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Agencies Notified EPA	Type Notification			Street Ad 134 Gr	ddress ove Av	e				<u> </u>	8 20	111	Lane.	٧.	
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Name of Facility Where A Private Residence	Abatement is Takin	g Place (3)					1	Territory (of Facility (4) School (K-12						
Street Address 134 Grove Ave								X S	Subchapter 8 Other (i.e. pri etc.)	(Other th			dings,	hom	es,
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County (6) Middlesex County				County C	ode (7) ISE ONLY)		Curre	nt Use (Prior	if being d	emolish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.				tement Contro						
Street Address							Street A	ddres	ss	ССР					
City, State, Zip Code							City, Sta	ate, Zi	SELECTION WITH						
Project Manager for Mor	nitoring Firm		T	Telephon	ne No.		Telepho	ne No).	1,000,000	ense No).		-	-
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12/15/2011		12/16/20		ipiotioii E	, die (1.1)										
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Scope of Work (Check A	Il That Apply)	12/12/14/14													
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Pyramid Contracting				lauler ID I 2613	No.	of Was	ste		GROWS						
City, State Clifton, NJ 07013						Dispos	al Date		City, State Morrisvill	e, PA	->				
Completed by Dimo Golcev		Title V. Pre	side	nt		Si	ignature		1	5/	Dat 12	e '05/2	011		n
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State of NJ
Notification of Asbestos Abatement

D&S Proj. #: MS 12-01		No (Pu	tification rsuant t	n of Asbes to NJAC 8	:60 8	and	12:120)							- 2
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Name of facility where abatement is take	ing place (3))							School (F		thon	V 12		
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Street Address			- 68					San	Bldgs./Ho	mes, etc.	Т	Bldg.	Age	_
130 CENTRAL AVENUE			-===		Col	inty (Code (7)							_
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City, State, Zip Code							, State, Zip Code Paterson, NJ 0							
						Te	lephone Number	1505		License N		r		_
Project Manager for Monitoring Firm		Phone	e Number	r			973-345-802	0		001	.59	_		_
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				Cubic Yards	of Wa	ste	Name of Registe	ered La	ndfill					
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City. State			Disposal	Date			City, State TULLYTO	WN, P	A					
PATERSON, NJ 07503 Completed by (Print or Type)	Title		01/05/	Signatur	e	_	1022110			Date 12/05	/11			
BOGDAN JOLDZIC	PRESID	ENT	for asbes	stos licensur	e exer	mpted	d activities.			12/00				

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-491 Name of Building Owner/Operator (2) Date of Notification (1) DEC - 8 2011 1 2 / 0 5 / 1 1 SUE O'NEIL Agencies Notified Type Notification Street Address EPA Initial ASELCTUS CO 22-18 ARCADIA ROAD Amended DEP City, State, Zip Code Amendment #: DOL FAIR LAWN, NJ 07410 Emergency (including DOH Name of Contact Telephone Number justification) □ DCA 973-684-6292 SUE O'NEIL Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) SUE O'NEIL Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors 22-18 ARCADIA ROAD County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) FAIR LAWN BERGEN Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Project Manager for Monitoring Firm Phone Number 973-345-8020 00159 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 12/16/11 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure \times >3 sf or >3 !f □ Renovation Glovebag procedure Demolition ≥160 sf or ≥260 lf Non-Exempted (*) and Non-friable procedure R Is location normally used solely Е Ε Location of e e n by maintenance/custodial Amount Description of asbestos-containing n asbestos-containing m p staff(12) C (Specify SF or material (acm) to be material (ACM) C 0 a a LF) abated in facility (13) V Yes No N/A p PIPE INSULATION 70 L FT X BASEMENT 24 L FT X BARE HEATING PIPES BASEMENT Name of Registered Landfill Cubic Yards of Waste Registered Waste Hauler NJDEP Hauler ID# TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 1YD Disposal Date City, State City, State 12/19/11 TULLYTOWN, PA PATERSON, NJ 07503 Signature Date Completed by (Print or Type) Title

BOGDAN JOLDZIC

ASB-41

PRESIDENT

Do not use this form for asbestos licensure exempted activities.

12/05/11

4057 D&S Proj. #: MS 11-492

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

Type Notified Street Address Street Address Street Address	` D&S Proj. #: N	MS 11-492	-3	(i di	Juai	10 110/10	J.00 a.		CEIV					
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		***************************************	P/	AÇII	ITY INFORM	IAIIU	N .			Made to a	_		
Name of facility where abatemen	t is taking plac	ce (3)						Type of Fac	lify (A)				
LINDA LLOYD JONES									chool (K -	12)			
Street Address		**************************************							ibchaptor)
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11 MELMA TERRACE								Square Fee			T	Bldg.	Age
City (5)	Count	ty (6)	*	-			unly Code (7)		_		_		
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Name of Monitoring Firm Hirad by	Bldg Owner	(8)		T	ASCM No.		Name of Abotemer	it Contractor (9)					-
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Street Address							Street Address						***
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Start Date (10)	Schad	Completio	no Deto 7	74.45			Name of OSHA Mo			00159	1		
12/05 11			ni Defe /	(11)			D & S Restora						
Occupancy Status During Abateme	12/09/	11					Street Address		***************************************	-			
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Abatement performed outside	of normal fa	cility hour	'9-				City, State, Zip Code	•				*	
Other-Describe: NORMAL I	HOURS			-/		-	Paterson, NJ 0	7502					
Scope of Work (check all that app								7 7 77 77 77	A(a				
≥3 sf or >2 if	Renovation							Full Containmor	t w/negati	ve press	uro		
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City, State PATERSON, NJ 07503			isposal [City: Stale				٠.		-
Completed by (Print or Type)	Title		12/06/1	-	Ignature	=	TULLYTOWN,	PA					
BOGDAN JOLDZIC	PRESIDEN	17		1 °	-Firenti G			www.comandative.weekeens03	Data			-	
A8B-41	Do not use th		r asbost	08	consure exem	nptod	activities.		02/02	/11			
						15		30					

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 11-490 Name of Building Owner/Operator (2) Date of Notification (1) 1 2 / 0 5 / 1 1 CARMEN TWYMAN Type Notification Agencies Notified Street Address Initial EPA ASSESTED CONTROL & 8 SOUTH HARDING DRIVE Amended DEP City, State, Zip Code Amendment #: DOL. SO. ORANGE, NJ 07079 M Emergency Telephone Number (including Name of Contact DOH justification) 973-762-7754 ☐ DCA CARMEN TWYMAN Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) CARMEN TWYMAN Other (Private/Commercial Street Address Bldgs./Homes, etc. # of Floors Bldg. Age 8 SOUTH HARDING DRIVE Square Feet County (6) County Code (7) City (5) Current Use (Prior if being demolished) (State use only) **ESSEX** SO. ORANGE Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Project Manager for Monitoring Firm Phone Number 00159 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. Street Address 12/16/11 12/06/11 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Paterson, NJ 07503 Other-Describe: NORMAL HOURS Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure \times >3 sf or >3 lf Renovation Glovebag procedure Demolition Non-Exempted (*) and Non-friable procedure ≥160 sf or ≥260 lf R E Is location normally used solely Ε Location of e n by maintenance/custodial Amount asbestos-containing Description of asbestos-containing n m p staff(12) C (Specify SF or C material (acm) to be material (ACM) a a abated in facility (13) ٧ N/A Yes No p PIPE INSULATION 92 L FT X **BASEMENT 6 ROOMS** PIPE INSULATION 36 L F GARAGE Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# Registered Waste Hauler TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 2 YDS Disposal Date

City, State

TULLYTOWN, PA

Date

12/05/11

12/07/11

Signature

City, State

PATERSON, NJ 07503

Title

PRESIDENT

Completed by (Print or Type)

BOGDAN JOLDZIC

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				Name	a of Buildin	g Owner/Operato	r (2)		- 11	W	12	1
Date of Notification (1	12/6/11			ivame	e or Bullain	y Owner/Operato	Steve Moo	řě			< 1	7
Agencies Notified	Type Notification	ation		Stree	t Address		11	DEC -	8	2011		15
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⊠ DOH	justificat	ion)	9	Name	e of Contac	t		Telephone Numb			~~~	
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			- 77	FA	CILITY INF	ORMATION		N. A. WE	- 4	·		
Name of Facility Whe	re Abatement is 1	Taking Place	e (3)				Type of Facility	(4)				7.E77 CS
		Residenc			Mayor.		School (K-1	2)				
Street Address	161	2 Main S	Street				Subchapter Other (i.e., p homes, etc	8 (Other than K-12 private & commercial)	al buil	dings	i,	
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(8)	MECS						vens Environ	mental Service	S, II	1C.	_	
Street Address	BO B	241				Street Address	DO I	30x 322				
	PO Box	341		<u> </u>		City Ctata 75:		JUA J22				_
City, State, Zip Code	Crosswicks,	NI 0851	5			City, State, Zip		n, NJ 08501				
Project Manager for M		143 0031		phone	No	Telephone No.		License No.				_
	Weisgarber J		1 250000		8-4070		59-9688	A CONTRACTOR OF THE PROPERTY O	049	3		
Start Date (10)		Scheduled C	-			Name of OSHA						
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Occupancy Status Du				11		Street Address						
☐ Facility Closed/Vac				ment			PO I	341				
☐ Abatement Perform	ned Outside of No	ormal Facili	ty Hou	rs		City, State, Zip (Code					
Other - Describe:							Crosswic	ks, NJ 08515				
Scope of Work (Chec	k all that apply)			***********		Пело	atainmant with No	active Proceure				
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IN Faci	ility		Staff?		,,	surfacing, VAT	, or	SF or LF)	Rernoval	yair	Encapsulate	Enclosure
(13)			(12)			other miscellane	ous)		<u>a</u>		ulat	Гe
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basement/ci	rawlspace			×		pipe insulat	ion	_146 LF	×			
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Name of Registered W	/aste Hauler		IN	JDEP V	Waste	Cubic Yards	Name/of Regi	stered Landfill				
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City, State		Secretary Control				Disposal Date	City, State					
	Allentow					12/16/11	111/	Tullytown, P	A			
Completed By		Title		3.6		Signature		Date	12/6	/1 1		
Mahlon E. S	tevens	Pr	oject	Mar	nager	_///	4		12/6	/11		_

ASB-41

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

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) Check # 4934

B & G proj. #: 2011-249

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Date of Notification		Nan	ne of Buildi	ng Owne	er/O	perator (2)				s. 11 +7	- 15-					
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Agencies Notified PA	Type Notification	Stre	et Address						DEC	-8 20	1	1				
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☑ DOH			ne of Conta	ct					a semes	or Fallego Better Meson						
☐ DCA	Cancellati	ion A	Anastasia	Zelizo				1		973-22	28-163	1				_
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Street Address											./Home		_	Bld	g. Age	
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West Caldwe	II, NJ 07006	Essex			_	2014 N	118	Name of Abatement					_			
Name of Monitori	ng Firm Hired by B	ldg. Owner	(8)		А	SCM No.	- 11.									
n/a				اا	_		= -	B & G Restoration	on, me							_
Street Address							11	105 Ryerson Ro	ad							
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City, State, Zip Co	ode							Lincoln Park, N		35			·			×
			I Dho	ne Numb	ner.		— h	Telephone Number			Lice	nse N	umbe	er		
Project Manager f	or Monitoring Firm		Filo	HE NUME	301			973-696-6869			03	78				
				B I 4	41		<u> </u>	Name of OSHA Mor	nitor							
Scheduled Start D	Date (10)	Sched.	Completion	n Date (1	1)			B & G Restorati	ion, In	ic.		ALLE STREET		-		
12/16/2011		12/16/			-		_	Street Address								
Occupancy Status	s During Abatemen	t (Check or	ily one)					105 Ryerson Ro					_		_	
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Other-Desc	cribe:						<u>- 11</u>	Lincoln Fark, I	13 070							
Scope of Work (check all that apply	()					_				NZ o	loveba	~ ~ ~ ~	and u	ro.	
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Lincoln Park	, NJ 07035			12/19/	/20			Tullytown, PA			15	oto				
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Gordana Lun		Treasure	r					Jumme Service			11	012		ina/issem		

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Date of Notification (1)	, ,	T				Operator (2)		mis	G E		W	12	-
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Name of Facility Where Abatement is Taking	***************************************						of Facility (4	4)			-		
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Street Address	1/ 1/		Ω.	1			Other (i.e. p	8 (Other than rivate & comi	n K-12) mercial	buildi	ngs,	home	ès,
City (5)	Vall	ey	Roo	خط			etc.) are Feet	# of Floor	S	TBI	dg. A	ne	
City (5) Bridgewater	NT	(880	07		0400		1		"		9° () T	
County (6)			County	Code (7)	ta mana	Curre	ent Use (Pric	or if being der	nolished	i)	10	<u> </u>	00000000
Somenset				USE ONLY)	1								
Name of Monitoring Firm Hired by Building of EPC TECHNOLOGIES, INC	Owner (8)		ASCN N/A	/I No.			atement Con HNOLOG						
Street Address						Street Addre	SS						
P.O. BOX 337						P.O. BOX							
City, State, Zip Code NEW EGYPT, NJ 08533						City, State, 2 NEW EG	Zip Code YPT, NJ 0	8533	,				
Project Manager for Monitoring Firm STEVE SCHENKER		200	Telepho 609-75	ne No. 58-3365		Telephone N 609-758-3		Licer 003	nse No. 94				
Start Date (10)				Date (11)		Name of OS		IEC INC				7.24.6	
Occupancy Status During Abatement (Chec			9-1	1		Street Addre	HNOLOG	IES, INC					
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Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:						City, State, Z	Zip Code YPT, NJ 0	8533					
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole iintenar todial S (12)	nce/		hermal surfa	taining Materia systems insul cing, VAT, or niscellaneous)	ation,	Amount (Specify SF or LF		Removal	Repair	Encapsulate	Enclosure
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Basement / Chawlspace	×					sulation	_	50 (κ			
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Name of Registered Waste Hauler EPC TECHNOLOGIES, INC		Н	JDEP W auler ID 7000		of Wa	Yards ste	Indiana menance	Registered La MANAGE		OF	PA		100
City, State NEW EGYPT, NJ 08533					141-1400-000	sal Date	City, State	SVILLE, P	Ą				
Completed by STEVE SCHENKER	Title PRE	SIDE	NT		8	Signature	DScl	n h	Date 13	1-6	o ~	٠	

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Date of Notification (1)	1 1	- 1	Name of	Building	Owner/0	Operator (2		V.D.	7)				115	117
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			-	LITY INFO)		[.L	· ·	15	X	<u> </u>	, 1
Name of Facility Where Abatement is Taking			// .				Type of Facili	ity (4)				F- 150	Vi (2)	
Street Address 28 Cypress			lling +)			Other (i.	(K-12) oter 8 (Otl e. private				dings	, home	es,
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Name of Monitoring Firm Hired by Building C EPC TECHNOLOGIES, INC	Owner (8)		ASCM N/A	No.	*****		f Abatement							
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City, State, Zip Code NEW EGYPT, NJ 08533							ite, Zip Code EGYPT, N		3	***************************************				
Project Manager for Monitoring Firm STEVE SCHENKER		1	Telephor	ne No. 58-3365		Telepho				nse N	0.	21.95310		
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Date of Notification (1) 12/05/2011					Building Cecile H		perator	(2)		15	I W	E		1		
Agencies Notified	Type Notification			Street Ad 1509 F	ddress Pine Gro	ve Ave	ale .	Personal Comments of the Comme	DEC	٠ ,	2 000		1	111		
DEP DOL	Amended Amendment				te, Zip Co eld, NJ		1			(EA)(Total res	1		
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Name of Facility Where Private Residence		g Place (3)						of Facility (school (K-1			e se		88		
Street Address								The same of	Subchapter Other (i.e. p				uild	inae	home	ac .
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Name of Monaring Fir	rm Hired by Building	Owner (8)		ASCM	No.				ement Con ontractin							
Street Address								Addres						2.		
City, State, Zip Code	2000-00-00-00-00-00-00-00-00-00-00-00-00							state, Zi	07013	950 de 100						
Project Manager for Me	onitoring Firm		7	Telephor	ne No.		Teleph	none No 689-6).	-	License 01099					
01 13 1 (10)		Cabadala	10-	mpletion I	Data (11)		22/0/200		A Monitor		01000					
Start Date (10) 12/14/2011		12/15/2		inpleadir	Date (11)		Ivallie	01 001	A WOING							
Occupancy Status Dur	ing Abatement (Che	k Only On	e)				Street	Addres	S	- 24		-				-
Abatement Perfor	acated During Entire med Outside of Norr 8:00am - 4:00pm	Period of Anal Facility	Abater Hour	ment s			City, S	state, Zi	p Code							
Scope of Work (Check										-			-	-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			lenova Demoli				×	Min Glo	Containme i-Enclosure vebag Prod i-Exempted	e cedure					e	
		le	Loca	tion										Abate	ement	t
Locati	on of	l N	Norma	lly		Des	cription	of				_	_	Ту	ре	_
Asbestos-Containir TO BE A In Fa (13	ng Material (ACM) BATED cility	intena	Staff?		tos Conta	aining N system sing, VA	Material s insula T, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure	
Baser	mont	Yes	X	-		Pine	Insula	ation		8	0 LF	x				
Dasel					1 ipc	modic										
				-			dillocari									
Name of Registered W	aste Hauler		1360	NJDEP W		Cubic '			Name of	Registe	ered Land	dfill				1000
Pyramid Contractir	1756	Hauler ID 32613	No.	of Was			GROW									
City, State Clifton, NJ 07013						Dispos	al Date		City, Stat Morrisv		Α			1000000		
Completed by Dimo Golcev		eside	ent		Si	ignatúre	1	15/	1		Date 12/0	5/2	011			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

									7 . 1 . 2 . 7			- 1	- 4	1
Date of Notification (1)	14 /	11		14				er/Operator (2 ealth Syste	17 50 50	A/#	17			
Agencies Notified EPA	Type Notificat ⊠ Initial	ion			- Canada Caraca	Address one Hart	oor B	Blvd		101 17	. 11	į į		
⊠ DOLWD	☐ Amended				Lancas Contract Contr	tate, Zip C		-	1 -	Acord 7:		-		
☑ DHSS	Amendmer		_			and the same of the		nouse, NJ	L	ASBESTUS DON'T LICENSING	WL&	med .	4	
DCA	☐ Emergency justification		ing	1		of Contact			A was Electronia	Telephone Nun	nber		J	
(NJAC 5:23-8)	☐ Cancellation					k Elberfe			and attended	609-463-20	00	2 = mm.		
								MATION		· · · · · · · · · · · · · · · · · · ·		in Sage	Target and	
No. of Control Market	Ab stampat in Ta	leina Dia	nn /2		PAC	ILII T IN	FUR	MATION	Type of Facility	'4 \			- 100	
Name of Facility Where		iking Pia	ice (3)					School (K-12					
Cape Regional Me	dicai Center		***						Subchapter 8	Other than K-1				
Street Address										rivate and comme	ercial bu	ilding	s,	
2 Stone Harbor Blv	vd								homes, etc.)	# of Floors	DI	dg. Ag		
City (5)									Square Feet 50,000	2	1	19. A 10+	Je.	
Cape May Courtho	ouse							FE 110E 011114				+0.		-
County (6)					Coun	ty Code (7)(SIAI	TE USE ONLY)	Current Use (Pri	or it being demoi	isnea)			
Cape May														
Name of Monitoring Firm	n Hired by Buildi	ng Owne	er (8)	-	ASCM I	No.			ent Contractor (9)					
Criterion Labs, Inc	3						_		VIRONMENTA	L, INC.				
Street Address							17000	et Address						
3370 Progress Dr								123 BEAVE						
City, State, Zip Code		***					1	, State, Zip Co						
Bensalem, PA 190	20						В	RISTOL, PA	19007					
Project Manager for Mo	nitoring Firm		1	Tele	phone I	No.	Tele	phone No.		License No.				
Mike Panapresso				21	15-244	-1300		15-788-6040		00509				
Start Date (10)	So	cheduled	Con	nple	tion Dat	te (11)	I CONTRACTOR	ne of OSHA M						
11 /28 /	/11	12	. / _	2	_ / _	11	В	RISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status Durin	ng Abatement (C	heck on	ly one	e)			Stre	et Address						
☐ Facility Closed/Vaca					ment		11	123 BEAVE	R STREET					
Abatement Performe	ed Outside of No	rmal Fac	ility F	Hour	rs - Des	cribe	City	, State, Zip Co	ode			9		
Time of Abatement:	AM	PM/ <u>5:</u>	<u>00</u> PI	VI- <u>1</u>	:30AM			RISTOL, PA						
Scope of Work (Check a	all that apply)						-							
		127	Done					☐ Full Con	tainment with Neg	gative Pressure				1
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Rend						g Procedure					
24 5 100 or or 5200 m		-						☐ Non-Exe	empted (*) and No	n-Friable Proced				
					tion						Ab	atem	ent T	-
Locatio				rma Sole	ely by	Acho	otos (Description of Containing Ma		Amount	Re	Repair	Ē	Enclosure
Asbestos-Containing TO BE AB					ince/	(i.e	the	rmal systems	insulation,	(Specify	Removal	pair	cap	clos
IN Fac		0			Staff?	,	S	urfacing, VAT	, or	SF or LF)	/al		Encapsulate	ure
(13))	Y	-	(12) No	N/A	+	oth	ner miscellane	eous)				te	
2 nd Floor Finance R	oom			\boxtimes		Pipe In	sulat	tion and fitt	ings	255 LF				
1 st Floor Medical Re			1 1	\boxtimes		Pipe fit	tings	3		8 LF	\boxtimes			
			-											
Name of Registered Wa	aste Hauler		1	TN	NJDEP \		Cub	oic Yards of	Name of Regis	stered Landfill				
SERVICE TRANSF		, INC.		110000	lauler II	D No.	Was	ste		LANDFILL				
		- Land Control To	-		20990	,	Dist	posal Date	City, State					
City, State	10720						2.0		10.00	BURG, OH 446	88			
NEW CASTLE, DE							<u></u>	Cianatura			Date ,			
Completed By (Print or	Type)	Title	01100324	0.050				Signature	2 11.		11/14	1/1	,	
Brian Scafiro		Estir	nato)r				Eman	Scalino	1-12	11/19	1.		

ASB-41 MAY 11 BS///37 29579

Agencies Notified X				Owner/Opera			GEORG	IA PA	ACIF	IC	
DEP DOL Amended Amendment #_ 7 Emergency (includin justification) Cancellation Name of Facility Where Abatement is Taking Place CURTIS SPECIALITY PAPER Street Address 404 FRENCHTOWN RD. City (5) MILFORD County (6) Hunterdon Name of Monitoring Firm Hired by Building Owner (6) ARCADIS US			Address POPLA	R AVF		ě. Aut L	LICENS 297 FÜ	RG S	т		
Name of Facility Where Abatement is Taking Place CURTIS SPECIALITY PAPER Street Address 404 FRENCHTOWN RD. City (5) MILFORD County (6) Hunterdon Name of Monitoring Firm Hired by Building Owner (6) ARCADIS US		City, St MEMI	ate, Zip C PHIS, T	ode N 38197	**************************************	CONTRACTOR STATE OF THE STATE O	NEWAF	*****		105	
CURTIS SPECIALITY PAPER Street Address 404 FRENCHTOWN RD. City (5) MILFORD County (6) Hunterdon Name of Monitoring Firm Hired by Building Owner (6) ARCADIS US	9	O THE PROPERTY OF	of Contact r Schum	i nerllP, Pau	l Mor	ntney/GP	Telephone No. 901.418.39		08.6	72.4	800
CURTIS SPECIALITY PAPER Street Address 404 FRENCHTOWN RD. City (5) MILFORD County (6) Hunterdon Name of Monitoring Firm Hired by Building Owner (6) ARCADIS US		FAC	ILITY INF	ORMATION							C tur-
Street Address 404 FRENCHTOWN RD. City (5) MILFORD County (6) Hunterdon Name of Monitoring Firm Hired by Building Owner (6) ARCADIS US	(3)				Ty	pe of Facility (4)				
MILFORD County (6) Hunterdon Name of Monitoring Firm Hired by Building Owner (6) ARCADIS US					×	and the second second	2) 8 (Other than K- rivate & commerc		lding	s, hom	nes,
Hunterdon Name of Monitoring Firm Hired by Building Owner (a ARCADIS US		name and				quare Feet 00,000	# of Floors		Bldg. 100	Age years	3
ARCADIS US			Code (7) USE ONL	n		urrent Use (Pricaper Manufa	or if being demolis	shed)			
Street Address	B)	ASCI 0001	M No. 141			Abatement Con ENVIRONI	tractor (9) MENTAL, INC				,
35 COLUMBIA RD	-		***		eet Add	iress XINGTON A	VENUE		-		
City, State, Zip Code BRANCHBURG, NJ 08876						, Zip Code STER, NY	14613			-	
Project Manager for Monitoring Firm William C. Mener		Telepho	one No. 26.1000	Tele	ephone		License 01068	No.			
			Date (11)	Nan	ne of C	SHA Monitor	ETY SERVICI	=0			
Occupancy Status During Abatement (Check Only C					et Ado		ETT SERVICE				
➤ Facility Closed/Vacated During Entire Period of		mont		5 4 07337997		TH ST.					
Abatement Performed Outside of Normal Facili Other – Describe:				250		, Zip Code ONTON, NJ	08037		- 778	11-0-1	
Scope of Work (Check All That Apply)											-
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	Renova Demoli				×	Mini-Enclosure Glovebag Proc					
			T			Non-Exempled	() and Non-Fria	DIE FIC	(F.10)	emen	ıt
Location of	s Locat Norma	lly		Descripti	on of					ype	
Asbestos-Containing Material (ACM) TO BE ABATED	ed Sole aintena stodial (12)	nce/ Staff?		Descripti stos Containing thermal syste surfacing, \ other miscell	Mate ms ins VAT, o	ulation, r	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Yes	No	N/A						-		ŧ	0
THROUGHOUT FACILITY		Х		PIPE	Ε		39500 LF	х			
			T	HERMAL S	YSTE	EMS	45400 SF	X			
				TRANS	ITE		46300 SF	Х			
200				0	TOC		28500 SF	x			
Name of Registered Waste Hauler	1	1		GALBES	103	1		22	1		
R&B DEBRIS LLC		JDEP W		Cubic Yards		1	egistered Landfil				
City, State HAINSEPORT NJ	H	JDEP W lauler ID IJ-801				Name of R			1	-	
Completed by Title PETER BREEN PRO	H	lauler ID		Cubic Yards of Waste	te	Name of R GROWS	egistered Landfil LANDFILL		I		

Date of Notification (1) 12/5/2011					Owner/Op ONAL PA	perator	6. C.E		GEORG	A PA	CIF	С	
Agencies Notified Type Notification			Street A		R AVE.		DEC - 8	2 5011	297 FU	RG S	Т		
□		_ [City, Sta MEMF	ate, Zip C PHIS, T	ode N 38197	1			1	i.	-200/2011/12/20	05	
DOH justification) Cancellation				f Contact Schum	n n	aul M	ASBESTOS CO LICENSI Ontney/GP	NG Tel	ephone N 1 418 3	urhber 257,9	08.67	2.40	800
			FACI	ILITY INF	ORMATIC	N		NOT THE REAL PROPERTY.	keledidas v v				
Name of Facility Where Abatement is Takir CURTIS SPECIALITY PAPER	ig Place (3	3)					Type of Facility School (K		**************************************	*1.30 pp jr 1			
Street Address 404 FRENCHTOWN RD.							Subchapte Other (i.e. etc.)	er 8 (Oth			ldings	, hom	ies,
City (5) MILFORD							Square Feet 500,000	# 0	f Floors		Bldg. A		6
County (6)				Code (7)	vi		Current Use (P						
Hunterdon Name of Monitoring Firm Hired by Building	Owner (8)		ASCN			Name o	Paper Manu of Abatement Co						
ARCADIS US			0001	41		ROY	AL ENVIRON						
Street Address 35 COLUMBIA RD							Address .EXINGTON	AVEN	JE				
City, State, Zip Code BRANCHBURG, NJ 08876							ate, Zip Code HESTER, NY	′ 14613	3	- Contract Day			
Project Manager for Monitoring Firm William C. Mener	ANII 100 - 1		Telepho 908.52	ne No. 26.1000			one No. 254-1840		License 01068	No.			
Start Date (10) 5/16/2011	Schedule 1/27/20		npletion	Date (11)			of OSHA Monito		SERVIC	ES			
Occupancy Status During Abatement (Chec	ck Only Or	ne)					Address	-					- 5.848
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr					-		12TH ST. ate, Zip Code			- 71/2			
Other – Describe:					-	11750	MONTON, N	J 0803	7				
Scope of Work (Check All That Apply)	-					lei			A2823 - 35				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				^×××	Full Contains Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure					
	Is	Locati	on				Non-Exchipit	T Tare	a Non-i ne	I	Abat	emen	ıt
Location of Asbestos-Containing Material (ACM)		Normall d Sole		Ashor	Desc	cription	of aterial (ACM)		mount	-	1	ре	Т
TO BE ABATED In Facility (13)	100000	intenar odial S (12)		(i.e	. thermal s	ystems ng, VAT	insulation, , or	(5	Specify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A				Λ					ate	(D)
THROUGHOUT FACILITY			X			/AT		560	000 SF	Х			
	-				MISCEL	LANE	OUS	130	000 SF	X			
								_					
Name of Registered Waste Hauler		1000000	JDEP W		Cubic Y		Name of	Registe	red Landfi	11	I		
R&B DEBRIS LLC			J-801	No.	of Waste 3500	Э	GROW	S LAN	IDFILL				
City, State HAINSEPORT NJ					Disposa VARIO		City, Sta MORR		E, PA				
Completed by PETER BREEN	Title PRO.	JECT	MANA	GER	Sig	nature	1			ate 2/5/20	011	1000	
ASB-41 (R-06-08)	1		2-49-2011	FF-W/PE-D	,	bo not	use this form fo	r asbest	os licensu	re exen	npted	activi	ties.

Check 6027

Date of Notification (1)		Na	me of Buildi	ing Owner / Operator	(2)					2000000
	ecember 5, 20		W	hite Castle	Management Comp	any	erical and a second	• 1			
Agencies Notified	Type Notificat	ion	555		odale Street	DEG	EIVE	M			
⊠DOH	Initial Amen	ded dment#	100000	y, State & Z Iumbus, Ol		UU DE	C - 8 2011	Ly	!		
DCA	AND THE RESERVE OF THE PARTY OF	ellation		me of Conta	act		STOS CONTROL & 7	elephor 32-381	2000000		er
				FACILITY	INFORMATION		LICENSING) A V # 10 C C C C C C C C C C C C C C C C C C	_		
Name of Facility When		Taking Place (Type of Fac	ility (4)		Miles or Control of the Control of t			
White Castle System Street Address	, Inc.		=:21			(K-12) apter 8 (Other than	. K-12\				
245 E. Inman Avenue)						ommercial buildin	as hor	ne e	etc)	
	~				Square Fee			idg. Age			
City (5)					5,57		11		50		
Rahway					Current Use	(Prior if being der	nolished)				
County (6) Union		County O USE ON	Code (7) LY								
Name of Monitoring Fi Arcadis U.S., Inc.	rm Hired by Bu	ilding Owner (8)		ASCM		atement Contracto	or (9)				
Street Address					Synatech, I			200000000	_	-	
35 Columbia Road					829 Radio F						
City, State & Zip Code Branchburg, NJ 086					City, State 8	Zip Code larbor, NJ 08087					
Project Manager for M	onitoring Firm			ne Number	Telephone N	lumber	License Nu		_		
Scheduled Start Date	(10)	Scheduled Comp	908-526- letion Dat		609-296-691 Name of OS			0081	7		
December 15,	2011	Dec	ember 19		Synatech, li	nc.					
	d/Vacated Duri	ng Entire Period	of Abater	ment	Street Addre						
Abatement Pe	erformed Outsid	de of Normal H	ours		City, State &	Zip Code					
Other – Desc	ribe: pied During Aba	atement			Little Egg H	arbor, NJ 08087					
Scope of Work (Check	all that apply)	Maria de la companya		100							
≥10 LF or ≥ 25 s≥160 sf or ≥260			Renov Demol			Mini-Enclosure Glovebag Procee	t with Negative Pres dure *) and Non-Friable F		re ·		
	tion of			mally Used	1000 2000 0000	tion of		Aba		ent 7	Туре
Asbestos-Contain TO BE	ning Material (A ABATED		y by Main istodial St	tenance or aff? (12)	Asbestos-C Material		Amount (Specify SF or LF)				
	acility 13)				(i.e., therma					т	
,	10)				insulation, sur or other miso			Reg	Re	nca	E
								Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A				=		ate	G.
Main Retail Area				Х	Floor Tile and As:	sociated Mastic	675 SF	X			
Back Area				Х	Floor Tile and Ass	sociated Mastic	2,720 SF	$\exists x $			
Name of Registered W	aste Hauler		P Waste	Cubic	ards of Waste	Name of Registe	ered Landfill				1
Synatech, Inc.		Haule	r ID No. 27429	17		Grows Landfill					
City, State				Disposa	al Date	City, State		-		_	
Little Egg Harbor, NJ	08087			Decem	ber 20, 2011	Morrisville, PA					
Completed By		Title		Signatu	yre × / /2		Date				
Diane Aloia		Executive Adm	inistrator		June Fall	n_	December 15, 2011				

NOTIFICATION OF ASBESTOS ABATEMENT Emergency From (Pursuant to NJAC 8:60-7 and 12:120-7) check #: 4536

Emergency Friable Notification

Date of Notificatio	n (1)		N	ame	of B	uildi	ng Ow	ner/Operat	01	r((2)) F @	fr= n n	10 =		*******		
111/13							School	ols		ID), E.C.	EII	M I				
Agencies Notified	Type Notif	ication	S	tree	et Ado	iress				IITili				11)		
[X]EPA	[X]Initi	al	1 2	2 Ce	dar S	treet		+		JU UI DEC	- 8 0	011	: 1	/	- C	
[X] DEP	Notif	ication	c	ity.	. Sta	te, 2	ip Co	de					i j ^{lan}	i i	200	
[X] DOL	[]Amend		111	New	ark, N	IJ 07	102	2		ASECT		- Francis	1			
(X) DOH		ication	11		of C						phone N	umbe	-	_		
DCA	[]Cance	llation	11,			Olas		Dua Ada	:	072	332-401	· ·	- 200 - James			
MIDON			11	senj				, Bus. Adn	nı	in. 973-	332-401					
Name of Facility Wh	ere Abatem	ent is T	akin	o P	- Translation		INFOR	MATION	П	Type of Facili	ty (4)					
		0.0-111.00 (0.00V 22							11	[X1School	(K-12)					
South Street School									11	[]Subcha []Other	pter 8	(Oth	er t	han ⊱ co	K÷12 mmer)
Street Address									11	cial b	milding	g. h	omes	. et	c.)	
151 South Street										Square Feet	# OI FI	OOFS			Age	
City (5)		Count	y (6	5)				Code (7) USE ONLY)		6500 Current Use (E	Trior if	bei	64		ishe	d)
Nowark NI 07114		Ecco				1,.	ILLED	002 0.017								
Newark, NJ 07114	Firm Hired	Essex by Buil		I A	SCM N	0.	Nan	e of Abate	em	School ment Contractor	(9)	-				
Owner (8)			-													
TTI Environmental, Ir	nc.			0	0003			ur Strong B		ilders, Inc.						
Street Address							11									
1253 North Church S					-		- 180	Sargeant State.	7	Avenue Zip Code		_		-		
Moorestown, NJ 080							Cli	fton, NJ 07	0.	13-1935						
Project Manager for	g Firm	Tele	pho	ne Nu	mber	Tel	ephone Num	mb	er	T	icen	se N	umbe	T		
Jim Guillardi				-8800			3-614-0377				080	7				
Scheduled Start Dat		ched.Com					Nan	ne of OSHA	M	Monitor						
1 1 2 / 0 3 / 1	111	1 2 1/1	0 1	5/	111	1	Fo	ur Strong B	3u	ilders, Inc.						
Month / Day / Occupancy Status Du	ring Abate	ment (Ch	eck	onl	у опе)	Str	eet Addres	SS	5						
(X) Facility Close	d/Vacated	During E	ntir	e P	eriod		18	0 Sargeant	· A	Avenue						
of Abatement []Abatement Perf	ormed Outs	ide of N	orma	1 F	acili	ty	CIT	y. State.	7	Zip Code						
Hours - Descri	be:		1					NIO7	0	40						
Scope of Work (Chec	HPASSON A	annly)					HCII	fton, NJ 07	U	13				_		
				/15-						Containment w: -Enclosure	ith Nega	stive	Pre	ssu	e	
<pre>{]Demoliti {]>3 sf or</pre>	>3 lf		LX	() Ke	novat	101		[X]Glov	VE	ebag Procedure						
[X]∑160 sf	or ≥260 1f							[]Non-	- 2	Friable Proced	ure					
			1.0	Is	ion								Abat	eme	E E	/pe
Locati			No	rma	11y			Description			Amour		R		N	N
Asbestos-C Material				Use		1		estos-Contaterial ((Speci		E	R E	C	C I.
TO BE A	BATED		by	Ma nan	in-		(i.e.	. thermal	f	systems acing, VAT,	SF c		0 2	PA	PS	0
in Faci			Cu	sto	dial		or	other mis	ce	ellaneous)]	1	A	I R	Ü	O S U R
			Yes	arr	(12)									К.		E
Ground Floor Teach	er's Lounge			X		_	e Insu	lation			35 LF		X			
	•			1		T			_							
			1		1											
				1	1	1			-110						0. ±948	
Name of Registered	Waste Haul	er	N	JDE	P Was	te No		c Yards	200	Name of Regis	tered La	andf:	111			
Four Ctrong Duildors	Inc			1260			101			G.R.O.W.S., In	ic .					
Four Strong Builders	, IIIC.	-		1200	J8		Dist	osal Date		City. State	-					
								1		Carry 1980 Sept.						
Clifton, NJ		18721						Termer	_	Tullytown, PA			18.	ite		
Completed By (Print	or Type)	Title						Signatur	7	-CO			108			
Bilyana Kulakovska		Office A	Admii	nistr	rator			B.	<	S.			1	1/30	/11	
ASB-41 JUN 95															GAE	67

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ם בחוו ודיםהאו<mark>ור לב</mark>ההגלההל?

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) dification Check # 1247 Name of Building Owner/Op Date of Notification (1) Diane Murray 12/05/2011 DEC Type Notification Street Address Agency Notified 102 Bailey Avenue S Initial □ EPA City, State, Alp Code ☐ Amended ASBESTOS CONTROL & U DEP Amendment # Hillside, NJ 07205 M DOL - LICENSING Telephone Number 3 Emergency (including Name of Confact justification) HOC IS 908-447-0209 Cancellation Diane Murray □ DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement Is Taking Place (3) □ School (K-1 2) Private home □ Subchapter € (Other than K-1 2) Street Address 2 Other (I.e. private & commercial buildings, homes, etc.) 102 Bailey Avenue Square Feet | # of Fidors Bldg. Age City (5) Hillside, NJ 07205 Current Use (Prior if being demolished) County Code (7) (STATE USE (County (G) ONLY) Union Name of Abatement Contractor (8) ASCM NO. Name of Monitoring Firm Hired by Building Owner(8) Gr Toch LLC Street Address Street Address 576 Valley Rd #283 Cily, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Telephone No. License No. Telephone No. Project Manager for Monitoring Firm 973-638-1777 01127 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Envirovision Consultants, Inc. 12/07/2011 12/06/2011 Street Address Occupancy Status During Abatement (Chack only one) 20-21 Wagaraw Road, Bldg .# 34A R Facility Closed/Vecated During Entire Period of Abstement Clty, State, Zip Code ** Abstement Performed Outside of Norma! Facility Hours ☐ Other - Describe: Fair Lawn, NJ 07410 Scope of Work (Check all Ihal apply) ☐ Full Containment with Negative Pressure Renovation ☐ Mini-Enclosure 25 >3 af or >3 If ☐ Demolition 2 Glovebag Procedure ≥160 sf or >260 if ☐ Non-Exampted (*) and Non-Friable Procedure Abatemen! is Location Type Normally Description of Logation of Appealos-Conteining Material (ACM) Used Solely by Asbestos Containing Material (ACM) Amount Encapsulate Maintenance/ Removal Repair (i.e., thermal systems insulation. (Specify TO BE ABATED Custodial surfacing, VAT, or SF or LF) IN Facility Steff? other miscellaneous) (13) (12) No Yes 45 LF Pipe insulation Basement NUDEP Waste Hauler Cubic Yards of Name of Registered Landfill Name of Registered Waste Hauler Waste Gr Tech LLC 0033785 T.R.R.F. Inc DESposal Date City. State Tullytown, PA Wayne, NJ 07470 Date Signature Title Completed by 12/05/2011

* Do not use this form for asbestos licensure (xempled activities.

Owner

N.Jevtic

ASB-41

CK4728

Date of Notification (1) 12/2/11 e Notificati	on	Name of RRI-En	Building Overgy Mid-A	wner / Op	perator (2)	E C C	1 10		
Agencies Notified X EPA X DEP X DOL	Initia	rgency Notificat Il Notification nded Notification	Street Ad PO Box City, Sta	ddress	de		DEC -	<u>g</u> (()))		
X DOH DCA		cellation	Name of Frank N	Contact	,,,	44	ASBESTOS LICET	CONTROL VSING	Telepho 908-99	one Number 5-6900
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Name of Facility When	e Abateme Stora	ent is Taking Pla age Building	ace (3)			Facility (4) nool (K-12)	200			
Street Address	315 Ri	iegelsville Rd			X Oth	er (i.e., priv	Other than K-			
City (5) Milford	9.	County (6)	County Coo	le (7)		500	# of Floors 1 f being demol	linhad)	Bldg. Ag	e 60
					Storage		i being demoi	isnea)		
Name of Monitoring Fi Environmental Tac	rm Hired b tics, Inc	y Building Owne	er (8) A	SCM No.	Name of	f Abatemen	t Contractor (s	9) LLC	1	
Street Address 64 Broad Street					Street A 443 ScI	ddress hoolhous	e Road			
City, State & Zip Code Matawan, NJ 07747						te & Zip Co	de i p, NJ 0883 1	ı		
Project Manager for Mo Tom Geiger			Telephone Nu 732-290-221	34090200000		ne Number			Number 0071	14
Scheduled Start Date (12/12/11	10)	Scheduled Comp	The second secon		Name of	OSHA Mor	nitor nt Services,	LLC	007	-
Occupancy Status Dur X Facility Closed	Vacated D	Ouring Entire Per	riod of Abaten	nent	Street Ad	ddress noolhouse	Road			
Abatement Per Describe: Ar Other - Describ	ea Isolat	tside of Normal ed During Ab	Facility Hours			te & Zip Co Townshi	^{de} p, NJ 08831			
Scope of Work (Check X Demolition Large Project Quantity is ≥ 3		Renovatio	n			Mini-Enc		Negative	e Pressure	
X Quantity is ≥ 1					x		g Procedure Non-Friable			
Asbestos- Materia <u>TO BE /</u> in Fa	tion of Containing I (ACM) ABATED acility 3)	N	Is Location Normally Used Solely by Maintenance of Custodial Staff (12)	or (i	Descri asbestos- Materia e., thermulation, su	ption of Containing al (ACM) nal systems urfacing, VA scellaneous	Ar (S Squa	mount pecify are Feet or ar Feet)	(Specif Repair, E	ment Type y: Removal, Encapsulation nclosure)
Sto	rage pan	els	N/A		Pa	int	15	00 sf	Re	moval
Name of Registered Wa Global Abatement S City, State			JDEP Waste S32			Yds. of Wa	TRR	F	stered Lar	ndfill
Monroe Twp, NJ 088					Dist	12/23/1	City, Tully	State rtown, F	^o a	
Completed By (Print or Dominick Tringal		Title Pres.				nature Ominick T		7	*	Date 12/2/11
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Date of Notification (1) 12–5–11					of Building tz Reu			(2) re Retire	ment Cor	nmuni	Ly Ly		111	
Agencies Notified	Type Notification				Address 1 Kenn	edy B	lvd.		DEC -	8 20	ii			24
□ DEP	☐ Amended				ate, Zip Co							į	,	
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DX DOH	justification) □ Cancellation	-			of Contact id Kol	l-		and the same of th	201=8	ne Nun 367-3				
BOA .	L Caricellation			7575	ILITY INFO	DE .	ON	· v. resultation						
Name of Facility Where Fritz Reuter I	Abatement is Taking ifecare Ret	Place (3) nt C					Type of Facility School (K-			-			
Street Address 3161 Kennedy E	Blvd.			2					er 8 (Other th			dings	hom	es,
City (5)								Square Feet	# of Flo	ors		ldg. A	53700	
North Bergen County (6)				County	Code (7)			100,000 Current Use (Pr	ior if being d	emolish		112	yrs	•
Hudson		(0)		(STATÉ	USE ONLY)			retiremen	nt commu			A		
Name of Monitoring Firm EHS Environm		wner (8))	ASCI	VI NO.		Plym	of Abatement Co outh Envi		al Co	.,I	nc.		
Street Address 411 Southgat	e Court							Address Haws Avenı						
City, State, Zip Code								ate, Zip Code	ie					
Mickleton,	NJ 08056							istown, PA	A 19401					
Project Manager for Mon Jack Carney	itoring Firm			Telepho 856-	ne No. 224–00	80		one No. 239–9920	1 200	ense No 0398).			
Start Date (10) 12/19/11		Schedul 1/9/	ed Com	pletion	Date (11)			of OSHA Monitor Mouth Envi			o. Tr	nc.		
Occupancy Status During	g Abatement (Check	Only Or	ne)				Street A	Address Haws Aven						
☐ Facility Closed/Vaca ☐ Abatement Perform ☑ Other – Describe:	ed Outside of Norma					-	City, St	ate, Zip Code						-
Scope of Work (Check A				100000			MOT	ristown,PA	19401					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ттас дрруу		Renovat Demoliti				13	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure	2			e	
		Is	Location	on								Abate	ement	
Location Asbestos-Containing <u>TO BE AB</u> In Facil (13)	Material (ACM) ATED	Use Ma Cus	Normall ed Solel intenar todial S (12)	y by ice/ itaff?		tos Conta thermal s surfac		aterial (ACM) insulation, 「, or	Amou (Speci SF or L	fy	Removal	Repair	e Encapsulate	Enclosure
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boiler room							ation	Contract of the second	250 S 50 I		X			
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Name of Registered Was Newark Carting	te Hauler	0.0000	I JDEP W auler ID 4509		Cubic Y of Wast		100000000000000000000000000000000000000	Registered C		7 T.	andf	i 11		
City, State Newark, NJ						Disposa	al Date	City, Sta						
Completed by		Title		- /-		Sig	gnature	Company of the All Section of the Company of the Co	en and	Date	е	(Control		
James M. Kelly			Proje	ect M	lanager		1/1	16/		12	2-5-	11		



State of New Jersey - Notification of Asbestos Abatement

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Date of Notification (1) December 5	. 2011				Name of Building Owner/o			DEC	0		- S
Agencies Notified		Notification Initia	Type al Notifi	ication	Street Address 64 East Midland Av	11		DEC	- U		1
X EPA DCA	9 5	□Amende □ Emerge			City, State, Zip Code Paramus, New Je	rsey 076		- 1	TUENS!	VTRÓL &	
x DOL X DEP x DOH		justifica □ Cancel			Name of Contact Tom Allesandrello	Le.	Telep 201	hone N -615-2		-81	
				FACILITY INF		1-5					
Name of Facility Where Abatem Commercial Building	ent is Takin	ig Place (3)			Type of Facility (4) School (K-12) Subchapter 8 (other th	V 42\					
Street Address 1-5 Blackwell Avenue	XXX-78				Other (i.e. private & cor	nmercial build) year	s
-	County (6) Morris			Code (7) Jse Only)	Current Use (prior if being	A1100000000000000000000000000000000000					
Name of Monitoring Firm Hired EnviroVision Consu			ASCM 0007		Name of Contractor (9) GREENWOOD ABAT	EMENT C	ONSU	LTAN	TS, IN	С.	
Street Address 20-21 Wagaraw Road,	Bldg # 3	34A			Street Address 268 MAIN STREET						
City, State, Zip Code Fairlawn, NJ 07410				*	City State, ZipCode Butler, NJ 07405						
Project Manager for Monitoring Fred Larson	Firm :	773-636-	Control of the Control		<u>Telephone Number</u> 973-492-0477		0084	se Numb	<u>oer</u>		
Scheduled Start Date (10) December 17, 2011		Scheduled C December			Name of OSHA Monitor EMSL inc.		, 000				
Occupancy Status During Aba Facility Closed/Vacated Abatement Performed 0	During En	tire Period o	of Abater	ment s -	Street Address 1056 Stelton Road						
Describe Other – Describe:					City, State, Zip Code Piscataway, NJ 08	854					
Source of Work (Check all that	apply)				<u> </u>	Full Contain	nment v	vith Neg	ative P	ressure	
≥ 3 sf or ≥ 3 lf □≥ 160 sf or ≥ 26	0			Renovation Demolition		Mini-Enclo Glovebag F Non-Exem	rocedu		n-Friah	e Proce	dure
Location of Asbestos-Containing Material (ACM) in Facility (13)	g Is Loca Solely Staff? YES	ation Normall by Maint./Cu (12) NO	ly Used istodial		bestos Containing Material nal systems insulation, surfaci scell.)	Amou	nt	Abater	nent Ty		
1 st Floor	120	T	X	VAT & Masti	ic	3,000	SF	X	T	T	
Name of Reg. Waste Hauler See Hauler Below # 1 & 2		NJDEP Was See Below		ID#	Cubic Yards of Waste:	30			stered L Landf		
Hauler #1) Greenwood NJ DEP #1 Hauler #2) Newark Car	2561				Disposal Da December 2011				Box 68 ort, WV		
Completed by (Print or Type) Marin Graure		<u>tle</u> ENIOR PI IANAGER		т	Signature Marin Grau	re	Date De	cembe	er 5, 2	011	

GAC # 2011-301

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Date of Notification (1 12/5/11	1)					Owner/Op esidenc				F.C.	0.001	1	11.1	1	
Agencies Notified EPA	Type Notification		1 0	Street Ad 244 We	dress est 12 S	Street	i,	Early Company		EU '	* 6	•	Cana.	1	
EPA DEP DOL	Amended Amendment				e, Zip Coo	de J 08091	ė, ė		AS	BESTO:	S CONTRÓL ENSING	&			
DOH DCA	Emergency justification) Cancellation			Name of Mike	Contact	> 11 	i i	erroman Alaborater	Spile of property	Tel	ephone Nu 9-361-00				£.
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Mackenzie / Res	ere Abatement is Takin sidence	g Place (3)							acility (4 nool (K-1						
Street Address 244 West 12 Stre	eet							Oth	er (i.e. p		er than K-1 & commerc		ldings	, hom	es,
City (5) Ship Bottom NJ	08091							etc. Square F 000 +	eet	# 0	Floors	100	31dg 35+	Age	
County (6) Ocean				County C	ode (7) SE ONLY))		Current (Reside		or if bei	ng demolis	shed)		-	
Name of Monitoring F N/A	Firm Hired by Building	Owner (8)		ASCM	No.	100	Name of Pernac			tractor	(9)				
Street Address				1			Street Ac								
City, State, Zip Code		***************************************					City, Stat West E			91		ox	7	100001 = 1-0 1	
Project Manager for I	Monitoring Firm		T	Telephor	ne No.		Telephor 856-75		0		License 1	No.			
Start Date (10) 12/15/11		Scheduled 12/21/11		pletion [Date (11)		Name of Pernac				-10.5.2.4. W/M	2			
Occupancy Status D	uring Abatement (Che	ck Only One)					Street Ad							-	
Facility Closed/	Vacated During Entire formed Outside of Norr	Period of Ab	atem	ent		-	PO Bo City, Stat	Activity (STRIP)	Code					WHO:	
Other – Describ	ne:	-					West E	3erlin	NJ 080	91					
Scope of Work (Che	ck All That Apply)					-									
≥3 sf or ≥3 lf ≥160 sf or ≥260) If	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nova				×	Mini-E Glove	nclosure bag Prod	e cedure	n Negative d Non-Fria			re	
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Exterio	or Siding	1 1		x		Exter	ior Sidir	ng		24	00 SF	x	+		
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	Name of Registered Waste Hauler United Containers					of Was		1	G.R.O.	- 3	orou candi				
City, State Elm NJ				2459		Disposi			City, Stat Morrisv		J 19067		-		
Completed by	Carlo States Contract	Title		_			gnature			Towns Com		Date		10000	
Anthony T Perna	l .	Presid	ent			(1					12/5/1	1		

State of New Jersey - Notification of Asbestos Abatement

	(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)
GAC Project # 060-11	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Client Project #	

Date of Notification (1) Decem	har 06	2011			Name of Building Ov RUTGERS, THI	vner/Oper	ator (2)	- 8 /FRS	ITY O	F N.I		
Agencies Notified EPA	bei ou,	Notification Sinitial	Votifica		Street Address ENVIRONMENT	AL HE	ALTH.	SAI	ETY	DEPT		
□DCA 図 DOL				including	27 ROAD 1, BLI City, State, Zip Code PISCATAWAY,				ONC	AIVIE	00	
☑ DEP- No Longer REQUIR ☑ DOH	RED	☐ Cance	lled		MICHAEL SMIT HEALTH & SAF	H, ENV		lele	ohone N -445-2			
				FACILITY IN	FORMATION						<u> </u>	
Name of Facility Where Abatem FACILITIES OFFICE, E					Type of Facility (4) School (K-12)		12)					
Street Address LIVINGSTON CAMPUS	3				Subchapter 8 (oth Sq. Feet: N/A	& commer					years	
City (5) PISCATAWAY	County (6 MIDD	LESEX		y <u>Code (7)</u> Use Only)	Current Use (prior if	being der	nolished): AC.	ADEMI	3		
Name of Monitoring Firm Hired ATC ASSOCIATES	by Bldg. (Owner (8)	ASCM 0098		Name of Contractor (9			-	-			
					GREENWOOD A	BATEM	ENT C	ONSL	JLTAN	TS, I	IC.	
3 TERRI LANE					Street Address 268 MAIN STREI	=T						
City, State, Zip Code					City State, ZipCode							
BURLINGTON, NJ (08016	T = 1 1	d		BUTLER, NJ 074 Telephone Number	105		Licon	se Num	bor		
Project Manager for Monitoring BRIAN KEARNY	<u>Firm</u>	Telephone 609-386		973-492-0477			0084		<u>bei</u>			
Scheduled Start Date (10) 12/23/11		Scheduled 0 12/29/11	Completio	on Date (11)	Name of OSHA Monit		E)					
Occupancy Status During Aba	atement (Check only o	ne)		ENVIROVISION, Street Address	INC.						
□ Facility Closed/Vacated Du □ Abatement Performed Outs	ring Entir	e Period of A	batemer	nt	20-21 WARGAR	AW ROA	AD					
Describe Structure → Describe: 5 PM T AS NECESSARY)	HURS '	TO MON 5	AM (24)	HR ACCESS	City, State, Zip Code FAIRLAWN, NJ							
Scope of Work (Check all that a	(vlgg	V4										
□≥3 sf or ≥ 3 lf ⊠ ≥ 160 sf or ≥						☐ Mir	Containn ni-Enclos ovebag P n-Exemp	sure rocedu	ire			dure
Location of Asbestos-Containin Material (ACM) in Facility (13)	Sole	ocation Norma ly by Maint./C ?? (12) S NO	lly Used ustodial NA		bestos Containing Mater nal systems insulation, s scell.)	ial	Amour (Speci or LF)	nt fy SF	Abate	ment T		
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					3100				X			
Name of Reg. Waste Hauler See Hauler Below #1 & 2	r ID#	Cubic Yards of Wast	e: 20	CY		e of Reg .O.W.S		Landfill h Landf	fill			
Hauler #1) Greenwood Abaten NJDEP # 12561 Hauler #2) Newark Carting, In NJ DEP # 4509			- Butler,	NJ 07405			posal Da /29/201	-		Rd. M 19067	ew Ford orrisville	
Completed by (Print or Type) RAYMOND C. PEDALI	NO S	Title SENIOR P MANAGER		СТ	Signature	log	7	<u>Date</u>		mber	06, 20	11
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State of New Jersey - Notification of Asbestos Abatement

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

GAC Project # 060-11
Client Project #

December 06, 2011 Agencies Notified □ EPA □ COA □ DOCA □ DOL □ D	
DEP-No Longer REQUIRED Data Cancelled Name of Contact MICHAEL SMITH, ENV. T32-445-2550	ars
Name of Facility Where Abatement is Taking Place (3) TILLET HALL, BLDG# 4146 Street Address LIVINGSTON CAMPUS City (5) PISCATAWAY Name of Monitoring Firm Hired by Bidg. Owner (8) ATC ASSOCIATES Street Address 3 TERRI LANE City, State, Zip Code BURLINGTON, NJ 08016 Project Manager for Monitoring Firm BRIAN KEARNY Scheduled Start Date (10) Scheduled Start Date (10) 12/16/11 Cocupancy Status During Abatement (Check only one) Street Address District Address Street Address	ars
Name of Facility Where Abatement is Taking Place (3) TILLET HALL, BLDG# 4146 Street Address LiVINGSTON CAMPUS Street Address Street Address Street Address Street Robins St	ars
LIVINGSTON CAMPUS City (5) PISCATAWAY County (6) MIDDLESEX Sq. Feet: N/A # of Floors: 6 Bldg. Age: 60+ year of Floors: 6 Bldg. Age: 60+ year of Monitoring Firm Hired by Bldg. Owner (8) ATC ASSOCIATES Street Address 3 TERRI LANE City, State, Zip Code BURLINGTON, NJ 08016 Project Manager for Monitoring Firm BRIAN KEARNY Scheduled Start Date (10) Scheduled Start Date (10) 12/16/11 Coccupancy Status During Abatement (Check only one) Describe Describe City, State, Zip Code County Code (7) State Use Only) Current Use (prior if being demolished): ACADEMIC Name of Contractor (9) GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address 268 MAIN STREET City, State, ZipCode BUTLER, NJ 07405 Telephone Number BUTLER, NJ 07405 Telephone Number 973-492-0477 00840 Name of OSHA Monitor 1 ENVIROVISION, INC. Street Address 20-21 WARGARAW ROAD City, State, Zip Code City, State, Zip Code	ars
City (5) PISCATAWAY County (6) MIDDLESEX County Code (7) (State Use Only) ACADEMIC Current Use (prior if being demolished): ACADEMIC Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ATC ASSOCIATES ASCM No. 0098 CREENWOOD ABATEMENT CONSULTANTS, INC. Street Address 3 TERRI LANE City. State, Zip Code BURLINGTON, NJ 08016 Project Manager for Monitoring Firm BRIAN KEARNY Scheduled Start Date (10) 12/16/11 City. State, Zip Code BUTLER, NJ 07405 Telephone Number Folget Manager for Monitoring Firm BRIAN KEARNY Scheduled Start Date (10) 12/16/11 Coccupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Describe City. State, Zip Code Current Use (prior if being demolished): ACADEMIC Name of Contractor (9) REENWOOD ABATEMENT CONSULTANTS, INC. Street Address 268 MAIN STREET City. State, ZipCode BUTLER, NJ 07405 Telephone Number Telephone Number 1 ENVIROVISION, INC. Street Address 20-21 WARGARAW ROAD City. State, Zip Code	
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City, State, Zip Code BURLINGTON, NJ 08016 Project Manager for Monitoring Firm BRIAN KEARNY Scheduled Start Date (10) 12/16/11 Scheduled Completion Date (11) 12/23/11 Scheduled Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Sity State, Zip Code BUTLER, NJ 07405 Telephone Number Project Manager for Monitoring Firm BUTLER, NJ 07405 Telephone Number Project Manager for Monitoring Firm Scheduled Completion Date (11) 12/23/11 ENVIROVISION, INC. Street Address 20-21 WARGARAW ROAD City, State, Zip Code	
BURLINGTON, NJ 08016 Project Manager for Monitoring Firm BRIAN KEARNY Scheduled Start Date (10) 12/16/11 Scheduled Completion Date (11) 12/23/11 Scheduled Completion Date (11) 12/23/11 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe Occupancy Status Outside of Normal Facility Hours - Describe	
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Scheduled Start Date (10) 12/16/11 Scheduled Completion Date (11) 12/23/11 Scheduled Completion Date (11) 12/23/11 ENVIROVISION, INC. Street Address Street Address Describe City, State, Zip Code	
12/16/11 12/23/11 Describe □ For Start PM 12/23/11 12/23/11 1 ENVIROVISION, INC. Street Address 20-21 WARGARAW ROAD City, State, Zip Code	
Occupancy Status During Abatement (Check only one) □ Facility Closed/Vacated During Entire Period of Abatement □ Abatement Performed Outside of Normal Facility Hours - Describe □ City, State, Zip Code □ City, State, Zip Code	
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Souther - Describe: 4 PM TO 5 AM (WEEKENDS 24HR ACCESS AS	
NECESSARY) FAIRLAWN, NJ	
Scope of Work (Check all that apply)	
□ Full Containment with Negative Pressure □ ≥ 3 sf or ≥ 3 lf □ Mini-Enclosure □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Pressure	
Location of Asbestos-Containing Material (ACM) in Facility (13) Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) Amount (Specify SF or LF) Amount (Specify SF or LF)	ncap Enclose
249, 257, 259, & 109 🗵 VAT 3200 SF 🗵	
Name of Reg. Waste Hauler See Hauler Below #1 & 2 NJDEP Waste Hauler ID # See Below Cubic Yards of Waste: 20 CY Name of Registered Land G.R.O.W.S. North La	
Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, NJ 07405 NJDEP # 12561 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 NJ DEP # 4509 Disposal Date 100 New F Rd. Morris 19067 215-736-17	ville, Pa
Completed by (Print or Type) RAYMOND C. PEDALINO SENIOR PROJECT MANAGER Signature Date December 06,	

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification (1) Name of Building Owner/Operator (2) Kirill Gurevich 12/5/11 Agencies Notified Street Address Type Notification DEC - 8 200 Old Short Hills Road []EPA [X] Initial Notification City, State, Zip Code []DEP ASBESTOS CONTROL & []Amended Short Hills, NJ 07078 [X] DOL LICENSING Notification Name of Contact [X] DOH Telephone Number []EMERGENCY Kirill Gurevich 973-216-4722 []DCA []Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private []School (K-12) []Subchapter 8 (Other than K-12) Street Address [x]Other (i.e., private & commer-21 Meeker Place cial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 2500 80 2 (STATE USE ONLY) Millburn Essex Current Use (Prior if being demolished) Residence Name of Monitoring Firm hired by Building ASCM No. Name of Abatement Contractor (9) Owner (8) AZTECH MANAGEMENT, Inc. 67 N/AStreet Address Street Address 86 Christopher St. City, State, Zip Code City, State, Zip Code Montclair, NJ 07042 Telephone Number Project Manager for Monitoring Firm Telephone Number License Number N/A (973) 744-8800 00371 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) 12/14/11 12/17/11 N/A Month Month Day Year Day Year Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period of Abatement []Abatement Performed Outside of Normal Facility City, State, Zip Code Hours - Describe: «OffHours Descript» []other - Describe: «Other Occupancy Descript» Scope of Work (Check all that apply) []Full Containment with Negative Pressure $[X] \ge 3$ sf or ≥ 3 lf [X] Renovation []Mini-Enclosure []>160 sf or >260 lf []Demolition [X] Glovebag Procedure []Non-Friable Procedure Is Abatement Type Location Normally Location of Description of NCLOSUR NCAPSUL Asbestos-Containing Asbestos-Containing Amount Used REPAI MOV Material (ACM) Material (ACM) Solely (Specify By Main-tenance/ SF or TO BE ABATED (i.e., thermal systems LF) insulation, surfacing, VAT, In Facility Custodial Staff (12) A (13)or other miscellaneous) Yes No N/A Pipe Insulation 110 lf X Basement X NJDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. of Waste 1.0 G.R.O.W.S. AZTECH MANAGEMENT, INC. 17040 Disposal Date City, State City, State 12/19/11 Morrisville, PA 19067 Montclair, NJ 07042 Title Completed By (Print or Type) Signature Date 12/5/11 Constantine Vivian President

State of New Jersey TOM UDO RHEES, NJ DOL

NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification	(1)		T	Nam	ne o	f Buil	dina (Owner / Operato	or (2)	E I	PET	W	<u>/ /</u>		7		
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120 N. Warren St								1123 Beave	er Stree	et							
City, State & Zip Co	ode							City, State & Zip Code									
Trenton, NJ 0860						Bristol, PA 19007											
Project Manager for	Telep				er	Telephone Number License Number											
Ryan Broadwate	609-					(215)788-6040 00509 Name of OSHA Monitor											
Scheduled Start Da	npletic		ate	(11)		Bristol Env					- 12						
12/5/11 Occupancy Status I				-		Street Address		Tillai iiic.			_						
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Service Transport Inc.								Disposal Date	City, S								
City, State New Castle, DE							12/7/11		esburg,	ОН							
Completed By (Print or Type) Title							Signature	^	***		Da						
Gino Pizzigon	AND RESIDENCE AND ADDRESS OF THE PARTY OF TH		Project				1.73	21.	N.		/jl	12	2/5	111		7	
Gino Pizzigoni					Man	age	r	Luno 1	1/1/	noon	1/						

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) Mercer County Technical School 12/02/2011 Type Notification Street Address Agencies Notified 1085 Old Trenton Road **EPA** Initial City, State, Zip Code ASBESTOS CONTROL & LICENSING DEP Amended Hamilton NJ 08690 Amendment # × DOL Emergency (including Telephone Number Name of Contact DOH justification) 609-586-5594 Mr. Sean Cavalier × Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Sypek Center - Building B School (K-12) Subchapter 8 (Other than K-12) × Street Address Other (i.e. private & commercial buildings, homes, 129 Bull Run Road etc.) # of Floors Bldg. Age Square Feet City (5) 37 43,576 Pennington Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) Vocational/ Technical School Mercer Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) First Phase Group Inc 00030 Environmental Connection, Inc. Street Address Street Address 567 52nd Street Suite #16 120 North Warren Street City, State, Zip Code City, State, Zip Code West New York, NJ 07093 Trenton, NJ 08608 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01144 201-785-7158 609-392-4200 Brian Holbig Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) 12/23/11 12/12/11 Street Address Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Facility Occupied during abatement Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 If Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Encapsulate Maintenance/ (i.e. thermal systems insulation, (Specify Remova Repair TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or In Facility (12)other miscellaneous) (13)Yes No N/A X 242 SF Boiler Ribs Packing Boiler Room X 4 SF X **Boiler Gaskets** Boiler Room X

Tank Insulation 250 SF X Boiler Room Х Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler of Waste Hauler ID No. Cumberland Landfill DJM Disposal Date City, State City, State Morrisville PA 109-113 Jacobus Ave South Kearny NJ Date Signature Completed by 12/02/11 Project Manager Edwin Precilla

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<u>.</u>	Design many and	DEN -	NIA - NITIFIC Pu	State State State SATION I	ARD COP	ABATE	MENT	DO		DAY	7 [1/3
Date of Notification (1) 12/02/2011			7	Vame of I	Building Cwner County Tec	Operator	(2) School	פ	EC 5	011DE	¢.:	- 8	20
Agencies Notified Typ	e Notification			Street Ad 1085 O	dress Id Trenton R	toad		17	m Book				****
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DOH DCA	Emergency (in justification) Cancellation	rctuding		Name of	Contact on Cavalier		- Contraction of the Contraction	12 NT	Telephone N - 609-586-5	umber 594	ent water	400 mt	dignis.
		Dia /3			TY INFORMA	TION	Type of	Facility (4					
Name of Facility Where Abate Sypek Center - Building	ment is Taking	Place (a)				50	hool (K-12) (Other than K-	12)			
Street Address 129 Bull Run Road							Ot etc	her (i.e. pr	veta & common	cial build	ings: l		Ģ:
City (5) Pennington					4.00		Square 43,576	3	# of Floors	3.		le.	
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Name of Monitoring Firm Hire Environmental Connect		wner (8)		A\$ĊM 00030		Name	of Abate Phase	ment Cont Group In	ractor (9)				
Street Address				10000			Address 62nd S	treet Sui	te #16				
120 North Warren Stree City, State, Zip Code Trenton, N.I 08608			-		City	Slate, Zip			1000				
Project Manager for Monitorin Brian Holbig	g Firm			Telephan 609-39	e No. 2-4200		Telephone No. License No. 201-785-7158 01144						
Start Date (10) 12/12/11		Schedul 12/23/		iplotion C	Date (11)	Name	of OSHA	Monitor			r.		
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Facility Closed/Vacuted Absternent Performed O Other - Describe: Focility	deide of blocm	of Encline	de lettere	ent		City:	State, Zip	Code	_				
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	-		Locati					Frembra			Abate		t
Location of Asbestos-Containing Male TO BE ABATED In Facility (13)	erial (ACM) O	U56	Varmali ed Sole intentr todial S (12)	ly by	Asbestos Co (i.e. therm	Description ontaining nal system facing, V or miscella	Material (no insulati AT, or	AGM)	Amount (Spearly 8F or LF)	Remocal	Repar	Encapsulate	Endusure
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City State 109-113 Jacobus Ave S			Dis	posal Dat	e	City, State Morrisvi	lle PA						
Completed by		Tipe	ect Ma	nager		Signatu	elen	Res.	le.	Date 12/02/	11		

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Date of Notification (1) 1/23/11			Name	of Building	Owner/Operato	John Patell	nec -	- <u>R</u>	2011		
Agencies Notified	Type Notification	-	+	Street	Address			1 0.0		C-1/1		
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EPA DEP DOL	Amended Amendment #		.	City, S	tate, Zip C	ode	ranbury, NJ	ASBESTUS LICE	NSIN		α	
⊠ DOH	☐ Emergency (in justification)	ncluding	-	Name	of Contact		1	Telephone Numb				
DCA	Cancellation				J	ohn Patella	14.50	(609)	395-	147	4	
			(V.)	FAC	CILITY INF	ORMATION	T = 75 W	74)				
Name of Facility When							Type of Facility School (K-1					
Street Address		idence					Subchapter Other (i.e., p	8 (Other than K-12 orivate & commercia	!) al buile	dings	ř.	
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City (5)	Cra	nbury	,				2500	2	. _	1.	50	
County (6)	fiddlesex			Cour	nty Code (7 ONLY)) (STATE	Current Use (P	rior if being demolis Residence	hed)			
Name of Monitoring Fi		Owner	$\overline{}$	ASCM	No.		ment Contractor (9		т.			
(8)	MECS							mental Service	es, II	ıc.		
Street Address	PO Box 34	1				Street Address		30x 322				
City, State, Zip Code						City, State, Zip	Code	n NI 00501				
	Crosswicks, NJ	08515					Allentow	n, NJ 08501				_
Project Manager for M				phone	No. 8-4070	Telephone No. (609) 2	59-9688		049	3		
William \ Start Date (10)	Weisgarber Jr.	duled C	-			Name of OSHA	Monitor	1				_
12/6/11	Conc		/11/		wordson the first of the		M	ECS				_
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Other - Describe:	8AM - 4:30PM	1	, , 100			51.J, Oldio, 210		ks, NJ 08515				
Scope of Work (Chec ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	k all that apply)	X Re	enovat emolitic	ion on		Mini-Er	ontainment with Ne nclosure pag Procedure exempted (*) and Ne	gative Pressure on-Friable Procedu	re			
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basement/c	rawlspace			X		pipe insula	tion	124 LF	×			-
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City, State						Disposal Date	City, State	Tullytown,	РΔ	(1.0211)		
Allentown, NJ						1/11/1/2/ Signature	M+ /-	Date	А	-		-
Completed By Mahlon E. S			ojec	t Mar	nager		1/		12/6	5/11		
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SERVICE INC. ON # 21/2

Date of Notification (1)				Name	of Buildin	g Owner/Operato	* 11	The second secon		111	Щ-	
	/23/11		John Patella C 8 2011									
Agencies Notified	Type Notification	1		Stree	t Address		1 4			1	-	
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DEP DOL	Amendment a		_	City, S	State, Zip C		ranbury, NJ	ASBESTOS CUNTRO 08512CENSING	L &			
⊠ DOH	Emergency (i	meiudini	9	Name	of Contac	t	accomediant	Telephone Num				_
□ DCA	Cancellation					John Patella	Fig reconstructed the process of	(609)	395	147	4	no to
			(8)	FA	CILITY INF	ORMATION	V = 75 '89					
Name of Facility Where		ng Place sidenc					Type of Facility School (K-1	1.100				
Street Address	95 Nor						Subchapter	8 (Other than K-1) private & commerci	2) al buil	dings	,	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
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Name of Monitoring Firm	The second secon	Owner		ASCM	No.	Name of Abaten	nent Contractor (9					=-
	MECS					Stev	vens Environ	mental Service	es, Ii	ıc.		
Street Address	DO D 01			5		Street Address	DO I	222		realities ex		
	PO Box 34	1				01.00-1-7-6		30x 322				_
City, State, Zip Code Cr	osswicks, NJ	0851	5			City, State, Zip C		n, NJ 08501				
Project Manager for Mor			AND VALUE OF U.S.	phone	No.	Telephone No.		License No.			934126	
	eisgarber Jr.		-		8-4070		59-9688		049	3		_
Start Date (10)	Sche	eduled C			te (11)	Name of OSHA		ECS				
12/6/11 Occupancy Status Durin	Abstament (Che		2/8/	11.		Street Address	171	ECS				_
☐ Facility Closed/Vacate				ment		Otteet Address	PO E	3ox 341				200-22
☐ Abatement Performed	d Outside of Norma	al Facilit				City, State, Zip C	Code'					_
Other - Describe: 8	SAM - 4:30PN	1					Crosswich	ks, NJ 08515				
Scope of Work (Check a	ill that apply)					☐ Full Co	ntainment with Ne	gative Pressure				
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Stevens Environn	H	lauler ID	No.	of Waste 2 CU		T.R.R.F., Ir	ıc.					
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Allentown, NJ						12/8/11/		Tullytown,	PA			
Completed By	niect	Man	ager	Signature	/	Date	11/2	3/11				
Mahlon E. Ste	VC115	11	Office	. IVIAI	ugoi	-1-/1//						

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Date of Notification (1)				Name	of Buildin	ng Owi	ner/Operator ((2)	<u> </u>	7	17	15.0		111
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	ent # <u>3-12</u>	Company of the	1	Car	oe May C	Court	house, NJ		LICEN	SING	OF (œ		
DCA Emerger (NJAC 5:23-8) Emerger		ing			of Contac				Telephone Nu	umber				
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		Ulas Egam	100/100	FA	CILITY IN	NFOR	RMATION							
Name of Facility Where Abatement is	Taking Pla	ace (3	()			15		Type of Facility	(4)					
Cape Regional Medical Center	5							School (K-1:						
Street Address									8 (Other than K- private and comm		bu	ildina	2	
2 Stone Harbor Blvd								homes, etc.		noroia,	Du	iiuii ig	5,	
City (5)		******						Square Feet	# of Floors		Blo	lg. A	ge	
Cape May Courthouse								50,000	2		4	10+		
County (6)				Cour	nty Code (7)(STA	TE USE ONLY)	Current Use (Pi	rior if being dem	olished	i)			
Cape May														
Name of Monitoring Firm Hired by Buil	ding Own	er (8)	П	ASCM	No.	Nan	ne of Abateme	atement Contractor (9)						
Criterion Labs, Inc	72.05					71200		VIRONMENTA						
Street Address							eet Address				-			-
3370 Progress Dr						1	123 BEAVE	R STREET						
City, State, Zip Code		-				City	, State, Zip Co							
Bensalem, PA 19020							RISTOL, PA							
Project Manager for Monitoring Firm	77	- 1-	Γele	ephone	No.		ephone No.	License No.						
Mike Panapresso		.		15-244		1	15-788-6040	40 00509						
	Scheduled	Com	nple	tion Da	te (11)	Nan	ne of OSHA N	Monitor						
11/28/11			53.	/		В	RISTOL EN	VIRONMENTA	L, INC.					
Occupancy Status During Abatement (Check on	ly one)			Stre	eet Address						1-8-2	
☐ Facility Closed/Vacated During Ent	ire Period	of Ab	ate	ment		1	123 BEAVE	R STREET						
						City	, State, Zip Co	ode						
Time of Abatement:AM	PM/5:	00PN	1-1	:30AM	3/11		RISTOL, PA							
Scope of Work (Check all that apply)	12-11	0	N;	104	5/11		•							
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NEW CASTLE, DE 19720						WAYNESE	BURG, OH 446	880				20		
Completed By (Print or Type) Brian Scafiro Title Estimator							Signature	0 1.	1.0	Date	/	1	,	
Brian Scafiro	7				Brian	Scafero,	gl-	12	12	///				

Ck#2182

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Project Manager for Monito			T-	lank		BRISTOL, P	A 19007							
Mike Panapresso	9		1	lephon	4-1300	Telephone No.	045 700 0040							
Start Date (10)	75	cheduled	-			215-788-604		00509						
11 / 28 /				3 /		Name of OSHA								
Occupancy Status During A						BRISTOL EN	VIRONMENT	AL, INC.						
☐ Facility Closed/Vacated				ement		Street Address								
Abatement Performed O	utside of No	mal Facili	tv Hou	ırs - De	scribe	1123 BEAVE								
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Scope of Work (Check all th	at apply)	TC 12/2	2-5	PM TO 1	130AM =	BRISTOL, PA	19007							
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NEW CASTLE, DE 1972						BURG, OH 44688	3							
ompleted By (Print or Type)	T	itle				Signature								
Brian Scafiro		Estimat	or			Brian	Scalin	In la	te 1/29	/11	,			

REV #2

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3370 Progress Dr					6.	Street Address					
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Bensalem, PA 19020						City, State, Zip Co					-
Project Manager for Monitoring	Firm	-	Tel	anhan	e No.	BRISTOL, PA	19007				
Mike Panapresso					e No. 14-1300	Telephone No.		License No.			
tart Date (10)	Schr	halube			Pate (11)	215-788-6040		00509			
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Project Manager for Monitoring Firm	1			Teleph	one No.		Telephone No.		License No.				
Mike Panapresso					244-1300		215-788-60		00509				
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cope of Work (Check all that apply)			_				BRISTOL, P	A 1900/					
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43 or

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

Date of Notification (1) Name of Building Owner/Operator (2) 12 05 11 Redco Engineering Agencies Notified Type Notification Street Address Initial 137 Elmer Street □ DEP City, State, Zip Code □ DCA (NJAC 5:16) Amendment #1 ASBESTOS CONTROL & Westfield, NJ 07091 □ DHSS ☐ Emergency (including HOENSING ☐ DCA justification) Name of Contact Telephone Number (NJAC 5:23-8) ☐ Cancellation Will Jess 732-522-1142 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Courier News ☐ School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings, 1201 US Highway 22 West homes, etc.) City (5) Square Feet # of Floors Bldg. Age Bridgewater 20,000 2 30+ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Somerset Vacant Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) National Monitoring Labs Diamond Huntbach Construction Corporation Street Address Street Address 811 Church Road, Suite 217 500 East Luzerne Street City, State, Zip Code City, State, Zip Code Cherry Hill, NJ 08002 Philadelphia, PA 19124 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Ronen Bakshi 856-663-9077 215-739-8166 00646 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12 / 06 / 11 12 / 15 / 11 SAME AS ABOVE Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7AM-5PM/ PM-Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 lf ☐ Renovation ≥160 sf or ≥260 lf □ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Repair Asbestos-Containing Material (ACM) Encapsulate Asbestos Containing Material (ACM) Amount Remova Enclosure Maintenance/ TO BE ABATED (i.e., thermal systems insulation, surfacing, (Specify Custodial Staff? IN Facility VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement Mechanical Room \boxtimes Spray-on Fire Proofing 275 SF M **Now Exterior** П П П П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Diamond Huntbach Construction Minerva Landfill 2 cy 19689 City, State Disposal Date City, State Philadelphia, PA 19124 12/15/11 Waynesburg, OH 44688 Completed By (Print or Type) Signature Charles F. Imbimbo **Project Manager**

ASB-41 JUL 01

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT 13/10 cx (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) 12/5 Name of Building Owner/Operator (2) 11 Rite Aid Corp Agencies Notified Type Notification Street Address 877 Kings Highway SUite 100 M Initial □ DEP Amended City, State, Zip Code ☐ DCA (NJAC 5:16) Amendment # 1 12/3/11 ASBESTOS CONTROL & West Deptford, NJ 08096 □ DHSS LICENSING ☐ DCA justification) Name of Contact Telephone Number (NJAC 5:23-8) ☐ Cancellation **Todd Waltzer** 856 686 0841 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) ☐ School (K-12) RIte Aid Store #748 TRACT #1 Site Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings, 524 Landis Ave homes, etc.) City (5) Square Feet # of Floors Bldg. Age Vineland 4400 120+ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Cumberland retail space Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health & Safety Services, Inc. 117 Controlled Environmental Systems Street Address Street Address 318 12th Street 1121 N. Bethlehem Pike - Suite 60 City, State, Zip Code City, State, Zip Code Hammonton, NJ 08037 Spring House, PA 19477 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Jim Proctor 609-704-8850 215-542-7000 00847 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12 / 19.3i/ 11 11 / 28 / 11 CES Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 1121 N. Bethlehem Pike - Suite 60 ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-7:00PM/ PM-Spring House, PA 19477 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 If ☐ Renovation ☐ Mini-Enclosure □ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally I ocation of Description of Used Solely by Repair Encapsulate Removal Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, surfacing, (Specify Custodial Staff? IN Facility VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Roof Roofing material \boxtimes 2400 SF \boxtimes exterior transite siding П П \boxtimes transite 200 SF X П interior 1st floor X Floor tile 2400 SF \boxtimes NJDEP Waste Name of Registered Waste Hauler Cubic Yards of Name of Registered Landfill Hauler ID No. Waste STG Minerva Landfill 160 CU 20990 City, State Disposal Date City, State New Castle, DE 12/19/2011 Waynesburg, OH 44688 Completed By (Print or Type) Title Patricia Visco Office Manager

* Do not use this form for asbestos licensure exempted activit

ASB-41 JUL 01 سائ دار

New Jersey Department of Health and Senior Services Consumer, Environmental & Occupational Health Service PO Box 369, Trenton, NJ 08625-0369

DEC - 8 2011

Telephone: 609-826-4950 Fax: 609-826-4975
NOTIFICATION OF NON-FRIABLE ASBESTOS WORK ACTIVITIES

ASBESTOS CONTROL &

Must be submitted 10 days prior to the beginning of work. P	lease type or print legibly CENSING
Type of Notification (check one) and Date S	Submitted
[] Initial [] Amended [] Cancellation [] Emergency (must include justification)	ion) Date of Notification: 12/2/1/
Building Information	
Name of Daily 10	
Street Address: 36 Dogwood Road City: West	Dec. 2 ATALIE
Name of Contact: Cothering Lane	State: AT Zip: (1765)
	Telephone No.: <u>~ (() - / () () () </u>
Facility Information	
Name of Facility Where Work Activity is to Take Place:	
Describe Facility Use: Residence	
Street Address: 36 Dogund Rd. City: 100-100	30000 State: N 5 Zip: 1/1/1/52
County Name: ESSEX	County Code (state use only).:
0-1-1-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1	uled Completion Date: 12/15/11
Occupancy Status During Activity (check only one):	
[Y Facility Closed/Vacated During Entire Activity	
[] Activity Performed Outside Normal Facility Hours—Describe:	
[] Other—Describe:	
Scope of Work (check all that apply):	
[v] Floor Tile Square Footage: 600 34 Ft	. 201
[] Mastic Square Footage:	
[] Other: Square Footage:	Percentage Asbestos:
Contractor Information	
company Name: Hztech Manage ment	Telephone No.: 973-744-8800
St (1)	State: NU Zip: 07042
lew Jersey Asbestos License Number (if applicable):	
lonitoring Firm (if applicable):	Telephone No.:
Signature	
ompleted By the examination of the Control of the C	12. 1 2-
ompleted By (type or print legibly):	TESTOR A. F.
gnature: Date:	12/2/11

Mond-

Date of Notification (1)			Name of NJ SD		Owner/O	perator (2))EC	Ē	HW (E				
Agencies Notified Type Noti			Street Ad 1 West		Street		DEC		2011				
DOL Ame	nded ndment #_5	-	City, State Trento				A DEG		2011	-	,		
■ DOH	rgency (including ication) cellation		Name of Bruce				ASBES!		9.306.54				
			FACIL	ITY INFO	RMATIC	NC	Set out		A	about now.			
Name of Facility Where Abatement	is Taking Place (3)					Тур	e of Facility (RESIDENCE -	or other process	or of the same and	marite.	407	
Former Bank Building							School (K-1 Subchapter		er than K-12	2)			
Street Address 391 MLK Drive						×	Other (i.e. p	rivate 8	& commercia	al build	lings,	home	es,
City (5)						Squ	uare Feet	# of	Floors	- 1	ldg. A	ge	
Jersey City, NJ 07305							600 +	1			5+		
County (6)			County C			0.00	rrent Use (Pric			ied)			
Hudson	ildia - Owner (0)		ASCM	No			batement Cor		The supplement				
Name of Monitoring Firm Hired by E Environmental Tactics, Inc.	suliding Owner (8)		0004			ALKAT Construction LLC							
Street Address						Street Add	ress						
64 Broad Street						PO Box							
City, State, Zip Code Matawan							nd Park, N.	J 0742					
Project Manager for Monitoring Firm Tom Geiger		Telephon	e No.		Telephone 973.893			License N 01097	0.				
Start Date (10) 12/12/11	Scheduled 1/12/12		mpletion D	ate (11)		Name of 0 Angel R	SHA Monitor amov						
Occupancy Status During Abateme)				Street Add	ress							
Facility Closed/Vacated During	Entire Period of Ab	ater	nent				Bride Ave.						
Abatement Performed Outside Other – Describe:	of Normal Facility I	Hour	s			City, State, Paterso							
Scope of Work (Check All That App	ily)							0 100					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova moli	ation ition			×	Full Containme Mini-Enclosure Glovebag Prod	e cedure				e	
						Non-Exempted (*) and Non-Friable F					Abatemen		
		ocat			200	200021 0002				Ту	ре		
Location of Asbestos-Containing Material (A TO BE ABATED In Facility (13)	ACM) Used Main Custo	Sole	ely by ance/ Staff?		tos Cont thermal surfac	scription of aining Mater systems ins cing, VAT, o niscellaneou	ulation, r	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							-		w	<u> </u>
Main Floor		Χ		С	eiling a	nd wall pl	aster		00 SF	X			-
Main Floor		X			Fil	er paper			00 SF	X	_	-	_
Mezzanine/combine ar	Χ				VAT		_	235 SF	X		_	_	
Roof	X		- 200 - 539	100	fing material 4000 X								
Name of Registered Waste Hauler		NJDEP W		Cubic of Was	c Yards Name of Registered Landfill								
ATLANTIC CARTING LLC	1	26085		40+				em, PA					
City, State 1141 Rout 23 Wayne, NJ				Dispos	sal Date	City, Stat Bethle							
Completed by Uros Spasic				S	signature/	45			ate 2/1/1	1			

Nock

Date of Notification (1)			-	Owner/Op	perator	(2)		- ^	0 0	m44	II.	11					
11/1/11				NJ SD			1		<u>lli Ut</u>	:C ·	- 8 2	Ull	Sunater Sunater	1			
Agencies Notified	Type Notification			Street Address 1 West State Street				2	-			······································		1			
DEP DOL	Amended Amendment		_	10000	te, Zip Co on, NJ 0				ÚL &								
П рон	Emergency (T	Name of	Contact		100	Telephone Number									
DCA	Cancellation				Leiblich			Title tion of the	No charge and a second	60	9-414-	3367.	. n. 48-1		- 21		
		. Di (0)		FACIL	LITY INF	ORMATIO	7	т	-55305-74	,							
Name of Facility Where	Abatement is Takin	g Place (3)		, 7 ₂ .					of Facility (4	3							
Former Trai Buildin	LO ILAIN	CIAI	101	1 214	14D/	94			School (K-12 Subchapter (er than K	-12)					
395-397 MLK Driv	Δ.						1	N (Other (i.e. pr				ldings	, hom	ies,		
City (5)	<u> </u>					-		- 6	elc.) re Feet	# 0	f Floors		Bldg.	Δαα			
Jersey City, NJ 07	305							3500		1	1110013	100	55+	,90			
County (6)		10.00	T	County C	Code (7)			Curre	nt Use (Prior	r if bei	ng demol	ished)					
Hudson, NJ				(STATE U	ISE ONLY	"	_	Aba	ndoned b	uilidr	g	53					
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.		Name	of Abat	tement Cont	ractor	(9)						
Envrionmental Tac	ctics, Inc.			0004	5		ALK	AT Co	onstruction	n, LL	С						
Street Address	**************************************							Addres		100000000000000000000000000000000000000		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
64 Broad Street						PO Box 603											
City, State. Zip Code						City, State, Zip Code Woodland Park, NJ 07424											
Matawan, NJ 0774										0742							
Project Manager for Mo Tom Geiger	nitoring Firm				0.2217		Telephone No. License No. 973.893.7005 01097										
Start Date (10) 12/26/11		Scheduled 1/27/12		npletion E	Date (11)			ne of OSHA Monitor atko Nedich									
Occupancy Status Durin	ng Abatement (Chec	k Only One	2)			Street Address											
Facility Closed/Vac	cated During Entire I	Period of Al	baten	nent			1 Mo	untai	n Ave.								
Abatement Perform	ned Outside of Norn	nal Facility	Hours	3					p Code								
Other - Describe:				te constitution		$- \bot$	Mon	tville,	NJ 07045								
Scope of Work (Check /	All That Apply)	-						7									
≥3 sf or ≥3 lf							×××	Min Glo	Containment i-Enclosure vebag Proce i-Exempted	edure	_			ro			
		1						1 1401	1-Exempled	() air	3 14011-1 11	aule Fit		emen	ıt		
			_ocati ormal			-	Description of Containing Material (ACM)						Туре				
Locatio Asbestos-Containing		Used	Sole	ly by	Asbes					Α	mount			E			
TO BE AB	BATED	Custo	ntena	175533300	(i.e.	thermal s surfaci			tion.		pecify or LF)	Ren	Re	Encapsulate	Ench		
In Faci			(12)			other mi				0,	0. 2. /	Removal	pair	Sula	osure		
		Yes	No	N/A										ate	Ci Ci		
Main F	loor	and the same of th	X			,	VAT		Ì	27	00 SF	Х					
Main F	loor		Х		Ce	eilling ar	nd wal	ll plas	ter		50 SF	Х	-				
Basement/cr	rawlspace		X			Pipe i	nsula	tion		2	70 LF	X	_				
Roc	of		Χ			Roofin	g Mat	terial		24	00 SF	X					
Name of Registered Waste Hauler				NJDEP Waste Cubic			ic Yards Name of Re				Registered Landfill						
ATLANTIC CARTING LLC Hauler ID 26085					No.	40+											
City, State 1141 Rout 23 Ways	ne, NJ					Disposa	Sal Date City, State Bethlehem, PA										
Completed by		Title				Sig	gnature	7				Date	. 5				
Uros Spasic		GM					12/05/11										

State of New Jersey - Notification of Asbestos Abatement

meck		(Pursuan	t to <u>N.J.A.C</u>	2. 8:60-7 and 12:120-7)		EC	E.1	N/ 19	2						
ate of Notification (1)				Name of Building Owner/C Dover Blackwell Re	operator (2) ealty, Inc.				-						
December 6, 20 gencies Notified	Notification	Type		Street Address 64 East Midland Avenue											
EPA DCA	Notification ded Certification gency (inc	ation # 1	City, State, Zip Code Paramus, New Jersey 07652 SEESTOS CONTROL &												
x DOL DEP		cation)		Name of Contact Tom Allesandrello Telephóne Number 201-615-2401											
x DOH	Li Cano	Cilcu	FACILITY IN	FORMATION											
lame of Facility Where Abatement	is Taking Place (3	1		Type of Facility (4)											
Commercial Building			<u> </u>	School (K-12) Subchapter 8 (other the Other (i.e. private & co	nan K-12) N	on-Sub Ch	apter 8-	Non-Fria	ble						
Street Address 1-5 Blackwell Avenue			1. (2)	Sq. Feet: Unknown	2 # of Flo	ors: Bld	g. Age:	70 ye	ears						
3[[A [2]]	nty (6) erris	County C (State Us	ode (/) e Only)	Current Use (prior if being demolished):											
Name of Monitoring Firm Hired by	Rida Owner (8)	ASCM No	<u>).</u>	Name of Contractor (9)											
Name of Monitoring Fifth Philed by EnviroVision Consulta	nts inc.	00079		GREENWOOD ABA	ABATEMENT CONSULTANTS, INC.										
Street Address 20-21 Wagaraw Road, Bl	dg # 34A			268 MAIN STREET											
City, State, Zip Code				City State, ZipCode Butler, NJ 07405											
Fairlawn, NJ 07410	Talanhan	e Number		Telephone Number License Number											
Project Manager for Monitoring Fir Fred Larson	36-9145		973-492-0477 00840												
Scheduled Start Date (10) Documber 17, 2011 Scheduled Com December			Date (11)	Name of OSHA Monitor											
December 17, 2011				EMSL inc. Street Address											
Occupancy Status During Abates Facility Closed/Vacated D Abatement Performed Ou	hiring Fillie Peli	ou of Abatem	nent	1056 Stelton Road											
Describe Other – Describe: Non-				City, State, Zip Code Piscataway, NJ 0	8854										
Source of Work (Check all that an	(ylag				Full Cor	ntainment v	with Neg	ative Pre	essure						
Source of Work (Green			Renova	tion		nclosure									
\geq 3 sf or \geq 3 lf			Demolit		Gloveba	ag Procedu	ire	- Crioble	Droce	dure					
$\square \ge 160 \text{ sf or } \ge 260$						empted (*)	Abater	nent Typ	e	uuic					
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location No Solely by Mair Staff? (12)	rmally Used nt./Custodial	Description o (ACM) (i.e. the VAT, or other	f Asbestos Containing Material hermal systems insulation, surf r miscell.)	acing, (S	pecify SF LF)	1	e Repair		Enclose					
ast Floor	YES NO	O NA	VAT & Ma	astic	3,	000 SF	X								
1 st Floor			10.4	Cubic Yards of Waste:		Nam	e of Regi	stered La	andfill						
Name of Reg. Waste Hauler See Hauler Below # 1 & 2	Waste Haule elow			30	nedougill Landfill										
Hauler #1) Greenwood NJ DEP # 1 Hauler #2) Newark Card					Decei 2011	mber 23	,	Route 2 Bridgep 304-842	, Box 68 ort, WV	A A					
Completed by (Print or Type) Marin Graure	Title	R PROJE	CT	Signature Marin Gra	nber 6, 2011										

GAC # 2011-301

Please Note: Amendment # 1 - Changes: Non-Friable - Non Sub Chapter 8

State of New Jersey - Notification of Asbestos Abatement

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

Date of Notification (1)				Name of Building Owner Dover Blackwell	er/Operato	r (2)		1111	1							
December 5, 20		- Tuna		Street Address	Tourty,	DEC	-8.7	UIT III								
Agencies Notified	Notification In	cation	64 East Midland A	venue				1								
x EPA	City, State, Zip Code															
DCA		ded Certifi rgency (in		Paramus, New Jersey 07652 STOS CONTROL &												
x DOL	OL justification)					Name of Contact Telephone Number										
X DEP	□ Cano			Tom Allesandrelle	0	201	1-615-2	2401								
x DOH	- Carre	oliou -	FACILITY IN	ORMATION			10000000	de a company	1,12-11							
Name of Facility Where Abatement i	s Taking Place (3)	TATOLETT	Type of Facility (4)												
Commercial Building	3 Taking Fidoo (-1		School (K-12)												
Commercial Building				Subchapter 8 (other	than K-12	2)										
Street Address 1-5 Blackwell Avenue				Other (i.e. private & c Sq. Feet: Unknow	commercia n 2 # o	l buildings, h f Floors:	omes, et Bldg. A	tc.) <u>Age:</u> 70 yea ı	rs							
Cour	nty (6)	County	Code (7)	34.1.4.4												
ORY (O)	rris		Jse Only)	Current Use (prior if be	ing demol	ished):		9								
Name of Monitoring Firm Hired by B	Ida Owner (8)	ASCM N	No.	Name of Contractor (9)												
EnviroVision Consultat	nte inc	0007	9			IT CONC	HTAN	ITC INC								
Enviro vision Consultar	uts me.			GREENWOOD AB	AIEME	41 COMP	JLIAN	113, 1140.								
Street Address				Street Address												
20-21 Wagaraw Road, Blo	ig # 34A			268 MAIN STREET	-											
				City State, ZipCode												
City, State, Zip Code				Butler, NJ 07405												
Fairlawn, NJ 07410	Telephon	o Number		Telephone Number		Lice	nse Num	ber								
Project Manager for Monitoring Firm Telephone No. 973-636-																
Fred Larson	373-0	0-31-0		973-492-0477 00840												
Scheduled Start Date (10)	Schedule	d Completion	n Date (11)	Name of OSHA Monitor												
December 17, 2011	Decem	ber 23, 2	2011	EMSL inc.												
Occupancy Status During Abaten	nent (Check only	y one)		Street Address												
Facility Closed/Vacated Du Abatement Performed Outs	iring Entire Perio	od of Abater	ment	1056 Stelton Roa	d											
Abatement Performed Outs Describe	side of Normal i	acinty rious	3 -	City, State, Zip Code												
Other – Describe:				Piscataway, NJ	08854											
Source of Work (Check all that app	ly)				F C	Cantainmont	with No	egative Pressure								
					A CONTRACTOR	i-Enclosure	WILL INC	galive i ressure	•							
\geq 3 sf or \geq 3 lf			Renovatio				dea									
$\square \ge 160 \text{ sf or } \ge 260$			Demolition	l .	Non	ebag Proced	uie *\ and N	on-Friable Prod	edure							
			Description of A	sbestos Containing Materia		Amount	Abate	ement Type								
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Nor Solely by Maint Staff? (12)	mally Used L/Custodial	(ACM) (i.e. ther VAT, or other m	mal systems insulation, sur	facing,	(Specify SF or LF)		ove Repair Encap	Enclose							
	YES NO	NA				0.000.05	וכיו									
1 st Floor		X	VAT & Mas	tic		3,000 SF	X									
Name of Reg. Waste Hauler	NJDEP	Waste Haule	rID#	Cubic Yards of Waste				gistered Landfill								
See Hauler Below # 1 & 2	See Be				30		adown	II Landfill								
Hauler #1) Greenwood A NJ DEP # 125 Hauler #2) Newark Cartin	61				7.00	ember 23 1	3,	City, State Route 2, Box 6 Bridgeport, W 304-842-2784	VA							
	Tials			Signature		Dat	<u>e</u>									
Completed by (Print or Type) Marin Graure Title SENIOR PROJECT MANAGER				Marin Gra	eure			ber 5, 2011								

43/2

Date of Notification (1) 12/6/11					Name of Building Owner/Operator (2) CAMILLE COSTANZA												
Agencies Notified	Type Notification			Street A	ddress	Δ\/ΕΝΙ	IF		FC -	- 8 2011		 					
EPA DEP DOL DOH	Initial Amended Amendment Emergency (justification)	(including	-	City, Sta CRAN Name of	ate, Zip C IFORD, f Contact	ode NJ 070	016	ASBESTOS CONTROL &									
☐ DCA	☐ Cancellation			1475-1700	LLE CO		*	- Call was samplemented	9	08-931-9	888						
Name of Facility When RESIDENCE Street Address	re Abatement is Takin	g Place (3)		FACI	LITY INF	ORMATI	ON	Type of Facility School (K-Subchapte	12) r 8 (Oti			eri	*, **				
316 CASINO AVI	ENUE 				-			Other (i.e. private & commercial buildings, etc.) Square Feet # of Floors Bldg. A						es,			
CRANFORD								1500				50 +					
County (6) UNION				County (USE ONLY)		Current Use (Pr	ior if be	eing demolis	sned)						
Name of Monitoring Fi N/A	rm Hired by Building (Owner (8)		ASCM	l No.			e of Abatement Contractor (9) O BROTHERS CONTRACTING, INC.									
Street Address								et Address O RUTHERFORD BLVD.									
City, State, Zip Code							City, S	State, Zip Code IFTON, NJ 07014									
Project Manager for Monitoring Firm					ne No.		Teleph	phone No. License No. 3-956-8700 00494									
Start Date (10) 12/9/2011		Scheduled 12/12/20		npletion [Date (11)			e of OSHA Monitor ME AS (9) ABOVE									
	acated During Entire F	eriod of Ab	aten					Address tate, Zip Code									
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova		,		×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
		ls Lo	cati	on				•		Abatement Type							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Norma Used Sol Maintena Custodial (12)						tos Cont thermal surfac		Material (ACM) s insulation, T, or	(Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure			
BASE	MENT		No X	N/A			VAT		00SF	Х							
N																	
TWO PROTHERS CONTRACTING					NJDEP Waste Cubic \ Hauler ID No. of Was				Name of Registered Landfill WASTE MANAGEMENT G.R.O.W.S.								
City, State CLIFTON, NJ	CONTINUING	2	1	8743			al Date /2011	te City, State									
Completed by	GUARANIA	Title					ignature	mora do vieze, i / i									
MICHELE MLADENOVIC SECRET							M	Mendenonia 12/6/11									

Date of Notification (1 11/29/11		Name of Building Owner/Operator (2) E C E W E														
Agencies Notified	Type Notification			Street Address 316 CASINO AVENUE												
EPA DEP	Initial Amended			City, Sta	ate, Zip C	ode			DEC -	8 2	011	16	!			
▼ DOL	Amendment Emergency	(including														
DOH DCA	justification) Cancellation				LLE CO		NZA		ASBESTOS (90	8-931		Name of the last			
Name of Facility When	e Abatement is Takin	g Place (3)	FACI	LITY INF	ORMA	ATION	Type	of Facility (4)	TO THE LOCAL PROPERTY OF THE PARTY OF THE PA		j			
RESIDENCE			,						School (K-1	2)			100			
Street Address 316 CASINO AVE	ENUE				×			×	Subchapter Other (i.e. p	8 (Oth rivate	er than l & comm	K-12) ercial b	uildi	ngs,	hom	es,
City (5) CRANFORD								Squa 150	etc.) are Feet 00	# 0	f Floors		Bldg. Age 50 +/-			
County (6) UNION				County (Code (7) USE ONLY)		Curr	ent Use (Pric	or if be	ing dem	olished)				
Name of Monitoring Fi N/A	rm Hired by Building	Owner (8)		ASCM	No.				atement Con			ΓING,	INC).		
Street Address								et Address								
City, State, Zip Code			-				550,000	RUTHERFORD BLVD. State, Zip Code								
				- !			CLIF	IFTON, NJ 07014								
Project Manager for M		Telephor	ne No.			phone No. License No. 3-956-8700 00494										
Start Date (10) 12/9/2011	d Cor 2011	mpletion [Date (11)				HA Monitor S (9) ABO	VΕ								
Occupancy Status Dur	e)				Street	Addre	ess									
Facility Closed/Va Abatement Perfor Other – Describe:	rmed Outside of Norm UNOCCUPIED	Period of A nal Facility	bater Hour	nent s			City, S	State, Z	Zip Code							
Scope of Work (Check	All That Apply)									the No.				-		-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoli				- ×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
		99.50	Locat	2000000					Abateme					ment		
Locati Asbestos-Containir		Used	orma d Sole	ely by	Asbes		Description ontaining M		L(ACM)	CM) Amount		-	Type			
<u>TO BE A</u> In Fac (13	BATED cility	1,000,000,000	ntena odial ((12)	Staff?		therm	al systems facing, VA r miscellar	s insula T, or	ation,		Specify or LF)	Kemoval		Repair	Encapsulate	Enclosure
2.05		Yes	No	N/A			. =					4	L		œ.	
BASEN	MENT		X			VA	AT/MAS	TIC	TIC 6408			X	+	+		
Name of Registered W	aste Hauler		IN	JDEP W	aste	Cub	ic Yards		Name of R	Registe	red Lan	Hill				,
TWO BROTHERS		te te	-	lauler ID I 8743	7.555	0.000.5	/aste	WASTE MANAGEMENT G.R.O.W.S.								
City, State CLIFTON, NJ						1. SASSINGS 4	osal Date 12/2011		City, State MORRIS		LE, PA					
Completed by MICHELE MLADE!	NOVIC	Title SECRETARY							Date 11/29/2011							