State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)			Name of Building							
August 8, 2016				Fred L	ang		30	0	75	
[] DEP [] Amend [x] DOL Amend [] Emerg	Notification ded Notification dment # ency (including		Street Address City, State, Zip Co		ı, NJ 08820	DE C	E	N N		
[X] DOH justific			Name of Contact	Fred La		elephone Number				L
, , , , , , , , , , , , , , , , , , , ,		FAC	L ILITY INFORM	MATION		ASBEST	1500	TATE		
Name of Facility Where Abatement is Taking F Residence	Place (3)	TAC	ILITT IN OIC	IATION	Type of Facility (4)	School (k-12)	EN21	NG_	101-8	
Street Address				Subchapter 8 (other than k-12) [X] Other (i.e., private & commercial building homes, etc.)					lings,	
City	County (6)		County Code (7) (STATE USE ONL	Y)	Square feet 1500 sf	# of Floors	Bldg	. Age 6	0	
Seaside Park	Ocean				Current Use (Prior if Residen	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE				
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM No.	Name of	Abatement Contractor (Inc			
Street Address				Street Ad	dress		mc.			
City, State, Zip Code				City, Stat	e, Zip Code	oute 9, Unit 61				
Project Manager for Monitoring Firm	Number		Toms River, New Jersey 08755-1271 Telephone Number 732-349-9932 License Number 00624							
Scheduled Start Date (10) 9/7/16	Schedule 9/8/		on Date (11)		OSHA Monitor	L. Analytical				
Occupancy Status During Abatement (Check or [X]] Facility Closed/Vacated [] Abatement Performed O [] Other – Describe	od of Abat		Street Ad	dress 1056 St e, Zip Code	elton Road way, New Jerse	y 088.	54			
Scope of Work (Check all that apply)				[]	Full Containment	with Negative Pres	sure			
[] >3 sf or ≥3 lf [x] ≥160 sf or ≥260 lf	[] [x]	Renova: Demoli		[x]	Glovebag Procedu Non-Exempted (*)		Procedu	re		
							Abate	ement (Гуре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	Is Locate Normally Solely I Maintenance/C Staff (12) YES NO	used	(i.e	Description bestos-Con Material (A c., thermal sulation, sur VAT, of mer miscella	taining .CM) systems rfacing, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	ENCLOSURE
Exterior	X		Asbestos sidi	ng		1300 sf	X			
		-								
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Wa	20223	Ø.	ards of Wast	e Name of Register T.R.R.F.	ed Landfill				
City, State Toms River, New Jersey		Dispos 9/9/1	sal Date	City, Sta	_{ote} ówn, Pennsylvania					
Completed by (Print or Type) Nicholas Fernicola	Title Project Mana		Signature	1	Let		Date 8/8/	2016		

[D]	E	G		[] []/] Date Réce	eived	F
	4	/G		2019		
L AS	BBES'	TOS ICE	00	NTRO IC	L&	

Operat	tor Project #:	Postmark:		Notificat	ion:	7.0				
I.	TYPE OF NOTIFICATION (O - Original R - Revised C - Ca	ancelled):	0	II.	IS ASBESTOS PRESENT? (Y	es/No):	Y			
Ш.	FACILITY INFORMATION (identify owner, removal contractor	r and other	operator)							
	OWNER NAME: Fred Lang									
	Address:									
	City: Edison State:	New Je	rsey	Zip:	08820					
	Contact: Fred Lang		8	Tel:	732-771-4032					
	REMOVAL CONTRACTOR: Guardian Contractor	racting, I	nc.		NJ License: 00624	4				
	Address: 1889 Route 9, 1	Unit 61								
	City: Toms River State:	New Je	rsey	Zip:	08755					
	Contact: Nicholas Fernic	cola		Tel:	732-349-9932					
	OTHER OPERATOR (if different)				NJ License:					
	Address:				· ·					
	City: State:			Zip:						
	Contact:			Tel:						
IV.	TYPE OF OPERATION (D - Demo O - Ordered Demo R -	- Renovatio	n E - Emergency I	Renovation):	D					
V. FACILITY DESCRIPTION (Including building name, number and floor or room number)										
	Building Name: Residence									
	Address: 38 6 th Avenue									
	City: Seaside Park State:	New Je	ersey	County:	Ocean					
	Site Location: exterior									
	Building Size: 1500 sf # of Floo	ors:	1	Age in Y	'ears: 60					
	Present Use: Residence		Prior Use:	Resider	ice					
VI.	PROCEDURE, INCLUDING ANALYTICAL METHOD, IF AF	PPROPRIA	TE, USED TO DET	ECT THE PRE	SENCE OF ASBESTOS MATER	RIAL:				
VII.	IS MATERIAL ASSUMED TO BE ASBESTOS? APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:					Non	friable			
	Regulated ACM to be removed		RACM		I O O I MIONI		s Material To Be			
	Category I ACM not removed Category II ACM not removed		To Be Removed		LOCATION	Ren	noved			
	Control and the Company of the Control and the Company of the Comp					Cat I	Cat II			
	Pipes (Linear feet):									
	Surface Area (Square feet): 1300 sf	Asbest	os siding		exterior					
	RACM Off Facility Component (Cubic feet):									
VIII.	SCHEDULE DATES ASBESTOS REMOVAL (MM/DD/YY)	Start:	9/7/1	6	Complete: 9/8	3/16				

NOTIFICATION OF DEMOLITION AND RENOVATION (continued)

DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTES AT THE DEMOLITION AND RESOLVATION STITE. There is removed, the work one actual the building will be reported from the antice to be an actual to building and it is not to the antice to be an actual to building end to be altered by profitable procedures. At waste will be placed in studie out Bape, waited and absolute and placed in a broad of the anticent well-stated and placed in anticent well-stated and placed in a broad of the anticent well-s	X.	DESCRIPTION OF PLANNED DEMOLITION OR	RENOVATION WO	ORK, AND METHOD(S) To	O BE USED	
DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EXCESSIONS OF ASSESTOR AT THE DEMOLITION AND RENOVATION STIE: Prior to removel, the work mea around the braiding will be reped of with causins tape and warring again. Practic theories will be flavored to a follow processor. At water will be produced in detailed proceed as a follow for the processor. At water will be produced in detailed and blanded and placed as a follow for the processor. At water will be produced to the processor. At water will be produced as a follow for the processor. At water will be produced as a follow for the processor. At water will be produced as a follow for the processor. At water will be produced as a follow for the processor. At water will be produced as a follow for the processor. At water will be produced as a follow for the processor. At water will be produced as a follow for the processor. At water will be produced as a follow for the processor. At water will be produced as a follow for the processor. At water will be produced as a follow for the processor. At water will be produced as a follow for the produced as a followed by the produced as a follow for the produced as a followed by the produced as a follow for the produced as a					ID E @	P 1 D
AND RENOVATION SITE: Prior to remove, the work area around the building will be roped off with carrier tags. Plants the titing walls placed on the proof before and the street writter removed by one-finite procedures. All waste will be placed in double of mil Bags, tested and labeled and placed in a looked framaning-duling and the street writter removed by one-finite procedures. All waste the placed in double of mil Bags, tested and labeled and placed in a looked framaning-duling and analysis of the street of the street will be placed in double of mil Bags, tested and labeled and placed in a looked framaning-duling and Address. It was to the street of					11) 5 6	E I V E IN
Phote to reasonal, the work area around the baildings will be roughed of white castion upon and wanting again. Plants the tensing white placed from a groupd below and the arbasted winter frammoved by soc-finishe procedures. All wanter will be placed in disable of mile Bags, readed and hadded and placed in a forcite contamination. AGESTOS COLUTROL & TENSIONS Address: 1889 Route 9, Unit 61 City: Toms River Nicholas Fernicola WASTE TRANSPORTER #2 Name: Address: Nicholas Fernicola WASTE TRANSPORTER #2 Name: Address: Zip: 08755 Contact Person: City: State: Zip: Contact Person: WASTE DISPOSAL SITE Name: T.R.R.F. Location: Bordentown Road City: Tullytown State: Pennisylvania Zip: 19007 Telephone: 215-943-9732 Pennit #: 101494 xiv: If DeMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW AND ATTACH COPY OF ORDER Name: Title: Authority: Date of Order (MANDDYY): Date Ordered to Begin (MMDDNYY): xv: FOR EMERGENCY RENOVATIONS Date and Hour of Emergrancy (MANDDYY): Description of the Sudden, Unexpected Event: Explanation of how the event caused usualse conditions or would cause equipment damage or an unreasonable financial burdon: xvi: CICRTERY THAT AN INDIVIDUAL THAN BED COLUMN THE EVENT THAT UNEXPECTED ASSESTOR IS POUND OR PREVIOUSLY NONFRIABLE ASSESTOR MATERIAL BECOMES CRUMBLED, PLUVERIZED, OR REDUCED TO POWDER Xviii. LICERTERY THAT AN INDIVIDUAL TRANSPEN IN THE PREVIOUS OF THIS REQUIRED TO POWDER Xviii. LICERTERY THAT AN INDIVIDUAL TRANSPEN IN THE PREVIOUS OF THIS REQUIRED TO POWDER Xviii. LICERTERY THAT AN INDIVIDUAL TRANSPEN IN THE PREVIOUS OF THIS REQUIRED TO ADMINISH ASS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURNON THE PREVIOUS PROVENTIAL THE PREVIOUS OF THE SEGULATION (40 CPR PART 6), SUPPART M) WILL BE ONSTITE DURNON THE PREVIOUS OF THIS REQUIRED TRANSPING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURNON THE PROVIDED OF THIS THAT THE PROVIDED	xi.		GINEERING CONT	ROLS TO BE USED TO PE	[]]]]]	11 111
Address: City: Toms River Contact Person: Nicholas Fernicola WASTE TRANSPORTER #1 Name: State: New Jersey City: Toms River Nicholas Fernicola WASTE TRANSPORTER #2 Name: City: State: Zip: 08755 Contact Person: Contact Person: WASTE TRANSPORTER #2 Name: Address: City: State: Zip: Contact Person: Contact Person: WASTE DISPOSAL SITE Name: T.R.R.F. Location: Bordentown Road City: Tullytown: State: Pennsylvania Zip: 19007 Telephone: 215-943-9732 Pennit #: 101494 XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE DENTIFY THE AGENCY BELOW AND ATTACH COPY OF ORDER Name: Title: Authority: Date of Order (MM/DD/YY) Date Of Order (MM/DD/YY) Date Of Order (MM/DD/YY) Description of the Sudden, Unexpected Event: Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden: XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULLVERIZED, OR REDUCED TO POWDER XVII. 1CERTIFY THAT AN INDIVIDUAL TRAINED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE AVAILABLE FOR INSPECTION DURING NORMALB BUSINESS MOURS. (Required after Novgrofor 20, 1991) XVII. 1CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVIETIONS OF THIS REQUILITATION (40 CFR PART 61, SUBPART M) WILL BE ONSTITE DURING PULL BE AVAILABLE FOR INSPECTION DURING NORMALB BUSINESS MOURS. (Required after Novgrofor 20, 1991) XVIII. 1CERTIFY THAT THE ABOVE INFORMATION IS CORRECT. Nicholas Fermicola (*Project Manageer** August 8, 2016		Prior to removal, the work area around the building will be	oped off with caution to	ape and warning signs. Plastic sl	neeting will be placed on the ground	
MASTE TRANSPORTER #1 Name: Guardian Contracting, Inc. Address 1889 Route 9, Unit 61 City: Toms River State: New Jersey Zip: 08755 Contact Person: Nicholas Fernicola WASTE TRANSPORTER #2 Name: Address: City: State: Zip: Zip: Contact Person: WASTE TRANSPORTER #2 Name: T.R.R.F. Location: Bordentown Road City: Tullytown State: Permisylvania Zip: 19007 Telephone: 215-943-9732 Permit #1 101494 XIV. F DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW AND ATTACH COPY OF ORDER Name: Tele: Authority: Date of Order (MM/DD/YY): Date Ordered to Begin (MM/DD/YY): XV. FOR EMERGERCY RENOVATIONS Date and Hour of Emergency (MM/DD/YY): Description of the Sudden, Unexpected Event: Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden: XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER XVII. I CERTIFY THAT AN DIDIVIDUAL TRANDED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER XVII. I CERTIFY THAT AN DIDIVIDUAL TRANDED IN THE FROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRANSING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION JORGEN MARRIED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRANSING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION JORGEN MARRIED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRANSING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION JORGEN MARRIED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL		removed by non-mable procedures. All waste will be place	d in double 6 mil. Bags,	, sealed and labeled and placed b	ASBESTO:	S CONTROL &
Address: 1889 Route 9, Unit 61 City: Toms River State: New Jersey Zip: 08755 Contact Person: Nicholas Fernicola WASTE TRANSPORTER #2 Name: Address: Zip: UST. Contact Person: Zip: State: Zip: Zip: Contact Person: Zip: Contact Person: Zip: Description of Person: Zip: Zip: Zip: Zip: Zip: Zip: Zip: Zip		WILLIAMS TO ANIGO DEPORTED HE ANIGO DE CARROL	lian Cantas atina	Tue	LICE	Noing
City: Name: New Jersey Zip: 08755 Contact Purson: Nicholas Fernicola WASTE TRANSPORTER #2 Name: Address: City: State: Zip: Contact Person: wiii. WASTE DISPOSAL SITE Name: T.R.R.F. Location: Bordentown Road City: Tullytown State: Pennsylvania Zip: 19007 Telephone 215-943-9732 Pennit #: 101494 xiv. If DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE DENTIFY THE AGENCY BELOW AND ATTACH COPY OF ORDER Name: Tule: Authority: Date of Order (MM/DD/YY): Date of Order (MM/DD/YY): Description of the Sudden, Unexpected Event: Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden: Xvi. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER Xvii. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER Xvii. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING IHAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS (Required after November 20, 1991) Nicholas Fernicola / Project Manager Xviii. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT. Nicholas Fernicola / Project Manager August 8, 2016	XII.			:		
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Address: City: State: Zip: Contact Person: XIII. WASTE DISPOSAL SITE Name: T.R.R.F. Location: Bordentown Road City: Tullytown State: Pennsylvania Zip: 19007 Telephone: 215-943-9732 Permit #: 101494 XIV. IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE DENTIFY THE AGENCY BELOW AND ATTACH COPY OF ORDER Name: Title: Authority: Date of Order (MM/DD/YY): Date Ordered to Begin (MM/DD/YY): XV. POR EMERGENCY RENOVATIONS Date and Hour of Emergency (MM/DD/YY): Description of the Sudden, Unexpected Event: Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden: XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE DURING THE DEMOLITION OR REDOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION OF PROCEDURES TO BE FOLLOWED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE DURING THE DEMOLITION OR REDOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION OF PROCEDURES THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE ONSITE DURING THE DEMOLITION OR REDOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE ONSITE DURING THE DEMOLITION OR REDOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE OVER THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE DURING THE DEMOLITION OR REDOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE OVER THE PROVISIONS OF THIS REGULATIO		Contact Person: Niche	olas Fernicola	#		
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WASTE DISPOSAL SITE Name: T.R.F.		City:	State:		Zip:	
Location: Bordentown Road		Contact Person:				
City: Tullytown State: Pennsylvania Zip: 19007 Telephone: 215-943-9732 Permit #: 101494 xiv: IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW AND ATTACH COPY OF ORDER Name: Title: Authority: Date of Order (MM/DD/YY): Date Ordered to Begin (MM/DD/YY): Xv. FOR EMERGENCY RENOVATIONS Date and Hour of Emergency (MM/DD/YY): Description of the Sudden, Unexpected Event: Explanation of bow the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden: xvi: DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER xvii. ICERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS-HOLIES. (Required after November 20, 1991) Nicholas Fernicola / Project Manager (Printed Name/Title) (Signature of Owner/Operator) August 8, 2016 (Date)	xiii.	WASTE DISPOSAL SITE Name: T.R.I	R.F.			
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Nicholas Fernicola / Project Manager August 8, 2016				(Signature of Owner	/Operator)	
	xviii.	I CERTIFY THAT THE ABOVE INFORMATION	IS CORRECT.			
(Printed Name/Title) (Signature of Owner/Operator) (Date)		Nicholas Fernicola / Project Manager				August 8, 2016
				(Signature of Owner	(Operator)	(Date)

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) August 8, 2016 Robert Marini Agencies Notified Type of Notification Street Address [X] EPA [x]Initial Notification DEP Amended Notification City, State, Zip Code Amendment # [x] DOL Wrightstown, PA 18940 ASBESTO Emergency (including justification) Name of Contact Telephone Number [x]DOH Cancellation Robert Marini] DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Residence School (k-12) Subchapter 8 (other than k-12) Street Address X Other (i.e., private & commercial buildings, homes, etc.) City County (6) County Code (7) Square feet # of Floors Bldg. Age (STATE USE ONLY) 1000 sf 60 Current Use (Prior if being demolished) Toms River Ocean Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Guardian Contracting, Inc. N/A Street Address Street Address 1889 Route 9, Unit 61 City, State, Zip Code City, State, Zip Code Toms River, New Jersey 08755-1271 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number 732-349-9932 00624 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor E.M.S.L. Analytical 8/19/16 8/22/16 Street Address Occupancy Status During Abatement (Check only one) 1056 Stelton Road Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe Piscataway, New Jersey 08854 Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure >3 sf or ≥3 lf Renovation Glovebag Procedure [X] ≥160 sf or ≥260 lf [X] Demolition [X] Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Description of Normally used Asbestos-Containing Amount Location of N E E (Specify SF Asbestos-Containing Material (ACM) Solely by Material (ACM) C P C M Maintenance/Custodial (i.e., thermal systems or LF) TO BE ABATED L 0 insulation, surfacing, P 0 in facility Staff V S S R (12)VAT, or (13)U U other miscellaneous) A R YES NO N/A L E 1000 sf X Exterior X Asbestos siding

Signature

Cubic Yards of Waste

City, State

NJDEP Waste Hauler ID No.

Title

Project Manager

20223

Disposal Date

8/23/16

Name of Registered Landfill

Date

8/8/2016

T.R.R.F.

Tullytown, Pennsylvania

Name of Registered Waste Hauler

Completed by (Print or Type)

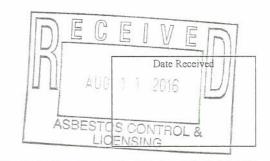
City, State

Guardian Contracting, Inc.

Toms River, New Jersey

Nicholas Fernicola

Guardian Contracting, Inc. 1889 Route 9 Suite 61 Toms River, New Jersey 08755



Operator Project #:	Postmark:	Notification:
I. TYPE OF NOTIFICATION (O - Original R - Revised C -	Cancelled): O	II. IS ASBESTOS PRESENT? (Yes/No): Y
III. FACILITY INFORMATION (identify owner, removal contract	tor and other operator)	
OWNER NAME: Robert Marini	34	
Address:		
City: Wrightstown State:	PA	Zip: 18940
Contact: Robert Marini		Tel: 215-779-2725
REMOVAL CONTRACTOR: Guardian Con	ntracting, Inc.	NJ License: 00624
Address: 1889 Route 9	, Unit 61	
City: Toms River State:	New Jersey	Zip: 08755
Contact: Nicholas Ferr	nicola	Tel: 732-349-9932
OTHER OPERATOR (if different)		NJ License:
Address:		
City: State:		Zip:
Contact:		Tel:
IV. TYPE OF OPERATION (D - Demo O - Ordered Demo I	R - Renovation E - Emergency Ren	ovation): D
V. FACILITY DESCRIPTION (Including building name, number	and floor or room number)	
Building Name: Residence		
Address: 39 Channel Road		
City: Toms River State:	New Jersey	County: Ocean
Site Location: exterior		
Building Size: 1000 sf # of Fl	oors: 1	Age in Years: 60
Present Use: Residence	Prior Use:	Residence
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF	APPROPRIATE, USED TO DETEC	T THE PRESENCE OF ASBESTOS MATERIAL:
IS MATERIAL ASSUMED TO BE ASBESTOS? VII. APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:		Nonfriable
Regulated ACM to be removed	RACM	Asbestos Material Not To Be
Category I ACM not removed Category II ACM not removed	To Be Removed	LOCATION Removed
The most too. • The fine recommendation of the second control of t	10000	Cat I Cat II
Pipes (Linear feet):		
Surface Area (Square feet): 1000 sf	Asbestos siding	exterior
RACM Off Facility Component (Cubic feet):		
VIII. SCHEDULE DATES ASBESTOS REMOVAL (MM/DD/YY)	Start: 8/19/16	Complete: 8/22/16

NOTIFICATION OF DEMOLITION AND RENOVATION (continued)

X.	DESCRIPTION OF PLANNED DEMOLITION O	R RENOVATION WO	RK, AND METHOD(S) TO	P =	
				11D),E	CEIVED
xi.	DESCRIPTION OF WORK PRACTICES AND E AND RENOVATION SITE:	NGINEERING CONTF	ROLS TO BE USED TO PR		7/1/11
	Prior to removal, the work area around the building will be removed by non-friable procedures. All waste will be plant	e roped off with caution tap ced in double 6 mil. Bags,	be and warning signs. Plastic she sealed and labeled and placed in	eeting will be placed on the ground a locked container for disposal	below and the asbestos will be STOS CONTROL & LICENSING
xii.	WASTE TRANSPORTER #1 Name: Gua	rdian Contracting,	Inc.		
		9 Route 9, Unit 61			
	City: Toms River	State:	New Jersey	Zip: 08	8755
	Contact Person: Nicl	nolas Fernicola			
	WASTE TRANSPORTER #2 Name:				
	Address:				
	City:	State:		Zip:	
	Contact Person:		11.		
xiii.	WASTE DISPOSAL SITE Name: T.R	.R.F.			
	Location: Bor	dentown Road	·		
	City: Tullytown	State:	Pennsylvania	Zip: 19	9007
	Telephone: 215-943-9732		Permit #: 1	01494	
xiv.	IF DEMOLITION ORDERED BY A GOVERNM	ENT AGENCY, PLEA	SE IDENTIFY THE AGEN	CY BELOW AND ATTACH (COPY OF ORDER
	Name:		Title:		
	Authority:				
	Date of Order (MM/DD/YY):		Date Ordered to Begin (MM/DD/YY):	
XV.	FOR EMERGENCY RENOVATIONS				
	Date and Hour of Emergency (MM/DD/YY):				
	Description of the Sudden, Unexpected Event:				
	Explanation of how the event caused unsafe condit	ions or would cause eq	uipment damage or an unreas	sonable financial burden:	
xvi.	DESCRIPTION OF PROCEDURES TO BE FOL ASBESTOS MATERIAL BECOMES CRUMBLE				REVIOUSLY NONFRIABLE
xvii.	I CERTIFY THAT AN INDIVIDUAL TRAINED THE DEMOLITION OR RENOVATION AND E AVAILABLE FOR INSPECTION DURING NOR	VIDENCE THAT THE	REQUIRED TRAINING H	AS BEEN ACCOMPLISHED	
	Nicholas Fernicola / Project Manage (Printed Name/Title)	r	(Signature of Owner/C	Operator)	August 8, 2016 (Date)
xviii.	I CERTIFY THAT THE ABOVE INFORMATION	N IS CORRECT.			
	Nicholas Fernicola / Project Manage (Printed Name/Title)	<u> </u>	(Signature of Owner/C	Operator)	August 8, 2016 (Date)

Date of Notification (1)						Owner/Oper		⁽¹⁾	78					
	14, 2016		ŀ			TE 17, LL	_C)EC	E	П	Πη	Feb 1	
Agencies Notified	Type Notification			Street Ac				115	7/	5	Ш	W		7
⊠ EPA	Initial		2	22 Mapl					111		-			
DEP DOL	Amended			City, Stat	te, Zip Co	de		In In	LI AUG	1 1	20	140	111	111
X DOL	Amendment Emergency		- I	Morristo		07960						116	JL	1/
X DOH	justification)			Name of	Contact				Telephor	neNum	ber			1
DCA	Cancellation		F	Project I	Manage	er			ASBESTO LIC	SCC	NTE	201	٦	
				FACIL	ITY INFO	ORMATION			11000	ENSI	VG	IOL	Œ.	
Name of Facility Where A	batement is Takin	g Place (3)						Type of Facility (4)		la Co		_	_
building	(4				00.00.00000000000000000000000000000000			School (K-1						
Street Address									8 (Other tha				h	
33 Route 17								Other (i.e. p	orivate & com	mercia	Dulle	ungs,	nome	₽S,
City (5)							3	Square Feet	# of Floor	rs .	В	ldg. A	ge	
East Rutherford, NJ								¥0						
County (6)			T	County C	ode (7)		(Current Use (Pri	or if being de	molish	ed)			
Bergen					SE ONLY)	·	-		build		150			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.	N	lame of	f Abatement Cor		mg				
AET		escon control of N.T. L		0021		14		CK Group, L						
Street Address				0021		10000	100000	ddress	LU					
907 Doolittle Drive									CTE 200					
City, State, Zip Code								ngs HWY N,	STE 209		-			
	7					1000		ite, Zip Code						
Bridgewater, NJ 0880			- 1	-				Hill, NJ 0803						
Project Manager for Monit	oring Firm			Telephor				ne No.		nse No				
Eric Houseknecht				(908) 21				59 - 5000	0078	31				
Start Date (10)		Schedule	d Cor	mpletion [Date (11)	N	lame of	f OSHA Monitor						
6/28/16				9/30/201	16		VIII CONTRACTOR	CK Group, L	LC.					
Occupancy Status During	Abatement (Chec	k Only On	e)			S	treet A	ddress						
Facility Closed/Vaca						15	500 Ki	ngs HWY N,	STE 209					
Abatement Performe Other - Describe:	d Outside of Norm	nal Facility	Hour	S		C	ity, Sta	ite, Zip Code					7.55-346-	
Other - Describe						_ Ch	nerry	Hill, NJ 0803	4					
Scope of Work (Check All	That Apply)						7,4,50	α,						
≥3 sf or ≥3 lf		R	enova	ation				Full Containm	ent with Nega	ative Pr	essur	re		
≥160 sf or ≥260 lf		X D	emoli	tion			and the same	Mini-Enclosure	9					
							\times	Glovebag Prod Non-Exempted		riable l	2raca	dura		
				20000	7			1 Non-Exempled	() and Non-	Habie	1000	S 2-1-1	ement	
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Location Asbestos-Containing N	700			ely by	Ashac		iption c	of iterial (ACM)	Amoun					
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(13)			(12)			other misc	cellane	ous)			Remova	Repair	sula	Enclosure
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Name of Registered Wast	e Hauler		, h	NJ DEP W	aste	Cubic Ya	rde	Nome of	Degistered	andfil		L		
Name of Registered Wast	e naulei			Hauler ID I		of Waste		ivame of	Registered L	anoilli				
Newark Carting / Spar	tan Environme	ental		450		The second section of the second seco	50	Cumber	and Count	v / IE	SI B	ethle	hem	1
City, State						Disposal		City, Stat		,				
Newark, NJ / Donora,	PA					The same of the sa	/2016		/ Bethleh	em F	Α			
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Mike Cooper		Presid	ent			1	1		/	6/14				
Ocopei		1 10010	-111							0110	1110			

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) June 28, 2016 Agencies Notified Type Notification Street Address Initial Amended Amendment #1 Emergency (including justification) DCA DOH DCA DCA DOH DCA DOH DCA Name of Building Owner/Operator (2) HPVIII 33 ROUTE 17, LLC Street Address 22 Maple Avenue City, State, Zip Code Morristown, NJ 07960 Name of Contact Project Manager FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)	
Agencies Notified Type Notification Street Address 22 Maple Avenue City, State, Zip Code Morristown, NJ 07960 Name of Contact Project Manager FACILITY INFORMATION Street Address 22 Maple Avenue City, State, Zip Code Morristown, NJ 07960 Name of Contact Project Manager FACILITY INFORMATION Type of Facility (4) Street Address	
EPA DEP Amended Amendment #1 Emergency (including justification) Cancellation Project Manager PACILITY INFORMATION Dock Do	
DEP Amended Amendment #1 Emergency (including justification) Cancellation Project Manager FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Street Address City, State, Zip Code Morristown, NJ 07960 Name of Contact Project Manager FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)	
Amendment #1 Emergency (including justification) DCA Name of Contact Project Manager FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Street Address Morristown, NJ 07960 Name of Contact Project Manager FACILITY INFORMATION Type of Facility (4) Subchapter 8 (Other than K-12)	
Emergency (including justification) Cancellation Name of Contact Project Manager FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) buildings Street Address Street Address Street Address Street Address Street Address AS Belepting Name of Facility (4) Name of Contact Project Manager FACILITY INFORMATION Type of Facility (4) Subchapter 8 (Other than K-12)	
Project Manager FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) buildings Street Address Street Address Cancellation FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)	
Project Manager FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) buildings Street Address Street Address Cancellation FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)	
Name of Facility Where Abatement is Taking Place (3) Duildings Street Address Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)	
buildings Street Address School (K-12) Subchapter 8 (Other than K-12)	1
Street Address Subchapter 8 (Other than K-12)	
Other (i.e. private & commercial buildings, hor	nes,
etc.)	
East Rutherford, NJ County (6) County Code (7) Current Use (Prior if being demolished)	
(STATE USE ONLY)	
Bergen building Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)	
The state of the recording of the control of the co	
AET 0021 The MACK Group, LLC Street Address Street Address	
907 Doolittle Drive 1500 Kings HWY N, STE 209 City, State, Zip Code City, State, Zip Code	
_make to dear appropriate the second of the	
Bridgewater, NJ 08807 Cherry Hill, NJ 08034 Project Manager for Monitoring Firm Telephone No. Telephone No. License No.	
Eric Houseknecht (908) 218-1108 (973) 759 - 5000 00781	
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor	
6/28/16 12/31/2016 The MACK Group, LLC.	
Occupancy Status During Abatement (Check Only One) Street Address	
Facility Closed/Vacated During Entire Period of Abatement 1500 Kings HWY N, STE 209	
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code	
Other-Describe: Cherry Hill, NJ 08034	
Scope of Work (Check All That Apply)	
≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure	
≥160 sf or ≥260 lf Demolition Mini-Enclosure	
Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure	
Abotomo	nt
Is Location Type	
Ashestos Containing Material (ACM) Used Solely by Ashestos Containing Material (ACM) Amount	
Maintenance/ Custodial Staff? Maintenance/ Custodial Staff? Maintenance/ Custodial Staff?	Enc
Custodial Staff? SF or LF) Custodial Staff?	Enclosure
Maintenance/ Custodial Staff? (13) Maintenance/ Custodial Staff? (12) Maintenance/ Custodial Staff? (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asidesitis Containing Material (ACM) (Specify SF or LF) Other miscellaneous)	ure
Yes No N/A	
Front Building roofing 14,200 s/f	
-"- flashing 1,900 s/f	
-"- VAT 2,810 s/f	
2,010 311	+
Rear Building roofing 32,200 s/f	
Name of Registered Waste Hauler NJ DEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste	
Newark Carting / Spartan Environmental 4509 511.1 Cumberland County / IESI Bethlehei	m
City, State Disposal Date City, State	
Newark, NJ / Donora, PA 12/31/2016 Newburg / Bethlehem, PA	
Completed by Title Signature Date	
Salvanic///	

W) (HPAK	I		ICATION	ate of Nev I OF ASB to NJAC	ESTOS	ABATEN		(D)	E					
Date of Notification (1)				Name of	f Building	Owner/(Operator	(2)	IIU),	E C	EI	Ī			
Augu	ust 08, 2016		ŀ	HPVIII 3	33 ROU	TE 17,	LLC		IIMI		-J U	Th.			
Agencies Notified	Type Notification			Street A	ddress				-	Atte					
⊠ EPA	Initial		2	22 Map	le Aven	ue			1-4	AUG 1	1 :	016			
DEP	Amended		Ī		ite, Zip Co	51,7,500			1 1			DID			100000000000000000000000000000000000000
DOL	Amendment				own, NJ)		ASE	BESTOS	200				
DOH DOH	Emergency (i	ncluding	f		f Contact	0.000				[The Photo	PNUF	ROL	2		-
DCA	Cancellation		ı	Project	Manage	ar .				56145	ING		0.		
			1		LITY INF		ION								
Name of Facility Where	Abatement is Taking	Place (3	3)					Туре	of Facility (4)					-
buildings								П	School (K-1	2)					
Street Address										8 (Other tha	n K-12	2)			
33 & 26 Route 17										rivate & com	merci	al build	dings.	home	es,
City (5)									etc.) ire Feet	# of Floo	re	I R	ldg. A	100	
East Rutherford, NJ								Oque	1101000	# 01 1 100	13		iug. 7	ige	
County (6)				County (Code (7)			Curr	ont Hea / Pri	or if being de	molich	204)	=		
					USE ONLY,			Curre	ent use (Fin			iea)			
Bergen	n Llicad by Duilding (ASCN	A NI -			- 5 A L		build	ing			otterno	
Name of Monitoring Firm	in milled by building C	owner (8)		1 /02/2009	A NO.		Lorenzo securi		atement Cor						
AET Street Address				0021					Group, L	LC					
							Street		T-72						
907 Doolittle Drive									HWY N,	STE 209					
City, State, Zip Code							City, S	tate, Z	Zip Code						
Bridgewater, NJ 088							Cherry	Hill,	NJ 0803	4					
Project Manager for Mor	nitoring Firm			Telepho	ne No.		Teleph	one N	0.	Lice	nse N	0.			
Eric Houseknecht			(908) 2	18-1108		(973)	759 -	5000	0078	31				
Start Date (10)		Schedul	ed Cor	mpletion	Date (11)		Name	of OS	HA Monitor						
6/28/1	6		1	2/31/20	16		The M	ACK	Group, L	LC.					
Occupancy Status Durin	g Abatement (Check	Only Or	ne)				Street			21800000				-011-C	
Facility Closed/Vac	cated During Entire P	Period of	Ahater	ment			1500 k	(inas	HWY N,	STE 209					
Abatement Perform	ned Outside of Norma								ip Code						
Other - Describe:							Total States		NJ 0803	4					
Scope of Work (Check A	II That Apply)						10			-					
≥3 sf or ≥3 lf		П	Renova	ation			5	X	II Containm	ant with Noas	otivo E				
≥160 sf or ≥260 lf		THE REAL PROPERTY.	Demoli				Ĺ		ni-Enclosure	ent with Nega	ative r	ressur	E		
									ovebag Prod						
							/	X No	n-Exempted	(*) and Non-F	riable	Proce	50000000		n
			Locat											ement rpe	į.
Location			Norma d Sole				escription					-	, ,	PC	
Asbestos-Containing TO BE AB			intena				taining M			Amoun	10	_		m	m
In Faci		Cus	todial		(1.6.		I systems cing, VA		ation,	(Specif SF or LI	71	Remova	Repair	Encapsulate	Enclosure
(13)	10.00		(12)				miscellan				1	VOL	pai	lus	USC
		707	700									2	7	ate	ro ro
		Yes	No	N/A								1		-	
Front Bu	ilding	X					roofing			14,200	s/f	X			
"		X				f	flashing			1,900 s	s/f	X			
=			X				VAT			2,810 s					
			$\langle \rangle$			- 50						$\langle \cdot \rangle$			
Rear Bu			X				_"_	=		4,940 s	1000	X			
Name of Registered Wa	ste Hauler		17.50	NJ DEP W Hauler ID		Cubic of Wa	Yards		Name of	Registered L	andfill				
Newark Carting / Spa	artan Environme	ntal		45(oi vva	238.5		Cumbarl	and Count	h/ / IE	EQI D	othla	hom	,
City, State	artan Environne	indi		430	JJ	Dieno	sal Date		City, Stat		Ly / IE	_01 D	CUIIE	HEII	1
Newark, NJ / Donora	. DΔ					1		16			om !	Σ Λ			
Completed by	1 ₁ 1 / \(\tau\)	Title				12/31/2016 Newburg / Bethlehem, PA									
		400000	lan!			8	Signature	1//			300,65%				
Mike Cooper		Presid	ent	200			0	-			18/8	/16			

Location of	1	Location Normall	y	Description of				ement /pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Solel intenar todial S (12)	ice/	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A					te	(D
Rear Building	X			flashing	6,050 s/f	X			
_".		X		VAT	4,940 s/f	X			
				•					
					-IDE	0			
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				*					

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)					f Building C								7
August 8, 2016						Anthor	ny & F	Peter Riga			56	17	1
[] DEP [] Amen [x] DOL Amen [x] DOH [] Emer [] DCA justifi	Notifica ided Not idment #	tification			ate, Zip Cod		er Rig	a /	lephone Number			No.	
			FAC	ILITY I	NFORM	ATION		ASRESTO		1			
Name of Facility Where Abatement is Taking Residence	Place (3)					Туре	of Facility (4)	School (R-12) Subchapter 8 (oth	& ner than	k-12)		
Street Address								[x]	Other (i.e., private homes, etc.)			al build	ings,
City	Count	ty (6)		County C (STATE	Code (7) USE ONLY	0		re feet 1200 sf	# of Floors 1	Bldg	, Age	0	
Lavallette	Ocea	an					Curre	ent Use (Prior if I Residen	peing demolished)				
Name of Monitoring Firm Hired by Building (N/A	Owner (8	8)		ASCM N	lo.	Name of	Abaten	nent Contractor (Guardia	9) n Contracting,	Inc.			
Street Address						Street Ad	ldress	1889 Ro	ute 9, Unit 61				
City, State, Zip Code						City, Stat	e, Zip (Code	ver, New Jers	ev 08'	755-1	271	
Project Manager for Monitoring Firm		Telephone	Number			Telephon 732-34		ber	License N 00624		700 1.	-/1	
Scheduled Start Date (10) 9/8/16		Scheduled 9/9/1	Commence of the contract of	on Date (1	11)	Name of	OSHA		. Analytical				
Occupancy Status During Abatement (Check only one) [X] Facility Closed/Vacated During Entire Period of Ab [] Abatement Performed Outside of Normal Facility H [] Other – Describe						Street Ad		Code	elton Road vay, New Jerse	y 088	54		
Scope of Work (Check all that apply)						[]		ill Containment v	vith Negative Pres	sure			
[] >3 sf or ≥3 lf [X] ≥160 sf or ≥260 lf		[] [x]	Renova Demoli			[x]	Gl	lovebag Procedu	e and Non-Friable	Procedu	ıre		
_				T						Abat	ement	Гуре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)		Is Location Normally use Solely by intenance/Cu Staff (12) NO	sed /		Description bestos-Coresto-Corest	ntainin CM) system rfacing	is 5.	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E	
Exterior		X		Asbe	stos sidin	g			1150 sf	X		÷	
					T =		1.						<u> </u>
Name of Registered Waste Hauler Guardian Contracting, Inc.		NJDEP Wast 2	te Hauler 0223	Ш No.	Cubic Ya	rds of Wast	te N	Name of Register T.R.R.F.	ed Landfill				
City, State Toms River, New Jersey				al Date		City, Sta		Pennsylvania					
Completed by (Print or Type) Nicholas Fernicola	Title Proje	ect Manag		Signat	ure		+	1		Date 8/8/			

Guardian Contracting, Inc. 1889 Route 9 Suite 61 Toms River, New Jersey 08755



Operato	or Project #:	Postmark:	Notification	on:		
I.	TYPE OF NOTIFICATION (O - Original R - Revised C -	Cancelled): O	п	IS ASBESTOS PRESENT? (Y	es/No):	Y
Ш.	FACILITY INFORMATION (identify owner, removal contract	tor and other operator)				
	OWNER NAME: Anthony & Peter Riga	2				
	Address:					
	City: East Brunswick State:	NJ	Zip:	08751		
	Contact: Anthony & Peter Riga		Tel:	732-841-3801		
	REMOVAL CONTRACTOR: Guardian Con	ntracting, Inc.		NJ License: 0062	1	
	Address: 1889 Route 9	, Unit 61				
	City: Toms River State:	New Jersey	Zip:	08755		
	Contact: Nicholas Ferr	nicola	Tel:	732-349-9932		
	OTHER OPERATOR (if different)			NJ License:		
	Address:					
	City: State:		Zip:	11		
	Contact:		Tel:			
IV.	TYPE OF OPERATION (D - Demo O - Ordered Demo I	R - Renovation E - Emergency Ren	novation):	D		
V.	FACILITY DESCRIPTION (Including building name, number	and floor or room number)				
	Building Name: Residence					
	Address: 35 W Brighton Avenue	е				
	City: Lavallette State:	New Jersey	County:	Ocean		
	Site Location: Exterior					
	Building Size: 1200 sf # of Flo	oors: 1	Age in Ye	ears: 60		
	Present Use: Residence	Prior Use:	Residence	ce		(+)
VI.	PROCEDURE, INCLUDING ANALYTICAL METHOD, IF	APPROPRIATE, USED TO DETEC	T THE PRES	SENCE OF ASBESTOS MATER	RIAL:	
1.777	IS MATERIAL ASSUMED TO BE ASBESTOS?	- 		7	1	2 - 1 1
VII.	APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:				Asbestos	friable Material
	Regulated ACM to be removed Category I ACM not removed	RACM To Be		LOCATION		To Be noved
	Category I ACM not removed Category II ACM not removed	Removed			Cat I	Cat II
	Pipes (Linear feet):					
	Surface Area (Square feet): 1150 sf	Asbestos siding		Exterior		
	(0,100,000					
	RACM Off Facility Component (Cubic feet):			=		
VIII.	SCHEDULE DATES ASBESTOS REMOVAL (MM/DD/YY)	Start: 9/8/16		Complete: 9/9	/16	

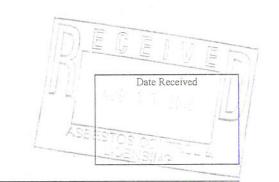
State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signa	ture	Tullyto	own, Pennsylvania		Date 8/8/20		The state of the s	
City, State Toms River, New Jersey	The second secon	isposal Date 22/16	TANK STOP STOP STOP STOP	City, Sta	nte own, Pennsylvania					
Guardian Contracting, Inc.	2022	3	3	50-600.000 MT-010.000.340 W V	T.R.R.F.					
Name of Registered Waste Hauler	NJDEP Waste Ha	uler ID No	Cubic Ya	rds of Wast	e Name of Register	ed Landfill				
								-		
		-						-	-	
AVA		71300	coros siam	D		1500 31	22	+		
Exterior	X	Ash	estos sidin	ø		1500 sf	X			
(13)	YES NO N/	'A	othe	er miscella			A L	1	J	U R E
TO BE ABATED in facility (13)	Maintenance/Custod Staff (12)	lial		thermal lation, sur VAT, o	rfacing,	or LF)	0		A .	L O S
Asbestos-Containing Material (ACM)	Normally used Solely by		N	estos-Cor laterial (A	.CM)	Amount (Specify SF	100	23	7	N C
Location of	Is Location	=		Descriptio					3	Е
		T					Abatem	nent Tva	ne.	
[] >3 sf or ≥3 lf [X] ≥160 sf or ≥260 lf		novation molition		[] [x]	Glovebag Procedur Non-Exempted (*)		Procedure			
	2) * * * *******************************			[]	Mini-Enclosure		Suic			
Scope of Work (Check all that apply)	9			[]	Full Containment v	vay, New Jerse		+		
	Outside of Normal Facility			City, Stat	e, Zip Code	way Nami Iaraa	N 0005	1		
Occupancy Status During Abatement (Check X] Facility Closed/Vacated	only one) I During Entire Period of .	Abatement		Street Ad		elton Road				
8/18/16	8/19/16				E.M.S.I	. Analytical				
Scheduled Start Date (10)	Scheduled Com		(11)	732-34		00624				
Project Manager for Monitoring Firm	Telephone Num	ber		Telephon	Toms R	iver, New Jers License N		5-127	1	
City, State, Zip Code				City, Stat	1889 Ro e, Zip Code	oute 9, Unit 61				
Street Address				Street Ad	ldress		1110.			
Name of Monitoring Firm Hired by Building (N/A	Owner (8)	ASCM	No.	Name of	Abatement Contractor (Inc			
Matawan	Monmouth				Current Use (Prior if Residen					
City	County (6)		Code (7) E USE ONLY	7)	Square feet 1500 sf	# of Floors	Bldg. A	Age 60		
City	County (6)	Count	Code (7)		[x]	Other (i.e., privat			Junai	ugs,
Street Address						Subchapter 8 (oth				
Name of Facility Where Abatement is Taking Residence	Place (3)				Type of Facility (4)	School (k-12)				
		ACILITY	INFORM	ATION			3-11-11-11-11-11-11-11-11-11-11-11-11-11			
A DON	ellation	l Name	Frank 1	Nastro		sophone I varia	02140	ING		
	gency (including ication)	Name	of Contact	TTIETET		ASBES	TOS C	ONTI	OL	8
[X] DOL Amer	ndment #	City, S	tate, Zip Cod		an, NJ 07747					1
	Notification				(2)	JULI A	UG 1	1-20	16	$\parallel \parallel$
Agencies Notified Type of Notificat	tion	Street	Address		<u></u>		The state of			4
Date of Notification (1) 8/8/2016		Name	of Building C	wner/Oper Frank		(D) E	GE		1	B
		0			l sa	IN P	(6)			

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

Guardian Contracting, Inc. 1889 Route 9 Suite 61 Toms River, New Jersey 08755



Operat	or Project #:	Postmark:		Notificati	on:		
I.	TYPE OF NOTIFICATION (O - Original R - Revised C - Ca	ancelled):	0	П.	IS ASBESTOS PRESENT? (Ye	es/No):	Y
III.	FACILITY INFORMATION (identify owner, removal contractor	r and other of	perator)				
	OWNER NAME: Frank Nastro						
	Address:						
	City: Matawan State:	New Jer	sey	Zip:	07747		
	Contact: Frank Nastro			Tel:	917-731-5583		
	REMOVAL CONTRACTOR: Guardian Contraction	racting, In	c.		NJ License: 00624	1	
	Address: 1889 Route 9,	Unit 61					
	City: Toms River State:	New Jer	sey	Zip:	08755		
	Contact: Nicholas Fernie	cola		Tel:	732-349-9932		
	OTHER OPERATOR (if different)				NJ License:		
	Address:						
	City: State:			Zip:			
	Contact:			Tel:			
IV.	TYPE OF OPERATION (D - Demo O - Ordered Demo R -	- Renovation	E - Emergency Re	novation):	D		
V.	FACILITY DESCRIPTION (Including building name, number a	and floor or re	oom number)				
	Building Name: Residence					s	
	Address: 67 Cypress Lane						
	City: Matawan State:	New Jer	sey	County:	Monmouth		
	Site Location: Exterior				υ:		
	Building Size: 1500 sf # of Floo	ors:	1	Age in Y	ears: 60		
	Present Use: Residence		Prior Use:	Residen	ce		
VI.	PROCEDURE, INCLUDING ANALYTICAL METHOD, IF AF	PPROPRIAT	E, USED TO DETEC	CT THE PRE	SENCE OF ASBESTOS MATER	UAL:	
VII.	IS MATERIAL ASSUMED TO BE ASBESTOS? APPROXIMATE AMOUNT OF ASBESTOS INCLUDING:			-	T	Noni	friable
	1. Pagulated ACM to be removed		RACM		1001701		s Material To Be
	2. Category I ACM not removed		To Be Removed		LOCATION	Ren	noved
			1,70			Cat I	Cat II
	Surface Area (Square feet): 1500 sf	Asbesto	s siding		Exterior		
	RACM Off Facility Component (Cubic feet):						
VIII.	SCHEDULE DATES ASBESTOS REMOVAL (MM/DD/YY)	Start:	8/18/16	5	Complete: 8/1	9/16	
VII.	Present Use: Residence PROCEDURE, INCLUDING ANALYTICAL METHOD, IF AI IS MATERIAL ASSUMED TO BE ASBESTOS? APPROXIMATE AMOUNT OF ASBESTOS INCLUDING: 1. Regulated ACM to be removed 2. Category I ACM not removed 3. Category II ACM not removed Pipes (Linear feet): Surface Area (Square feet): 1500 sf RACM Off Facility Component (Cubic feet):	PPROPRIAT	Prior Use: E, USED TO DETEC RACM To Be Removed s siding	Residen	CE SENCE OF ASBESTOS MATER LOCATION Exterior	Noni Asbesto: Not Ren Cat I	s Mater To Be noved

NOTIFICATION OF DEMOLITION AND RENOVA	TION	(continued)
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X.	DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED
xi.	DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE: Prior to removal, the work area around the building will be roped off with caution tape and warning signs. Plastic sheeting will be placed on the ground below and the asbestos will be removed by non-friable procedures. All waste will be placed in double 6 mil. Bags, sealed and labeled and placed in a locked container for disposal.
xii.	WASTE TRANSPORTER #1 Name: Guardian Contracting, Inc.
	Address: 1889 Route 9, Unit 61 City: Toms River State: New Jersey Zip: 08755
	Contact Person: Nicholas Fernicola WASTE TRANSPORTER #2 Name:
	Address:
	City: State: Zip:
	Contact Person:
com	
xiii.	
	City: Tullytown State: Pennsylvania Zip: 19007
	Telephone: 215-943-9732 Permit #: 101494
xiv.	IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW AND ATTACH COPY OF ORDER
	Name: Title:
	Authority:
	Date of Order (MM/DD/YY): Date Ordered to Begin (MM/DD/YY):
xv.	FOR EMERGENCY RENOVATIONS
	Date and Hour of Emergency (MM/DD/YY):
	Description of the Sudden, Unexpected Event:
	Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden:
xvi.	DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER
xvii.	I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ONSITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS-HOURS. (Required after November 20, 1991)
	Nicholas Fernicola / Project Manager (Printed Name/Title) (Signature of Owner/Operator) August 8, 2016 (Date)
xviii.	I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.
	Nicholas Fernicola / Project Manager (Printed Name/Title) August 8, 2016 (Signature of Owner/Operator) (Date)

Lepy								-,						_		1
Date of Notification (1) 8-10-16					of Building PER LAI				RENAIS	ANCE	SCFIC	DOL	AC	74	順	, IN
Agencies Notified Ty	ype Notification Initial			Street A	ddress EDERA	L STR	EET-S	UITE	146	ΔΙ	UG 1	1 20	16	COMMANDE AND A SAME	IJ)	
X DEP X DOL	Amended Amendment			87-3	ate, Zip Co DEN, NJ		3				00 1	. 20	10	1		
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Report For Environmental

AUG 1 1 2016

Services

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

Bold = Positive for ACM

CONDITION AND FRIABLITY ASSESSMENT TABLE

A. <u>ASBESTOS-CONTAINING MATERIAL</u>

For each inspection conducted, the inspector classifies ACM or Assumed ACM SPERIOR CONTROL & condition. This helps to determine the extent of damage in certain areas as well as the potential of 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
	GYM Addition Buildi	ng		

Report

For Environmental

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

4.2 SAMPLE ANALYSIS TABLE

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

ASBESTOS CONTROL & LICENSING

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.

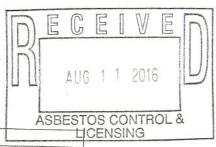
Please see the below table itemizing the number of assumed universal wastes:

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Contractor may provide additional relevant fixed unit pricing if needed to complete the effort. Unit Prices included herein have no bearing of the contract price and are proposed as an estimate only to provide a basis for determining a fair and reasonable price This is a performance based contract and the inclusion of unit prices in the proposal shall in no way be construed as the Government is procuring a specified number of units of any given service.

		-		If price	d per unit	
Task		Task Pricing	Unit Price	Units	Number of Units	Total Price
I	Work Plans (to include all Drafts/ Final Documents, Draft QASP and comment response)	FFP		LS	Or Omits	4,641
	January Sangara	S E SEE	1 15 fr 18 A	TANK THE	TRYDELY.	NO SEE
2	Buildiing 209	5 #15 F F F		1 16 4 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7	1 50 00 2 75 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1600 mm 1500
2.1	1st Fl, SW; Removal of ACM 50 LF	FFP		LS		2,500
2.2	1st Fl, NC; Removal of ACM 50 LF	FFP		LS		
2.3	1st Fl, NW; Removal of ACM 50 LF	FFP		LS		2,500
3 '	Buildiing 270		197 C 7 V		5 10 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2,500
3.1	Basement – Repair of 400 LF of ACM Plpe Insulation	FFP	7.76	LS		2.000
3.2	Basement – Repair of 40 LF of ACM Pipe Insulation	FFP		LS		_3,000 1,200
3.3	1 St Fl - Repair of 15 LF of ACM Pipe Insulation	FFP		LS	10 10 10 10 10 10 10 10 10 10 10 10 10 1	
3.4	2nd Fl — Room 4 Removal of 10 SF of ACM TSI Debris	FFP	100000	LS		200
4	Buildiing 271	0			TOTAL CONTRACTOR	
4.1 .	Basement – Removal of Flue Packing 2 SF	FFP		LS		000
4.2	Attic and Chase – Repair of 30 LF of Four Inch ACM Pipe Insulation	FFP		LS		1,200
5	Building 286		1851,057		10 (a)	1,200
5,1	Boil Room - 1 St Fl – Removal of 2 LF of ACM Pipe Insulation	FFP		LS		1 000
5.2	Basement – Room 024A – Removal of 1 LF of ACM Pipe Insulation	FFP	XX Tun	LS		_1,000 _100
5.3	Basement – Room 009A – Removal of 1 LF of ACM Pipe Insulation	FFP		LS		100
-	2 nd Fl, Womens Room – Room 024A – Removal of 50 LF of ACM Pipe Insulation	FFP	I	LS		2,500
6	Building 551	17	\$1,55	19		2,000
6.1	Southeast — Repair 25 LF of ACM Pipe Insulation	FFP 3		LS		1,500
7	Building 552	97.74	15 18 5 15 1 17 7 18 5 15 1	Mail		1,000
7.1	Mechanical Rm — Repair 10 LF of ACM Pipe Insulation	FFP :	L	S	5 (1	200
7.2	Mechanical Rm — Repair 10 LF of ACM Pipe Fittings	FFP	L	S	4 4	200



				If price	ed per unit	
Task		Task Pricing	Unit Price	Units	Number	
7.3	Outside Office - Removel 1 of ACM Pipe Fitting	FFP	_ Frice	LS	of Units	_
8	Building 1150	211	A SET SECOND	Lo	1437 K. 437.	100
8.1	Basement Battery Room — Repair 100 LF of ACM Duct Insulation	FFP		LS		1 200
9	Building 1215				2.41% C.41.	1,200
9.1	AC Room — Repair 26 ACM Duct Pipe Fittings	FFP		LS	7276	200
9.2	Concession/HVAC/Storage Room — Repair 12 ACM Duct Pipe Fittings	FFP		LS		300
9.3	Boiler Room - Repair 22 SF Tank Insulation	FFP	2012204704	LS	1415(902)	FOO
9.4	Boiler Room — Removal 90 SF Boil Insulation	FFP	The state of	LS	1, 2, 2, 2, 2, 2, 5	500 3,500
, 246	OPTIONAL TASKS		1000		And Services	7 0,000
10	(Building 283		111111111111111111111111111111111111111			1
10.i	Basement – Corridor – Removal of 133 LF of ACM Pipe Insulation	FFP		LS		4,200
10.2	1 st Fl — Room 107 — Repair of 5 LF of ACM Pipe Insulation	FFP		LS		200
	1 st FI – Womens Room – Repair of 10 LF of ACM Pipe Insulation	FFP		LS		300
10.1	1 st Fl — Womens Room (former mens room) — Repair of 5 LF of ACM Pipe Insulation	FFP	1101	LS		300
10.5	1 st Fl — Janitors Closet by room 162— Repair of 20 LF of ACM Pipe Insulation	FFP		LS		200
10.6	1 st Fl — Stairwell by room 162— Repair of 25 LF of ACM Pipe Insulation	FFP		LS		200
10.7	1 st Fl — Wing North—Repair of 800 LF of ACM Pipe Insulation	FFP		LS		8,250
10.8	2 nd Fl —Room 231— Repair of 10 LF of ACM Pipe Insulation	FFP	I I	LS		500
10.9	2 nd Fl —Room 230— Removal of 1 LF of ACM Debris	FFP	1	S		
0.10	2 nd Fl —Throughout Wing on West- Removal of 20,000 SF of 2 X 2 Tiles	FFP	L	S		100 84,000
0.11	Basement, Crawlspace 2– Repair of 800 LF of ACM Pipe Insulation	FFP	L	.S		8,000
	lasement, Crawlspace 2— Removal of 5200 SF of ACM Debris with Detailed cleaning	FFP	L	.S	建始逐渐	
0.13 B	asement, Crawlspace 1— Repair of 2000 LF of CM Pipe Insulation	FFP	L	S		26,000
0,14 B	asement, Crawlspace 1— Removal of 13,780 SF f ACM Debris with Detailed cleaning	FFP	L.	S		40,000
	CONTIGUENCY TASKS		CALSENDAR ST		HALLEST A	65,520
1 1	5	FFP A	L	s 5.00		
1.2		FFP 3	LS LS	S		
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FRANKUN L	AKES		Count	ly Code (j	are Feet	# of Floors Tor if being demo		ej-	Age So			
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City State Zip Code	····				City S	City State, Zip Code Midland Park, NJ						-			
Project Manager for Monitoring Firm Start Date (10)		ione No.		Teleph (201)	262-	5841	License 00156		717 1811 1811 1811	*******					
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Name of Monitoring Firm Hired by Building Owner (8)			-	ASCM No. Name of Abatement Contractor (9) A.MAC Contracting Inc.					II iin I				
Street Address						Street Address 185 Vreeland Ave.					ENSENCE CONTRACTOR		
City State Zip Code Project Manager for Manifestory Error							City, State, Zip Code Midfand Park, NJ						
Project Manager for Monitoring Firm			Telephone No			Telephone (201)26:		License No. 00156					
and Contractor	8/19/16					Name of OSHA Monitor Omega Environmental Services							
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