State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

				ON OF ASBESTOS ABATEME	INT	C & A	~ ~ ~	15	1	7
Date of Notification (1)		(P		to NJAC 8: 60-7 and 12: 120-7)	(2)	CK# ()d.	7)	600	<u></u>
1-1-1-1-1	4 / 1 8		11	ame of Building Owner/Operate J-Dept.of Environmental Protec		toric Resources-Office of	Resource	e Deve	lopme	ent
Agencies Notified Type of [X] EPA	Notification			reet Address D1 EAST STATE STREI	ET, 4TH FLOO	RECE	n W	E	Ĭ,	
[X] Ini	tial Notification			ty, State, Zip Code		1 L., \L9 L.,	17	L	114	111
	nended Notification			RENTON, NJ 08626-042	20				A STATE OF THE PARTY OF T	Andread Services
	ncellation		N:	ame of Contact	·	Telephone Nu	nber	}	110	J 1 1
[] DCA [] En	nergency		ll M	IR. AL PAYNE		609-351-1			-	1
Name of Francis No. 11 and 12			Ш	ILITY INFORMATION		ASSECTIONS	CalTR	OLE		- 1
Name of Facility Where Abatement is Taking					Type of Facility	(4)	H43			
BRENDAN T. BYRNE STATE FOI Street Address	REST - LUCK	Y 13 CAI	BIN		I I	School (K-12) Subchapter 8 (Other t	han K-12	2)		
2900 ROUTE 70					[X]	Other (i.e., private & c	ommerci	aI		
	unty (6)		Cot	inty Code (7)	Square Feet	buildings, homes, etc.) # of Floors	T B	ldg. A	ge.	_
	00200 BM		100,000,000	ATE USE ONLY)	5,000 +	1	50 +	-	ge	
	IRLINGTON				CABIN	ior if being demolished)				
Name of Monitoring Firm Hired by Building (Owner (8)	A	SCM	Name of Abatemen	nt Contractor (9)					
USA ENVIRONMENTAL MANAG	EMENT INC.		001	J.R. CONTRA	CTING & ENV	IRONMENTAL C	ONSU	LTIN	G I	NC.
Street Address				Street Address						
344 WEST STATE STREET				1141 ROUTE	23					
TRENTON, NJ 08618				City, State, Zip WAYNE, NJ 0	7470					
Project Manager for Monitoring Firm		Telepho	ne Numb			License Numbe	r	-		-
WILLIAM WEISGARBER		609-65	6-8101			00408				
Scheduled State Date (10)	Scheduled Com			Name of OSHA Me			07-00-0000		*******	
0 9 1 0 / 1 8 Month / Day / Year	Month	/ Day		1 8 J.R. CONTRA	CTING & ENV	IRONMENTAL C	ONSUI	LTIN	G II	VC.
Occupancy Status During Abatement (Check o	nly one)	, Day	-	Street Address					-	
[X] Facility Closed/Vacated Du of Abatement	ring Entire Period			1141 ROUTE	23					
[Abatement Performed Outs	side of Normal Fac	ility		City, State, Zip Co	de			_	_	-
Hours - Describe: Other - Describe:				- WAYNE, NJ 0	7470					- 1
Scope of Work (Check all that apply)										\dashv
		[X] De	emolition enovation			t With Negative Pressure				
		[] [novation		Mini-Enclosure Glovebag Proced	lure				
[X] ≥ 160 sf or ≥ 260 lf				[X]	Non Exempted (*) and Non-Friable Proce	dure			
		Is					A	batem	ent T	ype E
		Locatio		Description of			R		N	N
Location of Asbestos - Containing		Norma Used		Asbestos-Containin Material (ACM)	g	Amount	E	R	C	C
Material (ACM)		Solely		(i.e., thermal system	s	(Specify SF or LF)	M O	E P	A P	L O
TO BE ABATED in Facility (13)		Mainten: Custod		insulation, surfacing			v	A	S	S
in Pacinty (13)		Staff (1		or other miscellane	eous)		A L	R	U	R
DOOF		Yes No	o N/A						E	E
ROOF			X	Black Tar Paper -Flas		1,860 SF	X			
EXTERIOR SIDING-REAR GABLE EXTERIOR SIDING	E.		X	Black / Grey Tar Pape	r Siding	220 SF	X			-
1 st FLOOR			X	Black Sealant Linoleum		2 SF 700 SF	X	-	\dashv	
1 st FLOOR			X	Drywall & Joint Comp	ound	1,220 SF	X		-	
EXTERIOR			X	Window Glazing		96 LF	X			
Name of Registered Waste Hauler		NJDEP V	Waste	Cubic Yards of Waste	Name of	Registered Landfill				
J.R. Contracting & Environmental (Consulting Inc	Hauler II		60	1					
City, State	onouning, me	170		Disposal Date	City, Stat	Central Landfill				_
Wayne, NJ				1 0000 0000 0000 000000000000000000000		gyle, PA				
Completed by (Print or Type)	Title			Signature	7/	Date	11111111			
Jerry Bijelonic	Project Ma	nager						24/18	3	
In the								G4667		

PAIL							53	The state of			to.	0	1	156	23
Date of Notification (1) 08/24/18				f Building (P - Natu				ources - O	ffice	of Reso	ourc	e D	evel	opm	ent
Agencies Notified Type Notification X EPA X Initial			Street A 275 Fr	^{ddress} eehold -	· Engli:	shtowr	n Ro	ad	A	UG 3	n 3) 110		To the second se	The same same same same same same same sam
EPA Initial Amended Amendment #	3			ite, Zip Co htown, N		26		The state of the s	41	00 0	17 7	MO		A Property	
Emergency (in justification) DCA Cancellation	cluding			f Contact		201		F	Tel	ephone (32) 462	Numb	ero	La		1
DCA Cancellation				LITY INFO	DMATI	ON			11.	121,402	-300) O	er, 2, e e gaber	-	1
Name of Facility Where Abatement is Taking Clinton Wildlife Management Area- I			FAOI	LITTIMFC	ZNIMATI	ON	Тур	e of Facility (4	9	<u>ulia zyu</u>					
Street Address 50 Rupells Road			1838				×	School (K-12 Subchapter of Other (i.e. pr	(Oth			build	lings,	home	es,
City (5)								etc.) are Feet		Floors			dg. A		
Union Township							2,0	00 ÷	2			50) +	.ge	
County (6) Hunterdon			County (Code (7) USE ONLY)				rent Use (Prio sidence	r if bei	ng demo	lishe	i)			
Name of Monitoring Firm Hired by Building Ov USA Environmental Management, Ir			ASCM	1 No.				atement Cont tracting & E			al C	ons	ultin	g, In	c.
Street Address 344 West State Street						Street 1141		ess ute 23							
City, State, Zip Code Trenton, NJ 08618								Zip Code NJ 07470							
Project Manager for Monitoring Firm		- 1	Telephor			Teleph	none l	No.		License					-
William Weisgarber Start Date (10)	Schedul		*	556-8101 Date (11)	1			3-9200 SHA Monitor		00408	}				
09/17/18	09/24/	18	iipiotioii i			J.R.	Con	tracting & E	nviro	nment	al C	ons	ultin	g, In	C.
Occupancy Status During Abatement (Check						Street 1141	115217-0-00	ess ute 23							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:						City, S	state,	Zip Code NJ 07470							
Scope of Work (Check All That Apply)						vvay	110, 1	10 01410				-			_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	e of Work (Check All That Apply) ≥3 sf or ≥3 lf Ren							ull Containme lini-Enclosure llovebag Proc on-Exempted	edure					9	
	Is	Locati	on					J. Zhomptou	() () ()	3 1101111				ment	
Location of	1	Normal	ly		De	scription	of				-	_	Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	ed Sole aintenar todial s (12)	nce/ Staff?		thermal surfa	aining N system cing, VA niscellar	s insu T, or		(8	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
B 100	Yes	No	N/A								_				
Room 103			X	#316 kg #		Cem				3 LF	-	2			
Exterior Doors at Rooms 102 & 106			X			or Cau				2 LF	-	2			
Roof			X	Bla	ick Tai	Roof	Flas	hing	5	SF	2	2			
Name of Registered Waste Hauler			IDED '	/	0.11	Vasi		I No.	\	- 11	1511				
J.R. Contracting & Environmental Co	nsul.,	Inc H	IJDEP W lauler ID 7819		of Was	Yards ste		Name of F							
City, State Wayne, New Jersey					Dispos	sal Date		City, State Pen Arg		ennsylv	ania				
Completed by Jerry Bijelonic	Title Proje	ect Ma	anager	8	S	ignature	9 <	4			Date 08/2		8		

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The state of the state of		Specific Control	11-9-15 (2000)

Date of Notification (1) 8/27/18				Building ((E	G I	E I V	7 E	1	\\	
Agencies Notified Type Notifica	tion	5	Street Ad	ddress			1	Ha (3/ 1	u t.	Lin	1	The second secon	
EPA Initial Amendo	nd.			ennedy l					10	3 (1 20	8			- Day Berlin
DOL Amend				dale NJ		1				U. 17 LIG	0	-		
DOH justifica	tion)	1 1	lame of	Contact				ASBS		phone Nu 6-546-00			Park Trans	2
				LITY INFO	RMATI	ON		# C40 F 190 W T4		iNolivia		mark of the	1	
Name of Facility Where Abatement is Bridgeton Housing Authority	Taking Place (3)						_	of Facility (4)						
Street Address							X S	School (K-12) Subchapter 8	(Othe					
47 Nancy								Other (i.e. pri etc.)	vate 8	& commerc	ial buil	dings	, hom	es,
City (5) Manahawkin NJ 08050							Squar 1000	re Feet	# of 2	Floors	11 8	35+	Age	
County (6)				Code (7)			- 141.0-1.007	nt Use (Prior		ng demolis	(C.)	-		
Cumberland		1		ISE ONLY)			Hou							
Name of Monitoring Firm Hired by Buil N/A	ding Owner (8)		ASCM	l No.			of Aba naco I	tement Contr	actor	(9)				
Street Address							Addres							
City, State, Zip Code							Box 3	29 p Code			1011000			
City, State, 2ip Code								in NJ 0809	1					
Project Manager for Monitoring Firm		7	Telephor	ne No.			none No			License N	lo.			
Start Date (10)	Scheduled	1 Com	pletion (Date (11)			753-9 of OSE	A Monitor		00727		-		
8/28/18	8/31/18			(/		Sam							,	
Occupancy Status During Abatement (Street	Addres	SS						
Facility Closed/Vacated During El Abatement Performed Outside of Other – Describe:			ent			City, S	tate, Zi	p Code			2-2-2-2	-		
Scope of Work (Check All That Apply)										•				
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Location of	No	ormally Solely	V			scription					-	T	/pe	_
Asbestos-Containing Material (ACI TO BE ABATED	") Mair	tenan	ce/		tos Cont thermal	system	s insula		(S	mount Specify	Re	R	Encapsulate	Enc
In Facility (13)		(12)				cing, VA niscellar			SF	or LF)	Remova	Repair	psula	Enclosure
	Yes	No	N/A										ite	0
Unit 9 H			x		Floor T	Tile & r	nastic	:	53	30 SF	х			
												_		
											-	-		
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic	Yards		Name of Re	enista	red Landfi				
United Roll Off		Ha	auler ID 2459		of Was			G.R.O.V		rea Lanan	•			
City, State		24	2408		1.00	sal Date		City, State						
Elm NJ					8/31/			Morrisvil	le P					
Completed by Anthony T Perna	Title Presid	dent			S	ignature	l			1 -	ate /27/1	8		

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Date of Notification (1) 08/27/2018				Building (vich Resi					AII	7 ~ 6	2 2	010	Carl (2) Ann season	-	
Agencies Notified Type Notification EPA Initial		100	Street Ad 120 W	^{ddress} Germar	ntowr	n Pike, S	Suite	120	Atj	7 5 5) A	<i>)</i> 0	Service September	and .	1000
DEP Amended Amendment #		_	Plymo	ite, Zip Co uth Mee		PA 194	62	Ž		TOS C	SIL	1	. 8.		N
DOH justification Cancellation	cidaling	1 2 2 2 2		Contact iore, Jr.						ephone 1 0-277-8					
N (5 11/2 14/1 A) (7 7 1	DI /0		FACI	LITY INFO	RMA	TION	-	· = · · · ·	**						
Name of Facility Where Abatement is Taking Farm at intersection of Kings Hwy at Street Address			tation l	Rd				of Facility (School (K-1 Subchapter	2)	ar than k	(12)				
Intersection of Kings Hwy and Asbu	y Stat	ion Ro	d				Ø	Other (i.e. p etc.)	rivate 8	& comme		build	90 7 2 8		s,
City (5) Woolwich, NJ),		re Feet		Floors			dg. A	ge	
County (6) Glaucester		(Code (7) USE ONLY)			Curre	ent Use (Prid ant	or if bei	ng demo	olishe	ed)			
Name of Monitoring Firm Hired by Building Or Indoor Environment Concepts	wner (8)		ASCN	1 No.				itement Cor nvironme							
Street Address 286 Sunset Road							Addre: Glenv	ss vood Driv	е						
City, State, Zip Code Barrington, NJ 08007-1439						1,000,000,000		ip Code on Crossii	ng, PA	1897	7				
Project Manager for Monitoring Firm Mike Menz			Telephor (609) 5	ne No. 502-2213	3		none N 240-8			License 01225					
	Schedule 09/29/2		pletion (Date (11)		Name Sam		HA Monitor		(
Occupancy Status During Abatement (Check	Only Or	ie)				Street	Addre	ss							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	eriod of /	Abatem Hours	ent		_	City, S	State, Z	ip Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovat Demoliti				2	Mir Glo	Il Containme ni-Enclosure ovebag Prod n-Exempted	e cedure	A 600 - 100				е	
Location of	1	Locatio	у		П	escription	of.						111111111111111111111111111111111111111	ment pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	d Solel intenan todial S (12)	taff?		os Co therm surf	ntaining Nal system facing, VA	//ateria s insula tT, or	ation,	(5	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A												
				X											
Name of Daviet		1.35	IDEE:					I NI	D		16.1.				
Name of Registered Waste Hauler Service Transport Group		H	JDEP W auler ID N2117	No.	1.000	ic Yards /aste)		Name of Minerva							
City, State New Castle, DE					Disp TBD	osal Date		City, State Waynes		ОН					
Completed by Elizabeth Gosek	Title Pres	ident				Signature	4	4	2		Date 08/		2018		



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Date of Notification (1) 08/27/2018						r/Operator tial, LLC			A 1	0 0	0 0	010	100	The second secon	Charles of American
Agencies Notified Type Notification EPA Initial		100	Street Ad 120 W		ntow	n Pike, S	Suite	120	AU		12 6	Ujū	Chert bed by the contract		Design of the last
DEP Amended Amendment #		-	Plymo			PA 194	62		ASBES	TOS (LICEN	NOC SPU	THO 3	Lä	a.4554 +	The species
DOH justification) Cancellation	iologing	100		Contact iore, Jr.					100000000000000000000000000000000000000	ephone 0-277					
			FACIL	LITY INFO	ORMA	TION									
Name of Facility Where Abatement is Taking Farm at intersection of Kings Hwy a Street Address		ry S	tation F	Rd			Тур	School (K-2 Subchapter	12)	th	V 10				
Intersection of Kings Hwy and Asbu	ry Statior	n Ro	d				図	Other (i.e. p					lings,	home	es,
City (5) Woolwich, NJ							Squ	iare Feet	# of	Floors		В	ldg. A	ge	
County (6) Glaucester			County C STATE U	Code (7) ISE ONLY)				rent Use (Pri cant	ior if bei	ng dem	olish	ed)			
Name of Monitoring Firm Hired by Building Of Indoor Environment Concepts	wner (8)		ASCM	l No.		0.5000000000		patement Cor Environme		9.5					
Street Address 286 Sunset Road						Street 150		ess wood Driv	/e						
City, State, Zip Code Barrington, NJ 08007-1439								Zip Code ton Crossi	ing, PA	1897	77				
Project Manager for Monitoring Firm Mike Menz		11 8	Telephon (609) 5	ne No. 102-2213	3	Teleph 267-		No. -8365		Licens 0122).			
	Scheduled 09/29/20		pletion D	Date (11)		Name Sam		SHA Monitor							
Occupancy Status During Abatement (Check	Only One)					Street	Addr	ess							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	eriod of Aba I Facility H	atem ours	ent		_	City, S	state,	Zip Code	- 311						
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	novat				×××××××××××××××××××××××××××××××××××××××	I O	ull Containm lini-Enclosure lovebag Pro- lon-Exempte	e cedure					e	
	ls Lo Nor	36000											ment pe		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custod	Solel enan	y by ce/		os Co therm sur	Description ontaining Mal systems facing, VA r miscellar	Materi s insu T, or	ılation,	(S	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes 1	No	N/A											Ф	
				3											
Name of Registered Waste Hauler		N.	JDEP W	aste		ic Yards		Name of	Registe	red Lar	ndfill				
Service Transport Group			uler ID I V2117	No.	TBE			Minerva		rprise	S				
City, State New Castle, DE					Disp TB[City, Stat Wayne		ОН					
Completed by Elizabeth Gosek	Title Preside	ent				Signature	4	14	2		Date 08/	e 27/2	018		

	- -	Is Location Normally	V on]			Abate Ty	Abatement Type
Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Ma Cus	Used Solely by Maintenance/ Custodial Staff? (12)	nce/ Staff?	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Remov	Repair	Enclosu
(13)	Yes	No	NA			le		-
Farm House			×	Flue packing	2 SF	×		
Farm House			×	Pipe insulation	1 LF	×		
Small Barn			×	Roof shingles	30,415 SF	×		
Worker House #1			×	Window glazing	10 windows	×		-
Farm House #3			×	Window glazing	45 windows	×		-
Farm House #3			×	Pipe insulation and debris	90 LF	×		1
Farm House #3			×	Wall transite exterior	2,600 SF	×		-
Garden Fruit Building			×	Window caulk	3 windows	×		-
Fire-damaged Structure			×	Transite exterior	600 SF	×		+
Worker House #3			×	Window glazing	11 windows	×		
Worker House #3			×	Transite	1,200 SF	×		



NOTIFICATION OF ASBESTOS ABATEMENT Check#3152 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 08 _ / 18 Tim Entwistoe Type Notification Agencies Notified Street Address ☐ EPA ✓ Initial DOLWD. ☐ Amended City, State, Zip Code ASBESTOS CONTROLA Amendment # X DHSS Ridgewood, NJ 07450 ☐ Emergency (including DCA (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation Tim Entwistoe FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) Ridgewood, NJ 07450 County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) County (6) 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 License No. Project Manager for Monitoring Firm Telephone No. Telephone No. 01127 973-638-1777 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor 09 / 18 09 / 08 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/ Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure Mini-Enclosure Renovation Glovebag Procedure Tent with Negative Pressure Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Encapsulate Enclosure Remova Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ (i.e., thermal systems insulation. TO BE ABATED (Specify Custodial Staff? SIF or LF) IN Facility surfacing, VAT, or (12)(13)other miscellaneous) Yes No N/A X X 30 LF Pipe insulation Basement П Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill TBD T.R.R.F. Inc Gr Tech LLC 0033785 City, State Disposal Date City, State Tullytown, PA Wayne, NJ 07470 TBD Completed By (Print or Type) Title Signature Date ewic wenad 08/27/18 N.Jevtic Owner

State of New Jersey

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

Data ECNISTIC AND									IIII E C	E	11	MI	F-1 P
Date of Notification (1)	23 /	18			and different	of Buildin unty of L	g Owner/Operator Inion	(2)		La .	<u> </u>	<u>U</u>	
Agencies Notified	Type Notifica	ation			Stree	t Address			III AUG	- A - A			- 111
⊠ EPA	nitial				1000000		ion Building-Eli	zabethtown Pla		J (20	18	Printers of the second
☑ DOLWD	☐ Amended	TT 100 1000				State, Zip (Labountown	1				-
☑ DHSS	Amendm		-		1	zabeth, N			ASSESTO	18 TY	Al co	-	- Francis
DCA	☐ Emergen		cluding	3		of Contac			The state of the s		110	UL. 0	ž.
(NJAC 5:23-8)	justificati							C 14	Telephone Num				eren e
	L Caricella	lion			_		nt - Ryan Jones,	C.IVI.	609-276-738	2			
					FA	CILITY IN	NFORMATION						
Name of Facility Where A		Γaking	Place	(3)				Type of Facility	(4)				
Union County Cour	rthouse							School (K-12					
Street Address									3 (Other than K-12) rivate and commer		ildina	ıs	
2 Broad Street								homes, etc.)				,-,	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Elizabeth								55,000	5		80 +	yrs.	
County (6)					Cou	nty Code (7	(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)			
Union								Office Build		75)			
Name of Monitoring Firm	Hired by Build	ding C	wner ((8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
T and M Associates	3				001	45	12.000.00-2.000.000.000.000.000.000.000.0	laz Mat Remov					
Street Address				-			Street Address		,				
1455 Broad St., Sui	te 250						494 East 41s	t Street					
City, State, Zip Code							City, State, Zip C						
Bloomfield, NJ 070	03						Paterson, N.						
Project Manager for Moni				To	lephone	No		07304	11: 11-				
Kevin Burns	itoring r irii						Telephone No. 973-345-0022	2	License No.				
	10	Cabad	ulad C		908-347				00507				
Start Date (10) 08 / 27 /	Company of the Compan				letion Da 22 /		Name of OSHA N						
								ove			-1		
Occupancy Status During	AND THE PROPERTY OF A PARTY OF A STATE OF A PARTY OF A STATE OF A						Street Address						
☐ Facility Closed/Vacate ☐ Abatement Performed													
Time of Abatement:							City, State, Zip C	ode					
Scope of Work (Check all	that apply)						☐ Full Con	tainment with Neg	native Pressure	111			
☐ ≥3 sf or ≥3 lf			⊠ Re				☐ Mini End	doouro		- 0-			
≥160 sf or ≥260 If			∐ De	molit	tion		☐ Gloveba	g Procedure - M	INAPACUI	PX	CCG	elun	· CJ
			le	1 000	ation	т	□ NOII-EXE	impled () and No	n-Friable Procedur	1 55	V		
Location	of			Vorm			Description	of			1	ent Ty	
Asbestos-Containing I		1)	Use	d So	lely by	Asbe	stos Containing Ma		Amount	Rer	Repair	Enc	Enclosure
TO BE ABA					ance/ I Staff?	(i.e	., thermal systems		(Specify	Removal	air	aps	los
IN Facilit (13)	ty		Ouoi	(12			surfacing, VAT other miscellane		SF or LF)	<u>n</u>		Encapsulate	ure
			Yes	No	N/A	1	outer micocharie	,040)				e	
Throughout 1 st , 2 nd , 3	rd & 4 th Floo	ors				Wall/ce	iling plaster		9,700 SF				
Throughout 1st, 2nd,	3rd, 4th Flo	ors				Pipe In	sulation		500 LF				
				П						П	П	П	
Name of Registered Wast	te Hauler				NJDEP		Cubic Yards of	Name of Regis	tered Landfill	1-			-
East Coast Haz Mat		nc		13	Hauler II		Waste		., North W/M of	DΛ			
CONTROL OF THE PROPERTY OF THE					419		150		., 1401411 99/19/10/1	. ^			
City, State							Disposal Date	City, State					
Paterson, NJ	No. 22			esceriore.			Various 2018	Morrisville	, PA				
Completed By (Print or Ty	rpe)	Title					Signature	/ //	Da	11			
James Unger		Sr	. Esti	mat	or/Proj	ect Mgr.	leur	9 14	0	13- :	23	-/	8
SR 41		A		-				4 1/1/	10			0 5	e.:

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

Date of Notification (1)					1.1				In E C	E	11	1/1	FF P
	10 /	18			100	e of Buildin ounty of l	g Owner/Operator (Jnion	(2)		127	<u> </u>	<u>"</u> [5
Agencies Notified EPA	Type Notific				200,000	et Address Iministra	tion Building-Eli:	zabethtown Pla	Za AUG	30	20	18	The second secon
☑ DOLWD ☑ DHSS	Amende Amenda					State, Zip							-
☐ DCA	☐ Emerge	ncy (inc		g g	_	zabeth, N		ļ.	ASBESTO LIC	S COL	NTR	OL 8	-1 1
(NJAC 5:23-8)	justificat				4	e of Contac vers Age	^{ct} nt - Ryan Jones,	C M	Telephone Nun 609-276-73	nber	the one the second of	Charles of the S	Name of Street or other party.
	-						NFORMATION	O.IVI.	009-270-73	52			
Name of Facility Where	Abatement is	Taking	Place	(3)		CILITTI	NFORMATION	T 5 E - 100 /					
Union County Cou		raining	1 1400	. (0)				Type of Facility (
Street Address			-					School (K-12) Subchapter 8) (Other than K-1:	2)			
2 Broad Street								Other (i.e., pr	ivate and comme	rcial b	uildin	gs,	
City (5)		-						homes, etc.)	Tu 751				
Elizabeth								Square Feet 55,000	# of Floors		ldg. A 80 +	\ge · yrs	
County (6)					Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Price				y.0	<u> </u>
Union							·	Office Buildi		Jiiouj			
Name of Monitoring Firm		lding O	wner	(8)	ASCM	No.	Name of Abateme		9				
T and M Associates	5				001	45		laz Mat Remova	al. Inc.				
Street Address			2012112	2000			Street Address		,				
1455 Broad St., Sui	te 250						494 East 41s	t Street					
City, State, Zip Code							City, State, Zip Co	A CONTRACTOR OF THE PROPERTY O					
Bloomfield, NJ 070							Paterson, NJ						
Project Manager for Moni	toring Firm			Tel	ephone	No.	Telephone No.		License No.				
Kevin Burns				9	08-347	7-4396	973-345-0022		00507				
Start Date (10)		Schedu	ıled C	ompl	etion Da	ate (11)	Name of OSHA M	lonitor				100	-
07 /23 /	18	07	7 /	_2	2_/	19	Same as abo	ve					
Occupancy Status During	Abatement (Check	only o	ne)			Street Address		Yan iso.				_
☐ Facility Closed/Vacate	d During Enti	ire Peri	od of	Abate	ement								
Abatement Performed of Abatement:	Outside of No AM- <u>2:30</u> PM/	ormal F 11:pm	acility PM	Hour	rs - Desc _AM	cribe Time	City, State, Zip Co	ode					
Scope of Work (Check all	that apply)											-	
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf]	⊠ Rei □ Dei	novat moliti			∐ Mini-Encl ⊠ Glovebag			re			
1977 West				Loca							atem	ent T	vne
Location Asbestos-Containing N		n		lorma d Sol	ally ely by	A = b = -	Description of				T	T	
TO BE ABA	TED	"	Mai	ntena	ance/	(i.e	stos Containing Mat ., thermal systems i	terial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facilit (13)	у		Cust	odiai (12)	Staff?		surfacing, VAT,	or	SF or LF)	oval	≥.	psul	Sur
			Yes	No	N/A		other miscellaned	ous)				ate	l to
Throughout 1 st , 2 nd , 3	rd & 4 th Floo	ors			\boxtimes	Wall/cei	ling plaster		9,700 SF				Ы

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Name of Registered Wast	e Hauler			TN	JDEP V	Vaste I	Cubic Yards of	Name of Registe	red Landfill		ш	Ш	
East Coast Haz Mat	Removal, I	nc.		1233	lauler IC 419	S 10. 1	Waste 150		North W/M of	PA			
City, State							Disposal Date	City, State					
Paterson, NJ							Various 2018/	1 8	PA				
Completed By (Print or Ty	pe)	Title		antonia.			Signature	111	Da	te			
James Unger		Sr.	Estir	nato	r/Proje	ect Mgr.	har	4 les) - ,	15	. 1	12
SB-41				_			1 11000	· · · ·		1 1	11	16	1

MAY 11

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

PAID

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

CHOCK # 244

Date of Notification (1)	_				Name of Building Own	ner/Opera	tor (2)						
08/24/2018	3	T 51	_		Sussex Wattage Boa	ard of Edi	ucation	1		Belgingston, septem	يدو و روست موال ۵۰۰۰	MACHINE METERS	Contrary .
Agencies Notified		Notification	Type		Street Address 10 Loomis Avenue	The Book comp		E C	E	ll W	/ E	[1]	Carried Co.
☑ EPA □ DCA		☐ Initial No		n	City, State, Zip Code		3	to the time make the processing	f burning and	-	-		100
⊠ DOL				fication (including	Sussex NJ 07461		1						
□ DEP		justification		ilication (including	Name of Contact	1		Teleph	none N	umber	8 1	11/1	-
⊠DOH		☐ Cancelle			Francis Pietrowski	wood a specie		862-26	8-710	5	Competition	Sourced	- TOTAL SECTION
N (F 30)				FACILITY IN	I IFORMATION		<u></u>	ASBEST	os co	ONTR	01.8		The state of
Name of Facility Where All Sussex Wangle So	chool	Taking Place	<u>(3)</u>		Type of Facility (4) ☐ School (K-12)		and an experience		CENS				li di cara
Street Address	CHOOL				Subchapter 8 (oth	er than K	(-12)					Acces hinds and	
10 Loomis Avenue					Other (i.e. private & c	ommercia	l buildi	ngs., hon	nes, etc	c.)			
City (5)	County (6)		Coun	ty Code (7)	Sq. Feet: # 96000 of I	Floors:2	Bldg.	Age: 86 y	ears of	d			
Sussex, NJ	Su	ssex		Use Only)	Current Use (prior if be	eing aemo	olisnea)):					
Name of Monitoring Firm I	lired by Bld	g. Owner (8)	ASCI	/I No.	Name of Contractor (9))							
Health & Safety Services,	Inc.		117		BL Contracting Inc.	_							
Street Address					Street Address					T			_
PO Box 365 City, State, Zip Code					5 Marguerite Lane								
Berlin, NJ 08009					City State, Zip Code Towaco NJ 07082								
Project Manager for Monito	oring Firm	Telephone	Number		Telephone Number			License	- Numb	ner			-
Jim Proctor		609-839-24	32		973-901-0153			01265					
Scheduled Start Date (10)		Scheduled (Complet	tion Date (11)	Name of OSHA Monito	or							
08/25/18		08/28/18				-							
Occupancy Status During	Abatement (Check only on	<u>e)</u>		Street Address					-			-
□ Facility Closed/Vacated □ Abatement Performed Or	utside of No	re Period of Al mal Facility H	oatemer ours -	nt	City, State, Zip Code								
Describe		in the description of the contract of the second of the contract of the contra			Oity, Otate, 2ip Code								
⊠Other – Describe: Satur	day, Sunda	y, Monday 7A	M-3;30	PM									
Source of Work (Check all	that apply)										-	-	
≥ 3 sf or	≥ 3 If			☑ Renovat	ion	⊠ Mini-E	nclosur	'					
⊠ ≥ 160 sf d		i e		□ Demolitio		⊠Glove-b							
		8 242			2007	□ Non-Fr	iable P	rocedure					
Location of Asbestos-	ls Lo	cation Norma	lly		bestos Containing Mater		Amour		7	tement	Type		T
Containing Material (ACM) Facility (13)		d Solely by nt./Custodial S	toff?	(ACM) (i.e. them	mal systems insulation,			fy SF or					
. domey (10)	(12)		laii?	surfacing, VAT, o	or other misc.)		LF)		Remov	ve Repair	Encap E	enclose	
Gym	YES	S NO	NA 🗵	D.									
- Cym			i i	Remove concre	te and Pipe insulation		55 LF		×				
									-		-		
Name of Reg. Waste Haule	r	NJDEP Was	te Haule	er ID#	Cubic Yards of Waste		T	Name of	f Regis	tered I	andfill		
BL Contracting Inc		0036784			4			T.R.R.F		Test (Structus)			
						Dispo	sal Da	te	10	City, Sta	ate		e e
										ullytow			
Completed by (Print or Type	e)	Title			Signature	08/28/	2018	Date					_
Nedo Vasilic		Project Man	ager		Minds Upo	11/2		8/24/201	18				
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AMAC

HOTERCATION OF ASSESTOS ASATEMENT

CHECK # 1132

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Date of Notification (1) 8/22/18			Neme		OWNEY OPERAL		** ***	DUL-	14	YAC	erni .		and the same
Agencies Notified Type Notifie	talkon -		Street /	Address	IELD CH	<u> </u>	-	MYEN?		7	-	2	1
EPA Initial Ameni			CNy, St	ata, Zp Ca	700 Mai		-	WEAUG	25	THE STATE	9	L.,	School School
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DOH justific	<u>footba</u>	'		if Contact			1/	A KIEST	ופניי	ורול	IED		+
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Name of Fecility Where Abstement Is	Taking Piace (3)	9710	rame e a a a a a	etwart rete	Type of I	dit	(4)		151.15		EN.	Sin
Street Address	· · · · · · · · · · · · · · · · · · ·					Sot	# (%)	-12)					
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City (5)	9 E E	10085 MILE		Pi	and the second second	Square F	Bit .	# of Floo	ris .	Fe	đà. A	168	
ALLENT	MIE					175		7		1	450		
County (8)				Code (7)) .	1	11	rior if being da		edj			
Name of Monitoring Firm Hired by Bul	iding Öwner (6))	ASCI	VI NO.	Name	nt sharen	4	Suffector (9)	٤.				_
				erectores val.	A,M	AC Cont	cth	g Inc.					
Street Address		- Alder				Address	thirty-in		v				
City, Stata, Zip Code						Midland							
			- 1			and Park		07432					
Project Manager for Monitoring Firm		T	Telepho	ris No.	Telapi	hans No.	MANAGEMENT AN	Lice	nee No		~		-
Start Date (1p)	Settachil	M Fa	replation	Date (11)		262-584		001	58	-	-		-
8/22/18	à	1/2	2/18	₩RPS (11)		of DSHA I		miai Servic	as inr				
Occupancy Status During Abstantant (16)	-		Street	Address							
Facility Closed/Vaceted During E. Abstantiant Parliamed Quizide of	ntim Period of A	beten	rent			Huyler S							
Other - Describe:	ALEKTICA (SECOLO)	- FOUR		· · · · · · · · · · · · · · · · · · ·		itate, Zip Či konsack,		7606					
Scope of Work (Check All That Apply)	- Ada barrano	ностичност	NO. THE PROPERTY OF THE PARTY O	***************************************	1 199	WI WHALL		1000	-		Pada/assucre		
2 >180 at at 2280 f		lenova lemailt				#inkEn	DELI	ent with Nega endure d (") and Non-					
1 a monocipiosis marcos	13	Làceti	on .			m (mar-c)	4100	TI I HINT LAND	1 600 176 10		bater	ותמחנ	
Location of Authorities-Containing Material (ACA		dormal d Siote			Decomption	or			Į		Typ		and the state of t
TO REARATED	- 特象	interiar odial S	יממר	Asbose (i.m.)	os Conteining N Stormal systemi	insulation.)	Amount [Specify		20	-	Sincular district dis	TL.
(13)		(12)			surfacing, VA			SF or LF	7	Ramos	Rugalir	Tipolitical in the control of the co	Enclos
	Y BILL	No	N/A			•			1	oral	-	aufaba	RECORDS.
EXTERNAL			1		SIDING		-	160056	-+	1	-		
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	11						-	۽ شاپھي	+	+	-+-	+	
-	1						-			\dashv	-	+	
Name of Registered Wasto Hauter			DEP W		Cubic Yards	Ne	80	Registered La	ndiffil		_1.		
Newark Carting Inc.			1509	140.	of Weets	A 1000		Central Sar		Land	All		
kty, Siece Kewerk, NJ 07105	HI HUTT I A AN			1	Disposal Date		Ste	B//!				-	
Completed by	Title	erconnol _{ication}	entermentente (m		SIZZIN ON		IA	gyl, PA 087					
oseph Vocaturo	Vice I	resid	iont		Signature	3. 7	_		Date		144		
Company of the Compan	mentancy day, France					York	21.5	K	1 5	12	10		

ASS-47 (R-08-08)

· Donot use this it in it. asbeston transure exempted activities.





Date of Notification (1) 08/23/18			Name o	of Building udy Cole	Owner/	Operat	or (2)		6 E	, 11 11	E	1		0
Agencies Notified Type Not	tification		Street A		- India			-71				A STATE OF THE PARTY OF THE PAR	4	
X DOL Ame	ended endment #			ate, Zip Co			1	The state than property page.		0 201			Address that the second of the	
DOH justi	ergency (including ification) icellation			of Contact udy Cole	eman			-41 () -11		lephone N		775.50		
N 65 W 115			FACI	ILITY INF	ORMAT	ION (_	V		
Name of Facility Where Abatement Residential Street Address	is Taking Place (3)					Туре	School (K-	12)					
City (5)							×	Subchapte Other (i.e. etc.)	orivate	& commer		ldings	, hom	es,
Plainfield							2,00	are Feet 00 +	2 +			Bldg. 50 +	Age	
County (6) Union				Code (7) USE ONLY)			ent Use (Pri sidential	or if bei	ng demoli	shed)			
Name of Monitoring Firm Hired by E	Building Owner (8))	ASCN	ЛNo.				atement Cor racting &			I Con	sultir	ng, Ir	1C.
Street Address						100000	et Addre	11						
City, State, Zip Code								Zip Code IJ 07470						
Project Manager for Monitoring Firm	n		Telepho	ne No.			phone N 3-628-9			License 00408	No.			
Start Date (10) 09/10/18	Schedul 09/17/		mpletion I	Date (11)				HA Monitor racting &	Enviro	nmenta	I Con	sultir	na. In	
Occupancy Status During Abateme	nt (Check Only Or	ne)					t Addre						31	
Facility Closed/Vacated During Abatement Performed Outside	Entire Period of a of Normal Facility	Abater / Hour	ment 's				1 Rou State, 2	te 23 Zip Code						
Other – Describe:						Wa	yne, N	IJ 07470						
Scope of Work (Check All That App	,,						_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	processor .	Renova Demoli					× GI	II Containm ni-Enclosure ovebag Prod on-Exempted	e cedure				.	
	Is	Locat	tion					III Exemples) am	u NOIPI IIC	T I	3200	emen	t
Location of		Norma	lly			scriptio					-	T	/pe	т —
Asbestos-Containing Material (A <u>TO BE ABATED</u> In Facility (13)	Ma Ma	intena	ance/ Staff?	Asbes (i.e.		systen cing, V	ns insul	I (ACM) ation,	(8	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
Basement	100	140	X		Pine	Insul	ation		2	5 LF	77	-		
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					Duci	IIISUI	allon			S LF	X	-	_	
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Name of Registered Waste Hauler	1	NJDEP W	laste	Cubic	Yards		Name of	Pagista	red Landfi	11				
J.R. Contracting & Environme	ental Consul., I	nc F	lauler ID 7819		of Was			1		l Landfil				
City, State Wayne, New Jersey					Dispos	al Date	е	City, State Pen Arg		nnsylva	nia			
Completed by Jerry Bijelonic	Title Proje	ct Ma	anager		S	ignatur	re			100	ate 8/23/	18		

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

	74 N B /		and the same of th		3:60-7 and 1				VI			
Date of Notificatio	n (1)	þ			ding Owner/	Operato		(a) [] [The state of the s	est de engles (a.c.)	Language of the Control of the Contr	
8/24/2018			Jan	Sud	nick			CEI	\mathbb{W}	5 1	3	
Agencies Notified	Type Notificat	ion	Street	Addres	ss		11-41		***************************************		Aberra Constitution of the	
[]EPA	[X]Initial							8110	14.000	Acceptance of		
[]DEP	Notificat	ion	City, S	State,	Zip Code			AUC 3 0	2018		#	
[X]DOL	[]Amended	.	Line	den,	NJ,07036	5				New Addition of		
[X] DOH	Notificat		Name of	Conta	act		Telephor	ne Number	(17.03.01)	· E	- 4	
	[]EMERGENCY			Sudi			rerepiio	Lionas.		62	december 1	
[]DCA	[]Cancellati	on	0 0	244								
				FACIL	ITY INFORMA	TION						
Name of Facility Who	ere Abatement is	Takin	g Place	e (3)	* 31.00 (10.5 _{10.0}) (33.50) (* - 3.50) (* - 4.50) (* - 4.50)		Type of Facil	ity (4)			-	
Jan Sudnick							[]School	(K-12)				
74							[]Subchap	ter 8 (Oth				
Street Addres			3				THE 20 TO 100	i.e., privalidings,				
			•				Square Feet	# of Flo		ldg.	90	
City (5	Co	unty (6) Essex	ζ .	County Cod	ie (7)	Dquare rece	. 01 110		,_ug.	1190	
					(STATE USE	ONLY)	Current Use (Prior if be	eing d	emoli	shed	.)
Linden	U	nion										
Name of Monitoring	Firm hired by Bu	ilding	ASCM	No.	Name o	f Abate	ment Contracto	r (9)				
Owner (8) N/A					AZT	ECH M	<i>I</i> ANAGEMENT	, Inc.				
Street Address					Street	Addres	s		-			
					86	Chris	stopher St					
City, State, Zip Coo	de				City,	State,	Zip Code					
5.00 S 5.					-		r, NJ 070	42				
Project Manager for	Monitoring Firm	Tele	phone	Number	r Teleph	one Num	ber		Licens	e Num	ber	7
	~-5%	N/Z		=0-	100000		1-8800		003	71		
Scheduled Start Date		Comple			100	f OSHA	Monitor					
	18 9		14	18	N/A							
Month Day Y Occupancy Status Dur	ear Mont			Year ne)	Street	Addres	s					
[X]Facility Clo of Abatemen	sed/Vacated Dur	ing Ent	ire Pe	riod								
	rformed Outside	of Nor	mal Fa	cility	City,	State,	Zip Code					
	ribe: «OffHours					## ### XX						
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Scope of Work (Check	k all that apply	7)			Г	Full	Containment wi	th Negative	e Pres	sure		
[X]≥3 sf or		[X] Renova	ation	7		nclosure	-				
[] <u>≥</u> 160 sf	or ≥260 lf	[]Demoli	ition			bag Procedure Tiable Procedu	re				
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Material TO BE AB			olely Main-			terial (thermal	. systems	SF or	y M	P	A	O
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(13)		Sta	ff (12))	or othe	r misce	llaneous)		I.		L	R
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Basement			X	-	ipe ins	итаст	OII	00 HE		-	-	+
				_							-	-
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Name of Registered V		**	EP Was ler ID		Cubic Yard		Name of Regi		TILL			
AZTECH MANAG	EMENT, INC		040		1			Late				
City, State					Disposal I		City, State		T 4			
Montclair, NJ	07042				9/15/	18	Bronx,	NY, 104	14			
Completed By (Print	or Type) Title				Si	mature			Date	4		
Constantine V		sider	ıt		7	7 1	at 11.	\cap		- 1/201	8	
					X	1/23	(M) NO 1/1	1111	1			



NOTIFICATION OF ASBESTOS ABATEMENT

		(Pur				7 and 12:120-7		2200				
Date of Notificatio	n (1)		Name	e of Bui	lding	Owner/Operato	r (2)	F 6 F	п	\17. F	3 [-
8/24/2018			D:	iedra	Gra	hm	1	NECE			=	
Agencies Notified	Type Noti	ification	Stre	eet Addr	ess			and of the same of				
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[X] DOL	[]Amen	ded	1			NJ,07042	* · · · · · · · · · · · · · · · · · · ·				1	19
	Not	ification						1		TOOL	1	
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[]DCA			D:	iedra	Gra.	nm			i.			
([]Canc	ellation										
Name of Facility Wh	ere Ahatem	ent is Ta	king P			NFORMATION	Type of Fac	ilitz (4)			_	-
Diedra Grahm		10 10	ALING I	race (5	,		11	ATA NO. II				
							[1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	l (K-12) apter 8 (Other	than	K-12))	
Street Addres								(i.e., privat				
			*				cial	buildings, ho	mes,	etc.)		
							Square Feet	# of Floor	s B	ldg.	Age	
Montclair		Count	y (6) E	ssex	12 Table 2 Table 2	nty Code (7) ATE USE ONLY)						
MontGlair		_		5	. (31	HIE USE ONLI)	Current Use	(Prior if bei	ng de	molis	hed)
		Esse						u				
Name of Monitoring 1 Owner (8)	Firm hired	by Build	ing A	SCM No.		Name of Abate						
N/A						AZTECH I	<i>I</i> ANAGEMEN	T, Inc.				
Street Address						Street Addres	s					
						86 Chris	stopher S	t.				
City, State, Zip Coo	de					City, State,	Zip Code					
						Han Berger Warner - Hilliam Land State Land	Lr, NJ 07	042				
Project Manager for	Monitorin	g Firm	relepho	one Numb	er	Telephone Num			cense	Numb	er	
			N/A	Jac Italia		(973) 744		1,260	0037			
Scheduled Start Date	e (10)	Sched. Cor	mpletio	on Date	(11)	Name of OSHA	Monitor					
9 5	18	9	7	18		N/A						
Month Day Y Occupancy Status Dur	ear	Month	Day	Year	:							
[X] Facility Clo						Street Addres	s					
of Abatemen	t				1							
[]Abatement Pe Hours - Desc				Facili	ty	City, State,	Zip Code					
[]other - Desc				cript»								
Scope of Work (Check	all that	apply)										
(m) 2 - 5				200				with Negative	Press	ure		
[X]≥3 sf or []>160 sf of				novatior nolitior			Enclosure bag Procedure	9				
(5)(4 <u>-</u> man an 1							riable Proced					
>= 00000 p • >>>			Is Locat				5000 PSE		Aba	teme		-
Location Asbestos-Con			Norma.	lly		Description Asbestos-Con		Amount	R	D	E	E
Material	100	-	Use Sole			Material		(Specify	E	RE	CA	C
TO BE AB	ATED		By Ma:			(i.e., thermal		SF or	0	PA	P	0
In Facil	ity		Custod	lial		ulation, surf	경기교로 지난 경기 내려고 가게 되었다.	LF)	VA	I	S	S
(13)		Ye	Staff s No		٥	r other misce	Lianeous)		L	R	L	R
Basement					Pipe	insulati	on	80 LF	X		•	
					-							
										-		
Name of Registered W	Jaste Warl	25	NJDEP	Wasto	Cul	ic Yards	Name of Da	gistered Landf	1 1 1			
AZTECH MANAG		INC.		ID No.	100000000000000000000000000000000000000	Waste 1.5	Tri -		111			
City, State			- / 0-2		Dis	posal Date	City, State)				
Montclair, NJ	07042				100	/8/18	_	NY, 1047	4			
Completed By (Print	or Timel	Title		-11		Signature			D=+-			
Constantine V		Presid	lent			Me	ate /	111/7 -	Date 8/24,	/2018		

D.	A FFE				STOS ABATEMENT -7 and 12:120-7	[· · · ·		Trees, and a		ر در ودر مدود	(100 pt 100 pt 1
Date of Notification					g Owner/Operator		11.15 16	5 1	W	51	17
8/24/2018			Duane	e Fle	tcher					7 1	
Agencies Notified	Type Notificat	ion	Street A	ddress		- 1	Alte	3.0.3	010	11	
[]EPA	[X]Initial						1197	U U I	510		4
[]DEP	Notificat	lon	City, St	96 5						- 1	1
[X]DOL	[]Amended Notificat	ion	Upper	Mon	tclair,NJ,	07043	7.5000.100	i chen	50		2
[X] DOH			Name of	Contact		Telepho	ne Number			111	× 1
[]DCA	[]EMERGENCY		Duane	Fle	tcher	1—					
	[]Cancellati	on		NOTE THE	TATTODA O MITOM		, ,				
Name of Facility Whe	ere Abatement i	s Takir			INFORMATION	Type of Faci	lity (4)				
Duane Fletche						[]School					
Street Address						[] Subcha	oter 8 (Othe				
Street Addres							(i.e., priva ouildings, h				
						Square Feet	# of Floo	0.0000000000000000000000000000000000000	ldg.		
City (5	Co	ounty (6) Essex		ounty Code (7)	11					
*******				(3	STATE USE ONLY)	Current Use	(Prior if be	ing de	moli	shed)
Upper Montcla	ır E	ssex									
Name of Monitoring F	irm hired by P	iildina	ASCM N	Io.	Name of Abata	ment Contracto	or (9)				
Owner (8)	IIM HILEG Dy D	<u> </u>	, modified			MANAGEMENT					
N/A Street Address					Street Addres						
						stopher St	:.				
City, State, Zip Cod	le				City, State,						
						ir, NJ 070	42				
Project Manager for	Monitoring Fire	n Tel	ephone N	umber	Telephone Num			License	Numi	ber	25/48/1-
		N/			(973) 744	1-8800		003	71		
Scheduled Start Date	(10) Sched	Compl	etion Da	te (11)	Name of OSHA	Monitor					
9 10	18 9		12	18	N/A						
Month Day Ye Occupancy Status Dur	ear Mont	1000		ear	Street Addres						
[X]Facility Clos	sed/Vacated Dur				Screet Address						
of Abatement [] Abatement Per		of No:	rmal Faci	ility	City, State,	Zip Code					
	ribe: «OffHours										
[]other - Descr			Descript	<u>E»</u>							
Scope of Work (Check	all that apply	7)			[]Full	Containment w	ith Negative	Press	sure		
[X]≥3 sf or		- 70	[]Renovat			-Enclosure -bag Procedure					
[] <u>></u> 160 sf o	7 2200 11	·]Demolit	1011		Friable Procedure	ure				
Location	of	Lo	Is ocation		Description	on of		Ab	ateme	ent 1	Ype
Asbestos-Con		No	ormally Used		Asbestos-Con		Amount	R	PK.	N	N
Material TO BE ABA			Solely y Main-		Material (i.e., thermal		(Specify	7 M	P	A	LO
In Facil		te	enance/	i	nsulation, surf		LF)	V	I	S	S
(13)		Yes	No N	/A	or other misce	ellaneous)		L	R	Ĺ	R
Basement			X		e insulati	on.	100 LF	х		i i	
				L		and the section of th					
Name of Registered W	aste Hauler	1000	DEP Wast		ubic Yards	Name of Reg	istered Land	fill			
AZTECH MANAG	EMENT, INC		uler ID:	No. o	f Waste 1.0	Tri - S	State				
City, State				D	isposal Date	City, State					7.1
Montclair, NJ	07042				9/13/18	Bronx,	NY, 104	74			
Completed By (Print	or Type) Title	9			Signature	, ,	1 1	Date			
Constantine V	1	side	nt.		1/	tatan	1/1	1	- 1/201	8	

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PAT	Sept.			N OF ASE to NJAC				(1)	E	C	E	Ī W	7 [E	3 1	
Date of Notification (1) 8/24/2018				of Building						- Terrol Aug-			4	And the second party of th	ACOUNTS COMMENTS
Agencies Notified Type Notification X EPA Initial			Street A	Address ROUTE	46					400	3 0	201	8	A CONTRACTOR	
DEP Amended Amendment		_		ate, Zip C SEWOO		07852			AS96	370 1101	3 CC ENSI	NTR	01.8		The Control of the Co
□ Emergency justification) □ DCA □ Cancellation	XX -0-0-1000-1000-1000-1000-1000-1000-10			of Contact BLOOD						ephon 3-448	e Nur	nber	control has		
			FAC	ILITY INF	ORMAT	ION									
Name of Facility Where Abatement is Takin FORMER FIRE CO. No. 2	g Place (3)						of Facility (chool (K-1	50		A2700 A790				
Street Address 580 MAIN STREET							図。	ubchapter ther (i.e. p tc.)					dings,	hom	es,
City (5) ROXBURY							Square		# 0	f Floor	S	В	ldg. A	ge	
County (6) MORRIS				Code (7) USE ONLY)		Curren	t Use (Pric	or if bei	ng der	molish	ed)			
Name of Monitoring Firm Hired by Building (N/A	Owner (8))	ASC	M No.				ement Con			TIN	G, IN	С.		
Street Address							Address REEL <i>A</i>	ND AVE	ENUE			26			
City, State, Zip Code						200000000000000000000000000000000000000	tate, Zip	Code NJ 0751	2						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	one No. 956-87			Licer 004	nse No	Э.			
Start Date (10) 9/4/2018	Schedul 9/14/2		npletion	Date (11)		0.100.000.000.000		A Monitor (9) ABO	VF						
Occupancy Status During Abatement (Chec	k Only Or	ne)					Address	50 (50)							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: VACANT	Period of a	Abatem y Hours	nent			City, St	ate, Zip	Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	processes.	Renova Demolit				×	Mini- Glov	Containme Enclosure ebag Proc Exempted	edure	,				e	
		Locati Normali											Abate Ty		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cus	ed Sole iintenar todial S (12)	ly by nce/ staff?		tos Cont thermal surfac	scription taining Ma systems cing, VAT niscelland	aterial (. insulati Γ, or		(S	mount pecify or LF		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A			XX. V4 - 154 - 15 - 154 - 46 - 1			04.00					w	
ROOF #1		X		BLA	ACK BA	ASE FL	ASHIN	NG	10	00 LF		Х			
Name of Registered Waste Hauler		l NI	JDEP W	lasta	Cubic	Vord-		Nomf-) n n! - 1 -	u a al 1	- den				
TWO BROTHERS CONTRACTING		Н	auler ID 8743		of Was			Name of F WASTE	10000			NT G	.R.O	.W.	S.
City, State TOTOWA, NJ						al Date 2018		City, State MORRI		.E, P.	A				
Completed by VIVECA RAMOS	Title PRO	JECT	COOF	RDINAT		ignature		Kin	ph.		Dat 8/2	e 24/20	18		

OKU740

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

(4.101° 1)		N		CATION	OF ASBESTOS to NJAC 8:60 an	ABATE		C	外們種	P	E	1 W	7 E
Date of Notification (1)	0		l N	lame of	Building Owner/O	perator (2)		山州				
	8				2. EUG	EN	C K			AHG	3 A	2/116	_
Agencies Notified	Type Notification		S	treet Ad	dress	2	- 2		1 104 102	1100	J 17	ZUR	5
□ EPA	Initial Amended			City, Stat	e, Zip Code				1 400	7000		Secretary of the Control	******
DEP DOL	Amendment #		_	10	JOGEV	000	. Q	NJ	. 074	SQ	S CO. ENSIA	VTRO	11.8
DOH	☐ Emergency (incl justification)	luding	N	lame of	Contact				Telephone Nu		The state of the same	tel material and an	- Carlotte
DCA DCA	☐ Cancellation				R. KOR								-
Name of Facility Where A	hotoment is Taking Plac	a (2)		FACIL	LITY INFORMA	TION	Type of	f Facility (4)	1				\dashv
Name of Facility where A	R KORET							chool (K-12					
Street Address	- Poice.						□ S	ubchapter 8	(Other than K-12)	52		
	\$ 7						A 0	ther (i.e. pri	vate & commerci	al buildir	igs, hoi	nes, et	c.)
City (5)				13			Square		# of Floors	B	ldg. A		
, KID	GEM00D			23	**		4	800	Z		17	35	_
County (6)	REEN			County C	Code (7) ISE ONLY)			R	if being demolish				
Name of Monitoring Firm	Hired by Building Own	er (8)		ASCM	1 No.	Name	of Abates	ment Contra	ctor (9)				
						Bes	t Re	moval	Inc.				
Street Address									ver Stre	o t			
City, State, Zip Code			-				State, Zip		ver stre	et			
City, State, Zip code							, 857 8		NJ 07601				
Project Manager for Monit	toring Firm		1	elephon	e No.		one No.	ack,	License				
						201	-329	-7444	0.03	388			
Start Date (10)		chedule				Name	of OSHA	Monitor					
	118	<u> </u>	4/	, 1/1	8	Ome	ga Er Address	nviro	nmental				
Occupancy Status During								lor C	troot				
A hotement Performe	ted During Entire Period d Outside of Normal Fa	cility Ho	inc	0			state, Zip	ler S	LIEEL				
Other - Describe:	8:00 KM TO	2 2	120	-7		Sout	th H	acken	sack, NJ	076	06		
Scope of Work (Check All	That Apply)					1							
≥3 sf or ≥3 lf			Renovati						nt with Negative I	ressure			
□ ≥160 sf or ≥260 lf			Demoliti	on			Glov	i-Enclosure vebag Proces	dure				
							□ Non	-Exempted ((*) and Non-Friab	ole Proces			_
		6.55	S Location									ement pe	
Location			Normally ed Soleh	5 D	Asbestos Co	Description		ACM)	Amount				
Asbestos-Containing TO BE AB		M	aintenan	ce/	(i.e. thermal sy				(Specify	Re	R	Enca	Enc
In Facil		Cus	(12)	aii:	othe	VAT, or r miscellar			SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A						=		ate	9.
0		165	140				11-		5000	7	+		
BASEME	N-1			V	THERMAL S	URFAC	INC		50,8 F	- 1	+-		
											+		_
											-		_
			<u></u>					<u>,, , , , , , , , , , , , , , , , , , ,</u>					
Name of Registered Waste	e Hauler			IDEP Wauler ID		c Yards aste /		Name of R	legistered Landfil	1			
Best Removal	Inc			1710)9		207		va Ente	rpri	ses	لــــا	LLC
City, State					Disp	osal Date	1.0	City, State				200	
Hackensack,	NJ 07601	T				3/11/	18	Wayne	esburg,	OH 4	468	8.	-
Completed by		Title				Signature	Ma.	ممره	en	8	24	11	8
J. Maiorano		Est	tima	tor		<u>V</u> _	(19-			0	,	1	

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) SCEARS 8/24/18 MR DWIGHT Street Address Agencies Notified Type Notification Initial **EPA** City, State, Zip Code 2 Amended . DEP SOUTH ORANGE. Amendment #_ DOL Emergency (including Telephone Number justification) DOH MR. SPEARS Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) SPEARS ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) # of Floors Square Feet City (5) ORANGE 2500 SOUTH Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) ICESIDEN CE Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Best Removal Inc Street Address Street Address 450 South River Street City, State, Zip Code City, State, Zip Code Hackensack, NJ 07601 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 201-329-7444 Name of OSHA Monitor 00388 Start Date (10) Scheduled Completion Date (11) Omega Environmental Occupancy Status During Abatement (Check Only One) 280 Huyler Street Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours
Other - Describe: 8122 DH TO 5: 2021 City, State, Zip Code Other - Describe: _ South Hackensack, NJ 07606 Scope of Work (Check All That Apply) ☐ Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf Mini-Enclosure T □ ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e. thermal systems insulation, surfacing, (Specify Removal TO BE ABATED Repair Custodial Staff? SF or LF) VAT. or In Facility (12)other miscellaneous) (13)Yes No N/A 240LF × THERMAL INSULATION BASEMENT Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler of Waste Hauler ID No. Minerva Enterprises, LLC 17109 Best Removal Inc Disposal Pat City State City, State OH Waynesburg Hackensack, N.J. 07601

Signature

Do not use this form for asbestos licensure exempted activities.

Title

Estimator

J. Maiorano

Completed by

CK 1446

State of New Jersey

K 1446	7			NOT	Si IFICATIOI (Pursuant	VOFAS	lew Jers BESTOS C 8:60 ar	ABATE	MEN1			E		7 E	14	46
Date of Notification (1)								Operator			1.7				111	
	ust 24	4, 2018			DSM N						AU	0 1	201	8		1
Agencies Notified		e Notification	1		Street A		1211100	ructs, Li	LU						1	
⊠ EPA	M	Initial			45 Wat	erview	Blvd				5363	ijs o	Cista St	31 h	1	. a 82
DEP		Amended				ate, Zip (City is	457.3	1.		
IX DOL		Amendmen			Parsipp	any, N	J 0705	4						-	*	- 1
₩ рон		Emergency		3		f Contac					Tel	ephone	Number	· · · · · · · · ·		
☐ DCA		Cancellation			Project	Manac	ger					-641-1				
No. of F. III. 148							FORMAT	ION			0.0	0111	700			_
Name of Facility Where	Abate	ment is Takii	ng Place (3)					Туре	of Facility	(4)					
DSM										School (K-						
Street Address										Subchapter	r 8 (Oth	er than k	(-12)			
205 Mack's Island Di City (5)	r								Squa	Other (i.e. etc.)		Floors	ercial bu	Bldg.		ies,
Belvidere																
County (6)					County			1	Curr	ent Use (Pri	or if bei	ng demo	lished)			
Warren					(STATE (ISE ONL	1)					Buildin				
Name of Monitoring Firm		13	100)	ASCM	No.		Name	of Aba	atement Cor	ntractor	(9)	9	_		
Environmental Health	h Inv	estigations	s, Inc.		00104	1		The M	ACK	Group, L	LC.					
Street Address								Street								
655 West Shore Trai	il							1500 k	Kings	HWY N,	STE 2	209				
City, State, Zip Code										Zip Code				-		
Sparta NJ 07871								Cherry	Hill,	NJ 0803	4					
Project Manager for Mon	itoring	Firm			Telephor	ne No.		Teleph			1	License	No.			
Project Manager					973-729			(973) 7	759 -	5000		00781				
Start Date (10)			Schedul	ed Co	mpletion [Date (11))	Name	of OS	HA Monitor						
9/10/18					9/10/19	9		The M	ACK	Group, L	LC.					
Occupancy Status During				1000000				Street	Addre	SS						
Facility Closed/Vaca Abatement Performe Other - Describe:	ated D ed Out	uring Entire tside of Norn	Period of nal Facility	Abate y Hou	ment					HWY N,	STE 2	09			-	
_				ne d				Cherry	Hill,	NJ 08034	4					
Scope of Work (Check Al ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	II That	Apply)	processes.	Renov Demol					Mir	II Containme ni-Enclosure ovebag Proc n-Exemptèd	edure					
				Loca											emen	t
Location	of			Norma	ely by			scription						1	уре	-
Asbestos-Containing TO BE ABA In Facili (13)	ATED	iai (ACM)	Ma	intena	ance/ Staff?	Asbes (i.e	thermal surfa	aining Ma systems cing, VAT niscellane	insula F, or	(ACM)	(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
			Yes	No	N/A				5.0				Val	1	late	ıre
Bldg 21	14		X				elev	ator do	ors			2	X			
0			X				misc p	ipe gas	skets		Т	BD	X			
_"-			X					e doors				2		-		
"			$\overrightarrow{\nabla}$				1000							-	-	-
Name of Registered Was	te Hau	ıler		1.000	NJ DEP Wa	aste		ipe Rac Yards	K fitt	Name of F		10 ed Land	fill			
Newark Carting / Spa	rtan I	Environme	ental		2225		Ji Was	0.1		Cumberla	and Co	/ PEI	I CDC	NAIC	/ TD	DE
City, State				1			Dispos	sal Date		City, State		J.I DEI	GRU	0000	IK	KF
Newark, NJ / Donora,	PA							/10/19		Newburg		erial / N	Anrries	ille	DΛ	
Completed by			Title				_	ignature	/	- TOWDUIG	, impe		Date	ille,	A	
Michael Cooper			Procio	lont			"			///	diane.		-0.0			

e e	1	Locatio	У	Description of			Abate Ty	ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Solel intenan todial S (12)	y by nce/	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A					le l	
Bldg 214 - exterior	X			transite panels	22 s/f	X			
"	X			tar on duct insulation	110 s/f	X			
"	X			tar on hatches, exhaust fans & alcohol condensors	315 s/f	X			
"	X			roof flashing / pitch pockets	1,742 s/f	X			
Bldg 210	X			asbestos pipe insulation from 8"pipe	25 l/f	X			
"	$\perp \times$			12" fitting	2 If	X			
				Ţ.	FO		-	en esta company	4784 m
					i) EG			E	1
				7.4.1					
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Date of Notification (1)				Name o	of Building	g Owner	/Operator	(2)		GEI	-\//	E	117	1
	e 13, 2017			DSM N	lutrition	al Prod	lucts, LI	_c)	Lbs	9 5		formed are an included		
Agencies Notified	Type Notification				Address			1 1 1	1		0.0000000		1	15
⊠ EPA	Initial			45 Wat	terview	Blvd				AUG 3 0	2018	3	115	1
DEP	Amended	м		City, St	ate, Zip C	Code		i.	į				Carlle Co	-0.00
DOL.	Amendment Emergency		_		bany, N		4		1	carns of	WTR	ōī.a	, A	
DOH	justification)	S			of Contact				'Te	elephone Nu	mber	north Trip	ه ار وادر دروره	
L DCA	Cancellation			Project	Manag	er			97	3-641-173	36			
Name of Facility Where	Abatement is Takin	g Place (3)	FAC	ILITY IN	ORMAT	TION	Type of Facility	(1)					
Building 214		,	-,											
Street Address								School (K Subchapt		her than K-1	2)			
205 Mack's Island Dr	es							Other (i.e.		& commerc		ldings	, home	es,
City (5)								etc.) Square Feet	1 #	of Floors		Bldg.	Age	
Belvidere							ĺ	0444101000	"	21 1 10013	- 1	Diag.	nge	
County (6)			T		Code (7)			Current Use (P	rior if be	eina demolis	hed)			
Warren				(STATE	USE ONL	r)		325		Building				
Name of Monitoring Firm		92.12)	ASC	ΛNo.	elektri ele	Name	of Abatement Co	ontracto					
Environmental Health	n Investigations	, Inc.		0010	4		The M	ACK Group,	LLC.					
Street Address					10 To		Street	Address						
655 West Shore Trail								Kings HWY N	, STE	209				
City, State, Zip Code							City, S	tate, Zip Code						
Sparta NJ 07871 Project Manager for Moni	toring Firm			T-11-				Hill, NJ 080:	34					
Project Manager	toring Firm			Telepho				one No.		License N	lo.			
Start Date (10)		Schedul			9-5649 Date (11)		1	759 - 5000 of OSHA Monito		00781				
6/27/17		Concaa		6/27/1	100 10				Ö					
Occupancy Status During		k Only O		0/2///	0			ACK Group,	LLC.					-
Facility Closed/Vaca				nent				lings HWY N	STE	200				
Abatement Performs	ed Outside of Norm	al Facility	Hours	3				ate, Zip Code	, OIL	203				_
Other - Describe: _						_		Hill, NJ 0803	34					
Scope of Work (Check Al	That Apply)						1 ,							
≥3 sf or ≥3 lf			Renova	tion				Full Containn	nent wit	h Negative F	ressu	re		
≥160 sf or ≥260 lf			Demolit	ion			B	Mini-Enclosu	re					
							5	Glovebag Pro Non-Exempte			Proce	dure		
		ls	Locati	on									ement	t
Location	of		Normal ed Sole				escription				_	Ty	/pe	_
Asbestos-Containing TO BE ABA			intena					aterial (ACM)	4	Amount	_		m m	m
In Facili		Cus	todial 8 (12)	Staff?	(1.0	surfa	cing, VA7			Specify F or LF)	Remova	Re	Encapsulate	Enclosure
(13)			(12)			other i	miscellan	eous)		5 100 TO STATE OF THE STATE OF	SVOL	Repair	sula	Sur
		Yes	No	N/A							=	1	te	(0)
Work area	s 1-5		X			V	at/Masti		7	360 s/f	X	1		
n		X					eproofin			000 s/f		+		
11		$+ \Diamond$			le le							-		
V		$+ \Diamond$			18		tops / s		16	645 s/f		-		\vdash
fire doo Name of Registered Was		$\perp \triangle$	IN	J DEP W	lasto	-	re doors Yards		Domint	95	X			
			13636	auler ID	7.73(F) T. (70)	of Wa		ivame of	Regist	ered Landfill				
Newark Carting / Spa	rtan Environme	ntal		222	53		318	Cumber	rland (Co./ BFI /	GRO	WS.	TRE	RF
City, State							sal Date	City, Sta						
Newark, NJ / Donora,	PA	1					6/27/18		g / Im	perial / Mo	orrisv	ille, l	PA	
Completed by		Title	998			5	Signature	19/	_	Da				
Michael Cooper		Presid	lent				1			6/1	3/17			

		Locatio		2 1.2 12			Abate Ty	ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Solel intenan odial S (12)	y by ice/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A					O	_
Floor 6/7	X			pipe	15 l/f	X			
Exterior Pipe Rack	X		1	fittings	80	X			
exterior	X			transite panels	3615 s/f	X			_
0	IX			tar on duct insulation	2400 s/f	X			
"	X			tar on hatches, exhaust fans & alcohol condensors	315 s/f	X			
-11-	IX			roof flashing / pitch pockets	1872 s/f	X			
elevator doors		X		elevator doors .	20	X			
TBD	X			misc pipe gaskets	TBD	X			
				production and a second		1		-	-
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Date of Notification	(1)			Nan	ED "	11 6	Mary and an artist of the second				R II I	VIB	100	Private	
	8-22-2018			Agu	a Americ	aing (Owner / Opera	tor (2)	3	Section of the section of					
Agencies Notified	Type Notific	cation			et Addres			1+1	-111	311					
⊠ EPA □ DEP	S	v			W. Lanca		Avenue	15		AU(3 0 20	18 1	I[J][
⊠ DOL	☐ Ame	al ended		City	State &	Zip Co	ode						1 1		
□ DOH	-	eriaea ergency		Bryr	Mawr, P	A 190	110		ASE	15 3	CONCE		Ī		
☐ DCA		cellation			ne of Con					LTT	1000	Telep	hone i	Vum	her
					Convery								10-45		
Name of Facility Wh	oro Abotomo				FACILITY	'INFO	DRMATION								
Aqua America	ere Abateme	ent is Taking P	lace (3))		-21-11-11-11-11-11-11-11-11-11-11-11-11-	Type of Fa	cility (4)						_	
Street Address							☐ ☐ Schoo	I (K-12)							
96 US Route 9							Subch	apter 8 (Other th	nan K-12	2)				
							Square Fee	(i.e. priva	ate & co	mmerci	al buildin	gs, hon	nes, et	c.)	
City (5)		County (6)	Co	ounty	Code (7)		Joquare Fee	= [# of FI	oors		Bldg. A	\ge	535.5	
Bayville, NJ 08721		Ocean		•	(.)		Current Use	a /Prior if	boing	dous = 1:-!	- 1		40		
Name of Monitorin	- 10 11	1					Day Care	= (1110111	being (aemolisi	ned)				
Name of Monitoring Health & Safety Serv	rice Inc	y Building Owr	ner (8)		ASCM	No.	Name of Ab	atement	Contra	ctor (9)					_
Street Address	ice, inc						Resource N	lanagem	ent Gro	up, LLC					
PO Box 365							Street Addr	ess							_
City, State & Zip Cod	ρ						2115 Hamilt			02					
Berlin, NJ 08009							City, State 8	Zip Coo	de						100
Project Manager for I	Vonitorina Fi	rm	Tolor	.b.o.n	NI I		Trenton, NJ								
Mr. James Proctor			856-4	mone 152-1	Number		Telephone N	Number			License I	Vumber	•		
Scheduled Start Date	(10)	Scheduled Co					609-914-427					011	85		
8-24-2018			8-28	2010	e (11)		Name of OS								
Occupancy Status Du	ring Abatem	ent (Check on	ly one)				J&S Environ	mental L	aborato	ories, Inc	С				
△ Facility Close	d/Vacated D	uring Entire Pa	eriod of	Abat	ement		Street Addre								
Abatement Po	errormed No	rmal Hours					City, State &								
Describe:	H11								C						
☐ Facility Occup	oied During A	hatement					Union, NJ 07	7083							
Scope of Work (Check	call that app	ly)													
	E22.2. VVIII-A22-2013.*0.*0.	.,							T 0		V 40 00				
≥3 sf or ≥3 lf≥160 sf ≥260	ı£		\boxtimes		ovation			H	Mini-End	ntainmei	nt with N	egative	Press	ure	
≥ 100 SI ≥200	П			Den	nolition					ag Proc	edures				
Loc	ation of		le l	ocati	on				Non-Exe	empted	and Non-	-Friable	Proce	dure	9
Asbesto	s-Containing		Norm				Descriptio Asbestos-Cor	n or		Aı	mount		ateme		
Mater TO RE	ial (ACM) ABATED		So	lely b	v		Material (A	CM)			pecify or LF)			П	
in I	acility		Mainte			. (i.e., thermal s	vstems		01	OI LI)	Re	Z	nca	Enc
	(13)		Custo	ulai 5 (12)	ian?	ins	ulation, surface	cing, VA	Γ			Removal	Repair	sde	clos
				No	N/A	O.	other miscell	aneous)				la la	=	Encapsulate	Enclosure
nderground Outside					☐ Tra	nsite	Pine			140 5		-		0	
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					EP Wast ler ID No.		bic Yards of	Name o	of Regis	tered La	andfill				_
esource Managemen	t Group, LLC				5218	TB		Grows I	andell						
ity, State enton, NJ						-	posal Date	City, St	V. C.						
	_					TB		Morrisvi		11					
ompleted By (Print or r. Brian J. Haney	lype)			Title		Sig	nature	1	-//	+1-		Date			
				Pres	ident		$f N_i$		1/	XMI	100	8-22-2	018		
							141	D.	المراك	WH	11				

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Date of Notification	600000	0		Na	ame o	of Buildi	ing O	wner / Opera	ator (2)	la P	n 1\1	The Paris	7, 1		
Agencies Notified	8-22-201			AC	lua A	merica				C E	\mathbb{N}	E In			
⊠ EPA	Type Noti	rication				ddress		115.74			A		112		
DEP	□ □ :::	e . 1		76	2 W.	Lancas	ster A	venue					The state of the s		
⊠ DOL	⊠ Ini			Ci	ty, Sta	ate & Zi	ip Co	de	1 1	MG 3 (3 2018	- 11	#		
☑ DOH	100	nended		Br	yn Ma	awr, PA	1901	10		107 0 1	,,,,,,,	2	·* }		
DCA		nergency				f Conta	ct					- 1	Tolor	- h	NI. I
	L Ca	ncellation		Mil	ke Co	nvery			1.	serca c	CINTEC	La			Number
					EAG	OIL ITY	INIFO	D1447-0	7 08 d s = 16	THE SALE	SMO	1020	0	10-45	3-0027
Name of Facility Wh	ere Abatem	ent is Taking P	lace (3/	TAC	JILII Y I	INFO	RMATION	rate in the Africa	Company of the second	Aces controller				
Aqua America		remine running r	iace (٥)				Type of Fa	cility (4	-)					
Street Address			_		_		_	☐ Schoo	ol (K-12	2)					
96 US Route 9								Subch	apter 8	Other t	han K-1	2)			
								U Other	(i.e. pri	vate & co	ommerci	al buildi	ngs, hor	nes. e	etc.)
City (5)		County (6)	1	20110		1 (77)		Square Fee	et	# of F	loors		Bldg.	Age	
Bayville, NJ 08721		Ocean	1	Journ	y Co	de (7)								4(n
		l						Current Use	e (Prior	if being	demolis	hed)			
Name of Monitoring I	Firm Hired I	N Building Own	(0)		-			Day Care							
Health & Safety Serv	ice Inc	by building Own	ier (8)		1	ASCM N	No.	Name of Ab	pateme	nt Contra	actor (9)				
Street Address	30, 1110							Resource N	/lanage	ment Gro	oup, LLC				
PO Box 365								Street Addr	ess						
City, State & Zip Cod								2115 Hamili	ton Ave	e, Suite 2	202				
Berlin, NJ 08009	е					A		City, State 8							
								Trenton, NJ	08619	l					
Project Manager for N	Monitoring F	irm	Tele	ephor	ne Nu	mber		Telephone N							
Mr. James Proctor			856	-452-	1311	·····		609-914-427	Numbe	Г		License	Number	Г	
Scheduled Start Date	(10)	Scheduled Co				4)			(1000)				01	185	
8-24-2018		Concadied Co	nibien	-201	ate (1	1)		Name of OS	SHA Mo	onitor					
Occupancy Status Du	ring Abater	ment (Cheek on	0-20	-201	5			J&S Environ	mental	l Laborat	ories, In	С			
Facility Close	dNacated I	During Entire Po	ly one	e) - 5 A 1	2			Street Addre	ess						
☐ Abatement Pe	erformed N	ormal Hours	enoa (or Ab	ateme	ent		2333 Route							
8:00am - 5:30p	im	offilal Hours					-	City, State &	Zip Co	ode					
Describe:															
Facility Occup	ied During	Ahatement					1	Union, NJ 07	7083						
Scope of Work (Check	all that an	nly)				a material o									
	and ap	P.97													
≥3 sf or ≥3 lf			\boxtimes	P	enova	tion				Full Co	ntainme	nt with N	Vegative	Pres	sure
≥160 sf ≥260 l	f		H		molit					Wilni-En	closure				
				De	HIOH	1011				Glove E	Bag Proc	edures			
Loc	ation of		Is	Loca	tion			Descriptio	N of	Non-Ex	empted		n-Friable	Proc	edure
Asbesto	s-Containin	g			Used	i l	Δ	sbestos-Cor	otoinine			mount	At	atem	ent Type
Mater	ial (ACM)		5	olely	by			Material (A	CM	d .		pecify			-
	ABATED		Mair	itena	nce o	r	(i.	e., thermal s	svstems	2	55	or LF)	2	-	2 2
	acility (13)		Cust		Staff	?	insu	llation, surface	cina. V	AT			l m	eg	ap c
	(13)			(12)			or	other miscell	laneous	s)			Remova	Repair	Encapsulate
Inderground Outside			Yes	No	N/A	4				•			1 20		ate
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esource Management	Group, LL	C			3521		TBC		Growe	s Landfill					
ity, State								osal Date	-						
renton, NJ							TBD		City, S		. 1				
ompleted By (Print or	Туре)			Tit	e				INIOITIS	sville, PA	7//	-			
r. Brian J. Haney	100 000				eside	nt	Sigi	nature	1	= $I/$	Vh.	1	Date		
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Date of Notification (1)	V. Commission of the Commissio					NJAC 8:60 and	300000000000000000000000000000000000000		TF 3	40	1	****
7 /	11 /	18		1	Verizon	ilding Owner/Operations	or (2)	HIJE U			VI I	E
Agencies Notified	Type Notific	ation			Street Addre							
□ EPA				1	71 Madis		1	if it All	G 3 0	1	10	
☑ DOLWD ☑ DOH				1	City, State, 2		1	11 11 10		0.17	10	
□ DCA	Amendm	ent #1	-7/23/°	18		ity, NJ 07034	1	La the Belgrane to the co				-
(NJAC 5:23-8)	☐ Emerger justificati	on)	luding	N	lame of Cor			ASBEŞ	Kiri Ci	INT	io!.	
	☐ Cancella	tion		1	Brian Kir			Telephone	Numbe	r	4.71	
								201 35	6 5166			
Name of Facility Where A	Abatement is 7	aking	Place (3)	PACILITY	INFORMATION						
Verizon Bergen Ce	ntral Office	•		-,			Type of Facil					
Street Address							School (K	-12) er 8 (Other than				
71 Madison Ave		2.	9				Ex Other (i.e.	. Drivate and co	K-12)	المسادا	_,,	
City (5)										a Dulle	uings	1
Jersey City							Square Feet	# of Floor	S	Bldg	. Age	-
County (6)				10	Ounty Code	(7)(STATE USE ONLY	113,347	7		-	50	
Hudson				- 1	-unity Code	(I NOTHIE USE UNLY		Prior if being de	molished	d)		
Name of Monitoring Firm I	lired by Buildi	ng Ow	ner (8)	ASC	CM No.	Nome of At	verizon C	ommunication	ns			
ESIS			1-7	/	J. 110.	Name of Abaten	nent Contractor ((9)				_
Street Address						Street Add	VIRONMENT	AL, INC.				
10 Exchange Place,	13th Floor					Street Address						-
City, State, Zip Code						1123 BEAVE						
Jersey City						City, State, Zip C						
Project Manager for Monito	ring Firm		T	elephor	ne No	BRISTOL, PA	19007					
Brian Kingsbury			- 1		56 5166	Telephone No. 215-788-6040		License No).			-
Start Date (10)	Sci	neduled			Date (11)	Name of OSHA N		00509				
_7 / _23 / _	18	8	1	10 /	18							_
Occupancy Status During A	batement (Ch	eck on	v one)				VIRONMENTA	L, INC				
Facility Closed Vacated	D		,,									
one of order vacated	During Entire	Period	of Abat	ement		Street Address						
A unarement bellowed O	utside of Norm	al Fac	lity La	0		1123 BEAVE						
Time of Abatement:	utside of Norn AM	al Fac	lity La	0		1123 BEAVER City, State, Zip Co	de					
Time of Abatement:	utside of Norn AM	al Fac	lity La	0		1123 BEAVE	de					
Time of Abatement:	utside of Norn AM	nal Fac PM/ <u>5:</u> (OOPM-	urs - De 2:00		1123 BEAVER City, State, Zip Co BRISTOL, PA	de 19007					
Time of Abatement: cope of Work (Check all the 23 sf or >3 lf	utside of Norn AM	nal Fac PM/ <u>5:</u> 0	ility Ho 00PM-2	urs - De 2:00AN		1123 BEAVER City, State, Zip Co BRISTOL, PA	de 19007 ainment with Neg	gative Pressure				
Time of Abatement: cope of Work (Check all the 23 sf or >3 lf	utside of Norn AM	nal Fac PM/ <u>5:</u> 0	OOPM-	urs - De 2:00AN		1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl	de 19007 ainment with Negosure					
Time of Abatement: Cope of Work (Check all the 23 sf or 23 lf 2160 sf or 2260 lf 2260 l	utside of Norn AM	PM/ <u>5:</u>	OPM-2 Renova Demoliti	tion tion		1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl	de 19007 ainment with Neg		dure			
Time of Abatement: cope of Work (Check all the 3 ≥3 sf or ≥3 lf 3 ≥160 sf or ≥260 lf Location of	utside of NormAM at apply)	nal Fac PM/ <u>5:</u> 0	Renova Demoliti	tion tion	escribe M	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Cont. Mini-Encl Glovebag Non-Exen	ainment with Negosure Procedure pted (*) and No			patem	ent T	yp
Time of Abatement: cope of Work (Check all the 23 sf or ≥3 lf 2160 sf or ≥260 lf Location of Asbestos-Containing Mating BE ABATEI	utside of NormAM at apply)	Dal Face	Renova Demoliti	tion tion ally ely by	Asbes	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exen Description of stos Containing Mate	ainment with Negosure Procedure Apted (*) and No	n-Friable Proced	Ab	1	1	-
Time of Abatement: cope of Work (Check all the 23 sf or ≥3 lf 2160 sf or ≥260 lf Location of Asbestos-Containing Matematical In Facility	utside of NormAM at apply)	Dal Face	Renova Demoliti S Loca Norma ed Sol aintena stodial	tion tion ally ely by	Asbes	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exen Description of stos Containing Mate thermal systems in surfacing, VAT	ainment with Negosure Procedure Apted (*) and No	Amount	Ab	1	1	-
Time of Abatement: cope of Work (Check all the 23 sf or ≥3 lf 2160 sf or ≥260 lf Location of Asbestos-Containing Mating BE ABATEI	utside of NormAM at apply)	Dal Fac PM/ <u>5:</u> €	Renova Demoliti Senova Demoliti Senova Norma ed Sol aintena stodial (12)	tion tion dely by ely by ence/ Staff?	Asbes	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exen Description of stos Containing Mate	ainment with Negosure Procedure Apted (*) and No	n-Friable Proced		patem Repair	1	-
Time of Abatement: Coope of Work (Check all the Second 23 Second 32 Second 32 Second 32 Second 32 Second 32 Second 32 Second 32 Second 32 Location of Asbestos-Containing Matematical 1 IN Facility (13)	utside of NormAM at apply)	Us M Cur	Renova Demoliti S Loca Norma ed Sola aintena stodial (12)	tion ally ely by ence/	Asbes (i.e.	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exen Description of stos Containing Mate, thermal systems in surfacing, VAT, o other miscellaneous	ainment with Negosure Procedure Apted (*) and No	Amount	Ab	1	ent Encapsulate	-
Time of Abatement: cope of Work (Check all the ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Matematical IN Facility (13) evator Cab Floor	utside of NormAM at apply)	Us M Cu	Renova Demoliti S Loca Norma ed Sol aintena stodial (12)	tion tion ally by ence/ Staff?	Asbes	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exen Description of stos Containing Mate, thermal systems in surfacing, VAT, o other miscellaneous	ainment with Negosure Procedure Apted (*) and No	Amount	A Removal	Repair	Encapsulate	-
Time of Abatement: Cope of Work (Check all the	utside of NormAM at apply)	Us M Cur	Renova Demoliti S Loca Norma ed Sola aintena stodial (12)	tion ally ely by ence/	Asbes (i.e.	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exen Description of tos Containing Mate, thermal systems in surfacing, VAT, other miscellaneous	ainment with Negosure Procedure Proted (*) and No erial (ACM) sulation, or	Amount (Specify - SF or LF)	Removal 🛛	Repair	1	1
Time of Abatement: Cope of Work (Check all the	utside of NormAM at apply)	Us M Cu	Renova Demoliti S Loca Norma ed Sol aintena stodial (12)	tion tion ally by ence/ Staff?	Asbes (i.e.	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exen Description of stos Containing Mate thermal systems in surfacing, VAT, o other miscellaneous	ainment with Negosure Procedure Proted (*) and No erial (ACM) sulation, or	Amount (Specify SF or LF)	A Removal	Repair	Encapsulate	-
Time of Abatement: Cope of Work (Check all the	utside of NormAM at apply)	Us M Cur	Renova Demoliti S Loca Norma ed Sola aintena stodial (12) No	tion ally ely by ence/ Staff?	Asbes (i.e.	1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exen Description of stos Containing Mate, thermal systems in surfacing, VAT, oother miscellaneous disstic ulation (Wrap & Culation	ainment with Negosure Procedure Proted (*) and No erial (ACM) sulation, or	Amount (Specify - SF or LF)	Removal 🛛	Repair	Encapsulate	-
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no CK

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

Ck# 340/

			11	Name of Bui	iding Owner/Operate	2- (0)	The second second second	34	0/	**********	****
7 /11 /	18			Verizon (Communications	or (2)			V 18	3 1	1
Agencies Notified Type Notified	fication		-	Street Addre						7111	-
□ EPA □ □ Initial				71 Madis	7.50		11		544	-11	-
Ø DOLWD 0/26 ☐ Amend			C	ity, State, Z			i AUF 3	9 20	18	7	
	ment #				ty, NJ 07034	N.			7.1		110
DCA Emerge justifica	ency (inci ition)	uaing	N	ame of Con			F 12 12 1 1 1 1 1 1 1 1 1	7.1.7	771	g .	į.
☐ Cancell				Brian Kin			Telephone N	Numbe	r		-
					THE CONTRACTOR OF THE CONTRACT		201 356	5166			
Name of Facility Where Abatement is	Taking F	lace (3	3)	FACILITY	INFORMATION						
Verizon Bergen Central Office	•	,	,			Type of Facil					
Street Address						School (K	-12) ≘r 8 (Other than K				
71 Madison Ave						La Other (i.e.	. Drivate and com	(-12) mercia	l build	inaa	
City (5)						1	0.)	rricicia	טווט	ings,	
Jersey City						Square Feet	# of Floors		Bldg.	Age	-
County (6)			IC	ounty Code	(7)(STATE USE ONLY)	113,347	7		+-6	50	
Hudson					(/(SIATE USE UNLY)		Prior if being dem	olished	d)		
Name of Monitoring Firm Hired by Buil	ding Own	er (8)	IASC	CM No.	Name of Abot	Verizon C	Ommunication	S			
ESIS		(7)	1.00		Name of Abatem	nent Contractor (9)				
Street Address		-			Street Address	VIRONMENT	AL, INC.				
10 Exchange Place, 13th Floor						D OTDEE					-
City, State, Zip Code		-			1123 BEAVE						
Jersey City					City, State, Zip C						
Project Manager for Monitoring Firm		Te	lephon	ne No	BRISTOL, PA	19007					
Brian Kingsbury				56 5166	215-788-6040		License No.				_
Start Date (10)	cheduled			Date (11)	Name of OSHA N		00509				
7 / _23_ / _18_				.18							_
Occupancy Status During Abatement (C	heck only	(one)				VIRONMENTA	AL, INC				
	Period o	of Abot	omont		Street Address						-
Abstoment Derferred to		He e			1123 BEAVE	STREET					
A Notice Hell Performed Outside of No.	rmal Faci	IITY HO	irs - De	escribe							
Time of Abatement:AM	mal Faci _PM/ <u>5:0</u>	OPM-2	ırs - De 2:00AN	escribe A	City, State, Zip Co	ode					
AMAM	mal Faci _PM/ <u>5:0</u>	0PM-2	urs - De 2:00AN	escribe //		ode					
cope of Work (Check all that apply)	_PM/ <u>5:0</u>	<u>0</u> PM-2	2:00AN	escribe //	City, State, Zip Co BRISTOL, PA	de 19007	notice D				
cope of Work (Check all that apply) 2 3 sf or >3 lf	_PM/ <u>5:0</u> ⊠ R	OPM-2	ion	escribe //	City, State, Zip Co BRISTOL, PA	19007 ainment with Ne	gative Pressure				
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Cope of Work (Check all that apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) evator Cab Floor evator Shaft evator Machine Room	PM/5:0	enovaremoliti s Loca Norma ed Sola intena stodial (12) No	tion on tion tilly ely by since/Staff?	Asbes (i.e.	City, State, Zip Co BRISTOL, PA Full Conta Mini-Encl Glovebag Non-Exen Description of stos Containing Mate, thermal systems surfacing, VAT, other miscellaneous lastic Ulation (Wrap & Cubic Yards of	ainment with Nerosure Procedure Inpted (*) and No Insulation, Insulation, Insulation, Insulation In	Amount (Specify SF or LF) 40 SF 140 LF	At Removal	T	Encapsulate	
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Date of Notification (1)					Nam	e of Buildir	ng Owner/Operator	(2)				11	
	11 /	18	_		Ve	rizon Co	mmunications		Wr 22 2018	*		7-1	
Agencies Notified	Type Notific	ation			Stree	et Address			V . V J . C . V	-	-		
☐ EPA					71	Madison	Ave	1	รู้สูกบริ 01 เลิก	On A			
□ DOLWD □		377			City	State, Zip	Code	1.50	23103 9 1911	317 118 217			
⊠ DOH	Amendm				1		, NJ 07034						
DCA	☐ Emerger justificat	ncy (ind	cluding	g		e of Contac	<u> </u>		T-1-1-1				
(NJAC 5:23-8)	☐ Cancella				100000	ian Kings	7.7		Telephone Numb 201-356-516				
							NFORMATION		201-000-010				
Name of Facility Where Al	batement is	Taking	Place	(3)				Type of Facility (4)				
Verizon Bergen Cen				1-7				School (K-12	57.50				
Street Address									(Other than K-12))			
71 Madison Ave								Other (i.e., pr homes, etc.)	ivate and commer	cial bu	uildin	gs,	
City (5)				-				Square Feet	# of Floors	BI	dg. A	ne	
Jersey City								113,347	7		+-50		
County (6)					Cou	nty Code (7)(STATE USE ONLY)		or if being demolis		T-50		
Hudson					000	my code (INSTAIL OSE ONLI)			nea)			
Name of Monitoring Firm H	dired by Buil	dina O	wnor	/01	ASCM	l No.	Name of Abotes		nmunications				
ESIS	ined by buil	ung O	wilei	(0)	ASCIV	I IVO.	Name of Abateme						
Street Address								VIRONMENTAL	., INC.				
10 Exchange Place,	13th Floor						Street Address 1123 BEAVE	D CTDEET					
City, State, Zip Code	10 11001		1417-1475				City, State, Zip Co						
Jersey City							BRISTOL, PA						
Project Manager for Monito	oring Firm			Te	lephone	No	Telephone No.	10007	License No.			-	
Brian Kingsbury	og					5-5166	215-788-6040	1	00509				
Start Date (10)		Schedu	iled C	A		ate (11)	Name of OSHA M		00309				
7 /23 / _						18	E DESMO DESCRIPTION OF THE PROPERTY OF THE PRO	VIRONMENTAL	, INC				
Occupancy Status During	Abatement (Check	only o	one)			Street Address					-	_
☐ Facility Closed/Vacated					ement		1123 BEAVE	R STREET					
Abatement Performed (Outside of N	ormal I	acility	у Но	ırs - De	scribe	City, State, Zip Co					-1112/201	
Time of Abatement:	AM	PM	/ <u>5:00</u>	PM-2	2:00AM		BRISTOL, PA						
Scope of Work (Check all t	hat apply)							. 10007			-		
≥3 sf or ≥3 lf		9	⊠ Re	novo	tion			tainment with Nega	ative Pressure				
☐ ≥160 sf or ≥260 lf				mova molit			Mini-Enc Glovebage						
								mpted (*) and Non	-Friable Procedure	е			
				Loca						Ab	atem	ent T	vpe
Location o				Norm	ally lely by		Description o	f			_	T -	1
Asbestos-Containing M TO BE ABAT	Self of Self-Borrers of the self-section that the section of	1)			ance/	Asbe	stos Containing Ma	terial (ACM)	Amount	Removal	Repair	nce	Enclosure
IN Facility			Cust		Staff?	(1.6	surfacing, VAT,		(Specify SF or LF)	ova	=	psu	usc
(13)		-		(12		_	other miscellane	ous)	J. J. Z. /			Encapsulate	G.
E			Yes	No									
Elevator Cab Floor						VAT &			40 SF				
Elevator Shaft						Pipe In:	sulation (Wrap &	Cut)	140 LF				
Elevator Machine Room	m				\boxtimes	Pipe In:	sulation		40 LF				
Basement Hallway					\boxtimes	Pipe In:	sulation		38 LF				
Name of Registered Waste				1.63	NJDEP		Cubic Yards of	Name of Registe	ered Landfill				
SERVICE TRANSPOR	RT GROUP	, INC.			lauler I 2099		Waste 3	MINERVA L	ANDFILL				
City, State							Disposal Date	City, State			2001712	2000	
NEW CASTLE, DE							TBD	WAYNESBU	JRG, OH				
Completed By (Print or Typ	e)	Title					Signature,		7 Dat	e			
Dillan DeCaro		Es	timat	or				2 Do Can	1/ml 8	7.	23	-1)	?

NOTI	State of New Jersey CATION OF ASBESTOS ABATEMENT Pursuant to NJAC 8:60 and 5:16)	1
1	Name of Building Owner/Operator (2) Verizon Communications	-
	Street Address	1

Date of Notification (1) 7 / 11	18		- 1	Vorizon	uilding Owner/Opera	tor (2)						1
					Communications	5	18		0.0	110		1
Agencies Notified	ification			Street Addr	ess		_		- 10	110		i d
⊠ DOLWD ⊠ Amend	ded			71 Madi	son Ave							
	dment # <u>2</u>	7/26/	10	City, State,	Zip Code				- 7 4	ŦŘ.		
☐ DCA ☐ Fmero	ency (inc	cluding	10		ity, NJ 07034					55.0		
(NOAC 5.23-8) Justific	ation)	ordanig	1	lame of Co								
☐ Cance	llation			Brian Ki			- 1	Telephone			200	
						20 - 10 Page - 1 - 1 - 1 - 1 - 1		201 356	5166			
Name of Facility Where Abatement is	Toking	Dlass	201	FACILITY	/ INFORMATION							
Verizon Bergen Central Offic	aking	riace (3)			Type of Fa	cility (4)				
Street Address	e					☐ School	(K-12)	•				
71 Madison Ave						- Subcha	nter 0 /	Other than	K-12)			
						Ed Office (I	.e., priv	ate and cor	mmerci	al bui	ldinas	
City (5)			555				/					,
Jersey City						Square Fee		# of Floors	3	Bld	g. Age	1
County (6)				County Code	(7)/STATE USE ON	113,347		7			-50	
Hudson				- 4111, 0000	(7)(STATE USE ONLY	Current Use	e (Prior	if being der	molishe	ed)		-
Name of Monitoring Firm Hired by Bui	Idina Ou	ner /0\				Verizon	Comm	nunication	ns			
ESIS	ung Ow	(0)	ASC	CM No.	Name of Abater	nent Contracto	r (9)					
Street Address	9				BRISTOL EI	VIRONMEN	TAL I	INC				
					Street Address		, 1					
10 Exchange Place, 13th Floor					1123 BEAVE	RSTREET				9000		
City, State, Zip Code					City, State, Zip C							
Jersey City												2725
Project Manager for Monitoring Firm		Т	elephor	ne No	BRISTOL, P							
Brian Kingsbury				56 5166	Telephone No.		1	License No.		_		
Start Date (10)	Chedule	d Com	2013	00000	215-788-6040			00509				
	Schedule 8	d Comp	oletion I	Date (11)	Name of OSHA N	Monitor						
7 / 23 / 18	8	d Comp	oletion I	Date (11)	Name of OSHA N	Monitor	TAL. IN					
7 / 23 / 18 Occupancy Status During Abatement (6	8 Check on	d Comp	oletion I 10/	Date (11) 18		Monitor	FAL, IN					
7 / 23 / 18 Occupancy Status During Abatement (C Facility Closed/Vacated During Entire	8 Check on	d Comp	oletion I	Date (11) 18	Name of OSHA M BRISTOL EN Street Address	Monitor VIRONMENT	TAL, IN					
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.IAC 8:60 and 5:16)

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

Data of Natification (1)									. (MECH	10	1			
Date of Notification (1)	24 /	40						r/Operator	(2)						
8/	/	18			SR	I Internat	tional		FOR		and the section of the section	7			
Agencies Notified	Type Notific	cation			Stree	t Address			TEGE	11 沙尾	100	-			-
⊠ EPA					20	1 Washin	gton R	load	()	A STATE OF THE PARTY OF THE PAR	7// 11				
⊠ DOLWD	Amende				City,	State, Zip (Code		1		111			-	
☑ DOH □ DCA	Amendn		—		Pri	nceton, I	NJ 085	40	i AUG 3	0 2018					
(NJAC 5:23-8)	justificat		arrig		-	e of Contac				Telephone	Number				
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		51-26-71-71				CILITY IN	IFODIV	ATION	ASSESTORY Licen	24 17 4 2 7 7 4 17	-2010	_		11000	
Name of Facility Where	Ahatement is	Taking DI	200 (2)	ГА	CILITI	NFORIV	ATION		The state of the s			-02/6		
SRI International	tbatcille it is	raking ri	ace (رد					Type of Facility						
Street Address		+3							☐ School (K-1 ☐ Subchapter		K-12)				
201 Washington Ro									Other (i.e., p	orivate and cor	mmercia	l bu	ildin	gs,	
	Jau								homes, etc.)					
City (5) Princeton									Square Feet	# of Floors	3		dg. A	.ge	
							***		100,000	2		J. 32	55		
County (6)					Cou	nty Code (7)(STATE	USE ONLY)	Current Use (P	rior if being de	molisher	d)			
Mercer									long term of	are facility					
Name of Monitoring Firm		ding Own	er (8)		ASCM	No.	Name	of Abatem	ent Contractor (9)				-	
EHS Environmenta	1						Ply	mouth En	vironmental C	o. Inc.					
Street Address							Street	Address			MILE CO.				
1253 N. Church Str	eet						923	Haws Av	re .						
City, State, Zip Code							City, S	state, Zip C	ode						
Moorestown, NJ 08	057						Nor	ristown, I	PA 19401						
Project Manager for Moni	itoring Firm		- 1	Tele	phone	No.	Teleph	none No.		License N	0.	_			
Jim Guilardi				85	6-840	-8800	610	-239-9920)	0398					
Start Date (10)		Schedule	d Con	plet	ion Da	te (11)	Name	of OSHA N	Monitor			-			
9 / 10 /		9			1		Ply	nouth En	vironmental C	o. Inc.					
Occupancy Status During	Abatement (Check on	ly one	2)				Address							
☐ Facility Closed/Vacate					nent			Haws Av	•						
Abatement Performed	Outside of N	ormal Fac	cility H	lour	s - Des	cribe	25.000		=			_			
Time of Abatement: 7	:00AM-3:30	PM/	_PM-	201200	AM		1,300	tate, Zip Co							
Scope of Work (Check all	that apply)						INOI	ristown, F	PA 19401						
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☐ ≥160 sf or ≥260 lf		Ц	Demo	olitio	n		[Gloveba	g Procedure	F: 11 B					
			Is Lo	ocati	on			☐ MOII-Exe	mpted (*) and No	n-Friable Proc					
Location	of		Nor	mal	ly		D	escription o	, f			Aba		ent T	-
Asbestos-Containing I	Material (ACM		Jsed S			Asbes			terial (ACM)	Amount		Rer	Rep	Enc	Enc
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(13)	.y			12)	ruii.			acing, VAT, miscellane		SF or LF) !	<u>a</u>		Encapsulate	ure
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Name of Registered Wast	e Hauler		<u> </u>			Masta	Cubin	land '	News 255	111	L	4	Ц	Ц	Ш
Newark Carting	io i iaulei			0.555	JDEP \ auler ID		Waste	Yards of	Name of Regis						
CONTROL AND AND AREA OF THE CONTROL					4509		1	Sales III Scupey	Grows Lar	atili					
City, State								al Date	City, State	272.0780					
Newark, NJ							9/28	/18	Morrisville	, PA					
Completed By (Print or Ty	rpe)	Title					Si	gnature	and the same of		Date	13	1.	./	
James M. Kelly		Vice	Pres	ide	nt			///				8/	14	16	5
		1.00						11/1/10			1	1		0	act.



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

		LAR.	Noti		Asbestos Abaten	nent		100	EG	F	17	7 [3
					<u>.C</u> . 8:60-7 and 12:120					<u>L</u>	T E		7
Date of Notification (1) 08/28/18	2	8391			Name of Building				A114		n 201	10	-
Agencies Notified		Notification	Type		Hazlet Township Street Address		coucatio	<u>n : </u>	2501	2 0	0 20	10	
⊠ EPA			tificatio	n	421 Middle Road				Face Commen				- Automore
□ DCA		☐ Amended	# b		City, State, Zip Co Hazlet, NJ 07730			1	SBEST	OS C		ROL	3.
☑ DOL □ DEP		iustification		fication (including	Name of Contact				one Nur			· n e e	
⊠DOH		☐ Cancelle			Christopher Board Secretary	J. Mullins		732-26	4-8402				
				FACILITY	NFORMATION								_
Name of Facility Where A Middle Road Eleme	batement is	Taking Place	(3)	18	Type of Facility (4 ☑ School (K-12))							
Street Address	illary och	001			☐ Subchapter 8 (other than	K-12)						
305 Middle Rd					Other (i.e. private Sq. Feet: # of Flo	& commerc	cial buildi	ings., hor 1953	nes, etc.	.)			
City (5)	County (6)		Count	y Code (7)	Current Use (prior	if being der	nolished): Eleme	ntary So	hool			
Hazlet	Monn	nouth		Use Only)									
Name of Monitoring Firm Environmental Conn			ASCN	1 No.	Name of Contracto	or (9)							
	ections inc				Panoramic Windo	w & Door S	Systems	Inc.					
Street Address 120 North Warren Street					Street Address 712 Sergeantsvill								
City, State, Zip Code Trenton, NJ 08608					City State, Zip Coo								
Project Manager for Monit	toring Firm	Telephone N	Number		Stockton, NJ 085			Licones	Numbe				
Rollie Jones		(609)-392			P (732)926-0900	<u>.</u>		01237		ī			
Scheduled Start Date (10) 08/29/18		09/14/2018		ion Date (11)	Name of OSHA Mo	onitor							
Occupancy Status During Facility Closed/Vacated Abatement Performed Co	d During Entir	e Period of Al	patemer	nt 3:00-11:00pm	Street Address 87 Main Street		7						
T011 5 11					City, State, Zip Coo	de							
□Other – Describe:					Lincoln Park, NJ (07035							
Source of Work (Check all	that apply)		- 3.5										\dashv
≥ 3 sf or ⊠ ≥ 160 sf	or ≥ 260 If		V		nolition	□GI ⊠ Non-F		Procedur	е				
Location of Asbestos- Containing Material (ACM)	in Used	cation Normal Solely by		(ACM) (i.e. the	Asbestos Containing M rmal systems insulatio	laterial n.	Amoun (Specif	t y SF or	Abate	ment T	уре		
Facility (13)	Maint (12) YES	t./Custodial St	nA	surfacing, VAT	or other misc.)		LF)	,	Remove	Repair E	Encap En	nclose	
Exterior of Building			X	Exte	rior Window Caulking	1	135 Wi	ndows	X				
Name of Reg. Waste Haul	er	NJDEP Wast	te Haule	er ID #	Cubic Yards of Was	ste		Name o		ered La	andfill		\dashv
Panoramic Window & Do Inc	or Sys	0036057						Chrin La					
					nnl	Disp	osal Da	<u>te</u>		y, Stat ston, F			
Completed by (Print or Typ Mark M Jovic		<u>Title</u> Project Mana	ager		Signaturé	hi		<u>Date</u> 08/28/18	3				

PAID

Date of Notification (1) 8/27/18						Owner/ ker	Operato	r (2)		E (D E		E	Ī	Tour State of the
□ DEP	Type Notification Initial Amended			600 N	Address Iorth Ave		Vest		The state of the s	AL	JG 3 0	201	8	The second secon	New Control of the Co
▼ DOL	Amendment Emergency		_ [Westf	ield, NJ		0		AHORANA A					ATT-CONTEN	An-indian-
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Agencies Notified Page Pa	8/27/18				VLS	Builders	g Owner S. Inc.	/Operato	or (2)	A Company		9 17		W/	E	French Company
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A. SCOTT Higgins President	Completed by	04111						gnature		7 Pen Argy	yı PA	T D-:				
	A. Scott Higgins	ent					, ,	1				;				

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NIAC 2-CO - 1707

Date of Notification (1);	Ĕ.		10 19JAC 8:6	85					
8/24/18	/	Name of	1	er/Operator (2)			AL	16 3 7) 2018
Agencies Notified Type Noti	fication	Street Ad	MINICA dress	n Milro	itian Co	=10.			
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DEP Amer	nded	City, State	, Zip Code	Jh La	 	1 .	1	TOS CO	PAG
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7				Street Address					
Facility Closed/Vacated During Entire 1 Abatement Performed Outside of Norm	Period of Abatement al Facility Hours		ļ						
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ne of Work (Check All That Apply)									
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₹100 21 01 ₹200 II	Demolitio.	n	2	□ Mini-	Containment with Enclosure	Negative Pr	essure		
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R-06-08)						- 1	1	1	-61
900 - 900 (1920 T.C.)				* Do not use th	is form for asbes	tos licensure	exempt	ed activit	ies.



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

Date of Notification (1)				Nam	e of Buildin	g Owner/Operator ((2)	GE	W	7	117	1
	18	_				Mauduit Int'l Inc		5	34	7	1	
Agencies Notified Type Notif	cation			Stree	et Address				010		111	2
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(NJAC 5:23-8) justifica		ciuain	g		e of Contac		. 7	Telephone Numb	***	u 1,24	-	1
Cancel	500			На	l Bernste	in		732-723-624		a y a chata		75
				FA	CILITY IN	FORMATION						
Name of Facility Where Abatement is		Place	e (3)				Type of Facility (4)				
Schweitzer-Mauduit-RTL Buil	ding						School (K-12)					
Street Address								(Other than K-12) ivate and commer		ildin		
85 Main Street							homes, etc.)	ivate and commen	Ciai Di	maing	JS,	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Spotswood					1		50,000 sf	1		80		
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demolis	hed)			
Middlesex						70 0.5	RTL Building		,			
Name of Monitoring Firm Hired by Bu	ilding C	Owner	(8)	ASCN	No.	Name of Abateme						
Guardian Contracting, Inc.							ntracting, Inc.					
Street Address						Street Address	incouring, mo.		V			
1889 Rte. 9, Unit 61						1889 Route 9	Unit 61					
City, State, Zip Code						City, State, Zip Co	5					
Toms River, New Jersey 0875	5						New Jersey 087	755				
Project Manager for Monitoring Firm			Te	lephone	No.	Telephone No.	•	License No.				
Nicholas Fernicola				732-349	9-9932	732-349-9932		00624				
Start Date (10)	Sched	uled C	omp	letion Da	ate (11)	Name of OSHA M	lonitor					
		1186		08_ /	18	E.M.S.L. Anal	lytical					
Occupancy Status During Abatement						Street Address						
☐ Facility Closed/Vacated During En	tire Per	riod of	Abat	tement		1056 Stelton						
Abatement Performed Outside of I Time of Abatement:AM	Normal No	Facilit	y Ho	urs - De:	scribe	City, State, Zip Co	ode					
					_AIVI	Piscataway, I	New Jersey 088	54				
Scope of Work (Check all that apply)						□ Full Cont	ainment with Nega	ativo Drossura				
≥3 sf or ≥3 lf		⊠ Re				☐ Mini-Enc	losure	alive Pressure				
☐ ≥160 sf or ≥260 lf		☐ De	moli	tion		☐ Glovebag	Procedure					
		I-	1	-41		☐ Non-Exer	mpted (*) and Non	-Friable Procedure	e			
Location of		100		ation ally					Ab	atem	ent T	ype
Asbestos-Containing Material (AC	VI)			lely by	Ashe	Description of stos Containing Mar		Amount	Re	Re	E	Ш
TO BE ABATED		10000000		nance/		., thermal systems i		(Specify	Removal	Repair	cap	Clos
IN Facility (13)		Cus	(12	I Staff?		surfacing, VAT,		SF or LF)	val		Encapsulate	Enclosure
(10)		Yes	No			other miscellaned	ous)				ate	
Warehouse			\boxtimes		asbesto	s pipe insulatio	n	50 If		П		П
Warehouse					asbesto	s pipe insulatio	n	300 If				
									П	П	П	
										П		
Name of Registered Waste Hauler			1	NJDEP	Waste	Cubic Yards of	Name of Registe	ered Landfill				
Guardian Contracting, Inc.			- 1	Hauler I	D No.	Waste	T.R.R.F.	o.ou canunii				
City, State				2022	3	3 Disposal Date	City, State					
Toms River, New Jersey						10/08/18		Pennsylvania				
Completed By (Print or Type)	Title					Signature		1	0 1	- 1		
Nicholas Fernicola	100000		Mai	nager		Signature	1 6	Dat	1	,/		
100 th		المحرو	iria	.ugci			1-ter	8	12	4/1	8	

ASB-41 JAN 13

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

N DIV				(Pt	ırsuaı	nt to NJA	C 8:60 and 5:1	6),			rather		
Date of Notification (1)	24 /	18					g Owner/Operator ((2) i) E	BEIV	50	D)	7 /	/
Agencies Notified ☑ EPA ☑ DOLWD	Type Notifice ☑ Initial ☐ Amende				71	t Address Winant P State, Zip (Al	JG 3 0 2018	and the second			
⊠ DOH	Amendm	_			The state of the s	- Contrational Section	d, NY 10309	ASSET.	TOS CONTRO		1		
DCA (NJAC 5:23-8)	☐ Emerger justificati		uding			of Contac			Telephone Nun				
(☐ Cancella	30000000			245		ontracting		917-559-93				
							FORMATION		017-000-00				
Name of Facility Where	Abatement is	Taking F	Place	(3)	'^	OILITT IN	TORWATION	Type of Facility	(4)				
Residence		•		(-)				School (K-12					
Street Address								☐ Subchapter 8	3 (Other than K-1)	2) ercial bu	uilding	gs,	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Lavallette								2,000 sf	1	100	65	_	
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
Ocean								Residence					
Name of Monitoring Firm	Hired by Buil	ding Ow	ner (8	3)	ASCM	No.	Name of Abateme	ent Contractor (9)					
N/A Street Address							Guardian Co	ntracting, Inc.					
Street Address					Street Address								
01/ 01/ 01					1889 Route 9	, Unit 61							
City, State, Zip Code							City, State, Zip Co						
Droinet Manager for Man								New Jersey 08	755				
Project Manager for Mon	itoring Firm			Tele	phone	No.	Telephone No.		License No.				
Start Date (10)	1	Cabadul	-10-		D		732-349-9932		00624				
09 / _07 /		Schedule				te (11) 18	Name of OSHA M	\$519J751,					
					_ ′ -	10	E.M.S.L. Ana	lytical					
Occupancy Status During Facility Closed/Vacate							Street Address						
Abatement Performed	Outside of N	ormal Fa	a of A	Datei Hour	nent s - Des	cribe	1056 Stelton						
Time of Abatement: _	AM	PM/_		_PM-		AM	City, State, Zip Co						
Scope of Work (Check all				-30 7			Piscataway, i	New Jersey 088	354				
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf	тиас арріу)		Ren				☐ Mini-Enc ☐ Glovebag			ıre			
				Locat						1	atem	ent T	vpe
Location Asbestos-Containing I		A)		orma I Sole	lly ely by		Description o			-	_		T
TO BE ABA	TED	•	Mair	ntena	nce/	(i.e.	stos Containing Ma , thermal systems i	terial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facilit (13)	ty		Custo	(12)	Staff?		surfacing, VAT,	or	SF or LF)	Val	7	lusc	Sure
(13)		,	Yes	No	N/A	1	other miscellane	ous)				ate	
exterior		-				asbesto	s siding		1800 sf				
												П	
		Г		П	П					\vdash			
			7										
Name of Registered Wast	te Hauler		_	L N	JDEP V	Masta	Cubic Yards of	Name of Basis			Ш	Ц	Ш
Guardian Contraction				1 03556	auler II 20223	No.	Waste 3	Name of Regist	tered Landfill				
City, State							Disposal Date	City, State					
Toms River, New Je	3000 CO. W. A.						09/11/18	Tullytown,	Pennsylvania				
Completed By (Print or Ty Nicholas Fernicola	rpe)	Title Proj	ject l	Mana	ager		Signature	1) Da	ate/	1.	·	



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

Date of Notification (1)					Name of Building Owner/Operator (2)								
08/24/18					Binsky & Snyder, LLC								
Agencies Notified Type Notification					Street Address								
⊠ EPA ☐ Initial	A CONTRACTOR OF THE PROPERTY O					nial Avenue	AUG 3 0	2018		91			
	Amended				City, State, Zip Code								
	Amendment #					NJ 08854	(mercant b	.1	distribution of the state of th		
	5:23-8) Emergency (including justification)					et .	Telephone Number						
Cancellation					ole Mon	7.7	732-907-3449						
				FA	CILITY IN	NFORMATION							
Name of Facility Where Abatement is Taking Place (3)							Type of Facility (4)						
Residence					☐ School (K-12)								
Street Address					☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings,								
City (5)	homes, etc.)												
South Plainfield					Square Feet	# of Floors		dg. A	ge				
County (6)							2000 sf	2		65			
					nty Code (7)(STATE USE ONLY)	,						
Middlesex							Residence						
					No.		ent Contractor (9)						
Guardian Contracting, Inc.						Guardian Co							
Street Address						Street Address							
1889 Rte. 9, Unit 61						1889 Route 9, Unit 61							
City, State, Zip Code						City, State, Zip Code							
Toms River, New Jersey 08755						Toms River, New Jersey 08755							
Project Manager for Monitoring Firm Telephone No.						Telephone No. License No.							
Nicholas Fernicola 73					-9932	732-349-9932		00624					
Start Date (10) Scheduled Completic					ite (11)	Name of OSHA M	Vionitor						
08 /24 /18						E.M.S.L. Analytical							
Occupancy Status During Abatement (Check only one)					Street Address					-			
Facility Closed/Vacated During Entire Period of Abaten					ent 1056 Stelton								
Abatement Performed Outside of Normal Facility Hours					- Describe City, State, Zip Code							-	
Time of Abatement:AMPM/PM-					Piscataway, New Jersey 08854								
Scope of Work (Check all that apply)	A				□ Full Cont	ainment with Noa	ativo Progovro						
≥3 sf or ≥3 lf	novat												
☐ ≥160 sf or ≥260 lf	moliti	on	□ Glovebag Procedure										
			☐ Non-Exempted (*) and Non-Friable Procedure										
Is Location of Normal						5			Ab	atem	ent T	ype	
Asbestos-Containing Material (ACM) Used Sol				ely by	Ashe	Description o stos Containing Ma		Amount	Re	Re	m	m	
TO BE ABATED Maintena						., thermal systems insulation,		(Specify	Removal	Repair	cap	Clos	
IN Facility Custodial (12)						surfacing, VAT,		SF or LF)		1	Encapsulate	Enclosure	
Y			No	N/A		other miscellane	ous)				ate		
basement			\boxtimes		boiler in	nsulation		120 sf					
										П	П		
									П	П	П		
			П										
U 15			JDEP \		Cubic Yards of	Name of Regist	ered Landfill			П			
Guardian Contracting, Inc.					O No.	Waste	T.R.R.F.	ered Landilli					
City, State					3	3 Dianagal Data							
Toms River, New Jersey						Disposal Date 08/27/18	City, State						
Completed By (Print or Type) Title							Tullytown, Pennsylvania						
						Signature			Date				
Nicholas Fernicola	Project Manage						~ · J.	1	8/3	24/1	5		

ASB-41 JAN 13

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

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

Date of Notification (1)					Name	of Buildin	a Ow	vner/Operator-(2)					
08/	24 /	18	-			ris Dorko			EGE	I W E T	74/-) -	10	1
Agencies Notified	Type Notific	ation			Stree	t Address					2112	2 6		
⊠ EPA									1110	1				
⊠ DOLWD	Amende	50			City,	State, Zip (Code		+ AUG 3	0 2018 [#		_	
□ DCA	Amendm					elle, NJ 0				1	i			
(NJAC 5:23-8)	☐ Emerger justificati	on)	aing			of Contac		17	A COST IN THE REAL PROPERTY.	Telephone Nu	mhor			
(10/10/0.20/0)	☐ Cancella					ris Dorko	500		TO SERVICE	l eleptione Nul	nber			
					FA	CILITY IN	IFOF	RMATION		-	-			
Name of Facility Where A	Abatement is	Faking P	lace ((3)					Type of Facility	(4)				
Residence									School (K-12	2)				
Street Address									Other (i.e., p	8 (Other than K-1 private and comm	(2) ercial b	uilding	js,	
City (5)									Square Feet	# of Floors	F	lldg. A	ne	
Brielle									1800 sf	1	-	65	ge	
County (6)					Cour	nty Code (7)(STA	TE USE ONLY)		for if being demo	lichad)	00		
Monmouth					100000000000000000000000000000000000000		///		Residence	ior il bellig derrio	iisiieu)			
Name of Monitoring Firm	Hired by Build	dina Ow	ner (8) [ASCM	No	Na	me of Ahateme	ent Contractor (9)					
N/A	,		(0	, I	, 100111	110.			ntracting, Inc.					
Street Address							_	eet Address	initiacting, inc.					
									Unit Cd					
City, State, Zip Code								889 Route 9						
Oity, Otate, Zip Gode							1	y, State, Zip Co						
Project Manager for Moni	tarian Firm			- .					New Jersey 08					
Project Manager for Moni	toring Firm			lele	phone	No.		ephone No.		License No.				
Ctat Data (40)								32-349-9932	<u> </u>	00624				
Start Date (10)		Schedule					Discourse	me of OSHA M			14			
09 /06 /					_ / _	18	E	.M.S.L. Anal	lytical					
Occupancy Status During							Stre	eet Address						
☐ Facility Closed/Vacate	d During Enti	re Period	d of A	bater	ment		1	056 Stelton						
Abatement Performed	Outside of No	ormal Fa	cility	Hour	s - Des	cribe	City	, State, Zip Co	ode					
Time of Abatement:		PIVI/_		PIVI-		AIVI	P	iscataway, N	New Jersey 08	854				
Scope of Work (Check all	that apply)							П = п о					-	
≥3 sf or ≥3 lf			Ren	ovati	on			☐ Mini-Encl	ainment with Neg	gative Pressure				
≥160 sf or ≥260 lf		\boxtimes	Dem	olitio	n			☐ Glovebag	Procedure					
								Non-Exer Non-Exer	mpted (*) and No	n-Friable Proced	ure			
Looption				ocat orma							Α	batem	ent T	уре
Location Asbestos-Containing N)	Used			Ashes	etne (Description of Containing Mar		Amount	Re	Re	En	ш
TO BE ABA	TED		Main					mal systems i		Amount (Specify	Removal	Repair	icap	ıclo
IN Facilit (13)	у	1		diai 3 (12)	Staff?	100	S	urfacing, VAT,	or	SF or LF)	Val	~	Encapsulate	Enclosure
(13)		Y	es	No	N/A		otr	her miscellaned	ous)				ate	
exterior] [\boxtimes		asbesto	s si	ding		1800 sf		П	П	П
] [
] [1			
] [Ħ		
Name of Registered Wast	e Hauler			N	JDEP V	Vaste	Cub	oic Yards of	Name of Regis	tered Landfill				
Guardian Contractir	ng, Inc.			H	auler II 20223	No.	Was	ste	T.R.R.F.	Koroa Earlann				
City, State					20220	'		oosal Date	City, State					_
Toms River, New Je	rsey							9/10/18		Pennsylvania				
Completed By (Print or Ty	pe)	Title					-	Signature	1		ate .	,		-
Nicholas Fernicola		Proj	ect N	lana	ager			M	! lent	/	s/a	4/1	8	

ASB-41 JAN 13

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

C	CIOY14	NO.		CATION	ate of New Jerse OF ASBESTOS to NJAC 8:60 ar	ABATE		EAR	Π		Pr	int F
	Date of Notification (1)		7.5		Building Owner/					1/	5	M
	AUGUST 25 2018	E - 11 (ME) - 17			CONSTRUCT	ION SE	RVICES					
	Agencies Notified Type Notificatio Type Notificatio	n		11 17 11	TH STREET	Ass. M		AUF 3	0 30	18		
	DOL Amendmen	nt # y (including		GLOU	te, Zip Code CESTER CIT	Y, NJ (08030	, ,159531330	OMTR	0.7	- Participant	The state of the s
	DOH justification Cancellation	1)	1		Contact MEGEE			Telephone Nu 856-45610				1
	Cancenation	л г			LITY INFORMAT	ION		*050-45010)2			
	Name of Facility Where Abatement is Tak	ing Place (3)		1701	LITTINI OKMAT	1014	Type of Facility (4	1)		91.00		-
		VACANT)					School (K-1:					
	Street Address 114 10TH STREET NORTH						Subchapter Other (i.e. p	8 (Other than K-1 rivate & commerc	2) ial buil	dings,	hom	es,
	City (5) BRIGANTINE, NJ 082013						Square Feet	# of Floors	В	60 ·	-	7
	County (6) ATLANTIC		(County (Code (7) USE ONLY)		Current Use (Price SINGLE FAM		17			
	Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	1 No.		of Abatement Con					
	Street Address						Address BOX 337					
	City, State, Zip Code					100000	tate, Zip Code V EGYPT, NJ 0	8533				
	Project Manager for Monitoring Firm		1	Telephor	ne No.		none No. 758-3365	License N 00394	lo.			
	Start Date (10) SEPT 4, 2018	Scheduled SEPT 1			Date (11)	Name	of OSHA Monitor TECH	00004				
	Occupancy Status During Abatement (Che		100				Address					
	Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	Period of Ab	atem Hours	ent			BOX 337		V			
	Other - Describe: Scope of Work (Check All That Apply)					100	V EGYPT, NJ 0	8533				
	 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	STREET, STREET	novat			 >	Mini-Enclosure Glovebag Proc	nt with Negative F edure (*) and Non-Friat			e	
			ocatio				=			Abate Ty	emen pe	t
	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	Solel	y by ice/	Asbestos Cor (i.e. therma surfa		Material (ACM) s insulation, T, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							ate	roʻ
	ROOF			Х	ROOFII	NG MA	TERIAL	1500 SF	X			
	BATHROOM		X		FLOORI	NG MA	TERIAL	30 SF	X X			
					·							
	Name of Registered Waste Hauler EPC TECHNOLOGIES		На	JDEP W auler ID 7000	No. of Wa	e Yards aste 8	Name of F	Registered Landfill				
	City, State NEW EGYPT, NJ		1		100	sal Date 3/11/18		ARBOR TWP,	NJ			
	Completed by STEVE SCHENKER	Title PRES	IDEN	NT		Signature		A Da	ate UG 2	5. 20)18	



Check # 1441

Date of Notification (1)				Nama	of Duildie	- 0	-1 (0)		Clieck	11 1	171	_	
	August 27, 201	18			of Ameri	g Owner / Opera	ator (2)						
Agencies Notified	Type Notificat			_	Address	, u		. \ IE I	A P I III E	p	7		
							fig	1 6 (113	11		
LEPA EPA				125 S	o. Finley	Avenue	100						
DEP					•								
⊠ DOL	Initial			City, S	State & Zip	Code	11	L. D.	TG 2 A 2010		11		
N	Amer	nded			일하다는 그렇게 하다	NJ 07920		11	A 1 0 0 7/10	1	4		
DOH		ndment #			ng raago	110 07020					Ī		
DCA		ellation		Name	of Contac	t		nan.	TOU CONTROL Tel	epho	ne Nu	mber	r
				Augus	st Dolan -	Phoenix Diver	sified Grou	D		1000	4770		37
						INFORMATI			***************************************		1		
Name of Facility Mr.	A1				COLLIT								
Name of Facility Where Bank of America	Abatement is	Taking Plac	ce (3)				f Facility (4)						
Street Address							chool (K-12)		nago a com				
[[시간] [[[[[] [] [] [] [] [] [] [] [] [] [] [ubchapter 8	37	12.50				
125 So. Finley Avenue							other (i.e., p	private & co	mmercial buildings, h	ome	, etc.)	
011 (17)						Square	Feet	# of Flo	oors Bldg	. Age)		
City (5)							6,500		3		80		
Basking Ridge						Curren	t Use (Prior i ercial	if being dem	olished)				
County (6) Somerset		Co	ounty Code	e (7)									
Name of Monitoring Firm	n Hired by Buil				ASCM	No Namo	of Abatemen	t Contractor	(0)				
Arcadis US Inc.		ang Owner	(0)		AGGIVI		ch, Inc.	il Contractor	(9)				
Street Address							Address						
35 Columbia Road						829 Ra	dio Road						
City, State & Zip Code							tate & Zip Co						
Branchburg, NJ 08876 Project Manager for Mor			IT.	Jambara N	to and to an a		gg Harbor,						
			90	elephone N 8-526-100	00	609-29	one Number 6-6916		License Numb	008 ⁻	17		
Scheduled Start Date (1 September 15,		Scheduled	Completio	on Date (1 oer 15,, 20	1)		of OSHA Mo	nitor					
Occupancy Status Durin	g Abatement (Check only	one)		10		Address	-				-	
Facility Closed				atement			dio Road						
Abatement Per		e of Norma	I Hours			City, St	ate & Zip Co	de					
Other – Descri						Little E	gg Harbor,	NJ 08087					
Facility Occupi	The state of the s	tement											
Scope of Work (Check a	all that apply)												
							X Full (Containment	with Negative Pressure				
≥3 sf or ≥ 50 lf			\boxtimes	Renovation	n		Mini-	Enclosure					
≥160 sf or ≥260 lf	f			Demolition	n		Glov	ebag Proced	dure				
							-) and Non-Friable Proce	edure			
	tion of		Is Locat	ion Norma	IIIv Used	De	escription of		1	_	batem	ent T	Type
Asbestos-Contain		CM)	Solely i	y Mainter	ance or		stos-Contain		Amount (Specify SF				,,,,
	ABATED		Cust	odial Staff	? (12)		aterial (ACM)		or LF)				
	acility (3)						hermal syste		1			m	
7.	(3)						on, surfacing er miscellane			l R		nc	ᄪ
						or othe	i illiscellarie	ous)		m	ep	sde	용
			Yes	No	N/A					Removal	Repair	Encapsulate	Enclosure
			165	NO	IV.A				1	=		ē	e.
First Floor Lavatory				-	X	Ceramic F	Floor Tile Ad	dhoeiyo	16 SF	V	-	-	-
First Floor Lavatory					X	L AND PORTON	Joint Comp	on the management	32 SF	X			
-						Diywaiii	Joint Comp	Journa	32 31	X			
										-			
			-										
Name of Registered Was	ata Haular		IN IDED V	/	10.11.5								
realise of Neglatered Was	ste nauter		NJDEP V Hauler ID		Cubic Y	ards of Waste	Nan	ne of Registe	ered Landfill				
Synatech, Inc.			10	429	2		Fair	rless Hills					
City, State					Disposa	I Date		, State			-		
						5,576	J.i.y						
Little Egg Harbor, NJ 0	8087					r 16, 2018	Mor	rrisville, PA					
Completed By		Title			Signatu	re ,	1		Date				
Diane Aloia		Executive	Adminia	trator	1	and all	11		A 1 07 00 10				
		-vecaning	Auminis	uatur	INV	win Ul	VU		August 27, 2018				

CK 1829

State of New Jersey

	ALL	9		CATION	OF ASB to NJAC	ESTOS	ABATE		r (())	E	CE.		/ [And the second s
Date of Notification (1) 08/24/2018					f Building n Bostw		Operator	(2)		i	AUG 3 C	20	18	The state of the s	
Agencies Notified	Type Notification			Street A	ddress					1				-	4
× EPA	X Initial										C 27 17 12 27			in in	1
X EPA X DEP X DOL	Amended Amendment		_		ite, Zip Co Orange,		052			-1-517	T CENS	-11411			
× DOH	Emergency justification)		t	Name of	Contact					Tel	lephone Nur	nber			
DOH DCA	Cancellation			Myrian	n Bostw	ick				4					
				FACI	LITY INFO	ORMATI	ON								
Name of Facility Where All House	patement is Takin	g Place (3	3)					Ту	pe of Facility (4)					
									School (K-1						
Street Address								×	Subchapter Other (i.e. p etc.)				dings,	home	es,
City (5) West Orange								Sq N/	uare Feet	# o	f Floors A	1000	ildg. A I/A	ge	
County (6) Essex				County (Code (7) USE ONLY)			rrent Use (Prid Ouse	or if be	ing demolish	ned)			
Name of Monitoring Firm I	Hired by Building	Owner (8))	ASCN	No.				batement Cor atement, In		(9)				
Street Address							Street	Add							
City, State, Zip Code							City, S	State	, Zip Code NJ 07512						
Project Manager for Monit	oring Firm		Т	Telepho	ne No.		Teleph	none	No.		License N	0.			
									-8685		01311				
Start Date (10) 09/05/2018		09/06/2	2018	npletion	Date (11)		100000000000000000000000000000000000000		SHA Monitor atement, In	C.					
Occupancy Status During Facility Closed/Vacat				nent			Street 11 R		ress engren Aver	nue					
Abatement Performer Other – Describe: Oct	d Outside of Norn								, Zip Code NJ 07512						
Scope of Work (Check All	That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit					- !	Full Containme Mini-Enclosure Glovebag Prod	9	n Negative F	ressu	re		
							×		Non-Exempted	(*) an	d Non-Friab	le Pro	cedur	е	
Location	nf	1	Locat Normal	lly		De	scription	n of						ement pe	
Asbestos-Containing N	Material (ACM)		ed Sole			tos Cont	taining N	/ate	rial (ACM)		mount			ш	
TO BE ABAT		1.000	todial S		(i.e.	thermal	system: cing, VA				Specify F or LF)	Remova	Re	Encapsulate	Enclosure
(13)			(12)				niscellar			O.	or Er /	SVOL	Repair	Sul	osui
		Yes	No	N/A								=		ate	e e
Baseme	nt		Х				VAT			3	60 SF	Х			
37010		-		1											
Name of Registered Waste	e Hauler		I	J JDEP W	/aste	Cubic	Yards		Name of I	Registe	ered Landfill				
D&S Abatement, Inc.				lauler ID 0996	No.	of Was			I consider the tipe		gement o				
City, State Totowa, NJ						Dispos TBD	sal Date	A	City, State Morrisv		A		7 5 22		
Completed by		Title				S	Signature	1 6	7		Da	ite			

Project Manager

Oliver Hegedis

08/24/2018

mo 69889671478

) (PAID				OF ASB					-7		C	E	n	N/I	Ē	Property.
Date of Notification (1 08/24/2018				Name o	of Building Schiavo	Owner/0			The state of the s		<u>.</u>	<u> </u>	<u>E</u>	_[]_	W	L	
Agencies Notified EPA DEP DOL	Type Notification Initial Amended			Street A	Address ate, Zip Co	ode			to the second and the second s		The state of the s	AUG		0 1	2018	The Designation of the State of	
10.00	Amended Amendment Emergency	(including	_	Spring	gfield, No	J 0708	1		-			EST LK	TAR	SINC	TRO	1.8	
DOH DCA	justification) Cancellation				Schiavo					1 -	enern			E.			
Name of Facility When	e Abatement is Takin	a Place (3)	FACI	ILITY INF	ORMATI	ION	Tyne	of Facility	(4)							
House									School (K-	12)							
Street Address								×	Subchapte Other (i.e. etc.)					build	ings,	home	es,
City (5) Springfield								Squar N/A	re Feet	1000	of FI	oors		0 82.0	dg. A /A	ge	
County (6) Union					Code (7) USE ONLY)		Curre	nt Use (Pr se	ior if b	peing	demo	lished	j)			
Name of Monitoring Fi N/A	rm Hired by Building	Owner (8)	ASCN	M No.		C. C. C. C. C. C. C. C. C. C. C. C. C. C		tement Co ement, I		or (9))					
Street Address								Addres	ss gren Ave	nue							
City, State, Zip Code									p Code J 07512								
Project Manager for M	onitoring Firm			Telepho	ne No.		N 000000 110 5000	none No 345-86			508	icense					
Start Date (10) 09/04/2018		Schedul 09/06/		npletion	Date (11)		The state of the s		IA Monitor ement, Ir				39				
Occupancy Status Dur	ring Abatement (Chec	k Only O	ne)				Street	Addres	S						2000		
Facility Closed/Va Abatement Perform Other – Describe	acated During Entire F rmed Outside of Norm Occupied	Period of nal Facilit	Abatem y Hours	nent			City, S	tate, Zi	p Code J 07512		-				-		
Scope of Work (Check	All That Apply)									-			m - 9,0				-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		and the same of th	Renova Demolit				×	Min Glo	Containm i-Enclosur vebag Pro n-Exempte	e cedur	e					4	
		- C10	Locati													ment	
Locati Asbestos-Containin <u>TO BE A</u> In Fa (1:	ng Material (ACM) BATED cility	Use Ma	Normal ed Sole sintenar stodial S (12)	ly by nce/		tos Cont thermal surfac		faterial s insula T, or		1	Amo (Spe SF or	cify		Remova	Repair	Encapsulate	Enclosure
(,,		Yes	No	N/A		ou ioi ii	insochar	icous						val	₹	ılate	ure
Attic o	loset		Х			Ve	rmiculi	te			140	SF		Х			
														-	-		
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Name of Registered W D&S Abatement, Ir			Н	JDEP Wauler ID		Cubic of Was			Name of Waste	CHICAGO CO.				Δ			
City, State	ACC.		20	0996			sal Date		City, Sta	te		HOHL	. 01 1				-
Totowa, NJ Completed by		Tial =				TBD		10	Morrisv	/ille,	PA						
Oliver Hegedis		Title Proje	ect Ma	nager		S	ignature	TEK	_			mer error	Date 08/2	4/2	018		



			(P	ursuant	to NJAC	8:60 an	d 12:12	0)		F	P F	3 1	N	7 [5	3 [***	
Date of Notification (1) 08/24/2018					of Building Marcov		Operator	r (2)		1	Up II		10			A COLUMN TO SERVICE AND ADDRESS OF THE PARTY
Agencies Notified	Type Notification			Street A	Address					, 4	AUG 3	0	201	8		
EPA DEP DOL	Initial Amended Amendment Emergency (_		ate, Zip Co s Plains,		950			i.	131.03				1	1
DOH DCA	justification) Cancellation	molading			of Contact Marcov	vsky				Tel	enhone	Niim	her	944	****	
N				FAC	ILITY INF	ORMAT	ION									
Name of Facility Where House	Abatement is Takin	g Place (3)						of Facility School (K-							
Street Address								×	Subchapter Other (i.e. petc.)	r 8 (Oth				dings	home	es,
City (5) Morris Plains								Squa N/A	ire Feet	# o	f Floors			ldg. A I/A	Age	
County (6) Morris					Code (7) USE ONLY)		Curre	ent Use (Pri	or if bei	ng demo	olishe	ed)			
Name of Monitoring Firm N/A	n Hired by Building (Owner (8)		ASCN	Л No.				ement Cor ement, Ir		(9)					
Street Address							3.0000000000000000000000000000000000000	Addre	ss gren Ave	nue						
City, State, Zip Code	9								ip Code IJ 07512				alter-			
Project Manager for Mor	nitoring Firm			Telepho	ne No.			none N 345-8			License 01311		8			
Start Date (10) 09/06/2018		Schedul 09/07/2		mpletion	Date (11)				HA Monitor ement, In	ıc.						
Occupancy Status Durin	g Abatement (Check	k Only Or	ne)					Addres								
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire F ned Outside of Norm Occupied	eriod of a lacility	Abaten Hours	nent s			City, S	state, Z	gren Ave	nue						
Scope of Work (Check A							loto	wa, N	IJ 07512							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ш тыст фруу		Renova Demolit				×	Mir Glo	Il Containm ni-Enclosure ovebag Prod n-Exempted	e cedure					٩	
		Is	Locat	ion										Abate	ement	
Location Asbestos-Containing <u>TO BE AB</u> In Facil (13)	Material (ACM) ATED lity	Use Ma	Normal ed Sole intena todial (12)	ely by nce/		tos Cont thermal surfac		Material s insula T, or		(S	mount Specify or LF)		Removal	Repair	e Encapsulate	Enclosure
Kitche	-n	165	X	INIA			VAT			10	30 SF	\dashv	v			
TALORE							VAI			10	00 SF	\dashv	Х			
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Name of Registered Was	ste Hauler		N	JDEP W	laste	Cubic	Yards		Name of	Registe	red Land	dfill				
D&S Abatement, Inc	.			lauler ID 0996	No.	of Was			Waste I	Manag			PA			
City, State Totowa, NJ						Dispos TBD	sal Date	// .	City, State Morrisv		Α					
Completed by Oliver Hegedis		Title Proje	ct Ma	anager		S	ignature	40	1/			Date 08/2		018		



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Date of Notification (1) 8/27/18				ilding Owner/ell Private		(2)	1 5000	-	AUG 20	2010	A CONTRACTOR OF THE CONTRACTOR
Agencies Notified EPA DEP DOL DOH DCA	Type Notification Initial Amended Amendmen Emergency justification) Cancellation	t# (including	City, State, Long Bea	Zip Code ach Twp NJ	08008		and Iroh	ASB	ESTOS CON LICENSIN elephone Num	ITROL G	
A1			FACILITY	Y INFORMAT	ION						
Name of Facility Where A Chris Knell Private Street Address		ng Place (3)					Other (i.e. etc.)	12) r 8 (Ot private	ther than K-12,	l buildin	
Long Beach Twp N	J 08008					500	are Feet 00+	2	of Floors	35	g. Age
County (6) Ocean			County Code (STATE USE	e (7) ONLY)		Cur			eing demolishe		
Name of Monitoring Firm N/A Street Address	Hired by Building	Owner (8)	ASCM No).	Name Pern Street	aco		ntracto	or (9)		
					POE						
City, State, Zip Code		70			36.00.77.76.0		Zip Code erlin NJ 08	091			
Project Manager for Mon	itoring Firm		Telephone N	No.	Teleph 856-		No. -9800	-	License No 00727),	
Start Date (10) 8/5/18		Scheduled Co 8/14/18	mpletion Date	e (11)	Name Sam		SHA Monitor				
Occupancy Status During	g Abatement (Che	ck Only One)			Street	Addr	ess				
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire ed Outside of Norr	Period of Abate nal Facility Hou	ment rs		City, S	tate,	Zip Code	-			
Scope of Work (Check A ≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	Il That Apply)	Renov Demol			×	l N	lini-Enclosur lovebag Pro	e cedure	th Negative Pr e nd Non-Friable		dure
Location	of	Is Loca Norma		Do	ecrintian	o.f				At	oatement Type

Location of	100.00	Locati	T17700	Description of	Non-Exempte	ed (*) and Non-Frial	ole Pro	Abate		t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solel intenar todial S (12)	nce/	estos Containing Mate e. thermal systems in: surfacing, VAT, o other miscellaneou	sulation, ´	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A				=		ate	9
Exterior Siding			x	 Exterior Siding	9	1200	Х			
Name of Registered Waste Hauler United Roll Off		H	JDEP Wa auler ID I 2459	Cubic Yards of Waste 3	Name of	Registered Landfil	ı			
City, State				Disposal Date	City, Sta	ite	-			

Title

President

8/14/18

Signature

Anthony T Perna

Completed by

Elm NJ

Date

8/27/18

Morrisville PA 19067

PAID

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

chealet 3427

Date of Notification (1)					Name	of Buildin	a Owner/	Operator (000	- 1			-
8/	24 /	18	<u> </u>		1	e College					W/ [
Agencies Notified	Type Notific	ation			Street	Address			113/11			711	111	
⊠ EPA					200	0 Pennir	ngton R	d.	11.			4 1 1		
⊠ DOLWD		5 (S)	01011		_	State, Zip (AUG 30	2018	-(1-	44	-
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(10/10/0.20/0)	☐ Cancella					anda Ra			. 103	609-771-	F. C. L. Common	Ġ.		
					1			TION		003-111-	2001	- 1		
Name of Facility Where A	hatement is	Takina E	Place (31	FA	CILITY IN	NFORIVIA	ATION	T	7.0				
TCNJ-Green Hall	ibatement is	aking r	lace (3)					Type of Facility					
Street Address			-						School (K-12		(-12)			
2000 Pennington Re	d								Other (i.e., p	rivate and com		uildin	gs,	
City (5)	u.		-						homes, etc.)					
Ewing									Square Feet	# of Floors	B	ldg. A	ge	
County (6)					10				66,000	2		88		
MERCER					Cour	nty Code (7	()(STATE U	ISE ONLY)	Current Use (Pr	ior if being den	nolished)			
	1 E 4 L D 11	1: 0	- 10	. 1			T						u.	
Name of Monitoring Firm	Hirea by Build	ding Ow	ner (8)	ASCM		1		ent Contractor (9)					
AET, Inc					0002	21			VIRONMENTA	L, INC.				
Street Address								Address				W		
28 Pennell Rd						-	1123	BEAVE	R STREET					
City, State, Zip Code							City, St	ate, Zip Co	ode					
Media, PA 19063								STOL, PA	19007					
Project Manager for Moni	toring Firm				phone		Telepho	one No.		License No	4.5			
Roy Mosicant					10-891		215-	788-6040		00509				
Start Date (10)		Schedul						of OSHA M						
8 /24 /					7_ / -	18	BRIS	TOL EN	VIRONMENTA	L, INC.				
Occupancy Status During							Street A	Address		1			1000	
☐ Facility Closed/Vacate	d During Enti	re Perio	d of A	bate	ment		1123	BEAVER	RSTREET					
Abatement Performed	Outside of No	ormal Fa	acility	Hou	rs - Des	cribe	City, Sta	ate, Zip Co	de		Wall District			
Time of Abatement:	AIVI	SAT	2000	V - <u>/</u>	OUAW Dear	9	BRIS	TOL, PA	19007					
Scope of Work (Check all	that apply)				7									
≥3 sf or ≥3 lf		N	Ren	ovat	ion			Full Cont Mini-Encl	ainment with Neg	ative Pressure	1			
≥160 sf or ≥260 lf] Dem						Procedure					
] Non-Exer	mpted (*) and No	n-Friable Proce	edure			
1				oca							Al	atem	ent T	уре
Location (Asbestos-Containing N		n	Used			Asha	De etos Cont	scription of	f terial (ACM)	Amount	R	R	Ш	Ш
TO BE ABA	TED	,	Main			(i.e	, therma	l systems i	nsulation,	(Specify	Removal	Repair	ıcar	nclo
IN Facilit (13)	y			diai (12)	Staff?		surfa	cing, VAT,	or	SF or LF)	va	-	Encapsulate	Enclosure
(13)		1	es	No	N/A		othern	niscellaneo	ous)				ate	
Attic			J	\boxtimes		Pipe Ins	sulation			1,500 LF				
Suite 218] [\boxtimes		Plaster	Ceiling			320 SF				
Attic						Clean u	p of elb	ow derbi	ris	6 SF		\Box	П	
				_								H		
Name of Registered Wast	e Hauler			IN	JDEP V	Vaste	Cubic Y	ards of	Name of Regis	tered Landfill				
BRISTOL ENVIRONI	MENTAL, IN	IC.		H	18706		Waste		FAIRLESS					
City, State				-	10100		Disposa	I Date	City, State					
BRISTOL, PA 19007									Constitution of the Constitution	LLE, PA 1906	67			
Completed By (Print or Ty	pe)	Title		-11111			Sie	nature	0,	,	Date			
BRIAN SCAFIRO			IMAT	OR			79	. 1	2		1	4/	187	
100 11								->>	XX		0/0	4/1	X	



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

	The state of the s		NOI				AC 8:60 and 5:1	/	eclot 34	17			
Date of Notification (1)					Name	e of Buildin	g Owner/Operator (2)	D 6 B	n na	[-]	and the second	7
8 / _	24 /	18	<u> </u>			670	of New Jersey	(*)		U.W			and the second
⊠ EPA	Type Notific	cation			1	t Address		11531			and all the		
⊠ DOLWD	⊠ Amende	he					ngton Rd.	1	Alic on	2018		1.11	100
☑ DHSS	Amenda	0.000	9-8/24	/18		State, Zip (1100 0 0		and and a	- 11-40	1
☑ DCA	☐ Emerge		cluding	9		ing, NJ 0							1
(NJAC 5:23-8)	justifica				Name	of Contac	t	1 1	Telephone N	umber 0	_&		
	☐ Cancella	ation			Am	anda Ra	dosti		609-771-2	881			-1
					FA	CILITY IN	FORMATION	3/4				1 155	
Name of Facility Where A	batement is	Takin	g Place	(3)				Type of Facility	(4)				
TCNJ-Green Hall								School (K-1	2)				
Street Address					B-22-W			Subchapter	8 (Other than K	-12)	حالماند	22	
2000 Pennington R	d.							homes, etc.		nercial bi	וחוחות	gs,	
City (5)				-				Square Feet	# of Floors	BI	ldg. A	ge	
Ewing								66,000	2		88		
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (P	for if being dem	olished)			
MERCER							***		3 <u>7</u> .8				
Name of Monitoring Firm	Hired by Bui	ilding (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)				15050
AET, Inc					0002	21	BRISTOL EN	VIRONMENTA	L, INC.				
Street Address							Street Address						
28 Pennell Rd							1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip Co	ode		W1011111111111111111111111111111111111			-
Media, PA 19063							BRISTOL, PA	19007					
Project Manager for Moni	toring Firm		re	Tele	phone	No.	Telephone No.		License No.				-
Roy Mosicant				6	10-891	-0114	215-788-6040		00509				
Start Date (10)		Sched	luled C	omple	tion Da	ite (11)	Name of OSHA M	onitor					
8 /24 /					7 /		BRISTOL EN	VIRONMENTA	L. INC.				
Occupancy Status During	Abatement						Street Address		_,				
☐ Facility Closed/Vacate					ment		1123 BEAVER	STREET					
Abatement Performed	Outside of N	Vormal	Facility	/ Hour	s - Des	cribe	City, State, Zip Co						
Time of Abatement:	AM	PN	N/7:00	PM-7:	00AM		BRISTOL, PA						
Scope of Work (Check all	that apply)	SAT	OUL	y 15	200	7	DIGIOTOL, FA	13007					
≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf			⊠ Re	novati molitic				ainment with Neglosure Procedure mpted (*) and No		dura			
			Is	Locat	ion	T	□ I40II-EXEI	ripted () and No	II-FIIADIE PIOCE				
Location				lorma			Description of	f			atem	1	T
Asbestos-Containing N TO BE ABA		VI)		d Sole intena			stos Containing Mat		Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility				odial		(i.e.	 thermal systems i surfacing, VAT, 		(Specify SF or LF)	JOVE	air	aps	osu
(13)			.,	(12)	Τ	-	other miscellaned		0. 0. 2. /	=		ulat	re
Attic			Yes	No ⊠	N/A	Pipe Ins	rulation		1 500 1 5	N		е	
Suite 218						Plaster			1,500 LF 320 SF				
Attic				П				ia					片
71110		_		=-	-	Clean u	p of elbow derbi	IS	6 SF			Ш	
Name of Registered Waste	. Haules						01: 1/ /						
		NO			JDEP V auler ID		Cubic Yards of Waste	Name of Regis					
BRISTOL ENVIRON	MENTAL, II	NC.	***************************************		18706			FAIRLESS	LANDFILL				
City, State							Disposal Date	City, State	· space more was				
BRISTOL, PA 19007								MORRISVI	LLE, PA 1906	7			
Completed By (Print or Ty	oe)	Title					Signature	5.		Date ,			
BRIAN SCAFIRO		ES	STIMA	TOR			(sk	STE	/	8/2	41	10	
ASB-41			1000					XXX		0/4	1/6	0_	

ASB-41 MAY 11

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

(Pursuant to N.J.A.C. 8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) 7/10/18 **Burlington Coat Factory** Agencies Notified Type Notification Street Address **EPA** 1830 US Route 130 North DEP Initial City, State & Zip Code X X DOL Amended R#5-8/24/18 Burlington NJ 08016 \boxtimes DOH Emergency Name of Contact Telephone Number DCA Cancellation Mike Woods 917-838-4314 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) **Burlington Coat Factory Store #226** School (K-12) Street Address Subchapter 8 (Other than K-12) 2495 Route 1, Suite 1 Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 72500 50 Lawrenceville Current Use (Prior if being demolished) Mercer Retail Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **ESIS** BRISTOL ENVIRONMENTAL INC Street Address Street Address 436 Walnut Street 1123 BEAVER STREET City, State & Zip Code City, State & Zip Code Philadelphia, PA 19106 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Frank Westfall 215-640-5320 215-788-6040 00509 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7/24/18 BRISTOL ENVIRONMENTAL INC ON HOLD Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET X Abatement Performed Outside of Normal Hours - 7am to 3pm City, State & Zip Code Describe: (10:00 PM - 6:00 AM) BRISTOL, PA 19007 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf ≥260 If Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Asbestos-Containing Normally Used (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate Enclsoure Removal TO BE ABATED Maintenance or (i.e., thermal systems Repair in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) N/A Yes No Receiving Area Mastic 4,000 Aisle Way C-D @ Column 4 Mastic 436 SF Aisle Way C-D @ Column 2 Mastic 436 SF Aisle Way D-E @ Column 1-2 Mastic 300 SF Vestibule G-H @ Column 2-5 Mastic 1100 SF Vestibule J & Cashwraps Mastic 900 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste SERVICE TRANSPORT GROUP, INC. 20990 40 Cu Yd FAIRLESS HILLS LANDFILL City. State Disposal Date City, State NEW CASTLE, DE 19720 TBD MORRISVILLE, PA Completed By (Print or Type) Title Signature Date aluch + De Canka PATRICK T. DeCARO Estimator 8/24/18

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)		Name of Duilding		- (0)		W JE	-11	111	
7/10/18		Burlington Co	Owner / Operato	r (2)					
Agencies Notified Type Notifica		Street Address	attactory			×7.55		1	
⊠ EPA		1830 US Route	130 North		FIG. 2.0			× 1	
☐ DEP ☐ Initial		City, State & Zip						1	
■	H-	Burlington NJ		145				- 1	
		Name of Contact			1000000	Telepho	200 00 200		er
Cand	ellation	Mike Woods			14,50,00	917-838	3-43	14	
			FORMATION						
Name of Facility Where Abateme		3)	Type of Facili				-019-10		
Burlington Coat Factory Sto Street Address	re #226		School (I		14 40)				
2495 Route 1, Suite 1				ter 8 (Other tha	an K-12) nmercial buildin	aa hom	00 0	to)	
2430 Route 1, Juile 1			Square Feet	# of Flo		Bldg. Age		(C.)	
City (5)	County (6) Co	ounty Code (7)	72500	# 01110	1	Blug. Age	50		
Lawrenceville	Mercer	and code (/)		Prior if being d	emolished)		50		
			Retail	, nor il bollig d	emonorica)				
Name of Monitoring Firm Hired b	y Building Owner (8)	ASCM N		tement Contrac	ctor (9)				
ESIS				NVIRONMEN					
Street Address			Street Addres						
436 Walnut Street City, State & Zip Code				ER STREET					
Philadelphia, PA 19106			City, State & BRISTOL, F						
Project Manager for Monitoring F	irm Teler	ohone Number	Telephone Nu		License N	Number			
Frank Westfall		640-5320	215-788-604		Liconoci	0050	9		
	Scheduled Completion	on Date (11)	Name of OSH	A Monitor					
7/24/18	ON H			NVIRONMEN	ITAL INC				
Occupancy Status During Abater Facility Closed/Vacated [Street Address						
Abatement Performed Ou	보면 1984년 1일 시간에 "" 1984년 1일 1일 1일 1일 1일 1일 1일 1일 1일 1일 1일 1일 1일		1123 BEAVI				- Thirty and		
Describe: (10:00 PM -			BRISTOL, P	170					
Facility Occupied During		maroday	DIGITOL, I	A 19001					
Scope of Work (Check all that ap					The said				
	_				tainment with N	Negative	Pres	sure	<u> </u>
23 sf or ≥3 lf	\boxtimes	Renovation		Mini-End					
≥160 sf ≥260 lf		Demolition			ag Procedures	F :	_		
Location of	le	Location	Description		empted and Nor Amount			ent T	
Asbestos-Containing	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nally Used	Asbestos-Conf		(Specify	Aba	teme	2111 1	ype
Material (ACM)	S	olely by	Material (AC	CM)	SF or LF)			E	ш
TO BE ABATED in Facility		tenance or odial Staff?	(i.e., thermal sy insulation, surface			Remova	Repair	cap	ncls
(13)	Cusio	(12)	or other miscella			ova	oair	Encapsulate	Enclsoure
	Yes	No N/A		,		-		te	(D
Rear Offices			Mastic		512 SF				
Break Room, Mens Room &			Mastic		1,575 SF				
Ladies Room, Corridor & Sa	les Floor		Mastic		900 SF				
Name of Registered Waste Haule	ar.	NIDED Wash	Cubic Yards	Nome of De	otorod L - Jen				
Tame of Registered Waste Hault	21	Hauler ID No.	of Waste	IName of Regi	stered Landfill				
SERVICE TRANSPORT GRO	UP, INC.	20990	40 Cu Yd	FAIRLESS H	ILLS LANDF	ILL			
City, State			Disposal Date	City, State		-			
NEW CASTLE, DE 19720			TBD	MORRISVIL	LE, PA				
Completed By (Print or Type)		Title	Signature			Date	0000		
PATRICK T. DeCARO		Estimator	Datain	11+1	Caro 19	8/24/	18		
			1100000	0 1,10	con 14				



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AU	G 3	0 2	018	A CONTRACTOR OF THE CONTRACTOR	and the statement of th

			n Sanagan									= ,
Date of Notification (1)						g Owner/Operator						Manager of Street
8 /	24 /	18		The	e College	of New Jersey		AUG	3.0	100		
Agencies Notified	Type Notifica	ation		Street	Address				0 0	57-64	0	1
⊠ EPA				200	00 Pennii	ngton Rd.		14.5		n e.		
⊠ DOLWD			07/40		State, Zip (100	77.7		-
☐ DHSS		ent # <u>10-8/</u>			ing, NJ 0							
□ DCA (NJAC 5:23-8)	☐ Emergen justification		ig		of Contac			Telephone Numb	ner			-
(110/10/0.20/0)	Cancellat	000000			anda Ra	Karamanan da karamanan da karamanan da karamanan da karamanan da karamanan da karamanan da karamanan da karaman Karamanan da karamanan da karamanan da karamanan da karamanan da karamanan da karaman da karaman da karaman da		609-771-288				
								003-771-200				
Name of Facility Where	Abstamant is T	Takina Dlas	a /2\	FA	CILITY	NFORMATION	T	70				
TCNJ-Green Hall	Abatement is 1	aking Plac	e (3)				Type of Facility					
							School (K-12	²⁾ 8 (Other than K-12)				
Street Address							Other (i.e., p	rivate and commer		ilding	S,	
2000 Pennington R	a.						homes, etc.)					
City (5)							Square Feet	# of Floors	N. Carre	dg. A	ge	
Ewing							66,000	2		88		
County (6)				Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)			
MERCER												
Name of Monitoring Firm	Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
AET, Inc				0002	21	BRISTOL EN	IVIRONMENTA	L, INC.				
Street Address						Street Address						
28 Pennell Rd						1123 BEAVE	R STREET					
City, State, Zip Code			TO COMPANY			City, State, Zip C	ode					
Media, PA 19063						BRISTOL, PA	A 19007					
Project Manager for Mon	itoring Firm		Tel	ephone	No.	Telephone No.		License No.				
Roy Mosicant			6	10-891	-0114	215-788-604	0	00509				
Start Date (10)		Scheduled	Comple	etion Da	ite_(11)	Name of OSHA	Monitor					
11		ON	1 .	OL	and the same	BRISTOL EN	IVIRONMENTA	L. INC.				
Occupancy Status During	Abatement (Check only				Street Address		-,				
☐ Facility Closed/Vacate				ment		1123 BEAVE	DOTDEET					
					scribe	City, State, Zip C						
Time of Abatement: _												
Scope of Work (Check al	I that analy					BRISTOL, PA	4 19007					
Scope of Work (Check at	і тпат арріу)					☐ Full Con	tainment with Neg	native Pressure				
≥3 sf or ≥3 lf			enovat				closure	ga				
≥160 sf or ≥260 lf		□D	emoliti	on			g Procedure	n-Friable Procedur	_			
			s Loca	tion	I	☐ NOII-EXE	empled () and No	ni-Filable Procedur				
Location	of		Norma			Description	of		-	ateme		T
Asbestos-Containing	Material (ACM		ed Sol			stos Containing Ma	aterial (ACM)	Amount	Rer	Repair	Enc	Enc
TO BE ABA			ainten: stodial		(i.e	e., thermal systems		(Specify	Removal	bair	aps	Enclosure
(13)	ıty		(12)			surfacing, VAT other miscellane		SF or LF)	<u>n</u>		Encapsulate	ure
(1-7)		Yes	No	N/A		other miodenance	,003)				te	
Attic					Pine In	sulation		1,500 LF			П	
Suite 218						Ceiling		320 SF				H
Attic						up of elbow derb	rie	6 SF		H		H
	늄		Olcaire	ap or cibow deri	7113	0.31						
Name of Registered Waste Hauler					l Waste	Cubic Yards of	Name of Regis	stored Landfill			ш	Щ
BRISTOL ENVIRON		IC.	17.112	18706	D No.	Waste		LANDFILL				
City, State				10/00	,	Disposal Date	City, State				-	
BRISTOL, PA 19007	7					1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1		LLE, PA 19067				
Completed By (Print or T		Title			***************************************	Signature		Dat	to			
BRIAN SCAFIRO	,,,,,	ESTIM	ATOF	?		Burn	Scalin	/gn 8		27	-/	P

ASB-41 B 5 | 804 | -58 * Do not use this form for asbestos licensure exempted activities.



Date of Notification (1)				Nam	e of Buildir	ng Owner/Operator	(2)	35.45			111	-
6//	18	<u> </u>		1000		e of New Jersey	10.0	AUG and				-
Agencies Notified Type Notifi					et Address 00 Penni	ngton Rd.		_ nor sh	- 016	T de la constantina della cons	7	
☑ DOLWD ☑ Amend ☑ DHSS Amend		R_R/1	7/12	City,	State, Zip	Code	1.7	Juggers COM	TROL /	7.	-	
☑ DCA ☐ Emerge				Ev	ving, NJ (8628		L. Langing	713		-	
(NJAC 5:23-8) justifica		0.00	3	Nam	e of Contac	t		Telephone Nun	nber	- See an order	- mand	
☐ Cancel	ation			Ar	nanda Ra	dosti		609-771-28	81			
				FA	CILITY IN	FORMATION						
Name of Facility Where Abatement is	Taking	Place	e (3)				Type of Facility	(4)				
TCNJ-Green Hall							School (K-12					
Street Address							Subchapter	8 (Other than K-1) rivate and comme	2)	.:1-1:-		
2000 Pennington Rd.							homes, etc.))	erciai D	ullain	gs,	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
Ewing							66,000	2		88	•	
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	ished)			
MERCER									100 CORCI ® (
Name of Monitoring Firm Hired by Bu	ilding C	wner	(8)	ASCN	l No.	Name of Abatem	ent Contractor (9)					
AET, Inc				000	21	BRISTOL EN	VIRONMENTA	L, INC.				
Street Address	1.9000 (1.100)					Street Address		•	-			
28 Pennell Rd						1123 BEAVE	R STREET					
City, State, Zip Code	7.7					City, State, Zip C	ode					
Media, PA 19063						BRISTOL, PA	A 19007					
Project Manager for Monitoring Firm			Tel	ephone	No.	Telephone No.		License No.	_	-		
Roy Mosicant					I-0114	215-788-6040)	00509				
Start Date (10)					ate (11)	Name of OSHA N	/lonitor					-
7/_5_/_18_	0	N	40	160)	BRISTOL EN	VIRONMENTAI	L, INC.				
Occupancy Status During Abatement	(Check	only	one)			Street Address				-		-
☐ Facility Closed/Vacated During En						1123 BEAVE	R STREET					
Abatement Performed Outside of N						City, State, Zip Co	ode					-
Time of Abatement:AM	PIV	1/7:00	PIVI-1	:00AM		BRISTOL, PA	19007					
Scope of Work (Check all that apply)						☐ Full Con	tainment with Neg	native Pressure				
≥3 sf or ≥3 lf		⊠ Re				Mini-Enc	losure	auve i lessule				
≥160 sf or ≥260 lf		☐ De	moliti	on			g Procedure mpted (*) and No	n Frieble Desert				
		Is	Loca	tion	T	□ MOII-EXE	ripled () and No	II-FIIable Procedu	-			
Location of			Norma			Description of	of			atem		T
Asbestos-Containing Material (ACI	VI)		d Sol	ely by		stos Containing Ma		Amount	Remova	Repair	Enc	Enclosure
TO BE ABATED IN Facility				Staff?	(i.e.	 thermal systems surfacing, VAT 		(Specify SF or LF)	Nou	air	aps	losi
(13)	-		(12)	T	-	other miscellane		01 01 21)	<u>a</u>		Encapsulate	aır
Attic		Yes	No	N/A	Disco Los	1.0			_		œ.	
Suite 218				10	Pipe Ins			1,500 LF				
Suite 210					Plaster	Celling		320 SF				
		Ц_										
Name of Registered Waste Hauler			1 1222	JDEP '		Cubic Yards of	Name of Regis	tered Landfill				
BRISTOL ENVIRONMENTAL, I	NC.			18706		Waste	FAIRLESS	LANDFILL				
City, State				10700		Disposal Date	City, State					
BRISTOL, PA 19007								LE, PA 19067				
Completed By (Print or Type)	Title					Signature			ate ,			
BRIAN SCAFIRO		TIMA	TOR	2		An.	n Scaf	01/6	8/1	7/1	-	
ASB-41						pua	n prose	ero M	0/1	11	0	

MAY 11 B5 / 804 / -SB * Do not use this form for asbestos licensure exempted activities.

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

CR# 3416

Date of Notification (1)				Na	ame of Buildi	ng Owner/Operator	(2)	(19 179 H	- 111	1-4	11.	1
6 /1 /	1	8		1		e of New Jersey			. W_			
Agencies Notified Type Notif	ication	1		St	reet Address		1/11		-	- 1		1
					2000 Penni	ington Rd.		AUG 30	1016	1		
☑ DOLWD ☑ Amend	ed				ty, State, Zip							8
□ DHSS			_		Ewing, NJ					1		
DCA Emerge		ncludi	ng		ame of Conta	200			or Paris	- 4/1	2000	g ^N
(NJAC 5:23-8) justifica	220					BA DOMEST		Telephone Nun				1
- Cancell	ation				Amanda Ra			609-771-28	81			
Name of Facility Where Abatement is	Takin	ng Plac	ne (3)		FACILITY I	NFORMATION	T	(2)				
TCNJ-Green Hall	i akiii	ig i iac	JC (U)				Type of Facility	• •				
Street Address							School (K-12	t) 3 (Other than K-1)	21			
100 A 100 A							Other (i.e., p	rivate and comme	z) ercial b	uildin	as	
2000 Pennington Rd.							homes, etc.)				90,	
City (5)							Square Feet	# of Floors	В	ldg. A	\ge	
Ewing							66,000	2		88	ŭ	
County (6)				C	ounty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
MERCER								and a control	onco			
Name of Monitoring Firm Hired by Bui	lding (Owner	(8)	ASC	CM No.	Name of Abateme	ent Contractor (9)					
AET, Inc	100		(2008)		0021		VIRONMENTAL					
Street Address		= = = = = =		1 00	7		* INCINIUMENTAL	-, INC.				
28 Pennell Rd						Street Address	070					
The second secon						1123 BEAVE						
City, State, Zip Code						City, State, Zip Co						
Media, PA 19063						BRISTOL, PA	19007					
Project Manager for Monitoring Firm			Te	lephor	ne No.	Telephone No.		License No.		-		
Roy Mosicant			(310-8	91-0114	215-788-6040		00509				
Start Date (10)	Scheo	duled (Compl	etion	Date (11)	Name of OSHA M	onitor					
7/_5_/_18_	100	88	/ _1	7	/18	BRISTOL EN	/IRONMENTAL	INC.				
Occupancy Status During Abatement	Check	k only	one)			Street Address		,				
☐ Facility Closed/Vacated During Ent				ement		1123 BEAVER	STREET					
Abatement Performed Outside of N	ormal	Facili	tv Hou	ırs - D	escribe							
/ Time of Abatement: AM	Di	17.00	DEA T	7.000	8.6	City, State, Zip Co						
8/3+8/10 - 2:30 PM - 12:30 P Scope of Work (Check all that apply)	TAR ;	8/4+	8/11	-10A	M - 8:30 [BRISTOL, PA	19007					
ocope of work (check all that apply)						□ Full Cont	sinmont with No-	-15 D				
≥3 sf or ≥3 If		⊠ Re	enova	tion		☑ Mini-Encl	ainment with Nega	ative Pressure				
≥160 sf or ≥260 lf		☐ De	emoliti	ion			Procedure					
						☐ Non-Exer	npted (*) and Non	-Friable Procedu	re			
Location of			S Loca Norma						Ab	atem	ent T	vpe
Asbestos-Containing Material (ACN	A)	W	ed Sol	-	Acho	Description of				_		1
TO BE ABATED	•)	1450.00	ainten		(ie	stos Containing Mat ., thermal systems in		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility		Cus	todial		? ,	surfacing, VAT,	or	SF or LF)	ova	air.	sde	USO
(13)		V	(12)		_	other miscellaneo	ous)		=		ulat	re
Attic		Yes	No	1 300							rD.	
					Pipe Ins	sulation		1,500 LF	\boxtimes			
Suite 218					Plaster	Ceiling		320 SF				
										П		
			П	10					12	1	1	닏
Name of Registered Waste Hauler					P Waste	Cubic Yards of	Name of David			Ш	П	
BRISTOL ENVIRONMENTAL, IN	VC.		1000		ID No.	Waste	Name of Registe					
				187	06	-	FAIRLESS I	LANDFILL				
City, State						Disposal Date	City, State				-	111-001
BRISTOL, PA 19007							MORRISVIL	LE, PA 19067				
Completed By (Print or Type)	Title					Signature		, Da	ite	,		
BRIAN SCAFIRO	ES	STIMA	ATOF	3		Brie	lest. 1	e l	2/2	//	7	
SB-41 0 6 1111 57						Journ	progres/		1/1	//	1	
SB-41 AY 11 B5/8041-58					m for asbest	os licensure exempt	ed activities.	7	1/1	//		-

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Date of Notification (1)					Name of B	uilding Owner/Oper	ator (2)	一 居 億 居	11 11/1	E	
	_ ′ _	18	_		The Col	lege of New Jer	sey	11.00	11 17	150	
	Notificat	ion		-+	Street Addr					j.	
⊠ EPA ⊠ Init						nnington Rd.		III AUS 3	3 2018	1	1 2
	nended		01011	_	City, State,				261 16156 3746	1	
	endmer ergency	11 #6-	8/3/1	0		√J 08628				+	
41110	tification	(Incit	ading	h	Name of Co			78213135	CHILD	1.5	
1 2-3	ncellatio			1				Telephone N	umber		_
			-		Amanda			609-771-2			
Name of Facility Where Abateme	nt is Tal	cine D	loc: 1	201	FACILITY	Y INFORMATION	l				
TCNJ-Green Hall	iilis iar	ang P	iace (3)			Type of Fac	cility (4)			
Street Address							School ((K-12)			
2000 Pennington Rd.							────────────────────────────────────	nter 8 (Other ti	12)		
City (5)							homes,		nercial bu	ildings	š,
Ewing							Square Fee				
							66,000	011 10015	Blo	ig. Age	е
County (6)		7.5			County Code	(7)(STATE USE ONL		2		8	
MERCER				1	,	WALL OSE ONE	') Current Use	(Prior if being demo	lished)		
Name of Monitoring Firm Hired by	Building	Own	er (8)	AS	CM No.	Name of Al					
AET, Inc			\-/		0021	Name of Abate	ment Contractor	(9)			
Street Address		-		1 0	0021	BRISTOLE	NVIRONMEN	TAL, INC.			
28 Pennell Rd						Street Address					
City, State, Zip Code							ER STREET				
Media, PA 19063						City, State, Zip					
Project Manager for Monitoring Firm						BRISTOL, F	PA 19007			50.00	
Roy Mosicant	1		1	elepho		Telephone No.		lines :			
tart Date (10)				610-8	91-0114	215-788-604	10	License No.			
and the control of th	Sched	duled	Comp	oletion	Date (11)	Name of OSHA		00509			
//18		8	1	17	/ _ 18		NVIRONMENT		0.00		
ccupancy Status During Abatemer	t (Chec	k only	onel			Stro-t Add	A IVOIMINE N	AL, INC.			
Facility Closed/Vacated During F	ntire Da	-1		S S		Street Address	201 654				
Abatement Performed Outside of	Normal	Facili	ty Ho	urs - D	escribe	1123 BEAVE					
Time of Abatement: AM-	PN	17:0	OPM-	7:00AI	M	City, State, Zip C					
B & 0/10 - 2 SOPM - 1237 cope of Work (Check all that apply)		400	8/11-	10 Al	M-8:30P,	BRISTOL, P.	A 19007				
	OS 25		od.				72 F F S S S S S S S S S S S S S S S S S				
≥3 sf or ≥3 if ≥160 sf or ≥260 if		⊠ Re	enova	tion		☐ Full Cor ☐ Mini-End	tainment with Ne	egative Pressure			
50 51 01 _200		□ De	emoliti	ion		⊠ Gloveba	n Procedure				
		,	1.			☐ Non-Exe	empted (*) and N	lon-Friable Procedure	23		
Location of			Loca Vorma					The Procedure	_		
Asbestos-Containing Material (AC	M)	Use	d Sol	elv bv		Description of	of		Abater	nent T	уре
TO BE ABATED		Ma	intena	ance/	Asbe	stos Containing Ma , thermal systems	iterial (ACM)	Amount	Re R	m	m
IN Facility (13)		Cus	todial (12)	Staff?	(surfacing, VAT	or	(Specify	Repair Remova	ıca	Enclosure
(.0)	-	Yes	No No	10000000	-	other miscellane	ous)	SF or LF)	Val T	Encapsulate	Inst
ic			No No	N/A	Pipe Ins		52			late	G
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		JI		П							
e of Registered Waste Hauler			I N	JDEP V	Naste T	Cubia Va					
RISTOL ENVIRONMENTAL, II	VC.		Ha	auler IE		Cubic Yards of Waste	Name of Regis	stered Landfill			
State				18706		4010	FAIRLESS	LANDFILL			
RISTOL, PA 19007						Disposal Date	City, State				
								LLE, PA 19067			
								LLE, PA 19067			- 1
pleted By (Print or Type)	Title					Signature					
		IMAT	OR			Signature Brian	6 4-	Date	750 9529		

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6/_1/	18				Iding Owner/Operato				1	111	11
Agencies Notified Type Noti	· · · · ·					У			Ĭ		
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□ DCA □ Emerg (NJAC 5:23-8) □ justification	ency (incl	uding		Ewing, N.			The second secon				Ĭ
☐ Cancel			201	ame of Con			Telephone N	umber		-	_
	nation			Amanda F			609-771-2				
Name of Facility Whose Abeter				FACILITY	INFORMATION						_
Name of Facility Where Abatement is TCNJ-Green Hall	s laking P	lace (3)			Type of Facili	ity (4)				
Street Address						School (K-	-12)				
						Subchapte	er 8 (Other than K	-12)			
2000 Pennington Rd.						homes, et	, private and comr	nercial	l build	lings,	
City (5)						Square Feet	# of Floors				
Ewing						66,000	2	- 1		Age	
County (6)			C	ounty Code	(7)(STATE USE ONLY)	1000	7.77		88		
MERCER						Canoni Ose (i	Prior if being demo	olished	i)		
Name of Monitoring Firm Hired by Bui	lding Own	er (8)	ASC	M No.	Name of Abatem	ent Control	0)				
AET, Inc	8	1.05		021							
Street Address						VIRONMENT	AL, INC.				
28 Pennell Rd					Street Address						
City, State, Zip Code					1123 BEAVE						
Media, PA 19063					City, State, Zip Co						_
Project Manager for Monitoring Firm		-			BRISTOL, PA	19007					
Roy Mosicant		1	lephon		Telephone No.		License No.	-			_
	2-1			01-0114	215-788-6040		00509				
_7 / _5 / _18	Scheduled				Name of OSHA M	onitor				_	_
	8	/ 1	0 /	18							
the state of the s	8 Check only	/_1	0 /	18	BRISTOL EN		L, INC.				
Occupancy Status During Abatement ((Check only	y one)	ement		Street Address	VIRONMENTA	L, INC.				
Decupancy Status During Abatement ((Facility Closed/Vacated During Enting Abatement Performed Outside of No.	Check only re Period o	y one) of Abate	ement	ocaribo	Street Address 1123 BEAVER	VIRONMENTA	L, INC.				
Decupancy Status During Abatement ((Facility Closed/Vacated During Enting Abatement Performed Outside of No.	Check only re Period o	y one) of Abate	ement	ocaribo	BRISTOL ENV Street Address 1123 BEAVER City, State, Zip Co	VIRONMENTA R STREET	AL, INC.				
Decupancy Status During Abatement ((Facility Closed/Vacated During Entire Abatement Performed Outside of Note Time of Abatement: AM	Check only re Period o	y one) of Abate	ement	ocaribo	Street Address 1123 BEAVER	VIRONMENTA R STREET	L, INC.				
Decupancy Status During Abatement (Facility Closed/Vacated During Entity Abatement Performed Outside of Note Time of Abatement: AM	Check only re Period o	y one) of Abate	ement	ocaribo	BRISTOL ENV Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA	VIRONMENTA R STREET de 19007					
Decupancy Status During Abatement (c) Facility Closed/Vacated During Entire Abatement Performed Outside of No Time of Abatement:AM- Cope of Work (Check all that apply) ≥3 sf or >3 if	Check only re Period of ormal Faci PM/7:0	y one) of Abate lity Hou 00PM-7	ement urs - De :00AM	ocaribo	BRISTOL ENV Street Address 1123 BEAVER City, State, Zip Co. BRISTOL, PA	VIRONMENTA R STREET de 19007	AL, INC.				
Decupancy Status During Abatement (c) Facility Closed/Vacated During Entire Abatement Performed Outside of No Time of Abatement:AM- Cope of Work (Check all that apply) ≥3 sf or >3 if	Check only re Period of ormal Faci PM/7:0	y one) of Abate lity Hou	ement urs - De :00AM	ocaribo	BRISTOL ENV Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Full Conta Mini-Enclo	VIRONMENTA R STREET de 19007 ainment with Negosure Procedure	gative Pressure				
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Date of Notification (1) 6 / 1	/ 18	1		Name of Bu The Coll	ilding Owner/Oper	ator (2)		A ()		
Agencies Notified Type N ☐ EPA ☐ Initia ☐ DOLWD ☐ Ame				Street Addre	ess nnington Rd.	-	- ANT 3 0	2018		
 ☑ DHSS Ame ☑ DCA 7/27/18 	ndment #]		=	City, State, Z Ewing, N	J 08628			(Triolle Và	<u> </u>	
, = =1110	rgency (indication)	cluding		Name of Con Amanda I			Telephone N 609-771-			****
N				FACILITY	INFORMATION	Ų	1717			
Name of Facility Where Abatemen TCNJ-Green Hall Street Address	t is Taking	Place (3)			Type of Facil				
2000 Pennington Rd. City (5)						homes, et	. Drivate and nome	-12) mercial bi	uildings	S,
Ewing						Square Feet	# of Floors	BI	dg. Ag	ρ.
County (6)			- 1-			66,000	2		og. ∧g: 88	-
MERCER			- 1	County Code	(7)(STATE USE ONL	Y) Current Use (I	Prior if being dem	olished)		
Name of Monitoring Firm Hired by B	uilding Ow	ner (8)	AS	CM No.	Name of Abate	ement Contractor (0)			
AET, Inc	.0		0	0021		ENVIRONMENT				
Street Address					Street Address		TE, INC.	- 8		*0
28 Pennell Rd						ER STREET		5		
City, State, Zip Code					City, State, Zip					
Media, PA 19063								8555		
Project Manager for Monitoring Firm		T	elenho	ne No.	BRISTOL, I	-A 19007	(#)			
Roy Mosicant				91-0114		10	License No.			
tart Date (10)7 /5 /18-		d Comp	letion	Date (11)	215-788-604 Name of OSHA	Monitor	00509			
		_ / _ :	37	/18	BRISTOL E	NVIRONMENTA	L, INC.			
ccupancy Status During Abatement	(Check or	ly one)			Street Address					
Facility Closed/Vacated During En	tire Period	of Abat	ement		1123 BEAVE	ER STREET				
Abatement Performed Outside of I	vormal Fac	cility Ho	urs - D	escribe	City, State, Zip. C					
cope of Work (Check all that apply)	PM/ <u>7:</u>	UUPM-	/:U <u>0</u> Al	VI	BRISTOL, P.					
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TO BE ABATED IN Facility (13)	Cu	faintena stodial (12)	ance/ Staff?	Asbes (i.e.,	tos Containing Ma thermal systems surfacing, VAT other miscellane	insulation,	Amount (Specify SF or LF)	Removal	Encapsulate	Eliciosure
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ne of Registered Waste Hauler RISTOL ENVIRONMENTAL, IN	C.		JDEP V	2002	Cubic Yards of Vaste	Name of Registe	red Landfill			
State			18706			FAIRLESS L	ANDFILL			
RISTOL, PA 19007					Disposal Date	City, State MORRISVII I	E, PA 19067			
pleted By (Print or Type)	Title ESTIMA	TOP			Signature	- ' / `	-E, PA 19067	9		
BS18041-58	LOTING	TIOK			I MA :- A	Scalino	11/1/1 -	-27	1131 3600	



Date of Notification (1)				Name of B	Building Owner/Oper	rator (2)					
6 / 1	/ _ 1	8		The Co	llege of New Jer	alor (2)	i.				H
Agencies Notified Tvr	oe Notification					sey	an AUS 3	0 2	013		
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⊠ DCA 7/1	3/18		l		NJ 08628		L. 1. T.				
(NJAC 5:23-8)	Emergency (in	ncluding		Name of Co	ontact		Tolont				
	ustification)		- 1	Amanda	Radosti		Telephone I		er		
					Y INFORMATION		609-771-	2881			
Name of Facility Where Abater	ment is Takin	Place	(3)	TAGILIT	INFORMATION			-			_
TCNJ-Green Hall		,	(0)			Type of Faci					
Street Address						School (F	(-12)				
2000 Pennington Rd.						Other (i.e.	er 8 (Other than k	(-12)			
City (5)						homes, e	" DUNATE and com	mercia	l buil	dings	s,
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County (6)				County Cod	le (7)(STATE USE ONL		2		88	3	
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Name of Monitoring Firm Hired I	by Building O	wner (8)	IAS	SCM No.	Nome of Al	1		*)			
AET, Inc		(5)	- 1	00021	Paris of Abate	ment Contractor	(9)			_	
Street Address				00021	BRISTOLE	NVIRONMENT	AL, INC.				
28 Pennell Rd				N.	Street Address		,				
City, State, Zip Code						ER STREET					
Media, PA 19063					City, State, Zip	Code					
					BRISTOL, F						
Project Manager for Monitoring F	irm	T	elepho	one No.	Telephone No.		111				
Roy Mosicant			610-8	891-0114	215-788-604	ın.	License No.			3. 2. 3	100
Start Date (10)	Schedul	ed Com	pletion	Date (11)	Name of OSHA		00509				
_7 / _5 / _18	7	1	31	/ _ 18			n Radio Samon				-
Occupancy Status During Abatem	ent (Chook -	nly				VVIRONMENTA	AL, INC.				
☐ Facility Closed/Vacated During	Entire Dania		avester to		Street Address						
Whatement Performed Outside	of Normal Ea	oille.	temen	I > "	1123 BEAVE	R STREET	¥				
		:00PM-	7.00A	Describe	City, State, Zip C						
JF-F- 66/21		.001-141-	1.00A	MVI	BRISTOL, PA						
Scope of Work (Check all that app	ly)										
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≥160 sf or ≥260 lf		Renova				JOSUTE	Sauve Flessure				
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IN Facility		Mainten: ustodial	Stoff?		., thermal systems i	insulation	Amount	Remova	Repair	Encapsulate	
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me of Registered Waste Hauler		N.	JDEP	Waste	Cubic Yards of	Nome of D					
BRISTOL ENVIRONMENTAL,	INC.	H	auler II	D No.	Waste	Name of Registe	ered Landfill				
, State			1870	6		FAIRLESS L	ANDFILL				
RISTOL, PA 19007					Disposal Date	City, State					_
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npleted By (Print or Type)	Title				Signature						
RIAN SCAFIRO	FOTIER	ATOR				D. f	Date	2, ,	_		-
Contract the contract of the c	LO 1119	MIUN			Grean Se	//	//	13/1			

MAY 11 B 5 18041 - 58 Do not use this form for asbestos licensure exempted activities.

NOTE: 7/13 - 4 PM - 2:30 AM! 7/14 - 1 PM - 11:20 PM: Man 11/16 Maran 1 horizon

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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

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	pe Notifi					lege of New Je	rsey						
NZ EDA	pe Notri Initial	cation			Street Addr								į.
The second secon	Amende	ed			2000 Pe	nnington Rd.							
	Amenda		Rev #	2-	City, State,	Zip Code							
IZI DCA 778	5/18		101.11	-		J 08628							
(NJAC 5:23-8)	Emerger	ncy (in	cluding	, t	Name of Co								
	justificati	ion)			Amanda	Radosti			Telephone	Numl	ber		-
									609-77	1-288	1		
Name of Facility Where Abate	ment is 7	Taking	Piace	(3)	PACILITY	Y INFORMATIO	N.						_
TCNJ-Green Hall	3			(0)				Type of Facil	ity (4)		-		
Street Address		-						School (K	-12)				
2000 Pennington Rd.								Other (i.e.	er 8 (Other than	K-12)			
City (5)							- 1	homes, et	o (Other than private and corc.)	mmerc	ial bu	ilding	s,
Ewing								Square Feet	# of Floors				
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MERCER					County Code	(7)(STATE USE ON	LY	Current Use (Prior if hairs		8	88	
	L D :							(1	ii being dei	molish	ed)		
Name of Monitoring Firm Hired AET, Inc	by Buildi	ng Ow	ner (8)	AS	CM No.	Name of Abat	emen	nt Contractor /	01				
The state of the s		G.		0	0021	BRISTO	ENV	RONMENT	61 10:-				
Street Address						Street Address		ORINIEN I	AL, INC.				
28 Pennell Rd						1123 BEAN		CTDE					
City, State, Zip Code													
Media, PA 19063						City, State, Zip						-	_
Project Manager for Monitoring F	irm		17	elepho	no Nie	BRISTOL,		9007					
Roy Mosicant			Ι.		91-0114	Telephone No.			License No.				_
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CCUpancy Statue During AL-L.	1 101							TO MENTER IN	L. INC				
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(NJAC 5:23-8)	Emergi justific	ency (includ	ing		, NJ 08628						
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	Joance	mation			Aman	da Radosti		Telephone	Nun	ber		
Nome of F- 111					FACIL	TY INFORMATIO	. —	609-77	1-288	31		
Name of Facility Where Abat	ement is	Takir	g Plac	e (3)		TT INFORMATIO						_
Torro-Green Hall				, ,			Type of F	acility (4)	_			
Street Address							School	1 (K 10)		0.5		
2000 Pennington Rd.							X Subch	antor o con	K-12			
City (5)							homes		mmer	/ cial h	uildin	
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County (6)									3	B	dg. A	an.
MERCER					County Co	ode (7)(STATE USE ONL	66,000			- 3	_	30
					, , ,	WASTATE USE ONL	7) Current Us	e (Prior if being der	moliel	(has		
Name of Monitoring Firm Hired	by Buil	ding O	wner /	8) [4	SCM No.		1		.01101	cuj		
ALI, 1110						Name of Abate	ment Contracto	or (9)				
Street Address					00021	BRISTOLE	NVIRONMEN	ON LATY			les test	
28 Pennell Rd						Street Address						
City, State, Zip Code							ER STREET					_
Media, PA 19063						City, State, Zip						
										_	_	_
Project Manager for Monitoring	Firm		1	Teleph	one No.	BRISTOL, P	A 19007					
Roy Mosicant			- 1		891-0114	Telephone No.	,	License No.				
Start Date (10)	Isc	hadel	2000	010-	051-0114	215-788-604		00509				
6 / 18 / 18	100	7	o Cor	npietior	Date (11)	Name of OSHA	Vionitor	00008				
Occupancy Status Dustra Atlanta	-		- ' -	19	/ _18	BRISTOL EN	VIRONMENT	TAI ILL				-
Occupancy Status During Abater	nent (Ch	neck of	nly one	2)		Street Address	- TOTAL IN	IAL, INC.				
☐ Facility Closed/Vacated During Abatement Performed Outside	g Entire	Period	of Ab	atemen	İ					_	_	_
Abatement Performed Outside Time of Abatement:	of Norn	nal Fa	cility H	ours - [Describe	1123 BEAVE	RSTREET					
	-	PW7:	00PN	-7:00A	M	City, State, Zip C						
cope of Work (Check all that app	olv)					BRISTOL, PA	19007					(3)
] ≥3 sf or ≥3 lf	37					12/23						
2 ≥160 sf or ≥260 lf		\boxtimes	Renov	ation		☐ Full Cont	ainment with N	egative Pressure				
			Demol	ition		⊠ Mini-Enc	osure	o-mio i ressure				
						⊠ Glovebag □ Non-Exer	Procedure					
Location of			Is Loc				inpled () and N	lon-Friable Procedu	ire			
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IN Facility		Cu	stodia	Staff?	(i.e	., mennai systems ir	Sulption	Amount	Remova	Repair	B	I I
(13)			(12			SURACING, VAT	or .	(Specify SF or LF)	lou	pair	cap	Cic
(10)		Yes	No	N/A	7	other miscellaneo	us)	OI OILF)	<u>a</u>	1.	Encapsulate	Enclosure
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ne of Registered Waste Hauler	INC.			JDEP V		Cubic Yards of	Name of Regist	iered Landfill				
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ne of Registered Waste Hauler RISTOL ENVIRONMENTAL,	INC.		□ N H	JDEP V	No.	Waste	FAIRLESS	ered Landfill LANDFILL				
ne of Registered Waste Hauler RISTOL ENVIRONMENTAL, State RISTOL, PA 19007	INC.		□ N H	JDEP V	No.	Waste	FAIRLESS Dity, State	LANDFILL				
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Pg. I

Date of Notification (1)	2/40						er / Operate	or (2)	4 1 15 11 15		1 to		113		
Agencies Notified Type					n Coa	at Fac	tory			1 124 114	more to			1.	
⊠ EPA	Notification		Street 1830			130	North								
DEP	Initial	010 (F10) F10			& Zip			1	10	30 0	gill bevo		10	1	
□ DOL □	Amended R#4-8/1				n NJ		5								
DOH DCA	Emergency Cancellation	10	Name <mark>Mike</mark>		ontact ods				14,58.		1	elenho	ne N	Jumb	oer
			FΔ	CILIT	TV INF	ORM	ATION		- 1		- 1	- 40			-
Name of Facility Where Al	patement is Taking I	Place (3	3)	OILII	1 1141		pe of Faci	lity (4)				-			
Burlington Coat Facto	ry Store #226	,	,			Iř	School (
Street Address						\neg \Box	Subcha	pter 8 (Other th	an K-12)					
2495 Route 1, Suite 1						\boxtimes			te & cor	mmercial I	building	s, hom	es,	etc.)	
City (E)	10 . (0)	- 10				_	uare Feet		# of Flo	oors	BI	dg. Ag	е		
City (5)	County (6)	Cot	unty (Code	(7)		500			_1			50		
Lawrenceville	Mercer						rrent Use	(Prior i	f being o	demolishe	d)				
Name of Monitoring Firm F	lired by Building Ow	/ner (8)		ASC	CM No		me of Aba	temen	Contra	ctor (9)					
ESIS						111	RISTOL E								
Street Address 436 Walnut Street							eet Addre	77.170							
City, State & Zip Code							23 BEAV								
Philadelphia, PA 19106							y, State & RISTOL, I								
Project Manager for Monito		Telep	hone	Numl	ber		ephone N		707	Lice	ense Nu	ımber	-		
Frank Westfall	97	215-6					5-788-60 ₄				31100 110	0050	9		
Scheduled Start Date (10) 7/24/18	Scheduled Co (Back on						me of OSI			ITAL INC					
Occupancy Status During	Abatement (Check of	nly one)				eet Addres		JINIELLI	INL INC			-		
	ated During Entire I					11	23 BEAV	ER ST	REET						
Abatement Perform	ned Outside of Norm	nal Hou	ırs — 7	7am to	o 3pm		y, State &								
Describe: (10:00	PM - 6:00 AM) Su	nday -	Thurs	sday		BF	RISTOL, F	PA 190	07						
Scope of Work (Check all t															
□ .o.f .o.f		_						\boxtimes	Full Cor	ntainment	with Ne	gative	Pres	sure	9
≥3 sf or ≥3 lf≥160 sf ≥260 lf		\bowtie		ovatio					Mini-End						
∑ 2100 SI 2200 II			Dem	olitio	n					ag Proced			_		
Location	of	Isl	ocatio	on		1	Description	n of	Non-Exe	empted ar	V 4-50 55	_			
Asbestos-Con	taining	Norm					estos-Con			Amo (Spe		Aba	tem	ent I	ype
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(13)		1	(12)				er miscella					ova	air	Encapsulate	Enclsoure
(Yes	No	N/A								-		ite	0
Rear Offices			\boxtimes				Mastic			512	SF		П	П	\Box
Break Room, Mens Roo			\boxtimes				Mastic			1,575	SF				
Ladies Room, Corridor	& Sales Floor		\boxtimes	Ц			Mastic			900	SF				
		H	닖	H											
		+++	H	H									Ц		
Name of Registered Waste	Hauler		N.IF)FP V	Vaste	Cubic	Yards	Name	of Regi	stered La	ndfill		Ш	Ц	Ш
			1	ıler ID		of Wa		Ivanic	or regi	stereu La	nann				
SERVICE TRANSPORT City, State	GROUP, INC.		209	990		40 C		-		HILLS LA	NDFIL	.L			
NEW CASTLE, DE 1972						Dispo TBD	sal Date	City, S MOR		LE, PA					
Completed By (Print or Typ	e)		Title	73)		Signa	ture	-				Date			
PATRICK T. DeCARO			Est	imat	or	1	atrick	L T	. DE	aco /-	pl	8/10/	8		
20022			1			74.				10					

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

Pg. 2

Aisle Way C-D @ Column 4 Aisle Way C-D @ Column 2 Aisle Way D-E @ Column 1-2 Vestibule G-H @ Column 2-5 Vestibule J & Cashwraps Name of Registered Waste Hauler SERVICE TRANSPORT GROUP, INC. City, State NEW CASTLE, DE 19720 Aisle Way C-D @ Column 4 Aisle Way C-D @ Column 2 Mastic Mastic Mastic Mastic Mastic Mastic Mastic Mastic Mastic Mostic Mo	Date of Notification (1)			Name	e of B	uilding	Owner / Operate	or (2)		
Agencies Notified SPA DEP Initial DEP	7/10/	18		Burl	ingto	on Co	at Factory	Oi (2)		
DEP		otification		Stree	t Add	ress				
DOL								A A	US an Ruis	H 331
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Burlington Coat Factory Store #226 School (K-12) Subchapter 8 (Other (han K-12) Subchapter 9 (Other (he. private & commercial buildings, homes, etc.)	Name of Facility Where Aba	tement is Taking F	Place (3	3)				lity (4)		
2495 Route 1, Suite 1		Store #226					School ((K-12)		
County (6) County (6) County Code (7) Square Feet # of Floors Bidg. Age 50							Subchar	oter 8 (Other th	nan K-12)	
City (5)	2495 Route 1, Suite 1									
Name of Monitoring Firm Hired by Building Owner (8)	City (5)	County (6)	10-		O!-	/7)		# of Flo	pors	ldg. Age
Name of Monitoring Firm Hired by Building Owner (8)		3 87 97	100	unty (Jode	(7)			1	50
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. SISTOL ENVIRONMENTAL INC	Lawrenceville	iviercer						(Prior if being	demolished)	
Street Address Street Address Street Address Street Address Street Address Street Address Street Address Street Address Street Address Street Address Street Address 1123 BEAVER STREET	Name of Monitoring Firm Him	ed by Building Ow	nor (8)		IAC	CM Ma		10 1		
436 Walnut Street	ESIS	ed by building Ow	ner (o)		AS	CIVI INO	BRISTOL E	NVIRONME	NTAL INC	- Ura
City, State & Zip Code Philadelphia, PA 19106 Project Manager for Monitoring Firm Telephone Number 215-640-5320 Telephone Number 215-640-5320 Telephone Number 215-640-5320 Telephone Number 215-788-6040 O0509	436 Walnut Street									
Project Manager for Monitoring Firm							City, State &	Zip Code		
Scheduled Start Date (10)		- F:	I= .							
Scheduled Start Date (10) Scheduled Completion Date (11) (Back on site 8/19)/18) 9/28/18 Name of OSHA Monitor BRISTOL ENVIRONMENTAL INC	Frank Westfall	ng Firm				ber			License N	
Score of Work (Check all that apply) Score of Work (C		Scheduled Co.				1				00509
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Scope of Work (Check all that apply) ≥3 sf or ≥3 lf ≥160 sf ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) Receiving Area Aisle Way C-D @ Column 4 Aisle Way C-D @ Column 1-2 Aisle Way D-E @ Column 1-2 Vestibule G-H @ Column 2-5 Name of Registered Waste Hauler Name of Registered Waste Hauler Name of Registered Waste Hauler Name of Registered By (Print or Type) Title	7/24/18	(Back on	site 8/	19/1	B) 9/2) 28/18			NTAL INC	
Abatement Performed Outside of Normal Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Scope of Work (Check all that apply) ≥3 sf or ≥3 lf	Occupancy Status During Ab	atement (Check o	nly one	e)						
Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Scope of Work (Check all that apply) Saf or ≥3 If Renovation Demolition Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) Receiving Area Aisle Way C-D @ Column 4 Aisle Way C-D @ Column 1-2 Aisle Way D-E @ Column 1-2 Aisle Way D-E @ Column 2-5 Aisle Way D-E @ Column 2-5 Vestibule G-H @ Column 2-5 Name of Registered Waste Hauler Name of Registered Waste Hauler NEW CASTLE, DE 19720 Renovation Demolition ARenovation Demolition Description of Mini-Enclosure Glove Bag Procedures Non-Exempted and Non-Friable Procedure Abatement Type Abatement Type (Specify (Specify (Specify (I.e., thernal systems insulation, surfacing, VAT or other miscellaneous) Aisle Way C-D @ Column 4 Aisle Way D-E @ Column 2-5 Aisle Way D-E @ Column 2-5 Aisle Way D-E @ Column 2-5 Aisle Wastic Aisle Wastic Aisle Waste Hauler NAME CLUBIC Yards of Wastic Aisle Waste Cashwraps NAME CLUBIC Yards of Wastic Aisle Clubic Yards of Wastic Aisle Clubic Yards of Waste Clubic Yards of Wastic Aisle Clubic Yards of Waste Clubic Yards of Wastic Aisle Waste CASTLE, DE 19720 Completed By (Print or Type) Disposal Date Title Signature Full Containment with Negative Pressure Mini-Enclosure Glove Bag Procedures Non-Exempted and Non-Friable Procedure Mini-Enclosure Masteral (ACM) Abatement Type Full Containnent with Non-Exempted Mini-Enclosure Mini-Enclosure Mini-Enclosu										
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≥160 sf ≥260 lf	>3 sf or >3 lf			Don	n					gative Pressure
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Completed By (Print or Type)									IE DA	
PATRICK T. DeCARO Estimator Signature 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Title			Signature			Dete
Jacreek is the care of	PATRICK T. DeCARO					or	Patrick	J. 19	"Caro /fl	8/10/18

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

Pg.1

Date of Notification	(1)	-		Mai	ma (of Buildin	na Oı	wner / Opera	4 (0)	11-	C D	And the same of th				
	7/10/18			Bu	rlin	aton C	oat F	Factory	itor (2)	HUJ	E C		W		77	
Agencies Notified	Type Notific	ation		Stre	eet A	Address				1/11/		The state of the s	U II	3 11	111	
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Name of Facility Wh	nere Abateme	ent is Taking	Place	(3)	,,,,,			Type of Fac	cility (4)					ATTA CONTRACTOR AND ADDRESS OF	- 1	
Burlington Coat	Factory Sto	ore #226						School	(K-12)							
2495 Route 1, Su	14 m of							Subcha	apter 8	(Other th	nan K-	12)				
2455 Route 1, Su	ite 1							Other (i.e. priv	rate & co	mmer	cial buildir			, etc.))
City (5)		County (6)	10	Count	, Co	de (7)		Square Fee	et	# of Fl	oors		Bldg. A	ge		
Lawrenceville		Mercer		Journey	y C0	de (7)		72500	/Dries	ifhaina	1			5	0	
		mercer						Current Use Retail	(Prior	if being	demoli	shed)				
Name of Monitoring	Firm Hired b	y Building Ow	vner (8)	7	ASCM N		Name of Ab	atemer	nt Contra	ctor (9	1)	-			
ESIS			•					BRISTOL	ENVIR	ONME	NTAL	INC				
Street Address 436 Walnut Street	4							Street Addre	ess						70.2	
City, State & Zip Coo	the same and the s			100-100				1123 BEAN	VER S	TREET	<u></u>					
Philadelphia, PA	19106							City, State & BRISTOL,	2 IP U	nn7						
Project Manager for	Monitoring F	irm	Tele	phon	e N	umber		Telephone N	Number			License N	lumba			
Frank Westfall	(40)			-640				215-788-60)40			2,00,100 1	005			
Scheduled Start Date 7/24/18	e (10)	Scheduled Co (Back on						Name of OS								
Occupancy Status D	uring Abatem	ent (Check o	only or	ne)	10)	0/20/10	_	BRISTOL I Street Addre		ONME	ITAL	INC				
Facility Close	ed/Vacated D	uring Entire F	Period	of Al	bate	ment	1.	1123 BEAV		TREET						
Abatement P	erformed Ou	tside of Norm	nal Ho	ours -	- 7ar	m to 3pr		City, State &								
Describe:	(10:00 PM –	6:00 AM) Su	nday	- Thu	ırsd	ay	l	BRISTOL,	PA 19	007						
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	(13)		Cusi	odial (12)	Stat	1?	or	lation, surfaction	cing, V	AT			Remova	Repair	Encapsulate	Enclsoure
			Yes	No	N/	'A			ui icou	,			m		ate	6
Rear Offices					TE			Mastic	;		- 5	12 SF		П		
Break Room, Mens	s Room & (Corridor						Mastic	:		7.7	575 SF		H	H	H
Ladies Room, Cor	ridor & Sale	es Floor			I			Mastic				00 SF		H	Ħ	Ħ
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Name of Registered V	Vaste Hauler			INJ	J L JDEF	J ∣ ⊃ Waste	e Cut	oic Yards	Name	of Regi	storod	Londfil				
				На	auler	ID No.	of V	Vaste								
SERVICE TRANSP City, State	UKI GROL	JP, INC.		20	990)		Cu Yd			IILLS	LANDFI	LL			
NEW CASTLE, DE	19720						Disp	posal Date	City,							
Completed By (Print o				Tit	le				IVIOR	RISVIL	LE, P	٩.	-			
PATRICK T. DeCA	RO			12223		ator		nature	0	10.00	1		Date	40		
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PD 18055											0					

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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) F F F F 2

Date of Notification	(1)			Na	me	of Build	ina C	Owner / Opera	tor (2)			- 111	111			
	7/10/18			Bu	rlin	gton C	Coat	Factory		115	0010					
Agencies Notified	Type Notific	ation		Str	eet.	Address	3	113 1	11 P	UO 3 (1 2018	Local	1			
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Nome of Facility MA	A1 1			F	AC	ILITY I	NFC	RMATION								
Name of Facility Will Burlington Coat	nere Abatem	ent is Taking	Place	e (3)				Type of Fac								
Street Address	ractory St	ore #226						School								
2495 Route 1, Su	ito 1							Subcha	apter 8 (Other tha	an K-12)					
2-100 Noute 1, 5u	ite i							Other (i	i.e. priva	ate & con	nmercial				etc.)	
City (5)		County (6)	17	Count		d- (7)		Square Fee	t	# of Floo	ors	E	Bldg. Ag	ge		
Lawrenceville		Mercer	- [County	/ ((ode (7)		72500			1			50	1	
Lawrenceville		wercer	- 1					Current Use	(Prior i	f being d	emolishe	d)				
Name of Monitoring	Firm Hired h	v Building Ou	/DOT/	(0)	_	10014	\.	Retail								
ESIS	i iiiii i iii ed b	y building Ow	mei ((0)		ASCM	NO.	Name of Ab	atemen	t Contrac	tor (9)	_				
Street Address								BRISTOL I Street Addre		ONMEN	IAL IN	3				
436 Walnut Stree	t							1123 BEAV		PEET						
City, State & Zip Co.								City, State &				-			_	-
Philadelphia, PA								BRISTOL,								
Project Manager for	Monitoring F	irm				umber		Telephone N			Lice	ense N	umber			
Frank Westfall	(10)			5-640				215-788-60	12072				0050	9		
Scheduled Start Date 7/24/18	e (10)	Scheduled Co	mple	tion D	ate	(11)		Name of OS	HA Mon	itor						
	in = 0 - 1	(Back in	site	8/12/	18)	8/20/18	3	BRISTOL E		DNMEN.	TAL INC	;				
Occupancy Status D	uring Abaten ed/Vacated F	nent (Check o During Entire F	only o	ne)	2010	mont		Street Addre							7721	
Abatement P	erformed Or	itside of Norm	ol L	u UI AI	Jale	m to 2-		1123 BEAV								
Describe:	(10:00 PM -	6:00 AM)	iai II	ours -	- /a	ш ю зр	m	City, State &								
Facility Occu								BRISTOL, I	PA 190	07						
Scope of Work (Che	ck all that ap	ply)			-											
	•88									Full Cont	ainment	with Na	anativo	Dro	0	
≥3 sf or ≥3 lf			\boxtimes	Re	nov	ration			i i	Mini-Encl	osure	*******	gauve	1 16	Suic	Š.
≥160 sf ≥260	lf			De	mol	ition				Glove Ba		lures				
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	Facility		Cus	todial	Sta	ff?	insi	ulation, surfac	cing, VA	т			Remova	Repair	cap	ncls
	(13)		.,	(12)			or	other miscell	aneous))			oval	==	Encapsulate	Enclsoure
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EW CASTLE, DE	19720							sposal Date	City, S		E D.					
ompleted By (Print of				Tit	lo				INIOK	RISVILL	E, PA					
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D 18055					-		1	www.common			//					

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

Date of Notification (1)		Non	f D. 11-1				1 lln ll2	11 W			
7/10	/18	Burl	e of Build ington C	ing Own	er / Opera	ator (2)	**************************************		-	1	
Agencies Notified Type N	Votification	Stree	t Address	Catia	ctory	H	77.110			3	
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DEP 🛛	Initial	City,	State & Z			1 1			\$ wad	1	
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		FA	CILITY I	NFORM	ATION						
Name of Facility Where Ab	atement is Taking F	Place (3)			pe of Fa	cility (4)					
Burlington Coat Factor	y Store #226	252 - 653		IĆ	Schoo	I (K-12)	20				
Street Address	8				Subch	apter 8 (Ot	her than K-	12)			
2495 Route 1, Suite 1					Other ((i.e. private	& commerce	cial buildi	ngs, hon	nes. e	tc.)
City (5)	10 1 (0)			So	uare Fee	et #	of Floors		Bldg. Ag	ie	,
Lawrenceville	County (6)	County (Code (7)		500		1		0 0	50	
Lawrenceville	Mercer			Cu	irrent Use	e (Prior if b	eing demoli	shed)			
Name of Monitoring Firm Ui	rad b. D. ii ii . O				etail						
Name of Monitoring Firm Hill ESIS	ed by Building Owr	ner (8)	ASCM N		me of Ab	atement C	ontractor (9)			
Street Address				BF	RISTOL	ENVIRON	MENTAL	INC			
436 Walnut Street					eet Addre					Service III	
City, State & Zip Code				Cit	V State 8	VER STR	EEI				
Philadelphia, PA 19106				BR	RISTOL	PA 19007	7				
Project Manager for Monitori	ng Firm	Telephone	Number		ephone N			License N	Jumph		
Frank Westfall		215-640-5			5-788-60			License i	oumber 0050	0	
Scheduled Start Date (10)	Scheduled Con		(11)	Nar	me of OS	HA Monito	r		0030	5	
7/24/18	(ON HOLD		BR	ISTOL E	ENVIRON	MENTAL	INC			
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Abatement Performe	d Outside of Norma	eriod of Abat	tement	112	23 BEAV	ER STRE	EET				
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Facility Occupied Du	ring Abatement	uay - Inurs	day	BR	ISTOL,	PA 19007					
Scope of Work (Check all that	it apply)							iii.			
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ATRICK T. DeCARO	*		nator	Signatu			0 -	I th	Date		
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Pg2

Date of Notification (1)		Name	of Duild	n= 0			S IS I W	BEN	J		
7/10/18		Burli	naton C	ng Owner / O	perator (2	()	123	174	13		
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	ergency ncellation		of Conta	ct			OS CONTROL. ICEKSING	Telep	hone	Num	ber
			Woods		-	- mar mark	Control Control 2	Τ.			
Name of Facility Where Abaten	nent is Taking Place	FAC	CILITY II	NFORMATIC							
Burlington Coat Factory St	ore #226	= (3)		Type of	Facility (4 nool (K-12)					
Street Address							than K-12)				
2495 Route 1, Suite 1				⊠ Oth	er (i.e. pri	vate & c	ommercial build	linas ba			
				Square	Feet	# of F	loore			etc.)	
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Lawrenceville	Mercer				Use (Prior	if being	demolished)		50)	
				Retail			demonstred)				
Name of Monitoring Firm Hired I	by Building Owner ((8)	ASCM N	A STATE OF THE PARTY OF THE PAR	Abateme	nt Contr	actor (9)				_
Street Address				BRIST	OL ENVIR	RONME	NTAL INC				
436 Walnut Street				Street A		TDEE	-				
City, State & Zip Code					EAVER S te & Zip C						
Philadelphia, PA 19106)L, PA 19						
Project Manager for Monitoring F Frank Westfall		ephone N			ne Numbe		License	Number			-
		5-640-53		215-788				005			
7/24/18	Scheduled Complet	tion Date NOLD	(11)	Name of	OSHA Mo	nitor					_
Occupancy Status During Abater	ment (Check only o	ne)		Street Ac		ONME	NTAL INC				
	During Entire Period	d of Abate	ement	1123 RF	EAVER S	TREET					
Abatement Performed O	utside of Normal H	ours – 7a	am to 3pn	City, Stat	e & Zip Co	ode					
Describe: (10:00 PM -	6:00 AM)				L, PA 19						
Facility Occupied During Scope of Work (Check all that ap	Abatement						2 00000				
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Location of Asbestos-Containing		Location		Descrip			Amount		ateme		
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TO BE ABATED		ntenance	or	(i.e., therm	al systems		SF or LF)	72		E	m
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(13)	Yes	(12) No N	I/A	or other mis	cellaneou	s)		Removal	air	Encapsulate	Enclsoure
Receiving Area	163		7							te	
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ompleted By (Print or Type)		Title		Signature	INIOR	KISVIL	LE, PA				
ATRICK T. DeCARO		Estim	nator	2.		, Oll	1.0	Date			
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D 18055							/				1

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) 7/10/18 Burlington Coat Factory Agencies Notified Type Notification Street Address \bowtie EPA 1830 US Route 130 North DEP Initial City, State & Zip Code X DOL X Amended R#1-7/20/18 Burlington NJ 08016 \boxtimes DOH Emergency Name of Contact DCA Cancellation Telephone Number Mike Woods FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Burlington Coat Factory Store #226 School (K-12) Street Address Subchapter 8 (Other than K-12) 2495 Route 1, Suite 1 Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 72500 Lawrenceville 50 Mercer Current Use (Prior if being demolished) Name of Monitoring Firm Hired by Building Owner (8) ASCM No Name of Abatement Contractor (9) **ESIS** BRISTOL ENVIRONMENTAL INC Street Address Street Address 436 Walnut Street 1123 BEAVER STREET City, State & Zip Code City, State & Zip Code Philadelphia, PA 19106 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone Number Telephone Number Frank Westfall License Number 215-640-5320 215-788-6040 Scheduled Start Date (10) 00509 Scheduled Completion Date (11) Name of OSHA Monitor 7/24/18 8/20/18 BRISTOL ENVIRONMENTAL INC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Hours - 7am to 3pm X City, State & Zip Code Describe: (10:00 PM - 6:00 AM) Sunday - Thursday BRISTOL, PA 19007 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf ≥260 lf Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Asbestos-Containing Abatement Type Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) TO BE ABATED Maintenance or Encapsulate (i.e., thermal systems Removal Encisoure in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A Rear Offices Mastic Break Room, Mens Room & Corridor 512 SF Mastic 1,575 SF Ladies Room, Corridor & Sales Floor Mastic 900 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste SERVICE TRANSPORT GROUP, INC. 20990 40 Cu Yd FAIRLESS HILLS LANDFILL City, State Disposal Date City, State NEW CASTLE, DE 19720 TBD MORRISVILLE, PA Completed By (Print or Type) Title PATRICK T. DeCARO

Estimator

Patrick J. Delaw/if

Date

7/20/18

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

Pg 2

Date of Notification	(1)			N	ama	of Dui	lalina C		44	G P	61	CL#	-34	06		
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DEP		nitial		Ci	ty, St	ate &	Zip Co	ode	111	NUU	30.2	NIQ 1				
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Ø DOH		mergency		Na	me o	of Con	tact		<i>(</i> -).	SBES TOS	TYPE	Dru D	1	4.5		
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Name of Facility Wh	ere Abat	ement is Takir	g Place	e (3)				Type of F		(4)						
Burlington Coat F Street Address	actory	Store #226						Scho	ol (K-	12)	9					
2495 Route 1, Suit	6- 4							Subc	hapte	8 (Other	than K	-12)				
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Lawrenceville		Mercer	1	Jount	ty Co	de (7)		72500			1		3	5	n	
-attronoctine		wercer	1	2.7				Current Us	se (Pr	or if being	g demo	lished)			0	
Name of Monitoring F	irm Hire	d by Building (Dunna (0)	- 1			Retail								
ESIS		a by building (owner (0)	1	ASCM	No.	Name of A	baten	nent Cont	ractor (9)				_
Street Address								BRISTOL Street Add	. ENV	IRONMI	ENTAL	. INC				
436 Walnut Street								1123 BEA		etdee:	~					8,00
City, State & Zip Code							\neg	City, State	& Zin	Code	1					
Philadelphia, PA 19	9106							BRISTOL	. PA	19007						- 5
Project Manager for M Frank Westfall	ionitoring	g Firm	Tele	ephor	ne Nu	mber		Telephone	Numb	er		License	Nimaka			
Scheduled Start Date	(10)	Cabadd 1.0	215	-640	-532	0		215-788-6		-0.00		LICCIISE	005			
7/24/18	(10)	Scheduled C	omplet ere	ion D 0/18	ate (11)		Name of O	SHA	lonitor				-		_
Occupancy Status Dur	ing Abat	ement (Check	only or	100				BRISTOL	ENV	RONME	NTAL	INC				
☐ Facility Closed	/Vacated	During Entire	Period	of Al	bater	nent	1.	Street Addr 1123 BEA		CTDEET						
Abatement Per	rformed (Outside of Nor	mal Ho	ours -	- 7am	to 3p	m to	City, State 8	R Zin	Code					- 1 - 10	
Describe: (1	0:00 PM	- 6:00 AM)				•		BRISTOL,	PA 1	9007						
Facility Occupi	ed Durin	g Abatement						,		5001						
Scope of Work (Check	all that a	apply)														
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ATRICK T. DeCARO					imat	or	J.	7, 1	0	٠٥	1		Date	28		
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18055				-	277						17	0				

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NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) Name of Building Owner / Operator (2) Street Address	VIO CIC		(Pur	suant t	to N.J.A	C. 8:60	and 12:1	120)	. 1	レガ	L,	e u	מ'
Agencies Notified Type Notification Street Address 1830 US Route 130 North AUC Aug	1		·				1				<u>ر</u> تاریخ	77	
Separation Street Address Street A				Burlin	or Building	af Factor	perator (2)		La II	WE	11	W	-
DEP S DOL-\$575		e Notification		Street	Address	at ractory							
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DOL1935 Amended Burlington NJ 08016 Name of Contact Mike Woods Telephone Number of Contact Mike Woods Telephone Number of Contact Mike Woods Telephone Number of Contact Mike Woods Telephone Number of Contact Mike Woods Telephone Number of Contact Mike Woods Telephone Number of Contact Mike Woods Telephone Number of Contact Mike Woods Telephone Number of Contact Mike Woods Telephone Number of Contact Mike Woods Telephone Number of Contact Mike Woods Telephone Number of Nontitroing Firm Hired by Building Owner (6) ASCM No. Name of Monitoring Firm Hired by Building Owner (6) ASCM No. Name of Monitoring Firm Hired by Building Owner (6) ASCM No. Name of Abstement Contractor (9) Retail Street Address Street Address Telephone Number T		(S) (A) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C		City, St	ate & Zin	Code	16 16	AU(-	3 0 20	418	111	11	
Name of Facility Where Abatement is Taking Place (3)		Amended		Burlin	aton N I	0006					-	-	_
DCA		Emergency		Name	of Contact	00016	t	1			1		
Name of Fedility Where Abstement is Taking Place (3) Burlington Coat Factory Store #226 Street Address 2495 Route 1, Suite 1 City (6) Lawrenceville County (6) Mercer County Code (7) City (7) Lawrenceville Name of Monitoring Firm Hired by Building Owner (8) Street Address 2436 Walnut Street 2436 Walnut Street City, State & 21p Code Philadelphia, PA 19106 Price of Philadelphia, PA 19106 Price of Retail Scheduled Staff Date (10) Scheduled Staff Date (10) Scheduled Staff Date (10) Facility Colosed/Vacated During Entire Period of Abstement Abstement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abstement (Check only one) Scheduled Staff During Abstement (Check only one) Pacility Occupied During Abstement (Check only one) Service: (10:00 PM – 6:00 AM) Facility Occupied During Abstement (Described on Normality Used Soley by Maintenance or (10:00 PM – 6:00 AM) Facility Occupied During Abstement (Described on Normality Used Soley by Maintenance or (10:00 PM – 6:00 AM) Sales Floor Mastic Abstement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abstement (Described of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abstement (Described of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abstement (Described on Maintenance or (In Pacility Occupied During Abstement (Described Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abstement (Described Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abstement (Described Outside Staff) Abstetice-Containing Material (ACM) Facility Occupied Material (ACM) Facility Occupied During Abstement (Described Outside Staff) Facility Occupied Staff (ACM) Facility Occupied Staff (ACM) Facility Occupied Staff (ACM) Facility Occupied Staff (ACM) Facility Occupied Staff (ACM) Facility Occupied Staff (ACM)	□ DCA □	Cancellation					1	Hodberry	SUMM	To	lonha		
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Burlington Coat Factory Store #228 Shoel (K-f.2) Shoel (Name of Facility Ma			FAC	LITY INF	ORMATIC)AI			i			
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Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL INC Street Address Street	Carrelle	Mercer					Ise (Prior if	hoine !				50	
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Street Address Stre	TO10		(0	, I	OCIVI 140.	Name of	Abatement	Contractor	(9)		-	-	
State Stat						IDKISTU	L ENVIRO	NMENTA	LINC				
Philadelphia, PA 19106 City, State & Zip Code BRISTOL, PA 19007 Teach Westfall 215-640-5320 Scheduled Start Date (10) 3/12/418 Decupancy Status During Abatement (Check only one) 4/26-788-6040 Facility Closed/Acated During Entire Period of Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Dependition Demolition Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Dependition Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Dependition Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Dependition Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Dependition Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Dependition Abatement Performed Outside of Normal Hours – 7am to 3pm Describe Address Since Normal Mini-Enclosure Full Containment with Negative Pressure Mini-Enclosure Normally Used Solely by Maintenance or Custodial Staff? (12)	436 Walnut Street					Street Ad	dress						100
City, State & Zip Code BRISTOL, PA 19106 Croject Manager for Monitoring Firm Telephone Number 215-640-5320 Telephone Number 215-640-5320 Telephone Number 215-640-5320 Telephone Number 215-640-5320 Telephone Number 215-640-5320 Telephone Number 215-788-6040 Name of OSHA Monitor BRISTOL ENVIRONMENTAL INC Street Address Treactify Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Dependent Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Telephone Number 215-640-5320 Telephone Number 215-788-6040 Name of OSHA Monitor BRISTOL ENVIRONMENTAL INC Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET City, State & Zip Code BRISTOL, PA 19007 Telephone Number 215-640-5320 Street Address 1123 BEAVER STREET Cit	City, State & Zip Code					1123 BE	AVER STR	REET				*	
Telephone Number 215-640-5320 215-688-6040 00509 Trank Westfall 2100 Scheduled Completion Date (1) 8/20/18 38	Philadelphia, PA 19106					City, State	e & Zip Code	9					
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Scheduled Start Date (10) 7/24/18 Scheduled Completion Date (11) 8/20/18 8/20/18 Scheduled Completion Date (11) 8/20/18 BRISTOL ENVIRONMENTAL INC Street Address 1/23 BEAVER STREET Abatement Performed Outside of Normal Hours – 7am to 3pm Describe: (10:00 PM – 6:00 AM) Facility Occupied During Abatement Cope of Work (Check all that apply) 23 sf or ≥3 if	rank Westfall	ing ritiii	lelep	phone Nur	nber	Telephone	Number		li :				
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		(F	ursuant	t to NJAC	8:60 and	12:120))	September 2	100)	E	C	FI	1/	F	2
Date of Notification (1) 08/28/2018			Name of The C	of Building (Chemours	Owner/O s Comp	perator any	(2)	tre trive and dille	뷞	14	<u>5</u>	5_1		<u>IC</u>	1
Agencies Notified Ty	pe Notification			Address Market S	Street		Cera Dia	of Control	1	A	UG	3 0	201	3	Annual Control
DEP × DOL	Initial Amended Amendment # Emergency (inclu	uding	Wilmi	ate, Zip Co ngton, DI		9				ASBE	STO	S CO	NTA	SL &	Learning T.
DOH DCA	justification) Cancellation		Name of	of Contact acev				L	<u>-</u> Те	lephon	ie Wu	nber	* (4	esetrium.	NAMES OF STREET
				ILITY INFO	DRMATIC	DN							.,-		
Name of Facility Where Abar Chemours Chamber W	tement is Taking Pla Vorks Facility - A	ace (3) A&B Build	ing - 1	52/788			Туре	e of Facility (School (K-1	12)						
Street Address Canal Road							×	Subchapter Other (i.e. petc.)	8 (Oth private	er than & com	n K-12 merci	2) al buil	dings	hom	es,
City (5) Deepwater							Squa 29,2	are Feet	2	f Floor	S		ildg. A	ge	
County (6) Salem				Code (7) USE ONLY)		_	Curr	ent Use (Pri emical Pla	or if be	ing der	molish	ed)			
Name of Monitoring Firm Hire Harvard Environmenta		er (8)	ASCN	M No.				atement Cor ourg Indus			e Co	mpa	ny		
Street Address 760 Pulaski Highway						Street A		ess Iman Driv	e						
City, State, Zip Code Bear, DE 19701								Zip Code n, PA 180	15						
Project Manager for Monitoria JT Morrison	ng Firm		Telepho 302-32	ne No. 26-2333		Telepho	one N	lo.		Licer 0072	nse N	D.			
Start Date (10) 09/11/2018	Scho 10/	eduled Con 12/2018	npletion	Date (11)		Name o		HA Monitor							1100001000
Occupancy Status During Ab	atement (Check Onl	ly One)			- 1	Street A		<u> </u>							
Facility Closed/Vacated Abatement Performed C Other – Describe: DEM	outside of Normal Fa	acility Hours	1	itive Method	H	City, Sta	ate, Z	Iman Drive Zip Code m PA 180							
Scope of Work (Check All Th	at Apply)					Dounk	51101	111 A 100	10						
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		Is Locati	on				2,632						Abate	ment	
Location of Asbestos-Containing Mate	orial (ACAA)	Normall Used Sole	-			ription o							Ту	pe	
TO BE ABATEI In Facility (13)	2	Maintenar Custodial S (12)	nce/ staff?	(i.e. t	os Contai hermal s surfacir other mis	ystems ng, VAT	insula , or	ation,	(8	mount Specify or LF		Removal	Repair	Encapsulate	Enclosure
Roof	Ye	es No	N/A				0.0000000000000000000000000000000000000							CD	
Roof			X	K	Roofing			9		16 SF		X			
Exterior Sheeti	ing		X			Flashi				25 LF	500101513	X			
Exterior offeet	19		^		Gall	bestos	,		259	905 S	Γ	X			
Name of Registered Waste Ha	auler	I N	JDEP W	aste	Cubic Ya	ards		Name of F	Penieto	red La	ndfill				
Brandenburg Industrial S		Ha	auler ID I 838	No.	of Waste			Chemou			iunii				
City, State Bethlehem, PA					Disposal 9/11/18	Date 3-10/16	6/18	City, State Deepwa		J					
Completed by Stephen Carne	Tit Er	^{tle} nvironme	ntal Ma	anager	Sign	nature		(here	Comp.		Dat 08/	e 28/2	018		



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Date of Notification (1)					Name	of Building	Owr	ner/Operator ((2)		1137)	**********		# 1	1.3	
	28 /	18			Mul	nlenberg	Urb	an Renewal	, LLC		1 11 1	AUG :	2 7	1 00	770	No.
Agencies Notified	Type Notific	ation			Street	Address				20	-		Li,		46	- Control
⊠ EPA	☐ Initial	62			2 B	road Stre	et, S	Suite 400								Pik. er
☑ DOLWD ☐			1		City, S	tate, Zip C	ode				1 10 7 1 1 1	arus Licei	U	MTI	701.	2.7
□ DCA	☐ Emerger				Blo	omfield,	NJ 0	7003				-15-251		NG.		
(NJAC 5:23-8)	justificat	ion)	•			of Contact					Telephone N	lumber		9.		
	Cancella	ation			Wai	ren Spra	ke									
					FAC	ILITY IN	FOR	MATION								
Name of Facility Where Al	batement is	Taking	Place	(3)					(5/2)	of Facility (4	1)					
Commercial										chool (K-12)	(Other than K	(12)				
Street Address		_									vate and com		bu	ilding	S,	
1200 Randolph Roa	d- Building	g 7								omes, etc.)						
City (5) Plainfield									Squa	re Feet	# of Floors		Blo	dg. Ag	ge	
- 14111110114					10		/O.T.				<u> </u>					
County (6) Union					Coun	ty Code (/)	(SIA	TE USE ONLY)	Curre	ent Use (Prio	r if being dem	nolished	i)			
Name of Monitoring Firm I	Hirad by Bui	Idina C	Jumor /	0)	ASCM	No	Mon	as of Abotema		ntrantos (O)			_			
Bio Terra Solutions	i ilieu by bui	iuii ig C	JWITEI (0)	ASCIVI	NO.		ne of Abateme			_					
Street Address								et Address	INAGI	CIVIEIVI LL	<u> </u>					
P.O. Box 1224							1000000	7 Outwater	lane							
City, State, Zip Code							- 22	, State, Zip Co	THE RESERVE					-		1//0
Union, NJ								arfield, NJ		6						
Project Manager for Monit	oring Firm			Tele	phone	No.		phone No.			License No).				
Rick Eustaquio	2010			97	3-494	3762		73-928-4888	3		1188					
Start Date (10)		Sched	luled C	omple	tion Da	e (11)	Nan	ne of OSHA M	onitor						-10-1	
07 /30 / _	18	_ 0	9_ /	30	_ / _	18	Α	LL PRO MA	NAGI	EMENT LL	С					
Occupancy Status During	Abatement	(Check	c only o	ne)			Stre	et Address								
☐ Facility Closed/Vacated							2	7 Outwater I	Lane							
Abatement Performed Time of Abatement:	Outside of N AM	lormal PN	Facility //	Hour PM-	s - Des	cribe AM	-	, State, Zip Co								
Scope of Work (Check all	that apply)		081185				G	arfield, NJ	0/026	0			1111			
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	,,,,		⊠ Re □ De	novati molitic				☐ Mini-Enc☑ Glovebag	losure g Proc	edure	tive Pressure					
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IN Facility	y		Cust	odial (12)	Staff?	(a. N. 1971)	s	urfacing, VAT	, or		SF or LF)		Va	7	lusc	sure
(13)			Yes	No	N/A		oth	er miscellane	ous)						ate	
Basement						Pine Inc	ulat	ion- Wrap a	and C	ut	400 LF	-	\boxtimes			
201-1-10-10		-	_						and O	-		_	_			
Basement						Elbow I	nsul	ation			18 Elbow	s	X	Ш		Ш
												[
												1	7	П	П	П
Name of Registered Waste	e Hauler				JDEP V	Vaste	Cub	ic Yards of	Nar	me of Registe	ered Landfill	1,				
ATC/ Century Waste	, LLC				auler II SW-243	No. 10/32797	Was	ste s Needed	Mir	nerva Enterp irless Landf	orises/GROV	VS Nor	th L	and	fill/	
City, State Shirley, NY/ Elizabet	th N I			U			Disp	oosal Date		, State	a OU/ Ma	rievill-	-	۸		
CONTRACTOR OF THE TRACTOR OF THE TRA	THE ROLL STORY	1					11		V	vayilesbur	g, OH/ Mori		, ۲	A		
Completed By (Print or Tyl Allen Monchik	pe)	Title	: roject	Man	2005			Signature	- ,			Date				
200 11			oject	widil	ayer			Allen	Mo.	nchik		08/2	28/	18		



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Date of Notification (1)				Name	of Buildin	g Ow	ner/Operator (2)	1 11-1 5-5		10		Ti
/	18			Mu	hlenberg	Urb	oan Renewal	, LLC		54.3			
Agencies Notified Type Notified	ation			Street	Address				Alto	302	Aio		
Image: Second of the property o	d			2 B	road Stre	eet,	Suite 400	ž.		UUL	UIO	11	1
☑ DOH Amenda				City, S	State, Zip (Code)		1 (6)		24.0	1	
□ DCA □ Emergel		lina		Blo	omfield,	NJ (07003				ROL	rle	
(NJAC 5:23-8) justificat		5		Name	of Contac	t			Telephone N				
☐ Cancella	ition			Wa	rren Spra	ake			908-670-	5711			
				FA	CILITY IN	IFOF	RMATION	*					
Name of Facility Where Abatement is	Taking Pl	ace (3)					Type of Facility	(4)				
Commercial								School (K-12					
Street Address								☐ Subchapter 8 ☐ Other (i.e., pr	3 (Other than K	(-12) marcial l	wilding	10	
1200 Randolph Road- Building	7							homes, etc.)		irricroiari	, and n	,,,	
City (5)								Square Feet	# of Floors	E	Bldg. A	ge	
Plainfield													
County (6) Union				Cour	nty Code (7)(STA	TE USE ONLY)	Current Use (Pri	or if being den	nolished)			
Name of Monitoring Firm Hired by Buil	dina Oum	or /0	\ T	ASCM	No	Na	Ab	-1.01(0)					
Bio Terra Solutions	ung Own	ei (o	'	ASCIVI	NO.			ent Contractor (9)					
Street Address							eet Address	NAGENIENT	LC				-
P.O. Box 1224						100	7 Outwater I	200					
City, State, Zip Code							y, State, Zip Co						
Union, NJ							Sarfield, NJ						
Project Manager for Monitoring Firm		T	Tele	phone	No.	_	ephone No.	0.020	License No				-
Rick Eustaquio				73-494		0.00	73-928-4888		1188	•			- 1
Start Date (10)	Schedule	1 Cor	mple	tion Da	te (11)		me of OSHA M	<u> </u>	1100				\dashv
07 /30 /18				/				NAGEMENT L	LC				
Occupancy Status During Abatement	Check on	y on	e)			Stre	eet Address						
☑ Facility Closed/Vacated During Ent				ment			7 Outwater L	ane					
☐ Abatement Performed Outside of N	ormal Fac	ility I	Hour	s - Des	cribe	_	/. State, Zip Co						-
Time of Abatement:AM X Saturday	PM/_		PM-		AM	1 1	Sarfield, NJ						
Scope of Work (Check all that apply)							X Wrap and						_
≥3 sf or ≥3 If	F 7	_		120125			☐ Full Cont	ainment with Neg	ative Pressure	9			
≥ 3 \$1 \$1 ≥ 3 \$1 ≥ 260 \$1 \$1 ≥ 3 \$1		Reno Dem					☐ Mini-Encl☑ Glovebag						
1.75							☐ Non-Exer	npted (*) and No	n-Friable Proce	edure			
			ocat							A	batem	ent Ty	уре
Location of Asbestos-Containing Material (ACN	0 1			ely by	Asha	ctoc	Description of Containing Mat		A 4	7	D.	ш	ш
TO BE ABATED	·			nce/			ermal systems i		Amount (Specify	Remova	Repair	ncap	nclo
IN Facility (13)			(12)	Staff?			urfacing, VAT,		SF or LF)	Va	7	Encapsulate	Enclosure
(13)	Y		No	N/A	1	Oti	her miscellaned	ous)				ate	
Basement					Pipe Ins	sula	tion- Wrap a	nd Cut	400 LF				
Basement					Elbow I				18 Elbow				
							Resident State of the State of		AT 170 H 1725 W 2017 TO				
						77 c. 115							
Name of Registered Waste Hauler				JDEP \		Cut	oic Yards of	Name of Regis	tered I andfill		I		
ATC/ Century Waste, LLC			H	lauler II		Wa	ste	Minerva Enter	prises/ GROV	VS Land	fill/		
City, State			1	/11-243	10132131		s Needed posal Date	City, State	THE				-
Shirley, NY/ Elizabeth, NJ						93	BD Date		rg, OH/ Morr	isville	PΑ		
Completed By (Print or Type)	Title			-			Signature	1,	3, 21, 111011				
Allen Monchik	Proje	ct N	/lan	ager				7.1 1.1	,	Date			
ACD 44		011	idil	-gei			Allen	Monchik		7/19/	8		

ASB-41 JAN 13

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



Pa A	In			(P	ursua	nt to NJA	AC 8	3:60 and 5:1	6)	in Haller	750 T	-	1 14	1
Date of Notification (1)				_	Name	e of Buildin	g Ov	wner/Operator ((2)			0.0	001	0
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	☐ Emerger		cluding	9				t House, NJ	08210					
(NJAC 5:23-8)	justificati Cancella				100000	of Contac	1			Telephone N				
	Garicella	LIOIT				. Nancy M				609-465-	1418	_		
Name of Facility Where Ab	natement is	Taking	Place	(3)	FA	CILITYIN	IFO	RMATION	T	740				
Commercial	odernone is	i aixii iç	j i iacc	(3)					Type of Facility ☐ School (K-1)					
Street Address									☐ Subchapter	8 (Other than h	<-12)			
384 Ranger Road- C	ape Mav C	ount	v Airr	ort					Other (i.e., p	rivate and com	nmercial	buil	dings,	
City (5)	,		,	-	53370-				homes, etc.	# of Floors		DIA	g. Age	
Lower Township									Oquare reet	# 011 10015		Diu	, Age	
County (6)					Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (Pr	ior if being den	nolished)		
Cape May						5 10		:t				7		
Name of Monitoring Firm H	lired by Build	ding C	wner ((8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)					
Bio Terra Solutions							1	ALL PRO MA	NAGEMENT L	.LC				
Street Address							Str	eet Address						
P.O. Box 1224							2	27 Outwater I	Lane					
City, State, Zip Code			Correct C				Cit	y, State, Zip Co	ode					
Union, NJ							(Garfield, NJ	07026					
Project Manager for Monito	oring Firm				ephone		Te	lephone No.		License No).			
Rick Eustaquio					73-494		9	73-928-4888		1188				
Start Date (10)					etion Da		Na	me of OSHA M	onitor	•				
//					0_/_	18	1	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During A							Str	eet Address						
☐ Facility Closed/Vacated	During Entir	re Per	iod of	Abate	ment		2	7 Outwater L	_ane					
Abatement Performed C Time of Abatement:	AM-	ormai PN	racility 1/	Hou PM	rs - Des -	AM		y, State, Zip Co		- W				
						,	(Barfield, NJ	07026					
Scope of Work (Check all the	nat apply)							⊠ Full Cont	ainment with Neg	native Proceure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Rei		5.0700.01			☐ Mini-Encl	osure	Janve Fressure	2			
≥ 160 St or ≥260 If			Der	moliti	on				Procedure mpted (*) and No	n Eriabla Dras	a da			
			Is	Loca	tion			- HOII-EXCI	inpled () and No	II-FIIADIE FIOG		hat	omont	Time
Location of				lorma				Description of	f		-	T		Туре
Asbestos-Containing Ma TO BE ABAT	aterial (ACM ED	1)			ely by ance/	Asbes	stos	Containing Matermal systems in	terial (ACM)	Amount			Repair	ncl
IN Facility			Cust		Staff?	(1.6.		surfacing, VAT,		(Specify SF or LF)	Kemova		air bac	Enclosure
(13)		ŀ	Yes	(12) No	N/A	1	ot	her miscellaned	ous)	3550 / DOC PO 2500 C T (2500 / 2 🕏			Repair	0
Tunnel- Exterior					N/A	Pipe Ins	ula	tion		24015		7 1	7	-
Trench Outside						Pipe Ins				210 LF 120 LF		-	<u> </u>	井님
Furnaces- Exterior			$\overline{\Box}$			Pipe Ins					[2			
						r ipe ilis	uia	uon		100 LF		1 2	井늘	
Name of Registered Waste	Hauler		ш		JDEP \	Monto	Cul	is Varda of	Newsoff		L	וןנ	7 _	
Newark Carting	riddici			12.0	lauler II	No.	Wa	oic Yards of ste	Name of Regis	tered Landfill hem Landfil	11			
City, State					02383			s Needed		mem Landill		_		
Newark, NJ								posal Date BD	City, State Bethlehem	PΔ				
Completed By (Print or Type	e)	Title					'		Detrilettett	, r-A				
Allen Monchik	-/		oject	Man	agar			Signature			Date			
		-	oject	widil	ager			Allen 1	Monchik		08/28	3/18	3	1



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Date of Notification (1) 8/28/2018					of Building of New				1		AHO	2.0	0/04	0	
Agencies Notified	Type Notification				Address est State	e Stree	t			· 13	NO.	3 11	200)	-
DEP DOL	Amended Amendment		_		ate, Zip C on, NJ 0					<i>i</i>	i, edetîr N.		dver.		
DOH DCA	justification) Cancellation				of Contact a Bruno					1 5255	lephone 1 09-433-8				
				FAC	ILITY INF	ORMAT	ION								
Name of Facility Where Abandoned Flood H		g Place (3)					Ty	ype of Facility (School (K-1	2)					
Street Address 28 E. Green St								×	Subchapter Other (i.e. p etc.)				ilding	s, hom	ies,
City (5) Woodbridge, NJ								100000	quare Feet 500	2	of Floors		Bldg. 50 +	2.75	
County (6) Middlesex					Code (7) USE ONLY)		Cı A	urrent Use (Pri bandoned F	or if be	ing demo Home	lished)			
Name of Monitoring Firm N/A	Hired by Building (Owner (8)	ASC	M No.				Abatement Cor zi Environm			es, Ind).		
Street Address						63	Street 135 H		dress inelon Rd.						
City, State, Zip Code								e, Zip Code n, NJ 07405	5						
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph 908-2		e No. 8-0880		License 01228				
Start Date (10) 09/24/2018		Schedul 09/25/2		mpletion	Date (11)		Children and Children and Children		OSHA Monitor zi Environm	ental	Service	es, Inc			
Occupancy Status During	g Abatement (Check	k Only O	ne)				Street								
Facility Closed/Vaca Abatement Perform	ated During Entire F	Period of	Abaten	nent			L		nelon Rd.						
Other – Describe:	Abandoned Structure	ai Facility	Hours	5					e, Zip Code n, NJ 07405	5					
Scope of Work (Check A	Il That Apply)		1000												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	1	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure	•			re	
200 1-10 10 10 10		100	Locati							() ()		lubio i i	Abat	emen ype	t
Location Asbestos-Containing TO BE AB/ In Facili (13)	Material (ACM) ATED	Use Ma	ed Sole intenar todial S (12)	ly by nce/	Asbes (i.e.	tos Cont thermal surfa	scription taining M systems cing, VA niscellan	late s ins T, o	or	(mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A										te	L.
Exterior Fou	ndation			X) 	Caulk			1	20 If	X	-	-	
Name of Registered Was	te Hauler		ΙN	JDEP W	/aste	Cubic	Yards		Name of F	Registe	ered I and	fill			
Yannuzzi Group, Inc.			Н	auler ID 7467		of Was			Waste N				ss		
City, State Kinnelon, NJ							al Date /2018		City, State Fairless		, PA				
Completed by John Mucha `		Title Senio	or Pro	ject Ma	anger	S	ignature)	Much	7_		Date 8/28/2	018	2.12.14	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

PAR				ICATIO	tate of Nev N OF ASBI t to NJAC	ESTOS	SABATE		T [Ē (122 00 00 00 00 00 00 00 00 00 00 00 00 0	1
Date of Notification (1) 8/28/2018					of Building of New J				11.00		A!	JG :5	n	2010		
Agencies Notified EPA	Type Notification Initial				Address est State	Stree	et			İ.				1113		
DEP DOL	Amended Amendment				ate, Zip Co on, NJ 08				i		CDE G		e e ja	V. K		
DOH DCA	Emergency (justification) Cancellation				of Contact a Bruno						ephone 9-433					
				FAC	ILITY INFO	RMA	TION									
Name of Facility Where A Abandoned Flood H Street Address	ouse	g Place (3)					Тур	e of Facility (School (K-1	2)	o	V 40)				
132 Crampton Ave								×	Subchapter Other (i.e. p etc.)	orivate (& comn	nercial				es,
City (5) Woodbridge, NJ								Squ 250	are Feet)0	2	f Floors	3	57800	ldg. A 0 +	ge	
County (6) Middlesex					Code (7) USE ONLY)				rent Use (Pricandoned F				d)			
Name of Monitoring Firm N/A	Hired by Building (Owner (8))	ASCI	M No.				atement Cor Environm			ces, l	nc.			
Street Address							Street 135 I		ess elon Rd.							
City, State, Zip Code									Zip Code , NJ 07405	5						
Project Manager for Monit	toring Firm			Telepho	one No.		Teleph 908-2				Licen 0122	ise No. 28	8			
Start Date (10) 09/13/2018		Schedul 09/17/2		mpletion	Date (11)		0.0000000000000000000000000000000000000		SHA Monitor Environm	ental	Servi	ces, I	nc.			
Occupancy Status During	Abatement (Check	k Only Or	ne)				Street	Addr	ess							-
Facility Closed/Vaca	ted During Entire F	eriod of	Abater	nent			135 H	Kinn	elon Rd.							
Abatement Performe Other – Describe: Al	d Outside of Norm bandoned Structure	al Facility	y Hour	S			1 37.00		Zip Code , NJ 07405	5						
Scope of Work (Check All	That Apply)					20.00										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		photograph (Renova Demoli				×	M G	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure					2	
		100,00	Locat					7.5.			TOPA		- 1	Abate		
Location Asbestos-Containing Model TO BE ABA In Facilit (13)	Material (ACM) TED	Use Ma	Normal ed Sole intena todial ((12)	ely by nce/	Asbest (i.e.	os Cor therma surfa	escription ntaining M al systems acing, VA miscellan	lateria insu T, or	lation,	(8	mount Specify or LF)		Remova	Ty Repair	e Encapsulate	Enclosure
		Yes	No	N/A				W ₆					_		ate	roi .
Exterior W	/alls			-		Tran	nsite Sid	ding		43	800 sf	2	2			
Name of Registered Waste	e Hauler		N	IJDEP W	lasts	Culti	Yards		I Nome Co	2		- ACU				
Yannuzzi Group, Inc.	o i laulei		H	lauler ID 7467		of Wa			Name of F Waste N				rles	s		
City, State Kinnelon, NJ							sal Date 8/2018		City, State		PA					
Completed by John Mucha `		Title Senio	or Pro	ject Ma	anger	1	Signature	ch	(Pu	eli	1	Date 8/28		18		

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Date of Notification (1) 8/28/2018					of Building of New				1	AU	3 3 0	2018	Participana		
Agencies Notified EPA	Type Notification	1		Street A	Address est State	Street	t		1 1	SBESI	OS COM	TOOL	CTrees		
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DOH DCA	Emergency justification Cancellatio)	1		f Contact a Bruno					10000000	ephone N 9-433-8		X		
				FAC	ILITY INF	ORMATI	ON								
Name of Facility When Abandoned Flood Street Address		ng Place (3)						of Facility School (K-	12)					
76 S. Robert St								×	Subchapte Other (i.e. etc.)	private	& commer	cial bu			es,
City (5) Woodbridge, NJ								1500		1.5			Bldg. 50 +	Age	
County (6) Middlesex					Code (7) USE ONLY)			ent Use (Pri ndoned f			shed)			
Name of Monitoring Fit N/A	rm Hired by Building	Owner (8)	ASC	√l No.				tement Co Environn			s, Inc			
Street Address							Street 135 I		ss Ion Rd.						
City, State, Zip Code									ip Code NJ 0740:	5					
Project Manager for Mo	onitoring Firm			Telepho	ne No.		Teleph 908-2				License 01228	No.			
Start Date (10) 09/06/2018		Schedul 09/10/		npletion	Date (11)				HA Monitor Environm	nental	Services	s, Inc.			
Occupancy Status Duri	ing Abatement (Che						Street 135 H		ss Ion Rd.						
Abatement Perfor	med Outside of Norr Abandoned Structur	nal Facilit	y Hours	ieni S					ip Code NJ 0740	5					
Scope of Work (Check	All That Apply)							,							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		×	Renova Demolit	tion ion			×	Mir	l Containm ni-Enclosure ovebag Pro- n-Exempte	e cedure				re.	
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Location Asbestos-Containin TO BE AI In Fact (13	ng Material (ACM) BATED cility	Use Ma	ed Sole intenar todial S (12)	ly by nce/		tos Conta thermal surfac		laterial insula T, or		(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								1 8		ate	Ге
Entire St	ructure		Х		RACI	1 Struc	ture		15	00 sf	X				
												+			
Name of Registered Wa			10000	JDEP W auler ID		Cubic of Was			Name of	Registe	red Landfi	11			
Yannuzzi Group, In	C.		0.000	467	. 10.	100					gement F	airle	SS		
City, State Kinnelon, NJ						Dispos 09/11/	2018	141	City, State		PA				
Completed by John Mucha `		Title Senio	or Pro	ject Ma	anger	Si	gnature	~	V ne	lu	570	ate /28/2	018		
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* po not use this form for asbestos licensure exempted activities.

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Date of Notification (1) 8/28/2018					of Building of New					3	Alli	200	0010		
Agencies Notified	Type Notification			Street A	Address est State	Stree	t		1	i i	7101		UIU	4	+
DEP DOL	Initial Amended Amendment Emergency	-			ate, Zip Co on, NJ 08					- A3	SESTUE LICE	l Corr NSWE			
DOH DCA	justification) Cancellation	9.5			f Contact a Bruno		A. (. (. (. (. (. (. (. (. (. (. (. (. (.			100000000000000000000000000000000000000	ephone N 9-433-8				
DCA	Caricellation			10-01-00 -10 -010-1	ILITY INFO	ORMAT	ION	_		100	9-433-0				
Name of Facility Where Abandoned Flood I		g Place (3	3)	1710		OTTIME	Oit	Ty	ype of Facility School (K-	12)					
Street Address 587 Watson Ave								×	Subchapter Other (i.e. etc.)	private	& commer	·12) rcial buil	dings	home	es,
City (5) Woodbridge, NJ								1	quare Feet 500	# o 2	f Floors		3ldg. <i>A</i> 30 +	\ge	
County (6) Middlesex					Code (7) USE ONLY				urrent Use (Pri bandoned f			ished)			
Name of Monitoring Firm N/A	n Hired by Building (Owner (8)		ASCN	M No.				Abatement Co zzi Environn			s, Inc.	8,		
Street Address				-			Street 135 I		dress nnelon Rd.						
City, State, Zip Code								e, Zip Code on, NJ 0740	5						
Project Manager for Mor	nitoring Firm		Telepho	ne No.		Teleph 908-2		e No. 8-0880		License 01228	No.				
Start Date (10) 09/19/2018		Schedul 09/21/2		npletion	Date (11)		3555		OSHA Monitor zzi Environm		Service	s, Inc.			
Occupancy Status Durin	g Abatement (Chec ated During Entire F			ont			Street 135 l		dress inelon Rd.			500		-	
Abatement Perform	ned Outside of Norm Abandoned Structure	al Facility	/ Hours	i			1 25		e, Zip Code on, NJ 0740	5					
Scope of Work (Check A	All That Apply)										-			-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	3	Full Containm Mini-Enclosure Glovebag Pro- Non-Exempte	e cedure				e	
			Locati										Abate	ement pe	
Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Use Ma Cus	ed Sole intenar todial S (12)	ly by nce/ Staff?		tos Con thermal surfa		Mate s in: NT, o	erial (ACM) sulation, or	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Basem	ent	Yes	No	N/A X	Glove	Bag 8	. Wran	· 2.	Cut Pipe	1	50 sf	x			
	Subsurface						on Wa				25 sf	X			
Name of Registered Was Yannuzzi Group, Inc			Н	JDEP W auler ID 7467		Cubic of Wa 42	Yards ste				ered Landf gement		ss		
City, State Kinnelon, NJ						sal Date /2018		City, Stat		PA					
Completed by John Mucha `		Title Senio	or Pro	ject Ma	anger	8	Signature		1. Men	d		Date 3/28/20	018		

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Date of Notification (1) 8/28/2018						f Building of New				Service Servic	Section (AUG	3 0	201	8	The state of the s	1
Agencies Notified	Тур	e Notification	1		Street A	ddress est State	Street	:	14		1.	SBESTO			ōī.ā	-[į.
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DOH DCA		Emergency justification Cancellatio)		Name o	f Contact a Bruno						Telephone					
		Cariocilatio				LITY INF		ON					01.10	_		-	
Name of Facility Where Abandoned Flood			ng Place (3	3)	.,,,,,		Orden (1)		Type of F	100000							
Street Address 535 Pearl Ave										chapt	ter 8	Other than ate & comr		build	lings,	home	es,
City (5) Woodbridge, NJ									Square Fe 2500	eet		# of Floors	S		dg. A	ge	
County (6) Middlesex						Code (7) USE ONLY)					f being den od Home		i)			
Name of Monitoring Firm N/A	Hire	d by Building	Owner (8)		ASCN	No.			of Abateme				ces, Ir	nc.			
Street Address				7				1300 1300 130	Address Kinnelon	Rd.							
City, State, Zip Code									tate, Zip Co		05						
Project Manager for Mor	nitoring	g Firm			Telepho	ne No.			one No. 218-0880)		Licen 0122	ise No. 28				
Start Date (10) 09/13/2018								2000	of OSHA N uzzi Env			ntal Servi	ces. Ir	nc.			
Occupancy Status Durin	g Aba	tement (Che	ck Only Or	ne)					Address								-
Facility Closed/Vac									Kinnelon	= // // //							
Abatement Perform Other – Describe:	Aband	utside of Nor- loned Structu	mal Facility re	Hours	S 				tate, Zip Co elon, NJ		05						
Scope of Work (Check A	II Tha	it Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			-	Renova Demolit				×	Mini-En Gloveba	closu ag Pr	ure roced						
				V 5000					I Non-Ex	empi	ted (*) and Non-	Friable		Abate		
Location			1	Locati Normal d Sole	lly		Des	scription	of						Ту		
Asbestos-Containing TO BE AB, In Facil (13)	ATED ity		Ma	intena todial s (12)	nce/		thermal surface					Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
			Yes	No	N/A											te	(D)
Roo					X			Roofing				1800 sf	X				
Sub-Sur	face				X	Fou	undation	n Wate	erproofing	3	-	1500 sf	X				
Name of Designation 111	to !!	vilas		1.	I IDEE :	/	101	V 1	1 :-				1611				
Name of Registered Waste Hauler 'annuzzi Group, Inc.					IJDEP W lauler ID 7467		of Was		100			gistered La Inageme		les	S		
City, State Kinnelon, NJ							Dispos 09/19	al Date /2018	0.7252	y, St airle		lills, PA			-		
Completed by John Mucha `							S	ignature	7/	lan	l		Date 8/28	/20	18		
ASB-41 (R-06-08)				A-sall s				*Do no	t use this fo	orm f	or as	bestos lice	nsure e	xem	pted :	activit	ties.



Abandoned Flood House

Type Notification

Initial

Name of Facility Where Abatement is Taking Place (3)

Amended

Amendment #

justification) Cancellation

Emergency (including

Date of Notification (1)

8/28/2018

EPA

DEP

DOL

DOH

DCA

Street Address 75 S. Robert St

Woodbridge, NJ

City (5)

County (6)

×

Agencies Notified

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

Name of Building Owner/Operator (2)

State of New Jersey, DPMC

33 West State Street

City, State, Zip Code

Name of Contact

Regina Bruno

Trenton, NJ 08608

FACILITY INFORMATION

Street Address

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r (2)									101
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Туре	of Facility	(4)			-				
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	re Feet	2	of Flo	oors		17.00	ldg. <i>A</i>	\ge	
Abar	nt Use (P ndoned	Flood	d Ho	me	she	d)			
	tement Co Environi				e li	nc			
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	on Rd.								
	p Code NJ 0740)5							
hone No 218-0	1000000			cense 1228	No.				
	IA Monito Environr		al Se	rvice	s, Ir	nc.			
Addres Kinnel	s on Rd.				n = 1		270		
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elon, l	NJ 0740)5							
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n of Material s insula AT, or neous)			Amor (Spec SF or	cify		Removal	Repair	Encapsulate	Enclosure
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ating			1000	sf	X				
stic			300	sf	Х				
	Name of Waste					les	s	0	
	City Sto								

County (6) Middlesex				Code (7) USE ONLY	n			nt Use (Pr ndoned f			lished)			
Name of Monitoring Firm Hired by Building (N/A	Owner (8)		ASC	ЛNo.				ement Co Environn			es, Inc.			
Street Address						Street Ad 135 Kir	7 77					7.		
City, State, Zip Code						City, Stat		p Code NJ 0740	5					
Project Manager for Monitoring Firm			Telepho	ne No.		Telephor 908-21				License 01228				1.50
Start Date (10) 09/12/2018	Schedul 09/19/2		npletion	Date (11)			2000	A Monitor Environn		Service	es, Inc.			
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Abandoned Structure	Period of a	Abatem	nent			Street Ad 135 Kir City, Stat	nnel	on Rd.					3 2 2 0 7 .	
Scope of Work (Check All That Apply)	9					and the second s		NJ 0740	5					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti				×	Mini Glov	Containm -Enclosur /ebag Pro -Exempte	e cedure	87			е	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Asbestos-Containing Material (ACM) TO BE ABATED In Facility Used Mair Custo					scription of taining Mate systems in cing, VAT, niscellaneo	erial (nsulat or		(Sp	nount pecify or LF)	Removal	Abate Ty Repair	em e Encapsulate	Enclosure
Bedroom 2 & 3	Yes	No	N/A X		Glue do	ots on ce	ilina		30	0 sf	X		Ф	
Coating on Drywall			X			re Coati				00 sf	X	-		
Second Floor Bedroom & Hall			X			& Masti				0 sf	X			
Name of Registered Waste Hauler Yannuzzi Group, Inc.	H	JDEP W auler ID 7467		Cubic of Was			Name of Waste				ss			
City, State Kinnelon, NJ					sal Date /2018		City, Stat		PA					
Completed by John Mucha `	or Pro	ject Ma	anger	S	ignature	1	led		0.4	Date 8/28/20)18			
ASB-41 (R-06-08)					*Do not u	ise th	is form for	asbesto	s licens	ure exer	npted	activi	ties.	



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Date of Notification (1) 8/28/2018					of Building Owner of New Jersey			277,277		AU(3 (20	18	A STATE OF S
Agencies Notified	Type Notification			Street A	Address est State Stree	et		and the second second	- Annah				20	The state of the s
DEP DOL	Initial Amended Amendment				ate, Zip Code on, NJ 08608			1	A. S S. Andrewson and Co.	SHEST LI	DS 0(CENS		iOL 6	A manage
DOH DCA	Emergency (justification) Cancellation	including			f Contact a Bruno					phone Nu 9-433-87				
Name of Facility Where	Abatamant in Tabia	- DI /	2)	FAC	ILITY INFORMAT	ION								
Name of Facility Where A Abandoned Flood H		g Place (3)					of Facility (4 School (K-1	2)					
Street Address 70 Sewaren Ave							×	Subchapter Other (i.e. p etc.)				dings	, home	es,
City (5) Woodbridge, NJ							Squa 250	re Feet	# of 2	Floors	10000	8ldg. <i>A</i> 60 +	lge	
County (6) Middlesex					Code (7) USE ONLY)			ent Use (Prio ndoned F			hed)			
Name of Monitoring Firm N/A	Hired by Building (Owner (8)	ASC	∕l No.			tement Con Environm			, Inc.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Street Address							Addre Kinne	ss Ion Rd.						
City, State, Zip Code								ip Code NJ 07405		***************************************				
Project Manager for Mon	toring Firm			Telepho	ne No.	Teleph	none N 218-0	0.		License 1	No.			
Start Date (10) 9/10/2018		Schedul 9/11/2		npletion	Date (11)	3.0000000000000000000000000000000000000		HA Monitor Environm	ental \$	Services	. Inc.			
Occupancy Status During	Abatement (Checi	c Only O	ne)			Street	Addre	SS			1			
Facility Closed/Vaca Abatement Performed Other – Describe: A	ed Outside of Norm	al Facility	Abatem y Hours	ent		City, S	state, Z	lon Rd. ip Code	0					
Scope of Work (Check Al						Kinn	elon,	NJ 07405						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		1	Renova Demolit			×	Mir	I Containme ni-Enclosure ovebag Proc n-Exempted	edure				e	
			Locati										ement pe	
Location Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM)	Use Ma	ed Sole intenar todial S (12)	ly by nce/	Asbestos Cor (i.e. therma surfa		Material s insula T, or		(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
D. I.		Yes	No	N/A									ю	350
Bedroom 0				X		m Laye				0 sf	x			
Datilloc	411				Va	i ox ivias	SUC			0 sf	х			
Name of Registered Was	te Hauler		l NI	JDEP W	acta Cubi	Yards		Name of F)ogist-	od I a= 40				
Yannuzzi Group, Inc.			Н	auler ID 467				Waste N				ss		
City, State Kinnelon, NJ						sal Date 3/2018		City, State Fairless		PA				
Completed by John Mucha `		Title Senio	or Pro	ject Ma		Signature		Mad	-	Da	ate 28/20)18		
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Date of Notification (1) 8/28/2018	***			of Building of New						市區	7		匠	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Agencies Notified EPA DEP Amended Amendment				Address est State ate, Zip Co		t				AUG	30	20	18	A CONTRACTOR OF STATE	الولو
DOL Amendment : Emergency (i justification) DCA Cancellation		-	Name o	on, NJ 0 of Contact a Bruno					Tel	ephone	Numb	SIL	THE	المدر. <u>المحاراة</u> سسس	ومساعة لاسسا
Name of Facility Where Abatement is Taking Abandoned Flood House Street Address 72 Sewaren Ave	Place (3	3)	FAC	ILITY INF	ORMATI	ON	Туре	School (K-1 Subchapter Other (i.e. p	2) 8 (Oth			ouilo	lings	hom	es.
City (5) Woodbridge, NJ							Squa 250	etc.) are Feet 0	# 0	f Floors		B 50	ldg. <i>A</i>		
County (6) Middlesex			County (STATE	Code (7) USE ONLY				ent Use (Pri andoned F			olished)			
Name of Monitoring Firm Hired by Building C N/A	wner (8)		ASC	Л No.		230100000000000000000000000000000000000		atement Cor Environm			es, Ir	IC.			
Street Address						Street 135		ess elon Rd.							
City, State, Zip Code							-8000 110000	Zip Code NJ 07405	;						
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph 908-				License 01228						
	ed Con 2018	pletion	Date (11)				HA Monitor Environm	ental	Service	es, In	c.				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe: Abandoned Structure	Abatem	ent			City, S	Kinne State, Z	ss elon Rd. (ip Code NJ 07405	;							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	enova emoliti				×	Mi	Il Containme ni-Enclosure ovebag Prod n-Exempted	edure	755,000				e	
Location of		Locati			Dor	scription	of					,	Abate Ty	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Solei intenar odial S (12)	ice/ taff?		tos Cont thermal surfac	aining N	Materia s insula T, or		(8	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
Basement Windows	INO	N/A X		G	azing	l.			75 If	X	-				
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Name of Registered Waste Hauler Yannuzzi Group, Inc.		H	JDEP W auler ID 467		Cubic of Was			Name of F Waste N				ess	S		
City, State Kinnelon, NJ				Dispos 09/18/	al Date /2018		City, State Fairless		PA						
Completed by John Mucha `	r Pro	ect Ma	anger	Si	gnature		(V)	ha	1.20	Date 8/28/	20	18			

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

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(29)				ICATION	N OF ASE to NJAC	BESTOS	ABATE		NT			n n	7 E	3 p.	Mariana Arian
Date of Notification (1) 8/28/2018					f Building of New				27 17		A lies	4 1			
Agencies Notified	Type Notification			Street A						1	UR a n	701	3		
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DOH DCA	Emergency justification) Cancellation				f Contact a Bruno						ephone Nu 9-433-87				1
Name of Facility Where Abandoned Flood I		g Place (3)	FACI	ILITY INF	ORMATI	ION	Ту	pe of Facility (
Street Address 14 Melbourne Cour	t			- XX				×	School (K-1 Subchapter Other (i.e. p	8 (Oth			ldings	, hom	ies,
City (5) Woodbridge, NJ		199-199						1	etc.) uare Feet 000	# 0	f Floors	1.3	3ldg. /	Age	
County (6) Middlesex					Code (7) USE ONLY	,			rrent Use (Prio			hed)			
Name of Monitoring Firm N/A	Hired by Building (Owner (8))	ASCN	/I No.				batement Cor zi Environm			, Inc.			
Street Address								Kinr	nelon Rd.						
City, State, Zip Code						Kinne	elor	, Zip Code n, NJ 07405	i						
Project Manager for Mor	itoring Firm		Telepho				218	-0880		License N 01228	No.				
Start Date (10) 9/10/2018		9/12/20	018	npletion	Date (11)		Yann	nuzz	SHA Monitor zi Environm	ental	Services	, Inc.			
Occupancy Status During Facility Closed/Vaca	ated During Entire F	Period of	Abaten	nent				Kinr	nelon Rd.						
Abatement Perform Other – Describe:	Abandoned	al Facility	y Hours			_			Zip Code n, NJ 07405						
Scope of Work (Check A ≥3 sf or ≥3 If ≥160 sf or ≥260 If	Il That Apply)	-	Renova Demolit				×	N C	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure	14.1-0-	20) 	e	
Location	of	1	Locati	ly		Des	scription	of						emen vpe	t
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Name of Registered Was Yannuzzi Group, Inc			Н	JDEP W auler ID 467		Cubic of Was			1000000 NA 600		red Landfill gement F		ss		
City, State Kinnelon, NJ						Dispos 9/20/2	al Date 2018		City, State Fairless		PA				\exists
Completed by John Mucha `		Title Senio	or Pro	ject Ma	anger	Si	ignature		Mue	1	602.6	te 28/20)18		

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Date of Notification (1) 08/28/2018				Building of New						AUG 3	0 20	118		
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DOH justification Cancellation	icidaling	- 24		Contact Bruno						ephone Nu 9-433-87				
Name of Facility Where Abatement is Taking	Place (3)		FACI	LITY INFO	ORMATI	ON	Type	of Facility (4)					
Abandoned Flood House	riace (5)	,					_	chool (K-1	sees.					
Street Address 2 Wedgewood Ave							S	ubchapter	8 (Oth	er than K-1 & commerc		dings	, home	es,
City (5) Woodbridge, NJ							Square 1600		# of 2	f Floors	100	3ldg. <i>F</i> 50 +	\ge	
County (6) Middlesex				Code (7) USE ONLY						ng demolis r Reside				
Name of Monitoring Firm Hired by Building ON/A	wner (8)		ASCM	1 No.				ement Cor nvironm		(9) Services	s, Inc.			
Street Address							Address	on Rd.						
City, State, Zip Code							state, Zip elon, N	Code IJ 07405	;					
Project Manager for Monitoring Firm		Telephoi	ne No.			none No 218-08			License 1 01228	No.				
	d Com	pletion I	Date (11)				A Monitor Invironm	ental	Services	, Inc.				
Occupancy Status During Abatement (Check	Only On	e)					Address							
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: Abandoned	riod of A I Facility	batem Hours	ent			City, S	Kinnelo State, Zip		•					
Scope of Work (Check All That Apply)				- 22 may 12	110/28	KIIII	elon, i	13 07400						
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	ls	Locati	on				11011	LXCITIPIO	() am	3 1401111110		Abat	ement	
Location of		ormall d Solel				scription						Ty	/pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	ntenar odial S (12)	ice/				s insulat T, or		(8	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
Exterior Siding	165	INO	X		Tran	site Si	dina		1 '	200 sf	x	-		
Mastic Under Wall Board		X		-10-11-11-11	Mastic	All the second			00 s	X	-		\vdash	
					ridotio	<u> </u>			-	+	-			
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Name of Registered Waste Hauler		1000000	JDEP W		Cubic			Name of I	Registe	red Landfi	1	1		
Yannuzzi Group, Inc.		0.000000	auler ID '467	INO.	of Was 20	ste		Waste I	Manag	gement F	airle	SS		
City, State Kinnelon, NJ					Dispos 9/13/2	al Date	ñ	City, State		PA				
Completed by John Mucha `	r Pro	ject Ma	anger	S	ignature	lu 1	/V/	nla		ate /28/2	018			

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Date of Notification (1) 8/28/2018					Owner/Ope Jersey, D				AUG	3 0 2	018	100	ij.	
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☐ DOH Emergency justification)		-	Name of	Contact					Tele	ephone Nu	mber			
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Name of Capility Where Abstract is Takin	a Diana (f		FACI	LITY INF	ORMATION	1	T	of Fooility / /						
Name of Facility Where Abatement is Takir Abandoned Flood House	ig Place (3))						of Facility (4	500					
Street Address						\dashv		School (K-12 Subchapter		er than K-1	2)			
564 Heidelberg Ave							×	Other (i.e. pretc.)				dings,	home	es,
City (5)						\neg		re Feet	# of	Floors	E	Bldg. A	ge	
Woodbridge, NJ							250		2			+ 0		
County (6) Middlesex			County (Code (7) USE ONLY)	_		ent Use (Prio ndoned Fl			hed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	1 No.				tement Con			- 0.750.000	-		
N/A						- III-cocare-in		Environme	ental	Services	, Inc.		Total Sci	
Street Address					1 -	Street		ss Ion Rd.						
City, State, Zip Code								ip Code						
only, one of the order								NJ 07405						
Project Manager for Monitoring Firm		T	Telepho	ne No.	T	eleph	one N	0.		License N	No.			
0. 600					9	908-2	218-0	0880		01228				
Start Date (10) 09/17/2018	Schedul 09/18/2		npletion I	Date (11)	100			HA Monitor Environme	ental	Services	, Inc.			
Occupancy Status During Abatement (Chec	k Only Or	ne)			1	Street			112	7.0				
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	nal Facility	Abatem Hours	ent					lon Rd. ip Code						
Other – Describe: Abandoned Structur Scope of Work (Check All That Apply)	е				_ F	Kinne	elon,	NJ 07405						
≥3 sf or ≥3 lf	Пв	Renova	tion] Fu	II Containme	nt with	Negative	Pressu	re		
× ≥160 sf or ≥260 lf	-	Demolit					Mi	ni-Enclosure		110941110				
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	Is	Locati	on						-201			Abate		t
Location of		Normali d Sole		25 55	Descri							T	ре	\vdash
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenar	nce/		tos Contain thermal sy					mount Specify	R	_	Enc	ᄪ
In Facility	Cus	todial S (12)	Staff?		surfacing	g, VA	T, or			or LF)	Remova	Repair	aps	Enclosure
(13)			Τ		other mise	cellan	eous)				\sigma	≒	Encapsulate	ure
120	Yes	No	N/A		0: 1 11						-			\vdash
Kitchen			X		Sink Unc					3 sf	X			
Sub-Surface			X	Fo	undation	Dem	proc	fing	6	25 sf	X			
Name of Designated Wests Hards		1 4.	IDED	last-	Collins	- 6-		I Nie CT) and t					
Name of Registered Waste Hauler Yannuzzi Group, Inc.		Н	JDEP W auler ID		of Waste			Francisco de esta		red Landfi gement F		SS		
City, State		177	7467		40 Disposal	Data		City, State		,			-	
Kinnelon, NJ					09/18/2			Fairless		PA				
Completed by	Title					nąture	\cap	1 1			ate			
John Mucha`	Seni	or Pro	ject Ma	anger		the	. ()	luck		8	/28/20	018		
ASB-41 (R-06-08)					()	Do no	t use	this form for	asbest	os licensu	e exer	npted	activi	ties.