CK#3	3054			ICATIO	N OF ASE to NJAC	BESTOS	ABATE			برا	<u> </u>	7 E	1		
Date of Notification (1) 8/23/2017 Chec	k # 3054				of Building aints Cat					1 JG	2 9 20	17	P		D
Agencies Notified	Type Notification			Street A	Address est 13th	electric or	100000000		ASE		PRODUCTION OF THE PROPERTY OF	-		NI CONTRACTOR OF THE PERSON OF	
DEP DOL	Amended Amendment		_		ate, Zip C			of Language	Aoi	<u>.</u> (ENSING	iOL	<u> </u>		
☐ DOH	Emergency (justification)	including	1	Name o	of Contact					-		nber		-	
☐ DCA	Cancellation			Sister	Rita Ma	arie Fri	tzen								
None of Facility Mr.				FAC	ILITY INF	ORMAT	ION						6)	1.000000	
Name of Facility Where A			3)					Туре	of Facility (4))					
Street Address 19 W 13th Street									School (K-12 Subchapter 8 Other (i.e. pri	Oth	er than K-1 & commerc	2) ial buil	dings	, hom	es,
City (5) Bayone, NJ									etc.) are Feet	# 0	f Floors	100	3ldg. /	Age	
County (6)					Code (7)			100000000000000000000000000000000000000	ent Use (Prior	-	ing demolis		704		
HUDSON Name of Monitoring Firm	Hirad by Buildian C)			USE ONLY)		Sch	lool			.5)			
	Filled by Building C	wner (8)	ASCN	л No.		EA S	Servic	tement Contr ces Corpora						
Street Address							Street 426 6		ss Street						
City, State, Zip Code							100		ip Code g, NJ 0709	33					
Project Manager for Moni	toring Firm			Telepho	ne No.		Teleph 201-2	one N	0.		License N	lo.			
Start Date (10) 8/24/17		Schedul 8/25/1		npletion	Date (11)		Name	of OSI	HA Monitor	-	01074		ALS 18.		
Occupancy Status During	Abatement (Check			-			Street		above ss						
Facility Closed/Vaca Abatement Performe Other - Describe: S	ed Outside of Norm	eriod of a al Facility	Abatem / Hours	nent			City, St	ate, Z	ip Code	_					
Scope of Work (Chack All															
≥3 sf or ≥3 if ≥160 sf or ≥260 if			Renova Demolit				×	Mir Glo	I Containmen ni-Enclosure ovebag Proce n-Exempted (d are				e	
Location	of		Locati Vormal	20/		Dog	scription	of					Abate Ty	ement pe	
Asbestos-Containing I TO BE ABA In Facilit (13)	Material (ACM) TED	Ma	ed Sole intenar todial S (12)	nce/		tos Cont thermal surfac	aining M systems cing, VAT niscelland	aterial insula Г, or		(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A										te	CD
Basement-KinderG	Barden Room		X			Pop c	orn Ce	iling		1	2 SF	Х			
Name of Registered Wast Tri-State Transfer As			H	JDEP W auler ID 9551		Cubic of Was			Name of Re Minerva I						
City, State Bronx, NY							al Date		City, State	~	О Ц				
Completed by		Title					anatura	//	Waynesb	urg,					
Gina M Betances			e Mar	nager		Si	ignature	De	wear-		Da	te 23/17	7		



Date of Notification (1)			N	ame of	Building C)wner/	Operator (2)		7			
08 /	25 / 17				ammer			- U = [WBD	54	3		
Agencies Notified	Type Notification		S	treet Ac	ddress						-		
⊠ EPA									44				
⊠ DOLWD	Amended		C	ity Sta	te, Zip Coo	de		AUG 29	2017				
⊠ DOH	Amendment #				eck, NJ 0		The second of th						
☐ DCA	☐ Emergency (in	cluding	N		Contact		-1-1		T-1 -band Murr	her			
(NJAC 5:23-8)	justification)		"		ammer		A	SEA CA					
	Garreenation				LITY INF	ORM	ATION	- 1	-				
Name of Facility Where	Abatement is Takin	g Place (3	3)			0.0		Type of Facility (4	4)				
Residence	Abatement is Tukin	g / idee (e						☐ School (K-12)		27			
Street Address		-						☐ Subchapter 8 ☐ Other (i.e., pri	(Other than K-1)	2) ercial build	dinas		
Street Address								homes, etc.)	vace and ocum		J		
City (E)			-					Square Feet	# of Floors	Bldg	. Age	•	
City (5) Teaneck								2000 sf	2	6	5		
200				County	Code (7)(5	STATE	USE ONLY)	Current Use (Price	or if being demol	lished)			
County (6)				County	0000 (1)/(1			Residence					
Bergen Name of Monitoring Firm	a Uisad by Building	Owner (8)	IA	SCM N	0	Name	of Abateme	ent Contractor (9)					
		Owner (o)	' '`	0011111	0.			ntracting, Inc.					
Guardian Contrac	illig, illo.						t Address						
Street Address	4					188	39 Route 9), Unit 61					
1889 Rte. 9, Unit 6 City, State, Zip Code	<u> </u>						State, Zip C			1 - 1 - 1			
	loroov 08755					770		New Jersey 08	755				
Toms River, New . Project Manager for Mo			Telen	hone N	lo		hone No.	-	License No.				
Nicholas Fernicol				2-349-9			2-349-9932	2	00624				
		eduled Co	. 5.000			Name	e of OSHA N	Monitor					
Start Date (10) 09 / 06		09 /				E.I	M.S.L. Ana	lytical					
							t Address						
Occupancy Status Duri				nent	1		56 Stelton						
☐ Abatement Perform	ited During Entire P	al Facility	Hours	s - Desc	ribe		State, Zip C						
Time of Abatement:	AM	PM/	PM-		MA			New Jersey 08	854				
		-						ALCHOROLOGY AMERICA (A) TO COMPANY AND A					
Scope of Work (Check	all that apply)						☐ Full Cor	ntainment with Ne	gative Pressure				
≥3 sf or ≥3 lf		⊠ Rer					☐ Mini-En	closure ag Procedure					
☐ ≥160 sf or ≥260 lf		☐ Den	ПОПЦО	11			☐ Non-Ex	empted (*) and No	on-F iable Proce				
-		Is	Locati	ion						Ab	atem	ent T	уре
Location	on of		lormal				Description		Amount	Re	Re	En	En
Asbestos-Containir			d Sole ntena		Asbes	stos C	Containing M	laterial (ACM) s insulation,	(Specify	Removal	Repair	cap	Enclosure
TO BE A				Staff?	(1.6	SL	urfacing, VA	T, or	SF or LF)	<u>a</u>	,	Encapsulate	ure
(13	13 (7 .5 6)		(12)			oth	er miscellan	eous)				te	1
100.75		Yes	No	N/A						57			
boiler room			\boxtimes		asbesto	os pi	pe insulat	ion	40 lf		Ц		
											Ш	Ш	
			П										
Name of Registered V	/aste Hauler		I	NJDEP V	Waste		ic Yards of	Name of Reg	istered Landfill				
Guardian Contra			H	1auler II 2022		Was	ste	T.R.R.F.					
City, State	7,22			LULL		-	osal Date	City, State					
Toms River, New	Jersey					0	9/08/17	Tullytown	n, Pennsylvan	iia	,		
Completed By (Print of		Title					Signature			Date S	1-		
Nicholas Fernico	, , , ,	Project	t Mar	nager)	1.4		3	12	5/	1 1



Date of Notification (1)				Nam	ne of Buildin	g Owner/Operator	- (2)					
08/25	/1	7		100000	& A Demo		MEU	IVE	M) (SU	U
☑ EPA ☑ Initi ☑ DOLWD ☐ Amo ☑ DOH Amo ☐ DCA ☐ Emo (NJAC 5:23-8) just	100000	ŧ	- g	City, Hi	et Address 56 Campl State, Zip Ilsboroug e of Contact ntonio Din	Code h, NJ 08844	7	2017				7
				F/	CILITY IN	FORMATION	THE PERSON OF TH					
Name of Facility Where Abateme Building Street Address 39 Route 206 North City (5)	nt is Takin	g Place	e (3)		COLLITTI	TORMATION	Other (i.e., pr homes, etc.)	(Cther than K-12 iva e and comme	ercial bu		5338	
Somerville							Square Feet 3000 sf	f of Floors	1	ldg. A	.ge	
County (6) Somerset Name of Monitoring Firm Hired by	Building	Owner	(8)	Cou		()(STATE USE ONLY)		1 or i being demoli	- 1	70		
Guardian Contracting, Inc.							ontracting, Inc.					
Street Address			100			Street Address	g,o.					
1889 Rte. 9, Unit 61						1889 Route	9. Unit 61					
City, State, Zip Code						City, State, Zip C					_	
Toms River, New Jersey 08	3755						New Jersey 087	75 <u>!</u>				
Project Manager for Monitoring Fin	rm		Tel	ephone	No.	Telephone No.	20.00) 00.	License No.				
Nicholas Fernicola					9-9932	732-349-993	2	00624				
Start Date (10)	Sched	duled C	ompl	etion D	ate (11)	Name of OSHA	Monitor	00021				
09 /08 /17	_(09_/	_ 2	9 /	17	E.M.S.L. Ana	alytical					
Occupancy Status During Abatem	ent (Chec	k only	one)			Street Address	<u>.</u>					
☐ Facility Closed/Vacated During				ement		1056 Stelton	1					
☐ Abatement Performed Outside	of Norma	Facilit	у Ног	ırs - De	scribe	City, State, Zip C						
Time of Abatement:AM	P	M/	PN	l	_AM		New Jersey 088	54				
Scope of Work (Check all that app	ly)											
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		□ Re				☐ Mini-En ☐ Gloveba	ntainment with Nega closure ag Procedure empted (*) and Non		ire			
			Loca						Ab	atem	ent T	уре
Location of Asbestos-Containing Material (TO BE ABATED IN Facility (13)	ACM)	Use Ma	inten	ely by ance/ Staff?	(i.e	Description stos Containing Man, thermal systems surfacing, VAI other miscelland	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
throughout			\boxtimes		ashesto	s containing p	lastor	3400 sf				
office area	<u>**</u>				mastic	o containing p	iastei	600 sf				
exterior		П				s roofing						H
		П			usbeste	3 rooming	-	3550 sf	+-			
Name of Registered Waste Hauler				NJDEP	Masta	Cubic Yards of	Nows of Decist	11 120		Ш	Ш	Ш
Guardian Contracting, Inc.			100	lauler I 2022	D No.	Waste 30	Name of Registe T.R.R.F.	ere 1 Landrill				
City, State	110 100 000	25-				Disposal Date	City, State					
Toms River, New Jersey						10/2/17	100	Pennsylvania				
Completed By (Print or Type)	Title			4211-17-		Signature	1	1	ate	ŧ		
Nicholas Fernicola	P	roject	Man	ager				/	81	/20	://-	7



Date of Notification (1)					Name	of Building	Owr	ner/Operator (2)					
08/25	_ /	17			Five	Star Sei	rvice	es T	i i	IVE BOD	. 5	4_	5	
	Notification	on			Street	Address								
⊠ EPA ☑ Ini					2 C	oles Way		1.55		and the same of th				
	nended nendmen	+ #			City, S	tate, Zip C	ode		AUG 29	2017				
	nergency		ina		Lak	ewood, N	J 08	3701	5-8100 01100 - 100 -95500					
	stification		9		Name	of Contact				T slombout a Niverb	or			
☐ Ca	ancellation	n			Yeh	uda Brau	ın	AS	SELL CANS					
					FAC	ILITY IN	FOR	MATION						
Name of Facility Where Abatem	ent is Tal	king Pla	ice (3)					Type of Facilit	5. 3.7				
Residence						es escoupe			Subchante	12) r 8 (C ther than K-12)				
Street Address										private and commercial	ial bu	ilding	S,	
City (5)								103-4827	Square Feet	# of Floors	Blo	lg. Ag	ie	
Lakewood									2500 sf	1		55		
County (6)					Coun	ty Code (7)	(STA	TE USE ONLY)	Current Use (I	Prior f being demolis	ned)			
Ocean					100000000000000000000000000000000000000		.		Residence	was made of the same				
Name of Monitoring Firm Hired I	ov Buildin	ng Owne	er (8)	1	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)				
N/A							2000		ntracting, Inc	2.5				
Street Address								et Address	3,					
						18	889 Route 9	, Unit 61						
City, State, Zip Code							City	, State, Zip Co	ode					
							T	oms River,	New Jersey (8755				
Project Manager for Monitoring	Firm			ele	phone	No.	Tele	ephone No.	Beni	License No.				
							7:	32-349-9932	!	00624				
Start Date (10)	Scl	heduled	Com	plet	tion Da	te (11)	Nan	ne of OSHA N	1onitor					
09 /05 /17		_09	. / _	07	_ / _	17	E	.M.S.L. Ana	lytical					
Occupancy Status During Abate	ment (Ch	neck on	ly one	(e)			Stre	et Address						
☐ Facility Closed/Vacated Duri							10	056 Stelton						
Abatement Performed Outsid							City	, State, Zip Co	ode					
Time of Abatement:A		_F'\\/_		-101-		AIVI	Р	iscataway, l	New Jersey (1885				W
Scope of Work (Check all that a	pply)							□ Full Con	tainment with N	egati /e Pressure				
≥3 sf or ≥3 lf			Reno	vati	on			☐ Mini-End		legative Flessure				
≥160 sf or ≥260 lf		\boxtimes	Demo	olitio	n				g Procedure	Non-Friable Procedur	•			
			Is Lo	ncat	ion			M MOII-LAG	impled () and i	Table Flocedul	_	atem	ant T	VDA
Location of			Nor	mal	lly			Description of	of			_		
Asbestos-Containing Materia	al (ACM)	2.23	Jsed S Maint		-			Containing Ma		Amount	(em	Repair	nca	nclo
TO BE ABATED IN Facility			ustoc	lial S	Staff?	(i.e.		rmal systems urfacing, VAT		(Specify SF or LF)	Removal	=	Encapsulate	Enclosure
(13)			- 1	12)	I			ner miscellane			1		late	O)
		Ye	es	No	N/A					1			1500	
exterior						asbesto	s si	ding		1500 sf				
								10.5						
Name of Registered Waste Hau	ler			23.0	JDEP \		6267330	oic Yards of	Name of Re	gistered Landfill				
Guardian Contracting, In	c.			H	auler II 20223		Was		T.R.R.F.					
City, State		and the second second	100000				CONTRACT.	oosal Date	City, State					
Toms River, New Jersey							0	9/08/17	Tullytow	n, Pennsylvania				
Completed By (Print or Type)		Title					- 4	Signature	Λ	<i>(</i>) Da	te			
Nicholas Fernicola		Proje	ect N	lana	ager			1	1. Le	1	8/)	5/	17	Ė



ate of Notification (1)			1			uilding Ow u lhollan	vner/Operator (2)				3:	2 5	>41	P		
08 /	25 /1	17				100	iu .										\dashv
gencies Notified	Type Notificatio	on		Stree	t Addr	ress										-	
EPA	☐ Initial									prants,	- 1	- 11 - I	77	-W	E	1	T
DOLWD	Amended					Zip Code					-] ly	11	- (1)			
☑ DOH	Amendment ⊠ Emergency			Lit	tle E	gg Harb	or, NJ 08087			1	1	hone Min					H
DCA (NJAC 5:23-8)	justification)			Name	e of C	ontact					Dica	hana		101	7	HU	
(NJAC 5.25-0)	☐ Cancellation			Jo	hn M	ulhollar	nd			177				z -	4		4
				FA	CILI	TY INFO	RMATION			-	Common .				-	_	_
lame of Facility Where A	Abatement is Tak	king Place	(3)	0-41.50							AI3	Err -			OL.	&	2000
Residence	Abatement io 1 a.	9	, ,						School (K	(-12)	745 5	r than K-1	ENSI	illi			-
									Other (i e	er o (c	ate a	and comm	nercial	buildi	ngs,		
Street Address									homes, e	etc.)							
								Squ	are Feet		#)	f Floors		Bldg.	Age		
City (5)								1.50	500 sf		1			65	No.		
Little Egg Harbor				Co	unty C	ode (7)(S	TATE USE ONLY)	Cur	rent Use	(Prior	TIFT R	eing demo	olished	d)	n n	[==	Promotion of
County (6)				00	unity C	, , , (0		R	Residen	ce	[,]		, =	II.	W		
Ocean			0)	1001	M No.	I N	Name of Abatem				- A-1		A				The second
Name of Monitoring Firm	n Hired by Buildir	ng Owner (8)	ASCI	VI INO.	,	Guardian Co					S (S)				-	
N/A							Street Address	111110	.0			ÁU	1G 2	9 2	2017	11	
Street Address						5	1889 Route 9	a 11r	ait 61	ì		1					
										-		ASE	200			1 0	
City, State, Zip Code						(City, State, Zip C Toms River,	Mov	u lorse	087	55	AOLES	CAN	usini Wirk	G	/L Ct	å li
								IACA	V 0613C	y out		cense No.			the Street of Street		
Project Manager for Mo	nitoring Firm		Tele	ephor	ne No.	.	Telephone No.	2			-	00624					
							732-349-993	4							_		
								N. A i	hor			100					
Start Date (10)		cheduled (/	Name of OSHA										
Start Date (10) 09 / 07	200	cheduled 0				7_	E.M.S.L. An										
09 / 07	/17	09	0			7_	E.M.S.L. And Street Address	alyti									
09 / 07 Occupancy Status Durin	ng Abatement (Cated During Entir	09 Check only re Period of	one) Abate	8_ emen	/ <u>1</u>	7	E.M.S.L. And Street Address 1056 Steltor	alyti n	cal								
	ng Abatement (Cated During Entired Outside of No	09 Check only re Period of ormal Facili	one) Abate ty Hou	emen	t Descri	be	E.M.S.L. And Street Address 1056 Steltor City, State, Zip C	alyti n Code	cal								
09 / 07 Occupancy Status Durin	ng Abatement (Cated During Entired Outside of No	09 Check only re Period of ormal Facili	one) Abate ty Hou	emen	t Descri	be	E.M.S.L. And Street Address 1056 Steltor	alyti n Code	cal	y 088	354						
	ng Abatement (Cated During Entired Outside of No.	09 Check only re Period of ormal Facili	one) Abate ty Hou	emen	t Descri	be	E.M.S.L. And Street Address 1056 Stelton City, State, Zip C Piscataway	n Code , Nev	cal w Jerse			Pressur	e				
	ng Abatement (Cated During Entired Outside of No.	09 Check only re Period of ormal Facili PM/	one) f Abate ty Hou	emen urs - [t Descri	be	E.M.S.L. And Street Address 1056 Steltor City, State, Zip (Piscataway	n Code , New	w Jerse			e Pressure	e				
	ng Abatement (Cated During Entired Outside of No.	09 Check only re Period of ormal Facility PM/	one) f Abate ty Hou PM	emenurs - [t Descri	be	E.M.S.L. And Street Address 1056 Steltor City, State, Zip C Piscataway	Code , New	w Jerse	h Neg	ative						
09 / 07 Occupancy Status Durin ☐ Facility Closed/Vaca ☐ Abatement Performe Time of Abatement: Scope of Work (Check	ng Abatement (Cated During Entired Outside of No.	09 Check only re Period of ormal Facility PM/	one) f Abate ty Hou	emenurs - [t Descri	be	E.M.S.L. And Street Address 1056 Steltor City, State, Zip C Piscataway	Code , New	w Jerse	h Neg	ative			Abe	otomo	nt Tv	ine.
	ng Abatement (Cated During Entired Outside of No.	09 Check only re Period of ormal FaciliPM/	one) Abate ty Hou PM tenovalemolii	emenurs - [t Descri	be	E.M.S.L. And Street Address 1056 Steltor City, State, Zip C Piscataway Full Co Mini-Er Glovet Non-Er	Code , New ontain nclos	w Jerse	h Neg	ative			Aba		ent Ty	
	ng Abatement (Cated During Entired Outside of No	09 Check only re Period of ormal Facili PM/	one) Abate ty Hou PM denova emoli	emenurs - [t Descri	be A	E.M.S.L. And Street Address 1056 Steltor City, State, Zip C Piscataway Full Co Mini-Ei Glovet Non-Ei Description	Code New	w Jerse mment with sure rocedure oted (*) a	h Neg	ative		cedure	Aba			
	ng Abatement (Cated During Entired Outside of No		one) Abate ty Hou PM tenovalemolii	emenurs - [Mation tion ally olely the	t Descri	be Ashes	E.M.S.L. And Street Address 1056 Steltor City, State, Zip C Piscataway Full Co Mini-Ei Glovet Non-Ei Description stos Containing N thermal system	alyti Code New ontain ncloss pag P Xxemp Mateins ins	w Jerse mment with sure Procedure oted (*) a	h Neg	ative	Amount (Specify	cedure t	Aba	ateme Repair		
	ng Abatement (Cated During Entired Outside of No. AM all that apply) on of ng Material (ACM	09 Check only re Period of ormal Facility PM/	one) Abate ty Hou PN denova emoli Is Loc Norm sed So Maintel ustodia	emenurs - [Aation tion tion tion tion tion tion tion	t Descri	be Ashes	E.M.S.L. And Street Address 1056 Steltor City, State, Zip C Piscataway Full Co Mini-Ei Glovet Non-Ei Description stos Containing Non-Ei thermal system surfacing, VA	alyti Code New Introduction The code The	w Jerse mment with sure Procedure oted (*) a	h Neg	ative	iable Proc	cedure t	Aba			e Enclosure
	ng Abatement (Cated During Entired Outside of No. AM all that apply) on of ng Material (ACM BATED acility		one) Abate Abate PM Senova Semoli Is Loc Nom sed So Mainte justodia (1	emen ation tion ation ation all Sta 2)	t Descrii_AN	be Ashes	E.M.S.L. And Street Address 1056 Steltor City, State, Zip C Piscataway Full Co Mini-Ei Glovet Non-Ei Description stos Containing N thermal system	alyti Code New Introduction The code The	w Jerse mment with sure Procedure oted (*) a	h Neg	ative	Amount (Specify	cedure t	Aba		nt Encapsulate	1000
	ng Abatement (Cated During Entired Outside of No. AM all that apply) on of ng Material (ACM BATED acility	09 Check only re Period of ormal Facility PM/	one) Abate Abate PM Senova Semoli Is Loc Nom sed So Mainte justodia (1	emennation tion ation ally blely I nance 2)	t Describ	be M Asbes (i.e.	E.M.S.L. And Street Address 1056 Steltor City, State, Zip C Piscataway Full Co Mini-Er Glovet Non-Er Description stos Containing N , thermal system surfacing, V other miscella	alyti Code New Introduction The code The	w Jerse mment with sure Procedure oted (*) a	h Neg	ative	Amount (Specify SF or LF	t y =)	Removal	Repair	Encapsulate	1000
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification (1) Name of Building Owner/Operator (2) Edward Symons 8/25/2017 Agencies Notified Type Notification Street Address []EPA [X] Initial Notification []DEP City, State, Zip Code []Amended Verona, NJ, 07044 [X] DOL Notification [X] DOH Name of Contact Telenhara M. A JOL & [] EMERGENCY Edward Symons []DCA NG []Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Edward Symons []School (K-12) []Subchapter 8 (Other than K-12) Street Address [X]Other (i.e., private & commercial buildings, homes, etc.) # of Floors Square Feet Bldg. Age City (5) County (6) County Code (7) (STATE USE ONLY) Verona Essex Current Use (Prior if being demolished) Name of Monitoring Firm hired by Building ASCM No. Name of Abatement Contractor (9) Owner (8) AZTECH MANAGEMENT, Inc. N/A Street Address Street Address 86 Christopher St. City, State, Zip Code City, State, Zip Code Montclair, NJ 07042 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number N/A (973) 744-8800 00371 Scheduled Start Date (10) Sched. Completion Date (11) Name of OSHA Monitor 03- 17 09-09-06-17 N/A Month Day Year Month Day Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period of Abatement []Abatement Performed Outside of Normal Facility City, State, Zip Code Hours - Describe: «OffHours Descript» []other - Describe: «Other Occupancy Descript» Scope of Work (Check all that apply) []Full Containment with Negative Pressure [X] > 3 sf or > 3 lf [X] Renovation [X]Mini-Enclosure []>160 sf or >260 lf [X]Glove-bag Procedure []Demolition []Non-Friable Procedure Is Abatement Type Location Location of Description of Normally Used NCHOSU Asbestos-Containing Asbestos-Containing Amount Material (ACM) Solely Material (ACM) (Specify M O V APSUL TO BE ABATED By Maintenance/ SF or (i.e., thermal systems Custodial In Facility insulation, surfacing, VAT, LF) Staff (12) A (13)or other miscellaneous) No R Yes N/A Basement Pipe Insulation 2.5 LF 1.5 LF Wash & Clean piping Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste 0.5 AZTECH MANAGEMENT, INC. Minerva Erterprise INC 17040 City, State Disposal Date City, State Montclair, NJ 07042 09/07/17 Waynesburg, Ohio 44688 Completed By (Print or Type) Signature Date Constantine Vivian President 8/25/2017

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City (5) UNION CITY								e Feet	# •)	f Floors	E	Bldg. A	\ge	
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Name of Monitoring Firm Hired by Building RJB ENVIRONMENTAL, INC.	Owner (8)	ASCN	/ No.		SAME TO COLD PROCESS		ement Co		(9) TRACTIN	IG, IN	IC.		
Street Address 56 EAST BRIDGE STREET							Addres REEL	s AND AV	/ENU E	:				
City, State, Zip Code MORRISVILLE, PA 19067								p Code NJ 075	12					
Project Manager for Monitoring Firm RICK BEACH			Telephor 267-99	ne No. 91-9212			one No 956-8			License N	No.			
Start Date (10) 9/5/2017	Schedul 9/13/2		npletion I	Date (11)				A Monitor (9) ABC						
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renova Demolit					Mini Glov	i-Enclosur vebag Pro	e cedure	Negative I			е	
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole aintenar todial S (12)	ly by nce/		tos Conta thermal surfac		aterial insulat T, or		(3	mount specify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										te	O
TANKER STORAGE ROOM	X				EAN UF									
	-				STEM	2000								
				IN	SULAT	ION/D	EBRI	S/						
					IIMATI		DEB							
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING	3	Н	JDEP Wauler ID 8743		of Was					red Landfil NAGEME		i.R.C	.W.	S.
City, State TOTOWA, NJ					Dispos 9/13/2	al Date		City, Stat		E, PA				
Completed by VIVECA RAMOS	Title PRO	JECT	COOR	RDINAT		gnature		. 1)		ate 25/20)17		

State of New Jersey

State of NJ

B & G proj. #: 2017-116

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

	A	(2)	_		*	**	EMER	GΕ	N C Y ***		Cł eck	#8541				_
Date of Notification	(1)		116	lame of	Building O	wne	r/Operator (2)			Tr	NEW:	= \	VI E	1	11	
0 8 1/12 4	1/11	71	11"		outh Univ						نا فا ال				1	
Agencies Notified		otification	\dashv	treet Ad		vei	Sity			1	- 5			111	Щ	
☐ EPA	1 100000	11 (8)	110		oress edar Ave	nıı	``				LI AUG	292	017	IL	1	
☐ DEP	√ i	nitial					e 			1	. text			-		
☑ DOL	□ A	mendmen			e, Zip Code Long Bra		h, NJ 0776	4		And a	ASELL	1 JUN	. OI	 _&.	Separate Sep	
✓ DOH			N	ame of 0	Contact			****		Bagnoor	Tale I	-NISIN(-	
☐ DCA	☐ Ca	ancellation		Tim (Orr											
					FA	CIL	ITY INFORMA	ATION	ı							
Name of facility wh	ere abate	ment is tal	king pla	ice (3)						T	Type of Fac lity (- 50		
Monmouth Un	iversity	- Cedar	Hall								=	(K - 12)			40)	
Street Address						_		_				apter 8 (0 Private/0			-12)	
400 Cedar Av	enue											Homes, e		, Olai		
	enue										Square Feet	# of Floo	rs	Blo	dg. A	ge
City (5)			Cour	ity (6)					nty Code (7)	L						
West Long Br	anch		Mon	nouth				(Sta	te use only)		Current Use (P non-Sub 8	rior if beir	ig dem	olishe	ed)	
Name of Monitoring	g Firm Hire	ed by Bldg	. Owne	er (8)		T	ASCM No.		Name of Abatemen	t C	ontractor (9)					
AHERA Consi	ultants, l	Inc.					0057		B & G Restorat	ion	i, Inc.					
Street Address						=1			Street Address							Vale Ada
PO Box # 385									105 Ryerson Ro		1					
City, State, Zip Code									City, State, Zip Code	е						
Oceanville, N.						_			Lincoln Park, 1		07035	T.	· ·			
Project Manager for	Monitorin	g Firm			Phone Nur				Telephone Number 973-696-6869			License 0378	Numb	er		
John Smoyer					609-652-				Name of OSHA Mo	nito		0376	-			
Scheduled Start Dat	te (10)		Sched	. Compl	etion Date	(11)			B & G Restorat							
08/26/2017			08	27/20	17				Street Address			-				
Occupancy Status D	Ouring Aba	tement (C	heck o	nly one)		-			105 Ryerson R	oac	i					
Facility closed Abatement pe Describe:									City, State, Zip Cod	е						
Other-Describ	e:							-1	Lincoln Park, 1	NJ (07035					
Scope of Work (che	eck all tha	t apply)										wrap	& cu		_	-
Demolition		 Rei	novatio	n				□F	ull Containment w/n	ega	ative pressur ;	Glove	bag pr	ocedu	ire	
$\sqrt{}$ >3 sf or >3 If		□ >16	0 sf or	≥260 If				V N	/lini-enclosure]	Non-f	riable p	roce	dure	
Location of		ls	location	norma	lly used sol	ely					T		TR	R	Ε	E
asbestos-con			mainte	enance/o	custodial		Descriptio	n of a	sbestos-containing		Amount	_	e m	e p	n C	n
material to be abated in faci		-		·	T	-	material (A	ACM)			(Specify S	F or	0	a	a	C L
abated iii idol	my (10)	,	res	No	N/A						,		e	r	р	_
rear hallway					X		texture A	ACM	paint		10 sf					
legistered Waste H				P Haul	er ID#	Cu	bic Yards of V	Vaste	Name of Registere			Cantor				
B & G Restoration	on, inc.		195	03	Disposa	IDa	2 ite		Tullytown Reso	Jur	ce & Recovery	Center			-	
City, state Lin oln Park, N.	J 07035				4 2 2		8/2017		Tullytown, PA							
Completed by (Print		Titl	le			T	Signature	_	1	-		Date				
Gordana Luna	25-7			y/Treas	urer		4		Gordana Luna			0	8/24/	2017		

State of NJ Notification of Asbestos Abatement

8 & G proj. #: 2017	-116	. (F	ursuant to NJA *** E M E	C 8:6	0-7 and (2:120-7) ENCY***	-Chi	est Hoca	á	• • • • • •	Į.		
Date of Notification (1)	.11	Name of Build	ing Owner/Operator	CONTRACTOR OF THE PARTY OF THE		<u> Uni</u>	sck #854		-	-		_
10181/12141/11	·	Monmouth	University	(2)						1		
	otification	Strast Address				Control of the Contro			×	1		
	nitial	400 Ceda					11/		- 100		-	lles .
	. 11	City, State, Zip		_		-	TH/	;; · i		1	- 11 7	VII E
DOT U	mendment		Branch, NJ 07	784	iii	ner on the seconds .		ر بدنا	ĬΫ			¥ [
DOH _	11	Name of Conta	d Signor, 110 or	104		ust Ett.	THAT			, ,1		i lisa mana
D DCA D	ancellation	Tim Orr			i 7	Telep?	طشام إطنام	41		0		04.0
			FACILITY INFOR	TAAATI	ON		iii)		-	G i	29 2	017
Name of facility where abates	ment is taking p	ace (3)					1 1					OL
Monmouth University -	Cedar Hall					Type of Facility	y (4) A	SLI	. 32	105	NSINC	
Street Address		March Street Street Street					chapter 8 (DIMONIN BYON	nderum inte	NAME OF TAXABLE PARTY.	AND REAL PROPERTY.	
400 Cedar Avenue	r					₩ Othe	r (Private/C	מחמי	engi medi	n n-+.	2)	
						Bldg	a/Homes,	stc.				
Gity (5)	Cou	nty (G)		To	ounty Code (7)	Square Feet	# af Floo	18		Bldg.	Age	
West Long Branch	Mon	mouth	23	(8	tate use only)	Current Use (Delay divers		L			
ame of Monitoring Firm Hired						non-Suh A	F NOT T DOI!	iĝ del	noll	ahed)		
AHERA Consultants, In	ic.	11 (0)	ASCM No.		Name of Absternant	Contractor (9)	Charles of Section 19					
real Address			0057	Mint-News	B & G Restoration	n, Inc.						
PO Box # 385	*		•		Sireel Address	The state of the s						
, State, Zip Code					105 Ryerson Roa	<u>d</u> .						
Oceanville, NJ 08231-0				1	City, State, Zip Code			HERE BOY		Ž.		
ect Manager for Mankoring	Firm	Phone	Number	-	Lincoln Park, NJ	07035						
hn Smoyer			2-1833	ļ	973-696-6869		License	Muin	er		MCHININA.	
eduled Start Date (10)	IScharl	Completion Da		-	Name of OSHA Monitor		03.78		_			
08/28/2017		27/2017	(Car (11)		B&G Restoration						2.57	
upancy Status During Abater	mani (Ohna)	2112011			Street Address	is int.		-			-	
[Facility closed/vacated due	Ind entire perior	d of whether it			105 Ryerson Road	i	×					
Abatement performed outs Describe:	ide of normal te	cility hours-		- 1	City, State, Zip Code							
Other-Describe:		- Angel demonstrated		_								
ope of Work (check all that ap	(via	The same of the sa		-	Lincoln Park, NJ	07035		NAME OF TAXABLE PARTY.				
Dame IV	Renovation			_		ī	wrap &	tuo s				
- C - C - C - C - C - C - C - C - C - C] ≥160 afor=	zen iá			uli Containment winega		Glovebs					
Location of		wimally used a	alaivi -	N V	dini-enalazure		Nun-fela	ble p	Mode	dura		
scesios-containing	by mainten	ance/oustodial			•			RT	R	5	E	
material to be absted in facility (13)	3tsff(12)		material (A	notes LCM)	sbestes-containing	Amount (Specify R	E or	m	6 D	n c	n	
	Yes	No N		19		(Specify S	. ui	9	5	ă	C L	
ear hallway		X	texture A	CM	neini	-		8	-	ρ		
					WHIT I	10 sf		<u>a</u> [
			-		•]			
									1			
				-			1	110	-			
tored Waste Hauler G Restoration, Inc.	NUDEP	Rauler ID#	Cubio Yarda of VV	dala	Name of Registered La	ressil	A 300		1		П	
Xale	19563		2		Tullytown Resource	& Recovery	Center					
coln Park, NJ 07035		Disposi	3/28/2017		City, State		Medicalism Michigano	halletti liller	- Auditor		-	
	The state of the s	- J			Tullytown, PA							
leted by (Print or Type)	Trib	Marie Company of the last of t	Signature		Condona Luna	- Roch street, ey			-			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

UN"	0414	1		(Pursuan	t to NJA	C 8:60 and	d 12:120)	A series	1	<u> </u>	's II	141	
Date of Notification	(1)	Jol	#: 96	70.01	Nar	me of Bu	ilding Owr	ner/Operator	(2)	111				
August 25, 2017					Del	aware R	iver Port	Authority			AUG	29	201	
Agencies Notified	Notificat	ion Type				eet Addre		Authority	114	1 20				
□ ЕРА		Notifica	tion.		One	e Port C	ontor			-	production management of			01 (
DEP	Amer		uon				Zip Code			Δ	SE	3.00	61/21	UL C
⊠ DOL		nendmer							L	contr. Unit	- 1	CENSI	IVO	and the second
□ DOH □ DCA	☐ Emer		ncludin	g		nden, No				_				
Ц ВСА	☐ Cand	ication)			Ivaii	ne or cor	macı				Tele	phone I	Numbe	er
		Schallori			Rob	ert Trav	er, PATC	0						
N (5 m) (10					FAC	CILITY IN	VFORMAT	TION			3 500			
Name of Facility Wh									Type of Fa	cil y	(4)			
PATCO Lindenwold	d Station -	Train Ca	r Abat	ement					☐ School	(K 1:	2)			
Street Address									☐ Subcha	pter	8 (Other th	nan K-1	2)	
801 Berlin Road N.									Other (.e. pr	rivate & (c	ommerc	ial bu	ldings
City (5)									homes, Square Fe		# of Floo	ore	RIG	g. Age
Lindenwold									50,000		1	,,,,	50	y. ny
County (6)					Cou	nty Code	(7) (ST	ATE	Current Us	e ()r	ior if being	demoli	shed)	
Camden					USE	ONLY)			Public tran				,	
Name of Monitoring	Firm Hired b	y Buildir	ng Owr	er (8)	ASCN	/ No.	Name o	of Contractor						
Criterion Labs					178			Group Reme		S				
Street Address					1		Street A	Address	diation, inc					
100 Street Road							1400 A	dams Road,	Suite L D C		6			
City, State, Zip Code							City. St	ate, Zip Code	Suite i, P.C	. 1 0	X O		-	
Bensalem, PA 1902	0							em, PA 1902						
Project Manager for I		irm	Telep	hone Nu	ımber			ne Number	.0					-1122
Michael Panepresso					Ext. 26		D 1650000			LICE	ense Numb	per		
Scheduled Start Date		School		mpletio			215-533			0 8	58			
September 15, 2017	30 50				11 (11)		freeze see co	f OSHA Mon	itor					
Occupancy Status Du		ment (Ch	eck on	5, 2018			Criterio Street A	n Labs						
							4/04/2009/20							
Facility Closed/Va Abatement Perfore	med Outside	e of Norr	Period	of Abate	ement			eet Road						
Other - Describe:		0 01 14011	nai i a	anty 1100	115 -		Commence of the commence of th	ate, Zip Code						
						1	Bensale	em, PA 1902	0					
Source of Work (Che	ck all that a	pply)												
>3 sf or >3 lf >160 sf or >260 lf				-	enovation	1		Full Cont	ainment witl	n N ed	ative Pres	ssure		
_ > 100 St of >260 If				∐ De	emolition			Mini-Encl Mini-En	osure		***************************************			
								☐ Glovebac				_		
			102					□ I40II-LXCI	iipteu () ai	u 1 10	n-rnable i	roceau	ıre	
			Locati										Abat	emen
Location of Asbe	estos-		mally t Solely b			D	oo orintia.	_f			8		Т	уре
Containing Materia			intenar		Asbe	stos Cor	escription ntaining M	oi aterial (ACM	\		ount ecify			
TO BE ABATE	ED		Custodi	al	(i.e	., therma	al systems	insulation,	'		or LF)			Ψ.
IN Facility (13)			Staff? (12)			surfa	acing, VA7	Γ, or			,	Remova	Repair	Encapsulate
(.0)			(12)			otner	miscellan	eous)				10/	pai	nsc
		Yes	No	N/A								<u> </u>		ate
rain Undercar (38 T	rains)	X	INO	IN/A	ACM P	ad			105-	- F				188.0
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											-			
ame of Reg. Waste I	Hauler		l Ni	IDED	1			1						
				JDEP Wauler ID		Cubic \ of Was		Name of F	Reg. Landfill					
rime Group Remedi	ation Inc.			272	nt.	or vvas	ne .	Western I	Berk Comm	un t	/ Landfill			
ity, State							al Date	City, State		-,	,			
ensalem, PA 19020						09/15/2		10.3445.000000000000000000000000000000000	, PA 19608					
ompleted by	Title	9					Signature	e - Dil usboro	, FM-19008		TD	ate		
ncent Primavera	Pro	ject Mar	ager			Ł								_
-41	110	Joot Mal	agei				-	1954			A	ugust 2	25, 201	7

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY - REGIOI 2 Division of Enforcement & Compliance Assistance - Air Compliance Branch (DECA-ACB) 290 Broadway - 21st Floor New York, NY 10007-1866

	NOTIFIC	CATION OF DEMO	DLITION AND REI	NOVATION	-	112		T 7/7	E M
Operator Project #	Postma	rk		ate Received		iiii	IU N	otification	5 11
			1		1160	-dum		The same of the sa	
			1						
I. TYPE OF NOTIFICATION (O-Origin	ol / Po Posicosi)				111		UIG 2	9 2017	1111
The state of the s	0-	Original			1				
II. FACILITY INFORMATION (identify of	owner, removal contracto	or, and other oper	rator)			<u> </u>		transaction to the first term	
OWNER:		72	382			ASE	77.15	(1,1,1)	L &
Delaware River Port Author	rity				Lauren D	Monte consumerates .	LICEN	SING	
Address:								,	
One Port Center City:			T a.						
Camden			State: NJ			Zip:	08101		
Contact:			1 110			Tel:	00101		
Robert Traver, PATCO REMOVAL CONTRACTOR:	-						856-772-	6906	
Prime Grou	up Remediation, Inc. (NJ	DOL# 00858)							
Address: 1400 Adams Road, Suite I, I		•							
City:	P.O. Box 6		State:			-			
Bensalem			PA			Zip:	19020		
Contact: Vincent Primavera						Tel:	10020		
OTHER OPERATOR:							215-533-3	3503	
There is no	other operator.								
Address:									
City:			State:			7			
			State.			Zip:			
Contact:						Tel:			
III. TYPE OF OPERATION (D = Demolitic	on / R - Renovation):								
	P	- Renovation							
IV. IS ASBESTOS PRESENT? (Yes/No)	Yes						V-10-102-7	Cross-	
V. FACILITY DESCRIPTION (include but	illding name, number and f	loor or room numb	nerl:						
Building Name:									
Building Name: PATCO Lindenwold State Address:	ation - Train Undercar Ab		,						
Building Name: PATCO Lindenwold Sta Address: 801 Berlin Road N.			ici j.						
Building Name: PATCO Lindenwold State Address:			ici j.						
Building Name: PATCO Lindenwold Sta Address: 801 Berlin Road N. Address:			State:			County			
Building Name: PATCO Lindenwold Sta Address: 801 Berlin Road N. Address: City: Lindenwold						County	Camde	n	
Building Name: PATCO Lindenwold Sta Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar			State:			County		n	
Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size:		atement SqFt:	State:	# of Floors:		County	Camde		
Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a	ation - Train Undercar Ab	atement	State:	1		County			
Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility	ation - Train Undercar Ab	SqFt: 50,000	State: NJ	Prior Use:	intenance		Age in Ye	ears:	
Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility VI. PROCEDURE, INCLUDING ANALYTI	ation - Train Undercar Ab	SqFt: 50,000	State: NJ	Prior Use:	intenan(e		Age in Ye	ears:	
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Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility VI. PROCEDURE, INCLUDING ANALYTI	ation - Train Undercar Ab GqMeter: CAL METHOD, IF APPRO	SqFt: 50,000	State: NJ O DETECT THE	Prior Use:	intenance		Age in Ye	ears:	
Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility VI. PROCEDURE, INCLUDING ANALYTI OF ASBESTOS MATERAL: Polarized light microscopy (PLM) analysis	SqMeter: CAL METHOD, IF APPRO	SqFt: 50,000 DPRIATE, USED 1 y a building insp	State: NJ O DETECT THE ector.	Prior Use: Ma PRESENCE		Facility	Camde Age in Ye	ears: 50	
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Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility VI. PROCEDURE, INCLUDING ANALYTI OF ASBESTOS MATERAL: Polarized light microscopy (PLM) analysis	SqMeter: CAL METHOD, IF APPRO	SqFt: 50,000 DPRIATE, USED 1 y a building insp	State: NJ O DETECT THE ector.	Prior Use: Ma PRESENCE	REMOVE	Facility SPEC	Age in Ye	ears: 50	ry II
Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility VI. PROCEDURE, INCLUDING ANALYTI OF ASBESTOS MATERAL: Polarized light microscopy (PLM) analysi VII. APPROXIMATE OF RACM TO BE RE OF ASBESTOS BELOW: Pipes – Linear Feet	SqMeter: CAL METHOD, IF APPRO	SqFt: 50,000 DPRIATE, USED 1 y a building insp	State: NJ TO DETECT THE ector. MATERIAL THAT	Prior Use: Ma PRESENCE	REMOVE	Facility SPEC	Age in Ye	50 SMATERIAL MOUNT	ry II
Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility VI. PROCEDURE, INCLUDING ANALYTI OF ASBESTOS MATERAL: Polarized light microscopy (PLM) analysi VII. APPROXIMATE OF RACM TO BE RE OF ASBESTOS BELOW:	SqMeter: CAL METHOD, IF APPRO	SqFt: 50,000 DPRIATE, USED 1 y a building insp	State: NJ TO DETECT THE ector. MATERIAL THAT	Prior Use: Ma PRESENCE	REMOVE	Facility SPEC	Age in Ye	50 SMATERIAL MOUNT	ry II
Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility VI. PROCEDURE, INCLUDING ANALYTI OF ASBESTOS MATERAL: Polarized light microscopy (PLM) analysi VII. APPROXIMATE OF RACM TO BE RE OF ASBESTOS BELOW: Pipes – Linear Feet Pipes – Linear Meters Surface Area – Square Feet	GAL METHOD, IF APPRO	SqFt: 50,000 DPRIATE, USED 1 y a building insp	State: NJ TO DETECT THE ector. MATERIAL THAT	Prior Use: Ma PRESENCE	REMOVE	Facility SPEC	Age in Ye	50 SMATERIAL MOUNT	ry II
Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility VI. PROCEDURE, INCLUDING ANALYTI OF ASBESTOS MATERAL: Polarized light microscopy (PLM) analys VII. APPROXIMATE OF RACM TO BE RE OF ASBESTOS BELOW: Pipes – Linear Feet Pipes – Linear Meters Surface Area – Square Feet 1 SF per Train/ 2 Trains per Shift 38 Trains	GAL METHOD, IF APPRO	SqFt: 50,000 DPRIATE, USED 1 y a building insp	State: NJ TO DETECT THE ector. MATERIAL THAT	Prior Use: Ma PRESENCE	REMOVE	Facility SPEC	Age in Ye	50 SMATERIAL MOUNT	ry II
Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility VI. PROCEDURE, INCLUDING ANALYTI OF ASBESTOS MATERAL: Polarized light microscopy (PLM) analysi VII. APPROXIMATE OF RACM TO BE RE OF ASBESTOS BELOW: Pipes – Linear Feet Pipes – Linear Meters Surface Area – Square Feet	GAL METHOD, IF APPRO	SqFt: 50,000 DPRIATE, USED 1 y a building insp	State: NJ O DETECT THE ector. MATERIAL THAT	Prior Use: Ma PRESENCE	REMOVE	Facility SPEC	Age in Ye	50 SMATERIAL MOUNT	ry II
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Building Name: PATCO Lindenwold State Address: 801 Berlin Road N. Address: City: Lindenwold Site Location:: Train Undercar Building Size: n/a Present Use: Maintenance Facility VI. PROCEDURE, INCLUDING ANALYTI OF ASBESTOS MATERAL: Polarized light microscopy (PLM) analysi VII. APPROXIMATE OF RACM TO BE RE OF ASBESTOS BELOW: Pipes – Linear Feet Pipes – Linear Meters Surface Area – Square Feet 1 SF per Train/ 2 Trains per Shift. 38 Trains Surface Area – Square Meters Volume RACM off Facility Component – Cut	Equation - Train Undercar Ab Equati	SqFt: 50,000 DPRIATE, USED To a building inspirate ASBESTOS (State: NJ O DETECT THE ector. MATERIAL THAT	Prior Use: Ma PRESENCE WILL NOT BE I	Ca e	P. SPECONOn-friate Non-friate Non-gory I	Age in Ye	MOUNT s Material moved Categor	ry II

NOTIFICATION OF DEMOLITION AND RENOVATION (continued) X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND Asbestos Abatement of ACM Undercar Pads. Each train car has one (1) ACM Pair machine running inside the tent. There are 38 train cars that need abatement per the owner's schedule.	ad which is approximately 1SF, t, but only two (2) train cars wil	be abated p	per shift, as they become ava	ilable to us
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO RENOVATION SITE:	BE USED TO PREVENT EMISSI	ONS OF A	BESTOS AT THE DEMOLITIO	ON AND
Prime Group intends to follow all Federal and State of New Jersey Asbestos Re	gulations and Code in referenc	e to all maj	r and minor asbestos abaten	nent work.
XII. WASTE TRANSPORTER #1		1:41	The second section of the second seco	A comments
		A COLUMN TO THE PARTY OF THE PA	ALIC 2 0 2017	
Name: Prime Group Remediation, Inc.		THE LATE	AUG 2 9 2017	
Address: 1400 Adams Road, Suite I, P.O. Box 6			Manager and the second	
City: Bensalem	State:	ASI	Zip: C. NOUNG OL 8	-
Contact:	PA	Lamouremanner .	Tel:	
Vincent Primavera WASTE TRANSPORTER #2			215-533-3503	
Name;				
David Geppert Recycling Address:				
2692 Woodstream Drive				
City: Hatfield	State:		Zip: 19440	
Contact: Joe Rispo			Tel:	
XIII. WASTE DISPOSAL SITE			215-842-0122	
Name:				
Western Berk Community Landfill Address:				
455 Poplar Neck Road City:	State:		Zip:	
Birdsboro Tel:	PA		19608	
610-375-2772				
XIV. IF DEMOLITION IS ORDERED BY A GOVERNMENT AGENCY, PLEASE IDE	NTIFY THE AGENCY BELOW			
Name: This is not an "Ordered Demolition."	Title:			
Authority:				
Date if Order (MM/DD/YY):	Date Ordered to Begin (MM/DI	D/YY):		
XV. FOR EMERGENCY RENOVATIONS				
Date and Hour of Emergency (MM/DD/YY):				
This is not an "Emergency Renovation Description of the Sudden, Unexpected Event:	n."			
Explanation of How the Event caused Unsafe Conditions or Serious Disruption of Indu	12-10-11			
Experience of Now the Event caused offsale Conditions of Serious Disruption of Indu	strial Operation:			
XVI. DESCRIPTION OF PROCEDURE TO BE FOLLOWED IN THE EVENT THAT U	NEXPECTED ASSESTOS IS FO	IIND OR PE	EVIOLISI Y NON-ERIARI E AS	RESTOS
BECOMES CROMBLED, PULVERIZED, OR REDUCED TO POWDER:				
The work will stop. The affected area will be isolated using plastic and caution s using HEPA vacuuming and wet wiping techniques. Air monitoring for re-occup	igns. The materials will be ade ancy, if required, will be perfort	quately we t ned.	ted. The area will be cleaned	E
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THE RIDEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINSPECTION DURING NORMAL BUSINESS HOURS. (Required 1 year after	AINING HAS REEN ACCOMPLIS	UBPART M) SHED BY TH	WILL BE ON-SITE DURING T IS PERSON WILL BE AVAILA	THE ABLE FOR
Industry and Type and	p. c.naigadon).			
Signature of Owner (Owner)	08/25/1	7	<u> </u>	
Signature of Owner/Operator Vincent Primavera, Project Manager	Date		. (4)	
XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.				
Signature of Owner/Operator	08/25/1	7		
Vincent Primavera, Project Manager	Date			
Federal Notification				

NO CK		NOTI (FICATIO	ON OF AS	BESTOS	ABATE	MENT		Parameter 1) 15	اللِّه:	(p. g	Ī!	\mathbb{W}	LILL		
Date of Notification (1) 08/24/2017				of Buildin nship of			r (2)		A STATE OF THE STA					**********			
Agencies Notified Type Notification	ĺ			Address Centerto	n Road	<u> </u>			15-		UG	2	9 2	017			
DEP X Amended Amendmen				State, Zip (grove, N		8				ASE			Liv	ं।Ö	18.		
DOH Emergency justification	NO. 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	g/	Name	of Contac	:t				To	alanhana			SINC	Ž.			
DCA Cancellation	1			stance G													
Name of Facility Where Abatement is Takir	g Place	(3)	FAC	CILITY IN	FORMAT	ION	Type	of Facility	(1)	-							
Former Grain Mill, (Silo's)		. ,															
Street Address 1237 Landis Avenue							×	School (K Subchapt Other (i.e etc.)	er 8 Otl	her than I & comm	K-12) ercial	bui	dings	, hom	ies,		
City (5) Pittsgrove								e Feet	# 0	of Floors		1 7/3	3ldg.	Age			
County (6) Salem			County (STATE	Code (7)	γ)		Curre	nt Use (P	rior i be	eing demo	olishe	d)					
Name of Monitoring Firm Hired by Building Pennoni Associates Inc.	Owner (8)	ASC	M No.		Name Neub	of Abat	ement C	ontractor ental S	r (9) Services	s. Inc						
Street Address 515 Grove Street Suite 1B						Street		S									
City, State, Zip Code Haddon Heights, NJ 08035								o Code e, PA 1	9460								
Project Manager for Monitoring Firm Alan Lloyd			one No. 47-0505	j	Teleph				License 00836								
Start Date (10) 08/09/2017	ed Cor 2017	mplétion	Date (11)	5			A Monito										
Occupancy Status During Abatement (Chec	k Only O	ne):				Street A				01 11000	, 1110						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	eriod of	Abaten	nent			42 Ri	dge R	oad									
Other – Describe:	al Facility	y Hours	5			City, St Phoe		Code e, PA 1	946)								
Scope of Work (Check All That Apply)			3-11-0-2-9			-				4							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demolit				×	Mini- Glov	Containm Enclosur ebag Pro Exempte	re ocedi re					۵			
	4	Locati									T		Abate	ement			
Location of Asbestos-Containing Material (ACM)		Normal d Sole		A-6		cription			699		-		Ту	ре			
TO BE ABATED In Facility (13)	1.0000000000000000000000000000000000000	intenar todial S (12)		(i.e.		systems sing, VAT iscellane	insulati , or	acm) on,	(S	mount Specify or LF)		Remova	Repair	Encapsulate	Enclosure		
Con Attack 10	Yes	No	N/A	/		<u> </u>								ਰਿ	10		
See Attached Spreadsheet			X	(See	Attache	ed)	See A	Attache	d X						
			X								X						
			X								X						
Name of Registered Waste Hauler		1	X								X						
C&H Disposal Services, Inc.		Ha	JDEP W auler ID '903		of Wast	200000000000000000000000000000000000000		Name of Salem				ent	Aut	norit	у		
City, State Elmer, NJ			Disposal Date O8,09/2017 Alloway, N.						1								
Completed by Patrick Larney	ct Mai	nager		Sig	gnature		Du	~~		Date 08/2	4/20	1/2017					

PROJECT NAME:

Pittsgrove Grain ACM

Silo's Rev. 02

	Abatement Item	Unit Quantity	tity Notes
SIIOS			
Metal Silo's (Demo & Dispose) Caulk	IUK	LF 24	Met removal during B
Ma	astic	1	972 Wet removal during Demo per Alternative Method Letter M
Concrete Silo's (Demo & Dispose) Coa	Coating	21	21 600 Wet removal during Demo per Alternative Method Letter



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NO CC		NOTI	FICATIO	State of Nev ON OF ASB Int to NJAC	ESTOS	ABATE	MENT	同	EU	[] n	[]	W [
Date of Notification (1) 08/24/2017	,			of Building on Ship of P			(2)	- division and	All	3 2	9 21	117	
Agencies Notified Type	Notification			Address	\$-75.0°			I feel best	7,01	J	J 21	111	1.
₩ EPA	nitial			Centerton					OF.			. Province de la constante de	
DEP \ X	Amended	7		State, Zip Co					SE	CAR	CINE	- O L	- 8ı
	Amendment # 02 Emergency (includion	na	-	grove, NJ	08318	3		Economic woman	THE PERSON NAMED IN	CEN	DIVIG	THE REAL PROPERTY.	pilosios pa
Ŭ DOH	ustification)	.9		of Contact				To	lonbana N	lumher	-		
DCA C	Cancellation			stance Ga									
Name of Facility Where Abatem	ent is Taking Place	(3)	FA	CILITY INFO	DRMATI	ON	Tune of F 10%						
Former Grain Mill, (Buildin	ng 2)	(0)					Type of Facility	2 - 200 - 20					
Street Address							School (K	(-12)	46 16	40)			
1237 Landis Avenue							Subchapt Other (i.e.	. private	er than K- & commer	cial bu	ildinas	s. hom	ies.
City (5)							etc.)					200000000000000000000000000000000000000	
Pittsgrove						100	Square Feet ~ 2,200	# 0	f Floors	- 1	Bldg.	Age	
County (6)			County	Code (7)			1000	1 50		- 1	60+		
Salem			(STATE	USE ONLY)			Current Use (P Former Gra		ng demoli	shed)			
Name of Monitoring Firm Hired b	ov Building Owner (8)	ASC	M No.					(6)				
Pennoni Associates Inc.	y banding owner (0)	ASC	AVI INO.			of Abatement C er Environm			Inc			
Street Address						Street A		ental 3	er vices,	IIIC.			
515 Grove Street Suite 1E	3						dge Road						
City, State, Zip Code	***************************************						ate, Zip Code						
Haddon Heights, NJ 0803	5						nixville, PA 1	9460					
Project Manager for Monitoring F	irm		Telepho	one No.		Telepho		3400	11	N.L.			
Alan Lloyd		-		47-0505			33-4332		License 00836	No.			
Start Date (10)	Schedu	uled Cor		Date (11)	7		f OSHA Monito		00000				
08/09/2017	09/15	/2017	piotion	Date (11))		er Environme		ervices	Inc			
Occupancy Status During Abater	nent-(Check Only C	one)				Street A		ornar oc	oi vicco,	1110.			
× Facility Closed/Vacated Dur			nont				lge Road						
Abatement Performed Outsi	ide of Normal Facili	ty Hours	nent S		-		te, Zip Code		- 27				
Other – Describe:		S			_		ixville, PA 1	9460					
Scope of Work (Check All That A	pply)					HAT WE CARD							
≥3 sf or ≥3 lf	П	Renova	ition	0		×	Full Castalian			_			
× ≥160 sf or ≥260 lf	×	Demolit				× ×	Full Containn Mini-Enclosu	nent with re	Negative	Pressu	ire		
						×	Glovebag Pro	cedure					
			ns F				Non-Exempte	ed (*) and	Non-Fria	ble Pro			
Location of	1	s Locati Normal										ement rpe	
Asbestos-Containing Material		ed Sole	ly by	Ashesto	Desc Conta	cription o	f terial (ACM)				T		
TO BE ABATED	` / M	aintenar stodial S		(i.e. th	nermal s	ystems in	nsulation,	120000	nount pecify	Z Z	_	Enc	Щ
In Facility (13)		(12)	zan:			ng, VAT, scellaned		SF	or LF)	Removal	Repair	Encapsulate	Enclosure
X /		Τ	Τ	-	other IIII	scenarie	ous)			val	ai-	ulai	sure
	Yes	No	N/A			<i>}</i>	7					e	
See Attached Spreads	heet		X	16	See A	Attache	d/	See A	ttached	X	1		
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			X		====								
			-							X			
Name of Projeto			X							X			
Name of Registered Waste Haule		100000	JDEP W auler ID		Cubic Yaste		Name of	Register	ed Landfil				
C&H Disposal Services, Inc	•	100000	903	AND THE REAL PROPERTY.	or vvaste ~ 60	5	Salem	County	Improve	emen	t Aut	horit	У
City, State					Disposa	I Date	City, Stat	e					××
Elmer, NJ					08,09/2		Alloway						
Completed by	Title	10.				nature			, Da	ite			
Patrick Larney	Proje	ect Ma	nager			11-60	V DE	m		3/24/2	2017		
						A	~		1				

PROJECT NAME:

Pittsgrove Grain Mill ACM Building 2, Rev 02

Area / Notes	Abatement Item	Unit	Unit Quantity	Notes
Building 2				
1st Floor	Tile, Mastic & Sheet	SF	1.554	Properly Remove and Discoso
1st Floor	Ceiling Plaster	SF	1.422	Properly Remove and Dispose
iroughout Basement and	1st Floor Paper Insulation	SF	336	Properly Remove and Dispose
	Flue Packing	SF	-	Properly Remove and Dispose
	Window Caulk	EA	20	Properly Remove and Dispose
F Exterior Windows	Window Glazing	4	20	Properly Remove and Dispose
Koot	Roofing	SF	4,000/	4,000 / Wet removal during Demo per Alternative Mathod Lotton
				Service Por Auchigune Meiriog Leifel



NOTIFICATION OF ASBESTOS ABATEMENT MO#24499206292 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 08 26 / 17 Diane Loffredo Agencies Notified Type Notification Street Address ☐ EPA ✓ Initial □ DOLWD ☐ Amended City, State, Zip Code X DHSS Amendment # ☐ DCA S CONTRIOL & Emergency (including Glen Rock, NJ 07452 (NJAC 5:23-8) justification) Name of Contact Telephone Number NG Cancellation Diane Loffredo 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, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Glen Rock, NJ 07452 County (6) County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Bergen 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__ / __05__ / __17 09 / 06 / 17 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 > 160 sf or >260 If Renovation | Mini-Enclosure Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Repair Remova Encapsulate Enclosure Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A Basement X Transite ceiling board 20 SF П Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date N.Jevtic Owner ewic Wenas 08/26/17 ASB-41

State of New Jersey

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	1		CATIO	State of New Jerse N OF ASBESTOS t to NJAC 8:60 ar	ABATE		A	100	1	<u>. []</u>	to	2	191
Date of Notification (1)		1 (2)		of Building Owner		(2)	4			_!!b		70	
8/25/17 Agencies Notified Type Notification				na Rinaldo, Esc	۹.		1.5	1				-	
		5	street /	Address					AUG 2	9 1	2017		$ \mathcal{U} $
EPA X Initial Amended		C	City. St	tate, Zip Code			-						
DOL Amendment				erville NJ 0887	76		WASHING.	ASI	100	((OL 8	L
➤ DOH Emergency justification)		N	lame o	of Contact			-	1=:		NICH.	(A		paysing the same
DCA Cancellation			Donn	а			Newson.	7					
Name of Facility Where Abatement is Takin	n Place (3	,	FAC	ILITY INFORMAT	TION	7	-f. C101	4)					
home	19 1 1400 (0	,					of Facility (*			
Street Address	***						School (K-1 Subchapter		than K-1	2)			
						×	Other (i.e. petc.)				dings	, hom	es,
City (5)							re Feet	# of F	loors	E	Bldg. /	Age	4
Plainfield				(i		210		2		6	35	325	
County (6) Union			STATE	Code (7) USE ONLY)		sing	nt Use (Pride) le family	home		hed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASC	M No.			tement Cor onmenta						
Street Address					Street				200				
City, State, Zip Code			2005				83, 4 E G	ate Driv	re				
					100		ip Code , NJ 074	18					
Project Manager for Monitoring Firm		Te	elepho	one No.	Teleph		o.	L	icense N	lo.			
Start Date (10) 9/6/17	Schedule 9/30/17		letion	Date (11)		0.000	A Monitor						
Occupancy Status During Abatement (Chec	k Only One	e)			Street	Addres	SS	anie a			-		
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: basement	Period of A nal Facility	batemer Hours	nt		City, S	tate, Zi	p Code					-	
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	Property Co.	enovatio emolition			×	Min Glo	Containme i-Enclosure vebag Prod i-Exempted	edure					
	le l	ocation	71		-	1401	Laniple	() and i	on nau	100		e ement	
Location of	No	ormally		De	scription	of						ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair Custo	Solely Intenance odial Sta (12)	e/	Asbestos Con (i.e. thermal surfa	taining M	aterial insula T, or	(ACM) tion,	Amo (Spe SF or	cify	Remova	Repair	Encapsulate	Enclosure
h/	Yes	No	N/A							_		ate	Ø,
basement			Х	pipe	insulat	ion		102	LF	х			
								-A-21091-1-1-1-1-1-1					
Name of Registered Waste Hauler Freehold Cartage		1900,900,000	EP Wiler ID		Yards ste		Name of F Western						
City, State					sal Date		City, State						
Freehold, NJ				TBD			Birdsbo						
Completed by A. Scott Higgins	Title Presid	lent		S	ignature				Dai	te 25/17		120	

CK# 1067	NO	(Purs	suant to	OF ASBEST NJAC 8:60	0 and 1	12:120)		Equation of Party			= [\mathbb{W}		
Date of Notification (1) 08/25/2017				Building Own					D)		- 0	2015	de l'internation de la constant	And the second second
Agencies Notified Type Notification		1	reet Add	dress VIAL AVE				and the second second	The state of the s	AUG	29	2017		
EPA Initial Amended Amendment#				e, Zip Code CLAIR NJ		43			ASI	1106	NSII	ч.: ц іСі	5L &	1
Emergency (inc	uding		ame of (. 010				Telenh	one Mine			CONTRACTOR OF THE PERSON	month of the
DOH justification) Cancellation		27779		N ROBLE	ES									
DCA Cancalation			FACIL	ITY INFORI	MATIO	N			1					
Name of Facility Where Abatement is Taking P PRIVATE	lace (3)						Scl	Facility (4) nool (K-12 bchapter 8	!)	nan K-12	Š			
Street Address 1 NORMAL AVE. (Life h	ay)-(1241.	1242))	1	Ott etc	ner (i.e. pri	ivate & co	mmercia	l buildi			5,
City (5) MONTCLAIR NJ.							Square 15,00	00	# of Flo			lg. Ag 38	e	
County (6) ESSEX COUNTY			County C	ode (7) SE ONLY)		_	Current	Use (Prior		demolish	ed)			
Name of Monitoring Firm Hired by Building Ow DETAIL ASSOCIATES INC.	ner (8)		ASCM	No.				ment Cont			LLC.			
Street Address	-				-	Street A	Address							
300 GRAND AVE.							51. ST							_
City, State, Zip Code ENGLEWOOD NJ. 07631							ate, Zip TH BE	Code RGEN N						
Project Manager for Monitoring Firm STEPHEN JARACZEWSKI			elephon 201.58	e No. 9.6708	The same of the sa		one No. 76.06	42	1	icense No 1300	D.			
Oldit Dato (10)			pletion [Date (11)			- Annual Control of the	Monitor SOCIAT	ES INC					
08/29/2017 Cocupancy Status During Abatement (Check Co	08/30/2				-		Address		LO IIVO	<u></u>				\dashv
			ent					O AVE.						
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	Facility	Hours	City, State, Zip Code ENGLEWOOD NJ. 07631											
Scope of Work (Check All That Apply)						ontainment with Negative Pressure								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovation emolition					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure						
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Location of		lormall d Solel		Asbesto		scription		ACM)	Am	ount			ш	_
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		intenar todial S (12)		(i.e. ti	hermal surfac	systems cing, VA niscellar	s insulat T, or			ecify or LF)	Removal	Repair	Encapsulate	Enclosure
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Life Hall (1241- 1242)		х			Pipe	Insula	tion		56	LF	х			
Only one tent for this work area											+-	-		-
Al CO in Marke Healer		LN	JDEP V	Vaste	Cubic	Yards		Name of	Registere	ed Landfi				1
Name of Registered Waste Hauler TRI STATE ASSOCC INC		Н	lauler ID 9951		of Wa			MINER	RVA EN	TERPR	ISE I	NC.		
City, State BRONX N.Y	***	Disposal Date City, State TBD WAYNESBURG OHIO												
CAPLOS ESOLIIVE	Title	ETY I	MANA	GER	5	Signatur	10 9	ernfu	weff		ate 18/25/	2017	,	

CKH	11/207	N			OF ASBE to NJAC 8							7	<u>l</u>		-
Date of Notification (1) 08/25/2017	100		Ī		Building CLAIR				LIFE HA		AUG	2 9	20	17	
Agencies Notified	Type Notification			Street Ac		/E									
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	Emergency (in justification)	ncluding	_	Name of				-		TTAL	nhona Niir	nber			-
DOH DCA	Cancellation			WILSO	N ROB	LES									
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Name of Facility Where All PRIVATE	batement is Taking	Place (3)						of Facility (4 School (K-1)	2)					
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Street Address 300 GRAND AVE.							12.7	Addres							
City, State, Zip Code							- 200	State, Zi							
ENGLEWOOD NJ.							NOF	RTH B	ERGEN	NJ. 0 7					
Project Manager for Monit STEPHEN JARACZ				Telephor 201.58	ne No. 39.6708			hone No .776.06			License N 01300	0.			
Start Date (10) 08/29/2017	1.400	Schedule 08/30/2			Date (11)				A Monitor	TES II	NC.				
Occupancy Status During	Abatement (Check	ie)				Street	Addres	ss							
Facility Closed/Vaca	ted During Entire P	eriod of A	Abaten	nent			300	GRAN	ID AVE.						
Abatement Performe Other – Describe:	ed Outside of Norma	al Facility	Hour	city, State, Zip Code ENGLEWOOD NJ.						0763	1				
Scope of Work (Check All	That Apply)	VI					X 5.110-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demoli				£ .	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
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Location	of		Norma ed Sole				scription						13	pe	
Asbestos-Containing I TO BE ABA In Facilit (13)	TED	Ma	intena todial (12)	nce/ Staff?				ns insula AT, or		(5	mount Spec <mark>i</mark> fy or L F)	Remova	Repair	Encapsulate	Enclosure
(1.5)		Yes	No	N/A		outer in	· iiooiia	,				al	-	late	Ire
Life Hall (124	1- 1242)		х			Pipe	Insula	ation		5	6 LF	х			
Only one tent for the	nis work area														
Name of Registered Wast	F	NJDEP W Hauler ID 19951		of Was	Yards ste				red Landfill		NC.				
City, State BRONX N.Y		*	19951 TBD MINERVA ENTERPRISE INC. Disposal Date City, State WAYNESBURG OHIO												
Completed by		Title	TBD WAYNESBURG OHIO Signature P Date												
CARLOS ESOLIIVE			ETY	MANAC	SER		- (109	arnfew	weft	1	8/25/	2017		

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

CH10.01	812246		Pursuan	t to NJAC	8:60 an	d 12:12	(0)			and the second second				
Date of Notification (1) 08/25/17				of Building				(I)	[p.]	1 15 11	- H=	II	W	15
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	Notification		40.000.000.000.000.000.000	Address Franklin	C+					1				
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☑ DOH ☐	justification) Cancellation		ivame (of Contact					Te	lephone N				DL.
	Caricellation		EAC	II ITV INF	ODMAT	ION	-			and the state of t	_ CEI	VSII	ili	and the state of
Name of Facility Where Abater	ment is Taking Place	(3)	FAC	ILITY INF	ORWAI	ION	Tvr	pe of Facility (4)	-	_		_	_
Bloomfield Township De			Human	Service	s			3.73	Ž.					
Street Address							H	School (K-12 Subchapter 8		er than K-	12)			
348 Franklin St,							X	Other (i.e. pr	ivate	& commer	cial bu	ildings	s, hom	es,
City (5)	W						Sai	etc.) uare Feet	T#0	f Floors		Dida	٨٥٥	
Bloomfield							Oqi	uais i est	# 0	1110015		Bldg.	Age	
County (6)		T	County	Code (7)			Cur	rrent Use (Prior	r if ha	na demoli	shod)	_		7.111
Essex County				USE ONLY	0			1011 1) 555 11101	ii be	ing demon	sileu)			
Name of Monitoring Firm Hired	by Building Owner (8)	ASC	M No.		Name	of Al	batement Cont	ractor	(9)				
		,						tement Sen			ions			
Street Address						Street				- C - C - C - C - C - C - C - C - C - C				
						8600	0 Ne	ewkirk Ave						
City, State, Zip Code						City, S	State.	Zip Code						
							The State of the S	ergen, NJ 0	7047					
Project Manager for Monitoring	Firm		Telepho	ne No.		Teleph		The management of the contract of		License	No.			1700
						201-	293	-6305		01223				
Start Date (10)	Schedu	led Cor	mpletion	Date (11)		Name	of O	SHA Monitor				-	-	
09/06/17	09/20					HILN	MAN	IM CONSUL	TIN	G LLC				
Occupancy Status During Abate	ne)				Street	Addr	ess							
Facility Closed/Vacated Du Abatement Performed Out	Abater	nent			1600	RC	OUTE EAST	SUI	TE 107					
Abatement Performed Out Other – Describe:	side of Normal Facilit	y Hour	s		i	City, S	tate,	Zip Code						
						UNIC	ON	NJ 07083						
Scope of Work (Check All That	Apply)					X Full Containment with V								
≥3 sf or ≥3 lf	passed .	Renova				Full Containment with Negative Pressure								
≥160 sf or ≥260 lf		Demoli	tion			-	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure							
							N	on-Exempted	dure (*) and	d Non-Fria	ble Pro	cedu	re	
	Is	Locat	ion								T	1000 -000	ement	
Location of		Normal			Des	scription	of					T	уре	455
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TO BE ABATED In Facility		todial S		(i.e.	thermal	systems ing, VA7				pecify or LF)	Rer	R	nca	Enc
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Name of Registered Waste Hau	ler	IN	JDEP W	aste	Cubic \	Yards	***	Name of Re	ediste	red Landfi	1			See and
Pro Abatement Services 8		Н	lauler ID			bubic Yards Name of Registered Landfill f Waste					NO 5			
		1	8322	MACTE MANIA OF MENT OF COME						NS N	١.			
City, State					Dispos	al Date		City, State						
North Bergen, NJ							1	MORRIS	VIE	EPA				
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nvall Falla	Proid	CT M/S	anager				a 1-24	1 1 1 1 1 1 1 1 1	1 8 1	1 41 0	DIOE	17		

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Date of Notification (1) 08/11/17				Name Dan	of Buildin House	g Owner	/Operato	or (2)	Tr.		il E	[\\	7 [5	F	1
Agencies Notified	Type Notification	n		Street	Address				-114		and the facility for more day			711-1	11
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Name of Facility Where	Abatement is Taki	ng Place (3)		FAC	ILITY IN	ORMA	TION	Tur	ne of Facility	. (4)					
Dan House		3 (0)						l Ty							
Street Address							45	H	School (K Subchapte Other (i.e.	er 8 (Oth	ner than & comm	K-12) iercial b	uildin	js, hor	nes,
City (5) Cranford								Squ	etc.) uare Feet	# 0	of Floors		Bldg	. Age	
County (6) Union County					Code (7) USE ONL	n		Cur	rent Use (P	rior if be	ing dem	olished			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.		Name	of Al Aba	patement Co tement Se	ontracto	r (9) S & Soli	utions			
Street Address							Street	t Addr							
City, State, Zip Code							City, S	State, th Be	Zip Code ergen, NJ	07047	,				
Project Manager for Moni	toring Firm		1	Telepho	ne No.		Telepi	hone l			Licens 0122				
Start Date (10) 08/14/17	11	Com	pletion	Date (11)		Name HILI	of OS	SHA Monitor	ULTIN						
Occupancy Status During	cupancy Status During Abatement (Check Only One)						Street								
Abatement Performe	cupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Ab. Abatement Performed Outside of Normal Facility H Other – Describe:								OUTE EAS	ST SUI	TE 107	7			
		- ****	33557=1	0.1,					NJ 07083						
Scope of Work (Check All	That Apply)							,							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Personal Property Control of the Con	novat moliti	vation lition					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
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Location	of	No	rmally	y		Dec	scrintion	of						ype	L
Asbestos-Containing M <u>TO BE ABA</u> In Facility (13)	ΓED	Maint Custoo (tenandial St	ally lely by ance/ Staff? Description Asbestos Containing M (i.e. thermal systems					Material (ACM) A as insulation, (S AT, or SF			Kemoval	Repair	Encapsulate	Enclosure
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701100	1st floor						VAI)4 SF	x	+	-	
Name of Registered Waste	Hauler		NI	DEP W	aste	Cubic	Varda		Nome of	Docists		EII .			
Name of Registered Waste Hauler NEWARK CARTING NJDEP Waster ID N 04509						Traine of registered Landing						WS N	١.		
City, State HILLSIDE, NJ						Disposal Date City, State MORRISVILLE PA									
Completed by		Title				Si	gnature		1	/		Date			
oryanı ana	npleted by /an Parra Title Project Manag							-				08/11	/17		

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Date of Notification (1) 08/23/17				of Building Ow tina Riena	ner/Operator	r (2)		小	10			
Agencies Notified Type N	lotification		Street A	Address			111	111		- 0	004	9
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X DOL A	mendment #		Established and a second	vood , NJ 0			-			F-1-		01.8
	mergency (includ stification)	ing		of Contact	A. 7. 7. A.		17	elephone	Mumbor	NOU	N 171	UL 0
	ancellation			, oomast			L	elephone	vuinber	INOII	// CZ	Machine Co.
			FAC	ILITY INFORI	MATION				-			
Name of Facility Where Abateme	nt is Taking Plac	e (3)	.,,,			Type of F	acility (4)					
Christina Riena					•		ool (K-12)					
Street Address						H Sub	chapter 8 (O	ther than	K-12)			
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City (5)						Square F	ant 14	-6.51		51.1		
Maywood						Square F	set #	of Floors		Bldg.	Age	
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Bergen County				USE ONLY) _		Current	se (Prior if b	eing dem	olished)			
Name of Monitoring Firm Hired by	Building Owner	(8)	ASC	A No.	Nama	of Abatam	ent Contracto	(0)				
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						Address) Newkirk	Λ.νο					
City, State, Zip Code												
ony, onato, hip dode					100	tate, Zip Co		7				
Project Manager for Monitoring Fi	rm	-	Telepho	no No			, NJ 0704					
. Topoc manager for Monttoning Fi			releprio	He NO.		one No. 293-6305	=	Licens				
Start Date (10)	School	dulad Cor	molotion	Date (11)				0122	3			
08/26/17		9/17	ripietion	Date (11)		of OSHA M		10110				
Occupancy Status During Abatem							ONSULTII	NG LLC				
						Address	FACTO	UTE 40				
Facility Closed/Vacated Duri Abatement Performed Outsid	ng Entire Period	of Abater	nent				EAST SU	JITE 10.	/			
Other – Describe:	de of Normal Pac	ility Hour	5			tate, Zip Co						
Scope of Work (Check All That Ag	noly)				UNIC	ON NJ 07	083					
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Asbestos-Containing Material		Ised Sole Maintena			Containing M	aterial (AC		Amount			т	
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- according (addition) for	5,				101			IU LF	X	-		
				V								
					00	A 2005						
Name of Registered Waste Hauler		N	JDEP W	aste Cu	ibic Yards	Nai	ne of Regist	ered Land	dfill			-
Pro Abatement Services & S	Solutions	1000	lauler ID		Waste	1300000				יספי	MC N	
		_ 1	8322				ASTE MA	NAGEN	MEINI C	אטחג	10 1	
City, State North Bergen, NJ				Dis	sposal Date		, State		A. Carrier			
Completed by	1 +				10:	-	PRISVI	E PA				
Bryan Parra	Title		20000		Signature	SHIP	1 UNIV	11	Date			
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Or# 400	12			TCATI	ON OF AS	lew Jersey BESTOS ABATE C 8:60 and 12:12	8 8 7 1		;	W	E	T	
Date of Notification (1)	73-17			Nar	ne of Build	ing Owner/Operator	<u>r</u> (2)	Al Al	JG 29	201	7		卅
Agencies Notified	Type Notification	on		Stre	et Addres	9					_	+	-
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Ø DOL	Amendmen Emergency		lina			<i>igh</i> antial	E N.J		18205	AND DESCRIPTIONS			
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Name of Facility Where	Abatement is Tak	ing Pla	ice (3)				Type of Facili	ty (4)					
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Street Address							Subchapte Other (i.e.,				dinac		
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Name of Monitoring Firm	Hired by Building	Owne	ır	ASCA	A No.	Name of Abatem		9329					
(8)							MCO I	NC					
Street Address						Street Address	5 5	2000	A.	_			
						369		PROCE	ELAU	=			_
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Project Manager for Mon	toring Firm		Tel	ephone	No.	Telephone No.	9-0472		nse No.	4			
Start Date (10)	Sche	eduled O	1 1	etion D	ate (11)	Name of OSHA N							
Occupancy Status During	Abatement (Che	eck on	4	1/		Street Address	- 10/15						_
Facility Closed/Vacate				ement			71						
Abatement Performed						City, State, Zip Co	ode						
Other - Describe:								- 1					
Scope of Work (Check all	that apply)												_
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≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		N D	emolitic	n n		Gloveba	g Procedure						
цы		_				Non-Exe	empted (*) and N	on-Friable	Procedure				_
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Location of			d Sole			Description of					-,,,		-
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TO BE ABATE IN Facility	: <u>D</u>		Staff?	31	(i.e.,	thermal systems in surfacing, VAT,		SF or		Remova	Repair	Encapsulate	Enclosure
(13)			(12)			other miscellaneo	us)			ova	air	sula	Sur
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SIDING			_	X		ean site		2000	775	X	-	\dashv	-
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Name of Registered Waste	Hauler		- 1	JDEP V		Cubic Yards	Name of Reg	istered La	ndfill				
KLEMCO	INC		H	auler ID	No.	of Waste	μ	CUA	\ .				
City, State				17		Disposal Date	City, Stafe						
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Completed By MICHAEL KLEN	Title	PK	RES			Signature	On		Date -	23	-1	7	_

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Date of Notification (1)	23-17			Na	me of Build	ing Owner/Operato		W Take at	TC TIM	16-			2
Agencies Notified	Type Notificati	on		Ctr	eet Addres		CCT C	AND INCOM	+(110	NSII	W(3	<u></u>	CA
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Name of Facility Where	Abatement is Tak	ing Pla	ce (3)				Type of Facili	ty (4).					
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Street Address	010-00						Subchapte		han K-12)			
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OV#4	915				N OF ASB	ESTOS	ABATE				PA	AI	D	
Date of Notification (1) 08/25/2017	110			Name Living	of Building ston Boar	Owner/ d of Ed	Operator ducation	(2)	check# 4	887 Chec	k# 490	2 ch#	49	15
Agencies Notified IN EPA IN DEP IN DOL IN DOH IN DCA	Type Notification ☐ Initial X Amended Amendment ☐ Emergency (justification)			City, S Living	Address xcroft Driv tate, Zip Co ston, NJ Co	ode	4		The second secon		ا <u>ل</u> AUG	3	W	信 17
	☐ Cancellation				Perrette	ORMAT	ION			ASE	5 100			TOL 8
Name of Facility Where A School Administration	Abatement is Takin Building	g Place (3)	1 //	ZILITI IIVI	ONWIAI	ION	Type of Facilit	y (4)		110	ENSI		
Street Address 11 Foxcroft Drive								☐ Other (i.e	ter 8 (Oth	er than K-	12) cial bui	ldings,	hom	es,
City (5) Livingston								etc.) Square Feet	# 0	f Floors	E	Bldg. A	ge	1738
County (6) Essex		775 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8			Code (7) USE ONLY)		Current Use (I	Prior if bei	ng demoli	shed)			220 0
Name of Monitoring Firm Omega Environmenta	Hired by Building I Services	Owner (8)		ASC	M No.		Name Lilich	of Abatement C Corporation	contractor	(9)				
Street Address 280 Huyler Street								Address IcBride Ave						
City, State, Zip Code South Hackensack, N.							City, S Wood	tate, Zip Code land Park, Ne	w Jersey	/				
Project Manager for Mon Anton Rezin	itoring Firm			Telepho 201-48	one No 39-8700		Teleph 973-2	one No. 25-8400		License 01104	No.		-	
Start Date (10) 09-21-2017		Schedul 08-25-2		mpletion	Date (11)		Name Iris Er	of OSHA Monito	or aborator	ries, LLC				
Occupancy Status During			505. * 0					Address						-
Facility Closed/Vaci Abatement Performed Other – Describe:	ed Outside of Norm	al Facility	Abater / Hours	nent			City, S	Route 22 Wes tate, Zip Code 1, NJ 07083						
Scope of Work (Check Al	I That Apply)										31100			
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			Renova Demolit					Glovebag Pr	ure ocedure					
		1	Locat							11911 110		Abate	ment	t
Location Asbestos-Containing TO BE ABA In Facilii (13)	Material (ACM) TED	Use Ma	Normal d Sole intena todial ((12)	ly by nce/	Asbesi (i.e.	tos Con thermal surfa	scription taining M systems cing, VA niscellan	laterial (ACM) insulation, T, or	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
1st floor-Office&serv		Yes	No	N/A									ate	(ti
23t 11001-OTTICE&SERV	er storage			X	Suspen	ded ce	eiling til	es	544 SI	-	X			
				 					-		+			
											-			
Name of Registered Wast	e Hauler		1 82	JDEP W			Yards	Name o	of Registe	red Landfil	1	Ll		l
Lilich Corporation				auler ID 18724	INO.	of Wa	ste	G.R.O.\	N.S Land	fill				1
City, State Woodland Park, Ne	ew Jersey					Dispos	sal Date	City, St		isville, PA	A			
Completed by Momo Glavatovic		Title Pro	ject r	nanage	r	S	ignature	eff	<u>`</u>		ate 08/25/2	2017		

01#20FF	1		ICATION	OF ASB	ESTOS	ABATE		RA	L.		Fi 9	1 77.6	G I	
Date of Notification (1) 8/24/2017 Check # 3055				f Building cen Cath		30	311000		炉	الله الله	-	\V/	The second second	
Agencies Notified Type Notification	i		Street A				,	100	Special Control of the Control of th	AUG 2	9 2	017	22 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	켓
EPA Initial DEP Amended Amendmen		_		ite, Zip Co cen, NJ					AS	Gr. Sircins (L&	-
DOH justification DCA Cancellation			Name of	Contact CGrath				Bestehon	s⇒ ^T ~!			<u>G</u>	and the second	
			FACI	LITY INFO	ORMATI	ON						-		
Name of Facility Where Abatement is Takin)					Туре	of Facility (4	-)					
Hoboken Catholic School-Second	Floor						X s	School (K-12	2)					
Street Address 555 -7th Street								Subchapter	8 (Oth	er than K-12 & commercia		dings,	home	98,
City (5) Hoboken, NJ								re Feet	# 0	f Floors	0.0	ildg. A	ge	
County (6) HUDSON			County (Code (7) JSE ONLY,)		Curre		r if bei	ng <mark>d</mark> emolish	ed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	l No.		1		tement Cont			1			
Street Address			1			Street	Addres							
City, State, Zip Code						City, S	tate, Zi	ip Code	02					
Project Manager for Monitoring Firm			Telephor	as No				g, NJ 070	93	Linna N				
						201-	one No 295-1	700		License No 01074	o.			
Start Date (10) 8/26/17	8/28/17	7	npletion [Date (11)		2 magnitude	of OSF e as a	HA Monitor above						
Occupancy Status During Abatement (Che	- 6	8.50				Street	Addres	S						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Starting at 8 AM	Period of A nal Facility	Nbaten Hours	nent S			City, S	tate, Zi	p Code						
Scope of Work (Check All That Apply)							-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Z R	enova emolit	ition ion			×	Min Glo	ii-Enclosure vebag Proce	edure	Negative P			0	
	la la	Locati					1 1401	I-Exempted	() air	u Woll-I Habi		Abate		
Location of		Iormal	Et come		Dos	scription	of					Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntenar odial S (12)	nce/		tos Cont thermal surfac	scription saining M systems cing, VA niscellan	faterial s insula T, or		(5	mount Specify For LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										le	
Second Floor-Classroom 201	-	X				iling Ar			77	1 SF			X	
Second Floor-Classroon 209		X			Pipe	Insula	tion			1 LF		X		
											_			
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic	Yarde		Name of P	eniste	red Landfill				
Tri-State Transfer Assoc		Н	auler ID I 9551		of Was					rprises Ic				
City, State					Dispos	sal Date		City, State						
Bronx, NY					tba			Waynes	burg.	OH				
Completed by Gina M Betances	Title Office	e Mar	nager		S	ignature	(9	Vneas	_	Dat	e 23/1	7		



Check # 25576

Date of Notification (1)			Nam	e of Buildir	g Owner/Operator	r (2)	The E	- 15		\mathbb{W}	E
	8/24/17						eter's Medica	al Center	~		t in Calman	
Agencies Notified	Type Notific	cation		Stree	et Address				10 0	0	004	7
EPA	☐ Initial	est.					254 Easton A	Avell Al	IG 2	9	201	1
☐ DEP	Amende Amende			City,	State, Zip (Code		1 1				
M DOL		ncy (includin	a		207 - 20	New	Brunswick, 1	NJ 08901	- p + L	7.7.	1111	OI
DOH	justifica	ition)	3	Name	e of Contac			Telephone Num				
☐ DCA	☐ Cancella	ation			Mr	Ron Carvalh	10	Boston se				39
				FA	CILITY IN	ORMATION	·	 			_	
Name of Facility When	e Abatement is	Taking Plac	e (3)		OILITT III	Ordination	Type of Facility	u (A)				
The second second second		edical Ce					School (K-1					
Street Address	171	edicar ec	inter					8 (Other than K-1	2)			
0.1.00171.000	256	4 Easton	Ave				Other (i.e.,	private & commerc	al buil	dings	,	
City (5)		7 Dasion	IIVC.				homes, etc	.) # of Floors		lal = /		
Oily (O)	Naw	Brunswi	ole N	II				_	В	ldg. A		
County (6)	INEW	Diuliswi	CK, I		-h. O. d. /	7) (07475	100000	5		83	+/-	
	Iiddlesex				nty Code (EONLY)	7) (STATE	Current Use (P	rior if being demoli	shed)			
Name of Monitoring Fir		Idina Ouman	_	ASCM	NI-	Name of Alastan		2				_
(0)	nmental Ta			ASCIVI	INO.	to an exercise response and distributions	nent Contractor (т	union.		
LIIVIIO	minemai 1a	ictics					ens Environ	mental Servic	es, II	ic.		
Street Address	64 Dags a	I C4				Street Address	DO 1	222				
0: 0: 7: 0	64 Broad	Street						Box 322				
City, State, Zip Code	λ Γ-4	NIT				City, State, Zip C		NTT 00 501				
	Matawa	ın, NJ					Allentow	n, NJ 08501				_
Project Manager for M	and the state of t		199539	phone		Telephone No.		License No.			13-61	
A CITY OF THE PARTY OF THE PART	Geiger				8-4070	(609) 25	9-9688	(049	3		_
Start Date (10)		Scheduled (Comple	etion Da	ate (11)	Name of OSHA						
8/24/17			8/28/	17			M	IECS				
Occupancy Status Dur						Street Address	500000000					
Facility Closed/Vac							PO I	341				
Abatement Perform	ed Outside of N	lormal Facili	ty Hou	rs		City, State, Zip C	ode					
Other - Describe:							Crosswick	cs, NJ 08515				
Scope of Work (Check	all that apply)					_						
>3 sf or >3 lf		⊠ Re	enovat	ion		K Full Cor Mini-End	ntainment with Ne	gative Pressure				
≥160 sf or ≥260 lf			emolitic				ag Procedure					
				N = 10				on-Friable Procedu	re			
			Locatio						A	Abate		
Location	n of		omally Solel			Description of				Тур	e	
Asbestos-Containing		Mai	ntenan	ce/		os Containing Mat	erial (ACM)	Amount			ш	
TO BE ABA		1000	ustodia Staff?	al	(i.e.,	thermal systems in		(Specify SF or LF)	Re	Z	Encapsulate	Enclosure
(13)			(12)			surfacing, VAT, other miscellaned		SF OF LF)	Remova	Repair	psu	SOIS
		Vaa	Na	NI/A	1				/al	-	ilate	ure
		Yes	No	N/A								
Basem	nent		×			Sheet Floori	ing	1000 sf	×			
								W				
Name of Registered Wa	aste Hauler		IN	JDEP V	Vaste I	Cubic Yards	Name of Regi	stered Landfill				
		rices Ta-	1 1	lauler ID	No.	of Waste			J.C.11			
Stevens Environ	intental Serv	vices, inc	<u>- -</u>	182	292	5 cu	1	Fairless Land	1IIII			_
City, State	A 11	3.77				Disposal Date	City, State					
	Allentow					9/15/17/1	h / /	Morrisville,	PA			
Completed By		Title		3.5		Signature	1	Date	0/0	11-		
Mahlon E. St	levens	Pi	ojeci	Mar	ager	- 44	_/		8/23	5/1/		_

			NOT	Pun (Pun	TION OF A	New Jersey ASBESTOS ABAT JAC 8:60 and 6:1	EMENT		Che	ek#	25	576	5
Dale of Notification (1)	24/17			N	alma of Bul	Iding Owner/Operat	or (2)					econtrol (SA)	
Agencies Notified	THE RESERVE TO SHARE THE PARTY OF THE PARTY	***************************************		1 -		St	Peter's M	edine	Canta	t	. 8		-17
	Type Notifica			Ş	rest Addre	41	9107 B 741	CUILD	Center		-	_	
E SPA	initial Amended			_		5.50	254 Eas	- A	-1-		-	$\overline{1}$	7
DOL	Amended	- 1 40		C	ty, State, Z	D Code	ZJ4 CH	on A	V.o.		N 600 /00 11		1
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DOH DOA	luntillication	\m\	ani 18	NI-		New	Brunswi	ck.N	J.05901	-	1.1	1: 3	
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		-		1-	N	Ir. Ron Carval	ho	1	The state of the s	a Carl Infami	1	Н	M
Name of Facility				1	FACILITY I	NFORMATION							
Name of Facility Where Al	batement is Ta	king P	ac= (3)			01497111014	-		111111				505
	Meg	lical (cnte	T			Type of F	acility (42	AUG	2	0 2	017
Stroot Address		BACKNESS.			NI STATE OF THE PARTY OF THE PA		School	(K-12		NOU	_	J 2	UII
	254	Easto	n Ave	4			Other	apter a	(Other then	K-12)			
City (8)							nome	, etc.)	vate & comm	CLCHE!	uldi;	102	
	New B	er smerr	rial.	N/T			Square F	et	Par Floors		Pido	- Ada	DROL
County (8)		Vienno A	VICE				_1000	00	- 5			SA98	1
	lesex			100	DUNKY Code	(7) (STATE	Current U	te (Pric	r If bining dam	Mehr	77	T/	-
Name of Monitoring Firm H	ord by Bullia	- C					F			19101100	4)		
(a) Environm	ental Tacti	M CMUE	ir]	ASC	M No.	Name of Abaten	neni Contrar	or (9)		-			
Street Address	CILLUI A BCT	CS		_		Stev	ens Envi	יייי	ental Serv	la-	τ.		1000
	4 D		-			Birset Address	201101	CTHE	CHIMI ZOLV	ices,	Inc.		-
DA. Olivia Bio	4 Broad S	reet		Certier I Commission				n Da	x 322		Aulu-	7.7	
City, State, Zip Code			wall pullba			City. State, Zip C	-	080	X 322				
	Malawan,	M				Only, Guard, Zip C			244 22				
loject Manager for Monitor	ring Firm		TTE	ephone	a hin		Allen	OWIL,	NJ 08501	-			1
Tom Ge	iger				98-4070	Telephone No.			License Ne				
ter Date (TO)	THE OWNER WHEN PERSON NAMED IN	Adulad	100	07) 2	late (11)	(609) 25	9-9688	_		0049	93		- 1
8/24/17	1 3011				Male (11)	Name of OSHA A	ionitor						-
coupancy Status During A			8/28/	17	-			ME	CS .				- 1
Pacifity Closed/Vacated [natalith (CH	eck only	y one)			Street Address							
- and and a committee for													
3 Abalement Performed Du	Sport of pictors	erias a	Abate	ורשניוו		CANADA CANADA	Pe) Box	341				- 1
E - PIONTE LONG CA	stalds of Norm	erida di	f Abate ty Hou	rs en		CANADA CANADA	Pe) Box	341			_	
Other - Describe:	itside of Norm	erda di	f Abate ty Hou	ns ns		City, State, Zip Co	de					_	\dashv
Other - Describe:	itside of Norm	eraa q	f Abate ty Hou	rs		CANADA CANADA	de		341 NJ 08515			_	
Other - Describe:	itside of Norm	si Fagiji	ty Hou	rs		City, State, Zip Co	Crossw	icks,	NJ 08515	>		_	
Other - Describe:	itside of Norm	E R	novati	ns on		City, State, Zip Co	Crossw	icks,))			
Other - Describe:	itside of Norm	E R	ty Hou	ns on		City, State, Zip Co	Crossw einment with	icks,	NJ 08515			_	
Other - Describe:	itside of Norm	Re De	enovationolitio	on on		City, State, Zip Co	Crossw einment with	icks,	NJ 08515				
Other - Describe: Cope of Work (Check all this 3 st or 28 if 2160 st or 280 if	apply)	Re De	enovationolisio	on on		City, State, Zip Co	Crossw einment with	icks,	NJ 08515	Lire		iment	
Other - Describe: Cope of Work (Check all this 3 st or 23 if 2160 st or 2260 if Location of Asbestos-Contention Metales	apply)	Re De	encystic encystic encystic	on on		City, State, Zip Co	crossw einment with osure Procedure opted (*) and	icks,	NJ 08515	Lire	Abate		
Other - Describe: Cope of Work (Check all the 23 st or 23 st or 260 st or 2	apply)	Is I No Veed Mair	enovationolisio	on on on one	Asbest	City, State, Zip Co	Crossw einment with osure Procedure npted (*) and	icks, Negati	NJ 08515 ve Pressure	Lire		PE T	
Other - Describe: Cope of Work (Check all the 23 st or 23 if 2160 st or 2260 if 24 steels - Containing Maler TO BE ABATED IN Facility	apply)	Report Re	enovati emolitio coatio comally dolely denance stodial	on on on one	[1,6.,	City, State, Zip Co	Crossw einment with osure I Procedure inpted (*) and	icks, Negati	NJ 08515 Ve Pressure Tiable Proced Amount (Specify	ure	ולד	PE T	\blacksquare
Other - Describe: Cope of Work (Check all the 23 st or 23 st or 260 st or 2	apply)	Report Re	enovati emolitio coatio emaly enancestodial	on on on one	[1,6.,	City, State, Zip Co	Crossw einment with osure I Procedure inpted (*) and	icks, Negati	NJ 08515 ve Pressure	ure	ולד	PE T	\blacksquare
Other - Describe: Cope of Work (Check all the 23 st or 23 if 2160 st or 2260 if 24 steels - Containing Maler TO BE ABATED IN Facility	apply)	Report Re	enovati emolitio coatio comally dolely denance stodial	on on on one	[1,6.,	City, State, Zip Co	Crossw einment with osure I Procedure inpted (*) and	icks, Negati	NJ 08515 Ve Pressure Tiable Proced Amount (Specify	Lire		PE T	\blacksquare
Other - Describe: Cope of Work (Check all this 23 st or 23 if 2160 st or 2260 if Location of Asbestos-Containing Mater TO BE ABATED N Facility (13)	apply)	Ri Pagis	enovationomicological de la constitución de la cons	on on on one	[1,6.,	City, State, Zip Co	crossw einment with osure Procedure noted (*) and fall (ACM) sulation,	icks, Negati	NJ 08515 Ve Pressure Tiable Proced Amount (Specify	ure	ולד		Enclosure
Other - Describe: Cope of Work (Check all this 3 st or 28 if 2160 st or 2260 if Location of Asbestos-Containing Maler TO BE ABATED N Facility	apply)	Ri Pagis	enovati emolitio coatio ormally dolely kenanci statt? (12)	on on on one	[1,6.,	City, State, Zip Co	crossw einment with osure Procedure noted (*) and fall (ACM) sulation,	icks, Negati	NJ 08515 ve Pressure mable Proced Amount (Spe dify SF or LF)	Removal	ולד	PE T	\blacksquare
Other - Describe: Cope of Work (Check all this ≥3 st or ≥3 if ≥160 st or ≥260 if Location of Asbestos-Containing Mater TO BE ABATED N Facility (13)	apply)	Ri Pagis	enovationomicological de la constitución de la cons	on on on one	[1,6.,	City, State, Zip Co	crossw einment with osure Procedure noted (*) and fall (ACM) sulation,	icks, Negati	NJ 08515 Ve Pressure Tiable Proced Amount (Specify	ure	ולד	PE T	\blacksquare
Other - Describe: Cope of Work (Check all this 23 st or 23 if 2160 st or 2260 if Location of Asbestos-Containing Mater TO BE ABATED N Facility (13)	apply)	Ri Pagis	enovationomicological de la constitución de la cons	on on on one	[1,6.,	City, State, Zip Co	crossw einment with osure Procedure noted (*) and fall (ACM) sulation,	icks, Negati	NJ 08515 ve Pressure mable Proced Amount (Spe dify SF or LF)	Removal	ולד	PE T	\blacksquare
Other - Describe: Cope of Work (Check all this 3 st or 23 if 2160 st or 2260 if Location of Asbestos-Containing Mater TO BE ABATED N Facility (13)	apply)	Ri Pagis	enovationomicological de la constitución de la cons	on on on one	[1,6.,	City, State, Zip Co	crossw einment with osure Procedure noted (*) and fall (ACM) sulation,	icks, Negati	NJ 08515 ve Pressure mable Proced Amount (Spe dify SF or LF)	Removal	ולד	PE T	\blacksquare
Other - Describe: Cope of Work (Check all the 23 st or ≥3 if 2160 st or ≥260 if Leastion of Asbestos-Contening Maler TO BE ABATED IN Facility (13) Basement	M spply)	Ri Pagis	enovation ocation ormally isolate in a control ocation ormally isolate in a control ocation oc	on on on one of the on	(1.6.,	Pull Cont Mini-End Gloveber Non-Exer Description of thermal systems ins surfacing, VAT, o other miscellaneous	Crossw einment with osure I Procedure npted (*) and fall (ACM) ulation, (*)	icks, Negati	NJ 08515 ve Pressure reads: Proced Amount (Specify SF or LF)	Removal	ולד	PE T	\blacksquare
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Other - Describe: Cope of Work (Check all the 23 st or ≥3 if 2160 st or ≥260 if Leastion of Asbestos-Contening Maler TO BE ABATED IN Facility (13) Basement	M spply) isl (ACM)	Report Re	enovationological enovationolo	on on on one of the on	No. 92	City, State, Zip Co	crossw einment with ossure Procedure noted (*) and fall (ACM) ulation, (*) 2	Non-F	NJ 08515 ve Pressure reads: Proced Amount (Specify SF or LF)	Removal X	ולד	PE T	\blacksquare
Other - Describe: Cope of Work (Check all the 23 st or 23 if 2160 st or 2260 if 2160 st or 2260 if 2260 if 23 st or 2460 if 24 sheets - Containing Mater TO BE ABATED IN Facility (13) Basement Basement Eevens Environments 4 State	M apply) ial (ACM)	Ra R	enovationological enovationolo	on on one on one one	No. 92	City, State, Zip Co	Crossw einment with osure I Procedure npted (*) and fall (ACM) ulation, (*)	Non-F	NJ 08515 Ve Pressure THE DIST Proceed Amount (Specify SF or LF) 000 sf	Removal X	ולד	PE T	\blacksquare
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