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

Check No. 2913

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Date of Notification (1)				1	Name o	f Building	Owner/Operator	(2)	har /					1
November 20, 2015	5				Passa	ic Fam	nily Head Star	t, Inc.	חדו	1	00	15		
Agency Notified	Type No	tification		5	Street A	ddress			DE	, ,	LL	110		100
□ EPA	Initial			1	68-72	Third 9	Street							1
HOEP Not equired per State Pag. 10-2004	☐ Amen	ded			City, Sta	ate, Zip C	ode		ASEES	TOS CO	)t\T	RO	L &	i
⊠ DOL		ndment #			Passa	aic, NJ	07055		PIGD LO	17.35-		1	MINE SA	
⊠ DOH		gency (including cation)		1	Name o	f Contact			Telephone Num	ber				
☑ DCA	☐ Cance				Dr. Ra	amos								
VENEZ					FACIL	ITY INFO	ORMATION							
Name of Facility Where A	hatemen	t is Taking Place	3)					Type of Facility	(4)					
	batomon	the raking that	٠,						0. (5) 10					
Passaic, NJ 07055								☐ School (K-12)  Subchapter 8	) I (Other than K-12	)				- 4
Street Address								☐ Other (i.e. pri	ivate & commercia	l building	gs,			
68-72 Third Street								homes, etc.)		Dide	٨٠٠٠			_
City (5)								Square Feet	# of Floors	Bldg.				
Passaic, NJ 07055								10,000	2	1925	)			
County (6)						Code (7)	(STATE USE	Current Use (Pr	or if being demoli	shed)				
Passaic				1	ONLY)			Education						
Name of Monitoring Firm	Hired by	Building Owner	AS	СМ	No.		Name of Abatem	nent Contractor (9	))					
Saban Environmer	ntal						B&N&K Res	toration Co.,	Inc.					
Street Address							Street Address							
201 Stuyvesant Av	neue						223 Randolp	oh Avenue						
City, State, Zip Code	11040						City, State, Zip C							
Lyndhurst, NJ 070	71						Clifton, NJ 0	7011						
Project Manager for Moni		m I	Teler	hon	e No.		Telephone No.		License No.					
Stephen Pharai	toring i ii		100-00000		3-006	4	973-478-468	1	00120					
Start Date (10)		Scheduled Comp					Name of OSHA							
December 04, 2015	.	December 1			• ()		McCabe Env	vironmental S	Services, L.L.	C.				
Occupancy Status During				10			Street Address	,						
55.00 to 50.00 to 50								Brook Avenue	4					
☐ Facility Closed/Vacate	d During	Entire Period of A	batem	ent			City, State, Zip C							
Abatement Performed     □ Other - Describe:	Outside (	of Normal Facility	Hours	1			Lyndhurst,							
Scope of Work (Check all	that ann	lv)		_										
7 TO CO. T. C.	mar app	197		9			□ Full	Containment with	Negative Pressur	е				
≥ 3 sf or ≥ 3 lf					⊠ Reno □ Dem			Enclosure rebag Procedure						
≥ 160 sf or ≥ 260 lf		*					⊠ Non-	-Exempted (*) and	d Non-Friable Prod	edure				
			Is Lo	cati	on	1					A	bate	mei pe	nt
( <b>*</b> ( * ( * ( * ( * ( * ( * ( * ( * ( * (				mall			Description	of .				·,		
Locatio Asbestos-Containin		I (ACM)	Used 9 Maint			Asbes	stos Containing M		Amount				Щ	т
TO BE A				todi			, thermal systems	insulation,	(Specify		Ren	Re	cap	ncl
IN Fac				aff?			surfacing, VA other miscellan		SF or LF)		Removal	Repair	Encapsulate	Enclosure
(13)	)		(	12)	(4)		Other Iniscendin	cousy			m	-	ate	ē
			es	No	N/A									
Basement Boiler F	Room		7	140	1071	Theri	mal Systems	Insulation	19	4 In ft	X			
Basement Boiler F			$\rightarrow$				mal Systems		2	4 sq ft		X		
Dasement Doner	100111	/	1			111011	mai Oyotomo			•				
			+								1			
Name of Books, and the	40 111		NUD	=D 14	Vaste H	aular	Cubic Yards of	Name of Regis	stered Landfill	1100000			_	
Name of Registered Was		0	ID No		vasie H	auier	Waste	realite of negis	AUTOW EMITWITH					
B&N&K Restoration					/ 2A4	56	5	Minerva E	nterprises, In	c.				
Tri-State Transfer City, State	MSSOCI	ates, IIIC.					Disposal Date	City, State						
Clifton, NJ 07011 /	Brony	NV					12/07/2015 -	Waynesbu	ıra, OH					
Completed by	DIOIX	Title		_			12/11/2015 Signature	1 / /	J,	Date				
	n	Safety Office	or					11/		11/20	)/2(	015		
G. Roger Woodma	u I	Salety Office	CI				1			200				

NO CK

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

Date of Notification (1)				-1	Name (	of Building	Own	er/Operator (2	2)		lia li	U	125	$\neg$
	30/	15						ity Health N					-	
Agencies Notified	Type Notificat	ion			Street /	Address			į	U U, DEC		2015		11-
⊠ EPA	☐ Initial				185	Roseber	ry St	:	1	i i				
⊠ DOLWD		-4-44			City, St	ate, Zip C	ode			ACCECT	00.00			To the second
⊠ DOH	Amendmen	25.5	dina		Phill	lipsburg	NJ 0	8865	ĺ	ASSEST	08 00	VIRC	La	
DCA (NJAC 5:23-8)	justification		ullig	t	Name	of Contact				Telephone Nur	mber	No. Care	Music ordered	-
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Cancellation	- A			Ted	Ruhf								
					FAC	ILITY IN	FOR	MATION						
Name of Facility Where	Abatement is Ta	aking Pl	lace (	3)					Type of Facility	(4)	10-6200			
St Lukes Warren H	ospital								School (K-12					
Street Address				- W.					Subchapter	8 (Other than K-1 rivate and comm	12) ercial hi	ilding		
185 Roseberry St									homes, etc.)		ioroiai be	liding	'1	
City (5)									Square Feet	# of Floors	BI	dg. Ag	е	
Phillipsburg									200,000	2		50+		
County (6)					Count	ty Code (7	(STAT	TE USE ONLY)	Current Use (Pr	ior if being demo	lished)			
Warren									Hospital					
Name of Monitoring Firm	Hired by Build	ing Owr	ner (8	) /	ASCM I	No.	Nan	ne of Abateme	ent Contractor (9)	)				
Criterion							С	ontrolled E	nvironmental	Systems				
Street Address							Stre	et Address						
3370 Progress Driv	ve Suite J						1	121 N. Beth	lehem Pike - S	uite 60				
City, State, Zip Code							City	, State, Zip C	ode					
Bensalem, PA 190	20							I	e, PA 19477					
Project Manager for Mor				Tele	ohone I	Vo.	0.000	ephone No.		License No.				$\neg$
Steve Vena	iitoriiig r iiiii				5 244		11700000	15 542 7000		00847				
Start Date (10)	I e	chedule	ad Co					ne of OSHA N						-
12 / 9 /					/		1,000,000	ES	101.1101					
								et Address						
Occupancy Status Durin					mont		(COCCOOL)		lehem Pike - S	tuito 60				
☐ Facility Closed/Vacat ☐ Abatement Performe	2200					cribe				uite 60			-	
Time of Abatement:								, State, Zip C	e, PA 19477					
Scope of Work (Check a	II that annly)						3	pring rious	e, FA 13411					
Scope of Work (Officer a	ш шасарыу)							□ Full Con	tainment with Ne	gative Pressure				
☐ ≥3 sf or ≥3 lf			Rer Der					☐ Mini-End	closure g Procedure					
≥160 sf or ≥260 lf		_	] Del	HOHUC	111			☐ Non-Exe	empted (*) and No	on-Friable Proce	dure			
		T	ls	Locat	ion						At	ateme	ent Ty	уре
Location	n of			orma				Description of			R	D	ш	т
Asbestos-Containing		)		d Sole ntena	ely by			Containing Ma		Amount	Removal	Repair	nca	nclo
TO BE AB					Staff?	(1.6		rmal systems urfacing, VAT		(Specify SF or LF)	oval	=	Encapsulate	Enclosure
(13)	,			(12)				ner miscellane					late	е
		\	Yes	No	N/A								0.000	
1 <sup>st</sup> Floor				$\boxtimes$		Tile and	d Ma	stic		1600				
1st Floor				$\boxtimes$		Linoliu	m			1600				
1 <sup>st</sup> FIr, Dirctor, Out F	Patient, Finan	ce [				Gray Ti	le &	Black Mast	ic	900				
Name of Registered Wa	ste Hauler			1000	JDEP \		10000000	oic Yards of	Name of Reg	istered Landfill				
Geppert Recycling	I			H	auler II	O No.	Wa	ste	Western B	Berks Commu	ntiy La	ndfill		
City, State							Dis	posal Date	City, State					
Hatfield, PA							1.	/30/16	Birdsboro	, PA 19508				
Completed By (Print or 1	Гуре)	Title						Signature	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Date			
Patricia Visco	e=0, ab	Offi	ice N	lana	ger			Palu	ca Up	Ag-	11/3	6/	5	

ASB-41 JAN 13

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

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Date of Notification (1)				Name	of Building	Own	er/Operator (2	2)	124				
11 /30 /	15	_			Constru				DI DI	EC	1	2015	Alberta as desired
Agencies Notified Type Notifical	tion			Street	Address				1				1
☑ EPA ☑ Initial				3 Gr	eat Valle	у Ра	rkway Suite	e 200		-		-	
□ DOLWD     □ Amended     □ Amended			İ	City, St	tate, Zip C	ode			ASSES	TUS	CO	UEC	/L &
☑ DOH   Amendme     ☐ DCA   ☐ Emergend	-	ıdina		Mal	ern, PA	1935	55		A LO DESCRIPTION OF THE PARTY O	i.l			The branch
DCA Emergence [NJAC 5:23-8]  Ustificatio		ding	1	Name	of Contact				Telephone Numb	er			
☐ Cancellati	on			Kev	in Sherm	an							
				FAC	ILITY IN	FOR	MATION						
Name of Facility Where Abatement is Ta	aking F	Place (	3)					Type of Facility	(4)				
Shoppes at Riverside Mall								School (K-12					
Street Address									(Other than K-12) rivate and commerce		ildina	S.	
309 Hackensack Ave								homes, etc.)			3	7,	
City (5)								Square Feet	# of Floors	Blo	lg. Ag	e	
Hackensack													
County (6)				Coun	ty Code (7)	(STA	TE USE ONLY)	Current Use (Pri	or if being demolish	hed)	18		
Bergen													
Name of Monitoring Firm Hired by Build	ing Ow	mer (8	3)	ASCM I	No.	Nan	ne of Abateme	ent Contractor (9)					
A-000 A-000 A-000						С	ontrolled E	nvironmental S	Systems				
Street Address						Stre	et Address						
- A						1	121 N. Beth	lehem Pike - S	uite 60				
City, State, Zip Code						City	, State, Zip Co	ode	E 15				$\neg$
						s	pring House	e, PA 19477					92
Project Manager for Monitoring Firm			Tele	phone I	No.	Tele	ephone No.		License No.	1			
principles (and the first specification)						2	15 542 7000		00847				
Start Date (10)	chedul	led Co	mple	tion Dat	e (11)	Nan	ne of OSHA N	Monitor					
11 / 30 / 15				1		С	ES						
Occupancy Status During Abatement (0	heck	only or	ne)			Stre	et Address						
☐ Facility Closed/Vacated During Entir				nent		100000		lehem Pike - S	uite 60				
☐ Abatement Performed Outside of No.					cribe		, State, Zip Co						
Time of Abatement: 6:00AM-5:30P	M/	_PM-		_AM		1 979		e. PA 19477					
Scope of Work (Check all that apply)							pg	-,			-		
		7.5	510000000 <b>**</b>	5-3-3-73				tainment with Neg	gative Pressure				
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>		⊠ Rer □ Der					☐ Mini-End	g Procedure					
	Ī								n-Friable Procedur	e			
			Locat							Ab	atem	ent Ty	/ре
Location of			orma	lly ely by			Description of			R	Z.	Щ	Щ
Asbestos-Containing Material (ACM TO BE ABATED	)		ntena				Containing Ma rmal systems		Amount (Specify	Remova	Repair	cap	Enclosure
IN Facility	1	Custo		Staff?	(	S	urfacing, VAT	, or	SF or LF)	Val		Encapsulate	sure
(13)	-	V	(12) No	NI/A		oth	ner miscellane	eous)				ate	
		Yes		N/A						-	_		
Exterior					NF Wat	erpr	oof Tar Pap	er	6161 SF		Ц	Ш	Ш
Name of Registered Waste Hauler			IN	JDEP \	Naste	Cub	oic Yards of	Name of Regis	stered Landfill				
Environmental Transport Grou	p, Inc		F	15532		Wa:	ste 20	Grand Cer	ntral Sanitation				
City, State							posal Date	City, State					
Flanders, NJ 07836						1.	/30/16	Penn Argy	ı, PA				
Completed By (Print or Type)	Title					_	Signature	1 ()	Da	ite i	,		
Patricia Visco	Off	fice N	lana	ger			Palue	ser UN	Co 1	1/3	0/1	_	

Date of Notification (1)		Name of	Building Ow	ner/Operato	or (2)		1),	<u> </u>	5 1	V		15
November 27, 2015		JoElle	n Smith			. :	Che	ck # 258	6			
Agencies Notified Type Notifica	tion	Street Ad				11		DEC	4		1	11
EPA Initial Amende			oodside [			įL	٠.	ULU		2015	1	1
			te, Zip Code				į				The same of the sa	
DOL Amendr	nent # ncy (including		etown, NJ	07701		į.		SEESTO.	200	75.0		
DOH justifica	ion)	Name of				į.	Tele	phone Nu	mber.	Ä		
DCA Cancell	ation	A CONTRACTOR OF THE PARTY OF TH	n Smith				1				No. 1. ALMES	trans.
Name of Facility Where Abatement is 7	aking Place (3)	FACI	LITY INFOR	MATION	Type	of Facility (4	1)					
Smith Residence	anng riado (o)						9 <b>5</b> 00					
Street Address						School (K-1: Subchapter		er than K-1	12)			
100 Woodside Drive					×	Other (i.e. p				lings,	home	es,
City (5)						etc.) re Feet	# of	Floors	В	ldg. A	ae	
Middletown					2,00		3		100	5		
County (6)		County (	Code (7)		- 10 Marie 1	nt Use (Pric	or if bei	ng demolis	shed)			
Monmouth			JSE ONLY)			idence			Š			
Name of Monitoring Firm Hired by Build	ding Owner (8)	ASCN	1 No.	0.0000000000000000000000000000000000000		tement Con		100				
Mgmt. & Environmental Consu	Iting Services			Sha	ade En	vironmen	tal, LL	.C				
Street Address					et Addres							
PO Box 341				623	3 Cutler	Avenue						
City, State, Zip Code					State, Z							
Chesterfield, NJ 08515		4				ade, NJ 0	8052					
Project Manager for Monitoring Firm		Telepho		5.44 (5.000) 5.55	phone N			License 00842	No.			
Bill Weisgarber			98-4070		6-755-0	0.0000000000000000000000000000000000000		00042		1		
Start Date (10)	Scheduled C			1100000000		HA Monitor oratories						
December 10, 2015	Decembe	r 12, 201	5		and the same of th					Colonia III		
Occupancy Status During Abatement (	Check Only One)				et Addres	ss : 130 Nor	th					
Facility Closed/Vacated During En Abatement Performed Outside of					State, Z							
Other – Describe:	Normal Facility Flor	uis				son, NJ 0	8077					
Scope of Work (Check All That Apply)				011	ii iai ii ii	3011, 140 0						
Francis	X Reno	vation			П =	II Containme	ant with	Negative	Draceu	re		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		olition			X Mir	ni-Enclosure		rivegative	1 10000			
	_				× Glo	ovebag Prod n-Exempted	cedure	d Non-Eris	hla Pro	cadur	۵.	
					E INO	II-Exemple	a ( ) an	d Non-i ne	DIE 1 10		ement	
51	Is Loc Norn			227 12.00							ре	
Location of Asbestos-Containing Material (ACI	I lead S		Ashesto	Descripti s Containing		L(ACM)	Δ	mount	-		m	
TO BE ABATED	Mainte Custodia			nermal syste	ms insula		(3	Specify	Re	Z	nca	Enc
In Facility (13)	Custodia (1:			surfacing, \other miscell			SI	or LF)	Removal	Repair	Encapsulate	Enclosure
(13)		1,,,,	1	outor misoon	ianoodoj				<u>a</u>	~	late	Iге
	Yes N								_			
Basement		X		Pipe Insu	lation		8	BO LF	Х			
					<del></del>							
Name of Registered Waste Hauler		NJDEP V	Vaste	Cubic Yards		Name of	Registr	ered Landi	fill			
		Hauler ID		of Waste		To some or	_ 8	County		11		
Freehold Cartage		22253		2				County	Lanun	ut.		
City, State			1.0	Disposal Da		City, Stat		C.				
Freehold, NJ				12/12/201		Newbu	rg, PA			1915-0		
Completed by	Title			Signati	ure	0	0	1.3	Date	1001		
Christina Lynch	Operation	ons Mana	ager	1 ( )*	JUST Y	Jax-		_	11/27/	2015	)	

CK 16602

			(Pur	suant to	NJAC 8:60 ar	nd 12:120	)	NE 6	Ü	<u> </u>		11
Date of Notification (1)	•		N	ame of E	Building Owner	Operator	LMAN	DEC.	1 00	115	1000	
11/23/15 Agencies Notified	Type Notification		S				ON AV		1-2		100	
☐ EPA	Initial		-	ity State	e, Zip Code	1510	IN THE	- MASPESTOS	CONT	ROL	8	-
DEP	Amended Amendment #_	-11:	_   ~	14 i L	-LING	TON	, NJ, Q	7 996 LICE	100	1		
DOH DOH	Emergency (indiguity justification)  Cancellation	ciuaing	N	ame of	Contact LE SPE	1 12	AN	Telephone Milim	nar	*	(1,	
☐ DCA				FACIL	ITY INFORMA	TION		(A)				
Name of Facility Where A				*			Type of Facility School (K-					
Street Address	758						Subchapte	er 8 (Other than K-12) private & commercia	) I build	inas,	home	s,
154 Divis	ion ave						etc.)	# of Floors		dg. Ag		
City (5) LLING	TON						2000	j	i	95		
County (6) NORRI					code (7) SE ONLY)		RESI	rior if being demolish うどんご은	ed)			
Name of Monitoring Firm		wner (8)		ASCM	No.	Name	of Abatement Co	OTICS discrete	เทอ	AN	AR	Poù
Street Address						Street	Address	0110/21/1			- CO.	
							NILL STO State, Zip Code		-	_		
City, State, Zip Code						PAT	ERSON. N.	J. 0750				
Project Manager for Mon	nitoring Firm			Telephor	ne No.	Telep 923	hone No. 6539652	License No.	D. L			
Start Date (10) 12/0	1.115	Schedule	d Com	pletion [	Date (11)	Name	of OSHA Monito	ρΓ				
M 37 35				1/5			CHN TGEV		V	_		
Occupancy Status Durin	g Abatement (Check ated During Entire Pe			ent		144	NILL ST.					
Abatement Perform Other – Describe:	ned Outside of Norma	I Facility	Hours			City,	State, Zip Code FERSON	NJ.07501		_		
Scope of Work (Check A	All That Apply)	-		85-		Г	7					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renovat Demoliti			ŀ	Mini-Enclosu		16220	е		
							Glovebag Pr Non-Exempt	ed (*) and Non-Friab	le Pro			
		100	Location							Abate Ty	pe	
Location Asbestos-Containing	Material (ACM)	Use	d Solel	y by	Asbestos C	Descriptio ontaining	Material (ACM) ns insulation,	Amount (Specify	R	_	Enc	띡
TO BE AB	lity	Cust	todial S (12)	taff?	su	rfacing, V. er miscella	AT, or	SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A	) oak	31 1111300110	anodd)		<u>a</u>		ate	-G
BASCME	NT		/			YHT		1805F	~			
Name of Pagistered Wa	ete Hauler 330	7.157.0	S N	JDEP W	/aste Cu	bic Yards	Name	of Registered Landfill	_			
Name of Registered Wa	12-1NC1/201	3 2776	5 H	auler ID	1000	Waste		R.O.W. 5				
City, State WIAVNE, WJ	-/ / /	PATE	25		Dis	posal Dat	e City, St	ate , PRISVILLE	,7	A		
Completed by  GORAN		Title			ARY'	Signatu	re /2///	RISVILLE	ite	23/	15	
GURAN	10101	5	, c C	KEI	111/		111	/	,,,,			

UF 300	N			OF ASBESTO: o NJAC 8:60 a				NEC	E	ii V	7 18	-
Date of Notification (1)		1	Name of	Building Owner	/Operator	(2)	i				1 1	
10/20/2015		2.0		ueen City R								
Agencies Notified Type Notification		5	Street Ad	idress			1	U L. VE	U	1 20	ı5	i i i i i i i i i i i i i i i i i i i
□ EPA □ Initial			310 Pa	rk Ave				-				
DEP M Amended			30.0	e, Zip Code			E.	ASEES	TOS	ONT	ROL 8	2
DOL Amendment Emergency (				Plains NJ 07	076		Ĺ		LIST?	- 9	Two Photosics	PLANTING AND ADDRESS OF THE PARTY AND ADDRESS
DOH justification)				Contact				Telephone N	Number			
DCA Cancellation			Bill Fla		TION					_		
Name of Facility Where Abatement is Takin	g Place (3	)	FACIL	ITY INFORMA	TION	Type o	of Facility (4	1)				-
Private Property		á				Пѕ	school (K-12	2)				
Street Address						☐ s	Subchapter 8	8 (Other than K				
444 Frankin Street						1 2 2	other (i.e. pr tc.)	rivate & comme	rcial bu	ildings	, home	es,
City (5)							e Feet	# of Floors		Bldg.	Age	
Elizabeth NJ						1650		2		+50		
County (6)			County C			Currer	nt Use (Prio	r if being demo	lished)			
Clerk County				ISE ONLY)					Sec. 10540			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.	1		ement Cont					
N/A	Variable Control		N/A		10.550.00	•	vironmen	it LLC				
Street Address						Addres						
N/A						Lafaye						
City, State, Zip Code					200 m	State, Zij	07015					
N/A		-	Telephor	no No		hone No	No.	License	e No			
Project Manager for Monitoring Firm N/A			N/A	16 140.	3 3 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	491-08		01240				
Start Date (10)	Schedule		7000	Date (11)	1970/1970	0.75	A Monitor	10.2.0				
11/30/2015	12/11/2		piodotri	Jaio (1.)			onmental	Corp				
Occupancy Status During Abatement (Chec						Addres				98		
Facility Closed/Vacated During Entire			ent		2333	3 Route	e 22 Wes	st				
Abatement Performed Outside of Norn	nal Facility	/ Hours			City, S	State, Zi	p Code			100.00	247.508	
Other – Describe:					Unic	on NJ (	07083					
Scope of Work (Check All That Apply)		1000				200						
≥3 sf or ≥3 lf	Name of the last o	Renova	70.00		-	Full	Containme	ent with Negativ	e Press	sure		
≥160 sf or ≥260 lf	<b>X</b>	Demoliti	on		b	Glo	i-Enclosure vebag Prod					
								i (*) and Non-Fr	riable P			
	105.7	Locati	7.811								tement ype	t
Location of		Normall ed Sole			Description						1	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenar	nce/	Asbestos C	ontaining l nal system			Amount (Specify	2	, ,	Enc	四
In Facility	Cus	todial S (12)	staff?	su	rfacing, V	AT, or	1	SF or LF)	Kellioval	Repair	apsı	Enclosure
(13)		( /	_	othe	er miscella	ineous)			Y di	=	Encapsulate	ure
	Yes	No	N/A								0	
xnterior			Х		Shingle	s		2200SF	x			
						45444						
		1	IDED ::	(asts   C	hia Varda		Nome of	Registered Lan	dfill			
Name of Registered Waste Hauler			JDEP W auler ID	4.50 조 (1.50 H) - 4.50 (1.50	bic Yards Naste			· ·				
Newark Carting Inc		04	4509				ISES B	ethleham lar	natiil			
City, State				Dis	posal Date	e /	City, State					
Po Box 5670 Newark NJ 07105						1.0	2335 A	pplebutter rd		eherr	1 PA	
Completed by	Title				Signatur	rë 7//	16	7	Date	1/204	_	
Carlos Gomes	Pres	ident			1 1	un			10/20	1/201	5	

State of New Jersey - Notification of Asbestos Abatement

CK 11921

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

					Name of Duilding Owner	D====t== (2)	1004	10 AB-13
Date of Notification (1) November 25, 2015					Name of Building Owner/O Drew University	Operator (2)		DEC 1 2015
Agencies Notified		Notification			Street Address			
		Initi			36 Madison Avenue	)	1 1	The second secon
X EPA x DCA		□Amende			City, State, Zip Code		i AS	110 11 1 3 B
x DOL		□ Emerg		ncluding	Madison, NJ			and the second s
X DEP		justific			Name of Contact James Hall		Telephone	Number
x DOH		□ Cance	lied	EAOU ITY INC				
Name of Facility Where Abate	ement is Ta	king Place (3)		FACILITY INF	Type of Facility (4)			
Drew University- Din		King Flace (o)			School (K-12)			
	•				Subchapter 8 (other than	K-12)		
Street Address					Other (i.e. private &			
36 Madison Avenue					Sq. Feet: Unknown	# of Floor	s: 2 <u>Bldg.</u>	Age: 60 years
City (5)	County (6	5)		Code (7)	Current Use (prior if being	demolished)		
Madison	Morris		(State I	Use Only)	Current Coc (prior il bellig	, adminionou,		
Name of Monitoring Firm Hire	d bu Dida	O (0)	A C C N A	Ne	Name of Contractor (9)			
		Owner (8)	ASCM	NO.	Name of Contractor (9)			
Briggs Associates,	inc.				GREENWOOD ABAT	EMENT C	ONSULTA	NTS, INC.
Street Address					Street Address			
3 Crosswicks Street					511 MAIN STREET			
City, State, Zip Code					City State, ZipCode			-
Bordentown, NJ		99			Butler, NJ 07405			
Project Manager for Monitorin	ng Firm	Telephone N			Telephone Number		License Nu	imber
Michael Hoodak		609.298	.5520		973-492-0477		00840	
Scheduled Start Date (10)		Scheduled (	Completio	n Date (11)	Name of OSHA Monitor			
December 7, 2015		January	15, 20	16	EMSL inc.			
Occupancy Status During A	hatement	(Check only o	ne)		Street Address			
Facility Closed/Vacat				ment	10.00000000000000000000000000000000000			
Abatement Performe					1056 Stelton Road			
Describe					City, State, Zip Code			
Other – Describe: O	ccupiea				Piscataway, NJ 08	854		
					Description of the second seco			
Source of Work (Check all the	at apply)							
				m -	**************************************			Negative Pressure
≥ 3 sf or ≥ 3 ⊠≥ 160 sf or ≥					ion	Mini-Enclo	sure Procedure	
\(\District St or \District \District St or \District \Dinto \District \District \District \District \Dinto \District \District \District \District \	260			Demolition		Non-Exem		Non-Friable Procedur
Location of Asbestos-Contain		ocation Norma			estos Containing Material	Amour	· · · · · · · · · · · · · · · · · · ·	atement Type
Material (ACM) in Facility (13		ely by Maint./C ff? (12)	ustodial	(ACM) (i.e. therm VAT, or other mis	al systems insulation, surfaci	ing, (Specif or LF)	ly SF Ren	nove Repair Encap Enclo
	YE		NA	, 5. 53161 1116				
Dining Hall -Serving		X		Spray On Fir	reproofing	2,000	DATE OF THE PARTY	
Area				TSI		500 I	f 🗵	
Name of Dec Wests Havis		NJDEP Was	to Haule	ID#	Cubic Yards of Waste:		Name of D	egistered Landfill
Name of Reg. Waste Hauler See Hauler Below # 1 &	2	See Belov		110#	80			ill Landfill
							G.R.O.W	
			vistal lieron =			Diagrand D	Minerva I	
Hauler #1) Greenwood			ants, In	ic. – Butler, NJ (	)7405	Disposal Da January		City, State Route 2, Box 68
NJ DEP # 1: Hauler #2) Newark Cart			04509,	NJ DEP # 19551		January	10, 2010	Bridgeport, WVA 304-842-2784
ii .						F.		9000 Minerva Road Waynesburg, OH
Completed by (Print or Type)		<u>Title</u>			Signature		Date	
Marin Graure	15	SENIOR P		CT	Marin Graure		Novemb	per 25, 2015
		MANAGER	2					

CK 334

								1111			L		-
Date of Notification (1) 11/3/2015			of Building Cate Propert		erator	(2)			DE(	1	1 0	115	And the second party from the
Agencies Notified Type Noti	ification	Street	Address					14			-		1+
□ EPA 🗓 Initia	al	1	Route 9										
DEP Ame	ended	2000	State, Zip Co						ASEES	TOS (			. &
DOL Ame	endment #ergency (including		chwood Nu	]				<u> </u>	i	1	4 - 9074	ture me	
	fication)		of Contact					Tele	phone Num	ber			
DCA Can	cellation	the Cappain	Sabatino										
	in Tables Disea (2)	FA	CILITY INFO	RMATIC	N	Type	of Facility (	4)		_			-
Name of Facility Where Abatement	is Taking Place (3)												
Private Property							School (K-1		er than K-12	)			-
Street Address					1	7	Other (i.e. p	rivate 8	commercia	al build	ings,	home	s,
529 Route 9						T e	tc.)						
City (5)					1		e Feet	1 100000	Floors	14	dg. A 50	ge	
Beachwood NJ			8			4300		1	4		30		
County (6) Ocean County			ty Code (7) E USE ONLY)	8. <u></u>	_	Currer	nt Use (Pri	or if bei	ng demolish	ied)			
Name of Monitoring Firm Hired by I	Building Owner (8)	AS	CM No.	T	Name	of Abat	ement Cor	tractor	(9)				
N/A	,	N/A	Ą		Dina	go En	vironmer	nt LLC	32.5				
Street Address				1	Street	Addres	s						
N/A					339 [	Lafaye	ette St						
City, State, Zip Code					City, S	tate, Zi	p Code						
N/A					New	ark N.	07015						
Project Manager for Monitoring Firm	m	Telep	hone No.		Teleph	none No	).		License N	0.			
N/A		N/A			973-	491-0	877		01240				
Start Date (10)	Scheduled (	Completio	on Date (11)		Name	of OSH	A Monitor						
10/12/2015 14 12 20		15 / [	2/13/20	15	J&S	Enviro	onmental	Corp					
Occupancy Status During Abateme	ent (Check Only One)	1			Street	Addres	ss						
Facility Closed/Vacated During	a Entire Period of Aba	tement			2333	Rout	e 22 We	st					
Abatement Performed Outside	e of Normal Facility Ho	ours		Ī	City, S	state, Zi	p Code						
Other – Describe:				-	Unio	n NJ (	07083						
Scope of Work (Check All That App	oly)												
≥3 sf or ≥3 lf	Ren	ovation				Full	I Containm	ent with	Negative F	ressu	re		
≥160 sf or ≥260 lf	Dem	nolition			F		i-Enclosur						
Paris Viene					1	Nor	vebag Pro	ceoure d (*) an	d Non-Friab	le Pro	cedur	е	
	1 1-1-		T									ement	
	(A)	cation mally									Ту	эе	
Location of Asbestos-Containing Material (	ACM) Used S	olely by	Asbes	tos Conta	cription		(ACM)	А	mount			m	
TO BE ABATED	IVIAITIE	enance/ ial Staff?	l (ie	thermal	system	s insula			Specify	Re	D	nca	Enc
In Facility		(2)		surfactory other m	ing, VA			Si	or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		. 1		outer in	iisociiai	icous)				la a	=	late	a.
	Yes N	10 N/	Α										
see atachement										x			
		_											
			-			-				+			
Name of Registered Waste Hauler		The second second	Waste	Cubic `			Name of	Registe	ered Landfill	1	I.		
Newark Carting Inc		04509	ID No.	of Was	ile		ISES E	ethleh	nam landf	ill			
City, State				Dispos	al Date		City, Sta		/				
Po Box 5670 Newark NJ 071	105				/	1	2335 A	ppleø	utter rd B	ethle	hem	PA	
Completed by	Title			Si	ignatur	e/7	111		1 56	ate			
Carlos Gomes	Preside	nt			/	IV	W	71	11	1/3/20	15		
					/		11	1					

State of New Jersey - Notification of Asbestos Abatement

NOCK

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Date of Notification (1) November 23, 2015					Name of Building Owner/ Bloomfield College			DEC 1 207	
Agencies Notified		Notification		_	Street Address	-			-
⊠ EPA		Initial No			467 Franklin Street		i.	SEESTOS CONTROL &	-
⊠ DCA		The second of the control of the control		fication # 1	City, State, Zip Code	7002		11073 1 3	A
x DOL		□ Emerge		ncluaing	Bloomfield, NJ 0	/003		And the second s	-
⊠ DEP		justific			Name of Contact	9	Telepho	one Number	
X DOH		□ Cancel	led		Jack Mc Grane				
				FACILITY INF					_
Name of Facility Where Abate	ement is Ta	king Place (3)			Type of Facility (4)				
Bloomfield College					School (K-12)				
Street Address					Subchapter 8 (other tha				
58 Spruce Street					Other (i.e. private & co				
City (5)	County (6	2)	County	Code (7)	Sq. Feet: 2,000 # 0	DI FIDOIS. 2	blug. Au	e. Sur years	
Bloomfield	Essex			Jse Only)	Current Use (prior if being	demolished)	Offices	\$	
Biodiffield	ESSEX		101010	200 0.1117	Current ose (prior it being	g demonstred)	. 011100	<u> </u>	
Name of Monitoring Firm Hire	d by Blda	Owner (8)	ASCM	No	Name of Contractor (9)				$\dashv$
EnviroVision, inc.	u by Diag.	OWNER (O)	2100111	110.				and the devilation of the decades and	- 1
100 m 2 m 2 m 3 m 3 m 3 m 3 m 3 m 3 m 3 m 3					GREENWOOD ABA	TEMENT C	ONSUL	TANTS, INC.	
Street Address					Street Address				
20-21 Wagaraw Road	i, Bldg #	‡ 35E			268 MAIN STREET				
City, State, Zip Code					City State, ZipCode				$\dashv$
Fairlawn, NJ 07410					Butler, NJ 07405				
Project Manager for Monitorin	ıq Firm	Telephone N	lumber		Telephone Number		License	Number	$\neg$
Fred Larson		973-636-9							
					973-492-0477		00840	8	_
Scheduled Start Date (10)		Scheduled C			Name of OSHA Monitor				
December 19, 2015		Decembe	er 27, 2	1015	EMSL Inc.				
Occupancy Status During A	batement	(Check only or	ne)		Street Address				
Facility Closed/Vaca				atement					
Abatement Performed					1056 Stelton Road				
Describe			70727		City, State, Zip Code				
Other - Describe: 12			at 5pm		Piscataway, NJ 088	54			
Every day after	start at	7am			1 iscataway, ivo ooc	.54			
									_
Source of Work (Check all that	at apply)					v Eull Con	tainment	with Negative Pressure	
≥ 3 sf or ≥ 3 l	f			Renovation			closure	, with Negative 1 ressure	
□≥ 160 sf or ≥ 2				Demolition		Tent /Glov		cedure	
<u>== 100 31 01 = 2</u>	200			Demontion				and Non-Friable Procedure	
Location of Asbestos-Contain		ocation Normal			pestos Containing Material	ing, (Speci	nt /	Abatement Type	
Material (ACM) in Facility (13)		ely by Maint./Cu ff? (12)	istodiai	VAT, or other mis	ial systems insulation, surfac	or LF)		Remove Repair Encap Enclos	se
	YE		NA	7711, 61 64161 11116	,				
Computer Lounge			X	Asbestos Te	xtured Paint	470	SF	X	
Name of Reg. Waste Hauler See Hauler Below # 1 &	2	NJDEP Was See Below		ID#	Cubic Yards of Waste:			of Registered Landfill  Dwfill Landfill	
Hauler #1) Greenwood	1924			- Butlor N I O	7405	Disposal Da		City, State	$\dashv$
NJ DEP # 12		iii Gollaulta	iiio, iii	Dutier, NJ U	1400			Route 2, Box 68	
Hauler #2) Newark Cart		Newsel NI	0.4500	NI DEP # 10551	2	Decembe	er 24,	Bridgeport, WVA 304-842-2784	
	ing, Inc.	- Mewalk, INJ	04307,	110 DEI # 17331		2015		304-042-2104	
Completed by (Print or Type)		<u>Title</u>		_	Signature		<u>Date</u>		
Marin Graure		SENIOR P		<i>i</i> 1	Marin Grau	re	Nove	mber 23, 2015	
		MANAGER	<b>t</b>			T-176			

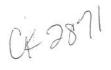
Check# 11920

### State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-15								L= L		La i	1 1
Date of Notification (1)  Novem	ber 23.	2015			Name of Building Owner/ORUTGERS, THE ST		ERSI	TY OF	NJ		
Agencies Notified  ■EPA ■ DCA	,	Notification Initial Amende	Notifica	Sept.	Street Address ENVIRONMENTAL H 27 ROAD 1, BLDG 4	IEALTH 8	SAF	ETY DI ON CA	EPT. MPUS	- Mindered	· · · · · · · · · · · · · · · · · · ·
☑ DOL ☑ DEP- No Longer REQUIR	RED	■ Emerg justific		ncluding	City, State, Zip Code PISCATAWAY, NJ 0			TOS CO	3	_ &	4.47.17.14
⊠ DOH		□ Cance			Name of Contact MICHAEL SMITH, EI HEALTH & SAFETY	NV.	Telep	hone Nur	nber	The said sections	
				FACILITY INF							
Name of Facility Where Abaten NJ HALL, BLDG# 3014		king Place (3)			Type of Facility (4) School (K-12) Subchapter 8 (other tha	n K 12)					
Street Address COLLEGE AVENUE C	AMPU	S			Other (i.e. private & con					ars	
City (5) NEW BRUNSWICK				Code (7) Jse Only)	Current Use (prior if being	demolished	: ACA	ADEMIC			
Name of Monitoring Firm Hired Cardno ATC	by Bldg.	Owner (8)	ASCM 0098		Name of Contractor (9)			. = =			
Ctroat Address	Address RRI LANE  tate, Zip Code LINGTON, NJ 08016 Manager for Monitoring Firm N KEARNY  Telep 609				GREENWOOD ABAT Street Address	EMENT C	UNSU	LIANI	S, INC		
3 TERRI LANE	LANE   Zip Code   GTON, NJ 08016   nager for Monitoring Firm   Telep   609				268 MAIN STREET						
City, State, Zip Code	116				City State, ZipCode BUTLER, NJ 07405	65					
Project Manager for Monitoring	November 23, 201  es Notified  A  A  D  P-No Longer REQUIRED  H  D  Facility Where Abatement is Taking FALL, BLDG# 3014  Address  LEGE AVENUE CAMPUS  BRUNSWICK  MIDDLES  Of Monitoring Firm Hired by Bldg. Owner  Ino ATC  Address  RRI LANE  Late, Zip Code  LINGTON, NJ 08016  Manager for Monitoring Firm  IN KEARNY  Lied Start Date (10)  1/15  Lied Start Date (10)  Ino ATC  Address  RRI LANE  Late, Zip Code  Lington, NJ 08016  Manager for Monitoring Firm  Lied Start Date (10)  Ino ATC  Address  RRI LANE  Late, Zip Code  Lington, NJ 08016  Manager for Monitoring Firm  Lied Start Date (10)  Ino ATC  Address  RRI LANE  Late, Zip Code  Lington, NJ 08016  Manager for Monitoring Firm  Late, Zip Code  Lington, NJ 08016  Manager for Monitoring Firm  Little Selection  Address  RRI LANE  Late, Zip Code  Lington, NJ 08016  Manager for Monitoring Firm  Late, Zip Code  Lington, NJ 08016  Manager for Monitoring Firm  Late, Zip Code  Lington, NJ 08016  Middle Selection  Address  RRI LANE  Late, Zip Code  Lington, NJ 08016  Middle Selection  Address  Late, Zip Code  Lington, NJ 08016  Middle Selection  Address  Lege Avenue Campus  Late, Zip Code  Lington, NJ 08016  Middle Selection  Address  Lege Avenue (Check all that apply)  Late, Zip Code  Lington, NJ 08016  Lington, NJ 08016  Address  Late, Zip Code  Lington, NJ 08016  Middle Selection  Address  Lege Avenue (Check all that apply)  Late, Zip Code  Lington, NJ 08016  Lington, NJ 08016  Middle Selection  Address  Lege Avenue (Check all that apply)  Late, Zip Code  Lington, NJ 08016  Lin		Number		Telephone Number		Licens	se Numbe	ŗ	Sa Li	
BRIAN KEARNY	State, Zip Code  LLINGTON, NJ 08016  It Manager for Monitoring Firm AN KEARNY  Suled Start Date (10) 1/15  Dancy Status During Abatement (Chec				973-492-0477		0084	10			
Scheduled Start Date (10) 12/11/15	Ate, Zip Code			n Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC						
Occupancy Status During Ab	atement	(Check only o	ne)		Street Address						
☐Facility Closed/Vacated Du	uring Enti	ire Period of A	batemen	t	20-21 WARGARAW F	ROAD					
Describe		T 00 D14	= 00 4		City, State, Zip Code						
LXIOther – Describe: Shift I		5:00 PM – 24 hours a			FAIRLAWN, NJ						
Scope of Work (Check all that	apply)				4-7-0				n 1909		
				-		Full Contain		vith Nega	tive Pre	ssure	
					-	Mini-Enclos Glovebag		UFA			
<u>⊠</u> ≥ 100 S101 ≥	200 II			■ Demontion		Non-Exempt			riable P	rocedu	ıre
Location of Asbestos-Containing		ocation Norma		Description of Asl	pestos Containing Material	Amour		Abatem	ent Type	2	
Material (ACM) in Facility (13)	35535	0.00	ustodiai	VAT, or other mis	nal systems insulation, surfacir cell.)	or LF)		Remove	Repair	Encap I	Enclose
	YE	1753	NA		- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	1000	0=	100		_	_
Rooms 202		X		VAT		1300	SF	X	-		-
	_		1			_			-	-	+
Name of Reg. Waste Hauler		NJDEP Was	I ste Haulei	r ID#	Cubic Yards of Waste:	15 CY	Name	of Regist	ered La	ndfill	
Name of Reg. Waste Hauler See Hauler Below #1 & 2  NJDEP Waste See Below					Ouble Tailes of Waste.		G.R.	O.W.S.	North	andf	ill
NJDEP # 28969 Hauler #2) Newark Cartin	ıg, Inc.,			NJ 07405		Disposal Da 12/14/15	ate .	1   F   1	00 New 00 New 00 Morr 9067 15-736-	Ford National Property of the	
Completed by (Print or Type)		Title			Signature		Date		13-130-	1700	
RAYMOND C. PEDAL	INO	SENIOR P		CT	Raymond C. Pea	lalino		Novem	ber 23	, 201	5

Copies To: Rutgers, REHS, Attn: Mike Smith



### State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

		(1	disami			rotor (2)				
ate of Notification (1)					Name of Building Owner/Ope Bloomfield College	erator (Z)	n n		p (60% etc.)	4 t t t t t t t t t t t t t t t t t t t
November 23, 2015		-				11	F	. ~	200	variety.
gencies Notified	Notific	cation Tyr	<u>pe</u> Notificat	tion	Street Address 467 Franklin Street				- 4077	
E EDA		mended	Certifica	ition	City, State, Zip Code		LCES	370S C	TOUTROL	St
⊠ EPA ⊠ DCA			ncy (inclu		Bloomfield, NJ 070	03		1.00		1.40
	11	ustificati	ion)	- F	Name of Contact		Felephone	NHMNE	·	
X DOL X DEP		ancelle			Jack Mc Grane					
X DOH		ancelle	u	FACILITY INFO						
		(0)		FACILITY INFO	Type of Facility (4)					
Name of Facility Where Abatement	is Taking Pla	ice (3)		1	☐ School (K-12)					
Bloomfield College					Subchanter 8 (other than h	(-12)				
Street Address		Settlember			au (iusta 9 comm	nercial building	gs, homes	, etc.)	V00.50	
58 Spruce Street					Sq. Feet: 2,000 # of	Floors: 2 B	ldg. Age:	50+	years	
	atu (G)		County Co	ode (7)						
CILV (3)	nty (6) sex		(State Use	e Only)	Current Use (prior if being of	demolished):	Offices			
	old- Owner	(8)	ASCM No		Name of Contractor (9)					
Name of Monitoring Firm Hired by	olug. Owner	701			GREENWOOD ABATE	EMENT CO	NSULT	ANTS.	INC.	
EnviroVision, inc.					GREENWOOD ABATI	-MILITI OC				
Street Address					Street Address					
20-21 Wagaraw Road, B	dg # 35E	Ĺ			268 MAIN STREET					
			*		City State, ZipCode					
City, State, Zip Code					Butler, NJ 07405		License N	Number		
Fairlawn, NJ 07410	m I Told	ephone Nu	umber		Telephone Number		License I	<u>vurriber</u>		
Project Manager for Monitoring Fire	97	3-636-9	145		270 400 0477		00840			
Fred Larson					973-492-0477 Name of OSHA Monitor					
Scheduled Start Date (10)	Sch	neduled C	ompletion	Date (11)	Name of OSTIA Worker					
December 15, 2015	De	ecembe	er 24, 20	115	EMSL Inc.					
		ok only or	ne)		Street Address					
Occupancy Status During Abate Facility Closed/Vacated	During En	tire Peric	nd of Aba	tement	tone Otalian Dood					
Abatement Performed Or	itside of No	rmal Faci	lity Hours	=	1056 Stelton Road City, State, Zip Code					
Describe			1000		City, State, Zip Code					
Other – Describe:					Piscataway, NJ 088	54				
Cuio, E					1. 1553.500 1.1					
Source of Work (Check all that a	oply)					x Full Con	tainment	with Ne	egative Pre	ssure
godice of view				Renovatio	n	Mini-E	nclosure			
≥ 3 sf or ≥ 3 lf				Demolition		Tent /Glov	vebag Pro	cedure		
□ ≥ 160 sf or ≥ 260				Demonition	,	Non-Exen	npted (*) a	and Non-	-Friable Pro	ceaure
						Amou	int	Abateme	ent Type	
Location of Asbestos-Containing	Is Locati	ion Norma	ally Used	Description of A	Asbestos Containing Material rmal systems insulation, surfac		" OF	A	Repair Enca	n Enclo
Material (ACM) in Facility (13)	Solely b	y Maint./C	ustodial	(ACM) (i.e. the VAT, or other n	inscell.)	or LF		Remove	Repail Linea	D Liloio
	Staff? (1 YES	12) NO	NA	VAI, or outer in				527		$\neg T$
	123	T	X	Asbestos	Textured Paint	470	SF	X		
Computer Lounge		1					- L NI	of Dogist	tered Landfil	
	I N	LIDEP Wa	aste Hauler	r ID#	Cubic Yards of Waste:		Mand	or Regist lowfill La	andfill	÷
Name of Reg. Waste Hauler See Hauler Below # 1 & 2	S	See Belo	W		20	I Discussi D			City, State	
Hauler #1) Greenwood A	actomont	Consult	ants. In	c Butler, N.	J 07405	Disposal D	alt	F	Route 2, Box	68
Hauler #1) Greenwood A	Jatement	Jonath	,,			Decemb	ber 24.		Bridgeport, V	
			TT 0.4500	N.I. DEP # 195	51	2015		3	304-842-278	7
NJ DEP # 125	ol a Ina Ni	owark N	V. 1 1166 7117							
NJ DEP # 125 Hauler #2) Newark Cartin	g, Inc. – N	ewark, N	VJ 04302,	110 222	Cianature		Date		1151 6 11 11 11 11 11 11 11 11 11 11 11 11	
Hauler #2) Newark Cartin	g, Inc. – N	е			Signature		Date Nove	ember	23, 2015	5
NJ DEP # 125 Hauler #2) Newark Cartin Completed by (Print or Type) Marin Graure	g, Inc. – N	е	PROJE		Signature Maria Grad		Nove	ember	23, 2015	5

CK 337

	1			to NJAC 8:6			٢ 	NEG		l V		5
Date of Notification (1)		П		f Building Ow		(2)					STATE OF THE PARTY	
10/20/2015				Queen City	Realty			<u>lli</u> DE	C 1	e ne	-	
Agencies Notified Type Notification			Street A	ddress ark Ave				<u>u                                    </u>		don he		Kaese
EPA Initial Amended		-		ite, Zip Code			ķ.	40000	T called a service of		P.A. THERESA	
DEP Amended Amendment	#			Plains NJ (	07076		ţ	ASEES	ros cr	MTR B	CLA	
DOH Emergency (	including			f Contact			hone	Telephone I	Number	* * * * * * * * * * * * * * * * * * *	- This bide	<del></del>
DCA Cancellation			Bill Fla	ag								
			FACI	LITY INFORI	MATION							
Name of Facility Where Abatement is Taking	g Place (3	3)				Тур	e of Facility (4	)				
Private Property Street Address							School (K-12		( 10)			
444 Frankin Street						H		(Other than k		ildings	, home	es,
						-	etc.)			35300		
City (5) Elizabeth NJ						165	are Feet	# of Floors		Bldg. / +50	Age	
County (6)			County (	Code (7)		8,002.00	rent Use (Prior			130		
Clerk County				USE ONLY) _		Oui	16/11 036 (1 1101	ii being deme	nisrieu)			
Name of Monitoring Firm Hired by Building (	Owner (8)	)	ASCN	l No.	Name	of Ab	atement Cont	ractor (9)				
N/A			N/A		Dina	go E	nvironment	LLC				
Street Address					Street							
N/A							yette St					
City, State, Zip Code							Zip Code					
N/A			=				NJ 07015					
Project Manager for Monitoring Firm N/A			Telephoi N/A	ne No.	Telepi		No. ·0877	License 01240				
Start Date (10)	Schedul	ed Cor		Date (11)			SHA Monitor	01240				
11/30/2015	12/11/		ilbiedoli	Date (11)			ironmental (	Corp				
Occupancy Status During Abatement (Chec					Street							
			nent		2333	Ro	ute 22 West					
Abatement Performed Outside of Norm					City, S	State,	Zip Code					
Other – Describe:					Unio	n N.	J 07083					
Scope of Work (Check All That Apply)												
23 sf or ≥3 lf		Renova			2		ull Containmer	nt with Negativ	e Press	ure		
≥160 sf or ≥260 lf		Demolif	tion				lini-Enclosure llovebag Proce	dure				
						] N	on-Exempted	(*) and Non-Fr	riable Pr	ocedu	re	
	1,300	Locati	17.5							12.50 TO 12.50	ement ype	
Location of		Normal ed Sole			Description			100		Τ'	ype	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intena	nce/		Containing N ermal system			Amount (Specify	Z,		Enc	m
In Facility (13)	Cus	todial 3 (12)		5	surfacing, VA	T, or		SF or LF)	Remova	Repair	aps	Enclosure
(13)			T	) OL	ner miscellar	ieous	)		va	=	Encapsulate	ure
	Yes	No	N/A								"	
Interior/kitchen	-		Х		walls plas	ter		450SF	Х			
								- 12				
Name of Registered Waste Hauler		5.55	IJDEP W lauler ID		ubic Yards f Waste		Name of R	egistered Land	dfill			49-20-27
Newark Carting Inc		2.00	4509				ISES Be	thleham lan	ndfill			
City, State				D	isposal Date		City, State					
Po Box 5670 Newark NJ 07105							2335 Ap	olébutter rd	Bethle	hem	PA	
Completed by	Title				Signature	9	20/2		Date			
Carlos Gomes	Presi	ident			-		My		10/10/	2015	i	

### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

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

										11 11-		-	L.		-			
Date of Notification (1)	November 25, 2015						Owner/Oper EHM	rator (2) Builde			DE	$\mathcal{C}$	8	Y 8	4			
Agencies Notified  [ X ] EPA  [ ] DEP  [ X ] DOL	Amer	Notificated Notated Notificated Notated Notate	rification			Address tate, Zip Cod	le	Crocus	Lane 08759		-32E3	1031	0.0	TOL	ů.			
[ ] DOH	justifi	gency (nation) ellation	ncluding		Name o	Name of Contact Telephone Number Sam Reynolds							r					
				FAG	CILITY	INFORM	ATION											
Name of Facility Where Ab	Type of Facility (4)						School (k-12)											
Street Address 25 I		[ ] Subchapter 8 (c [ X ] Other (i.e., priv homes, etc.)						ther than k-12) ate & commercial buildings,										
City County (6)						Code (7) E USE ONLY	# of Flo	# of Floors Bldg. Age										
Kingston	Kingston Somerset					002 0112	ONLY) 10,000 sf 2 100  Current Use (Prior if being demolished)  Former School											
Name of Monitoring Firm Hired by Building Owner (8)  Guardian Contracting, Inc.						No.	Name of	Abatem	ent Contracto	r (9) lian Contra	octing	Inc						
Street Address			Street A	ddress		n=0 15 6=00 100		IIIC.										
City, State, Zip Code			1889 Route 9, Unit 61 City, State, Zip Code															
Ton			T 1 1	27 1				sey 08755-1271 Number										
Project Manager for Monitoring Firm Telephone Number Nicholas Fernicola 732-349-9932							Telephor 732-34				icense Ni 0624	umber						
Scheduled Start Date (10)         Scheduled Complet           11/27/15         12/4/15						(11)	Name of	OSHA!		S.L. Analyt	tical							
[ ] Abat	batement (Check of ity Closed/Vacated ement Performed ( r – Describe	l During	Entire Po			Street Address  1056 Stelton Road  City, State, Zip Code  Piscataway, New Jersey 08854												
	nat apply)  for ≥3 lf  sf or ≥260 lf		[x]	Renov Demo														
										T		Abat	ement '	Гуре				
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)  Is Location Normally used Solely by Maintenance/Custodial Staff (12)  YES NO N/A					1	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amoun (Specify or LF)						R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E			
Cafeteria storage roon	1		X		Asbe	estos pipe	insulatio	on		30 lf		Х						
Tunnel			X		Bree	ching insu	ılation			150 sf		X						
Tunnel			Х		Pipe	insulation	1			200 lf		Х						
													272					
	Hauler ntracting, Inc.		NJDEP V	/aste Haule		Cubic Ya	rds of Was		lame of Regis T.R.R.F.	tered Landfil	1							
City, State Toms River,		TOTAL		12/7			City, St Tullyt		Pennsylvan	ia		Det						
Completed by (Print or Type Nicholas Ferr		Title Proje	ect Man	ager	Signa	inite .	idad					Date 11/25/2015						

#### NOTIFICATION OF ASBESTOS ABATEMENT MO#23037712514 (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) 27 / 15 11 / Nancy Faulks Street Address Type Notification Agencies Notified ☐ EPA X Initial 216 East 6th Avenue ☑ DOLWD ☐ Amended City, State, Zip Code Amendment # **⊠** DHSS Roselle, NJ 07203 Emergency (including ☐ DCA Telephone Number Name of Contact justification) (NJAC 5:23-8) Cancellation Nancy Faulks FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Private house Subchapter 8 (Other than K-1 2) Other (i.e., private and commercial buildings, Street Address homes, etc.) 216 East 6th Avenue Square Feet # of Floors Bldg. Age City (5) Roselle, NJ 07203 County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Union Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01127 973-638-1777 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 12 / 08 / 15 12 / 07 / 15 Envirovision Consultants, Inc Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_\_AM-\_\_\_PM/\_ Fair Lawn, NJ 07410 Clean up and decontamination with negative pressure Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure >3 sf or >3 lf 2 160 sf or 2260 lf Renovation Glovebag Procedure Tent with Negative Pressure Demolition Non-Exempted (\*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Location of Encapsulate Repair Remova Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? SIF or LF) surfacing, VAT, or IN Facility (12)other miscellaneous) (13)No N/A Yes X 250 LF Pipe insulation Basement NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Name of Registered Waste Hauler T.R.R.F. Inc 0033785 TBD Gr Tech LLC City, State Disposal Date City, State Tullytown, PA TBD Wayne, NJ 07470 Date Title Signature Completed By (Print or Type) 11/27/2015 Owner N.Jevtic

State of New Jersey

## NO CX

			LAL	f D	ildina Ou	mariOn	orator (	2)			Dil							
Date of Notification (1) November 25th, 20		Name of Building Owner/Operator (2) City of Clifton  DEC 1 2015											015					
Agencies Notified	Type Notification		1000	reet Add	ress on Ave.					Discount of July	1			2.5				
EPA DEP DOL	☐ Initial ☐ Amended ☐ Amendment #				, Zip Code New Jers		7013			i.		SEES	C15	CLAS Design	3			
■ DOH DCA	Emergency (in justification) Cancellation	cluding	10.000	ame of C lichael	Contact Lardner			N.		Telep	ohone Nu	umber						
				FACILI	TY INFOR	MATIO												
Name of Facility Where A City of Clifton Street Address	Abatement is Taking	Place (3)		Type of Facility (4)  School (K-12)  Subchapter 8 (Other than K-12)										uildings homes				
1232 Main Street				Other (i.e. private & commercial buildings, homes, etc.)  Square Feet # of Floors Bldg. Age											es,			
City (5) Clifton,				9000 2								5	50+					
County (6) Passaic				County Co		Recreation Center												
Name of Monitoring Firm EHI, INC,	n Hired by Building O	wner (8)		ASCM	No.			me of Abatement Contractor (9) avco Construction Inc.										
Street Address 655 West Shore Tr	lie						Address Getty A											
City, State, Zip Code						Clifto	tate, Zip	Code v Jersey	0701	1-1802								
Sparta, New Jersey Project Manager for Mo		elephon			Teleph	one No.			License	No.								
Mr. Bill Kerbel Start Date (10)		pletion D	9-5649 Date (11)		Name		A Monitor		00724									
12/7/15	5					Address	struction	Inc.										
Occupancy Status Durin				92				Getty A										
Abatement Perform	cated During Entire P med Outside of Norm Mnday-Friday 7:00an	al Facility	Hours	ent		_	City, State, Zip Code Clifton, New Jersey 07011-1802											
Scope of Work (Check	All That Apply)							92										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf				nolition Mini-Enclosure Glovebag Proce														
								14011	LXCIIIptou	()		Abatement						
		1	Locati Iormali	55		D-							Туре					
Asbestos-Containin TO BE Al In Fac	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)					os Con thermal surfa	Description of ontaining Material (ACM) ontaining Material (ACM) on all systems insulation, facing, VAT, or or miscellaneous)				mount Specify or LF)	Removal	ixopan	Encapsulate	Enclosure			
Boiler F	Room	Yes	No	N/A	Pip	e Insi	ulation	& Fitti	ng	2	71LF	x						
Boiler I		X					r Bree				26SF	х						
Basement B		х				Boi	ler Ga	sket	"		4LF	x	-		-			
									Name of	Docis*	orod I on	odfill						
Name of Registered W Slavco Constructio			H	JDEP W lauler ID 8508		of Wa			G.R.O.									
City, State Clifton, New Jersey		Disposal Date City, State TBD Morrisvil						Pa										
Completed by	y 0101111002	Title	e Ma	nager		100000000000000000000000000000000000000	Signatur		140		11.5	Date 11/25	/15					
Vivian D. Jurcevic	o ivid	nagoi			VIII	uen	much Defuluic 11/25/15											

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< (	Chec	k #5	560	1	2015	

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Date of Notification (1) November 19, 201	5			Name of Building Owner/Operator (2) City of Clifton  Street Address  ASSESTES CONTROL										J.			
Agencies Notified	Type Notification				Address Clifton Av	/e.	-				ASSE	LICE		0 <del>1/1</del> 2/3	ROL	- 2	
	Amended Amendmen	t #			ate, Zip C												
☑ DOH ☑ DCA	iustification) Cancellation		3		of Contact nel Lardr		154			1	Telephone	Numbe	r				
				FAC	ILITY INF	ORMAT	ION	ACAS SHI									
Name of Facility Where City of Clifton	Abatement is Takir	ng Place (	(3)					Туре	of Facility School (K-	33050							
Street Address 1232 Main Street							Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)										
City (5) Clifton					į.			Squa 900	re Feet	2	of Floors		BI 50	dg. A	ge		
County (6) Passaic				County Code (7) (STATE USE ONLY)					Current Use (Prior if being demolished)								
Name of Monitoring Firm EHI, Inc.	ASCI	M No.		(1) (1) (1) (1) (1) (1) (1) (1)		atement Co											
Street Address 655 West Shore Tra				***************************************	et Address Getty Ave.												
City, State, Zip Code Sparta, New Jersey					ate, Zip Code I, New Jersey 07011-1802												
Project Manager for Mon Mr. Bill Kerbel		Telepho 973-72	ne No. 29-5649		Teleph 973-				License 00724								
Start Date (10) 11/30/15	ed Cor	npletion	Date (11)	7.5			HA Monitor		).								
Occupancy Status During							Street		75.00 mm								
Facility Closed/Vaca Abatement Performe Other – Describe:	ed Outside of Norm	al Facility	/ Hours	nent		_	City, State, Zip Code Clifton, New Jersey 07011-1802										
Scope of Work (Check Al	That Apply)	7.5					-100.00		- F	52.0							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Torreston 1	Renova Demolit		1	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non Exampled (*) and Non Eriable Procedure											
		le	Locati	00			-	Non-Exempted (*) and Non-Friable Procedure  Abatement									
Location Asbestos-Containing		Use	Normal d Sole	ly ly by	Ashesi	Des	scription		(ACM)		Amount	-	Т	Ту			
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Used St Mainter Custodia (12)				Staff?		thermal surfac		insula T, or						Repair	Encapsulate	Enclosure	
Boiler Ro	om	Yes	No	N/A	Din	e Insul	otion 9	) E:##	200		184LF		+		O		
Boiler Ro	· · · · · · · · · · · · · · · · · · ·	X			Pip		Breec		ngs		26SF	x	+		_		
Basement Boil	er Room	X				10.000.000.000	er Gas				4LF	· x	+				
Name of Registered Wast Slavco Construction I			H	JDEP W auler ID 3508		of Was			100000000000000000000000000000000000000		tered Land Landfill	dfill					
City, State Clifton, New Jersey 07011-1802							al Date		City, Stat Morrisv		Pa						
Completed by Title							gnature	•	WIOIII3V	ilio, i		Date	0			_	
Vivian D. Jurcevic Office Manager					54	12	lucio	ma	The	cu	uc	11/19	/15	5			

HMENdMen T #1

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

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NO CT		(1	Pursual	nt to NJA	C 8:60 ar	d 12:12	20)	N I			n r	,n	4			
Date of Notification (1) Nov 16, 2015	6			of Buildin							DE	U		Air		
Agencies Notified Type Notification	n			Address Stelton	Poad					<u> </u>	E G	TH'S	66	77.		
EPA Initial Amended Amendmen	ıt#_/		City, S	State, Zip ( ataway,	Code	354						1.		٦		
DOH Emergency justification Cancellatio	)	1	Name	of Contact	t		Telephone Number									
Name of English When Abstances in Table	- Di - /	0)	FA	CILITY IN	FORMAT	TON	_					:				
Name of Facility Where Abatement is Taki Former Beachwood Plaza Mall	ng Place (	3)					Ту	pe of Facility School (K-								
Street Address 46 US Rt9 (Atlantic City Bouleva	rd )				er 8 (Other	c) 3 (Other than K-12) ivate & commercial buildings, homes,										
City (5) Berkeley						1 2	etc.) uare Feet 60,000	# of F	oors		Bldg.	Age				
County (6) Ocean				y Code (7) EUSE ONL			Cu	rrent Use (Pr	ior if being	or if being demolished)						
Name of Monitoring Firm Hired by Building N/A	)	ASC N/A	M No.	ntractor (9)												
Street Address N/A				DAS Industrial, LLC Street Address 21 Pine Street, Suite 112									-			
City, State, Zip Code N/A		City, State, Zip Code Rockaway, NJ 07866														
Project Manager for Monitoring Firm N/A		Teleph N/A	one No.		Telep	hone		· L	icense N	10.						
Start Date (10) Dec. 7 2015							of O	SHA Monitor ustrial, LL(		1200						
Occupancy Status During Abatement (Cher	k Only Or	ne)				Street	t Addı	ress								
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of A	Abater Houn	City, State, Zip Code													
Scope of Work (Check All That Apply)						Roc	kawa	ay, NJ 078	366							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	province of the last of the la	Renova Demolif					_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	ls	Locati	ion					- Dichipte	a ( ) and N	UI-FIIAL	Ne Pro		emen	t		
Location of Asbestos-Containing Material (ACM)	10 (CHONES DES)	lormal d Sole		Ashau	Des	scription	of				-	Ty	/pe	_		
TO BE ABATED In Facility (13)		intenal odial S (12)		(i.e	. thermal surfac	system: sing, VA niscellar	s insu T, or		Amor (Spec SF or	žfy	Removal	Repair	Encapsulate	Enclosure		
	Yes	No	N/A								=		ate	re e		
Shopping Plaza Stores			X	Roofing	g & Roo	of Flas	hing	Material	85,00	0 sf	X					
N. Co.																
Name of Registered Waste Hauler Newark Carting, Inc.			JDEP Wauler ID	-	Cubic \ of Was				Registered	Landfill						
City, State			509		400		G.R.O.W.S									
Newark, New Jersey					Disposa Dec 3		9	City, State Morrisvi								
Completed by	Title Presid					gnature			11	Dat						
Vincent Manganiello				11/1	100	ad save	DET)	10000000	e /16/1	5						

ASB-41 (R-06-08)

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

Charise of Start DAte



# Emergency	χN			OF ASBE NJAC 8				0	KE	59	3	4		4 5 5	1			
Date of Notification (1) 11/26/15				Building C Adair P				J. K.		DEC			-					
Agencies Notified Type Notification			Street Ad 8556 R	dress ogers A	venue	)		A Part of the second se		DEC		<b>4</b> U4	Ų	-				
EPA Initial Amended Amendment #				e, Zip Cod luken , l		109		B. A. C.	ASE	ESTOS	ios/	173	IOL	å	-			
Emergency (in justification)  DCA  Emergency (in justification)  Cancellation	cluding		lame of	Contact				دفت فمين خ	Teler	Telephone Number								
			FACIL	ITY INFO	RMATI	ON			•			-						
Name of Facility Where Abatement is Taking Francis Adair Private Home	Place (3)	)	Type of Facility (4)  School (K-12)															
Street Address 6556 Rogers Avenue						Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)												
City (5) Pennsauken , NJ 08109							Square Feet # of Floors Bldg. Age 1000+ 2 35+							je				
County (6) camden			County Code (7) (STATE USE ONLY)					nt Use (Prio	r if bein	g demoli	shed)							
Name of Monitoring Firm Hired by Building Ov N/A		The state of the s					ne of Abatement Contractor (9)											
Street Address					ss 29													
City, State, Zip Code			City, State, Zip Code West Berlin NJ 08091															
Project Manager for Monitoring Firm		Telephor	ne No.		100	none No 753-9			License 00727	No.	7							
	ed Com	pletion [	Date (11)		Name Sam		A Monitor	1										
Occupancy Status During Abatement (Check						Addres	SS			_				_				
Facility Closed/Vacated During Entire Pe																		
Abatement Performed Outside of Norma Other – Describe: Home owner will be H	I Facility	Hours	- CIT			City, State, Zip Code												
Scope of Work (Check All That Apply)																		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovat Demoliti								9								
	le	Locati	on		ALEXA TO S	Non-Exempted () and Non-Ynasie III						Abate	ment					
Location of	1	Vormall	ly		De	escription	n of				-	_	Ту	pe				
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	ed Sole intenar todial S (12)	nce/		tos Cor therma surfa	ntaining I al system acing, V/ miscella	Materia ns insula AT, or	ation,	(S	mount specify or LF)	Kelliova	Damousl	Repair	Encapsulate	Enclosure			
	Yes	No	N/A															
Basement			X		Floor	Tile / r	mastic	:	65	50 SF	x	-						
	-									10 10 10 10 10	+	$\dashv$	_					
	-										+	+						
	L,			1			Name of	Danista	red Lend	IEII								
Name of Registered Waste Hauler United Containers		Н	IJDEP W lauler ID 2459		of Wa	c Yards aste		G.R.O.		red Land	11111							
City, State Elm NJ			Disposal Da 12/2/15					City, Stat Morrisv		19067	7							
Completed by Anthony T Perna President							Signature Date 11/26/15											

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) MO#23037713831 Name of Building Owner/Operator (2) Date of Notification (1) 28 / 15 11 / Pauline Caroll Type Notification Street Address Agencies Notified □ EPA X Initial 19 Princeton Place ☐ Amended **⊠** DOLWD City, State, Zip Code Amendment # X DHSS Glen Rock, NJ 07452 Emergency (including DCA Telephone Number Name of Contact justification) (NJAC 5:23-8) Cancellation Pauline Caroll FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Private house Subchapter 8 (Other than K-1 2) Other (i.e., private and commercial buildings. Street Address homes, etc.) 19 Princeton Place # of Floors Bldg. Age Square Feet City (5) Glen Rock, NJ 07452 County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Bergen Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 01127 973-638-1777 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 12 / 09 / 15 12 / 08 / 15 Envirovision Consultants, Inc Street Address Occupancy Status During Abatement (Check only one) X Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_AM-\_\_\_PM/ PM\_ AM Fair Lawn, NJ 07410 Clean up and decontamination with negative pressure Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure >3 sf or >3 lf |> 160 sf or >260 lf ■ Renovation Glovebag Procedure Tent with Negative Pressure Non-Exempted (\*) and Non-Friable Procedure Demolition Abatement Type Is Location Normally Description of Repair Encapsulate Location of Removal Used Solely by Amount Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, Maintenance/ (Specify TO BE ABATED Custodial Staff? SIF or LF) surfacing, VAT, or IN Facility (12)other miscellaneous) (13)Yes No N/A 110 LF X Pipe insulation Basement X 24 SF X Boiler insulation Basement П Cubic Yards of Waste Name of Registered Landfill NJDEP Waste Hauler ID No. Name of Registered Waste Hauler T.R.R.F. Inc TBD 0033785 Gr Tech LLC City, State Disposal Date City, State Tullytown, PA TBD Wayne, NJ 07470 Date Signature Title Completed By (Print or Type)

Owner

Tente Wenad

11/28/2015