm	Hired by Build	ding Owne	r (8)	ASCM	No.	Name o	of Abateme	nt Contractor (9))				
						Gr Tec		,	*				
Street Address							Address						_
							lley Rd #2	782					
City, State, Zip Code							ate, Zip Co						
- 17 54.7 6 .3 16.33 (1984) 16.54 (1784) 3 .63 (1984) 5 .65 (1784)						1	90 19						
Project Manager for Moni	itorina Firm		Te	ephone	No	Telepho	, NJ 0747	0	License No.				
			10	орионо	110.								
Start Date (10)	T	Scheduled	Compl	etion Da	ate (11)	973-63	of OSHA M	onitor	01127				-
08 / 31 /		09											
								isultants,Inc					
Occupancy Status During							Address						
					ecribe	20-21 V	Wagaraw 1	Road, Bldg .#	35E				
Time of Abatement:	AM-	PM/	PN	113 - De. _	AM	7500	ate, Zip Co						
350						Fair La	wn, NJ 07						
Scope of Work (Check all	that apply)					M	Clean up	and decontami	nation with nega gative Pressure	tive press	sure		
		M	Renova	tion		A	Mini Engl	ocure					
$\boxtimes \ge 160 \text{ sf or } \ge 260 \text{ lf}$			Demolit	ion		日	Glovebag	Procedure [Tent with Negat	tive Press	sure		
							Non-Exer	npted (*) and N	on-Friable Proce	dure	f		
Location	of		Is Loc				DIOLEKE MOTOVOVI	•		Ab	ateme	ent Ty	ype
Asbestos-Containing			sed So	lely by	Ashe		scription of	r erial (ACM)	Amount	Re	Re	E	四
TO BE ABA		34	Mainter	ance/ I Staff?		e., therma	l systems in	nsulation,	(Specify	Remova	Repair	сар	Enclosure
IN Facili (13)	ty		151001a (12				cing, VAT, miscellaneo		SIF or LF)	<u>\Sigma</u>	-	Encapsulate	ure
(10)		Va	Ne	NIA	1	Other i	HISCEHARIEC	105)				te	
ъ .		Ye	s No							Read		_	
Basement			ᆜᆜ	X	Pipe ins	ulation			75 LF	\boxtimes	Ш	Ш	Ш
Basement				\boxtimes	Ceiling	sheetroc	k		880 SF				
		П		П					1	П	П	П	П
			15	1			-			l			
Name of Dealer 1997	t- 11- 1		ᆜᆜ	IDEA::	1	1.						Ш	Ш
Name of Registered Was	te Hauler		1	JUEP Was	te Hauler ID No.	Cubic Ya	ards of Waste	Name of Regi	stered Landfill				
Gr Tech LLC				00337	85	TBI	D	T.R.R.F. Inc					
City, State						Disposa	al Date	City, State					
Wayne, NJ 07470						ТВ	D	Tullytown, F	A				
Completed By (Print or T	ype)	Title					gnature /	1		Date			
N.Jevtic		Owner					/	which were		08/22/18	2		
ASB-41		Owner					//e	went	201	00/22/10	,		

MO#25131056951

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WO -				N OF ASB	ESTOS	ABATEMEN	NT TI	E (BEI		E		7
Date of Notification (1)	8		Name PSE8		Owner/C	perator (2)					- 26 cm	The Contract of the Contract o	Total Control
Agencies Notified Type N	otification tial		4000	Address HADLEY)		<u> </u>	IG 2.7	2018			1
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Name of Monitoring Firm Hired by ENVIRONMENTAL TACTI	Building Owner (8 CS	3)	004	M No.* 5			batement Co SYSTEN		(9)				
Street Address 64 BROAD STREET		61				Street Add	ress ITEHEAD	AVE.					
City, State, Zip Code MATAWAN, NJ 07747						City, State SOUTH	, Zip Code RIVER, N	J 0888	2			20.000	
Project Manager for Monitoring Fit TOM GEIGER	m		Telepho 732-2	one No. 90-2217		Telephone 732-432	No.		License N 01111	0.			
Start Date (10) 8/25-//	Schedu			Date (11)		Name of O	SHA Monitor			1010			
Occupancy Status During Abatem	ent (Check Only O	ne)	/	70		Street Add	ress		NILI (IC)	N IIVO	•		
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Emergency (i justification) DCA Emergency (i justification) Cancellation			Name of RA	Contact VMOND	D'A	ANJOU		ephone Num 19-929		13	6	
Name of Facility Where Abatement is Taking	Place (3)		FACIL	ITY INFORMATI	ON	Type of Facility	(4)					
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City (5) LAWRENCEVILL		1	<u> </u>			Square Feet	# 01	f Floors	Blo	dg. Ag	ge V R	2.5
County (6) MERCER.			County C	ode (7) SE ONLY)		Current Use (P	rior if bei	ing demolished			7	
Name of Monitoring Firm Hired by Building (ENVIRONMENTAL TACTICS	Owner (8)		ASCM 0045	No.		of Abatement Co	ontractor	(9)				
Street Address 64 BROAD STREET					Stree	t Address WHITEHEAD						
City, State, Zip Code MATAWAN, NJ 07747						State, Zip Code JTH RIVER, N	IJ 0888	32				
Project Manager for Monitoring Firm TOM GEIGER		10 (3	Telephor	ne No. 0-2217	Telep	hone No. -432-8350		License No).			
Start Date (10) 8/25/18	Schedule	d Com	npletion [Date (11)	Name	of OSHA Monito		AMERICA	INC	·····		
Occupancy Status During Abatement (Chec	k Only On		27/	-8-	Stree	t Address		7 (11)	.,			
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of A nal Facility	batem Hours	nent		City,	WHITEHEAD State, Zip Code UTH RIVER, N		82	-			
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Name of Registered Waste Hauler VEOLIA		H	NJDEP W Hauler ID 80631	No. of W	: 5	- s	F	A;RL		55		
City, State FLANDERS, NJ				TB		MOR		LE, PA				
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Date of Notification (1)				wner/Operator (2	CEDON	OND) E C	E	N N	// Fr	= F
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Name of Facility Where Abatement is Taking	Place (3)	FÁC	ILITY INFO	ORMATION	Type of Facility (4)	and the state of t	The state of the s		
US. FRANCIS CE					School (K-1					
Street Address					☐ Subchapter	8 (Other than K-12)				
					Other (i.e. p	rivate & commercia	l buildin	gs, ho	mes, et	tc.)
City (5)		7.9			Square Feet	# of Floors	В	ldg. A		
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Project Manager for Monitoring Firm		Telepho	one No.		ione No.	License N	lo.			
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Start Date (10)	Scheduled C		Date (11)		of OSHA Monitor					
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□ ≥3 sf or ≥3 lf	Ren	ovation		1		ent with Negative Pr	essure			
-2 ≥160 sf or ≥260 lf	☐ Den	nolition		7	 Mini-Enclosure Glovebag Proc 					
<u> </u>					Non-Exempted	(*) and Non-Friable	e Proced	lure		
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Location of		mally Solely by		Description				T ,		
Asbestos-Containing Material (ACM) TO BE ABATED	Maint	tenance/		tos Containing M mal systems insu	faterial (ACM) lation, surfacing,	Amount (Specify	R		Enc	En
In Facility		lial Staff? 12)	(VAT, or other miscella		SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	-		-	other miscella	neous)		al.	-	late	не
	Yes 1	No N/A					-	-		
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Name of Registered Waste Hauler		NJDEP V	Control of the Contro	Cubic Yards	Name of	Registered Landfill		-		
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Best Removal Inc City, State		1.71	09	Disposal Date	/ Mine City, Stat	rva Enter	pri	ses	٠, ١	ثابابا
Hackensack, NJ 07601						Maria E)H_4	468	8	
Completed by	Title			Signature	·/		Date	1	• •	
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Name of Facility Manager	A1		7	FAC	CILITY INF	ORMA	TION									
Name of Facility Where	Abatement is Takir	ng Place	(3)					Тур	e of Facility	(4)	10000					
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Name of Monitoring Firm	n Hired by Building	Owner (8	3)		M No.	<u> </u>	Name	hor of Ab	atement Co	ontractor	(9)					
Street Address							AAA		D PROF	ESSIO	NALS	3				
City, State, Zip Code		(K)					6 WH	HITE	DOVE C	OURT						
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Project Manager for Mor	nitoring Firm	277		Telepho	one No.		Teleph 732-6				Licen 1200).		727	
Start Date (10) 9/3/18		Schedu 9/12/1		mpletion	Date (11)		Name	of OS	HA Monitor				272-1		-	
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X Other – Describe:				9					ip Code OD, NJ (8701						
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IEWARK, NJ						9/12/	sal Date 18		City, State BETHLI		PA					
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Name of Registered Waste Haul	er	Н	JDEP W auler ID \$509		Cubic Y of Wast			Name of	Regis	tered Lan	ndfill	- 1			
City, State NEWARK, NJ					Disposa 9/12/18			City, Sta		M PA					
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Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	none				Licen 1200					
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Project Manager for Monito	ring Firm			Telepho	ne No.		Teleph 732-6		No. -9078		Licen 1200	se No.				
Start Date (10) 8/30/18		Schedule 9/12/18		npletion	Date (11)				SHA Monitor AD PROFE		NALS	;				20/1-00
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Abatement Performed Other – Describe:	Outside of Norn	nal Facility	Hours	S		_			Zip Code OOD, NJ 0	8701						
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City, State NEWARK, NJ						970	osal Date /18		City, State		I PA					
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JOSEPH PERLSTEIN		OWN	ER				3					Date				

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Date of Notification (1) 8/20/18		Name of Building Owner/Operator (2) Middlesex Properties LLC								1	W I				
Agencies Notified Type Notification	n			Address					A 1 1	G 2	7 9	N1Q	and the second		
EPA DEP Amended Amendme	nt # y (including	_	City, St	tate, Zip Co	ode			Water All Street				mil same rest e	C - C		
DOH justification Cancellation	1)		Name of Aaron	of Contact					ephone 1 2-597-	Numbe	ISIN(in(J)	CZ.		
Name of Facility Where Abatement is Tak	ing Place (2)	\	FAC	ILITY INFO	ORMAT	ION									
Street Address City (5)		,					Type of Facility School (K- Subchapte Other (i.e. etc.)	12) r 8 (Othe private 8	comme	(-12) ercial bu			nes,		
Highland Park							Square Feet	# of	Floors		Bldg.	Age			
County (6) Middlesex			County (STATE	Code (7) USE ONLY	·		Current Use (Pri	ior if beir	ng demo	lished)					
Name of Monitoring Firm Hired by Building	Owner (8)		ASC	M No.		Name AAA	of Abatement Co LEAD PROFE	ntractor ESSIOI	(9) NALS						
Street Address							Address HITE DOVE C	OURT							
City, State, Zip Code							tate, Zip Code EWOOD, NJ 0	8701							
Project Manager for Monitoring Firm		Telepho	one No.			one No. 668-9078		License 1200	No.						
Start Date (10) 8/30/18	Scheduled 9/12/18		npletion	Date (11)			of OSHA Monitor LEAD PROFE	SSION	NALS						
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire	35	3	2001				Address	OURT							
Abatement Performed Outside of Non Other – Describe:	mal Facility I	Hours	S		_	City, Si	State, Zip Code KEWOOD, NJ 08701								
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova				×	Mini-Enclosure Glovebag Prod	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
Location of	No	ocati rma!	ly		Des	scription					Abat	ement ype	t		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Asbestos-Containing Material (ACM) TO BE ABATED In Facility Used S Mainte Custodi					aining M	aterial (ACM) insulation,	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure		
INTERIOR	No	N/A		Pipe	insulat	ion	300	OLF	x	-	Ф				
Name of Registered Waste Hauler		NJDEP Waste Cubic Yards				Varde	Name of F	Dogists	٥٤ ــ ء اله						
NEWARK CARTING		Ha	Hauler ID No. of Waste 10 IESI					of Registered Landfill							
City, State NEWARK, NJ							City, State BETHLE	ate LEHEM PA							
Completed by JOSEPH PERLSTEIN	Signatur R								ate						

STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7

9318575

Date of Notification (1)	· ····································	()	Name of Building Owner / Operator (2)								
06_ /29_ /18			BRISTOL MYERS SQUIBB, INC.								
/ / /			Street Ad	dress		EI	W/ 15	1			
	otification		_	JIBB DRIVE	11 5		V L	-11			
□ EPA □ □ DEP □	Initial Amended			e, Zip Code				1			
☑ DOH	Amendment #	¥ 1	Name of	JNSWICK, NJ 08903	11 11	Telepho	oo Minah				
☑ DOL □		/' // justification	PHIL DES	2000 (CONTROL 1990)	LI H. AU	732-227-		er - J			
	Cancellation										
		I	FACILITY II	NFORMATION	175	TULTO	VTAOL &				
Name of Facility Where Abatem	ant in Taking	Diago (2)	-	TE			IG.	1			
BRISTOL MYERS SQUIBB	lent is raking	Place (3)		Type of Facility (4)	40.00		The William St.	***************************************			
				☐ School	(K-12)						
Street Address					pter 8 (Other t						
ONE SQUIBB DRIVE					.e., private & c	mmercial					
City (5) County (6)		County Code	(7)	Square Feet	# Of Floors		Duildin	- A			
NEW BRUNSWICK MIDDLESE		County Code	(1)	25,000	# 01 F10015		Building	g Age			
	S 265 (U.S.)			Current Use (Prior	if being demo	olished)	t	40			
				LABORATORY/RES	SEARCH						
Name of Monitoring Firm Hired	by Bldg. Own	er (8)	ASCM NO	\							
ENVIRONMENTAL HEALTH INVEST	IGATIONS INC		0104	NORTHSTAR CON	TDACTING CE	OUD INC					
Street Address	.orthono, INC.		10104	Street Address	TIVACTING GF	NOUP, INC					
655 WEST SHORE TRAIL				Oli cel Address							
City, State, Zip Code				32 Williams Parkwa	у						
SPARTA, NJ 07871				City, State, Zip Coo	de						
Project Mngr. For Monitoring Fi WILLIAM KERBEL	irm	Telephone Nu 973-729-5649	mber	Fact Harana NI 6	7000						
Manager and the second	Sched Comp	letetion Date (1	14)	East Hanover, NJ 01 Telephone Number	Liconos	se Number					
07/_16/18	09	30	18	relephone Number	Ia	License	vuiliber				
	/	/		973-884-8682	0	0860					
Occupancy Status During Abate	ement (Check	Only 1)		Name of OSHA Monitor							
Facility Closed/Vacat	ed During Ent	ire Period of		NORTHSTAR CONTRACTING GROUP, INC.							
Abatement Performe	d Outside of N	ormal Facility		Street Address							
Hours - Describe:				32 Williams Parkwa	у						
☑ Other - Describe:	7:00 AM-3:30 I	PM		City, State, Zip Coo							
Coope of Mark (Charle All That	A ()			East Hanover, NJ 07	7936			Service Co.			
Scope of Work (Check All That	Apply)										
☐ Demolition	\checkmark	Renovation		Full Containment v	vith Negative I	Pressure					
≥3sf or≥3lf				Mini - Enclosure	•						
≥160 sf or ≥260 lf				Glovebag Procedu							
			~	Non-Exempted (*) a	and Non-Friab	le Proced	ure				
Location of	Is	T	Descript	ion of	T	Abateme	nt Type				
Asbestos Containing	Location	As	bestos - C			R		E	ĮΕ		
TO DE ADATED	Normally		Material		Amount	E	R	N	N		
TO BE ABATED in Facility	Used Solely		e., thermal	systems facing, VAT,	(Specify	M	E P	C	C		
(13)	by Main-			ellaneous)	SF or LF)	V	A	A P	L		
	tenance/					A	î	S	S		
	Custodial					L	R	U	U		
	Staff (12)							L	R		
B 97, EXTERIOR FAÇADE	YES NO N/A	VAPOR BARR	IFR/MASTI	C	1,000 SF	7		-			
B 97 EXTERIOR		CT BANK		300 LF	7	H		+ +			
			2, 3111		1		H	1 7	1 -		
Name of Registered Waste Haul		NJDEP Waste		Name of Registered		00					
NORTHSTAR CONTRACTING G	ROUP INC	Hauler ID No. 30534	o. Yards WASTE MANAGEMENT - FAIRLESS HILL LANDFILL 34 of Waste								
City, State		30034	Disposal								
EAST HANOVER, NJ	Date										
				Į.							
Completed by (Print or Type)		Title		Signatur	e 1	and the same of th		Date			
Steve Stiles		Project Manage	er	1	1			00	/24/18		
ASB-41								0	127/10		



Data of Notice Head	L BLA.									112					11 31			
Date of Notification (1) 8/24/18				Name of	of Building ele Weis	Owner/ berg	Operato	r (2)			AUG	2.7	2018		113			
Agencies Notified	Type Notification			Street	Address					-								
IX EPA	☐ Initial									1.1	aLJTJ.							
DEP	Amended		ŀ	City, St	ate, Zip C	ode				2 15,2		NA SIL		/1.53	-			
× DOL	Amendment				Rock, N		52					17114						
□ рон	Emergency justification)	(including			of Contact	201				Tol	onhono N	le comb a c						
DCA	Cancellation	1			ele Weis													
					ILITY INF	_	ION			1.			-					
Name of Facility Where	Abatement is Takir	g Place (3	3)	.,,,	ici i iidi	ORMAI	ION	Type of	Facility (4	4)		-						
Residential Home								_		-50								
Street Address									ool (K-1.		er than K	-12)						
								× Oth	er (i.e. p	rivate 8	& comme	rcial bu	ilding	s, hon	nes,			
City (5)								Square f		1 # 01	Floors		Dist					
Glen Rock								2250	eet	2	Floors		Bldg. 65 +					
County (6)			T	County	Code (7)	-3		Current	Ioo (Drie	7770		- 1	05 1	/-				
Bergen					USE ONLY)		Day Ca	are Co	otor	ng aemoi	isnea)						
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	A No.		Nome	100		Contractor (9)								
Project Manager	· · · · · · · · · · · · · · · · · · ·	O (1)		7301	VI INO.			or Abaten Stages A										
Street Address			3000	1			-	- 5.	Daterne	#IIL								
								Address	nd Λ.,	40								
City, State, Zip Code						-		N. Midla										
any court, zip oode								State, Zip C		7000								
Project Manager for Mon	itorina Firm		-	Talaaba	N-			dle Broo	K, NJ U	7663			- 422		reno en reco			
- ojest manager for mort	itomig i iim			Telepho	ne No.		6.0000000000000000000000000000000000000	none No.			License							
Start Date (10)		Cohodula	-d Car		D-1- (11)			600-318	13		01305							
8/28/18		8/31/18	ea Cor R	ripietion	Date (11)		Name	of OSHA	Monitor									
Occupancy Status During	Ahatement (Chec						01 1											
Degree of the control		AND CONTRACT OF COMMENTS OF CO					Street	Address										
× Facility Closed/Vaca Abatement Performe	ited During Entire F	Period of A	baten	nent														
Other - Describe:	sa catolac of 140fff	iai i aciiity	Hours	rs City, State, Zip Co														
Scope of Work (Check Al	I That Apply)																	
	тпас друу)						-	,										
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	enova emolit				Full Containment with Negative Pressure											
			emon	1011					nclosure ag Proce	adura								
								Non-Ex	cempted	(*) and	Non-Fria	able Pr	ocedu	re				
		Is	Locati	on									0.000	temen	nt			
Location	of		lormal				scription	ល					T	ype				
Asbestos-Containing TO BE ABA	Material (ACM)		d Sole		Asbest	tos Cont	aining M	laterial (AC	CM)	Ar	nount			m				
In Facilit			odial S		(i.e.		systems cing, VA	insulation	,		pecify	Re	Z	nca	Enc			
(13)	·		(12)				niscellan			SF	or LF)	Removal	Repair	Encapsulate	Enclosure			
		Yes	No	N/A				20	1			<u>a</u>	=	late	ıre			
Kitaha	2			1														
	Kitchen						VAT			29	7 SF	×						
Den	X				VAT			15	6 SF	×								
Laundry R	Laundry Room x						VAT			59	SF	×						
							-								\Box			
Name of Registered Wast			0.5	JDEP W	100723000	Cubic		Na	me of R	egister	ed Landf	ill	-		-			
All Stages Abatemen	t		1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	auler ID 036592	0 10 10					andfill								
City, State						Dispos	al Date	Ci	y, State									
Saddle Brook, NJ						TBD												
Completed by		Title							//	A		ate			-			
Richard Cristofol		Presid	dent		Signature					/_		3/24/1	8					
				all I		2	1/ 1	-										

0K9165

B & G proj. #:

2018-169

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

D & G ploj. #.				ζ.				1111	EC	Check	9165	Parket of Marie Street, and			
Date of Notification	1 (1)	11	Name o	f Ruildi	na Owr	ner/Operator (2	1	11:31	3 (0)	<u> </u>	VE	In			
10 8 / 2 3					cman	13.	,		Allo	2 7 n	220				
Agencies Notified EPA DEP	Type Notifica Initial	tion	Street A	ddress					Cist on	+ 1000000	710	L.d.		41	
₩ DOL	Amend	ment	City, Sta Upp	377		River, NJ 074	458	71 1000	LIC	S LONT NSING	ROLA"				
 ■ DOH		1.1	Name of	Conta	ct					Telephone	e Number	-			
☐ DCA	☐ Cancell	lation	Ada	m Gli	ncmai	1				_					
10.0 (10.000)					FAC	ILITY INFORM	ATION								
Name of facility wi	nere abatement	is taking p	place (3)						Туре	of Facility (4					
Adam Glincm	an									=	(K - 12) apter 8 (O	her ti	nan K	-12\	
Street Address										Other (I	Private/Co Homes, et	mme	rcial		
City (5)		I Co	unty (6)					at. Cada (7)	Squa	re Feet	# of Floor	3	Ble	dg. A	ige
	-						1	nty Code (7) te use only)	Curre	ent Use (Pr	ior if being	dem	olish	ed)	
Upper Saddle			ergen						Res	dential		#100050 Marc	AUGUSTINA	1000	
Name of Monitorin	ig Firm Hired by	Bldg. Ow	ner (8)			ASCM No. n/a		Name of Abatement (
Street Address						11/a	_	B & G Restorati	on, Inc). 					
Ou out / (du/oss								105 Ryerson R	oad						
City, State, Zip Cod	е							City, State, Zip Code		0.5	all the property assessment				
Project Manager for	r Monitorina Eirn	n		I Bhon	e Numb	205		Lincoln Park, I	NJ 070	35	License	Muranh			
r roject wanager ro	i Montoring i in			FIIOII	e Mulli	Dei .		(973)696-6869	3-6869 00378						
Scheduled Start Da	te (10)	Sche	ed. Comp	letion	Date (1	1)	-	Name of OSHA Monit B & G Restorati							
09/04/2018		09	/06/201	18				Street Address	1011, 1110	<i>.</i> .					
Occupancy Status I	MANONAL MARKET PROPERTY OF							105 Ryerson Ro	oad						
Facility closed Abatement per Describe:	d/vacated during erformed outside				ent.			City, State, Zip Code		_					
Other-Descri							-	LincolnPark, N.	0703)					
Scope of Work (ch	eck all that appi	y) Renovat	ion				X F	ull Containment w/neg	ative no	assura F	Gloveb	20.00	ocadı	ıra	
3 sf or >3 lf		>160 sf o						lini-enclosure	jative pr		Non-fri				
Location of		Is locati	on norma	ally use		yĺ						R	R	E	1-
asbestos-con material to be	•	by main staff(12	tenance/	custod	ial			sbestos-containing	- 1	Amount		e m	e p	n c	n E
abated in fac		Yes	No		N/A	material	(ACM)			(Specify SI LF)	- 01	0 V	a	a	C
basement			1-	-	X	VAT (no n	nastic)	1	90 sf		e	r	\Box	1
										00 01				一	一
															10
Registered Waste F	lauler	L	DEP Hau	ler ID#	10	Subic Yards of V	Naste	Name of Registered	l andfill			Ш	Ш	Ц,	<u>Ш</u>
B & G Restorat			19563	101 10#		6		Grand Cer		ndfill					
City, State Lincoln Park, N	NJ			Dis	posal [09/(Date 07/2018		City, State Pen Argyle	, PA						
Completed by (Print Gordana Luna		Title Secret	ary/Tre	asure	r	Signature	Gordana Luna Date 08/23/2018								

	State of NJ
	Notification of Asbestos Abatement
D&S Proj. #: 18-172	(Pursuant to NJAC 8:60 and 12:120)

D&S Proj. #: 18-172	PAID	(Purs	uant to NJA0	C 8:60 and 12:120)	II) E C) E 1	M	E		A Comment of the Comm
Date of Notification (1)	Name of	Building Ow	ner/Operator (2)						1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
10 8 /12 11 /11 7	cathy	natanle				i Al	16 27	201	8	11	
Agencies Notified Type Notifica	tion Street Ad					1 3 11				1	-
EPA Initial Amended		\$0.00000000000000000000000000000000000								1	1
DEP Amended Amendment #	City Stat	e, Zip Code				Nobte	HOS CO	WIN	UL:	1	
IXI DOI I—											
☐ Emergency (including		ock, nj 074	52								
justification)	Name of 0	Contact				Telephor	ne Numbe	٢			
DCA Cancellation	n cathy	matanle				•			2000		
		FAC	CILITY INFORM	ATION							
Name of facility where abatement	is taking place (3)					Type of Facility	(4) ol (K - 12)	20			
cathy matanle						=	apter 8 (C		than	K-12)	
Street Address							(Private/C				
						Bldgs.	Homes, e	tc.			70
City (5)	County (6)			County Code (7)	-	Square Feet	# 01 F1001	S	,	Bldg. A	ige
glen rock	BERGEN			(State use only)		Current Use (P	rior if bein	g der	nolisi	ned)	
Name of Monitoring Firm Hired by			ASCM No.	Name of Abate	ment Co	ontractor (9)			-		
				D & S REST	ΓORΑΊ	TION, INC.					
Street Address				Street Address		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
				20 Californ	ia A ve						
City, State, Zip Code	72.00			City, State, Zip 0	-	SHOWS AND ADDRESS OF		-		NAME OF TAXABLE PARTY.	10000
				Paterson, N		12					
Project Manager for Monitoring Firm	T	Phone Numb	oer	Telephone Num		13	License	Numl	ner		
				973-345-8				1169			
Start Date (10)	Sched. Comple	tion Data (1)	1)	Name of OSHA							
Start Date (10)	Scried. Comple	ation Date (1	1)	D & S Rest							
09/05/18	09/28/18			Street Address		,					
Occupancy Status During Abatemen				20 Californi	a Aven	ue					
Facility closed/vacated during				City, State, Zip C							
Abatement performed outside Describe:	of normal facility ho	ours-		11.37.							
Other-Describe: NORMAL H	OURS			Paterson, N	J 0750	3					
Scope of Work (check all that apply)				□ Eul	I Containment w	Inogotivo	proce	uro		
N >2 of on > 2 16	Renovation				=	ni-enclosure	megative	piess	uie		
	Demolition					vebag procedur	e				
	27-38A(2M8/2A6				☐ No	n-Exempted (*)	and Non-f		proc	edure	
Location of asbestos-containing	Is location normall by maintenance/cu	y used solely ustodial	1			(2000)		R	R	E	E
material (acm) to be	staff(12)		Descriptio material (A	n of asbestos-containin	ng	Amount (Specify S	For	m	р	n	n
abated in facility (13)	Yes No	N/A	material (A	ACIVI)		LF)	r 0i	0	а	а	C
	145							v e	r	p	-
BASEMENT			PIPE INSUI	LATION		180 l ft		X			
								$\overline{\Box}$	П		
								Ħ	H	Ħ	
Registered Waste Hauler	NJDEP Haule	r ID# C	ubic Yards of W	aste Name of Regist	ered La	ndfill					
D & S RESTORATION, INC.	13506	1	0 YDS			SOURCE RE	COVER	Y			
City, State		Disposal D		City, State		THE STATE OF THE S					_
PATERSON, NJ 07503		09/06/18	8	TULLYTO	WN, PA	Ą					
* (P)	Title		Signature		Water Line		Date				_
BOGDAN JOLDZIC	PRESIDENT						08/21/2	8102			

OK 1344

D&S Proj. #: 18-171

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

D&S Proj. #: 18-171	N.A.A.J		(Pursi	ant to NJA	2 8:6	60 and 12:120)		IE	原图	7 0/	7 17	giorne .	and the				
						55		1		- W	<u>_</u>	11					
Date of Notification (1)		Name of Bu	ilding Owr	er/Operator (2)			l All	C								
0 8 / 2 1 / 1 8		WEST E	SSEX BU	JILDING SU	PPL	Y		¦ AU	G 27	2018							
Agencies Notified Type Notifica	ition S	Street Addre	ess				3	1000			i.		1				
□ DEP □ Amended			OT STRE	ET			1	ASBEST LI	OS CON CENTRINI	ITRO	La						
DOL Amendment #		City, State,	Zip Code					1	The second second second	and the state of t	TETRICAN COME.		1				
Emergency	11		nj 07044	l													
DOH (including justification) N	ame of Co	ntact					Telephon	e Numbe	r							
DCA Cancellation	n	ROBER	T SCHN	IEDER				973-23	9-1500								
			FAC	ILITY INFORM	ATIO	N											
Name of facility where abatement	is taking pla	ace (3)					Туре	of Facility (4) (K - 12)								
ROBERT SCHNIEDER							1 7		apter 8 (C		han k	12\					
Street Address									Private/C			-12)					
						1	Court	Bldgs./	Homes, e	tc.		d= /	N ===				
City (5)	Cour	nty (6)			Co	unty Code (7)	Squai	re Feet	# of Floo	rs	8	dg. A	\ge				
					(St	ate use only)	Curre	ent Use (P	rior if bein	being demolished)							
Name of Monitoring Firm Hired by	Bldg. Owne			ASCM No.	-	Name of Abatement	Contract	or (Q)									
	3	(-)		ACOM NO.		D & S RESTOR											
Street Address					-	Street Address	1111011	, IIIC.									
						20 California A	ve.										
City, State, Zip Code						City, State, Zip Code											
						Paterson, NJ 07	7503										
Project Manager for Monitoring Firm	1	Ph	one Numb	er		Telephone Number	v		License								
						973-345-8020			0	1169							
Start Date (10)	Sched	. Completic	n Date (11)		Name of OSHA Mon D & S Restorati											
09/07/18	09/28	/18				Street Address	ion, mc.					_					
Occupancy Status During Abateme	nt (Check o	nly one)			CHICAGO.	20 California Av	/enue										
Facility closed/vacated during Abatement performed outside						City, State, Zip Code											
Describe: NORMAL I					-	Determen NI 07	1502										
Scope of Work (check all that appl					-	Paterson, NJ 07					_						
>3 sf or >3 lf	Renovation						Full Conta Mini-encl	ainment w	/negative	press	ure						
								procedur	е								
	Demolition						Non-Exe	mpted (*)	and Non-f		_	edure	Э				
Location of asbestos-containing	by mainte	normally unance/cust						Amount		R e	R	E n	E				
material (acm) to be	staff(12)			material (A		sbestos-containing	100	Specify S	F or	m o	р	С	n				
abated in facility (13)	Yes	No	N/A	1			1	_F)		v	i	a p	L				
BASEMENT		X		PIPE INSUI	LAT	ION	90 1	ft		e			10				
BATHROOM		X		vat			15.5	SQ FT		X							
Pogletored Wests Havilan																	
Registered Waste Hauler D & S RESTORATION, INC.	NJDE 1350	P Hauler II 06		ibic Yards of W yds.	/aste	Name of Registered TULLYTOWN,		RCEDE	COVED	v							
City, State			Disposal Da			City, State	RESUU	KCE KE	COVER	1							
PATERSON, NJ 07503			09/08/18			TULLYTOWN,	PA										
Completed by (Print or Type)		Signature		1			Date			_							
BOGDAN JOLDZIC	PRESIDE	ENT							08/21/	18							

CK7344

D&S Proj. #: 18-171

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

D&S Proj. #: 18-171						30 and 12:120)		EG	EI	V/ [1/20						
											3//	Market Street						
Date of Notification (1)				ner/Operator (2				AUG	2 7 20	18	The second second	\mathcal{H}						
Agencies Notified Type Notifica	tion			JILDING SU	PPL	Y					Lorenz	1						
☐ EPA ☐ Initial		Street Addre	ess				AS	BESTO	0.00		No. of London	1						
DEP Amended	- 11		OT STRE	ET			-	LICE	S CONTR	OLa								
DOL Amendment #		City, State,	Zip Code					-	A part of the last	Contract Annual of	No. of Section 1911	_						
Emergency	1.1		nj 0704	4														
DOH (including justification)	Name of Co	ntact		100		Te	elephone	Number									
DCA Cancellatio	n	ROBER	T SCHN	IEDER			9	73-239-	1500									
			FAC	ILITY INFORM	IATIO	N												
Name of facility where abatement	is taking p	lace (3)					Type of F	acility (4) School (
ROBERT SCHNIEDER								75	ter 8 (Othe	r than	V 12	١						
Street Address							4 1	0.5	ivate/Com		100	,						
								Bldgs./Ho	omes, etc.			A						
City (5)	Cou	ınty (6)			Co	unty Code (7)	Square F	eet #	of Floors		Bldg.	Age						
		and the same			1000	ate use only)	Current	Use (Prior	r if being d	peing demolished)								
verona Name of Monitoring Firm Hired by		sex ner (8)		ASCM No.	Ц,	Name of Abatemer	at Contractor (0)										
Contraction of the Contraction o	J	· · · · · ·		ACOM NO.				out.										
Street Address					-	D & S RESTO	KATION, IN	VC.			_							
		r				20 California	A vo											
City, State, Zip Code					-	City, State, Zip Cod												
						Paterson, NJ (
Project Manager for Monitoring Firm	1	Ph	one Numb	oer		Telephone Number		TL	icense Nu	nber								
						973-345-802			0116									
Start Date (10)	Sche	d. Completio	on Date (1	1)	-	Name of OSHA Mo	nitor											
09/07/18				50 5		D & S Restora	tion, Inc.											
Occupancy Status During Abateme	09/2					Street Address												
Facility closed/vacated during			ment.			20 California A												
Abatement performed outside Describe:						City, State, Zip Cod	е											
Other-Describe: NORMAL F	OURS				_	Paterson, NJ 0	7503											
Scope of Work (check all that apply	()					Έ	Full Contain	ment w/ne	egative pre	ssure								
\boxtimes >3 sf or >3 lf	Renovati	on					Mini-enclosu											
≥160 sf or ≥260 lf	Demolitio	n				ř	Glovebag pr Non-Exemp		d Non-friah	le pro	cedur	re						
Location of		n normally u		/				() =	R	R	_							
asbestos-containing material (acm) to be	staff(12)	enance/cust	odial			asbestos-containing		ount	e m	e p	n	l E						
abated in facility (13)	Yes	No	N/A	material (ACM)		(Sp LF)	ecify SF of	or o	a	a	C						
	103	NO	IN/A						v e	ľ	р	-						
BASEMENT				PIPE INSU	LAT	ION	90 l ft											
BATHROOM		LX		vat			15 SQ	FT										
Registered Waste Hauler D & S RESTORATION, INC.		EP Hauler II 506	100	ubic Yards of V	Vaste	Name of Registere		IL DEC	01/22:									
City, State		101000	Disposal D	yds.		TULLYTOWN City, State	, KESOURC	LE RECO	JVERY									
PATERSON, NJ 07503			09/08/1			TULLYTOWN	I, PA											
Completed by (Print or Type)	Title			Signature		•		1	Date									
BOGDAN JOLDZIC	PRESID	ENT							08/21/18									

a costel											Pr	rint F	
2KO20lexfy		NOTIF	FICATION	ate of New Jer OF ASBESTO to NJAC 8:60	S ABATE	EMENT (0)		EG	E			7 7	
Date of Notification (1) 8/23/2018				Building Owne				AUG	2 7	2018	3	The second second	
Agencies Notified Type Notific	ation		Street Ad	ddress (ing George	Post Ro	oad		Acamore	20.00	· · · · · · · · · · · · · · · · · · ·	~1 ^		
DEP X Amend	ment #3		City, Sta	te, Zip Code NJ 08863				ASBESTO	ENSI	NG NG	<u> </u>	4	
■ Emergy □ DOH justifica □ DCA □ Cancel			Name of Lisa Da	Contact			100	elephone Nu					
				LITY INFORMA	TION		1,						
Name of Facility Where Abatement is LANXESS Solutions US Inc.	Taking Place (3	3)				Type of F	acility (4)						
Street Address 1020 King George Post Road						Subsetc.)	chapter 8 (Ot er (i.e. private	her than K-1 & commerc	2) cial bui	dings,	hom	es,	
City (5) Fords						Square F	eet #	# of Floors Bldg. Age					
County (6) Middlesex			County C	Code (7) ISE ONLY)			se (Prior if be tanks - is			n			
Name of Monitoring Firm Hired by Buil Emilcott Associates, Inc.	ding Owner (8)		ASCM	No.			ent Contracto		tal Se	rvice	s, L	LC	
Street Address 190 Park Avenue					Stree	Address	e School R						
City, State, Zip Code Morristown, NJ 07960	***************************************		City, State, Zip Code Wayne, PA 19087										
Project Manager for Monitoring Firm Jason Busacco			Telephon		3	License N	No.						
Start Date (10) 7/16/2018	Schedule 10/31/2		mpletion D		fonitor lition & En		tal Sa	nioo	o 1				
Occupancy Status During Abatement (Street	Address				NICE	S, L		
Facility Closed/Vacated During Er Abatement Performed Outside of	Normal Facility	Abater Houn	nent s			Old Eagle State, Zip Co	gle School Road, STE 910 Code						
Scope of Work (Check All That Apply)	arm				Way	ne, PA 19	9087						
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf		enova emoli			Full Containment Mini-Enclosure Glovebag Procede Non-Exempted (*)			í					
Location of	N	Locat lorma	lly	ī	escription	of				Abate Typ		t	
Asbestos-Containing Material (ACN <u>TO BE ABATED</u> In Facility (13)	Mai Cust	(12)	nce/ Staff?	Asbestos Containing Material (ACM (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)			. (Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
Steam Pipe Insulation	Yes	No	N/A	Pine I	Pipe Insulation (TSI)				v		0		
Oil/Ester Tanks Insulation		X			Pipe Insulation (TSI) 576 LF x Pipe Insulation (TSI) 60 LF x								
Oil Tank Surfacing Insulation	1	X			ack Felt (surfacing) 1161 SF x								
Oil Tank Insulation		X	+		Insulation (TSI) 250 SF x								
Name of Registered Waste Hauler		IN	J JDEP Wa	iste Cub	ic Yards		me of Regist		100				
Horwith Trucks, Inc.			lauler ID N		aste		umberland			II			

SW-1998

Vice President

30

Disposal Date

Signature

9/7/2018

Completed by

City, State

Northampton, PA

Mark Klotzbach

Date

8/23/2018

City, State

Shippensburg, PA

OKILDO

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

			1, ,	ai Suai	11 10 1437	100	5.00 and 5.1	0)	11341							
Date of Notification (1)			Name of Building Owner/Operator (2)													
08/24	/	18		Re	vco Asso	ciat	tes		10 11	Al	6	1	2018			
Agencies Notified Type I	Votification	on		Street	t Address				- 1							
⊠ EPA ⊠ Init					Vayne Hil	le M	lle!			ACTOR	TOVES					
	ended				State, Zip C	1111111111111	2016U PC			ASBES	100	4 44 /4				
☑ DHSS Am	endment	t #							**********		**					
		(including			yne, NJ (70									
	tification)				of Contac				Telephone Nu							
□ Ca	ncellation	1		450730	hael Fee		<u> </u>		973-471-2	394						
N- 65 W 100				FA	CILITY IN	IFO	RMATION	(a)								
Name of Facility Where Abateme		ing Place	(3)					Type of Facility								
Vacant Former Wayne Hil	ls Mall							School (K-12								
Street Address									(Other than K-12) vate and commercial buildings,							
1 Wayne Hills Mall								homes, etc.)		ilerciai b	ununn	jo,				
City (5)								Square Feet	# of Floors	IB	ldg. A	ge				
Wayne			9					100,000	1		34					
County (6)				Cour	nty Code (7)(STA	ATE USE ONLY)	Current Use (Pri	or if being demo	olished)						
Passaic				1	,	50.00 10.00		Vacant Reta								
Name of Monitoring Firm Hired b	v Building	a Owner (8) [ASCM	No	T Na	me of Ahatem	ent Contractor (9)								
Health and Safety Service		5c. (,	001				mental Service								
Street Address	,			001			reet Address	nental Services	es LLC							
CPO Box 365																
City, State, Zip Code						_	E. Con P. Totales and It will will be the	Road, Suite 10	2							
							y, State, Zip C	(Ta 2007) / I								
Berlin, NJ 08009	•		-				Fairfield, NJ	07004								
Project Manager for Monitoring F	irm			phone		1	lephone No.		License No.							
Jim Proctor				56-452		(973) 852-344	14	01349							
Start Date (10)		neduled Co				100000	me of OSHA N									
9 / 05 / 18	. _	10/	31	/ .	18	5	SAI Environn	nental Services	LLc							
Occupancy Status During Abater	nent (Che	eck only o	ne)	- 78		Str	eet Address					_				
□ Facility Closed/Vacated Durin	g Entire F	Period of A	Abate	ment		2										
☐ Abatement Performed Outside	e of Norm	nal Facility	Hou	s - Des	scribe	277 Fairfield y, State, Zip Co										
Time of Abatement:Al	ν	_PM/	_PM-		AM		airfield, NJ									
Scope of Work (Check all that ap	ply)					1	,									
	,	0_3					□ Full Confi	tainment with Neg	Negative Pressure							
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		☐ Rer ☑ Der		ion Mini-Enclosure												
23 2 100 St Ot 2200 II		☑ Der	понис	on				g Procedure mpted (*) and No	n-Eriable Proco	duro						
7		Is	Locat	ion			Z3 HOH EXC	Impled () and No	1-1 Hable Floce		-					
Location of		N	orma	lly			Description of	of			atem		I			
Asbestos-Containing Material	(ACM)		d Sole ntena	ely by	Asbes	stos	Containing Ma	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure			
TO BE ABATED IN Facility		100000	0.52	Staff?	(i.e.		ermal systems surfacing, VAT,		(Specify	Nov	pair	aps	los			
(13)			(12)	70.112771120.61			her miscellane		SF or LF)	<u>a</u>		sula	ure			
3500.00k		Yes	No	N/A				-			1	ē				
Exterior				\boxtimes	Stucco				350 SF			П				
Exterior					Roofing	ı ma	iterials		6,806 SF		17					
Interior				Floor Ti				103,800								
					1 1001 11	110/11	idotic		103,000	_	1					
Name of Registered Waste Haule	r				Monto	0	ala Vanda af									
Service Transport Group,			1233	JDEP \ auler I[Wa	oic Yards of ste	Name of Registered Landfill								
	IIIC			SW2117 1800 Minerva Landfill												
City, State						Dis	posal Date	City, State								
New Castle, DE						1	0/31/18	Waynesbur	gh, OH							
Completed By (Print or Type) Title							Signature /	$n = \Omega I$	/	Date						
Mary Petrovski		Preside	nt				1//	au Peter	TAK	8/24	1/18					

ASB-41 MAY 11

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

					t to NJAC				0	出	- 112	1	n in the second					
Date of Notification (1)					of Building		Operator	r (2)	IN E	G		信	1	1				
08/23/2018 Agencies Notified	Type Notification				nan DiSa Address	abato				V-4-11-1449, -1144	Contract Contract							
□ EPA	_			Street	Address					AUG	2 7 20	10						
DEP	Initial Amended		-	City, St	ate, Zip C	ode			11. (1)	AUG	A F CU	10	1	4				
× DOL	Amendment			New	Provide	nce, N	J 0797	74	1	g () - book of the second			No.	St. of Light Co.				
ĭ DOH	Emergency justification)		3	Name o	of Contact				/ //O	Tel	ephone Nu	mber	_	-				
DCA DCA	Cancellation	1		Megh										k				
Name of Facility Where	Abatement is Takir	na Place (3)	FAC	ILITY INF	ORMAT	ION	T										
Private Home	and the fall	ig i lace (J)					Тур	e of Facility	A. O.								
Street Address								H	School (K- Subchapte		er than K-1	21						
								×	Other (i.e.	private 8	& commerc	ial buil	dings	, hom	es,			
City (5)								Sau	etc.) are Feet	# 0	f Floors	I F	Bldg. /	Ane				
New Providence								- 1			1110010	-	nug. /	ige				
County (6)					Code (7)			Cur	rent Use (Pr	or if bei	ng demolis	hed)						
Union					USE ONLY)		,										
Name of Monitoring Firm	Hired by Building	Owner (8)	ASC	M No.					Contractor (9)								
Street Address									Safety LI	_C								
- 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12							Street											
City, State, Zip Code									/ Ave Zip Code			177, 22						
							100		2.p Code 1, NJ 0750	12								
Project Manager for Mon	itoring Firm		T	Telepho	ne No.		Teleph				License N	lo						
							- 1000 Contract		-8711		01332							
Start Date (10)				npletion	Date (11)		Name	of OS	SHA Monitor									
09/01/2018		09/04/					sam	e as	(9)									
Occupancy Status During			0.000000				Street	Addre	ess									
Facility Closed/Vaca	ited During Entire I ed Outside of Norn	Period of	Abatem	nent			City C	4-4-	7: 0 1									
X Other – Describe:	7:30am-3:30pm	iai i aciiit	y i louis	•			City, S	itate, .	Zip Code									
Scope of Work (Check Al	l That Apply)																	
≥3 sf or ≥3 lf		×	Renova	vation Full Containment with Negative P							22							
× ≥160 sf or ≥260 lf		processor.	Demolit					М	ini-Enclosure	е	Negative F	ressu	re					
							F	G	lovebag Pro on-Exempte	cedure	l Non-Eriah	la Dro	codur	0				
		Is	Locati	on					on Exempto	a () and	a Non-i Hac	1 1 1 1 1	110.00	ement				
Location			Normal	ly		Des	scription	of					Ту	ре				
Asbestos-Containing TO BE ABA			ed Sole intenar		Asbes	tos Cont	aining M	lateria	al (ACM)		mount			т	_			
In Facili		Cus	todial S	Staff?	(i.e.	thermal surface	systems cing, VA	s insu T. or	lation,		pecify or LF)	Ren	Re	ncap	incl			
(13)			(12)				niscellan)	٠.	0, 2,)	Remova	Repair	Encapsulate	Enclosure			
		No	N/A								=		ate	9				
Baseme	ent		Х		Floor	tiles, m	nastio		40	0 SF	x		x					
										-	-	_	^					
		1										-						
												-						
Name of Registered Was	te Hauler		NI	JDEP W	laste	Cubic	Vorde		NI	D- 11	-11							
Removal Safety LLC				auler ID		of Was			2000 604	8	red Landfill							
			0	037007	7	2			GROW	S Nor	S North							
City, State Paterson, NJ						7.0	sal Date		City, Stat									
Completed by	TBD Morrisville, PA																	
Lasko Veskov		Title Pres	ident			S	ignature	7	Wast.		Da	te 3/23/3	2010					