	Date of Notice	11/28/1				-0-	201222		
Type Not	ification		Anheus	ser Busch	wner , Inc	/ Operator (2)	COIZ DE		4: 58
Agencies Notified X EPA X	Emergency Noti			ute 1 Sou			A 1 8 5 1	US CONT CENSING	TROL
X DEP	Initial Notification			te & Zip Co				PENSING	
X DOL	Amended Notific	ation		, NJ 0711	4			Landing Colon Colon	
X DOH DCA	Cancellation		Character of the residence	Contact					Telephone Numbe
DCA			Jesse C						·
Name of Facility Where Ab	atement is Taking	Place (LITY INFO		e of Facility (4			
	BP&S Baseme]'yp'	School (K-12))		
2	00 Route 1 So	uth				Subchapter 8 Other (i.e., pri			dings, homes, etc.
	1000				Squ	are Feet	# of Floo		Bldg. Age
City (5)	County (6)	С	ounty Cod	de (7)	1.	50000	CON 124-00015 1000000	7	60
Newark	Essex				Curr	rent Use (Prior	if being de	molished)	
					Bre	wery	373		<u> </u>
Name of Monitoring Firm H	ired by Building C	wner (8	B) A	SCM No.		ne of Abateme			
Environmental Tactics, Street Address	IUC					bal Abateme	ent Servic	es, LLC	
64 Broad Street						et Address Schoolhous	no Dend		200-200-200-200-200-200-200-200-200-200
City, State & Zip Code						State & Zip C			
Matawan, NJ 07747						nroe Townst		831	
Project Manager for Monito	ring Firm		phone Nu			phone Numbe			Number
Tom Geiger			-290-221			-605-9062		100 0335	00714
Scheduled Start Date (10) 11/28/12	Scheduled (ion Date (2 9/12	11)	100000000000000000000000000000000000000	ne of OSHA Mo bal Abateme		es, LLC	30
Occupancy Status During A Facility Closed/Vaca	batement (Check ated During Entire	only on Period	ne) of Abater	ment	TO A CONTRACT	et Address Schoolhous	se Road		-
Abatement Perform	ed Outside of No	rmal Fac	cility Hours	s -	-	State & Zip C			
X Describe: Area Is Other - Describe:	solated During	Abate	ment			roe Townsh		831	
Scope of Work (Check all th	at apply)								
Demolition	X Reno	/ation				Full Co	ntainment v	vith Negative	Pressure
Large Project						Mini-En			
X Quantity is ≥ 3 SF o						X Gloveba			
Quantity is ≥ 160 S Location of			1 1'				Non-friab		
Asbestos-Cont			Location mally Use	od		escription of stos-Containin		Amount	Abatement Type
Material (AC	CM)		Solely by			aterial (ACM)	_	(Specify Square Feet	(Specify: Remova Repair, Encapsulati
TO BE ABA			ntenance o	500	(i.e., t	hermal system	ıs	or	or Enclosure)
in Facility	,	Cust	todial Staf		sulatio	on, surfacing, \	/AT L	inear Feet)	,
(13)			(12)	0	r othe	r miscellaneou	ıs)		
Base		N/A			TSI		20 LF	Removal	
		+		-					
ame of Registered Waste	Hauler	NJDE		Hauler ID #	<i>‡</i>	Cu. Yds. of W			stered Landfill
Freehold Cartage ity, State			18	693		10		RRF	
Freehold, NJ						Disposal Date 11/21/		ity, State ullytown, F	Da .
ompleted By (Print or Type) Title				_	Signature	12 1	unytown, F	Date
Dominick Tringali		ct Man	ager			Domini	. 100.	E	11/28/1
The second secon					- 1	1/ //1/1/1/1/1/1	nin / int	2011/2	11/20/1

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Date of Notice 11/27/12

		Of Notice 117.	Name of I	Building Own	ne 21000E0 r42)	1111		
Туре	Notification	on	Colleen	Coghan	ICK BANDER IN 44	4: 58	2.	
Agencies Notified		(Street Ad		6 white rece	res (see e.		
		rgency Notifica		ess Street	4 3 #E \$ 1 US	CUNTROL	411	
X DEP		l Notification		e & Zip Code		KOING		
X DOL		nded Notification	- Juitorot	, NJ 07008				
X DOH	Cano	ellation	Name of 0					Telephone Number
DCA			Colleen	Coghan				
27.53255			FACIL	ITY INFOR	RMATION			
Name of Facility Where		ent is Taking Plesidence	ace (3)		Type of Facility (4 School (K-12			
	16 Cy	press Street			Subchapter 8 Other (i.e., p	3 (Other than I	ercial buil	dings, homes, etc.
Ni. (5)		T			Square Feet	# of Floors		Bldg. Age
City (5)		County (6)	County Code		2000		?	60
Carteret		Middlesex			Current Use (Prio Residence	r if being dem	olished)	*
lame of Monitoring Fir nvironmental Tact	m Hired b	y Building Owr	ner (8) AS		Name of Abateme			
Street Address 4 Broad Street					Street Address	i Maderia - Institute in Instit		
City, State & Zip Code			-		143 Schoolhou			
Matawan, NJ 07747					City, State & Zip (Monroe Towns			
roject Manager for Mo om Geiger		irm	Telephone Nur 732-290-2217	nber 7	Telephone Number 732-605-9062			e Number
cheduled Start Date (10) [5	Scheduled Con	npletion Date (1		Name of OSHA M	lonitor		00714
11/28/12	*		11/29/12		Global Abatem		s, LLC	F.
Occupancy Status Duri X Facility Closed/	ng Abaten	nent (Check or	nly one)		Street Address			
A hatament Don	vacated L	dring Entire P	eriod of Abatem		43 Schoolhou			
Describe: Ar	on lealet	od During Al	al Facility Hours		City, State & Zip C			
Other - Describ	e: 1501ati	ed During Ai	oatement	l _v	Monroe Towns	hip, NJ 0883	11	
cope of Work (Check	277	nlv)						
Demolition	an that app	X Renovati	on		Full Co	ontainment wit	h Nogative	Droccure
Large Project		7 Honorau	011		Mini-Fi	nclosure	ii ivegative	e Pressure
X Quantity is ≥ 3	SF or ≥ 3	LF ACM				ag Procedure		
Quantity is ≥ 16						Non-friable		
Locat	ion of		Is Location		Description of		Amount	Abatement Type
Asbestos-		1	Normally Used	I As	sbestos-Containir	ng (Specify	(Specify: Removal,
	I (ACM)		Solely by		Material (ACM)		uare Feet	
TO BE A		1	Maintenance or Custodial Staff		e., thermal syster		or	or Enclosure)
	3)		(12)		ation, surfacing, other miscellaneo		ear Feet)	
В	asement		N/A		TSI		20 LF	Removal
				-			<u> </u>	
ame of Registered Wa	ste Haule	r	NJDEP Waste H	dauler ID #	Cu. Yds. of V	Vanta Na	no of D	internal Leadell
Freehold Cartage		'	186		Cu. Yas. of V	vaste Nar		istered Landfill
ity, State					Disposal Date		, State	
Freehold, NJ					11/29/		lytown,	Pa
ompleted By (Print or		Title			Signature	150		Date
Dominick Tringal	i	Project	Manager		Dominick 7	ringali		11/27/12
					300	J		
SB-41 JUN 95 G4667								<u> </u>

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D . CM 00 0 10	Date of Notification (1)				Name of Building Owner(Onesster (0)						-			
11/29/2012	1/29/2012					Name of Building Owner/Operator (2) BERKELEY COLLEGE Street Address					E	VE	D	
Agencies Notified	100 V			나 맛을 꾸 그릇!	Address IFLE CA	AMP ROA	AD		21	12 DEC	-4 '	:: 4	:55	;
ĽŽ EPA □ DEP □ DOL	☐ Initial ☐ Amended Amendment	#1			ate, Zip C		0742	4	ů.	BESTE	is el	1317	RAI	
DOH DCA	☐ Emergency justification) ☐ Cancellation				of Contact)		Te	& 110 elenhone N	EKS	NG		
				FAC	ILITY INF	ORMAT	ION					-		
Name of Facility Where A BERKELEY COLLEGE			in l					Type of Facility School (K			20 20			
Street Address 44 RIFLE CAMP RO	AD				3.4			☑ Subchapt	er 8 (Ot	her than K		ldings	, hom	nes,
City (5) WOODLAND PARK								Square Feet 20,000	# (of Floors 4		Bldg. 1940		
County (6) PASSAIC					Code (7) USE ONLY	n		Current Use (F		eing demol	ished)		53	
Name of Monitoring Firm ENVIROVISION CON				ASCI 0075	M No. 9			of Abatement C ENVIRONMENT						
Street Address 20-21 WAGARAW RO	AD BUILDING	34A		-J				Address 2 QUEENS PI	LAZA S	OUTH				
City, State, Zip Code FAIR LAWN, NJ 07	410							tate, Zip Code ISLAND CIT	Y, NY	11101				
Project Manager for Mon FREDERICK LARSON						5	Teleph	one No. 349-0900		License 00853				
Start Date (10) 12/12/2012	start Date (10) Scheduled							of OSHA Monito		1				
Occupancy Status During	Abatement (Chec	k Only One	A -	Street Address										
☐ Facility Closed/Vaca ☐ Abatement Perform	ated During Entire F	Period of Al	, oaten	ment 21 PERRINE AVENU										
Other – Describe: ©	OCCUPIED NJAC WEEKENDS & EV	5:23-8	REC	GULAR HOURS WITH SOUTH AMBOY, NJ						9				10
Scope of Work (Check Al	II I nat Apply)	111.00												
△ ≥3 sf or ≥3 lf□ ≥160 sf or ≥260 lf			nova											
1	77	Т			Ι			Non-Exemple	ed (*) an	ia ivon-Fria	ible Pro		emen	•
Location	of.	1022303	ocati ormal	10.00									/ре	
Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED	Used Main Custo	tena	nce/		tos Conta thermal surfac		aterial (ACM) insulation, 「, or	(mount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							a		late	ıre
LOWER, GRUND & SE	COND FLOOR		X		PIPE	INSULA	ATION		3,1	.50	Х			
OWER, GROUND & SECOND FLOOR X					VAT	90.5			1,0	65	х			
												L		
	-													
ATC				NJDEP Waste Hauler ID No. 04181 Cubic Yards of Waste 50 YARDS				7-10-10-10-10-10-10-10-10-10-10-10-10-10-		ered Landfi ERPRISI				
City, State SHIRLEY, NY						Disposa 12/17	al Date 7/2012	City, Sta		OH				
Completed by	<u> </u>	Title		4.			gnature/			ΙD	ate		-	
ANN ALI										1/29/2012				

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Date of Notification (1)				Name	of Buildi	ng Owner/Operator	(2)	LIVED					
11/29/12						Bloomfield							
Agency Notified	Type Notification			Street	Address		2012 DEC -	-4 ' 4:51	÷				
⊠ EPA	☑ Initial				icipal P								
DEP S	Amended Amendment #			- 12 m	State, Zip		ASHEST	US CONTRO	L				ī
a DOL	⊠ Emergency (included)	ding				J 07003	& L1	CENSING					
⊠ DOH	justification)			Name	of Conta	ct		Telephone Nu	umber				
□ DCA	☐ Cancellation							_	_'				
				FAC	ILITY IN	FORMAT10N		W. Control					4
Name of Facility Where	Abatement is Taking P	lace (3))				Type of Facili	ty (4)					
							☐ School (K-						
Street Address								r 8 (Other than K-1 private & commerc					
Intersection of Bukosk	i Pl and Hoover Ave	e / Joh	nson	St, Bet	ween Be	ell St & Claire St	homes, etc		ciai bullul	ngs,			
City (5)							Square Feet	# of Floors	Bldg	. Ag	е		
Bloomfield									50+				
County (6)			27-32-32			7) (STATE USE	Current Use (Pr or if being demo	olished)		-		
Essex				ONLY)	¥6:::							
Name of Monitoring Firm	Hired by Building Own	ner	ASC	/I No.	1000	Name of Abatem	ent Contractor	(9)		-		-	-
(8)						RICI CORP							
Street Address	William .			2777		Street Address					-		
						41 LIBERTY S	TREET						
City, State, Zip Code						City, State, Zip C	ode			500	70.00		
		(Nelli) (mill)	KS-021			PASSAIC, NJ 0	7055						
Project Managerfor Mon	itoring Firm	T	elepho	ne No.		Telephone No.		License No.					
						973-614-1266		00838					
Start Date (10)	Scheduled C	complet	tion Da	te (1 1)		Name of OSHA	Monitor				-		
November 29, 2012	January 29,		20-21			RICI CORP	174.555						
Occupancy Status During	g Abatement (Check or	nly one)			Street Address							
☐ Facility ClosecNacate	d During Entire Period	of Aba	temen	t		41 LIBERTY S'							
 □ Abatement Performed ⋈ Other - Describe 	Outside of Normal Fac	cility Ho	ours			City, State, Zip C							
	I that annie)					PASSAIC, NJ 0	7055	P					
Scope of Work (Check al	i triat apply)					☐ Full C	Containment wit	th Negative Pressu	ıre				
□ ~: 3 sf or ~: 3 lf ⊠ ~: 1 60 sf or ~: 260 lf					novation nolition	☐ Mini-l	Enclosure elbag Procedure	T 177					
- 1 00 01 01 . 200 II				_ 50.	nontion	⊠ Non-E	Exempted (*) a	; nd Non-Friable Pro	ocedure				
		15	s Loca	tion				Ĭ		A	bate		nt
Location	on of		Norma		İ	Description of				-	I y	ре	
Asbestos-Containing			ed Sol		Asbe	stos Containing Ma		Amount				ш	
TO BE AS			Custod	lial	(i.e	 thermal systems in surfacing, VAT, 	insulation,	(Specify		Rer	Z,	nca	incl
(13)			Staff [*] (12)		1	other miscellane		SF or LF)	Removal	Repair	Encapsulate	Enclosure
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		Yes	No	N/A						500			
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Sewer			X		Transit	e Pipe		300					
											- 2		
Name of Registered Was	te Hauler	1000000	JDEP I No.	Waste F	lauler	Cubic Yards of Waste	Name of Reg	stered Landfill			200 mars		
RICI CORP		100000				200000000000000000000000000000000000000	CROWS	LANDEN					
City, State		29	051			TBD Disposal Date	G.R.O.W.S. City, State	LANDFILL		_			_
PASSAIC, NJ						TBD (I Paragraphical	IE DA					
Completed by	Title					Signature/	MORRISVII	LE, PA	Date	_		Q.	_
RISTO TRAJKOV	PRESIDEN	т				ING	144		11/29/2	012	,		
ASR-41			his for	n for as	hestos lic	ensure evempted a	ctivities		11/29/2	012	6		

TIFICATION OF ASSESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12 120) APPROVED Date of Notification (1) of Health & Senior Services Name of Building Owner/Operator (2) 11/29/12 Township of Bloomfield 3666 (signature) Agency Notified Type Notification Street Address & LICENSIN leitinf 55 l Municipal Plaza D DEP ☐ Amended City, State, Zip Code DOL DOL Amendment # Bloomfield, NJ 07003 B DOH Justification) Name of Contact Telephone Number O DCA ☐ Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Pl: ; (3) Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Intersection of Bukoski PI and Hoover Ave Ther (i.e. private & commercial buildings, Johnson St, Between Bell St & Claire St homes, etc.) City (5) Square Feet # of Floors Bldg. Age Bloomfield County (6) 50+ County Code (7) (STATE USE Current Use (Pr or if being demolished) ONLY) Name of Monitoring Firm Hired by Building Own ASCM No. Name of Absternent Contractor (9) RICI CORP Street Address Street Address 41 LIBERTY STREET City, State, Zip Code City, State, Zip Code PASSAIC, NJ 07055 Project Managerfor Monitoring Firm Telephone No. Telephone No. License No. 973-614-1266 00838 Start Date (10) Scheduled C ipletion Date (1 1) Name of OSHA Monitor November 29, 2012 January 29, RICI CORP Occupancy Status During Abatement (Check on Street Address ☐ Facility ClosecNecated During Entire Period ☐ Abatement Performed Outside of Normal Fac 41 LIBERTY STREET Abatement City, State, Zip Code M Other - Describe PASSAIC, NJ 07055 Scope of Work (Check all that apply) ☐ -: 3 sf or -: 3 l/ 図 -: 1 60 sl or -: 260 l/ Full Containment with Negative Pressure
 Mini-Enclosure Renovation Q Demolition ☐ Glovelbag Procedure Non-Exempted (*) and Non-Prizble Procedure is Location Abatement Normally Location of Type Used Salely by Description of Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Maintenance/ TO BE ABATED Amount (i.e., thermal systems insulation, surfacing, VAT, or Encapsulati Custodial IN Facility (Specify Removal Repair Statt? (13)SF or LF) (12)other miscellaneous) 'es No Sewer × Transite Pipe 65 LF Sewer × Transite Pipe 300 Name of Registered Waste Hauler NJDEP Waste Haufer Cubic Yards of Name of Registered Landfill ID No. Waste RICI CORP 29051 TRD City, State G.R.O.W.S. LANDFILL Disposal Date City, State PASSAIC, NI TBD Completed by BISVILLE, PA Title Signature RISTO TRAJKOV Date PRESIDENT ASB-41 Do not se this form for asbestos licensure exempted activities. 11/29/2012

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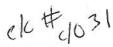
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SEE ATTACHED Date of Notification (1)	20 12	NG	T	Name o	A Building C	Amer/Operator	DCENT	TECHNOLO	GIE	553	3	
Agencies Notified	Z9-1Z Type Notification		+	Smoot	Address	200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		& LICENSI	HTR	01		7
Agencies Notified	[] Initial					MOUNTAI	U AUG		46_	-		4
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⊠ DOH	Cancellation			4	ARRY	FED=R	100					-1
	1				LITY INFO		- d Cardina	A				\dashv
Name of Facility Where	Abatement is Takin	g Place	(3)		020000		Type of Facility					1
ALCAD	2- WCEN	TE	CH	NOLO	GIES	INC	School (K-12) I (Othor than K-12)				
Street Address							Other (I.a., pr	vato & commorcia	Duildir	ngs.		- 1
Street Address	OUNTANU	ANE					homes, atc.)			7000		\dashv
	OUMINIO	7,10					Square Feet	# of Floors		Age		
City (5)	1 HILL.	NJ		OPA	74		306,000	1_5		65	_	=
MURRA	11111			Coun	y Code (7)	STATE		or It being demolis	nea)			- 1
County (6)	211			USE	ONLY)		OFFI					=
UNI	O O	Owner	7	AŠĆM I	No.	Name of Abaten	ent Contractor (9)	_				-
Name of Monitoring Firm	Hited by building	45117		196 1 (7.20) (1.20)		UNIE	PRO. IN	<u>- · </u>				_
(8) HILLMAN	LOUILAN	ICOI				8						
Street Address) . 22	500	<u> </u>			173	KARKUS	AVE .				
	Poure 22	C 7/3		===	=+	Cau Ciala Zin (ode			T.		
City, State, Zip Code	NJ.	07	181	23		WOOD	BRIDGE.	NJ.				
UNION			Tale	nhone l	No	Telephone No.		License No.				
Project Manager for Me	ontorng Firm		908	-688	.7800	752-726-3111 _00615						_
MIKE N	ECSON .	duled Co	1 VV	tion Dal	le (11)	Name of OSHA	Monitor					
Start Date (10)	/> Same	2-0	77 -	17-	,	HILLI	MAN EX	NICONHEL	THE			=
12-05-					==	Direct Address						
Occupancy Status Dun	ing Abatement (Che	CK DINY	Abata	ment		1600	POUTE 2	2 LAST				
Facility Closed/Vaca	ated During Entire Po	a Esciiii	HOU	75 75	-	City, State, Zip (Code	092	_			
Abelement Performe	ed Courside of Roma	a raceny				UNI		0780	>			_
Other - Describe										255		
Scope of Work (Check	all that apply)					₹ull Co	intelement with Ne aclosure	gativo Pressuro	-			
≥3 af or ≥3 lf			novat mailte			Cloude	an Procedure					
≥160 sf or ≥260 ff			THOUSE.	"1		Non-E	kempted (*) and No	on-Friable Procedu				
		is L	ocati	Orn					1 ^	baten OyT		
		Usod	MINE OF	50.b		Description (A			-		
Location Asbestos-Containing	Of Material (ACM)	Mair	tenar	vce/	Asbesto	s Containing Ma	aterial (ACM)	Amount (Specify	20	_	Encapsulal	5
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IN Fadi	ity	4	Staff? (12)			other miscelland	cous)		l a	8	ula	2
(13)		-		T	1				1		e	-
		Yes	No	N/A				1101 =	1		_	
CAGE ID109	-Bldg1	X			THER	MAL PIPE	- INSULATION	40L.E.	×	\vdash	-	-
AND DESCRIPTION OF THE PERSON									+	-	-	⊢
BASEMENT		1-1							-	_	-	+
		+-+	_	1	1					_		1_
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Name of Registered W		1.1.		Haruker II	O No.	of Waste	6.R.O	WS. INC				
10000	CARTING	100		45	29_	Disposal Date	City State		0.			
City, State	N -					12-10-12	MORR	ISVILLE,	A	•		_
NEWARX	- N7.					Signature		Date	.70		7	
Commeted By	TO CLIM	PRES	· .		¥**	De	avid T. Ti	ton 1	-29			=
1/4////////////////////////////////////	11/1-1-1-1-1		15 TO 11/12	SERVICE STATE								

- FOR 2012 -OPEN FILING

Date of Notification (1)	20-11			N	ame of Build	ing Owne	ar/Operato	CENT T	-= - 1	門	EC		1/	-n	
Agencies Notified	Type Notflica	n n			TCCI Address	ATE	<u> </u>	CENT	ECH	NOZOG	16	<u></u>		البدأ سه	
Agencies Notified	Initial	i dodi		3			UNTE	IN ALE	· .	2012 DE	<u>.</u>	·L.	4 4 1	1	
□ 06P	Amended				ly, State, Zip	Code						- Carrie		-	
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DOH		200000		No	one of Conta	**************************************	20 122		Tek	mhone Mun	pp.	EN.		- 111	
LE CON	Calcala				LARRY	FG	PERICO	2							
					FACILITY IN	FORMAT	ПОН					•			
		Comment of the Commen						Type of Faci	lity (4)						
	- WCENT	TE	H.	INC	<u> </u>			School (K			.	•			
Street Address		٨						Subchapi Other (I.e.				വിവാ	26.		
	UTAIN	44	<u> </u>					homas, a	rc.)					٠	
City (5)	4111	NIT	- 0	79	74			300,000	**	of Floors		Bldg.	Age +		
County (6)	11.50				ounty Code (7) (STA	TE	Current Uso	(Prior life	eing demai	snec				
					SE ONLY)			OFF	CES						
	Hired by Buildin	ng Owne	1	ASC	M No.			ent Contractor	(9)						
	HILLMAN ENVIRONMENTAL Set Address 1600 ROUTE 22 EAST State, Zip Code				- 29	U	NIP	RO, 11	UC.				44-61		
Street Address	unty (6) UNION ne of Monitoring Firm Hired by Building Owner HILCHAN ENVIRONMENTA: THE Address IGOO ROUTE 22 EAST State, Zip Code UNION, NJ 07803 Det Manager for Monitoring Firm MIKE NELSON Date (10) OPEN Scheduled Co						Address			4					
	DOL Amendment # Emergency (including justification) DOH DOA							KARK	<i>US</i>	AVU.	Ĺ			_	
City, State, Zip Code	GOO MOUNTAIN AUE (5) MURRAY HILL, NJ- unty (6) UNION ne of Monitoring Firm Hired by Building Owner HILLMAN ENVIRONMENTA eet Address IGOO ROUTE 22 EKST , State, Zip Code UNION, NJ 07803 cet Manager for Monitoring Firm MIKE NELSON i Date (10) Scheduled Co OPEN upancy Status During Abatement (Chock only of actify Closed/Vacated During Entire Period of A batement Performed Outside of Normal Faculty ther - Describe: e of Work (Check all that apply) is of or ≥3 if 160 sf or ≥280 if 100 per					City. St	ate. Zip C	ode	T A	1.T 0	70	05	_		
	et Address IGOO ROUTE 22 EKST State, Zip Code UN ION, NJ 07803 cet Manager for Monitoring Firm M [KE NELSON] Date (10) OPEN pancy Status During Abatement (Chock only only only only only only only only							RIDGE			10	13			
	State, Zip Code UN ION, NJ 07803 et Manager for Monitoring Firm M I KE NELSON Date (10) Scheduled Co					ne No. Telephone No. 18-7800 732-726-3111 006/5									
	cet Manager for Monitoring Firm M (KE NELSON - Date (10) Scheduled Co					Name of OSHA Monitor									
	MIKE NELSON Scheduled Co						HILLMAN ENVIRONMENTAL								
	Abatement (Ch				Street Address									_	
					- 1	16	00 RT	. 22 EA	ST				1		
	Dutside of Norm	rai Facili	y HoL	ing		City, Sta	ite, Zip Co	ide							
Other - Describe:						<u> </u>	NION	JUJ	078	03					
Scope of Work (Check all t	hat apply)					Ť	Full Cont	aloment with N	ocativo P	ressuro					
53 at or 53 lt		900				ğ	Mini-Ende	osure							
_≥160 sf or ≥280 lf			molitic	N)		H		r Procedure noted (*) and N	on-Frian	le Procedur	19			.	
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			(ABITTE Polos		1	Пекс	iption of	+)/				Ty	æ		
	erial (ACM)	Mair	tenan	ce/		s Contes	ning Mate	ral (ACM)	V 9.272035	ount			m		
	?		istodia itsff?	ď	(i.c., t		ystems in: g, VAT, o			ecity or UF)	Ren	8	五	3	
			(12)				calsucon			-,	Remova	Repair	Encapsulate	Enclosur	
		Yes	No	N/A							-		8	8	
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Name of Backgood Waste b	IDEP V	Vaesto I	Ćubic Ya	nds T	Name of Rog	starod L	andrill				\dashv				
	nder ID	No.	of Waste	POTENTIAL DESIGNATION OF THE PERSON OF THE P	G.ROW										
City, State			Disposel	Date	City, State MORRIS			20	,						
Completed By	VEWARK NJ Inpleted By Title					Signa	iture	0 0	1.	Date	20	41			
DAVID T. TOL	EWARK CARTING INC.					10	aved	[. Tolo	si .	12-2	20-	-64			



Date of Notification (1)		Job	#:		Nan	ne of Buil	ding Own	er/Operator	(2)				_			
November 27, 2012					Dela	aware Ro	ver Port	Authority		7917 D	EC -4		. 1	4:5	13	
Agencies Notified	Notification	on Type				et Addres		Authority		FRIT	יבט יו		•	, ,	_	
□EPA	⊠ 1=:#:=1.1	NI-VEV			P.O	. Box 426	20			≱ en attac€	ESTUS	2 121	11.1	TRE	11	
DEP			on		-	, State, Z				2-36	LICE	7110	IAI	CITTE	1 1-	
⊠ DOL		endment	#							ő	e LIUE	CM_	114	u		
⊠ DOH	☐ Emerg	ency (in		Ī		denwold, ne of Con	NJ 0802	:1								
⊠ DCA	justific	cation)			Ivali	ie oi Con	tact				l elep	phone	Nu	mber	Ž.	
	Carice	enauon			Bria	ın MacGr	egor									
					FAC	CILITY IN	FORMAT	ION			4					
Name of Facility Where	Abateme	ent is Tak	king Pla	ace (3)					Type of Fa	acility (4	4)					
Port Authority Transit	e Corpor	ation							☐ School	(K-12)						
Street Address	9					18 - 18			☐ Subcha	apter 8	(Other th	nan K	12)			
Carlton Avenue, Bldg	. #1 (Adm	inistrati	on Bui	lding)					Other (i.e. priv	ate & (co	omme	ercia	l buil	dings,	
City (5)									homes Square Fe		# of Floo	vrc.	-1	Dida	. Age	
Lindenwold									10,000		2	ЛЗ			ears	ž.
County (6)					Cour	ntv Code	(7) (STA	TE	Current Us	se (prio	r if heina	dem	olish	12 (27 (20) (2)		
Camden County			*			ONLY)	(., (Commerci		i ii boilig	ucin	JII31	icaj		
Name of Monitoring Fire	m Hired b	v Buildin	a Owne	or (8)	ASCN	/ No	Namo	f Contractor		di			-			
Accredited Environme			_		Collections.	i NO.	Separate se		2.5							
Street Address	illai leci	mologie	s, inc.		107		Street A	roup Reme	ediation, In	C			_			11
28 N. Pennell Road																
City, State, Zip Code							4343 'G'	te, Zip Code								
	, PA 19063						Contraction Contraction									
Media, PA 19063	PA 19063 t Manager for Monitoring Firm Telephone N							lphia, PA 1	9124							
	nitoring F						Telepho	ne Number		Licen	se Numb	per				
Harris Brody				1-0114						00858	В					
Scheduled Start Date (1	10)	Schedu	led Co	mpletio	n (11)	Name of OSHA Monitor									5-11-01	
December 14, 2012		Decem	ber 24	2012	Accredited Environmental Tech						gies, Inc	: .				
Occupancy Status Durin	ng Abatem	nent (Che	eck onl	y one)		Street Address						124			2000	
☑ Facility Closed/Vaca	ted During	g Entire F	Period (of Abate	ement		28 N. Pe	nnell Road								
	d Outside	of Norm	al Fac	lity Hou	ırs -		City, Sta	te, Zip Code	9							- 100
Other – Describe:	-					Media, PA 19062										
Source of Work (Check	all that ap	ply)				induction () to the contract of the contract										
☐ >3 sf or >3 lf				⊠ Re	novation	1		□ Eull Con	tainment wi	h Moar	ativo Drog	001150				
☑ >160 sf or >260 lf					molition			☐ Full Con☐ Mini-End	losure	iii wega	auve Pres	ssure				
11				10 1.00000				☐ Gloveba	g Procedure							
								Non-Exe	mpted (*) a	nd Non	-Friable I	Proce	dur	е		
		ls	Locatio	n										Abat	ement	
		Norr	nally U	sed											/pe	•
Location of Asbest		5727-65767674	olely b	•			scription			Amo		F			S 1/4	
Containing Material (A TO BE ABATED			ntenan ustodia		Asbe	stos Con	taining Ma	aterial (ACN insulation,	1)	(Spe					ш	_
IN Facility	-		Staff?	"	(1.6		cing, VAT			SF or	LF)		Removal	ZD	S	<u>F</u>
(13)			(12)				niscellane						3	Repair	Sde	Sos
								50			30		<u>8</u>	₹	Encapsulate	Enclosure
	Yes No N/A														Ф	
Room #B-212 / 2 nd Floo	or			х	VAT &	Mastic			532 S	F			X	F.		
						1072										
		-										-				-
Name of Reg. Waste Ha	uler		NJ	DEP W	aste	Cubic \	′ards	Name of	Reg. Landfil	1			1000			
			0456	uler ID	2000	of Was										
The Prime Group Reme City, State	ediation					3 Minerva (DEP #15-1292)										
State of Control Contr						A secoli secon	Disposal Date City, State									
Philadelphia, PA Completed by Title						12/28/12 Waynesburg OH										
	1772						Signature				10.75	ate				
Vincent Primavera Project Manager SB-41								-5		\geq	N	loven	ıbe	r 27,	2012	



Date of Notification (1) 11-29-12			Name o	of Building Owner rs of Charity	Operato	POCEIV	En					
Agencies Notified Type Notification EPA Initial			Street A	Address COVE DR.	2012 D	EC -1,				14		
DEP Amended Amendment		_ [City, St MAN	ate, Zip Code TOLOKING, N of Contact Zumbo	J 0873	8108 CUN	100					
DOH DCA Emergency justification) Cancellation			Name o John	of Contact Zumbo	et	LICENSING	(Te	lenhone Ni	ımher			
Name of Facility Where Abatement is Takin Res. House	g Place (3))	FAC	ILITY INFORMAT	TION	Type of Facilit	y (4)					
Street Address 308 COVE DR.							ter 8 (Oth	er than K-1 & commerc		ldings	, hom	ies,
City (5) MANTOLOKING, NJ 08738						Square Feet 3000	2	f Floors		Bldg 45	Age	
County (6) Atlantic				Code (7) USE ONLY)		Current Use (F Home	rior if be	ing demolis	hed)		800 - 1890 -	
Name of Monitoring Firm Hired by Building SEM	Owner (8)		ASCI	M No.	Name Assi	of Abatement C uerd Environ	ontractor mental	(9) Services	Inc.			
Street Address 1634 South Delaware Street						Address Clems Run						
City, State, Zip Code Paulsboro, Nj 08066						itate, Zip Code ica Hill, NJ						
Project Manager for Monitoring Firm Ed Keegan			Telepho 856-4	ne No. 23-5711		one No. 304-4676		License N 01145	No.			
Start Date (10) 12-5-12	Date (10) Schedule					of OSHA Monito	or					
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire R		0 7 0	ont	報		Address Rt 130 North	=				1	
Abatement Performed Outside of Norm Other – Describe:						tate, Zip Code naminson, NJ	08077	%	·			
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(manufacture)	enovat emoliti			_	Full Contains Mini-Enclosu Glovebag Pr Non-Exempt	ire ocedure				Α.	
		ocatio							T	Abate	emeni pe	i
Location of Asbestos-Containing Material (ACM)	Used	Solel	y by		scription taining M		A	mount	-	, · · ·		
TO BE ABATED In Facility (13)	Custo		nce/ Aspestos Contain		systems cing, VA	insulation, T, or	(S	pecify or LF)	Removal	Repair	Encapsulate	Enclosure
1st Floor (flood cut)	No	N/A X		Drywall	-	2/	18 SF	<u> </u>		6		
						-		X	-			
1st Floor		χ	floor	[,(<u>e</u>	4	80	X				
Name of Registered Waste Hauler NETS	100,000	IDEP W ruler ID		Yards ste		10.7	red Landfill al Landfill					
City, State Hazleton,PA			Dispos 12-9-	sal Date	City, Sta	ite ial, PA						
Completed by John Zumbo	eted by Title				ignature	1 Zu	6	Da 11	te 1-30-)-12		

\sim 1				
	153	p# 11	Sol	17
(1/	ARCI	7 11	AM	15
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Date of Notification (1)	-			Name	of Building	Owner	/Operator	(2) ion Corp?		119	<u>Q</u>	الل		
11-30-12				LUIII	ber yar (1 ACC	quisit:	ion Corp	12 DEC -	. 4 4	. ,			
Agencies Notified	Type Notification			Street .	Address N. Ave	22110	Dook							
EPA DEP DOL	Initial☐ AmendedAmendment	#	i l	City, S	tate, Zip Conford,	ode	07016-	2444	& LICE	NSIN NSIN	11	901		
Xi DOH	☐ Emergency (justification)	(including		Name	of Contact	110	07010-	-2444	Telepho	ne Num	ber			
□ DCA -	☐ Cancellation				don Ur									
Name of Facility Where A	hatement is Takin	n Place (3)	FAC	ILITY INF	ORMAT	TION	Type of Facility	v (4)					
Commercial Pro		9 1 1000 (٠,						5.0 5.005 5 3355					
Street Address 596 - 602 Hadd								Other (i.e	12) er 8 (Other tha . private & con	n K-12) nmercia) I bui	ldings	, hom	nes,
City (5) Collingswood							13	etc.) Square Feet 7,000	# of Floo	rs		3ldg. 41 yr		
County (6) Camden		50000			Code (7) USE ONLY)		Current Use (F			ed)	-		
Name of Monitoring Firm	Hired by Building (Owner (8)		TASC	M No.		and the second second	of Abatement C	7. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19	cres				
EHS	- mod by Building ((o)	,	1,00	W 110.		Plym	outh Envi		l Co	• , -	[nc.		
Street Address 411 Southgate	Court, Suit	e E					Street A	Address Haws Aver	nue					
City, State, Zip Code Mickleton, NJ	08056							ate, Zip Code istown, I	DΔ 19401					
Project Manager for Moni				Telepho	ne No		Telepho			nse No				
Jack Carney		4		856-2	224-008	30	610-	239-9920	0	0398				
Start Date (10) 12–17–12			ed Con 2–21		Date (11)	r ronmenta	l Co.	.,I	nc.					
Occupancy Status During	ate (10) 7–12 Incy Status During Abatement (Check Only Control of the Control of				Street Address									
☐ Abatement Performe														
☐ Other – Describe: _							1	stown, P	10401					
Scope of Work (Check All	That Apply)				-		HOLLI	SCOWIT, FI	19401		-	UME OF T		-
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf			Renova Demoliti				· 图	Mini-Enclosu Glovebag Pro					Д	
		le	Locati	on					1	1		YES AND WA	emen	t
Location	of	1	Normall	у		De	escription o	of.				Ту	ре	
Asbestos-Containing I	Material (ACM)		d Solel			tos Con	itaining Ma	terial (ACM)	Amoun	57			т	_
TO BE ABA In Facilit			todial S		(i.e.		I systems i scing, VAT		(Specify SF or LF		Remova	Repair	Encapsulate	Enclosure
(13)			(12)				miscellane			'	ova	pair	sula	osur
		Yes	No	N/A							-		ate	œ
exterior				х	caulk	ing			80 LF		x			
basement				х	heater	. & b	reechi	ng ins.	110 SF	76000	х			
1st floor					VAT				390 SF		x			
basement				х	pipe			25 LF X						
Name of Registered Waste	e Hauler	-	NJDEP Waste C				Yards	Name of	Registered La	andfill				
Robinson Waste			17304				of Waste GROWS, Inc.							
City, State Bellmawr, NJ							osal Date City, State 21-12 Morrisville, PA							
Completed by		Title					Signature	nature Date						
Timothy E. Brya	in	Vice	e-Pre	eside	ent	1	1.	11	2	11-	30-	-12		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

so wech		NOT			and the same of the		BESTOS ABAT C 8:60 and 5:1	TEMENT 6)	RECEIV	Pro Pa			
Date of Notification (1)				N	Name o	of Building	Owner/Operator ((2)					
11 /	8 /	12			Trus	tees of I	Princeton Unive	ersity 2017	DEC -1 4	42 1.50			
Agencies Notified	Type Notificati	ion		5		Address			<u></u>	4: 4	7		
⊠ EPA							n Building	产业的	ESTOS CON ELICENSIN	1 10 co			
☑ DOLWD ☑ DHSS	Amended Amendmen	nt #2-11/3	0/12	2	1.500	ate, Zip C		é	LICENSIN	C (III	•		
☑ DCA	☐ Emergency	10			Prin	ceton, N	J 08544						
(NJAC 5:23-8)	justification			١	Name o	of Contact			Telephone Num	ber			
	☐ Cancellatio	n			Rob	ert Orteg	ja			_			
					FAC	ILITY IN	FORMATION			5211			
Name of Facility Where A	Abatement is Ta	king Place	e (3)					Type of Facility	(4)				
Princeton Universit	ty-87 Prospec	ct St. Co	mpı	ıter	Build	ling		School (K-12					
Street Address								Other (i.e. n	3 (Other than K-12 rivate and comme	:) rcial bu	ildina	S.	
87 Prospect St								homes, etc.)		ioiai bu		-	
City (5)								Square Feet	# of Floors	Blo	dg. Ag	je	
Princeton								30,000	3	1	50+		
County (6)					Count	ty Code (7	(STATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)			- 6
MERCER									and the second s				
Name of Monitoring Firm	Hired by Buildin	na Owner	(8)		SCM N	No.	Name of Abatem	ent Contractor (9)					
Pennoni Assoicate		ing Omnor	(0)		0010			VIRONMENTA					
Street Address	o, 1110.		_				Street Address		•				
515 Grove St., Suite 1B							1123 BEAVE	RSTREET					
	11. 11.20	-			City, State, Zip C								
City, State, Zip Code	1 00025						BRISTOL, P						
Haddon Heights, N			Tr.	-1	hana h	vlo.	Telephone No.	A 15001	License No.				
Project Manager for Mon Alan Lloyd	itoring Firm				hone N 5-547-		215-788-604	0	00509				
Start Date (10)	Sc	cheduled (Comp	pleti	on Dat	e (11)	Name of OSHA	Monitor	7				
11 /26 /	_12_	12	<i>'</i> _	3	_ / _	12	BRISTOL EN	NVIRONMENTA	L, INC.				
Occupancy Status During	70						Street Address						
☐ Facility Closed/Vacate							1123 BEAVE	R STREET					
Abatement Performed Time of Abatement: 7			ty Ho _PM-		- Desc AN		City, State, Zip C BRISTOL, P.						
Scope of Work (Check a	Il that apply)						M Full Car	ntainment with No	activo Prossure				
≥3 sf or ≥3 lf		⊠R	enov	atio	n		⊠ Full Col	ntainment with Ne closure	gauve Flessule				
≥160 sf or ≥260 lf			emo				☐ Gloveb	ag Procedure empted (*) and No	an Eriable Broods	ıro			
							□ NOII-EX	empted () and No	I I I I I I I I I I I I I I I I I I I		atem	ont T	·//DO
	- 5		s Lo Non	27 - Table 188			Description	of			1	_	_
Location Asbestos-Containing			ed S	olel	y by	Asbe	stos Containing M	laterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABA	ATED	IVI	ainte		ice/ taff?	(i.e	, thermal systems		(Specify SF or LF)	10%	₽.	sde	lso
IN Facil	ity	Cu	993	12)	lair		surfacing, VA other miscellan		SF OF LF)	<u>=</u>		ulat	6
(13)		Yes	-	No	N/A		Other misochan					0	
Basement Room G20	0B		×	3		Firepro	ofing		1589 SF	Ø			
			1	7									
			+	-						П	\Box	П	tr
											믐	믐	+=
9000000]								Ш	
Name of Registered Was				Ha	JDEP V	O No.	Cubic Yards of Waste		stered Landfill S. NORTH LANI	DFILL			
City, State NEW CASTLE, DE				<u> </u>	18706	,	Disposal Date	City, State MORRISV	ILLE, PA 19067	,			
Completed By (Print or Type) Title					-		Signature			ate /			
Brian Scafiro	Jhe)	Estim	ator	•			Brian	Scafire	/il	11/.	30/	15	2

ASB-41 MAY 11 B 51 2113

Date of Notification (1)	3_ /	12			Name of B	Buildir	ng Owner/Operator f Princeton Univ	(2) 12 DEC	TIVED	-			
⊠ EPA ⊠	ype Notifica Initial	tion		-		55.50	lan Building	A SEF COL	7.0	7—			
☑ DOLWD ☑ DHSS	Amended			1	City, State,		Code	8/10	O CONTRAI				
	Amendme	nt # <u>1-1</u>	1/21	/12			NJ 08544	- 110	ENSING	•	-2-7		
(NJAC 5:23-8)	Emergenc justification	y (Inclu 1)	ding	I	Vame of Co								
1 275.55	Cancellation			1.	Robert				Telephone M				
						_				-			
Name of Facility Where Abat	ement is To	kina Di		2/	FACILIT	TY IN	NFORMATION					500-00	
Princeton University-8	7 Proces	KING PI	ace (3)				Type of Facil					
Street Address	riospec	21 St. (om	puter	Building			School (K	-12)				
87 Prospect St						E-0014		Subchapte	er 8 (Other than K-	12)			
City (5)								homes, et	, private and comm	nercial	build	ings,	
Princeton								Square Feet	# of Floors		Bldg.	Ane	
County (6)								30,000	3		50-		
				(County Co	de (7))(STATE USE ONLY)	Current Use (Prior if being demo	oliebec		•	_
MERCER			Marada and San Car						and a comp define	JIISHEU	'/		
Name of Monitoring Firm Hire	d by Buildin	g Own	er (8)	AS	CM No.		Name of Abateme	ent Contractor (0)				_
Pennoni Assoicates, In	c.			0	0102		BRISTOL EN						
Street Address						-	Street Address	AUCHARICIAL	AL, INC.				
515 Grove St., Suite 1B							1123 BEAVE	PETPET					W.S.
City, State, Zip Code						-	City, State, Zip Co						
Haddon Heights, NJ 086	035					- 1							
Project Manager for Monitoring			TT	elenho	one No.		BRISTOL, PA	19007					
Alan Lloyd			1.	a military and a second	547-0505		Telephone No.		License No.				
tart Date (10)	Sch	eduled	Com		Date (11)		215-788-6040		00509				
11 /26 /12	!				/12		Name of OSHA M			11800			
ccupancy Status During Abat					1	-	BRISTOL ENV	/IRONMENT	AL, INC.				
Facility Closed/Vacated Dur	ring Entire E	oriod o	one,)			Street Address						_
Abatement Performed Outs	ide of Norm	al Facil	I ADS	atemen)[]'		1123 BEAVER	200					
Time of Apatement: /:UUAF	VI_11-30DI/	1/	DRA				City, State, Zip Co.				-		_
EV#1-MON. III Cope of Work (Check all that a	NLY -	3 PM	-/	1:30	OPM		BRISTOL, PA	19007					
	ippiy)				•3			T					
≥3 sf or ≥3 lf		⊠R	enov	ation				inment with Ne	gative Pressure				
≥160 sf or ≥260 lf			emoli	ition			☐ Glovebag	Procedure					
		т					☐ Non-Exem	pted (*) and No	on-Friable Procedu	ire			
Location of			s Loc Norm	ation							patem	ent T	-
Asbestos-Containing Materia	al (ACM)	Us	ed So	olely by	/ ^-		Description of				1		Ť
TO BE ABATED				nance/		i.e t	os Containing Mate thermal systems in	erial (ACM)	Amount	em	Repair	inc	
IN Facility (13)		Cus	itodia (12	al Staff	? `		surfacing, VAT, o	or I	(Specify SF or LF)	Removal	air	aps	1
(10)		Yes	No		_		other miscellaneou	ıs)	0. 0. 2. /	=		Encapsulate	
sement Room G20B			×		Firepr	roofi	ina		4500.05	-		_	_
					+				1589 SF		Ш		
		+=-	-	-									
								1			П	П	Г
										_		귀	-
			1	NJDEP	Waste	C	ubic Yards of	Name of Regist	ered Landen		Ш		L
					ID M-	C234.02							
				Hauler		100	/aste	GROWE	NODTHIAME				
ERVICE TRANSPORT GI				Hauler 1870			raste		NORTH LAND	FILL			
ERVICE TRANSPORT GI							raste	City, State		FILL			_
ERVICE TRANSPORT GI , State EW CASTLE, DE							isposal Date	City, State	NORTH LANDS	FILL			
ne of Registered Waste Hauk ERVICE TRANSPORT GI , State EW CASTLE, DE ipleted By (Print or Type)	ROUP	stimat					isposal Date Signature	City, State	LE, PA 19067		1/1=		

Date of Notification (1)	1	12			Name of Bu	uilding Owner/Opera	A (D)	CK #	
Agencies Notified Type	Notificat			_	Street Addr	s of Princeton Ur	niversity(112	UEC -4 :::	4: 47
☐ EPA 6659 ☐ In ☐ DOLWD 6642 ☐ Ar	itial nended					Millan Building	1 多句形	ESTUS CON	[ROI
DHSS 7067 An	nendmer	nt#		Ī	City, State,			LICENSING	3
☑ DCA 6635 □ En	nergency	(incl	dina	- 1	Princeto	n, NJ 08544		entitled all an initial to the enter the three transfer and the enter the en	
(140AC 5.23-6) Jus	strication	1)	9		Name of Co	ntact		Telephone N	ht
L Ca	ncellatio	n		\perp	Robert C			releptione r	number
Name of Facility Where Abateme	ent is Tal	kina P	lace ((3)	100000000000000000000000000000000000000	Y INFORMATION			
Princeton University-87 P	rospec	t St.	Com	nufer	Duilding		Type of Fac		
Street Address				putti	building		School (K-12)	
87 Prospect St							U Other (i.e	oter 8 (Other than K e., private and com	(-12) mercial buildings
City (5)		7000					nomes,	etc.)	mercial buildings,
Princeton							Square Feet	t # of Floors	Bldg. Age
County (6)				- 1	County Cod	The same of the sa	30,000	3	50+
MERCER				- 1	County Cod	e (7)(STATE USE ONL)	Current Use	(Prior if being dem	olished)
Name of Monitoring Firm Hired by	Building	Own	er (8)	AS	SCM No.	Name of Abates	ment Contractor	(0)	
Pennoni Assoicates, Inc.				1	00102	BRISTOLE	NVIRONMEN	TAL INC	
Street Address						Street Address	MAINOMINEM	IAL, INC.	
515 Grove St., Suite 1B							ER STREET		
City, State, Zip Code						City, State, Zip (
Haddon Heights, NJ 08035						BRISTOL, P		4	
roject Manager for Monitoring Fir	m		T	elepho	one No.	Telephone No.	A 19007		
Alan Lloyd					547-0505	215-788-604	0	License No.	
tart Date (10)	Sche	duled	Com		Date (11)	Name of OSHA I		00509	0
11 / 26 / 12	_	12	/_	1	/ 12		WIRONMENT		
ccupancy Status During Abateme	nt (Chec	ck only	(one)	1		Street Address	ANCHARIA	AL, INC.	
Facility Closed/Vacated During	Entire Pa	eriod o	f Aha	****	t				
Abatement Performed Outside of	of Norma	I Facil	M L.I.			1123 BEAVE			
Time of Abatement. 7:00AM-11	1:30PM/		PM-		AM	City, State, Zip C BRISTOL, PA			
cope of Work (Check all that apply	()			-					
≥3 sf or ≥3 If		⊠R	enova	ation		⊠ Full Con	tainment with No	egative Pressure	
≥160 sf or ≥260 If			emoli			TI IAIII II-EUC	closure g Procedure		
		т.				☐ Non-Exe	mpted (*) and N	lon-Friable Procedu	Ire
Location of		• 20	s Loca Norm					T TOCCU	
Asbestos-Containing Material (A	CM)	Use	ed So	lely by	Ach	Description of	f		Abatement Ty
TO BE ABATED IN Facility		Ma	inten	ance/	(i.e	estos Containing Mai e., thermal systems i	terial (ACM)	Amount	Encap Repair Remov
(13)		Cus	(12			surfacing, VAT.	or	(Specify SF or LF)	Encapsu Repair Removal
		Yes	No			other miscellaned	ous)		Encapsulate Repair Removal
sement Room G20B			×		Firepro	ofing		1589 SF	N D D
								1303 3F	
					 				
			П		+				
ne of Registered Waste Hauler				N. 100 C.	Waste	Cubic Yards of	N .	2000	
RISTOL ENVIRONMENTAL,	INC.		Н	lauler l	D No.	Waste	Name of Regis		
State				1870	6	Disposal Date		NORTH LAND	FILL
RISTOL, PA 19007						oposai Dale	City, State	I E DA 4000-	
	7					Lancing and the second	MOKKISAIT	LLE, PA 19067	ži.
pleted By (Print or Type)	Title					Signatura			
pleted By (Print or Type) ian Scafiro		imato	or			Signature	1. 1	/ Date	/8/12

No weck

No check					N OF ASE t to NJAC					PEOF	1			
Date of Notification (1)				Name	of Building	Owner/0	Operator	(2)	2510		1 1/4	=0		
11-30-12					ate of	New	Jerse	ey	4112	DEC				
Agencies Notified	Type Notification				Address West	State	Stro	oct	1 : a -	DEC 4	4	: 41	3	
IX EPA □ DEP	☐ Initial ☑ Amended		-		ate, Zip C		bue	ec ,	3	5103 m	Towns or o	•	,	
X DOL	Amendment	# 1		1000	enton,		8625		et ,	LICENS	MI	187		
⊠ DOH	☐ Emergency (justification)	including	-		of Contact	100000000000000000000000000000000000000	0025		T	elephone Nu	mber	٠.		
₩ DCA	☐ Cancellation			Ric	chard :	Ferra	ra		-	•				
				FAC	ILITY INF	ORMAT	ION						-	
Name of Facility Where A	batement is Taking	g Place (3)					Type of Faci	ity (4)					
NJ State Museu	am							□ School			•			
Street Address										ther than K-1 e & commerc		Idinas	. hom	ies.
205 W. State S	street			10.00 A TOTAL			2003. 2	etc.)				170		
City (5)								Square Feet 35,000	#	of Floors		3ldg. <i>i</i> 42y :		
Trenton County (6)			- 1	County	Cada (7)				(Dring if h	arenazīka	- 1	42y.	LS.	
Mercer					Code (7) USE ONLY)		Current Use museum	(-1101 11 0	eng demois	ileu)			
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCI	M No.		Name	of Abatement	Contracto	or (9)				
USA Environemnt			,	112			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Television (1990)	<u>.</u>	Tna		
Street Address	ranagan			1112				nouth Env Address	TTOIL	lentar C	O. , .	LIIC.		
344 West State	Street						923	Haws Ave	enue					
City, State, Zip Code							City, S	tate, Zip Code						
Trenton, NJ 08	618						Nor	ristown,	PA 19	9401				
Project Manager for Monit	oring Firm			Telepho				one No.		License N				
Billy Weisgarbe	r		ATT CONTROL OF THE		56-810		610-	-239-9920)	00398				
Start Date (10)				npletion	Date (11)		n, superior	of OSHA Mon	7000s					
12-10-12	1	1-11					Plyn	nouth Env	rironm	ental C	0.,]	Inc.		
Occupancy Status During		- 5						Address						
☐ Facility Closed/Vacat☐ Abatement Performed	ed During Entire P	eriod of	Abatem	nent				Haws Ave	nue					
✓ Other – Describe:	work areas	isola	ted				10000 Employee	istown, P	π 1Ω <i>1</i>	01				
Scope of Work (Check All	That Apply)		35-7075				11011	I DCOWIT, I	A 134	01				
□ ≥3 sf or ≥3 lf		XO F	Renova	tion			[3	Full Contai	nment wi	th Negative F	Pressi	re		
□ ≥160 sf or ≥260 lf			Demolit				0			iii Negalive i	10330	10		
							□ ⊠	Glovebag f		e nd Non-Friab	le Pro	cedur	e	
		7-	1 41					Tron Exem	1	na mon i nac	T		ement	t
Location	√ŧ.		Locati Normali			Dos	scription	of				Ту	ре	
Asbestos-Containing N		/ SCHOOLS	d Sole		Asbes			aterial (ACM)		Amount			Е	_
TO BE ABAT			todial S		(i.e.		systems sing, VA	insulation,		(Specify SF or LF)	Ren	Re	Encapsulate	Enclosure
(13)	'		(12)				niscellan			or cr Li)	Remova	Repair	lusc	osui
		Yes	No	N/A							=		ate	Ġ.
2nd floor galle	rv		x		plast	er			384	I.E.	x			
2nd floor galle	4		x			skin	ı coa		200		х	-		
	1				92000	o Oithi	COU		1					
											1			
Name of Registered Waste	Hauler		N.	JDEP W	/aste	Cubic `	Yards	Name	of Regist	ered Landfill				
Robinson Waste		7304		of Was	te	CDO	TC .							
City State	7504		15 Dienos	al Date	GROV City, S									
Bellmawr, NJ						1–11				Ae,PA				
Completed by		Title					gnature		17/	Da	te			
Timothy E. Bryan	n		ce-P	resid	dent	1	1	1	119	1.7565	1–30)-12		
					~~	`			147			-		

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) November 30, 2012					Name of Building		ersey American V	ECEIVE Vater	=9	090	67	
Agencies Notified [x] EPA [] DEP [x] DOL [x] DOH [] DCA	Ame Ame	al Notification Notification (Notification)	otification # (including		Street Address City, State, Zip C Name of Contact		ees, NJ 08043	EC-4 111	4: 36 ROL		1	
	[] Cano	cellation	ĺ		Jim S	challer				1		
				FAC	CILITY INFORM	MATION						
Name of Facility Where A	batement is Takin ntoloking Pum						Type of Facility (4)	School (k-12)				
Street Address		1					וֹ זֹ ו	Subchapter 8 (o	ther tha	n k12)		
	5 Bay Avenue						[x]	Other (i.e., priva homes, etc.)	ate & co	ommer	cial bu	ildings,
City	*	Coun	ity (6)		County Code (7)		Square feet	# of Floors	Bld	g. Age		
Mantoloking	₩.	000			(STATE USE ONL	.Y)	400 sf Current Use (Prior	1			80	
		Oce					Pump 1		1)			
Name of Monitoring Firm	Hired by Building ardian Contrac				ASCM No.	Name of	Abatement Contracto	r (9)	*			
Street Address	1C.			Street Ac		an Contracting	, Inc.					
188						oute 9, Unit 61						
City, State, Zip Code	ns River, NJ 0	8755				City, Sta	te, Zip Code	River, New Jers	ω. Ω 9	755 1	271	
Project Manager for Monit	toring Firm	733	Telephone	Number		Telephor	e Number	License N			2/1	
Nicholas Fern Scheduled Start Date (10)	nicola		732-349		ion Date (11)	732-34		00624				
11/30/12			12/3/		ion Date (11)	Name of	OSHA Monitor E.M.S.	L. Analytical				
[] Abai	Abatement (Check lity Closed/Vacate tement Performed er – Describe	d Durin	g Entire Peri			Street Ad	1056 S e, Zip Code	telton Road way, New Jerse	ey 088	354		
Scope of Work (Check all	that apply)					[]	Full Containment	with Negative Pre	essure			
						[]	Mini-Enclosure					
	f or ≥3 lf) sf or ≥260 lf		[x]	Renova Demoli		[] [x]	Glovebag Proced	ure) and Non-Friable	Dragadi			9
[7]) 31 01 E200 II		t J	Demon	T	[^]	Non-Exempted () and Noiffilable	riocedi	ure		
			* *						Abat	ement	Туре	
Location of Asbestos-Containing M	aterial (ACM)		Is Location Normally uses Solely by tenance/Cu	sed	Ast N	Description bestos-Con Material (A ,, thermal s	taining CM)	Amount (Specify SF or LF)	R E M	R E P	E N C	E N C L
in facility			Staff		inst	ılation, sur			O V	I R	P S	0
(13)			(12)		oth	VAT, or er miscella			A	K	U	S U
		YES	NO	N/A			,		L		L E	R E
Pump house			T	X	Transite panel	S		280 sf	X			
Name of Registered Waste Hauler Guardian Contracting, Inc. NJDEP Waste Hauler I 20223					ID No. Cubic Ya 2	rds of Waste	Name of Registe T.R.R.F.	red Landfill				
City, State				Dispos	al Date	City, Sta	te					
Toms River, I Completed by (Print or Typ		Title		12/4/1	Signature \(\)] Tullyto	wn Pennsylvania	-	Date			
Nicholas Fern	ct Manage	er	Vi	chi	Tte		11/3	0/201	2			

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

No check

Po por	,m		
	1 771	1/5	
	Name	VF	1

Date of Notification (1)	Nam	e of Buildir	ng Owner/Operato Trustee	r (2) s of Princeto	n University	· . ,	Ma. J	<i>y y</i> -•	<u>D</u>			
Agencies Notified	Type Notification	1		Stre	et Address		MacMillan		-4	-Pi	4:	55
DEP DOL	Amended Amendment	#_3	5	City,	State, Zip	Code	rinceton, NJ (& LI	EN	SIN	TR	OL.
M DOH □ DCA	☐ Emergency (justification) ☐ Cancellation	nciuair	ng .	Nam	e of Contac			Telephone Num		0114	<u>. </u>	Ø.
		-		F.A		ORMATION						=
Name of Facility Where	Abatement is Takir	ng Plac	e (3)		- III	OTHINATION	Type of Facility	v (4)		-		
Street Address	Exterior S	Steam	Tur	nel			School (K-1	8 (Other than K-1	2)			
	Roper &	Ł Ivy	Lane	es			homes, etc.		ial bu	ilding	S,	
City (5)	Princ	eton.	NJ				Square Feet NA	# of Floors		Bldg.	Age	-
County (6)	//ercer		2.10		inty Code (7) (STATE	Marie Control	rior if being demol)		
Name of Monitoring Firm		Owner		ASCN	l No.	Name of Abatem	nent Contractor (9		101			_
101	MECS		_					mental Servic	es, l	nc.		
Street Address	P.O. Box 34	41				Street Address	PO F	3ox 322				
City, State, Zip Code	W v seeds	9// 21-22-24	5			City, State, Zip C	Code			_		_
Project Manager for Mor	rosswicks, NJ	0831		ephone	No	Tolombone No.	Allentow	n, NJ 08501				_
	eisgarber Jr.		73313333		8-4070	Telephone No. (609) 25	59-9688	License No.	0049)3		
Start Date (10)	Sche	1	omple	etion Da	ate ₎ (11)	Name of OSHA	Monitor		, , , ,			
7/23/12 Occupancy Status Durin	a Abatamant (Cha		1/31/	13	_	Chroni Address	M	ECS				
☐ Facility Closed/Vacat				ment		Street Address	PO E	Box 341				
☐ Abatement Performed Control Contro			ty Hou	rs		City, State, Zip C	ode	cs, NJ 08515				_
Scope of Work (Check a	all that apply)								02-2-2-			_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emolitic			Mini-End Gloveba	g Procedure	gative Pressure n-Friable Procedu	re			
			Locatio						7	Abate		
Location		Used	Sole	y by		Description of			_	Ту	oe -	_
Asbestos-Containing N TO BE ABAT		17/7/19/2000	ntenar ustodia			os Containing Mate thermal systems in		Amount (Specify	Re	Re	Ш	E E
IN Facility (13)			Staff? (12)			surfacing, VAT, other miscellaneo	or	SF or LF)	Remova	Repair	Encapsulate	Enclosure
, ,		Yes	No	N/A		ouror miodoliano			1 20		ulate	re
Exterior tunnel	ls located			×		pipe insulati	on	600 LF	×			
in roadw	'ay											
					-							
Name of Registered Waste Hauler N					Vaste	Cubic Yards	Name of Regis	tered Landfill				
	Stevens Environmental Services Inc.					of Waste	Name of Regis	T.R.R.F., In	ıc.			
City, State	Allentown, N	JI			292 (Disposal Date 1/31/13	City, State	1				
Completed By						Signatur		Tullytown, I	A		_	=
Mahlon E. Stevens Project					ager	_ / //			11/3	0/12		_

Date of Notification (1)			Nan	ne of Buildi	ng Owner/Operato	or (2)	2.000	tan E	1			
Agencies Notified	11/12 Type Noti	fication		Stre	et Address	Trustee	S OI FIIIIGGIL	200Fpiversity	4:	35		
EPA EPA	☐ Initial			1			. MacMillan	Building				
DEP :		led Iment # <u>2</u> ency (includia	na l	City,	State, Zip	Code Pr	rinceton, NJ	ELLGENSIN	G	DL.		
DOH DCA	justific Cancel	ation)		Nam	e of Conta S		***************************************	Telephone Nun		G'i	þ	
				FA		FORMATION					-	
Name of Facility Where							Type of Facili	ty (4)		220		
Charlada	Exter	rior Steam	1 Tun	nel			School (K-		0)			
Street Address	Roj	per & Ivy	Lane	S			Other (i.e., homes, etc	r 8 (Other than K-1 private & commerco.)	2) ial bu	ilding	IS,	
City (5)]	Princeton,	NJ			8	Square Feet NA	# of Floors		3ldg.	Age	
County (6)	lercer			Cou	inty Code (E ONLY)	7) (STATE	Current Use (F	Prior if being demoleraterior tunn)		
Name of Monitoring Firm (8)		ilding Owner		ASCN	1 No.	Name of Abaten		9)				
	MECS						ens Environ	mental Servic	es, I	nc.		
Street Address	P.O. Bo	ox 341				Street Address	PO	Box 322				
City, State, Zip Code Cr	osswicks	, NJ 0851	5			City, State, Zip C		n, NJ 08501				
Project Manager for Mon		<u></u>		phone	No.	Telephone No.	Timentovi	License No.				_
William We	eisgarber		-		8-4070	(609) 25	59-9688	(049	3		
Start Date (10) 7/23/12		Scheduled (20mplet 1/30/		ate (11)	Name of OSHA		IECS		11		
Occupancy Status During		27	11.5			Street Address						
☐ Facility Closed/Vacate						C'+ C' 7: 0		30x 341				_
Other - Describe:	AM - 3:	30PM	ty rioui			City, State, Zip C		ks, NJ 08515				
Scope of Work (Check al	I that apply)					□ Eull Con						
≥3 sf or ≥3 lf ★ ≥160 sf or ≥260 lf		Re De	enovation emolition	on 1			g Procedure	gative Pressure on-Friable Procedu	ro.			
		1000	Location	n			mpted () and 14	on-i nable Flocedu	T		ment	
Location o		Used	ormally I Solely			Description of			L	Ту	oe .	
Asbestos-Containing M TO BE ABATE			ntenanc			os Containing Mate thermal systems ir		Amount (Specify	₽ Z	Re	m	Ψ,
IN Facility (13)		1	Staff? (12)		(,	surfacing, VAT, other miscellaneo	or '	SF or LF)	Removal	Repair	caps	Enclosure
(,		Yes	No	N/A		other miscellaneo	us)		<u>a</u>		Encapsulate	ure
Exterior tunnels	slocated			X		pipe insulation	on	600 LF	×			
in roadwa	ay		-						-			
Name of Registered Wests Living												
					Vaste No.	Cubic Yards of Waste	Name of Regis	1				
Stevens Environmental Services Inc.					.92	30 CU	- /-	T.R.R.F., In	c.			
	Allentov	vn, NJ				Disposal Date 11/30/12 ; //	City, State	/ _Tullytown, F	Α			
Completed By Title						Signature	+	Date		_		=
Mahlon E. Stev	Pr	oject	Man	ager	-1-///			9/28	/12		_	

				AC 8:60 and 5:		RE	CE	111	>			
Date of Notification (1) 2/11/12			Na	ime of Build	ing Owner/Opera Trusto	ees of Prince	ton Universit	V			
Agencies Notified	Type Notifica	tion		Str	reet Addres				-4	141	1	~.
EPA DEP	Initial Amended			_			A. MacMilla	n Building		111	4.	36
DOL DOL	Amendme			Cit	y, State, Zip		D.I N	J 08544& []	45 (MUN	TB	e i
⊠ DOH	☐ Emergence justification		ling		me of Conta		Princeton, N			H	-	UI.
DCA	Cancellation					ean Gallagh	er	Telephone N	lumber			0
-20					FACILITY IN	FORMATION					_	
Name of Facility Where		1000					Type of Fac					200
Street Address	Exterior	Stea	m It	innei			School (F	<-12) ter 8 (Other than I	C-12\			
Street Address	Roper	& Iv	v Lai	ies			Other (i.e	., private & comme	ercial b	uildin	gs,	
City (5)							homes, e			Bldg	Age	,
	Priı	ncetor	ı, NJ				NA			- Diag	rige	
County (6)	Mercer			Co US	ounty Code (SE ONLY)	(7) (STATE	Current Use	(Prior if being den		d)		
Name of Monitoring Firm		g Owne	er	ASC	M No.	Name of Abate	ement Contractor		шег	-		
(8)	MECS				2000000000	Company of the Compan		nmental Serv	ices,	Inc.		
Street Address	D.O. D.					Street Address	S					
0't Ct-1- 7'- 0 1	P.O. Box	341						Box 322				
City, State, Zip Code	rosswicks, N	1 085	15			City, State, Zip		wn, NJ 08501			1-30	
Project Manager for Mo				lephon	e No.	Telephone No.	7110110	License No				
William W	eisgarber Jr.		. (6	09) 2	98-4070	1/6	:59-9688	Licenserve	0049) 3		
Start Date (10)	Sch	neduled			ate (11)	Name of OSHA	Control of the Contro					
7/23/12 Occupancy Status Durir	Ab-tt/Ol		9/28			100.00		MECS				et 181 9098.001
Facility Closed/Vacat						Street Address		Box 341				
Abatement Performe	d Outside of Norm	nal Faci			-	City, State, Zip o		DOX 341				
Other - Describe: _		M						ks, NJ 08515	i			
Scope of Work (Check a	all that apply)					Пело		· · · ·			===	
≥3 sf or ≥3 lf ★ ≥160 sf or ≥260 lf			enova emoliti			Mini-En	ag Procedure	egative Pressure	lure			
			Locati				(//			Abate	ment	
Location of			lormall d Sole			Description of	f			Тур	е	
Asbestos-Containing M TO BE ABAT		7.11.00	ntenar ustodi:			s Containing Mai hermal systems i	terial (ACM)	Amount	Z,	R	ш	п
IN Facility			Staff?		1	surfacing, VAT,	or	(Specify SF or LF)	Remova	Repair	ncap	CIO
(13)			(12)	T	1	other miscellaned	ous)		Val		Encapsulate	Enclosure
		Yes	No	N/A		N					to	
Exterior tunnel				×		pipe insulati	on	_600 LF	X			
ın roadw	in roadway											
									1			
ame of Registered Wast	e Hauler	Ll	IN	JDEP V	Vaste I (Cubic Yards	Name of Regis	stered Landfill				
Stevens Environm		s Inc	lы	auler ID 182	No.	of Waste 3 CU	\ \rightarrow	T.R.R.F., In	20			
ity, State				102		Disposal Date	City, State	1.K.K.F., II	ic.			_
	Allentown, N					9/28/12	Y	Tullytown,	PA			
ompleted By Mahlon E. Stev	Title		.:	1/		Signature	,	Date			_	=
-41	CIIS	Pro	oject	Mana	ager	1/11			8/17/	12		_

Date of Notification (1)				(Pursuant to				A Share L	PEIV	F
	<i>2/11/12</i>			Name of E	Building Owner/Ope	erator (2)	- 2	1120-	- 6	=[
Agencies Notified	Type No	tification			Trus	erator (2) stees of Pri	nceton	University	L .	55
EPA EPA	Initial	incation		Street Add			4.	1.0	7 021	4.
DEP DOL	☐ Amen	ded		City, State,	E	.A. MacM	illan Bu	ilding US		
⊠ DOH	☐ Emerg	dment #_	luding	Oity, State,	ZIP Code	EAST-STATE		LICE	VSING	Ra T
DCA	☐ justific	'ation\	dung	Name of Co	ontact	Princeton.	NJ 085	544	THE	- 1
	Carice	liation		0,00	Sean Gallagh	10=		relephone Nu	mber	-(
No 15				FACILITY	INFORMATION	101				
Name of Facility Where	Abatement is	Taking I	Place (3)	U. P. 1000 - Po. 11 Pen	INFORMATION		V. 20-20-			
Street Address	Exter	ior Ste	am Tur	inel			acility (4)			
	D.o.	. 0 7				. School	anter 8 (C	other than K-1	100	
City (5)	Kop	er & Iv	vy Lane	S		Les Other	I.e. privat	te & commerc	(2) Cial building	ne
	D	rinost-				homes Square Fe	,,	of Floors		
County (6)		rinceto	n, NJ			NA	,61	of Floors	Bldg.	Age
Me	ercer			USE ONLY)	e (7) (STATE	Current Us	e (Prior if	being demoli		
Name of Monitoring Firm F	Hired by Build	ding Own	er	ASCM No.			evt	erior tunn	snea) el	
1 · · N	MECS	•	· /	NOCIVI IVO.	Name of Abate	ment Contract	or (9)			=
Street Address					- Ste	vens Envir	onment	tal Service	s. Inc	
City, State, Zip Code	P.O. Box	341			Street Address				-, -110.	=
	2011-1				City, State, Zip C	P(O Box 3	322		
Project Manager for Monitor	sswicks, 1	NJ 085			Only, State, Zip (N. N. T.	(007-		
William Weis	nng Firm	50000		none No.	Telephone No.	Anemo	own, NJ			
Start Date (10)			(609	298-4070	(609) 25	9-9688	Lic	ense No		
7/23/12	1		011-	n Date (11)	Name of OSHA M	Monitor		00	493	
Occupancy Status During Al-	batement (C		8/17/12				MECS			
- dulity closed/Vacated b	During F 1			nt	Street Address					
			ty Hours		04.0	PO	Box 34	1		
Other - Describe: 7AN Scope of Work (Check all that	VI - 3:30P	M			City, State, Zip Co					_
ocope of Work (Check all the	it apply)					Crosswic	ks, NJ	08515		
										_
7>3 sf or >3 #	ee au natae * 6	⋉ Re	novation		☐ Full Conta	inment with Ne	enative Dr	0001		
		Rei Der	novation nolition		Full Conta		egative Pr	essure		
7>3 sf or >3 #		☐ Der	nolition		Glovebag	Procedure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Is Lo	nolition ocation mally	T	Glovebag			Procedure	Abatama	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Materia		Is Lo	nolition ocation mally Solely by		Glovebag Non-Exem	Procedure pted (*) and No		Procedure	Abatemen Type	ıt
≥3 sf or ≥3 if ≥160 sf or ≥260 lf Location of Asbestos-Containing Material TO BE ABATED		Is Lo Nor Used S Mainte Cus	cation mally Solely by enance/ todial	Asbestos (i.e., the	Glovebag Non-Exem	Procedure pted (*) and No	on-Friable Amou	Procedure	Туре	Т-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Materia		Is Lo Nor Used S Mainte Cus Sta	cation mally Solely by	(1.6., 1116	Description of Containing Material systems insulurfacing VAT or	Procedure pted (*) and No	Amou (Spec	Procedure	Туре	Т-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material TO BE ABATED IN Facility		Is Lo Nor Used S Mainte Cus Sta (1	cation mally Solely by enance/todial aff?	(1.6., 1116	Description of Containing Material	Procedure pted (*) and No	on-Friable Amou	Procedure	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 lf Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)	il (ACM)	Is Lo Nor Used S Mainte Cus Sta (1	pocation mally Solely by enance/ todial aff?	(1.6., 1116	Description of Containing Material systems insulurfacing VAT or	Procedure pted (*) and No	Amou (Spec	Procedure	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material TO BE ABATED IN Facility (13) Exterior tunnels location	il (ACM)	Is Lo Nor Used S Mainte Cus Sta (1	coation mally Solely by enance/todial aff?	(i.e., the	Description of Containing Materia systems insulurfacing, VAT, or her miscellaneous)	Procedure pted (*) and No	Amou (Spec SF or L	Procedure Removal	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 lf Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)	il (ACM)	Is Lo Nor Used S Mainte Cus Sta (1	pocation mally Solely by enance/ todial aff?	(i.e., the	Description of Containing Material systems insulurfacing VAT or	Procedure pted (*) and No	Amou (Spec	Procedure Int ify Removal	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material TO BE ABATED IN Facility (13) Exterior tunnels location	il (ACM)	Is Lo Nor Used S Mainte Cus Sta (1	pocation mally Solely by enance/ todial aff?	(i.e., the	Description of Containing Materia systems insulurfacing, VAT, or her miscellaneous)	Procedure pted (*) and No	Amou (Spec SF or L	Procedure Removal	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 lf Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13) Exterior tunnels loca in roadway	al (ACM)	Is Lo Nor Used S Mainte Cus Sta (1	molition cocation mally Solely by enance/ todial aff? 2) No N/A	s otl	Description of Containing Materia systems insulurfacing, VAT, or her miscellaneous)	Procedure pted (*) and No	Amou (Spec SF or L	Procedure Removal	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 lf Location of Asbestos-Containing Material TO BE ABATED IN Facility (13) Exterior tunnels locating roadway The of Registered Waste Haule	ated	Is Lo Noi Used 3 Mainte Cus Sta (1	nolition cation mally Solely by enance/ todial aff? 2) No N/A	s otl	Description of Containing Materia systems insular facing, VAT, or ther miscellaneous)	Procedure pted (*) and No	Amou (Spec SF or L	Procedure Removal	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 lf Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13) Exterior tunnels loca in roadway	ated	Is Lo Noi Used 3 Mainte Cus Sta (1	molition cocation mally Solely by enance/ todial aff? 2) No N/A	vaste Cut	Description of Containing Materia systems insular facing, VAT, or her miscellaneous) ipe insulation oic Yards Na Waste	Procedure procedure pled (*) and No	Amou (Spec SF or L	Procedure Removal F X	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 lf Location of Asbestos-Containing Material TO BE ABATED IN Facility (13) Exterior tunnels location roadway The of Registered Waste Haule evens Environmental State	ateder	Is Lo Nor Used S Mainte Cus Sta (1	nolition cation mally Solely by enance/ todial aff? 2) No N/A	vaste Cut No. of V	Description of Containing Materia systems insular facing, VAT, or her miscellaneous) ipe insulation Description of Containing Materia systems insular facing, VAT, or her miscellaneous) ipe insulation Dic Yards Vaste 3 CU	Procedure Proced	Amou (Spec SF or L	Procedure Removal F X	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 lf Location of Asbestos-Containing Material TO BE ABATED IN Facility (13) Exterior tunnels location roadway The of Registered Waste Haule evens Environmental State	ated er Services	Is Lo Nor Used S Mainte Cus Sta (1	nolition cation mally Solely by enance/ todial aff? 2) No N/A	Vaste No. of V92 Disp	Description of Containing Materia systems insular facing, VAT, or ther miscellaneous) ipe insulation pic Yards Vaste 3 CU posal Date 6 City	Procedure Proced	Amou (Spec SF or L	Procedure Removal F., Inc.	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 lf Location of Asbestos-Containing Material TO BE ABATED IN Facility (13) Exterior tunnels location roadway Die of Registered Waste Haule evens Environmental State Allen Deleted By	ateder	Is Lo Nor Used S Mainte Cuss Sta (1	nolition Decation mally Solely by enance/ todial aff? 2) No N/A NJDEP V Hauler ID 182	Vaste No. of V92 Disp	Description of Containing Materia systems insular facing, VAT, or her miscellaneous) ipe insulation Description of Containing Materia systems insular facing, VAT, or her miscellaneous) ipe insulation Dic Yards Vaste 3 CU	Procedure Proced	Amou (Spec SF or L	Procedure Removal F X F., Inc.	Туре	Т-
≥3 sf or ≥3 if ≥160 sf or ≥260 lf Location of Asbestos-Containing Material TO BE ABATED IN Facility (13) Exterior tunnels locating roadway The of Registered Waste Haule evens Environmental State Allen Allen	ated er Services	Is Lo Nor Used S Mainte Cuss Sta (1	nolition cation mally Solely by enance/ todial aff? 2) No N/A	Vaste No. of V92 Disp	Description of Containing Material systems insular surfacing, VAT, or her miscellaneous) ipe insulation pic Yards Vaste 3 CU losal Date 17/12	Procedure Proced	Amou (Spec SF or L	Procedure Removal F X F., Inc.	Type Encapsulate Repair	Т-

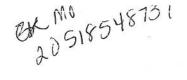
Check # 8404 RECEIVED

Date of Notification (1)	_	Name of Bu	ilding Owner/Operat	or (2)					
19-1	-12	W	illiam 1	CORRES	ALLIZOEC -4	D14 .	3		
Agency Notified Type Notifi	cation	Street Addr	255	F-24 /4	.Geco -q	PA 4:	35	777	
□ EPA DAnitial		P.C	1. Box 23	J+	Mark Till	1.00	V 3	- 4	554
DDEP Amende		City, State,	Zip Code	4111	801 4505	UNTR	GI_	-	-
□ Emerger	cy (including	Wo	ccabuc	_ NY	10-74 W	HAG	a		
DOH justificat ☐ DCA ☐ Cancella		Name of Co	ntact	11	Telephone Numb	20-	- 52 1	-	-
		Calla		r (Kathy)			- 00	•	
Name of Facility Where Abatement is	Taking Place (3)	FACILITY	INFORMATION						
	∞ 1	и		Type of Facility	y (4)				
Street Address	y Shore	Hous	و	☐ School (K-1	2)				
	7	-		Other (i.e. p	8 (Other than K-12) rivate & commercial	huildings			
City (5)	MSEL	errac	<u>e</u>	homes, etc.)	odilolligs			
Haven Beac	h NJ	080	100	Square Feet	# of Floors	Bldg. Ag	100		
County (6)	n 103		(7) (STATE USE		12	4	5	e —	
Ocean		ONLY)	(/) (STATE USE		rior if being demolis		-		
Name of Monitoring Firm Hired by Build	ding Owner ASCN	1 No.	Name of Abete	ment Contractor (nily Shon	x Ho	usc	_	
(8) EPC Technolo	Carrier of the Contract of the Carrier of the Carri	NA							34
Street Address	1162	17/4	Street Address	C rech	nologies,	Inc	ent!		
P.C. Box 337			0.000.000	~	_				
City, State, Zip Code			City, State, Zip	P.O. Bei	K JJF				
New Egypt No	08233				NT O	853	>		Ì
Project Manager for Monitoring Firm	Telepho		Telephone No.	Egypt	License No.	033)		-
Steve Schenker	609 7	58-3365	609-758	-3365	Control to control or control of the	394			
	eduled Completion Da	te (11)	Name of OSHA	Monitor			-		
	9-59-13		EPC	- Techn	alogies :	$T_{\alpha c}$			
Occupancy Status During Abatement (C	neck only one)								-
acility Closed/Vacated During Entire	Period of Abatement	543	P.C	Box 3	337				
☐ Abatement Performed Outside of Nor ☐ Other – Describe:	mai Facility Hours,				200 m 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	·	~		
Scope of Work (Check all that apply)			New	Egypt	NJ O	853	<u>3_</u>		
		· ·	□ Full (Containment with	Negative Pressure			(8)	
2 3 sf or ≥ 3 lf 2 ≥ 160 sf or ≥ 260 lf		☐ Renovation ☐ Renovation	U Mini-	Enclosure ebag Procedure	ti				
				ebag Procedure Exempted (*) and	Non-Friable Proced	lure			-
•	Is Location	on					bater	nen	t
Location of	Normall		Description of			-	Тур	е	_
Asbestos-Containing Material (ACM	Used Solel Maintenan	ce/ Ast	estos Containing Ma	aterial (ACM)	Amount			m	
TO BE ABATED IN Facility	Custodia	al (i	e., thermal systems	insulation,	(Specify	Rer	20	nca	Enc
(13)	Staff?	1 3	surfacing, VAT other miscellane		SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes No	N/A .				<u> </u>	1	ate	ē
0.11.2	res No		V CI.		~~~~		\sqcup		
extenion wells		X 3i	ding Shi	ngles	3000	SFX			
				2					
Name of Degistered Wests Having	LNIDEDIN	aste Hauler	TABLET	1					
Name of Registered Waste Hauler	ID No	Zo -	Cubic Yards of Waste	Name of Regist					
EPC Technologies	> /	1000	12	Waste	Monagem	ent			
City, State			Disposal Date	City, State			-		-
NE NJ	п —		19-33-15	Monnis	ville P	A			
Completed by	Dan Lak		Signature 7	701	/ Da	ate			\dashv
Steve Schenker	President		She	ve John	he 1	9-1-	15	_	
ASB-41 •	Do not use this form f	or asbestos li	censure exempted a	ctivities.					

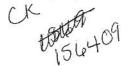
CK 2699

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

Date of Notification (1)		Name o	f Building	Owner/0	Operator	(2)		-				-			
11/28/12					Buchalte			2	012 DEC	-4	PM I.	٠.			
Agencies Notified	Type Notification			Street A	ddress enape T	rail							10/2-		
EPA DEP DOL	Initial Amended		İ	City, Sta	ate, Zip C	ode			& LI	CEN	SINC	101.			
(<u></u>	Amendmen Emergency		-		eld, NJ		V 11		/	Water to the		(3)			
DOH DCA	justification)				f Contact Buchalte					Tel	enhone N	lumhái	2		
					LITY INF		ION			-					
Name of Facility Where House	Abatement is Takir	ng Place (3)				OTUMPET		Type o	of Facility (4)					
Street Address									chool (K-12 ubchapter 8		or then V	40)			
745 Leanpe Trail								× o	ther (i.e. pr				ilding	s, hom	nes,
City (5)								Square	tc.) e Feet	#0	f Floors		Bldg.	Age	
Westfield, NJ								N/A		N/A			N/A		
County (6) Essex					Code (7) USE ONLY)		Curren Hous	t Use (Prior	r if bei	ng demol	ished)	1		
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	I No.				ement Cont		(9)				
Street Address								Abate	ment, Inc). 					
ou del viudi coo							100000000000000000000000000000000000000		ren Aven	ue					
City, State, Zip Code								state, Zip wa, NJ	Code 07512						1
Project Manager for Mon	T	Telepho	ne No.			none No. 345-86			License #0067						
Start Date (10)		Scheduled	Cor	npletion I	Date (11)				A Monitor		110001				
12/13/12		12/15/12	B						ment, Inc						
Occupancy Status Durin	8 8	575X	58				277	Address	en Avenu	10					
Facility Closed/Vac Abatement Perform	ned Outside of Norn	Period of Ab nal Facility I	aten	nent S				tate, Zip		<u> </u>					
Other – Describe:						_	S		07512						
Scope of Work (Check A	All That Apply)		2011000				×	1	LO 50 20		1014				
≥160 sf or ≥260 lf		Management .	nova molit				Ê	Mini-	Containmer Enclosure		Negative	Press	ıre		
									ebag Proce Exempted		d Non-Fri	able Pr	ocedi	ire	
		ls L	ocati	ion						7 411			Aba	temen	t
Location		No Used	rmal		SE 32		scription					-		уре	
Asbestos-Containing TO BE AB		Main	tena	nce/				faterial (mount pecify	7		g	m
In Facil	lity	Custo	dial 8 (12)	Staff?	(1.0.	surfa	cing, VA	T, or	011,		or LF)	Remova	Repair	caps	Enclosure
(13)				T		other r	niscellan	eous)				val	a:	Encapsulate	sure
basem	ent .	Yes	No X	N/A		floort	ile & m	a a ti a		70	0.05		1	-	
Dasein			^			HOOF	ne & m	astic		70	00 SF	X	-	-	
										-		+	-	-	
										+	+				
Name of Registered Was	1000	JDEP W		Cubic		Т	Name of Re	egiste	red Landf	fill	1	<u> </u>	Ч		
D&S Abatement, Inc.					No.	of Was	ste		Waste M	anag	jement	of PA			
City, State Totowa, NJ						Dispos	al Date		City, State Tullytowr	ı. PA					
Completed by		Title					ignature) A	., . ,		Date	*****		
Deanna Brkusanin	Ма	nager					Slinn	-		1/26/	12				



Date of Notification (1) 11/26/12				f Building Ov Mager	wner/Opera	ator	⁽²⁾ 2812 D	EC -4	PM 4	: 32				
Agencies Notified	Type Notification			Street A 5 Pros	oddress spect Ave			\$ 3 m C	STOS	CUNT	ROL			
EPA DEP DOL	Amended Amendmen		_ [ate, Zip Code lair, NJ 07					NSING		79		
DOH DCA	ighter in the second se				f Contact Mager				Те	lephone N	umber			
				FACI	LITY INFOR	MATION	-							
Name of Facility Where House	Abatement is Takir	ng Place (3)					Type of Facility						
Street Address 5 Prospect Ave					**				er 8 (Oth	er than K- & commer		ildings	, hom	es,
City (5) Montclair					2.			Square Feet N/A	# o	f Floors A		Bldg. N/A	Age	
County (6) Essex					Code (7) USE ONLY)			Current Use (P House	rior if be	ing demoli	shed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	/ No.			of Abatement C Abatement,		(9)				
Street Address	7 - Armento (1782 - 17			<u> </u>		Stre	eet	Address						
City, State, Zip Code								osengren Ave tate, Zip Code	enue					
Project Manager for Mor	nitoring Firm		Telepho	ne No.			va, NJ 07512 one No.	2	License	No				
Start Date (10)		d Con			97	3-3	345-8685		#00675	77				
12/07/12		12/08/1	2	npietion	Date (11)			of OSHA Monito Abatement, I						
Occupancy Status Durin						100000		Address osengren Ave	anua					
Facility Closed/Vac Abatement Perform Other – Describe:	ed Outside of Norr	Period of A nal Facility	Hours	nent		City	, St	ate, Zip Code va, NJ 07512						
Scope of Work (Check A	II That Apply)		-			10	7104	va, 140 07 012						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit			,		Full Containr Mini-Enclosu Glovebag Pr Non-Exempt	re ocedure	(5)			re	
		Is	Locati	on								Aba	emen	t
Location			ormal		-	Descripti	ion	of			_	T	ype	-
Asbestos-Containing	Material (ACM)		d Sole		Asbestos	Containing	g M	aterial (ACM)		mount		-	m	_
TO BE ABA		1,000,000,000	odial S	10.000000	(i.e. the	ermal syste surfacing, \	ems	insulation,		Specify F or LF)	Ren	Re	nca	l iii
(13)	•		(12)	,		ther miscel			0,	OI LI)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A					ļ			1	e e	
baseme		-	X			ooiler inst	100-50			5 SF	X	_	_	
baseme	ent		X			pipe insu	ılat	ion	1:	50 LF	X	-		
					A - ST	***************************************			+					
Name of Registered Was	137/8	JDEP W auler ID		Cubic Yards	S	Name o	f Registe	ered Landfi	ll .					
Das Abatement, Inc.					T	BD				gement o	of PA			
City, State Totowa, NJ					1000000	Disposal Da BD	ite	City, Sta	ate wn, PA	A				
Completed by Deanna Brkusanin		Title				Signatu	ure	711			ate			
Dealina Dikusanin		ot ivia	nager			M	1.60 Full	illes	, 1	1/26/	12			



P	Per	19	Denn	22			
2 /	L	6	ER.	11	1	-	per.
			this:	4	0	frea	

Date of Notification (1)				Name o	of Building	Owner	/Operato	r (2)		10 10		- 44	- 1 6	E)
11/28/12				Janet	Barron		W. C				2012 DE	r_,	٥.		
Agencies Notified	Type Notification			Street A							2012 DE	<u> </u>	PH	4:	3/
× EPA × DEP × DOL	Initial Amended				SW 13th		nue			41	3888	100			
▼ DOL	Amendmen		_		Coral, F		14				& L	CEN	SIM	IRE	91.
ĭ DOH	Emergency justification)				f Contact					Te	elephone	Numbe	r	<u> </u>	
DCA	Cancellation	1			Baron D	01.700.0000									C
Name of Facility Where	Abatement is Takir	ng Place (3)		FACI	ILITY INF	ORMAT	TION	Tvr	e of Facility	(4)					
House									School (K-						
Street Address			1000					員	Subchapte	r 8 (Oti	ner than k	(-12)	04275207775		
32 Myrtle Street								×	Other (i.e. etc.)	private	& comme	ercial bi	uilding	s, hon	nes,
City (5) Bloomfield								Squ N/A	are Feet	# c	of Floors		Bldg.	Age	
County (6)				County (Code (7)				rent Use (Pri	10-10-000		lichod)	N/A		
Essex					USE ONLY				use	ioi ii be	ing demo	iisi ieu)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	No.				patement Cor		(9)				
Street Address									atement, Ir	ic.					
Offeet Address							Street 11 R		ess ngren Avel	nue					
City, State, Zip Code		-					1		Zip Code	1140					
							Toto	wa,	NJ 07512						
Project Manager for Mon	itoring Firm		Telephor	ne No.		Teleph 973-3		No. 8685		License #0067					
Start Date (10) 12/11/12		Scheduled 12/12/12		npletion (Date (11)				SHA Monitor tement, In	ic.					
Occupancy Status During	Abatement (Chec	k Only One)				-	Street							-	
Facility Closed/Vaca	ated During Entire I	Period of Ab	aten	nent					ngren Aver	nue				40	
Abatement Perform Other – Describe:	ed Outside of Norn Occupied	nal Facility H	ours	;					Zip Code						
Scope of Work (Check A	I That Apply)		-				1000	wa, i	NJ 07512		- 7				
≥3 sf or ≥3 lf	11-27	☐ Rer	nova	tion			-	1 =	III Containme		Monetine	D			
≥160 sf or ≥260 lf		-	nolit	7. 7. 1			×	M	ull Containme ini-Enclosure	2	negative	Press	ure		
								N	lovebag Proc on-Exempted	edure d (*) an	d Non-Fri	able Pr	ocedu	re	
		ls Lo		7.00				3					Abat	emen	t
Location Asbestos-Containing	7.	Used S		ly by	Achost		scription				en en company de	-	T-	уре	-
TO BE ABA	TED	Maint Custod		0.000	(i.e.	thermal	taining M systems	insul	lation,	(8	mount Specify	Re	70	Enc	g
(13)	ıy	(12)				cing, VA niscellan			SF	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes I	Vo	N/A								<u> 20</u>	-	late	lre
baseme	ent		X			pipe	insulat	ion		6	0 LF	x		-	
								- 1.000				-	+-		
												+	+		
			-			-		_				+	-		
Name of Registered Was	te Hauler	0.77	JDEP Wa	37.07.1	Cubic	Yards		Name of F	Registe	red Landf	ill				
D&S Abatement, Inc.			100000	auler ID 1 20996	No.	of Was	ste		Waste N						
City, State Totowa, NJ						Dispos TBD	sal Date		City, State Tullytow						
Completed by		Title	-			S	ignature		2/10	•	TD	ate		-	
Deanna Brkusanin	7-	Project	Ма	nager	-		in	ill	Heller	lle	1	1/26/	12	4	

Date of Notification (1)				Name	of Building	Owner	/Operato	r (2)	-		1000000		Acres .	3	-
11/28/12					ce Bow			. (-)	21	112 DEC.	-1 ,	D	4 .		
Agencies Notified EPA	Type Notification	n			Address Stirling D	rive Ea	ast		4.5	MESTO & LIC	4	Pŗ	14:	50	-
EPA DEP DOL	Amended Amendmer	nt#			tate, Zip C		7070			& LIC	D C EN:	OT MK	VIR	ØĮ,	
▼ DOH	Emergency	(including	-		of Contact		11019			Telephone			16	0	73
DCA	Cancellation				ce Bows	***				relephone	Num	ber		421	
Name of Facility Where	Ahatement is Taki	ng Place (3)		FAC	ILITY INF	ORMAT	TION	T =				-			
House	Abdiement is Tak	rig Flace (3)						1.2	acility (4)						
Street Address 758 Stirling Drive	East							Sub Sub	er (i.e. priva	Other than ate & comm	K-12) ercial	bui	ildings	s, hon	nes,
City (5) South Orange								Square F N/A	eet	# of Floors N/A			Bldg. N/A	Age	
County (6) Essex					Code (7) USE ONL	0		Current U House	lse (Prior if	being dem	olishe	- 1			
Name of Monitoring Fire	m Hired by Building	Owner (8)		ASC	M No.			of Abatem		ctor (9)					
Street Address							Street	Address osengrer	•						
City, State, Zip Code					n n		City, S	tate, Zip Co wa, NJ 0	ode						
Project Manager for Mo	nitoring Firm		1	Telepho	one No.		Teleph	one No. 345-8685		Licens					
Start Date (10) 12/10/12		Scheduled		mpletion	Date (11)		Name	of OSHA N	onitor	#000	-				
Occupancy Status Durin	og Abstement (Che	12/11/12						Abateme	ent, Inc.			34			
Facility Closed/Vac		20.000						Address osengren	Δνεπιιο			W.Mot			
Abatement Perform Other – Describe:	ned Outside of Non	nal Facility H	our	nent s			City, S	tate, Zip Co	ode						
Scope of Work (Check A	villa and a second seco						Toto	wa, NJ 07	7512						
× ≥3 sf or ≥3 lf	ш тас друу	☐ Rer	nova	ation] Full Cor	atainmont v	with Negativ	D				
≥160 sf or ≥260 lf			nolit				×	Mini-En Gloveba	closure ag Procedu	ıre					
		ls Lo	and i	ion				I Non-Exe	empted (*)	and Non-Fr	iable	_			
Location		No	mal	ly		Des	scription	of					Abate Ty	men pe	t
Asbestos-Containing TO BE AB		Used S Maint			Asbes	tos Cont	aining M	aterial (ACI	M)	Amount				ш	
In Faci (13)	lity	Custod	ial 5 12)	Staff?	(i.e.	surfac	cing, VA	insulation, Γ, or		(Specify SF or LF)		Remova	Repair	ncap	Enclosure
(13)			No	N/A		other n	niscellan	eous)				oval	air	Encapsulate	sure
basem	ent		X	IVA		nine	insulat	ion		75 1				Ф	_
				-		pipe	irisulat	1011		75 J-	X				_
Name of Registered Was				JDEP W		Cubic '	Yards	Nar	ne of Regis	stered Land	fill				
D&S Abatement, Inc	.			auler ID 20996	No.	of Was	ste			agement		Α			
City, State Totowa, NJ	177		1				al Date	City	, State llytown, I					-	
Completed by		Title				Harman Land	ignature	7	1/		Date				
Deanna Brkusanin	<u> </u>	Project	Ма	nager			Viba	wa K I	luce	1000	11/26	6/1	2		

MO 20668763316

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

Date of Notification (1) 11/28/2012				Name	of Buildin	g Owner/on Guve	Operator	r (2)	0010.000				-		
Total District Control of the Contro	ype Notification				Address	on Guve	enei		2012 DEC	-4	PM 4	: 29			
X EPA				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	anklin T	errace			A SLASS C	ino	CONT	12.01			
DEP DOL	Amended Amendment	#			tate, Zip (Code e, NJ 0	7079		& ble 5	ICE	KSING	MUL.	D.		
DOH DCA	Emergency justification)Cancellation		3	Name o	of Contac	William Comment of The Paris		- //		Те	lephone I	Number	g		
						FORMAT									
Name of Facility Where Aba House	atement is Takin	g Place ((3)	170		OKINATI	ION	Тур	e of Facility (4	4)		35%			
Street Address									School (K-1	2)					
17 Franklin Terrace								×	Subchapter Other (i.e. p	8 (Oth rivate	er than K & comme	(-12) ercial bu	ilding	s, hon	nes.
City (5)					70 - X				etc.) are Feet		f Floors		Bldg.		
South Orange, NJ 070)79							N/A		N/A			N/A	7.90	
County (6) Essex				County (STATE	Code (7) USE ONL	Y)		Curr	ent Use (Prio	r if be	ng demo	lished)			
Name of Monitoring Firm Hir N/A	red by Building (Owner (8)	ASCI	M No.				atement Contement, Inc		(9)				
Street Address							Street	Addre	ess						
City, State, Zip Code									gren Aven	ue					
only, oraco, zip oode									Zip Code NJ 07512						
Project Manager for Monitori	ing Firm			Telepho	ne No.		Teleph	ione N	lo.		License	No.			
Start Date (10)	— т	Schodul	od Co	malation	Date (11)		973-3				00675				
12/10/2012		12/11/		ripietion	Date (11)				HA Monitor ement, Inc) .					
Occupancy Status During Ab	patement (Check	k Only O	ne)				Street	Addre	ss						
Facility Closed/Vacated Abatement Performed C	During Entire P	Period of	Abater	nent					gren Aven	ue					
Other – Describe: occu	ppied privorm	al Facility	Hour	s 					ip Code IJ 07512				,		
Scope of Work (Check All Th	nat Apply)								0 07012						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Exemple 1999	Renova Demoli				×	Mi Gle	II Containmen ni-Enclosure ovebag Proce	edure					
		T						l No	n-Exempted	(*) and	Non-Fri	able Pro			
Location of		1	Locat Vorma	lly		Des	cription	of						emen ype	ľ
Asbestos-Containing Mat <u>TO BE ABATEI</u> In Facility (13)		Ma	d Sole intena todial ((12)	nce/		tos Conta thermal: surfac	aining M systems sing, VA	ateria insula T, or		(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A		otner m	niscellan	eous)				oval	air	sulate	sure
basement			Х			pipe	insulat	ion		30) LF	х	-		
2									40						
Name of Registered Waste Ha	auler		I NI	JDEP W	anto	Cubic	/a-d-								
D&S Abatement, Inc.	aa,o,		H	auler ID 0996		of Wast	0.503050500		Name of Ro Waste M	_					
City, State Totowa, NJ						Disposa	al Date		City, State Tullytowr	D A					
Completed by	-	Title	SER. 19.10				gnature		/ unytowi	i, i A		ate			
Deanna Brkusanin		Proje	ct Ma	nager			1	X			1000	1/28/2	2012		
ASB-41 (R-06-08)						30	Do no	used	ois form for a	sbesto	s licensu	re exen	npted	activit	ies.

Date of Notification	(1)			Nic		of I	مناماني	. 0	O	(0)							
Date of Notification	11/27/12						Vater	g Owner /			-4 PM	1.50					
Agencies Notified	Type Notific	ation					dress		£812	ULL -	-4 FF	4.20					-
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DEP	Initia						& Zip		#4 (7.2)	3) I I &	CENSIA	ALIVOIT					
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□ DOH □ DCA		rgency cellation		100000			Contac							Teleph	one N	lumb	per
	Oan	Deliation		-	_		IcNic	FORMA	ION			4/5-5/6/55	-	-			_
Name of Facility Wh	nere Abatem	ent is Taking F	Place	(3)	-	CILI	1 1 114		of Faci	lity (4)							
United Water		g.		(-)					School								
Street Address		1)							Subcha	pter 8 (Other tha	an K-12)				
15 Adafre Ave								\boxtimes	Other (i.	.e. priva	ate & con	nmercia	l buildin	gs, ho	nes, e	etc.)	
011 (5)		1-						Squa	re Feet		# of Flo	ors	E	Bldg. A	ge		
City (5)		County (6)	C	oun	ty C	Code	(7)		10,00			2		0			
Toms River		Ocean									f being d	emolish	ed)				
None of Monitoria	F: 11: 11	L			- 1187	1			e Buil								
Name of Monitoring	Firm Hired b	by Building Ow	ner (8)		AS	CM N				t Contract	ctor (9)					
Street Address									t Addre								
City, State & Zip Co	de									Zip Co	de						
	ct Manager for Monitoring Firm									, NJ 0	8048						
Project Manager for	ject Manager for Monitoring Firm eduled Start Date (10) Scheduled C						nber		hone N 67-04			Li	cense N	umber 011			
	eduled Start Date (10) Scheduled C						1)			HA Mon	nitor			<u> </u>	<u> </u>		
11/29/12	9/12							EMS	L Anal	ytical							
Occupancy Status D	od / / cost od /	ment (Check o	nly on	e)					Addre	- ·	18.148.5		1				
		During Entire F utside of Norm								n Ave.							
Describe:	enomieu O	atside of Norm	ai no	urs	- /	am	to spri			Zip Coo							
Facility Occu	pied During	Abatement						vvest	mont,	NJ 08	108						
Scope of Work (Che																	-
			-							\boxtimes	Full Con	tainmen	t with N	egative	Pres	sure	÷
23 sf or ≥3 lf			\bowtie			ovati					Mini-Enc						
≥160 sf ≥260) IT		Ш	D	em	olitic	on				Glove Ba				_	-	
10	cation of		le	Loc	atio	n		Do	orintia		Non-Exe						
	s-Containing	9	Non	mall	y Us	sed		Asbest	scription os-Con				ount ecify	Ab	ateme	ent I	ype
	rial (ACM)		Mair	olel	, ,		1	Mate	erial (A	CM)			or LF)	71		En	П
	E ABATED Facility		Cust					(i.e., the insulation						em	Repair	cap	ncls
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Office areas			<u> </u>	Ļ	1	\boxtimes	VAT					5,950 s	f				
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Name of Registered	Waste Haule	er		1	JUD	EP V	Waste	Cubic Ya	rds	Name	of Regis	stered L	andfill				Ш
5.0							D No.	of Waste				norou E					
Freehold Cartage City, State						-		60 yds	Data).W.S.						
Freehold, NJ								Disposal 12/21/12		City, S Morri	sville, F	PA					
Completed By (Print			-	T	itle			Signature	9 .	1			7.	Date			
∟ucinda A Budzyn	ski			F	res	side	ent	-			1 ,	, ,	7		11	15	
								MM	Ma	L	Bu d.		V	11-	27.	10	9

Print Form

CK 2811 * Emergency *

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

PEAC.

Data of Nationalism (d)		,			0.00 0.		-, 	11		:/V	Er)			
Date of Notification (1) 11/30/12	, R			f Building eline Kl				2012 DE	FC -1.					10	
Agencies Notified Type Notification EPA Initial			Street A	ddress est Neva	ada Av	re		4 .a	- 	FM	4:	i Ę,			
DEP Amended Amendment		_		ate, Zip C Beach I		NJ 080	91	4 JHE S	ICEN	CUR	IRI	91.			
DOH justification)			f Contact					Tel	lephone	Nun	nHar	\$		
Cancenatio	<u> </u>			LITY INF	ORMAT	TION			i						
Name of Facility Where Abatement is Taki Jacqueline Klinker / Residence	ng Place (3)					-	of Facility School (K-							
Street Address 14 West Nevada Ave		**************************************	70	<i>a</i> .*	8		×	Subchapte Other (i.e. etc.)	er 8 (Oth	er than & comn	K-12 nercia) al buil	dings	, hom	es,
City (5) Long Beach Island NJ 08091							_	re Feet	# o	f Floors)	0.25	3ldg. / 35+	Age	
County (6) Ocean			County (Code (7) USE ONLY	,		Curre	ent Use (Pr	rior if be	ing dem	nolish	ed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN	/ No.			of Aba	ntement Co	ontractor	(9)					
Street Address						7.537700000000	Addre			W 25	-				
City, State, Zip Code								ip Code in NJ 08	091						
Project Manager for Monitoring Firm							none N 753-9			Licen:).			
Start Date (10) 12/1/12	Schedule 12/2/12		npletion	Date (11)		Name		HA Monitor	r						
Occupancy Status During Abatement (Che	ck Only On	e)		9			Addre							_	
Facility Closed/Vacated During Entire Abatement Performed Outside of Non	mal Facility	Hours	nent		95		Box 3	29 ip Code							
Other – Describe: week end home ow Scope of Work (Check All That Apply)	ner will be t	here			_			in NJ 08	091						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TW	enova		3		<u> </u>	Mir Glo	ll Containm ni-Enclosur ovebag Pro n-Exempte	re ocedure					re	
Location of	I 1	Locați Iormal	ly		De	escription	of							emen /pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole intenar odial S (12) No	nce/	Asbes (i.e	tos Cor therma surfa	ntaining N I system acing, VA miscellar	fateria s insula T, or	ation,	(5	mount Specify For LF)		Removal	Repair	Encapsulate	Enclosure
Kitchen	163	140	X			loor Til			-	40.04			_		<u> </u>
Bathroom	-		×			loor tile				40 Sf		х	_		_
Sautooni			_			TOOF LIFE			- 3	80 Sf		x			
Name of Registered Waste Hauler		LN	JDEP W	anto	Cubia	Yards		I N	5		100				
United Containers		H	auler ID 2459		of Wa			Name of G.R.O.		ieu Lar	iailli				
City, State Elm NJ					Dispo 12/3/	sal Date 12		City, Stat		1906	7		-		
Completed by Anthony T Perna	Title					Signature				7	Date	200			
Annony i rema	Presid	ent									11/	30/1	2		



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

Date of Notification (1)	to Ba		-	Name o	of Building	Owner/C	perator	WEOR.	2	8/2		_			
11/30/12	B					el / resid		(2)	12 11	~				39	
Agencies Notified EPA	Type Notification	1		99 Jos	Address shua Av	70		12 DEC -4			7				
DEP DOL	Amended Amendmer	nt #		City, Sta	ate, Zip C	Code	ر موم ۱ ا	50% LICEN	CUNI	ROL.					
ĭ DOH	Emergency	(including	_	Name	of Contact	i west i	40 080	50% LICEN	SING	-					
DCA	justification Cancellatio			Bob	or Contact	i,		10	Te	lepho	Numb	er			
Name of Facility Where	Abatement is Taki	ng Place (8)	FAC	ILITY INF	ORMATI	ON	Type of Facility	(4)						
Bob Bonesteel / re	sidence				*			School (K							
Street Address 99 Joshua Av				W 54	*			Subchapt Other (i.e.	er 8 (Oth	er than h	(-12)	ild	inas	ham	
City (5)))) 					etc.)			SI Clair L				ies,
9 0 Joshua A v Piel	ich Haups	Wes	+ ,	UT	0805	0		Square Feet 1000+	1 # 0	f Floors			dg. A		
County (6) Ocean	7.0.00			County	Code (7)			Current Use (P	rior if be	ing demo	olished	19000			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN		.,	$=$ \perp	Residence	<u>. </u>		- 5				
N/A		Owner (6)		ASCI	vi No. ≇	32		of Abatement Co aco Inc	ontractor	(9)					-
Street Address	<u> </u>							Address lox 329							
City, State, Zip Code								tate, Zip Code Berlin NJ 08							
Project Manager for Mon	nitoring Firm	Т	Telepho	ne No.		Teleph	one No.	091	License	e No.		-1888			
Start Date (10)		d Co	malation	Nate (11)			753-9800		00727	7					
12/3/12		12/7/12		npietion	Date (11)	K		of OSHA Monito aco Inc	r					8	·
Occupancy Status Durin		-	100					Address							
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire ned Outside of Norr	Period of A nal Facility	bater Hour:	nent s			City, St	ox 329 ate, Zip Code							
Scope of Work (Check A	Il That Apply)						west	Berlin NJ 08	091						
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf		processes.	enova			1	×	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure					9	
		Is	Locati	ign					T				bate	ment	1
Location			ormal Sole			Des	cription (of .			<i>[</i> -	Т	Ту	pe	
Asbestos-Containing TO BE AB In Facil (13)	ATED	Mair Custo	ntenar dial S (12)	nce/ Staff?	Asbes (i.e.	thermal s	systems ing, VAT	ateriai (ACM) insulation, , or eous)	(S	mount specify or LF)	Kemovai		Repair	Encapsulate	Enclosure
Exterior S	idina	Yes	No	N/A								_		e	
Exterior S	nully	-		X	-	Exteri	ior Sidi	ing .	15	00 Sf	x	1			
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Name of Registered Was	te Hauler	¥	20000	JDEP W		Cubic Y		Name of	Registe	red Land	fill				
United Containers	*			auler ID I 2459	NO.	of Wast	е	G.R.O.	W.S.						
City, State Elm NJ	20				1.00	Disposa 12/7/12		City, Star Morrisy		19067					
Completed by		Title	24				nature				Date				
Anthony T Perna		Presid	ent				(~			- 131.7	1/30	/12			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) MERCK SHARP & DOHME CORPORATION /12 Street Address Street Address

126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-4012 DEC -4 PM 4: 64 Agencies Notified Type Notification **EPA** Initial Notification City, State, Zip Code DEP Amended Notification RAHWAY, NEW JERSEY 07065 SSWESTUS CONTROL DOL Cancellation DOH On Hold Name of Contact Telephone Number LICENSING **EMERGENCY NOTIFICATION** DCA MARY BETH BAKER **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) MERCK SHARP & DOHME CORPORATION Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address # of Floors Bldg. Age 126 EAST LINCOLN AVENUE -BLDG 5 12,500 1 63 City (5) County (6) County Code (7) Current Use (Prior if being demolished) RAHWAY UNION (STATE USE ONLY) AUTO SHOP/FIREHOUSE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ENVIRONMETAL HEALTH INVESTIGATIONS, INC. 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 655 WEST SHORE TRAIL 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code SPARTA, NEW JERSEY 07871 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number WILLIAM S. KERBEL, CIH 845-369-7500 973-729-5649 460 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 12 / /12 12 / 24 /12 AMERISCI LABORATORIES INC #11480 Month Day Year Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 117 EAST 30TH STREET Abatement Performed Outside of Normal Facility Hours - Describe: MONDAY-FRIDAY 7AM-3;30 PM Other - Describe: City, State, Zip Code NEW YORK, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclo >3SF OR LF Glovebag Procedure >160 SF OR 260 LF Non-Friable Procedure Location of Is Location Description of Asbestos Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCAPSUL ENCLOSUR REMOVAL REPAIR Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A ROOF FLASHING 1,100 LF X ROOF ROOFING MATERIAL 1.075 SF Х Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill FREEHOLD CARTAGE, INC. Hauler ID No. LYCOMING COUNTY RESOURCE MANAGEMENT SERVICES 40

447 ALEXANDER DRIVE/ROUTE 15

Date

MONTO MERY , PA 17752

825 HIGHWAY 33

FREEHOLD, NEW JERSEY

Completed by (Print or Type)

BENJAMIN SANCHEZ

City, State

15939

DIRECTOR OF OPERATIONS

Disposal Date

Signate

12/3/2012

				IFICATION C		SABATEMENT						
Date of Notification (1)			(1	Name		wner/Operator (2 OHME CORPORA		*				
11 / 16 /12				Street	Address					500		
Agencies Notified Type No						ENUE, P.O. BOX	2000, RY28-	414				
	ial Notificatio	n		City S	tate, Zip Code	1						
DEP An	ended Notification				VAY, NEW JE							
X DOH On	Hold			1/1	of Contact		Telephone	Number				
DCA EN	ERGENCY N	OTIF	ICATI		BETH BAKER							
			-	FACILI	TY INFORMA		-(4)					
Name of Facility Where Abatement MERCK SHARP & DOHME CORPOI		ace (3)			Type of Facility School (K-	10.000	an K-12)				
WERCK START & DOT WILL GOTA OF	utiloit						private & cor		js., ho	mes,	etc.)	
Street Address 126 EAST LINCOLN AVENUE -BLDO	3 5					Square Feet 12,500	# of Floo			Blo	ig. Age 63)
	unty (6) IION				y Code (7) USE ONLY)	Current Use (Pri AUTO SHOP/FI		emolished	1)			
Name of Monitoring Firm Hired by	Building Ow	mer (8	3)	,,,,,,,	ASCM No.	Name of Abate	ment Contra		ON			
ENVIRONMETAL HEALTH INVESTIGATION OF THE STREET Address 655 WEST SHORE TRAIL	JAHONS, IN	U.			17	PAR ENVIRONM Street Address 313 SPOOK RO		KFUKAI	ON	-		
City. State, Zip Code						City, State, Zip C						
SPART	A, NEW JER					SUFFERN, NEV						
Project Manager for Monitoring Firm		Tele	phone	Number		Telephone Num		License N	umbei			
WILLIAM S. KERBEL, CIH			729-5			845-369-7500		460				
Expected State Date (10)		ed. Co 12		tion Date (11	1) /12	Name of OSHA AMERISCI LABO		INC	#1	1480		
12 / 3 /12 Month Day Year	1	onth		Day	Year	AWIERISCI LABO	JANI ONILO	INC	wı	1400		
Occupancy Status During Abatement						Street Address			-			
X Facility Closed/Vacated D						117 EAST 30TH	STREET					
Abatement Performed Ou					ribe:	01. 01.1. 7: 6	5.1.					
X Other - Describe: MC	NDAY-FRID	AY 7A	W-3;3	0 PM		City, State, Zip C	NEW YOR	ek NEW	YORK	1001	6	
Scope of Work (Check all that apply)				Г	Full Cont	 ainment with Nega			·	100		
Demolition		ovation	n	7								
>3SF OR LF				2	Gloveba	g Procedure						
X >160 SF OR 260 LF					Non-Frial	ole Procedure						
Location of		Local			escription of A			. -			ment T	уре
Asbestos-containing	1	mally		100000	ntaining Mater		Amoun	l m	REPAIR	ENCAPSUL	ENCLOSUR	
Material (ACM)	200	solely	2.500000		(ie. Thermal sy	And the second s	(Specify SF or LF	5 18	P	₹	15	
TO BE ABATED in Facility (13)	E 15.55 P 17.55	nt/Cus			ulation, surfac		SPULL	, ≶	72	38	18	
in radiny (13)			N/A	U.	Guici misocii	ancousy .		-		⊨	고	
ROOF			х	FLASHING			1,100 LF	х				
ROOF		I	x	ROOFING N	MATERIAL		1,075 SF	х				
Nooi												
		-	-				-	_		-	1	
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		-	-					-	-	-	-	
Name of Booleton of Woods Having	NID	EP W	acto	Cubic Yards	of Waste	Name of Registe	ered Landfill				-	
Name of Registered Waste Hauler FREEHOLD CARTAGE, INC.		er ID			40	LYCOMING CO	UNTY RESC	URCE M	ANAGI	EMEN	IT SE	RVICES
825 HIGHWAY 33	l'idu	1593				447 ALEXANDE						
City, State	,			Disposal Da	te	City, State						
FREEHOLD, NEW JERSEY	***			12/3/2012		MONTGOMERY				_/		
Completed by (Print or Type)	Title	0.00	OPE		Signature	6/		Date	1	1/1	16	12
BENJAMIN SANCHEZ	DIRECTO	K OF	UPER	CATIONS	11/2	\sim					N	10

UK 4030

Date of Notification (1)		Name	of Ruilding	Owner/Operat	or (2)					
11-29-12			istine Fell		01 (2)	RECE 2012 DEC -4	111	in.		
Agencies Notified Type N	lotification		t Address Reading	Ave		2012 00	- 4) —	
[panel	nitial mended		State, Zip C	0909-500-		- SIZ DEC -1	PM	,		
DOL A	mendment #		kahoe, N			Becon.	• 17	4: 0	2	
DOH ju	mergency (including stification)		of Contact istine Fell		1	Telembono M.	ímhar	學商。		
DCA L C	ancellation			ORMATION		of elements in	1180	101		
Name of Facility Where Abateme	ent is Taking Place (3)	F	CILITINE	ORMATION	Type of Facility			-		
Res. House	- The Option of the Control of the C				School (K-	12)				
Street Address 121 Reading Ave					Subchapte Other (i.e.	er 8 (Other than K-1 private & commerce	2) alal bu	ildina	s. hon	nes.
City (5)					etc.) Square Feet	# of Floors		Bldg.		
Tuakaho, NJ 08250					3000	2		45	Aye	
County (6) Cape May			y Code (7) E USE ONLY	<i></i>	Current Use (Pr Home	ior if being demolis	hed)			
Name of Monitoring Firm Hired b	y Building Owner (8)	AS	CM No.	Nam	e of Abatement Co	ntractor (9)				
Street Address						nental Sérvices	Inc.			
1634 South Delaware Stre	eet				et Address O Clems Run					
City, State, Zip Code Paulsboro, Nj 08066				City, Mu	State, Zip Code Ilica Hill, NJ					
Project Manager for Monitoring F Ed Keegan	irm		hone No. -423-5711		ohone No. 0-304-4676	License N 01145	lo.			
Start Date (10) 12-10-12	Scheduled 12-14-12		n Date (11)	Name EM	e of OSHA Monitor					
Occupancy Status During Abaten		- 2845773			t Address					
Facility Closed/Vacated Duri	/48 = 100 S OS		1		Rt 130 North					
Abatement Performed Outside Other - Describe:	de of Normal Facility H	ours			State, Zip Code naminson, NJ (08077		33.0. 55 = 5		
Scope of Work (Check All That A	oply)								00000	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation nolition		F		ent with Negative F	ressu	ıre		
		nondon			Mini-Enclosure Glovebag Pro	cedure				
	lala	cation	T		Non-Exempte	d (*) and Non-Friab	le Pro		re emen	
Location of	Nor	mally		Descriptio	n of				уре	
Asbestos-Containing Material TO BE ABATED		Solely by enance/			Material (ACM)	Amount	_		m	m
In Facility		ial Staff? 12)	(1.6.	surfacing, V/	AT, or	(Specify SF or LF)	Remova	Repair	cape	Enclosure
(13)		No N/A	-	other miscella	neous)		oval	음	Encapsulate	sure
Basement	Tes 1	X	+	Pipe Insula	ation	130 LF	-	-	-	
			-	- ipo iriodii	adorr	100 Li	X	-	_	_
		-	-	1			-	-		
			+				-	-	-	\vdash
Name of Registered Waste Hauler		NJDEP	917377777.U	Cubic Yards	Name of	Registered Landfill				L
NETS		Hauler II	D No.	of Waste		mperial Landfill				
City, State Hazleton,PA		L		Disposal Date	City, State					
Completed by	Title			Signature		Dat				
John Zumbo	Preside	ent	ļs.	1	dence	1150 11	-30-	12		

No chack

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT E CELVER # 19646 / 19672 (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1) 11-30-12			1	Name of Benjan	Building nin Deli	Owner/sle	Operator	2012 [DEC -4	РМ	1					
Agencies Notified	Type Notification		5	Street Ac	ddress	04	D 00	K saar	C 27 11	1 14	4.5	L				
DEP DOL DOH	☐ Initial ☐ Amended ☐ Amendment ☐ Emergency (justification)		_ [Jersey	te, Zip Co City NJ Contact	ue		् हे ह	STOS	SIN	G	GA CO	er.		l	
DCA	Cancellation		5		/lcDona	10.751					100					
Name of Facility Where		g Place (3)	130	FACIL	LITY INFO	DRMAT	ION	Туре о	f Facility (4)		.0000000				
BLP - Property # 1 Street Address 65 Woodward Ave	7.33.32.1							St N	chool (K-12 ubchapter 8 ther (i.e. pr c.)	(Oth	er than I	(-12) ercial b	uilo	dings	, hom	ies,
City (5) Jersey City								Square 1000	Feet	# of	Floors		1	ldg. A	200	
County (6) Hudson				County C STATE U	ode (7) SE ONLY)				Use (Prior cupied SI		ng demo	lished)			
Name of Monitoring Firm	m Hired by Building (Owner (8)		ASCM	No.				ment Contro							
Street Address								Address Broad S			•					
City, State, Zip Code							City, S	tate, Zip								
Project Manager for Mor	nitoring Firm		T	elephone	e No.		Teleph	one No.			License					
Start Date (10) (1)11-26-12		Scheduled (2)11-28-		oletion D	ate (11)		Name		Monitor							
Occupancy Status Durin	g Abatement (Check							Address	,. 							-
× Facility Closed/Vac	ated During Entire P	eriod of Aba	ateme	ent					on Aven	ue						
Other – Describe:	ned Outside of Norm	ai racility H	ours			_		tate, Zip Island	Code City, NY	111	01					
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	II That Apply)		ovatio				×	Mini-l Glove	Containmen Enclosure Ebag Proce Exempted (dure					9	
			cation	20											ment	
Locatior Asbestos-Containing TO BE AB. In Facil (13)	Material (ACM) ATED	Used S Mainte Custod (1	enanc	by ce/	(i.e. t	os Cont thermal surfac	scription aining M systems cing, VAT niscelland	aterial (A insulation F, or		(S	nount pecify or LF)	Removal		Repair	Encapsulate	Enclosure
Root	S	х			/	ACRM	l Memb	rane		60	0SF	x	1			
Name of Registered Was	ste Hauler		5150500	DEP Was	TO TO 1	Cubic		1	Name of Re	egister	ed Land	fill				
ATC, Inc. / TriState	Transfer (50071)		Наи 243	uler ID N 310		of Was	ste	ſ	Minerva E	Enter	prises					
City, State Shirley, NY / Bronx,	NY					Dispos TBD	al Date		City, State Vaynesb	urg,	OH 44	688				
Completed by Richard Doran		Title Project	Man	ager		S	ignature	· /	()			Date 11-30	-12	2		

D&S Proj. #: MS 12-391

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) RECEIVED

		1111	75 "		(Operator (O)		2010.00	-0 1 01/ -					
Date of Notification	(1) 1/11/12/1	- 11			Operator (2)		2012 D	C -4 PM 7:	05				
Agencies Notified	Type Notification		UTGERS	UNIVE	K211 X		6 43 DE	erne doure	63.1		- 10		
EPA EPA	Initial	11000	eet Address	a	_		<u> باژور</u> ن چ	STOS CONTR LICENSING	.♥L				
DEP	Amended	11 -	3 ESSEX y, State, Zip		<u> </u>			LIGERSING		_			
DOL	Amendment #: 1				4.00								
200	Emergency	2010 0000	NEWARK		102			Telephone	Number				
☑ DOH	(including justification)	Nar	ne of Conta	ct				releptione	Number				
☐ DCA	☐ Cancellation		MICHAEI	SMITH	<u> </u>					_			
				FACIL	ITY INFORM	ATION							
Name of facility w	here abatement is	taking plac	e (3)					Type of Facility (4) (K - 12)				
HOUSE							-	2.3	pter 8 (Othe	er tha	an K-'	12)	
Street Address								Other (F	Private/Com Homes, etc.	mer			
43 ESSEX ST	REET								of Floors	Т	Bld	g. Age	е
City (5)	IGET	Count	y (6)			Count	y Code (7)						
Oily (5)					X-	(State	use only)	Current Use (Pri	or if being o	demo	olished	(t	
NEWARK		ESS			1001111-	118	Name of Abatement	Contractor (9)				-	
	ng Firm Hired by B	ldg. Owner	(8)		ASCM No.	11'	D & S RESTOR						
CARDNO AT	C				00098	- -	Street Address	ATION, INC.		_			
Street Address 3 TERRI LAN	nic.						20 California A	ve.					
City, State, Zip Co						-	city, State, Zip Code						
55	N, NJ 08016						Paterson, NJ 07	7503					
Project Manager fo			Pho	ne Numb	er	T	Telephone Number		License N		er		
BRIAN KEAR	NEY		609	-273-80	50		973-345-8020		011	109			
Start Date (10)		Sched.	Completion	Date (11)		Name of OSHA Mor D & S Restorat						
11/20/12		12/31	/12				Street Address	1011, 1110.			_		
Occupancy Status							20 California A	venue					
Facility close	ed/vacated during	entire perio	d of abatem	ent.			City, State, Zip Code						
Abatement Describe:	performed outside	of normal f	acility nours	•		_	D. MIO	7502					
Other-Desc	ribe: NORMAL H	OURS				_	Paterson, NJ 0			_			=
	check all that apply	')					L	Full Containment w Mini-enclosure	/negative p	ress	ure		
> 3 sf or > 3	If \square	Renovatio	n				<u> </u>	Glovebag procedur	e				
≥160 sf or ≥	≥260 If	Demolition	1					Non-Exempted (*)				dure	
Location of		Is location	n normally u	sed solely	/					R e	R	E n	E
asbestos-c	ontaining	staff(12)	nance/custo	odiai			bestos-containing	Amount (Specify S	For	m	р	c	n
material (ad abated in fa		Yes	No	N/A	material	(ACIVI)		LF)		0 V	a i	a p	Ľ
VONDOCHICO PARAMETRICA NA VIOLENCIA					T ENTER I	IOUEE	& ALL DEBRIS	entire house		e	ń		\vdash
ENTIRE HOU	SE		LX	<u> </u>	ENTIRE	10036	& ALL DEBRIS	Chene nouse			금	౼	H
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-					1								
Registered Waste	Hauler	INJD	EP Hauler II		Cubic Yards of	Waste	Name of Registere	d Landfill					
D & S RESTO	RATION, INC.		506		350 YDS		TULLYTOWN	, RESOURCE RE	COVERY	Y			
City, State PATERSON,	NJ 07503			Disposal I VARIO	Date DUS DATES	S	City, State TULLYTOWN	I, PA					
Completed by (Pr		Title			Signature				Date	_			-25
BOGDAN JO		PRESID	ENT						11/29/1	2			

D&S Proj. #: MS 12-391

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) / ED

Date of Notification (1)		I Name o	of Building Ox	wner/Operator (2	2012 DEC -4	PM 7: 50	1.14.19)		
1 1 1/0 5 /1 12	l	11		See See See See See See See See See See	2009	US Environmental Protect	tion Agency - Region 2			
Agencies Notified Type Noti	fication	Street A		VERSITY	AT ESTOS (US Environmental Protect Division of Enforcement and Compilence Branch (I 200 Broadway - 21st Floradway	Compliance Assistance DECA-ACB)	_	÷	
EPA Initial	9			nem.	& LICEN	390 Broadway - 21st Flo New York, NY 10007-18	ir 56	48.55C		
DEP Amende			SSEX STR							
IXI DOL I		1								
DOH Emerger	ncy g	Name of	VARK, NJ	07102						
DCA justificat	ion)	I Name of	Contact			Teleph	none Number			
Cancella	ition	MIC	HAEL SM	TH						
			FA	CILITY INFORM	ATION					
Name of facility where abateme	nt is takin	g place (3)				Type of Facilit	n/ (4)			
HOUSE							ool (K - 12)			
Street Address							chapter 8 (Other			2)
43 ESSEX STREET							er (Private/Comm s./Homes, etc.	nercia	al	
City (5)	T	County (6)			C	Square Feet	# of Floors		Bldg.	Age
					County Code (7) (State use only)					
NEWARK		ESSEX			(Clair and Clay)	Current Use	Prior if being de	molis	shed)	
Name of Monitoring Firm Hired I	y Bldg. C	wner (8)		ASCM No.	Name of Abaten	nent Contractor (9)				
CARDNO ATC				00098	D & S REST	ORATION, INC.				
Street Address					Street Address			_		
3 TERRI LANE					20 Californi	a Ave.				
City, State, Zip Code					City, State, Zip C	ode				
BURLINGTON, NJ 0801					Paterson, N.	J 07503				
Project Manager for Monitoring Fi	rm		Phone Numb	per	Telephone Numb		License Num	ber		
BRIAN KEARNEY			609-273-80	050	973-345-80	020	01169)		
Start Date (10)	Sc	hed. Comple	etion Date (1	1)	Name of OSHA					
11/20/12	12	2/14/12			D & S Resto	ration, Inc.				
Occupancy Status During Abatem										
Facility closed/vacated during Abatement performed outside	g entire p	eriod of aba	tement.		20 California City, State, Zip Co		•	_		
Describe: NORMAL		iai raointy no			-	07500				
Scope of Work (check all that app					Paterson, NJ					
☐ >3 sf or >3 lf	Renova	ation			Į.	Full Containment	v/negalive press	ure		
≥160 sf or ≥260 lf						Mini-enclosure Glovebag procedu	ire.			
	_	0.00				Non-Exempted (*)		proc	edure)
Location of asbestos-containing		ntenance/cu	y used solely istodial		11005		R	R	E	E
material (acm) to be	staff(12	2)		Description material (AC	of asbestos-containing	Amount (Specify S	m	e p	n	n
abated in facility (13)	Yes	No	N/A	,		LF)	v	a i	a p	L
ENTIRE HOUSE				ENTIRE HOU	JSE & ALL DEBRI	S entire house	e 🗵	ń	П	\vdash
								ō	Ħ	一
										厅
egistered Waste Hauler D & S RESTORATION, INC.		DEP Hauler 3506		bic Yards of Was 50 YDS		ed Landfill N, RESOURCE RE	COVERY			
ity, State			Disposal Da		City, State			-	-	
PATERSON, NJ 07503			VARIOU	JS DATES	TULLYTOW	N, PA				
ompleted by (Print or Type) BOGDAN JOLDZIC	Title	DENT		Signature			Date			
DOODAN JOLDZIC	PRESI	DEN I					11/05/12			

CK 602860

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

ype Notific	ation							2012 000					
Initial			- 1		Name of Building Owner/Operator (2) Residence 7012 DFC - L. PM 7								
Amended	Initial				Street Address 122 Columbia Ave								
DEP Amended Amendment # Emergency (including justification) Cancellation				City, State			- 4 de la companya della companya della companya de la companya della companya de						
				Nutley,	NJ 07110		& LICENSING						
				Name of C	ontact								
					ruzzcse		relephone	Numb	er		-200		
emont in T	ald B			FACILITY	Y INFORMATIO	N					-		
ement is 1	aking P	lace	(3)				Type of Fac	ility (4)	-	_		_	
Street Address							School (K-12)					
122 Columbia Ave						Other (i.e., private & commercial building							
					Course 5								
							1500		S			е	
				County Co	de (7) (STATE		Current Use		molish	10.		_	
Essex Name of Monitoring Firm Hired by Building Owner (8) 27(4)							Residence						
(8) N/A				SCM No.	Marile of Abatement Contract			otor (9)					
Street Address					Stroat A	Street Address							
							Venue Da	DMD O					
City, State, Zip Code					City, State	City, State, Zip Code						_	
Project Manager for Monitoring Firm					Clifton, NJ 07012								
Firm	210E27	T	eleph	resoptione 140.			License No.						
Start Date (10) Schodulad S							89 00693						
12/10/2012 12/11/2012													
Decupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe:					DIA Gen	ieral C	Construction, Inc.						
					ant <u>1360 Clifton</u> ,			Avenue PMR Suita 242					
								Code					
cope of Work (Check all that apply)					Clifton, NJ 07012								
ppiy)					Пен							=	
	X R	enova	ition	INITII-ETIC			ciosure						
2160 sf or 260 lf Renovation Demolit			lition	É	Gov	vebag P	ag Procedure						
					L I No	п-Exem	pted (*) and	Non-Friable Pro				_	
usbestos-Containing Material (ACM) Weed Solely by Maintenance/					Desertati					Abatement Type			
				Asbes	stos Containing	Material	(ACM)	Amount	-				
IN Facility				(I.e.	surfacing, V	thermal systems insulation,			Z.	1 -	Enc	0	
				other miscellaneou				SF OF LF)	ome	epa	apsu	Enclosure	
	Yes	No	N/A				1		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1	late	ure	
			X		floor tile			166 SE	+	-			
								700 SF	X				
									+				
									+-		_		
					Cubic Yards	Na	ame of Regist	ered Landfill	لــــــــــــــــــــــــــــــــــــــ		\perp		
			0990) NO.	of Waste	10							
					Disposal Date	Cit	ty, State						
Title					12/11/2012	_ N	Waynesburg, OH						
Project Manager				-	Signature		-						
	d by Building Firm Sch 12 Sement (Ching Entire Fide of Norma	d by Building Own G Firm Scheduled 12/11/20 Gement (Check onling Entire Period of de of Normal Facil Apply) Is N Usec Mair Ct s Yes	d by Building Owner Scheduled Comparison 12/11/2012	d by Building Owner Scheduled Completion 12/11/2012	FACILIT Tement is Taking Place (3) County	Nancy Apruzzcse	Namcy Apruzzcse FACILITY INFORMATION	Nancy Apruzzcse FACILITY INFORMATION	Nancy Apruzzcse FACILITY INFORMATION	Nancy Apruzzcse Telephone Numb	Nancy Apruzzcse FACILITY INFORMATION	Nancy Apruzzese Telephone Number School (K-12) Subchapter 8 (Other than K-1 2) Other (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings, etc.) Square Feet # of Floors Bldg. Ag 70+ Toher (i.e., private & commercial buildings. To	

Fax

L				Sta	ite of NJ							
D&S Proj. # MS 12-42			Not			Г	APPROV	30				
D.1648	,	*	(Pur	suant to NJ	AC 8:60 and 12:120)	EI MACO	Lof licality &		Servi	ces		
Data data dia						- IV FIELD			-			
Date of Notification (1)		Name of	Building O	www.operator	(2) 2812 DEO	1 -1-1	(signature	-	1:3	a Am		
Agencies Natified Type Natifi	e-tion	KEVI	COLLI	VANE, RXEC	CUTOR ZUIZ DEC	-4 PM Pited	John HOLL	ime:	-	<u></u> " '		
☐ EPA ☐ initial	Section	Street Ad	THE PERSON NAMED IN COLUMN	20 00000		ile.						
DEP Amended		101 B	ENNETT	AVENUE	8 110	OS CONTRO	L .					
DOL Amendmen		City, State	e, Zip Code			TRAINE.						
Emergen (Including		KEAR	NY, NJ	7032								
pistification	on)	Name of C	Contact			Telep	hone Number					
DCA Cancelle	ion .	MIKE	O'GRAD	Y	7000							
			FA	CILITY INFOR	MATION	 4						
Name of facility where abstance	it is taking p	lace (3)				Type of Facili	4-741					
KEVIN COLLINANE, EXT	TOT PECAD		83			Sch	19 (4) noci (K 12)					
Street Address	COTOR		Sub	chapter 8 (Ot	ner tha	n K-1	2)					
			2	Other (Private/Commercial								
101 BENNETT AVENUE					į.	Square Feet	# of Floors		Plei	2 0.00		
City (5)	Got	inty (6)	100		County Code (7)		Bldg, Age					
KEARNY	. 1	JDSON			(State use only)	Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired b	Blog Own	Br (8)		ASCM No.						1		
	5	(,		ASUM NO.	Name of Abatemer	a compression and the compression of the compressio		-				
Street Arichage	The state of the s	-			D & S RESTOI	RATION, INC.	le l		١.			
* * * * * * * * * * * * * * * * * * *					20 California A	j. 88 5			or and the same	7		
City, State, Zip Code	у т		3		City, State, Zip Code		770	73	_			
Ti.	_								*			
Project Manager for Monitoring Fin	'n .	P	Paterson, NJ 07503 Telephone Number License Number									
	* .		973-345-8020 01169									
Start Date (10)	Sched	. Complet	Name of OSHA Mor				-					
12/03/12	12/14	U12	141		D & S Restorat	ion, Inc.						
Occupancy Status During Abatemic	nt (Check o	nty one)			Street Address							
Facility closed/racated during Abstement performed outside Describe:	entire perio	of of shote	eniant. rs-		20 California A City. State, Zip Code							
Other-Describe: NORMAL	OURS				- Botomaci NY) (1)							
Scope of Work (check all that app	v)				Paterson, NJ 0		1 2					
2 ≥2 ef or >3 If ≥160 ef or ≥250 If Location of	Renovation Demolition		used solely			Full Containment : Mini-enclosure Glovehag procedu Non-Exempted (*)	ire .		0edur	re		
ashesto-containing	by mainter staff(12)	Minca/cus	fodia!	Donaul-ii-			R	R	E	E		
material (acm) to be abated in facility (13)			1	material (A	n of asbestos-containing ACM)	Amount (Specify 5	SF or		C	n		
	Yes	No	N/A			LF)	V	1	a	L		
basement		X	2 14	Boiler Insula	ation	35 SQ FT	e X	┵	-	+		
	× .							##	岩	#		
	11						——————————————————————————————————————	HH	耑	带		
		4,	31		У			H	in	一		
egistered Waste Reuler	TALIFACE	Hauler (D		Vent V				后	同	后		
D&S RESTORATION, INC.	1350	6		bic Yards of W	TULLYTOWN, I	andfill	ANT THE	1				
ty, State		C	osal Da		City, State	COUNCE KE	COVERY					
PATERSON, NJ 87503			2/04/12		TULLYTOWN, I	PA						
	Tine PRESIDE	A LOTO	1	Signaturo			Date			—		
	THE RESERVE TO A STREET THE PARTY OF THE PAR		r sebasta	licensure exem			11/29/12					
		we result to	u nahazma	HIGH BYEN	pred activities.							

D&S Proj. #: MS 12-425

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) RECEIVED

Date of Notification (1)		IIA	lama of	Duilding Ou									
1 1 /2 9 /1 2	_l	JL.	KEVIN	COLLIN	ner/Operator (2 ANE, EXECU		R	EC-4 PM 7					
EPA Initial	uncation	S	treet Ad	dress		-	6 \@/	STOS CUN	RUL				
DEP Amend	led	Ш	101 BI	ENNETT A	AVENUE		8	LICENSING	3				
Amendme	ent #:	C	ity, State	e, Zip Code							_		
DOL Emerg	encv	11	KEAR	NY, NJ 0	7032								
DOH (includ	ing	N	ame of C	The second second	7032	-		LToloph	one Numb	0.5	-		
DCA justifica	ation)							relepti	one Numb	ei			
Cancel	llation		MIKE	O'GRAD	Y								
				FAC	CILITY INFORM	ATIO	N						
Name of facility where abaten	nent is taki	ng pla	ce (3)					Type of Facility	/ (4)				
KEVIN COLLINANE, E	XECUTO	OR_					a a		ool (K - 12 chapter 8 (than I	(-12)	
Street Address								Othe	r (Private/ s./Homes,	Comm			
101 BENNETT AVENU	E		esta de la companya					Square Feet	# of Flo		E	ldg. A	Age
City (5)	T	Coun	ty (6)			Co	unty Code (7)	04440.01.000	" 0, 1 10	010	-		.gc
							ate use only)	Current Use (Prior if bei	na der	nolish	ed)	
KEARNY			DSON	AN TOWNS THE ST						ng doi	ionoi	,	
Name of Monitoring Firm Hired	d by Bldg.	Owner	(8)		ASCM No.		Name of Abatemen	t Contractor (9)					
Street Address						_	D & S RESTOR	RATION, INC.					
Street Address							Street Address						
City, State, Zip Code						_	20 California A			-			
City, State, Zip Code							City, State, Zip Code						
Design Manager College	-					_	Paterson, NJ 0	7503					
Project Manager for Monitoring	Firm		1	hone Numb	er		Telephone Number		License				
							973-345-8020			01169			
Start Date (10)	S	ched.	Comple	tion Date (1	1)		Name of OSHA Mor						
12/03/12	1	2/14/	12				D & S Restorat	ion, Inc.					
Occupancy Status During Abate						-				- 14			
Facility closed/vacated du	- 55		•	ement.			20 California A						
Abatement performed out							City, State, Zip Code	1					
Describe: NORMA Other-Describe: NORMA	AL HOURS					-	Paterson, NJ 0	7502					
						-	raterson, NJ 0		-		_		
Scope of Work (check all that a							Ц	Full Containment	w/negative	press	ure		
		vation						Mini-enclosure Glovebag procedu	Iro.				
≥160 sf or ≥260 lf	☐ Demo	olition						Non-Exempted (*)		friable	proc	edure	
Location of				used solely						R	R	E	E
asbestos-containing	staff(ance/cu	stodial			sbestos-containing	Amount		e m	e	n	n
material (acm) to be abated in facility (13)		T		Τ	material (A	CM)		(Specify :	SF or	0	a	c a	C
, , , , , , , , , , , , , , , , , , , ,	Yes	S	No	N/A						v e	i	р	-
basement		X		Boiler Insula	tion		35 SQ FT		×	Ò			
					N. Zalimoni Mercello des								
											П	П	
										計	Ħ	Ħ	一
Registered Waste Hauler		NJDEP	Hauler	ID# Cu	ibic Yards of W	aste	Name of Registered	Landfill		<u>, [L]</u>			
D & S RESTORATION, IN		1350			YD '		TULLYTOWN,		COVER	Y			5
City, State				Disposal Da			City, State	es at		100000			
PATERSON, NJ 07503				12/04/12		_	TULLYTOWN,	PA					
Completed by (Print or Type)	Title	****	TOP		Signature				Date				
water a mi ii ii i i i i i i i i i i i i i i	1 1317 176	CHETHI	VI I	1					11/20/	17			

B & G proj. #: 2012-222

State of NJ Notification of Asbestos A (Pursuant to NJAC 8:60-7 a	Abatement nd 12:120-7)	
e of Building Owner/Operator (2)	2012 DEC -4 PM 7:56	
Ann Levine		
t Address	ASSESTOS CONTROL	
9 Park Avenue	- & LICENSTRE	-
State, Zip Code		

Date of Notification	(1)	Name	of Building	Owner/Op	erator (2)		2812 DEC	-4 PM 7:					
1 11 1/13 10	1/112	Jo A	nn Levine					-4 PM 7:	58			-	_
Agencies Notified	Type Notification	_	Address				ASSEST	OS CONTR CENSING	ris I				
☐ EPA	☑ Initial	179	Park Ave	nue			8. []	CENSTRE	图	- All			-
DEP	190		State, Zip Co	ode				21101110					
⊠ DOL	☐ Amendment	Mi	dland Park	c, NJ 074	32			I Telenho	ne Number				-
□ DOH			of Contact					Telephic	2401				
	☐ Cancellation	1 10	Ann Levi	ne							_	_	_
☐ DCA		30	Ailli Levi		Y INFORMA	TION							
	6			FACILIT	Y INFORMA	11014	 T	Type of Facility	(4)		7		
Name of facility w	here abatement is ta	king place	(3)				1	Land Control	ool (K - 12)	6		٥,	
								<u> </u>	chapter 8 (Ot er (Private/Co	her thar	1 K-14 al	2)	
same								Othe Bldg	s./Homes, et	C.	aı		
Street Address								Square Feet			Bldg	. Age	
179 Park Ave	nue	Towns	(6)		$\overline{}$	County	y Code (7)						_
City (5)		County	(0)				use only)	Current Use	(Prior if being	demol	ished)	
	NI 07/22	Berge	n	V ₁				residential			_		-
Midland Park	ing Firm Hired by Bld			F	ASCM No.	I	lame of Abatement						
							B & G Restorati	on, Inc.					
n/a Street Address						5	Street Address						
Street Address							105 Ryerson Ro			12	_		
City, State, Zip C	ode						ity, State, Zip Code						
Only, Oldio,						_	Lincoln Park, N Telephone Number	1) 0/033	License	Numbe	r		
Project Manager	for Monitoring Firm		Phon	e Number			973-696-6869		0378				
200 2 5550 B							Name of OSHA Mo	nitor					
Scheduled Start	Date (10)	Sched.	Completion	Date (11)			B & G Restorat		The second second	<u></u>			
		12/12/	2012				Street Address						
12/12/2012	us During Abatement						105 Ryerson R				_		_
☑ Facility clo	seed/vacated during 6	ntire perior	d of abatem	ent.			City, State, Zip Cod	e					
Abatemen	it performed outside of	of normal fa	acility hours-	•		_		NI 07025			¥1)		
Describe:	scribe.					_	Lincoln Park,	NJ 07033		===			
	(check all that apply))							e 🛛 Glove	baa nr	ncedi	ire	
Demolitio		Renovation	1				ull Containment w/r	negative pressur		friable p			
>3 sf or >		160 sf or	>260 If			X V	Mini-enclosure		☐ Non-	I R	R	E	_
>3 St 01 >	3"	Is location	normally us	sed solely					unt	e	e	n	E n
Location	of -containing	by mainte	nance/custo	odial	Descrip	tion of a	sbestos-containing	Amo (Spe	cify SF or	m	p a	c a	c
material t	to be	staff(12)		T	materia	i (ACM)		ĹF)		V	ĭ	p	L
abated in	facility (13)	Yes	No	N/A				80 lf		e	m	I	t
old boiler room				X	contamin	ated fib	erglass insulation		12 lf		旨	恄	忙
new boiler ro			X	contamin	ated fib	erglass insulation				盲	恄	T	
	coal bin area			X			erglass insulation	40 lf		X	盲		
3rd basement				LX_	pipe insu	lation		6 lf	1 10 10 10 10			X	T
hallway btwn old	nallway btwn old & new boiler rms						Name of Registe	red Landfill					
Registered Wa	Registered Waste Hauler B & G Restoration, Inc. NJDEP Hauler ID# 19563						Tullytown Re	source & Reco	overy Cente	r	_		
	oration, inc.			Disposal I	4 yards Date		City, State						
City, State	rk, NJ 07035			12/13/	12		Tullytown, P	A	Date				_
	(Print or Type)	Title			Signature	•	Gordana Lun	ra	10000000	30/2012	2		
Gordana Li		Treasur	er				7		1				

State of NJ Notification of Asbestos Abatement

B & G proj. #: 2012-232

(Pursuant to NJAC 8:60-7 and 12:120-7)

							REC	Check	# 5630				_
Date of Notification	(1)	111	Name of Bu	ilding Ow	ner/Operator (2	1		the last					
1 11 1/13 10	1/1/2		Bill Heili	****************			2012 DEC .	-4 PM 7:5	r				
Agencies Notified	Type Notifica	tion	Street Addre					4 111 /: 5	ਰ <u>ੋ</u>				
☐ EPA	Initial		66 Cedar	L.	ect		ASBEST	S CONTRA	1				
☐ DEP	_	11	City, State,		est		& LIC	S CONTRO	L				
DOL	☐ Amend			e, NJ 078	3/1								
☑ DOH			lame of Cor			-		Telephor	ne Numbe	er			
☐ DCA	Cancel	lation	Dill IIIai	li.									
			Bill Hei			000000000000000000000000000000000000000							
				FAC	ILITY INFORM	ATIO	N						
Name of facility wh	nere abatement	is taking pl	ace (3)					Type of Facility	(4) ol (K - 12	١			
same								=	napter 8 (han k	(_12)	
Street Address								02-10	(Private/0			(-12)	
66 Cedar Lake	West							Bldgs.	/Homes,	etc.			
City (5)	West	I Cou	nty (6)			Co	unty Code (7)	Square Feet	# of Floo	ors	8	ldg. A	Age
0.13 (0)			, (0)				ate use only)	Current Use (P	rior if bei	na der	nolish	ed)	
Denville, NJ 0			orris			,		residential	nor ii beii	ng uci	HOHOL	cuj	
Name of Monitoring	g Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of Abatement (ontractor (9)					
n/a							B & G Restoratio	n, Inc.					
Street Address							Street Address						
							105 Ryerson Roa	d					
City, State, Zip Code	е						City, State, Zip Code						
Project Manager for	Monitoring Fire	n	Iph	one Numb		_	Lincoln Park, NJ Telephone Number	07035	T1 :	NI			
Project Manager for	Worldoning Film	II.	Pn	ione Numi	er		973-696-6869		License 0378	Num	ber		
Scheduled Start Dat	to (10)	ICabaa	d. Completio	n Data (4	4	_	Name of OSHA Monit	or	0570				
Scrieduled Start Da	le (10)	Scried	i. Completic	on Date (1	1)		B & G Restoratio						
12/11/2012			1/2012				Street Address						
Occupancy Status D							105 Ryerson Roa	d					TO 1000-00
	rformed outside						City, State, Zip Code						
Describe: Other-Describ						-	Lincoln Park, NJ	07025					
Scope of Work (che		v)				-	Lincom Park, NJ						
Demolition	cox all that appl	Renovatio	n .			M.	Full Containment w/nega		٦.,				
>3 sf or >3 lf	_					_	15.	ative pressure [Glove	10000			
		≥160 sf or	n normally u	read salah		П,	Mini-enclosure		Non-f	riable			
Location of asbestos-con	taining	by mainte	enance/cust		No.	f -	abastas asutaisiss	Amount		e	R e	E n	E
material to be		staff(12)			material (/		asbestos-containing	(Specify S	F or	m	p a	С	n
abated in faci	lity (13)	Yes	No	N/A	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			LF)		v	i	a p	L
1st floor furnace roo	om				thin duct ins	ulati	on	33 lf		e	Ø		+
						COST TO STATE OF THE STATE OF T				旨	i	H	怙
										盲	亍	Ħ	盲
Registered Waste Har B & G Restoration		NJDE 195	EP Hauler II		ubic Yards of W	/aste			Contai				
City, State		173		Disposal D	yard ate		Tullytown Resour	ce & Recovery	Center		-	-	
Lincoln Park, NJ	J 07035			12/12/12			Tullytown, PA						
Completed by (Print	or Type)	Title			Signature				Date	-			
Gordana Luna		Treasure	r				Gordana Luna		11/30/	2012			

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #: 2012-228 Date of Notification (1) Name of Building Owner/Operator (2) 1 1 / 3 10 / 1 2 Nick Crupi Agencies Notified Type Notification Street Address T EPA Initial 80 Pleasant Hill Road DEP City, State, Zip Code DOL Amendment Randolph, NJ 07869 DOH X Name of Contact Telephone Number Cancellation ☐ DCA Nick Crupi **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) same Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 80 Pleasant Hill Road Square Feet # of Floors Bldg. Age County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Randolph, NJ 07869 Morris residential Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-696-6869 0378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 12/13/2012 12/13/2012 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: Lincoln Park, NJ 07035 Scope of Work (check all that apply) ☐ Demolition Renovation Full Containment w/negative pressure Glovebag procedure >3 sf or >3 If ≥160 sf or ≥260 lf Mini-enclosure Non-friable procedure Is location normally used solely Location of E by maintenance/custodial asbestos-containing e e n Amount Description of asbestos-containing staff(12) m n material to be p C (Specify SF or material (ACM) abated in facility (13) 0 C a Yes No N/A ٧ 6 basement pipe insulation 60 lf X crawl space pipe insulation 30 lf X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill B & G Restoration, Inc. 19563 1 yard Tullytown Resource & Recovery Center City, State Disposal Date City, State Lincoln Park, NJ 07035 12/13/12 Tullytown, PA Completed by (Print or Type) Title Signature Date Gordana Luna Gordana Luna Treasurer 11/30/2012

Pg. 1

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) CEIVER 2379

Date of Notification (1)					Na	me o	f Buildin	g Owner/Operator	(2)		-		- 3	
	30 /	12							275EC -4 PA	7:53				
Agencies Notified	Type Notific	ation		-			ddress	2017	L DEC 4 III	···				
⊠ EPA	☐ Initial	Julion						on Building (esterne co	TROL				
☑ DOLWD	☐ Amende	d			Cit	. Ch	viaciviiii	an building 5	SESTOS COM	46				
☑ DHSS	Amendm			_	1 00		ate, Zip C		& LIUCHON	10				
□ DCA	☐ Emerger		cludin	g			-	IJ 08544						
(NJAC 5:23-8)	justificati Cancella						f Contac ert Orte			Telephone Num	ber			
													-1.400.80	- 1
Name of Facility Where Al	natement is	Taking	Place	p (3)		ACI	LIIYIN	FORMATION	Time of Facility (4	0				
Princeton University						ΊΔΤ	IVE		Type of Facility (4 ☐ School (K-12)	1)				
Street Address	7.1.10.112				D IIII	1/11	14.		Subchapter 8	(Other than K-12)			
136 ALEXANDER St									Other (i.e., privalent homes, etc.)	vate and comme	cial b	uildin	gs,	
City (5)							-		Square Feet	# of Floors	Е	ldg. A	\ge	
Princeton										2		ā	Ĭ	
County (6)				10	Co	ounty	Code (7	(STATE USE ONLY)	Current Use (Prio	r if being demolis	hed)			
MERCER											**************************************			
Name of Monitoring Firm I	lired by Build	ding O	wner	(8)	ASC	M No	0.	Name of Abateme	ent Contractor (9)		0.1100.		1000	
Pennoni Assoicates	, Inc.				00	102		BRISTOL EN	VIRONMENTAL,	INC.				
Street Address						188		Street Address			700			77.5
515 Grove St., Suite	1B							1123 BEAVE	R STREET					
City, State, Zip Code	to.							City, State, Zip Co	ode					
Haddon Heights, NJ	08035							BRISTOL, PA	19007					
Project Manager for Monito	oring Firm			Te	elephor	e No).	Telephone No.		License No.				
Alan Lloyd				1 3	856-54	47-0	505	215-788-6040)	00509				
Start Date (10)		Schedu	uled C	omp	letion I	Date	(11)	Name of OSHA M	Monitor					
12 /14 / _	12	1	/	_	4_ /	1	13_	BRISTOL EN	VIRONMENTAL,	INC.				
Occupancy Status During	Abatement (0	Check	only o	one)				Street Address			-			
☐ Facility Closed/Vacated								1123 BEAVE	R STREET					
Abatement Performed (Outside of No	ormal I	Facilit	у Но	urs - D	escril	be	City, State, Zip Co				-		
Time of Abatement: 7:0	<u>10</u> AM- <u>3:30</u> F	PM/	P	M	A	M		BRISTOL, PA						
Scope of Work (Check all t	hat apply)							•						
≥3 sf or ≥3 lf		9	☐ Re		otion				ainment with Negat	tive Pressure				
≥3 \$1 \$1 ≥3 \$1 ≥160 \$f or ≥260 \$1			☐ Re ☑ De	moli	ation tion			☐ Mini-Enc	losure g Procedure					
								☐ Non-Exe	mpted (*) and Non-	Friable Procedur	е			
470000000000000000000000000000000000000					ation						Ab	atem	ent T	уре
Location of Asbestos-Containing M	,	,			nally olely by		Ashaa	Description o			Z	Z	ш	Ш
TO BE ABAT		"	Ma	inter	nance/			tos Containing Mar thermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility		1	Cust	todia (12	I Staff?	'	• · · · · · · · · · · · · · · · · · ·	surfacing, VAT,	or	SF or LF)	<u>va</u>	=	lusc	Sur
(13)		t	Yes	No	-			other miscellaned	ous)				ate	W.
1 st &2 nd FI Apt Kitchens	&Bathroo	ms,				-	oint Co	mpound		4109 SF	×		П	
Apt 3 Dining Rm Ceilin	g,Baseme	nt,												
Apt 4 Living Rm Ceilin	g			Ø			-		-					
Stairwell				\boxtimes		Р	laster			700 SF			П	П
Name of Registered Waste	Hauler				NJDEF	Was	ste	Cubic Yards of	Name of Register					ш
SERVICE TRANSPOR	RT GROUP)			Hauler 1870			Waste	. []	IORTH LANDF	ILL			
City, State								Disposal Date	City, State					
NEW CASTLE, DE									MORRISVILL	E, PA 19067				13
Completed By (Print or Type	e)	Title					-	Signature			e /			
Patrick T. DeCaro		Est	timat	or				Patric	k P. O.C	aro of	1/3	30/	12	1

ASB-41 PD 12/00

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

fg. 2

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

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⊠ EPA ⊠ I		1	2		Te								
⊠ EPA ⊠ I					111	ustees of	Princeton Unive	ersity (17)	DEC -4 PM	7 -			
	e Notif	ication	1		Stree	t Address		×	. 111	1:5	3		
N DOLLAG	nitial		10		E.	A MacMil	lan Building	4356	STOS CUNT LICENSING				
☑ DOLWD ☐ A	Amend	ed	X.		Contract of the Contract of th	State, Zip	•	&	LIPE CUNI	RAI	į.		
☑ DHSS A	mend	ment #	<u> </u>	_					- ICENSING		••		
			ncludir	ng			NJ 08544						
The state of the s	ustifica	The state of the s			Nam	e of Contac	ct		Telephone Num	ber			
	Cancel	lation	2		Ro	bert Orte	ga						
N					FA	CILITY IN	NFORMATION						
Name of Facility Where Abater								Type of Facility	• •				
Princeton University-AR	(15 N	EIGH	BOKI	1000	INITIA	ATIVE		School (K-12	2) 8 (Other than 14 44				
Street Address								Other (i.e., p	8 (Other than K-12 rivate and comme	() rcial b	uildir	าดร	
136 ALEXANDER St								homes, etc.))	, oldi i	, and it	.go,	
City (5)								Square Feet	# of Floors	TE	Bldg. /	Age	
Princeton									2		•	.3-	
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Hea /Dr	ior if being demoli	-bod\			
MERCER						, (.	Novince doc oner/	Carreil OSC (11	ior il bellig delliolis	sileu)			
Name of Monitoring Firm Hired	by Bu	ildina	Owner	(8)	ASCM	No	Name of Abateme	nt Control (0)					
Pennoni Assoicates, Inc		liuling	OWINCE	(0)	001		A STATE OF THE PROPERTY OF THE						
Street Address	•				001	02		VIRONMENTA	L, INC.				
							Street Address						
515 Grove St., Suite 1B							1123 BEAVE						
City, State, Zip Code							City, State, Zip Co			-0.07			
Haddon Heights, NJ 080		5161					BRISTOL, PA	19007					
Project Manager for Monitoring	Firm			Tele	ephone	No.	Telephone No.		License No.				
Alan Lloyd				8	56-547	-0505	215-788-6040		00509				
Start Date (10)		Sched	duled (Comple	etion Da	te (11)	Name of OSHA M	onitor				7	
12 /14 /12	_		1	4	/	13	BRISTOL EN	/IRONMENTAL	_, INC.				
Occupancy Status During Abate	ement	(Chec	k only	one)			Street Address			-		-	
☐ Facility Closed/Vacated Duri	ing En	tire Pe	riod of	Abate	ment		1123 BEAVER	STREET					
Abatement Performed Outsi						cribe							
Time of Abatement: 7:00AM	/- <u>3:30</u>	PM/_	P	M	AM		City, State, Zip Co						
Scope of Work (Check all that a	nnly						BRISTOL, PA	19007					Article St. Co.
Scope of Work (offect all that a	ippiy)						⊠ Full Conta	ainment with Neg	ative Proceure				
≥3 sf or ≥3 If			Re	enovat	ion		☐ Mini-Encle	osure	alive Flessule				
≥160 sf or ≥260 lf			⊠ De	emolitic	on		☐ Glovebag	Procedure					
							∐ Non-Exen	npted (*) and Nor	n-Friable Procedur	е			
1				S Local Norma						At	atem	ent T	уре
Location of Asbestos-Containing Materia	al /ACI	NAN.		ed Sole		Ache	Description of stos Containing Mate		0 - 200 miles (100 m	Z.	Z	ш	ш
TO BE ABATED	ui (710)	•.,	Ma	intena	ince/		, thermal systems in		Amount (Specify	l ä	Repair	เล	를
IN Facility			Cus	todial		(surfacing, VAT,		SF or LF)	Removal	=	bsu	Enclosure
(13)				(12)			other miscellaneo	us)		_		Encapsulate	9
	200		Yes	No	N/A								
Basement						Boiler Ir	nsulation		85 SF	\boxtimes			
Basement				\boxtimes		Pipe Ins	ulation & Pipe D	ebris	8 LF				
Apt 1 & Apt 3 Kitchens						Cement	Panel Counter T	ops	55 SF				
Basement				\boxtimes		Flue Pat	tch Material		1 SF				
Name of Registered Waste Hau				1,000	JDEP V	COCK 100 COC	Cubic Yards of	Name of Registe	ered Landfill	7.000			
SERVICE TRANSPORT G	ROU	Р		H	auler IE	Chicago and Control	Waste	G.R.O.W.S.	NORTH LANDE	FILL			
SERVICE HARDFORT G	-10-58/50				18706		Disposal Date	City, State					4
							Diopodai Bato		LE, PA 19067				
City, State NEW CASTLE, DE								MOINTONE	, /				
City, State NEW CASTLE, DE		Title					Signature		I Dat	Δ.			
City, State		Title	stima	tor			Signature	D. D. Ca	I Dat	e /	, /	, 11	

No west

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Have #200 Could Lift (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)				Nam	e of Buildi	ng Ow	vner/Operator ((2)	VED				
11 /30	<u>)</u> /	12		Rie	der Univ	ersity	/ 20	10.00-					
Agencies Notified Ty	pe Notificati	ion	-11	Stree	t Address	li li		12 DEC -4 1	PH 7: 52				
	Initial			20	83 Lawre	encev	All a Phal						
12-3	Amended			£:	State, Zip		<u> </u>	₩ESTOS C & LICENS	CAT Ser			-	
☑ DHSS	Amendmen			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			NJ 08648	& LICENS	INC				
DCA (NJAC 5:23-8)	Emergency justification		3		e of Conta				Telephone Nun	nher			
	Cancellatio			10000000	il Voorhe				relephone real	11001			
				1			RMATION		*	•	5		
Name of Facility Where Abate	ement is Tal	king Place	(3)		CILITI	NFOI	KIVIATION	Type of Facility	(4)	-			
Westminster Choir Col				ty_ The	Cottage	DIA.	-	School (K-1					
Street Address		401 01114	CIO	ty- IIIc	Cottage	Diu	g.	Subchapter	8 (Other than K-1	2)			
101 Walnut Lane								Other (i.e., p	private and comme	ercial b	uildin	gs,	
City (5)								homes, etc.					
Princeton								Square Feet	# of Floors	l B	ldg. A	(ge	
County (6)						(T) (OT)	TE (105 011114	8000	1	- 1	50+		
MERCER				Cou	nty Code ((1)(514	ATE USE ONLY)	Current Use (P	rior if being demol	ished)			
Name of Monitoring Firm Hire	nd by Duildin	- Oumar	(0)	ASCM	Na	LNI							
Pennoni Associates, In		ig Owner	(0)	ASCIV	NO.	- 1		ent Contractor (9					
Street Address	10.			L				VIRONMENTA	L, INC.				
515 Grove St, Suite 1B	ž –					0.70000	eet Address						
City, State, Zip Code			1/2				123 BEAVE						
Haddon Heights, NJ 08	2025					1 1 1 1 1 1 1 1 1	y, State, Zip Co						
Project Manager for Monitorin			TTo	16	NI-		BRISTOL, PA	19007					
R. Alan Lloyd	ig Film		1	lephone		200	ephone No.		License No.				
Start Date (10)	Cal	hadulad O		356-547			15-788-6040		00509		2.0		.,.
12 / 11 / 1		heduled C 12 /					me of OSHA M						
			4	10 /	12_			VIRONMENTA	L, INC.				
Occupancy Status During Aba						1000	eet Address						
 ✓ Facility Closed/Vacated Do ✓ Abatement Performed Out 							123 BEAVE	AND CONTRACTOR OF CONTRACTOR					
Time of Abatement: 7:00							y, State, Zip Co						
25						В	BRISTOL, PA	19007					
Scope of Work (Check all that	t apply)						□ Full Cont	ainment with No.	native Dransver				
≥3 sf or ≥3 lf		⊠ Re	nova	tion			☐ Mini-Enc	ainment with Neg losure	gative Pressure				
≥160 sf or ≥260 lf		☐ De	moli	ion			☐ Glovebag						
		le	Loc	ation	F		⊠ Non-Exe	mpted (*) and No	n-Friable Procedu				
Location of			Norm				Description o	f		At	atem	ent T	-
Asbestos-Containing Mate				lely by			Containing Ma	terial (ACM)	Amount	Rer	Repair	Ē	Enclosure
TO BE ABATED IN Facility	1	102000		ance/	(i.e		rmal systems i		(Specify	Removal	pair	cap	clos
(13)			(12)			surfacing, VAT, her miscellane		SF or LF)	<u>a</u>		Encapsulate	튭
		Yes	No	N/A								ē	
Exterior			\boxtimes		Transit	te			7600 SF	\boxtimes			
		ПП											
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		$ \Box$								$ \sqcup$	Ш		

Name of Registered Waste Ha			1.5	NJDEP		26000000000	ic Yards of	Name of Regis	tered Landfill				
BRISTOL ENVIRONMEN	NTAL, INC			Hauler II 1870		Was	ste	G.R.O.W.S	. NORTH LAND	FILL			
City, State		~		10700		Disp	oosal Date	City, State					
BRISTOL, PA 19007									LLE, PA 19067				
Completed By (Print or Type)	T	itle					Signature		, In	ate /			
Brian Scafiro		Estimat	or				Buinn	Scofiro	1 d 1	1/30	li.	2	
SP 41							10,000	, a poce	70	1	/		

No creck

State of New Jersey 1209 NOTIFICATION OF ASBESTOS ABATEMENT Che (Pursuant to N.J.A.C. 8:60 and 12:120)

1209-4555 Check #

Date of Notification (1) Name of Building Owner / Operator (2) 2012 DEC -4 PM 7:51 11/15/12 NJ Transit Type Notification Agencies Notified Street Address M EPA One Penn Plaza East & LICENSING DEP Initial City, State & Zip Code $\overline{\boxtimes}$ X DOL Amended #1 Newark, NJ 07105-2246 \boxtimes DOH Emergency Name of Contact Telephone Number DCA Cancellation Russell Samaroo **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Newark Penn Station Substation #1 School (K-12) Street Address Subchapter 8 (Other than K-12) 1035 Raymond Blvd. Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) Newark Current Use (Prior if being demolished) Essex Substation Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. TTI Environmental AbateTech, Inc. Street Address Street Address 1253 North Church Street PO Box 25 City, State & Zip Code City, State & Zip Code Moorestown, NJ 08057 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Jim Guilardi 856-840-8800 609-265-3207 00529 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 11/14/12 11/30/12 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 108 Haddon Ave. X Abatement Performed Outside of Normal Hours -City, State & Zip Code Describe: 5 PM Start Westmont, NJ 18108 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf ≥260 lf Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Abatement Type Location of Is Location Description of Amount Normally Used Asbestos-Containing Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate Remova TO BE ABATED Repair Maintenance or (i.e., thermal systems Custodial Staff? insulation, surfacing, VAT in Facility or other miscellaneous) (13)(12)Yes No N/A Pipe Chase **Damaged Pipe Insulation** 30 LF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste AbateTech, Inc. 18750 TRRF Landfill City, State Disposal Date City, State Lumberton, NJ Tullytown, PA 11/30/12 Completed By (Print or Type) Title Signature Date Gwen Trumbetti Office 11/15/12 Coord.

State of New Jersey 1211-4574 NOTIFICATION OF ASBESTOS ABATEMENT Check # 4711 (Pursuant to N.J.A.C. 8:60 and 12:120) FCEIVED

Date of Notification (1) 11/22/11		JCF	ne o	f Buildir . /FirstE	g Owner / Opera nergy Compar	tor (2012 DEC -	4 PM 7			20 CV21CV	
Agencies Notified Type Notification		00.0		iuu. ooo				1		ŝ.	
☑ EPA				ion Pla ate & Zip	ce-Building A	4500510 & 110	S CONTRA	1			_
□ DOL □ Amended #		200			IJ 07960	& LICE	KSING	I.			
				f Contac				Telepho	one l	Vuml	ber
☐ DCA ☐ Cancellation		Joh	n G	reco							
		F	ACI	LITY IN	IFORMATION						
Name of Facility Where Abatement is Takin JCP&L/FirstEnergy Manholes (MH52)					Type of Fac						
Street Address	CHIMINOS)/)			School Subcha	(K-12) apter 8 (Other tha	n K 12)				
10 Park Place & South Street						i.e. private & com		nas hon	165	etc)	
					Square Fee			Bldg. Ag		Cio.j	
City (5) County (6)	Co	ounty	Co	de (7)	90	Ma	nhole	0 0	50-	ŀ	
Morristown Morris						(Prior if being de					
N			_			or Electrical Se	the second second				
Name of Monitoring Firm Hired by Building (1 Source Safety & Health	Owner (8))	1	ASCM N		atement Contract	or (9)				
Street Address					AbateTech Street Addre						
140 South Village Ave. Suite 130					PO Box 25						
City, State & Zip Code					City, State 8		051/2-02-02-037				
Exton, PA 19341 Project Manager for Monitoring Firm	Tolor	ohon	o Ni	umber .		n, NJ 08048	100				
Brian Hovendon	610-				Telephone N 609-265-21		License	Number 0052	29		
Scheduled Start Date (10) Scheduled (12/4/12	Completion 12/5		ate ((11)	Name of OS				1		
Occupancy Status During Abatement (Check					Street Addre					-	
Facility Closed/Vacated During Entir	e Period	of Ab		ment	108 Haddo						
Abatement Performed Outside of No	rmal Ho	urs –			City, State &						
Describe: Facility Occupied During Abatement					Westmont	, NJ 08108					
Scope of Work (Check all that apply)									110		23 %
						Full Conta	ainment with I	Vegative	Pres	ssure	
≥3 sf or ≥3 lf	\boxtimes		SHITT OF	ation		Mini-Encl					
≥160 sf ≥260 lf		Dei	mol	ition			Procedures		_	2	
Location of	Is	Locat	tion		Descriptio		npted and No Amount				ype
Asbestos-Containing	Norn	nally	Use		Asbestos-Cor	ntaining	(Specify	Abe	item	ent i	ype
Material (ACM) TO BE ABATED	S Main	olely	by	or	Material (A	(CM)	SF or LF)	70		En	ш
in Facility	Custo				(i.e., thermal sinsulation, surfa			Remova	Repair	aps	Enclosure
(13)	1	(12)			or other miscel	laneous)		vai	air	Encapsulate	sure
Manhala (MILEOA)	Yes	No	N.	/A						œ.	
Manhole (MH521) Manhole (MH597)		H	++		Cable Wrap		18 LF		H		
inatiliole (iniliosi)	- 	H	╁╞	+	Cable Wra	oping	18 LF		井	H	H
	一百	Ħ	忭	1	Marie Control			᠆ᡰᡰ᠊ᡰ	ዙ	H	H
			TE					ᅥᅱ	Ħ	H	H
			I							Ħ	
Name of Registered Waste Hauler				P Waste r ID No.	Cubic Yards	Name of Regist	ered Landfill				-
AbateTech, Inc.		Па		750	of Waste TBD	TRRF Landfil					
City, State		-			Disposal Date	City, State		-			77 7 7 7 7
Lumberton, NJ		100	250	**	12/5/12	Tullytown, PA			3		
Completed By (Print or Type)		Titl			Signature			Date			
Gwen Trumbetti		Ор	ps.	Coord.	M	ut		11/2	9/12	2	
		0.00			1						

State of New Jersey 1209-4555 NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification	1 (1) 11/28/12			Nai	me of Bu	uilding (Owner / O	perator	(2)		7012 D	EC 1	Day	-
Agencies Notified	Type Notific	cation		IAO	iransi	T		W	. ,		rait []	EC -4	rh	1:50
⊠ EPA	, po round	Janon	t		et Addr		- 1			-				
☐ DEP	☐ Initia	al.		On	e Penn	Plaza	East			ź	の対応	5105	CON	TRAI
□ DOL	100000000000000000000000000000000000000	nded #2		City	, State &	& Zip Co	ode				G:	LICE	SHIP	THOL.
□ DOH				Nev	vark, N	J 0710	05-2246					-,0-1	# 101 1 6 A C	2
DCA		rgency cellation		Nan	ne of Co	ntact				-			1-	
	L Cano	cellation		Rus	sell Sa	amaro	0						Tele	enhana M
Name of Eacility MA				F	ACILITY	Y INFO	PRMATIC	N						1 T 1
Name of Facility Will Newark Penn Sta	nere Abateme	ent is Takin	g Place	e (3)			Type of		(4)	_				
Street Address	tion Subst	ation #1					Sch	ool (K-	12)					
1035 Raymond B	ls ead						☐ Sub	chapte	r 8 (C)ther t	than K-	40)		
.ooo Rayiilollu B	iva.						Oth	er (i.e. r	privat	6 & c	ommor	12) ai-11- ''		nomes, et
City (5)							Square F	eet	Piivat	# of F	laare	cial build	lings, h	iomes, el
7: 7: 50		County (6)	(County	Code (7	7)	1 ''	551	*	- UI FI	IOUIS		Bldg.	Age
lewark		Essex		(5)	esement. No	51	Current	los /D						
							Current U	se (Pri	ior if b	being	demoli	shed)		
lame of Monitoring	Firm Hired by	/ Building ∩	wner ((8)	ASO	A N1-	Substat	ion						
manoninelifa	ıl	g O	(()	ASC	VI No.	Name of	Abaten	nent (Contra	actor (9)		
treet Address							Apatere	ch, in	c.		,-	5.0		
253 North Churc	h Street						Street Ad	dress	9.5					
ity, State & Zip Cod	e						PO Box							
loorestown, NJ 0	8057						City, State	& Zip	Code)				
oject Manager for N	Monitoring Fir	m	LEST		S		Lumber	on, N.	J 080)48				
m Guilardi			950	pnone	Number	r	Telephone	Numb	per	E-E-X	Ti	icense	Numba	-
	(10)	chadulad o	056	-840-8	0088		609-265-	3207			1,	-1001150		er 529
cheduled Start Date	11111 10.									THE PERSON NAMED IN			UUS	329
11/14/12		cheduled Co	4010		e (11)		Name of (JOHA M	/lonito	or				
cheduled Start Date 11/14/12 ccupancy Status Du		<i>r</i> .	4010		e (11)		Name of (EMSL Ar	Ialvtic	/lonito	or				
11/14/12 ccupancy Status Du	ring Abatem	ant (Charl	12/3	31/12	/		EMSL Ar	alytic	/lonito	or	1			
11/14/12 ccupancy Status Du Facility Closed	ring Abateme	ent (Check o	only or	31/12 ne)	/		EMSL Ar Street Add	ress	al	or				
11/14/12 ccupancy Status Du Facility Closed Abatement Pe	ring Abatemed/Vacated Duterformed Outs	ent (Check o	only or	31/12 ne)	/		EMSL Ar Street Add 108 Hado	ress lon Av	al /e.					
11/14/12 ccupancy Status Du Facility Closed Abatement Pe Describe: 5	ring Abatemed/Vacated Duterformed Outs	ent (Check or Iring Entire Side of Norm	only or	31/12 ne)	/		EMSL Ar Street Add 108 Hado City, State	ress lon Av & Zip (al /e.					
T1/14/12 Ccupancy Status Du Facility Closed Abatement Pe Describe: 5 Facility Occup	ring Abatemed/Vacated Duterformed Outs PM Start	ent (Check oring Entire	only or	31/12 ne)	/		EMSL Ar Street Add 108 Hado	ress lon Av & Zip (al /e.					
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11/14/12 ccupancy Status Du Facility Closed Abatement Pe Describe: 5 Facility Occup ope of Work (Check	ring Abatemed/Vacated Duterformed Outs PM Start	ent (Check oring Entire	only or	31/12 ne)	/		EMSL Ar Street Add 108 Hado City, State	ress lon Av & Zip (al /e. Code 1810	8				
11/14/12 ccupancy Status Du Facility Closed Abatement Pe Describe: 5 Facility Occup ope of Work (Check ≥3 sf or ≥3 lf	ring Abatemed d/Vacated Du erformed Outs PM Start ied During Al c all that apply	ent (Check oring Entire	only or	ne) of Aba	tement		EMSL Ar Street Add 108 Hado City, State	ress lon Av & Zip (/e. Code 1810	8	tainmer	nt with N		
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11/14/12 ccupancy Status Du Facility Closed Abatement Pe Describe: 5 Facility Occup ope of Work (Check ≥ 3 sf or ≥3 lf ≥ 160 sf ≥ 260 lf Loca Asbestos- Materia TO BE A (1	ring Abatemed All Vacated During Abatemed Outs PM Start ied During Abatemed All that application of Containing All (ACM) ABATED acility	ent (Check oring Entire	12/3 only or Period hal Ho	Reno Demo Location nally Usolely by tenance odial Sta (12)	evation polition	As (i.e	EMSL Ar Street Add 108 Hadd City, State Westmor Descripti bestos-Co Material (ress lon Av & Zip (ot, NJ 1 on of ontaining ACM) system acing V	Full Min Glo Nor	8 Il Contini-Encove Ba	ng Proc mpted a Am (Sp	edures and Non nount pecify	egative	e Pressur e Proced atement
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) RECEIVED

1207-4513 Check #4652

Date of Notification (1)	Na	ame of B	uilding C	Owner / Opera	ator (2)		454 TIME				
Agencies Notified Type Notification		amden treet Add		blic School	ls	2012 D	EC -4 P	M 7: 4	9	V	
⊠ EPA		01 North		Stroot							
□ DEP □ Initial □ Amended		ity, State				456	STOS CO	3141116) -		
		amden,					LICENS				
□ DOH □ Emergenc	y Na	ame of C						Teleph	one	Num	her
☐ DCA ☐ Cancellation	on Co	eleste R	Ricketts					10.00	5556745		ibei
		FACIL IT	TY INFO	DRMATION							
Name of Facility Where Abatement is	Taking Place (3)	TTOILI		Type of Fac	cility (4)					
Camden City Administration Bui	lding			School							
Street Address						(Other than I	K-12)				
201 North Front Street	0			Other ((i.e. pri	vate & comm	ercial buildi	ngs, ho	mes,	etc.)
0:4 (5)				Square Fee	et	# of Floors		Bldg. A			
	3.50 m 200	nty Code	(7)								
Camden	nden					if being dem	olished)				/
Name of Marita is 150 and 150				Administr							
Name of Monitoring Firm Hired by Buil PARS Environmental	ding Owner (8)	AS	CM No.	Name of Ab	oateme	nt Contractor	(9)				
Street Address				AbateTecl							
500 Horizon Drive, Suite 540				Street Addre							
City, State & Zip Code			***********	City, State 8		ndo					
Robbinsville, NJ 08691				Lumberto							
Project Manager for Monitoring Firm		ne Numi	ber	Telephone I			License	Number			
Firoz Jan	215-43			609-265-32	207			005			
Scheduled Start Date (10) Sched	uled Completion)	Name of OS							
Occupancy Status During Abatement (12/7/12	2		EMSL Ana		<u> </u>					
Facility Closed/Vacated During	Entire Period of	Ahateme	nt	Street Addre							
Abatement Performed Outside	of Normal Hours	- Datellie	110	108 Haddo City, State 8							
Describe:				Westmont	A CONTRACTOR OF THE PARTY						
Facility Occupied During Abate	ment			AACSTIIOUT	, NJ U	0100					
Scope of Work (Check all that apply)											
П					\boxtimes	Full Contain	ment with N	Vegative	Pre	ssure	е
≥3 sf or ≥3 lf	==	Renovatio				Mini-Enclose					
≥160 sf ≥260 lf		emolition)	า			Glove Bag F					
Location of						Non-Exempt	ed and Nor	n-Friable	e Pro	cedu	ıre
Asbestos-Containing	Is Loc Normall			Descriptio Asbestos-Cor			Amount	Aba	atem	ent T	уре
Material (ACM)	Solel		•	Material (A		, ,	(Specify SF or LF)				
TO BE ABATED	Mainten	ance or		i.e., thermal s	system	s	Or Or Er)	Re	Z,	ing:	E
in Facility (13)	Custodia			ulation, surfa				Remova	Repair	psu	Enclosure
(13)	Yes No		Oi	other miscel	laneou	s)		/ <u>a</u>	=	Encapsulate	ure
Throughout 2 nd Floor			Dino Ir	sulation/Elb							_
11001			Fipe II	isulation/Elb	ows/F	ittings	563 LF			Ц	Ц
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lame of Registered Waste Hauler	1	JDEP W	Vaste Cu	ubic Yards	Name	e of Registere	d Landfill				Ш
AbateTech, Inc.		Hauler ID	No. of	Waste TBD		F Landfill	a cariaiii				
City, State				sposal Date	City,				-		
umberton, NJ				12/7/12		town, PA					
ompleted By (Print or Type)	· T	itle	Sic	gnature				Date			-
Swen Trumbetti	C	Office			١	F		11/28	8/12	2	
	C	Coord.		-	m	Ų				7.0	
				0							

State of New Jersey 1208-4536 NOTIFICATION OF ASBESTOS ABATEMENT CHECK #4653 (Pursuant to N.J.A.C. 8:60 and 12:120) CEIVED

Date of Notification				Nar	ne c	of Buil	dina (Owner / Opera	ator (2)	-						
	11/28/12	14		Th	e Co	ollege	e of I	Owner / Opera New Jersey	Z	2 DEC	-4 PI	4 7: :.	0			
Agencies Notified	Type Notific	cation		Out	5017	ludica	00									
⊠ EPA		12	į	-		x 771	-		AS.	BEST!	no pri	CITES to				
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		ended #1				, NJ (3		CC [10	10117	ii b				
□ DOH □ DCA		rgency		1		f Con					No. 100 100		Telep	none	Nun	nber
	☐ Can	cellation		Am	and	la Ra	dost	i								
				F	ACI	LITY	INFO	ORMATION								
Name of Facility Wh	nere Abatem	ent is Taking I	Place	(3)				Type of Fac	cility (4)							
The College of N	ew Jersey								I (K-12)							
Street Address				e-eather				Subch	apter 8	(Other th	han K-12	2)				
2000 Pennington	Road							Other ((i.e. priv	ate & co	mmerci	al buildir	nas, ho	mes	etc.)
								Square Fee	et	# of Flo	oors		Bldg. A		0.0.,	
City (5)		County (6)	C	ounty	/ Co	de (7)							g.,	90		
Ewing		Mercer						Current Use	e (Prior	if being	demolis	hed)				
								Manhole			401110110	ilou)				
Name of Monitoring	Firm Hired b	y Building Ow	ner (8)		ASCM	No.	Name of Ab	natemen	t Contra	ector (9)				-	
TTI Environmenta	al							AbateTec	h. Inc.	it Oonitie	icioi (a)					
Street Address	NA 144400 V							Street Addr			-					
1253 North Churc								30 Maple								
City, State & Zip Coo	de						100	City, State 8	& Zip Co	ode		1				
Moorestown, NJ	08057					aire		Lumberto	n, NJ 0	8048						
Project Manager for Jim Guilardi	Monitoring F	irm				umbei	-	Telephone I			L	icense N	Number			
	(40)		856-					609-265-2	TO STATE OF THE PARTY OF THE PA				005	29		
Scheduled Start Date 11/8/12	e (10)	Scheduled Co	mpleti 12/3			(11)		Name of OS		nitor						
Occupancy Status D	uring Abater	nent (Check o	nly on	0)		/	-	EMSL Ana								
Facility Close	ed/Vacated [During Entire F	eriod.	of-A1	nate	ment		Street Addre								
Abatement P	erformed Ou	side of Norm	al Ho	ure	Julio	····		City, State 8								
Describe:		1	u. 110	u. o				Westmont								
Facility Occu	pied During	Abatement						AAGSTILIOUT	, NJ U8	108						
Scope of Work (Ched	ck all that ap	ply)		7-	_	-										
20		,								Full Cor	ntainmei	nt with N	lanative	Dro	20115	_
≥3 sf or ≥3 lf			\boxtimes	Re	nova	ation				Mini-En		ic with the	cgalive	, 1 16	ssuit	3
2160 sf ≥260	If			De	moli	tion				Glove B		edures				
			(% - \$)							Non-Exe			-Friable	o Dro	cedi	ıro
	ation of		Is	Loca	tion			Descriptio	on of			nount	-	atem	_	
	s-Containing	1	Norn			d		Asbestos-Cor	ntaining			pecify	710			ype
	rial (ACM) E ABATED		Main	olely				Material (A				or LF)	-		Щ	m
	Facility		Custo				inc	(i.e., thermal s sulation, surfa	systems				Removal	Repair	Encapsulate	Enclosure
	(13)		Ouote	(12)	Otai	''	0	r other miscel	laneous	1			100	pair	nsc	uso
			Yes	No	N/	Ά	35		lancous	'			<u> </u>		ate	9
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ity, State					Di	sposal Date	City, S									
umberton, NJ								12/31/12		own, P	Α					
ompleted By (Print o		9		Tit	е		Si	gnature	,	, .			Date		-	
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				1				VVV	1				11/2	0/1/		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) RECEIVED

1211-4575 Check #4712

Date of Notification	(1)			Na	me c	of Buildi	na C	wner / Oper	rator /2	1		Table 1 10 Minns	1			
	11/29/12			Ve	rizo	n Com	ımu	nications	ator (2	7910	חרס	•				
Agencies Notified	Type Notif	ication				Address		modelono		681/	nff	4 PM 7	1: 4 Q		_	
⊠ EPA				10	0 Gr	eenwo	ood .	Ave.			20000	Action event 12				
DEP	Init			City	y, Sta	ate & Zi	р Сс	de		# 5 ()	-STO	S CONT	10 to			
□ DOL		ended #				town,		19046		&	LICE	ENSING	1101			
□ DOH		ergency				f Conta	ct					-1101110	Telen	hone	. A1	'-er
☐ DCA	L Car	ncellation		Ale	x B	aylor										,01
			HIL VER	F	ACI	I ITY II	NFO	RMATION								•
Name of Facility Wi	nere Abater	nent is Taking	Place	(3)	7.01		WI C	Type of Fa		1	_					
Verizon		3		(-)		100		School	ol (K-12	,						
Street Address			13-1-15							, (Other t	han K	12)				
588 Route 9								Other	(i.e. pri	vate & co	ommer	cial buildir	ac be			
								Square Fe	et	# of F	loore				, etc)
City (5)		County (6)	C	ount	y Co	de (7)		1	0.	111111111111111111111111111111111111111	10013		Bldg. A	\ge		
Bayville		Ocean		· 10-11-10-10-10-1		`,		Current Us	e (Prior	if heing	domoli	inhad)				
								Offices	1011 1) 01	ii being	demon	snea)				
Name of Monitoring	Firm Hired	by Building Ow	ner (8)	1/	ASCM N	Jo.	Name of Al	hatama	nt Contra		.,				
USA Environmen	tal			,		.00.01	•0.	AbateTec	h Inc	ni Contra	actor (9	9)				
Street Address								Street Add								
8436 Enterprise A								PO Box 2								
City, State & Zip Coo	y, State & Zip Code iiladelphia, PA 19153							City, State		ode						_
								Lumberto								
Mark Jenkins	ject Manager for Monitoring Firm					ımber		Telephone	Numbe	r		License N	lumbe	r		
	(40)	<u> </u>	215-	_				609-265-2					005			
Scheduled Start Date 12/10/12		Scheduled Co				11)		Name of OS								
		1 (0)	12/1	1/12				EMSL Ana		<u> </u>	6.00					
Occupancy Status D	uring Abate	ment (Check of During Entire F	nly on	e)	h = 4			Street Addr								
Ahatement P	erformed O	outside of Norm	enoa	OT A	oater	ment		108 Haddo								
Describe:	crionnea C	diside of Norm	iai Ho	urs				City, State 8								
Facility Occu	nied During	Abatament						Westmont	t, NJ 0	3108						
Scope of Work (Ched	ck all that a	nnly)														
	u.i u.iut u	PP:37							\square	Eul Ca				_		
≥3 sf or ≥3 lf	80		\boxtimes	Re	nova	ation			A	Mini-En	ntainme	ent with N	egative	e Pre	ssur	е
≥160 sf ≥260	If		Ħ		moli	*			H							
									H			cedures	Calab.	_		
Loc	ation of		ls	Loca	tion			Description	on of	NOIPEX		and Non-				
Asbesto	s-Containin	g	Norn			d	1	Asbestos-Cor	ntaining			Specify	Ab	atem	ent	Туре
IVIATEI TO BE	rial (ACM) ABATED			olely			,	Material (A				or LF)	Re		m	
	Facility	10	Main				ins	i.e., thermal s ulation, surfa	systems	A.T			Removal	Z.	Encapsulate	Enclosure
	(13)		Cusic	(12)		,		other miscel					<u>a</u>	Repair	psu	los
			Yes	No	N/A	A								-	ate	l lie
Basement (12 Wor	k Areas)		П			1	E	loor tile &	Bandin		20.5				_	
			H	H	TE	1	-	ioor tile &	IVIASLIC		60 8	F Total		Ц	Ц	Ш
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me of Registered Waste Hauler					DEP	Wasto	Cul	oic Yards	Mana	*(D						
					uler	ID No.		Vaste	ivame	of Regis	stered I	_andfill				
eateTech, Inc						750		12	TRRE	Landf	ill					
ity, State		1 -			Dis	posal Date	City, S	Commence of the Commence of th								
umberton, NJ	mberton, NJ							12/11/12		town, P	Δ					
ompleted By (Print o	r Type)			Titl	e		_	nature					Det-			
wen Trumbetti	- 100 March 1987			100000000000000000000000000000000000000		Coord.	Joigi	Cha	18	annidett			Date 11/29	140		
						rara-a-was-file		CY V				1	11/29	112		

State of New Jersey 1209-4555 NOTIFICATION OF ASBESTOS ABATEMENT Check# (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification	(1)			Na	me	of Buil	lding	Owner / Opera	ator	(2) 7	AI2 DE	C-4	DM 7.	24	-			
	11/28/12	- 2007		NJ	Tr	ansit	-			(-)	SIL UL	.6 -4	rn /:	3				
Agencies Notified	Type Notifi	cation		Str	eet	Addres	SS											
EPA EPA		l .		On	ne F	enn F	Plaza	East		2	うサニ	TOS	CONTR	OL				
DEP	Initi	al		City	y, S	tate &	Zip C	ode			Ğ.	LICEN	SING					
□ DOL	☐ Am	ended #2		Ne	wa	rk, NJ	071	05-2246										
□ DOH	☐ Eme	ergency				of Con				-			Telepi	none	Nium	hor		
☐ DCA	☐ Car	cellation		Ru	SSE	ell Sar	marc	0					Treichi	ione	INUIT	bei		
					N 10 - 000 C		MC TORREST						Г					
Name of English W	oro Abatan		.	(O)	-AC	ILITY	INF	ORMATION										
Name of Facility White Newark Penn Sta	tion Cubo	tent is Taking I	Place	(3)				Type of Fac										
Street Address	tion subs	tation #1						School										
								Subcha	apter	8 (Other t	han K-	12)						
1035 Raymond B					Other (i.e. private & commercial buildings, homes, etc.)													
01/ (5)								Square Fee	et	# of F			Bldg. A					
City (5)		County (6)	C	ount	y C	ode (7))											
Newark		Essex						Current Use	e (Pri	or if being	demoli	shed)						
								Substatio			aomon	oncaj						
Name of Monitoring	Firm Hired	by Building Ow	ner (8)		ASCN	/ No	Name of Ab	715	ont Contr	actor (O	\			_			
TTI Environment	al			,				AbateTecl	h In	C CONTRACTOR	actor (9)						
Street Address							- 45	Street Addre		U	_							
1253 North Churc	h Street							PO Box 25										
City, State & Zip Coo	de							City, State 8		Code		20-5-2016						
Moorestown, NJ	08057																	
Project Manager for		Firm	Tele	phor	ne	lumbe	r	Lumberton, NJ 08048 Telephone Number License Number										
Jim Guilardi	J			-840-880p				609-265-32	05.000									
Scheduled Start Date (10) Scheduled Completic								Name of OSHA Monitor 00529										
11/14/12	1/12				EMSL Analytical													
Occupancy Status D	uring Abate	ment (Check o			/			Street Addre		σι								
Facility Close	ed/Vacated	During Entire F	eriod	of A	bate	ement		108 Haddo		V0								
Abatement Performed Outside of Normal Ho								City, State & Zip Code										
4X - X-1	5 PM Start			aio														
Facility Occu								Westmont	, NJ	18108								
Scope of Work (Che			-				-	1								W		
,		PP.))								Eull Co	ntainm			_				
≥3 sf or ≥3 lf			\boxtimes	Re	enov	ation			H	Mini-Er	illaliiiik	ent with I	vegative	Pres	ssure	•		
☐ ≥160 sf ≥260 lf						lition			H									
_	00		iitiOii		Glove Bag Procedures Non-Exempted and Non-Friable Procedu													
Loc	cation of		le	Loca	ation			Decementia	Hannand	Non-Ex	empted	and No	n-Friabl	e Pro	cedu	re		
						50			Description of Asbestos-Containing			mount	Abatement Type					
Asbestos-Containing Material (ACM)					by			Material (A		ng		Specify or LF)		100				
TO BE ABATED Main								i.e., thermal systems			Si	OI LF)	70	'	ä	9		
in Facility Custo						iff?		sulation, surface					ä	Repair	ap	용		
	(13)			(12)				r other miscell					Removal	a.	Encapsulate	Enclosure		
			Yes	No	N	I/A							-		ē	0		
Pipe Chase						V	Dar	naged Pipe I	Insu	lation	3	0 LF	\vdash			\Box		
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Name of Registered V	Vaste Haula	er l		N	IDE	D Was	eto C	ubic Yards	INI-	ma af D - 1	-1				Ш			
-3.0.0.04	riduit					r ID N		ubic Yards f Waste	ivar	me of Regi	stered	Landfill						
AbateTech, Inc.				1. "		8750	0. 0	3	TP	RF Land	Fill							
City, State					• • •		- D		0.000		1111							
umberton, NJ				Dis				isposal Date City, State 12/31/12 Tullytown, PA										
Completed By (Print or Type)							-											
Swen Trumbetti					tle	_	S	gnature					Date					
Jacii iiniiibell	.1				ffic			(~~.	, L				11/2	8/12				
				C	100	d.		UYN	M									

CK 22084

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

RECEIVE

Date of Notification (1) 12 /	12	•	_ \	erizon/	ding Owner/Operator	2012 DEC -4 PM 7:48								
Agencies Notified ☐ Type Notification ☐ Initial ☐ Amended					eet Addres 095 6 th A			4 A RECTOR						
☑ DOLWD	ent#			, State, Zi		<u> </u>	201	US	COL	HA.	41			
☑ DCA	y (includ	ding	0 2000		, NY 10036		& LICENSING							
(NJAC 5:23-8)	n)	anig		ne of Cont			Telephone Number							
	on		A	lex Baylo	or		relephone M	ımber						
				F	ACILITY	INFORMATION			-			_		
Name of Facility Where A	batement is T	aking Pla	ace (3)			Oraniz (TOR	Type of Facility	(4)						
Verizon Hackensac	k Union City	Centra	al Off	ice		School (K-1)								
Street Address							☐ Subchapter	8 (Other than K-	12)					
256 State Street					□ Other (i.e., private and commercial buildings)									
City (5)							nomes, etc.)							
Hackensack, NJ							10000	# of Floors			Age			
County (6)				Co	unty Code	(7)(STATE USE ONLY	10000 2 40 Current Use (Prior if being demolished)							
Bergen					, 0000	(1) (OTATE OSE ONET)	Current Use (Pr	for if being demo	lished)				
Name of Monitoring Firm I	lired by Buildi	ng Owne	er (8)	ASCI	/I No	Name of Abota								
TTI Environmental, I		(-/		717		ment Contractor (9)								
Street Address				1 20	•••	JVN Restorat	ition inc							
1253 North Church S	Street					Street Address								
City, State, Zip Code						47 Foster Ro								
Moorestown, NJ						City, State, Zip Code								
Project Manager for Monito	ring Firm		To	lonhone	Nie	Staten Island NY 10309								
Harold Balwin	9 1 11111			elephone		Telephone No.		License No.						
Start Date (10)	Sc	heduled		856-84		718-605-6256	1 00//-							
12/_17_/_	12	1 _2	24 /	ate (11)	Name of OSHA Me Testor Tech	onitor			Ŧ					
Occupancy Status During A	batement (Ch	eck only	one)			Street Address					00			
☐ Facility Closed/Vacated	During Entire	Period o	f Ahat	ement		100000000000000000000000000000000000000	Ανοπιιο							
J Abatement Performed C	utside of Norn	nal Facil	ity Ho	ire Do	scribe	10 59 Jackson Avenue City, State, Zip Code								
Time of Abatement: 6Af	viPM/ <u>4</u>	:00PM-		_AM		LIC, NY 11101						77		
cope of Work (Check all the	nat apply)					LIC, 141 11101			_					
						☐ Full Conta	inment with Neas	ative Pressure						
☐ ≥3 sf or ≥3 lf ☐ Renovation ☐ ≥160 sf or ≥260 lf ☐ Demolition						☐ Mini-Encid	ainment with Negative Pressure							
			CITIOIII	IOII		☐ Glovebag	Procedure	Falski -						
		1:	s Loca	ition	T	EN HOII-EXEIT	pted (*) and Non	-rrable Procedu	_					
Location of Normally Asbestos-Containing Material (ACM) TO BE ABATED Normally Used Solely Maintenance						Description of	1		Abatement Ty					
					Asbe	stos Containing Mate	erial (ACM)	Amount	R	Re	m	T		
IN Facility Custod				Staff?	(I.e	., thermal systems in surfacing, VAT, o	sulation,	(Specify	Remova	Repair	cap			
(13)			(12)		1	other miscellaneou	or us)	SF or LF)	<u>s</u>	-	Encapsulate			
sement Boiler Room		Yes	No 🖾	N/A	1/AT		,				ate			
asement Storage Room					VAT			1034 SF	×			[
sement Air Dryer Roc	15			VAT			38 SF							
sement Storage Roor				VAT			234 SF							
me of Registered Waste H			100	JDEP V		O. b. W. L. d. T		76 SF						
Blobal Waste Industrie			H	auler ID	No.	Cubic Yards of Waste	Name of Registe							
				NJ-22	171	5	Minerva Ente	erprises Inc						
/. State						Disposal Date 12/24/2012	City, State					7		
						12124121117	Waynesburg	OH						
/, State lackettstown, NJ mpleted By (Print or Type)	Tit	la					yiicobaig	, 011						
		le Senior I				Signature	iech	Date	e	+				