State of New Jersey
PATIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)
(Check 1157)

Date of Notification (1)					Name	of Buildin	g Ov	wner/Operator (2)							
11/29	_ / _	17	_		Cit	y of Cam	den	1		MEGI	5 1	W	E	F		
Agencies Notified Type	e Notifica	ition			Stree	t Address					5 1	U		111		
⊠ EPA □ Ir	nitial				PO	Box 951	20									
	mended				City, S	State, Zip (Code	9		HI II DEC	-1	201	7	$\parallel \cup$		
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	Cancellati				Jar	nes Rizzo	0		33	A OBBORRA		MITD	8 . ا	L		
					FA	CILITY IN	IFO	RMATION	10/2		NAME OF TAXABLE PARTY.					
Name of Facility Where Abater	ment is Ta	aking	Place	(3)					Type of Facility	(4)						
1820 FILMORE STREET	STRUC	TUR	E						☐ School (K-1	2)						
Street Address									☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings,							
1820 FILMORE STREET	STRUC	CTUR	E						homes, etc.							
City (5)									Square Feet	# of Floors	BI	Bldg. Age				
Camden									varies	varies						
County (6)		Cour	nty Code (7	')(ST	ATE USE ONLY)	Current Use (P	rior if being demolis	shed)								
CAMDEN						HOUSING	DEEMED UNSAF	E								
Name of Monitoring Firm Hired	by Build	ling Ov	vner (8	3)	ASCM	No.	Na	ame of Abateme	ent Contractor (9	9)						
100							1	Controlled Er	nvironmental	Systems						
Street Address							St	reet Address								
							1	1121 N. Bethl	ehem Pike - S	Suite 60						
City, State, Zip Code							Cit	ty, State, Zip Co	ode							
							1	Spring House								
Project Manager for Monitoring	Firm			Tel	ephone	No.	Те	elephone No.		License No.						
							1	215 542 7000		00847						
Start Date (10)	- 83				etion Da	22	Na	ame of OSHA M	onitor							
11 /30 /17	_	_ 1	_ /	3	1_ / .	18	(CES								
Occupancy Status During Abat							Str	reet Address								
☐ Facility Closed/Vacated Dur							1	1121 N Bethle	ehem Pike -Su	uite 60						
Abatement Performed Outsi Time of Abatement: 7:00AM	ide of No	rmal F	acility	Hou	rs - Des	cribe	Cit	ty, State, Zip Co	ode							
		101/		_												
Scope of Work (Check all that a	apply)							П г.: II Сt	-1							
≥3 sf or ≥3 lf		[Rer	iova	ion			☐ Full Conta								
≥160 sf or ≥260 lf		Ī	☑ Der	noliti	on			Glovebag	Procedure							
						T										
Location of				Loca				Description of	£		Ab	atem		ype		
Asbestos-Containing Materi	ial (ACM))	Used	So	ely by	Asbe	stos	Containing Mat		Amount	Rer	Repair	Enc	Enc		
TO BE ABATED IN Facility					ance/ Staff?	(i.e		ermal systems i		(Specify	Removal	air.	aps	Enclosure		
(13)		L		(12				surfacing, VAT, ther miscellaned		SF or LF)	<u>n</u>		Encapsulate	тe		
\$ 18			Yes	No	N/A								Ф			
See Attached Notice of Ha	azard				\boxtimes	See Att	ach	ed Notice of	Hazard	200 YD per res						
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				200						1	1	닏				
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Name of Registered Waste Hau				1 7	NJDEP \	Policy In the Control of the Control	10075-5555	bic Yards of		stered Landfill		,				
Waste Management of N	IJ			'	lauler II			aste 200/residenc	GROWS							
City, State					sposal Date	City, State										
Fairless Hills, PA				1	1/31/18	Tullytown	own PA									
Completed By (Print or Type)		Title						Signature	1/	Da	ite i	i		\neg		
Patricia Visco		Off	ice N	lana	ger			Patrice	ca) Meso	er 1	1/2	47 /-	201	7		
ACD 44			-				-	HUUVUU	Local de la		1		0	t.		

CK 2374	P			IFIC	ATIQ ursua	nt to NJ	AC	STOS ABA 8:60 and 5:	16)		G DEC	<u>E</u>		M 017	E	
Date of Notification (1)		-						wner/Operator	(2)		ULU] [1	
11/28	8 / -	17	_		Mi	ddlesex	Cou	nty College				-	Territoria.			
F7	pe Notific	ation			Stree	et Address	-			ASB	ESTO	SC	ONT	RO	- &ı	
F	Initial Amended	4			26	00 Wood	brid	ge Avenue			LIUE	145	IIVG	- males	-Vince	
⊠ DOH	Amendm	77			City,	State, Zip	Code	9								
□ DCA □	Emergen			g	Ed	lison, NJ	088	18								
(NJAC 5:23-8)	justificati	on)		2 8		e of Conta				Telephone	Numbe	г				
	Cancellat	tion			Do	nald Dro	st, .	Jr.								
Name of Facility and					FA	CILITY	NFO	RMATION								
Name of Facility Where Abat	ement is T	Taking	Place	(3)					Type of Facility	(4)						
Old Studio Theater									School (K-1							
Street Address									8 (Other than private and con	K-12) nmercia	al bu	ildino	s			
2600 Woodbridge Aver City (5)	nue								homes, etc.	.)				٠,		
Edison									Square Feet	# of Floors	3	Blo	dg. A	ge		
County (6)					Low	-1-0-1-1	71/07	475 HOT OHILL								
Middlesex					Cou	nty Code (7)(\$17	ATE USE ONLY)	Current Use (P	rior if being der	molishe	d)				
Name of Monitoring Firm Hire	ed by Build	dina O	Amor	/Q\	ASCM	No	l Ma		1							
Bio Terra Solutions	o by build	iling O	WHE	(0)	ASCIVI	NO.	- 12		ent Contractor (9							
Street Address																
P.O. Box 1224								eet Address	¥							
City, State, Zip Code								27 Outwater								
Union, NJ								y, State, Zip C								
Project Manager for Monitorin	na Firm			Tele	phone	No	_	Garfield, NJ lephone No.	07026	11: 11						
Rick Estaquio					20	-3762	1 200	73-928-488	,	License No	0.					
Start Date (10)	Is	chedu	led C			ite (11)		me of OSHA		1188						
11 /29 /1	7				2_ /		1000000		NAGEMENT L	10						
Occupancy Status During Aba	atement (C							eet Address	WAOLINLINI L							
☐ Facility Closed/Vacated Du	uring Entir	e Perio	od of	Abate	ment			7 Outwater	Lano							
☐ Abatement Performed Out	side of No	rmal F	acilit	V Hour	s - Des	scribe		y, State, Zip C								
Time of Abatement:	_AM	PM/		_PM-		AM	1 .	arfield, NJ								
Scope of Work (Check all that	t apply)							zarriola, ito	07020						-0.5	
≥3 sf or ≥3 lf≥160 sf or ≥260 lf				novati molitic				☐ Mini-End	tainment with Neg closure g Procedure empted (*) and No							
-			2.7	Locat							7-0.0	Ah	ateme	nt T	vne	
Location of Asbestos-Containing Mate	rial (ACM			Norma d Sole		A-1	-4	Description of		0000000 in 1944	-					
TO BE ABATED	Mai (ACIVI)	'	Ma	intena	nce/	Asbe (i.e	stos the	Containing Ma rmal systems	iterial (ACM) insulation	Amount (Specify		Removal	Repair	Encapsulate	Enclosure	
IN Facility (13)			Cust	todial (12)	Staff?		5	surfacing, VAT	, or	SF or LF))	oval	₹.	nsd	Sur	
(13)			Yes	No	N/A	1	ot	her miscellane	ous)					late	Ф	
Old Studio Theater						Wet De	mo									
	L L Met bello											X	븨	ᆜ		
			100										Ш	Ц		
		1														
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Name of Registered Waste Ha	auler				JDEP \		10000000	oic Yards of	Name of Regis	stered Landfill				-74		
Caravella Demolition				H	auler II 10943		Wa	ste s Needed	Waste Mar	nagement						
City, State							Disposal Date City, State									
East Hanover							Т	BD	Tullytown,	NJ						
Completed By (Print or Type)		Title						Signature			Date			8.5		
Allen Monchik		Pro	ject	Mana	ager				Maushi	6.		201	17			
CD 11								lanager Allen Monchik 11/28/17								

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

Date of Notification (1)					Name	of Buildin	a Ow	ner/Operator (2)	111	11	050				- 11	
11/07	_					ty College	14		DEC	-	1 2	017					
Agencies Notified Type	e Notifica	ation			Street	Address			-						+		
⊠ EPA □ In							orido	e Avenue			ASB	EST	OS C	ONT	ROI	2	
☑ DOLWD ☑ A	mended					State, Zip (C Avenue		-	of Original Principles	Lic	ENS	ING	1102	α	
	mendme	_	-			son, NJ		0					A stranger of the second	- Communication	-	TATOM	
	mergen		cluding		07010000	of Contac	000000000000000000000000000000000000000	0		1-							
	ustificatio Cancellati	10.5					-			le	lephone	Numb	er				
	ancenau	1011			וסט	nald Dros	st, Ji	:									
					FA	CILITY IN	IFOF	RMATION							***		
Name of Facility Where Abaten	nent is T	aking	Place	(3)					Type of Facility								
Old Studio Theater									School (K-1)	2)							
Street Address										8 (Other than K-12) private and commercial buildings,							
2600 Woodbridge Avenu	ne								homes, etc.						-,		
City (5)									Square Feet	#	of Floors	3	Ble	dg. A	ge		
Edison																	
County (6)					Cour	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	rior if	being de	molish	ed)				
Middlesex								8		93		7.6					
Name of Monitoring Firm Hired	8)	ASCM	No.	Nar	ne of Abateme	ent Contractor (9))						\neg				
Bio Terra Solutions						A	LL PRO MA	NAGEMENT L	LC								
Street Address							Stre	et Address									
P.O. Box 1224							2	7 Outwater	Lane							- 1	
City, State, Zip Code						City, State, Zip Code							-	_		-	
Union, NJ													- 1				
Project Manager for Monitoring	Firm			Tele	ephone	No		ephone No.	07020	11	icense N	^				-	
Rick Estaquio				100000	73-494			73-928-4888	í	-	1188	u.					
Start Date (10)	To	chad	ulad C	1	tion Da			ne of OSHA M			1100			_		-	
10 / 10 / 17					2 /				NAGEMENT L	LC							
Occupancy Status During Abate	ement (C	Check	only o	ne)			Stre	et Address				ust.				-	
☐ Facility Closed/Vacated Duri																	
☐ Abatement Performed Outsi					urs - Describe City State Zip Code											-	
Time of Abatement:/	AM	PN	Λ/	_PM	Garfield, NJ 07026												
Scope of Work (Check all that a	apply)							200 AND 401 (VATANAS) - 22	101	0.57			4			-	
☐ >3 sf or >3 lf			□Re	novat	ion			☐ Full Cont	tainment with Ne	gative	e Pressu	re					
⊠ ≥160 sf or ≥260 lf			☑ De						g Procedure							- 1	
									mpted (*) and No	n-Fri	iable Pro	cedure	•				
			4000	Loca					wei.				Ab	atem	ent Ty	/ре	
Location of Asbestos-Containing Materi	ial (ACM	1)		lorma d Sol	ely by	Asha	etas i	Description of			Λ	4.0	Z,	Z.	ш	Щ	
TO BE ABATED	iai (ACIVI	7	Ma	intena	ance/			Containing Ma rmal systems			Amoun (Specifi		Removal	Repair	ncal	nclo	
IN Facility			Cust	odial (12)	Staff?		S	urfacing, VAT	, or		SF or LF		val	=	Encapsulate	Enclosure	
(13)			Yes	No	N/A	1	oth	ner miscellane	ous)						ate	(D)	
Old Studio Theater		-	3 3 5 5 7			10/- 1 5							-	-			
Old Studio Theater						Wet De	mo								Ш		
							25							П	П	П	
		-											-				
Name of Registered Mosts 11st		Monto	0	is Vandf	I Name of St	-1-	11 - 100	1			Ш						
Name of Registered Waste Hat Caravella Demolition	NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste																
					1094		Waste Wanagement										
City, State	ŧ.						Disposal Date City, State										
East Hanover							T	BD	Tullytown	, NJ							
Completed By (Print or Type)		Title						Signature				Dat	е				
Allen Monchik Project Manager								2000	Maushi	6.		1.	1714	7			
100.44			Project Manager Allen Monchik 11/7/17														

ASB-41 JAN 13

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

State of NJ



B & G proj. #: Notification of Asbestos Abatement Pursuant to NJAC 8:60-7 and 12:120-7)

	6							Check	k # 870	5					
Date of Notification (1)		Name	of Building Ow	/ner/Operator (2	2)										
1 1 1 1 2 8 1 1 7		100000000000000000000000000000000000000	n Kopacz		-/				-		П.П.		Name .		
Agencies Notified Type Notif	ication	Street A	•				_		C	FI	\mathbb{V}	E	12		
☐ DEP X Initi	al		-1 + 126 20 - 15 - 16					IM							
DOL Ame	endment		ate, Zip Code field, NJ 07					144	DEC	-	201		U		
₩ DOH		Name o	f Contact		-			Telepha	no-Numb	200					
DCA Cand	cellation	Keit	th Kopacz					AS	BESUPO	z.CO	NTRO NG	DL &			
			FAC	CILITY INFORM	/ATIC	ON		=							
Name of facility where abateme	nt is takin	g place (3)			-		Ty	pe of Facility	(4)						
Keith Kopacz									ol (K - 12			(15)			
Street Address							Subchapter 8 (Other than K-12) X Other (Private/Commercial								
							S	Bldgs.	/Homes, # of Floo	etc.		ldg. A	70		
City (5)	-	County (6)				ounty Code (7)		quaic i eet	# 01 T 10	015		iug. A	ge		
Garfield, NJ 07026		Bergen			(St	tate use only)		Current Use (Pesidential	rior if bei	ng der	nolish	ed)			
Name of Monitoring Firm Hired b	by Bldg. C	Owner (8)		ASCM No.		Name of Abatement									
				n/a		B & G Restorat	ion.	Inc					53		
Street Address						Street Address									
City, State, Zip Code						105 Ryerson F		d 							
Oity, State, Zip Code						City, State, Zip Code Lincoln Park,		7035							
Project Manager for Monitoring Fi	irm		Phone Numb	per		Telephone Number	140 (77033	License	Num	ber				
						(973)696-686		00378							
Scheduled Start Date (10)	Sc	hed. Comp	letion Date (1	1)		Name of OSHA Mon B & G Restorat		lna							
12/08/2017		2/09/201				Street Address	1011,	IIIC.							
Occupancy Status During Abatem						105 Ryerson Road									
Facility closed/vacated during Abatement performed outside	ng entire p de of norr	period of ab nal facility h	atement.			City, State, Zip Code									
Describe: Other-Describe:					-	Lincoln Park N	Lincoln Park, NJ 07035								
Scope of Work (check all that ap	ply)				-		-					- i			
☐ Demolition 🔀		ation			П	Full Containment w/neg	native	pressure F	Z] 01						
] >160 sf	or <u>≥</u> 260 If			_	Mini-enclosure	Jative	pressure <u>P</u>	Glove	oag pr riable i					
Location of			lly used solely	/			-	L		TR	R	E			
asbestos-containing material to be	by ma staff(1	intenance/o	custodial	Descriptio	n of a	sbestos-containing		Amount	80	e	е	n	E n		
abated in facility (13)	Yes		N/A	material (A		3		(Specify S LF)	F or	o	p a	c a	C		
ilor rm. lounder	1000000	110								v e	i r	р	L .		
iler rm, laundry rm, main rm		4	X	pipe insula	tion		_	23 LF		X					
	-	4		-			- -								
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		=					-			1	님	님	는		
Registered Waste Hauler	N.	JDEP Haule	er ID# C	Lubic Yards of W	/aste	Name of Registered	Land	fill			Ш	Ц,	<u> Ц</u>		
B & G Restoration, Inc.		19563	Diagrand	1		Tullytown F			covery	Cent	er	, a			
Lincoln Park, NJ			Disposal D 12/1	ate 1/2017		City, State Tullytown, F	PA								
Completed by (Print or Type) Gordana Luna	Title Secre	tary/Trea	surer	Signature		Gordana Luna			Date 11/28	3/201	7				

Ch426	50	\wedge	MOTI	ELCATIO	State of New DN OF ASBE nt to NJAC 8	STOS	ABATE	MENT) E C	E		\mathbb{V}						
Date of Notification (1) 11/28/17	1 7	7	U		of Building C				\parallel	DE	C -	1 2	017						
Agencies Notified	Type Notification			1	Address				lend	leni.									
☐ EPA	× Initial				Woodland				- 1 2017 DS CONTROL & DENSING Ther Bldg. Age 50+ ed) nc. Procedure Abatement Type Removal Removal		- &								
DEP X DOL	Amended Amendment	щ		87.55%	state, Zip Cod				LICENSING										
	Emergency	(includin	g		ison, NJ 07	7940													
DOH DCA	justification) Cancellation				of Contact ne Desjado	010			1 Te	lenhone N	ımher								
Laural	Cancenado			5	CILITY INFO		037												
Name of Facility Where A	batement is Takir	g Place	(3)	1 2-50	JILITI INTO	RIVIALI	ON	Type of Facility	v (4)										
Madison High Scho	ol						1	X School (K	5 (4)										
Street Address		N. There exists						1 Subchapi	er 8 (Otl	ner than K-	12)								
170 Ridgedale Aver	nue							Other (i.e etc.)	. private	& commerc	cial bu	ilding	s, hon	nes,					
City (5) Madison								Square Feet 100,000	# 0	of Floors	100		Age						
County (6)			T	County	Code (7)		_	Current Use (P		ina demolis				-					
Morris	School																		
Name of Monitoring Firm RK Occupational&E											me of Abatement Contractor (9) ako Construction & Restoration, Inc.								
Street Address						$\neg \uparrow$	Street A					-							
401 St. James Aven	ue						265 F	loute 46 Sui	te 3D										
City, State, Zip Code	0.5	ACCUSED TO					City, Sta	ate, Zip Code											
Phillipsburg, NJ 088					V			/a, NJ 07512	2										
Project Manager for Monit Jon Gilbert	oring Firm		1	Telepho	one No. 34 6316		Telepho			License N	lo.								
Start Date (10)		Schodul	od Cor		Date (11)			56 7010		00666									
12/08/17		12/10/		ubienou	Date (11)			f OSHA Monito Construction	-	storation	Ino								
Occupancy Status During	Abatement (Checl			-			Street A		1001/68	storation,	IIIC.								
× Facility Closed/Vacat	ed During Entire P	eriod of	Abaten	nent				oute 46 Suit	e 3D										
Abatement Performer Other – Describe: Ff	d Outside of Norm	al Facilit	Hours		SUN:8AM-12			te, Zip Code											
Scope of Work (Check All							I OTOW	a, NJ 07512	<u> </u>										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	,, ,,	X	Renova Demolit	tion ion			×	Full Containn Mini-Enclosus Glovebag Pro	re ocedure										
		lo	Locati	on		•	čemm2	14011-EVGUIDIG	u () and	I NOT-FITAL	le Pro		-						
Location of		1	Vormal	ly		Desc	ription o	f											
Asbestos-Containing N TO BE ABAT			id Sole intenar		Asbestos	Contai	ning Ma	terial (ACM)	9332	mount			m						
In Facility		Cus	todial S (12)	Staff?	(i.e. the	ərmai sy surfacir	ystems II ng, VAT,	nsulation, or		pecify or LF)	Ren	Re	ncap	incl					
(13)			(12)		ot	ther mis	scellaneo	ous)			lova	pair	suls	SUL					
		Yes	No	N/A									90	6					
Wood Shop Hall St	air Landing		Х		F	Pipe Ir	nsulatio	on	30	6 LF	Х								

Name of Registered Waste	JDEP W		ubic Ya	ards	Name of	Register	ed Landfill												
Bako Construction & F	Restoration, Inc).	100	auler ID)889	31 1727	f Waste BD	l.	The service research			ecove	ery F	acilit	у					
City, State						Disposal Date City, State													
rotowa, NJ						2/11/1		Tulytov											
Completed by Goran Kojic		Title Proje	ct Ma	nager		Sign	nature;	Dose	2	O 11	3772	7							
		, , ,		J-			The Park of the Pa	4	X	0 11	1601	1							



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

CL# 3293

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Date of Notification (1)		8252						Owner/Operator		IM E	G	E		V/ [E	
/	/	17			В	uckeye P	art	tners, LP - Nor	theast District			_	<u> </u>		
Agencies Notified	Type Notifi	cation			Stre	et Address	;			- m	20070		1.50		
□ EPA	☐ Initial				75	0 Cliff R	oad	d)EC	- 1	20	117	
☑ DOLWD ☑ DHSS	☐ Amende Amendr				City	State, Zip	Со	ode					-		
□ DCA	☐ Emerge			-	Po	ort Readi	ng	, NJ 07064		ASD	ESTO	18.0	ONIT	ROL 8	
(NJAC 5:23-8)	justifica		iolaali	9	Nam	e of Conta	ct			Telephone Num	beelC	ENS	ING	HOLE	
	☐ Cancell	ation			Jo	hn Philb	in			lanel and account to the second second second	The same		the state of the s		
					F	CILITY	NF	ORMATION		-					
Name of Facility Where A	batement is	Takin	g Plac	e (3)					Type of Facility	(4)					
Buckeye Partners, I									School (K-1)						
Street Address									r 8 (Other than K-12)						
123 Derousse Ave.	(River Roa	d Te	rmina	1)						private and comme	rcial b	uildin	gs,		
City (5)							1		# of Floors	B	lda 4	l no			
Pennsauken									Square Feet	# of Floors Bldg. Age					
County (6)					Cou	inty Code ((7)(5	STATE USE ONLY)	Current Use (Pr	ior if being demolis					
Camden								•	Exterior	to a coming definione	nicu)				
Name of Monitoring Firm	Hired by Bui	lding (Owner	(8)	ASCN	No.	1	Name of Abateme	ent Contractor (9))					
Vertex Engineering									VIRONMENTA						
Street Address							15	Street Address		,					
700 Turner Way								1123 BEAVER							
City, State, Zip Code							1	City, State, Zip Co							
Aston, PA 19014								BRISTOL, PA							
Project Manager for Monit	oring Firm			Te	lephone	No.	1	Telephone No.		License No.	-	-			
Dave Turotsy				(310-55	3-8902		215-788-6040		00509					
Start Date (10)		Sched	uled C	omp	letion Da	ate (11)	N	Name of OSHA M	onitor						
12 /11 / _	17	_1	2 /	_1	1_/	_17_		BRISTOL EN	/IRONMENTAI	L, INC.					
Occupancy Status During	Abatement (Check	only	one)			S	Street Address							
☐ Facility Closed/Vacated	d During Ent	ire Per	riod of	Abat	ement			1123 BEAVER	STREET						
Abatement Performed	Outside of N	lormal	Facilit	у Но	urs - De	scribe	C	City, State, Zip Co							
Time of Abatement: 7:	00AM- <u>3:30</u>	PM/	P	M	AM			BRISTOL, PA							
Scope of Work (Check all t	that apply)						_								
≥3 sf or ≥3 If≥160 sf or ≥260 If			⊠ Re						osure Procedure	Negative Pressure Non-Friable Procedure					
			Is	Loca	ation		-	L HOH-EXE	ripted () and Noi	n-Friable Procedur	1				
Location o			1	Norm	ally			Description of			100	1	ent T	1	
Asbestos-Containing M TO BE ABAT		۸)			lely by ance/	Asbe	sto	s Containing Mat	erial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure	
IN Facility				todial	Staff?	(I.e	., ti	hermal systems in surfacing, VAT,	nsulation,	(Specify SF or LF)	VOL	ar.	aps	losu	
(13)				(12			(other miscellaneo		SF OI LF)	<u>m</u>		ulat	lre	
			Yes	No	N/A								Ф		
River Road Exterior G	rounds					Pipe Ins	sul	ation		7 LF		П	П	П	
		П				110 - 110 - 110			-						
					+=-							П	П		
				Ш											
Name of Registered Waste					NJDEP !			ubic Yards of	Name of Regist	ered Landfill					
Bristol Environmenta	1	Hauler ID No. Waste Fairless Landfill													
City, State				_	sposal Date	City, State			-						
Bristol, PA									Morrisville,	PA 19067					
Completed By (Print or Type) Title								Signature		Date	9			_	
Gino Pizzigoni		Es	timat	or				Minn	Punnagon	1/9H 1	1-2	78	1-	7	
		L						1000	10.11.	- / //		, -		4	

								Cli	CH I	113						
	M	s	tate of Nev	- /	Print											
PAI	Lyko	TIFICATIO	N OF ASB	ESTOS	ABATEN				E	C E		\mathbb{V}	E	n.		
Date of Notification (1) 11/30/2017			of Building (igh of Ro		perator	(2)		IIn		19000	1000	Developed.				
Agencies Notified Type Notification			Address	Sciic				14	LL D	EC -	- 1	201	7_	الا		
EPA Initial			hestnut													
DEP Amended Amendment		City, State, Zip Code Roselle NJ 07203							ASBESTOS CONTROL LICENSING							
DOH justification) Cancellation	ncluaing	- 1	of Contact	Telephone Number												
	noi -	1000	ILITY INFO	- 1 1												
Name of Facility Where Abatement is Taking Ralph Arminio	Place (3)		Approximation of the last of t	appart (Comp			of Facility (4									
Street Address	1	Service Services					School (K-12 Subchapter 8 Other (i.e. pr	8 (Othe			dings,	home	es,			
City (5)			51100			Squar	tc.) e Feet	1	Floors		ldgA	ge		· · · · · · · · · · · · · · · · · · ·		
	VANEL		Code (7)	-		3750 Currei		1 r if bein	a demolis		5	•		*		
Union County	gam dika dan gangan penganan dan sa	(STATE	USE ONLY)	ens .	_	ASSET WITTE	rent Use (Prior if being demolished)									
Name of Monitoring Firm Hired by Building C N/A	owner (8)	N/A	M No.		ACM	Solut	Abatement Contractor (9) Solutions Services LLC									
Street Address N/A	sd 5				1435	51st	Street		2 × 2 ₀	- California	A	FR	0VI	<u>=</u>		
City, State, Zip Code N/A					City, St North		o Code en NJ 07	047		4						
Project Manager for Monitoring Firm N/A		Telepho N/A	one No.		Teleph 201-5				License N 01320	lo.				•		
Start Date (10) 12/4/2017	Scheduled 12/12/20	Completion 17	Date (11)			an market and	A Monitor Imental L	abora	tories							
Occupancy Status During Abatement (Check			Street Address 2333 Route 22 We													
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:																
Scope of Work (Check All That Apply)			Onion No 07000													
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		novation molition			×	Min Glo	Containme -Enclosure vebag Proce	edure								
	ls Lo	ocation			<u> </u>	I NOT	-Exempted	(*) and	Non-Friat	DIE Pro	Abate	ement				
Location of Asbestos-Containing Material (ACM)	No	rmally Solely by	Ashaat		scription		/AON				Ту	ype				
TO BE ABATED In Facility (13)	Custoo	tenance/ dial Staff? (12)		thermal surface	aining M systems cing, VAT niscellan	insula T, or		(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure			
	Yes	No N/A										ate	e)			
Roof		X		Roo	f Shing	les		375	50SF	X						
Name of Desirts 1111 1 111								10000								
Name of Registered Waste Hauler Newark Carting Inc			Hauler ID No. of Waste					e of Registered Landfill S Bethlehem Rd Landfill								
City, State Po Box 5670		Disposal Date				City, State 2335 Applebutter Rd Bethlehem PA										

Completed by

Marcos Regato

Title

President

Date

11/30/2017

Signature