State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:50 and 12:120)

Date of Notice: 7/29/16

Agency Notified: EPA

Type of Notice: Initial

Name of Building Owner/Operator: Bergen County Utilities Authority
Street Address: 520 River Road
City, State, Zip Code: Edgewater, NJ 07020

Name of Facility Where Abatement Is Taking Place: Bergen County Utilities Authority
Street Address: 520 River Road
City: Edgewater

County: Bergen

County Code: (STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner: AS/CM No.

Name of Abatement Contractor: ABS Environmental Services, LLC
Street Address: PO Box 483, 4 E Gate Drive
City, State, Zip Code: Glenwood, NJ 07418

Project Manager for Monitoring Firm: Telephone No.

Start Date: 08/31/16

Scheduled Completion Date: 10/15/16

Occupancy Status During Abatement (Check Only One):
- Facility Closed/Abandoned During Entire Period of Abatement
- Abatement Performance Outside of Normal Facility Hours

Scope of Work (Check All That Apply):
- 1000sf or less
- Renovation
- Demolition
- New Construction
- Full Containment with Negative Pressure
- Mini Enclosure
- Glovebox Procedure
- Non-Exempted (*) and Non-Enable Procedure

Location of Asbestos-Containing Material (ACM)

Object: ceiling room

Is Location Normally Used Solely by Maintenance/Custodial Staff: Yes

Description of Asbestos-Containing Material (ACM)
- Insulation (e.g., thermal systems insulation, surfacing, VAT, or other miscellaneous)
- Amount (Specify SF or LF)

Abatement Type

Name of Registered Waste Hauler: NJ/DEP Waste Hauler ID No.
Freehold Cartage 15939

Name of Registered Landfill: Western Berks Landfill

Disposal Date: TBD
City, State: Birdsboro, PA

Completed by: A. Scott Higgins
Title: President

Signature: [Signature]
Date: 7/29/16

Print Form

* Do not use this form for asbestos license exempted activities.
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1): 7/29/2016

Name of Building Owner/Operator (2): Basad Realty Management LLC

Agencies Notified: 
- EPA
- DEP
- DOL
- DOH
- DCA

Type Notification: Initial

Address: 2321 Kennedy Blvd Suite B1
City, State, Zip Code: North Bergen NJ 07047

Name of Contact: Mike
Telephone Number: 

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3):
Private Residence

Street Address: 
City (5):
West New York
County (8):
Hudson

Current Use (Prior to being demolished): Residential

Square Feet: 1,900+
# of Floors: 2+
Bldg. Age: 50+

Type of Facility (4): School (K-12)

Count Code (7): (STATE USE ONLY)

License No.:
Name of Abatement Contractor (9): Unicorn Contracting Corp.
Street Address: 205 Route 46 Suite 7a
City, State, Zip Code: Totowa NJ 07512

ASCM No.:
Name of Abatement Contractor (9):

Telephone No.:
Name of OSHA Monitor:
Envirovision Consultants Inc.
Street Address: 20-21 Wagaraw Rd, Bldg 35 E
City, State, Zip Code: Fair Lawn NJ 07410

Scope of Work (Check All that Apply):
- Renovation
- Demolition

- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED

TO BE ABATED

In Facility (13):

Yes
No
N/A

Basement

Pipe Insulation

Amount (Specify SF or LF):

Abatement Type:

Removal
Repair
Encapsulate

Amount of Waste:

Cubic Yards of Waste:

Name of Registered Landfill:
Tulltown Resource Recovery Facility

Name of Registered Waste Hauler:
Unicorn Contracting Corp.

Waste Hauler ID No.:
0035844

Disposal Date:
TBD

Name of City:
Totowa
Name of State:
NJ
Name of Zip Code:
07512

Completed by:
Dimo Golcev
Title: General Manager
Signature: 
Date: 7/29/16

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)  7 / 29 / 16  
Name of Building Owner/Operator (2)  Elizabeth Sherman

Agencies Notified:  
- EPA  
- DOLWD  
- DOH  
- DCA  
- NJAC 5:23-8

Type Notification:  
- Initial  
- Amended  
- Amendment #  
- Emergency (including justification)  
- Cancellation

Address:  
Street Address:  [redacted]  
City, State, Zip Code:  Cherry Hill, NJ 08034

Name of Contact:  Elizabeth Sherman  
Telephone Number:  [redacted]

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)  Sherman Residence

Street Address:  [redacted]  
City (5):  Cherry Hill  
County (6):  Burlington

Square Feet:  1295  
# of Floors:  1  
Bidg. Age:  80

Name of Monitoring Firm Hired by Building Owner (8)  Management & Consulting Services  
ASCM No.:  [redacted]  
Name of Abatement Contractor (9)  Shade Environmental, LLC

Street Address:  PO Box 341  
City, State, Zip Code:  Chesterfield, NJ 08515

Telephone No.:  609-298-4070  
License No.:  00842

Name of OSHA Monitor:  EMSL Analytical, Inc.

Project Manager for Monitoring Firm  William Weisgarber  
Start Date (10):  08 / 16 / 16  
Scheduled Completion Date (11):  08 / 23 / 16

Occupancy Status During Abatement (Check only one)  
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe

Time of Abatement:  AM-PM-AM  
Scope of Work (Check all that apply)  
- ≥3 sf or ≥3 lb
- ≥100 sf or ≥280 lb  
- Renovation  
- Demolition  
- Full Containment with Negative Pressure  
- Mist-Enclosure  
- Glovebag Procedure  
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)  

Location of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  

Description of Asbestos-Containing Material (ACM)  

Amount (Specify SF or LF)  

Location of Abatement (14):  

- Basement  
- Asbestos Board on Ceiling  
- 16 SF

- Basement  
- Asbestos paper on duct  
- 6 SF

- Freehold Cartage  
- NJDEP Waste Hauler ID No. 15939

Cubic Yards of Waste  
- 1

Name of Registered Landfill:  Cumberland County Landfill

City, State:  Freehold, NJ

Completed By (Print or Type):  Diana Lynch

Title:  Owner  
Signature:  [redacted]

Disposal Date:  08/23/2016  
City, State:  Newburg, PA  
Date:  7/29/16

Note: Do not use this form for asbestos licensure exempted activities.
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)
  7 / 28 / 16

Name of Building Owner/Operator (2)
Maple Shade Board of Education

Street Address
170 Frederick Avenue
City, State, Zip Code
Maple Shade, NJ 08052

Name of Contact
Richard Winter

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Residence

City (5)
Maple Shade
County (6)
Burlington

Type of Facility (4)
- School (K-12)
- Subchapter B (Other than K-12)
- Other (i.e., private and commercial buildings, homes, etc.)

Square Feet
1,000
# of Floors
1
Bidg. Age
80

Current Use (Prior if being demolished)
Vacant Residence

Name of Monitoring Firm Hired by Building Owner (8)
Epic Environmental, LLC

ASC#/No.

Name of Abatement Contractor (9)
Shade Environmental, LLC

Street Address
1930 Brown Road
City, State, Zip Code
Newfield, NJ 08344

Telephone No.
856-205-1077
License No.
00542

Name of OSHA Monitor
EMSL Analytical, Inc.

Start Date (10)
08 / 08 / 16
Scheduled Completion Date (11)
08 / 10 / 16

Occupancy Status During Abatement (Check only one)
X Facility Closed/Vacated During Entire Period of Abatement
□ Abatement Performed Outside of Normal Facility Hours - Describe

Time of Abatement:
AM - PM
PM - AM

Scope of Work (Check all that apply)
X ≥3 sf or ≥3 l f
□ ≥150 sf or ≥250 l f
□ Renovation
□ Demolition
X Full Containment with Negative Pressure
□ Mini-Enclosure
□ Glovebox Procedure
□ Non-Exempt (*) and Non-Frangible Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED
IN Facility (13)

Basement
□ □ □ Paper on Ductwork

□ □ □ Cubic Yards of Waste
1
Name of Registered Landfill
Cumberland County Landfill
City, State
Newburg, PA

Completed By (Print or Type)
Christina Lynch
Title
Operations Manager
Signature

Disposal Date
08/10/2016
Date
7/28/16

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification (1) 7 / 26 /16

Name of Building Owner/Operator (2) THE LILLIAN BOOTH ACTORS HOME

Address 155-175 WEST HUDSON AVENUE

City, State, Zip Code ENGLEWOOD, NEW JERSEY 07632

Name of Contact JORDAN STROHL

Telephone Number

Name of Facility Where Abatement is Taking Place (3)

THE LILLIAN BOOTH ACTORS HOME

Street Address 175 WEST HUDSON AVENUE

City [5] BERGEN


Name of Monitoring Firm Hired by Building Owner (8)
ENVIRONMENTAL HEALTH INVESTIGATIONS, INC.

ASCM No. 17

Type of Facility (4)

School (K-12)

Subchapter 8 (Other than K-12)

X Other (i.e. private & comm. bldgs., homes, etc.)

Square Feet 10,360

# of Floors 2

Bldg. Age 57

Current Use (Prior if being demolished): PHARM. LAB. COMMUNICATION BUILDING

Name of Abatement Contractor (9)
PAR ENVIRONMENTAL CORPORATION

Street Address 313 SPOOK ROCK ROAD

City, State, Zip Code SUFFERN, NEW YORK 10901

Telephone Number 845-359-7500

License Number 1101

Expected State Date (10) 7 / 12 /16

Sched. Completion Date (11) 9 / 30 /16

Month Day Year Month Day Year

Name of OSHA Monitor AMERISCI

Occupancy Status During Abatement (Check only one)

Facility Closed/Vacated During Entire Period of Abatement

Abatement Performed Outside of Normal Facility Hours - Describe:

X Other - Describe: Monday - Friday 8am-4pm

Scope of Work (Check all that apply)

Demolition

>3SF OR LF

X >160 SF OR 280 LF

Renovation

Full Containment with Negative Pressure

Mini-Enclo ,

Glovebag Procedure

X Non-Friable Procedure

Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)

1ST FLOOR WINGS 1 & 2

LOWER LEVEL

ATTIC

EXTERIOR WINGS 1 & 2

EXTERIOR WINGS 1 & 2

EXTERIOR WINGS 1 & 2

EXTERIOR ROOF

EXTERIOR PATIO

EXTERIOR SOFFITS WINGS 1 & 2

Is Location normally used solely by Maint/Custodial Staff (12)

Yes

No

N/A

Description of Asbestos-Containing Material (ACM) (i.e. Thermal systems insulation, surfacing, VAT, or other miscellaneous)

CEILING PLASTER

VAT & MASTIC

DUCT MASTIC

WINDOW CAULK

TRANSITE WINDOW PANELS

BUILDING CAULK

FLASHING

WATERPROOFING TAR

TRANSITE PANELS

Cubic Yards of Waste 80

Amount (Specify SF or LF) 2,700 SF

Abatement Type REPAIR

ENCAPSULATE

ENCLOSE

Name of Registered Waste Hauler NJDEP Waste Hauler ID No. 22147

Cubic Yards of Waste 80

Name of Registered Landfill GROWS LANDFILL/TULLYSTOWN

City, State, Zip Code HACKETTSTOWN, NJ 07840

Disposal Date 7/12/16-9/30/16

City, State MORGANTOWN, PA 19067/TULLYSTOWN, PA

Completed by (Print or Type) BENJAMIN SANCHEZ

Title DIRECTOR OF OPERATIONS

Signature

Date 7/26/16
Date of Notification (1) | 7-29-16
--- | ---
Name of Building Owner/Operator (2) | Monroe Township Board of Education
Agency Notified | Type Notification
- EPA | Initial
- DEP | Amended # 1
- DOL | Emergency (including justification)
- DOH | Cancellation
- DCA | 
Street Address | 423 Buckelew Avenue
City, State, Zip Code | Monroe Township, NJ 08831
Name of Contact | Jerry Tague

FACILITY INFORMATION
Name of Facility Where Abatement is Taking Place (3) | Barclay Brook Elementary School
Street Address | 358 Buckelew Avenue
City (5) | Monroe Township
County (6) | Middlesex
Court Code (7) | 
Square Feet | 50,000
# of Floors | 2
Bldg Age | 50 yrs.
Type of Facility (4) | School (K-12)
Current Use (Prior to being demolished) | school

Name of Monitoring Firm Hired by Building Owner (8) | McCabe Environmental
Street Address | 464 Valley Brook Avenue
City, State, Zip Code | Lyndhurst, NJ 07071
Project Manager for Monitoring Firm | Matthew Smith
Telephone No. | 201-438-4839
ASCM No. | 
Name of Abatement Contractor (9) | Plymouth Environmental Co., Inc.
Street Address | 923 Haws Avenue
City, State, Zip Code | Norristown, PA 19401
License No. | 00398

Start Date (10) | 7-5-16
Scheduled Completion Date (11) | 8-31-16

Occupancy Status During Abatement (Check Only One)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other - Describe:

Scope of Work (Check All That Apply)
- 250 or 250 ft²
- 2,500 to 2,500 ft²
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)

<table>
<thead>
<tr>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>various rooms</td>
</tr>
<tr>
<td>pipe tunnel</td>
</tr>
</tbody>
</table>

Descriptive of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

| VAT & mastic |
| pipe insulation |

Amount (Specify SF or LF)

| 4,230 SF |
| 1,300 LF |

Name of Registered Waste Hauler | Newark Carting
Waste Hauler ID No. | 4509
Cubic Yards of Waste | 60 cy
Name of Registered Landfill | Minerva Landfill
City, State | Waynesburg, OH
Disposal Date | 8-31-16

Completed by | James Kelly
Title | President
Signature | 
Date | 7-29-16

* Do not use this form for asbestos licensure exempted activities.
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 5:16)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>7 / 28 / 16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Woodstown-Pilesgrove Regional School District</td>
</tr>
<tr>
<td>Street Address</td>
<td>135 East Avenue</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Woodstown, NJ 08098</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>BOE Office</td>
</tr>
<tr>
<td>FACILITY INFORMATION</td>
<td></td>
</tr>
<tr>
<td>Name of Facility Where Abatement is Taking Place (3)</td>
<td>Woodstown High School/Middle School</td>
</tr>
<tr>
<td>Street Address</td>
<td>140 East Avenue</td>
</tr>
<tr>
<td>City (5)</td>
<td>Woodstown</td>
</tr>
<tr>
<td>County (6)</td>
<td>Salem</td>
</tr>
<tr>
<td>Name of Monitoring Firm Hired by Building Owner (8)</td>
<td>Horizon Group</td>
</tr>
<tr>
<td>Street Address</td>
<td>PO Box 316</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Thorofare, NJ 08086</td>
</tr>
<tr>
<td>Project Manager for Monitoring Firm</td>
<td>Steve Flanagan</td>
</tr>
<tr>
<td>Telephone No</td>
<td>856-848-0800</td>
</tr>
<tr>
<td>Start Date (10)</td>
<td>6 / 20 / 16</td>
</tr>
<tr>
<td>Scheduled Completion Date (11)</td>
<td>8 / 5 / 16</td>
</tr>
<tr>
<td>Occupancy Status During Abatement (Check only one)</td>
<td></td>
</tr>
<tr>
<td>Facility Closed/Vacated During Entire Period of Abatement</td>
<td></td>
</tr>
<tr>
<td>Abatement Performed Outside of Normal Facility Hours - Describe</td>
<td></td>
</tr>
<tr>
<td>Time of Abatement:</td>
<td></td>
</tr>
<tr>
<td>Scope of Work (Check all that apply)</td>
<td></td>
</tr>
<tr>
<td>≥ 20 sf or ≥ 200 sf</td>
<td></td>
</tr>
<tr>
<td>Renovation</td>
<td></td>
</tr>
<tr>
<td>Demolition</td>
<td></td>
</tr>
</tbody>
</table>

**Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility**

| Throughout | Plaster |
| Title Estimator | Name of Registered Waste Hauler Service Transport Group Inc |
| Cubic Yards of Waste | Minerva Landfill |
| Disposal Date | 7/11/16 |
| City, State | Waynesburg, OH |

*Do not use this form for asbestos licensure exempted activities.*
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)

Name of Building Owner/Operator (2)
Mount Holly Twp. Board Of Education

Agencies Notified
☐ EPA
☐ DOLWD
☐ DHSS
☐ DCA
(NJAC 6:23-8)

Type Notification
☐ Initial
☐ Amended
☐ Amendment #3
☐ Emergency (including justification)
☐ Cancellation

Street Address
331 Levis Dr

City, State, Zip Code
Mt. Holly, NJ 08060

Name of Contact
Bill Buffa

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
FW Holbein Middle School

Street Address
331 Levis Dr

City (5)
Mt. Holly

County (6)
Burlington

County Code (?) (STATE USE ONLY)

Type of Facility (4)
☐ School (K-12)
☐ Subchapter 8 (Other than K-12)
☐ Other (i.e., private and commercial buildings, homes, etc.)

Square Feet

# of Floors

Bldg. Age

Name of Monitoring Firm Hired by Building Owner (8)
USA Environmental Management, Inc.

ASCM No.
0112

Name of Abatement Contractor (9)
BRISTOL ENVIRONMENTAL, INC.

Street Address
344 West St.

City, State, Zip Code
Trenton, NJ 08618

Project Manager for Monitoring Firm
William Weisgarber

Telephone No.
609-656-8101

Start Date (10)
7 / 5 / 16

Scheduled Completion Date (11)
8 / 31 / 16

Occupy Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe

Time of Abatement: AM-3:30PM/ PM-1:00AM

Scope of Work (Check all that apply)
☐ ≥ 3 sf or ≥ 3 if
☐ ≥ 160 sf or ≥ 250 if

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)
Yes ☒ No ☐ N/A

Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Boiler room
Pipe Insulation
475 LF

Boiler room
Breeching Insulation
650 SF

Boiler room
Boiler Insulation
450 SF

Boiler room
Tank Insulation
350 SF

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP, INC.

NJDEP Waste Hauler ID No.
209890

Cubic Yards of Waste
30

Name of Registered Landfill
MINERVA LANDFILL

City, State
NEW CASTLE, DE 19720

Completed By (Print or Type)
Brian Scafaro

Title
Estimator

Signature

Disposal Date
8/31/2016

City, State
WAYNESBURG, OH 44688

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)  7 / 29 / 16

Name of Building Owner/Operator (2)
Mount Holly Twp. Board Of Education

Agencies Notified
☒ EPA
☒ DOLWID
☐ DHSS
☐ DCA
(NJAC 5:23-8)

Type Notification
☐ Initial
☒ Amended
☐ Amendment #3
☐ Emergency (including justification)
☐ Cancellation

Street Address
331 Levis Dr

City, State, Zip Code
Mt. Holly, NJ 08060

Name of Contact
Bill Buffa

FACILITY INFORMATION

Name of Facility Where Abatement Is Taking Place (3)
FW Holbein Middle School

Street Address
331 Levis Dr

City (5)
Mt. Holly

County (6)
Burlington

County Code (7) (STATE USE ONLY)
01

Current Use (Prior if being demolished)

Type of Facility (4)
☒ School (K-12)
☐ Subchapter 8 (Other than K-12)
☐ Other (i.e., private and commercial buildings, homes, etc.)

Square Feet

# of Floors

Bldg. Age

Name of Monitoring Firm Hired by Building Owner (8)
USA Environmental Management, Inc.

ASCM No.
0112

Name of Abatement Contractor (9)
BRISTOL ENVIRONMENTAL, INC.

Street Address
344 West State St.

City, State, Zip Code
Trenton, NJ 08618

Name of OSHA Monitor
BRISTOL ENVIRONMENTAL, INC.

Project Manager for Monitoring Firm
William Weisgarber

Telephone No.
609-656-8101

Start Date (10)
7 / 5 / 16

Scheduled Completion Date (11)
8 / 31 / 18

Occupancy Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM_3:30PM_/PM_1:00AM

Scope of Work (Check all that apply)
☐ ≥ 3 sf or ≥ 3 lf
☐ ≥ 160 sf or ≥ 260 lf
☐ Renovation
☐ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</th>
<th>Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)</th>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boiler room</td>
<td>☒</td>
<td>☐</td>
<td>Fire Brick</td>
<td>300 SF</td>
</tr>
<tr>
<td>Boiler room</td>
<td>☐</td>
<td>☐</td>
<td>Boiler Rib Insulation</td>
<td>300 SF</td>
</tr>
<tr>
<td>Boiler room</td>
<td>☐</td>
<td>☐</td>
<td>Gasket</td>
<td>2 SF</td>
</tr>
<tr>
<td>Boiler room</td>
<td>☐</td>
<td>☐</td>
<td>Incinerator</td>
<td>300 SF</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP, INC.

NUDEP Waste Hauler ID No. 20990

Cubic Yards of Waste
30

Name of Registered Landfill
MINERVA LANDFILL

City, State
NEW CASTLE, DE 19720

Disposal Date
8/31/2016

City, State
WAYNERSBURG, OH 44688

Completed By (Print or Type)
Brian Scafi

Title
Estimator

Signature

Date
7/29/16

* Do not use this form for asbestos Incure Exempted activities.
### State of New Jersey - Notification of Asbestos Abatement
(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

**GAC Project # 060-15**

**Date of Notification (1):** July 27, 2016

**Name of Building Owner/Operator (2):** RUTGERS, THE STATE UNIVERSITY OF NJ

**Address:**
- **Street Address:** ENVIRONMENTAL HEALTH & SAFETY DEPT.
- **City, State, Zip Code:** 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS, PISCATAWAY, NJ 08854

**Telephone Number:**
- **Name of Contact:** MICHAEL SMITH, ENV. HEALTH & SAFETY

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3):** HILL CENTER, BLDG# 3752

**Street Address:** BUSCH CAMPUS

**City (5):** PISCATAWAY
**County (6):** MIDDLESEX
**County Code:** 0098

**Type of Facility (4):**
- School (K-12)
- Subchapter 8 (other than K-12)
- Other (i.e. private & commercial buildings, homes, etc.)

**So. Feet:** n/a
**# of Floors:** 8
**Bldg. Age:** 60+ years

**Current Use (prior if being demolished):** ACADEMIC

**Name of Contractor (9):** GREENWOOD ABATEMENT CONSULTANTS, INC.

**Address:** 268 MAIN STREET

**City, State, Zip Code:** BUTLER, NJ 07405

**Telephone Number:** 973-492-0477
**License Number:** 00840

**Occupancy Status During Abatement (Check only one):**
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe:
- Other - Describe: Shift Hours: 5:00 PM – 5:00 AM Daily (24 hours as needed)

**Project Manager for Monitoring Firm:** BRIAN KEARNY

**Telephone Number:** 609-386-8800

**Name of OSHA Monitor:** ENVIRONMENTAL VISION, INC.

**Telephone Number:**

<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ ≥ 5 sf or ≥ 3 if</td>
</tr>
<tr>
<td>☐ ≥ 100 sf or ≥ 260 if</td>
</tr>
<tr>
<td>☒ Renovation</td>
</tr>
<tr>
<td>☐ Demolition</td>
</tr>
<tr>
<td>☐ Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>☐ Mini-Enclosure</td>
</tr>
<tr>
<td>☐ Glovebag Procedure</td>
</tr>
<tr>
<td>☐ Non-Exempted (*) and Non-Fireable Procedure</td>
</tr>
</tbody>
</table>

**Location of Asbestos-Containing Material (ACM) in Facility (13):**

<table>
<thead>
<tr>
<th>Is Location Normally Used Solely by Maintain/Custodial Staff? (12)</th>
<th>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ YES</td>
<td>Description of ACM (if applicable)</td>
</tr>
<tr>
<td>☐ NO</td>
<td></td>
</tr>
<tr>
<td>☐ NA</td>
<td></td>
</tr>
</tbody>
</table>

**Room:** 034

| VAT | 70 SF |

| Room 034 | VAT | 70 SF |

**Room 034**: VAT 70 SF

**Name of Registered Landfill:** G.R.O.W.S. North Landfill

<table>
<thead>
<tr>
<th>Disposal Date</th>
<th>City, State</th>
</tr>
</thead>
<tbody>
<tr>
<td>08/07/16</td>
<td>100 New Ford Mill Rd, Morrisville, Pa 19067 215-738-1700</td>
</tr>
</tbody>
</table>

**Complained by (Print or Type):** RAYMOND C. PEDALINO

**Title:** SENIOR PROJECT MANAGER

**Date:** July 27, 2016

**Signature:** Raymond C. Pedalino

**Copies To:** Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney
**State of New Jersey - Notification of Asbestos Abatement**
(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

**GAC Project # 060-15**

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>July 29, 2016</th>
</tr>
</thead>
</table>

**Agencies Notified**
- [ ] EPA
- [ ] DCA
- [X] DOL
- [ ] DEP - No Longer REQUIRED
- [ ] DOH

**Notification Type**
- [X] Initial Notification
- [ ] Amended Notification #
- [ ] Emergency (including justification)
- [ ] Cancelled

**Name of Building Owner/Operator (2)**
RUTGERS, THE STATE UNIVERSITY OF NJ

**Street Address**
ENVIRONMENTAL HEALTH & SAFETY DEPT.
27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS

**City, State, Zip Code**
PISCATAWAY, NJ 08854

**Name of Project Contact**
MICHAEL SMITH, ENV.
HEALTH & SAFETY

**Facility Information**

- **Name of Facility Where Abatement is Taking Place (3)**
  - RWJ MS TOWERS, BLDG# 3688

- **Street Address**
  - BUSCH CAMPUS

<table>
<thead>
<tr>
<th>City (5)</th>
<th>Middlesex</th>
</tr>
</thead>
<tbody>
<tr>
<td>PISCATAWAY</td>
<td></td>
</tr>
</tbody>
</table>

- **Name of Monitoring Firm Hired by Bldg. Owner (6)**
  - ATC

- **ASCN No.**
  - 0098

- **Street Address**
  - 3 TERRI LANE

- **City, State, Zip Code**
  - BURLINGTON, NJ 08016

- **Project Manager for Monitoring Firm**
  - BRIAN KEARNY

- **Telephone Number**
  - 609-386-8800

- **License Number**
  - 00840

- **Street Address**
  - 20-21 WARGARAW ROAD

<table>
<thead>
<tr>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>BUTLER, NJ 07405</td>
</tr>
</tbody>
</table>

- **Name of CSH Monitor**
  - ENVIROVISION, INC.

- **Name of Contractor (9)**
  - GREENWOOD ABATEMENT CONSULTANTS, INC.

- **Street Address**
  - 511 MAIN STREET

<table>
<thead>
<tr>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAIRLAWN, NJ</td>
</tr>
</tbody>
</table>

**Scope of Work (Check all that apply)**

- [X] ≥ 3 sf or ≥ 3 if
- [ ] ≥ 160 sf or ≥ 260 if

- [X] Renovation
- [ ] Demolition

- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovabag Procedure
- [ ] Non-Exempted (*) and Non-Friable Procedure

**Location of Asbestos-Containing Material (ACM) in Facility (13)**

<table>
<thead>
<tr>
<th>In Location Normally Used Solely by Maint./Custodial Staff? (12)</th>
<th># of Floors</th>
<th>Building Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td>60+ years</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description of Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAC, or other miscellaneous)</th>
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</thead>
<tbody>
<tr>
<td>&lt;9 LF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Room</th>
<th>RB-75A</th>
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<tbody>
<tr>
<td>Name of Reg. Waste Hauler</td>
<td></td>
</tr>
<tr>
<td>See Hauler Below #1 &amp; 2</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>NJDEP Waste Hauler ID #</th>
</tr>
</thead>
<tbody>
<tr>
<td>See Below</td>
</tr>
</tbody>
</table>

Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405
NJDEP # 28999

Hauler #2) Newark Carting, Inc., Newark, NJ
NJ DEP # 04509

**Complied by (Print or Type)**

RAYMOND C. PEDALINO
Title
SENIOR PROJECT MANAGER

**Signature**
Raymond C. Pedalino

**Date**
July 29, 2016

**Copies To:**
Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney
<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>7 / 7 /16</th>
</tr>
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<tbody>
<tr>
<td>Agencies Notified</td>
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<tr>
<td>EPA</td>
<td>X Initial Notification</td>
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<tr>
<td>DEP</td>
<td>Amended Notification</td>
</tr>
<tr>
<td>DOL</td>
<td>Cancellation</td>
</tr>
<tr>
<td>DOH</td>
<td>On Hold</td>
</tr>
<tr>
<td>DCA</td>
<td>EMERGENCY NOTIFICATION</td>
</tr>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>MERCK SHARP &amp; DOHME CORP.</td>
</tr>
<tr>
<td>Street Address</td>
<td>126 E. LINCOLN AVENUE, P.O. BOX 2000, RY21441</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>RAHWAY, NEW JERSEY 07065</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Sandra M. Schenk</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

Name of Facility Where Abatement is Taking Place (3)
MERCK SHARP & DOHME CORPORATION

Street Address
126 EAST LINCOLN AVENUE - BUILDING 84

City (5) County (6) County Code (7) (STATE USE ONLY)
RAHWAY \_ \_ \_ 104

Name of Monitoring Firm Hired by Building Owner (8)
ENVIRONMENTAL HEALTH INVESTIGATIONS, INC.

Asbestos Contractor (9)
PAR ENVIRONMENTAL CORPORATION

Current Use (Prior if being demolished)
OFFICE
Square Feet # of Floors Bidg. Age
99,082 3 47

Name of OSHA Monitor
AMERISCI LABORATORIES INC #11480

Expected State Date (10)
8 / 9 /16
Sched. Completion Date (11)
11 / 30 /16

Month Day Year Month Day Year

Occupancy Status During Abatement (Check only one)

- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe: Monday - Friday 7am-3:30 pm

Scope of Work (Check all that apply)

- Demolition
- Renovation
- >35SF OR LF
- >160 SF OR 280 LF
- Non-Friable Procedure
- Full Containment with Negative Pressure
- Mini-Enclo.
- Glovebag Procedure

Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)

Is Location normally used solely by Maint/Custodial Staff (12)
Yes No N/A

Description of Asbestos-Containing Material (ACM)
(i.e. Thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount
(Specify SF or LF)

Abatement Type
REMOVAL REPAIR ENCAPSULATE ENCLOSE

EXTerior
X ROOF FLASHING 3,370 X

Name of Registered Waste Hauler
FREEHOLD CARTAGE, INC.
825 HIGHWAY 33

Cubic Yards of Waste
80

Name of Registered Landfill
LYCOMING COUNTY RESOURCE MANAGEMENT SERVICES
447 ALEXANDER DRIVE/ROUTE 15

City, State
FREEHOLD, NEW JERSEY

Disposal Date
08/08/11/30/2016

City, State
MONTGOMERY, PA 17752

Completed by (Print or Type): BENJAMIN SANCHEZ
Title: DIRECTOR OF OPERATIONS
Signature: [Signature]
Date: 3/19/16
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:96 and 12:129)

Project #

Date of Notification (1)
07/28/2016

Name of Building Owner/Operator (2)
Irene Horowitz

Agencies Notified
EPA
DEP
DOL
DOH
DCA

Type Notification
Initial
Amended
Amendment #
Emergency (Including
Justification)
Cancellation

Street Address

City, State, Zip Code
Denville, NJ 07834

Name of Contact
Diallo Askew

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Private House

Street Address

City (5)
Denville, NJ

County (6)
Morris

County Code (7)

Name of Monitoring Firm Hired by Building Owner (8)

ASCM No.

Name of Abatement Contractor (9)
Nick Restoration LLC

Street Address
72 Brookside Rd

City, State, Zip Code
Randolph, NJ 07869

Telephone No.
973-933-2550

License No.
01133

Type of Facility (4)
School (K-12)
Subchapter 8 (Other than K-12)
Other (i.e., private & commercial buildings, homes,
etc.)

Square Feet

# of Floors

Bldg. Age

Current Use (Prior to being demolished)

Start Date (10)
08/06/2016

Scheduled Completion Date (11)
08/08/2016

Name of OSHA Monitor
IRIS

Occupancy Status During Abatement (Check Only One)
Facility Closed/Vacated During Entire Period of Abatement
Abatement Performed Outside of Normal Facility Hours
Other - Describe

Scopes of Work (Check All That Apply)
3 ≤ sf or ≤ 25 ft
25 ≤ 160 sf or ≤ 260 ft
Renovation
Demolition

Location of Asbestos-Containing Material (ACM)

TO BE ABATED

in Facility

(13)

Description of Asbestos Containing Material (ACM)

(i.e., thermal systems insulation, surfacing, VAT, or
other miscellaneous)

Amount

Specify

SF or LF

Removal

Abatement Type

Basement Area
TSI- Wrap & cut
100 LF

Name of Registered Waste Hauler
Nick Restoration LLC

Name of Registered Landfill
G.R.O.W.S

City, State
Randolph, NJ 07869

City, State
Tullytown, PA

Completed by
Elvira Mrda

Title
President

Signature
Date
07/28/2016
**State of New Jersey**
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 12:120)

**Date of Notification:** 7/29/16

**Name of Building Owner/Operator:** PSEG

**Address:** 4000 Hadley Road
**City, State, Zip Code:** SOUTH PLAINFIELD, NJ 07080

**Name of Contact:** Gus Najera

**Facility Information**

**Name of Facility Where Abatement is Taking Place:** PSEG

**Street Address:** 17-01 Nevins Road
**City:** FAIR LAWN
**County:** BERGEN

**Name of Monitoring Firm Hired by Building Owner:** ENVIROMENTAL TACTICS
**ACSM No.:** 0045

**Type of Facility:** Other (i.e. private & commercial buildings, homes, etc.)

**Square Feet:** 1700
**# of Floors:** 1
**Bldg. Age:** 61 yrs

**Name of Abatement Contractor:** UNIQUE SYSTEMS OF AMERICA

**Street Address:** 396 WHITEHEAD AVE.
**City, State, Zip Code:** SOUTH RIVER, NJ 08882

**Project Manager for Monitoring Firm:** Tom Geiger
**Telephone No.:** 732-290-2217

**Start Date:** 8/1/16
**Scheduled Completion Date:** 8/11/16

**Scope of Work (Check All That Apply):**
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

**Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility:**

<table>
<thead>
<tr>
<th>Location</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Window</td>
<td>No</td>
<td>ACM Caulking</td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler:** WASTE MANAGEMENT
**NJDEP Waste Hauler ID No.:** 1125

**Cubic Yards of Waste:** 2.0 cu yds

**Name of Registered Landfill:** GROWS NORTH
**Disposal Date:** 7/24/16
**City, State:** MORRISVILLE, PA

**Completed by:** Carol Raimo
**Title:** Office Mgr

**Signature:** Carol Raimo
**Date:** 7/29/16

---

* Do not use this form for asbestos licensure exempted activities.
**Date of Notification (1)**
7/28/16  

**Agencies Notified**
- EPA  
- DEP  
- DOL  
- DOH  
- DCA  

**Type Notification**
- Initial  
- Amended  
- Amendment #  
- Emergency (including justification)  
- Cancellation  

**Name of Building Owner/Operator (2)**
Joe Murphy  

**Street Address**

**City, State, Zip Code**
Glen Ridge, NJ  

**Name of Contact**
Lt. Chas Engel  

**Telephone Number**

---

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3)**

**Street Address**

**City (5)**
Glen Ridge  

**County (6)**
Essex  

**County Code (7)**

**Square Feet**
2100  

**# of Floors**
2  

**Bldg. Age**
68  

**Name of Monitoring Firm Hired by Building Owner (8)**

**ASCM No.**

**Name of Abatement Contractor (9)**
ABS Environmental Services, LLC  

**Street Address**

**PO Box 483, 4 E Gate Drive**  

**City, State, Zip Code**
Glenwood, NJ 07418  

**Project Manager for Monitoring Firm**

**Telephone No.**
973-764-2276  

**License No.**
703  

**Start Date (10)**
8/8/16  

**Scheduled Completion Date (11)**
9/8/16  

**Occupancy Status During Abatement (Check Only One)**
- Facility Closed/Vacated During Entire Period of Abatement  
- Abatement Performed Outside of Normal Facility Hours  
- Other – Describe:  

**Scope of Work (Check All That Apply)**
- ≥ 3,000 sf  
- ≥ 1,500 sf ≤ 3,000 sf  
- Renovation  
- Demolition  
- Full Containment with Negative Pressure  
- Mini-Enclosure  
- Glovebag Procedure  
- Non-Exempted (*) and Non-Final Procedure  

**Location of Asbestos-Containing Material (ACM) TO BE ABATED**

**In Facility**
15  

**Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)**
- Yes  
- No  
- N/A  

**Description of Asbestos-Containing Material (ACM)**
- Thermal insulation, surfacing, VAC, or other miscellaneous)  

**Amount (Specify SF or LF)**
105 LF  

**Abatement Type**

---

**Name of Registered Waste Hauler**
Freehold Cartage  

**NJDEP Waste Hauler ID No.**
15939  

**Cubic Yards of Waste**
TBD  

**Name of Registered Landfill**
Western Berks Landfill  

**City, State**
Birdsboro, PA  

**Disposal Date**
TBD  

**Completed by**
A. Scott Higgins  

**Title**
President  

**Signature**

**Date**
7/28/16  

---

*Do not use this form for asbestos licensure exempted activities.*
<table>
<thead>
<tr>
<th>Title</th>
<th>P. J. Higgins</th>
<th>A. Scott Higgins</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>A. Scott Higgins</td>
<td>A. Scott Higgins</td>
</tr>
<tr>
<td>Signature</td>
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<tr>
<td>Date</td>
<td>7/28/16</td>
<td>7/28/16</td>
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<tr>
<td>Agency Notified</td>
<td></td>
<td>EPA/DOL</td>
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<tr>
<td>Initial Notification</td>
<td>Yes</td>
<td>No</td>
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<tr>
<td>Amended Notification</td>
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<td>No</td>
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<td>Type</td>
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<td>Type</td>
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<tr>
<td>Notes</td>
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<td>Notes</td>
</tr>
</tbody>
</table>

### Facility Information
- **County**: Sussex
- **City**: Sparta
- **State**: NJ
- **Zip Code**: 07871

### Description of Asbestos-Containing Material (ACM)
- **Location**:
  - U3ER-Wise
  - 3086 Wise Ave
- **Quantity**: 165.9 lbs
- **Description**: Vermiculite insulation

### Asbestos-Containing Material (ACM) Schedule of Removal
- **Removal**: 800 square feet
- **Type**: Full Containment with Negative Pressure

### Other Information
- **Operator**: John Hansen
- **Date of Notification**: 7/28/16
- **Print Form**: John Hansen

---

**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to N.J.A.C. 8:50 and 12:20)
Date of Notification (1)  7/28/2016  
Name of Building Owner/Operator (2)  Judith Epstein  
City, State, Zip Code  South Orange, NJ, 07079  
Name of Contact  Judith Epstein  
Type of Facility (4)  
Square Feet  2600  
Current Use (Prior if being demolished)  87  

Name of Facility Where Abatement is Taking Place (3)  

Schedule Completion Date (11)  8/9/16  
Occupancy Status During Abatement (Check only one)  
[X] Abatement Performed Outside of Normal Facility Hours - Describe: Other Occupancy Description  

Scope of Work (Check all that apply)  
[X] ≥ 2 sf or ≥ 3 LF  
[X] Renovation  
[X] Demolition  

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  
Location Normally Used Solely By Maintenance/Custodial Staff (12)  
Description of Asbestos-Containing Material (ACM) (i.e., insulation, surfacing, VAT, or other miscellaneous)  
Amount (Specify SF or LF)  58 LF  
Abatement Type  

Name of Registered Waste Hauler  AZTECH MANAGEMENT, INC.  
Cubic Yards of Waste  1.0  
Name of Registered Landfill  Minerva Enterprise INC  
Disposal Date  8/10/16  
City, State  Montclair, NJ 07042  
Waynesburg, Ohio 44688  
Completed By (Print or Type)  Constantine Vivian  
Title  President  
Signature  
Date  7/28/2016
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification 7/27/16
Name of Building Owner / Operator (2)
HVA Development

Agencies Notified
EPA
DEP
[DOL X]
[DOH X]
DCA
Type of Notification
Emergency Notification
Initial Notification
Amended Notification
Cancellation

Street Address
247 Bridge Avenue
City, State & Zip Code
Red Bank, NJ 07701

Name of Contact
Bill Bogdon

[FACILITY INFORMATION]

Name of Facility Where Abatement is Taking Place (3)
Office Building

Street Address
1341-1343 Route 34
City (5)
Aberdeen
County (6)
Monmouth
County Code (7)


Type of Facility (4)
School (K-12)
Subchapter 8 (Other than K-12)
X Other (i.e., private & commercial buildings, homes, etc.)

Square Feet
5,000
# of Floors
2
Bldg. Age
50

Current Use (Prior if being demolished)
Office

Name of Abatement Contractor (9)
Global Abatement Services, LLC
Street Address
443 Schoolhouse Road
City, State & Zip Code
Monroe Township, NJ 08831

Telephone Number
732-605-9062
License Number
00714

Name of Monitoring Firm Hired by Building Owner (8)
Environmental Tactics, Inc
Street Address
64 Broad Street
City, State & Zip Code
Matawan, NJ 07747

Project Manager for Monitoring Firm
Tom Geiger
Telephone Number
732-290-2217

Scheduled Start Date (10)
8/9/16
Scheduled Completion Date (11)
8/15/16

Occupancy Status During Abatement (Check only one)
X Facility Closed/Vacated During Entire Period of Abatement

Abatement Performed Outside of Normal Facility Hours -
Describe:
Other - Describe:

Scope of Work (Check all that apply)
X Demolition
Renovation
Large Project
X Quantity is ≥ 3 SF or ≥ 3 LF ACM

Full Containment with Negative Pressure
Mini-Enclosure
Glovebag Procedure
X Other - Non-friable

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility
(13)

Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)

Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)

Amount (Specify Square Feet or Linear Feet)

Abatement Type
(Specify: Removal, Repair, Encapsulation or Enclosure)

Full Containment with Negative Pressure
Mini-Enclosure
Glovebag Procedure
X Other - Non-friable

Roof
N/A
Roofing material
1,800 SF
Removal

Exterior of 1341
N/A
Window glaze
304 SF
Removal

Exterior of 1343
N/A
Window glaze
120 SF
Removal

Name of Registered Waste Hauler
NJDEP Waste Hauler ID #
18693

Cu. Yds. of Waste
20

Name of Registered Landfill
GROWS

City, State
Freehold, NJ

Disposal Date
8/15/16
City, State
Morrisville, PA

Completed By (Print or Type)
Dominick Tringali
Title
Manager

Signature

Date
7/27/16

ASB-41 JUN 95 G4667