Da	te of Notification (1)	18	in the second se		CATION	ate of New Jerse N OF ASBESTOS to NJAC 8:60 an	ABATE d 12:120	0)	Company of the second	DE G		6 2	₩ <sup>Pr</sup>	
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Age	encies Notified	Type Notification	n		Street A	ddress				ASBES	TOS	CON USIN	ITRO	)L 8
×	EPA DEP DOL DOH DCA	Initial Amended Amendmer Emergency justification Cancellatio	(including	_	Secal Name o	ate, Zip Code ucus, NJ 07094 f Contact ang Namgyal a		aus Wu	Те	lephone Nur				
Ц	DCA	Cancellatio	n			ILITY INFORMATI		ius vvu	1_					
	me of Facility Where	Abatement is Taki	ng Place (	3)					-12) er 8 (Oth	ner than K-12 & commerci		dings	, home	es,
-0.0	(5) ecaucus							Square Feet 1800	# 0	of Floors	1	3ldg. <i>A</i> 30	\ge	
	unty (6) udson					Code (7) USE ONLY)		Current Use (Pr		ing demolish	ned)			
Nar	me of Monitoring Firm	Hired by Building	Owner (8)	)	ASCN	Л No.	1000	of Abatement Co						7-00
Stre	eet Address						Street	n Enterprise G Address W. Pleasantvi	•		2-329	)		
City	, State, Zip Code		D*				City, S	tate, Zip Code kensack, NJ 0		840				
Pro	ject Manager for Mon	itoring Firm			Telepho	ne No.	100	one No. 928-6900		License N 01229	0.			
	rt Date (10) 2/3/2016		Schedul 12/4/2		mpletion	Date (11)		of OSHA Monitor Enterprise G		LLC				
Occ	cupancy Status During	Pa - 53	0.53	30	nent			<sup>Address</sup> <i>N</i> . Pleasantvi	ew Av	e., Suite 2	2-329	)		
×	Abatement Perform Other – Describe:	ed Outside of Non					100000000000000000000000000000000000000	tate, Zip Code kensack, NJ 0	7601					
Sco	pe of Work (Check A ≥3 sf or ≥3 If ≥160 sf or ≥260 If	ll That Apply)	-	Renova Demolit		-	×	Full Containn	nent with re ocedure	50			e	
	107 50	2		Locat Normal									ement rpe	
	Location Asbestos-Containing <u>TO BE AB/</u> In Facili (13)	Material (ACM) ATED	Use Ma	ed Sole intena todial S (12)	ely by nce/	Asbestos Cont (i.e. thermal surface		laterial (ACM) s insulation, T, or	(5	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Baseme	ent	X			Thermal Sy	stems	Insulation	1	00LF	Х			

NJDEP Waste Hauler ID No.

NJ-952

Dir. of Operations

Title

Cubic Yards of Waste

Disposal Date

Signature/

TBD

TBD

City, State

Bronx, NY

Name of Registered Landfill

Tri State Transfer & Associates

Date

12/2/2016

Completed by

Hackensack, NJ

Bogdan Markovski

City, State

Name of Registered Waste Hauler

Sunn Enterprise Group, LLC

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

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110 Cr		(P	ursuant	to NJAC 8:60 a	nd 12:12	0)		M						
Date of Notification (1) 11/29/2016				of Building Owner S Hi Rise Con	2.5	19 5	di interpretati		01	EC	<b>-</b> 6	20	16	
Agencies Notified Type Notification			Street A					L	SBES	STOS	3 00	ONT	RO	1 &
EPA Initial		-	100000	nderson St. ate, Zip Code				73	OULC	HOE	34	HNG	110	
X   EPA     X   DEP     X   Dol     Initial     X   Amended     Amendment	# 1		100000000000000000000000000000000000000	ken, NJ 0703	0									
☑ Emergency justification)		,		f Contact				Tele	phone	Numb	er	1000		
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Name of Equility Whore Abstement is Takin	a Diana /	2/	FAC	ILITY INFORMA	TION	Tuna	of Facility (A							
Name of Facility Where Abatement is Takin	ig Flace (	3)				_	of Facility (4							
Street Address				14-17-11-1			School (K-12 Subchapter		r than I	K-12)				
							Other (i.e. pr tc.)	ivate 8	comm	ercial	build	lings,	home	es,
City (5)							e Feet	# of	Floors		В	ldg. A	ge	
Hoboken												5+		
County (6) Hudson				Code (7) USE ONLY)		Currer n/a	nt Use (Prio	r if beir	ng demo	olishe	3)			
Name of Monitoring Firm Hired by Building	Owner (8	)	ASCN	M No.	Name		ement Cont	ractor	(9)		- 777.			
Health and Safety Services		5					orises, Ind							
Street Address					Street	Addres	S							
PO Box 365							ah Road							
City, State, Zip Code Berlin, NJ 08009					100000000000000000000000000000000000000	State, Zij	o Code or Townsh	nin N	1000	2 A				
Project Manager for Monitoring Firm			Telepho	ne No		none No	Karin January and Carina	пр, ги	Licens			2.7/10.3/		
James Proctor			Deposit of the House	52-1311		-567-1			0117					
Start Date (10)	Schedul	ed Cor	npletion	Date (11)	Name	of OSH	A Monitor							
11/23/2016	12/09/						afety Ser	vices	, Inc.					
Occupancy Status During Abatement (Chec						Address Box 36								
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norn						state, Zir								-
Other - Describe: Vacant			-		A CONTRACTOR		08009							
Scope of Work (Check All That Apply)														
23 sf or ≥3 lf		Renova			×		Containme	nt with	Negativ	ve Pre	ssur	е		
≥160 sf or ≥260 lf	X I	Demolit	tion			1000000	-Enclosure rebag Proce	edure						
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		S Locati Normal		(4.5)								Ту	ment pe	ė
Location of Asbestos-Containing Material (ACM)	Use	ed Sole	ly by	Asbestos Cor	escription ntaining N		(ACM)	Ar	nount				Ш	1000
TO BE ABATED In Facility	- A. H. C.	aintena tödiál S		(i.e. therma	al system: acing, VA		tion,		pecify or LF)		Ren	Re	ncap	Encl
(13)		(12)			miscellar			O.	OI LI )		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										ite	CD.
Roof			X		Tile			54	00 sf		Х			
Floor			X		Tile			25	35 sf		x			
Ceiling			X		Transite	9		5	0 sf		x			
Wall			X	V	Vall Glu	е		28	30 sf		x			
Name of Registered Waste Hauler		30	IJDEP W		c Yards		Name of R	egister	ed Lan	dfill				
Site Enterprises Inc.		(2)	lauler ID 035220				Tullytow	n Lar	ndfill					
City, State	Wat 80 0				sal Date		City, State							
6626 Delilah Road Egg Harbor Tow		NJ			9/16		Bristol, I	PA						
Completed by Eric Keys	Title				Signature	h	1			Date	20/2	2016		
LITO INDYS	OIVI				YA	18 1. V	/			1.17	_012	010		

Print Form

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Date of Notification (1) 11-30-2016					of Building stock Co			(2)			ner- (	h	+1	4	74
Agencies Notified	Type Notification	1			Address					ASBE	STOS		ONI	TOC	1 0
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× EPA × DEP × DOL	Amended	C-010			tate, Zip C					The state of the s	The state of the state of	of State Spring			
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DCA	Cancellatio	n			Grome/E			A 1000 Quin Vala - 11 p.1				_			
Name of Facility Where Al	hatement is Taki	na Place	(3)	FAC	ILITY INF	ORMAT	TION	T /F							
Tavistock Country C	lub	ng i lace	(0)	4				Type of Fac							
Street Address			-					School	(K-12) apter 8 (Ot	bar than	V 40)				
100 Tavistock Lane									i.e. private			uild	inas	. hon	ies.
City (5)								etc.)							
Haddonfield								Square Feet	.   #	of Floors		BI	dg./	\ge	
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Camden			ĺ		USE ONLY	)		Current Use restaurant		eing aem	iolisnea	)			
Name of Monitoring Firm H	Hired by Building	Owner (8	)	ASC	M No.			of Abatement		r (Q)					
Environmental Desig	n, Inc							Corporation		(3)					
Street Address							A Company of the Comp	Address				-	-		
5434 King Ave							606 N	AcBride Av	е						
City, State, Zip Code							City, St	ate, Zip Code	)			-			o(16)
Pennsauken, NJ 081							Wood	lland Park,	NJ 074	24					
Project Manager for Monito Dennis Gober	oring Firm			Telepho	ne No.		Telepho			Licens	se No.				
					16-9516		973-2	25-8400		0110	4				
Start Date (10) 12-11-2016		Schedu	ed Co	mpletion	Date (11)		1 17 17 17 17 17 17 17 17 17 17 17 17 17	of OSHA Mon				0.100		100	-
	A 1-1	01-30-					Iris Er	nvironment	al Labor	atories	s, LLC				
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X Facility Closed/Vacate Abatement Performed	ed During Entire	Period of	Abater	ment				Route 22 V							
× Other – Describe:	- Cutaide of Noti	nai raciiit	y mour	S				ate, Zip Code						- Section III	
Scope of Work (Check All 7	That Apply)						Union	, NJ 07083	<u> </u>						
≥3 sf or ≥3 lf	. пастърну)	<b>.</b>					[U]								
× ≥160 sf or ≥260 lf		Parameter .	Renova Demoli				×	Full Contai Mini-Enclo	nment with	h Negati	ve Pres	sure			
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N See N			Locat Vorma									Α	bate Ty	men	
Location of Asbestos-Containing Management			d Sole		A=b==	De	scription o	of			-	Т	1 y	p(:	
TO BE ABAT	ED (ACM)	- Yang	intena		Aspesi (i.e.	thermal	taining Ma I systems	iterial (ACM) insulation,	729	Amount Specify	,	,		ill Ill	m
In Facility (13)		Cus	todial ( (12)	stan?		surfa	cing, VAT	, or		F or LF)	Nemova		Repair	cap	nde
(10)						other r	niscellane	ous)			DVdI		air.	Encapsulate	Enclosure
		Yes	No	N/A										é	,,,,
upper level banque	et kitchen			Х		C	eilings		1,4	168 SF	x				
lower level main	kitchen			X	се	iling a	nd wall	olaster	7	70 SF	x				
lower level main	kitchen			X			oor tiles		-	50 SF		-	-		
lower level womens I					_			_		×					
Name of Registered Waste			Liki	JDEP W	lasta		ter ceilir	-		50 SF	х			anaar:	
Service Transport Grou			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	auler ID		Cubic of Was			of Registe		dfill				
			20	0990				Mine	rva Land	dfill					
City, State						Dispos	sal Date	City, S							
New Castle, DE								Wayr	nesburgl	n, OH					
Completed by Momo Glavatovic	ompleted by Title omo Glavatovic vice presi						ignature			->	Date	-			
		resic	ent							11/30	/20	16		h	
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Location of Asbestos-Containing Material (ACM) <u>IO BE ABATED</u> In Facility  (13)	Use Ma	Location Normall and Solel sintenar todial S (12)	y ly by nce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Spectives SF or LF)	New Series	Abat Ty	PONT ypc Near Near	Osobole 8
	Yes	No	N/A			2		ilate	ure
womens shower/restroom			Х	plaster walls&ceiling	1635 SF	x			
lower level main kitchen			X	pipe insulation	150 LF	X			-

Project shall be done in two (2) phases, as follows:

Phase 1.

Phase 2.

December 11 - December 15, 2016 January 5, 2017 - January 30, 2017

								1	1			
Date of Notification (1)			1	Name o	f Building (	Owner/Operator (2	2)	) E P I	7 1 7	// Ti	7 5	
12/2	/16_	_		Expr	ess Marii	ne Inc.		) <u> </u>		// [	-1	$\square$
Agencies Notified Typ	e Notification			Street A	Address			1				
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	Amended		(	City, Sta	ate, Zip Co	de	14	Ц -	0 20	710	1	-
A DOI!	Amendment #_	500 000		Penr	nsauken,	NJ 08110		L				
	Emergency (inc justification)	cluaing	-	Name o	of Contact			Telephone Nuc	BOONT	ROL	_&	
(	Cancellation			Crof	t Registe	r			G			
				FAC	ILITY INF	ORMATION	Y 100 100 100 100 100 100 100 100 100 10					
Name of Facility Where Abate	ement is Taking	Place (	3)				Type of Facility (	4)				
Express Marine Inc.							School (K-12)		0.			
Street Address							☐ Subchapter 8 ☐ Other (i.e., pri	Otner than K-1	ercial buil	dinas	i.	
2851 Adams Ave.							homes, etc.)	rate and comm		3-		
City (5)							Square Feet	# of Floors	Bld	g. Ag	е	
Camden							2,000	1	5	0		
County (6)				Count	y Code (7)(	STATE USE ONLY)	Current Use (Prid	or if being demo	lished)			
Camden							commercial					
Name of Monitoring Firm Hire	ed by Building C	)wner (8	3) A	SCM	No.	Name of Abateme	ent Contractor (9)					
Environmental Tactics		,,,,,,,	7	0045			vironmental Co	o., Inc.				
Street Address	,			7.000		Street Address						
64 Broad Street						923 Haws Av	e.					
						City, State, Zip C						
City, State, Zip Code						Norristown,						
Matawan, NJ 07747	a a Firm		Tolor	hone N	do.	Telephone No.		License No.				
Project Manager for Monitoria	ng Firm			2-290-		610-239-9920	1	00398				
Tom Geiger	Cabaa	duled Co				Name of OSHA N					_	-
Start Date (10) 12 / 19 / _ 1	C POSITION OF	iulea Co 12 /			- ( /	EMSL	VIOTITO					
						Street Address						
Occupancy Status During Ab				nont		521 Plymout	h Rd					
<ul> <li>         □ Facility Closed/Vacated D         □ Abatement Performed Output</li> </ul>	utility Etitile Fe	Facility	Hours	s - Desc	cribe	City, State, Zip C						
Time of Abatement:	AMPI	M/	_PM-	/	AM	[[[전에 어딘 바람 [] [] [] [] [] [] [] [] [] [] [] [] []	eeting, PA 1946	32				
Scope of Work (Check all that	at apply)					•			300000000000000000000000000000000000000			
						☐ Full Cor	ntainment with Neg	gative Pressure				
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>		⊠ Rei				☐ Gloveba	ag Procedure					
☐ ≥100 St 01 ≥200 II		□ 00				☐ Non-Exe	empted (*) and No	n-Friable Proce				
		100	Locat						Aba	ateme	ent T	ype
Location of			lormal d Sole		Ashas	Description stos Containing M		Amount	Re	Repair	Enc	E
Asbestos-Containing Ma		Mai	intena	nce/	(i.e.	, thermal systems	insulation,	(Specify	Removal	pair	Encapsulate	Enclosure
IN Facility	_	Cust	odial	Staff?		surfacing, VA7	Γ, or	SF or LF)	a a		sula	ure
(13)			(12)	1	-	other miscellan	eous)				te	
		Yes	No	N/A				40LF		П	П	П
Boiler Room			Ш		rope ins			3-000000	0			
Boiler Room					wire ins			6LF				분
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										Ш	Ш	
Name of Registered Waste	Hauler	-	114 (20)	JDEP V		Cubic Yards of	Name of Regi					
Robinson Waste Haul	ers		F	17304		Waste 5CY	GROWS L	andfills.				
City, State						Disposal Date	City, State	AT 1.000				
310 American Way, Vo	oorhees, NJ (	08043				12/31/16	Morrisville	e, PA				
Completed By (Print or Type	e) Tit	le	2 113911			Signature	//		Date	1. /	,	
James M. Kelly	50.00	Vice Pr	eside	ent		10			17/	1/1	6	

#### Print Form State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 11/30/2016 Patrice Coleman Street Address Type Notification Agencies Notified ASBESTOS CONTROL X EPA Initial × City, State, Zip Code DEP Amended South Orange, NJ 07079 DOL Amendment # Emergency (including Name of Contact Telephone Number DOH justification) Patrice Coleman DCA Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) House School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age N/A N/A N/A South Orange Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY) House Essex Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. N/A D&S Abatement, Inc. Street Address Street Address 11 Rosengren Avenue City, State, Zip Code City, State, Zip Code Totowa, NJ 07512 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 973-345-8685 01311 Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) D&S Abatement, Inc. 12/12/2016 12/13/2016 Street Address Occupancy Status During Abatement (Check Only One) 11 Rosengren Avenue Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Occupied Totowa, NJ 07512 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation × Full Containment with Negative Pressure Demolition Mini-Enclosure ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement

Is Location Type Normally Description of Location of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Enclosure Remova Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)Yes No N/A 100 LF X basement X pipe insulation Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste of Waste Hauler ID No. Waste Management of PA D&S Abatement, Inc. TBD 20996 Disposal Date City, State City, State

Project Manager

TBD

Signature

Date

11/30/2016

Tullytown, PA

Totowa, NJ

Completed by

Oliver Hegedis

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT MO#19730017978 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 12 03 / 16 Joyce Sheha Agencies Notified Type Notification Street Address ASBESTOS CONTROL & ПЕРА ✓ Initial LICENSING **⋈** DOLWD Amended City, State, Zip Code X DHSS Amendment # Bound Brook, NJ 08805 □ DCA Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation Joyce Sheha FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house School (K-12) Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Bound Brook, NJ 08805 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Somerset Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12 / 12 / 16 \_\_12\_\_ / \_\_13 / \_\_16 Envirovision Consultants.Inc Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_AM-\_\_\_PM/ PM\_ AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 If 160 sf or >260 If Renovation Glovebag Procedure Tent with Negative Pressure Demolition Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Repair Asbestos-Containing Material (ACM) Encapsulate Removal Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A X Basement Transite panel 24 SF П П Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City. State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date N.Jevtic Owner 12/03/16 ASB-41

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

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2000,	RY28-	114 ASB	ESTO	OS CO	ONTRO	L 8	à

Date of Notification (1)			Building C SHARP & D		53	(2)		DE	C -	6	2016			
12 / 2 /16					et Ad				Seni	lane.				
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X DOH On F		Y NOTI	FICAT			Contact . Schenk			Telenhone	Numbe	er			21.000
			011/91/15/2//9001	ACILITY II		BOOK DECISION SCHOOL		-	5		_			
Name of Facility Where Abatement	is Taking	Place	(3)					of Facility School (K			Sed - D			
MERCK SHARP & DOHME CORPOR	RATION							Subchapte	er 8 (Other the private & con		100	s ho	mes.	etc.)
Street Address								are Feet			- 3	-	g. Age	_
126 EAST LINCOLN AVENUE - EXTE		ETWEE	N BU											
City (5) Cou RAHWAY UNIO	nty (6) DN					ode (7) E ONLY)	OFFIC		rior if being d	lemolis	hed)			
Name of Monitoring Firm Hired by I		Owner	(8)	(01711		SCM No.			ment Contra	actor (	9)		>=>===	
ENVIRONMETAL HEALTH INVESTIG			104			MENTAL CO		97/2	ON					
Street Address								Address						
655 WEST SHORE TRAIL									OCK ROAD					
City, State, Zip Code SPARTA,	NEW IE	DOEV	17071					State, Zip	Code W YORK 109	201				
Project Manager for Monitoring Firm	INEVV JE			Number	_		200000000000000000000000000000000000000	hone Num		Licens	o N	umhe	r	
WILLIAM S. KERBEL, CIH		0.000	729-5				100 miles	69-7500	ibei	1101	5C 14	uiiibe		
Expected State Date (10)	Sc			etion Date	(11)	,		of OSHA	Monitor	1101				
11 / 12 /16		12	53.50	2	3 - 2	/16			ORATORIES	SINC		#	11480	
Month Day Year		Month		Day		Year	_							
Occupancy Status During Abatement  X Facility Closed/Vacated Du Abatement Performed Outs X Other - Describe: SAT	ring Entir	e Perio	d of A acility		escrib	e:	117 E	Address AST 30Th	H STREET			- apr		
Scope of Work (Check all that apply)  Demolition  X >3SF OR LF  >160 SF OR 260 LF	X Re	novatio	n		X	Full Conta Mini-Enclo Glovebag Non-Friab	ainment o , g Proce	NEV with Neg	V YORK, NE ative Pressu		RK 1	0016		
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33773	Ye	s No	N/A							_			E	RE
EXTERIOR PIPE RACK -BETWEEN														
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Name of Registered Waste Hauler FREEHOLD CARTAGE, INC.	Cubic Yar	ds of 2	Waste			ered Landfill OUNTY RESO		- 1/1/2	NAG	EMEN	IT SE			
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City, State	Disposal [	Date		City, Ş	State					-				
FREEHOLD, NEW JERSEY	11/12/12/3		1			Y , PA 17752	2		,					
Completed by (Print or Type) BENJAMIN SANCHEZ	RATIONS	Sign	ature	88	<b>/</b>		Date	121	12	1/2	2			

Dec 02 2016 04:55PM NJ Asbestos Control 609.633.0664

12/82/2016 18:54AM 2013297440

BEST REMOVAL INC

page 1

# PAGE 02/84 DEC-6 2016 ASBESTOS CONTROL &

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DOL Amendment				BAYO	NAE	· N	7	0700	77			
DOH justification			Name	of Contact	1-1			To lephone Nun		_		_
□ DCA □ Cancellation			L		E 53	_	1.	retebuour Man	TIME		-	
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ojset Menager for Memilering Firm						kensack, h	ij 076	01				
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#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

110 Ch		(Pi	ursuant	to NJAC 8:60 a	nd 12:120	0)			DEC		0.0	110	4
Date of Notification (1)	<u> </u>			Building Owner		(2)	The second second		ner	,	0-4	110-	
11/30/2016				thony Parish									
Agencies Notified Type Notification			Street A					and the same	ASBEST				L &
X EPA Initial		1		iamond Bridg	je Aven	ue			LI	CEN	SINU	<i>a</i>	
EPA Initial   DEP Amended   DOL Amendmen	. #1			te, Zip Code	.00								
Emergency		_		orne, NJ 075	009			Tal	nhana Niu	nhar	-		
∠ DOH justification	)			Contact				Tele	ephone Nur	nber _	•		
DCA Cancellation	1		Cathy		71011			1-			-		
Name of Facility Where Abatement is Takir	na Place (*	3)	FACI	LITY INFORMA	TION	Type	of Facility (4	4)		-			
St. Anthony's RC Church	ig i lace (c	,,				_	•						
Street Address		-					School (K-1: Subchapter		er than K-12	2)			
276 Diamond Bridge Avenue							Other (i.e. p				dings,	home	es,
						- 6	etc.)	1 # 04	Floors	10	Ildg. A	00	
City (5)						9,00	e Feet	1 1	F10015	1	10g. 7 34	ige	
Hawthorne			o	2 1 /7)		200722000	William December 1992		a e damalial		,		
County (6)			County (	Jode (7) JSE ONLY)		Chu	nt Use (Pric	or it bei	ng demonsi	ied)			
Passaic	0 (0)								(0)				
Name of Monitoring Firm Hired by Building	Owner (8)	)	ASCN	1 No.	The military of the		tement Con		(9)				
EnviroVision Consultants, Inc.							ntracting,	, IIIG.					
Street Address						Addres		ما ا م	# 26E				
20-21 Wagaraw Road - Bldg. 35E						-	on Avenu	e, un	11 300				
City, State, Zip Code							p Code						
Fair Lawn, NJ 07410							07012						
Project Manager for Monitoring Firm			Telephor			none No			License N	0.			
Fred				636-9145		3) 450-			001036	1			
Start Date (10)			npletion l	Date (11)	1 200		A Monitor	lu-					
12/05/2016	12/07/						ntracting,	inc.					
Occupancy Status During Abatement (Che	ck Only Or	ne)				Addres			1 005				
Facility Closed/Vacated During Entire							on Avenu	e, Un	11 305				
Abatement Performed Outside of Nor Other – Describe: M-S: 8:00 AM - 5:0		y Hours	5				p Code						
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Scope of Work (Check All That Apply)					_	_							
≥3 sf or ≥3 lf	production of the last of the	Renova			>		Containme		Negative F	ressu	re		
≥160 sf or ≥260 lf		Demolit	ion		F		i-Enclosure vebag Proc						
							n-Exempted		d Non-Friat	le Pro	cedur	е	
	Is	Locati	on									ement	t
Location of	1	Normal	ly	_ n	escription	of					1)	rpe T	
Asbestos-Containing Material (ACM)	100000	ed Sole		Asbestos Co	ntaining N	<b>Material</b>			mount			Ш	m
TO BE ABATED	(2000)	todial S		(i.e. therm	al system facing, VA		ition,		specify or LF)	Ren	Re	ıcap	nc
In Facility (13)		(12)			miscellar			JI.	OI LI')	Remova	Repair	Encapsulate	Enclosure
a 2	Yes	No	N/A							<u>a</u>		ate	6
	162	140								-	-	-	
1st Floor - Vestibule			X	Skim	Coat P	laster		86	32 SF	X	-		
						-15.00							
Name of Registered Waste Hauler		IN	JDEP W	aste Cubi	ic Yards		Name of I	Registe	red Landfill	1	1		
		Н	lauler ID	No. of W	aste				al Sanitar		ndfi!!	Cor	n
Atlantic Carting		N	IJ641	30					ai Jailildi	y Ldi	iuilli	OUI	۷٠
City, State					osal Date		City, State						
Wayne, NJ				TBI	) / /	1	Pen Ar	gyl, P	A				
Completed by	Title	Tarak Maria		,	Signature	9			Da		001		
Milena Zoric	Excu	utive [	Director	r	10	1				1/30/	2016		

Print Form

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Date of Notification (1) 12/1/16				f Building O -Science				a proper y addition of the	DE				W		
X EPA X DEP DOL	Amended Amendment Emergency (			City, Sta Lake H	ddress oute 15 S ite, Zip Cod Hopatcon f Contact	е			Te	lephoñe)	DE(				
DOH DCA	justification) Cancellation		1		h Pilewsk	ci			1 'F	7.0	<u> </u>	00	SI	VG	
				FACI	LITY INFO	RMATIO	N								
Name of Facility Where Aba Street Address	atement is Takin	g Place (3	)					Subch	ol (K-12) napter 8 (Oth						
901 High Street								Other etc.)	(i.e. private	& comme	ercial bu	ildin	gs, h	ome	s,
City (5) Hackettstown								Square Fe	et # c	of Floors		Bldg 73	J. Ag	е	
County (6) Warren					Code (7) USE ONLY)			Current Us	e (Prior if be	ing demo	lished)				
Name of Monitoring Firm Hi	red by Building (	Owner (8)		ASCN	1 No.		ABS	Environm	nt Contracto nental Ser	75.	LC				
Street Address		2016030001302					PO E		E Gate D	Prive					
City, State, Zip Code								tate, Zip Co wood, NJ							
Project Manager for Monitor	ing Firm		1	Telepho	ne No.			one No. 764 <b>-</b> 2276		License 703	e No.				
Start Date (10) 12/10/16		Schedule 1/30/16		pletion I	Date (11)		Name	of OSHA Mo	onitor						
Occupancy Status During A	batement (Chec	k Only Or	e)				Street	Address							
Facility Closed/Vacated Abatement Performed Other – Describe:	d During Entire F Outside of Norm	Period of Anal Facility	Abatem Hours	ent		_	City, S	tate, Zip Co	de						
Scope of Work (Check All T	hat Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	tenoval emoliti				×	Mini-End Gloveba	tainment wit closure g Procedure empted (*) ar				dure		
		Is	Locatio	on				1 HOIT EXC	I J	101101111			ater	nent	
Location of		1	lormall d Solel	У		Desc	cription	of			-	_	Тур	e	
Asbestos-Containing Ma <u>TO BE ABATE</u> In Facility (13)		Ma Cus	intenar odial S (12)	ice/ taff?	(i.e. tl		ystems ng, VA		(	Amount Specify F or LF)	Selloval		Repair	Encapsulate	Enclosure
		Yes	No	N/A			ofine		41	500 SF		-		-	
roof				X			ofing				X	-		-	
windows			X		caulk	& gia	zing	2	00 LF	X					
Name of Registered Waste	Hauler		N	JDEP W	/aste	Cubic Y	'ards	Nai	me of Regist	ered Land	dfill				
Tony's Clean Up & Har			H	auler ID 7787		of Wast			nrin Brothe			and	fill		
City, State Bridgewater, NJ						Disposa TBD	al Date		y, State rdsboro, F	PA					
Completed by A. Scott Higgins		dent			Sig	gnature	an	_		Date 12/1/	16				

				-				105.0	III i no	0	0 0	010	- 111
Date of Notification (1)		•					vner/Operator	(2)	II L DE	6 -	- 7	016	1
/02	_ / _1	6		DI	IA Demo	litior	1		1 1 3	08	86	8	
⊠ EPA □	e Notification Initial	1			t Address 56 Camp		Road		ASBES	IOS C			L&
	Amended			-	State, Zip								
HE 187 LEWIS CONTROL	Amendment † Emergency (i		_		Isborou								
	justification)	nciudin	g	-	e of Conta				Telephone Nu	mber		150	
	Cancellation			An	tonio Di	Muzi	0		10,000,000,000				
				FA	CILITY	NFO	RMATION			-			-
Name of Facility Where Abate	ment is Takir	ng Place	e (3)					Type of Facility	(4)		_		
Residence								School (K-12	)				
Street Address								Subchapter 8	Other than K-1	2)	حالمانان		
								homes, etc.)	rivate and comm	erciai b	ullain	gs,	
City (5)								Square Feet	# of Floors	В	ldg. A	ge	
Ridgewood	1700 sf	2		75	15.0								
County (6)				Cou	nty Code (	(7)(STA	TE USE ONLY)	Current Use (Pri	or if being demo	ished)			
Bergen								Residence					
Name of Monitoring Firm Hired		Owner	(8)	ASCM	No.	Nar	me of Abatem	ent Contractor (9)					
Guardian Contracting, I	nc.					G	Suardian Co	ntracting, Inc.					
Street Address						Stre	eet Address						
1889 Rte. 9, Unit 61						1	889 Route 9	, Unit 61					
City, State, Zip Code	00777						, State, Zip Co		10-00-3				
Toms River, New Jersey			1			-		New Jersey 08	755				
Project Manager for Monitoring Nicholas Fernicola	Firm		0.0000000	phone			ephone No.		License No.				
Start Date (10)	School	duled C		32-349		_	32-349-9932		00624				
12 / 02 / 16		12 /				A POST CONTRACTOR	ne of OSHA N	2.5.4.555.5.4.2					
Occupancy Status During Abat					10_		.M.S.L. Ana	іупсаі					
Facility Closed/Vacated Dur				mont			et Address						
Abatement Performed Outs	ide of Norma	l Facility	V Hour	s - Des	cribe		056 Stelton						
Time of Abatement:	AMP	M/	_PM-		AM		, State, Zip Co		\= 4				
Scope of Work (Check all that a	annly)					_ P	iscataway, i	New Jersey 088	354				
	2PP137						☐ Full Cont	ainment with Neg	ative Pressure				
≥3 sf or ≥3 If     ≥160 sf or ≥260 If		⊠ Re	novati molitic				☐ Mini-Enc	losure					
□ <u>-</u> 100 31 01 <u>-</u> 200 11		□ ре	HOHUC	)[]			☐ Glovebag	g Procedure mpted (*) and Nor	-Friable Procedi	ıre			
		1000	Locat					, ,,			atem	ent T	vne
Location of	-1 /A ONA)		lorma d Sole				Description o				_		
Asbestos-Containing Materi <u>TO BE ABATED</u>	ai (ACM)	Ma	intena	nce/	Asbe (i.e	estos (	Containing Mar mal systems i	terial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility		Cust	odial (12)	Staff?	(1.0	SI	urfacing, VAT,	or	SF or LF)	oval	=	nsd	Sur
(13)		Yes	No.	N/A		oth	er miscellane	ous)		2538		late	Ф
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pasement					asbesto	os pi	pe insulatio	n	50 If	$\boxtimes$			
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		П	П	П									
Name of Registered Waste Hau	ıler		N	JDEP V	Vaste	Cubi	ic Yards of	Name of Regist	ered Landfill			Ш	Щ
Guardian Contracting, In			Н	auler ID	No.	Was		T.R.R.F.	cieu Lailuilli				
City, State				20223		Disn	osal Date	City, State					
Toms River, New Jersey						Disp	osai Dale		Pennsylvania				
Completed By (Print or Type)	Title					L	Cianotura	Tallytown, I		- 1 -			
Nicholas Fernicola		roject	Mana	ager		Ī	-Signature			ate	1,	/	
		-,000		50.				1	4	111	1.11	L.	

CK#350

		(P	ursuant	to NJAC	8:60 and	112:120)		-11			12.1			
Date of Notification (1)			to the state of	Name of	Building (	Owner/O	perator (2)	202M	pn D	EC -	5 20	716		7
Agencies Notified	Type Notification		- Land	Street A							20117	5001	-	
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EPA DEP	Fi Amended		41.14	City, Sta	te, Zip Co	de	/ //	1.5	2-7-7-	1 /2				
DOL	Amendment		_ (		FR	CEER	0/01	12.7	0/10	0				
DOH	Emergency ( justification)	including	I	Name of	f Contact		-		Teleph	ione Nun	aber		-	
DON DCA	Cancellation		Company		500	78			an seed-					
band				FACI	LITY INFO	ORMATK	ON							
Name of Facility Where							Ty	pe of Facility	(4)					
GUZMA.	N 158811	EX'OL	_				10	School (K-	12)					
Street Address						*	and the same	Subchapte Other (i.e. etc.)	r 8 (Other ti private & co	han K-12 smmercia	) d build	lings,	home	35.
City (5)							So	uare Feet	# of Flo	2015	1 3	dg. A		
Eco	2 hold						Ì	1500	$\propto$		A-A-COUR	80	0	
County (6)	7219		1	County (	Code (7)		Ci	urrent Use (Pr		demolish	ed)			-
	nouth		i		USE ONLY	n		· · · · · · · · · · · · · · · · · · ·	25108					
Name of Monitoring Firm		Dwner (8)		ASCA	A No.		Name of /	Abatement Co					Mark San	
Walle of Montoning Carl	is a second any and according.	J 1111.01 10.5				e version an		ulation Co						
Street Address							Street Ad							
Street Madress						1		trose Rd						
City, State, Zip Code							City State	. Zip Code						
Gity, Grate, Zip Cous						A STATE OF THE STA		eck, New J	ersev					
Contract Manager for Man	itarina Firm			Telephor	na šán		Telephone			cense Na	3			
Project Manager for Mor	manng rom		t of water	, elehin	NO WELL	ž.	732 294		\$	0029	***			
Start Date (10)		Schoolste	od Co	polation	Date (11)		81	00116 542						
	1	12-			oate (11)	1	197	JOHA MONHO JOVIC (	ORSU	1506	5)			
12 - 13 - 12 Occupancy Status Durin				16									-	
guega							Ou con rece	dress 9 E	7					
Facility Closed/Vac	ated During Entire I					Ì								-
Other – Describe:	7 AM	2 /3/2	j	>			// State	o, Zip Code	of n.	TO	70	35		
							1100	10/101						-
Scope of Work (Check A	ur macripus)						1 1							
≥3 sf or ≥3 if		encountries.	enova					Full Containn		egative P	ressu	e		
≥160 sf or ≥260 N			emoli	1011				Mini-Enciosus Glovebag Pro						
					,			Non-Exempte		lon-Friab	le Pro		Security States	
		l is	Locat	ion	1				- Andrewson		and the second	Abata	emen pe	Ī
Locatio	n of		dorma		Ţ 2	Des	scription of		en edjester		14	1 1	ļuo I	1
Asbestos-Containing	Material (ACM)		d Sole Intena	-				erial (ACM)	Amo	0.00		and the same	回	lm
TO BE AB		D (5.252.70)	odial :		(i.e.		systems in sing, VAT, o		(Spe SF or		Ren	Re	cap	nele
(13)		440	(12)				riscellaneou		1	/	Removal	Repair	Encapsulate	Enclosure
		Yes	No	l MA							2		ate	9
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		and the same			-				and the second		And and a second		1	-
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Name of Registered Wa	ste Hauler			UDEP VI lauler ID		Cubic of Was				I Lanum				
Ace Insulation Co.,	4 8	2086		1 2		Chrins	Landfill							
City, State							al Date	City, Sta						
Colts Neck, New Jersey						7	-15-16	Eastor	PA					
Completed by		1 Title				A	ignature	. /	-1	Da	te			
Bree McGuire		Secre	etary	Treasu	лег		190 1	U.		12.	-3-	16		
					1	-V								

CX2929

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

UL 29	201	NOT	(Purs	uant to	F ASBEST NJAC 8:60	and 12:12	20)	1		DE	0 - 6	20	16	
ate of Notification (1)					uilding Owr		or (2)		line la	eri.	100 NO	30000	(T-170)	-
1/292016	CHeck # 29	29	-		emy Hilma	ann				ASBEST	OS C	ONIT	ROL	78
gencies Notified	Type Notification		St	reet Ado	iress						ICENS			
	Initial		Ci	tv. State	e, Zip Code									
DEP DOL	Amended Amendment #_				eld, NJ 07	7657				. N	la a n			-
	Emergency (in justification)	cluding		ame of (					Telep	phone Num	ber			
DOH DCA	Cancellation		J		Hilmann									
	, T-15-2	Diago (3)		FACIL	ITY INFORI	MATION	Ty	pe of Facility	(4)					
ame of Facility Where A Private Residence	batement is Taking	Place (3)						School (K	-12)					
Street Address									er 8 (Othe brivate &	r than K-12 commercia	.) al buildin	gs, ho	mes,	
fleet Address								etc.)		Floors		g. Age		-
City (5)							S	quare Feet	# 01	FIOOIS	Dic	9. 7.9		
Ridgefield, NJ					1. (7)		-	urrent Use (P	rior if beir	ng demolish	ned)			
County (6)				County C STATE U	ise only)			Residence						
BERGEN		humor (8)		ASCM	No.			Abatement C						
Name of Monitoring Firm	Hirea by Building O	Wilei (0)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				rvices Corp	ooration					_
Street Address								dress						
Sileer Address						1 22		oth Street						
City, State, Zip Code						Cit	ty, Sta	te, Zip Code nberg, N 07	7093					
			- 1 -	Telepho	no No			ne No.		License N	No.			
Project Manager for Mor	nitoring Firm			releptio	ne no.			95-1700		01074			5	
0: 10-1- (10)		Scheduled	Com	npletion	Date (11)			f OSHA Monit	tor					
Start Date (10) 12/10/2016		12/12/2			0000 80			as above						_
Occupancy Status Durin	ng Abatement (Chec	k Only One	e)			St	treet A	ddress						
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire R med Outside of Norm Starting 8 AM	Period of Al nal Facility	batem Hours	nent s		C	ate, Zip Code							
Scope of Work (Check											Dressu	.0		
≥3 sf or ≥3 lf		Secretaria .	enova				×	Mini-Enclo	sure	th Negative	Pressui	E		
≥160 sf or ≥260 lf			emoli	tion				Oleveben	Drocadure	e nd Non-Fria	able Pro	cedur	е	
					1		<u> </u>	NOII-EXCIT	pied ( ) a	Tital 1 and 1		Abate	ement	
			Locat			Dagge	ription	of				T	pe	
Locati	on of	Use	d Sole	ely by	Asbes	tos Contair	nina M	laterial (ACM)	6.5	Amount (Specify	D	_	Enc	En
Asbestos-Containir TO BE A	BATED			ance/ Staff?	(i.e.	thermal sy surfacin	ystems na. VA	insulation, T, or		SF or LF)	Remova	Repair	Encapsulate	Enclosure
In Fa (1:			(12)	)		other mis	scellan	eous)			Val	=	ılate	ure
	-,	Yes	No	N/A								_		-
Base	ment		Х		Pip	e Insulat	tion (v	wrapping)		240 LF		_	Х	
Dase													_	
	-												1	
		_												
	Marka Haudar		_	NJDEP	Waste	Cubic Y				istered Lan				
Name of Registered V		Hauler	ID No.	of Wast	te	Cu	mberlar	nd Landfil	1					
Freehold Carting				15939	,	Disposa	al Date		, State					
	tbd					No	wburg,	PA						
City, State						tba		IVE	wbarg,		_			
City, State Freehold, NJ Completed by		Title					ignatur	e (Al)	uas		Date 11/29	1/201	6	

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

7)-	E	G	E	Print Form
		DEC	_	6 2016

		30 000000					الما أما			0	201	10
Date of Notification (1) DEC. 2, 2016		Name of Building Owner/Operator (2) AMBOY BANK  Street Address  ASBESTOS CONTRO										201
Agencies Notified Type Notification			et Address BOX 331						LICE			TUL
EPA DEP DOL Initial Amended Amendment		City	State, Zip Co									
DOL Amendment:		-	ne of Contact	, NJ 08720			Talanh	one Num	her			
DOH justification)  DCA Cancellation			ANK DUGA	٨N			1 Telebri	One rum		_		
		F	ACILITY INFO	RMATION	-	(F W. /						
Name of Facility Where Abatement is Taking GARAGE OF AMBOY BANK PRO						of Facility (4						
Street Address 10 FRIENDSHIP LANE					B	School (K-12 Subchapter Other (i.e. p	8 (Other th	nan K-12 mmercia	) al build	lings,	home	s,
City (5) WEST LONG BRANCH, NJ 07764						etc.) are Feet SF	# of Flo	oors		ldg. A	ge YRS.	
County (6) MONMOUTH			nty Code (7) TE USE ONLY)			ent Use (Prio		demolish				
Name of Monitoring Firm Hired by Building C N/A	Owner (8)	A	SCM No.	Name Finis	of Aba shing	atement Con Touch Ast	tractor (9) bestos A	bateme	ent C	orp.,	Inc.	
Street Address				Stree	Addre							
City, State, Zip Code				City, S Wes	State, Z	zip Code g Branch,	NJ 0776	64				
Project Manager for Monitoring Firm N/A		Tele	phone No.		hone N		993500	cense No	Э.			
Start Date (10) DEC. 12, 2016	Scheduled DEC. 16		tion Date (11)	Name N/A		HA Monitor		-				
Occupancy Status During Abatement (Chec	k Only One)			Stree	Addre	ess						-
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of Aba nal Facility H	atement lours		City, S	State, Z	Zip Code						-
Scope of Work (Check All That Apply)												_
≥3 sf or ≥3 If ≥160 sf or ≥260 If		novation molition		F	Mi	III Containme	)	egative P	ressu	re		
						on-Exempted		on-Friab		The state of the state of	CONTROL SUG	
		ocation rmally									ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Maint Custod	Solely by tenance/ dial Staff (12)	(i.e.	Description tos Containing I thermal system surfacing, V other miscella	Materia ns insul AT, or	ation,	Amor (Spec SF or	cify	Removal	Repair	Encapsulate	Enclosure
	Yes	No N	I/A	0050500	215111	_	500	0.5			CD	
EXTERIOR GARAGE		3	× A	SBESTOS	SIDIN	G	500	SF	X			
Name of Registered Waste Hauler Finishing Touch Asbestos Abatemen	nt Corp., I	Llaude	EP Waste er ID No.	Cubic Yards of Waste 5 CY			Registered _ANDFIL					
City, State WEST LONG BRANCH, NJ 07764				Disposal Date 12/16/16	9	City, State	e TOWN, I	PA				
Completed by JOSEPH P. MILLER	Title PRESI	IDENT		Sigratur	eh P	Mills		Da 12	te 2/2/1	6		
	101											



	E C		rint Form	
The second secon	DEC	- 6	2016	The second secon
LA		S CC	NTROL NG	8

Date of Notification (1) 12/02/16	Name of Building Owner/Operator (2) PRODIGY CONSTRUCTION														
Agencies Notified	Type Notification		100	Street Ad 950 Ea	ddress ast Gran	d St.					AS	BEST		CON	
DEP X DOL	Initial Amended Amendment			2000	te, Zip Co BETH N										
≥ DOH DCA	Emergency justification) Cancellation	10 (14 14 14 14 14 14 14 14 14 14 14 14 14 1	100		Contact					Tele	ephone N	umber			
	1-			FACII	LITY INFO	RMATI									
Name of Facility Where	Abatement is Takir	ng Place (3)					I	-	of Facility (4 school (K-1)	550 1800					
Street Address 1141 EAST JERSE	EY ST							×	Subchapter other (i.e. potc.)	8 (Oth			dings	, home	es,
City (5) ELIZABETH							5		e Feet	# 01	Floors		Bldg. /	Age	
County (6) UNION	_			County C	Code (7) JSE ONLY)			Currer	nt Use (Pric	r if bei	ng demol	ished)			
Name of Monitoring Fire	m Hired by Building	Owner (8)		ASCM	l No.				ement Con PROFE						
Street Address							Street A		s OOVE CC	URT					
City, State, Zip Code							City, Sta		Code	3701					
Project Manager for Mo	T	Telephor	ne No.		Telephor				License 1200	No.					
Start Date (10) 12/12/16	\$100 PM (100 PM 100 PM								A Monitor PROFE	SSIO	NALS				
Occupancy Status Durin	ng Abatement (Che	ck Only One	)				Street A								
Facility Closed/Vac	cated During Entire	Period of Al	atem	ent		OVE CO	URT								
X Other – Describe:		mal Facility I	Hours	City, State, Zip Code LAKEWOOD, NJ 08701									2		
Scope of Work (Check	All That Apply)						EZ.								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	enova emolit				×	Min Glo	Containme i-Enclosure vebag Prod i-Exempted	edure				Iro.	
		1						1401	i-Lxemptec	( ) all	u Non-i n	able i i		temen	
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Asbestos-Containin TO BE AB In Fac (13	g Material (ACM) BATED ility		Sole ntenar odial S (12)	nce/		tos Con therma surfa	taining Ma I systems i acing, VAT, miscellane	iterial insula , or		(8	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										-	
INTER	IOR						VAT			13	800 SF	Х	-	-	
								1		x	-				
													1		
Name of Registered Wa	H	JDEP W lauler ID		Cubic of Wa	Yards aste		Name of	Registe	ered Land	Ifill					
City, State NEWARK, NJ				04509 5 City, State 12/13/16 BETHLEH					л РА	0.00-i					
Completed by JOSEPH PERLSTE	EIN	Title	ER				Signature		11th			Date			$\neg$
	IR .														

## State of New Jersey

	N	IOTIFIC	CATI	ON O	F ASBE	STOS ABATI 8:60 and 5:16	EMENT )	DI DEC	-6	2016		By a second second	
Date of Notification (1)	30 / 16		N			Owner/Operator (2 easing Specialis		a.	308	28	5		
Agencies Notified  EPA	Type Notification  ☑ Initial  ☐ Amended				dress adison A e, Zip Co			ASBEST(	OS COI DENSIN		OL 8	ž.	
☑ DOLWD	Amendment #_					NJ 08753							
□ DCA	☐ Emergency (inc	luding	N		Contact	10 001 00		Telephone Numb	er				
(NJAC 5:23-8)	justification)  Cancellation		1,		antora			1					
	Cancellation			200		ORMATION							
		Dlane /2	\	FACIL	_111 1111	ORIVIATION	Type of Facility (	4)					
Name of Facility Where	Abatement is Taking	Place (3	)				☐ School (K-12)	)					
Residence							Subchapter 8	(Other than K-12)	) rcial build	inas.			
Street Address							homes, etc.)	ivate and comme	Ciai bana	go,			
							Square Feet	# of Floors	Bldg	. Age			
City (5)							1800	1	65	5			
Toms River				County	Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)				
County (6)					( //		Residence						
Ocean  Name of Monitoring Fire	m Hired by Building C	wner (8)	IA	SCM N	0.	Name of Abatem	ent Contractor (9)						
	III rilled by ballaring c	, Willon (0)	to Cine		3//	Guardian Contracting, Inc.							
N/A						Street Address							
Street Address						1889 Route 9	9, Unit 61	V					
City, State, Zip Code						City, State, Zip C		account secret					
City, State, Zip Code						Toms River,	New Jersey 08						
Project Manager for Mo	onitorina Firm		Telep	hone N	0.	Telephone No.		License No.					
1 Toject Manager Ter	3					732-349-993		00624					
Start Date (10)  12 / 12		duled Co				Name of OSHA E.M.S.L. Ana							
Occupancy Status Dur		k only or	ne)			Street Address							
▼ Facility Closed/Vac	ated During Entire Pe	riod of A	bater	nent		1056 Steltor					-12-	_	
☐ Abatement Perform	ned Outside of Norma	I Facility	Hours	s - Desc	ribe	City, State, Zip 0		2054					
Time of Abatement	::P	IVI/	_PIVI-		ZIVI	Piscataway,	New Jersey 08	3854				-	
Scope of Work (Check  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	( all that apply)	☐ Rer	novati	on on		☐ Mini-Er	an Procedure	egative Pressure on-Friable Proced	lure				
						M Moll-Ex	kempted ( ) and re		Aba	ateme	ent Ty	/pe	
Asbestos-Containi TO BE A	ion of ing Material (ACM) ABATED acility	Use Ma	Locat lorma d Sole intena odial (12)	lly ely by ince/ Staff?	Asbe (i.e	Description estos Containing M e., thermal system surfacing, VA other miscella	Material (ACM) as insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
(1	3)	Yes	No	N/A			50 545 60 50 50 50 50 50 50 50 50 50 50 50 50 50						
					asbest	tos siding		1800 sf					
exterior				+=-									
										П	П	П	
								1					
Name of Registered V				NJDEP Hauler I	D No.	Cubic Yards of Waste	T.R.R.F.	gistered Landfill					
City, State Toms River, Nev						Disposal Date 12/14/16	City, State Tullytow	n, Pennsylvani					
Completed By (Print		itle				Signature			Date				

ASB-41 JAN 13

Completed By (Print or Type)

Nicholas Fernicola

Project Manager

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

		(Pursuant to NJAC 8:60 and 5:16)							CHIEFANA Asses							
Date of Notification (1)				1	Name	of Building	g Own	er/Operator (				EC -	6	2016	1	
12 /	1 /	16			Disa	antis Co	ntrac	ting, LLC			and the same	7	008	15	3	
Agencies Notified	Type Notifica	ation		3	Street	Address					1	ASBES				OL 8
⊠ EPA					313	Halyard	Road	i			L		LICE	VSIN	G	
□ DOLWD     □ DOH     □	Amended Amendme			(	City, S	tate, Zip C	Code									
□ DCA	Emergen		lina		Ortl	ey Beac	h, NJ	08751								
(NJAC 5:23-8)	justification		5	1	Name	of Contac	t				Те	lephone Num	ber			
	☐ Cancellat	tion			Fra	nk Disan	ntis									
					FAC	CILITY IN	NFOR	MATION								
Name of Facility Where	Abatement is 7	Faking Pla	ace (3	)						pe of Facility						
Residence										School (K-12 Subchapter		harthan K 1	٥١			
Street Address										Other (i.e., p	rivat			ilding	S,	
City (5)									So	quare Feet		of Floors	BI	dg. A	ge	
Lavallette									-	900 sf		1		65		
County (6)					Coun	ty Code (7	7)(STAT	E USE ONLY)	Cı	urrent Use (Pr	rior if	being demoli	shed)			
Ocean										Residence						
Name of Monitoring Firm	Hired by Build	ding Own	er (8)	A	SCM	No.	Nam	e of Abatem	nent (	Contractor (9)	)					
N/A							G	uardian Co	ontr	acting, Inc.						
Street Address							Stree	et Address								
			1889 Route 9, Unit 61													
City, State, Zip Code							State, Zip C									
						263			Nev	w Jersey 08						
Project Manager for Mon	itoring Firm		1	ГеІері	hone	No.	0.0000000000000000000000000000000000000	phone No.			L	icense No.				
							100.000	2-349-9932		.,		00624				
Start Date (10)		Schedule					2000	e of OSHA	70.							
//						16		M.S.L. Ana	aiyti	cai						
Occupancy Status During							200000000000000000000000000000000000000	et Address								
☐ Abatement Performed						cribe	10.000.00	56 Stelton	-							
Time of Abatement:							2000	State, Zip C		w Jersey 08	0054					
Scope of Work (Check al							PI	Scalaway,	Nev	w Jersey ud	1004					
Scope of Work (Check at	i tilat apply)							☐ Full Con	ntain	ment with Ne	gativ	e Pressure				
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>			Reno					☐ Mini-End								
△ ≥100 SI 0I ≥200 II			Demi	JIILIOII					-	ted (*) and No	on-Fr	iable Proced	ıre			
				ocatio									Ab	atem	ent T	уре
Location			Nor Jsed :	rmally Solely				Description					R	Re	щ	m
Asbestos-Containing TO BE ABA		11	Maint			Asbe (i.e	estos C e ther	ontaining Ma mal systems	iateri s insi	al (ACIVI) ulation.		Amount (Specify	Removal	Repair	cap	Enclosure
IN Facili		0	ustoc	lial St 12)	taff?		SU	irfacing, VAT	T, or			SF or LF)	val	7	Encapsulate	sure
(13)		V		No I	N/A	1	oth	er miscellane	eous	5)					te	3333
exterior			7776			asbesto	os sid	ling				850 sf				
			1   [				-						Tn	П	П	П
	-	27								10						
			] . [				_							Ш	Ш	Ш
Name of Registered Waste Hauler Guardian Contracting, Inc.						Naste D No.	Cubi Was	c Yards of te	1	Name of Regi T.R.R.F.	stere	d Landfill				
						3	3 Dian	and Data	-							
City, State Toms River, New Je	ersev							osal Date /14/16	1	City, State  Tullytown	Po	nnşylvania				
	THE PERSON OF	Title					12			A	, , ,	/	ate I			
Completed By (Print or Type) Title  Nicholas Fernicola Project Man							o7-0	Signature		/	4		12	1/	1.	

<b>P</b>	

2016 04:54PM NJ Asbestos	Contro	1 60	9,033,	0664	Pe	age i					
12/81/2016 13:28							HO.418	802	G	E	
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Date of Notification (1)  12 / .1 /	18		FA2 65 55 50		g Owner/Operator	0.0000	DE	ASB			CONT
Agencies Notified Type Notificati			Stree	Address				/	h-/	- NA	- 1
☑ EPA ☑ Initial ☑ Amended				Warwic State, Zip (			WALFEE	_(			
NOD Semester NOD No. 1 NOD NO. 1 NO		-			KB 02063	1					
(NJAC 8:23-8) justification	1	.70	Name	of Cantac	<del>1</del>		Telephone Nu	mbe/		~~	
Cancallatio	ri 			Grome		THI I					
Lime of Facility Where Abatement is Tal	- B !	- (D)	FA	CILITY IN	PORMATION	73 75					
Starling High School	ing Plac	= (J)				Type of Facility  School (K-1	V105				
lisel Adultan		1	-			☐ Subchapter	8 (Other than K-1	2)			
801 Preston Avenue						homes, oto	private and comm .)	ercial b	Milali	달싹,	
(g) W						Square Feet	# of Floors	B	ldg. /	99	
Somerdale ounly (6)		/-	Cour	ity Code (7	KSTATE USE ONLY)	10,000	rier i baing dema	R Paul	80		
Camden			200	) 2520 [1	"	5chool	. ST SHININ MEIRIN	( <del></del>			
serve of Monitoring Firm Hired by Buildin	g Owner	(B)	ASGM	No.	Næme of Absterna	ent Contractor (9	)				
Environmental Design, Inc.						ormental, LLC	·				
treel Address 5434 King Avenue, Suite 101					Street Address 613 Cutter Av	en n ( en					
ly, Store, Zip Code					City, State, Zip Co				-		
Pennasukon, NJ 08109					Maple Shade						
reject Manager for Munituring Firm		Tole	phone	Ng,	Tolaphone No.	137	Lice nee No.		_		
Tim Gromen			56-819	100	868-755-0099		00842				
7 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12			The state of the s	Name of OSHA Munitur EMSL Analytical, Inc.						
scupency Status During Abstement (Chi				<u> </u>	Street Address						~-
Facility Closed/Vacated During Entre	arlod of	Abata			200 Route 13	0 North					
Abstement Performed Outside of Norw Time of Abstement:AM					City, Stale. Zip Co						
cape of Work (Check all that apply)					Cinnaminson	' M2 08011	-W 1 1		-		$\rightarrow$
≥3 af or ≥3 ft ≥160 af or ≥250 lf		inovati imolitic			Mini-Encl     Clovebag	Procedure	galive Prossurs on-Frisble Procedu	JY9			
141		Local				<del></del>		-7	atem	ent T	ура
Lecation of Asbestos-Containing Material (ACM) TO BE ARATED IN Facility (13)	Ma	Norma d Solo intens todist ( (12)	ly by		Description of the Containing Market in the mall systems is our sound out of the containing the	lenal (ACM) naulation, or	Amount (Specify SF or LF)	Removal	Repair	Елсарыдан	Eradosare
uditorium	Yes	No X	N/A	Filanu	oints on Roof D	raine	1 LF			_	
ock Well of Stage		Ø		Elbow J			1 LF	×	H		
ove the Biage		M			olnta (Wrap and	Cutt	3 LF			片	
nas dia grafia				PIDOM 1	Outra (salah alio		9 LF	4	1 1		
mp of Registered Weste Haulpr Freehold Cartege	,,	1	DEP V	No.	Cubic Yards of Wasts	Name of Regis	stered Landfill and County Land	481)) -	Ш	Ш	브
y, State			15939	, ,-	Olaposal Date	City, State					-
reehold, NJ					12/8/2016	Newburg,	PA				
	lle		- Links	<i></i> .	Bignetoro	50		218		-	
Christina Lynch	Vice Pr	eslde	nt of C	peration	· (MA	0e) > <	> 16	21	16		

ABB-41

<sup>\*</sup> Do not use this form for asked solution and the best lon of

17 7 11 19					NJAC 6:00 and					<u> </u>	1-1-	100		
Date of Notification (1) 12-02-2014			1000000	ame of B	uilding Owner/O	perator	(2)							
Agencies Notified	Type Notification		St	reet Add		et			+ 0	T DE	. U -		Llu	
× EPA × DEP × DOL	Initial Amended Amendment #		Ci	ty, State	, Zip Code N NJ 07030					L				
X DOH	Emergency (ir justification)  Cancellation		Na	ame of C					Teleph	one Numb	ner'			
☐ DCA	Cancellation				TY INFORMATI	ON								
Name of Facility Where	Abatement is Taking	Place (3)		TAOILI				Facility (4) hool (K-12)						
Commercial							F SII	hchanter 8	(Other t	han K-12)				
Street Address 227 Washington S	Street						× Ott	ner (i.e. pri :.)	vate & co	ommercia	buildi			,
City (5) Hoboken NJ 0703	30						Square n/A	Feet	# of FI	oors	N/	g. Ag A	е	
County (6)	50			ounty Co	ode (7) SE ONLY)		Current	Use (Prior	if being	demolishe	ed)			
Hudson		(0)		ASCM		Name		ment Contr	ractor (9)	)				
Name of Monitoring Fin Bioterra Slution	rm Hired by Building C	owner (8)		ASCIVI	No.	Ama	x Conti	racting L						
Street Address 1130 W Chestnut	· St						Address BOX 73							2002
City, State, Zip Code							State, Zip							
Union NJ 07083				18	*			Park NJ (		icense No	2			
Project Manager for M Rick Eustaquio	lonitoring Firm			elephon 973-49	e No. 4-3762	F-160.00 40.00 50	hone No. -692-62			1266	J.			
Start Date (10)		Scheduled	Com	pletion D	ate (11)		of OSHA						*	
12-19-2016		12-24-2						racting L	LC					
Occupancy Status Du							t Address BOX 73							
X Facility Closed/V Abatement Perfo	acated During Entire Formed Outside of Norm	Period of At nal Facility I	dateme Hours	ent			State, Zip		07424					
Scope of Work (Chec				Woodland Park NJ 07424										
≥3 sf or ≥3 lf  ≥160 sf or ≥260			enovat emoliti				× Glov	Containme -Enclosure /ebag Proc	edure				20	
							× Non	-Exempted	(*) and	Non-Frian	ole Prod	Abate		
		100	Location or mall				,					Ту		
Asbestos-Contain <u>TO BE</u> In F	tion of ling Material (ACM) <u>ABATED</u> acility 13)	Used Mair	d Solel ntenar odial S (12)	ly by nce/	Asbestos Co (i.e. therm sur	Description Intaining Ital syster Ifacing, V Ir miscella	Material ns insula 'AT, or	(ACM) tion,	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Firet	Floor			x		VAT			180	00 SF	Х			
	ement		X	pip	e insu	lation		50	LF .	Х				
	0111011													
			1.	11000 14	/aste Cub	nic Varde		Name of	Register	ed Landfi	II .			
Name of Registered Amax Contracting			NJDEP Waste Hauler ID No.  0036184  Cubic Yards of Waste				N.S.	Grows						
City, State				03618	Dis	posal Da -28-201		City, Stat						
Woodland Park N			12-	Signati	//	IVIOLIS	<u> </u>	D	ate					
Completed by Tome Maslarkov	roject Manager Signature 12-02-2016							<u> </u>						



Date of Notification (1) 12-02-2014	Name of Building Owner/Operator (2)  Duncan Large  DEC - 5 2016									6					
Agencies Notified  Type Notification  X EPA X DEP X DEP X DOL  Amendment #		C		e, Zip Coo									×		2
X DOL Amendment # Emergency (i justification) DCA Cancellation		N	lame of	idge NJ Contact n Large	07028	8			Tele	enhone N	Numb	er			
			FACIL	ITY INFO	RMATI	ON								1000-0	
Name of Facility Where Abatement is Taking PRivate Dwelling Street Address	Place (3)			Ž.			Ty	pe of Facility ( School (K-1 Subchapter Other (i.e. p	2) 8 (Othe	er than K	(-12)	huild	inas	home	Q
City (5) Glen Ridge NJ 07028							Sq n/	etc.) uare Feet A	# of N/A	Floors		BI	dg. A		
County (6) Hudson			County C STATE U	ode (7) SE ONLY)				rrent Use (Pri rivate Dwel		ng demo	lishe	d)			
Name of Monitoring Firm Hired by Building C Bioterra Slution	wner (8)		ASCM	No.				batement Cor Contracting		(9)					
Street Address 1130 W Chestnut St						Street	Add				1000.00				
City, State, Zip Code Union NJ 07083						City, S	state	, Zip Code nd Park NJ	0742	4					
Project Manager for Monitoring Firm Rick Eustaquio			elephor	ne No. 14-3762		Teleph 973-		No. 2-6298		License 01266					
Start Date (10) 12-17-2016	Scheduled		pletion [	Date (11)		1.700.700.000		OSHA Monitor Contracting							
Occupancy Status During Abatement (Checi	Only One	<del>)</del>				Street									
Facility Closed/Vacated During Entire F															
Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours			_	100000000000000000000000000000000000000		a, Zip Code and Park No	0742	4					
Scope of Work (Check All That Apply)						-	_								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		enovat emoliti	0.000			×	<u> </u>	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure					e	
	le l	ocatio					_	Non-Exemple	u ( ) un	0 140111	labit		Abate	ement	
Location of	N	ormall	y		De	scription	n of						Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair Custo	Solel ntenan odial S (12)	taff?		thermal surfa		s ins		. (5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A												
Crawlspace		Х		pipe	insula	ation	n	6	60 LF		Х				
Name of Registered Waste Hauler	I N.	JDEP W	aste	Cubic	Yards		Name of	Registe	ered Lan	dfill	-				
Amax Contracting LLC	Ha	auler ID 036184	No.	of Wa			Grows								
City, State Woodland Park NJ 07424		Disposal Date 12-28-2016				Øity, Sta Morris		A							
Completed by Tome Maslarkov	ct Ma	nager			Signature	e 1	Hlen	2		Date 12		2016	3		



NX #1573

									(				1 :	_			
Date of Notification (1)		Name of Building Owner/Operator (2) Oleg Chernenko															
Agencies Notified	Type Notification			Street Address													
EPA DEP DOL	Initial Amended Amendment			City, State, Zip Code Piscataway, New Jersey 08854											72		
▼ DOH DCA	Emergency justification) Cancellation				Contact Chernen	ko		Telephone Number									
				FACI	LITY INF	ORMATIC	ON							1	-		
Name of Facility Where Residence Street Address	Abatement is Takir	ng Place (3	3)	<u> </u>					e of Facility ( School (K-1 Subchapter	2) 8 (Oth							
								×	Other (i.e. petc.)						ies,		
City (5) Piscataway								Squa 1,42	are Feet 24	# of 2	f Floors		Bidg. A Built		320		
County (6) Middlesex				County (	Code (7) JSE ONLY	)			ent Use (Pri sidence	or if bei	ng demol	ished)					
Name of Monitoring Firm	m Hired by Building	Owner (8)		ASCN	No.				atement Cor Contracting								
Street Address				1			Street 205 l		ess e 46, Suite	e 7A							
City, State, Zip Code							The state of the s		Zip Code NJ 07512								
Project Manager for Mo	nitoring Firm			Telepho	ne No.		Telephone No. 973-333-9176			License No. 01232							
Start Date (10) 12/11/2016		Schedule 12/12/2		mpletion I	Name of OSHA Monitor Envirovision Consultants, Inc.												
Occupancy Status Durin	ng Abatement (Chec	k Only Or	ne)	100000000000000000000000000000000000000					Street Address 20-21 Wagaraw Rd., Bldg. 35 E								
Abatement Perform Other – Describe:	cated During Entire ned Outside of Norr	Period of Anal Facility	Abater Hour	irs City, S					State, Zip Code ir Lawn, NJ 07410								
							ı alı	Lawi	1, 145 074	10		- War-	-				
Scope of Work (Check A	чі тпас Арріу)	Name of the last o	Renova Demoli				×	M Gl	ull Containme	e cedure				0			
		lo	Locat	ion			<u> </u>	₫ INC	on-Exempted	1 ( ) and	u Non-File	able Fit	OHON - 1000	emen	t		
Locatio Asbestos-Containing <u>TO BE AB</u> In Faci (13)	Norma ed Sole intena todial (12)	lly ely by nce/		tos Conta thermal surfac		Materia s insul T, or	lation,	Amount (Specify SF or LF)		Remova	Repair	e Encapsulate	Enclosure				
		Yes	No	N/A										æ			
Basem	nent		X		As	bestos	Pipe II	Insulation 60			0 LF	X					
		-		-													
														-			
Name of Registered Wa	ste Hauler		4.4323	NJDEP W		Cubic `			Name of	Registe	red Land	fill	-		-		
Unicorn Contracting	10000	Hauler ID No. of Waste 3				Tullytown Resource Recovery Facility					ty						
City, State Totowa, New Jersey	У					Dispos TBD	al Date		City, State		\						
Completed by Dimo Golcev		Title Gene	eral N	fanagei		Si	ignature	/	11	1		Date 12/1/20	016				
ASB-41 (R-06-08)						0	* Do no	ot use	this form for	asbest	os licensı	ure exer	npted	activi	ties.		

00#1133

Date of Notification (1)			Building Owner/0				Salahini Garan	-				
11/30/20/6		TOY	CHRI	STI	an te	11oush	P					
Agencies Notified Type Notification	n	Street Ad			18		. 4			-		
₩ EPA		70 West. Ivy Lane. City, State, Zip Code										
DEP Amended												
DOL Amendme	y (including											
DOH justification	1)	Name of	Contact	Terrorian Const	250	Telephone Num	DCI	-	- 40	.		
DCA Cancellation	on	1966	LITY INFORMAT	NUN	9				_ <u>9</u> 3			
Name of Facility Where Abatement is Tal	ing Place (3)	FAUI	LIIT INFORMAT	ION	Type of Facility (	4)						
Private	(-)				School (K-1	2)						
Street Address					Subchanter	8 (Other than K-12	)					
					Other (i.e. p	rivate & commercia	l build	ings,	home	s,		
City (5)					Square Feet	# of Floors	BI	dg. A	ge			
	7. 0763	5.1			2,200	2		98				
Englewood No	3. 700	County (	Code (7)			or if being demolish	ed)					
		(STATE	USE ONLY)		N	1/4						
Name of Monitoring Firm Hired by Buildin	g Owner (8)	ASCN	No.	Name	of Abatement Cor	ntractor (9)						
				No	HLE. 3	Environ	ent	al	LL	C.		
Street Address					Address							
				111	26- 51.	ST.						
City, State, Zip Code		· ·		City, S	State, Zip Code							
-				No	orth Be	License N	2.	FO	1-10	7		
Project Manager for Monitoring Firm		Telepho	ne No.									
				1		12 01	300	$\bigcirc$				
Start Date (10)	Scheduled C				of OSHA Monitor							
12/01/2016	42/02/	2016			I RIS Environmental Lab							
Occupancy Status During Abatement (Ch	eck Only One)				t Address							
Facility Closed/Vacated During Entire Abatement Performed Outside of No.	e Period of Abat	tement			33. RT. 2	12.						
Abatement Performed Outside of No	smal Facility Ho	urs			State, Zip Code							
Other – Describe:				UV	NON N	1 Z .						
Scope of Work (Check All That Apply)				F	7							
≥3 sf or ≥3 lf	Total Control of the	ovation		5	Full Containm Mini-Enclosur	ent with Negative P	ressu	re				
≥160 sf or ≥260 lf	∐ Dem	olition			Glovebag Pro	cedure						
					Non-Exempte	d (*) and Non-Friab	1					
	Is Lo	cation							ement pe			
Location of		nally lolely by		escription			-					
Asbestos-Containing Material (ACM)		enance/			Material (ACM) ns insulation,	Amount (Specify	Z Z	_	Enc	四		
TO BE ABATED In Facility		al Staff?	surf	acing, V	AT, or	SF or LF)	Remova	Repair	Encapsulate	Enclosure		
(13)	(1	(2)	other	miscella	ineous)		oval	air	ulat	sure		
	Yes N	lo N/A							О			
B 050- 1	3	<	Don	Tos	sulation	18 Lf.	X					
Basement	-	-	FIPE	11/12	SOIATION	10 -7-	1					
							+-	-				
							-					
Name of Registered Waste Hauler		NJDEP V		c Yards	Name of	Registered Landfill						
Tri-state - Associ	- T	Hauler ID		aste TBD	Hin	erva En	ter	04	Sp -	TIME		
City, State	- TNC	199	O	osal Dat	e City, Sta	te	9					
Bronx . Ny.			1 1	BD	1 NO C	une's hora	0	Hic	)			
	Title		1	Signatur	re /	yne's burg	ate	,				
carlos Esquivel		W it	anager	12	mother	4	130	0/2	10/6	5		
	T	1	Janua ger 1	7	1-11		1					
ASB-41 (2-68-68)				*Do	hot use this form for	or asbestos licensur	e exer	mpted	activi	ities.		

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

CHECU # 384

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		(*		1	E RIIII	and a series		S. Land	<u> </u>			
tion (1)				1 10	dy Gilardi & Dai	iel Simon			DE	P 6	00	-
Notification (1) 12/01/16				St	reet Address						ZUN	)
ies Notified	Notification	Type		C	ity, StateZip Co	<u>de</u>						
	x Initial Noti	tication		TA!	forristown NJ		Te	lenhone	Number			
A	O Amended O Emerger	ncy Notific	cation	1	lame of Contact; Seorge Strother		1					
A DL	O Cancelle	ed		4.5								
P			FA	CILITY INFO	RMATION  Type of Facility (4)	)						
H	Taking Place	(3)			VDC OI .		-12)					
e of Facility Where Abatement is	Taking					(other man is	,	hom	nes etc.			1
se					X Others (i.e. pri	rate & commer	cial buildi	ings, non	1001 -			1
et Address					Sf 3500 Floo Current Use (price	rs 3 .Age;60	olished):					1
Co. a		Coun	ty Code	(7)	Current Use (pri	)[ II Deling				4		-
(5) County (6)	1	(State	e Use O	nlv)								1
ristown NJ	V2				Name of Contra	ctor (9)						
me of Monitoring Firm Hired by B	ldg. Owner (8	ASC	M No.		BL Contracting	,1110						
me of Monitoring Fifth Three 29					Street Address							
N/A					5 Marguerite L	ane						
eet Address					City State, Zip	Code						_
					Tawaco 0708			License	e Number			
ty, State, Zip Cod	1985				Talenhone Nu	mber		01265				
rojec Manager for Monitoring Fin	m Telepho	one Numi	ber		973-901-0153							
rojec Manager for Metric				114	Name of OSE	A Monitor						
					Name of Co.							
	Sched	uled Com	pletion	Date (11)	BL Contracti	ng Inc.						
scheduled Start Date (10)	Sched 12/24/	uled Com 16	pletion	Date (11)	BL Contract	ng inc.						
Scheduled Start Date (10) 12/16/16	12/24/	16			BL Contracti	ng inc.						
Scheduled Start Date (10) 12/16/16	nent (Check o	only one)	atement		Street Addre	SS Lane						
Scheduled Start Date (10) 12/16/16	nent (Check o	only one)	atement		Street Addres 5 Marguerite City, State, 2	SS Lane						
Occupancy Status During Abatem  Facility Closed/Vacated During Abatem  Abatement Performed Outside	nent (Check o	only one)	atement		Street Addre	SS Lane						
Scheduled Start Date (10) 12/16/16  Decupancy Status During Abatem  Facility Closed/Vacated Duri  Abatement Performed Outside Describe	nent (Check o	only one)	atement		Street Addres 5 Marguerite City, State, 2	ES Lane Cip Code				Drocedul	ie.	
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Decupancy Status During Abatem  Facility Closed/Vacated During Abatement Performed Outside Describe  Other – Describe:  Source of Work (Check all that a	nent (Check or ing Entire Per e of Normal Fa	only one)	atement	⊠ Renova	Street Address 5 Marquerite City. State. 7 Towaco, N.	ing inc.  Lane  Lane  O7082  X Nor  Mir  Glove	ni-Enclosi e bag Pro II Contain	cedure ment with	n Negative Abater	Pressure	<u>e</u>	
Scheduled Start Date (10) 12/16/16  Decupancy Status During Abatem  Facility Closed/Vacated Duri  Abatement Performed Outside Describe  □Other – Describe:	nent (Check of ing Entire Per e of Normal Fa	only one) iod of Ab acility Hor	atement	⊠ Renova	Street Address 5 Marquerite City. State. 7 Towaco, N.	Lane Lip Code  1 07082  X Note of Glove Full Full Paining Materia	bag Pro Contain	ment with mount Specify SI	n Negative Abater	Pressure	<u>e</u>	ncl
Scheduled Start Date (10)  12/16/16  Occupancy Status During Abatem  Facility Closed/Vacated During Abatem  Abatement Performed Outside  Describe  Other – Describe:  Source of Work (Check all that a second secon	nent (Check cong Entire Per e of Normal Fa	only one) iod of Ab acility Hot	atementurs -	⊠ Renova □ Demoli	Street Address 5 Marquerite City. State. 2 Towaco, N. ation of Asbestos Con	Lane Lip Code  O7082  X Nor Mir Glove Fu  Taining Materia Insulation,	bag Pro Contain	cedure ment with	n Negative Abater	Pressure	<u>e</u>	ncl
Scheduled Start Date (10)  12/16/16  Occupancy Status During Abatem  Facility Closed/Vacated During Abatem  Abatement Performed Outside  Describe  Other – Describe:  Source of Work (Check all that a second secon	nent (Check cong Entire Per e of Normal Fa	only one) iod of Ab acility Hot	atementurs -	⊠ Renova □ Demoli	Street Address 5 Marquerite City. State. 7 Towaco, N.	Lane Lip Code  O7082  X Nor Mir Glove Fu  Taining Materia Insulation,	e bag Pro Il Contain	ment with mount specify SI LF)	Abater Remove	Procedure Pressure nent Type Repair Encap Enclo egistered Landfill  City, State Tullytown, PA		
Scheduled Start Date (10)  12/16/16  Occupancy Status During Abatem  Facility Closed/Vacated During Abatem  Abatement Performed Outside  Describe  Other – Describe:  Source of Work (Check all that a second processes)  □ ≥ 3 sf or ≥ 3 lf  □ ≥ 160 sf or ≥ 260	nent (Check or ing Entire Per e of Normal Falappiy)  If Is Location Used Sol Maint/Cu	only one) iod of Ab acility Hora	atementurs -	⊠ Renova □ Demoli  Description (ACM) (i.e. surfacing, \	Street Address 5 Marquerites City. State. 2 Towaco, N. ation tion of Asbestos Conthermal systems VAT, or other miss	Lane Lip Code  O7082  X Nor Mir Glove Fu  Taining Materia Insulation,	e bag Pro Il Contain	ment with mount Specify SI	n Negative Abater	Pressure	Type  Dair Encap Enc  ered Landfill  ity State	ncl
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Cocupancy Status During Abatem  Cocupancy Status During Abatem  Facility Closed/Vacated During Abatem  Abatement Performed Outside  Describe  Other – Describe:  Source of Work (Check all that a second processes of the sec	apply)  Is Location Used Sol. Maint/Cu (12) YES	only one) iod of Ab acility Hora n Norma ely by stodial St NO	atementurs -	☑ Renova ☐ Demoli  Description (ACM) (i.e. surfacing, \ Floor Tite  Roofing r	Street Address Marquerite  City. State. 2  Towaco, N.  ation of Asbestos Conthermal systems VAT, or other mis  material  Cubic Y 90 bags	Lane  Lane  Lane  Lane  Nor  Mir  Glove  Fu  raining Materia insulation,  C.)	Disp	ment with mount specify SI (123/16	Abater Remove    X   X     X   X     X   X     X   X	Pressure nent Typ Repair F  City. S Tullyto	e Encap E Landfil	

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

CHECK # 383

Date of Notification (1)	Name of Building Owner/Operator (2)														
12/01/16		Norman &Holly Brown III 6 2015 Street Address													
Agencies Notified		Notifica X Initia	ation () il notific	ype cation					01			44-14-1			
□ EDA O Amended						City, State, .Zip Code	200								
□ DCA	DCA O			notificati	1011	Morristown NJ Name of Contact:		IT	elephor	ne Num	nber -				
☑ DOL ☑ DEP						George Strother		1-							
⊠ DOH							1								
	FACILITY INFO	Type of Facility (4)													
Name of Facility Where All House		☐ School (K-12) ☐ Subchapter 8 (ot	her than I	K-12)											
Street Address						X Others (i.e. private Sf 2500 Floors 2	& comme 2 .Age;30	ercial buildi	ngs, ho	mes, et	C.				
0:L (5)	County (6)		T	County (	Code (7)	Current Use (prior if	being den	nolished):							
City (5) Morristown NJ	Morris				se Only)	- M									
						i Company	(0)								
Name of Monitoring Firm	Hired by Blo	g. Owne	r (8)	ASCM N	lo.	Name of Contractor BL Contracting .Inc	(a)								
						Street Address									
Street Address						5 Marguerite Lane									
City, State, Zip Cod		-				City State, Zip Code	2								
City, State, Zip Cod						Towaco 07082			License	Numb	er				
Projec Manager for Moni	Telep	hone N	lumber		Telephone Number 973-901-0153			01265		_					
					5 - (44)	Name of OSHA Mo	nitor								
Scheduled Start Date (10 12/15/16	))	Sched 12/19		Completio	on Date (11)	Name of OSHA Monitor BL Contracting Inc.									
	7		1			Street Address									
Occupancy Status During  Facility Closed/Vaca	ted During f	Intire Pe	riod of	Abateme	ent	5 Marguerite Lane									
☐ Abatement Performed	Outside of	Normal F	acility I	Hours -		0": 01-1- 7:- Coo	10								
Describe						City, State, Zip Code									
□Other - Describe:						Towaco, NJ 07082									
Donler - Describe.															
Source of Work (Check a	all that apply	)					X Non Ex	campted ar	d Non I	Friable	Procedu	ire			
F. 0-4	2 IF				⊠ Renovation		☐ Mini-E	nclosure							
<ul> <li>≥ 3 sf or ≥</li> <li>≥ 160 sf or</li> </ul>	s 11 r > 260 lf				□ Demolition		Glove ba	g Procedur ontainment	re with Na	egative	Pressur	е			
	_										nent Typ				
Location of Asbestos-		Location		ally	Description of As	sbestos Containing N	laterial n	Amoun (Specif		200000000000000000000000000000000000000					
Containing Material (ACI	M) in U	sed Sole	ly by	thatf?	surfacing, VAT,	nal systems insulatio	11,	or LF)	,	Remove	Repair I	Encap E	nclose		
Facility (13)		aint/Cust 2)	todiai s	nan :	Sunaoing, VIVI										
		ES	NO	NA				355		X	T				
Basement				X	Floor Tile			000							
	7					1 = 17			Nama	of Ren	istered l	andfill			
Name of Reg. Waste Ha	auler			ste Haul	er ID#	Cubic Yards of Wa 90 bags	aste		T.R.R.		1010,00				
Waste Management of P	ennsylvania	326	04			50 Days					011 01	1 -			
							D	isposal Da	ate		City, Sta Tullytov				
								12/19/16			. Gilytov				
						Cignoture			Date						
Completed by (Print or Nedo Vasilic	Type)	Title Pre:	e sident			Signature	Vasily	2	12/01	/2016					
		-							100/01						
						*									

ALK OV		1		ICATION	OF ASB	ESTOS	ABATE		157		÷			105	54 .		
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Date of Notification (1)	17 0010		Name of Building Owner/Operator (2)														
	November 17, 2016 Agencies Notified Type Notification					National Realty & Development Corp.											
Agencies Nothieu	Type Nothication																
EPA DEB	Initial			3 Manhattanville Road; Suite 202													
DEP	Amended Amendment	#		City, State, Zip Code Purchase, NY 10577													
	Emergency (		l		f Contact	105//				TTO			_	G1999			
DOH DCA	DOH justification)									_ rei	ephoneNur	nber					
L DCA	Cancellation			Manage		TON					_						
Name of Facility Where	Abatement is Taking	g Place (3	)	FACI	LITY INF	ORMAI	ION	Type	of Facility	(4)							
Shrewsbury Plaza		T. 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12	×														
Street Address	Washington Co.						-		School (K- Subchapter		er than K-12	2)					
1026 Broad Street								X	Other (i.e.		& commerci		dings	home	es,		
1026 Broad Street City (5)									etc.) re Feet	# 01	Floors		Ida	\ ~~	_		
1000000	700							Squa	ie reel	# 0	F10015	D	ldg. /	\ge			
Shrewsbury, NJ 077 County (6)	02			County	Code (7)			0	at Haa (Da	as if hai	na dessellat						
					USE ONLY,	,		Curre	ent use (Pri	or it bei	ng demolish	iea)					
Monmouth	. Hisad by Dulldian	0		1 4 6 6 4	4.61-	» .·	I No.	- f Al-			plaza						
Name of Monitoring Firm		Jwner (8)		ASCN	I No.				tement Co		(9)						
Hillmann Consulting	, LLC								Group, L	LC.				- /11			
Street Address							Street			NEW CONTROL OF	00000						
1600 Route 22 East	Suite #107							Kings HWY N, STE 209									
City, State, Zip Code								State, Zip Code									
Union, New Jersey								ry Hill, NJ 08034									
Project Manager for Mon	nitoring Firm								ephone No. License No.								
Mike Nehlsen									3) 759 - 5000   00781								
Start Date (10)		Schedul	ed Co	Section 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1					of OSHA Monitor								
12/2/1	X 10 K								ACK Group, LLC.								
Occupancy Status Durin	ig Abatement (Chec	k Only Or	ne)				Street										
	cated During Entire I								HWY N,	STE 2	209						
Other - Describe:	ned Outside of Norm	ial Facility	Hour	S			550000000000000000000000000000000000000		ip Code								
							Cherry	/ Hill,	NJ 0803	4							
Scope of Work (Check A	All That Apply)	_					15										
≥3 sf or ≥3 lf		(MINISTER )	Renov								Negative F	ressu	re				
≥160 sf or ≥260 lf			Demoli	tion			-	-	ni-Enclosur ovebag Pro								
											Non-Friable	Proce	dure				
		ls	Loca	ion										emen	t		
Locatio	n of		Vorma	lly		ח	escription	of					Т	уре			
Asbestos-Containing	Material (ACM)	10000	d Sole intena	ely by		tos Cor	ntaining N	Materia		А	mount			m	34.00		
TO BE AB		10000		Staff?	(i.e		al systems		ation,		Specify	Re	R	nca	Enc		
In Faci	*		(12)				facing, VAT, or r miscellaneous)			51	or LF)	Remova	Repair	Encapsulate	Enclosure		
		-						80				Val	F	late	Гe		
		Yes	No	N/A			Mary and the same	70.55				. ,					
Main F	loor		X			VCT	and m	astic		22	,156 sf	X					
_"_			X		Cf	eramic	tile and	d mad	stic	1	781 sf	X					
			$\langle \rangle$	+					5110	1,781 sf				-	-		
Mezzai	nine			Tile & ma						5	00 sf				-		
_11_			X			С	ove bas	se			50 If	X					
Name of Registered Wa	ste Hauler			J DEP W		0.000	c Yards		Name of	Registe	red Landfill		MITTER STATE		E-07-00-0		
Nowark Cartina				Hauler ID		of W			Cumber	lord C	a / DEL /		MO	/ TO	DF		
Newark Carting City, State				222	.33	Disc	244.9										
Annual Contraction of the Contra				Disposal Date					City, State								
Newark d, NJ Completed by		Title					3/30/17 Signature		Newburg / Imperial / Morrisville, PA								
		Presid	1004				Olditalitie	-/	9//-		11.000						
Michael Cooper	ent	ıt -					11/17/16										