p.1

		NOT	PICATIO	State of No 2N OF ASE 14 to NJAC	BESTOS	HATE	34E Y		(I	33	8	> '		-
Date of Notification (1)			Name	of Building	Owner/O	perator	(2)	F.N=-		_	_		$\rightarrow$	
08/04/16			Scot	ch Plains	s / Fanw	pod P	ubli	School E	)istrict_	\ []	R	區	П	\// [i
Agencies Notified Type Notification	n		Passi	Resides			- 55		-A441)		1	11	11	M IL
EFA Initial				green Av		dar S	ŧ.		TIK		1			
DEP Amended Amended Amendmen				tata, Zip C				1		11	RILL	1	7 0	DAC
Ty Emergean		0		ch Plains		076			,	1	AUG		1_6	Ulb
New Color	1)	E		of Cor.lact						2 - Al.				
DCA Cancellation	in			ony Mira										
Name of Facility Where Abatement is Taki	no Piara	(3)	FAC	CILITY INF	ORMATIC	N	_		T		LIC	ENIC	SINIC	1
Evergreen Elementery School	3	(4)						e o'Facility	(4).			- har 1 4		-
Street Address							N X	School (K-						
2280 Evergreen Ave.							H	Subchapte: Other (i.e. )	recto) 8	han K-	12)	idian	. h	
City (E)							ш	esc.)	_		LIM OU	auing:	s, nan	105,
Scotch Plains								are Fest	# of F	cors		Bldg.	Age	
County (B)	-		-					524	1			85		
Union				Code (7)	0		Cur	rant Use (Pri	or if boing	demoli	ohed)			
Name of Monitoring Firm Hirsd by Building	Owner 19	85		M Na		N		hool .						
Envirovision Consultants Inc.	omia (c	*/	000			l oca	of Ab	atement Con	dractor (8)					
Street Address			1			Street		and the second	<u> </u>		-			
20-10 Maple Ava, Bidg. 35 E					1			ie Ava.						
City, State, Zip Code								Zip Code						
Fair Lawn, NJ 07410					1			n, NJ 070	57					
Project Manager for Monitoring Pirm		_	Telenha	опа Мо.	-	Teleph		20.20						
Guilermo Morales				49-3525		852-2				CBF 58 1	40.			255
Start, Date (10)	Schadu	led Co		Date (11)				HA Wonitor	0	1107				
08/05/16	08/13		ii ipicuuii	Caste (11)				alodka						
Cocupancy Status During Abatement (Che	ck Only O	na)				Street A								
	Basissi at	Abote	mani					e Ave.						
Facility Closed/Vacated During Entire  Abstament Performed Outside of Non Other - Describe:	nel Facilit	y Hour	3		1			Öp Code					-	
Girly - Dobbi Dy.					_			n. NJ 070	57					
Scope of Work (Check All The: Apply)							3				-			
X 23 ef or ≥3 l'	A	Renov	ation					U Contains	me really black					- 1
2150 sf or 2280 if		Demoli	van				M	ili Containme ni-Enzipaure		gative i	ressu	re		1
						<b>Q</b>	G	ovebeg Proc	edure	2201101	000 0000			
	1	. 1		T			NO	n-Exampted	(") and No	m-Friaz	ole Pro	-	_	
Location of		Local Norma			1227			.				Abet	amen roe	1
Asbestos-Containing Material (ACM)		ed Sole		Aspest	los Conta	nolici Ma Ma	of Staria	I (ACM)	Amou	wn t		T		$\Box$
TO BE ABATED		todial :		(i.e.	thermal sy	stems	Insult	ation,	(Spac	ity	R	70	50	6
(13)		(12)		t	auriacin other mia	g, VAT callana	or count	gr -	SF or t	LF)	Remova	Repair	Sole	Exclosure
	Yas	Na	N/A								B	4	Encapsulate	8
1st. floor classroom	+	, 40	2		do	n			-	,	-	-	rg.	
outside	+			11 -		n- up			800s		*			
00000	-		-	Walls	adhesive	mix I	with	brick	20 yr	d.	77			
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	100				-						1		-	-
Vame of Registered Wasta Hauler		IN	UDEP W	asta I	Cubic Ya	rds		Name of R	Anistered	Banfill	1			_
lewark Certing Inc.			12uler 10 5409	No.	of Wasto 20			GROWS		-ensuret				
City, State					Disposal	Data	_	City, State				_		_
lewark, NJ					08/13/1	-		Morrisvil	le. PA					
completed by	Title				Sign	alura ,	0			Dat	te			
ealaw Nalodka	Presi	dent				/	_	A STATE OF THE STA	6		v04/1	6		

ASB-41 (R-09-08) FAX # 862 - 221-9093 · Do not use this form for gabeston licenseure excempted activities.

Print Form

(	K 51	018			ICATIO	tate of Ne N OF ASE t to NJAC	ESTOS	ABATE			E G	EI	$\mathbb{W}$	1 3	2	
	te of Notification (1) 11/16	219	***			of Building Zolafer							U			
Ag	encies Notified	Type Notification			Street A	Address				ШШ	AUG	17	2016	-11	#	
×	EPA	× Initial												-	7	
×	DEP	Amended				ate, Zip C		W.		ASI	RESTO	OS COI	VITDO	-	1	
×	DOL	Amendment Emergency		<del>,                                    </del>	Lakev	vood NJ	08701				LIC	ENSIN	VIRUI IG	_ či		
×	DOH	justification)	moidanig	'		of Contact						ephone l				
Ц	DCA	Cancellation			Mario										-	
Na	me of Facility Where	Abatement is Takin	Place (	3)	FAC	ILITY INF	ORMAT	ION	Type	of Facility	(4)					
	ario Zolafer Privat		,							School (K-	0.000					
Str	eet Address									Subchapte	r 8 (Oth	er than K	(-12)			
									×	Other (i.e. etc.)	private	& comme	ercial bu	ildings	, hom	ies,
100000	y (5)								Squa	are Feet	# 0	f Floors		Bldg.	Age	
La	kewood NJ 0870	1							100	0+	1			35+		
	unty (6)					Code (7)	n			ent Use (Pr	ior if be	ng demo	lished)			
	cean						/		Hou							
Na N/	me of Monitoring Firm A	Hired by Building (	Owner (8	)	ASCI	VI No.		Name Pern		atement Co nc.	ntractor	(9)				
Str	eet Address							Street PO E								
City	, State, Zip Code							200000000000000000000000000000000000000		ip Code	091					
Pro	ject Manager for Mon	itoring Firm	<del></del>		Telepho	ne No.		Teleph 856-				License				
Sta	rt Date (10)		Schedu	led Con	nnletion	Date (11)			3. 8(0), (0)	HA Monitor		00727				
	24/16		8/29/1		piodon	Date (1.1)		Same		TIPA WIOTIILOI						
Occ	cupancy Status During	Abatement (Chec	Only O	ne)		*		Street	Addre	SS						
×	Facility Closed/Vaca	ited During Entire F	eriod of	Abaten	nent											
	Abatement Performe Other – Describe: _	ed Outside of Norm	al Facilit	y Hours	i 		_	City, S	tate, Z	ip Code						
Sco	pe of Work (Check Al	l That Apply)	*													
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	Min	II Containm ni-Enclosur ovebag Pro n-Exempte	e cedure				re	
			Is	Locati	on									Abat	emen	t
	Location			Normal ed Sole				scription						T	уре	1
	Asbestos-Containing TO BE ABA		Ma	aintenar	nce/			aining M systems				mount Specify	71		E	m
	In Facili		Cus	todial S (12)	Staff?	(1.0.	surfac	cing, VA	T, or	20011,		or LF)	Remova	Repair	caps	Enclosure
	(13)			(/	1	-	other n	niscellan	eous)				oval	air	Encapsulate	sure
			Yes	No	N/A										Ø	
	Baseme	ent			X		FI	oor Tile	9		60	00 SF	x			
				17, 20, 7, 10, 10					11-09					-	-	
							-7713-272							_	-	
	- 1D- 11								214072224							
	ne of Registered Wast ted Roll Off Ser	e Hauler		Н	JDEP W auler ID 2459		of Was			Name of G.R.O.		red Land	Ifill			
City	, State NJ	•	<u> </u>					al Date		City, Stat		19067	,			
in the contract of	npleted by	Eller Was a second as the eller	Title					ignature					Date			
	nony T Perna		Presi	ident			10	APP	L	and a property of the same of		100	8/11/1	6		

CK = 7397

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

NOTIFICATION "

Data statute in 19	433		- 10 110/10 010	, o una				No	100	P00		100
Date of Notification (1) 8/12/2016		PSEC	of Building Ow	mer/Op	erator (2		E C	E [ 7	/ [E		7	
Agencies Notified Type Notification  EPA Initial			Address HADLEY R	ROAD					A Million	The state of the s		
□   DEP     □   Amended     Amendment			ate, Zip Code TH PLAINF		NJ 07	068	AUG	1	)16	T	4	
□ Emergency (	including	Name o	of Contact		Ro7		SF Tel	ephone Nu	nhor-		+	
			ILITY INFORI		State of the state	1 =	=				_	
Name of Facility Where Abatement is Taking PSE4G-J23	Place (3)	REF	7 = A	DIT	-	Type of Facility  School (K	. 200 					
Street Address	AVEN			, .		Subchapt	er 8 (Oth	er than K-1; & commerci	2) al buil	dings	hom	es,
Oity (5) NEWARK				*******	5	Square Feet  N   A		Floors	E	Bldg. A		
County (6) FSSEX			Code (7) USE ONLY)			Current Use (P		ng demolisi	ned)			
Name of Monitoring Firm Hired by Building C ENVIRONMENTAL TACTICS	Owner (8)	ASCN 0045				Abatement C	ontractor	(9)	9			
Street Address 64 BROAD STREET				5	Street A							
City, State, Zip Code MATAVVAN, NJ 07747						te, Zip Code H RIVER, N	J 0888	2				
Project Manager for Monitoring Firm TOM GEIGER		Telepho 732-29	ne No. 90-2217	T	elephor			License N	0.			
Start Date (10) 9 / 1 / 2016	Scheduled Co	- /	Date (11)	110		OSHA Monito		AMERICA	1			
Occupancy Status During Abatement (Check	Only One)	1/0	7011	S	Street Ac	idress						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Normal	al Facility Hour	ment s				HITEHEAD e, Zip Code	AVE.					
Other - Describe: OUT DOOR	<u>s</u>					H RIVER, N	IJ 0888	2				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf	<b>A</b>											
≥160 sf or ≥260 lf	Renova Demoli				N N	Full Containr Mini-Enclosu Glovebag Pro	re ocedure					
	Is Locat	ion				Non-Exempte	ed (*) and	Non-Friab	le Pro	Abate		
Location of	Norma Used Sole	lly			iption of					Ту	pe	_
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Maintena Custodial (12)	nce/	(i.e. the	rmal sys			(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
- 4.	Yes No	N/A	0			~.					Ö	
OUT DOORS	×		Pipe	So	MAS	ric	20	00 LF	X			
Name of Registered Waste Hauler	#155533	J JDEP W		ubic Yaı	rds	Name o	l Register	ed Landfill				
WASTE MANAGEMENT	(1/12)	lauler ID 125		Waste	12	1	VS NOF					
City, State ELIZABETH, NJ				sposal		City, Sta MORR	te ISVILL	E, PA				
Completed by CAROL RAIMO	Title OFFICE N	1GR		1 0:		e Rai	me	Dail 8	e/10	1/	20.	16



"OPEN NOTIFICATION "

							en.				-06		990
Date of Notification (1)	)		Name o	f Building O	wner/O	perator	(2)	m	自即自		_		
Agencies Notified Type Notific		0.0	Street A 4000 I	ddress HADLEY	ROAL	)			5 VB 4		V	E	M
EPA Initial Amend	ded dment #		-	ate, Zip Cod H PLAINI		NIO.	7068	Ш	AUG 1	7 2	010	$\exists$	
□ Emerg     □ justific	gency (including ation)		Name o	f Contact				Tel	enhone Nur	nher	UID	-/L	9
DCA Cance				OHN LITY INFOR	20. 3		TTÉ	1-0	LIEEN	STATE	RO	- &	· - H
Name of Facility Where Abatement is  PSE4G-J							Type of Faci	lity (4)		3448			
Street Address / SouTH 8								pter 8 (Oth	er than K-12 & commerci		dings,	home	es,
City (5) NEWARK			, <u>,</u>				Square Feet		f Floors		ldg. A		
County (6) ESSEX				Code (7) USE ONLY)			Current Use		ing demolish				
Name of Monitoring Firm Hired by Bui ENVIRONMENTAL TACTICS			ASCN 0045				of Abatement UE SYSTE	Contractor	(9)	<b>a</b>			
Street Address 64 BROAD STREET							Address VHITEHEA	D AVE.					
City, State, Zip Code MATAWAN, NJ 07747					-		tate, Zip Code TH RIVER,		32				
Project Manager for Monitoring Firm TOM GEIGER			Telepho 732-29	ne No. 90-2217		Teleph	oné No. 132-8350		License N 01111	0.			
Start Date (10) 9/1/2016	Schedul	ed Com	- 1	Date (11)			of OSHA Mon		AMERICA	4			
Occupancy Status During Abatement				, -, /			Address VHITEHEA	D AVE					
Facility Closed/Vacated During E Abatement Performed Outside o Other – Describe: OUT Do	f Normal Facility	Abatem / Hours	ent			City, St	ate, Zip Code TH RIVER,		32				
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renovat Demoliti					Mini-Enclo Glovebag	sure Procedure	n Negative P			2	
	4	Location					TVOTELXCIII	pied ( ) ari	d Non-i Hab	T	Abate	ement pe	
Location of Asbestos-Containing Material (AC	M) Use	Normall d Solel intenar	y by	Asbesto		cription aining M	of aterial (ACM)	A	mount		-,		
TO BE ABATED In Facility (13)		todial S (12)		*10000000	surfac	systems ing, VAT iscellan			Specify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								*	te	, w
out Doors		×		Pipe	S	om A	stic	2	00 LF	X			
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic \	/ards	Name	of Registe	ered Landfill				
WASTE MANAGEMENT		180 000	auler ID 125	14	of Was	12	GRO	OWS NO					
City, State ELIZABETH, NJ					Disposi	al Date	City, S MOF	State RRISVILI	E, PA				
Completed by CAROL RAIMO	Title OFFI	CE M	GR				. O Ra	·	Da	te //0	2/	20	16



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Date of Notification (1)		70	Name	of Building O	wner/O	perator (	2)	199	9 9 6	, ,		-
	2016		PSE		WHOH	perator (	2)		1 6		n 1	10 5
Agencies Notified	Type Notification		Street	Address					(6)	15	1	$\mathbb{W}$
	57			HADLEY I	ROAD	)						
EPA DEP	Initial Amended			tate, Zip Code				$-\ U\ $				
X DOL	Amendment	#		TH PLAINE		N.I.07	7068		AUG	1	7 2	016
	Emergency (	including		of Contact		, 140 01		Table   No.			177	
DOH DCA	justification) Cancellation			_	m	9 Ro	TT E	Telephone Ni	imhor			
Ц 300	Gariccitation			OHN ILITY INFOR			112		1.1	OFN	OINT	_
Name of Facility Where	Abatement is Taking	Place (3)					Type of Facility (4	1)	LI	CEN	SINC	7
PSE4G	1-2	215-	0:00	: T'-	Tn	)		5:				
Street Address	J a.	2/9	1.10	116	41		School (K-1)	2) 8 (Other than K-	2)			
485 11	). Magu	7	TA			1		rivate & commerci		ldinas	, hom	es.
485 W	MAKKE	=/ <	S/R	EE/			etc.)			(54) (20)		
NEWA	202						Square Feet	# of Floors	1	3ldg. /		
County (6)	TRIT		10	0 1 (7)			NIA	NA		N	14	
F558	- ×		(STATE	Code (7) USE ONLY)		1	Current Use (Prio		shed)			
		(0)						NIA		-11116-2		-
Name of Monitoring Firm ENVIRONMENTAL		Jwner (8)	004	M No.			f Abatement Coni					
	1401103		1004	0			JE SYSTEMS	OF AMERIC	A			
Street Address 64 BROAD STREE	т					Street A						
	1						/HITEHEAD A	VE.				
City, State, Zip Code MATAWAN, NJ 077	747				-		ite, Zip Code					
							H RIVER, NJ	08882				
Project Manager for Mon TOM GEIGER	itoring Firm		Telepho			Telepho		License I	VO.			
				90-2217		/32-4	32-8350	01111				
Start Date (10)	2016	Scheduled C	/				OSHA Monitor		5/25			
		3/	31/	2017		UNIQU	JE SYSTEMS	OF AMERIC	A			1
Occupancy Status During	Abatement (Check	(Only One)				Street A						
Facility Closed/Vaca	ated During Entire P	eriod of Abat	ement		1		HITEHEAD A	VE.				-
Abatement Performe Other – Describe:	ed Outside of Norma	al Facility Ho	urs				te, Zip Code					
( ) <del>( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )</del>					-	SOUT	H RIVER, NJ	08882				1
Scope of Work (Check Al	I That Apply)											
≥3 sf or ≥3 lf		⊠ Reno	vation				Full Containme	nt with Negative	Pressu	re		
≥160 sf or ≥260 lf		Dem	olition			H	Mini-Enclosure					
							Glovebag Proce	edure (*) and Non-Fria	nie Pro	cedur	Δ.	
		ls Loc	ation				1,01, 2,011,010	( ) 3113 11011 1114	1	1000-200	ement	
Location	of	Is Loc Nom			Dane						ре	
Asbestos-Containing		Used So		Asbestos		cription o	terial (ACM)	Amount			_	
TO BE ABA		Maintei Custodia		(i.e. the	ermal s	ystems i	nsulation,	(Specify	Re	l z	Encapsulate	Enclosure
In Facili (13)	ty	(1:				ng, VAT, scellane		SF or LF)	Removal	Repair	aps	clos
17				-	Juiel IIII	SCEIIGITE	ous)		val	1=	ulat	ure
		Yes N	o N/A							1	Ø	
-aut Doo	2.9	X	<	Pipe	S	om as	Tie.	200 LF	X			
				1110		,.		0,00-1	1			$\overline{}$
									-	_		
Name of Registered Wast			NJDEP V	Hill Harmon	Cubic Y		Name of R	egistered Landfil	1			
WASTE MANAGEME	ENT		Hauler ID 1125	185	of Waste	. 0	GROWS	NORTH				
City, State			1120		PX							
ELIZABETH, NJ				L	Disposa		City, State	SVILLE, PA				
Completed by		Title			TE		WORKING					
CAROL RAIMO		OFFICE	MGP		Sig	nature	e Rain	_ D	te //6	4/	26	./
		OFFICE	MON		1	Carea	e Rais	no	5/10	2/	StU,	6



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										NO	100	P08	500°	499
Date of Notification (1)			Name o	f Building	Owner/0	Operator	(2)	Im	E (	CE		7 [	F	7
Agencies Notified Type Notification			Street A	ddress	′ ROA	D		IK						
EPA Initial Amended				ate, Zip Co				144	A	<del>UG 1-</del>	7 20	16	L	4
DOL Amendment Emergency		-		H PLAIN	VHIELI	D, NJ C	7068	-	Tata	ate work 1				_
DOH justification) DCA Cancellation				OHN	M	ARO	TTE	1	7 \$					1
Name of Facility Where Abatement is Takin	n Place (3)		FAC	LITY INFO	DRMAT	ION	Type of F	acility (A	<u> </u>					
PSE+G KOO			REF	7.E	P:-	r		ool (K-12	38					
Street Address 47-51 &			H-11-111-1588-1		Milos-co-state		Sub Oth	chapter 8 er (i.e. pr	(Other	than K-1		dings,	home	es,
City (5)			, ~	-2,			etc. Square F	eet	100000000	Floors	E	Bldg. A		
NEWARK County (6)			County	Code (7)			Current U			A	hod)	N	A	
ESSEX			(STATE	USE ONLY,	-				NI	A	neu)			-
Name of Monitoring Firm Hired by Building ( ENVIRONMENTAL TACTICS	Owner (8)		0045	10000			of Abatem QUE SYS				A			
Street Address 64 BROAD STREET							Address WHITEH	EAD A	VE.					
City, State, Zip Code MATAWAN, NJ 07747							tate, Zip C TH RIVE		08882	ĺ				
Project Manager for Monitoring Firm TOM GEIGER			Telepho	ne No. 90-2217		Teleph	noné No. 432-8350			License N	Vo.			
Start Date (10) 9 / 1 / 2016	Schedule		npletion	Date (11)		Name	of OSHA N	Monitor						
Occupancy Status During Abatement (Chec	k Only One	13	1/0	2017	7		QUE SYS	O I EIVIO	OF A	IVIERIO	A 			
Facility Closed/Vacated During Entire F	eriod of A	batem	ent				NHITEH	EAD A'	VE.					
Abatement Performed Outside of Norm Other – Describe: OUT DOOR	al Facility	Hours			_		tate, Zip C TH RIVE		08882	!				
Scope of Work (Check All That Apply)							,							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoliti					Mini-Er Gloveb	nclosure ag Proce	edure	Negative I				
	ls l	Locati	on				# INOITE/	Cempled	( ) and	INOH-FIIAL	JIE FIO	Abate	ement	
Location of Asbestos-Containing Material (ACM)		ormall I Solel		0-6		scription						Ту	pe	
TO BE ABATED In Facility (13)	Mair	ntenar odial S (12)	rce/		thermal surfa				(Sp	ount ecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									,	ite	е
OUT DOORS	-	×		P;pe	<b>S</b>	omA	sT:c	.	20	OLF	X			
Name of Registered Waste Hauler		N.	JDEP W	aste	Cubic	Yards	l N:	ame of R	eaistere	ed Landfill				
WASTE MANAGEMENT		H	auler ID 125	Contract of the Contract of th	of Was	ste		ROWS	- 7					
City, State ELIZABETH, NJ					Dispos	sal Date	10	ty, State ORRIS	VILLE	, PA				
Completed by CAROL RAIMO	Title OFFIC	CE M	GR				el R	air	ne)	Da	ite //0	2/	20.	16

CK = 7393

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

NOTIFICATION "

											9 9 9	0 0	- 0	
Date of Notification (1)	2016			Name o	f Building Ov	vner/Ope	erator (	(2)		Co Commission was	Productive .		-15-7-21-5-7-7	
Agencies Notified	Type Notification			Street A	ddress	204D		- Accused	n	EC		$\mathbb{V}$	E	.In
EPA DEP	Initial Amended		-		ate, Zip Code				M					
X DOL	Amendment Emergency (				H PLAINF	IELD, I	NJ 07	7068	11	AUG	1 7	2016		1
DOH DCA	justification) Cancellation				f Contact O H N	MA	Ro-	TTE			***********			
Name of Facility Where	Abstamost is Takin	a Diana /	2)		LITY INFOR					ASBESTO	S CO		)L&	
PSE4G	MH :	36	3)(5	DZ:	CE)			Type of Facility  School (K		THE RESERVE	THE PARTY OF THE P	- Terrent Miles		#40/mmin
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Name of Monitoring Firm ENVIRONMENTAL		Owner (8)	)	ASCN 0045				of Abatement Co	ontrac	tor (9)	CA			
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Project Manager for Mon TOM GEIGER	itoring Firm			Telepho 732-29	ne No. 90-2217	1		one No. 32-8350		License 01111				
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Street Address 64 BROAD STREET			1				Address WHITEHE	AD AVE.					
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Project Manager for Monitoring Fire TOM GEIGER	m		Telepho 732-29	ne No. 90-2217		Teleph	noné No. 432-8350		License N 01111	0.			
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Other - Describe: OUT D					_			R, NJ 0888	32				
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Asbestos-Containing Material (/ TO BE ABATED	Ma Ma	d Sole intenar	nce/	Asbesto	s Cont	aining M	laterial (ACA insulation,		mount Specify	Z)		E	ш
In Facility (13)	Cus	todial 5 (12)	Staff?		surfac	cing, VA	T, or		or LF)	Remova	Repair	Encapsulate	Enclosure
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City, State ELIZABETH, NJ		1 '	120			al Date	(III) 239533750	, State RRISVILL	F PA			8-07/2	-
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Date of Notification (1)		Ю	TIFICA:	HON OF	of Now Jor ASBESTO JAC 8:50 :	BADATE	EMENT D)		G [		20/16		(Pr)
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	ancellation			rio Gait	NFORMA	FIGU		1 101	ephone	Numb	er		
Name of Facility Where Abatemon North End school Street Address	nt is Taking Plac	9 (3)		A SILIT	INFURINA	IION	Type of Facil						
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Codar Grove			_				Square Feet	# of	Floors		Bldg	Ágo	
Essox			COUN	ty Code (	7) VLY)		Current Use (	Prior If being	ig demo	bertail	<del></del>		· ·
Name of Monitoring Firm Hired by Ahera Consultants, Inc	Bullding Owner	(8)	AS	ĆM No.		Name	of Abatement C	Ontractor.					
OB 385	SP 6					Street A	Corporation						•
City, State, Zip Code Occanville, NJ 08231						City, St	CBride Ave						
roject Manager for Monitoring Fire	n		Telepi	none No.		Telepho	land Park, N		License	T			
tart (2010 (10) 08-17-2016	Sched	iled Co	mpletio	652-183 n Date (1	1)	973-2	25-8400		01104	IVO,			
ocupancy Status During Abateme	1 110-21	~7D18	3		'	Iris En	r OSHA Monito vironmenta	r Laborat	ories I	10			• ,
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Other - Describe: unccupied		., 1100.	q		[	City. Sta Union.	te, Zip Code NJ 07083			·			Pasa.
23 8f or 23 If 2180 51 or 2280 If	×	Renave Demoli	ation tion			X	Full Contains Mini-Endosus Glovebas Pro	Cedura					
Location of		Local Normal	lon			Para	Non-Example	d (") and h	Von-Fria	ble Pro		ra eman	
Asbestos-Containing Material (A)  TO BE ABATED In Facility (13)	CM) Use	ed Sole dintenar todial S	ly by	Asbe (I.e	etos Conta i, thermal s	cription of ining Mate yetems in ng, VAT,	eriel (ACM)	Amo (Spe	cify	R	1	ype	T
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main office			×			ng tiles		345	1000	X			
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no of Rogistored Wasta Hauler h Corporation		Ha	IDEP W	32 2 E E	Cubic Ye of Wasto	rds		600 : Registered Landfil	Landill	Х			
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O8-04-2016

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Date of Notlification (1)	2	N	OTIFICAT	TION OF	of New Jen ABBESTO JAC 8:50 a	DAMETA	EMENT		EGE		$\mathbb{V}$		Prin
08/11/16			Nan	ne of Bul	ding Owner	Operato	r (2)		и '. ''	<u> </u>		()	XTT
Agencies Notified Type Notifi	cation		Dil	ok IMb	Board o	f Educa	tion/Wall	ace Co	entracting 1	7 2	915	/	2
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DEP Amen				State, Z		ve		A	SBESTOS	CON	TRO	L &	
7,1110111	ment#_		Brid	k, NJ (	8724				LICE	_	/_		_
DOH Justific	ency (includation)	ing	Nam	e of Con	teot								
E Carlos			Lou	Rento	nWallace	Contr.			Telephone	Numi	nt'	.;	
Name of Facility Where Abatement is	Taking Plac	æ (3)	F	ACILITY	NFORMA	ION							
Voiciaile Mellioriai Elementar	y school	- ,					Type of F	acility (4)			_		
Street Address 103 Hendrickson Avenue							School Subc	ol (K-12	(01)				
City (5)			*					r (i.e. pri	Other than k	rcial h	מואלות	ne h	maa
Brick							Squara Fe		# of Floors				
County (8)			Cava	u Cod.	-1						İ	. Age	
Ocean			(STAT	ty Code (	YLY)		Current Us	e (Prior	If being demo	ished	-	~	
Name of Monitoring Firm Hired by Bulk N/A	ling Owner	(8)	AS	CM No.		Name	9011001				TV.		
Street Address						Lilich	Orporat	ni Contri Ilan	ector (8)				
						Street /	ddress						
Olty, State, Zip Code							CBride A						
						City, St	ate, Zip Coo	de			-		
Project Manager for Monitoring Firm			Taleph	ione No.		Telepho	land Park	K, NJ O	7424				
Slart Date (10)						973-2	25-8400		License 01104	No.			
08-15-2016	08-18	TIBO C	empletto	Date (1	1)	Name o	OSHA Mo	nilor					
Occupancy Status During Absternant (C	heck Only (	ina)	U			Irls En	vironmer	ital Lat	oratories,L	LC:			
Facility Closed/Verstad Disting East						Street A	ddress						
Abstament Performed Outside of N Other - Describe:	ormal Facili	ty Hou	ne Purent		-		Route 22						
cope of Work (Check All That Apply)						Union.	NJ 0708	6 6					
23 st or ≥3 it	-						110 07 00	-					
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TO BE ABATED	Oug	intent todial	snce/ Staff?	(i.e	· rudillial 8	/alems in	oriel (ACM)		Amount			rn	
(13)		(12)			SUMBOIL	D. VAT	77		(Specify SF or LF)	Ren	Re	nca	DO
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odland Park, New Jersey					Disposal	Date	City, S						
npleted by no Glavatovic	Title	resid			Rigo	alure /	Morri	sville, F	A	-1-11			

<sup>\*</sup> Do not use this form for asbestos licensure exampled activities.

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Date of Notification (1)					of Building		Operator	(2)				_			1
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Agencies Notified	Type Notification			Street A	Address				11111						
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□ DOH	Emergency ( justification)	including	Ī	Name o	f Contact				Te	lephone	Numb	er	-		
DCA	Cancellation			EAC	ILITY INF	ODMAT	ION		<u> </u>		LICE	NS	ING-		α 
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City (5)								etc.)				_			
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Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCN	И No.			of Abatement C LEAD PROF							
Street Address				1				Address HITE DOVE (	COURT						
City. State, Zip Code _	COLUMN TO THE STATE OF THE STAT							itate, Zip Code EWOOD, NJ	08701						
Project Manager for Monit	roject Manager for Monitoring Firm						1 0000000000000000000000000000000000000	none No. 668-9078		Licens 1200	e No.				
Start Date (10) 08/23/16		Schedule 08/23/1		npletion	Date (11)		i	of OSHA Monito		NALS			10000000	-	
Occupancy Status During	Abatement (Check	c Only On	9)	enalle Variet			Street	Address	200	SEC. 118.00					
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Nor Used S Mainte Custodi (1				ice/ staff?		thermal surfa			(5	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
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City, State NEWARK, NJ	_L				sai Date	City, St	ate LEHEN	1 PA							
Completed by JOSEPH PERLSTEIN		Title OWN	ER		*************		ignature				Date			-	
	OSEPH PERLSTEIN OWNER														

Check# 0379

Date	e of Notification (1)				Name	of Building	Owner/0	Operator	r (2)								
8/-	12/16				Singl	h Realty	,		r		7	E P	E	Π	$\mathbb{W}$	F	5
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1000	mmercial Buildir		19 1 1400 (	٥,					Тур	2676					1.04		
	et Address								H	School (K- Subchapte		er than	K-12)				
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Nam	ne of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.		Name	of Ab	atement Co	ntractor	(9)				-	
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CK 5619

Date of Notification (1) 8/12/16					of Building beth Doy					EG	E	7 1	V/ [		21
Agencies Notified	Type Notification				Address	200 200					5	IJ	<u> </u>	4	
X EPA DEP DOL	Initial Amended Amendment Emergency (		_		ate, Zip C awr NJ				Commence of the commence of th	AUG	17	2(	)16	The formation of the formation of	$\mathcal{A}$
DOH DCA	justification)  Cancellation	including		Name of	of Contact oeth				A	Telephon					
Name of Facility 180		5		FAC	ILITY INF	ORMAT	ION		-	-10	LINO	HAG			_
Name of Facility Where Ab Elizabeth Doyle Priva		g Place (3)						Type of F	51,525						
Street Address								Subo	ool (K-12) chapter 8 ( er (i.e. priva	Other than	n K-12 mercia	) I buil	dings,	hom	es,
City (5) Bellmawr NJ 08031								Square Fe 1000+		# of Floor 2	S	- 25	Bldg. A	ge	
County (6) Camden					Code (7) <i>USE ONL</i> Y	n		Current U	se (Prior if	being der	nolish	ed)			
Name of Monitoring Firm H N/A	ired by Building C	Owner (8)		ASC	M No.			of Abateme aco Inc.	ent Contra	ctor (9)					
Street Address								Address Box 329							
City, State, Zip Code							tate, Zip Co		W						
Project Manager for Monitor		Telepho	ne No.			one No. 753-9800	),	Licer 0072	ise No						
Start Date (10) 8/13/16		Scheduled 8/14/16	d Cor	npletion	Date (11)		Name Same	of OSHA M	onitor		100				
Occupancy Status During A	batement (Check	Only One	)				Street	Address		D-110					
Facility Closed/Vacated  Abatement Performed  Other – Describe: Hon	Outside of Norma	al Facility	oaten Hours	nent s		<u> </u>	City, S	tate, Zip Co	de						
Scope of Work (Check All T	hat Apply)										-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova				×	Mini-End Gloveba	ntainment volosure og Procedu empted (*)	ıre					
			ocati								Tidalic		Abate	ment	
Location of	torial (ACM)		rmal Sole				scription			F20 700	-	-	Тур	oe	-
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Used S Mainte Custodia (1.						thermal surfa		aterial (ACN insulation, T, or eous)		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
Batroom 1st floor				X		popo	orn cei	ling		130 SF		x		.5	
Name of Registered Waste H	N	JDEP W	aste	Cubic	Varde	Non	ne of Regi	ietorod I a	adfill						
United Containers					No.	of Was		1	R.O.W.S		iumi				
City, State Elm NJ				Dispos 8/15/1	al Date	1 222	, State prriville P	A 19067	7						
Completed by Anthony T Perna	ent			S	ignature	7	HIII E III C C C C C C C C C C C C C C C		Date 8/12						

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1,000	44 /	16						ner/Operator (		_						
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Agencies Notified	8			100000000000000000000000000000000000000	Address		740 En 1000 (company) - 1 - 1	Γ		E (	SE	7 []	VI [		2	
⊠ EPA	[발 <del>크로]</del> 불빛 발생되어서 된	is.			PO	Box 327				M	追		U '	UL	=	
					City, S	State, Zip (	Code			13					11	1000
				,	Allo	oway, NJ	080	01		11)	1	110 1	7 2	016		U
			Sidding	,	Name	of Contac	t	11/2/2		Ш	Telepho			VIV	1	
V AND STREET	8						усе				Ī					
						-	RMATION			ASBE	STOS	CON	TRO	)L&		
Name of Escility Where A	8						WI OI	RIVIATION	Type of Faci	lity (A		LICE	ISIN	<u>G</u>		
	8 / 11 / 16  Pas Notified Type Notification Initial  Amended Amendment #  Emergency (including justification)  Of Facility Where Abatement is Taking Place abore Elementary School Address  Salem-Fort Elfsborg Road  Manager for Monitoring Firm Hired by Building Owner Environmental, Inc.  Address  N. Church Street  Pate, Zip Code Prestown, NJ 08057  Manager for Monitoring Firm  Seaman  Seate (10) Scheduled Company School Address  Salem-Port Elfsborg Road  Manager for Monitoring Firm  Seaman								School (F		,					
	8								Subchap		Other th	an K-12	)			
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1 TO	8				Cour	aty Codo /	71/07/	ATE USE ONLY)	Current Use	/Drio		demolis		00		
1	8				Cour	ity Code (/	)(317	TE OSE ONET)	School	(110	r ir beirig	demons	illeu)			
	8 / 11 / 1  encies Notified EPA DOLWD DOH DCA (NJAC 5:23-8)  me of Facility Where Abatement is Taking Stainboro Elementary School est Address 31 Salem-Fort Elfsborg Road (5) falem anty (6) falem me of Monitoring Firm Hired by Building TI Environmental, Inc. fiet Address 253 N. Church Street (5) fiet Manager for Monitoring Firm eff Seaman ant Date (10) School Batement Performed Outside of Norm Time of Abatement:  AM- DOLWD Amended Amendment Emergency justification) Cancellation  Taking School Bet Address 31 Salem-Fort Elfsborg Road (5) Fallem Facility (6) Fallem Facility Closed/Vacated Dyring Firm Facility Closed/Vacated During Entire Fallement Performed Outside of Norm Time of Abatement:  AM- DOLWD Amended Amendment Facility Closed/Vacated During Firm Facility Closed/Vacated During Entire Fallement Performed Outside of Norm Time of Abatement:  AM- DOLWD TO BE ABATED IN Facility (13)  AND School Facility (13)					No.	LNI-	me of Abateme		(0)	0017-0			LL CHE		
I	8					INO.	1									
	8							Shade Enviro	onmental, L	LC						
	8						1000000	eet Address								
	8							323 Cutler Av								
	8						1000000	y, State, Zip Co								
								/laple Shade	, NJ 08052				a			
Project Manager for Monit	toring Firm			Tele	phone	No.	Tel	ephone No.			License	e No.				
Jeff Seaman	8		85	6-889	-5182	8	356-755-0099			0084	12					
Start Date (10)	## ## ## ## ## ## ## ## ## ## ## ## ##					te (11)	Nar	me of OSHA N	1onitor							
08 /22 /	encies Notified EPA				_ / .	16	E	MSL Analyt	ical, Inc.							
Occupancy Status During	## A		only o	one)			Stre	eet Address							Se Suria	
□ Facility Closed/Vacate	8 / 11 / Properties Notified EPA			Abater	ment		2	00 Route 13	0 North							
	8					cribe	City	y, State, Zip Co	ode							
Time of Abatement:	gencies Notified   EPA					AM		Cinnaminson								
Scope of Work (Check all	treet Address  1253 N. Church Street ity, State, Zip Code Moorestown, NJ 08057 roject Manager for Monitoring Firm Jeff Seaman tart Date (10)  08 / 22 / 16  ccupancy Status During Abatement (0  Facility Closed/Vacated During Entire Abatement Performed Outside of Note Time of Abatement:  AM-  cope of Work (Check all that apply)  23 sf or ≥3 lf  ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility							Zi i i i i i i i i i i i i i i i i i i	, 110 00077							
ocope of work (official all	triat apply)							☐ Full Cont	tainment with	Nega	tive Pres	sure				
≥3 sf or ≥3 lf								Mini-Enc								
\(\sum_{\geq} \geq 160 \text{ st or } \geq 260 \text{ lf}	Moorestown, NJ 08057 oject Manager for Monitoring Firm  Jeff Seaman art Date (10) So				n				g Procedure mpted (*) and	Non-	Friable F	Procedu	-e			
	TTI Environmental, Inc.  reet Address  1253 N. Church Street  ty, State, Zip Code  Moorestown, NJ 08057  oject Manager for Monitoring Firm  Jeff Seaman  art Date (10) Soccupancy Status During Abatement (C Facility Closed/Vacated During Entire Abatement Performed Outside of Non Time of Abatement:AM			Locat	ion			Z Hon Exc	inplod ( ) dila	1	111000	100000		atem	ont T	'vne
Location	of		17.50	Vorma				Description o	f					-		1
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	У		Ous	(12)	Juli .			surfacing, VAT, her miscellane			SF or	LF)	<u>m</u>		Encapsulate	Тe
(10)			Yes	No	N/A		01	nei miscenane	043)						9	
Crawlspace			$\boxtimes$			Pipe Fi	ttina	ıs (Wrap and	I Cut)		20	LF				
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Classrooms	awlspace iller Room assrooms					FIOOF	nes				0.3	or				H
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	e Hauler			123303	JDEP \ auler I[		Cub	oic Yards of	Name of Re							
Freehold Cartage				n	15939		1		Cumber	rland	Count	y Land	till			
City, State							Dis	posal Date	City, State							
Freehold, NJ	me of Facility Where Abatement is Elsinboro Elementary School eet Address 331 Salem-Fort Elfsborg Road y (5) Salem unty (6) Salem me of Monitoring Firm Hired by Buil TTI Environmental, Inc. eet Address 1253 N. Church Street y, State, Zip Code Moorestown, NJ 08057 Oject Manager for Monitoring Firm leff Seaman art Date (10) 08 / 22 / 16 cupancy Status During Abatement ( Facility Closed/Vacated During Ent Abatement Performed Outside of N Time of Abatement:AM ope of Work (Check all that apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM						0	8/26/2016	Newbur	g, P.	A					
Completed By (Print or Ty	ime of Facility Where Abatement is Taking Place Elsinboro Elementary School reet Address  631 Salem-Fort Elfsborg Road by (5) Salem Funty (6) Salem Fine of Monitoring Firm Hired by Building Owner (8) FTI Environmental, Inc. Feet Address  1253 N. Church Street y, State, Zip Code Moorestown, NJ 08057 Diget Manager for Monitoring Firm  Jeff Seaman Fort Date (10) Fine OB / 22 / 16 Fine OB / 22 / 20 Fine OB / 22 Fine			-300-3				Signature	$\sim$			Da	te			
Christina Lynch	an medial	Op	perati	ons l	vianag	er		AMA	20			9	2/11	11	0	

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Date of Notification (1) 08/10/2016					of Building stown Bo				D F	C	FI	W		5	7
Agencies Notified	Type Notification			The state of the s	Address	970000 00			10/-	, 0					
× EPA	× Initial				nset Hill										
DEP X DOL	Amended Amendmen				tate, Zip C stown, N		25		The second	AUG	1 7	2016	ò	U	
⊠ DOH □ DCA	Emergency justification) Cancellation		1		of Contact Snyder	(4)			100		none Nu	mber			
I DOX	Caricellation	1			CILITY INF		ION		ASE		ENSIN	19			_
Name of Facility Where Blairstown Elemen		ng Place (	3)	FAC	ILIT INF	ORWAI	ION	Type of	Facility (4)	PARTICIPATE AND ADDRESS OF THE PARTY AND ADDRE	LIVOII	40			
Street Address	tary ochoor								chool (K-12		h 1/ d	٥,			
1 Sunset Hill Road									ubchapter 8 ther (i.e. pri c.)				ildings	, hom	ies,
City (5) Blairstown								Square		# of FI	oors		Bldg.	Age	
County (6) Warren					Code (7)	n		Current	Use (Prior	if being	demolisl	ned)			
Name of Monitoring Firm	Hired by Building	Owner (8	)	ASC	M No.		Name	of Abate	ment Contr	actor (9)				- 7	
RK Occupational a			,						HERS C			G, 11	VC.		
Street Address 401 St Jarnes Aver	nue							Address REELA	ND AVE	NUE					
City, State, Zip Code	965							State, Zip							
Phillipsburg, NJ 088 Project Manager for Mon			- 1	Telepho	one No.		23,000,000	none No.	NJ 07512		cense N	0.			
Patrick McGuinnes	s			908-4	54-6316		973-	956-87			0494				
Start Date (10) 08/29/2016		09/05/			Date (11)			of OSHA IE AS (	Monitor 9) ABOV	E					
Occupancy Status During	g Abatement (Chec	k Only O	ne)				Street	Address							
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norn						City, S	tate, Zip	Code						
Scope of Work (Check A	II That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	3.3 66	-	Renova Demoli				×	Mini-E Glove	Containmen Enclosure bag Proced	dure					
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Location	of		Locat Vorma			0		_4						/ре	
Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED	Ma	d Sole intena todial ( (12)	nce/		tos Cont thermal surfac		faterial (A s insulation T, or		Amor (Spec SF or	cify	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										é	,,
Exterio	or		Х			W	/indows	S		200	LF	Х			
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*		+ -													
Name of Registered Was	te Hauler		IN	JDEP W	/aste	Cubic '	Yards		Name of Re	nistered	Landfill				
TWO BROTHERS C			H	lauler ID 8743		of Was	ste	1	WASTE I	-		NT C	S.R.C	).W.S	S.
City, State TOTOWA, NJ							al Date		City, State MORRIS	VILLE	PA				
Completed by Danielle Mihajlovic		Title	IECT	COOL	RDINAT	Si	ignature		V	7	Dat		2010		
Darnono iviiriajiovio		I RO	101	COOF	DINAT	OK /	10	//	//		08	/ 10/.	2016		

Date of Notification (1)	- S-110		Name o	f Buildin	g Owner/0	Operator	(2)	E C E	V		7	
August 11, 2016			Amazo	n.com,	Inc.			EGEL	W	느		
Agencies Notified Type Notificatio	n		Street A	Address		VIII. 100 100 100 100 100 100 100 100 100 10	114			i		
			410 Te	rry Ave	. N			AHG 1 7	2016	and the same	U)	i
DEP Amended			City, Sta	ate, Zip (	Code		lu lu	AUG 1-1	010	1	-	1
DOL Amendmer Emergency	_	<u> </u>	Seattle,	WA 9	8109							1
DOH justification		1	Name o	f Contac	ct		I A	SBESIFONGHO	WMDEr	OL 8	k -	1
DCA Cancellation	n		Project	Manac	ger			TIPENIC	ING			الم
					FORMATI	ON				_		
Name of Facility Where Abatement is Tak	ing Place (	3)					Type of Facility	(4)				
RCA		5911					School (K-	12)				
Street Address							100000000000000000000000000000000000000	r 8 (Other than K				
698 Rt. 46 W							Other (i.e. etc.)	private & comme	rcial bu	ilding	s, hom	nes,
City (5)							Square Feet	# of Floors		Bldg.	Age	
Teterboro								CANADONA SE TERRASTA				
County (6)			County	Code (7)			Current Use (Pr	ior if being demo	lished)			
Passaic			(STATE U	USE ONL	Y)			Warehou				
Name of Monitoring Firm Hired by Building	Owner (8	)	ASCM	I No.		Name	of Abatement Co		50			N. 32-0
AET			0021			located to the	IACK Group, L					
Street Address			0021				Address	LLC				
907 Doolittle Drive								OTE 000				
City, State, Zip Code	- control						Kings HWY N,	STE 209	-			
Bridgewater, NJ 08807							tate, Zip Code	100 W				
Project Manager for Monitoring Firm			Telephoi	no No			/ Hill, NJ 0803					
Collaboration of the Company of the			and and the		_	15 35 25	ione No.	License	No.			
Eric Houseknecht Start Date (10)	Cahadul		(908) 21				759 - 5000	00781				
Co. 150 1559	Scriedui		mpletion I				of OSHA Monitor					
8/25/16 Occupancy Status During Abatement (Che	-l- O-l- O		12/31/1	6			ACK Group, L	.LC.				
57							Address	Valentinia de la Contraction d				
Facility Closed/Vacated During Entire Abatement Performed Outside of Nori	Period of	Abater	ment				Kings HWY N,	STE 209				
Other - Describe:	mai Facilit	y Hour	S				tate, Zip Codè					
Scope of Work (Check All That Apply)						Cherry	Hill, NJ 0803	4				
						Г	7					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Description of the last of the	Renova				2		ent with Negative	Pressu	ıre		
Z 2100 SI 01 Z 200 II	L l	Demoli	tion			-	Mini-Enclosure Glovebag Pro					
								(*) and Non-Friat	le Proce	edure		
	Is	Locat	ion							Aba	temen	t
Location of		Normal			Des	cription	of			_ T	уре	
Asbestos-Containing Material (ACM)		ed Sole		Asbe			aterial (ACM)	Amount			m	
TO BE ABATED In Facility		todial S		(i.∈			insulation,	(Specify	Re	D Z	Encapsulate	E
(13)		(12)				ing, VA		SF or LF)	Remova	Repair	lsde	Enclosure
			T						Val	=	llate	ure
	Yes	No	N/A									
throughout			X			VAT		1,275 s/f	X			
_"_			X		N	/lastic		950 s/f	X			
exterior warehouse	X				(	caulk		10,000 I/f	X			
Name of Registered Waste Hauler			IJ DEP W		Cubic \		Name of	Registered Landf	ill		1	
Navianti Cantin		H	lauler ID I		of Was							
Newark Carting			450	9		122.2		and County /	IESI E	Bethl	ehem	1
City, State					Dispos		City, Stat	е				
Newark, NJ						/31/16		/ Bethlehem	PA			
Completed by	Title				Şi	gnature	10/2	1	Date			
Mike Cooper	Presid	lent				Tent,		8/	11/16			

Date of Notification (1)				IL TO NUM				(	IL	_ 0		/		J
08/10/2016				of Building am Patte		Operato	r (2)	In	E	E		E	Jr	1
Agencies Notified Type Notification  EPA Initial			300 F	Address Comptor				Th'	A serious and a	IG 1	7 20	16		
DEP Amended Amendmeni Emergency			Wayr	tate, Zip 0 ne, NJ 0	7470			TU L	A			10	1	_
DOH justification)  Cancellation		d	Name Karl I	of Contac Pettit	t					TLDJEI =		DUI	2	
Name of Facility Where Abatement is Takir	ng Place (	(3)	FAC	CILITY IN	FORMAT	TON	Type	of Facility						
William Patterson University Street Address								School (K	-12)	or than V	10)			
300 Pompton Road							×	Other (i.e.	private &	commer	cial bu	ilding	s, hon	nes
City (5) Wayne, NJ 07470				14,				etc.) ire Feet 500	# of	Floors		Bldg. 56	Age	
County (6) Passaic			County (STATE	Code (7) USE ONL	Y)		Curre	ent Use (Presity						
Name of Monitoring Firm Hired by Building TTI Environmental	Owner (8	)	ASC N/A	M No.		Name	of Aba	itement Co	entractor (	(9) Ces				
Street Address 1253 N Church Street						Street	Addre							- 55
City, State, Zip Code Moorestown, NJ 08057						City, S	State, Z	ip Code id City, N						
Project Manager for Monitoring Firm Jeff Seaman			Telepho	one No. 89-5182	,	Teleph	none N 349-0	0.	41 111	License				
Start Date (10) 08/11/2016	Schedul	ed Coi	mpletion	Date (11)		Name	of OSH	HA Monitor		2867	D			
Occupancy Status During Abatement (Chec	k Only O	ne)				Street	in McI Addres	SS						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of a nal Facility	Abater / Hour	nent s			City, S	tate, Zi	p Code						_
Scope of Work (Check All That Apply)						вауо	nne,	NJ 0700	2					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Manager 1	Renova Demoli				×	Min Glo	Containm i-Enclosur vebag Pro n-Exempte	e cedure					
	Is	Locat	ion				1101	Lacinple	a ( ) and	NOII-FIIa	bie Pro		emen	t
Location of Asbestos-Containing Material (ACM)		viormal d Sole		A - 1		scription						Ty	/pe	Т
TO BE ABATED In Facility (13)	- A - A - A - A - A - A - A - A - A - A	intena todial 3 (12)		Asbes (i.e.	tos Cont thermal surfac other n	aining M systems sing, VA niscellan	insula T, or	(ACM) tion,	(Sp	ount ecify or LF)	Remova	Repair	Encapsulate	Ti orogani
_	Yes	No	N/A								<u>a</u>	-	late	d
Basement Boiler Room Slop Sink	X			Pipe	Insulat	tion		8	LF	Х				
Name of Registered Waste Hauler		I N	JDEP W	lasta	Cubia	Vosda.								
ATC		Н	auler ID 4310		of Was	te		Name of Minerva						
City, State Shirley, NY 11967		1				al Date		City, State Waynes		)H 448	88			
Completed by nn A. Ali	lianc	e Assis	stant		gnature		AL	July, C	Da	ate 3/10/2	2016			
	1	er sus services.						MIZ	CORRELA	00	1012	010		

Date of Notification 08-11-2016	(1)				of Building Norelli	Owner/	Operator	(2)						
Agencies Notified	Type Notificatio	n		Street A	Address					E G		W		M
× EPA × DEP × DOL	Initial Amended Amendme		_		ate, Zip C nfield N		13			AUG	17	2016	1	
	Emergenc justification Cancellation		-		f Contact Norelli		20 Aug 19		T	elephone N	Numbe		1	
					ILITY INF	ORMAT	ION			LICE	NSIN	TRO	L &	
	ere Abatement is Tak	ing Place (3)						Type of Facilit	y (4)		1 41 34171	<u> </u>		
Private Dwelling	9					111 E		School (F	(-12) ter 8 (O	ther than K	(-12)			
City(E)				Self-				Other (i.e etc.)	. private	e & comme	rcial bu		(S)	es,
City (5) Bloomfield NJ (	07003							Square Feet n/a		of Floors /a		Bldg. n/a	Age	
County (6) Essex					Code (7) USE ONLY	)		Current Use (F Private Dwe		eing demol	lished)			
Name of Monitoring Bioterra Solution	Firm Hired by Building	Owner (8)		ASCN	Л No.		and the second	of Abatement C	ontracto	or (9)				
Street Address								x Contracting	g LLC					
1130 W Chestn							P.0	BOX 734						
City, State, Zip Code Union NJ 07083								tate, Zip Code dland Park 1	NJ 074	124				
Project Manager for Rick Eustagiuo	Monitoring Firm			Telepho	ne No. 94-3762	)		one No. 692-6298		License 01266				
Start Date (10) 08-20-2016		Scheduled					Name	of OSHA Monito		01200				
	uring Abatement (Che			/ 				x Contracting	J LLC					
NAME OF THE OWNER OWNER OF THE OWNER OWNE	Vacated During Entire	5						Address orley Dr						
Abatement Perl	formed Outside of Nor	mal Facility F	lours	ient			20 1120 100	tate, Zip Code						
							Woo	dland Park N	IJ 074	24				
Scope of Work (Che	ck All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260	If	Company .	nova molit		ä		×	Full Contains Mini-Encloss Glovebag Pr Non-Exempt	ire ocedure	)			re	
		ls L	ocati	on				- Non Exempt	1	110 11011 1 11	abio i i	200	ement	t
	ation of	No	rmall	у		De	scription	of				Т	уре	
	ning Material (ACM) ABATED	Used Main						aterial (ACM) insulation,		Amount	_		m	ш
In F	acility	Custo	dial S (12)	staff?	(1.6.	surfa	cing, VA	T, or		(Specify SF or LF)	Remova	Repair	caps	Enclosure
(	13)		No	N/A		other n	niscellan	eous)			oval	air	Encapsulate	sure
Base	ement			x			VAT		4	50 SF	X	+		
Name of Registered \	Waste Hauler		T N	JDEP W	aste	Cubic	Yards	Name o	f Regist	ered Landf	fill			
Amax Contracting			H	auler ID I	No.	of Was		GROV	resident	oo Landi	odt.i			
City, State Woodland Park N	11.07424					Dispos	al Date	City, Sta						
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Tome Maslarkov		Project	Ма	nager		S	ignature	lle	1	)	Date 08-11	-2016	5	

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				FACIL	JTY INF	ORMATION						
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Street Address	Name of the second			2,	• • • • • • • • • • • • • • • • • • • •	î .	D-Other (i.e. pr homes, etc.)	ivate & commercia	l buildings.			
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cnessic	ill					*	2100.		1.9	ے ر	_	
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Street Address							th River	S+				
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City, State, Zip Oose	588						ack, N.J	. 07601				
Project Manager for Monitoring	im	Tel	ephon	e No.		Telephone No.		License No.				11000
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Start Date (10)	Scheduled Co				1	Name of OSHA		1				
8/24/16	1	25	116				Environm	ental			_	_
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☐ Facility Closed/Vacated Durin	g Entire Period o	of Abate	ment			City, State, Zip C	Code					
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□ ≥ 160 sf or ≥ 260 lf			1	□ Den	notition	□ Non	ebag Procedure -Exempted (*) an	d Non-Friable Proc	edure			
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l costina of			omali		:	Description	of .			Ť	Ť	-
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TO BE ABATED IN Facility			ustodia Staff?		(re	, thermal systems surfacing, VA		SF or LF)	Кеточа	Repair	Encapsulate	Enclosure
(13)			(12)			other miscellan	eous)		l a	-	ilate	elm
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2000			11- 11	ORMATION						1
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Street Address	20		• • • •	1	Subchapter & Other (i.e. pr	3 (Other than K-12) ivate & commercia	building:	s,		
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Name of Monitoring Firm Hired by Builds	g Owner AS	SCM No.		Name of Abater	nent Contractor (	9)				
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Street Address				Street Address						
					th River	St				_
City, State, Zip Code	*	*		City, State, Zip		07601				
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Project Manager for Monitoring Firm	Tele	phone N	0.	Telephone No. 201-329		00388				
Start Date (10) Sche	tuled Completion	Date (1	1)	Name of OSHA						
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Occupancy Status During Abatement (C	neck only one)	٠.		Street Address						
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City, State	ar programme conservation			Disposal Date	City, State			0.0		
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Date of Notification (1) 08/11/16				Building (BENNET		Operator	(2)	K		7 20	16	The same of the sa	]][
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	ncy (including		Name of	Contact					LIULI Diochana Ni				
DCA Cancella			GAIL						JE 110 0	J.J			
Name of Facility Where Abatement is T	aking Place (3	)	FACII	LITY INFO	DRMAT	ION	Type of Fa	acility (4)			314 TEST		
	•	fo						ol (K-12)					
Street Address	- Kinner - Kinner								ther than K- e & commer		linas	home	25
							etc.)						
City (5) SPRING LAKE HEIGHTS							Square Fe 2000	eet #	of Floors	B	ldg. A	ge	
County (6)			County C					se (Prior if b	eing demoli	shed)			
MONMOUTH				JSE ONLY)			HOME						
Name of Monitoring Firm Hired by Build	ing Owner (8)		ASCM	1 No.			of Abateme LEAD PF						
Street Address							Address HITE DOV	/E COUR	T				
City, State, Zip Code							state, Zip Co EWOOD,		 1				
Project Manager for Monitoring Firm			Telephor	ne No.		200000000000000000000000000000000000000	none No.		License	No.			
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Start Date (10) 08/21/16	08/21/		npletion [	Date (11)			of OSHA M LEAD PF		ONALS				
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Other - Describe:							EWOOD,		1				
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Name of Registered Waste Hauler		IN	JDEP W	laste	Cubic	Yards	Na	me of Regis	stered Landi	ill .			
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City, State NEWARK, NJ					Dispo	sal Date 1/16		y, State ETHLEHE	EM PA				
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JOSEPH PERLSTEIN	OWN	IER											

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Date of Notification (1) 08/11/16					of Building na Const			r (2)	Martin Commence of the Commenc	The second second	AUG	1 7	20	16	No. of Concession, Name of Street, or other Persons, Name of Street, Name of S	U
	ype Notification			Street A	Address MS RIV	/ER RD	21			ACD	ESTO	10.00	MIT	DO		
EPA X DEP X DOL	Initial Amended Amendment	t #		City, Sta	ate, Zip C	ode				ASD		ENSI			La	
× DOH	Emergency justification)	(including		Name o	of Contact					Tele	phone	Numbe	r			
DCA L	Cancellation	1			MATTII	93000										
Name of Facility Where Aba	itement is Takir	ng Place (	3)	FACI	ILITY INF	ORMATI	ON	Туре	of Facility (	4)						
-								П	School (K-1	2)						
Street Address								×	Subchapter Other (i.e. p	8 (Othe			uildir	ngs,	home	es,
City (5) OAKHURST									etc.) are Feet O	# of	Floors		Bld	g. A	ge	
County (6) MONMOUTH					Code (7)	7			ent Use (Pri		ng demo	olished)	r			
Name of Monitoring Firm Hir	red by Building	Owner (8)	)	ASCN				of Aba	atement Cor D PROFE						- 0.00	
Street Address							Street	Addre	ss		VALS					-
City Crate Tie Code									DOVE CO	JURI						
City, State, Zip Code									ip Code OD, NJ 0	8701						
Project Manager for Monitor	ing Firm			Telepho	ne No.			hone N 668-9			Licens 1200	e No.			0.00	
Start Date (10) 08/21/16		Schedul 08/22/	ed Con 16	npletion	Date (11)				HA Monitor D PROFE	SSION	NALS					
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Facility Closed/Vacated Abatement Performed ( Other – Describe:	During Entire I Outside of Norn	Period of a	Abaten / Hours	nent			City, S	State, Z	DOVE CO							
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Date of Notification (1)	8-11-8	16		Name o	of Building		Operato o ch	0004000	Sor			5	U	U	5
Agencies Notified	Type Notification	Project.	m.	Street A	Address	20	Ω.		<u> </u>		ALIC	1	7 0	016	1
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DOL	Amendment  Emergency (		_			11	2en	400	1	NJ	ASBEST	Co	400	最	)L &
D DCA	justification)  Cancellation				of Contact	1/:-	ih			Tele	phone Nair	nhani	CINI	^	,
					ILITY INF	ORMAT	ION	1							ÿ.
Name of Facility Where	Abatement is Takin	Place (3	3)					Туре	of Facility	(4)	2				
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3700	Route -	1					19		Other (i.e. etc.)	private &	commerci	al buil	dings,	hom	es,
City (5) West	Windson		A1T		(10)	540		Squa	re Feet	# of	Floors	Е	Sldg. A	ige	_
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Name of Monitoring Firm	e. Pho G	•	Name	of Aba	tement Co	A		ie	h .		D R				
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Project Manager for Mon	uri grirm	à		Telepho		771 ~		none No	Carlo a	-	License No	). di	10		
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Abatement Performed Other – Describe:							City, S	tate, Zi	p Code	( )	· · · ·		-		
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EPCTEC	mologies	je		70			10	ζ	Was	eMa	inagen	ient	0 {	: P	Mr.
City, State	U				t)	Dispos	al Date		City, Star	ie .		A			9

NJ President PA



Special Southern   Special Manager for Monitoring Firm   Scheduled Completion   No.   Name of Control State. Zip Code   Street Address   Square Feet   Squ	Date of Notification (1)				Name o	f Building	Owner/0	Operator	(2)		0 6	7 7	7 6		7
Fig.   Fig.   Initial Amended   Am	08/09/16						he Mo	st Bles	sed Sacrar	nent E	C L	U V	/ E		
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Academy of the Most Blessed Sacrament   Street Address   Street Address   Street Address   School (K-12)   S	X DCA				Thom	as Altor	njy			F _	- PRYET	(43)11	à .		
Academy of the Most Blessed Sacrament    Sched (K-12)   Subchapter 8 (Other than K-12)   Subchapter 8 (Other than K-12)					FACI	LITY INF	ORMAT	ION	L		LiOL	1011			
Street Address   Sub-hapker 8 (Ober than K-12)   Sub-hapker				3)					Type of Faci	lity (4)					
Other (fi.e. private & commercial buildings, homes, etc.)		ost Biessed Sac	crament								h = = 4h = = 1/	40)			
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Franklin Lakes	A STATE OF THE STA									1 #	of Eleone		Dida	100	
County (6)   Bergen	To 1973 1								(2)		01 110015			- ye	
Bergen   (STATE USE ONLY)   School					County (	Code (7)				(Prior if b	eing demol				
Envirovision Consultants Inc.    D0079   Lesco Services Inc.	The state of the s	20					)				•	68-40-36-E-V			
Street Address 20-21 Wagraw Rd. Bldg 35E  City, State, Zip Code Fair Lawn, NJ 07410  Project Manager for Monitoring Firm Frederlock Larson  Frederlock Larson  Start Date (10) 08/30/16  Cocupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Ferformed Outside of Normal Facility Hours  Other — Describe:  Other — Describe:  Start 0 23 if y 23 if y 23 if y 23 if y 2260 if  Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Doiller room  To Be Cocupand Waterial (ACM) Doiller room  To Be Abate (13) Doiller ro	[H] [H] [H] [H] [H] [H] [H] [H] [H] [H]		Owner (8)		ASCN	I No.		Name	of Abatement	Contracto	or (9)				
20-21 Wagraw Rd. Bldg 35E	Envirovision Consu	Itants Inc.			0007	79		Lesc	o Services	Inc.					
City, State, Zip Code		D													
Fair Lawn, NJ 07410  Project Manager for Monitoring Firm Frederick Larson  Telephone No. 973-636-9145  S62-221-9092  01107  Start Date (10) 08/19/16  Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Other − Describe:  23 or 23 lf ≥ 160 sf or ≥260 lf  Scope of Work (Check All That Apply)  152 sf or 23 lf ≥ 160 sf or ≥260 lf  Scope of Work (Check All That Apply)  153 sf or 23 lf ≥ 160 sf or ≥260 lf  Scope of Work (Check All That Apply)  154 Location of Asbestos-Containing Material (ACM) 170 BE ABATED In Facility (13)  Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Doiller room  Type  Abatement Type  Abat		Blag 35E						400000000	and the second second						
Project Manager for Monitoring Firm Frederick Larson  Start Date (10) Scheduled Completion Date (11) 08/19/16  Occupancy Status During Abatement (Check Only One)  Frederick Larson  Scheduled Completion Date (11) 08/30/16  Occupancy Status During Abatement (Check Only One)  Facility Closed/Wacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Other — Describe:  Scope of Work (Check All That Apply)  Staff or ≥260 if  Scheduled Completion Date (11) 08/30/16  Cocupancy Status During Abatement (Check Only One)  Frederick Larson  Start Date (10) Name of OSHA Monitor Leslaw Nalodka  Street Address 156 Maple Ave.  City, State, Zip Code Wallington, NJ 07057  Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Proced	5.	0						(5)							
Start Date (10)  08/19/16  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)  23 sf or ≥260 if  Location of Asbestos-Containing Material (ACM)  10 8H ABATED  In Facility (13)  Description of Asbestos-Containing Material (ACM)  10 SH ABATED  In Facility (13)  Name of Registered Waste Hauler  Normally  Yes No N/A  Normally  10 She ABATED  Customation of Asbestos-Containing Material (ACM)  Description of Asbestos-Containing Material (ACM)  10 SH ABATED  In Facility (13)  Normally  SF or LF)  Normally  Yes No N/A  Doiller room  Normally  SF or LF)  Normally  Abatement  Type  Abatem					Telepho	ne No.				8_8	License	No.		<u> </u>	
O8/19/16  Occupancy Status During Abatement (Check Only One)    Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours   Abatement Performed Outside of Normal Facility Hours	Frederick Larson				973-63	36-9145		862-	221-9092		01107				
Occupancy Status During Abatement (Check Only One)    Facility Closed/Vacated During Entire Period of Abatement Abatement Period Dutside of Normal Facility Hours					npletion l	Date (11)									
Abatement Performed Outside of Normal Facility Hours   City, State, Zip Code   Wallington, NJ 07057	SERVICE AND SERVICE							111111111111111111111111111111111111111	The state of the s						
Abatement Performed Outside of Normal Facility Hours  City, State, Zip Code Wallington, NJ 07057  Cope of Work (Check All That Apply)  ≥ 3 sf or ≥3 lf  ≥ 160 sf or ≥260 lf    St. Location   Demolition   Description of   Asbestos Containing Material (ACM)   (i.e. thermal systems insulation, Systems (Specify SF or LF)   Description of   Security   Security   Description of   Security   Security   Security   Description   Security   Description of   Asbestos Containing Material (ACM)   (i.e. thermal systems insulation, Systems (Specify SF or LF)   Description   Security   Description   Demolition   Demolition   Demolition   Demolition   Demolition   Description of   Asbestos Containing Material (ACM)   (i.e. thermal systems insulation, Specify SF or LF)   Description of   Security   Security   Description   Description of   Asbestos Containing Material (ACM)   (i.e. thermal systems insulation, Security   Security   Security   Security   Description   Description   Description of   Asbestos Containing Material (ACM)   (i.e. thermal systems insulation, Security   Security   Security   Description of   Asbestos Containing Material (ACM)   (i.e. thermal systems insulation, Security   Security   Security   Description   De	Occupancy Status During	g Abatement (Ched	k Only On	e)											
Scope of Work (Check All That Apply)   ≥3 sf or ≥3 lf   ≥160 sf or ≥260 lf   Renovation   Demolition   Pull Containment with Negative Pressure   Mini-Enclosure   Glovebag Procedure   Non-Exempted (*) and Non-Friable Procedure   Non-Exempted (*) and Non-Exempted (*															
Scope of Work (Check All That Apply)  □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf  □ Demolition  □ Description of Asbestos-Containing Material (ACM) Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and		ed Odiside of North	iai i aciiity	rioui	•										
≥3 sf or ≥3 lf	Scope of Work (Check Al	Il That Apply)						vvan	ington, 140 c	31001					
Demolition		o	X R	enova	ition			×	Full Contai	inment wit	h Negative	Press	ire		
Non-Exempted (*) and Non-Friable Procedure   Location of Asbestos-Containing Material (ACM)   Location Normally Used Solely by Maintenance/ Custodial Staff? (12)   Yes No N/A   N/A     Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   SF or LF)   Repute   Re	[1] ************************************		-						Mini-Enclo	sure		1 1033	u10		
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Yes No N/A  Doiler room  * pipe insulation  * duct/tank insulation  Name of Registered Waste Hauler Newark Carting Inc.    NJDEP Waste Hauler ID No. 05409   Disposal Date No. 05409   Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)    Abatement Type   Abatement Type   Remove In Internal Systems insulation   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)    Amount (Specify SF or LF)   Remove Internal Systems insulation   Registered Landfill Gost Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill GCSL   Remove Internal Systems insulation   Registered Landfill   Remove Internal Systems insulation   Re												able Pr	ocedu	e e	
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)    Vest   No   N/A			Is	Locat	ion										t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A    Name of Registered Waste Hauler   Newark Carting Inc.   Name of Registered Waste Hauler   Newark Carting Inc.   Name of Registered Waste Hauler   Newark, NJ   Name of Registered by   Title   Signature   Date     Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Asbestos Containing Material (ACM) (i.e. thermal systems insulation (i.e. thermal systems insulation (i.e. thermal systems insulation (i.e. thermal systems insulation (i.e. thermal systems insulation	Location	of	N	lorma	ly		Des	scription	of			_	T	уре	
boiler room							tos Cont	aining M	laterial (ACM)		(3) (1) (2)	_		四	m
boiler room			Cust		Staff?	(I.e.						Rem	Rep	icap	nclo
boiler room	(13)			(12)			other n	niscellan	eous)			oval	ar.	sula	sure
Name of Registered Waste Hauler Newark Carting Inc.  City, State Newark, NJ  Completed by  Title  * duct/tank insulation  * duct/tank insulation  * duct/tank insulation  * Disposal Date O8/31/16  Signature  * Disposal Date O8/31/16  Pen Argyl, PA  Date			Yes	No	N/A	,								te	w.
Name of Registered Waste Hauler Newark Carting Inc.  City, State Newark, NJ  Completed by  NJDEP Waste Hauler ID No. 05409  Disposal Date 08/31/16  Pen Argyl, PA  Date	boiler ro	boiler room					pipe	insula	tion		140 lf.	*			
Newark Carting Inc.    Hauler ID No.	boiler ro	*		(	duct/tai	nk insu	lation	;	326sf.	*					
Newark Carting Inc.    Hauler ID No.															
Newark Carting Inc.    Hauler ID No.	Name of Desisters 4187	to Unular			IDED W	aatc	C. 1.	Varde	N1	of Darin	0404 I 17	=11			
City, State Newark, NJ  Completed by  Disposal Date O8/31/16 Pen Argyl, PA  Date		te nauter		1 8							ered Landi	III			
Newark, NJ  Completed by  Title  O8/31/16  Pen Argyl, PA  Date											- 11-28/2° 11				
Completed by Title Signature Date							0.5								
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	Leslaw Nalodka		100000	dent			S	ignature	1/	6			16		

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The state of the s	State of New Jersey NOTIFICATION OF ASSESTED ABATEMENT (Pursued to NJAC 8:69 as6 12:120)
- 8-12-14	E Direction of the Control of the Co
remain Notice 1 Transfer	Amenican Denvillion Cop
	2 Fair let 1. ASBESTOS DONTES
	Gara Haraban L.
	Name of Conjects V
None of Lection Williams Abstraction Telegree 13	
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i - Committee and	Summer of Suffers 1 200, Age
Dean Charles	County Come (7) (STATE Committee (Anni II being committee)
(a) Speci Address	ASSEMBLE PROPERTY OF THE PROPE
Cay, Spain, And Carle	Street Address
Project Weneger for Woodbang Force	Con See Decor No
	DUMCANJONS  Claiming No.  356 Set CS71 Comme No.
8-22-16	Date (ft)   Name of OSHA Marris
Li Feddin (Crossin in the Control of	
EL Cha-Bender	Oir, See. 20 Code
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Date of Notification (1) 8-8-2016			Name of Jorge 1	Building ( Nunez	Owner/Ope	erator	(2)	ME	CEI	M	E	F		
Agencies Notified Type Notificati	on	200	Street Ac					出产		l had		+		-
☐ EPA 🗵 Initial									105	20		ij,	]]]	
DEP Amended  X DOL Amendment				te, Zip Cod IJ 07644				111	- Najiriy			-	1	
× Emergen	cy (including			Contact					Telephone	e:Num	ber	0	+	
DOH justification Cancellat			Jorge 1	Vunez			27	ASB	LUCENS			CX.		
Name of Facility Where Abatement is Ta	king Place (3)		FACIL	LITY INFO	RMATIO	N	Type	of Facility (4						
Residential	King i lace (5)						_	School (K-12						
Street Address							П	Subchapter 8	(Other than			•		
9								etc.)	ivate & comr					s,
City (5) Lodi, NJ 07644							Squa 2232	re Feet	# of Floor:	S		dg. A )5+	ge	
County (6)		1	County C	Code (7)				Arrest and the same	r if being der	nolish				
Bergen				JSE ONLY)				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -						
Name of Monitoring Firm Hired by Buildin	ng Owner (8)		ASCM	No.				tement Cont	ractor (9) al Services		_			
Street Address							Addre		al Selvice:	S, LL\				
0.100171041000								ia Avenue						
City, State, Zip Code	= W							ip Code	0.4					
Project Manager for Monitoring Firm		- 1 -	Telephor	na Na			none N	y, NJ 073		nse No				
Project Manager for Monitoring Pinni			releprior	ie ivo.			333-8		011					
Start Date (10)	Schedule		pletion (	Date (11)		Name	of OS	HA Monitor						
8-9-2016	8-9-201	00000						above						
Occupancy Status During Abatement (C						Street	Addre	SS						
Facility Closed/Vacated During Ent Abatement Performed Outside of N					-	City, S	State, Z	ip Code		-				
Other – Describe:					-									
Scope of Work (Check All That Apply)						_	7							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoliti				>		Il Containme ni-Enclosure	nt with Nega	ative P	ressui	e		
						>		ovebag Proc	edure (*) and Non	-Friabl	e Pro	cedur	e	
	Is	Locati	on					III EXCITIPATO	( / 4/10 / 10/1	· nab		Abate	ement	
Location of	Line	lormali				cription						1 9	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED	Mai	ntenar odial S	nce/		tos Conta thermal s	ystem	s insul		Amount (Specify	y	Re	R	Enca	Enc
In Facility (13)	Odst	(12)	nan:		surfaci other mi				SF or LF	=)	Remova	Repair	Encapsulate	Enclosure
18328	Yes	No	N/A								<u>a</u>		ate	re .
Roof		Χ			roof	mate	rial		300 SF	=	X			
Basement		Χ			Flue	pack	king		4 SF		Х			
										alli, se "S				
Name of Registered Waste Hauler		1 100000	JDEP V		Cubic Y			Name of I	Registered L	andfill	1			
Green Environmental Services, I	LC	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	lauler ID 034889		of Wast	ie		G.r.o.w.	s North Ia	ndfill				
City, State					Disposa		9	City, State		_				
Jersey City, NJ Completed by	Title				8-9-20	)16 gnatůr		Morrisv	IIIe, PA	Da	to			
Liliana Serrano		e Mar	nager		3			un le	· exer		8-20	16		

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Date of Notification (1) 08-12-2016					uilding Ow nd Count	ner/Operat ry Club	tor (2)	ME	C E			7		
	pe Notification		1100	treet Add 6 West	ress Midland	Ave		IKI	-					
EPA DEP DOL	Initial Amended Amendment #_				, Zip Code s NJ 076				.03	7 2010		2		
Ď DOH ☐ DCA ☐	Emergency (inc justification) Cancellation	cluding	1,010,0	lame of C John He				ASBE	5	ephone Nun	nber 5			
		21 (2)		FACILI	TY INFOR	MATION		ype of Facility (	4)			-		_
Name of Facility Where Abar Country Club	tement is Taking F	Place (3)					Į.	School (K-1	12)					
Street Address 96 West Midland Ave								Subchapter Other (i.e. )				ngs, i	nomes	٤,
City (5)							- 5	etc.) Square Feet	# 0	Floors	Blo	dg. Ag	e	
Paramus							2	20000	2		60	)+		
County (6) Bergen				County Co STATE US	ode (7) SE ONLY)			Current Use (Pr	or if bei	ng demolisi	hed)			
Name of Monitoring Firm Hir	red by Building Ov	wner (8)		ASCM	No.			Abatement Co Environmer						
Street Address								ddress rginia Ave						
City, State, Zip Code								te, Zip Code / City NJ						
Project Manager for Monitor	ring Firm		1	Telephon	e No.	Te	lepho	ne No. 33-8855		License N	No.			
Start Date (10) 08-13-2016		Scheduled		npletion D	ate (11)			f OSHA Monitor						
Occupancy Status During A								ddress	New York					
Facility Closed/Vacate     Abatement Performed     Other – Describe:	d During Entire Pe	eriod of At	atem	nent		Cir	ty, Sta	ate, Zip Code						
Scope of Work (Check All T	hat Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				×	Full Containr Mini-Enclosu Glovebag Pr	ire ocedure				a	
				T		100000000000000000000000000000000000000		Non-Exempt	ed ( ) a	na Non-Fila	IDIE PIO		ement	
	£	4000000	Locat ormal	100000000000000000000000000000000000000		Descri	ntion	of				Т	ре	
Location o Asbestos-Containing M TO BE ABAT In Facility (13)	ateriai (ACM) ED	Mair	(12)	nce/ Staff?		os Containi	ing M stems g, VA	aterial (ACM) insulation, Γ, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A					-	251.5	-			+-
Basemer	nt		Х	1		Pipe In	isula'	tion		35LF	X	-		-
Name of Registered Waste Green Env Services	e Hauler		1	NJDEP W Hauler ID 0034889	No.	Cubic Ya of Waste 1		110		stered Land North La				
City, State Jersey City NJ 07304				,50 1000		Disposal 08-13-2		City, S Morri	tate sville f	P.A ,			-	
Completed by Liliana Serrano	T.	Title Office	e Ma	nager			nature			$/\top$	Date 08-12-	-201	<del></del>	

nk sas	Y o	N		CATION	ate of New Jers OF ASBESTO to NJAC 8:60 a	SABATI		NT						
Date of Notification (1)	XU		1	Name of	Building Owne	r/Operato	or (2)		E	GE		E	5	7
08/12/2016					ppe and Sus			1111			<u> </u>	-		
Agencies Notified Type	Notification		3	Street A	ddress				1	UG 17	2016	1		
X EPA X	Initial			City Sta	te, Zip Code			14 4		00 1 7	2016			-
X DOL	Amended Amendment #_				rville, NJ 08	619			SPEC	TOSCO				
	Emergency (in justification)	cluding			Contact				Tel	ephone Nu	mber	)L &		
	Cancellation				ppe Formica									
Name of Facility Where Abater	nent is Taking	Place (3	()	FACI	LITY INFORMA	ATION	Ty	ype of Facility	(4)					
,	3	*	f.				Г	School (K-						
Street Address								Subchapte	r 8 (Oth	er than K-1	2)	linas	home	25
							×	etc.)						,,,
City (5) Mercerville								quare Feet	# of	Floors	7.00	ldg. A 17	ge	
County (6)				County (	Code (7)		1 8	urrent Use (Pr		na demolis	-			
Mercer					JSE ONLY)			Residence						
Name of Monitoring Firm Hired	by Building Ov	wner (8)		ASCN	l No.	100000000000000000000000000000000000000		Abatement Co Contracting		(9)				
Bio-Terra Solutions Street Address							A-109201-0	dress	J, IIIC.					
1130 West Chestnut Str	reet							Clifton Aven	ue, Un	it 365				
City, State, Zip Code Union, NJ 07083								e, Zip Code , NJ 07012						
Project Manager for Monitoring	Firm			Telepho		F 90000	0.50	e No.		License N				
Rick Eustaquio	1	D = l= = = d= : l =			494-3762	2000000	W. 10.0	0-9500 OSHA Monitor		001036				
Start Date (10) 08/25/2016	1	08/25/		pieuon	Date (11)			Contracting						
Occupancy Status During Abat	tement (Check	Only Or	ne)			Stre	et Ad	dress		20 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3				
Facility Closed/Vacated D	uring Entire Pe	eriod of A	Abatem	ent				Clifton Aven	ue, Un	it 365				
Abatement Performed Outline - Describe:	itside of Norma	I Facility	/ Hours			77.00		e, Zip Code , NJ 07012						
Scope of Work (Check All That	t Apply)						_							
≥3 sf or ≥3 lf		-	Renova				×	Full Containm		Negative	Pressu	re		
≥160 sf or ≥260 lf			Demoliti	on				Mini-Enclosus Glovebag Pro	ocedure					
		1			l		×	Non-Exempte	ed (*) an	d Non-Fria	ble Pro	Accessor 1	e ement	
Location of		1000	Locati Normall			Descripti	on of						ре	
Asbestos-Containing Mater	2.2 SD324 CHORN-SA 1925 CH		ed Sole		Asbestos C	ontaining	Mat	erial (ACM)	1	mount	_		T.	т
TO BE ABATED In Facility		4.500	todial S		(i.e. therr	nal syste irfacing, \				Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)			(12)		othe	er miscel	laneo	ous)			oval	air	sulat	sure
		Yes	No	N/A									0	
Basement				X	Vir	nyl Floo	r Til	es	4	60 SF	X			
		į.												
	*													
Name of Registered Waste Ha	uler		605	JDEP W auler ID		bic Yards Waste	5			ered Landfi		م والإزار	C	
Atlantic Carting			N	J641	30					al Sanita	ary Lai	IUIIII	Cor	J.
City, State Wayne, NJ					Dis	sposal Da BD	ite	City, Sta	<sub>ite</sub> .rgyl, P	Α				
Completed by		Title				Signati	ure A		2.	D	ate			100000000000000000000000000000000000000
Milena Zoric		Exec	cutive	Direct	or		V	MAC	1	) (	08/12/	2016	5	

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

Date of Notification	1 (1)		Name of Build	ling	Owner/Operator	(2)					
8/12/2016					AMPTON		<del> </del>	1.1			
Agencies Notified	Type Notific	ation	Street Addres		AMPICA	AFZCIA	16275				
[ ]EPA	[X]Initial	Charles a Review Ch								_	
[ ]DEP	Notific	ation	City, State,	7in	Codo		AEC	<u>[</u>	$\mathbb{W}$	E	5
[X] DOL	[ ]Amended		Matawan,							-7	
[X] DOH	Notific	ation			,					1	
[ ]DCA	[ ]EMERGENO	Y	Name of Conta			Telepho	ne Number	3 1 7	2016	1	U
1,000	[ ]Cancella	tion	at. Merric				1				
				TY I	NFORMATION		ASBEST	OS CO	NTRU	) L 8	ý.
Name of Facility Whe	ere Abatement	is Tak:	ing Place (3)			Type of Faci					
Same as above						[ ]School					
Street Addres						[ ]Subcha	pter 8 (Oth	er than	K-12	2)	
							(i.e., priv buildings,				
						Square Feet	# of Flo		ldg.		
City (5		County	+ h		nty Code (7) ATE USE ONLY)	7500	2		65		
		mornic	, den	(SI	ATE USE ONLY)	Current Use	(Prior if b	eing de	molis	hed	l)
Name of Monitoring F	irm hirod be-	Davil die	- 2004								
Owner (8)	TIM HILLER DY	BULLULI	ASCM No.		Name of Abatem	ent Contracto ANAGEMENT					
N/A Street Address							, inc.				
					Street Address	topher St					
City, State, Zip Cod	9						••				
					City, State, Z Montclai:		40				
Project Manager for	Monitoring Fi	ma	lephone Number				: BACA				
	monit corring Fi	San are I Market	/A		(973) 744			License		er	
Scheduled Start Date	(10) Saha	1.	letion Date (1					0037	ΑΤ.		
8-26-16		29-1			Name of OSHA M	onitor					
Month Day Ye	ar Mo	nth	Day Vear		N/A						
Occupancy Status Dur [X] Facility Clos	ing Abatement ed/Vacated Di	(Check	only one)		Street Address						
of Abatement	es .										
[ ]Abatement Per Hours - Descr	Tormed Outsic ibe:«OffHours	le of No Descri	ormal Facility		City, State, Z	ip Code					
[ ]other - Descr	ibe: «Other Oc	cupancy	Descript»								
Scope of Work (Check	all that app	ly)							2.401.102.22		
[X]>3 sf or	>3 lf	г	X]Renovation		[ ]Full C	ontainment wi	th Negative	e Press	ure		
[ ]≥160 sf o			Demolition		[X]Mini-E []Gloveba	nclosure g Procedure					
		1	Is			iable Procedu	re				
Location			ocation formally		Description	of		Aba	temen	E	Type E
Asbestos-Cont Material (			Used Solely		Asbestos-Conta	aining	Amount	R	R	NC	N
TO BE ARA	TED	B	y Main-		Material (A (i.e., thermal		(Specify	M O	E	A	L
In Facili	ty	Ct	enance/ ustodial aff (12)	ins	ulation, surfac	cing, VAT,	LF)	V	E P A I	PSU	0 8
20 100 100 100 100 100 100 100 100 100 1		Yes	No N/A	0	r other miscell	Laneous)		Ī	R	T	U R
Bldg 2,basemen			X E	Pipe	e insulati	.on	220	X		-	E
Bldg 11 baseme	nt 22				e insulati		220	X			
									-	-	
Name of Registered Wa			DEP Waste	22/2022	ic Yards	Name of Regi	stered Land	Lfill			
AZTECH MANAGE	MENT, IN	]. Ha	TO No.	of T	Waste 2.0	Minerva			INC		
City, State	VEC 120 (10 (10 (10 (10 (10 (10 (10 (10 (10 (1			Disp	posal Date	City, State					
Montclair, NJ	07042			8-	-30-16	Waynesb	urg, Oh	io 44	688		
Completed By (Print o	r Type) Tit	9			104-	1 /	1/				
Constantine Vi		 eside	nt		Signature	1	1/	Date 8/12/	2015		5-16-6
					100	Muyu	ifficia.	0/12/	2010		
					1		6 1				

Check # 13115

Date of Notification (1)			_	-1	Name	of Building	Own	er/Operator (2	2)	11801	1	- 1	91	10
8 /	12 /	16							an Renewal LP					
							000	TVGCIOII OID	an recirewal El	RAV				-
Agencies Notified  EPA	Type Notifica	tion				Address			رايا ا	17 35 1		7	2	111
⊠ DOLWD	Amended					Broadwa	-							16
☑ DOH	Amendme	nt#				tate, Zip C				AUG	1 7 20	16	111	
☐ DCA	☐ Emergend		ling			/ York, N		013				10	1/1/24	
(NJAC 5:23-8)	justificatio					of Contact				Telephone No	umber			
	☐ Cancellati	on			Jod	y Arena			-		111	6.4.	91	
					FAC	CILITY IN	FOR	MATION	State Mellin		NSMI			-
Name of Facility Where	Abatement is T	aking Pla	ace (	(3)					Type of Facility (	4)				
Colt Arms Apartme	ents								School (K-12		40\			
Street Address									☐ Sulchapter 8 ☐ Other (i.e., pr			uildin	as.	
52 Goodwin Street									homes, etc.)				J-1	
City (5)									Square Feet	# of Floors	E	ldg. A	ge	
Patterson, NJ									200,000	14		41		
County (6)					Coun	ty Code (7)	(STA	TE USE ONLY)	Current Use (Pri	or if being dem	olished)			
Passaic									apartments					
Name of Monitoring Firm	Hired by Build	ing Own	er (8	3) /	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)					
EHS Environmenta	al Inc						Р	lymouth En	vironmental Co	o., Inc.				
Street Address	*						Stre	et Address		50				
411 Southgate Cou	ırt						92	23 Haws Av	enue					
City, State, Zip Code							City	, State, Zip Co	ode					
Mickleton, NJ 0805	56						N	orristown, I	PA 19401					
Project Manager for Mor	nitoring Firm			Tele	phone	No.	Tele	ephone No.	2 (4) (4) (4) (4) (4) (4) (4) (4) (4) (4)	License No.	•			
Jack Carney				85	6-224	-0080	6	10-239-9920	)	00398				
Start Date (10)	S	chedule	d Co	mplet	tion Da	te (11)	Nan	ne of OSHA N	Monitor				11.00	
8 / 29 /	989	9			/	150	Е	HS Environ	mental Inc					
Occupancy Status Durin	a Abatement (C	Check on	lv or	ne)			Stre	et Address						
☐ Facility Closed/Vacat					nent			11 Southga	te Court					
☐ Abatement Performe						cribe		, State, Zip Co						
Time of Abatement:								lickleton, N.						
Scope of Work (Check a	II that annly)		_				141	ilokictori, re	3 00000					
	iii tilat apply)								tainment with Neg	ative Pressure	<b>:</b>			
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>				novatio				Mini-End						
☑ ≥ 160 St of ≥260 If		M	Den	nolitio	n			☐ Non-Exe	g Procedure mpted (*) and No	n-Friable Proce	edure			
			ls l	Locat	ion				( /			baten	nent T	Type
Location	n of			ormal				Description of	of		= 27.0	T	T	1
Asbestos-Containing		1		d Sole ntena				Containing Ma		Amount	em	Repair	nca	nclo
TO BE AB		1 1		odial S	Staff?	(i.e		rmal systems urfacing, VAT		(Specify SF or LF)	Remova	≒	Encapsulate	Enclosure
(13)			-	(12)	T	-		ner miscellane					late	.e
		Y	es	No	N/A								750	
trash room		$\boxtimes$				spray-o	n ce	iling insula	tion	924SF				
enerator room						spray-o	n ce	iling insula	tion	532SF				
pump room			1			spray-o	n ce	iling insula	tion	240SF				
			]											
Name of Registered Wa	ste Hauler			N	JDEP V	Vaste	Cub	oic Yards of	Name of Regis	tered Landfill				
Newark Carting				Н	auler II 4509	O No.	Was	0	GROWS					
City, State	Rithmillion Co.						Disp	posal Date	City, State					
Newark, NJ							9,	/30/16	Morrisville	, PA				
Completed By (Print or 1	Гуре)	Title	-					Signature	/		Date _	1	j.	
James Kelly		Vice	Pre	eside	ent						8	11/	16	,

Date of Notification (1) 08/11/2016					Building ( County								  -	- (		
Agencies Notified	Type Notification			Street Ad	ddress orth Chu	ırch Ro	ad					1117	or that have been	TE STATE OF THE ST	T	
EPA DEP DOL	Initial Amended Amendment		_	City, Sta Sparta	te, Zip Co , NJ	de				AUG	1.7	2016			J.	
▼ DOH DCA	Emergency ( justification) Cancellation	including		Name of Rob G					1.5	Tele	ephone N	Numb	er			
V 55 W VA		D: (0)		FACII	LITY INFO	RMATI	ON	-			Alleria - Alleria					
Name of Facility Where Greenhouse - Suss Street Address		***						X S	of Facility (4 School (K-12 Subchapter	2)	er than K	-12)				
105 North Church F	Road								Other (i.e. pr etc.)	rivate 8	& comme					es,
City (5) Sparta								Squar	re Feet	# of	Floors		В	ldg. A	ge	
County (6) Sussex				County (	Code (7) ISE ONLY)		_	Curre	nt Use (Prio	r if bei	ng demo	lishe	d)			
Name of Monitoring Firm Karl & Associates	Hired by Building (	Owner (8)	-	ASCM	l No.				tement Con ucion Cor							
Street Address 20 Launch Road								Addres	ss ung Avent	ıe						
City, State, Zip Code Mohnton PA 19540	)						City, S	State, Zi	ip Code nge, NJ 0							
Project Manager for Mor Michael Krischer	nitoring Firm			Telephor	ne No. 66-7700		Teleph	hone No 669-2	0.		License 01231		<del></del>			
Start Date (10) 08/25/2016		Schedule 09/09/2		mpletion I	Date (11)				HA Monitor Laborato	ries (	Slobal I	nc.				
Occupancy Status Durin	g Abatement (Chec	k Only One	e)					Addres	ss ary Street			W/52 - WY				
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire I ned Outside of Norn Greenhouse vacated	nal Facility	Hour	S			City, S	State, Zi	ip Code							
Scope of Work (Check A							Rich	mond	VA 2322	<u> </u>					_	
≥3 sf or ≥3 lf  x ≥160 sf or ≥260 lf	ш гистърну)	-	enova emoli				×	Mir Glo	l Containme ni-Enclosure ovebag Proc n-Exempted	edure					e	
		ls l	Locat	tion						1/				Abate	ement	
Location			orma	lly ely by			scription					-		1 y	ре	
Asbestos-Containing TO BE AB In Faci (13)	ATED lity	Mair Custo	ntena odial (12)	ince/ Staff?				s insula AT, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
0 1		Yes	No	N/A				< 100 Telephone			1001 5	_				
Greenho	ouse	-	X				aulkin	g		3,4	400LF		X			
										19-04-5-0-6-6						
Name of Registered Wa			25%	NJDEP W Hauler ID		Cubic of Wa	Yards		Name of F	100		dfill				
	e Construction Corporation								Tullytow		cility		i i			
City, State West Orange NJ							sal Date		City, State Tullytow							
Completed by Barbara Reed		Title Presid	dent			5	Signature	la	a He	ed	2	Date 08/		016		

Cleck 15476

Date of Notification (1) 8/10/16				f Building Ow ranklin	vner/Operator	(2)	- All		( )		10	
Agencies Notified  Type Notified  Agencies Notified  Type Notified  American America	I			ddress ate, Zip Code / City, NJ			1744	DE	G	11.11.		
■ Emer     justifit	rgency (including ication) cellation		Name o	f Contact ranklin	07000			elenhone	KINHA. 20.	17	201	6
Name of Facility Where Abatement i house  Street Address	is Taking Place (3	)	FACI	LITY INFOR	MATION	Sub	ool (K-12) chapter 8 (O er (i.e. private	ther than I	K-12)	-14211	VG	and the second
City (5) Jersey City						Square F 2100	eet #			Bldg.	Age	
County (6) Hudson			(STATE	Code (7) USE ONLY)			Ise (Prior if b		olished)			
Name of Monitoring Firm Hired by B	uilding Owner (8)		ASCN	A No.	ABS	Environr	ent Contract mental Se		.LC			
City, State, Zip Code					PO E	Address Box 483, State, Zip C	4 E Gate	Drive				
Project Manager for Monitoring Firm			Telepho	ne No	Glen	wood, None No.						
Start Date (10)				Date (11)	973-	764-2276	202	703	e IVO.			
8/19/16 Occupancy Status During Abatemen	9/30/16	6				Address	normor					
Facility Closed/Vacated During Abatement Performed Outside Other – Describe: basement	Entire Period of A	batem	ent			State, Zip C	ode		2 			
Scope of Work (Check All That Apply ≥3 sf or ≥3 If ≥160 sf or ≥260 If	R	enova emoliti			×	Mini-Er Gloveb	ntainment winclosure ag Procedure empted (*) a	e			ле	
Location of	_ N	Locati Iormall d Solel	у		Description						temen ype	t
Asbestos-Containing Material (ACTO BE ABATED In Facility (13)	Mai Cust	ntenar odial S (12)	ice/ staff?	(i.e. the	Containing Mermal systems surfacing, VA ther miscellar	s insulation T, or	, '	Amount (Specify SF or LF)	Kemovai	Repair	Encapsulate	Enclosure
basement	Yes	No	N/A X		pipe insula	tion		50 LF	x		1	
Name of Registered Waste Hauler		l Kr	JDEP W	lasta C	Public Vocale		me of D	toro-11	JEP -			
Freehold Cartage		H	auler ID 1959	No. o	Cubic Yards of Waste BD	7900.00	ame of Regis estern Be					
City, State Freehold, NJ					Disposal Date BD	0.500550	ty, State rdsboro, F	PA				
Completed by A. Scott Higgins	Title Presid	dent			Signature	1/1	_		Date 8/10/	16		

use this form for asbest or ligensum exempted activities.

DO NOT

Date at Notification (1)		HOT	(Lnumna	on of a int to NJi	New Jers SEESTOS AC 8150 MI	ABATE 04 12:12	(0)	HT		PANGO		201		Print
8/11/2016			Corr	al Buildi	ng Owner	Operato	(2)	LIC	T	4: I	47	201	6/	111
Agencies Notifice Type Notificetic	en		Stree	l Address Crystal				1	AS	DES IUS	SCO	NA	OL 8	1
EPA Initial Amended Amended Emergance	andres.		City.	State, Zip land, N	Code J 08360			- COM	CAPP CONTRACTOR	t	1491		•	e
DOH hatification Canoallate	m)			of Conta					70	lephona N	timba	,		1714
Name of Facility Where Abatement is Tai	ung Place	(3)			FORMAT	IOH	7							
Coming Pharmaceutical Glass, L.	LC Bld	. 42	Print Si	hop				pa of Facility School (K				-		
583 Crystal Avenue							E E	Subchaple Other (I.e.	IT & /Oth	er than K-	12) ciel bu	ıliding	a, her	1186,
City (6) Vineland		3, 4		- Control of the Cont				usro Feet	2.5	Floore		810g. 65	Age	
County (8) Cumberland			Count	y Code (7 5 USE ONE	ln		Cui	ment Use (Pr	for W bel					
Name of Mentering Firm Hines by Building EHS Environmental, Inc.	g Owner (	8)	ASC	M No.		Name	0 A	batement Co	ritacion	(9) ervices	Inc	-	-	
Street Address 411 Southgate Court						Bireel	Add		THE C	31 41000	ing,	_	-	_
City, State, Zip Code Mickelton, NJ 08056						Cily, S	tala.	Zip Code Ville, PA 19	JAED.					
Project Manager for Monitoring Firm Jack Carney			Taleph 856 2	ans No.	0	Teleph 610 9	ens	No.	3460	License I	Na.		_	
Start Date (10) 8/12/2016	8/15/2	2016		Dala (11		Nams	0108	BITA Monitor		00836		_	_	
Decupancy Status During Absternant (Che					$\dashv$	Street	Addr		rai se	Prvides,	inc.			-
Facility Cloned/Vacated During Enlire Abstement Performed Dutaids of Nor Other = Describs:	Period of mail Fecili	Abates ly Hou	ment s		-	City, St	ata,	Road Zip Code			_			
Scope of Work (Check All That Apply)						Phoe	nixv	ille, PA 18	460					
23 of or 23 if 2160 of or 2260 if	×	Renovi Damoli				N N	G	in Containmi in Enclosum lovebag Proc	edure			189		
	100	e Locat				-	141	DINEXEMPIAC	(-) and	Non-Friel	No Pro	Abab	emen	ī
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility	Ug	Norma ed Sole eintena elodiai	hy by	Asba (I.s	etos Conta Libermal :	Strelay	inasi	al (AOM)	(\$0	nount pacify	20		De La	g,
(13)	Yes	(12) No	l N/A			ng, VAT acellane			SF	or LF)	Removal	Repair	Encappulate	Enclosure
Batch House Roof			X		Trans	te Pan	els		140	SF	Х			
	+		-		_									
ame of Registered Wasta Hauter							_				-			-
& H Disposal Services, Inc.		H	JDEP W auler ID 303		of Wask	)		Name of R				A1.1	—— l	$\neg$
ly. State mer, NJ					Dispose 8/2016	Date		City, Slate			ون احر،	, Aut	11.	-
impleted by frick Larney	Title Proje	ot Ma	nager		-	Billes		Milville,	NJ	Dei	ia 1/20	-		$\dashv$

\* On not use this form for asbestos licensure exempted activities.

Date of Notification (1) 8/11/2016		Building Owner/ g Pharmaceu			AUG 1	/ 20	16		4				
Agencies Notified Type Notification  EPA Initial		ystal Ave.		Lyer 240	ABBESTOS O LIDENS	ONT:	ici.		-				
DEP Amended  X DOL Amendment #	5.000 P	te, Zip Code nd, NJ 08360						er section					
	Name of Robert	Contact LaMastro			Telephone Nur	mher		}					
	FACIL	ITY INFORMAT											
Name of Facility Where Abatement is Taking Place (3) Corning Pharmaceutical Glass, LLC Bldg. 42 I	Print Sho	р		Type of Facility ( School (K-1	2)								
Street Address 563 Crystal Avenue					8 (Other than K-1) private & commerci		dings,	home	es,				
City (5) Vineland				Square Feet 1,800	# of Floors 2-5 Tower		ildg. A	ge					
County (6) Cumberland	County C	Code (7) ISE ONLY)		Current Use (Pri- Manufacturin	or if being demolish	ned)							
Name of Monitoring Firm Hired by Building Owner (8) EHS Environmental, Inc.	ASCM	No.		Name of Abatement Contractor (9) Neuber Environmental Services, Inc.									
Street Address 411 Southgate Court				Address dge Road									
City, State, Zip Code Mickelton, NJ 08056			1000000	ate, Zip Code nixville, PA 19	3460								
Project Manager for Monitoring Firm Jack Carney	Telephor 856 22		V-2-0 8 0-2-0	one No. 33-4332	License N 00836	lo.							
Start Date (10) Scheduled C 8/12/2016 8/15/2016		Date (11)	(0.50 May 200	of OSHA Monitor er Environme	ntal Services, I	nc.							
Occupancy Status During Abatement (Check Only One)		The second secon	Street A	Address									
Facility Closed/Vacated During Entire Period of Abate	ement		42 Ri	dge Road									
Abatement Performed Outside of Normal Facility Hou Other – Describe:				ate, Zip Code nixville, PA 19	9460								
Scope of Work (Check All That Apply)				·									
[Hanner - 1] - [Hann	vation		×	Mini-Enclosure Glovebag Pro				0					
				Non-Exemple	d ( ) and Non-i had	1	7233	ement					
Is Location of Norm	260000000000000000000000000000000000000	D	escription	o.f			Ту	ре					
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Location of Used So Mainter Custodia	nance/ al Staff?	Asbestos Cor (i.e. therma surf	ntaining M	aterial (ACM) insulation, Γ, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure				
Yes N	o N/A							te	· · ·				
Batch House Roof	Х	Trar	nsite Par	nels	140 SF	X							
	NIE		- Va	N1.	Decision of the 15								
Name of Registered Waste Hauler C & H Disposal Services, Inc.	NJDEP W Hauler ID 7903	No. of W	c Yards aste Cu. Yds.	Cumbo	Registered Landfilerland County In		v. Au	th.					
City, State Elmer, NJ		Dispo 8/20	osal Date	City, Stat Millville									
Completed by Title Patrick Larney Project N		Signature	1	10	ate		-	-					

Date of Notification (1)		1	Name of	Building (	Owner/O	perator	(2)	)) <u> </u>		1 1/	P	-	- J	
8/11/2016				g Pharm				-9		U W	15	In		
Agencies Notified Type Notification		11 83	Street A 563 Cr	<sup>ddress</sup> ystal Av	e.		101	] AU	G 1 7	2016		111	*Description of the Control of the C	
DEP Amended Amendment				te, Zip Co nd, NJ 0				ASBEST			The state of the s			
DOH justification)  DCA Cancellation	nciuaing	1 6		Contact LaMast	tro		Lane -	LI(	Jelép	hone Nin	her	É	J	
			FACI	LITY INFO	RMATIC	NC			-		in an year or			
Name of Facility Where Abatement is Taking Corning Pharmaceutical Glass, LLC			nt Sho	p			☐ s	of Facility (4) chool (K-12)	)					
Street Address 563 Crystal Avenue							X O	ubchapter 8 ther (i.e. pri tc.)				dings,	home	es,
City (5) Vineland					0		Square 1,800		# of F 2-5 T	loors Tower	8 6	ldg. A 5	ge	
County (6) Cumberland				Code (7) USE ONLY)				nt Use (Prior Ifacturing	if being	demolish	ed)			
Name of Monitoring Firm Hired by Building C EHS Environmental, Inc.	wner (8)		ASCN	No.				ement Contr vironment			ıc.			
Street Address 411 Southgate Court							Address lidge R							
City, State, Zip Code Mickelton, NJ 08056							State, Zip enixville	Code e, PA 194	60					
Project Manager for Monitoring Firm Jack Carney								332	378	icense No	).			
Start Date (10) 8/12/2016	d Com	pletion l	Date (11)				A Monitor vironment	al Ser	vices, Ir	iC.				
Occupancy Status During Abatement (Check	Only One	9)				Street	Address	S						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm			ent				lidge R		00000					
Other – Describe:	ai racility	nours			_		State, Zip enixvill	e, PA 194	60					
Scope of Work (Check All That Apply)		1000												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				×	Mini Glov	Containmer -Enclosure /ebag Proce	dure					
	le l	Locatio					1 Non	-Exempted	(*) and I	Non-Friab		Abate		
Location of	N	ormall	y		Des	cription	n of						ре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Mair	Solel ntenan odial S (12)	ce/		tos Conta thermal surfac other m	system cing, VA	s insulat T, or		(Spe	ount ecify or LF)	Remova	Repair	Encapsulate	Enclosure
* 6	No	N/A								<u>a</u>		late	re	
Batch House Roof			X		Trans	site Pa	anels		140	SF	X			
14														
Name of Registered Waste Hauler		N	JDEP W	laste	Oubic '	Yards		Name of R	enistere	d I andfill				
Neuber Environmental Services, Inc		Ha	auler ID 969		of Was			Cumberl	750		prov	. Au	th.	
City, State Phoenixville, PA						al Date		City, State Millville,	NJ					
Completed by	Title				Signature Date									
Patrick Larney	Projec	ct Ma	nager		_   _	XCC)	*	the	M	8/	11/20	16		

NOTIFICATION OF ASBESTOS ABATEMENT

Sylifon   Syli	Date of Notification	(1)	(Pursu	Name	of B	C 8:60	-7 and	12:120-7	)										
Agencies Notified  [ ] IPA [ [ ] IPA [ ] I [ ] Amendad [ ] IPA [ ] I [ ] Amendad [ ] I [ ] I [ ] Amendad [ ] I [ ] I [ ] I [ ] Amendad [ ] I [ ] I [ ] I [ ] Amendad [ ] I [ ] I [ ] I [ ] Amendad [ ] I [ ] I [ ] I [ ] Amendad [ ] I [ I [ ] I [ ] Amendad [ ] I [ I [ ] I [ ] Amendad [ ] I [ I [ ] I [ ] Amendad [ ] I [ I [ ] I [ ] Amendad [ ] I [ I [ ] I [	8/11/2016							r/operacor	(2)	NEC	BI	W	E	1					
I NEAD   (X) Institution   (I DEEP   Non-Augustion   (I DEEP   Non-Augustion   (I DEEP   Non-Augustion   (I DEEP   Non-Augustion   (I DEEP   (I DEEP   Non-Augustion   (I DEEP		Type Notificat	tion	Stre	et Ado	iress				1169	ا كا	L U							
[ ] Amandad Montclair, NJ, 07042    Montclair, NJ, 07042   Montclair, NJ, 07042   Montclair, NJ, 07042   Montclair, NJ, 07042   Montclair, NJ, 07042   Montclair, NJ, 07042   Montclair, NJ, 07042   Mass of Contact Ann Ashman   Felenhone Nomember 10   Montclair, NJ, 07042   Mass of Facility Where Abatement is Taking Place (3)   FACILITY INFORMATION   Type of Facility (4)   [	[ ]EPA								diameter and a	N									
EXIDOR  [XIDOR [	[ ]DEP	Notifica	tion	City	Stat	e Zir	Code			III AU	3 17	2016		14)					
Same of Contact   Ann Ashman   Relephone Number	[X] DOL			1		N=0 27			£ -	ed Inst									
Same of Facility Rhere Abatement is Taking Place (3)   Type of Facility (4)	[X] DOH	Notifica	tion				, = ,				502.00	MITDO	فسي						
PACILITY INFORMATION   Same of Facility Where Abstement is Taking Flace (3)   Page of Facility (4)   [1 School (R-12)   [1 Subchapter 8] (0 ther than K-12)   [2 Street Addres	587 15	[ ]EMERGENCY								one Nimher	103.00	";G	- 12						
Same as above  Street Address  Street Address  County (6) Essex  County Code (7)  STATE USE CMLX)  Name of Monitoring Firm hired by Suilding ASCM No.  Name of Monitoring Firm hired by Suilding ASCM No.  Name of Monitoring Firm hired by Suilding ASCM No.  Name of Monitoring Firm hired by Suilding ASCM No.  Name of Monitoring Firm hired by Suilding ASCM No.  Name of Abatement Contractor (9)  Name of Abatement Contractor (9)  AZTECH MANAGEMENT, Inc.  Street Address  Street Manager for Monitoring Firm Palephone Number N/A  Scheduled Start Date (10)	1 1201	[ ]Cancellat	ion	- Call	111 242	21MIIGT	.1		i i		-		HAST-TOTAL	#+artistensor					
Same as above  Street Address  Street Address  County (6) Essex  County Code (7)  STATE USE CMLX)  Name of Monitoring Firm hired by Suilding ASCM No.  Name of Monitoring Firm hired by Suilding ASCM No.  Name of Monitoring Firm hired by Suilding ASCM No.  Name of Monitoring Firm hired by Suilding ASCM No.  Name of Monitoring Firm hired by Suilding ASCM No.  Name of Abatement Contractor (9)  Name of Abatement Contractor (9)  AZTECH MANAGEMENT, Inc.  Street Address  Street Manager for Monitoring Firm Palephone Number N/A  Scheduled Start Date (10)					FAC	CILITY	INFOR	MATION											
Company Status During Abstement (Check only one)   Check one)   Check only one)   Check only one)   Check only one)   Check only one)   Check one)   C	Name of Facility Whe	re Abatement i	s Taki	ng Pl	ace (	3)			Type of Faci	lity (4)									
City (5   Dounty (6) Essex   County Code (7)   CSTATE USE ONLY)	same as above					0			[ ]School	(K-12)									
City (5   County (6)Essex   County Code (7)   Square Feet   of Floore Bldg. Age   91   Current Use (Frior if being demolished)   Current Use (Frior if being	Street Addres								[ ]Subcha	pter 8 (Oth	er tha	n K-12	)						
City (5   County (6) Essex   County Code (7)   Square Feet   8 of Floore   81 dg. Age   91									[X]Other cial	(i.e., priv buildings.	ate &	commer	-						
Name of Monitoring Firm hired by Building ASCM No.  Name of Monitoring Firm hired by Building ASCM No.  Name of Monitoring Firm hired by Building ASCM No.  Name of Abatement Contractor (9)  AZTECH MANAGEMENT, Inc.  Street Address  86 Christopher St.  City, State, Zip Code  Montclair, NJ 07042  Project Manager for Monitoring Firm Pelephone Number N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Date (11) N/A  Scheduled Start Date (10) Sched. Completion Scheduled Date (11) N/A  Scheduled Start Date (10) Sched. Completion Scheduled Date (11) N/A  Scheduled Start Date (10) Sched. Completion Scheduled Date (11) N/A  Scheduled Start Date (10) Sched. Completion Scheduled Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Scheduled Start Date (11) N/A  Sched	Ci to /E												0.00						
Name of Monitoring Firm hired by Building ASCM No.  Name of Abatement Contractor (9)  AZTECH MANAGEMENT, Inc.  Street Address  Street Address  86 Christopher St.  City, State, Sip Code  Montclair, NJ 07042  Project Manager for Monitoring Firm Palephone Number (11)  8/24/16  Month Day Year Monitoring Pirm Palephone Number (12)  8/24/16  Month Day Year Monitoring Pirm Palephone Number (13)  8/24/16  Month Day Year Monitoring Pirm Palephone Number (17)  8/24/16  Month Day Year Monitor No.  1 [ Abatement Parformed Outside of Normal Pacility Hours - Described During Entire Period of Abatement (12)  1 [ Abatement Parformed Outside of Normal Pacility Hours - Described Outside of Normal Pacility (1) Sed (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	CTC /2	C	ounty	(6) Es	sex				5600	1			-90						
AZTECH MANAGEMENT, Inc.  Street Address  Montclair, NJ 07042  Felsphone Number  (973) 744-8800  00371  Name of OSHA Monitor  N/A  NAM  Street Address  Montclair, NJ 07042  Felsphone Number  (973) 744-8800  Name of OSHA Monitor  N/A  Street Address  Street Address  Montclair, NJ 07042  Full Containent Paint Name of OSHA Monitor  N/A  Street Address  Montclair, NJ 07042  Street Address  Street Address  Felsphone Number  (973) 744-8800  Name of OSHA Monitor  N/A  Street Address  Street Address  Felsphone Number  N/A  NAM  Street Address  Montclair, NJ 07042  Street Address  Street Address  Street Address  Felsphone Number  N/A  NAM  Street Address  Montclair, NJ 07042  Street Address  Street Address  Felsphone Number  Relephone Numbe						(5	THIE C	ISE ONLY)	Current Use	(Prior if b	eing d	emolis	hed)	)					
AZTECH MANAGEMENT, Inc.  Street Address  Montclair, NJ 07042  Felsphone Number  (973) 744-8800  00371  Name of OSHA Monitor  N/A  NAM  Street Address  Montclair, NJ 07042  Felsphone Number  (973) 744-8800  Name of OSHA Monitor  N/A  Street Address  Street Address  Montclair, NJ 07042  Full Containent Paint Name of OSHA Monitor  N/A  Street Address  Montclair, NJ 07042  Street Address  Street Address  Felsphone Number  (973) 744-8800  Name of OSHA Monitor  N/A  Street Address  Street Address  Felsphone Number  N/A  NAM  Street Address  Montclair, NJ 07042  Street Address  Street Address  Street Address  Felsphone Number  N/A  NAM  Street Address  Montclair, NJ 07042  Street Address  Street Address  Felsphone Number  Relephone Numbe	Name of Monitoring F	irm hired by B	nildin	7 70	CM No.		The												
Street Address  Street Address  86 Christopher St.  City, State, Zip Code  Montclair, NJ 07042  Freephone Number N/A  Scheduled Start Date (10)  8/24/16  Month Day Year Occupancy Status During Abstement (Check only one)  [X] Facility Closed/Wacated During Entire Period  Of Abatement Performed Outside of Normal Facility  [John - Describe: coffRours Descripts  Scope of Work (Check all that apply)  Scope of Work (Check all that apply)  Location of Abstessors (1) Demolition  [X] Saf or 23 lf [X] Renovation [1] Demolition  [X] Street Address  Relephone Number (10)  Name of OSHA Monitor  N/A  Street Address  Relephone Number (10)  Name of OSHA Monitor  N/A  Street Address  License Number (10)  Name of OSHA Monitor  N/A  Street Address  Felephone Number (10)  Name of OSHA Monitor  N/A  Street Address  City, State, Zip Code  City, State  N/A  N/A  N/A  City, State, Zip Code  City, State  N/A  N/A  N/A  City, State, Zip Code  City, State  N/A  N/A  Absternal Andress  Absternal Andress  Absternal Andress  Secret Address  City, State  Waynesburg, Ohio 44688  City, State  Waynesburg, Ohio 44688  Completed By (Print or Type)  Completed By (Print or Type)  City Completed By (Print or Type)  City Completed By (Print or Type)  City Completed By (Print or Type)  City Completed By (Print or Type)  City Completed By (Print or Type)  City Completed By (Print or Type)  City Completed By (Print or Typ	Owner (8)		Ca Ca	9 83	CM NO.														
Scheduled Start Date (10)   Sched. Completion Date (11)   S/24/16   Month Day Year   N/A   Month Day Year   Statis During Abstement (Check only one)   (X) Facility Closed/Vacated During Entire Period of Abstement Performed Outside of Normal Facility Hours - Describe: coffsour Descripts   (X) Sched Completion Descripts   (X) Scheduled Start Date (10)   Sched. Completion Date (11)   Name of OSHA Monitor   N/A   N/A   N/A   North Day Year   (S) Facility Closed/Vacated During Entire Period of Abstement Performed Outside of Normal Facility Hours - Describe: coffsour Descripts   (X) Facility Closed/Vacated During Entire Period of Abstement Performed Outside of Normal Facility Hours - Describe: coffsour Descripts   (X) Score of Work (Check all that apply)   (X) Score of Work (Check all that ap										r, inc.									
City, State, Zip Code  Montclair, NJ 07042  Telephone Number N/A  Scheduled Start Date (10) Sched. Completion Date (11) 8/24/16  Month Day Year North Day Year  Occupancy Status During Abatement (Check caly one) (X)Facility Closed/Vacated During Shirte Period of Abatement (Check caly one) (X)Facility Closed/Vacated During Shirte Period of Abatement (Check caly one) (X)Facility Closed/Vacated During Shirte Period of Abatement During Shirte Period (Company Status During Shirte Period (Company Descripts)  Scope of Work (Check all that apply)  [X] So of >3 lf (X) Renovation (X) Period (X) Renovation (X)										_									
Project Manager for Monitoring Firm   Relephone Number   M/A   Monitoring Firm   Relephone Number   M/A   Monitoring Firm   Relephone Number   M/A   Monitoring Firm   Relephone Number   M/A   Monitoring Firm   Relephone Number   Monitoring Firm   Monitori	City, State, Zip Code	9							The state of the s										
Froject Manager for Monitoring Firm Felephone Number N/A										142									
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Social States   Social State		(10) Sched	Compl	etion	n Date	(11)					003	/							
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City   State	Month Day Ye Occupancy Status Duri	ar Mont	ch D	ay	Yea	r													
[ ]Abatement Performed Outside of Normal Facility Hours - Describe: <a href="https://docs.org/lines/color: 40ff8ours Descripts">(City, State, Zip Code</a> City, State, Zip Code  City, State  Completed By (Print or Type)  Constantine Vivian  City, State  Constantine Vivian  City, State  Constantine Vivian  City, State  City, Stat	[A] Facility Clos	ed/Vacated Dur	ing En	tire	Period	i	Stre	et Address											
Scope of Work (Check all that apply)   [ ]Full Containment with Negative Pressure   [ ]Mini-Enclosure	[ ]Abatement Per	formed Outside	of No	rmal	Facili	itv	24	0+-+- =											
Scope of Work (Check all that apply)  [X] >3 sf or >3 lf [X] Renovation [] Demolition [X] Scope of Work (Check all that apply)  [X] >3 sf or >3 lf [X] Renovation [] Demolition [X] Scope of Work (Check all that apply)  [X] >3 sf or >3 lf [X] Renovation [] Demolition [X] Scope of Work (Check all that apply)  [X] >3 sf or >3 lf [X] Renovation [] Demolition [X] Sclovebag Procedure [] Non-Friable Procedure  []	Hours - Descr	ibe: «OffHours	Descrit	nto		2	CILLY	, State, Z	ip Code										
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Second column   Continue   Cont		1 St. 12 Co.	7)					וויתו ו	'ontainment w	th Nametic	_								
Location of Asbestos-Containing Material (ACM) Used Solely By Main- tenance (Custodial Staff (12) Yes No N/A Pipe insulation Surgarden (AZM Solely Yes No N/A Pipe insulation								[ ]Mini-E	inclosure	ith Negative	Press	ure							
Location of Asbestos-Containing Material (ACM) Used Solely By Main- To BE ANATED tenance/ (13) Yes No N/A  Name of Registered Waste Hauler AZTECH MANAGEMENT, INC.  Name of Registered Waste Hauler Montclair, NJ 07042  Location Normally Used Asbestos-Containing Material (ACM) (Specify Mediator) (Spe	. 12200 02 01	2200 11	L	Demo	olitio	n				1770									
Asbestos-Containing Material (ACM) TO BE ANATED In Facility (13)  Furnace Room  Normally Used Solely By Main- tenance/ Custodial Staff (12) Yes No N/A  Name of Registered Waste Hauler AZTECH MANAGEMENT, INC.  Disposal Date Montclair, NJ 07042  Normally Used Asbestos-Containing Material (ACM) (Specify M E R N C	Location	of	Lo		on					Te	Ab	atemen	t Tv	vpe					
TO BE AFATED The Facility (13)  Solely Material (ACM) (i.e., thermal systems (i.e., thermal	Asbestos-Cont	aining	No	rmal	ly					Amount			E	E					
In Facility (13)  The foliation of Registered Waste Hauler AZTECH MANAGEMENT, INC.  State  Montclair, NJ 07042  Tenance/ Custodial Staff (12) Yes No N/A  Pipe insulation, surfacing, VAT, or other miscellaneous)  The first of the final systems insulation, surfacing, VAT, or other miscellaneous)  A R U U U U U U U U U U U U U U U U U U							M	aterial (A	(CM)		E	E	C	C					
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Furnace Room  X Pipe insulation  60 1f X  Name of Registered Waste Hauler  AZTECH MANAGEMENT, INC.  17040  Disposal Date  Montclair, NJ 07042  Cubic Yards of Waste 1.0  Minerva Enterprise INC  Disposal Date 8/29/16  Waynesburg, Ohio 44688  Completed By (Print or Type)  Fitle  Constantine Vivian  President  Signature  Date  2(1) (2015)	(13)		Sta	ff (:	12)		or oth	er miscel	laneous)	155)	A	B	U	U					
Name of Registered Waste Hauler  AZTECH MANACEMENT, INC. Hauler ID No. 17040  Dity, State  Montclair, NJ 07042  Disposal Date 8/29/16  Signature  Cubic Yards of Waste 1.0  Minerva Enterprise INC  City, State  Waynesburg, Ohio 44688  Signature  Date 2(1)(2016)	Furnace Room		res	NO		Dine	in			60.10									
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AZTECH MANAGEMENT, INC. Hauler ID No. 17040 of Waste 1.0 Minerva Enterprise INC  Disposal Date 8/29/16 Waynesburg, Ohio 44688  Completed By (Print or Type) Fitle  Constantine Vivian President				-															
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Montclair, NJ 07042  8/29/16  Waynesburg, Ohio 44688  Completed By (Print or Type) Title  Constantine Vivian President  Signature Date	City, State		1 /	040		Die	mass1	Doto	1	an cerps	-126	TMC							
Constantine Vivian President Signature Date	Montclair, NJ	07042				1	이 규칙에게 하시고 있다.		- T. (10)	11 PG OF -	0 44	600		_					
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	72.	1241	- Luci					1 10	MI Can lus	Miller	8/11,	/2016							

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

Territoria de la composição de la compos		1.1			ator (2)						
8/11/2016			Joni O'	Lery							
Agencies Notified	Type Notifica	tion	Street Addre	ss					2	pay	1
[ ]EPA	[X] Initial					10		1 - 2			
[ ]DEP	Notifica	ation	City, State,		_	1101					
[X]DOL	[ ]Amended Notific	ation	Montcla	ir,NJ,0704	2		AHG 1	7 201	ô	11	
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[ ]DCA	[ ]EMERGENC	Y	Joni 0'	Lery			. pa-	-	-	4	1
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				ITY INFORMATION		e of Facilit	v (4)		-7		W
Name of Facility Who Same as above		is Taki	ng Place (3)			[]School (F	(-12) er 8 (Other	than	K-12)	)	
Street Addres							ildings, ho	mes, e	tc.)		
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City (5		County	(6) Essex	County Code (		3600 rrent Use (Pr				hed)	
					Cur	crenc ose (F)	TIOT IT DET	119 000		,	
Name of Monitoring	Firm hired by	Buildin	a ASCM No.	Name of A	batement	t Contractor	(9)				
Owner (8)	Tarren (Tarren)		*	AZTEC	H MAN	AGEMENT,	Inc.				
N/A Street Address				Street Ad	ldress						
00000				86 Ch	risto	pher St.					
City, State, Zip Co	ode			City, Sta	te, Zip	Code					
	-			Monto	lair,	NJ 0704	2				
Project Manager for	Monitoring F	irm Te	lephone Numb					cense		er	
		M	/A	(973)	744-8	800		0037	1		
Scheduled Start Day 8/22/16 Month Day Occupancy Status Day [VIPocifier Cl	Year Mo	/23/1 onth t (Check	Day Year only one)	N/A Street Ad		itor					
of Abateme [ ]Abatement B Hours - Des		de of N	ormal Facili		ate, Zip	Code					
Scope of Work (Che											
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Locati Asbestos-C Material TO BE ? In Fac	ontaining L (ACM) ABATED ility		Normally Used Solely By Main- tenance/ Custodial Staff (12)	Asbesto	surfaci	ning M) ystems .ng, VAT,	Amount (Specify SF or LF)	R M O V A L	REPAIR	NCAPSUL .	NCHOSURE
Basement		100	X	Pipe insul	ation	1	10 lf	X			
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Name of Registered		NC	NJDEP Waste Hauler ID No 17040		.5	Name of Regis			IN	С	
City, State Montclair, N				Disposal Da 8/24/1	5	Waynesb	urg, Oh			8	
- 1 - 1 D- (D-)	nt or Type) T	itle		Sign	nature	1-1	1/	Date	201 /201	-	

Check# 2958

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

GAC Project # 060-16 Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ August 10, 2016 Street Address Agencies Notified Notification Type ENVIRONMENTAL HEALTH & SAFETY DEPT. ☑Initial Notification DEPA 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS ☐ Amended Notification # DCA ■ Emergency (including City, State, Zip Code AUG / PISCATAWAY, NJ 08854 X DOL justification) ☑ DEP- No Longer REQUIRED Telephone Number Name of Contact □Cancelled X DOH MICHAEL SMITH, ENV. ROL & LICENSING **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) GEOLOGY, BLDG# 3002 ☐ School (K-12) ☐Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) DOUGLASS CAMPUS # of Floors: 3 Bldg. Age: 100+ years Sq. Feet: N/A County (6) County Code (7) City (5) Current Use (prior if being demolished): ACADEMIC **MIDDLESEX** (State Use Only) **NEW BRUNSWICK** Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) 0098 ATC GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BURLINGTON, NJ 08016 License Number Project Manager for Monitoring Firm Telephone Number Telephone Number **BRIAN KEARNY** 609-386-8800 00840 973-492-0477 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/21/16 08/19/16 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe Other - Describe: Schedule: 12 NOON - 5AM (24 HOURS & WEEKENDS AS FAIRLAWN, NJ NEEDED) Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure ■ Mini-Enclosure **⊠**Renovation  $\boxtimes$  > 3 sf or > 3 lf ☐Glovebag Procedure / Wrap & Cut Demolition □ > 160 sf or > 260 lf ■ Non-Exempted (\*) and Non-Friable Procedure Abatement Type Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used Amount (ACM) (i.e. thermal systems insulation, surfacing (Specify SF Solely by Maint./Custodial Material (ACM) in Facility (13) Remove Repair Encap Enclose or LF) VAT, or other miscell.) Staff? (12) YES NO NA X 50 SF VAT Room 210 X NJDEP Waste Hauler ID # Name of Registered Landfill 5 CY Name of Reg. Waste Hauler Cubic Yards of Waste: G.R.O.W.S. North Landfill See Below See Hauler Below #1 & 2 City, State Disposal Date Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 100 New Ford Mill 08/21/2016 NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 19067 NJ DEP # 4509 215-736-1700 Date Completed by (Print or Type) Raymend C. Pedalino August 10, 2016 RAYMOND C. PEDALINO SENIOR PROJECT MANAGER

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-16 Date of Notification (1) Name of Building Owner/Operator (2) August 08, 2016 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. DEPA □Initial Notification ☐ DCA 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS ■ Amended Notification # 4 -X DOL New Completion Date City, State, Zip Code PISCATAWAY, NJ 08854 ☑ DEP- No Longer REQUIRED ■ Emergency (including X DOH Name of Contact Telephone Number Justification letter) MICHAEL SMITH, ENV. □ Cancelled **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) PHARMACY, BLDG# 3750 School (K-12) ☐ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **BUSCH CAMPUS** # of Floors: 2 Bldg. Age: 60+ years Sq. Feet: N/A County (6) City (5) County Code (7) (State Use Only) **PISCATAWAY MIDDLESEX** Current Use (prior if being demolished): EXTERIOR EXCAVATION AREA Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07/25/16 08/30/16 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD □ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other - Describe: Shift Hours: 3:00 PM - 5:00 AM Daily (Phased as Excavation FAIRLAWN, NJ Progresses - 24 hours as needed) Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure  $\geq$  3 sf or  $\geq$  3 lf □ Renovation X Mini-Enclosure (Wrap & Cut) ≥ 160 sf or ≥ 260 lf ☐ Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA EXCAVATION AREA <9 LF X X TSI (exterior) Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 40 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill N.IDEP # 28969 08/30/16 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 19067 NJ DEP # 04509 215-736-1700 Completed by (Print or Type) Signature Date RAYMOND C. PEDALINO SENIOR PROJECT August 8, 2016 Raymond C. Pedalino MANAGER

State of New Jersey - Notification of Asbestos Abatement

CHECK # 23269

Date of Notification (1) 08-10-16					Building (			(2)			G E	2	W		
Agencies Notified	Type Notification		- 1	Street Ad 22 Maj	ddress ole Aver	nue					4110	-			
EPA DEP DOL	initial Amended Amendment				te, Zip Co town, N		)			Ų.	AUG		2010		
× DOH □ DCA	Emergency justification)  Cancellation	Acceptation of the second	1 2		Contact Tobiasz					Tele	ephone Nu	ımber		ĹB	
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Name of Facility Where	Abatement is Takin	g Place (3)	C.					□ s	of Facility (4 School (K-12	)	3-038				
Street Address 33 Route 17 South								×	Subchapter 8 Other (i.e. pr etc.)				dings	, hom	es,
City (5) East Rutherford				~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~				Squar 50,00	e Feet 00	# of	Floors	11/32	3ldg. /		
County (6) Bergen					Code (7) ISE ONLY	-			nt Use (Prior ehouse	r if bei	ng demolis	shed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN	l No.				ement Cont nvironme						
Street Address								Addres Broad	s Street						
City, State, Zip Code	City, State, Zip Code							State, Zij stadt, I	p Code NJ 07072						
Project Manager for Mor		Telephor	ne No.			none No 939-6			License 00756	No.					
Start Date (10) 08-22-16		Scheduled 10-15-1		pletion l	Date (11)			of OSH n-Air Ir	A Monitor						
Occupancy Status Durin	g Abatement (Ched	k Only One	)					Addres							
Facility Closed/Vac Abatement Perform							0.00	9 Jack State, Zij	son Aven	iue					
Other - Describe:	†i				<u> </u>	_	0700		d City, NY	1111	01				
Scope of Work (Check A	II That Apply)	I .					-	7				_			55,000,00
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat moliti				×	Min Glo	Containme i-Enclosure vebag Proce	edure	-			77 223	
				000			L	1 Nor	n-Exempted	(*) and	Non-Fria	ible Pro	20000000000	re emen	t
Location	n of	No	ocation or mall	y		Des	scription	n of						уре	
Asbestos-Containing	Material (ACM)		Solel			tos Cont	aining N	Material			mount	_		Щ	Ш
TO BE AB In Facil		Custo	dial S (12)	taff?	(i.e.		cing, VA	T, or	tion,		or LF)	Remova	Repair	caps	Enclosure
(13)		Yes	No.	N/A		other n	niscellar	neous)				oval	air	Encapsulate	sure
Roo	f	163	140	X	N	1embra	ne / F	lashin	g	38,	250SF	x		-	
											0				
Name of Registered Was	ste Hauler		N.	JDEP W	/aste	Cubic	Yards		Name of R	Registe	red Landf	ill			
ATC, Inc. / JBT (500			Hauler ID No. of Waste Z4310 Of Waste TBD Minerva Enterprises												
City, State Shirley, NY / Bronx,	NY					TBD	sal Date	· n.	City, State Waynes		OH 446	888			
Completed by Kevin Moriarty	itle Signature Date Project Manager 08-10-16				16										
130 VIII IVIOITALLY		1 10,00	. IVIA	lagor			/ //	16	1006			.5 10			

Date of Notification (1)		Name	of Building	Owner	Operator (	(2)				,			-		
AG ( 10th 2016	X		' S8	&b re	alty								\$1		
Agencies Notified Type Notificat	ion	Street	Address		Supor E	31 va		CONTRACT SELECT	Canada a a mil	whater the co	erent en en en en en en en en en en en en en	- Charles			
EPA Initial Amende		City C		34407593	oupor t	5240	ME	<u>(C)</u>	51	W					
DEP Amende Amendm		City, Si	ate, Zip Co		rrison I	N.I O	7029			NAME OF TAXABLE PARTY.					
	cy (including	Name	of Contact	2,4878				Tel	ephone N	lumber	- 11	111			
DCA Justinicati				Ma	ark Tria	ino		AUG	1 / /	ALLIN .	1				
N. C. W. M. Aller of the Control of	11 - 51 - (6)	FAC	ILITY INFO	ORMAT	TION	-		-			i i				
Name of Facility Where Abatement is To						Type	of Facility d	BEST	OS CON	TROL	E	100			
2 Story vacant ware	nouse						School (K-1 Subchapter	2) 8 (Oth	er than K-	-12)	the second	and the same			
1000 Frank E. Rog	ers Blvd.					X	Other (i.e. p				ilding	s, hom	es,		
City (5)	,0.0 2.7 0.		12.50				etc.) re Feet	# 01	f Floors		Bldg.	Age			
Harrison						:	34.000 :	sf	2		70				
County (6) Hudson			Code (7)	1		Curre	nt Use (Prid	or if bei	ng demol	emolished)					
19 20100000000000000	- (0)								ant bu	ilding	3				
Name of Monitoring Firm Hired by Build EHS Enviromer		ASC	M No.		Name o		tement Con		*						
Street Address	ital, IIIO		DAS Industrial Street Address						iai		_				
	gate Court	Suite E	uite E 21 Pine Street												
City, State, Zip Code			City, State, Zip Code Rock Telephone No. Telephone No.												
Mic	kleton NJ (	08056					7.77	away	NJ 07				-		
Project Manager for Monitoring Firm	Thd	100000000000000000000000000000000000000	one No. 3224-00	_	100000000000000000000000000000000000000				License	No.	220				
Start Date (10)	Tbd Start Date (10)   Scheduled Company Compan						943618 A Monitor			012	.00				
May 31, 2016			31,201	6	Trumo c	3, 00,	D C MONITOR								
Occupancy Status During Abatement (C		. —			Street A	Addres	S								
Facility Closed/Vacated During Ent															
Abatement Performed Outside of N Other – Describe:	ormal Facility H	ours			City, St	ate, Zi	p Code								
Scope of Work (Check All That Apply)													-		
	П Рес	ovation			ř.	E	Contoloma	ant with	Nogotivo	Broom					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nolition				Min	l Containme i-Enclosure	9	i Negative	FIESS	ure				
			Glovebag Proce									ire			
	ls I c	cation				-					Aba	temen	t		
Location of	Nor	mally		D	escription	of				-	_	ype			
Asbestos-Containing Material (ACM TO BE ABATED	1 200 July 2	Solely by enance/	Asbes	tos Cor	ntaining Mal systems	aterial	(ACM)	3500	mount Specify	l z	_	E	ш		
In Facility	TO 0.00 (0.00)	ial Staff? 12)	(1.0.	surf	acing, VA7	T, or	, doi,		or LF)	Remova	Repair	caps	Enclosure		
(13)	- 1		4	other	miscellan	eous)				val	=	Encapsulate	anre		
										(0					
Roof		X	Remo	val o	f asbes	stas	roofing	26,	000 sf	X					
-															
Name of Registered Waste Hauler		NJDEP Waste						-							
Newark Carting inc		Hauler II	509	of Waste 60 G.r.o.w.s											
City, State				Dispo	osal Date	C.1.0.W.S									
Newark NJ					9 1/30	0/16			Mo	orris	ville	. Pa			
Completed by Title Signatu							Signature 1 Date								
Vincent Manganiello		Owne	r			7	170			8		14/1	6		

Date of Notification (1)						wner / Operator	P) E C	BEIW	ED	7	
	9-2016					ents LLC			ED	1	
	e Notification			Addre							
⊠ EPA □ DEP □ ⊠	Initial				Avenue Zip Co		H H AU	C 1 7 0040			
☐ DEP 🗵	Amended			NJ 0		de	TI HU	G 1 7 2016			
DEP S DOL S	Emergency			of Co					Telephon	e Num	ber
DCA	Cancellation	233.0		ampbe			ASBEST	OS CONTE	•		
			ΕΛ	CILIT	VINEC	RMATION	Li	CENSING		-	-
Name of Facility Where	Abatement is Taking D	200 (3)		CILII	TINFC	Type of Facility				ı	
North Arlington Apartme		ace (o	,			School (K					
Street Address						☐ Subchapt	er 8 (Other tha	n K-12)			
20-B Ridge Park Drive	9		192			Other (i.e.		nmercial buildi			)
						Square Feet	# of Floo	ors	Bldg. Age		
City (5)	County (6)	Cou	inty C	ode (	7)	5650	2			70	
North Arlington, NJ	Bergen					Current Use (F		emolished)			
N		(0)		TAGG	NA NI-	Apartment Bui	THE RESERVE THE PARTY OF THE PA	tor (0)			
Name of Monitoring Firm Health and Safety Service		ner (8)		117	M No.	Name of Abate Resource Mar					
Street Address	Jes	21		1111		Street Address		ap, LLO			
P.O. Box 365						2115 Hamilton		12			
City, State & Zip Code						City, State & Z					
Berlin, NJ 08009		T				Trenton, NJ 08		Tr.			
Project Manager for Mor Mr. Jim Proctor	nitoring Firm	Telep 856-4			per	Telephone Nu 609-914-4279		License	Number 0118	5	
Scheduled Start Date (1	0) Scheduled Cor			-	)	Name of OSH	PROPERTY OF THE PERSON NAMED IN COLUMN 1				
08-11-2016	3	8-31-2				J&S Environm	ental Laborato	ories, Inc.			
Occupancy Status Durin						Street Addres					
	/acated During Entire F		of Aba	iteme	nt	2333 Route 22					
Abatement Performance Describe: 9am	ormed during Normal H	ours:				City, State & Z Union, NJ 070					
	d During Abatement					0111011, 140 070	.00				
Scope of Work (Check a						-		65 AV	1940 A. D. D. 1940		
		_	50±51	000				ntainment with	Negative	Pressu	ire
≥3 sf or ≥3 lf			1000000	ovatio			☐ Mini-End				
□ ≥160 sf ≥260 lf		$\Box$	реп	nolitio	n			ag Procedures empted and No		Proce	dure
Locati	on of	Isl	ocati	on	T	Description		Amount		tement	
Asbestos-C			nally l			Asbestos-Cont		(Specify			7
Material			olely b			Material (AC		SF or LF)	D D	_ !	Encl
TO BE A			tenan			(i.e., thermal sy	rstems		Removal	Repair	
in Fa		Custo	(12)	staπ?		nsulation, surfactor or other miscella			OVa	pair	losure
(13	5)	Yes	No	N/A		or other miscelle	ineous)		20		e e
Boiler Room					Pipe I	nsulation		85 LF			
Boiler Room						iated Elbows		4			
Storage Room				$\boxtimes$	Pipe I	nsulation	1	200			
Storage Room					Assoc	iated Elbows		8			
Meter Room					Pipe I	nsulation		325			
Meter Room					Assoc	iated Elbows		10			
Name of Registered Wa	ste Hauler					Cubic Yards of Waste	Name of Reg	istered Landfill			
Resource Management	Group, LLC		1.0	35218		TBD	Grows Landfi	II			
City, State						Disposal Date	City, State				
Trenton, NJ 08619						TBD /	Morrisville, PA	4			
Completed By (Print or	Type)		Titl		8	Signature	0	Llan	Date	2040	
Mr. Brian Haney			Pre	esider	nt	[ ) I Nu	$\gamma$	14/1/1/	7-29-2	2016	
						4101	1	1 My			

Arended

Date of Notification	(1) 8-12-2016	1					Owner / C		(2)	LE G	ELVED
Agencies Notified	Type Notifica	ation	-		t Addr		ents LLC		- 115		
⊠ EPA	1 ) po 1 (01110)	20011	- 1			1 Avenu	ie		111 11	1	
☐ DEP	☐ Initial					& Zip C	ode		10 0	AUG 1	7 2016 IIIII
⊠ DOL		nded(Start Date				07013					
DEP DOL DOH DOA		gency				ontact			1 Å	SBESTOS	Telephone Number
□ DCA	Cand	ellation	- 1	Jelly	Campb	ell				LICEN	WILL WER I
					ACILI	TY INFO	DRMATIC				OHVG
Name of Facility Wh			ace (	3)				of Facilit			
North Arlington Apa Street Address	rtments – Bu	ilding 200	-					chool (K		- K 10)	
20-B Ridge Park [	rive								er 8 (Other that		lings, homes, etc.)
20 B Mage Fank E	31140							e Feet	# of Floo		Bldg. Age
City (5)		County (6)	Co	unty	Code	(7)	5650	0 1 000	2	J. C	70
North Arlington, NJ		Bergen				. ,		nt Use (F	Prior if being de	emolished)	
								ment Bu			
Name of Monitoring		y Building Own	er (8)	)		CM No.			ement Contrac		
Health and Safety S Street Address	ervices				1117	\$\ 			nagement Grou	ıp, LLC	
P.O. Box 365								Addres	s n Ave, Suite 20	2	
City, State & Zip Co	de								ip Code		
Berlin, NJ 08009								n, NJ 0			
Project Manager for	Monitoring F	irm			Num	ber		none Nu		License	Number
Mr. Jim Proctor	(40)		_	452-1			-	14-4279			01185
Scheduled Start Da 08-29-201		Scheduled Con	npleti 9-16-			)			A Monitor ental Laborato	ries. Inc.	
Occupancy Status I		The second secon						Addres			
☐ Facility Clos	ed/Vacated	During Entire P	eriod		ateme	ent	_	Route 22			0
		uring Normal He	ours:						Zip Code		
Describe:	gam – 5pm upied During	Abatement					Union,	, NJ 070	183		
Scope of Work (Che			, , , , , , , , ,								
		,									Negative Pressure
≥3 sf or ≥3 I			$\boxtimes$		novati				☐ Mini-End		
☐ ≥160 sf ≥26	O If		Ш	De	molitic	n				ag Procedure	
1.	cation of		lo	1 000	lion	1	Das	arintian			Ion-Friable Procedure
	os-Containin	a		Loca mally	Used			scription os-Cont		Amount (Specify	
	erial (ACM)	9		Solely				erial (AC		SF or LF	\
	BE ABATED		Mair	itena	nce or		(i.e., the	ermaÌ sy	stems		Re Re
i	Facility		Cust		Staff?	i	nsulation				Enclosure Encapsula Repair Removal
	(13)		Yes	(12) No	N/A	-	or other	miscella	ineous)		psulat pair pair
Boiler Room				140			nsulation			0517	
Boiler Room			H	H		-	iated Elb			85 LF 4	
Storage Room			+	H		-	nsulation			200	
Storage Room			H	H			iated Elb			8	
Meter Room			+	H			nsulation	New Marketon		325	
Meter Room	•		Ħ	H			iated Elb			10	
Name of Registered	Waste Haul	er		IN.			Cubic Ya		Name of Regi		
				Н	auler I	D No.	of Waste				
Resource Managem	nent Group, L	.LC		00	3521	5	TBD		Grows Landfil	l	
City, State Trenton, NJ 08619							Disposal TBD	Date	City, State Morrisville, P.A.	V	
Completed By (Prin	t or Type)			Ti	tle		Signatur		$\cap$	1	Date
Mr. Brian Haney	)   /			10000	eside	nt	133.01	M	1. VI	10101	7-29-2016
							- 1	// /	IN T	THULL	
								111	11	114	