Date of Notification (1)				Name o	f Building	Owner/Operator (2	2)					
12 /	03 /	13		Ted F	Finkelth	al						
Agencies Notified	Type Notification	on .		Street A	ddress						. ·	-
☐ EPA	Initial			123 E	Broad St	treet		D = -				
DOLWD	☐ Amended			City, Sta	ate, Zip C	ode		DEC -	0 201	_	-	
☑ DOH	Amendmen			Eliza	beth, N.	J			e 201	3		1
DCA	☐ Emergency justification			Name o	of Contact			Telephone Numb	er			1
(NJAC 5:23-8)	☐ Cancellation			Ted				908-625-8330	)			
				FAC	ILITY IN	FORMATION						
Name of Facility Where	Abatement is Tal	king Place	(3)				Type of Facility (	4)				1
Commercial Build		iting i idoo	(0)				School (K-12	)				
Street Address	iii ig						Subchapter 8	(Other than K-12)	nial buil	dinac		
							homes, etc.)	ivate and commerc	ciai buli	amys		
123 Broad Street							Square Feet	# of Floors	Bldd	, Age	,	
City (5)							oqua.o.					
Elizabeth				Count	Code /7	)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			_
County (6)				Count	y code (/	)(STATE OSE ONET)	Current coc (i ii	of it boiling morrisons				
Union			(a) T	100111	T	Name of Abateme	ant Contractor (9)					77-2
Name of Monitoring Fir		ng Owner (	8)	ASCM N	NO.		NAGEMENT L					
Bio Terra Solution	ns						MAGENIENIL	LC				
Street Address						Street Address	■ 1000 × 0 02011					
P.O. Box 1224				27		27 Outwater						
City, State, Zip Code						City, State, Zip C						
Union, NJ						Garfield, NJ	07026					_
Project Manager for Mo	onitoring Firm		Tel	ephone N	No.	Telephone No.		License No.				
Rick Eustaquio			9	73-494-	3762	4.160		1188				
Start Date (10)	So	cheduled C	ompl	etion Dat	te (11)	Name of OSHA N						
12 / 14	/ 13	_12_ /	1	8_/_	13_	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status Dur		heck only	one)			Street Address		1.5				
☐ Facility Closed/Vac				ement		27 Outwater	Lane					
☐ Abatement Perform	ned Outside of No	rmal Facilit	у Ноц	irs - Desi	cribe	City, State, Zip C	ode					
Time of Abatement	::AM	PM/	_PN	1/	AM	Garfield, NJ	07026					
Scope of Work (Check	all that apply)								- 6500			11.5
						☐ Full Cor ☐ Mini-En	ntainment with Ne	gative Pressure				
≥3 sf or ≥3 lf			enova				ag Procedure					
≥160 sf or ≥260 lf			31110111			☐ Non-Exe	empted (*) and No	on-Friable Procedu			110-110-1	
			s Loc						Aba	ateme	ent Ty	/pe
Locati		l lo	Norm	ally lely by		Description		Amount	Re	Re	E	<u>-</u>
Asbestos-Containii				nance/		estos Containing M e., thermal systems		(Specify	Removal	Repair	cap	200
TO BE A		Cus		I Staff?	ζ	surfacing, VA	Γ, or	SF or LF)	val	_	Encapsulate	Liciosuia
	3)		(12		-	other miscellan	eous)				ate	
		Yes	No	-				901 5	M		$\boxtimes$	Е
Basement					ACM F	Pipe Insulation	<u> </u>	80LF			NI CONST	
Basement				$\boxtimes$	Boiler	Insulation		100SF		Ш	$\boxtimes$	Е
			Tn	П								
Name of Registered V	Vaste Hauler		1	NJDEP '	Waste	Cubic Yards of	Name of Reg	istered Landfill				-
ALL PRO MANA				Hauler II		Waste As Needed	IESI Land	fill				
				00348	000	Disposal Date	City, State					
City, State Garfield, NJ						TBD	Bethlehei	m, PA				
Assertion control by Property	T>	Title				Signature	11	// 10	ate	1	1	
Completed By (Print of	or Type)	Title				Gigilature	1. 1/1		12	13	1/3	,
Zvonko Veskov		Presid	ent			7/14	10/11	R1	,2			

ASB-41 JAN 13 \* Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)				1			Owner/Operator (2	)					
/	04 / 1						- Itelliouis				_	_	-
Agencies Notified	Type Notificatio	n		1	Street A			E 200					
☐ EPA	☑ Initial						ake Road					7	-
□ DOLWD	Amended	ш		1	City, Sta	te, Zip Coo	de	- 1 T				1	
□ DHSS     □	Amendment Emergency		-	1	Parlir	n, NJ 088	59	9.1				i	_
☐ DCA (NJAC 5:23-8)	justification)		19	T	Name of	Contact			Telephone Numb	per			
(NJAC 3.23-0)	☐ Cancellation				Nicho	ol Reinho	old		732-643-240	O .	1		
					FACI	LITY INF	ORMATION				1		
Name of Facility Where	Abatement is Tak	ing Plac	ce (3)	_				Type of Facility	(4)		1		
								☐ School (K-12	)	E#6			
DuPont Parlin Fac	IIILY Exterior at	. Diug	110	_				Subchapter 8	Other than K-12	)	lings		
Street Address 250 Cheesequake	Road							homes, etc.)	rivate and commer	Ciai Dulic	iliys	•	
City (5)								Square Feet	# of Floors	Bldg	. Age	9	
Parlin													
		-	-		County	Code (7)	STATE USE ONLY)	Current Use (Pr	ior if being demolis	shed)			
County (6)													
Middlesex Name of Monitoring Firm	n Hirad by Ruildin	og Owne	ar (8)	1	ASCM N	lo T	Name of Abateme	ent Contractor (9)					
		ig Owne	51 (0)	1	NOO!			VIRONMENTA					
Pennoni Associat	es inc.						Street Address						77.0
Street Address							1123 BEAVE	R STREET					
515 Grove St #1B				_			City, State, Zip C						-
City, State, Zip Code						-	BRISTOL, PA	000 C 000 - 100 -					
Haddon Heights, I								13007	License No.			_	_
Project Manager for Mo	nitoring Firm		1		phone N		Telephone No.		00509				
Tom Adams				-37	6-656-				00303				_
Start Date (10)					tion Date		Name of USHA		LINC				
12 /17	/ _13_	12	- / -	17	_ / _	13_	BRISTOLEN	IVIRONMENTA	IL, ING.	10.00			
Occupancy Status Duri	ng Abatement (Cl	heck on	ly one	<del>)</del>	- 83		Street Address						
☐ Facility Closed/Vaca	ated During Entire	Period	of Ab	ate	ment		1123 BEAVE	R STREET					
Abatement Perform Time of Abatement:	ed Outside of Nor	mal Fac	cility F	lou	rs - Desc	cribe	City, State, Zip C BRISTOL, PA						
Scope of Work (Check	all that annly)			_									
Scope of Work (Check	all triat apply)	2545-07						ntainment with Ne	egative Pressure				
≥3 sf or ≥3 lf			Rend				☐ Mini-En ☑ Gloveba	ag Procedure					
☐ ≥160 sf or ≥260 lf			Dem	Oliti	OH		☐ Non-Ex	empted (*) and N	on-Friable Proced	ure			
			Is L	oca	tion					Aba	ateme	ent T	ype
Location	on of		No	rma	ally		Description	of		R	Ţ,	Щ	ū
Asbestos-Containir		)   '			ely by	Asbe	stos Containing M	laterial (ACM)	Amount (Specify	Removal	Repair	ıca	Clo
TO BE A	BATED	^ D			ance/ Staff?	(i.e	., thermal systems surfacing, VA		SF or LF)	oval	=	Encapsulate	Enclosure
IN Fa				(12)			other miscellan					ate	(D
	,,	Y	es	No	N/A								-
Bldg 713 teflon mfg	g area		]	$\boxtimes$		Pipe Ins	sulation		11 LF		Ш		
			ן כ							ᆜᆜ			
			]								Ш	Ш	┞⊔
			]				2						
Name of Registered W	/aste Hauler				NJDEP		Cubic Yards of		gistered Landfill				
SERVICE TRANS		, INC.			Hauler II 20990		Waste 5	GROWS	Landfill				
City, State		-90.000	* *				Disposal Date	City, State					
NEW CASTLE, D	E 19720						12/17/2013	Morrisvil	le, PA 19067				
Completed By (Print o	The second second second second	Title	-	-			Signature	0		Date	,		
Gino Pizzigoni	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	100 -000	imate	or			Hi	har.		13/9	1/1	3	
GIIIO FIZZIGOTII							Xm	~ 1			1		

ASB-41 MAY 11 GI 13257

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

Date of Notification (1)			T	Name o	of Building	Owner/Operator (2	2)			<u> </u>	7	
12 / _	31 / 13	_		Trus	tees of F	Princeton Unive	rsity		1	1	1	
Agencies Notified	Type Notification			Street A	Address						. !	
☐ EPA	Initial     Initial			E.A	MacMilla	n Building		NEC - 9 20	13		1	
□ DOLWD	☐ Amended		-	City. St	ate, Zip C	ode					T	
☑ DHSS	Amendment #_				ceton, N							
☐ DCA	Emergency (inc	cluding	-		of Contact			Telephone Numbe	r			-
(NJAC 5:23-8)	justification)							609-258-1841			;	
	Cancellation				ert Ortec			009-230-1041				
				FAC	ILITY IN	FORMATION	T	(4)				
Name of Facility Where				7/24			Type of Facility (					
Princeton Universi	ty- Maclean Hous	se pip	e tun	nel			School (K-12	) (Other than K-12)				
Street Address							Other (i.e., pr	ivate and commerci	al bui	ldings	5,	
Nassau St and Elm	Dr.						homes, etc.)					
City (5)						- 3,000	Square Feet	# of Floors	Bld	g. Ag	е	
Princeton							5,000	1	5	+0		
County (6)		70.00		Count	ty Code (7	)(STATE USE ONLY)	Current Use (Pri	or if being demolish	ed)			
MERCER												
Name of Monitoring Firm	Hired by Building C	wner (	3) [	ASCM I	No.	Name of Abateme	ent Contractor (9)					
Pennoni Assoicate						BRISTOL EN	VIRONMENTA	L, INC.				
Street Address	-,	_	_			Street Address			-			
515 Grove St., Suit	o 1R					1123 BEAVE	R STREET					
City, State, Zip Code	C 15	-			-	City, State, Zip Co						
Haddon Heights, N	.1 08035					BRISTOL, PA						
Project Manager for Mor			Tele	phone I	No.	Telephone No.		License No.				
Alan Lloyd	intolling i iiiii		177-157-10014	6-547		, sispinana ita		00509				
Start Date (10)	School	Iulad C		tion Dat	Oleccentroleco .	Name of OSHA N	Monitor					
12 / 16 /				/ _			VIRONMENTA	L, INC.				
Occupancy Status Durin	a Abatement (Checl	c only o	ne)			Street Address			102			
☐ Facility Closed/Vacat				ment		1123 BEAVE	R STREET					
☐ Abatement Performe					cribe	City, State, Zip C	ode					
Time of Abatement:	7:00AM- <u>3:30</u> PM/_	PI	ν- <u> </u>	AM		BRISTOL, PA						
Scope of Work (Check a	II that apply)	1000									722	
57.2-5-1.24		⊠ Re	novati	on		∐ Full Con ⊠ Mini-End	tainment with Neg	gative Pressure				
≥3 sf or ≥3 lf   ≥160 sf or ≥260 lf		De				☐ Gloveba	g Procedure					
						☐ Non-Exe	empted (*) and No	n-Friable Procedure	_			
		10000	Locat						Ab	atem	ent T	ype
Location			lorma d Sole			Description		A	R	R	Щ	m
Asbestos-Containing			intena			estos Containing Ma e., thermal systems		Amount (Specify	me	Repair	Ca	Clo
TO BE AB		44.000		Staff?	(1.6	surfacing, VAT		SF or LF)	Removal	7	psr	Enclosure
(13)	iity		(12)	_	1	other miscellane	eous)	soffice Collanders	-		Encapsulate	G,
		Yes	No	N/A					_	_		_
Pipe tunnel			$\boxtimes$			sulation		20 LF				
Pipe tunnel				☐ Pipe Insulation Debris cleanup 100 SF								
Name of Registered Wa	ste Hauler		IN	JDEP \	Waste	Cubic Yards of	Name of Regi	stered Landfill	-	1		,
BRISTOL ENVIRO			H	lauler II		Waste	G.R.O.W.S	S. NORTH LAND	FILL			
City, State		1015		18706		2 Disposal Date	City, State					
BRISTOL, PA 1900	17					12/18/13		ILLE, PA 19067				
								Dat			-	
Completed By (Print or	control control	7 3 man				Signature	10 1. C.	) Da	1)	1-	1.	
Brian Scafiro	E	stima	tor			NXIC	ague (8		10	13	1/3	5
ASP 41												

ASB-41 MAY 11

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

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

D&S Proj. #: 2013-464

Date of Notification (1)  1   2   /   0   2   /   1   3				ner/Operator (2	2)								
Agencies Notified   Type Notificat	ion	T. CLA											
☐ EPA ☐ Initial		Street Add								-3	_	7	
☐ DEP ☐ Amended			RFIELD D	RIVE		CHICAGO CONTRACTOR CON						/	
Amendment #:	—   °	84	, Zip Code				υį	=L -	9 2013		į		
Emergency		-		TION, NJ 07	961				STATE OF THE OWNER, WHEN SERVICE		1		-
justification)	11	lame of Co	ontact					I elepho	one Numbe	r	/		
☐ DCA ☐ Cancellation	n	T. CLA	ANCY					973-5	38-8169				
	6	X	FAC	ILITY INFORM	MATION		and the second			8			
Name of facility where abatement	is taking pla	ace (3)					Туре	f Facility					
T. CLANCY								=	ool (K - 12) chapter 8 (0		han K	(-12)	
Street Address								<b>♂</b> Othe	r (Private/C	comme			
18 FAIRFIELD DRIVE							Carre		s./Homes, of		В	dg. A	90
City (5)	Cou	nty (6)			Coun	ty Code (7)	Squar	re Feet	# 01 F100	is	В	uy. A	Je
Oity (0)		, (0)			0.0000000000000000000000000000000000000	use only)	Curre	ent Use (	Prior if beir	na den	nolish	ed)	
CONVENT STATION	MC	ORRIS				-	3			.g		,	
Name of Monitoring Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of Abatemen	t Contract	or (9)					
						D & S RESTOR	RATION.	, INC.					
Street Address						Street Address							
						20 California A							
City, State, Zip Code						city, State, Zip Code							
Designat Manager for Manager Fire		7.	21 21 1			Paterson, NJ 0	7503		T1:	N			
Project Manager for Monitoring Firm	1	1	Phone Numb	oer		elephone Number			License	1169	per	61	
						Name of OSHA Mor	nitor		<u> </u>	71107	_		
Start Date (10)	Sched	Comple	tion Date (1	1)		D & S Restorat							
12/13/13	12/1:	2000 (0.00) (0.00)				Street Address							
Occupancy Status During Abatemen						20 California A	venue						
Facility closed/vacated during Abatement performed outside						City, State, Zip Code	Э						
Docoribo:		lacility 110	uis-										
Other-Describe: NORMAL F	BO				_ []	Paterson, NJ 0	7503	-					
Scope of Work (check all that apply									w/negative	press	sure		
≥3 sf or ≥3 lf	Renovation	n				×	Mini-enc		lura				
≥160 sf or ≥260 lf	Demolitio	n							*) and Non	-friable	proc	edure	
Location of		n normally	y used solel	у						R	R	Е	Е
asbestos-containing material (acm) to be	staff(12)	snance/cu	istoulai			pestos-containing		Amount (Specify		m	e p	n	n
abated in facility (13)	Yes	No	N/A	material	(ACIVI)			LF)	01 01	o v	a	a	L
GUR LOR				1 Divor Di				20.70		е	ļ,	р	<u> </u>
GARAGE		LX		DUCT INS	SULAT	ION	80 3	SQ FT		NA.	닏	빝	쀼
										믬	屵	屵	붜
						*****				井	片	ዙ	屵
								10 - 10 - N		井	片	님	H
Registered Waste Hauler	INID	EP Hauler	rID# I C	Dubic Yards of	Waste I	Name of Registere	d Landfill			_	Ш		Ш
D & S RESTORATION, INC.		506		1 yd		TULLYTOWN		JRCE F	RECOVE	RY			
City, State			Disposal [	Date		City, State							
PATERSON, NJ 07503			12/15/1			TULLYTOWN	I, PA						
Completed by (Print or Type)	Title	אדאאדי		Signature					Date	/10			12//28
BOGDAN JOLDZIC	PRESID		n for ashort	os licensure ex	xemnted	activities			12/02	/15			
ASB-41	1101 43				prou								

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

D&S Proj. #: 2013-463

ASB-41

								86	*** ***	-	72 :	_		
Date of Notification		N	ame of Bu	ilding Owne	er/Operator (2	2)								
1 2 / 0 2			BOB SO	CCI			2							
Agencies Notified EPA	Type Notificati Initial	ion St	reet Addre	ess					DEC -	9 7013	7		9	
☐ DEP	Amended		21 LITT	LE FALL	S ROAD						- !			
_	Amendment #:	c	ty, State,	Zip Code ·			3				8	- Alacan		
M DOL	Emergency				NJ 07009			ں یا لا	V 1010					
M DOH	(including justification)	Na	ame of Co	ntact					Telephon	e Number	1			
☐ DCA	Cancellation		BOB SO	OCCI					973-23	9-1816				
				FACI	LITY INFORM	MATION	ı		11		-1			
Name of facility wh	nere abatement i	s taking pla	ce (3)					Ту	pe of Facility (	(4) ol (K - 12)				
BOB SOCCI									=	apter 8 (C	ther th	an K	12)	
Street Address							-All Value of the All V	7	Other	(Private/C	omme		,	
21 LITTLE FA	LLS ROAD							<u> </u>		/Homes, e # of Floor		Blo	ig. A	ge
City (5)		Coun	ty (6)			Cou	inty Code (7)	-						
o marcon de como como						(Sta	ite use only)		Current Use (P	rior if bein	g dem	olishe	ed)	
CEDAR GRO		ESS				٠,		<u> </u>						
Name of Monitorin	g Firm Hired by	Bldg. Owne	r (8)		ASCM No.		Name of Abaten							
						_	D & S REST	ORATI	ON, INC.					
Street Address							Street Address	a A v.a						
City, State, Zip Cod	Α					-	20 Californi City, State, Zip C							-
Oity, Glate, Zip Coo							Paterson, N							
Project Manager for	r Monitoring Firm	1	P	hone Numb	er	_	Telephone Num			License	Numb	er		
	3						e			0	1169			
Start Date (10)		Sched	. Completi	ion Date (11	)	-	Name of OSHA	14000						
		12/20	V12 ·			-	D & S Resto	oration,	Inc.				-	-
12/12/1313 Occupancy Status	During Abatemer	12/20				—	20 California	a Arrami						
	d/vacated during	7A		ement.			City, State, Zip C		16				_	
Abatement pe	erformed outside						J., J. J.							
Describe:  Other-Descri	be: NORMAL H	IOURS				_	Paterson, N	J 07503	}				35.05.	
Scope of Work (ch		and the second						Full	Containment v	v/negative	press	ure		
$\ge 3$ sf or $>3$ If		Renovatio	n						i-enclosure					
≥160 sf or ≥2	260 If	Demolition	ı						vebag procedu n-Exempted (*)		friable	proce	edure	è
Location of				used solely	1						R	R	E	E
asbestos-cor material (acn		by mainte staff(12)	nance/cus	stodiai			asbestos-containir	ng	Amount (Specify S	SE or	m	p	n	n
abated in fac		Yes	No	N/A	material	(ACM)			LF)	51 01	o v	a	a	L
		2007			DEPT TO		TOM		100 7 5		e	-	Р	<del> </del>
BASEMENT			X		PIPE INST	ULAT	ION		100 L Ft	ACA STRUCTURE CO	NA.	무	牌	++-
						_					+	片	牌	ዙ
						-		2			井	井	片	++
						-	· · · · · · · · · · · · · · · · · · ·				묶	片	片	++-
Registered Waste F	Hauler	INJDE	P Hauler	ID# I C	ubic Yards of	Waste	Name of Regis	tered Lar	l ndfill		1	Ш	Ш	1
D & S RESTOR		135			yd		TULLYTOV			ECOVEI	RY			
City, State				Disposal D		N.	City, State			2	0	200		
PATERSON, N				12/13/1			TULLYTO	WN, PA	A	15:				
Completed by (Prin BOGDAN JOL		Title PRESID	ENT		Signature					Date 12/02	/13			
ASR-41	DLIC			for asbesto	s licensure e	xempte	ed activities.			12/02	13			-

PUU 1/00 I

D&S Proj. #: 13-462			Notifica (Pursua	ation of Asb unt to NJAC	estos A 8:60 al	batemen	t. D} 1"	AMBA	ROVED		7		
Production of the Control of the Con		ξ.	<b>V</b>				1	JOept of Healti		rvice	28		
Date of Notification (1)	- 11			r/Operator (2)		i	1	gist.	nature)	1			
Agencies Notified   Type Notificati		Iaria D. F						Date: 12 2 13	Time-	7121			
EPA Initial	110"	eet Addres											
☐ DEP ☐ Amended	E I	56 East 1		et		4				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
DOL Amendment #:		y, State, Z	**************************************		3			*				/	1
Emergency	h	Paterson,	The second second	4	_	1 10		Telephon	Number				+
DOH (Including justification)	Na	me of Cont	act									70	1
DCA Cancellation		Maria D.	Haro					973-345	5-5188		- 176		<u> </u>
			FACI	LITY INFORM	IATION			2		_ r	01/3		
Name of facility where abatement is	s taking plac	e (3)				1 1		Type of Facility (	4) I (K-12)	J			
Private Residence					ma				apter 8 (Othe			12)	
Street Address		ì	i,					Other (Bidgs,/	Private/Com Homes, etc.	merc	lal	í	
156 East 16th Street				··		<u>.   H</u>		Square Feet	# of Floors		Bld	g. Agi	8
City (5)	Count	y (6)				Code (7) use only)		Current Use (P	rior if being d	emal	Ishe	d)	atrophica.
Paterson	Pass					i A			IN IL DAILED D	41110		-,	10,00
Name of Monitoring Firm Hired by	ddg. Owner	(8)		ASCM No.	IIN	ame of Abe	tement Co	ontractor (9)					
		t 7					THE RESERVE OF THE PERSON NAMED IN	TION, INC.					
Street Address					5	treet Addre							
				The state of the s	_	20 Califo					.,		
City, State, Zip-Code				1838	C	ty, State, Z	inggeranderer						
						Constitution of the last	NJ 075	03	100		W		
Project Manager for Monitoring Firm	40 - 18Vv	Pho	ne Numb	er		A enorique			License Nu 011		r		
Start Date (10)	(Schēd.	Completio	n Date (11	)	- N	ame of OS				A IANG			-
12/2/13	12/3/1		•	•		D&SR	and the same of th	n, Inc.					
Occupancy Status During Abatemer			-		°					5			
Facility closed/vacated during	entire perio	d of abaten	nent.		o	20 Califo ty, State, Z	Management of the last of the	nue			are the		-
Abatement performed outside Describe:	of normal fa	acility hours	3-						59	25			
Other-Describe: NORMAL H	OURS				_11	Paterson	, NJ 075	03		- 002	8=		
Scope of Work (check all that apply	()					1 1	Ft	ill Containment v	v/negative pr	USSE	re	1	
≥3 af or >3 ff	Renovation	1	#U			1 4		Ini-enclosure					
≥160 st or ≥260 if	Demolition	٠,٠				1 1	Z G	lovebag procedu on-Exempted (*)	re and Non-fris	hle r	nroce	duro	
Location of		normally u		7		1 17				1	R	E	<u></u>
asbestos-containing	by mainter staff(12)	nance/custo	odial	Descripti	lon of asb	estos-conte	aining	Amount		n	8	n	E n
material (acm) to be abated in facility (13)	Yes	A.L.	1	material	(AOM)	:		(Specify S	st or		a	Ċ a	C
W-10-10-10-10-10-10-10-10-10-10-10-10-10-	165	No }	N/A			. : 1			_		ŗ	р	-
Basement		X	l	Pipe Insula	ation			26		<u>a</u> [			口
-	1	# rp - [/- 1]				T. I P	1, 14 -			3			
						j. ja		_			1	旦	
					-	1 1				4		Щ	4
Registered Weste Hauler	NIDE	P Hauler II.	# 10	ubic Yards of	Waste Tr	Name of Re	distance !	andfill			الي	Ц	
D & S RESTORATION, INC.	135	)6 ·	2	CY		TULLYT	OWN, R	ESOURCE RI	ECOVERY				
Oity, State			Disposal D	late	1 1 2	Olfy, State			W 7				-
PATERSON, NJ 07503 Completed by (Print or Type)			08	I Diemotical		TULLY	rown, I	PA .					
BOGDAN JOLDZIC	Title PRESIDI	SML.		Signature		1 1,			Date	<del></del>	1000000000		The same of the
ACD 41	וינוגקיייי ב	chin four	** * - * * * * * * * * * * * * * * * *	- Washington					11/30/13		ESSEN DE		

Date of Notification (1)	5 /	13		100000		ng Owner/Operator (		#1310 4702 -	المقالة	#2-7	00	
Agencies Notified  EPA	Type Notifica  ⊠ Initial			Stree	et Address  D Box 301		Tica, LLC/ 30D	#1310-47.03	песк	#51	öb ——	
☑ DOLWD	☐ Amended				erm directoria.			10				
⊠ DHSS	Amendme	ent #	_	10.50	State, Zip			- 0013				
□ DCA	☐ Emergend	cy (includin	ıg	-		tion, TX 77842	77	EC - 9 2013				
(NJAC 5:23-8)	justificatio			1.00000	e of Conta	ct	_	Telephone Num	ber			
	☐ Cancellati	on		Je	ff Moran			908-850-279	7		7	
				FA	CILITY II	NFORMATION						
Name of Facility Where A		aking Plac	e (3)				Type of Facility	(4)				
M&M Mars- Cooling	Tunnels						School (K-12	2)				
Street Address							Subchapter	8 (Other than K-12	)			
700 High Street							homes, etc.)	rivate and comme	cial b	ullain	ıgs,	
City (5)	1						Square Feet	# of Floors	В	ldg. A	Ane	
Hackettstown							•			lug. /	ige	
County (6)				Cou	inty Code (	7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)			
Warren				1	, (	· Monne out onen	Warehouse		ileu)			
Name of Monitoring Firm H	Hired by Buildi	ing Owner	(8)	ASCN	1 No	Name of Abateme				-		
Health & Safety Serv		ing Owner	(0)	AGGIV	i NO.							
	71003					AbateTech, I	nc.					
Street Address						Street Address						
318 12 <sup>th</sup> Street						30 Maple Ave						
City, State, Zip Code	.=					City, State, Zip Co						
Hammonton, NJ 080						Lumberton, N	J 08048					
Project Manager for Monito	oring Firm			ephone		Telephone No		License No.				
Jim Proctor					4-8850	*		00529				
Start Date (10)		cheduled (				Name of OSHA M	onitor					118
12 /20 / _	13		3	3 /	14	EMSL Analyt	cal					
Occupancy Status During	Abatement (C	heck only	one)			Street Address				_		-
☐ Facility Closed/Vacated	During Entire	Period of	Abate	ement		200 Route 13	0 North					
☑ Abatement Performed (						City, State, Zip Co						
Time of Abatement: 24	hoursAM	PM/_		PM	AM	Cinnaminson						
Scope of Work (Check all t	hat apply)						, 110 00077		_			
		_				☐ Full Cont	ainment with Neg	ative Pressure				
$\square \ge 3$ sf or $\ge 3$ If $\square \ge 160$ sf or $\ge 260$ If			enovat emoliti			Mini-Encl     Mini-En	osure					
≥ 160 st of ≥200 ii			HOHL	OH		⊠ Glovebag	Procedure	n-Friable Procedur				
		Is	Loca	tion	1	L Non Exc	inpica ( ) and 140	II-I Hable Frocedul				Ve. 1846
Location of	f		Norma	ally		Description of				_	ent T	-
Asbestos-Containing M.	aterial (ACM)		ed Sol	ely by	Asbe	stos Containing Mai	erial (ACM)	Amount	Removal	Repair	E	Enclosure
TO BE ABATI	<u>ED</u>	1		Staff?	(i.e	., thermal systems i		(Specify	Von	air	aps	Sols
(13)			(12)			surfacing, VAT, other miscellaned	or ous)	SF or LF)	<u>n</u>		Encapsulate	ure
17 627038905		Yes	No	N/A			,				6	
Throughout Cooling Tu	unnels 1-9		$\boxtimes$		Fittings			271 total				$\vdash$
Till dag. To at					- rearrige			27 I total	$\boxtimes$	ш	Ш	
								944	П	П	П	П
			П						1	1	1	-
Name of Registered Waste	Hauler	_ Ц_		JDEP 1	Monte	Cubic Vestors					Ш	
	naulei		CON	iauler II		Cubic Yards of Waste	Name of Regist					
AbateTech, Inc.			_	18750		20	G.R.O.W.S.	Landfill				
City, State						Disposal Date	City, State	· · · · · · · · · · · · · · · · · · ·			. 10-11-11-1	_
Lumberton, NJ						1/3/14	Tullytown,	PA				
Completed By (Print or Type	e) 17	Title				Signature		Dat	Δ	_	_	
Gwendolyn Trumbetti		Operati	ons (	Coord	inator	172	e, f	i	2/5	5/1	3	
2						X	W		1	11	-	

D&S Proj. #: 13-462			bestos Abatement C 8:60 and 12:120)	APPRO NJOept of Health		:8	
Date of Notification (1)	Name of Building	Owner/Operator (2	3)	faigna	ture)	-	
111/13/0/11/3	Maria D. Haro	)		Date: 13 213	Times 1:401	TWI	_
Agencies Notified Type Notification	Street Address			1			
T Amondod	156 East 16th	Street					
DEP Amendment #:	City, State, Zip Co	ode		50		_	1
DOL Emergency	Paterson, NJ	07524	l la				7
DOH (Including	Name of Contact			Telephone	Number	· .	7
DGA juetification)	1 36 - D 71-			973-345-	5188		/
Canoeliation	Maria D. Ha			770 770			
		FACILITY INFOR	MATION			2013	
Name of facility where abatement is	taking place (3)			Type of Facility (4)	(K-12)		
Private Residence	7%				oter 8 (Other that	n K-191	
The second secon					rivate/Commerci		
Street Address	1 [			Bidgs./H	omes, etc.		
156 East 16th Street				Square Feet #	of Floors	Bldg. Ag	je
City (5)	County (6)		County Code (7)				
			(State use only)	Current Use (Price	or if being demol	Ished)	
Paterson	Passaic			ent Contractor (9)			
Name of Monitoring Firm Hired by 5	sing, Owner (8)	ASCM No.	11 1 1				
	Ť		The same of the sa	ORATION, INC.	MAN		
Street Address			Street Address				
		- William Company	20 California City, State, Sip C				
City, State, Zip Code	*		11 ' ' '				
		Mounthau	Paterson, N.		Elconso Numbe		
Project Manager for Monitoring Firm	Phone	Number	(elephone Numb	Jeli lei	01169	•	
	3		Name of OSHA	Monitor			-
Start Date (10)	Sched. Completion Di	ate (11)	D&SResto	15 60		27 To 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
12/2/13	12/3/13		Street Address				
Occupancy Status During Abatemen	it (Check only one)		20 California	Avenue			
Facility closed/vacated during		t.	Olty, State, Zip C	ode			
Abatement performed outside Describe:					9		
Other-Describe: NORMAL H	OURS		Paterson, N	J 07503			
Scope of Work (check all that apply	n		1 1 1	Full Containment w/	negative pressu	re i	
⊠ >3 af or >3 lf	Renovation			Mini-enclosure			
≥160 st or ≥260 lf	Demolition			⊠ Glovebag procedure     Non-Exempted (*) s	) and Non-friable r	nrocedure	
Location of	Is location normally used		7/		R	RE	T
asbestos-containing	by maintenance/custodia staff(12)	Descrip	otlon of asbestos-containing	Amount	_   e   m	e n	E
material (acm) to be abated in facility (13)		- materia	(AOM)	(Specify Si	Far o	p c a a	C
abates in lability (15)	Yes No	N/A	•	LF)	l v	i p	L
Basement	X	Pipe Insu	lation	26	ष्ट्री		1
		7 - 1/4 E	1 - 1 - 4 . 1 - 1 <del>1</del> 1 . 1		H	HI	1
						TIT	市
						FIF	一
						一一	T
Registered Waste Hauler	NJDEP Hauler ID#	Cubic Yards o	1 1 1			السال الم	
D & S RESTORATION, INC.	13506	2 CY	TULLYTON	VN, RESOURCE RE	COVERY		
City, State	Disp	osal Date	City, State				
PATERSON, NJ 07503		08	TULLYTO	WN, PA			-
Completed by (Print or Type) BOGDAN JOLDZIC	Title	Signature	1 1		Date		
ASR-41	PRESIDENT  * Do not use this form for a	spherica licencus	evempted entirelies		11/30/13		
COLUMN TOTAL E	he that doc and total total	マントウン いいついらいじ	evenilyan ronainas'				

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

D&S Proj. #: 13-462

						200		
Date of Notification (1)	Name of Building C	Owner/Operator (2)		F	-		00000000	
1 1 /3 0 / 1 3	Maria D. Haro				12 2	-		
Agencies Notified Type Notificati	Street Address			D = -		1		
DEP Amended	156 East 16th S	Street		DEC -	Ass.	į		
Amendment #:	City, State, Zip Cod	le			/ içi	1		
DOL Emergency	Paterson, NJ 07	7524				į		
DOH (including	Name of Contact			Telephone	Number	-	2 434	
justification)	Maria D. Haro			973-345	-5188			
Cancellation				273-343	-3100		_	_
	F.	ACILITY INFORM	ATION					
Name of facility where abatement is	s taking place (3)			Type of Facility (4	·) (K - 12)			
Private Residence				=	pter 8 (Other ti	oon K	10)	
Street Address					Private/Comme		12)	
					lomes, etc.			
156 East 16th Street				Square Feet #	f of Floors	Blo	lg. Ag	je
City (5)	County (6)		County Code (7)					
Determen	Passaic		(State use only)	Current Use (Prid	or if being dem	olishe	d)	
Paterson  Name of Monitoring Firm Hired by E		I ASCM No.	Name of Abatemen	t Contractor (9)				-
Name of Mornioring Firm Fined by 1	Diag. Owner (o)	ASOMINO.						
Street Address		_	D & S RESTOR	RATION, INC.				
Street Address			20 California A					
City, State, Zip Code			City, State, Zip Code				_	
City, State, Zip Gode			1 20 0 0					
Project Manager for Monitoring Firm	Phone Nu	ımber	Paterson, NJ 0		License Numb	)er		
. roject manager for morntering . inn	T Hone it		I Tologian		01169	,01		
01-15-1-(10)	I Cabad Canadatian Data	(44)	Name of OSHA Mo	nitor				
Start Date (10)	Sched. Completion Date	(11)	D & S Restora	tion, Inc.				
12/2/13	12/3/13		Street Address					
Occupancy Status During Abatemen			20 California A	venue				
Facility closed/vacated during			City, State, Zip Cod	e				_
Abatement performed outside Describe:								
Other-Describe: NORMAL H	OURS		Paterson, NJ 0	7503				
Scope of Work (check all that apply	/)			Full Containment w/	negative press	ure		
$\boxtimes$ >3 sf or >3 lf	Renovation			Mini-enclosure				
≥160 sf or ≥260 lf	Demolition		×	Glovebag procedure Non-Exempted (*) a		nroce	dure	
Location of	Is location normally used so	olely			R	R	E	2000
asbestos-containing	by maintenance/custodial staff(12)	Description	on of asbestos-containing	Amount	e m	e	n	E n
material (acm) to be abated in facility (13)		material	ACM)	(Specify SF	or o	a	a	C
,	Yes No N/A	Α		/-	v e	i r	р	_
Basement		Pipe Insula	tion	26	X			
Registered Waste Hauler	NJDEP Hauler ID#	Cubic Yards of						
D & S RESTORATION, INC.	13506	2 CY		, RESOURCE REG	COVERY			
City, State	Disposa	al Date )8	City, State	T DA				
PATERSON, NJ 07503  Completed by (Print or Type)	Title	Signature	TULLYTOWN	v, ra	Date		_	-
BOGDAN JOLDZIC	PRESIDENT	Oignature			11/30/13			
	Do not use this form for asbe	estos licensure ex	empted activities.		21100110			

#### STATE OF NEW JERSEY STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

					ANNUA	L NOTIFI				-00	74-4	/	00-
Date of Notification	(1)					STEPAN	Building Ow COMPANY	ner / Ope	rator (2)	`		シス	
/	/	. 415	41			Street Ad		WENT IE		DE	-9	41	)
Agencies Notified  EPA	Type of No	otifica Initia					HUNTER A	VENUE			- 2	Ad .	
DEP		Ame	100			MAYWOO	D, NJ 07607	7				16:0	. 10
☑ DOH			ndmen	_		Name of 0					ne Numb	er	
☑ DOL DCA			rgency ellatio		justification	JOSEF B	ODZIONY		i i	973-712-	/244	*	
					FA	CILITY IN	FORMATIO	N					
Name of Facility W		ent is	Takin	g P	lace (3)		Type of Fa	cility (4)					
STEPAN COMPANY								School (K	(-12)				
Street Address									er 8 (Other				
100 WEST HUNTER	RAVENUE							bldgs., ho	., private & omes, etc.)	cmmerci			
City (5)	County (6	)			County Code (	7)	Square Fe		# Of Floors		Buildin		
MAYWOOD	BERGEN							A e (Prior if	being dem		+	50 -	•
	.1	14 10 10 10 10 10 10 10 10 10 10 10 10 10				-	MANUFAC	- TO	Jenny deni	Jiioneu)			
Name of Monitoring	Firm Hired	by B	ldg. Ov	vne	r (8)	ASCM NO	Name of A		Contractor	(9)			
	900						LVI Demoli	tion Service	ee Inc				
AET Street Address				_			Street Add		C3 IIIC.				
907 DOOLITTLE DR	RIVE					The Control of Market Ann	Jugarna						
City, State, Zip Coo	ity, State, Zip Code							Parkway					
	RIDGEWATER, NJ 08807							, Zip Code	9				
Project Mngr. For M ERIC HOUSEKNEC		ırm			Telephone Nu 908-218-1108	mper	East Hanov	ver, NJ 079	936				
Sheduled Start Dat		Sche	d. Cor		etetion Date (1	1)	Telephone		entities of	License	Number		
12 / 23	/13	1 -	01	/	//	14					3	0000	
Occupancy Status	/	omer	t (Cho	/ ck (	) Only 1)		Name J.		.or			00860	
Occupancy Status	During Abat Closed/Vaca	ted D	uring E	Enti	re Period of		LVI Demoli					900	
Abateme	ent		S-2				Street Add					Marin	
		ed Out	tside o	f No	ormal Facility		32 Williams	s Parkway					
	Describe: Describe:	7:00	AM-3:3	30PI	M .		City, State						
Scope of Work (Ch				-			East Hano	ver, NJ 079	936			-	
Coope of Work (on	- on Am Hindl	P P 1											
☐ Demoliti			V		Renovation	V			ith Negative	Pressur	e		
☐ ≥3sf or≥  ✓ >160 sf o	≥3lf or ≥260 lf					7	Mini - Enc Glovebag		9				
	01 <u>-</u> 200 II								nd Non-Fria	ble Proc	edure		
		_					<i>1</i>		T	A h = 4 = ==	ant Trees		
Location Asbestos Cor		1	ls ocation	,	Δα	Description - 0	tion of Containing			R	ent Type	ΙE	E
Material (A		1000	ormally		, As	Material			Amount	E	R	N	N
TO BE ABA	TED		Used			e., therma	l systems		(Specify	M	E	C	c
in Facili	ty		Solely				facing, VAT cellaneous)	,	SF or LF)	0 V	P	A P	L
(13)			/ Main- nance/	S I	or	outer misc	Jenaneous)			Ă	lî	S	o s
l		Cu	ıstodia	ı						L	R	U	U
			aff (12								-	L	R
POILED HOUSE		YES	NO N	_	PIPE & FITTIN	G			1 LF	V	<del> </del>	+-	
BOILER HOUSE B-14		H			VAT/MASTIC	<u> </u>		***************************************	1470 SF	7	1 1	+H	
B-15 TELEPHONE	ROOM	T	V C		PIPE & FITTIN	G			25 LF	7			
B-15 BASEMENT			V)		PIPE & FITTIN	NAME OF TAXABLE PARTY.			145 LF	7			
Name of Registere		ıler			NJDEP Waste Hauler ID No.	Cubic Yards	Name of F	Registered	Landfill				
NEWARK CARTING	2					of Waste		-					
City, State						Disposal	City. State BETHLAH						
NEWARK, NJ						Date	DE I FILAM						
Completed by (Prin	nt or Type)				Title		,	Signature	• (	1		Date	
STEVEN STILES					PROJECT MA	NAGER		DI	M.	200			12/06/13

	YES	NO	N/A	1				
B-20		1		PIPE FITTINGS	4 LF	V		
B-78		1		PIPE & FITTING INSULATION	10 LF	7		
B-7		7		VAT/MASTIC	65 SF	V		
XTERIOR RAIL AREA		1		FITTING	1 LF	V		
				i i				

		ST. NOTIFICATIO (PURSUANT	ON OF ASE	EW JERSEY BESTOS AB 8:60-7 AND	ATEMEN	r al	eck	#	160	2
Date of Notification (1)			Name of B	uilding Own PHARMAC	er / Opera	ator (2)	ATION	57	\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	
Agencies Notified Type of N	otification		1 HEALTH	PLAZA			DE	<u>```</u>	<u> </u>	
☑ EPA □	Initial		City, State	, Zip Code OVER, NJ 0	7036			79	The .	
	Amended Amendment #		Name of C		7936		Telephon	e Numbe	er ·	
☑ DOH ☐	Emergency w/		KEN PIRO					nη,		
	Cancellation						362-778-8	3858	<u> </u>	
		FA	CILITY INF	ORMATION	4				5	
Name of Facility Where Abaten	nent is Taking P	lace (3)		Type of Fac	ility (4)	-				
NOVARTIS		-		п .	School (K	12)				
Street Address					7.0	er 8 (Other t	han K-12	2)		
1 HEALTH PLAZA				☑ (	Other (l.e.	, private & c	mmercia	ıI		
		Courte Code (	7)	Square Fee		mes, etc.) # Of Floors		Building	n Age	
City (5) County (6 EAST HANOVER MORRIS	)	County Code (	')	50,0		2		Danam	40+	
LAST HANOVER IMOTAGE				Current Use		being demo	olished)	Ī		
				BOILER HO		Combranton	(0)			
Name of Monitoring Firm Hired HILLMAN ENVIRONMENTAL	l by Bldg. Owne	r (8)	ASCM NO	Name of Ab	oatement	Contractor	(9)			
HILLIMAN ENVIRONMENTAL			2	LVI Demoliti	ion Service	es Inc.				
Street Address				Street Addr	ress					
1600 ROUTE 22 EAST				32 Williams	Parkway					
City, State, Zip Code UNION, NJ 07083				City, State,						
Project Mngr. For Monitoring F		Telephone Nu	mber		NJ 070	200				
MIKE NEHLSEN	Sched. Compl	908-688-7800	1)	East Hanov		136	License	Number		
Sheduled Start Date (10) 12 / 11 / 13	01	03 /	14	relephone	Manne					
//		/		L				- 0	0860	
Occupancy Status During Aba	tement (Check (	Only 1)		Name or US						
Abatement	sted During Line	ie i ciloù di		Street Add						
☐ Abatement Perform	ed Outside of N	ormal Facility		00 1450	Dadaman					
Hours - Describe: _  Other - Describe: _	MON ERI 7:0	2.30PM		32 Williams City, State,						
Other - Describe: _	_ MON-1 KI - 7.0	JAN - 3.301 W		East Hanov						
Scope of Work (Check All Tha	t Apply)									
☐ Demolition		Renovation		Full Contai	inment wi	th Negative	Pressur	е		
≥3sf or_≥3lf	_		~	Mini - Encl						
				Glovebag F		e nd Non-Fria	ble Proce	edure		
				TO THE MAN TO THE						
Location of	ls		Descript				Abateme R	ent Type	ĮΕ	ĮΕ
Asbestos Containing	Location Normally	As	sbestos - C Material			Amount	E	R	N .	N
Material (ACM) TO BE ABATED	Used	(1.	e., therma			(Specify	M	E	C	С
in Facility	Solely			facing, VAT	,	SF or LF)	O V	P	A P	L
(13)	by Main- tenance/	or	otner misc	ellaneous)			Ă	lî.	s	s
51	Custodial						L	R	U	U
	<u>Staff (12)</u>									R
BLDG 710 - BOILER ROOM	YES NO N/A	PIPE & FITTIN	IG	-		1173 LF	7	1	10	1 -
DLUG / IU - BUILER ROUM										
		NJDEP Waste	Cubic	Name of R	enistered	Landfill				
Name of Registered Waste Ha NEWARK CARTING	uier	Hauler ID No.		IESI	egistered	Landini		,,		
		4509	of Waste	City Ct-1						
City, State NEWARK, NJ	Disposal Date	City. State BETHLAHE								
INCONTRICT IND	-								ID-4	
Completed by (Print or Type)		Title	NACER		Signature		1 -		Date	
STEVEN STILES		PROJECT MA	NAGER		Ste	in S	ut			12/06/13

12/06/13

Date of Notification (1) Date of Notification	roject#		NO	TIFICA (Purs	TION O	F ASBES' NJAC 8:6	TOS ABATE 0 and 12:12	MENT 0)	L. 200	Check # 22	272	_		٢
Initial Initial   City   Cit	2-t- of Natification (1)			Na	me of B	uilding Ow	ner/Operator	(2)	DEC					
EPA   OPE   Initial   City   City   State, 2/p Code   Peapack NJ 07977   Name of Contact   Street Address   Facility Where Abatement is Taking Place (3)   Peapack NJ 07977   Name of Facility Where Abatement is Taking Place (3)   Peapack NJ 07977   Name of Facility Where Abatement is Taking Place (3)   Peapack NJ 07977   Name of Facility Where Abatement is Taking Place (3)   Peapack NJ 07977   Name of Contact   Street Address				le.	ffrev	( <del>7</del> )			9	Ft.			58.52	
EPA   ODL   Initial   Amended   ODL   OD		Type Notification		St	reet Ado	iress				11 62 80				
Initial DEP   Amended   Amended   Amended   Amended   Amended   Amended   Amended   Amended   Peapack NJ 07977   Name of Contact   Jeffrey   Telephone Number   (917)434-9021   Telephone Num	Agencies Notified	Type Notification		80	Holla	nd Rd			" ~ ~ ~ ~	,				
DOL DOL Amendment # Peapack NJ 07977 Name of Contact Jeffrey DOL Cancellation   Packet   Pack	<b>EPA</b>			100000	Sam Planes Andrew					3				
DOH Cancellation   Summe of Contact   Telephone Number   Secret				0.000					I					
DOH	DOL							de la		Telephone Nu	mber			
State   Stat	DOH	justification)				Juliace				(917)494-9	021			
Name of Facility Where Abatement is Taking Place (3)  - Invade House  - Invade	DCA	Cancellation		Je		TA INFOR	MATION			(317)434-3	021			_
Name of Facility Virtue Facili		11 F 15	Di (2)		FACIL	I Y INFOR	MATION	Tyr	pe of Facility (4	)		-2.012-505		
Street Address 10 Holland Rd City (6) County (6) Somerset Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Nick Restoration LLC Street Address 72 Brookside Rd City, State, Zip Code Randolph NJ 07869 Project Manager for Monitoring Firm Telephone No. City, State, Zip Code Randolph NJ 07869 Froject Manager for Monitoring Firm Telephone No. Street Address 72 Brookside Rd City, State, Zip Code Randolph NJ 07869 Froject Manager for Monitoring Firm Telephone No. Street Address 72 Brookside Rd City, State, Zip Code Randolph NJ 07869 Froject Manager for Monitoring Firm Telephone No. Street Address 72 Brookside Rd City, State, Zip Code Randolph NJ 07869 Froject Manager for Monitoring Firm Telephone No. Street Address 72 Brookside Rd City, State, Zip Code Randolph NJ 07869  Street Address 73 Brovironmental Coccupancy Status During Abatement (Check Only One) Street Address City, State, Zip Code Union, NJ 07083  Scope of Work (Check All That Apply) Reposition of Asbetson-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABACTED In Fally (13)  Renovation Description of Asbetson-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABACTED In Fally (13)  Renovation Description of Asbetson-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABACTED In Fally (13)  Renovation Description of Asbetson-Containing Material (ACM) Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABACTED In Fally (13)  Renovation Description of Asbetson-Containing Material (ACM) Asbestos-Containing		Abatement is Taking	Place (3)				• >	177						
Street Address  Other (i.e. private & commercial buildings, home etc.)  Other (i.e. private & commercial buildings, home etc.)  Square Feet # of Floors Bidg. Age  Square Feet # of Floors Bidg. Age  County (6)  County (6)  County (6)  County (6)  County (7 ATATE USE ONLY)  County (7 ATATE USE ONLY)  County (8)  County (8)  Name of Abatement Contractor (9)  Nick Restoration LLC  Street Address  72 Brookside Rd  City, State, Zip Code  Randolph NJ 07869  Project Manager for Monitoring Firm  Telephone No.  Interphone No.  In	Private House							٦H	Subchanter	8 (Other than K-1	12)			
Start Date (10)   Scheduled Completion Date (11)   Start Date (10)   Start Date (1	THE THE PARTY OF T									rivate & commerc	cial buildi	ngs, h	omes	
City (6) Peapack, NJ 07977  County (6) Count	30 Holland Rd							1.3	etc.)	# of Floors	TBI	la An	P	_
SomerSet  Name of Monitoring Firm Hired by Building Owner (8)  Street Address 72 Brookside Rd  City, State, Zip Code  City, State, Zip Code  Project Manager for Monitoring Firm  Telephone No.  Telepho	City (5) Peapack, N	J 07977										-9.7.9		
Name of Monitoring Firm Hired by Building Owner (6)  Street Address  Street Address  72 Brookside Rd  City, State, Zip Code  City, State, Zip Code  Randolph NJ 07869  Project Manager for Monitoring Firm  Telephone No.  Telephone N								Cu	rrent Use (Pric	or if being demoli	shed)			
Nick Restoration LLC  Street Address  72 Brookside Rd  City, State, Zip Code  City, State, Zip Code  City, State, Zip Code  City, State, Zip Code  Randolph NJ 07869  Project Manager for Monitoring Firm  Telephone No.  Telephone Telephone No.  Telephone Telephone Telephone Telephone Telepho	Somerset	THE AL P. 19.	MDC= (0)		ASCM	No	Nam	e of A	batement Con	tractor (9)	70 <del>2</del> 0			_
Street Address 72 Brookside Rd City, State, Zip Code City, State, Zip Code City, State, Zip Code Randolph NJ 07869 Project Manager for Monitoring Firm  Telephone No. Telephone No. Ucense No. 01133  Start Date (10) 11/22/2013 11/23/2013 11/23/2013 Start Date (10) 11/22/2013 11/23/2013 Start Date (10) 11/22/2013 Score of Work (Check Only One) Street Address 2333 RT 22 City, State, Zip Code Union, NJ 07083 Scope of Work (Check All That Apply) Safe or ≥260 If  Renovation Demolition  Renovation Demolition  Project Manager for Monitoring Firm  Renovation Demolition  Project Manager for Monitoring Firm  Scope of Work (Check All That Apply) Safe or ≥260 If  Renovation Demolition  Project Manager for Monitoring Firm  Renovation Demolition  Project Manager for Monitoring Firm  Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Safe or ≥260 If  Pull Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Fr	Name of Monitoring Fir	m Hired by Building O	wner (8)		ASCIVI	140.					1	2		
Talephone No.							2,000,000							d
City, State, Zip Code Randolph NJ 07869  Telephone No. Telephone No. Talephone No. Tal	Street Address							3330			=	Z	73.	1
Randolph NJ 07869   Ran					100							=/	1	-
Telephone No. 1. Telephone No. 01133	City, State, Zip Code									20	_	_	X	-
Start Date (10)  Scheduled Completion Date (11)  11/22/2013    Name of OSHA Monitor J&S Environmental   Start Date (10)   Scheduled Completion Date (11) J&S Environmental   Start Date (11) J&S Environmental   S					1							0/	1	-
Start Date (10)  11/23/2013  11/23/2013  Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Other – Describe:  Street Address 2333 RT 22  City, State, Zip Code Union, NJ 07083  Scope of Work (Check All That Apply)  23 sf or ≥3 lf ≥160 sf or ≥260 lf  Renovation Demolition  Renovation Demolition  Secondary Procedure Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Boiler Room Area  Normally Yes No N/A  Restoration Area  Normally Secription of Abatement Type  Abatement Normally Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Normally Secription of Abatement Type  A	Project Manager for M	onitoring Firm		7	elephor	ne No.	Tele	phone	e No.			É		1
11/22/2013  Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other − Describe:  Street Address 2333 RT 22  City, State, Zip Code Union, NJ 07083  Scope of Work (Check All That Apply)  23 sf or ≥3 lf 2160 sf or ≥260 lf  Renovation Demolition  Renovation Demolition  Pull Containment with Negative Pressure Mini-Enclosure Mini-Enclosure Non-Exempted (*) and Non-Friable Procedure Non-E	Start Date (10)	————T	Schedule	d Com	pletion [	Date (11)	Nam	ne of (	OSHA Monitor		/_			
Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe:  Scope of Work (Check All That Apply)  ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf  Renovation Demolition  Period of Abatement Performed Outside of Normal Facility Hours Other – Describe:  Scope of Work (Check All That Apply)  ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf  Pull Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Fria		1					J&S	En\	vironmental		/ :	-		
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Other - Describe:  Scope of Work (Check All That Apply)  ≥ 3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)  Boiler Room Area  Name of Registered Waste Hauler Nick Restoration LLC  Name of Registered Waste Hauler Nick Restoration LLC  City, State  Zigo Abatement Zigo Code Union, NJ 07083  Pull Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure No	1 1/22/2013				_		Stre	et Ad	dress		- 2	J:		
Abatement Performed Outside of Normal Facility Hours  Other – Describe:  Scope of Work (Check All That Apply)  ≥ 3 sf or ≥ 3 if ≥ 160 sf or ≥ 260 if  Renovation Demolition  Reposition Of Abatemen Type  Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Renovation Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Page 4  Reposition of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Reposition of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Reposition of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Reposition of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Reposition of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Renovation of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Renovation of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Renovation of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Renovation of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Renovation of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Renovation of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Re	E) 10						233	3 R1	Г 22					
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Renovation Demolition  Renovation Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*) and Non-Friable Proced	Abatement Perfo	rmed Outside of Norm	al Facility	Hours	em									
Each of results of restance with Negative Pressure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted							- Junio	on, i	NJ 07003					-
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) In Facility (13)  Yes No N/A  Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  TOBE ABATED In Facility (13)  Yes No N/A  TOBE ABATED In Facility (13)  Yes No N/A  TOBE ABATED In Facility (12)  Yes No N/A  TOBE ABATED In Facility (12)  Yes No N/A  TOBE ABATED In Facility (12)  Yes No N/A  TOBE ABATED Custodial Staff? (12)  TOBE ABATED Custodial Staff? (Specify SF or LF)  Republication (Specify SF or LF)  Republi	≥3 sf or ≥3 lf		Name of the last o						Mini-Enclosur	e cedure			e	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  TO BI ABATED In Facility (13)  Yes No N/A  TO BI ABATED In Facility (12)  Yes No N/A  TO BI ABATED In Facility (13)  Yes No N/A  TO BI Amount (Specify SF or LF)  TO STATE OF THE STA			Τ.	1										
Location of Asbestos-Containing Material (ACM) TO BE ABATED   In Facility (13)  Yes   No   N/A    Name of Registered Waste Hauler   Nick Restoration LLC    City, State   Randolph, NJ 07869  Location of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (Specify SF or LF)  Asbestos Containing Material							Docarin	ion of				1)	pe	_
Boiler Room Area  X TSI  100LF  X  Name of Registered Waste Hauler Nick Restoration LLC  City, State Randolph, NJ 07869  X TSI  100LF  X	Asbestos-Contain TO BE / In Fa	ing Material (ACM) ABATED acility	Use Ma Cus	ed Sole intenar todial S (12)	ly by nce/ Staff?		tos Containin thermal syste surfacing,	g Mat ems ir VAT,	erial (ACM) nsulation, or	(Specify	Removal	Repair	Encapsulate	Filologuic
Name of Registered Waste Hauler Nick Restoration LLC  City, State Randolph, NJ 07869  NJDEP Waste Hauler ID No. 33782  Cubic Yards of Waste Hauler ID No. 33782  Disposal Date TBD  City, State TBD  Touch  Cubic Yards of Waste G.R.O.W.S  City, State TBD  Tullytown, PA			res	INO	IN/A	<u> </u>				1001-	-	1	-	
Name of Registered Waste Hauter ID No.  Nick Restoration LLC  City, State Randolph, NJ 07869  Hauter ID No. 33782  G.R.O.W.S  Disposal Date TBD  City, State TBD  Tullytown, PA	Boiler Room Area	a	-	×	-	TSI				100LF	X	-		-
Name of Registered Waste Hauter ID No.  Nick Restoration LLC  City, State Randolph, NJ 07869  Hauter ID No. 33782  Of Waste TBD  G.R.O.W.S  City, State TBD  Tullytown, PA			+		-	-					+-			T
Name of Registered Waste Hauter ID No.  Nick Restoration LLC  City, State Randolph, NJ 07869  Hauter ID No. 33782  Of Waste TBD  City, State TBD  City, State TBD  City, State TBD  Tullytown, PA			+			-								1
Nick Restoration LLC  Hauler ID No. 33782  G.R.O.W.S  Disposal Date Table  Randolph, NJ 07869  TBD  City, State TBD  Table TBD  Tity, State TBD  Tullytown, PA	Name of Pagistared V	Naste Hauler		I	JDEP V	Vaste	Cubic Yard	ds	Name o	f Registered Lan	dfill	-		
City, State Randolph, NJ 07869 Disposal Date TBD Tullytown, PA	PORTAGE   PORT			F	lauler ID		of Waste		100000000000000000000000000000000000000	100000				
	City, State	oh NJ 07869					Disposal D	ate						
Completed by Title Signature 11/12/2013		JII, 140 07:003						the state			Date			-
	Completed by	1000					Signa	we .	116	de	,	2011	2	
Elvira Mrda President 900 40 700	Elvira Mrda	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Pres	ident			1 4	W	ya Mr		11/12/	2010		_

Date of Notification (1)			4	100000000000000000000000000000000000000	of Building Ov CORPORATIO	vner/Operator (2) N		F	5	~,
12 / 6	/13			Stree	t Address			٠٠٠		7
Agencies Notified	Type Notification			1 HE	SS PLAZA			UE	Č.,	-
EPA DEP X DOL	X Initial Notific Amended N Cancellatio	lotification	î		State, Zip Code DBRIDGE, NEV	V JERSEY 07095			***	M L:
X DOH DCA	On Hold EMERGEN	CYN			e of Contact D CERULO		Telephone 732-750-69			****
				FACIL	LITY INFORMAT					
Name of Facility Where Ab	atement is Takin	g Place (3	9			Type of Facility School (K-	12)			
HESS PLAZA						X Other (ie. p	rivate & cor	mmcl. bl	2) dgs., ho	
Street Address 1 HESS PLAZA						Square Feet 187,000	# of Flo		- 4\	Bld
City (5) WOODBRIDGE	County (6) MIDDLESE				ty Code (7) E USE ONLY)	Current Use (Pricommercial Commercial Commer	OFFICE			
Name of Monitoring Firm HILLMANN ENVIRONMEN		g Owner (	(8)		ASCM No. 17	Name of Abater PAR ENVIRONM	nent Contr IENTAL CO	actor (9 ORPOR	) ATION	
Street Address						Street Address 313 SPOOK RO	CK BOAD			
1600 ROUTE 22		-				City, State, Zip C				
City, State, Zip Code	UNION, NEW	JERSEY (	7083			SUFFERN, NEV				
Project Manager for Monito	ring Firm	Tele	ephone N	Number		Telephone Numi	ber		Numb	er
MIKE NEHLSEN		1	-377-564		***	Name of OSHA	Manitor	460		
Expected State Date (10)	/ /13	Sched. C	ompleti 3 /	on Date (		QUALITY ENVIR		AL		
Month Day	Year	Month		Day	Year	Chrost Address				
Abatement Perf	Vacated During Electronic Commed Outside of	ntire Perio Normal Fa	d of Aba acility Ho	ours - Des	cribe:	Street Address 1376 ROUTE 9				
X Other - Describe		-riday 6pn  Renovati		am	Full Conta	City, State, Zip Cainment with Nega	WAPPIN		ALLS, I	NY 1259
Demolition >3SF OR LF >160 SF OR	<u> </u>	Inellovati			X Glovebag	Procedure ole Procedure				
Location of	of	Is Loc			Description of A			. L		Abater
Asbestos-cont		normall		,	Containing Mater (ie. Thermal sy		Amou (Spec	int f	REPAIR	ENCAPS
Material (AC TO BE ABA		solely Maint/Cu		i	nsulation, surfac		SF or I	LF)		AP.
in Facility (		Staff Yes No			or other miscell	aneous)			≥	SULE
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Name of Registered Waste DJM TRANSPORT , LLC	Haule	NJDEP \ Hauler II 269	No. 181		rds of Waste 10	Name of Regist GROWS LAND		ill		
City, State KEARNEY, NEW JERSEY				Disposal 12/16/13-		City, State MORRISVILLE	⊳PA			
Completed by (Print or Typ BENJAMIN SANCHEZ	e Title	ECTOR O	F OPER		Signature			Date	12/	6/13
		THE PART OF THE PART OF THE		-					-	77

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12-3-2013	Name o	GLODFK	(4)	~~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	- 1/	2
12-3-2013 Agrany Noticed Type Noticed	Street A	JORDAN R	POAO	7	Ph	`~
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DOL Generalise Amendment#  Emargency (nainting	Co	Lowin, N.J		obana Number		
B DOH Justice)  C DCA Justice		GLODFK	173	32 381 0	499	1
	FACE	LITY INFORMATION	Type of Facility (4)			
C. GLODEK			D School (K-12)			
Otinob Adelence	•		Other (se. private	or with 14-14) Economical builds	1850	
84 JORDAN ROAD			Square Feet   \$9	FRees Bids	.Age	· ·
COLONIA			2000 XI	158	8.4R	5
County (5)	County	y Codo (7) (STATE USE )	PESIDER			
William of British and a man of a man o	CM No.		ment Contractor (9)			
		Best R	emoval Inc			
, , ,		450 S. Cay, State, Zep C	River St			
City, States, Zip Code		Hacken	sack, N.J.			
Project Manager for Mandating Firm Token	hono No.	Telephane No.		inse No. )0388		
Start Date (16)	Date (11)	Name of OSHA	Monitor vironmental	Tnc ·		
12-18-2013 12-19-2	2013	Street Address				
Committee Connect Name of Abstract Courses States Person of Abstract	ent	280 Huy				
Description & Am 5 PM		South H	ackensack,	N.J. 0760	6	
Scope of Vitals (Check all Stat apply)	¥	BRIG	Containment with Nega		•	
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Location of Used & Used		Description of Ashestes Contrinue Ma	of -	Associat		
TO BE ARATED Costs		(i.e., thornal systems symbolog, VAT	insulation,	(Specify SF or LF)	No se	
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	Waste H		Name of Registered	Les Co		닉
Best Removal Inc 171		1/2 YD.	Minerva Er	terprises		attraction of the second
Hackensack, N.J. 07601		12-19-13	Waynesburg	, Oh		detachesp
Completed by Tale		Signature / 00	<u> </u>		3-1	2
R. VELDRAN Estimator		IR. Yold	un	112-	5-1	2

Hopeck

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

Date of Notification (1) 12–3–13		-				Building (					(Ç)	3 190.	(3)	`		
Agencies Notified	Type	Notification		-	Street Ad		- ICW L	CESEY		30.		119	<i>(</i> -			-
	410505800						tate	Stree	et, 9th	r Floo	or`	16.	2.			
■ EPA □ DEP	<b>X</b>	Initial Amended	2		City, Sta	te, Zip Co	de			Se is e sulles	- ,	7.				
X DOL		Amendment #		_	Trer	nton, 1	U.	08625								
Ø DOH		Emergency (i justification)	nciuaing		Name of	Contact						phone Nun				
DCA -		Cancellation				et Gole					60	9-777-	1796	)		
65 W. 148	A b ata	mant in Takina	Dlaga (2	\	FACI	LITY INFO	RMATI	ON	Type of Fa	acility (4)					-	
Name of Facility Where					Comp]	Lex			□ Scho	ol (K-12	)	r than K-12	)\			
Street Address 1035 Parkway	Aver	nue							Othe etc.)	r (i.e. pri	vate &	commercia	al buil			es,
City (5) West Trenton									Square Fe		# of 4	Floors	16.78	ldg. 13yı	_	
County (6) Mercer					County (	Code (7) USE ONLY)	5	_	Offic		if bein	ng demolish	ned)		(*	
Name of Monitoring Firm					ASCN	l No.		Name o	of Abateme	ent Contr	ractor (	(9)				
Environmental	Cor	nections	3		-	-				Envir	onme	ental C	·o.,	Inc	•	
Street Address 120 N. Warren	Str	reet						100000000000000000000000000000000000000	Address Haws I	Avenu	e					
City, State, Zip Code Trenton, NJ	0860	)8							ate, Zip Co ristow		194	101				
Project Manager for Mor	nitoring	g Firm		T	Telephor	ne No.		Telenh	one No.		T	License N	0.			
Jim Frisbee					609-	-392-42	200	010	-	Watersta		00398	3			
Start Date (10) 7–22–13		*	Schedule 1	ed Con -10-	*	Date (11)		Constitution of the Consti	TOSHA M		conm	ental (	.,	Inc	· .	
Occupancy Status Durin	g Aba	tement (Check	k Only On	e)				Street A	Address							
☐ Facility Closed/Vac	ated D	Ouring Entire P	eriod of A	baten	nent				Haws		ıe					
☐ Abatement Perform ☐ Other – Describe:									ate, Zip Co ristow		194	01				
Scope of Work (Check A	II Tha	t Apply)							-							
□ ≥3 sf or ≥3 if <b>X</b> □ ≥160 sf or ≥260 if			DX R	enova emolit					Mini-En			Negative F	ressu	re		
			,					Ø				Non-Friab	le Pro	cedu	re	
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Location				lormal d Sole				scription			12		-	Τ.	ype	-
Asbestos-Containing TO BE AB			Ma	intena	nce/				aterial (AC insulation			nount pecify	R		Enc	四
In Faci	lity	5	Cust	odial ( (12)	Staff?	(	surfa	cing, VA	T, or			or LF)	Remova	Repair	aps	Enclosure
(13)					т		other r	miscellan	eous)				val	¥.	Encapsulate	ure
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Name of Registered Was	ste Ha	uler		-0.00	JDEP W			Yards	Na	ame of R	egiste	red Landfill				
Robinson Waste	3				1730			00		GROWS						
City, State Bellmawr, NJ								sal Date		ty, State						
Completed by			Title					ious Bignature		MOTTI	SV	lle,PA	ite			
Timothy E. Bry	ran		20775	_ D~	0012-	nt		/	_ (	18	フ		2-3	-13		
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		NO	OTIFIC (Pu	ATION	OF ASBES O NJAC 8:	STOS A	BATEM	IENT ·		nec	K#	400	\$	6	19004
Date of Notification (1) 12–4–13			N	lame of Reinh	Building O	wner/O	perator (	(2) c/o 1	MBI De	evelo	pment	Comp	any	4.4	`:
Agencies Notified	Type Notification		5	treet Ad	idress								.5	350	4
	★ Initial			725 C	uthber	t Bl	.vd.							Po	(. <sub>(.</sub> )
EPA     DEP	Initial  ☐ Amended				e, Zip Cod		8275280						3	1	( · _
₫ DOL	Amendment  Emergency		1		y Hill	., NJ	080	002							5/2
M DOH	☐ Emergency ( justification)	including	1.		Contact						phone Nu 6-662-			· .	
DCA -	☐ Cancellation				e Morga					0.5	0-002-	-1750		Tu.	
(F 316 1A0-	Abstament in Takin	a Place (3)		FACIL	ITY INFO	RMATIC	ON	Type of	Facility (	4)					
Name of Facility Where Reinhard Mano	Abatement is Takin	y Flace (5)							chool (K-1						- 1
Street Address 16 Outlook Av	-		-					☐ St	ubchapter ther (i.e. p	8 (Othe	er than K-1		ings,	home	s,
								Square		# of	Floors	В	dg. A	ae	
City (5) Woodbridge								35,0	00 SF		2	9	0yr		
County (6) Middlesex					ode (7) ISE ONLY)		_	scho	ol		ng demolis	snea)			
Name of Monitoring Firm EHS Environme	n Hired by Building ental, Inc.	Owner (8)		ASCM	No.		5020E000000000		ment Cor h Envi		<sup>(9)</sup> ental	Co.,	Inc		
Street Address							Street	Address			Marin Control				
411 Southgate	Court, Sui	te E					923	3 Haw	s Aver	iue					
City, State, Zip Code			100					tate, Zip							
Mickleton, NJ	08056		7-17-17						own, I	PA 19					
Project Manager for Mon Jack Carney	nitoring Firm			Telephor 356–2	ne No. 24–008	0	100	none No.	3260		License 003				
Start Date (10) 12/19/13		Schedule 1/3	d Com	pletion [	Date (11)		2011/2000/02/02		A Monitor h Env	iron	nental	Co.	Inc	·	
Occupancy Status Durin	ng Abatement (Che	ck Only One	e)				Street	Address	3						
				ent			92	3 Hav	vs Ave	nue					
☐ Abatement Perform ☐ Other – Describe:	ned Outside of Norr	mal Facility	Hours			_	2011 C.	itate, Zip rrist	Code	PA 19	9401				
Scope of Work (Check A	All That Apply)														
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		10000	enova emoliti				X X	Mini Glov	-Enclosur rebag Pro	e cedure	Negative			e	
		T						1.01.					Abate	ement	
2.000.000.400		0.000	Locati Iormali			De	scription	n of					Ту	ре	_
Locatio Asbestos-Containing			d Sole			os Con	taining N	Material (		E 500	mount	_		m	l m l
TO BE AE	BATED		odial S		(i.e.	thermal surfa	system cing, VA	s insulat .T. or	ion,		Specify or LF)	Remova	Repair	Encapsulate	Enclosure
In Fac (13)	A STATE OF THE STA		(12)			other r	miscellar	neous)			,	lova	pair	sula	sure
		Yes	No	N/A								-		le le	
Bldg. 16-thro	ughout			х	pipe					2,5	50 LF	x			
-Boile	er room			х	breec	hing	insu	ulatio	on	6	00 SF	x			
-thro	ughout			х	VAT &	mas	tic	20		10,6	00 SF	х			
Bldg. #2-Boile				х	breec	hing	insu	ılati		2.7042	25 SF	х			
Name of Registered Wa	aste Hauler			JDEP W			Yards		Name of	Registe	ered Land	fill			
Newark Carti	ng			auler ID 4509	NO.		oyds.				dfill				
City, State Newark, NJ						1/3	sal Date		City, Sta Beth		m, PA				
Completed by		Title				1	Signatur	e <b>\</b>	1/	5	1	Date			
Timothy F Br	van	Vice	_Pr	eside	nt /		1 .	2	111/	/	1	12-4	_13		

						ater Type	rent	
Location of ACM to be abated in		location mally	Description of ACM (i.e thermal systems insulation, surfacing, VAT, or other misc.)	Amount (Specify SF or LF)	Removal	Repair	Enca	Enclosure
facility (13)	. sole Mair Qust	ely by nt./ codial		SF or LF)	val	ir	CT	osure
		2)				_	not	
Basemen Bldg.2-	1073	no h/a x	pipe insulation	260 LF	x	-	ļ .	-
Bldg.2- Bldg. 2- Basement		x	VAT & mastic	800 SF	x			-
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	7 1							
	The second secon	- -					_	L
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	A TOTAL CONTRACTOR							
	A Company of the Comp		.~					
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	patient and a simple and a simp					- }		<u> </u>
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	1			<del>,</del>	MM C.	Qi	-	
	1				·			

DOL - 10 DAY PAGE 02/04 BEST 11/29/2013 11:48 2013297440 State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 2:00 and 12:120) 15. DARIA FR WAIVER APPROVE Date of Notification (1) 29/13 139 31 Chy, State, Zin Code NJ. 07052 WEST DRANGE 973 202 078) Warper of Con MS. FITZ GENALD FACILITY INFORMATION Type of Facility (4) Number of Facility Where Amitemetric's Training Place (3) 2 Ochool (K-12) 2 Guiropius O (Comi tran K-12) 2 Cohor (Le. polocia & communicial in MS DAMIN FITZ GERALD and Adding 139 MITCHELL 1.940 Commerciation (Prior & possible generalization) WEEK ORLNGE County Code (7) CNLY) County (6) Storms of Mandading Form Hand by Bulking Classes Best Removal Inc STATE AND DES 450 S.River St Chy. State. Zip Code Hackensack, N.J. 07601 Chy, State, Zie Cade Mentin No. Telephone No. Project Mooseer for Manuating Plum 00388 Name of COHA Manhor Edinated Completion (min (11) Omega Environmental Inc 11 30 13 Owest Address 280 Augler St City, State, My Code ment Performed Challe of Named Posity House South Hackensack, N.J. 07606 S Pull Contribution with Negative Prosesses of Last-Parisonal of Chryslag Protection ar Land-Cardecopie ar Clarecture Proceedure D Neb-Bryggelied (\*) and Neb-Printis Procedure Demolites 253 der 23 H la Lacation (12) No NA Yes 38 LF Z THEREN , NEW MORON BARNENT Cubic Yards of News of Registered Landill Notes of Registered Wests Hander 7 1/2 Minerva Enterprises IC No. Best Removal Inc 12/2/3 Waynesburg , Oh 17109 Hackensack, N.J. 07601 Revision 11/29/13 shed by Estimator J. Majorano " Do not use this form for pobering less much

NOTIFICATI	State of New Jersey, 19 18 18 18 18 18 18 18 18 18 18 18 18 18	-
	Consider (4)	
Type Ballings  Agency States  DEPA	TENAFLY NJ 07670  REPORTEIN 201568 4343	
CREENSTEIN	Clarific Color ton (42)  Clarific Sandard Sand	
73 WILDSOR ROAD	2100 Company C	
BERGEN	ASCNING.  Best Removal Inc	ž
65 Sant Adams	450 S.River St  450 S.River St  Edge State Code  Hackensack, N.J. 07601  Hackensack, N.J. 00388	
	8-13    Name of Castle Months   Omega Environmental Inc	
12-17-13 12-16 12-17-13 12-16 12-17-13 12-16 12-17-13 12-16	of Research South Hackensack, N.J. 07606	
Support State (Charles and Charles and Cha	D Describes D No. 5 and No	
American Control of Colds  Con	Items   Description of   Description o	
BASOMENT	THERMALINSULATION 100 SFX  VAT	
BASEMICIO	NED Was Hold Code Years of Name of Regions Lands    Name of Regions Lands   Name of Regions Lands	
Best Removal 22.	.J. 07601   12-18-13   Waynesburg   12-4-13	
P	Stimator K VD COS	

DIA OS. HAIL

FECHA 1070

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	(Pursuant to Marke	0.00 4	,	<u>```</u>	
te of Notification (1) 12/4/13	Name of Building	Owner/Operator	erubeser	0-9 M 6:2-	
12. 12. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15	101111111	301		***	
V	276 H	AIN 51		<del></del>	
EPA Initial Amended	City, State, Zip.	code LIVED NO	Э,	.0	
DEP Amendment #	500W 1	110-1		Telephone Number	112
instification)	16	1 1 11	fazda (	GO9 876×5	113
DOH DCA Cencellation	FACILITY INF	11 001			
8		ORMATION	Type of Facility (4	1)	
me of Facility Where Abatement is Taking	Place (3)		☐ School (K-12)		
.2			Subchapter 8	(Other than K-12) ate & commercial building	s,
reet Address		4	/ 'homes, etc.)	# of Floors Bldg. /	
× / V			Square Feet 2,500		5
South RIVER NE	O	ANTATE LISE	Ownert Use (Pri	or if being demolished)	
J	County Code (7 ONLY)	(SIAIE USE		RESIDENT	
MIDDLESEN		Name of Abaten	nent Contractor (9		
ame of Monitoring Firm Hired by Building O	WITHER ASOM NO.	POUATE	dr. INC		
)		Street Address	0.11	· .	
reet Address :		City, State, Zip			
ity, State, Zip Code .		GIV Br	SIDGE	N.J. 08857	
· ·	Telephone No.	Telephone No.		License No.	
roject Manager for Monitoring Firm	leightone no.			00806.	
Schedule	d Completion Date (11)	Name of OSHA	Monitor IN	<i>t</i> .	
101212	113114	NOVAT		<u>-</u>	
Occupancy Status During Abatement (Check	k only one)	P.O. 13	0x 814		
/ Suffee Dog	ind of Abatement	City, State, Zip	Code	J. 08857	
Facility Closed/Vacated During Emile Fe 1 Abatement Performed Outside of Normal 2 Other – Describe:	Facility Hours				
Scope of Work (Check all that apply)	· · · · · · · · · · · · · · · · · · ·		l Containment with ni-Enclosure	Negative Pressure	
4>3 efor≥3 lf	Renovation Demolition			d Non-Friable Procedure	+1
1≥ 160 sf or ≥ 260 lf		· 10 No	n-Exempted (*) as	d (soir- inche)	Abateme Type
·	Is Location Normally				$\Box$
Location of	Used Solely by	Descriptio bestos Containing	Material (ACM)	Amount	Repair Removal
Ashestos-Containing Material (ACM)	Maintenance/ Ass Custodial (	i.e., thermal syster surfacing. V	ns insulation,	(Specify SF or LF)	Repair
TO BE ABATED IN Facility	Staff?	other miscella	aneous)		Val IT IN
(13)	(12)		92		
	Yes No N/A				
	- X Pi	DE MUSOL	ALION	2 100 4F	IXI
BASETTENT		12 1200			+++
LIDCHER					
UNDCICENT					
	NIDEP Waste Hauler	Cubic Yards		pistered Landfill	
Name of Registered Waste Hauler	NJDEP Waste Hauler ID No.	Waste			
Name of Registered Waste Hauler		Waste 4	G.R.	O.WS.	<u></u> -
Name of Registered Waste Hauler NOVATECN INC	1850l	Waste  Disposal Date	G.R.	o.ws.	
Name of Registered Waste Hauler  NOVATECH INC  City, State  OID BRIDGE NO	18501	Waste 4	G.R.	O.W.S.	2/4/13
Name of Registered Waste Hauler  NOVATECH INC  City, State  OID BRIDGE NOS  Completed by	1850l	Disposal Date  Signature	G.R.	O.W.S.	2/4/13

ASB-41

			NO	TIFICA (Purs	ATION O	F ASBES NJAC 8:6	TOS A	BATEM 12:120)			150-	1			
Date of Notification (1) December 4, 2013		11				uilding Ow on Enviro			(2) C	heck # 623	2050-0	La	D		
Agencies Notified		e Notification		5,000,000	reet Add 749 Lo	ress ckport R	Road				, ,	M L:	ħ:		
EPA DEP DOL	×	Initial Amended Amendment	<b>#</b>			, Zip Code Falls, N		805				··-~.			
DOH DCA		Emergency (i justification) Cancellation	ncluding	10000	ame of C						Telephone Nu 856-742-56				
DOA	10	Garrosmans			FACILI	TY INFOR	RMATIC	ON							
Name of Facility Where Welsbach Superfu			Place (3)					*	Тур	School (K-12		2)			
Street Address 460 Hunter Street									×	Other (i.e. pr etc.)	ivate & commerc	ial build			5,
City (5) Gloucester City									4,0		# of Floors	10	dg. A 00	ge 	
County (6) Camden					County Co	ode (7) SE ONLY)		_		rent Use (Prio cant Reside	r if being demolis ence	shed)			
Name of Monitoring Fire Management & Er	m Hin	ed by Building ( . Consulting	Owner (8) Services		ASCM	No.				nvironment					
Street Address P.O. Box 341							4	Street 623		ess er Ave.					
City, State, Zip Code Chesterfield, NJ 0	8515	<u> </u>	1149							Zip Code nade, NJ 0	8052				
Project Manager for Mo Bill Weisgarber				100 100	Telephon			Telep	hone	No.	License 00842	No.			
Start Date (10) December 13, 20	13		Schedule					Name		SHA Monitor		0			
Occupancy Status Dur		batement (Chec					7	Street						78	
▼ Facility Closed/Va					ent			107	Had	don Ave					
Abatement Perfor	med	Outside of Norr	nal Facility	Hours			_			Zip Code nt, New Je	rsey 08108				
Scope of Work (Check	All T	hat Apply)						_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Ę		Toronto Contraction of the Contr	enova emoliti						Mini-Enclosure				re	
			1							von-Exemple	( ) and Non-i ii	able i it		emen	
(%)		1 6	100	Locati Normal	200		-						Т	уре	
	ng Ma	aterial (ACM)	Use Ma Cus	d Sole intenar todial S (12)	ly by nce/ Staff?	Asbest (i.e.	tos Cor therma surfa	escriptio staining Il systen acing, V miscella	Mate ns ins AT, o		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A		D:-	. In and	_+:		15 LF	x	+	+-	-
Crawl		ce			XXX		Pipe	e Insul Roof		1	1,500 SF	X	+	+	
Ro	oof				XXX			Kooi			1,000 01	1			
												1611			
Name of Registered V Freehold	Vaste	Hauler		H	NJDEP W Hauler ID 2253		of W			Grows	Registered Land	31111			
City, State Mount Holly, New	Jers	sey 08060						osal Da 20-13	te	City, Sta Tullyto	te wn, PA.				
Completed by Christina Lynch			Title Offic	е Ма	nager			Signatu	re A	O Re		Date 12/4/2	2013	è	

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

### State of New Jursey NOTIFICATION OF ASSESSIOS ABATEMENT Processed to NJAC 8:58 and 12:120)

JR 4804

Date of the Martin (1)	Dipar		10006	' (	•		1/5
12-14-13	Sa	ant Address	AST PA	SSAIC	AVENU	B-9 11	
D SPA Classical	Ca	y, Sea, Zp (	code , · ,	T 071			1 1: 4
DOL Americants	5 Dia	NUT	2	1	973 338	2 2164	1
12 DON Grandinian		f-Lic	<i>sudri</i>		115 700	-101	
Ridge of Facility Where Abstract in Taking Plan		· CERTER IN		Type of Facility (			
A. LIOVORI		<del>**</del>		Charles (K-12)	(Cher the K-12) th & minuted	buldings,	
16 FAST PASSAI	e AVE	WUE		factoris, (III.)	\$of Floors	Strie Ann	
NUTLEX :	•:			7000	2	140 Y	<i>es</i>
CONTRACTOR OF THE PARTY OF THE	. 0	outly Code ( tilly)	(STATE USE	RESID	ENCE		
Name of the being Fam that by Balling One			Name of Abster	munt Combacter (5	•		
69			Street Address	emoval I			
City, State, 20 Code			Charles Ton	River St	T 07601		
Proper State of the Manager Com	Telephone	No. ·	Hacken Telephone lie.	sack, N.	Lisone No.		
	econfolia a Dato	. (11)	Name of OSHA	Monitor .	00388		
12-16-13 12-	17-1		Omega En	vironmen	tal inc	-	
Company States During Assissant (Check on D. Feiglity Classed Vacanted During States Period	of Abatament		280 Huy				
8AM 5P	my russia	·	South E	ackensac	k, N.J. (	7606	
Supp of White (Charle of Share up b)		Resonation			Nogativo Process		
@23de23f D2100de2290f	100	Demolition		Procedure Security () and	Min Rinko Russ	editro Abs	doment :
Location of	is Location  Hearthy	B	Departmen	of .	_		Nes-
Authorite Containing Material (ACM) TO TE ARABE?	- Maintantes Custodia	Assault Assault	usine Containing M o., this was specially	annini (ACM)	Amount (Specify SF or LF)	Rom	
(13)	. (12)		oper species	eous)	- u-,		
BASEMENT/CRAWL SPACE		× TH	FROMAL IN	SOLATION	90	LFX	
					-	$\dashv +$	++
		1					山
Best Removal Inc	17109	note Stantor	3/4 40	Minerva	Enterpr	ises	
Cha Chila		, .	Disposal Date	1	urg , Oh		
Hackensack, N.J.			12-17-13	1 20,200		12-4-	13
R. VELDRAN BStis	ator	Con maharatan	1 K Veldi	en		16-4	1 )

Date of Notification (1)		(				/Operator (	2)	0-0-9	<u> </u>	50				7
December 4, 2013			FY	Plast	Blanky	"Check	# 6227	4	PA	/				4
Agencies Notified	ype Notification		11		aic Avenu	ie		```	٠. ١	99 ( ) 		-		4
EPA DEP DOL	Initial Amended Amendment #_		City	y, State, Z earny, N	ip Code J 07032				, 	·				
X DOH	Emergency (in justification) Cancellation	cluding	Na	me of Cor	ntact				Telep	hone Numbe	er			
				FACILITY	Y INFORM	ATION	Turn of F	acility (4)			_	_		$\dashv$
Name of Facility Where Al	patement is Taking	Place (3)												
Franklin-Burling	ton Plastics	•					Sub	ool (K-12) chapter 8	(Othe	r than K-12)		semes.	1000	
Street Address							Oth etc.		ate &	commercial b	ouilding	js, no	mes,	
113 Passaic Avenue							Square F			Floors	100000000000000000000000000000000000000	. Age		
City (5)							10,000		3	7/-	100			_
County (6)				ounty Cod	de (7) ONLY)		Current Industr		if beir	ng demolished	d)	84		
Hudson	Uland by Building C	wner (8)	$\vdash$	ASCM N	0.	Name	of Abaten	nent Contr	actor	(9)	-21			
Name of Monitoring Firm Pars Environmental	Hired by Building C	Wiler (e)	1				de Envir	onmenta	ıl, LL	.C				_
Street Address							t Address							
500 Horizon Drive,	Suite 540					0.000	Cutler A							-
City, State, Zip Code Robbinsville, NJ 08						City, Mar	State, Zip ole Shad	Code e, NJ 08	3052					
Project Manager for Mon			T	elephone	No.	Tolor	phone No.			License No 00842				
Firoz Jan				609-890						00042			-	$\dashv$
Start Date (10) December 17, 2013	3	Scheduled	15,	pletion Da 2013	ate (11)	Nam EM	e of OSHA SL	Monitor						
Occupancy Status Durin	a Abatement (Chec	k Only One	<del>2</del> )				et Address							
E silt Clased \/20	ated During Entire	Period of Al	batem	ent			' Haddor	_			× -			-
Abatement Perform Other – Describe:	ned Outside of North	nal Facility	Hours		*	- City,	State, Zip estmont,	New Jer	sey	08108				
Scope of Work (Check /	All That Apply)						(resi		51 S					
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			enova emolit				Mini	Enclosure	edure	h Negative P				*
			100				Non	-Exempted	(*) a	nd Non-Friab			ment	
		ls	Locati	ion								Ty		
Location	on of	N	Iormal	ly		Descript	ion of	(4010)		Amount			т	
Asbestos-Containin	g Material (ACM)		d Sole intena		Asbesto	s Containin nermal syste	g Material ems insula	tion,	- 1	(Specify	Re	Z	Encapsulate	Enclosure
TO BE A	BATED		odial	Staff?	200	surfacing,	VAT, or			SF or LF)	Remova	Repair	psu	losu
(13			(12)			other misce	illaneous)				a	7	late	re
5.7	10 10 10 10 10 10 10 10 10 10 10 10 10 1	Yes	No	N/A	/		Tank Inci	ulation		270 SF	x	-		
Boiler Room	Warehouse		XXX			urnace/T		lation		,225 SF	x	-		
Ro	of			XXX		Roofing/		.\	-	40 SF	X	-	-	-
Boiler	Room		XXX		- 1	ar (Coolir		)	-	1,100 LF	X	-		_
Wareh	nouse		XXX	<		Pipe Ins		I Name of		stered Landfi				_
Name of Registered W	laste Hauler			NJDEP W Hauler ID		Cubic Yard of Waste	as :	Grows			587			
Freehold				22253	.10.	50 Disposal D	Date	City, Sta		um				-
City, State Mount Holly, New	Jersey 08060	225				1-15-13		Tullyto			ate			
Completed by		Title	50 M	anager		Sign	ature /	00			2/4/2	2013		
Christina Lynch		Oilid	IVIO	anayor .	1 1 1	-100	1010		$\triangle$				000 0000	

ASB-41 (R-06-08) K Sec. attached for additionabo not use this form for asbestos licensure exempted activities.

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility			Jsed Solely odial Staff?	Description of Asbestos Containing Material (ACM)	Amount (Specify SF or LF)	Removal
(1011)	Yes	No	N/A			
Warehouse (office)		X		Floor Tile and Mastic	300 SF	X
Boiler Room/Warehouse	- ·	X	1000	Gasket	40 Each	X
Warehouse (office)		X		Fire Door	90 SF	Х
			*			

THE COMMENTS

	200	100	13	110	-
7	_ `	·C	Y	5#	1
)		1	2	4+6	1
		O	OF	.11.	

Agencies Notified  Type Notification  Street Address  Jinitial  Amended Amended Amended Amended Justification  DOH DOL Emergency (including justification)  Cancellation  Name of Facility Where Abatement is Taking Place (3)  Street Address  Type of Facility (4)  School (K-12)  Subchapter 8 (Other than K-12)  Other (i.e. private & commercial buildings, homes etc.)  City (5)  Square Feet # of Floors Bldg. Age  COLUMN Age COLUMN Age  City (5)
Initial Amended Amendment #   City, State, Zip Code   City, State, Zip Code
Amendment # DOH Emergency (including justification) Name of Contact Telephone Number 732 5253300    DOH DCA Cancellation
Name of Contact DCA    DOH
FACILITY INFORMATION  Name of Facility Where Abatement is Taking Place (3)  Congressive Address  Street Address  City (5)  FACILITY INFORMATION  Type of Facility (4)  School (K-12)  Subchapter 8 (Other than K-12)  Other (i.e. private & commercial buildings, home:  etc.)  Square Feet # of Floors Bldg. Age
Street Address  Street Address  249 Fielder Aue  City (5)  School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, home: etc.)  Square Feet # of Floors Bldg. Age
City (5) Square Feet # of Floors Bldg. Age
County (6)  County Code (7) (STATE USE ONLY)  Current Use (Prior if being demolished)  County Code (7) (STATE USE ONLY)  Current Use (Prior if being demolished)
Name of Monitoring Firm Hired by Building Owner (8)  ASCM No.  Name of Abatement Contractor (9)
Ace Insulation Co., Inc.
Street Address Street Address 95 Montrose Road
City, State, Zip Code City, State, Zip Code Colts Neck, N.J. 07722
Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 00029
Start Date (10)   Scheduled Completion Date (11)   Name of OSHA Monitor   12 2 3
Occupancy Status During Abatement (Check Only One)  Street Address
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe:  City, State, Zip Code
Scope of Work (Check All That Apply)
Renovation ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Renovation Demolition  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure
Is Location Abatement
Location of Asbestos-Containing Material (ACM)  Asbestos-Containing Material (ACM)  Maintenance/  Mormally  Description of  Asbestos Containing Material (ACM)  Amount
Maintenance/ Custodial Staff? (12)  Maintenance/ Custodial Staff? (12)  Maintenance/ Custodial Staff? (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  SF or LF)  The custodial Staff? (Specify SF or LF)
Yes No N/A
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00+doors X5. dirjon garage 400th V
Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill
Ace Insulation Co., Inc.  Hauler ID No. 12086  Grows
City, State  Disposal Date  City, State
Colts Neck, New Jersey  Completed by  Title  Signature  Date 1
George Wuest President Signature 12513

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Agencies Notified Type Notification	n		Street	Address	s (a.	rdo '	·``?		<u>^</u>			
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DOH justification Cancellation	n)		Name	of Contact	ch)		Teler	onore Nu	imber 08		57	0/
Name of Facility Where Abatement is Tak	ing Place	(3)	FA	CILITY INFORMA	TION	Type of Facilit	hy (4)	130	00		- NO	レハ
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County (6) O Cean			County	Code (7) USE ONLY)		Current Use (F		demolis	hed)	w-		-
Name of Monitoring Firm Hired by Building	Owner (	8)	ASC	M No.	Name	of Abatement C	Contractor (9	)				
Street Address					Street	Insulation Co						
lity, State, Zip Code		-				iontrose Roa tate, Zip Code	ad					
- I Al N I I I						Neck, N.J. (	07722					
roject Manager for Monitoring Firm			Telepho	one No.	Telenh	nna No	319 530	icense N	0.			
12 9 13	1 :7	1 11	mpletion	Date (11)	Name (	of OSHA Monito		0029				
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cope of Work (Check All That Apply)												
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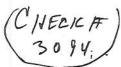
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	Type Notification    Arrended     Arrended     Amendment     Emergency (inclinity in the care)     Cancellation     Cancellation     Abatement is Taking     TENCE     May     Hired by Building O	Type Notification    Type Notification     Amended     Amended     Emergency (including justification)     Cancellation     Cancellation     Abatement is Taking Place (3)     TENCE     In Ps on Pund     Thy     May     Hired by Building Owner     A	Type Notification  Stre  Type Notification  Stre  Type Notification  Amendment # Ciry  Emergency (including justification)  Cancellation  Final Staking Place (3)  TEVCE  In Pson Punt  Countries  Hired by Building Owner  ASC	Type Notification  Street Address 3 0  Amended Amendment # Emergency (including justification)  Cancellation  FACILITY IN  Abatement is Yaking Place (3)  TENCE  IMPLICATION  County Code USE ONLY  Hired by Building Owner  ASCM No.	Type Notification  Street Address 30 BLUE HER 30 BLUE HER City, State, Zip Code  Amendment #  Emergency (including justification)  Cancellation  Name of Contact  FACILITY INFORMATION  Abatement is Yaking Place (3)  TENCE  IMPLIED  County Code (7) (STATE USE ONLY)  Name of Abate  Street Address 369  City, State, Zip Code  Cancellation  Name of Contact  Sum E  FACILITY INFORMATION  Street Address 369  City, State, Zip  Min  Street Address 369  City, State, Zip  Min  Telephone No.	Type Notification  Street Address  30 BLUE HERON  City, State, Zip Code  Amendment #  Emergency (including justification)  Cancellation  FACILITY INFORMATION  Abatement is Taking Place (3)  TENCE  IMPLIED  County Code (7) (STATE   Current USE ONLY)  Name of Abatement Code (7)  Street Address  369 S. City, State, Zip Code  MAPL ?  Telephone No.	Type Notification    Street Address   30 B LUE HERON D M 1     Amended   Amendment #   Chy, State, Zip Code     Amendment #   Chy, State, Zip Code   A D F M D Y COUNT   M D D D D D D D D D D D D D D D D D D	Type Notification    Street Address   30 B LUE HERON D MIVE   30 B LUE HERON D	Type Notification  Street Address 30 BLUE HERON DRIVE  Amended Amendment is Emergency (including justification) Cancellation  FACILITY INFORMATION  Abatement is Taking Place (3)  TENCE  IMPSON RUDD  County Code (7) (STATE   Square (Phor Hoeing demols new years)  County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)  Name of County Code (7) (STATE   Current Use (Phor Hoeing demols new years)	Street Address    Street Address   Stree

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	SIZE OF NEW JETSE THOM OF ASBESTOS	BATEMENT	•	YES
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Carcala da.	FACILITY INFORM	ATION	pe of Facility (4)	
5 CA			(K.12)	n K-12)
Name of Facility Where Abatement is Taking Place (3)		8	Other (I'mire)	
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County (6) CAN'S MAY	ASCAL HO.	700		lue.
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Sueel Aggress		10177	CC TO	00444
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12/15 Digno Abatement (Check	only with	City. State, M	PUE SHADE	P. 5, 08
S:an Date 10)  S:an Date 10)  Occupant Status During Abatement (Check  Facility Closed Vacated During Entire Pend  Abatement Performed Outside of Normal Status Describe:	acity Hours		Containment with Negat	
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Scope of Work (Check all that apply)	Demoison Senovator			Ļ
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## State of New Jersey NOTHICATION OF ASBESTOS ABATEMENT

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□ Carcalla tou				CE BREU	w1 C		609.390	-2121
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(8)							E Ave.	
Street Adoress				Ciry State, Zi	0 C Ø 6			805 -
City State Zip Code	<del></del> [:	Yelep	ON MO	Taleahone No			License No	14
Project Manager for Morrison of Firm	10 to Co	moleti	on Dale (1	I) Harra of OSI	the Mioni	41.EM	M	
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#### State of New Jersey

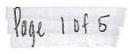
#### NOTIFICATION OF ASBESTOS ABATEMENT

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

Data af Matification (1)					Name of Building	Oumar/Ona	entor (2)					
Date of Notification (1)	December 4, 20	13			Name of Building	Pat B		23	32	Or	3	
Agencies Notified  [ X ] EPA	1	l Notific			Street Address	32 W	oodland Drive		ć	<u> </u>		
[ ] DEP [x ] DOL [x ] DOH	Ame	ndment : rgency (i	tification # ncluding		City, State, Zip Co		Iaven, NJ 07704				Chy	6.
[ ] DCA	120 12 18	fication) cellation			Name of Contact Pat B	utera	. Т	elephone Number 732-99	6-803	0		15
				FAC	CILITY INFORM	IATION					-	
Name of Facility Where A	batement is Taking sidence	Place (3	3)	(2)			Type of Facility (4)	School (k-12)	41	L 12)		
Street Address	Inlet Terrace			A			[ ]	Subchapter 8 (oth Other (i.e., privat homes, etc.)			al build	ings,
City		Coun	ty (6)		County Code (7) (STATE USE ONL	Y)	Square feet 1500 sf	# of Floors		. Age	0	
Belmar		10000000	imouth				Current Use (Prior if Resider	ice				
Name of Monitoring Firm Gu	Hired by Building ardian Contrac				ASCM No.		***************************************	(9) an Contracting,	Inc.			
	89 Rte. 9, Unit	61				Street A	1889 R	oute 9, Unit 61				
City, State, Zip Code	ms River, NJ (	2755				City, Sta	ate, Zip Code	iver, New Jers	ev 081	755_1	271	
Project Manager for Monit		8733	Telephone	e Number		Telepho	ne Number	License N		133-1	4/1	-
Nicholas Fer			732-349	9-9932		II .	10-4:	00624	J 11ME 111-9-16			
Scheduled Start Date (10) 12/5/13			Scheduled 12/6/		tion Date (11)	Name of	OSHA Monitor E.M.S.	L. Analytical				
Occupancy Status During					ewas obsorptions	Street A		elton Road				
5 5	ility Closed/Vacate atement Performed						3	enon Road				
5 1	er – Describe	Outside	OI INOIMAI	r activity 11	ours	City, Sta	ate, Zip Code Piscata	way, New Jerse	y 088	54		
Scope of Work (Check all	that apply)					" [	Full Containment Mini-Enclosure	with Negative Pres	sure			
[x] >3:	sf or ≥3 lf		f 1	Renov	ation	[x		ire				
L	60 sf or ≥260 lf		[x]	Demol	lition	Ĺ		) and Non-Friable l	Procedu	ire		
		T		is.					Abat	ement	Туре	
			Is Locati			Descripti			R	R	Е	Е
Location	277 TO 1		Normaliy			bestos-Co		Amount	E	E	N	N
Asbestos-Containing N		Mai	Solely bottenance/C			Material (.e., thermal		(Specify SF	М	P	C	C
TO BE ABA		Iviai	Staff			sulation, si		or LF)	0	A	A P	L
(13)	.9		(12)		1	VAT,			V	R	S	S
					oti	her miscel	laneous)		A		U	U R
12		YES	S NO	N/A					L		E	E
Basement			X		Asbestos pipe	e insulatio	on	8 lf	X			
		-		-								-
No CD	TY-ul-	<u> Т</u>	VIIDED II.	ata TT - 1	- ID No.   Call at	anda - CTTT	nto Nome of Desire	and I or JEII				
Name of Registered Waste Guardian Co	: Hauler ontracting, Inc.	- 1	NJDEP Wa	iste Haule 20223	r ID No. Cubic Y	ards of Wa	ste Name of Registe T.R.R.F.	red Landilli				
City, State				Dispo	osal Date	City, S	tate					
Toms River Completed by (Print or Ty	, New Jersey	Title		12/9	Signature 1	Tully	town, Pennsylvania	L.	Date	;		
Nicholas Fer			ect Mana	ger	$\gamma$	that	1.1			4/201	3	

\* Scope sheets are attached (4 pases)

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



Date of Notification (1)	4 / 13					Owner/Operator (2 -Gas, Inc.		ob # 1312-1833 C	hk. #	3431		
Agencies Notified	Type Notification			Street A	ddress	1 12						$\neg$
⊠ EPA	☐ Initial				Allen Roa	ad			7			
☑ DOLWD	☐ Amended			City, Sta	ate, Zip Co	ode			1			
☐ DHSS	Amendment #	With the second				je, J 07920	40.2		1			
□ DCA	Emergency (ir	ncluding			of Contact			Telephone Number	er			$\neg$
(NJAC 5:23-8)	justification)  Cancellation					ud, Esq.		908-991-9333		,		
	Caricellation				AT WAY A SHARE		nE(	2 (1)13		->-		-
			(0)	FAC	ILITYINE	ORMATION	Type of Facility (			-		
Name of Facility Where		g Place	(3)				School (K-12			,		
Matheson Tri-Gas	Facility							(Other than K-12)				
Street Address							Other (i.e., pr	rivate and commerc	ial bui	ldings	3,	
932 Paterson Plan	k Road						homes, etc.)		Tou			$\dashv$
City (5)							Square Feet	# of Floors	10	g. Ag		
East Rutherford			7/2				50,000	1		930'	s 	
County (6)		l.		Count	y Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolish	ed)			
Bergen							Vacant					
Name of Monitoring Firm	n Hired by Building	Owner (	8)	ASCM N	No.	Name of Abatem	ent Contractor (9)					
Environmental Ma						Asbestos an	d Mold Service	s, Corp.				
Street Address				-		Street Address						
5066R West Chest	er Pike - P.O. Bo	x129				3859 Sylon E	Boulevard					
City, State, Zip Code						City, State, Zip C						
Edgemont, PA 190	128					Hainesport,						
Project Manager for Mo			Tel	ephone N	No.	Telephone No.		License No.				
Timothy Van Amb			0.000	10-359-		Total India		00862				
The state of the s	100 m	dulad C	15	etion Dat		Name of OSHA	Monnor					
Start Date (10)			NO.	3 /		EMSL Analy						
12 /13 /				<u> </u>	17_	-	iloai, ilio.			75.65		
Occupancy Status Durin						Street Address						
☐ Facility Closed/Vaca	ited During Entire P	eriod of	Abati	ement	a alle a	DIA BRIDGE CONTROL OF THE PROPERTY OF THE PROP	ite 130 North					
Abatement Performe		ai Facility PM/	y Hot PN		AM	City, State, Zip C						
* NIGHTS AND WEER	TENDS POSSIBLE-	WILL A	DVIS	ACCOL	DINELY	Cinnaminso	n, NJ 08077					
Scope of Work (Check	all that apply)	a larger and the			+	M Full Con	tainment with No	gativo Proceura				
≥3 sf or ≥3 lf		Re	nova	tion		⊠ Full Cor ⊠ Mini-En	ntainment with Neg closure	gative Plessure				
≥3 \$1 61 ≥3 11     ≥160 \$f or ≥260 If		⊠ De	molit	ion		☐ Gloveba	ag Procedure					
		Managara estados				⊠ Non-Ex	empted (*) and No	on-Friable Procedur	е			
		1	Loc						Ab	atem	ent T	ype
Locatio	100 (72.5)		Norm	ally lely by		Description		Amount	Re	Re	En	四
Asbestos-Containing TO BE AB				ance/		stos Containing M		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Fac		Cus		Staff?	(	surfacing, VA	Γ, or	SF or LF)	Va Va	_	Sula	l sure
(13)	)		(12		-	other miscellan	eous)				ate	
		Yes	No	N/A						0200		
Per Conv. w/ Chris	Trevors on 12/4					TACHED	1000					
ACM survey attache	ed (4 pgs)			$\boxtimes$	SEE AT	TACHED			$\boxtimes$			
All items to be remo	oved shown			$\boxtimes$	SEE AT	TACHED						
in attached survey				$\boxtimes$		TACHED			$\boxtimes$			
Name of Registered Wa				NJDEP \ Hauler II		Cubic Yards of Waste		stered Landfill				
Freehold Cartage	, Inc.			02265		20	GROWS L	andfill				
City, State						Disposal Date	City, State				1-27-115	
Freehold, NJ						1/14/14	Morrisville	e, PA 19067				
Completed By (Print or	Type) T	itle				Signature	•	Da	ite		-1500-	
Kimberly A. Trum	. , , , ,	Control of the	Coo	rdinato	r	John	Ú	18	12-	4-	13	

	9.0	BESTOS-CONTA stos Pre-Demolition Ins Matheson Tri-Gas Facil 932 Paterson Plank Ros East Rutherford, NJ	spection lity ad	RIAL
Sample Number	Sample Type	Sample Location	Asbestos Content	Material Quantity & Designation 20
BUILDING B	A Building #1	(far most westerly build	ding/adj. RxR)	
PACM	Corrugated Transite Roof Panels	Roof	PACM	400 SF (NF2
		ilding #33 – Ext. Rear S	Shed	
2	Smooth Transite Sheet	Interior - Rear Shed	17	300 SF (NF2)
	Buildi	ng #33 - Locker Room	Building	
3	Corrugated Transite Roof Panels	Roof/ground debris	15	1,200 SF (NF2)
4	Pipe insulation - Magnesia block	Ext. Main Steam piping lines	44	(See "Ext Main Steam Lines" - FRI)
10	12" Floor Tile (tan)	Break room	31.2 NOB	1,000 SF (NF1)
13	Pipe insulation	Boiler Room/floor debris	47	30 LF (FRI) 100 SF
14	Pipe Insulation Magnesia block	Ext piping Main Steam Lines	36	(See "Ext Main Steam Lines"- FRI)
PACM	Corrugated Transite Roof Panels	Front Loading Dock	PACM	450 SF (NF2)
	Building #33 -	Warehouse/Records S	torage Building	
PACM	Pipe insulation	Warehouse Rear - Space Heater	PACM	5 LF (FRI)
21	12" Floor Tile (green)	Records Storage	5	70 SF (NF1)
22	12" Floor Tile (yellow)	Lab Room	3	1,400 SF (NF1)
	Building #33 -	Project & Spectroscopy	y Labs Building	, , , , , , , , , , , , , , , , , , , ,
25	Window glazing	Windows	6.7 NOB	36 windows(NF2)
		Building #13		
28	Window glazing	Windows	3	1 window (NF2)
29	2'x4' Ceiling Tile (pine hole)	Ceiling Floor Debris	4	1,300 SF (FRI) 1,300 SF
PACM	Corrugated Transite Roof & Siding Panels	Rood & Siding	PACM	Roof - 6000 SF (NF2) Siding - 2,750 SF
34	9" Floor Tile (tan)	Floor	7	(Same as #38)( NF1)
35	2'x4' Ceiling Tile (striations)	Ceiling (3 rooms) Floor Debris	2	1,000 SF (FRI) 1,000 SF
36	Spray-on fireproofing	Walls/Roof (over transite materials)	33	Roof - 6000 SF Walls - 2,750 SF Floor Debris - 2,500
38	9" Floor Tile (lt. brown (& under #37)	Floor (3 rooms)	45.6 NOB	SF (FRI) 1,000 SF (NF1)
38a	Assoc'd Mastic (black)	Floor	2.0 NOB	1,000 SF (NF1)
		Engineering Office/Cylin	nder Storage Ruilding	1,000 SF (NFI)
PACM	Corrugated Transite Roof Panels	Roof	PACM	1,800 SF (NF2)

Submitted by: Ken !

Kim Trumbetti, Office Admini-

Date: 12/4/13

# SUMMARY OF ASBESTOS-CONTAINING MATERIAL

Asbestos Pre-Demolition Inspection Matheson Tri-Gas Facility

DEC - 9 201

50	Asbes	tos Pre-Demondation Plan	Facility			DEC -	9
	1				M	aterial Qua	intity
		Tract Killing	-	bestos Con	ent		
	The second liver with	Sample Location	O LA			200 SF (1	VF2)
ample Number	Sample Type	Pullding #	41	PACM			
ample Number	Name of the last o	Exterior Blue	Mech			7@1SFe	a. (FRI)
CONTROL OF THE PARTY OF THE PAR	Transite Sheeting	- core hox		PACN	1		
ACM	Panels	Top cover of t	hox			400 SF	(NFI)
	Intake Manifold	above process	S DOX	10	- T	400 SF	(NFI)
PACM	Gaskets 9"Floor Tile(green/tar	i) Floor		1.3 N	UB -	1,800 S	F (FRI)
16	9"Floor The gree has Assoc'd Mastic (black	() Floor		4	1		000 SF
46	Assoc'd Waste  2'x4' Ceiling Tile	Ceiling	1			Roof -	6000 SF
46a 48		Roof (over t	ransite)	2.	,	(r	RI) 2,750 SF
48	(pinhole) Spray-on fireproofin	g Root (over				Walls -	bris- 1,800
49	Spray-on I			\		Floor	SF
177						1 800	SF (NF2)
1				P.A	CM	1,000	
/		Roof					
	Corrugated Transit		ection)	ONCE		500	SF (NF2)
PACM	Roof Panels	Building #12	- Power II	P	ACM		
	SCHOOL STREET,		ear	1		Ho	ods 600 SF
	Corrugated Trans	Connecti	ing Shed	-	PACM	Dat	rtition Wall
PACM	n nof Paneis	TI-nt Ho	ods/	1		1 12	00 SF (NF2)
	Transite Sheeting	Partition	Wall			7	OIF (FKL)
PACM				_	PACM	Gr	ound Debris
	Laion	Interior	n heis	1			25 SF
PACM	Pipe Insulation	Ground	1 Debris				
PACM			ior Pipe Ra	ck		7 2	,487LF (FRI)
1		Exter	10r Fipe		9		1
	Pipe insulation	- spun Ext. N	Main Steam		44		1
53	Pipe insulation	piping	g lines Main Steam		44	1	
33	Pipe insulatio	n – Ext. I	g lines		participation of the same of t		- 00
PACM		k pipin	ofing Mate	rials	17		18,000 SF
(sample	8 #14)   Magnesia	Ro	22		17		(90'x200')
Court	Asphalt roof	ing	g. 33 rehouse roo	f	18		
60	( silver paint	1 714	~ 23	1	16	1	
100	Asphalt roo	fing No	rehouse roo	of \			
61	(silver paint	( )	ectroscopy		15		
1 -		D1	dg. 33 Freo	n -			
1	Asphalt roo	oning   No	orth		15		
62	(gilver blace	(K)	ldg. 33 Fred	on -			
	A enhalt ro	OHUE	-41-		20	1	
63	1 . 11 hla	CKI	31dg. 33 - P	roject			2,000 SF
L	A sphalt R	OUI Ten			<1-	7	****
64	(gilver bl	ack)	Bldg. 31 - F	MING			
<u></u>	Asphalt 1	0011112	711 HAS	F AA TTIO		33	
65	(black)		Bldg. 31 -	Lilling			(included with #6
1	Asphalt	TOOLING	Dida - WE	SI	1	1	#64 quantity)
66	(black/b	Roof Tar(black)	Bldg. 33 -	Outu			23,000 SF
100				- Cylinder		0	(all platform roo
67	1-1	t Flat Roofing	1 A	OTTO		10	7
74	Asphal (silver	(black)	Storage N	- Cylinder		10	
11 /4	(silver	Ulder	Blag. 23	- Oj		The second second	C33223232222
	Roofin	10	Storage				

Submitted by:

Kim Trumbethi, Office Admin

	*
KEY:	
PACM = Presumed asbestos-containing material	 0.7003
NOB Confirming TEM-NOB Analysis	 DEC - O COLO
*ND = None Detected	
FMG#131003-TVA-1	

Submitted by Kill Trum bethi, office Admin

	M 93	os Pre-Demolition Insp atheson Tri-Gas Facilit 32 Paterson Plank Road East Rutherford, NJ pestos Material Summa	y i	DEC - 9 20		
Name have	Sample Type	Sample Location	Asbestos Content	Material Quantity		
Sample Number	Sample Type	Office Building Interior	A CONTRACTOR OF THE PARTY OF TH			
82	Floor tile	Under glue down carpeting	8%	2,400 SF		
82a NOB	Assoc'd mastic	Under glue down carpeting	1.9%			
91	Linoleum	Restroom Corridor	15%	120 SF		
92	12" Floor Tile	Ladies Restroom	2	150 SF		
93	12" Floor Tile	Lunch Room	2%	3,000 SF		
94	Linoleum Under #93	Lunch Room	15%	(Floor		
95	9" Floor Tile	Lunch Room & Under all addition area carpeting	2%	Tile/Linoleum Only)		
96	9" Floor Tile	Equipt. Storage Room	2%	1,200 SF		
102	Towel-on Acoustic Ceiling finish	North Office Perimeters(over gypsum board)	6%	500 SF		
103	Floor Tile	North Office Areas	10%	(Included with #93/ 95)		
105	9" Floor Tile	Storage Room with Attic hatch	8%	400 SF		
106	9" Floor Tile	Conf Room	10%	300 SF		
107	Floor Tile	"proposed " Conf. Room	24.1%	400 SF		
108	Floor Tile	West Side Entry hallway	5%	400 SF		
		Attic - Plenum Areas				
PACM	Pipe insulation – Air- cell and magnesia bock	Steam loop	PACM	400 LF		
		Boiler Room				
PACM	Pipe insulation – Aircell and magnesia bock	Steam loop	PACM	230 LF		
PACM	Pipe insulation – Aircell and magnesia bock	Assoc'd Floor debris	PACM	10 SF		
		Roofing				
PACM	Transite Corrugated Roof Paneling	pitched roof section extending under	PACM	6,000 SF		

Submitted by: Kim Trumbetti, office Admini

addition

PACM = Presumed asbestos-containing material NOB Confirming TEM-NOB Analysis

Date: 12/4/13

\* ND = None Detected EMG#131003-TVA-I



December 4, 2013

Mr. Tom Voorhees New Jersey Department of Labor & Workforce Development 1 John Fitch Plaza, 3rd Floor Trenton, NJ 08625

> Re: Initial Notification - Matheson Tri-Gas Facility 932 Paterson Plank Road - East Rutherford, NJ

Dear Mr. Voorhees,

Attached, you will find the initial notification for the above referenced facility. The notification is five (5) pages in total. The first page is the "Notification of Asbestos Abatement". The four (4) additional pages are the scope of work pages, as the scope is too large to fit on the 1st page of the notification.

Please confirm you have received all five (5) pages of this notification. I can be reached at (609) 702-0400 or kim@amsnj.net.

I appreciate your time and consideration to this matter.

Sincerely,

Kimberly Trumbetti, Office Administrator

Date of Notification (1) 12/04/2013		Name of Building Owner/Operator (2) Market Halsey Urban Renewal LLC													
Agencies Notified	Type Notification    X			Street Address 112 W.34th Street Ste.2106											
EPA DEP DOL			23.14	City, State, Zip Code New York, NY 10120											
DOH DCA	justification)	Emergency (including justification)  Cancellation		Name of Contact Bob Klug				Telephone Number   973-297-1286							
	<del>'</del>	<u>-</u> -		FACI	LITY INF	ORMATI	ION							,	
Name of Facility Where Market Halsey Bui		•		2020					Facility (4	9.5. V.	· · · · · ·	1			
Street Address 165 Halsey Street						School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)							es,		
City (5) Newark								Square 30,000	Feet	# of Floors 16		BI 80	dg. A	ige	
County (6) Essex					County Code (7) (STATE USE ONLY)				Current Use (Prior if being demolished) office building						
Name of Monitoring Firm Hired by Building Owner (8) RK Environmental Inc				ASCN 0090											
Street Address 403 ST. James Avenue							Street Address 265A Route 46 Suite 3D								
City, State, Zip Code						City, State, Zip Code									
Phillipsburg, NJ 08865  Project Manager for Monitoring Firm Telephone No.					Totowa, NJ 07512  Telephone No. License No.										
Jon Gilbert         908-454-6316           Start Date (10)         Scheduled Completion Date (11)					Name of OSHA Monitor										
12/19/2013 12/22/2013							Bako Construction & Restoration Inc.								
Occupancy Status During Abatement (Check Only One)						Street Address 265A Route 46 Suite 3D									
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Thur,Fri:3pm-11:30pm; Sat, Sun:8am-4:30pm					City, State, Zip Code Totowa, NJ 07512										
Scope of Work (Check /	All That Apply)						10101	wa, NJ	0/312			_			
≥3 sf or ≥3 if ≥160 sf or ≥260 if	12	Renovation Demolition					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	Locat	ation								Abatement					
Location of Nom				lly i		De	scription of					Туре			
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  Used S Mainte Custodi		intena	Asbestos Cor al Staff?			ntaining Material (ACM) al systems insulation, acing, VAT, or miscellaneous)			Amount (Specify SF or LF)		Domaio	Repair	Encapsulate	Enclosure	
	6	Yes	No	N/A							_   -			ite	е
12th F			X		VAT				450 SF		x				
12th F		1	X		1'X1'Ceiling Tiles/					x					
Baseme	nt 3 B		Х	•	Thermal System In			Insulation	lation 150 LF			_	_		
Name of Registered Wa	ste Hauler		- I N	JDEP W	aste	Cubic	Varde		Jame of F	Posietorod I as	4511	_			
Bako Construction & Restoration Inc.  ROBER Waste Hauler ID No. 20889			Cubic Yards of Waste G.R.O.W.S												
						sal Date 3/2013	- 1	City, State Morrisville, PA							
Completed by		Title				Signature Juffre 12/04/13									
Damir Valjevac		Proje	Project Manager				Jan	ur f	uzev	C	12/04	1/1	3		