State of NJ Notification of Asbestos Abatement

B & G proj. #: 2013-132

(Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #:		,			-70-150-0-0-0		Check #	6077				<u>.</u>
Date of Notification (1)	111	V	ldia - Ours	-(Ot(2)				21		•		
0 8 / 2 6 / 1 3		Deborah	100 VATA	r/Operator (2)		DEGE						
Agencies Notified Type Notific	ation	Street Addre		77		1 1	5 1	111	_			
☐ EPA ☑ Initial	- 11		wn Terra	cè		U U AUG 29	2013					
DOL Amen	dment	City, State, Z Livingst	zip Code on, NJ 07	039		ASSESTOS O	ONTBOL &					
™ DOH	1	Name of Cor	ntact		-	LIUENS	Telephone	Number				
DCA Cance	ellation	Debora	h Gill				T					
			FACIL	ITY INFORMA	ATION							
Name of facility where abatemen	t is taking p	lace (3)				Т	ype of Facility (4					
Deborah Gill	¥	•					=	(K - 12)		V	40)	
Street Address					-			pter 8 (Or Private/Co			-12)	
5 Yorktown Terrace							Bldgs./	lomes, et				
							Square Feet	# of Floor:	s	BI	dg. Ag	je
City (5)	Col	inty (6)				nty Code (7)						
Livingston, NJ 07039	Ess	ex	9		(Stat		Current Use (Pr residential	or if being	g dem	olish	∌d)	
Name of Monitoring Firm Hired b	y Bldg. Owr	ner (8)		ASCM No.		Name of Abatement Co	ntractor (9)					
N/A						B & G Restoration,	Inc.					
Street Address						Street Address						
						105 Ryerson Road						
City, State, Zip Code						City, State, Zip Code						
54 888 7-50 - 1.3 14 W. 103 - 2					_	Lincoln Park, NJ 0	7035					
Project Manager for Monitoring Fi	rm	Ph	one Number	er		Telephone Number		License	Numb	er		
						973-696-6869		0378				
Scheduled Start Date (10)	Sche	d. Completi	on Date (11)	-	Name of OSHA Monitor						
09/06/2013	0:	9/07/2013			11	B & G Restoration, Street Address	nic.			-		
Occupancy Status During Abatem	ent (Check	only one)				105 Ryerson Road						
Facility closed/vacated during			ement.		11	City, State, Zip Code						
Abatement performed outside	de of norma	I facility hou	rs-									
Describe:	•		T.W.		-11	Lincoln Park, NJ 0	7035					
Scope of Work (check all that ap	ply)				ш			wrap	& cu	t		
☐ Demolition		ion			₩ F	ull Containment w/negat	ive pressure	Gloveb	ag pr	oced	ure	
☐ >3 sf or >3 lf		r >260 If			Пм	lini-enclosure	Г	☐ Non-fr	iable p	oroce	dure	
		on normally	used solely				T	_	R	R	E	T.
Location of asbestos-containing	by main	tenance/cus	todial		n of as	sbestos-containing	Amount		e m	e	n	E n
material to be	staff(12) T		material (5500.00 00.11	(Specify S	For	0	p a	a	C
abated in facility (13)	Yes	No	N/A				LF)		v e	i	р	-
basement	-	1	X	VAT & mas	stic		213 sf		Ž			
basement	+	# -	X	thin duct in		ion	10 sf					
DOGOTHOLIC												
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Registered Waste Hauler	NJI	DEP Hauler	ID# C	ubic Yards of V	Vaste	Name of Registered La	indfill				decement	-
B & G Restoration, Inc.	19	9563		3 yards		Tullytown Resourc	e & Recovery	Center				
City, State			Disposal D			City, State						
Lincoln Park, NJ 07035			09/09/2			Tullytown, PA		Date				
Completed by (Print or Type) Gordana Luna	Title Secreta	ry/Treasur	er	Signature	(Gordana Luna		08/26	/201	3		
VIVIUALIA LULIA	1 2001010	- 71 - 2 - WWW.										

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60-7 and 12:120-7) 2013-143 B & G proj. #: Check #6076 Date of Notification (1) Name of Building Owner/Operator (2) Caroline Nochimson 10 | 8 | / | 2 | 6 | / | 1 | 3 | Type Notification Agencies Notified Street Address ☐ EPA 103 Lorraine Avenue M Initial ASBESTUS LICE ☐ DEP City, State, Zip Code Upper Montclair, NJ 07043 Amendment DOL Telephone Number Name of Contact DOH. Caroline Nochimson Cancellation ☐ DCA FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) Caroline Nochimson Other (Private/Commercial Bldgs./Homes, etc. Street Address Bldg. Age # of Floors Square Feet 103 Lorraine Avenue County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) Upper Montclair Essex residential Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) B & G Restoration, Inc. N/A Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 0378 973-696-6869 Name of OSHA Monitor Sched, Completion Date (11) B & G Restoration, Inc. Scheduled Start Date (10) Street Address 09/07/2013 09/06/2013 Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Lincoln Park, NJ 07035 Describe: Other-Describe: wrap & cut Scope of Work (check all that apply) Glovebag procedure ☐ Full Containment w/negative pressure Renovation Demolition Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf >3 sf or >3 If Е Is location normally used solely e n n Amount by maintenance/custodial Location of m Description of asbestos-containing p C (Specify SF or asbestos-containing ¢ 0 staff(12) a material (ACM) material to be v p abated in facility (13) N/A No Yes M pipe insulation (7 locations) 7 If (1 If/location) M basement 50 fittings fittings basement Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler Tullytown Resource & Recovery Center 1 yard 19563 B & G Restoration, Inc. City, State Disposal Date City, State Tullytown, PA 09/09/2013 Lincoln Park, NJ 07035 Date Signature Gordana Luna Completed by (Print or Type) 08/26/2013 Secretary/Treasurer Gordana Luna

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Design of Notification (1)	Name of Bullion Con			
Agencies Hottlisd Type Hottliseston			AUG C	111
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Amended	City, Sinte, Zip Code	Arlington	Avolasses	•
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Name of Facility Where Abatement is Taking Piece	SEETH COE	266.30	Telephone Numb	IST.)
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County (6) (Orange N.	I,	20000	₽ of Floors	Bidg. Age
Name of Name	County Code (7) (STATE USE OFFIN	Current Use (P)	nor if being demolished)	92
Name of Monitoring Firm Hered by Building Owner (6)	ASCM No.	1 1 7 1 5		-
Street Address		Name of Abatement Co SHARON QUALIT		
A		Street Address		
City, State, Zip Code		22- VAN ORDEN	PL	
Project Manager for Manifoling Firm		City, State, Zip Code HACKENSACK A		
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Abatement Design Lines Period of Ale	tement	307- West		
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Scope of Work (Check All That Apply) 23 of or 23 if		NEW YORK	NY 10	M4 0
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in Facility Custodia (13)			Arnoune (Specify 2)	
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Name of Registered Waste Hauter				
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City, State	033467 TOD	Line	a Falespris	
Hackensack N.J. 07	Diaposed Data	City, State	CL FOFFIS	(IK
CARIOS ERALINAS		Wayne	burg. OHio	
DAREIA M	ANAGER	DO HON	Date	1
ASS-61 (R-08-03)		The state of	Server Se	T.

Chack # 10491

State of New Jersey - Notification of Asbestos Abatement

			(Pursuar		3:60-7 and 12:120-7)	F) E O	EIVED
Date of Notification (1)					Name of Building Owner/C FAIRLEIGH DICKIN	Operator (2)	VERSIT	Y
August Agencies Notified	21, 201	Notification T	ype	1.5	Street Address	111	AU	111 1111
□ EPA □DCA ☑ DOL ☑ DEP- No Longer REQUIR	ED	☐ Initial No ☐ Amende ☑ Emerge justifica ☐ Cancelle	otification d Notific ency (inc ation)	ation	100 UNIVERSITY PL City, State, Zip Code HACKENSACK, NJ Name of Contact MR. CRAIG GORCZ	07601		one Number HOL &
⊠ DOH				FACILITY INFO	DRMATION (A)			
Name of Facility Where Abatem FAIRLEIGH DICKINSON DORMITORY Street Address	UNIVER				Type of Facility (4) School (K-12) Subchapter 8 (other than in the control of t	mmercial bu	ildings, hom Bldg. Ad	nes, etc.)
285 MADISON AVENU City (5) MADISON	County (6		County C	ode (7)			ed): ACAI	DEMIC CLASSROOMS & INISTRATIVE OFFICES
Name of Monitoring Firm Hired			ASCM N	0.	Name of Contractor (9)			
ENVIRONMENTAL DE	SIGN, I	NC.	0095	-	GREENWOOD ABA	TEMENT	CONSUL	TANTS, INC.
Street Address 5434 KING AVENUE -	SUITE 1	01			Street Address 268 MAIN STREET			
City, State, Zip Code PENNSAUKEN, NJ 081	109				City State, ZipCode BUTLER, NJ 07405 Telephone Number		Licens	e Number
Project Manager for Monitoring JAY MURRAY	g Firm	Telephone 609-221	-0073		973-492-0477		0084	0
Scheduled Start Date (10) 08/22/13		Scheduled 08/23/13		Date (11)	Name of OSHA Monitor ENVIROVISION, IN	C.		
Occupancy Status During A Facility Closed/Vacated I	batement During En	(Check only of	o <u>ne)</u> Abatemen	t	Street Address 20-21 WARGARAW	ROAD		
Abatement Performed On Describe: (NOT SUB 8) Are	outside of least vacate	Normal Facilited for duration of Abater	y Hours n of work nent		City, State, Zip Code			
Hours MON 8AM – 4F cut as needed)	PM (0&	M, Gloveb	ag and/	or wrap &	FAIRLAWN, NJ			
Source of Work (Check all that	f			■ Renovation □ Demolition	To a second	Mini-En	closure ag Procedu	vith Negative Pressure
□≥ 160 sf or ≥ 1		Location Norm	ally Used	Description of As	shestos Containing Material	Ar	nount	and Non-Friable Procedure Abatement Type
Material (ACM) in Facility (13	So Sta	elely by Maint./o aff? (12) ES NO	Custodial NA	(ACM) (i.e. them VAT, or other mi	mal systems insulation, surra	or	pecify SF LF)	Remove Repair Encap Enclose
Boiler Room		X		TSI		2	5 LF	X
Name of Reg. Waste Hauler Newark Carting, Inc.			aste Haule 2 # 4509		Cubic Yards of Waste:	5 CY	G.R.	e of Registered Landfill O.W.S. North Landfill
Newark, NJ 04509 Notes: None						Disposa 08/23		City, State 100 New Ford Mill Rd. Morrisville, Pa 19067 215-736-1700
Completed by (Print or Type RAYMOND C. PEDA	LINO	Title SENIOR MANAGE		СТ	Signature Raymand C. F.	Pedalin	Date Aug	gust 21, 2013

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of Notification	(1)		Dan	a C	Lmil]	luca		<u> </u>			111			
8-20-13	· · · · · · · · · · · ·	7 5	treet	Addr	ess]]]	12 00 00		111			
ncies Notified T	ype Notification	" [7 D	ors	et L	ane	IJ	LI AUG 2	9 2013	<u> </u>] 		-	
[]EPA	[X]Initial Notification	on		Chate	, Zip	Code					- 1			
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750 500	[Mamended Notification	on					-	ASSESTOS Telephone Num	nhor	_ Ot				
[X]DOL			Name	of Cor	ntact	T		T						
[X]DOH	[]EMERGENCY		Dai	na C	imil	luca					-	-		-
[]DCA	[]Cancellatio	n				INFORMATION						-		
						INFORMATION	Туре	of Facility	(4)					
me of Facility Whe	re Abatement is	Taki	ng Pl	ace (1.1]School (K-12]Subchapter (K]Other (i.e. cial build	8 (Other					
reet Addres									of Floors	s Bl	dg.	Age		_
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	Co	ounty	(6) Es	sex	Co	ounty Code (7)	16	ent Use (Pric	or if being	ng der	moli	shed)	
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ame of Monitoring wher (8)	EIIM					11								
/A						Street Addre	ss 	hor St						
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ity, State, Zip Co	ode					Montcla	uir,	NJ 07042	-	icens	o N11	mber		_
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Project Manager for	r Monitoring Fi			none r	lumber	(973) 74	44-88	800		003				_
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Scheduled Start Da	te (10) Sche	d. Co	mplet	ion Da	ate (1:	N/A								
9-3-13	,	9-	4-1:	100		II/A								
Worth Day	Iear	nth	Day	ly on	Year e)	Street Addr	ess							
Month Day Occupancy Status I	uring Abatement losed/Vacated D	uring	Enti	re Per	riod									-
[X]Facility C	Tosea,					City, State	e, Zip	Code						
[]Abatement	Performed Outsi	de of	cript	» »	011101									
Hours - De	scribe: «OffHour scribe: «Other O	ccupa	ncy D	escri	pt»									
[]other - De	scribe	plv)					11 Con	ntainment with	h Negativ	e Pre	ssur	e		
Scope of Work (Ch	eck all that ap	P-1,	555.002		- t-: am	r 1Mi	ni-Enc	closure						
[X]>3 sf	or ≥3 lf		[X]	Renov	ition	F271 C1	orrehad	g Procedure able Procedur	e					_
[] <u>></u> 160 s	f or ≥260 lf			Demo		[]No	on-Fria	able Flocos			Abat	emer	E T	YP
			т.	Is cation		Descri]	ption	of	Amoun	+	R	R	N	N
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In F	acility	1	Cu	stodia aff (1	al I	or other m	iscell	aneous)			ь			1
	(13)	+	Yes	No	N/A		7 - 4 -	077	60 SF		X			L
					X	Duct Insu	IdLI	OII						
Basement		-												1
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			N.	DEP W	aste	Cubic Yards	-	Name of Region G.R.O.W.	S.					
		E)	-	uler	ID No.	of Waste 1.	. 5		<u> </u>					
Name of Register	ed Waste Hauler	TNC		· 7 (1 / 1 (1		City, State			1.	C7		
Name of Register AZTECH MA	ed Waste Hauler	INC.	1	7040		Disposal Dat	te	C1C1/	99-/ 9	י מכי	an	0/		
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Date

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT MO#20613924808 (Pursuant to NJAC 8:60 and 5:16) Emergency Notification Date of Notification (1) Name of Building Owner/Operator (2) 23 / Zachary Crump Agencies Notified Type Notification Street Address APPROVED ☐ EPA initial 🔯 NJ Dopt, of Health & Senior Services 96 May Street X DOLWD ☐ Amended City, State, Zip Code Amendment # DH\$\$ Emergency (including Hawthome, NJ 07506 DCA (NJAC 5:23-8) justification) Name of Contact Cancellation Zachary Crump FACILITY INFORMATION Name of Facility Where Absternent is Toking Place (3) Type of Facility (4) Private house School (K-12) Subchapter 8 (Other than K-1 2) Street Address Cother (i.e., private and commercial buildings. 96 May Street homes, etc.) City (5) Souare Feet # of Floors Bldg. Age Hawthorne, NJ 07506 County (B) County Gode (7) (STATE USE ONLY) | Current Uso (Prior if being demolished) Passaic Name of Monitoring Firm Hirad by Building Owner (8) Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 13 08 / 26 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 #35 E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-PM/ Fair Lawn, NJ 07410 Scope of Work (Chack all that apply) Cloan up and decontamination Full Containment with Negative Pressure >3 of or >3 if > 160 of or >260 if Renovation Demolillen Mini-Enclosure Glavebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure is Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Removal Repair Enclosure Asbestos Containing Material (ACM) Encapsulate Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, Custodial Staff? (Specify IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A X Basement Pipe insulation 45 LF Name of Registered Waste Hauler NUDEP Viaste Hauler ID No.: Cubic Yarde 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) Signature

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

Check# 1709

Date of Notification (1) Name of Building Owner/Operator (2) 08 26 / 13 28/3 Alic 20 Stephen Wilson Agencies Notified Type Notification Street Address ☐ EPA X Initial 41 Morningside Road X DOLWD Amended City, State, Zip Code X DHSS Amendment # & LICENCIA Emergency (including Verona, NJ 07044 DCA (NJAC 5:23-8) Justification) Name of Contact Telephone Number Cancellation Stephen Wilson FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house School (K-12) Street Address Subchapter 8 (Other than K-1 2) Other (i.e., private and commercial buildings. 41 Morningside Road homes, etc.) City (5) Square Feet # of Floors Bldg. Age Verona, NJ 07044 County (8) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Essex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __09__/__04__/__13 09 / 05 / 13 Envirovision Consultants, Inc. Occupancy Status During Abatement (Check only one) Street Address X Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe 20-21 Wagaraw Road, Bldg .# 35 E Time of Abatement: ____AM-___PM/__PM___AM City, State, Zip Code Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination Full Containment with Negative Pressure >3 sf or >3 If 2 160 sf or >260 if X Renovation Mini-Enclosure Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Location of Normally Aspestos-Containing Material (ACM) Description of Used Solely by Repair Asbestos Containing Material (ACM) Removal Encapsulate Enclosure TO BE ABATED Maintenance/ Amount (i.e., thermal systems insulation, IN Facility Custodial Staff? (Specify surfacing, VAT, or SIF or LF) (13)(12)other miscellaneous) Yes No N/A Basement X Pipe insulation X 35 LF Name of Registered Waste Hauler NUDER 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 N.Jevtic Owner 08/26/2013 ASB-41 May 11

* Too not use this form for ashestos licensure exempted activities.

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

Ch# 0259

Date of Notification (1)			Na H	ime of Bu lousing	ilding Owr Authorit	ner/Opera y of Ber	rgen Count	у	2	Bio s			-	
8-26-2013	tification			reet Addr					-	813 RUB 2	9 4	117	, p.	,
Agencies Notified Type Not	uncauon					inty Pla	za, Floor 2		115	-		4 10 10	- 32	
EPA Initi	al ended		1000		Zip Code			-			5 4			
DOL Am	endment #_		H	lackens	sack, NJ	07601				or LIC		1 8	1.	
	ergency (inditification)	cluding	N	ame of Co	ontact			1	Tele	phone Numb	er			
	ncellation			loe Giai					_				_	
				FACILIT	Y INFOR	MATION	Type of	Facility (4)						732
Name of Facility Where Abatemen	t is Taking	Place (3)												
House								hool (K-12) bchapter 8	(Othe	er than K-12)				
Street Address							Ott	her (i.e. priv	ate &	commercial	buildin	igs, h	omes,	,
105 Main Street						-	Square		# of	Floors	Bld	g. Age	9	
City (5)							Square	1001	3	070.770.700.00	50	+		
East Ruthorford	- 25 ID - 10 - 10		- 1 0	County Co	do (7)		Current	Use (Prior	if beir	ng demolishe	d)			
County (6)				STATE US			The state of the s	e for Den						
Bergen	B 0 8 0	···mo= /0\	L	ASCM N	No.	I N	ame of Abate			(9)	72.13=53	-		
Name of Monitoring Firm Hired by	/ Building O	wner (8)		n/a	10.		_oznica Ma							
n/a			_	1.74			treet Address							
Street Address						2	22 Troy Lai	ne					100	
n/a							ity, State, Zip							
City, State, Zip Code							Lincoln Par		035	<u> </u>				
n/a	irm		т.	Telephone	e No.	T	elephone No.			License No).			
Project Manager for Monitoring F	11111		1 1	n/a		1 9	973-706-79	950		01193				
n/a Start Date (10)		Scheduled	Com	pletion D	ate (11)	1 22	lame of OSH		2.7					
9-9-2013		9-16-20					Loznica Ma	anageme	nt C	orp.				
Occupancy Status During Abater	ment (Check	k Only One	2)			1 -	Street Address							
Facility Closed/Vacated Dur				nent			22 Troy La							
Abatement Performed Outs	ide of Norm	al Facility I	Hours	3		110000	City, State, Zip							
Other - Describe: 9am - 5p	<u>m</u>		-			_	Lincoln Pa	irk, NJ 07	035					-
Scope of Work (Check All That A	Apply)						E71					20		
1 ≥3 sf or ≥3 lf			enova					Containme i-Enclosure		h Negative F	ressur	е		
x ≥160 sf or ≥260 lf		X De	emolit	tion			Glo	vebag Proc	edure				200	
							⊠ Nor	n-Exempted	(*) a	nd Non-Friab			e ment	-
		Is	Locat	ion									pe	
Location of		N	lorma	lly		Desc	ription of	(4.01.0)		Amount				
Asbestos-Containing Materia	al (ACM)		d Sole intena	ely by ance/	Asbest	tos Contai	ining Material ystems insula	(ACM)		Amount (Specify	₽ R	70	Encapsulate	1
TO BE ABATED In Facility		Cust		Staff?	(1.6.	surfacii	ng, VAT, or		5	SF or LF)	Remova	Repair	psc	
(13)			(12)			other mi	scellaneous)				\a	=	late	
125		Yes	No	N/A						00.1.5	-	-		H
Basement				x			Insulation			60 LF	X		-	+
Basement				X			e Insulation	1		20 SF 178 SF	x		-	1
Floors 1, 2, 3				X			noleum	NA/		3 SF	×	+	+	+
Floor 3 Air Condition				X			sulation A	Nome of	Regi	stered Landfi				
Name of Registered Waste Hau	uler	1	100	NJDEP V Hauler ID		Cubic \ of Was		Company of the						
Loznica Management Co	orp.			003313		TBD		GROV		апонн				
City, State		77		10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (Dispos TBD	al Date	City, Sta Morris		PA 1906	7			
Lincoln Park, NJ 07035		Title				1 25 75 75	ignature A		<u></u>		ate			8
Completed by		Little					19.19.10			`	8-26-			

NOTIFICATION OF ASSESTOE ABATEMENT (Pursuarit to NJAC 8:60 and 12:120) 7813 AUG 29 AH 10: 52

		1. 6.000	Building Owner/Ciperator	2)		
Date of Notification (1)		Name of	HAROLA SUL	/		d person in
- 254 .	7-/3	Street Ad		OINT	JEAN HAU	
gency Natified	2-Minual		to Zip Code	·		
DEP DEP	Denament &	CSA Sim	maxials	PAN N	J	1:
por	C Emergency (Including	(arma of	Contact		Telephone Humbs	<u>"</u>
DOH	justification) Cancellation	}	MARIT			
DCA	Carred and a second	FACIL	TY INFORMATION			and the second s
I ama of Eachty Means	Abetement is Taking Place	p (3)		Type of Facility		
	1 Respond	e		G School (K-12)	(Cathour thank K-12)	
Hroot Address	1 -111			Or Other (i.e. pri	vate & commercial	buildings.
2001	lonial CT	معاجمت بيسان المربية والمرب والأوار يراب		Square Feet	# of Floors	Blag Age
Ry (5)	an plapan			1800	2	57
County (6)	the but the		Code (7) (STATE USE	Current Use (Pr	for it being demolis	hed)
monn	mouth	CANK			Dence.	
Name of Mosillasing Fi	irm. Hired by Building Owne	ASCIN to.	Name of Abate	ment Contractor (f	^	
(8)	ant a landering to appear specific and consummation and of		Ace-		tion (D.	Inc.
Street Address			Ser Masters	ontrus	F G =	
City, State Zip Code	that we have at a copie managine part streaming a particular by a few o		City, State, Zig	Code		
				Veck. N	5 077	.33
Project Manager for N	logiloing Firm	Telephri e No.	Telephone No.		License No	
		T. Comment		4-1757	0002	1_
9teri Dete (10) 9-10 -		ompletion D. o (1.1)	Norm of OSH	- beneat seems :	ſ -	and a seed of the last of the last
Occupancy Status Du	wing Absternant (Check onl	y one)	Street Address	US NIGHT	on Co I	nc_
G Facility Closed/Vac	ated During Entire Period o	of Abeternor		un trose	Rd.	
2 Other - Describe.	ved Outside of Hormal Fedi	kly Hours	City. sate. Zie	Code		
Scope of Work (Check	74m 7 PM		- WIEV	leck N.	2 Ofta	a
#E3810123#		100	Oversor D. M.	Containment with	Negetive Pressura	
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and the same of th	т		046	Exempted (*) and	Non-Friebla Proce	dure
1.00	ation of	le Location Normally				Abelema
Asbestos-Contail	nina Material (ACM)	Meinteni-need	Asbestos Containing 8	of		177
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lame of Registered W	rest Hauter	TNA				
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	And the same of		wanted a stuffered	Christos	10	0/13

(h.# 1908. Print Form

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

Date of Notification (1) 7/26/13			T		of Building ste Mana			(2)		€#13 _. A	UG 2	9 ,	in i	/7. •		
Agencies Notified	Type Notification		7	Street A	Address					d y		•		υ· !	2	
DEP DOL	Initial Amended Amendment		_		ate, Zip Co ucus, NJ		4				(6,2)	100	70			-
DOH DCA	Emergency (justification) Cancellation				of Contact d Gurna	ni				Tele	phone	Num	har	-		
Name of Facility Where Private Property Street Address 854 Newark Avenu		g Place (3	3)	FAC	ILITY INFO	ORMAT	TION		of Facility School (K- Subchapte Other (i.e. etc.)	12) r 8 (Othe				dings	, hom	es,
City (5) Jersey City NJ									are Feet 0 SF	# of	Floors	12		idg. A	Age	
County (6) Hudson	***				Code (7) USE ONLY	,		Curre	ent Use (Pr	ior if beir	ng dem	olishe	ed)			
Name of Monitoring Firm N/A	Hired by Building (Owner (8)		ASCI N/A	M No.				etement Co se Group		(9)					
Street Address N/A	5						Street 567-5		ss Street S	uite#16	3	-				
City, State, Zip Code N/A									Zip Code v York, N	J 0709	3					
Project Manager for Mor N/A	nitoring Firm		1	Telepho N/A	one No.		Teleph 201-7	one N	lo.		Licens 0011					
Start Date (10) 8/9/13		Schedule 8/22/			Date (11)				HA Monitor						_	
Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe:	g Abatement (Check ated During Entire F	k Only On Period of A	e) Abaten	nent			Street 2333 City, St	Addre Rou tate, Z								
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Il That Apply)		enova emolit				×	Mi Gl	Il Containm ni-Enclosur ovebag Pro n-Exempte	e cedure						
Location	of	1	Locati	T-01		_								Abate	emen rpe	t
Asbestos-Containing TO BE AB. In Facil (13)	Material (ACM) ATED	Use Mai	d Sole intenar odial S (12)	ly by nce/	Asbes (i.e.	tos Cor therma surfa	escription ntaining M al systems acing, VAT miscelland	ateria insula r, or	ation,	(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
Extern				x	TRAL	site	E PI	DE		4	L‡		x			
FIRST floc		-		x	9×9	Floo	iz tile				DSF		ĸ			
BUSEMENT	<u> </u>	-		X	PIPE	IN	sulati	on		75	しょ		X			
Name of Registered Was Tri State Transfer As City, State			H	JDEP W auler ID k310		of Wa			Name of Minerva	Enter						
1199 Randall Ave, B	ronx NY					Dispo	sal Date		City, Stat Wayne:		DH 44	668			20	
Completed by Edwin Precilla		Title Projec	ct Ma	nager		8	Signature	J ().	recilla			Date 7/26				

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

Date of Notification (1) 8/27/13			Name	of Building	g Owner/Operator	(2) Carried Bittern	13 AUG 2	20 00				
Agencies Notified Type Notific	ation		Street	Address		<i>Danie Ditter</i>		1111	100	50	_	_
₩ EPA □ Initial					17	74 Springdale	e Rd.			1.00		
DOL (Amendm	nent #1_	_)[City, S	State, Zip C		inceton, NJ (08540	$H_{i}(t)$		٠.		
☑ DOH ☐ justifica		!	Name	of Contac				ne Numbe	er			_
DCA Cancella	tion			Da	vid Bitterman	1	5					٠_
	-11-11-11-11-11-11-11-11-11-11-11-11-11		FAC	CILITY INF	ORMATION	-	455					
Name of Facility Where Abatement is	Taking Place	(3)				Type of Facility	(4)					
	Residenti	al				School (K-1		K 10)	(
Street Address	Springda	le Ro	l			Subchapter Other (i.e., p	orivate & co			lings		
City (5)		esocialismo				Square Feet	# of Flo	oors	BI	dg. A	20.00	
	rinceton,	NJ				3200	-	2	_	10	00	
County (6)				nty Code (7 ONLY)	7) (STATE	Current Use (P			hed)			
Mercer	Idiaa O		05/00/2-0	_	Name of Abeter	nent Contractor (9		lential				=
Name of Monitoring Firm Hired by Bui (8) MECS	uing Owner		ASCM	INU.		vens Environ	No. of the last of	Service	s In	C.		
Street Address		_			Street Address	Vens Environ	inchiai c	701 1100	0, 11			_
PO Box	x 341					PO I	30x 322					
City, State, Zip Code					City, State, Zip C				-			_
Crosswicks,	NJ 0851	5				Allentow	n, NJ 08	3501				
Project Manager for Monitoring Firm			phone		Telephone No.		Licens		0.400			
William Weisgarber.		-		<u>8-4070</u>	(609) 25			- 00	0493	3		_
Start Date (10)	Scheduled C			te (11)	Name of OSHA		IECS					
8/23/13 Occupancy Status During Abatement		3/30/	13	/	Street Address	14)	EC5					_
☐ Facility Closed/Vacated During En	11일 - 12일 시민(H) - 12일 - 12일 (H) - 12일 (H)	_	ment		Olicol / ladicoo	PO I	30x 341					
☐ Abatement Performed Outside of N					City, State, Zip C	Code						
Other - Describe: 8am to 4pr	n					Crosswic	ks, NJ 0	8515				
Scope of Work (Check all that apply)				X	[] Full Cor	ntainment with No	antive Pre	ccura				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emolitio			Mini-En Gloveba	ag Procedure	×					
					Non-Ex	empted (*) and N	on-Friable I	Procedure			2.4	
•		Location							^	bate. Typ	ment e	
Location of	Used	d Solel	y by		Description o							
Asbestos-Containing Material (ACM TO BE ABATED	′ c	ustodia	al		tos Containing Ma thermal systems		Amou (Spec	ify	Rer	Repair	Enc	Enclosure
IN Facility (13)		Staff? (12)			surfacing, VAT other miscellane		SF or I	LF)	Remova	air	Encapsulate	losu
(15)	Yes	No	N/A		Other missellane	000)			_		ılate	9
Basement		×		Th	ermal Pipe In	sulation	210	lf	×			
Crawlspace			×	Th	ermal Pipe In	sulation	30	lf	×			
Attic				Th	ermal Duct In	sulstion	10	sf	×			
1st Fl. Bathroom					VAT		24 s	sf	×			
Name of Registered Waste Hauler			JDEP \		Cubic Yards	Name of Reg	stered Lan	dfill				
Stevens Environmen	ntal	_ '	Hauler II 182	290. 292	of Waste 4 CU		/ T.R.I	R.F., In	c.			_
City, State Allentown,	NI 0850	1			Disposal Date 8/30/13 /	City, State	Tully	town, I	ОД			
Completed By	Title	_			Signature	W//	Tully	Date	11			
Mahlon E. Stevens	10,000,000,000	rojec	t Mar	nager	_ ///	1//			8/27	7/13		

ASB-41 MAR 00 * 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)	/30/13			Nam	ne of Buildir	ng Owner/Operato	David Bitter		P. D.			
Agencies Notified	Type Notificat	tion	-	Stre	et Address		Durid Ditter	2913 AU	6 23	P.II	:زاز	32
EPA EPA	Initial					1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	74 Springdal	e Rd.				
DEP DOL	Amended Amendme	nt #		City,	State, Zip			0.540	1		T-SN	, ÉL
⊠ DOH	Emergence justification		ng	<u> </u>			rinceton, NJ (. 11	v to	
DCA DCA	Cancellation			Nam	ne of Conta	ct avid Bitterma:	n	Telephone N	lumber			
				<u> </u>			11	L—				
Name of Facility Where	Abstement is To	aking Dlag	20 (3)	+4	ACILITY IN	FORMATION	Tuno of Facility	. /4\				
I value of racinty vinere		esident					Type of Facility School (K-1	. 10		à		
Street Address		Oblachi	141					8 (Other than I	K-12)			
	174 St	pringda	ale R	d.			Other (i.e., phomes, etc.		ercial bu	ilding	s,	
City (5)							Square Feet	# of Floors		Bldg.	Age	
	Prince	ton, NJ	085	40			3200	2			80	
County (6)	-					7) (STATE	Current Use (Pi)		
	Mercer				E ONLY)			Resident	tial			
Name of Monitoring Firm (8)		ng Owner	.	ASCN	/ No.		ment Contractor (9	Š.		• (20)		
Street Address	MECS						vens Environi	nental Serv	rices, I	nc.		
Street Address	PO Box 3	3/11				Street Address	DO E	3ox 322				
City, State, Zip Code	TO DOX .	341				City, State, Zip C		50X 3ZZ				
	osswicks, N	IJ 0851	5			Oity, State, Zip C		n, NJ 0850	1			
Project Manager for Mor				ephone	No.	Telephone No.		License No				
William W	eisgarber Jr.		1 1000000		98-4070	(609) 25	59-9688		0049	13		
Start Date (10)	Sc	heduled (Comple	tion D	ate (11)	Name of OSHA	Monitor					
8/23/13			8/27/	13			M	ECS				
Occupancy Status Durin		Citation Caronical Section 1985				Street Address						
☐ Facility Closed/Vacate ☐ Abatement Performed								ox 341				
Other - Describe: 8			ty Hou	is		City, State, Zip C		- NIT 0051	-			
Scope of Work (Check a							Crosswick	s, NJ 0851	<u> </u>		_	
⊠ >3 sf or >3 lf	ii triat apply)		enovati			Full Con	ntainment with Neg closure	gative Pressure				
≥160 sf or ≥260 lf			emolitic	n		Gloveba	ag Procedure empted (*) and Nor	n-Friable Proce	dura			
		ls	Locatio	n	Γ	IN LAC	simpled () and 140i	I-I Hable I 100e		Abate	ment	-
Location of	, f		ormally Solely			Di-tif				Ту		
Asbestos-Containing N		Mai	ntenan	ce/	Asbest	Description of os Containing Mate	erial (ACM)	Amount	_			
TO BE ABAT IN Facility	ED		ustodia Staff?	I	(i.e.,	thermal systems in surfacing, VAT,	nsulation,	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)			(12)			other miscellaneo		SF OI LF)	ova	¥·	psu	Sur
		Yes	No	N/A							late	Œ
Baseme	nt			×	The	rmal Pipe Ins	ulation	210 lf	×			\dashv
Crawlspa		7	-			ermal Pipe Ins		30 lf	×			\dashv
Attic		+ +				rmal Duct Ins		10 sf	×		-	\dashv
1st Fl. Bath	room	-				VAT	, diution .	24 sf	×	-	-	\dashv
Name of Registered Was		-11	I N	JDEP V	Vaste	Cubic Yards	Name of Regist					-
Stevens En	vironmental			auler ID 182	No.	of Waste		T.R.R.F.,	Inc			
City, State	omnomun		-1-	102		4 CU Disposal Date	City, State	1.K.K.F.,	mc.	_		=
15.6	lentown, NJ	08501				8/27/13	/	Tullytown	PA			
Completed By	Tit		_			Signature		Date	, 1 / 1			-
Mahlon E. Stev	ens	Pre	oject	Man	ager				7/30	/13		

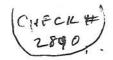
State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 8/27/2013			2000	ame of B		wner/Oper	ator (2)	20,	3 A11	2 22			ussa	
	Notification			treet Add		OULEV	ARD			S 29 A	¥ 10:	32		
EPA DEP DOL	Initial Amended Amendment #		C	ity, State	, Zip Cod)FF, NJ	le			5 4	LEN L	1	L		
DOH DCA	Emergency (in justification) Cancellation	ncluding	11000	lame of C				1	Tele	phone Num	ber			7.55
				FACILI	TY INFO	RMATION								
Name of Facility Where Abates RESIDENCE	ment is Taking	Place (3)					T	ype of Facility (4 School (K-12	2)					
Street Address 373 SUNSET BOULEVA	ARD							Subchapter Other (i.e. pretc.)	8 (Otherivate 8	er than K-12 commercia) al buildi	ngs, l	nome	S,
City (5) WYCKOFF		-						Square Feet		Floors		dg. Ag	ge	
County (6) BERGEN				County Co	ode (7) SE ONLY)	<u> </u>	- 0	Current Use (Prio	r if bei	ng demolish	ed)	33		
Name of Monitoring Firm Hire	d by Building C	Owner (8)		ASCM	No.	N	lame of	Abatement Con BROTHERS	tractor	(9) RACTIN	G, IN	о. Э.		
N/A							treet A			11 - 19 - 10 - 10 - 10 - 10 - 10 - 10 -				
Street Address							250 R	UTHERFORI	D BL	/D.				_
City, State, Zip Code							CLIFT	te, Zip Code ON, NJ 0701	4					
Project Manager for Monitorin	g Firm			Telephon	e No.	100	elepho 973-9	ne No. 56-8700		License N 00494	0.			
Start Date (10) 9/7/2013		Schedule 9/12/20		pletion D	ate (11)	3.5		OSHA Monitor AS (9) ABO	VE					
Occupancy Status During Aba	atement (Chec	k Only One	e)			5	Street A	ddress						
Facility Closed/Vacated Abatement Performed O Other – Describe:	Durina Entire F	Period of A	batem	ent		_ (City, Sta	ate, Zip Code						
Scope of Work (Check All That ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	at Apply)		enova emolit				×	Full Containm Mini-Enclosure Glovebag Pro	e cedure					
								Non-Exempte	d (*) ar	nd Non-Frial				
			Locati										ement rpe	ž.
Location of Asbestos-Containing Mat TO BE ABATEI In Facility (13)		Use Ma	lormal d Sole intenai odial S (12)	ly by nce/ Staff?		tos Contai	ystems ng, VAT	aterial (ACM) insulation, , or	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A			s uray states			10.15	+		-	\vdash
BASEMENT			X			F	IPE		1	10 LF	X			
		-												\vdash
					_									
	Incilne		TA	NJDEP W	lasto	Cubic Y	ards	Name of	Regis	tered Landf	II			
Name of Registered Waste F		3	H	Hauler ID 18743		of Wast		I have been a second		NAGEMI		3.R.0	J.W.	S.
City, State CLIFTON, NJ						Disposa 9/12/2	Date	City, Sta MORF		LLE, PA				
Completed by VIVECA RAMOS		Title PRO	JEC	T COO	RDINAT		gnature	NEGA A		1.0	ate §/27/2	013		

CNECK#

State of New Jerrey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NIAC 8:60 and 13:134)

					Fall broken as	<u> </u>
Oate of Noulication (1)	421.		Owner/Operator			
2.7	23/13	MITC	HELL V	ICHO-2.		
Agencies Notified	Type Notification	Sueel Address	1/	C _ ENTANGE	y and ide 3	2
(3 00 c) (3 00 c) (4 00 c)	₩ ma	23	1<1NC	31,	<u> </u>	
Ø ∞	☐ Amended	City, Stage, Zip C	A.	- 12 -	0.8-1.5	1 3
(R) 001	Emergency (inclu	ping C10	GKVNA			<u> </u>
12 00 to 10	[nousanseur	Hame of Contac		10	ישמיה אתוספי	*
$\Box \infty$	□ Cancellation	5	DW E			1
		FACIUTY INF	ORMATION			
				Type of Facility (4)		
Tame of Facility Where	Abatement is Taking P	(1) ace		□ School (X-17)		
RESI	DENCE			Superapier \$ 10	iner inan K-17)	
Seel Appless				One (I pore	e é commerce e	~100¢1
8 R.	DICROAD	AVENUE		Squit Feet	of Floors	BIOC AC
				7000	7_	40+
(C.1, (5)	MAYCOU	no House			/ h. aa 4ama\ 104	
		I County cook	1) (STATE	Cunent Use (Proc	NO NOT	V 1
[Counc 16]	1 AY	USE ONLY	•			
		CON LASCH NO		KTENI CONVECIOL (9)		
name of Monioning Fil	THE HILL BY BUILD ON			nco Inc.		
1874.)//-		SHOOL Addie L	5 SCAU	= 1 vi	123
Suces Appress	/	000-000-000	369			
			CAY. State. 20		W. TO	೯: ೨೭
City State 210 Coole			MAR			
		1 Alebaoure Ho	THOP'SOM NO		License NO ,	37.
Pige: Manager la h	Horizona Firm	1805014	856.7	79-0471	0017	
			Hame OLOSH	M HONG		
Sian Oale (10)		und Compeion Date (11)	Taris	FP1 KIES	<u>~</u>	
0/0/		9/16/13	Sucel Addie	11	4	
	LOO Analement (Ches	t only one)	369	1 (11 1 1 1	. = A v =	
	and DUADO EDVIS FF	1100 4				
E LIGHT CLOSEDA	emed Outside of Horna	Facility Hours	CAY. State. 2		N.J. :5	٠,5 ك
D Misusus beug	tued Corrier or		10 M.W.F	1 = 7,100 =		
Oiner Describe				Coursinment with He	gare Pressort	
Scope of Work (Ch	ecr an Mai abbiti		☐ MY	7. ENCIOS UI E		
7331013311		S Delucion	Q 01	Draced bloceons	or Figor Pioceo	~:
₹ 160 11 01 1760	U	<u> </u>				~
		11 Location		.9 	-	
		Used Solely by	Descub	A Maleual (ACM)	Aman.	
Loc	avon of		ID W MALLY	ISUE BILLE	(Specin	11411
Acoesios Conta	HAND HELDER (VCIM)	Custodia!		AVI A	3. 5	315 Charles 140 (150)
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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

				V. (370.73)						20	Che	ck # 7	256	
Date of Notification (1)	8/23/13						erator (2) nent of Milita	ry Affairs		2013 _{AU}	16 20			4
Agencies Notified [] EPA [] DEP	Type of Notifica [X] Initial Notification	tion St										Firs	10;	\$2
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[] DCA	[] Cancellatio	4000		n McE		2			Telephone Num	bei			2	
			mila	200000			UEODIAATION		F					
Name of Facility When	e Abatement is Ta	king Plac	e (3)		FACI	LIIYII	NFORMATION	Type of Facili	ity (4)					
Hackettstown Ar		aking r iac	,c (0)					[] Scho	ool (K-12) chapter 8 (Other t er (i.e. private and	han K-12))			
Street Address								[x] Oth	er (i.e. private and nes, etc.)	comme	rcial buil	dings	1	
901 Willow Grov	e Road								# of Floors	. 1	Dida A			_
City (5)	ity (5) County (6)							Square Feet 40000	2		Bldg. A	ige		
Hackettstown		Warre			((STAT	E USE ONLY)	Current Use (armory	Prior if being dem	nolished)				
Name of Monitoring Fi	rm Hired by Buildi	ng Owne	r A	SCM N	0.	П	Name of Abatem	ent Contractor						
	Companies,	Inc.	(0110				lupiter Envi	ronmental Se	ervices	, Inc.			
Street Address	lood						Street Address	Lynn Cour	4					
7 Pleasant Hill R City, State, Zip Code	toad					4 1	City, State, Zip C	3 Lynn Cour	· ·					_
Cranbury, NJ 08	512								k, NJ 07035					
Project Manager for Monitoring Firm Telephone Number							Telephone Numb			Licens	se Numb		2000	
Kevin Lovely							Name of OSHA	973-709-02	.00			800	52	
Scheduled Start Date (9/5/13									onmental Lat	oorator	ies, L	LC		
Occupancy Status Dur [] Facility Close [] Abatement Pe	riod c	f Abater				2333 Route	22W							
Desci				,			City, State, Zip C	ode Union, NJ 0	7083					
Scope of Work (Check	all that apply)							[] F	ull Containment v	vith Nena	itiva Pra	ceure		
[] Demolition [x] ≥3 sf or ≥3 lf [] ≥160 sf or ≥26	50 If			[]	Ren	ovatio	n	[x] M	Mini – Enclosure Blovebag Procedu Non – Friable Pro	re		Source		
		ls	Locat	ion				20130 M				Abate	men	t
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In Facil			-					iscellaneous)			,	V I	P	0
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						27	710 25 22 22							
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City, State							sal Date	City, State						_
Lincoln Park, NJ						9/20	0.01000000	Waynest	ourg, OH	I e				
Completed By (Print or Pane Repic	Type)	Title Gene	eral	Mana	ger		Signature	_ (2	8/2	e 23/13			
\CD /1		1					11/	******						_

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

Date of Notification (1)	8/23/13	Na Na	ame of	Buildir	ng Ow	ner/(Operator (2) tment of Milita	ry Affaire	2210 r:		- 2	Chéck	#7	257		
		tion Ct	ew J	ddraaa	y De	pai	unent or willta	II y Alialis	CBIJ A	11: 29	E 14 10 3	,			_	
Agencies Notified [] EPA	Type of Notifica	10					ing Road				in G				8	
[] DEP	Notification	n Ci	ty, Sta	te, Zip	Code				Ćε	LIVER	Jin C					
[X] DOL	[] Amended Notification		awre	ncevi	ille, l	NJ (08648				10					
**************************************	Notification		ame of	Conta	ct				Telep	hone Num	nber				1807	
[] DCA	[] Cancellatio	on V	/illiar	n McI	Bride	е			" '							
					FAC	ILITY	INFORMATION									
Name of Facility When		aking Plac	ce (3)					Type of Fa	cility (4) chool (K-	12)						
Somerset Armor	У							I Si	ibchapte	r 8 (Other	than K-12) d commerci	al build	inas			
Street Address 1060 Hamilton S	Street							h h	omes, et	c.)		ciai bullulings,				
270								Square Fee	et	# of Floor		ldg. Ag	е		_	
City (5)		County					nty Code (7) ATE USE ONLY)	40000	o (Drine if	2 Shaina dan		80			_	
Somerset		Some				(517	ATE USE ONLY)	Current Us armory	e (Piloi ii	being der	nolisnea)					
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	Companies,	0110)	_		Jupiter Environmental Services, Inc.							-			
Street Address 7 Pleasant Hill R	oad						Street Address	s 3 Lynn Court								
City, State, Zip Code	loau					-	City, State, Zip C		uit					7.5 3 3	-	
Cranbury, NJ 08					Lincoln Park, NJ 07035											
Project Manager for M	Numbe			Telephone Numb		XXXXXXXXXXX		License								
Kevin Lovely	-5858				973-709-0	200_			0	08	52					
Scheduled Start Date (9/3/13	etion [3/13	Date (1	1)		Name of OSHA	Monitor J & S Env	ironme	ental La	boratorie	s, LL	С					
	d/Vacated During	Entire Pe	riod o				Street Address	2333 Rout	e 22W							
Descr	70 50		Facilit	y Hour	s –		City, State, Zip C				****					
[x] Other – Desc Scope of Work (Check	ribe: partially vac	<u>anı</u>							07000				-			
****	all triat apply)							[]	Full Cor	tainment v	with Negativ	e Press	ure			
[] Demolition [] ≥3 sf or ≥3 lf				[]	Re	nova	tion	[X]	Gloveba	Enclosure ag Procedu						
[x] ≥160 sf or ≥2	50 If	1 1						[X]	Non – I	Friable Pro	cedure	1 41			4	
			s Location ormally Used				Descr	ription of					Abatemer Type			
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TO BE ABA							insulation, s	urfacing, VAT	,			0	A	25,000	L	
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							-									
Name of Registered W		2322	DEP V				oic Yards	Name of F								
Jupiter Environm	ental Service		uler ID 4782	NO.			Waste 3	Minerva		TIII						
City, State			-				posal Date	City, State		011						
Lincoln Park, NJ	Time	T:A-				9/2	20/13 Signature	Wayne	spurg,	OH	Data					
Completed By (Print or Pane Repic	i ype)	Title Gene	eral I	Mana	ger		Signature	_ (9	\	8/23	/13				
SB-41			-	_	_				40						_	

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

7/23/13 Type of Notificat [X] Initial Notification	tion Str	reet Ac	dress		sing Road	ry Affair ²⁶¹³ AUG 29							
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					08648		4						
Notification	25,838,93	avvi Ci	ICC VIII	C, 140	00040								
20	Na		Contact			Telephone	Number						
[] Cancellation	n W	/illian	n McB	ride		<u></u>							
			F	ACILI	TY INFORMATION	F 7	*						
Abatement is Ta	king Plac	e (3)				Type of Facility (4)							
ory						Subchapter 8 (O	her than K-12)						
						[x] Other (i.e. privat homes, etc.)	e and commercial	buildir	ngs,				
ı							- Lau						
	0	C)		10-	water Code (7)				3				
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companies,	Inc.	0	0110			Jupiter Environmenta	Services, In	C					
					1535353	N. I. and Carried							
7 Pleasant Hill Road													
City, State, Zip Code Cranbury, NJ 08512						City, State, Zip Code							
	Talan	h	VI. mala a c					ımher					
							License W			52			
o, cone			, ato (11)				Laboratories	LLC	2				
ng Abatement (C	heck only	one)			Street Address								
Vacated During	Entire Pe	riod of			2	2333 Route 22W							
	of Normal	Facilit	y Hours	-				50.00					
	<u>ant</u>					Union, NJ 07083							
all that apply)						#FOR HOOMOUNTS ON WARREN			200 CO 64				
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ete Hauler	NII	DEP V	Vaste	0	Cubic Yards	Name of Registered Lar	dfill						
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	***			100	Disposal Date	City, State							
				10	9/20/13	Waynesburg, OH							
							Data						
Туре)	Title	n m c 1 .	Manag		Signature		Date 8/23/1	3					
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Date of Notification (1)	4.00			Nanie o	of Building	OwneriOr	not after	(2)	101 Dave	of Health	& Ser	ior S	ervice	35		
8-15-2013	2813.AUC 20	٠		SJPa		+ mion op		(~)	ING DEP	. The Incular	<			_		
Agencies Notified	Type Notification		0-3	Street A					1>	(Sigh	eturc)			_		
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EPA DEP	Initial Amended			725 Jackson Ave. City, State, Zip Code										=1		
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	Emergency	(including		C. Charles C.		U30		<u> </u>								
DOH DCA	justification)			f Contact				Te	ephans Ni	my					
L DUA	Cancellation	n i	لـــــــــــــــــــــــــــــــــــــ	Wellin	4.4	-25 (7)								0		
Name of Facility Where	AL-1	-		FAC	KITY IMP	ORMATIO	解		_	*				-		
House	ADDRESS SAKE	IG LIDOR (3)					Type of Facili	ty (4)			O.VECTO	and the second			
								School (K-12)							
Street Address								Subchar	iter 8 (Oth	er Uhan K-1	2)					
54 Norman Place					-			Other (i.	s. private	i commerc	أتياظ أأها	dings	, hom	18S,		
City (5)		-				•		Square Feet	-14-	Floors						
Tenally								2000		Hoons		31dg. <i>i</i> 504	ge			
County (8)				Carak	D-4- (-)				2		100					
Bergen				STATE	Code (7)	1		Current Use (Prior If bo	ng demolis	(bed	ed)				
							House									
Name of Monitoring Firm	rirred by Building	OWNER (8)	ASCI	VI No.			of Abatement (-			-		
n/a				n/a			Lozr	ica Manage	ment C	orporatio	n					
Street Address		•						Address		•	~		-			
n/a						22 Troy Lane										
City, State, Zip Code						City, State, Zio Code										
n/a								oln Park, NJ	07025							
Project Manager for Mor	itorina Firm			Telepho	mo Ma				U/U33							
n/a			1	I =Iehtio	HID IND.			one No.		License P	4p.			9.50		
Start Date (10)								706-7950		01193						
8-16-2013				mplelion	Date (11)			of OSHA Month								
		8-17-2			4		Lozn	ica Manage	ment Co	irp.				39		
Occupancy Status Durin	3 Abatement (Che	ck Only O	ne)				Street.	Address	-							
Facility Closed/Vac	aled During Endre	Period of	Abeter	nent		- 1	22 T	roy Lane								
 Absternent Perkenn 	ed Outside of Nov	nal Facili	y Hour	S	12	- 1	Carlo Carlo	late, Zip Code	•							
Other - Describe:	9 am - 5 pm		11			- 1	and the second	oln Park, N.	107095							
Scope of Work (Check A	Il That Apply)							-in a Carry 2 de	, 01 000		•		-			
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× ≥160 at or ≥360 lt		-	Renova Demoli				-	Full Contain	ment with	Negative I	गटऱ्या	re				
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							×	Non-Exemp	ted (") and	Non-Friat	la Pro	cedur	e			
		Įs.	Locati	lon									ment	<u> </u>		
Location	of		Normal	liv		Duran	alaeta a		1				pe	3		
Asbestos-Containing		Use	ed Sole	ly by	Asbest	os Contali	ndirgin M oedn	eferial (ACM)	Α.	nount .		1				
TO BE ARA			intens todial 5		(i.e.	thermal sy	Stems	insulation.		pecify	27		6	m		
in Facili (13)	ξ y	-	(12)	-wait i	(50)	surfacin			SF	or LF)	Removal	Repair	Encepeulate	Endoeure		
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				JDEP W		Cubic Ya of Waste				ed Londin						
Loznica Managemer	10 - 3707	3137		TBD	P.C.	GRO	WS Lan	dfill								
City, State				-101		Disposal	Date									
Lincoln Park, NJ 070	35				1	TBD	Dara	City, St		-						
Completed by		Title				- 12			sville PA	-						
E. Cirovic		7.55				Sign	nature/	1		De		***				
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Aug 16 2013 07:48am

Aug 26 2013 01:52pm

P001/001

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

Date of Notification (1)				Alexan	of English	7.07		- VI	-	AP	PROVE	D	-			
8-26-2013				Name of Building Owner/Operator (2) RPM Developement Group					MADO	hof Hea	ith As	enior	Servi	ces		
Agencies Notified Typ	e Notification	1			Address		COLOR	Р	1-164	1C				_		
□ EPA ☑	Initial			L	ark Stree	7020		Date:	8/267	12	D	1351	pl			
E DOL	Amended Amendmer	4.8			tate, Zip C		122/012			ithor:		<u>'''</u>				
	Emergenn	(Inchedie	ng .	-	iclair, NJ				,		ت					
HOO BOH	justitication Cancelletto)	o≅://.	Amb	of Contact			N.	Te	lephone.	Numbe		=	-		
P					CILITY INF	ODMAT	ION		<u> </u>			_				
Name of Facility Where Abate	ment is Tak	ng Place	(3)		ALL THE	CACIDAL!	IUN	Type of Facility	v (4)				Ö			
House Street Address								School (A					227			
50 Trinity Street			University of					Subchard	er 8 (CM	er than k	(-12)					
City (5)								Other (Le	. private	& comme	wciel bu	tilding	s, hor	nes,		
Newton								Square Feet	#0	f Floors	-1	Blog,	Age			
County (6)											- 1	50±				
Sussex				County	Code (7) USE ONLY	2		Current Use (F	Ylar if be	ing doma	lished)					
Name of Monitoring Firm Hired	hv Baidine	Owner (0%		M No.		_	House for I		3						
n/a	n/a							of Abatement C	omtracto	(8)						
Street Address								oznica Management Corp.								
n/a						1	Street Address									
City, State, Zip Code						Troy Lane State, Zip Code										
n/a					coln Park, NJ	กว่างจะ										
Project Manager for Monitoring	Telepho	one No.			hone No.	0/000	111	DI.								
n/a	n/a				706-7950		License 01193									
Start Date (10)			Date (11)			of OSHA Monito	<u>-</u>									
8-27-2013	2013	3			rica Managen		MO.	*								
Occupancy Status During Abolt		X Only O	ina)					Address			-			_		
Facility Closed/Vacated Di Absternerk Performed Out	uning Entire	Period of	Abate	ment			22 1	roy Lane								
Abotement Performed Out Other Describe: 9em - 5	gui gine of Moli	racili	ly Hous	3 ·		ſ		tate, Zip Code			_					
Scope of Work (Check All That	Apply						Line	oln Park, NJ (7035							
E Zaran	77.97	п.	D				*WRAP & CUT PROCEDURES Full Containment with Negative Pressure									
☐ \$160 stor ≥280 g			Renova Demoli				þ	Full Containn Mini-Enclosu	servit which	Negative	Pressi	hte				
		7						Glovebag Pro	7							
		1.						Non-Exemple	d (°) and	Non-Fria	ible Pro	dedu	æ	200		
Location of		1 7	Locat Normal	Fire 1									emen	t		
Asbestos-Containing Materia	el (ACM)	:Use	d Sole	ny by	Achack	Desc	cription	of clerial (ACM)		868 OAS	-	17	ps			
TO BE ABATED In Faculty		Cus	ilntona todial s	nce/	(Le. 6	hermal s	vsteme	insulation.		nount recify	20		굨	m		
(13)			(12)			surfacion other mi	ng, VA	r, or		or LF)	Removal	Repair	OH D	ng.		
		Yes	No	N/A		02.0. 112		Ana)			\$	=	Enozpaulete	Enclosure		
Basement		+		1-1									100			
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bitne of Registered Waste Hauk			N.	JOEP WE		Cubic Y		Name of	Panister	ed Lameler				.		
.oznica Management Con	auler ID N 033137	vo.	of Wask		GROW		10 Sept.				ž į					
Alty, Strate			TED	Date			4181									
incoln Park, NJ 07035			Disposal TBD		City, State		****	-								
Completed by		TMe				Sin	nati ma	Morrisville, PA 19067								
E Cirovic		Secre	etary			1	6	-			ate or o	B4.4				
						1 0		ALLILA .	,	1 8	-26-20	IJЗ				

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

(A. ()							3 1 1 1 1 1	T 04	(0) 40					
Date of Notification (1) August 26, 201	3		Name of Building Owner/Operator (2) Chelsea Village Apartments Street Address Street Address											
15 3	Notific	ation		Street Address	3300]	Fairmount Avenue			` J 3	132	5			
[x] DOL Amer		t ncluding		City, State, Zip Coo		ic City, NJ 08401	Litenting	is EL						
I I DCA	ication) ellation			Name of Contact Lorett										
		I	ACI	LITY INFORM	ATION			.7						
Name of Facility Where Abatement is Taking Providence Apartn		(3)				Type of Facility (4)	School (k-12)	her tha	n le12)					
Street Address 3300 Fairmount A	venue					[x]	Subchapter 8 (of Other (i.e., priva homes, etc.)			ial buil	dings,			
City	Count	ty (6)		County Code (7) (STATE USE ONL)	Y)	Square feet 20,000 sf	# of Floors 2		g. Age 6	0				
Atlantic City	Atlaı	CONTRACTO					ent Building)						
Name of Monitoring Firm Hired by Building Guardian Contract				ASCM No.			r (9) an Contracting,	Inc.						
Street Address 1889 Rte. 9, Unit 6	61			Street Address 1889 Route 9, Unit 61										
City, State, Zip Code Toms River, NJ 08	3755				City, Sta	te, Zip Code Toms I	River, New Jersey 08755-1271							
Project Manager for Monitoring Firm Nicholas Fernicola		Telephone Nur 732-349-993				ne Number 9-9932	License N 00624	lumber						
Scheduled Start Date (10) 8/26/13		Scheduled Con 9/20/13	npletio	on Date (11)	Name of	OSHA Monitor E.M.S.	L. Analytical							
Occupancy Status During Abatement (Check		of Aba	tement	Street A		telton Road								
Abatement Performed Other – Describe	Outside	of Normal Facil	ity Ho	ours ———	City, Sta	ite, Zip Code Piscata	way, New Jerse	y 088	54					
Scope of Work (Check all that apply)					[]	Full Containmen Mini-Enclosure	t with Negative Pre	ssure						
[X] >3 sf or ≥3 lf [] ≥160 sf or ≥260 lf		F J	novati moliti		[x]	Glovebag Proceed	lure *) and Non-Friable	Procedi	ure					
								Abat	ement	Гуре				
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	dial //A	Ast N (i.e. inst	Description Descri	ntaining ACM) systems rfacing, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E					
Crawlspace	X			Asbestos pipe	insulatio	n	/2200 lf /	X						
*														
								-						
Name of Registered Waste Hauler Guardian Contracting, Inc.	1	NJDEP Waste H 2022		D No. Cubic Ya	rds of Was	Name of Regist	ered Landfill							
City, State Toms River, New Jersey		D		al Date	City, St		a							
Completed by (Print or Type) Nicholas Fernicola	Title Proje	ct Manager		Signature		Date 8/26/2013								

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

							4.	123											
Date of Notification (1) August 26, 201	3	#L	Name of Building Owner/Operator (2) Chelsea Village Apartments Chelsea Village Apartments Street Address 3300 Fairmount Avenue 2 2 3 2 4																
	tion l Notifica nded Noti			3300 Fairmount Avenue Q Q D Q V															
[x] DOL Amer	ndment #_ gency (in		Cit	ty, State, Zip Coo		ic Ci	ty, NJ 08401	eleph <u>one Number</u>											
I I DCA	ication) ellation		Na	ime of Contact Loretta		34													
			ACILI	TY INFORM	ATION														
Name of Facility Where Abatement is Taking Hartford Apartme		3)				Тур	be of Facility (4)	ity (4)] School (k-12)] Subchapter 8 (other than k-12)											
Street Address 3300 Fairmount A	venue						[x]	Other (i.e., priva homes, etc.)			cial bui	ldings,							
City	County	y (6)		inty Code (7) ATE USE ONLY	n	•	are feet 20,000 sf	# of Floors 2	Bldg. Age										
Atlantic City	Atlantic City Atlantic							being demolished)										
Name of Monitoring Firm Hired by Building Guardian Contract		00.50	ASC	CM No.	Name of	Abate	ement Contractor	ent Building (9) in Contracting,	Inc										
Street Address	.mg, me	·.			Street Ad	idress		in Contracting,											
1889 Rte. 9, Unit	51				City, Stat	. 7		oute 9, Unit 61	1										
City, State, Zip Code Toms River, NJ 08	3755				sey 08755-1271														
Project Manager for Monitoring Firm Nicholas Fernicola	Telephone Num 732-349-993			Telephon 732-349		mber	License N 00624												
Scheduled Start Date (10)	Scheduled Com	pletion I	Date (11)	Name of	OSH	A Monitor	. Analytical	-74											
8/26/13 Occupancy Status During Abatement (Check	9/20/13			Street Ad	idress		J. Allalytical												
[x] Facility Closed/Vacate		f Abatem	nent			1056 St	elton Road												
[] Abatement Performed	Outside o	of Normal Facilit	ty Hours		City, Stat	te, Zij													
[] Other – Describe							Piscatav	way, New Jerse	y 088	54									
Scope of Work (Check all that apply)					[]	I	Full Containment	with Negative Pre	ssure										
		r 1 -			[]		Mini-Enclosure												
[X] >3 sf or ≥3 lf [] ≥160 sf or ≥260 lf		L	novation molition		[x]		Glovebag Procedu	ire) and Non-Friable l	Procedi	ıre									
[] 2100 \$1 01 2200 11			HOHLIOH		LJ		von-Exempted (Tura rioni riabre	_										
									Abat	ement	Туре								
Location of		Is Location ormally used			Description estos-Con		nσ	Amount	R	R	E	E							
Asbestos-Containing Material (ACM)	- 11	Solely by		M	laterial (A	CM)		(Specify SF	E M	E P	N C	N							
TO BE ABATED	Maint	enance/Custod	lial		, thermal s			or LF)	0	A	A	L							
in facility (13)		Staff (12)		insu	lation, sur VAT, o		ıg,		V	I R	PS	S							
(13)		(12)		othe	er miscella		ıs)		Α		U	U R							
	YES	NO N/	A						L		L E	E							
Crawlspace	Crawlspace X					n		2200 lf	Х										
3																			
Name of Registered Waste Hauler Guardian Contracting, Inc.	N	JDEP Waste Hat 20223	3	30	rds of Wast		Name of Register T.R.R.F.	red Landfill											
City, State Toms River, New Jersey	100000	sposal D 23/13	rate	City, Sta		Pennsylvania													
Completed by(Print or Type)	Title		25504111000000	ignature	U/	1	/		Date										
Nicholas Fernicola		ct Manager		Ylich	W -	te			8/26	5/201	3								
	*D	o not use this f	form for	asbestos licen	surè exem	pted	activities.												