OK# HOLD		1	NOII				하게 하면 어린 것 같아 보는 비로 가게 되었다.		(8				
Date of Notification (1)		0.0000000	XXII/		Name	of Buildin	g Owner/Operator (2	2)	IN B	PE	П	n <i>n</i>	
	28 /	16			Sal	Carama	nna				Ш	₩	
Agencies Notified	5.70	ation			Street	Address			III				11
									III II A	UG 1	21	116	
	a Company and Company											- 10	ka
7					Has	brouck	Heights, NJ 0760)4	1 4000				
(NJAC 5:23-8)	justification	on)	J		Name	of Contac	t		Telephone Nu	mber O	UNT	ROL	3
20 =	☐ Cancellat	ion			Sal	Carama	nna		1000		mvG		
					FAG	CILITY IN	FORMATION						
Name of Facility Where	Abatement is T	aking	Place	(3)				Type of Facility	(4)				
Agencies Notified Type Notification Street Address AUS 2016 Australia AUS AU													
Street Address		9					0				ildina	s.	
401 Hackensack S	treet											T 32	
City (5)		17		11-	w			Square Feet	# of Floors	Blo	dg. A	ge	80
Carlstadt, NJ 0707	2	2									B		
					Cour	ty Code (7	7)(STATE USE ONLY)	Current Use (Pri	ior if being demo	olished)			
Name of Monitoring Firm	n Hired by Build	ding O	wner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)		10			1
	(Pursuant to NJAC 3:60 and 5:16) (Pursuant to Address 1 (Pursuant to Location of Normally to NJAC 4:16) (Pursuant to Address 1 (Pursuant to Address												
Street Address							Street Address						
Pursuant to NACE 8:60 and 5:16 Or													
Pursuant to NAAC 8:60 and 5:16) Date of Nublication (1) 28													
Pursuant to NAAC 8:60 and 5:16) Dito NUMC Dito Dit													
Project Manager for Mor	nitoring Firm			Tele	phone	No.	Telephone No.	-	License No.	5 7 8			
							973-928-4888	3	1188				
Start Date (10)	5	Sched	uled C	omple	tion Da	te (11)	Name of OSHA N	Monitor					
08/06/	16_	0	8_ /	10	_ / _	16	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status Durin	ng Abatement (Check	only o	ne)			Street Address						
Date of Northickholm (1) 28													
Date of Notification (1) 28													
Time of Abatement:	AIVI	PIV	/I/	_PIVI-		AIVI	Garfield, NJ	07026					
Scope of Work (Check a	all that apply)			Yú.			П			40			
			Record		525 CH1		☐ Mini-End☑ Gloveba	closure g Procedure		dure			
			ls	Locat	ion			. ,,			atem	ent Ty	vpe
		• >				2020000000		595			1		
		1)								emo	epa	nca	nclo
			Cus		Staff?	(,,,	surfacing, VAT	, or		Va	=	psu	Sur
(13)			Voc		NI/A	1	other miscellane	ous)				ate	U
Basement				13,000	10 -13	TSI			7 LF				
					-								
			П	П							П	П	П
Name of Registered Wa	ste Hauler			N	-	Vaste Vaste	Cubic Yards of	Name of Regis	stered Landfill				-
				1000	auler II	O No.	Waste	a se single and a second second					
					SW-2	4310							
							And the control of th	200 CO. 100 CO. 100 CO. 100 CO.	rg, OH				
	[vne)	Titlo								Date	/	-/-	
	, he)			nt			oignature)	1/2		1	38	/11	
0 h 1 h 1 h 1 h 1 h 1 h 1 h 1 h 1 h 1 h		1 ''	Jaiut					1100	7	1/	/	116	/
JAN 13		* [Do not	use th	is form	for asbes	tos licensure exemp	oted activities.		1	I		

UC#1615

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

Date of Notification (1)				Name	of Building	g Owner/Operator (2)					
/	16			Keri	ry Ingred	lients and Flavo	rs			W	E	n
Agencies Notified Type Notifica	ation			Street	Address							
⊠ EPA				200	Termina	I Avenue						
☑ DOLWD ☑ Amended				City, S	tate, Zip C	Code		AUG AUG	1	2016		
□ DOH Amendme	_	lina		Clar	k, NJ 07	066		1.2			1	
DCA Emergen (NJAC 5:23-8) Institute in properties in the control of the control o		ung		Name	of Contac	t		Telephone Numb	er	TDO	0	
Cancellat				Rick	Pumo		* L L	AGDECTAG	IN.		L &	
	- 11			FΔC	II ITY IN	IFORMATION	- Low		11.5	_		
Name of Facility Where Abatement is 1	Taking Pl	200/	31	IAC	/ILI11 IIV	II ORMATION	Type of Facility (4)	-			
Commercial	raking r i	ace (3)				School (K-12					
		2	_				Subchapter 8	(Other than K-12))			
Street Address								ivate and commer	cial bu	ilding	3,	
200 Terminal Avenue			- 50			(1)	homes, etc.)	4-651	I DI	ام ۸۵	_	
City (5)							Square Feet	# of Floors	DIC	dg. Ag	е	
Clark, NJ 07066				1 -					1 1	_		
County (6)				Coun	ty Code (/	(STATE USE ONLY)	Current Use (Pri	or if being demolis	nea)			
Union		(0)		20.00			100	4.5		20	1	
Name of Monitoring Firm Hired by Build	ding Owr	er (8)	ASCM	No.	Name of Abatem						
Bio Terra Solutions		i a				ALL PRO MA	NAGEMENT L	LC		0,00	20	0.00
Street Address		9	-0+_N//-			Street Address						
P.O. Box 1224						27 Outwater	Lane		77. 35			
City, State, Zip Code	., * .		931			City, State, Zip C	ode					
Union, NJ			.88			Garfield, NJ	07026		37 /			
Project Manager for Monitoring Firm			Tele	phone l	Vo.	Telephone No.	to go e	License No.				
Rick Eustaquio			97	3-494	3762	973-928-4888	1	1188				
Start Date (10)	Schedule	d Co	mple	tion Da	te (11)	Name of OSHA N	Monitor					
07 /12 /16	08	1	12	/	16	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During Abatement (Check or	nly or	e)			Street Address				-	-	-
□ Facility Closed/Vacated During Entit	33			nent		27 Outwater	Lane					
☐ Abatement Performed Outside of No					cribe	City, State, Zip C			_	# N	5.0	_
Time of Abatement:AM						Garfield, NJ						
Scope of Work (Check all that apply)		-				Carnora, No	0.020				- 77	
Scope of Work (Check all that apply)						☐ Full Con	tainment with Neg	gative Pressure				
≥3 sf or ≥3 lf		Ren				☐ Mini-End						
≥160 sf or ≥260 lf	- L	Dem	olitic	n			g Procedure empted (*) and No	n-Friable Procedu	re			
		Is I	ocat	ion -	8	Z Hon Exc	improd (/ dila ila			ateme	nt Ty	/ne
Location of	.	No	orma	lly	20	Description of	of			1	-	
Asbestos-Containing Material (ACM	Л)		Sole tena	ly by		estos Containing Ma		Amount	Remova	Repair	Encapsulate	Enclosure
TO BE ABATED IN Facility	. (Staff?	(i.∈	e., thermal systems surfacing, VAT		(Specify SF or LF)	10/8	= <u>-</u> .	sqe	uso
(13)		700000000000000000000000000000000000000	(12)			other miscellane		Of Or Ery	=		ulat	re
	Y	es	No	N/A	- 1						a	
1 st Floor	. [1			VAT/Ma	astic		13,000 SF				
		+		-	D: I		*	800 LF				
(St E)		_			Pipe in	sulation		000 LF		ш	ш	
1 st Floor												
1 st Floor												
1 st Floor]	_		6.				In	П		
y.]			Vaste	Cubic Yards of	Name of Regis	stered Landfill				
Name of Registered Waste Hauler]				Cubic Yards of Waste	Name of Regis					
Name of Registered Waste Hauler Newark Carting]		JDEP \	No.	Waste As Needed	IESI Landf					
Name of Registered Waste Hauler Newark Carting City, State]		JDEP \	No.	Waste As Needed Disposal Date	IESI Landf City, State	ill				
Name of Registered Waste Hauler Newark Carting]		JDEP \	No.	Waste As Needed	IESI Landf	ill i, PA				
Name of Registered Waste Hauler Newark Carting City, State	Title]		JDEP \	No.	Waste As Needed Disposal Date	IESI Landf City, State	ill i, PA	ate			
Name of Registered Waste Hauler Newark Carting City, State Newark, NJ	Title]	N H	JDEP \	No.	Waste As Needed Disposal Date TBD	IESI Landf City, State	ill i, PA	ate 7/	799,		

1 # 3 9	Ō	NOT			NOIT	OF ASE	BESTOS ABAT C 8:60 and 5:16		-	3	E G	E I	W	FU	
Date of Notification (1)	28 /	16		1		of Building ese of C	Owner/Operator (2 camden	2)			AUG	1	2016	j	Ш
Agencies Notified ⊠ EPA ⊠ DOLWD ⊠ DOH	Type Notificat ☑ Initial ☐ Amended Amendme				631 City, St	Address Market S tate, Zip C	ode				ASBESTO US	IS COI	VTR(G)L 8	
DCA (NJAC 5:23-8)	justificatio	n)	ig	-	Name	of Contact				Tel	ephone Nur	mber			
				-1-	FAC	ILITY IN	FORMATION								
		aking Plac	e (3)					School Subcha Other (i	(K-12 pter 8 .e., pr) (Otl	her than K-1 e and comm	I2) ercial b	uildin	gs,	
City (5)								Square Fe	et	#	of Floors	В	ldg. /	(ge	
County (6) Cumberland	Llies of her Deciled	ina Oumo	- /0\				•••	School		or if	being demo	lished)			
		ing Owne	(0)	/	43CIVI I	NO.									
Street Address	.,						Street Address								
1000 Maplewood D	rive, Suite 20	07					623 Cutler A	venue							
City, State, Zip Code Maple Shade, NJ 08	3052								2						
Project Manager for Mon Chris Macri	itoring Firm		Т				Telephone No. 856-755-0099)		L	icense No. 00842				
Start Date (10)08 /08 /							The state of the s								
□ Facility Closed/Vacate □ Abatement Performed	ed During Entir Outside of No	e Period o ormal Faci	of Aba	aten lours	s - Des		City, State, Zip C	ode	7						
Scope of Work (Check al	I that apply)								th Neg	gativ	e Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf							☐ Gloveba	g Procedure		n-Fr	iable Proced	dure			
												A	bater	nent T	уре
Asbestos-Containing TO BE ABA	Material (ACM ATED	C	sed S Mainte ustod	Sole enar fial S 12)	ly by nce/ Staff?		estos Containing Ma e., thermal systems surfacing, VAT	aterial (ACM insulation, , or)		Amount (Specify SF or LF)	Kemovai	Repair	Encapsulate	Enclosure
Room 111					IN/A	Pipe In	sulation				5 LF				
Room 107						Pipe In	sulation				3 LF	×			
Camden, NJ 08102															
			E				24								
	ste Hauler			1000	auler II	D No.	Waste					ndfill			
					1050		Disposal Date			PA					
and the control of th	ype)	Title					Signature					Date		-	
The state of the s		Oper	ation	ns N	Manag	jer	Chance	C/G)			7/2	8/	10	

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	11-11	423

Date of Notification (1) 07/28/2016						wner/Opera			ion			7	E	C		ĺ	W
Agencies Notified	Type Notification			Street A	ddress kwood A	ve				<u> </u>		7					
× EPA × DEP × DOL	Initial Amended Amendment	t #	ł	City, Sta	te, Zip Cod	SVIT	974					4		\UC	1	-	2016
DOH DCA	Emergency justification) Cancellation				Contact					Tele	pho	ne N	lumbe	fette)S (CON SIN(TROL
				FACI	LITY INFO	RMATION				1			-		- 1 4	DIM	2
Name of Facility Where Salt Brook Elemen		ng Place (3)					-	of Facility (4) School (K-12								
Street Address 40 Maple Avenue						-			Subchapter 8 Other (i.e. pri	(Othe				uildin	ıgs, 1	nome	s,
City (5) New Providence									etc.) e Feet	# of	Floo	ors		Bldg	g. Ag	je	
County (6) Union					Code (7) USE ONLY)			Curre	nt Use (Prior	if beir	ng d	emol	ished)			
Name of Monitoring Firm Garden State Envir		Owner (8)		ASCN	No.				ement Control	ractor	(9)						
Street Address 555 S.BroadStreet						1100000		Addres McBri	s de Ave								
City, State, Zip Code Glen Rock, NJ 074	52								p Code Park, NJ (0742	4			-			
Project Manager for Mo Bruce Wolf	nitoring Firm			Telepho 201-65	ne No. 52-1119	Tel	leph	one No 225-8).		Lic	ense					
Start Date (10) 08-08-16		Schedule 08-11-			Date (11)	Na	me (of OSH	IA Monitor nmental La	abora			200000				
Occupancy Status Durin						Str	eet /	Addres									
X Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire ned Outside of Nori	Period of Amal Facility	Abater Hour	nent s		City	y, St	tate, Zi	p Code 07083	•				-11-111-		-	
Scope of Work (Check /	All That Apply)						11101	11, 140									
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		SAMPLE CO.	Renova Demoli				×	Min Glo	Containmer i-Enclosure vebag Proce	edure					dure		
		ls.	Locat	tion				1 1101	i-cxempted	() ain	0 140	11-1 11	lable I	Α	bate	ment	
Locatio			Vorma d Sola			Descrip			1				-	-	тyТ	ie .	\Box
Asbestos-Containing TO BE AB In Fac (13)	BATED ility	Ma Cus	intena todial (12)	ince/ Staff?		os Containír thermal syst surfacing, other misce	VA	s insula T, or		(S	Amou Spec F or I	ify		Removal	Repair	Encapsulate	Enclosure
- exterior vario	ous areas	Yes	No	N/A X		transite	par	nels		40	00 S	3F	x			-	
															4		
Name of Registered Wa Lilich Corporation	iste Hauler		H	NJDEP M Hauler ID 8724	1900	Cubic Yard of Waste	is		Name of R				fill				
City, State Woodland Park, Ne	w Jersey					Disposal D	ate		City, State Morrisvill	le, P	A						most (6,40
Completed by Momo Glavatovic		Title vice	oresi	dent		Signa	ture		DA		_		Date 07/2	8/20	16		

CleCK#24418

State of New Jersey

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

Date of Notification	(1)		N	ame	of B	uildi	ing Ov	vner / Operator	(2)		1						7
Date of fredings.	7-29-2016		R	idge	Park	Ap	artme	nts LLC	33 - 01		10	\		7	2016	-11	1
Agencies Notified	Type Notifica	tion	11.7	treet	7000						111		AUG	1	2016	1	+
⊠ EPA	5			-			venue				her "	-		-	-		+
DEP	☐ Initial ☐ Amen	dod		lity, 5			ip Coo	de					S-01-01	- nn	NTRO	8	
□ DOL □ DOH □ DOH	Amen Emerg			lame								- 7.5			e Num		1
DCA DCA		ellation	1	erry C			400		1.63				1.00000				
					CILI	TV	INFO	RMATION							-		+
Name of Facility W	hore Abatama	nt is Taking Pla	ace (3)		CILI	11	INFO	Type of Facility	v (4)								1
North Arlington Apa			300 (0	,				School (K									
Street Address		9						☐ Subchapt	er 8 (0	Other than	K-1	2)					
20-B Ridge Park	Drive							Other (i.e.				ial bui)	_
								Square Feet		# of Floor	S		Bldg	g. Age			
City (5)		County (6)	Cou	inty (Code	(7)		5650		2		- II\	1		70		4
North Arlington, NJ		Bergen						Current Use (F Apartment Bui		being der	molis	snea)					
Name of Monitoring	a Eirm Hirod by	, Building Own	or (8)		IAS	CM	No.	Name of Abate		Contracto	or (9)					7
Health and Safety	g Fillii Hiled by Services	y Building Own	CI (U)		111		1140.	Resource Mar									
Street Address	00.11000							Street Address	S	TOTAL MARKETON							
P.O. Box 365								2115 Hamilton							-		4
City, State & Zip C	ode							City, State & Z Trenton, NJ 08		de							
Berlin, NJ 08009 Project Manager fo	r Monitoring E	irm	Telep	hone	Nun	nhe	r	Telephone Nu				Licens	se Nun	nber			٦
Mr. Jim Proctor	n Montoning i		856-4			1100	•	609-914-4279						0118	5		
Scheduled Start Da	ate (10)	Scheduled Con	npletic	n Da	te (1	1)		Name of OSH				Processor.					
08-22-20)16		8-31-2	-				J&S Environm		Laborator	ies,	Inc.			_		4
Occupancy Status	During Abater	ment (Check or	nly one	<u>)</u>				Street Addres									
		During Entire P Iring Normal H		of Ab	atem	ient		2333 Route 22 City, State & 2					-				+
	9am – 5pm	inng Normai n	ours.					Union, NJ 070		de							
	cupied During	Abatement															4
Scope of Work (Ch										F 11 0 1			Ala Alas		Draggi	uro	
				О		.:			Н	Full Cont Mini-Encl			ıııı iveç	jalive	riessi	ii e	
≥3 sf or ≥3≥160 sf ≥2					nova					Glove Ba			res				1
≥100 St ≥2	00 11			Dei	HOIR	1011				Non-Exer				riable	Proce	dure	
	ocation of		Is	Locat	ion			Description	of			Amou		Aba	temen	t Type	3
	stos-Containin	g		nally		t		Asbestos-Conf]		(Speci				m	
	aterial (ACM)			olely				Material (AC (i.e., thermal sy				SF or L	-F)	Re	R	Enca	3
	BE ABATED in Facility		Main				ir	nsulation, surfac						Removal	Repair	aps	200
	(13)		0000	(12)				or other miscella						val	≒.	Encapsulat	50
			Yes	No	N/A	A											
Laundry Room						I	Pipe Ir	nsulation				38 L	F			_ _	1
														141			1
														14		닉부	-
														H		41-	4
					L	1								++			+
	1107 (11-1			INI	IDE	7 ///	aste	Cubic Yards	Nam	e of Regis	etore	d l an	dfill				4
Name of Registere	ed Waste Hau	ier		11 0333008	auler			of Waste	INaiii	e or regio	Store	u Lan	um				
Resource Manage	ement Group, L	LLC			352			TBD	No Pallace	vs Landfill					_		
City, State								Disposal Date		State							
Trenton, NJ 08619								TBD	IVIOIT	isville, PA				D-#-			
Completed By (Pr	int or Type)			14 1851.5	tle resid	ont		Signature		11-	1,			Date 7-29-	2016		
Mr. Brian Haney				P	esid	CII		1 17	M	1//	K	1		. 20-			
						193		11	7 [11/2/	10				-		_

CNCK#2448

Date of Notification	(1) 7-29-2016					Owner / Operator ents LLC	(2)) = =				711
Agencies Notified EPA	Type Notification	Str	eet A	ddre					ALL ALL	G 1	20	6	111
□ DEP		Cit	y, Sta	ate &	Zip C				AU	1.7	20	0	
⊠ DOL	Amended		fton,										
☑ DOL ☑ DOH ☐ DCA	Emergency Cancellation		me o						ASR#1	elepho	ne Nu	mbe	er
						ORMATION				-			-
Name of Facility Wi	nere Abatement is Taking Pl	ace (3)	FAC	/ILI	TINE	Type of Facilit	v (4)						
North Arlington Apa	rtments – Building 210					School (K	(-12)						
Street Address	Drive						ter 8 (Other			a hom	00 0	o)	
20-B Ridge Park I	Jilve					Square Feet	. private & of	loors		ldg. Ag		C.)	
City (5)	County (6)	Coun	ty Co	de (7	7)	3775	" 01	2		.ug. / .g	70		
North Arlington, NJ	Bergen					Current Use (I		g demoli	shed)				
Name of Monitoring	Firm Hired by Building Owr	er (8)		ASC	M No.	Apartment Bu Name of Abat		ractor (C	3)				
Health and Safety S		101 (0)		117	101 140.	Resource Mar							
Street Address				10-15		Street Addres		000		22.7			
P.O. Box 365 City, State & Zip Co	nde					2115 Hamilton City, State & 2		202					
Berlin, NJ 08009						Trenton, NJ 0	8619						
Project Manager for Mr. Jim Proctor		Telepho 856-452	2-131	1		Telephone Nu 609-914-4279			License N	umber 0118	5		
Scheduled Start Da 08-22-20		npletion 8-31-20		(11)		Name of OSH J&S Environm		atories,	Inc.				
	During Abatement (Check or sed/Vacated During Entire P		Ahate	amar	nt.	Street Addres 2333 Route 2							
	Performed during Normal H		, wat	011101		City, State & Z		-			-		
	9am – 5pm					Union, NJ 070	083						
Scope of Work (Ch	cupied During Abatement eck all that apply)												
<u></u>	Marchael (1996) and the Control of the State (1996) and the State (1996)	0.000							nent with N	egative	Pres	sure	
≥3 sf or ≥3 ≥160 sf ≥26		-	Reno Demo					Enclosus	re rocedures				
2100 St 220	O 11	ш ,	Jenic	muoi	1				ed and Non	-Friable	e Proc	edu	re
	ocation of	Is Lo		5.7		Description	of		Amount		ateme		
	tos-Containing terial (ACM)	Norma	lly Us ely by			Asbestos-Cont Material (AC			(Specify SF or LF)			П	_
<u>TO I</u>	BE ABATED	Mainter	nance	e or		(i.e., thermal sy	/stems	1	51	Ren	Re	nca	Encl
i	n Facility (13)	Custod	ial St 12)	aff?	i	nsulation, surfactor or other miscella				Remova	Repair	Encapsulat	osure
	(10)			N/A		or other miscene	2110003)			30		at	ē
Laundry Room			J T		Pipe I	nsulation			50 LF				
			4				-			ᆛ片		님	님
			$\dashv +$	H				-		ᆛ片		H	H
Name of Registered	d Waste Hauler					Cubic Yards	Name of R	egistere	d Landfill				_
Resource Manager	nent Group, LLC		10000000	ler ID 5218		of Waste TBD	Grows Lar	dfill					
City, State Trenton, NJ 08619						Disposal Date TBD	City, State Morrisville,						
Completed By (Prin	t or Type)		Title			Signature	1/	T.		Date			
Mr. Brian Haney			Pres	iden	t	829	1 //	1	γ	7-29-	2016		

Name of Building Owner / Operator (2) Date of Notification (1) 7-29-2016 Ridge Park Apartments LLC Agencies Notified Type Notification Street Address AU6 2016 **EPA** 1122 Clifton Avenue DEP Initial City, State & Zip Code X ASBESTOS CONTROL & DOL Amended Clifton, NJ 07013 \boxtimes DOH Emergency Name of Contact LICE Telephone Number Cancellation Jerry Campbell DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) North Arlington Apartments - Building 465 School (K-12) Street Address Subchapter 8 (Other than K-12) 20-B Ridge Park Drive Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Blda. Age City (5) County (6) County Code (7) 5650 70 North Arlington, NJ Bergen Current Use (Prior if being demolished) Apartment Building Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health and Safety Services Resource Management Group, LLC 117 Street Address Street Address P.O. Box 365 2115 Hamilton Ave, Suite 202 City, State & Zip Code City, State & Zip Code Berlin, NJ 08009 Trenton, NJ 08619 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Mr. Jim Proctor 609-914-4279 856-452-1311 01185 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08-18-2016 8-31-2016 J&S Environmental Laboratories, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West X Abatement Performed during Normal Hours: City, State & Zip Code Describe: 9am - 5pm Union, NJ 07083 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure M ≥160 sf ≥260 lf Demolition X Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Amount Is Location Description of Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by SF or LF) Material (ACM) Encapsula Enclosure Remova Repair TO BE ABATED Maintenance or (i.e., thermal systems in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A Meter Room 460 LF \boxtimes X Pipe Insulation Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Resource Management Group, LLC 0035218 TBD Grows Landfill City, State Disposal Date City, State Trenton, NJ 08619 TBD Morrisville, PA Completed By (Print or Type) Title Signature Date Mr. Brian Haney President 7-29-2016

NCK# SH

7-29-2016

(Pursuant to N.J.A.C. 8:60 and 12:120) Name of Building Owner / Operator (2) Date of Notification (1) Ridge Park Apartments LLC 7-29-2016 Agencies Notified Type Notification Street Address 1122 Clifton Avenue **EPA** City, State & Zip Code DEP Initial ASRESTOS CON DOL Amended Clifton, NJ 07013 Emergency Name of Contact Telephone Number DOH Jerry Campbell DCA Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) North Arlington Apartments - Building 435Q School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) 20-B Ridge Park Drive Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age County (6) County Code (7) 5650 City (5) North Arlington, NJ Bergen Current Use (Prior if being demolished) Apartment Building Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Resource Management Group, LLC Health and Safety Services 117 Street Address Street Address 2115 Hamilton Ave, Suite 202 P.O. Box 365 City, State & Zip Code City, State & Zip Code Berlin, NJ 08009 Trenton, NJ 08619 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 609-914-4279 01185 856-452-1311 Mr. Jim Proctor Name of OSHA Monitor Scheduled Start Date (10) Scheduled Completion Date (11) J&S Environmental Laboratories, Inc. 08-19-2016 8-31-2016 Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West Abatement Performed during Normal Hours: City, State & Zip Code Union, NJ 07083 Describe: 9am - 5pm Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure Renovation Mini-Enclosure ≥3 sf or ≥3 lf ≥160 sf ≥260 lf Demolition X Glove Bag Procedures Non-Exempted and Non-Friable Procedure Abatement Type Location of Is Location Description of Amount Asbestos-Containing Asbestos-Containing (Specify Normally Used Material (ACM) SF or LF) Solely by Encapsular Material (ACM) Enclosure Remova Repair TO BE ABATED Maintenance or (i.e., thermal systems Custodial Staff? insulation, surfacing, VAT in Facility or other miscellaneous) (13)(12)Yes N/A No Meter Room 15 LF X Pipe Insulation Meter Room Associated Elbows 14 NJDEP Waste Cubic Yards Name of Registered Waste Hauler Name of Registered Landfill of Waste Hauler ID No. Resource Management Group, LLC 0035218 TBD Grows Landfill Disposal Date City, State City, State Trenton, NJ 08619 TBD Morrisville, PA Completed By (Print or Type) Title Signature Date

President

Mr. Brian Haney

5650

Street Address

1122 Clifton Avenue

Clifton, NJ 07013

Name of Contact

Jerry Campbell

County Code (7)

Telephone Number

ASCM No.

117

City, State & Zip Code

Date of Notification (1)

Agencies Notified

EPA

DEP

DOL

DOH

DCA

Street Address

North Arlington, NJ

Street Address

Berlin, NJ 08009

P.O. Box 365

20-B Ridge Park Drive

Health and Safety Services

Project Manager for Monitoring Firm

City, State & Zip Code

X

City (5)

7-29-2016

Type Notification

Name of Facility Where Abatement is Taking Place (3)

Name of Monitoring Firm Hired by Building Owner (8)

North Arlington Apartments - Building 200

Initial

Amended

Emergency

Cancellation

County (6)

Bergen

MCK#14 Name of Building Owner / Operator (2) Ridge Park Apartments LLC Telephone Number **FACILITY INFORMATION** Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) # of Floors Bldg. Age Square Feet 70 2 Current Use (Prior if being demolished) Apartment Building Name of Abatement Contractor (9) Resource Management Group, LLC Street Address 2115 Hamilton Ave, Suite 202 City, State & Zip Code Trenton, NJ 08619 Telephone Number License Number

Mr. Jim Proctor		1820-	452-1	311		1609-914-4278	1			0118	5		
Scheduled Start Date (10)	Scheduled Con)	Name of OSH							
08-11-2016	CARL STREET, S	-	2016			J&S Environn		ratories, In	C				
Occupancy Status During Abate						Street Addres							
☐ Facility Closed/Vacated			of Ab	ateme	ent	2333 Route 2							
Abatement Performed of		ours:				City, State & .							
Describe: 9am – 5pm						Union, NJ 07	083						
Facility Occupied During													
Scope of Work (Check all that a	apply)						Salaria Mary Marian						
							☐ Full (Containme	nt with Ne	gative	Pres	sure	
≥3 sf or ≥3 lf		\boxtimes	Re	novati	on			Enclosure					
≥160 sf ≥260 If			De	molitio	n		⊠ Glove	e Bag Proc	edures				
							☐ Non-	Exempted	and Non-	Friable	Pro	cedu	re
Location of		Is	Loca	tion		Description			nount			ent T	
Asbestos-Containi	ng	Nor	mally	Used		Asbestos-Con		(S	pecify				
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TO BE ABATED		Mair	ntenar	nce or		(i.e., thermal s	ystems	I Santa And		er	R	32	nc
in Facility		Cust	todial	Staff?		insulation, surfac	ing, VAT			Remova	Repair	sde	los
(13)			(12)			or other miscell	aneous)			Va	₹:	Encapsulat	Enclosure
		Yes	No	N/A								#	CD
Boiler Room					Pipe 1	Insulation		8	5 LF				
Boiler Room					Assoc	ciated Elbows			4				
Storage Room					Pipe !	Insulation			200				
Storage Room					Assoc	ciated Elbows			8				
Meter Room					Pipe 1	Insulation			325				
Meter Room					Assoc	ciated Elbows			10				
Name of Registered Waste Hau	uler		N.	JDEP	Waste	Cubic Yards	Name of R	egistered l	andfill				
				auler I		of Waste							
Resource Management Group,	LLC		00	35218	3	TBD	Grows Lan	dfill					
City, State						Disposal Date	City, State						
Trenton, NJ 08619						TBD	Morrisville,	PA					
Completed By (Print or Type)			Ti	tle	20	Signature	11			Date			
Mr. Brian Haney			Pr	esider	nt	6 Ma	110V			7-29-2	2016		
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Date of Notification (1) Name of Building Owner / Operator (2) 7-29-2016 Ridge Park Apartments LLC Agencies Notified Type Notification Street Address **EPA** 1122 Clifton Avenue DEP Initial City, State & Zip Code \boxtimes ODESTOS CONTROL DOL Amended Clifton, NJ 07013 X Telephone Number DOH Emergency Name of Contact Cancellation DCA Jerry Campbell **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) North Arlington Apartments - Building 30 School (K-12) Street Address Subchapter 8 (Other than K-12) 20-B Ridge Park Drive Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 3775 70 North Arlington, NJ Current Use (Prior if being demolished) Bergen Apartment Building Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. Health and Safety Services 117 Resource Management Group, LLC Street Address Street Address P.O. Box 365 2115 Hamilton Ave. Suite 202 City, State & Zip Code City, State & Zip Code Berlin, NJ 08009 Trenton, NJ 08619 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Mr. Jim Proctor 856-452-1311 609-914-4279 01185 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08-23-2016 8-31-2016 J&S Environmental Laboratories, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West X Abatement Performed during Normal Hours: City, State & Zip Code Describe: 9am - 5pm Union, NJ 07083 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf П Renovation Mini-Enclosure X ≥160 sf ≥260 lf X Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulat Enclosure Remova TO BE ABATED Repair Maintenance or (i.e., thermal systems in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A Laundry Room X Pipe Insulation 150 LF X Laundry Room X Associated Elbows \boxtimes 6 Storage Room X Pipe Insulation 225 X Storage Room X X Associated Elbows 6 Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill of Waste Hauler ID No. Resource Management Group, LLC 0035218 TBD Grows Landfill City. State Disposal Date City, State Trenton, NJ 08619 TBD Morrisville, PA Completed By (Print or Type) Title Signature Date Mr. Brian Haney President 7-29-2016

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Date of Notification (1) 7-29-2016		ame of Buildi dge Park Ap			(2)	11J)r=				
Agencies Notified Type Notification		reet Address				Timil -			-	
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DOL Amended		ifton, NJ 070								1
□ DOH □ Emergence □ DCA □ Cancellation	2	ame of Conta	act			ASBEL	Telepho	ne wur	npe	6 1
- DOA - Gaincellati	011					L1			Accessive of the passes	
		FACILITY I	INFORMAT							
Name of Facility Where Abatement is North Arlington Apartments – Building				of Facility School (K-						
Street Address	1 20				er 8 (Other tha	an K-12)				
20-B Ridge Park Drive						nmercial buildin	gs, hom	ies, etc	:.)	
				are Feet	# of Flo		Bldg. Ag		-	
City (5) Cou	nty (6) Cour	nty Code (7)	4,40	0	2			70		
North Arlington, NJ Ber	gen				Prior if being d	emolished)				
				tment Bui						
Name of Monitoring Firm Hired by Bu Health and Safety Services	ilding Owner (8)	ASCM 117			ement Contraction					
Street Address		1117		et Address		ир, сес				
P.O. Box 365					Ave, Suite 20	02				
City, State & Zip Code			City,	State & Z	ip Code					
Berlin, NJ 08009	1= ; ;			ton, NJ 08						
Project Manager for Monitoring Firm Mr. Jim Proctor	856-45	one Number		phone Nui 914-4279	mber	License N	Number 0118	5		
	duled Completion			e of OSH	A Monitor		0110	13		_
08-16-2016	8-31-20				ental Laborato	ories Inc.				
Occupancy Status During Abatement	The second secon	NAME OF TAXABLE PARTY.	-	et Address						
☐ Facility Closed/Vacated Durin				Route 22						
	Normal Hours:			State & Z						
Describe: 9am – 5pm	tamant.		Unic	n, NJ 070	83					
Facility Occupied During Abar Scope of Work (Check all that apply)	tement									-
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Material (ACM)		ely by		aterial (AC		SF or LF)	_		П	m
TO BE ABATED		nance or		hermal sy			Rer	R	Enca	nc
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(13)		12)	or othe	er miscella	neous)		<u>a</u>	=	capsulat	Te
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Boiler Room			ssociated E			5			4	믬
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Meter Room		□ X A	ssociated E	IDOWS		6		+	#	님
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Name of Registered Waste Hauler		NJDEP Wa	aste Cubic	Yards	Name of Reg	istered Landfill				
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Resource Management Group, LLC		0035218	TBD		Grows Landfi	II				
City, State		*	The state of the s		City, State					
Trenton, NJ 08619	<u> </u>		TBD		Morrisville, P	Α		Of the Print		
Completed By (Print or Type)		Title	Signat	ure			Date			
Mr. Brian Haney		President		() \	X //		7-29-	2016		1

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Date of Notification (1)	14 /	2016				_		ner/Operator (2	?) nited Partnersh		CE		Ŵ	
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Agencies Notified EPA	Type Notificati	ion			Street	Address		" D "I	I 05 D		UG 1	9	016	To make gar
Ø DOLWD	Amended				C/O	he Cor	mm	unity Builde	rs Inc 95 Ber	keley Street			010	1
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DCA	☐ Emergency		uding			ston, MA		2116			STOS			8
(NJAC 5:23-8)	justification	100				of Contact				Telephone Nur	nber = \	SINE	-	
* .	Cancellation	on		-544 y		Ronald V	-	RMATION				-		
Name of Facility Where A	hatament is To	lkina [Diago	(2)	FAC	ILII IN	1 01	NIMATION	Type of Facility (/ \				
la company of the com		. 8	riace	(3)					School (K-12					
Bergenview/New F	lope Housi	ng							Subchapter 8		2)			
Street Address									Other (i.e., pr	ivate and comm	ercial bu	ilding	S,	
654 Bergen Avenu	ie						-1123		homes, etc.)	# of Floors	DI	J = 1		
City (5)									Square Feet		11	dg. Ag	je	
Jersey City					1.	A 1 (7)	/O.T.4	TE 1105 011110	84,000	7		92		
County (6)					Count	y Code (7)(SIA	TE USE ONLY)	Current Use (Pri	100 Sept. (200)	iisnea)			
Hudson							1		Residential H	Housing				
Name of Monitoring Firm		ing Ov	wner (8	3)	ASCM I		2000		ent Contractor (9)					
AHERA Consultan	ts, Inc				0005	57			atement Inc.					
Street Address							35.65	reet Address						
PO Box 385									n Drive, Suite	e A				
City, State, Zip Code							Cit	ty, State, Zip Co	ode					
Oceanville, NJ 082									ell, NJ 07006					
Project Manager for Moni	toring Firm			Tele	ephone l	No.	Те	lephone No.		License No.				
John Smoyer					-	2-1833		(973) 808		00411				
Start Date (10)		chedu 08		mple 16	etion Dat		1000	me of OSHA N Superior Abate						
Occupancy Status During	Abatement (C	heck	only o	ne)			Str	reet Address						
☐ Facility Closed/Vacate					ment			2 Henderson I	Drive, Suite A					
☐ Abatement Performed						cribe		ty, State, Zip Co				-		
Time of Abatement:				_PM		MA		West Caldwell						
X Facility Occupied Scope of Work (Check all		emei	nt				,			. 5				
□ ≥3 sf or ≥3 lf			⊠ Rei	nova	ion			Mini-End	tainment with Neg losure	ative Pressure				
≥160 sf or ≥260 lf			De	moliti	on			Gloveba	g Procedure		posessi -			
								☐ Non-Exe	mpted (*) and No	n-Friable Proced	1 2			
				Loca Iorma					,		Ab	atem	ent T	уре
Location Asbestos-Containing		,			ely by	Ashe	estos	Description of Containing Ma		Amount	Rer	Repair	Enc	Enc
TO BE ABA	TED	_			ance/		e., th	ermal systems	insulation,	(Specify	Removal	pair	aps	Enclosure
IN Facili	ty		Cust	odiai (12	Staff?			surfacing, VAT		SF or LF)	<u>a</u>		Encapsulate	ure
(13)			Yes	No	7	-	0	mer miscellane	ous)				te	
Bsmnt 101, 102, 118, 11	19, 120, 121,1	123,	П	×		Pipe	Insu	lation & Fittin	gs	321 LF	×			
and 103			$\overline{\Box}$			· ·			<u> </u>				П	П
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G.														
Name of Registered Was	te Hauler				NJDEP N	Waste	200300	ubic Yards of	Name of Regis	stered Landfill				
Service Transport In	C.				Hauler I SW21		W	aste 10	Minerva En	terprises				
City, State	7				0112		Di	sposal Date	City, State					
New Castle, DE							5	8/16/16	Waynesbur	ah. OH				
Completed By (Print or T	ype)	Title						Signature			Date			
Nick Petrovski	enervisivitä ili	Pre	esider	nt				Nic	ck Petrov	ski	7/14/2	2016		

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

GAC Project # 060-16					- 10	. (0)				
Date of Notification (1)	0046				Name of Building Owner/Op RUTGERS, THE STA	perator (2)	RSITY OF	- NJ		
July 28 Agencies Notified □EPA □DCA ☑ DOL ☑ DEP- No Longer REQUIR ☑ DOH		Notification ⊠Initial N □ Amende □ Emerge justifica □ Cancelle	otificati ed Notifi ency (in ation)	ication#	Street Address ENVIRONMENTAL HI 27 ROAD 1, BLDG 40 City, State, Zip Code PISCATAWAY, NJ 08 Name of Contact MICHAEL SMITH, EN HEALTH & SAFETY	EALTH & D86, LIVING	SAFETY [DEPT. AMPUS		The second secon
				FACILITY INFO	The state of the s		AUU I	2010	SHOW!	
Name of Facility Where Abater VORHEES HALL, BLD Street Address)G# 301:	3		, AGILIT IN	Type of Facility (4) School (K-12) Subchapter 8 (other than head of the community of the	(-12) nercial buildin	ESTOS CO LICENSII gs, homes, et	vG c.)		And the street of the street o
COLLEGE AVENUE C	AIVIPUS				Sq. Feet: N/A # o	f Floors: 3	Bldg. Age:	80+ yea	rs	
City (5) NEW BRUNSWICK	County (6)	LESEX		Code (7) Jse Only)	Current Use (prior if being of	demolished):	ACADEMIC	;		
Name of Monitoring Firm Hired	i by Bldg. C	Wner (8)	ASCM ! 0098		Name of Contractor (9) GREENWOOD ABATE	EMENT CO	NSULTAN	TS, INC.		
3 TERRI LANE					268 MAIN STREET					
	08016	Tolonhana	lumbor		City State, ZipCode BUTLER, NJ 07405 Telephone Number		License Num	ber		
Project Manager for Monitoring BRIAN KEARNY	g Firm	Telephone N 609-386			973-492-0477		00840			
Scheduled Start Date (10) 08/12/16		Scheduled 0 08/15/16	Completio	n Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC.					
Occupancy Status During Al Facility Closed/Vacated I Abatement Performed Out Describe Other – Describe: Schedule: 4PM – 5AM (2)	During Enti	re Period of A ormal Facility	Abatemer Hours -		20-21 WARGARAW R City, State, Zip Code FAIRLAWN, NJ	ROAD	9			7.7
Scope of Work (Check all that	apply)			2	120			-3 - 9		
	260 If	ocation Norma	Ilv Used	☑Renovation ☐ Demolition ☐ Description of Asl	☐ I ☐ G ☑ N bestos Containing Material	Mini-Enclosu Glovebag Prod Non-Exempte Amoun	cedure / Wrap d (*) and Nor t Abate	& Cut		-e
Material (ACM) in Facility (13)	Sole	ely by Maint./C f? (12)		(ACM) (i.e. therm VAT, or other mis	nal systems insulation, surfacin	ng, (Specifi or LF)	y SF Remo	ve Repair E	ncap E	nclose
Rooms 001 & 006F		X		VAT		1200	SF 🗵		9	
									1611	
Name of Reg. Waste Hauler See Hauler Below #1 &	2	NJDEP Wa		r ID#	Cubic Yards of Waste:	20 CY	Name of Re G.R.O.W.	S. North L	andfi	II
Hauler #1) Greenwood Abat NJDEP # 12561 Hauler #2) Newark Carting, NJ DEP # 4509	Inc., News			NJ 07405		Disposal Da 07/25/201	77.77.00	City, State 100 New I Rd. Morri 19067 215-736-1	Ford M sville,	
Completed by (Print or Type) RAYMOND C. PEDAI		Title SENIOR F		СТ	Signature Raymand C. Ped	lalino	Date July	28, 2016		

From: Elena Solakov Prist: Form

To: NUDOL Asbestos Page 2 of 4

2016-07-25 16:10:19 (GMT)

EDS16-200		NOTIF	ICATION	inder of Ne I OF ASE to NJAC	ESTOS	ABATE	MEN'	Pa: Chi	ge 1 c cck # 23(E	C		l V
Date of Notifipation (1) 7/25/2016			Name o	f Bullding rds Tow	Owner/ vnship	Operator Board of	(2) of Ec	lucation				AUG	1	20
Agencies Notified Type Notification	1		Street A							1.				_
EPA Initial Amended Amendmen	nt#		City, Str	ate. Zip C	ade					1 1	200	b	ENS	DAITE DAIS
DOH Emergency	(Including		Name o	f Contact					Telepho	na Nun	per			
Resid Resid				Harding		10N								
Name of Facility Where Abatement is Taki Liberty Corner School	ng Place (3)			O I NIME I	1	Тур	e of Facility (4)		-			
Street Address	_						F	School (K-1 Subchapter		an K-17	3 \			
61 Church Street						.		Other (i.e. p	dvate & co	mmercia	al bu	idings	, home	B\$,
City (6) Liberty Corner								are Feel 000+	# of Flo	org		Bldg / 40+	A β¢	
County (8) Somerset			County (STATE	Code (7) USE ONLY	2		Curt	ent Use (Prio	r If being d	emolish	ed)			
Name of Monitoring Firm Hired by Building Ahera Consultants	Owner (8))	A8GA		W-1	Nams GL G	of Ab	atement Con	tractor (9)					
Street Address PO Box 385						Street	Addre	68		-			_	_
City, State, Zip Code						City, St	iste, i	ourg Turn¢ Zip Code	-					
Oceanville, NJ 08231-0385 Project Manager for Monitoring Flori			Telepho				-	dale, NJ 0						
John Smoyer		1	(609)	352-183		(201)		(1.T.0)	1000000	ense No 084	0,			
Start Date (10) 7-26-2016	7-29-2	016	mpletion	Date (11)		Name of		HA Monitor						
Occupancy Status During Abatement (Che	100	33				Straet		ourg Turnp	ille =	******				
Facility Closed/Vacated Durling Entire Abatement Performed Outside of Non Other - Describe;	Period of a	Abatet y Hour	neni s			City, St	āfe, 2	ip Code						-
Scope of Work (Check All That Apply)		- 12				Blook	nıng	dale, NJ 0	7403					_
23 sf or ≥3 lf 2 ≥160 sf or ≥260 lf		Senoli Senoli					Mi Gl	Il Containme ni-Enclosure ovebag Proc n-Exempled	edute				ė	
Location of		Local	200000									Abate	ment pe	
Asbeston-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intens todial : (12)	noe/		los Cont thermai surfac	scription : laining M: systems sing, VAT niscelland	aleria insui f, or	ation.	Amou (Speci SF or L	fγ	Remova	Repair	Encapsulate	Endosure
	Yes	No	N/A								<u> </u>	'	ate	ਨ
Room 111		X				g (Wra		8570	3 lf		x			
Room 112		X	-	-		g (Wraj			1 lf		X			
Hallway	+	X		Fip	e ratin	g (Wra	pa	Jul)	6 If		x			
Name of Registered Waste Hauler GL Group, Inc		+	JOEP W lauler ID 033034		Gubic of Was TBD			Name of R	egistered L	andhli				
City, State Bloomingdale, NJ					Dispos TBD	al Date		City, State Waynes	burg, OH					
Completed by Michael B Solakov	Title P.M.				S	ignature	.,4	m della		Date	5-2	016		

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

EDS16-200		N		ATION	e of New OF ASBE NJAC 8		ck#	2305		W		n				
Date of Notification (1) 7/25/2016					Building O ds Town					3	HIC		0010		Contraction of the Contraction o	
Agencies Notified Ty	ype Notification		1.32	Street Ad	dress achtree	Roard			-	4	AUG	1	ZUIO			
EPA DEP X DOL	Initial Amended Amendment	-			e, Zip Coo g Ridge,		920	4-2				NSIN		L &		
➤ DOH DCA	Emergency (injustification) Cancellation	including	11.03	Name of Dave H						Tele	ephone Num	iber				
				FACIL	ITY INFO	RMATIC	N	Τ	of Facility (4	4						
Name of Facility Where Aba Liberty Corner School Street Address		g Place (3)						×	School (K-1 Subchapter	2) 8 (Othe	er than K-12)	lings	homo	•	
61 Church Street									Other (i.e. p etc.)	rivate 8	x commercia	ii bulic	iings,	nome	٥,	
City (5) Liberty Corner								(0)(0,0)	are Feet)00+	# of 2	Floors	1000	idg. A	ge		
County (6) Somerset				County C	ode (7) SE ONLY)		_	Curr	ent Use (Prid 1001	or if bei	ng demolish	ed)				
Name of Monitoring Firm H Ahera Consultants	ired by Building (Owner (8)		ASCM 0057	No.				atement Cor o, Inc	tractor	(9)					
Street Address PO Box 385							Street 140		ess burg Turn	pike						
City, State, Zip Code Oceanville, NJ 08231	-0385								Zip Code dale, NJ 0	7403						
Project Manager for Monito John Smoyer	- 1	Telephor (609) 6	ne No. 52-1833	3	Telepi (201		No. -9725		License N 01084	0.						
Start Date (10) 7-26-2016		Schedule 7-29-20	ca complation auto (11)				4.500		SHA Monitor o, Inc			50.51				
Occupancy Status During A	Abatement (Chec	k Only On	ie)	Section 1			Street	Addre	ess							
Facility Closed/Vacate Abatement Performed	ed During Entire I	Period of A	Abatem	ent					burg Turn Zip Code	rnpike						
Other - Describe:		-				-	Bloc	ming	dale, NJ (07403						
Scope of Work (Check All 7	That Apply)															
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			Renova Demolit					M G	ull Containm ini-Enclosure lovebag Pro on-Exempte	e cedure	877			e		
		1-	Locati					- 14	on Exempte	u () u.		T	Abate	ment		
Location o	f	1	Normal	ly		Des	scription	n of				-	Ту	ре		
Asbestos-Containing M TO BE ABAT In Facility (13)	laterial (ACM) ED	d Sole intenar todial S (12)	nce/		tos Cont thermal	aining I system cing, V	Materi ns insu AT, or		(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure		
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Room 11		-	X	-		e Fittin	<u> </u>	0			1 If	X				
			X	-		e Fittin	~ `	-		1000	6 If	x				
Hallway			^		rip	e i ittiii	g (vvi	ар и	Outj	-		+				
Name of Registered Waste	Hauler		IN	JDEP W	/aste	Cubic	Yards		Name of	Regist	ered Landfil					
GL Group, Inc			Hauler ID No. of V 0033034 TBI				ste		Minerv	а						
City, State Bloomingdale, NJ	Disposal Date TBD					City, Sta Wayne		, OH								

Title

P.M.

Signature

Date

7-25-2016

Completed by

Michael B Solakov

check # 2316 Page 1 of 1

Date of Notification (1) 7-28-2016		Name of Building Owner/Operator (2) Caldwell- West Caldwell Board of Education												
Agencies Notified Type Notification		882	Street Add 104 Gra	iress y Street					10 1					
EPA Initial Amended Amendment		_ '	West Ca		IJ 07006-7	7696		II III AC		20	Ь			
Emergency (injustification) DCA Emergency (injustification) Cancellation	ncluding	1000	Name of C Frank E	nnis		10	1	Telephone N	umber.	· · · · · ·	OL 8	k		
			FACILI	TY INFOR	MATION	T =	f Facility (4)					=		
Name of Facility Where Abatement is Taking Jefferson Elementary School Street Address	Place (3)					X S	of Facility (4) School (K-12 Subchapter 8) 3 (Other than K-	12)					
85 Prospect Street						e	other (i.e. pri etc.) e Feet	# of Floors		dg. Ag		1		
City (5) West Caldwell						5,000)+	1)+				
County (6) Essex			County C (STATE U			Scho		r if being demol	isnea)					
Name of Monitoring Firm Hired by Building (Ahera Consultants Inc	Owner (8)		ASCM 0057	No.	100000000000000000000000000000000000000	e of Abat Group.	ement Cont	ractor (9)						
Street Address			0001			t Addres		iko						
PO Box 385 City, State, Zip Code					City,	State, Zi						\dashv		
Oceanville, NJ 08231-0385						omingo ohone N	lale, NJ 0	7403	No.					
Project Manager for Monitoring Firm John Smoyer			Telephon (609) 6	52-1833	201	-710-9	725	01084						
Start Date (10) 8-8-2016	Schedule 8-12-20		mpletion [Date (11)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e of OSI Group	HA Monitor , Inc							
Occupancy Status During Abatement (Chec						et Addres	ss ourg Turnp	oike						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of A nal Facility	Abater Hour	patement											
Scope of Work (Check All That Apply)		- V)							Alies:					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				Mir Gle	ni-Enclosure ovebag Prod				e			
	Τ.					INC	II-Exemples	/) and record		Abate	ment			
Location of	l N	Loca: Norma	ally		Descripti	on of			-	T	pe			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intena	Staff?	(i.e. tl	os Containing hermal syste surfacing, \ other miscel	ms insul /AT, or	ation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
Becoment Hellway	X	140	1803	Br	reeching In	nsulatio	on	120 sf	X					
Basement Hallway														
Name of Registered Waste Hauler			NJDEP W	/aste	Cubic Yards	S	Name of	Registered Lan	dfill					
GL Group, Inc		Hauler ID No. of Waste 0033034 TBD					Minerva							
City, State Bloomingdale, NJ		Disposal Dat TBD				ate	City, Stat Wayne	te sburg, OH						
Completed by Elena Solakov	iden	t		Signat	ure	Derm Sil	ulla	Date 7-28-2	2016					

EDS16-155

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

check # 2317 Page 1 of 1

Date of Notification (1) 7-29-2016	Name of Building Owner/Operator (2) Caldwell- West Caldwell Board of Education									-,					
Agencies Notified Type Notification		100	Street Add		t						AUG	1	201	6	
EPA Initial DEP X Amended Amendment #	:1		City, State West Ca	, Zip Coo aldwell,	le NJ 07	7006-76	696		4						
Emergency (ii justification) DOA Cancellation	ncluding	100	Name of 0 Frank E						Tele	ephone	Numt		INTE	OL 8	
Z DCA Carrochatter			FACILI	TY INFO	RMATI	ON									
Name of Facility Where Abatement is Taking Washington Elementary School Street Address	Place (3)						X	of Facility (4 School (K-12 Subchapter	2) 8 (Othe	er than	K-12)				
201 Central Avenue					12			Other (i.e. pretc.)					ngs, r		i,
City (5) West Caldwell							5,00		2	Floors		40		е	
County (6) Essex			County C (STATE U			_	Scho	ent Use (Pric	r if bei	ng dem	nolishe	ed)			
Name of Monitoring Firm Hired by Building C Ahera Consultants Inc	owner (8)		ASCM 0057	No.			of Aba Group	tement Con , Inc	tractor	(9)					
Street Address			0001				Addre								
PO Box 385						The second		ourg Turnt ip Code	oike					3m × 10	
City, State, Zip Code Oceanville, NJ 08231-0385								dale, NJ 0	7403						
Project Manager for Monitoring Firm John Smoyer			Telephon (609) 6		3	201-	none N 710-9	725		0108	ise No 34).			
Start Date (10) 7-11-2016	Schedule 8-19-20		mpletion D	ate (11)		7982386 983	of OS Group	HA Monitor , Inc							
Occupancy Status During Abatement (Chec			1 140 Hamburg III												
Facility Closed/Vacated During Entire R Abatement Performed Outside of Norm Other – Describe: Building will be occu	al Facility	Hour	ours City, State, Zip Code												
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	the same of the sa	Renova Demoli					Mi Gl	ull Containmoni- ini-Enclosure ovebag Pro- on-Exempte	e cedure					2	
		20 00	20				NO	on-Exemple	u () ai	IU NOIT	-r nau		Abate		
	7000	Loca: Norma	3437922										Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cus	ed Sole intena todial (12)	ely by ance/ Staff?		tos Cor therma surf	escriptio ntaining al system acing, V miscella	Materia ns insu AT, or		(Amoun Specify F or LF	/	Removal	Repair	Encapsulate	Enclosure
0 1	Yes	No	N/A		Pin	e Insul	ation		2	2,250	lf	X			
	Crawlspace A X Crawlspace B X					e Insul				750 lf		X	_		
Crawlspace B		-			e Insul			_	380 lf	-	X	-			
Crawlspace C	X		-		Lih	C II ISUI	audit			200 11	2 	-			
Name of Registered Waste Hauler GL Group, Inc			Heritar ID Na of Monto			Name of Minerv		tered L	andfill						
City, State Bloomingdale, NJ		Disposal Date City				City, Sta Wayne		g, OH		3			21		
Completed by Elena Solakov	siden	t			Signatu	re (Cleru Si	ulla	/	100000	ite 29-2	016			

CK = 25224

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

								IN E	TÇ.		5 /7			
Date of Notification (1)				Name	of Building	g Owner/Operator		11111 5	iE	d	W	FU		
	28/16						DiPiero	11231						
Agencies Notified	Type Notification			Street	Address			111 111			7	- 1		
□ EPA	Initial							AUG		2	016			
DEP DOL	Amended Amendment #		Ī	City, S	State, Zip C		20 at -0 (4/00) b 200-04	1 1						
N DOL	Emergency (ii		7			Merc	chantville, N.	J 081 09 ———			the same	[
⊠ DOH	justification)			Name	of Contac			Telephone Numb	er Nic	CHAI	n.	2		
□ DCA	Cancellation				Mi	chael DiPiero)							
				FAC	II ITY INF	ORMATION								
Name of Facility Where	Abatement is Takin	n Place	(3)	171	JILITT IN	Ordinarion	Type of Facility	, (A)		_				
Traine or radinty vinore		denti					School (K-1							
Street Address	103	delle	41				Subchapter	8 (Other than K-12)					
oli doli riddi doc								orivate & commercia	al build	dings	1			
City (5)							homes, etc	.) # of Floors	I DI	dg. A	a a			
City (5)	Mercha	ntvill	a Mi	r			2000	7			+/-			
County (6)	IVIEICIIA	шіліі	e, IV.		t. Codo /	7) (STATE	-	rior if being demolis	-	00	т/-			
	amden				ONLY)	(STATE	Current Use (F	rior it being demoils	nea)					
Name of Monitoring Firm	CONTROL OF THE PROPERTY OF THE	Our===			_	Name of Abot-		2/						
Name of Monitoring Firm (8)	MECS	owner		ASCM	110.		nent Contractor (. T.					
	MECS						ens Environ	mental Service	s, II	1C.				
Street Address	DO D 24	1				Street Address	DO 1	200						
	PO Box 34	1				-		Box 322						
City, State, Zip Code	. 1 377	0051	_			City, State, Zip C		377.00501						
	rosswicks, NJ	0851:		-			Allentow	n, NJ 08501						
Project Manager for Mo			- CO 100 C	phone	No. of the contract of the con	Telephone No.		License Ne-						
	eisgarber		(60	9) 29	8-4070	(609) 2:	59-9688	0	049.	3				
Start Date (10)	Sche	duled C	omple	tion Da	te (11)	Name of OSHA			00001150-					
6/8/16			6/9/1	6		(<u>-</u>	N	ŒCS						
Occupancy Status Durin	ng Abatement (Che	ck only	one)			Street Address								
▼ Facility Closed/Vacat	ted During Entire Pe	eriod of	Abate	ment			PO I	30x 341						
☐ Abatement Performe	d Outside of Norma	al Facilit	y Hou	rs		City, State, Zip C	ode		777					
Other - Describe:						Crosswicks, NJ 08515								
Scope of Work (Check a	all that apply)													
Mar 2 - 4 2 14		ME D					ntainment with Ne	egative Pressure						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emolitic			☐ Mini-En	ciosure ag Procedure							
			or months			Non-Ex	empted (*) and N	on-Friable Procedu	e					
			ocatio						A		ment			
Location	of		ormally I Solel			Description of	•			Тур	е			
Asbestos-Containing I			ntenan		Asbest	tos Containing Ma		Amount			-			
TO BE ABA	TED	1 250	ustodia	al		thermal systems	insulation,	(Specify	Re	R	nca	E		
IN Facility (13)	y	,	Staff? (12)			surfacing, VAT other miscellane		SF or LF)	Remova	Repair	Encapsulate	Enclosure		
(10)		-	200	_		other misochane	ous)		Val	=	ulat	ure		
		Yes	No	N/A							æ	- Lord		
Crawl S ₁	nace	×			Th	ermal Pipe In	sulation	6 lf	×					
					Pipe Debr		15 sf			_				
Crawl St	Dace	×			-	Tipe Deoi	10	13.81	×					
Name of Registered Wa	iste Hauler		10.00	JDEP \		[10] [10] - [10								
Stevens Environi	mental Service	s, Inc	. 1	lauler ID 182	292	of Waste 1 CU GROWS Landfill								
City, State						Disposal Date City, State								
Allentown, NJ						8/9/16	ma.	Morrisville,	PA					
Completed By Title						Signature	N X V/	Date	1					
Mahlon E. Ste	- ASAMO		ager	/M	//		7/28	3/16						
ACD 44		^ ^	2,00		77-1									

ASB-44 MAR 00

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

CK#25227

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

									INEG		77	0.7	
Date of Notification (1)				Name	of Building	g Own	er/Operator	(2) Purtell	1111/1-1		Ш	W	E
Resilian policies de	7/30/16 Type Notifica	tion.		Chront	A dalagon			ruiten					
Agencies Notified	1	ition		Street	Address		6		LI AU	3 1	21	116	
	Initial Amended		+	City S	tate, Zip C	ode					4	110	-1
⊠ DOL	Amendme		_	Oity, C	riaic, zip c	,ouc	Swe	edesboro, NJ	08085				the state of the s
⊠ DOH	iustificati	cy (including on)	-	Name	of Contac	f	Ditt	acsocio, 115	Telephone Num	ber.	CIVI	HOL	8
□ DCA	☐ Cancellati			Ivallic			l DiPiero)	Tolophone radin	PATRIC	INIC		_
													-
NI	- Al4	aldes Diseas	(2)	FAC	CILITY INF	ORIVIA	TION	Type of Facility	(4)			_	
Name of Facility When		aking Piace Cesidentia	200					355					
Street Address		Cesidellille	11					School (K-12	8 (Other than K-1)	2)			
Street Address								Other (i.e., p	rivate & commerc	ial build	lings,		
City (5)								homes, etc.	# of Floors	I Ble	dg. Ag	ie.	-
City (5)	STE	edesboro	NI					1800	2		85-		
County (6)	5W	cuesooro	, 113	Cour	nty Code (7	7) (\$7	ATF		rior if being demoli	shed)	0.5		_
	loucester			USE	ONLY)	, (0,	712	Odirent ose (i i	ior il bollig derrion	onou)			
Name of Monitoring Fir		ling Owner		ASCM	No.	Nam	e of Abater	nent Contractor (9)				
(8)	MECS	ing owner		7100111	. 10.	1.150		vens Environ		es. In	C.		
Street Address	1.1100					Stre	et Address			,			
31130171441333	PO Box	341						PO E	3ox 322				
City, State, Zip Code	1020					City.	State, Zip (Code					_
	Crosswicks,	NJ 0851:	5						n, NJ 08501				
Project Manager for M				phone	No.	Tele	phone No.		License Ne-				
	/eisgarber		(60	9) 29	8-4070		(609)2	59-9688		00493	3		
Start Date (10)		Scheduled C	omple	tion Da	te (11)	Nam	e of OSHA	Monitor					
8/22/16		8	3/31/	16				M	ECS				
Occupancy Status Du	ring Abatement	Check only	one)			Stre	et Address		2 2007				
☐ Facility Closed/Vac	ated During Enti	re Period of	Abate										
☐ Abatement Perform			y Hou										
Other - Describe:	8 am to 4 p	m		Crosswicks, NJ 08515									
Scope of Work (Check	k all that apply)						П г.: II С-	ataianaat with No	active Procesure				
≥3 sf or ≥3 lf		₩ Re	enovat	ion				ntainment with Ne closure	gative Pressure				
≥160 sf or ≥260 lf			emolitic				Gloveb	ag Procedure	- F: LL D	0			
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Locatio			Sole		A - b		escription of		Amount	-			
Asbestos-Containing TO BE AB			ntenar ustodia				ntaining ivia	insulation,	(Specify	R		Encapsulate	Ш
IN Faci	ility		Staff?			surf	acing, VAT	, or	SF or LF)	Remova	Repair	aps	Enclosure
(13))		(12)			othe	r miscellane	eous)		Val	air	ulat	sure
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Name of Registered V			1	NJDEP Hauler II		75.72.00	ic Yards /aste	Name of Reg	istered Landfill				
Stevens Environ	nmental Serv	vices, Inc		18	292	2000000	2 CU		GROWS La	ndfill		_	
City, State	562	(STANCE)					osal Date	City, State	1	Jegevoni.			
	Allentow	n, NJ				_	3/9/16	ANI	/ Morrisville	, PA			_
Completed By	· New York Control of the Control of	Title	0/30		and introduction		Signature	1.7	Date 7/30/16				
Mahlon E. S	stevens	P	rojec	t Mai	nager		114			1/30)/16		

ASB-41 MAR 00 * Do not use this form for asbestos licensure exempted-activities.

State of NJ Notification of Asbestos Abatement D&S Proj. #: 16-226 (Pursuant to NJAC 8:60 and 12:120) 15 Name of Building Owner/Operator (2) Date of Notification (1) 0 7 / 2 5 / 1 6 2016 AUG lily hawryluk Agencies Notified Type Notification Street Address EPA Initial ASRESTOS CONTROL & Amended DEP LICENSING City, State, Zip Code Amendment #: DOL ☐ Emergency MONTCLAIR, NJ 07042 (including X DOH Telephone Number Name of Contact justification) ☐ DCA Cancellation lily hawryluk **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) lily hawryluk Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) MONTCLAIR essex Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Telephone Number License Number Project Manager for Monitoring Firm Phone Number 01169 973-345-8020 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. Street Address 08/08/16 08/30/16 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure Mini-enclosure
Glovebag proce >3 sf or >3 lf \boxtimes Renovation Glovebag procedure >160 sf or >260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely E Location of Е е е by maintenance/custodial n asbestos-containing Description of asbestos-containing n m p C staff(12) (Specify SF or material (acm) to be material (ACM) C 0 a а abated in facility (13) v Yes No N/A D P X 62 l ft BARE HEATING PIPES BASEMENT M BOILER INSULATION 50 sq ft BASEMENT boiler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# Registered Waste Hauler 13506 D & S RESTORATION, INC. TULLYTOWN, RESOURCE RECOVERY 2 yds. Disposal Date City, State City, State 08/09/16 PATERSON, NJ 07503 TULLYTOWN, PA Signature Completed by (Print or Type) Title

BOGDAN JOLDZIC

ASR-41

PRESIDENT

Do not use this form for asbestos licensure exempted activities.

07/25/016

VIA U.S. HAIL Ch# 3696

Date of Notification (1)	2/22/16		Name o	f Building (Owner/Ope	rator (2	2)	<u> </u>				22.0
,	7/27/10	9	隐	O'HA	HORA	N	RYANT	PLLC	-	0.7		
Agencies Notified	Type Notification		Street A		j.			J.作。作		W	5	n)
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D, DEP	Amended			ate, Zip Co		11	-w YAH	ALMON	162	016		Ul
DOL DOL	Amendment #		NE		Since	NE	-w 7014	Telephone Num	_	UIU		-
X DOH	justification)		Name o	f Contact	01	101	loran	Telebuoge www			٠ ـ	^
DCA	☐ Cancellation		IMK	NEI	U I	+H1	TOICHIN	ASBECTOS'	OON	TROI	- &	
Name of Facility Where	Ahatement is Taking	Place (3)	FACI	ILI I Y INFO	RMATION	17	Type of Facility	(4) LIGE!	WHS)	-		
Name of Facility Villere	Apatement to running	1 1400 (0)					☐ School (K-					
Street Address .		^				-	☐ Subchapte	r 8 (Other than K-12)	22		
Olf Oct / rout ove		/ \				1)	Other (i.e.)	private & commercia	il build	lings,	home	∌S,
City (5)	7					5	Square Feet	# of Floors	Bi	ldg. A	ge	
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Parsippany Troy Hills Board of Eduction 07 16 26 Street Address Agencies Notified Type Notification **⊠** EPA 292 Parsippany Road □ DOLWD ☐ Amended ASBESTOS CONTROL A City, State, Zip Code Amendment # ☑ DOH Parsippany, NJ 07054 ☐ Emergency (including □ DCA Name of Contact Telephone Number justification) (NJAC 5:23-8) ☐ Cancellation Tom Gaveglio **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Lake Parsippany School ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 225 Kingston Road homes, etc.) Square Feet # of Floors Bldg. Age City (5) 1 60 Parsippany County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) school Morris Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Pow/R/Save Inc 0100 Whitman Street Address Street Address 27 West Street 7 Pleasant Hill Road City, State, Zip Code City, State, Zip Code Bloomfield, NJ 07003 Cranbury, NJ 08512 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. (732) 644-5418 Kevin Lovely Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) 08 / 09 / 16 08 / 09 / 16 Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/____PM-___AM Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure \square \geq 3 sf or \geq 3 lf □ Renovation ≥160 sf or ≥260 lf ☐ Glovebag Procedure Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Description of Location of Removal Repair Encapsulate Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or IN Facility (12)(13)other miscellaneous) No N/A Yes X 994 sf X VAT classroom 120 Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Waste Hauler ID No. Grand Central or Tullytown Progreen 22051 Disposal Date City, State City, State Pen Argyl PA or Tulytown, PA east Brunswick, NJ Signature Date Completed By (Print or Type) Title Sharon Hendee sec/trea ASB-41 * Do not use this form for asbestos licensure exempted activities. JAN 13

State of New Jersey

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Jan 08 13 11:38p State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Purpuent to NJAC 8:80 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 07/25/16 K.Hovnanian at Cedar Grove LLC. Aganales Notified Type Notification Strael Address 110 Fieldcrest Ave. Initial City, State, Zip Code DEP Amended × DOL Amendment # Edison, NJ 08837 K Emergency (including Name of Contact X Telephone Number DOH Listification) John Crane DCA Cancellation FACILITY INPORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Essex County Hospital School (K-12) Streat Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes. 150 Fairview Ave. erc. City (5) Square Fest # of F:00.78 Bldg. Age 500 86Yrs. Cedar Grove County Code (7) County (6) Current Use (Prior If being cemdished) Essex Hospital Name of Montioring Firm Hired by Building Owner (8) ASCM No. Name of Abetement Contractor (9) Lasco Services Inc. N/A Street Address Street Address 156 Maple Ave. City, State, Zip Code City, State, Zip Code Wallington, NJ 07057 Biephone No. Project Manager for Monitoring Firm elephone No. Licanse No. 862-221-9092 01107 Start Date (10) Name of OSHA Monitor Spheduled Completion Date (11) 07/26/16 07/28/16 Leslaw Nalodka Sirest Address Occupancy Status During Abatement (Check Only One) 156 Maple Ave. Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Cr.y. State, Zip Code Other - Describe: Wallington, NJ 07057 Scape of Work (Check All That Apply) 23 of or ≥3 If Renovation Full Containment with Negative Pressure ≥160 # or ≥ 260 If Demolition Mini-Endosure Glovebag Procedure X Non-Exampled (*) and Non-Frisbie Procedure Abatement la Location Type Normally Location of Description of Used Solely by Ascestos-Containing Material (ACM) Asbeztos Containing Material (ACM) Amount Maintenance/ Euchorigie TO BE ABATED (i.a. thermal systems insulation, (Specify Removal Repair Custodial Staff? in Facility surfacing, VAT, or BF or LF (12) (13) other miscalaneous) Yes NA No tunnel 150ff. window caulk tunnel door glazing 24f. Name of Registered Waste Haufer NUDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Newark Certing Inc. GCSL 05409 City. State Disposal Date City, State 07/28/16 Pen Argyi, PA Newstk NJ Completed by Bignal upp Date 07/25/16 Lesiaw Nalodka President

ASB41 (R-08-08) FAX #862-221-9093

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 Passaic Valley Sewerage Commission 7/28/16 Street Address Agencies Notified Type Notification 600 Wilson Ave. **EPA** Initial City, State, Zip Code DEP Amended Newark, NJ 07105 ASBESTOS CONTROL & Ø DOL Amendment # Emergency (including Name of Contact Telephone Number DOH justification) Mike Donne Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) **PVSC Wallington Pump Station** School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, 131 River Dr etc.) Square Feet # of Floors Bldg. Age City (5) 30000 Passaic, NJ 75 years Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) Boiler rooms storage area Essex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Briggs Associates 0004 New States Contracting, LLC Street Address Street Address 3 Crosswicks Rd 2400 Main Street Extension, Suite 10 City, State, Zip Code City, State, Zip Code Bordentown, NJ 0850 Sayreville, NJ 08872 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 609-298-5520 Michael Hoodak 732-525-0100 00749 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 8/15/16 9/2/16 Tiger Environmental Show Desktop.scf Street Address Occupancy Status During Abatement (Check Only One) 234 20th Ave Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Brick, NJ 08724 Scope of Work (Check All That Apply) 当 0 0 0 Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Demolition Mini-Enclosure 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) Encapsulate Maintenance/ Enclosure Remova (i.e. thermal systems insulation, (Specify TO BE ABATED Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)N/A Yes No 800 sf X Ceiling Plaster Boiler Room Storage area X X Z Name of Registered Waste Hauler Name of Registered Landfill NJDEP Waste Cubic Yards Hauler ID No. of Waste Cumberland Landfill Freehold Cartage 15939 30 City, State Disposal Date City, State Newburg, PA Freehold, NJ 6/27/16 Completed by Date Signature 7/28/16 Sr. Account Manager Michael Migliore

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



Report For Environmental

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ASBESTOS CONTROL &

2016

Services

Homogenous Material	Location	Material	Results	Notes
CFC	Roof	Cap Flashing Caulking (dark gray)	Non-ACM	y star a second

Bold = Positive for ACM

CONDITION AND FRIABLITY ASSESSMENT TABLE

A. ASBESTOS-CONTAINING MATERIAL

For each inspection conducted, the inspector classifies ACM or Assumed ACM by friability and condition. This helps to determine the extent of damage in certain areas as well as the potential for further damage and Asbestos release due to disturbance of the material.

Table 4.2 - Condition and Friability Assessment

Material	Location	Quantity	Friability	Condition
	Main Building			
Floor Tile with assoc. Mastic (Multi layered system)	Interior Throughout	30,160 SF	Non-Friable	Fair
Interior Window Frame Caulking	Interior Throughout	600 LF	Non-Friable	Fair
Brown Pipe Insulation	Interior Throughout (Including Attic Space)	300 LF	Friable	Poor
ACM Material in Burlap Sacks	Basement Boiler Room (Old Fan Room)	1 location	Friable	Fair
White Pipe/Elbow Insulation	Basement Boiler Room (Old Fan Room)	30 LF	Friable	Poor
White Duct Insulation	Basement Boiler Room (Old Fan Room)	200 SF	Friable	Poor
Baseboard with assoc. Glue	Ground Floor - Rooms Throughout	2,050 SF	Non-Friable	Fair
Wrap Insulation on Metal Ducts	Ground Floor Hallway - Ceiling Plenums	1,000 SF	Friable	Fair
Floor Ceramic Tile Backing with assoc. Tar	2 nd Floor - Toilet in Room# 30A	33 SF	Friable	Fair
Exterior Door Frame Caulking	Exterior Masonry – East, West, North	200 LF	Non-Friable	Fair
Exterior Window Frame Caulking	Exterior Masonry	3,000 LF	Non-Friable	Fair
Base Flashing	Roof	2,168 SF	Non-Friable	Fair
Base Flashing	Auditorium Roof	740 SF	Non-Friable	Fair
70	GYM Addition Build	ing		



Report For Environmental

Services

Material	Location	Quantity	Friability	Condition
Interior Window Frame Caulking	Interior Throughout	68 LF	Non-Friable	Fair
Pipe & Pipe Elbow Insulation	Interior Throughout	100 LF	Friable	Fair
Floor Tile with assoc. Mastic	Gym Area	520 SF	Non-Friable	Fair
Floor Leveling Compound with assoc. Mastic (Layers under wooden floor)	Gym Floor	1,520 SF	Friable	Fair
Base Flashing	Roof	2,144 SF	Non-Friable	Fair

Condition Definitions:

Good: None/Minimal apparent damage to ACM

Fair: Up to 10% localized damage or up to 25% of the entire ACM is damaged Poor: Over 10% localized damage or over 25% of the entire ACM is damaged

AUG 1 2016

4.2 SAMPLE ANALYSIS TABLE

Laboratory analysis results, in tabular form, are included in Appendix A.

4.3 ASBESTOS ABATEMENT COST ESTIMATE

Section not used.

4.4 LEAD-BASED PAINT DISTURBANCE COST ESTIMATE

If the scope of work does not require LBP abatement specifically, then the existing LBP will only be indirectly disturbed during renovation/construction activities. This work is covered by the EPA's Lead Renovation, Repair and Painting Rule (RRP Rule), under which firms performing renovation, repair, and painting projects that disturb lead-based paint must be certified by EPA as renovators who are trained by EPA-approved training providers and follow lead-safe work practices including the use of appropriate engineering controls, cleaning, waste handling and disposal as well as worker training, exposure monitoring, etc.

5.0 UNIVERSAL WASTE

Universal Wastes (i.e., batteries, thermostats, lamps, mercury-containing equipment, and pesticides) are regulated pursuant to the USEPA Universal Waste Requirements (40 CFR Part 273) and New Jersey Universal Waste Requirements (N.J.A.C. 7:26A). Typical equipment that might contain universal wastes are Fluorescent Bulbs, CFL/High Density Bulbs, CFC Containing Equipment, Mercury Containing Equipment, Lead Acid Batteries, Consumer Electronics, Pesticides/Herbicides, Chemicals, Tanks/Heavy Equipment and Organic/Medical Waste.

Please see the below table itemizing the number of assumed universal wastes:

State of Ma

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

B & G proj. #:	2016-114	-	(Pi	ursuant	to NJAC 8: *** Non S	60-7 a ub 8	and 12:120-7)		Check #	7952			_	
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Oceanville,			I DL	ne Numb			Telephone Number			License	Numb	er		
Project Manager fo				9-652-1			(973)696-6869 00378							
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Describe:	ribe: Occupied					_	LincolnPark,	NJ 07	035					
	check all that apply	1)												
Demolition	X	Renovatio	n			F	full Containment w/	negative		Glove				
>3 sf or >3	If X	≥160 sf or	≥260 If				Vini-enclosure			✗ Non-fr				
Location of		Is location	n normally u	sed solel	ly		(ID				e	R e	E	E
asbestos-co	ontaining	by mainte staff(12)	enance/cust	odial	Descript	ion of a	asbestos-containing		Amount (Specify S	SF or	m	p a	С	n
material to abated in fa		Yes	No	N/A	- material	(ACIVI)			LF)		V	i	a p	L
		103	140	21/2/190-10	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		bass	-	470 sf		e	T	П	\forall
Nurse's Office	- Floor 2			X	JI VAI, mas	Stic, &	cove base		470 51			ō		一
					-									
					1									
					1									
Registered Waste	Hauler		EP Hauler II	D# (Cubic Yards of	Waste	Name of Registe	red Lan	dfill	0000000	Con	tor		
B & G Restor	ation, Inc.		19563	Disposal	6 Date		City, State	vn Res	source & R	ecovery	Cell	CI		-
City, State Lincoln Park,	NJ			08	1/11/2016		Tullytow	n, PA						
	Completed by (Print or Type) Title Signature									Date	0/00	16		
Gordana Lur		Secreta	ry/Treasu	ırer			Gordana Luna 07/29/2016							

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

2010-199 B & G proj. #: Check # 7953 2016 Date of Notification (1) AUG Name of Building Owner/Operator (2) 0 | 7 | / | 2 | 9 | / | 1 | 6 | Marlene Gathright Agencies Notified Street Address ASBEST T EPA X Initial DEP City, State, Zip Code Amendment DOL East Orange, NJ 07017 Telephone Number Name of Contact DOH Cancellation ☐ DCA Marlene Gathright FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) same Subchapter 8 (Other than K-12) X Other (Private/Commercial Street Address Bldgs./Homes, etc. Square Feet | # of Floors Bldg. Age County Code (7) County (6) City (5) (State use only) Current Use (Prior if being dernolished) East Orange, NJ 07017 Essex residential Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number License Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched, Completion Date (11) B & G Restoration, Inc. 08/10/2016 08/11/2016 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition X Renovation Full Containment w/negative pressure ✗ Glovebag procedure Non-friable procedure ≥160 sf or ≥260 lf \times >3 sf or >3 lf Is location normally used solely E Location of by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing п m p C staff(12) (Specify SF or C material to be material (ACM) 0 a a LF) abated in facility (13) N/A Yes No p X pipe insulation 12 lf iain room (above drop ceiling) Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# Tullytown Resource & Recovery Center 19563 1/2 B & G Restoration, Inc. Disposal Date City, State Tullytown, PA 08/11/2016 Lincoln Park, NJ Signature Completed by (Print or Type) Title Cordana Luna 07/29/2016 Secretary/Treasurer Gordana Luna

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) 7/25/16 New Jersey Natural Gas Agencies Notified Type Notification Street Address 2016 775 Vassar Ave EPA Initial City, State, Zip Code DEP Amended Lakewood, NJ 08701 DOL Amendment # ASBESTOS CONTROL & Emergency (including Name of Contact Telephone Number DOH iustification) Edward Yurick DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) New Jersey Natural Gas School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, 858 Lakewood Farmingdale Rd. etc.) City (5) Square Feet # of Floors Bldg. Age Howell NA County (6) County Code (7) Current Use (Prior if being demolished) Monmouth (STATE USE ONLY) Out door pipe insulation Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) NA New States Contracting, LLC Street Address Street Address 2400 Main Street Extension, Suite 10 City, State, Zip Code City, State, Zip Code Savreville, NJ 08872 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 732-525-0100 00749 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 8/10/16 8/12/16 Tiger Environmental Show Desktop.scf Street Address Occupancy Status During Abatement (Check Only One) 16 W Elizabeth Ave #2 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Outdoor removal, no one in the area Linden, NJ 07036 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Encapsulate Maintenance/ Enclosure Remova TO BE ABATED (i.e. thermal systems insulation, (Specify Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) N/A Yes No Pipe to truck loading rack Thermal insulation jacket 200 LF X X Name of Registered Waste Hauler NJDEP Waste Name of Registered Landfill Cubic Yards Freehold Cartage Inc Hauler ID No. of Waste G.R.O.W.S. 15939 10 City, State Disposal Date City, State Freehold, NJ Morrisville, PA 8/12/16 Completed by Signature Michael Migliore Sr Account Manager 7/26/16

State of New Jersey



Date of Notifi	cation 7/26/16			Building Ow		perator (2)	IT	NE C	EIVEM				
				nce Along	ı			11 5 6					
AgenciesNotified	Type of Notifica	ion	Street A	ddress			li.	511					
EPA		ncy Notification		to 0 7in Cos	d 0		111	HH AUG	1 2016				
DEP	X Initial No		0.00	ate & Zip Coo	n N.I 08831								
X DOL		d Notification			h 149 00	0031			Telephone Number				
X DOH	Cancella	tion		e of Contact ASBEST A Elephon Stance Alongi									
DCA						FION	-						
				CILITY INFO	eremmo-remon								
Name of Facility V			ice (3)		Type of Facility (4)								
	Res	idence			School (K-12)								
Street Address					Subchapter 8 (Other than K-12) X Other (i.e., private & commercial buildings, homes, etc.								
					Square Feet # of Floors Bldg. Age								
			0 . 0	1 (7)	Joquan		# 011100	2	50+				
City (5)	**************************************	ounty (6)	County Co	ide (7)		3,000	The state of the	N	301				
Monroe To	wnship M	iddlesex			1	nt Use (Prior i	it being de	molished)					
					Resid			(0)					
Name of Monitoria		Building Owner	\-/	ASCM No.		of Abatemen							
Environmental	Tactics			N/A		al Abateme	nt Servic	es, LLC					
Street Address					0	Address	- D!						
34 Broad Stree						choolhous							
City, State & Zip (54		City, State & Zip Code Monroe Township, NJ 08831								
Matawan, NJ 0								License N	lumber				
Project Manager	tor Monitoring Fi	A 1949 A	elephone N			none Number 05-9062		LICENSE	00714				
Tom Geiger	2-4- (40)		32-290-22			of OSHA Mo	nitor						
Scheduled Start Date (10) Scheduled Completion Date (11) 8/5/16 8/7/16						al Abateme		es, LLC					
Occupancy Statu	s During Abatem sed/Vacated Dur	ent (Check on	ily one)	ement		Address choolhous	e Road						
	Performed Outs					State & Zip Co							
	Performed Outs	ide of Normal i	racility 1100	113 -	55.10	oe Townsh		8831					
Describe: Other - Des	auth a t				INIOIII	oc rownsii	iip, 140 00						
	1000000000000	- E A											
Scope of Work (C			_			Full Co	ntainment	with Negative	Pressure				
Demolition		Renovation	1		Full Containment with Negative Pressure Mini-Enclosure								
Large Proje					X Glovebag Procedure								
	≥ 3 SF or ≥ 3 LF					Other:	-g . 1000u						
	≥ 160 SF or ≥ 2	OU LF ACIVI	la 1/'-		Da	scription of		Amount	Abatement Type				
	Location of estos-Containing		Is Location Normally Us	223		tos-Containin	a l	(Specify	(Specify: Removal				
	aterial (ACM)		Solely by		Mat	erial (ACM)		Square Feet of	or Repair,				
	BE ABATED		Maintenanc	ce or		ermal system		Linear Feet)					
	in Facility		Custodial St			n, surfacing, \ miscellaneou			Enclosure)				
	(13)		(12)		or other	HISCENARIEO	u3)						
	Basement		N/A		Pipe	insulation		40 LF	Removal				
	Dagoment												
									1				
Name of Registered Waste Hauler NJDEP Waste Hauler II						Cu. Yds. of V		Name of Regis	stered Landfill				
Freehold Carta	age			18693		4							
City, State						Disposal Date 8/7/4	e s	City, State Morrisville,	ΡΔ				
	NJ						4	wigitisyille,	Date				
Freehold,	Completed By (Print or Type) Title						Signature						
Freehold,		Title Manager				Signature \		//	7/26/16				

STATE OF NEW JERSEY DEPARTMENT OF LABOR NOTIFICATION OF ASBESTOS ABATEMENT ISES CHECK # 012205

Date of Notification (1)				Name of E	Building Owner/Operator	(2)							
07/18/2016				John k	Kim			7-57	TE T				
Agencies Notified	Type of Notificat	ion		Street Add	<u>iress</u>	IMEG			5	\mathbb{N}			
() EPA (X) NJDEP (X) NJ DOL	(X) Initial No () Amende Amendr	d nent#			e, Zip Code eld, NJ 07090	AU AU	IG 1	2016					
(X)DOH		ncy (includin	ıg	Name of C		Tel. Numb	oer '						
() DCA	justificat () Cancella			John K	lim		LICEN		DL &				
		F	ACILIT	Y INFORM			LIGEN	3-141-1					
Name of Facility Where Abatemen	t is Taking Place (3	<u>3)</u>		Type of Fa									
Residential Property Street Address				() Subc	hapter 8 (other than K								
	ield, NJ			(X) Othe	r (i.e. private & comme	ercial bldgs., homes	s, etc.						
City (5)	County (6)	County Code (State Use O		Sq. Feet:	3,000 # of Floors 3	Bldg. Age	e <u>80</u>						
Westfield	Union			Current U	Jse (if being demolishe	ed):							
Name of Monitoring Firm Hired by	Bldg. Owner (8)	ASCM No.			Contractor (9)	4 1 C - 1-4!	T.						
N/A		N/A		Industrial Safety & Environmental Solutions, Inc.									
Street Address N/A				Street Add	udson Avenue								
City, State, Zip Code			_		Zip Code								
N/A		Union City, NJ 07087											
Project Manager for Monitoring Firm Telephone Number				Telephone				cense Nu	ımber				
N/A Scheduled Start Date (10) Scheduled Completion Date (11)					25-0055 DSHA Monitor		10	1124		-			
Scheduled Start Date (10) 07/27/2016	(11)	ISES, Inc	ο.										
Occupancy Status During Abatem () Facility Closed/Vacated Duri () Abatement Performed Outside	ng Entire Period of	f Abatement			udson Avenue								
(X) Other - Describe: House is not occupied				- Management of the second	e, Zip Code City, NJ 07087								
Source of Work (Check all that app	alv) () Demolition		(X) Renovation									
() Minor Project (< 25 SF (X) Small Project (>25 <16 () Large Project (>160 SF	or < 10 LF ACM) 0 SF or >10 <26 or > 260 LF ACM	0 LF ACM)		() Full Containment with Negative Pressure () Mini-Enclosure (X) Glove-bag Procedure and Wrap and Cut Procedure () Non-Exempted (*) and Non-Friable Procedure Description of ACM Amount Abatement Type									
Location of Asbestos-Containing Material (ACM)	Is Location Nor Solely by Main	tenance or	(i.e.	thermal syst	ription of ACM tems insulation, surfacing	Amount (Specify SF or		Datemer	птурс				
To be Abated in Facility (13)	Custodial St	aff? (12)		VAT, or of	her miscellaneous.)	LF)	Re	72	Enc	En			
	YES NO) N/A					Removal	Repair	Encapsulate	Enclosure			
Basement	X		Pipe	insulation	n and elbows	~ 182 LF	X						
Attic	X			insulation		~ 2 SF							
								_					
Name of Reg. Waste Hauler Atlas Disposal Options, Inc. NJDEP Waste Hauler ID # 50452					Cubic Yards of Waste 10	Name of Reg. La Grand Centra 1963 Pen Arg	al Sanit						
The state of the s				<u>Date</u> 27/201⁄6		City, State Pen Argyl, PA	A 1807	2					
Completed by (Print or Type)	<u>Title</u>	19		Signature Date									
David Camacho	Project Sup	ervisor		1		07/18/2016							

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 Manalapan High School 25 July 2016 2016 Street Address Type Notification Agencies Notified 30 Church Lane Initial EPA City, State, Zip Code Amended DEP ASBESTOS CONTROL & X Manalapan, NJ 07726 DOL Amendment # X Emergency (including Telephone Number Name of Contact iustification) DOH Judi Lawson Cancellation DCA **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Manalapan High School School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, 30 Church Lane etc.) # of Floors Bldg. Age Square Feet City (5) 45 30 1 Manalapan County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) County (6) High School Monmouth Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Silt Ventures Ilc 117 Health and Safety Services Street Address Street Address 38 Algonquin Trail PO Box 365 City, State, Zip Code City, State, Zip Code Medford Lakes, NJ 08055 Berlin, NJ 08009 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 01303 856 452 1311 609 276 5739 Tom Propter Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 31 July 2016 n/a 29 July 2016 Street Address Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf Mini-Enclosure Demolition ≥160 sf or ≥260 lf 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) Encapsulate Maintenance/ (Specify (i.e. thermal systems insulation, Remova TO BE ABATED Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)N/A Yes No 25 LF x Pipe fitting and pipe hanger Main office X insulation Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler ID No. of Waste Advanced Disposal Freehold Cartage S2265/S15939 13 Disposal Date City, State City, State 01AUG16 Shippensburg, PA Freehold, NJ

Signature

Title

Owner

Date

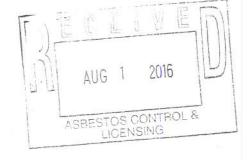
25 July 2016

Jeff Yekenchik

Completed by

VATAMORE.	Notice in	With the	BANK -	a NESSAY.
P. D	PI PO	+ E,	~~~	1
1538	THE S	District.		2002012
THE PERSON	ma 100 mg	16.76	200	CHARLES.

1(#559)	NC	State of New Jersey TIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)						IF		G E		V [
Date of Notification (1) 7/27/16				Building Ov New Jer				LC T		AUG 1	2	016		IJ
Agencies Notified Type Notification			treet Add	dress (as Ave,	Suite	1000			-4					
EPA Initial Amended Amendment #_				e, Zip Code n, TX 770		2743		ASBESTOS CONTROL & LICENSING						
Emergency (inc justification)	cluding	823	Name of Contact Paul Ostberg							nhana Niim	hor			
	Words ou		FACIL	ITY INFOR	MATI	ON								
Name of Facility Where Abatement is Taking I Middle Energy Center	Place (3)						☐ Sc	f Facility (4 chool (K-12	2)	r than K-12)			
Street Address 93-199 Satt Blvd. & N. Railroad Ave	nue						o et	ther (i.e. pr	rivate &	commercia	al buildi	****		\$,
City (5) Rio Grande NJ 08242			1					Feet F	# of	Floors	35 35	dg. Ag	je	
County (6) Cape May			County C	ode (7) SE ONLY)			COMP. (2000)	ent Use (Prior if being demolished) ergy Center buildings						
Name of Monitoring Firm Hired by Building Ov N/A	vner (8)		ASCM No. Name of Aba						tractor	(9)				
Street Address						Address								
City, State, Zip Code		City, State, Zip West Berlin						04						
Project Manager for Monitoring Firm	- 1 -	Telephon	ne No.			hone No		91	License N	0.			-	
25	d Com	nletion [Date (11)			753-98 of OSH	A Monitor		00727					
8/15/16	3/19/16		ipiction E	Jule (11)		Sam	ne		-	14.				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Pe			ient			Stree	t Address	S						
Facility Closed/Vacated During Entire Policy Abatement Performed Outside of Norma Other – Describe:	l Facility	Hours			_	City,	State, Zip	p Code						
Scope of Work (Check All That Apply)	900.00					-								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit	olition Mini-E						Containment with Negative Pressure -Enclosure rebag Procedure -Exempted (*) and Non-Friable Procedure					
		Locati								60		Abate	ment pe	į.
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cust	lormal d Sole intenar odial S (12)	ly by nce/ Staff?	Asbesto (i.e.	Description of tos Containing Material (ACM thermal systems insulation, surfacing, VAT, or other miscellaneous)				(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		00	e Atta	ahad		500	Attached	x			-
See Attached			X		56	e Alla	cnea		366	Allacried	1			
								1						
Name of Registered Waste Hauler United Roll Off		H	NJDEP Waste Cubic of Wa 22459 TBD							ered Landfi	11			
City, State Elm NJ			Disposal Da 8/19/16				te	City, State Morrisville PA 19067						
Completed by Anthony T Perna	Title President					Signato	Ire _	Date 7/27/16						



Middle Energy Center Rio Grande WJ-

SECTION 3.0 ASBESTOS INVENTORY 73-/99 SATT /JUND. Middle Energy Center N. Railroad Avenue Rio Grande, NJ

•	Location	<u>Material</u>	Quantity
Building #4			29
100 WARN	Break Room	Thick White Window Glaze	12 linear feet (LF)
	Break Room	Gray Fire-stop Material	2 square feet (SF)
Building #3	# H		
Building	#3 Interior C02 End of Building	Black Gasket Material	· 20 SF
	Building #3 Interior	Gray Gasket Material	8 SF
59	Building #3 Interior	Black Paper Gasket Material	2 SF
	Building #3 Interior	9"x9" Brown Floor Tile and Black Mastic	480 SF
8 se	Building #3 Exterior	Blue/Green Door Caulk	3 LF
Fuel Forward	ling Pump Building #7	a est	7.
S	Building #7	Gray Gasket Material	70 SF
Unloading Bu	ilding #6		
	Building #6	Gray Gasket Material	4 SF

Date of Notification 7/25/16 Name of Building Owner / Operator (2) **New Monmouth Builders** AgenciesNotified Type of Notification Street Address AUG 2016 **Emergency Notification EPA** 1 Ranier Ct DEP Initial Notification City, State & Zip Code Amended Notification Middletown, NJ 07748 DOL X Telephone Number Name of Contact X DOH Cancellation Tony Baricevich DCA FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Residence Subchapter 8 (Other than K-12) Street Address X Other (i.e., private & commercial buildings, homes, etc. Square Feet # of Floors Bldg. Age County Code (7) 50+ City (5) County (6) 2,800 Current Use (Prior if being demolished) Port Monmouth Monmouth Residence ASCM No. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) Global Abatement Services, LLC **Environmental Tactics** N/A Street Address Street Address 443 Schoolhouse Road 64 Broad Street City, State & Zip Code City, State & Zip Code Monroe Township, NJ 08831 Matawan, NJ 07747 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 732-605-9062 00714 732-290-2217 Tom Geiger Name of OSHA Monitor Scheduled Start Date (10) Scheduled Completion Date (11) Global Abatement Services, LLC 8/4/16 8/5/16 Occupancy Status During Abatement (Check only one) Street Address X Facility Closed/Vacated During Entire Period of Abatement 443 Schoolhouse Road Abatement Performed Outside of Normal Facility Hours -City, State & Zip Code Monroe Township, NJ 08831 Describe: Other - Describe: Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition X Renovation Mini-Enclosure Large Project X Glovebag Procedure X Quantity is ≥ 3 SF or ≥ 3 LF ACM Quantity is ≥ 160 SF or ≥ 260 LF ACM X Other: Non-friable Description of Abatement Type Amount Location of Is Location (Specify: Removal, (Specify Asbestos-Containing Normally Used Asbestos-Containing Solely by Material (ACM) Square Feet or Repair. Material (ACM) (i.e., thermal systems Linear Feet) Encapsulation or Maintenance or TO BE ABATED Enclosure) Custodial Staff? insulation, surfacing, VAT in Facility or other miscellaneous) (12)(13)15 LF Removal Pipe insulation N/A Basement Basement N/A Transite board 64 Sf Removal Cu. Yds. of Waste Name_of Registered Landfill NJDEP Waste Hauler ID# Name of Registered Waste Hauler GRÓWS Freehold Cartage 18693 Disposal Date Ćity, Śtate City, State Morrisville, PA Freehold, NJ 8/5/16 Signaturé Date Completed By (Print or Type) Title

7/25/16

Dominick Tringali

Manager



									N P A						
Da	ate of Notif	ication 7/25/1	16		of Buildir Brancif		/ Operator (2)	Approximate the second	D) <u> </u>						
Agenci		Type of Notif			Address			4			_				
	EPA	Q.0. 985 F	gency Notificati	1-				11	LII AUG	1 201	5 11	7			
	DEP		Notification	8.08(6)	tate & Zi	50						1			
X	DOL		nded Notification			ick, NJ 0	8816		Replet	EN 7 9 26 LLO	- J				
X	DOH	Canc	ellation	The Section of the Se	of Conta				ASDEST	Telephone	Numbe	er			
	DCA			John	Brancif	orte	7								
					CILITY		FORMATION Trung of Equilibr (4)								
Name (of Facility V		nent is Taking F Residence	Place (3)		Тур	Type of Facility (4) School (K-12)								
Street	Address						Subchapter 8 (Other than K-12)								
						X	X Other (i.e., private & commercial buildings, homes, etc.								
				7			are Feet	# of Floo		Bldg. Age					
City (5))		County (6)	County C	ode (7)		3,000		2		0+				
0 200	East Brun	owiek	Middlesex	County 0	, odo (1)	Cur	rent Use (Prior	if heing de							
_	ast bruit	SWICK	Midulesex			1000000	sidence	ii beilig de	arrionsried)						
Name	of Monitorin	ng Firm Hired	by Building Ow	ner (8)	ASCM	No. Nar	ne of Abatemer	nt Contract	or (9)						
	onmental		,	* * *	N/A	Glo	bal Abateme	nt Service	es, LLC						
Street	Address					Stre	eet Address								
64 Broad Street							Schoolhous	e Road							
City, St	tate & Zip (Code				City	City, State & Zip Code								
Matawan, NJ 07747							nroe Townsh	ip, NJ 08	8831						
Project Manager for Monitoring Firm Telephone Number							ephone Number		License	Number					
Tom Geiger 732-290-2217						732	2-605-9062			00714					
Scheduled Start Date (10) Scheduled Completion Date (11)						Nai	ne of OSHA Mo	nitor							
	8/4/16	3		8/5/16		Glo	bal Abateme	nt Service	es, LLC						
			ement (Check of During Entire Pe		tement		eet Address S Schoolhous	e Road							
A	batement	Performed Ou	utside of Norma	I Facility Ho	urs -	City	, State & Zip Co	ode							
D	escribe:					Mo	Monroe Township, NJ 08831								
C	Other - Des	cribe:				9	*								
Scope	of Work (C	heck all that a	apply)			-									
73	emolition		X Renovati	on			Full Containment with Negative Pressure								
. L	arge Proje	ct					Mini-Enclosure								
		≥ 3 SF or ≥ 3	LEACM				X Glovebag Procedure								
	858		260 LF ACM				Other: Non-friable								
		ocation of		Is Location	on T	1	Description of		Amount	Ahate	ment Ty	ne			
		stos-Containir	na	Normally L			estos-Containin	a l	(Specify		y: Remo				
		aterial (ACM)		Solely b		N	faterial (ACM)	15	Square Feet	or R	epair,				
		BE ABATED		Maintenand			thermal system		Linear Feet)		sulation				
		in Facility		Custodial S	Staff?		ion, surfacing, V			End	closure)				
		(13)		(12)		or oth	er miscellaneou	IS)							
	Е	Basement		N/A	_	Pi	pe insulation		125 LF	Re	moval				
J (800 mm) 2							•								
Name of Registered Waste Hauler NJDEP Was						er ID#	Cu. Yds. of W	31.500 (\$4.000 b)	Name of Regi	stered Land	fill				
	old Carta	ge			18693		5		GROWS		15				
City, St	tate reehold, N	۱J					Disposal Date 8/6/10	6	City, State Morrisville,	PA					
		int or Type)	Title				Signature				Date				
	ninick Tri		Manage		N)				7/25/	16					

CK 5587

Date of Notification (1) 7/26/16		Name of Building Owner/Operator (2) Stafford Twp School District													
Agencies Notified	Type Notification		S	treet Add		north and a					1				1
EPA DEP DOL	Initial Amended Amendment #		C	ity, State	e, Zip Code awkin NJ)					1	G 1		015	
DOH DCA	Emergency (in justification) Cancellation	cluding	1 30	lame of C	Contact					Told	anhone-Nitr	mher	20N		. & -
Name of Facility Where A		Place (3)		FACIL	ITY INFOR	RMATIC	ON	Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)							
Street Address 250 North Main Stre	eet							d	Other (i.e. pretc.)	rivate 8	& commerci	al build	5355100		3,
City (5) Manahawkin NJ 08	050							100	are Feet 000+	1	f Floors	35	dg. A	ge ———	
County (6) Ocean				County C STATE U	ode (7) SE ONLY)		_		rent Use (Prio			hed)			
Name of Monitoring Firm Coastal Environme		ASCM	No.		Name Pern		natement Con Inc.	tractor	(9)						
Street Address PO Box 167					Street PO E										
City, State, Zip Code Hammonton NJ 08		City, State, Zip Code West Berlin NJ 08													
Project Manager for Mor Cathy Leddon		Γelephon	e No.		Teleph 856-		No. -9800		License N 00727	No.					
Start Date (10) 7/27/16	Com	pletion D	ate (11)		Name Sam		SHA Monitor								
Occupancy Status Durin	ng Abatement (Check	Only One)				Street	Addr	ess						
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire P ned Outside of Norma	eriod of Al al Facility I	oatem Hours	City, State, Zip Code											
Scope of Work (Check A	All That Apply)	-						_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf				ovation iolition					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
		ls I	ocati	on						_ (// =		T	Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)				ly by nce/		os Cont hermal surfa	Description of Containing Material (ACM) mal systems insulation, urfacing, VAT, or ner miscellaneous)			(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Rooms 7	, 8, 21	Yes	Х		I	Floor	tile & r	mas	tic	24	400 SF	x			
												-	-		
		1										-			
Name of Registered Wa	aste Hauler		17.57	IJDEP W	5775	Cubic of Wa	Yards ste				tered Landf	ill			
United Roll off				2245		5			G.R.O.						
City, State Elm NJ						8/1/1	osal Date City, State Morrisville PA 19067								
Completed by Title Anthony T Perna President						(Signature Date 7/26/16								

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

MOOR		NOTIF				ESTOS ABAT 8:60 and 5:16			71./7	E		$\overline{}$
Date of Notification (1)	27 /	16			f Building ord Leas	Owner/Operator (2		EGE	W	E		
Agencies Notified	Type Notificatio			Street A	ddress	as Way		AUG 7	2016			
☑ DOLWD ☑ DOH	Amended Amendment	t # <u>1</u>			ate, Zip Co			ASBESTOS CO	ONTRO	3 JC	1	-
DCA (NJAC 5:23-8)	☐ Emergency justification)		Name o	f Contact ael Worl			Telephone Numb	er——			
	L] Cancellation					ORMATION						
Name of Facility Where			(3)				Type of Facility (4					
Medford Leas Com	munity Buildi	ng					☐ School (K-12) ☐ Subchapter 8	(Other than K-12)				
Street Address							Other (i.e., pri	vate and commerc	cial buil	dings	1	
1 Medford Leas W	ay						homes, etc.) Square Feet	# of Floors	Rid	g. Ag	9	
City (5)							10,000	1	8		-	
Medford					0 1 (7)	CEATE LICE ONLY						_
County (6)				Count	y Code (7)	(STATE USE ONLY)	Retirement (ilou)			
Burlington			2)	ASCM N	lo	Name of Abateme	Delawa of the control of the control	John Maries			-	
Name of Monitoring Firm				ASCIVI I	NO.		onmental, LLC					
Mgmt. & Environm	ental Consulti	ing Service	es			Street Address	Jimental, 220					-
Street Address					623 Cutler Avenue							
PO Box 341						City, State, Zip C						
City, State, Zip Code	DE1E					Maple Shade						
Chesterfield, NJ 0			Tele	ephone N	No.	Telephone No.	,	License No.				
Project Manager for Mo Bill Weisgarber	intolling rillin			09-298-		856-755-0099	9	00842				
Start Date (10)	Sc	cheduled C	omple	etion Dat	e (11)	Name of OSHA N	Nonitor	(9)				
07 /27	16_	08 /	0	9_ / _	16	EMSL Analys	tical, Inc.					
Occupancy Status Durin						Street Address						
☐ Facility Closed/Vaca	ted During Entire	Period of	Abate	ement	ariba	200 Route 13				_		_
Abatement Performe	AM	_PM/	_PM	l/	AM	City, State, Zip C						
Scope of Work (Check	all that apply)					⊠ Full Cor	tainment with Neg	ative Pressure				
≥3 sf or ≥3 If ≥160 sf or ≥260 If		⊠ Re	nova molit			☐ Mini-En			re			
		Is	Loca	ation					Ab	ateme	ent T	уре
Locatic Asbestos-Containin TO BE AF IN Fac (13	g Material (ACM) BATED illity	Use Ma	inten	lely by ance/ I Staff?	Asbe (i.e	Description estos Containing M a., thermal systems surfacing, VA other miscellan	aterial (ACM) insulation, Γ, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	2	Yes	No					40015			П	+
Receptionist's Office	е					sulation		100 LF 6 LF				H
Central Supply					Pipe Fi	tting Insulation		0 LI				H
										H		
Name of Deviators 234	acta Haular			NJDEP '	Waste	Cubic Yards of	Name of Regis	stered Landfill				
Name of Registered W Freehold Cartage				Hauler II	D No.	Waste 2	Cumberla	nd County Land	dfill			
City, State Freehold, NJ						Disposal Date 08/09/2016						
Completed By (Print or Christina Lynch	Type)	Title Opera	tions	Manag	ger	Signature	£ Co		ate 7/2	7/1	10	