### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

25	4		~ N	(Pu	CATION INJURIENT 1	OF ASBE	STOS A	12:120	)		С.	P	Ec	ζ,	VA
Date	of Natification (1)	2-05-20	12.		Name of	Building C	y L &	perator	HALLEN LVAN	BEG	k. 2012	DEC	10	. 1	VA
	ncies Notified	Type Notification			Street Ac	idress /	01	Si	ILVAN 1	2.0.	A SAL	÷.,	70	PM	3.
Table 100 to 100	EPA DEP	Initial Amended	*	-	City, Sta	te, Zip Cod	de 0/		Field.	A1 57	- 67	Has	3,0		
M	DOL	Amendment #	-	_		Contact	BU	pen4	FIEUG.		one Num		743/	46	MB.
-	DOH DCA	justification)  Cancellation		odynation in the	Name or	Kyl	ZE			1 reicht	MIG (VAITA				8
Di-		N=====================================	Diago /2		FACI	LITY INFO	RMATIC	MC	Type of Facility (	<b>A</b> )					$\neg$
	DRIVATE.	Abatement is Taking	rece (3	3					School (K-1						
Stre	et Address .		۵.	manusco en altrigues e del			•	2:	Subchapter Other (i.e. p	8 (Other t	han K-12) ommercial	build	ings,	home	s,
City	(5) Bloom	Bylvan R I Field	NJ.						Square Feet 2,200	#of Flo			dg. A 78		
Cou	nty (6)				County (	Code (7) ISE ONLY)		_	Current Use (Pri			ed)			
	ne of Monitoring Firm	Hired by Building O	wner (8)		ASCM	No.			of Abatement Cor RON QUALIT		щс				
	et Address								Address /AN ORDEN	PL	• .				
City,	, State, Zip Code	•							tate, Zip Code KENSACK	N J. 07	601				
Proje	ect Manager for Mor	nitoring Firm		T	Telephor	ne No.			none No. 708-4270		icense No 01135	-			
Star	Date (10)	12.	Schedule / Z	ed Con	npletion i	Date (11)		Name	of OSHA Monitor	inonin	TENTA	L.	Sec.	si ce	8.
		g Abatement (Check	Part of the second		<u></u>		$\neg \uparrow$		Address Op. RT.						
H	Facility Closed/Vac Abatement Perform Other Describe:	ated During Entire Po ned Outside of Norma	eriod of / al Facility	Abatem Hours	nent i		_	City, S	State, Zip Code	NJ			<del></del>		
Scor	pe of Work (Check A	All That Apply)													
	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			tenova Jemolii		5.			Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	cedure				•	
			ls	Local	ion								Abate Ty	ment ne	
	Location Asbestos-Containing <u>TO BE AB</u> In Facil (13)	Meterial (ACM) ATED Iity	Use	Normal of Sole intensi todial 8 (12)	lly by nce/	Asbesi (Le.	tos Conta	system ing, VA	daterial (ACM) s insulation, T, or	Amo (Spa · SF or	cify	Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A						W 515	-			-
	BASEME	NY .	-	X	-	PIF	25 7	NSU	LATION.	10	e sf.	X			
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Nam 5	ne of Registered Was horrow Que	ste Hauler white eo.			UDEP W lauter ID	No.	Cubic of Was	100000000000000000000000000000000000000	Name of	Registere	d Landfill	Se	RV	118	9.
City,	State Hacke	whity co.	NJ	<u>.</u>	- 771		Dispos	al Date	City, Sta	te Brown					
Con	pleted by RLOS ESQUIV		Title		MANA	GER	S	ignatur			Dell 12				

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

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

GAC Project # 060-12 Client Project # Name of Building Owner/Operator (2) 201 Date of Notification (1) RUTGERS, THE STATE UNIVE December 5, 2012 Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT ☐ EPA ☑ Initial Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS ☐ DCA ■Amended Notification X DOL ■ Emergency (including City, State, Zip Code PISCATAWAY, NJ 08854 ☑ DEP- No Longer REQUIRED justification) Telephone Number X DOH Name of Contact □ Cancelled (A) MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) **BLAKE HALL. BLDG # 6005** ☐ School (K-12) ■ Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **COOK CAMPUS** Sq. Feet: N/A # of Floors: 3 Bldg. Age: 60+ years City (5) County (6) County Code (7) **NEW BRUNSWICK** (State Use Only) Current Use (prior if being demolished): ACADEMIC **MIDDLESEX** Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City State, ZipCode City, State, Zip Code **BUTLER, NJ 07405 BURLINGTON, NJ 08016** Project Manager for Monitoring Firm Telephone Number License Number Telephone Number **BRIAN KEARNY** 609-386-8800 00840 973-492-0477 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12/14/12 12/16/12 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ■Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other - Describe: Shift Hours: 5:00 PM FRI - 5:00 AM MON FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure Mini-Enclosure □ Renovation ≥ 3 sf or ≥ 3 lf ■ Glovebag Procedure Demolition ≥ 160 sf or ≥ 260 Non-Exempted (\*) and Non-Friable Procedure Abatement Type Description of Asbestos Containing Material Amount Location of Asbestos-Containing Is Location Normally Used Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Material (ACM) in Facility (13) Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) NO YES Room 134A X X VAT 500 SF NJDEP Waste Hauler ID# Name of Registered Landfill Name of Reg. Waste Hauler 5 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below City, State Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date 100 New Ford Mill 12/16/12 NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Horizon Disposal Services, Inc., Trenton, NJ 08611 19067 NJ DEP# 22612 215-736-1700 Date Completed by (Print or Type) SENIOR PROJECT Raymand C. Pedalino December 5, 2012 RAYMOND C. PEDALINO MANAGER

Check# 1

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

GAC# 9024-12	100					N	norotor (2)	777			-	
Date of Notification (1)  Decembe	r 5. 20	12				Name of Building Owner/O	CONTINEN	TAL PR	OPÉ	RTY N	/ GMT	ſ <b>.</b>
Agencies Notified		Notification 7				MR. STEVENS c/o C Street Address 975 EASTON ROAD City, State, Zip Code	20120	50 10		- الميا		
2.000		☑ Initial N			-	975 EASTON ROAD	, SUITE 10	E 10	PHI			
□ EPA		Amende				WARRINGTON, PA	18976	ra	. 0	. 68		- 1
DCA	3	□Emerge			-	Name of Contact	6	Telephon	e Num	per		
⊠ DOL	_	Justific		tter)		MR. EDWARD STEV		n Alippinon)	<u>o</u> , (a	55000		- 1
DEP- No Longer REQUIRED	,	□ Cancell	led		į.	INIK. EDANAKO 21 EA	LING		···	•		
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	t in Takir	na Diana (3)		PAGIL	ITT INFC	Type of Facility (4)				42		
Name of Facility Where Abatemen	it is Takii	ng Place (3)				School (K-12)						
STEVENS RESIDENCE						Subchapter 8 (other than	K-12)					
Street Address	danskove s		177XT			Other (i.e. private & com		nas homes	etc.)			
148 ELM ROAD						Sq. Feet: Unknown	# of Floors	: 2 Bld	a. Age	: 604	- year	s
	-1. (0)		Country	Code (7)		<u>oq. i eet.</u> Oiikilowii	11 011 10010			- 5555577		
<u> </u>	ounty (6)		(State I	se Only)		Current Use (prior if being	demolished):	RESIDE	NCE			
CRESSKILL	BEK	GEN	Totale 0	SC OTHY		Current Ode (prior il bellig						
	5:1 6	(8)	40014	1-		Name of Contractor (9)						
Name of Monitoring Firm Hired by	Bidg. O	wner (8)	ASCM N 0098									1
ENVIROVISION, INC.		)	0090			<b>GREENWOOD ABAT</b>	EMENT CO	NSULT	ANTS	, INC.		
Ot at Address						Street Address						
Street Address 20-21 WARGARAW ROA	n											
20-21 WARGARAW KOA	D				1	268 MAIN STREET						
						City State, ZipCode				10000		
City, State, Zip Code						BUTLER, NJ 07405						
FAIRLAWN, NJ	- T	Telephone N	lumber			Telephone Number		License N	lumber			
Project Manager for Monitoring Fi	<u> </u>	973-636-					4	***************************************				
FRED LARSON		373-030-	3173			973-492-0477	14	00840				
Scheduled Start Date (10)	-	Scheduled C	Completion	Date (11)		Name of OSHA Monitor						
12/17/12	- 1	12/18/12										
12/1//12						ENVIROVISION, INC						
Occupancy Status During Abate	ement (	Check only o	ne)			Street Address						
☐ Facility Closed/Vacated Dur	ing Entir	re Period of A	Abatemer	nt	1	00 04 MADCADAM	DOAD					
☐ Abatement Performed Outsi	ide of No	ormal Facility	Hours -		1	20-21 WARGARAW	RUAD					
Describe						City, State, Zip Code						
☑Other - Describe: Work A	rea Clo	osed/Vacan	t Durin	g Entire								- 1
Period of Abatement 7:00	0 AM -	- 7:00 PM				FAIRLAWN, NJ						
Fellou of Abatomont 110						.,			726			
Source of Work (Check all that an	pply)					_	- "	ı fal.	NI	Dess		- 1
						브	Full Contain		Negati	ve Pres	sure	- 1
□ > 3 sf or ≥ 3 lf					novation	_	Mini-Enclos					
X ≥ 160 sf or ≥ 26	60			☐ Der	molition		Glovebag F			2007/00/25 12	200	
						X	Non-Exemp					ure
Location of Asbestos-Containing	Is Lo	cation Norma	lly Used	Descripti	ion of Asb	estos Containing Material	Amoun	CA CUNCKY OF THE	bateme	nt Type		
Material (ACM) in Facility (13)	Sole	ly by Maint./C	ustodial			al systems insulation, surfaci	ng, (Specif or LF)	y SF R	emove	Repair E	ncap E	nclose
		f? (12)	NIA	VAI, or	other mise	ceii.)	01 117	1				
nd nd	YES		NA	MAT			1100	SF D	<u> </u>			
BASEMENT & 2 <sup>nd</sup>		X		VAT			1100	J.   L				
FLOOR ROOMS												
											1011	
Name of Reg. Waste Hauler		NJDEP Wa		r ID#		Cubic Yards of Waste:	10 CY	Name of G.R.O.	Registe	red Lan	OTIII	,,
Newark Carting, Inc.		NJ DEP	# 4509					G.R.U.	W.S. P	iorui L	.anum	"
Newark, NJ 04509							2				1	
Tiewark, 110 04507							Disposal Da	te		ity, State		:11 102
Notes: None							12/18/12		2002	00 New I orrisville		
Tioles. Tione										15-736-1		
		Title			-	Signature		Date				
Completed by (Print or Type)		Title SENIOR P	DO IE	т		2 100	11.		embe	er 5, 20	012	
RAYMOND C. PEDALIN	11 (1 TO TO )	BAANACE		J 1		Raymand C. Pe	dalino		X200	(E)		=

### MO# 20142489925

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

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Date of Notification (1)	05 / 12					Owner/Operator (	2)	2012 DEC 10	-//	EL	)	
					Mustafa			266.10	- ^-			
Agencies Notified  EPA	Type Notification Initial				Address oth Street		8	Telephone Nun	PM	3: 0	Q	
□ DOLWD     □	☐ Amended	1			tate, Zip (			& Ling C	nue			
☑ DHSS	Amendment #			9 55 <b>3</b> 80 VAIS				CENS	11/1/	PM.		
DCA	Emergency (ir	cluding	1		of Contac	NJ 07047		Telephone Nun	her	-7.		
(NJAC 5:23-8)	justification)							Totophone train	1001	C		
	Cancellation				ry B.Pas				-	420		
				FA	CILITY IN	IFORMATION						
Name of Facility Where	Abatement is Takin	g Place	(3)				Type of Facility	(4)				
Private Property							School (K-1		•			
Street Address								8 (Other than K-1) private and comme		ildina		
239 76th Street							homes, etc		ir Grat De	mame	15,	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
North Bergen, NJ 070	47									200	75.0	
County (6)				Ceun	iy Code (?)	(STATE USE ONLY)	Current Use (P	rior if being demoi	ished)			
Hudson									erecontrol e			
Name of Monitoring Firm	n Hired by Building	Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9	9)				
	,		`			Gr Tech LLC	one contractor (c	1				
Street Address			1			Street Address						
Officer Address							wa na					
City State 7in Cade						576 Valley Rd						_
City, State, Zip Code						City, State, Zip C						
						Wayne, NJ 074	70					
Project Manager for Mor	nitoring Firm		Tele	phone	No.	Telephone No.		License No.				
				-		973-638-1777		01127				
Start Date (10)		duled C				Name of OSHA	Monitor				V-2007	
//	12	12 /	_16		12	Envirovision Co	onsultants.Inc					
Occupancy Status Durin	g Abatement (Chec	k only	one)			Street Address				-	-	
□ Facility Closed/Vacate						20-21 Wagaraw	Road Bldg #	34A				
Abatement Performe						City, State, Zip C		J 17.1				-
Time of Abatement:	F	M/	PM_		AM	Fair Lawn, NJ (	07410					
Scope of Work (Check a	II that apply)				<del>8112 - 3</del> 25 - 325	The control of the co	p and decontam	ination				
D-2-4214			1/22				ntainment with Ne	egative Pressure				
>3 sf or >3 lf > 160 sf or >260 lf		H Re	enovati emolitic	on		Mini-En	closure ag Procedure					
			anong.	211		Non-Ex	empted (*) and N	on-Friable Proced	ure			
		Is	Locat	ion	T					atem	ent T	ivne
Location			Norma		1	Description	of	9				i -
Asbestos-Containing			ed Sole intena			stos Containing Ma		Amount	er	ep.	inc	-nc
TO BE AB. IN Faci			todial		(1.6	e., thermal systems surfacing, VA1	insulation,	(Specify	Removal	Repair	aps	Enclosure
(13)			(12)			other miscelland		SIF or LF)	<u> 8</u>	1000	Encapsulate	ле
		Yes	No	N/A			5-7-7-7-5 <b>f</b> . V				(i)	
Dronort			П	×	NC . 1	CMODI		1 000 00				
Property		ᆜ	1_		Mixed A	ACM&Debris on	SOII-	1,800 SF	_   _	Ш	Ш	
					Clean u	p and decontamin	nation after					
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		-			ilouse d	, ,				믇		
Name (D		<u> </u>	14.			127	. [	L		Ш	Ш	
Name of Registered Wa	ste Hauler		NJ	JEP Wasti	e Hauler ID No	Cubic Yards of Was	Name of Reg	istered Landfill				***************************************
Gr Tech LLC	25) 2000000 - 10		(	003378	35	TBD	T.R.R.F. Inc					İ
City, State						Disposal Date	City, State				-	
Wayne, NJ 07470						TBD	Tullytown, F	ΡΔ				!
Completed By (Print or 1	Type) Tit	ie				Signature /	7	- 1	ate		_	
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Date of Notification (1)	$\varphi S S \varphi$		-		me of Build	ing Owner/Opera	lor (2)		1012050	_	
12-7-1 Agency Notified	Type Notification				U L	CMAN F	AMILY	PARTNERS BLUD.	EHIP	0	PM
<b>≝</b> EPA	☐ Initial			-	390	O MILL	FNIA I	BLUD.	& LICE	C	7/1
DEP DOL	Amended Amendment #	1			, State, Zip	Code			TICHA	131	NG
<b>№</b> DOH	☐ Emergency (inc			Nar	O R	LANDO,	FL 3	72839			
Ø DCA	justification)  Cancellation			110				Telephone Nur	nber		
				FA		MAS BAL	JER	<u>- 1-1-1</u> 9			
Name of Facility Where A	Abatement is Taking	Place	(3)		CILITI IN	ORMATION	Type of Faci	Eb. 745			
A CONTRACTOR OF THE PARTY OF TH	L STATE			TR.	. 1. / > .	\_	language of the second second				
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City (5)	RT. 23		-				homes, el	c.)			
LIAY	II ,=						Square Feet		Bldg. Age		abit-tri na
County (6)	00			Cou	nty Code /7	) (STATE USE	100,000		40.	+	
PASSA	+1C			ONL		7(37712 032		(Prior if being demol	ished)		
Name of Monitoring Firm	Hired by Building Ov		ASC	M No.		Name of Abate	VA.C-	ANT			1700-110
Street Address	ASSOCIATES	= /20	4					75.050			
Olicel Modless						Street Address	80 ( INC	•			
2865 Sauth City, State, Zip Code	LAGLE RD.	#3	59			173 K	ARKUS	AVE			
	P	٠.				1					
NZWTOWA Project Manager for Monit	oring Firm	940	Telenh	one No		WOO I	BRIDGE	License No.	07095	-	
						722	726-3111			325	1100
ROB UE Start Date (10)	Scheduled	Compl	etion D	ate (11	1)	Name of OSHA	Monitor	006	15		
12-10-12 Occupancy Status During	01-	27	-17	3				_			
Occupancy Status During	Abatement (Check o	only one	e)			Street Address	ABOUL				
☐ Facility Closed/Vacated ☐ Abatement Performed C☐ Other – Describe:	During Entire Period Outside of Normal Fa	d of Abacility H	atemer ours	it		City, State, Zip	Code	<u> </u>			_
Scope of Work (Check all I	hat apply)								245		
□ ≥ 3 sf or ≥ 3 lf				O n-		O Full	Containment wit	h Negative Pressure		1.5	
S=≥ 160 sf or ≥ 260 lf		· · · · · ·		Ø-Đe	novation molition	J⊠ Mini J©CGlov	-Enclosure /ebag Procedure				
			s Local						Abat		nt
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Asbestos-Containing I TO BE ABA		5-00-1-1-2	aintena Custod		Asbes	tos Containing M thermal systems	aterial (ACM)	Amount	_	m	m
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(13)			(12)			other miscelland	eous)	60.	oval	sula	Sur
(1)		Yes	No	N/A						6	
THROUGHOUT BUI	LDING		×		BLACK	FLOOR MA	4571	51,0005.F	. x	H	$\dashv$
WINDOW SILLS			×			SITE WINDOW		300 L.F	·   ^	$\vdash$	$\dashv$
BOILER			X			BREECHIA		250 GF	x	$\vdash$	$\dashv$
BOILER			X		BOILER	GASKE ON TH		84 L.F	×	H	$\dashv$
Name of Registered Waste	Hauler	ID OIL	DEP W	aste F	dauler	Cubic Yards of Waste	Name of Regis				$\dashv$
MEWARK CA	RTING INC		45	na	-	N/A	Canac				
ony, State			73	07		Disposal Date	GROWS City, State	. INC.			
MEWARK.	NJ.					N/A	MADO	VILLE PA			
completed by	Title					Signature	HUZICIS	VILLE PA	)ate		$\dashv$
DAVIDT. TOLCH						Dave	11.12	Och I	12.07.12	, ,	
SB-41	* Do not	use th	is form	for asl	bestos licer	nsure exempted a	activities.		201.16	_	

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

7327261556

2012 DEC 10 PM 3: 65

Date of Notification (1)	21	, 1	2		٨	Jame o	Building an Fam	Owner/	Operator (2) rtnership	)	43	WESTUS	CONT	RO	t.	
Agencies Notified	Type N	100000			5		Address					& LICEN	COLNE			)
⊠ EPA	1 Initi	ıl			1		0 Milleni		d.							
SI DEP	Am-	nded			(		ate, Zip Co									
DCA (NJAC 5:16)	Am	ndment irgency (	#_	dina	1	Orio	inde, Fl	3283	9			elephona Num	ha-			-
⊠ DHSS □ DCA	ine.	fication)	ii leve	an g	T	Name	of Contact				1,	еюрпопів ісп	300			
(NJAC 5:23-8)	☐ Car	osllation			1.	The	mas Bat	uer				100	101			
						FACI	LITY IN	FORN	MATION							
Name of Facility Where A		- In Tok	ing D	lacio /S		1 /10				Тура	of Facility (4)					
Name of Facility Where	Datame i	dimer		inom la					1		School (K-12)		• • • • • • • • • • • • • • • • • • • •			
Former State Fan	ii Bui	ung	_								Subchapter 8 (	Other than K-1; ate & commerc	4) Iai bulldir	195,		
Stroot Address									- ]	N I	other (i.e., privi	ale d commen		•	_	
1750 Route 23											are Feet	# of Floors	Bld	q. Ag	8	
City (5)										10000	00,000	1	4	0+		
Wayne						I Cou	tu Carla IT	VSTATE	USE ONLY)			If being demo	ished)	100 m		-554
County (8)						CODI	ity Quue (i	ДФЛАТС	, 000 0.112.7		acant					
Passaic				- 10		ASCM	No	Name	of Abatemo		ontractor (9)					
Name of Moniforing Firm	Hired '	y Buildin	g Ow	mor (8	, [	MOCINI	NO,	Pi	amned He	inth	ach Consti	ruction Corp	oratio	n		
R.A. West Assoc	ates, l	inv.	582						Address	41142						
Street Address				340.0							ne Street					
2865 South Eagle	Roas	#359									He Guser			_		-
City, State, Zip Code									State, Zlp C		40404					
Newtown, PA 185	140								illado lphi:	a, P	A 19124	License No.		_		_
Project Manager for Mor	itoring	Im			Tele	phone	No.		ohone No.							
Bob West	ARTONOM <del>S</del> OC				2	15-86	0-5026		5-739-81			00646				_
Start Dale (10)		So	hedu	led Co	mple	tion D	ate (11)		e of OSHA R							
12 / 06 /				350.50			13		AME AS A	ABO	VE					_
Occupancy Status Durin	g Abat i	ment (C	heck	only o	ne)			Street	al Address							
M Fedilly Closed Vacat	ed Dui r	ng Enttre	Parl	od of A	bate	ment										_
Abstement Performe	d Outs d ZAM-£ P	e of Nor M/	mai i PN	acility	AN	rs - De A	scribe	City,	State, Zip C	Sode						
Scope of Work (Check	that u	pply)							ET EUIL CO	ntalni	ment with Nea	ative Pressuro				
			- 8	Ro	novet	tion			Mini-En	closu	11.9					
☐ ≥3 sf or ≥3 lf ☑ >160 sf or ≥260 lf				☑ Dei					⊠ Gloveb	ag Pi	rocedure	- Estable Desco	dura			
Z _100 31 4:						Alam			⊠ Non-Ex	cemp	ted (") and No	n-Friable Proce		atem	ant T	TVD
		10	1	0.00	Loca		1		Description	nf.	1		-	_	_	Ť
Locatio Asbestos-Containing	n of	-1 (ልሮሴን		Use	d Sol	lely by	Asb	aatas (	Confeining M	Aatorl	al (ACM)	Amount	3	Re	9	
TO BE A	BATED	al (Secolal)	'			anos/   Staff?	(i.e. th	ermal	systems Insu	ulatio	n, sunacing,	(Specify SF or LF)	Removi	Repair	Encaps	
IN Fac	ility			Cusi	(12			oth	VAT, or nor miscellan		6)	SF Q( LF)	<u> </u>	1	ulate	
(13)	)			Yes	No	N/	<u> </u>	-	igt Hissociion		'				9	
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Window Sills	<u> </u>				×		Trans	ite W	indow Sil	lls		300 LF	×			1
Boller					×		Flue	Breec	hing			250 SF	×	Q		1 [
Boiler	-		_		Ø		Bolle	Gas	ket on tw	o bo	ollers	84 LF				1   1
Name of Registered W	nato H m	ıler					Waste	40.5	ic Yards of		Name of Regis	stered Landfill				
Dlamond Huntbs			tlon				ID No.	Wa	sto /a		Minerva					
City, State	4043	A							possi Date	1	City, State Waynesb	urg, OH 440	3B <b>9</b>			
Philadelphia Di	1 1 23 1 1							1		- 1	9 <del>7.</del> 66	PRESENT.				
Philadelphia, PA			Title						Signature				Date		E CYS LT	

			lama of	f Buildin	g Owner/Oper	rator (2)	)	- U			. 1
e of Notification (1)			loe M	ancini	/Residence	201	2000				-
NoTIFICATION OF ASBESTOS ABA LEMENT (Pursuant to NIAGR 3:90 and 12:120)    Date of Notification (1)											
Date of Notification (1)   12/5/12   Agencies Notified   Type Notification   Street Address   4 East 10 Street   Amended Amendment # Emergency (including Justification)   Name of Facility Where Abatement is Taking Place (3)   Name of Contact Joe   Name of Facility Where Abatement is Taking Place (3)   Oe Mancini / Residence   Street Address   A East 10 Street   A East 10											
EPA Initial			City, St	ate, Zip	Code	A1 .3	#C3108 008	THUL			
i i Amended	nt #	'	Beach	h Have	n NJ 0800	8	& LICENSIA	elephone Numbe	r		
DOL Emergenc	y (including	9	Name	of Conta	ict			o <del>≡</del> 0	1		
DON Cancellati	n) on					M					
DCA			FAC	CILITY	NFORMATIO	N	Type of Facility (4)				
ame of Facility Where Abatement is Tal	king Place	(3)					School (K-12)	II V 12\			
Date of Notification (1)   Joe Manchin / Residence   2812 DEC TO PM 2: 52		es,									
**** *********************************							etc.)				
East 10 Street							Square rect			.5-	
ity (5)				2			TUUUT	Name	d)		
Beach Haven NJ 08008			Coun	ty Code	(7)		Current Use (Prior I	Dellig demonstra	2( <b>5</b> 1)		
			(STA	TE USE	ONLY)			actor (9)			
Ocean	ling Owner	(8)	AS	SCM No		Name	aco inc				
	9	1)									
						PO	Box 329	*			_
Street Address						City	State, Zip Code				
City State Zin Code						We	st Berlin NJ 0809	1			_
City, State, 219			1 Tale	nhone	No	Tele	phone No.		0.		
Project Manager for Monitoring Firm			1616	epriorie	,			00727			
	T 0-1	bolulad	Comple	etion Da	te (11)						
Start Date (10)	12	/10/12	Compi								
12/6/12			The second second			Stre	et Address				
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Facility Closed/Vacated During	Entire Pend of Normal F	acility F	lours			City	, State, Zip Code				
Abatement Performed Cutsias (									103501E)		
Parallel State of the State of	y) ·				*		T Full Containm	ent with Negative	Pressur	е	
							Mini-Enclosur	e .			
		X De	emolitio	n			Glovebag Pro	ed (*) and Non-Fri	able Pro	cedure	
	0						11011			Unare	
		ls	Location	lû			-tion of		-	·',	
Location of		N Use	ormally d Solely	y by	Ashestos (	Contain	ing Material (ACM)		Z.	71	Enc
Ashestos-Containing Material (A	ACM)	Ma	intenan	ice/	(i a thei	rmal SVS	stems insulation,	SF or LF)	emo	lepa	apsu
TO BE ABATED		Cust		ldiif	otl	her mis	cellaneous)	3	Val	=	late
III CALAILLY							*0			1_	1
				ALLA							
		Yes	No	N/A							_
		Yes	No	N/A		F:44	raneite	800 SF	x	-	

G.R.O.W.S.

City, State

Cubic Yards of Waste

Disposal Date 12/10/12

3

NJDEP Waste Hauler ID No.

22459

Title

President

Name of Registered Landfill

Morrisville PA 19067

Date

United Containers

Completed by Anthony T Perna

City, State

Elm NJ

Name of Registered Waste Hauler

of Notification (1)	N	lame of	f Building	Owner/Ope /Residence	rator (2			V kms the			_	
5/12 ncies Notified Type Notification		Street A	ddress t 10 St					PM 2:52				
EPA DEP DEP Amended Amendment #	1	Sity St	ate Zip		8	A, Sile	STOS	CONTROL	A D			
DOL Amerianie in Cancellation		Name o	of Conta	ct				enione rumo				
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me of Facility Where Abatement is Taking Place oe Mancini /Residence	€ (3)*					School Subcha	(K-12)	ther than K-12) a & commercial	buildings	, hom	ies,	
reet Address East 10 Street					35	etc.) Square Fee		of Floors	Bldg. 35+			1
ty (5) leach Haven NJ 08008		Coun	ty Code	(7)		1000+ Current Us Residence	e (Prior if I	oeing demolishe	ed)			3
ounty (6) Ocean	or (8)	(STAT	SCM No.	NLY)	Name	e of Abateme		tor (9)				Ť
lame of Monitoring Firm Hired by Building Owne N/A				*	Stree	naco Inc						
Street Address					City	Box 329 State, Zip Co est Berlin N	ode 1.08091					
City, State, Zip Code		Tele	ephone N	No.	Tele	phone No.		License N	lo.			
Project Manager for Monitoring Firm	heduled (			`		6-753-9800 ne of OSHA		00.7				
Start Date (10)	2/10/12	hvere <u>se</u>			1	eet Address						
Occupancy Status During Abatement (Check C Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	IND OF ADI	aremen	it		Cit	y, State, Zip (	Code					_
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novatio molitio		<i>X</i> 2		Mini-	Enclosure	nt with Negative edure (*) and Non-Fri			e	
X 2100 31 01 - 200	TO CHARLES					× Non-	Exempled	() and realize		Abun	ement pe	_
	N	ocatio ormally Solely	by	(i a the	Contain	iption of ling Material ( stems insulat g, VAT, or	ACM) ion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Maii	ntenan odial Si (12)	taff?		urfacin	cellaneous)			<u>s</u>			-
Asbestos-Containing Material (ACM) TO BE ABATED	Maii	odial St	n/A		urfacin	cellaneous)				-		+
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Maii Custo	odial St (12)	taff?	ot	eurfacin her mis	cellaneous)		3000 SF		-		+
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Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Ext transite Siding  Name of Registered Waste Hauler	Maii Custo	No	N/A  X  NJDEP V Hauler IE	E: Vaste D No.	Cubic Yof Was 3 Dispos	site Siding  /ards te al Date	Name of G.R.C	3000 SF	x	/12		1

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N. Depla	of Healt	Ve Seni	or Servi	ces
TEM	(sig	nature)		
/A	lasti	1 Time	<u>. 8:5</u>	一個

2012 DEC 10 PH 2:51

ate of Notification (1)	Nar	me of E	Building (	wner/Opera	ator (2) guing (	sentar	** 0 t	LICEN TO THE	CHITA	TO I		
encies Notified Type Notification	Str	eel Ad 201	dress S+	LIVEN	ي زي	N AVE			ļ	9		
DOH Carpellation	N N	ame on Ri	CH.	3		7009		hone Number				
iame of Facility Where Abatement is Taking Place Who michan Village	(3)	FAC	LITY IN	ORMATION	1	Type of Facility Subshapk Subshapk Other (i.e.	-12)	er (han K-12) L commercial bu	sdings, h	omes		
Street Address 977 PRIVAT ROAM						Square Feet	# of	Floors	Bldg. Ag	e 	-	
		Count (STAT	y Code (	T) #LY)		Cucront Lise !	FTJ.	ing demolished r (9)				
Name of Monitoring Firm Hired by Building Owner	(8)	AS	CM No.		A.I	Mac Commac	ung Hic					1
Street Address					105	State, Zip Code en Rock, N.J	•					The second
City, State, Zip Code Project Manager for Monitoring Firm		Tele	phone N	0.	Tele 20	phone No. 1-262-5841		License No 00156				1
Start Date (10)	neduled C	omple	tion Date	(11)	0	ne of OSHA Mo mega Enviro eel Address	nmenta	l Services In	ic.			-
Occupancy Status During Abatement (Check Of Pacific Check Of Pacific	nly One)	tener			2	80 Huyler St y. State, Zip Co tackensack,	de	06	Ī			_
Cither - Describe:  Scope of Work (Check All That Apply)  23 sf or 23 if  ≥180 sf or ≥280 if	Re De	novetic Offilion	ก			Mini-E	closure	with Negative dure (*) and Non-Fria	the Proce	que		_
S 190 91 01	Γ.,	Locatio								bate Typ		_
Location of Asbestos-Contening Material (ACM) TO BE ABATED In Facility	Usex	ormail) d Solei exercer podial S (12)	y by	(re. me	Contai	ription of ring Material (A ystems insulation of, VAT. or scellaneous)	(CM)	Amount (Specify SF or LF)	Removal	Repair	Envapsulate	Fileson
(13)	Yes	No	NA		Pa	Ph		1 85	UE X	-	-	-
Clawe 3.P.ACA	<del></del>		مرا						1	1	1	+
Name of Registered Waste Hauler	1		NJDEP Hauter I 20785	D No.	of Wa		IESI F	Registered La A Bethleher	m Lano		orp.	
Rovic Transport  City, State Riverdale, New Jersey 07457		1				Signature	Bethi	ehem, PA 1	8015 Date	15	1/1	_
Completed by	Pr	e eside	ent			JUM	Joel	1	- 1 gar		•	41

A58-41 (R-68-08)

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Date of Notification (1	1)	Job#	:		Name	of Build	ing Owner	/Operator			4E Ou	- i b	E	)	
December 5, 2012					Delaw	are Rov	er Port A	uthority		20121	DEC 10				
Agencies Notified	Notification	туре				Address					JEC 10	PM	2:	6.0	
□EPA	☐ Initial N	otification	n		P.O. B	3ox 4262	2		3 4	lane.	STUS LICEN		7	43	
DEP	⊠ Amend				City, S	tate, Zip	Code			3	21031	MA.	TE		
⊠ DOL		ndment#			Linder	nwold. I	NJ 08021			e'c	LICEM	BIN	TRE	II.	
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M DCA	☐ Cance										59.			9	
	2			-		MacGre		2000			Ļ		=		
Name of Facility Whe	ra Abatama	at in Taki	na Dia	(2)	FACIL	LITY INF	ORMATIO	ON	Type of Fac	ility (A)					_
are arrest as the Mar			ng Plac	e (3)					School (I						
Port Authority Trans Street Address	site Corpora	ition		21-2					Subchap		ther than I	K-12)			
- 5			- DII	d:\					Other (i.e	e. privat			l build	ings,	
Carlton Avenue, Blo	ig. #1 (Admi	nistratio	n Bull	aing)					homes, e		. ( Fl		DIde	A	
City (5)									Square Fee 10,000	2	of Floors		40 ye	. Age	
Lindenwold					Count	v Codo /	(7) (STA	TF	Current Use		f heing der	nolieh			
County (6)					USE	ONLY)	(1) (SIA)		5,546		Deling del	HOHOI			
Camden County	Time Uland hi	Duilding	Ours	- (0)		_	Name of	Contracto	Commercial						_
Name of Monitoring F				(0)	ASCM	NO.									
Accredited Environs Street Address	mental Tech	inologie	s, Inc.		107		Street Ac		ediation, Inc.					-53575	-
							200000000000000000000000000000000000000								
28 N. Pennell Road City, State, Zip Code							City Stat	te, Zip Coo	le						
							NOTICE DESCRIPTION								
Media, PA 19063	Applitating El	rm .	Tolonh	ono Niu	mbor			phia, PA ne Number		License	e Number		0 111		
Project Manager for I	vionitoring Fi			one Nu			William Conference of Artist				e Nullibel				
Harris Brody	(40)			1-0114			215-533-		-	00858					
Scheduled Start Date	(10)	Schedu			1(11)			OSHA Mo	20033	20.70°230 I <b>3</b> .743030 I 3	Mariana Mariana				
Occupancy Status Do	urina Abatan	Decemi					Accredit Street Ac		nmental Tecl	nnologi	es, Inc.				
Occupancy Status Di	uring Abatem	ient (Che	CK OIII)	( one)		1	ST TROUBLE 1								
☐ Facility Closed/Va								nnell Roa			-				
<ul><li>☐ Abatement Perfor</li><li>☐ Other – Describe:</li></ul>		of Norm	ai Faci	lity Hou	irs -			te, Zip Coo	ie						
							Media, P	A 19062		v.=====					0.0000
Source of Work (Che	ck all that ap	ply)							141						
☐ >3 sf or >3 lf					enovation				ntainment with	Negati	ive Pressu	re			
				∐ De	emolition			_	nclosure ag Procedure						
								Non-Ex     No	empted (*) an	d Non-F	riable Pro	cedur	e		
		Ι.											A h = 4		
		20000	Location Location									1		ement /pe	τ
Location of Asb	estos-		olely b			De	escription	of		Amou	nt	_			-
Containing Materia		332333	intenan		Asbes	stos Cor	ntaining Ma	aterial (AC	M)	(Speci				т	L
TO BE ABAT IN Facility		0	Sustodia Staff?	31	(i.e.		ai systems acing, VAT	insulation	•	SF or L	_F)	Remova	Z,	Encapsulate	1 2
(13)			(12)				miscellane					l d	Repair	psu	Eliciosule
0.000 PC 0			-		1							a	7	late	1
		Yes	No	N/A											1
Room #B-212 / 2 <sup>nd</sup> F				X	& TAV				532 SI			X			+
GM's Secretary Are	a			х	VAI&	Wastic			140 5		15.000	_^			+
				17-0											I
Name of Reg. Waste	Hauler		1000000	JDEP V	43.500	Cubic		Name o	of Reg. Landfill						
The Drime Crown D	omodiation		H	auler ID	)#	of Was	ste	Minerv	a (DEP #15-1	292)					
The Prime Group Ro City, State	emediation						sal Date	City, Sta	<u> </u>						
Philadelphia, PA						12/28/		201000000000000000000000000000000000000	sburg OH						
Completed by	Titl	e	-			12/20/	Signatur		>	_	Date	е			
Vincent Primavera		oject Mar	nager								Nov	embe	er 27	2012	
B-41	FIC	Jeer Midi	agei												

0 19499 5005631 Date of Notification (1) 11/30/2012				Building Own	er/Operat	or (2)	2012 DE	0.10	61	J		1	
Agencies Notified Type Notification			treet Ad	dress in Street,	Apt 211		2012 DE	<u>- 10</u>	PH 2:	48			_
X   EPA     X   DEP     X   DOL     Amended     ∴ Amendment	#	C	City, State	e, Zip Code			& LI	CENS	UNTRO	7			
Emergency justification)	(including	N	lame of	Contact			4	Tele	phone Num	PAT.	í		
DCA Cancellation	1			ITY INFORM	ATION								_
Name of Facility Where Abatement is Takir	ng Place (3)		FACIL	II Y INFORM	IATION	Ty	pe of Facility (4	1)					
Street Address 70 Essex Street					*	- C	School (K-12 Subchapter Other (i.e. p	8 (Othe	r than K-12 commercia	) Il buildi	ings, l	nome	s,
City (5) Glen Ridge							etc.) quare Feet /A	# of N/A	Floors		dg. Aq	je	
County (6)			County C	ode (7) SE ONLY)		С	urrent Use (Pric	or if bein	ng demolish	ed)			
Essex Name of Monitoring Firm Hired by Building	Owner (8)		ASCM		Nan	ne of	Abatement Con batement, In-		(9)				_
N/A Street Address			L		Stre	et Ad	dress						10.50
City, State, Zip Code							engren Aver e, Zip Code	nue					
					To	towa	, NJ 07512						
Project Manager for Monitoring Firm		7	Telephor	ne No.			e No. 5-8685		License No 00675	0.			
Start Date (10) 12/03/2012	Scheduled 12/04/20		pletion [	Date (11)			OSHA Monitor batement, In	c					
Occupancy Status During Abatement (Che					U. VIEGGO)		ldress sengren Aver	nue					
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of Abomal Facility H	atem	ent		City	, Stat	e, Zip Code a, NJ 07512						-
Scope of Work (Check All That Apply)						710446	2, 140 07012						-
≥3 sf or ≥3 If ≥160 sf or ≥260 If		novat moliti				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				9	
	Is L	ocatio	on								Abate		ı
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenar	ly by nce/	(i.e. the	Descript Containing ermal syst surfacing, ther misce	ig Mai ems ii VAT,	terial (ACM) nsulation, or	(5	mount Specify or LF)	Removal	Repair	Encapsulate	
	Yes	No	N/A									e	L
basement		X			pipe ins	ulatio	on	4	0 LF	Х	-		1
	++							712-112		+			1
and the second s													1
Name of Registered Waste Hauler D&S Abatement, Inc.	is is	Н	JDEP W lauler ID 0996	No.	Cubic Yard of Waste FBD	is	1 1000000000000000000000000000000000000		ered Landfil gement c				
City, State Totowa, NJ 07512					Disposal D	ate	City, Sta		Ą				
Completed by Susan Brkusanin	Title Projec				Signa	ature /	AV		(50)	ate 1/30/2	2012	i i	

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RENTENDED - MAIL IN HAR	AUSTRA	Υ :	Sa	me of Building Own ira Goldstein eet Address	2012 D	C 10 PH	EG.	11/2	D. 21	012	1	7
EPA Initial Amende	A CONTRACTOR OF THE PARTY OF TH		City	Main Street,	Apt 211	51115 6	2: 48	A	W	N		_
1	ncy (Includion)	ding	Nor	le Falls, NJ 074 ne of Contect a Goldstein	424 €	LICEN		elochone			VE	<u>C</u>
Name of Fecility Where Abatement is T house	aking Plac	(ŝ) o		ACILITY INFORM	ATION	Type of Facilit	b#3:				, CA:	<u>-</u>
Street Address 70 Essex Street						School (I Subchap Other (I o	Icr B (Off	ner than i	K-12) arciel	bulidb	ngo, h	ort
City (5) Glan Ridge County (8)		-				Squere Feet N/A		d Floors			g. Age	
Essex			(\$TAT	Y Code (7) E USE ONLY)		Current Use (F	dor if be	ing demo	bertall	)		
Name of Monitoring Flirm Hirod by Buildle N/A Stroat Address	ng Owner	(8)	AS	CM No	Name D&S	of Abalement C Abatement,	ontractor Inc.	(8)				
Dify State, Zlp Cede		~		_	11 R	Address osengren Ave	enue			-		
Project Manager for Monituring Firm			Toloph	iono No.	Toto	late, Zip Codo Wa, NJ 07512 one No						
Start Doto (10)	Schedi	ded Co		1 Date (11)	973-3	345-8685 of OSHA Monitor		Ucense 00675	No -			
12/03/2012 Decupancy Status During Abotement (Chi Facility Closed/Vacated During Entire Absternment Professional Outling Entire	12/04 ock Only 0	/2012 (no)			Street /	Abatement, Ir	nc.	· · · · · · · · · · · · · · · · · · ·				
Abstensont Performed Outside of No. Other Describe:	mal Facili	ADatar ly Hour	nent s		City, St	sengren Ave ste, Zip Code /a, NJ 07512	nue			-		-
cape of Wark (Check All Theil Apply)  ≥3 of or ≥3 if ≥160 of or ≥260 if		Renova			- X	Full Containme Mini-Enclosure Glovebeg Proc	edure					-
Location of		i Locali Normali				Non-Exempted	( <u>,)</u> 904	Non-Frie	ble Pro	Abat	emen	nt
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no of Rogistered Waste Hauter S Abatement, Inc		Ha	DEP Waller ID N			Name of Re Waste M	_		PA			_
Slate owa, NJ 07512				Otoposo TBD	Date	City State			_			
nploted by an Brkusanin	Title Projec	t Man	ager	Stg	nature	A L	, , , ,	Date 11/	30/20			-31

ASB-41 (R-08-08)

\* Do not use this farm for aspectos licensure exempled activities:

CK 51626 058-5

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Date of Notification (1) 12/03/12			ame of eter F	Building Owner	/Operator	(2)	28121	חרס				100	
Agencies Notified Type Notifie	cation	11 200	treet Ad 0 JOh	ddress Inson Drive			(	JEU	0 PM	2: 4	5		
X DEP Amen	dment #			e, Zip Code rovidence, N	J 07974	1	\$ &	LICE	S CON	[RBI	·		
DOH justific	ency (including ation) llation	3 333	ame of eter P	Contact Pizzi				Tele	ephone No	imber	0		
Name of Facility Where Abatement is house	Taking Place (3)		FACIL	ITY INFORMA	TION	Туре	e of Facility (	4)		A A			
Street Address 55 Woodland Ave						×	School (K-1 Subchapter Other (i.e. p	8 (Othe			ldings	, hom	es,
City (5) Summit						Squ.	etc.) are Feet	# of	Floors	15.55	3ldg. /	\ge	
County (6) Union		Co (S	ounty C	ode (7) SE ONLY)		Curr	rent Use (Prio	or if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Bu N/A	Iding Owner (8)		ASCM	No.			atement Cor tement, In		(9)				
Street Address					Street 11 R	41/20000000	ess igren Aver	nue					
City, State, Zip Code	10				100000000000000000000000000000000000000		Zip Code NJ 07512						
Project Manager for Monitoring Firm		Те	elephon	e No.	Teleph 973-		No. 8685		License 1 #00675				
Start Date (10) 12/14/12	Scheduled 0 12/15/12	Compl	letion D	ate (11)			SHA Monitor tement, In	c.					
Qccupancy Status During Abatement  Facility Closed/Vacated During E Abatement Performed Outside of Other – Describe: Occupied	ntire Period of Aba	temer ours	nt		City, S	osen	gren Aver Zip Code	nue					
Scope of Work (Check All That Apply)					Toto	wa, l	NJ 07512						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Reno	ovatio			×	Mi	ull Containme ini-Enclosure lovebag Procon-Exempted	edure				e.	
	Is Loc	cation				- 111	on Exemple	· ( ) und	THOIT THA		Abat	emen	i
Location of Asbestos-Containing Material (AC TO BE ABATED	11-10			Asbestos Co		1ateria			mount			ре <u>т</u>	
In Facility (13)	Custodia (1	al Star 2)	ff?		acing, VA miscellar	T, or			pecify or LF)	Removal	Repair	Encapsulate	Enclosure
basement			N/A		41 0					-		ē	
3rd floor		(	-		tile & m		;		0 SF 0 SF	X			
0.0 11001					noor the			12	USF	X			
Name of Registered Waste Hauler		100000000000000000000000000000000000000	EP Wa		Yards	-	Name of F	Registe	ed Landfil	1			
D&S Abatement, Inc.		#20	ler ID N 996	lo. of W			Waste N	Manag	ement o	f PA			
City, State Totowa, NJ				Dispo TBD	osal Date		City, State Tullytow				U.		
Completed by Deanna Brkusanin	Title Project I	Mana	ager		Signature	uo	Pilleen	ù	0.000	ate 2/03/	12	3	



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

Date of Notification (1) 12/04/2012				Building O			(2)		0.10	DM 2:	ևև			
Agencies Notified Type Notification		100	reet Add	ress ST SHO	ORE D	RIVE				PM 2:				
EPA Initial DEP Armended Amendment		Cit	ty, State	, Zip Cod	е			A 3 新工	LICI	G CONTI	19L (	10		
	50 ST	10000	ame of C						Tele	ephone Num	her •			
			FACILI	TY INFO	RMATIC	ON								
Name of Facility Where Abatement is Takin RESIDENTIAL	g Place (3)						□ s	of Facility (4 school (K-12	2)	ign statement				0.0
Street Address 825 WEST SHORE DRIVE							× O	Subchapter S Other (i.e. pr tc.)	8 (Othe ivate 8	er than K-12 commercia	l build	ings,	home	s,
City (5) BRIGANTINE							Square 1584	e Feet	# of 2	Floors	BI 39	dg. A	ge	
County (6) ATLANTIC			ounty Co	ode (7) SE ONLY)				nt Use (Prio IDENTIA		ng demolish	ed)			b
Name of Monitoring Firm Hired by Building SEM	Owner (8)	1	ASCM	No.		Name	of Abate	ement Cont	tractor NME	<sup>(9)</sup> NTAL SE	RVIC	ES	INC.	
Street Address 1634 SOUTH DELAWARE STREE						Address	s S RUN							
City, State, Zip Code PAULSBORO, NJ 08066							state, Zip	p Code HILL, NJ	0806	2			XXX III CE	
Project Manager for Monitoring Firm ED KEEGAN		0.0000	elephone			Teleph	none No	).		License No	).			
Start Date (10)	Scheduled 12/15/20	Comp						A Monitor						
12/06/2012 Occupancy Status During Abatement (Che		14				Street	Address	s	-					
Facility Closed/Vacated During Entire     Absternant Performed Outside of Non	Period of Aba	ours					State, Zip							
Other – Describe: EMERGENCY DISA	ASTER AREA	PRO	PERTY			3.5%								
Scope of Work (Check All That Apply)	[V] D	an end				5	C =	Containmo	ent with	Negative P	recein	ne.		
≥3 sf or ≥3 lf  × ≥160 sf or ≥260 lf		novatio nolitio				F	Mini	i-Enclosure vebag Prod	edure	d Non-Friab			9	
	1						NOI	LACITIPIEC	1/411	a Month Hub		Abate	ment	
Location of	No	cation mally			Des	scription	n of					Ту	pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used S Maint Custod	enand	ce/		os Cont thermal surfac	aining A	Material s insula AT, or		(5	mount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										te	Œ
FIRST FLOOR (FLOOD CUT)			Х		07/039/17/28/2	ETRO				16 SF	х			
FIRST FLOOR			Х		FLC	ORT	ILE		34	40 SF	X		_	_
										$\vdash$				
Name of Registered Waste Hauler		NJ	DEP Wa	aste	Cubic	Yards		Name of	Registe	ered Landfill	1			
NETS  Hauler ID No. of Waste 5  ALLIED IMPERIAL LAND											ILL			
City, State HAZLETON, PA					12/1/7	en Date 7/2012		City, State	e IAL, F					
Completed by RON SWANSON	Title PROJE	CT	COOR	DINATO		Signatur	in	W2	Di	WW 12	te 2/04/2	2012		

NOTIFICATION OF ASBESTOS ABATEMENT
Pursuant to NJAC 8:60-7 and 12:120-7)

		(Pursu	ant	to N	JAC 8	: 60-7	and 1	2:120-7)						W 84	
Date of Notification 12-5-12	1 (1)		C comment		Build Boy		wner/C	perator	(2)	RECE	11/	ED	•	9	
Agencies Notified	Type Notifica	ation			Addres	s et S	t.	1888-110-18	2	112 DEC 10	PM	2: 6	. 1		
[ ]DEP	Notific					Zip Co		7003	. Li	5%E51U3	LUN	1111		V-12	
[X]DOH	Notific	ation	Name	e of	Conta	act			Teleph	one Number	KIN	G	1		
[ ]DCA	[X]EMERGENC		D	on	Воус	ce					- 4	ע		)	
-					FACIL	ITY IN	FORMA	TION							
Name of Facility Who Same as above Street Addres 74 Willet St.		is Taki	ng E	Place	a (3)				[X]Other		rate	& COI	mer	) -	
/4 WIIIEC SC.									Square Feet	# of Flo	ors	Bld	lg. 1	ige	
City (5 Bloomfield		County						de (7) E ONLY)	1600 Current Use	(Prior if h	eing		8 olis	hed)	,
Name of Monitoring Owner (8) N/A	Firm hired by	Buildir	ng	ASCM	No.				ment Contrac			12			
Street Address								chris	s topher S	st.					
City, State, Zip Co	de								Zip Code r, NJ 07	042					
Project Manager for	Monitoring F	100	eleph /A	hone	Numbe	er		none Num 73)744	ber -8800			nse )37:		er	
Scheduled Start Dat 12/6/12	1	ed. Comp	2		Date (	ACCOUNTAGE OF THE PARTY OF THE	Name N/A	of OSHA	Monitor		8				
Month Day Occupancy Status Du [X]Facility Clo of Abatemen	ring Abatemen osed/Vacated I	onth t (Chec During E	Day k on ntir	ly or	ne)		Stree	t Addres	S	AND REPORTED IN					0,000
[ ]Abatement Pe	erformed Outs: cribe:«OffHou	rs Descr	ciptx	»		У	City,	State,	Zip Code						
Scope of Work (Chec [X]>3 sf or []>160 sf		ply)	ALC: COMPANY		ration ition			[ ]Mini-	Containment Enclosure Ebag Procedur	re ·	ve Pr	essu	re		
	*	- T -		Is				[ ]NOII-I	TIADLE FLOCE			Aba	teme		Гуре
Location Asbestos-Commaterial TO BE A In Faci	ontaining (ACM) BATED ility	Yes	Norm Solution By 1 tens Cust Staf:	ation mally sed lely Main- ance, codia f (12	7		Asbe Ma (i.e. sulati	on, surf	taining	Amoun (Speci SF or LF)	fy	R E M O V A L	R E P A I R	ENCAPSUL	ENCLOSURE
Basement			+			Boil	er :	Insula	tion	20 SF	L	X			
Basement	10.0			-	A			sulati		85 LF					
Pasement			+			•									
Name of Registered AZTECH MANA					ste D No.	(0.2003)	oic Ya Waste		G.R.O.1		ndfil	ù			
City, State Montclair, N	J 07042						-	Date 0/12	Morris	ville, P.	A 1	906	7		
Completed By (Prince Constantine Constanti		<sup>itle</sup>	len	t .				Signatur	a jun	1	100	ate 12/5/	/12		



No shede	N	OTIFIC (Pu	State ATION C rsuant to	F ASBES	STOS A	12:120	MENT )	281	2 DEC_I	n PH	2:	53		_
, 0,		1	Name of B	Building O	wner/O	perator	(2)	501		<del>-0-111</del>		W 49		
Date of Notification (1) 11/29/2012			Townsh	ip of	Livir	ngston	n	<u>f</u>	UES H	10 pean	17 m	K-1	27.0	_
Agencies Notified Type Notification	, i	8	Street Add	lress 57 Sout	ch Li	vings	ton A			ENSI		4		
EPA Initial DEP Amended Amendment	, 2	C	City, State	, Zip Cod	e NJ 07	7039								
I Efficiacticy (	ncluding	5. Jan.	Name of C					****	Talanha	no Nimb				
DOH justification)		1.	varie or c	Jornadi					1-		-•			
DCA Cancellation			FACILI	TY INFO	RMATIC	ON								-
Name of Facility Where Abatement is Taking	Place (3)						Type of	Facility (4	-)					
Monmouth Court Community Ce	nter						☐ Sc	chool (K-12	2) 8 (Other th	an K-12)				
Street Address							X O	ther (i.e. p	rivate & co	mmercial	buildir	ngs, h	omes	٠.
26 Monmouth Court							et	c.)	# of Flo			g. Ag		-
City (5)		A					Square	reel	# 01110	013	,,,,,	55		
Livingston			- 1.0	-d- (7)			Curren	t Use (Pric	or if being o	demolishe	d)			- 11 11 11
County (6) Essex			County Co				Comm	unity (	Center					==
	Dupor (8)		ASCM	No.		Name	of Abate	ement Con	tractor (9)					
Name of Monitoring Firm Hired by Building C Environmental Connection In	C.		/100111			Kie:	lczews	ki Cor	poratio	on .				
			1			Street	Address	3						
Street Address 120 N. Warren Street						31.00.000		ung Av	e 					
City, State, Zip Code							State, Zip		0000					
Trenton NJ 08608			4	11-11-11				ge NJ		cense No.				_
Project Manager for Monitoring Firm			Telephone		Y		hone <b>No</b> -243-9			011				
								A Monitor					-	-
Start Date (10)	Schedule	d Com	npletion D	ate (11)					lytica	1				
12/03/2012						100000000000000000000000000000000000000	t Address							
Occupancy Status During Abatement (Chec						110	Coli	n Drive	•					
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: open during	Period of A nal Facility busine	Hours ss h	ours 8	:00-4:	mq00	City,	State, Zip 1obro	o Code ok NY 1	.1741					
Scope of Work (Check All That Apply)			14				_							
☐ ≥3 sf or ≥3 lf	⊠ R	enova	tion				Full	Containm	ent with N	egative Pr	essur	е		
≥160 sf or ≥260 lf		emolit	ion				Glo	i-Enclosur vebag Pro	cedure					
							Nor	n-Exempte	d (*) and h	Non-Friabl			ement	
	Is	Locati	ion										ре	Ď.
Location of		Normal d Sole			De	escriptio	on of	(ACM)	Δmi	ount			m	2007
Asbestos-Containing Material (ACM)		intena		Asbes (i.e.	therma	al syster	Material ms insula	ation,	(Spe	ecify	Re	Σ.	Encapsulate	≘ndosure
TO BE ABATED	Cus	todial (12)	Staff?		surfa	acing, V	/AT, ui aneous)		SFu	ı LF)	Remova	Repair	psul	uso
(13)		(12)			otner	miscen	aneous		13		<u>w</u>		ate	9
	Yes	No	N/A								ж	-		<u> </u>
2nd Floor Stair 204		х			& Mas				2378		×	-		+
2nd Floor Room 201		х		VAT	& Ma	stic			240	10000		_		-
2nd Floor Room 203		x		VAT	& Ma	stic			25sf		x		_	-
2nd Floor Room 214		×		VA	r & M	astic			60s:		x			
Name of Registered Waste Hauler		IN	JDEP W	aste		c Yards			f Registere					
Circle Rubbish		i	lauler ID .8816	No.	of W		to.	Tully City, Sta	town Re	source	Fac	cili	ty	
City, State					Dispo	osal Da	10	Mor	risvill	e PA				
Linden NJ	Title				1	Signatu	ye a	A		Da				
Completed by Slawomir Kielczewski	Title	Pres	sident			J	Cielc	renska	<u> </u>	11	/29/	201	2	



		(1	Pursua	int to NJ	AC 8:60 ar	id 12:120)		281	CUEL IN	PHO	1 2 0		1
			Name	e of Build	ding Owner	Operator (2	2)		2 DEC 10	111 2	. 13	1	
te of Notification (1) CONT	CINUATION SHE	ET #1	Tow	mship	of Liv	ingston		1 3	S1431	JUNT	DA1		1
11/29/2012	pe Notification		Stree	t Addres	S Cauth I	ivinast	on Aven	ue	& LICEN	SING	* 67 į.		
pencies Notified Typ	Initial					itvingo					(	19	1
EPA X	Amended	2	City,	State, Z	on, NJ	07039							+
DOL	Amendment # Emergency (inclu	uding		e of Con				Te	lenhone Numh	~			
DOH	justification) Cancellation									-1			1
DCA L			F	ACILITY	INFORMA	TION	Type of Fa	cility (4)					1
ame of Facility Where Abat	tement is Taking Pl	ace (3)					Coba	1 (1/ 12)					
Monmouth Court Co	mmunity Cent	er							her than K-12) & commercial	buildings	, hon	nes,	
troat Address							etc.)			Bldg.		_	-
26 Monmouth Court							Square Fe	et #	of Floors	blug.	Ago		
ity (5)								(Drior if h	eing demolishe	ed)			
ivingston			Cou	unty Cod	e (7)		Commun	ity Cen	ter	*			_
County (6) Essex						Name	of Abateme	ent Contrac	tor (9)				
Name of Monitoring Firm Hi	ired by Building Ow	ner (8)	1	ASCM N	0.	Kie	lczewski	i Corpor	ation				
Name of Monitoring Firm Hi Environmental Con	inection inc.					Stree	t Address						
Street Address							Watchur						-
120 N. Warren Str	eet					City,	State, Zip C t Orange	ode	152				
City, State, Zip Code Frenton NJ 08608							phone No.		License N				
Project Manager for Monito	oring Firm	ACTION AND ADDRESS OF THE PARTY	Te	lephone	No. 2-4200	973	-243-987	12	01	171			_
-10ject Marks-						Nam	e of OSHA	Monitor					
Start Date (10)	. 5	Scheduled 12/07	Comp /2012	letion De	ite (11)	7 9-210-21-2	ng Islan	nd Analy	tical	•			-
12/03/2012	Abstament (Check					Stree	et Address	Drive					
Occupancy Status During	Abatement (Check	ariod of Ab	ateme	nt			O Colin State, Zip (						
Facility Closed/Vacat	ed During Etitle 1	I Facility h	lours s ho	urs 8	:00-4:00	Opm City,	olobrook	NY 117	41				_
Abatement Performe	d Outside of The	nisines											
Abatement Performer  Other – Describe:	open during h	ousines		-									
Abatement Performer Other – Describe: Scope of Work (Check All	open during h	1981329					Full C	containmen	with Negative	Pressure	1		
Abatement Performed Other – Describe: Scope of Work (Check All 23 sf or 23 lf	open during h	⊠ Re	enovati	on			Mini-l	Enclosure	di ura				
Abatement Performed Other – Describe: Scope of Work (Check All	open during h	⊠ Re	enovati	on			Mini-l	Enclosure		, able Proc		ment	
Abatement Performed Other – Describe: Scope of Work (Check All 23 sf or 23 lf	open during h	Re De	enovati	on on	¥		Mini-l	Enclosure	di ura	, able Proc	edure	HIGHE	
Abatement Performence  Other – Describe:  Scope of Work (Check All  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	That Apply)	Is N	enovation emolitical control c	on on	¥	Doccrin	Mini-I Glove Non-	Enclosure ebag Proce Exempted (	dure *) and Non-Frid Amount	able Proc	edure Abate Tyr	ре	Γ
Abatement Performence  Other – Describe:	That Apply)  of Material (ACM)	Is N Use	enovati emolitic Locatic lormally d Solel	on on on y y by	*	Descrip s Containir	Mini-I Glove Non- tion of ng Material ( terms insulati	Enclosure bag Proce Exempted (	dure *) and Non-Fria  Amount (Specify	able Proc	edure Abate Tyr	ре	Γ
Abatement Performed Other – Describe:  Scope of Work (Check All  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location Asbestos-Containing TO BE ABA	That Apply)  of Material (ACM)	Is N Use	enovatice Locatic lormally Solel internation odial S	on on on y y by	Asbesto (i.e. th	Descrip s Containir ermal syst	Mini-I Glove Non- tion of ng Material ( tems insulati	Enclosure bag Proce Exempted (	dure *) and Non-Frid Amount	, able Proc	edure	ре	Γ
Abatement Performence  Other – Describe:	That Apply)  of Material (ACM)  ATED	Is N Use	Location Loc	on on y y by lice/	Asbesto (i.e. th	Descrip s Containir	Mini-I Glove Non- tion of ng Material ( tems insulati	Enclosure bag Proce Exempted (	dure *) and Non-Fria  Amount (Specify	able Proc	edure Abate Tyr	HIGHE	Γ
Abatement Performed  Other – Describe:	That Apply)  of Material (ACM)  ATED	Is N Use	enovatice Locatic lormally Solel internation odial S	on on on y y by	Asbesto (i.e. th	Descrip s Containir nermal syst surfacing, other misca	Mini-I Glove Non- tion of ng Material ( tems insulati VAT, ui ellaneous)	Enclosure bag Proce Exempted (	dure *) and Non-Fria  Amount (Specify	able Proc	edure Abate Tyr	ре	Γ
Abatement Performed  Other – Describe:	That Apply)  of Material (ACM) ATED ily	Is No Usee Mai Cust	Location Loc	on on y y by lice/	Asbesto (i.e. the	Descrip s Containir nermal syst surfacing other misco	Mini-Glove Non- tion of ng Material ( tems insulati VAT, ui ellaneous)	Enclosure bag Proce Exempted (	dure *) and Non-Fria  Amount (Specify SF ui LF)	Removal	edure Abate Tyr	ре	Γ
Abatement Performed  Other – Describe:	That Apply)  of Material (ACM) ATED ily	Is No Usee Mai Cust	Locatic lormally d Solel interial odial S (12)	on on y y by lice/	Asbesto (i.e. th	Descrip s Containir nermal syst surfacing, other misco	Mini-I Glove Non- tion of ng Material ( tems insulati , VAT, ui ellaneous)	Enclosure bag Proce Exempted (	Amount (Specify SF u LF)	Removal x	edure Abate Tyr	ре	Γ
Abatement Performed  Other – Describe:	That Apply)  of Material (ACM) ATED illy  217	Is No Usee Mai Cust	Location Loc	on on y y by lice/	VAT & VAT &	Descrip s Containir nermal syst surfacing, other misco	Mini-Glove Non- tion of og Material ( tems insulati , VAT, ui ellaneous)	Enclosure bag Proce Exempted (	Amount (Specify SF u LF)	Removal	edure Abate Tyr	ре	Γ
Abatement Performed  Other – Describe:	That Apply)  of Material (ACM) ATED ily  217 219  dor 200	Is No Usee Mai Cust	Locatic lormally d Solel international S (12)  No  x  x	on on by y by size/ N/A	VAT & VAT & VAT & VAT &	Descrip s Containing nermal syst sunfacing, other misco Mastic Mastic Mastic	Mini-Glove Non- tion of ng Material ( tems insulati , VAT, ui ellaneous)	Enclosure ebag Proce Exempted (  ACM) ion,	Amount (Specify SF or LF)  60sf 414sf 530sf 81sf	Removal X	edure Abate Tyr	ре	Г
Abatement Performed  Other – Describe:	That Apply)  of Material (ACM) ATED illy  217 219  dor 200 215	Is No Usee Mai Cust	Locatic lormally d Solel interior odial S (12)	on on by y by size/ taff?	VAT &	Descrip s Containir nermal syst surfacing, other misco	Mini-Glove Non- tion of ng Material ( tems insulati VAT, ui ellaneous)	Enclosure ebag Proce Exempted (  ACM) ion,	Amount (Specify SF ur LF)  60sf 414sf 530sf 81sf Registered Lan	Removal X X X Adfill	Repair	e Encapsuiate	Γ
Abatement Performed  Other – Describe:	That Apply)  of Material (ACM) ATED illy  217 219 Ldor 200 215 aste Hauler	Is No Usee Mai Cust	Locatic lormally d Solel interior odial S (12)	on on by y by size/ N/A	VAT &	Descrips Containing Synfacing Synfacing Other miscont Mastic Mast	Mini-Glove Non- tion of ng Material ( tems insulati VAT, ui ellaneous)	ACM) ion,  Name of I	Amount (Specify SF or LF)  60sf 414sf 530sf 81sf Registered Lanown Resource	Removal x x x x dfill	Repair	e Encapsuiate	Γ
Abatement Performed  Other – Describe:	That Apply)  of Material (ACM) ATED illy  217 219 Ldor 200 215 aste Hauler	Is No Usee Mai Cust	Locatic lormally d Solel interior odial S (12)	on on by y by size/ taff?	VAT &	Descrips Containir Permal syst surfacing other miscont Mastic Mas	Mini-Glove Non- tion of ng Material ( tems insulati VAT, ui ellaneous)	ACM) ion,  Name of I	Amount (Specify SF ur LF)  60sf 414sf 530sf 81sf Registered Lan	Removal x x x x dfill	Repair	e Encapsuiate	
Abatement Performed  Other – Describe:	That Apply)  of Material (ACM) ATED illy  217 219 Ldor 200 215 aste Hauler	Is No Usee Mai Cust	Locatic lormally d Solel interior odial S (12)	on on by y by size/ taff?	VAT &	Descrip s Containir nermal syst sunfacing, other misco Mastic Mastic Mastic Masti Cubic Yar of Waste	Mini-Glove Non- tion of ng Material ( tems insulati VAT, ui ellaneous)	Enclosure ebag Proce Exempted (  ACM) ion,  Name of I  Tullyt  City, State Morr	Amount (Specify SF or LF)  60sf 414sf 530sf 81sf Registered Lanown Resource	Removal x x x x dfill	Repair Cili	e Encapsuiate	Γ



### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

	NO	TIFICA (Purs	TION OF uant to f	ASBESTOS NJAC 8:60 a	S ABATEN and 12:120	MENT )	201	2 DEC 10	Du-	_			
Date of Notification (1) CONTINUATION SHI	EET #2	Na To	me of Bu	ilding Owner	r/Operator	(2) n	· A5.	FE LOO	F19	2:	33		
11/29/2012  Agencies Notified Type Notification		Ctr	not Addr			- 10 may 10 mg/m	enue	& LICEN	UONT Sixin	P.	ØL		
T FPA Initial				Zip Code	LIVINGS				. , . 9 1		6	0	1
DEP Amended Amendment #_	2	L	ivings	ton, NJ	07039			r-tanhana Niir	mhar		_	-	$\dashv$
Lineigency (man	uding	Na	me of Co	ontact			i		IIDEI				
DOH justification) Cancellation					TION					_			
	(2)		FACILIT	Y INFORMA	ATION	Type of	Facility (4)						
ame of Facility Where Abatement is Taking Pl Monmouth Court Community Cent	ace (3) er					☐ Sch	nool (K-12)	Other than K.1	2)				
						Sul Sul	ochapter 8 ( ner (i.e. priva	Other than K-1 ite & commerc	ial build	ling	s, ho	mes,	
Greet Address 26 Monmouth Court				10		etc	.)	# of Floors			Age		
City (5)						Square	reel	# O1 1 10010					
Livingston			ounty Co	da (7)		Current	Use (Prior i	being demolis	shed)				
County (6) Essex		(S	TATE US	EONLY)		Commi	unity Ce	nter					
	ner (8)	$\perp_{T}$	ASCM N	No.	Name	of Abate	ment Contra	ctor (9)					
Name of Monitoring Firm Hired by Building Ow Environmental Connection Inc.	1101 (0)				1		ki Corpo	ration					-
Street Address					Stree	t Address Watch	ung Ave						
120 N. Warren Street					1	State, Zip							
City, State, Zip Code					Wes	t Oran	ge NJ 07	052					
Trenton NJ 08608		TT	elephone	e No.	Tele	phone No.		License					
Project Manager for Monitoring Firm		6	09-39	2-4200	Sec. Chapter	-243-98	SE - 27700 SEC 8 S	0	1171				
S (40)	chedule	d Com	oletion D	ate (11)	Nam	e of OSH	A Monitor and Anal	vtical					
Start Date (10) 12/03/2012	12/0	7/201	.2		1	et Address		ycicar					
Occupancy Status During Abatement (Check C	Only One	e)					n Drive						
			ent			State, Zip							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe: open during b	racility usine:	ss ho	urs 8	:00-4:00	pm H	olobro	ok NY 11	741					
Scope of Work (Check All That Apply)							Containme	nt with Negative	e Press	ure			
≥3 sf or ≥3 lf		enovat				L. Min	i-Enclosure						
≥160 sf or ≥260 lf		CITIOIII	OII.			Glo Nor	vebag Proce	(*) and Non-Fr	riable P	roce	edure		
	Ι						,			A	bate Ty	ment	
		Location			Descript	ion of				T			
Location of Asbestos-Containing Material (ACM)	Use	d Sole	ly by	Asbestos	Containin ermal syste	d Material	(ACM)	Amount (Specify	1 3		Z	Encapsulate	1100001
TO BE ABATED	Cus	todial S	Staff?	990000	surfacinu.	VAT, UI		SF vi LF)	Zaliova		Repair	nsd	
In Facility (13)		(12)		0	ther misce	llaneous)			2	-	7	ate	
× 500*	Yes	No	N/A					250sf		1			t
1st Floor part of room 103		х		VAT &				237sf		x		-	+
1st Stair 104		x			Mastic			125sf	-	x		-	t
Part of corridor 112		x			Mastic	117711			- x	-	-		t
1st Fl Stairwell smoke doors	;	х			ng/ cau		1	96sf Registered Lar			-		L
Name of Registered Waste Hauler		I	JDEP W		Cubic Yard of Waste	ds	1			`n.	414	tv	
Circle Rubbish		1	lauler ID 8816	140.		<u> </u>		own Resou	rce i	ac		-1	
					Disposal [	ate	City, Stat	e isville P.	A				
City, State Linden NJ	137				T 0'	aturo.			Date	-		_	_
Completed by	Title		_!		Signa	Viola	renslai		11/2	9/	201	2	
Slawomir Kielczewski	-	Pre	sident		9	new	upom						

### Print Form

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

2012 DEC 10 PM 2: 33

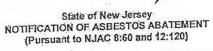
11/29/2012 CONT	INUATION SHI		-	treet Addre	200	ingstor			ICE	NSING	MIL.	Varia		
gencies Notified Type	Notification			333-357	South	Livings	ton Ave	enue	_	O Principle	G	9		$\dashv$
EPA DEP	Initial Amended Amendment #	2	Ċ	ity, State,	Zip Code ton, NJ	07039								
DOH DOH	Emergency (inclination)	uding		ame of Co						none Numbe	er			
DCA 🗆	Cancellation		$\perp$	EACHIT	Y INFORMA	TION					755			_
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ame of Facility Where Abate Monmouth Court Com	munity Cent	er ———					Sub	ool (K-12) chapter 8 (	Other	than K-12)	huilding	ıs. ho	mes,	
Street Address 26 Monmouth Court			-				Square F	)	# of F			. Age		_
City (5)			,				Squarer							
Livingston					1 (71)		Current	Jse (Prior i	if being	demolishe	d)		Mary 1	
County (6)			10	County Cou	de (/) EONLY)		Commu	nity Ce	enter					
County (6) Essex			'			Name	of Abaten	nent Contra	actor (9	9)			000000000000000000000000000000000000000	
Name of Monitoring Firm Hire Environmental Conn	d by Building Ow	ner (8)		ASCM N	10.	Kie	lczewsk	ci Corpo	orat:	ion .				
Environmental Conn	ection inc.						t Address							
Street Address						235	Watch	ing Ave						_
120 N. Warren Stre	et					City.	State, Zip	Code						
City, State, Zip Code						Wes	t Orang	e NJ 0	7052					_
renton NJ 08608			-1.	Telephone	No	Telep	hone No.			License No				
Project Manager for Monitoria	ng Firm			609-392	2-4200		-243-98	72		011	71			
I .		i dad	Con	npletion Da	ate (11)	Name	e of OSHA	Monitor		1 0				
Start Date (10) 12/03/2012	l s	12/07	1/20	12	10 (11)	Lor	ng Isla	nd Anal	ytic	al				_
	1 (0) - 1/4	Seeds					t Address							
Occupancy Status During Ab	atement (Check	Only One	,	2000 <b>.</b>			Colin							_
Facility Closed/Vacated Abatement Performed C Other – Describe: OP	During Entire Pe Outside of Normal en during b	riod of Ab Facility H usines	lours s h	ours 8	:00-4:00	opm City,	State, Zip olobroo	Code k NY 11	741	ä				
Scope of Work (Check All Th	nat Appiy)	17 De	nova	ation			Full	Containme	nt with	Negative P	ressure	3		
23 sf or ≥3 lf			emoli				- Ol-	Enclosure ebag Proc	adure					
≥160 sf or ≥260 lf							Non	-Exempted	(*) an	d Non-Friab	le Proc	edure		_
	Section 200 to Walk		-									Abate Ty	ment ne	ä
		1												
		ls I	_ocat	tion		Descripti	ion of						Di.	1
Location of		Used	orma I Sole	illy ely by	Asbestos	Descripti	Material	(ACM)		mount	D	_	7	
Asbestos-Containing Ma	terial (ACM)	Used Mai	orma Sole ilena	ely by	(i.e. th	Containing	q Material ems insula	(ACM)	(	Specify	Rem	Rep	ncaps	
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Asbestos-Containing Ma	terial (ACM)	Used Mai	orma Sole iteria odial (12)	ely by ance/ Staff?	(i.e. th	Containing	q Material ems insula VAT, ui	(ACM) tion,	(	Specify	Removal	Repair	Encapsulate	
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### State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) 2012 DEC 10 PM 2: 53 Name of Building Owner/Operator (2) Date of Notification (1) CONTINUATION SHEET #4 Township of Livingston 11/29/2012 Street Address Type Notification & LICENSING Agencies Notified 333-357 South Livingston Avenue Initial **EPA** City, State, Zip Code Amended Х 2 DEP Livingston, NJ 07039 Amendment # DOL X Telephone Number Emergency (including Name of Contact justification) DOH Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Monmouth Court Community Center Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, Street Address X 26 Monmouth Court etc.) Bldg. Age # of Floors Square Feet City (5) Livingston Current Use (Prior if being demolished) County Code (7) County (6) Essex Community Center (STATE USE ONLY) Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) Environmental Connection Inc. ASCM No. Kielczewski Corporation Street Address Street Address 235 Watchung Ave 120 N. Warren Street City, State, Zip Code City, State, Zip Code West Orange NJ 07052 Trenton NJ 08608 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01171 609-392-4200 973-243-9872 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Long Island Analytical 12/07/2012 12/03/2012 Street Address Occupancy Status During Abatement (Check Only One) 110 Colin Drive Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours
Other – Describe: open during business hours 8:00-4:00pm City, State, Zip Code Holobrook NY 11741 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf Mini-Enclosure Demolition ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Amount Asbestos Containing Material (ACM) Location of Used Solely by Encapsulate Asbestos-Containing Material (ACM) (Specify Remova (i.e. thermal systems insulation, Repair Maintenance/ TO BE ABATED SF or LF) Custodial Staff? surfacing, VAT, or other miscellaneous) In Facility (12)(13)Yes No N/A 3001f 70 doors caulk x Exterior doors x window caulk Exterior windows Room 103 x x x Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler Hauler ID No. 18816 of Waste Tullytown Resource Facility Circle Rubbish City, State Disposal Date Morrisville PA City, State Linden NJ Date Signature Title 11/29/2012 Completed by President Slawomir Kielczewski

### AMENDMEN #1





RECEIVED

Date of Notification (1) 10/29/2012			Name of	Building (	Owner/O	perator ngstor	(2)	2012	DEC 10	PH	2:	<b>3</b> 5	
Agencies Notified Type Notification	1		Street Ad 333-3	ddress 357 Sou	th Li	vings	t.on Aveni	ne 43)	ESTOS & LICE	UQ)	i i A	űł.	
DEP Initial Amended Amendmer	nt#_1	_	City, Sta Livin	te Zip Co gston,	de NJ 07	7039					i U	6	9
DOH justification	)			Contact				Te	lephone Nui	mber			y-12-
DÇA ESS			FACIL	LITY INFO	RMATIC	N:	Type of Facil	ithy (A)					
Name of Facility Where Abatement is Taki Monmouth Court Community C Street Address	ng Place ( enter	3)					School Subcha Other (i	(K-12)	ner than K-1 & commerci	2) ial build	ings,	home	s,
26 Monmouth Court	×						Square Feet	# 1	of Floors	. BI	dg. A	ge	
City (5) Livingston			<del></del>	Souls CX	10.5	_	Current Use	(Prior if be	ing demolis	hed)			
County (6) Essex		].	County C (STATE U	ISE ONLY)		_	Communit	y Cent	er				
Name of Monitoring Firm Hired by Building Environmental Connection I	Owner (8)		ASCM	No.			of Abatement czewski (						
Environmental Connection I	nc.		<u></u>				Address		-	<u> </u>	-		
Street Address 120 N. Warren Street						235	Watchung						
City, State, Zip Code							tate, Zip Code Orange I		2				
Trenton NJ 08608			Telephor	ne No			one No.		License N	lo.			
Project Manager for Monitoring Firm			609-35	92-4200	)	973-	243-9872		01	171			
Start Date (10)				Date (11)		Name	of OSHA Mor	itor Analyt:	ical				
DN) HOLD.	1 5.4		12012				Address						
Occupancy Status During Abatement (Che			ont	174			Colin Dr	ive					
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other - Describe: open during	Period of a mal Facility busine	Hours ss h	ours 8	3:00-4:	00pm		ate, Zip Code obrook N		L				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 if ≥160 sf or ≥260 if	X	Renova Demolit	tion				Mini-Enclo	sure Procedur	th Negative			é	ä
			- 1				n Holl Esta				Abat	emen	ţ
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use	Locati Normal ed Sole intenai todial \$ (12)	ly ly by: nce/	Asbesi (i.e.	tos Cont thermal surfac	scription aining M system dny, VA niscellar	flaterial (ACM) s insulation, T, ui	1	Amourit (Specify 3F or LF)	Removal	Repair	e Encapsulate	≅ndosure
The state of the s	Yes	No	N/A			30		<del>-</del>	37st	×			-
3nd Floor Stair 204		×			Mast				40sf	×		-	
2nd Floor Room 201		×			& Mas			25	sf	×			
2nd Floor Room 203	-	x	-		& Ma			100	0sf	x			
2nd Floor Room 214		TN	JDEP W	aste	Cubic	Yards	Nam	e of Regis	tered Landfi	ii		38	
Name of Registered Waste Hauler Circle Rubbish		i	auler ID 8816	No.	of Was	ste sal Date	City.	State	Resourc	e Fac	ili	ty	
City, State Linden NJ	i i						Me	orrisv	llle PA	ate		_	
Completed by Slawomir Kielczewski	Title	Pres	ident		S	ignatur	eller	ki.		140	7/2	012	



	,N	(P	ICATION ursuant t	o NJAC B	:60 and	1 12:120)			2012[	DEC 10	PH	2:	10	
( Notification (1)	CHEER :	#1	Name of	Building C	)wner/O	perator (	2)		endar.			- '	. 0	
Date of Notification (1) CONTINUATION 10/29/2012	SHEET	"-		nip of	Livir	ngston		( )40	1112	STOS	CUN	Tilla	21	
Agencles Notified Type Notification				57 Sou		vingst	on A	/enue	é:	LICEA	SIN	3		•
EPA Initial Amended			City, State	e, Zip Coo	ié	7020	8						A D	
Amendment	#_1	-		gston,	NJ 0	7039		<u>.</u>	Tala	hone Num	ber	-		
DOH justification)			Name of			100								_
DCA Cancellation			FACIL	ITY INFO	RMATIC	ON		e i allih i /A	1					
Name of Facility Where Abatement is Takin	g Place (3)	)						Facility (4						
Monmouth Court Community Ce	enter						-	hool (K-12 bchapter (	10tha	r than K-12 commercia	) I buildir	nas, t	ome	s,
Street Address 26 Monmouth Court				10			Square	2.)		Floors		lg. Ag		
C#. (5)							Square	Leer	" "	100.0				
City (5) Livingston							Current	Use (Prio	r if bein	g demolish	ed)			
County (6)			County C	ode (7) SE ONLY)			Comm	unity (	ente	r				_
Essex	Diunar (8)		TASCM	No.		Name o	f Abate	ment Cont	ractor (	9)				
Name of Monitoring Firm Hired by Building Environmental Connection In	C.					Kiel	czews	ki Cor	porat	ion ·	•			
						Street A	ddress	ung Ave						
Street Address														-
120 N. Warren Street		00000				City, St			7052					
City, State, Zip Code Prenton NJ 08608				- Same				ge NJ (	77032	License N	0			200
Project Manager for Monitoring Firm			Telephon	ie No. 92-4200	)	Telepho 973-2			- 1		171			
Project Manage.			2000			1000		A Monitor					W. P. S.	
Start Date (10)	Schedule 121	d Co	mpletion [	)ate (11)		Long	Isla	ind Ana	lytic	cal	•			-
ON HOLD.			. E				Address						2.	
Occupancy Status During Abatement (Chec	at Only On	·,	t			110		Drive						
Facility Closed/Vacated During Entire   Abatement Performed Outside of Nom Other - Describe: open during	period of A nal Facility busine	Hour	S nours 8	3:00-4:	00pm	City, St Hol		Code k NY 1	1741					
Other - Describe:		<del></del>						22						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Barrery .	enov emol	ation ition				Mini	Enclosure	edure	Negative F				
≥160 sf or ≥260 ff				6			Non	Exempter	(*) an	d Non-Frial	ole Pros	Abate	e	
	7	Loca	tion										pe	
	1	torma	ally		De	scription	of						_	Γ
Location of Aspestos-Containing Material (ACM)	Use	d Sol	ely by ance/	Asbes	tos Con	itaining N	laterial	(ACM)		mount Specify	20	' עב	Encapsulate	
TO BE ABATED	Cust	lodial	Staff?	(i.e.	Surfa	acing, VA	1, 01		31	or LF)	Remova	Repair	15 de	
In Facility (13)		(12)	)		other	miscellar	iebus)				<u> </u>	-	late	
(19)	Yes	No	N/A						60	sf	x			+
2nd Floor Room 217		x			& Mas					4sf	x	-		+
2nd Floor Room 219		×			& Mas				53	0sf	×		-	T
2nd Floor Corridor 200		×			& Mas						x	-	-	+
		x		VAT		astic		لِــــا		sf	100			
2nd Floor Room 215		T	NJDEP W	/aste	Cubic	Yards				ered Landfi				
Name of Registered Waste Hauler Circle Rubbish			Hauler ID 18816	No.						Resourc	e Fac	ıli	су	_
City State					Dispo	osal Date		City, Stat	isvi	lle PA				
Linden NJ Completed by	Title					Signatur	olon	ph Ales	, •		ate	1/20	012	
Slawomir Kielczewski		Pre	sident			4 Ca	un	ELEKA			- DANIEL CONTRACTOR		100000	

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

4		NOII	Pursuar	it to NJAC 8:60 ar	id 12:12	0) 2	12 DE	C 10 F	24 0			
Date of Notification (1) CONTINUATION 10/29/2012	SHEE	r #2		of Building Owner							- 4	
Agencies Notified Type Notification			Street	Address -357 South L				TOS CO ICENS	INT	Mal		
□ FPA □ Initial		54		tate, Zip Code	TVING	Scon Avenue		10 2140	MA	(	10	
DEP Amended Amendment		_		ngston, NJ (	7039	· ·						
DOH justification)	includin	g	Name	of Contact		8	Téle	nhohe Nur	nher -			•
L box			FAC	ILITY INFORMAT	ION	Type of Facility	(4)					
Name of Facility Where Abatement is Taking Monmouth Court Community Ce	Place	(3)				School (K						
Street Address						Subchapte	er 8 (Othe	r than K-12 commerci	2)	dinge	hom	00
26 Monmouth Court						etc.)	es di					co,
City (5)						Square Feet	# 01	Floors		ldg. A	.ge	
Livingston			County	Code (7)		Current Use (P			ned)			
County (6) Essex		1	(STATE	USE ONLY)		Community						
Name of Monitoring Firm Hired by Building C Environmental Connection Inc	wner (8	)	ASC	M No.		of Abatement Co Lczewski Co						
					Street	Address	-37		-			
Street Address 120 N. Warren Street					235	Watchung A	ve					
City, State, Zip Code			-			tate, Zip Code	02050					
Trenton NJ 08608			Y-1	No		Orange NJ	07052	License N	0.			
Project Manager for Monitoring Firm			Telepho 609-3	92-4200		243-9872			171		d Carrier	
Start Date (10)				Date (11)		of OSHA Monito		. 7				
ON HOLD	20 0000		2012	. ,		J Island An	alytic	aı	•			
Occupancy Status During Abatement (Check	5000				100000000000000000000000000000000000000	Colin Driv	е					112
Facility Closed/Vacated During Entire Portion Abatement Performed Outside of Normal Other - Describe: open during the open dur	eriod of al Facility ous in e	Abaten y Hours	ours	8:00-4:00pm	7 7/39	late, Zip Code obrook NY	11741					
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure					t
		Locati Normal									pe	
Location of Aspestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cus	ed Sole intenal todial S (12)	lỳ by nce/	Asbestos Cont (i.e. thermal surfa	scription aining M systems clug, VA hiscellan	laterial (ACM) s insulation, T, u	(Sp	nount pecify or LF)	Removal	Répair	Encapsulate	Endosure.
103	Yes	No	N/A	VAT ≿ Mast	ic		250	Ösf	x		-	-
1st Floor part of room 103		x		VAT & Mas			23	7sf	ж	-		
1st Stair 104		x	-	VAT & Mas			12	5sf	x			
Part of corridor 112 1st Fl Stairwell smoke doors		×		lining/		ing	9	5sf	x			
Name of Registered Waste Hauler			JDEP W	aste Cubic	Yards		Registere	ed Landfill	-			-
Circle Rubbish		H	auler ID 1 8816					esource	Fac	ili	t <b>y</b>	
City State Linden NJ				Dispos	al Date	City, Sta Morr	e isvill	e PA	7		20	
Completed by Slawomir Kielczewski	Title	Pres	ident	S	ignature	eleeksli	,	Da !!	le  07	1/20	212	

N		NO	(Pursua	ON OF ASE ant to NJAC	BESTOS ABA 8:60 and 12	ATEN 2:120	201	2 DEC 10	Pы	2			
Date of Notification (1) CONTINUATION 10/29/2012	SHEE	T #3			Owner/Oper		(2) 1 654	£514c	111	Ζ:	55		1
Agencies Notified Type Notification	n			t Address 3 357 Co	uth Livi	ngs	on Avenue	& LICEN	ISING	Re	PL.		
EPA Initial Amended Amendmer	nt #1			State, Zip Co	ode , NJ 0703	39					G	9	
DOH justification Cancellation	)	ng	Name	of Contact				Telephor	na Numb	,			
<u> </u>			FA	CILITY INFO	ORMATION								
Name of Facility Where Abatement is Takin Monmouth Court Community C	ng Place enter	(3)				١.	Type of Facility  School (K-	• •	n K-12)				
Street Address 26 Monmouth Court							Other (i.e. etc.)	private & com	mercial l				es,
City (5) Livingston			4,			1	Square Feet	# of Floor	rs	Ble	dg. A	Age	
County (6) Essex				Code (7) USE ONLY			Current Use (Pr Community		molished	1)	37,000		
Name of Monitoring Firm Hired by Building Environmental Connection In	Owner (8	3)	ASC	M No.			Abatement Co zewski Co						
Street Address		- 55 7 6		****			ddress						
120 N. Warren Street					23	5 W	atchung Av	7e					
City, State, Zip Code			00000		1 .		te, Zip Code						
renton NJ 08608							Orange NJ						
Project Manager for Monitoring Firm				one No. 392-4200	973	3-24	ne No. 13-9872		ose No. 0117	1			
Start Date (10)				Date (11)	111/43/200	1917/1919	OSHA Monitor		¥				
ON HOLD	7.2		12012	• 1			Island Ana	aryticar		kerenaan			
occupancy Status During Abatement (Chec		17	20		7		dress olin Drive						
Facility Closed/Vacated During Entire P	eriod of	Abater	nent				e, Zip Code			-			_
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other - Describe: open during	ai raciin busine	ess i	iours	8:00-4:0	OOpm H		brook NY 1	1741		1		20072	
cope of Work (Check All That Apply)												a de la Marina	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli	ation tion				Full Containme Mini-Enclosure Glovebag Prod Non-Exempter	edure				é .	
		Locat					*			Α	bate Ty	ment pe	
Location of Asbestos-Contaming Material (ACM)  TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole intena todial 3 (12)	ely by nce/	(i.e. th	Descriptions Containing the containi	Mate ms in /AT,	erial (ACM) sulation, ui	Amount (Specify SF or LF)		Damoral	Repair	Encapsidate	Sinsoprie
	Yes	No	N/A								-	0	
st Floor Gymnasium Room 110		х	1	11000000	insulati			361f 150sf	×	+			_
st Floor Room 103		х		chalk	board ma	stı	С			×	_	_	
st Floor Room 103		x			paneling			1,700sf		-	1		
nd Fl hallway smoke doors		x			ing/caul	king		96sf	x				
me of Registered Waste Hauler Circle Rubbish		N. H.	JDEP W avler ID 8816	nste (	Cubic Yards of Waste			Registered Lar own Resou		aci:	lit	У	
y, State Inden NJ					Disposal Dat	е	City, State Morri	sville PA	Α.				
ompleted by	Title	Pres	ident	3	Signatu	re inch	beeske	•	Date /1/(	77/	21	012	



P	-	1	T. Car		P	ini.	(O) m	
	35	2,5	Posts	V	E	D	i i Pricipalija	paryanta

		N		ATION OF ASBEST suant to NJAC 8:60	OS ABAT			2012	DEC	i	P <sub>M</sub>	E
10/29/2012	DATION SH	eet f	T	me of Building Own ownship of Li		, ,		A 3 BH	:\$70	13 r	111	<del>د:</del>
Agencies Notified Type N	otification			eet Address 33-357 South	r ::-			Q.	LIC	ENS	Ult	TO
EPA Init					Living	ston Aven	ue				ant.	
	ended endment#	1		, State, Zip Code vingston, NJ	07039							
Em	ergency (incli	ıding		ne of Contact			170	lanhona	Mirmoto			
	ification) ncellation		iva	ne of contact			-	аттапа	MIMM	ar .		
			F	ACILITY INFORMA	TION		) -		-	-		
Name of Facility Where Abatement	170	787				Type of Facil	lity (4)					
Monmouth Court Commun	ity Cente	r 			-	School (	(K-12)		7/20	1	5	
Street Address 26 Monmouth Court						Subchar Other (i.	pter 8 (Oth e. private	er than l & comm	K-12) ercial b	uildin	gs, ho	mes
City (5) Livingston						Square Feet	#0	f Floors		Bldg	. Age	4
County (6) Essex				nty Code (7)		Current Use (	Prior if bei	ng demo	olished)			
Name of Monitoring Firm Hired by B Environmental Connecti	uilding Owner	(8)	AS	CM No.		of Abatement C						
	on The.					czewski C	orporat	ion	. •			
treet Address				-	1 22/20/20/20	Address					-	
20 N. Warren Street					1	Watchung A	Ave		<u> </u>			
ity, State, Zip Code renton NJ 08608						tate, Zip Code						
roject Manager for Monitoring Firm			Telen	hone No.		Orange NJ	07052	Lincon	N.			
			609-	392-4200	973-2	43-9872		License C	No. 01171		21	
art Date (10)			2012	n Date (11)	11.00	of OSHA Monito Island Ar		_ 1				
cupancy Status During Abatement	More Mark		2012		Street A		alytic	aı	•			
		75		95		Colin Driv	re					
Facility Closed/Vacated During E Abatement Performed Outside of Other – Describe: Open dur	Normal Facil	ty Hou	s iours	8:00-4:00pm		ite, Zip Code obrook NY	17747					_
ope of Work (Check All That Apply)					HOIC	DIOOK NI	11/41	-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				Full Containn Mini-Enclosus Glovebag Pro Non-Exempte	re ocedure				re	
		s Locat							1		emen	t
Location of Asbestos-Containing Material (ACN TO BE ABATED In Facility (13)	(1) M	Normal ed Sole aintenal todial S (12)	ly by	Asbestos Conta (i.e. thermal	cription of aining Mar systems in ing, VAT, iscellance	terial (ACM) nsulation, u	Amo (Spe SF o		Removal	Repair	e Encapsulate	Enclosure
terior doors	Yes	No	:N/A	doors caul	·		3001				ite	Ġ.
	,	х							x			
terior windows Room 10	3	x		window cau	TK		1001	f.	x			
et a styl				¥		i i		100A1	x			1906990 2 - 111
E - 2							72		x			
e of Registered Waste Hauler Circle Rubbish			DEP W uler ID I 816			Name of F	Registered own Res			ilit	У	
State den NJ				Disposal	Date	City, State						
oleted by womir Kielczewski	Title	Presi	dent	Sign	nature ;	dezersk	(, .	Dat 1	le 1/07/	120	12	

### State of New Jersey

### NOTIFICATION OF ASBESTOS ABATEMENT

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

									E 200	_			4,-
Date of Notification (1)	12/5/2012				Name o	of Building		erator (2) Z Site Contractors			24	951	1
Agencies Notified  [ X ] EPA  [ DEP	15 5	al Notifi			Street A	Address	940 P	ark Avenue	2012 DEC	10	PM 2	: 31	
[x] DOL	Ame	ndment rgency (	including		City, St	tate, Zip Co	de Lakev	vood, New Jersey	08701 & LIC	IS C ENS	ONT	ŘĐL.	
[x] DOH [] DCA		fication) cellation			Name o	of Contact Irving	Perlstein		Telephone Numbe		_	Q.	þ
				FAC	CILITY	INFORM	IATION						
	batement is Takin sidence	g Place	(3)					Type of Facility (4	School (k-12) Subchapter 8 (o	ther the	an k12)		
Street Address	Spruce Street							[x]	Other (i.e., priva	ate & co	ommer	cial bui	ldings,
City			ity (6)			Code (7) USE ONL	Y)	Square feet 1500 sf	# of Floors		g. Age	50	
Lakewood		Oce						Current Use (Prior Reside	ence	d)			
Name of Monitoring Firm N/A	2000	g Owner	(8)		ASCM N	No.			or (9) ian Contracting	, Inc.			
Street Address							Street Ac	1889 I	Route 9, Unit 61				
City, State, Zip Code									River, New Jers			271	
Project Manager for Monit	toring Firm		Telephone				732-34	ne Number 9-9932	License 1 00624	Number	r		
Scheduled Start Date (10) 12/5/12			Scheduled 12/6/	Y2.007	tion Date (	(11)	Name of	OSHA Monitor E.M.S	.L. Analytical				
1970/40/870	Abatement (Check lity Closed/Vacate tement Performed	d Durin	g Entire Pe				Street Ac	1056 S	Stelton Road				'n
	er – Describe						City, Sta	te, Zip Code Piscata	way, New Jerse	ey 088	354		
Scope of Work (Check all	that apply)						[ ]	Full Containmer Mini-Enclosure	t with Negative Pro	essure			
	for≥3 lf )sfor≥260 lf		[ ] [ x ]	Renova			[ x ]	Glovebag Procee	lure *) and Non-Friable	Proced	ure		
										Aba	tement	Туре	
©n-vieston ay titrotest			Is Location				Descriptio		0.0000000000000000000000000000000000000	R	R	E	Е
Location of Asbestos-Containing M		]	Normally t Solely b				estos-Con laterial (A		Amount (Specify SF	E	E	N	N
TO BE ABA		Mair	tenance/C				, thermal:		or LF)	M	P A	C A	C
in facility			Staff		1		ılation, su	rfacing,	5	0	I	P	0
(13)			(12)			oth	VAT, o er miscella			V	R	S	S
H		YES	NO	N/A		oun	er miscella	ineous)		A L		L E	R E
Exterior			X		Asbe	stos sidin	g		700 sf	X			
_				-	-		4			-			
			1										
	Hauler ntracting, Inc.		NJDEP Was	20223		Cubic Ya	rds of Wast	T.R.R.F.	ered Landfill				
City, State Toms River,				Dispos 12/7/			City, Sta Tullyto	nte own, Pennsylvani	a				
Completed by (Print or Typ Nicholas Fern		Title Proje	ect Manag	ger	Signat	ure i	hot	Fel	1	Date 12/5	5/2012	!	

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

State of New Jersey APPROVED: NJ POH (12/4/12)

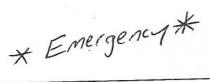
# NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification							f Education	2812 DEC	10 04 0 -	20			
Agencies Notified	12/4/12 Type Notific	ation			Addre		Luucation	CAILINE	10 PM 2: 2	9			
EPA	Type Notific	ation	1000			ect S	treet	La marina	3 22	1			
		I				Zip Co		9 1 10	da cun Tra	i.			
☐ DEP ☑ DOL	Ame	nded	T	rent	on, N	J 0863	38	& LIL	たれるはは	100	• • •		
	⊠ Eme	rgency	N	lame	of Co	ntact			T.	ephor	ie Nu	ımbe	r
□ DOH □ DCA		ellation	N	/Ir. E	veret	t O. Co	ollins						
				FAC	CILIT	Y INFO	RMATION					C-1 UV.	
Name of Facility WI			ace (3)	)			Type of Facility	(4)	•				
<b>TPS Trenton Mai</b>	intenance E	Building						12) NON SUB					
Street Address							Subchapte	er 8 (Other than	mercial building	e home	as a	c)	
1490 Prospect S	treet						Square Feet	# of Floo		dg. Age			$\neg$
		10 1 (0)	10-		\- d= /	7\		# 01 1 100	1	330	60+		
City (5)		County (6)	Col	inty C	ode (	1)	3000	Prior if being de	molished)		00.	-	$\neg$
Trenton		Mercer					Maintenance		iniononou)				
Name of Monitoring	. Firm Hirad I	N Puilding Own	or (8)		IASC	M No.		ement Contract	or (9)			70.	$\neg$
Environmental C		by Building Owi	iei (0)		1	NVI INO.		onmental, In					
Street Address	Omicotion			distant of	1		Street Address						
120 North Warre	n Street					180	1123 Beaver						
City, State & Zip Co							City, State & Z						
Trenton, NJ 080			I <del>- I</del> -		N		Bristol, PA 1 Telephone Nu		License N	umher			
Project Manager fo		Firm	Telep			per	(215)788-604		00509	uniboi			
Ryan Broadwate Scheduled Start Da		Scheduled Cor	F-2-10-10-10-10-10-10-10-10-10-10-10-10-10-				Name of OSH						
12/4/12		Concadica coi	12/5		( ,			ronmental In	c.				
Occupancy Status	During Abate	ment (Check or	nly one	<del>)</del>			Street Address						
		During Entire P					1123 Beaver					-	
		outside of Norm	al Hou	ırs –	7am to	o 3pm	City, State & Z						
	4:00 PM -						Bristol, PA 1	19007					
Scope of Work (Ch	cupied During												
Scope of Work (Cit	ieck all triat a	ippiy)					1		tainment with N	egative	Pres	sure	
≥3 sf or ≥3	lf		$\boxtimes$	Ren	ovatio	on		Mini-End					1
☐ ≥160 sf ≥26	60 If			Der	nolitio	n			ag Procedures	Crioble	. Dro	oodu	ıro
						т	Description		empted and Non Amount		atem		
	ocation of stos-Containi	na	202	Locat nally			Asbestos-Cont	aining	(Specify	7.0	Γ		,,,,
	iterial (ACM)	119		olely			Material (AC	CM)	SF or LF)	70		필	ш
	BE ABATED				ice or		(i.e., thermal sy			Remova	Repair	Cap	ICIS
	in Facility		Custo	odial : (12)	Staff?	'	nsulation, surfactor or other miscella			ova	ığ.	Encapsulate	Enclsoure
	(13)		Yes	No	N/A	1	Of Other Thiodolic					िं	
Room 114			П		П	1	Insulation (Wr	ap & Cut)	20 LF				
Room 114			H	×	H		Insulation		3 LF				
ROOM 114			Ħ		I								
											IL	ļЦ	H
									-		닏	H	붜
											Ш		
Name of Registere	ed Waste Hau	uler					Cubic Yards of Waste	Name of Regi	stered Landfill				
Drietal Environ	montal Inc			0.000000	auler i 3706	D No.	or waste	GROWS No	rth Landfill				
Bristol Environ	nental, inc.			110	7700		Disposal Date	City, State					
City, State Bristol, PA							D.opodai Dato	Morrisville,	PA				
Completed By (Pri	nt or Type)			Ti	tle		Signature		1 -	Date			
Gino Pizzigo	(1996) 1893			10000	roject	t	er Pi		1.0	12/4	4/12	?	
	7.53			M	anag	er	Duro 1	Jegone	170				

Chic.												
e of Notification	(1)	Nam	ne of B	uilding	Owner/Opera	tor (2)	201	2 DEC 1	0-00-0			
3/12		Por	t Auth et Add	ority	of NJ & NY			E DEC 1	0 PH 2: 28			
ncy Notified	Type Notification	90 1	Moonac	thie Av	2	i i	63.3	aleria.	2.00		4_	
<b>⊠</b> EPA	Initial     Amended	City	, State	Zip Co		(a) === 33 = 15	- 3	& 1 ICI	S CONTROL			
☑ DEP ☑ DOL	Amendment #	100000	onachie						Telephone Number	r		
⊠ DOH	☐ Emergency (including	g Nar	ne of C	ontact					1			
	justification	Joe	Colind	res		THE REAL PROPERTY.			1			
⊠ DCA	☐ Cancelation			FACIL	TY INFORMA	TION		=-:lib : (4)				
ma of Encility W	Where Abatement is Takin	g Place (	(3)	a.				Facility (4)				
terboro Airport	VII.C. Data	10Tell (22					□ Subc	ol (K-12) hanter 8 (C	Other than K-12}			
- ah Addrage							☑ Othe	r (i.e. priva	te & commercial bui	ldings,		
eet Address Moonachie Ave	enue						hom		# of Floors	T B	ldg. A	lae -
STATE OF THE STATE							Square 140,000		1	5		,gc
ty (5) eterboro, NJ 076	508				(7)	(CTATE LISE		Use (Prior	if being demolished)			
ounty (6)					unty Code (7) LY)							
roen	the Firm High by Duildin	na Owne	r AS	CM No		Name of	Abatement Contrac	tor (9)				
Name of Monito (8) The Port Author	ring Firm Hired by Buildin	ig Office				DSA Se	rvices, Inc.					
7-55						Street Add						
Street Address							t Elizabeth Avenu	ie				
	'ada					City, State	, Zip Code	26				
City, Slate, Zip C	.ode						New Jersey 0703		License No.			_
n i et Mana	ger for Monitoring Firm	1	T	elepho	one No.	Telepho	ne No. 25-5855		00843			
Project Maria					5 1- (11)		OSHA Monitor					
Start Date (10)		Schedule	d Com	pletion	Date (11)							
	1.	12/3/13				DSA Se	ervices, Inc.					
12/12/2012						Stroot A	ddress					
12/13/2012 Occupancy Sta			y one)			Street A	ddress					
Occupancy Sta	itus During Abatement (C	heck onl	batem	ent		Street A	ddress t Elizabeth Avenu	ie				
Occupancy Sta Facility Closed, Abatement Per	itus During Abatement (C Vacated During Entire Performed Outside of Normal	heck onl	batem	ent		800 Eas	ddress t Elizabeth Avenu te, Zip Code					
Occupancy Sta Facility Closed, Abatement Per Other – Descri	Itus During Abatement (C Vacated During Entire Performed Outside of Normal be:	heck onl	batem	ent		800 Eas	ddress t Elizabeth Avenu	)36		- ti De		
Occupancy Sta Facility Closed, Abatement Per Other – Descri	itus During Abatement (C Vacated During Entire Performed Outside of Normal	heck onl	batem	ent		800 Eas City, Sta Linden,	t Elizabeth Avenu te, Zip Code New Jersey 070	)36	Containment with Neg	gative Pro	essur	e
Occupancy Sta Facility Closed, Abatement Per Other – Descri Scope of Work	Itus During Abatement (C /Vacated During Entire Performed Outside of Normalibe:	heck onl	batem	ent		800 Eas City, Sta Linden,	t Elizabeth Avenu te, Zip Code New Jersey 070	Glove	Enclosure ehad Procedure			
Occupancy State Facility Closed, Abatement Per Other – Descri	Itus During Abatement (C /Vacated During Entire Performed Outside of Normalibe: ( (Check all that apply)	heck onl	batem	ent		800 Eas City, Sta Linden,	t Elizabeth Avenu te, Zip Code New Jersey 070	Glove	Containment with Neg Enclosure ebag Procedure Exempted (*) and No	on-Friabl	e Pro	cedur
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Occupancy Statement Per Other — Describer — Describer — Market Ma	Itus During Abatement (C /Vacated During Entire Performed Outside of Normal ibe: (Check all that apply) If or µ 260 If ation of Containing Material	iheck onlineriod of All Facility  Is L.  No.  Used  Mair	Abatem Hours ocation ormally Solely atenano	by	Asb:	800 Eas City, Sta Linden, Renovat Demolit Descri	t Elizabeth Avenute, Zip Code New Jersey 070 tion ion ption of ing Material (ACM)	☐ Full C☐ Mini-☐ G!ove	Enclosure ebag Procedure Exempted (*) and No  Amount (Specify	on-Friabl	Abate	cedur ment ype
Occupancy Star Facility Closed, Abatement Per Other – Descri Scope of Work    µ3 sf or µ3     µ160 sf co	Itus During Abatement (Control of Containing Material BE ABATED	Is L.  Used Mair Cu	ocation ormally Solely itenanoustodia	by	Asbr (i.e	Renovat Descriestos Containee, thermal sy	t Elizabeth Avenute, Zip Code New Jersey 070 tion ion ption of hing Material (ACM) ystems insulation, q, VAT, or	☐ Full C☐ Mini-☐ G!ove	Enclosure ebag Procedure Exempted (*) and No Amount	on-Friabl	e Pro	cedur
Occupancy Star Facility Closed, Abatement Per Other – Descri Scope of Work    µ3 sf or µ3     µ160 sf co	Itus During Abatement (C /Vacated During Entire Performed Outside of Normal ibe: (Check all that apply) If or µ 260 If ation of Containing Material	Is L.  Used Mair Cu	Abatem Hours ocation ormally Solely atenano	by	Asbr (i.i	Renovat Descriestos Containee, thermal sy	t Elizabeth Avenute, Zip Code New Jersey 070 tion ion ption of ing Material (ACM)	☐ Full C☐ Mini-☐ G!ove	Enclosure ebag Procedure Exempted (*) and No  Amount (Specify	on-Friabl	Abate	cedur ment ype
Occupancy Star Facility Closed, Abatement Per Other – Descri Scope of Work    µ3 sf or µ3     µ160 sf co	Itus During Abatement (C)  Vacated During Entire Performed Outside of Normalibe:  (Check all that apply)  If  Or \( \mu \) 260 If  ation of  Containing Material  BE ABATED  IN Facility	Is L. No. Used Mair Co.	ocation ormally Solely itenanoustodia Staff? (12)	by	Asbe (i.	Renovat Descriestos Containee, thermal sy	t Elizabeth Avenute, Zip Code New Jersey 070 tion ion ption of hing Material (ACM) ystems insulation, q, VAT, or	☐ Full C☐ Mini-☐ G!ove	Enclosure ebag Procedure Exempted (*) and No  Amount (Specify	n-Friabl Removal	Abate T	ment ype Encapsulate
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Mail to NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08628-0414

Telephone 609-984-6620

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

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WAINER REGUEST AHACHED Name of Building Owner/Operator (2) Date of Notification (1) HOWELL BLOCK 114 DEVELOPMENT, LLC **DECEMBER 6, 2012** Street Address Type Notification Agencies Notified 3 CENTRE DRIVE EPA Initial City, State, Zip Code Amended DEP MONROE TOWNSHIP, NJ 08831 M Amendment # DOL Emergency (including Telephone Number Name of Contact justification) DOH JAIME LOPEZ Cancellation DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) FORMER TIMEX BUILDING School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, **ROUTE 9 SOUTH** etc.) # of Floors Bldg. Age Square Feet City (5) **75 YRS** 75,000 SF HOWELL Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) WAREHOUSE MONMOUTH Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. FINISHING TOUCH ASBESTOS ABATEMENT N/A Street Address Street Address 17 THOMPSON STREET City, State, Zip Code City, State, Zip Code WEST LONG BRANCH, NJ 07764 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 00040 732-222-8372 Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) DEC. 24, 2012 **DECEMBER 10, 2012** Street Address Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure Demolition X ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure × Abatement Is Location Type Normally Description of Location of Used Solely by Amount Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Encapsulate Maintenance/ (i.e. thermal systems insulation, (Specify Remova TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or In Facility (12)other miscellaneous) (13)Yes No N/A 50,000 SF X ROOFING, FLASHING & DEBRIS ROOF AND DEBRIS Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler of Waste Hauler ID No. GROWS NORTH LANDFILL SAKOUTIS BROS. DISOPOSAL 375 CU CY 21243 Disposal Date City, State City, State 12/26/12 MORRISVILLE, PA COLTS NECK, NJ Date Signature Completed by Title 12/6/12-PRESIDENT JOSEPH P. MILLER uller



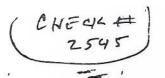
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Street Address 307 N. Walnut Stre							Street	Addre						7		
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City, State Newark, NJ						Dis	posal Date		City, State Morrisvi		Α					
Completed by Voytek Roszkowsk	i	Title Presid	dent				Signatur		يالانسينا	Ċ,		Dat 12		2012		

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Date of Notification (1) 11/30/12				Morris	Building C County		perator	(2) 2	NI2 DEC	10	PM 2: 8	īl,			
	Notification nitial			Street Ad 10 Cou	ddress urt Stree	et		Á	SHEST	08 (	CONTR	O!	en lygnion	i.	
DEP X DOL	Amended Amendment		_		te, Zip Cod town, N.		3		& LI	CEN	SING	CA			
☑ DOH ☐ ji	Emergency ( ustification) Cancellation	(10)			Contact	alker	= 3			Tele	ephone Nur	nber		475	
X DCA	Jancenation				LITY INFO		N.			-		-			
Name of Facility Where Abatem	ent is Takin	g Place (3)	)	TAGII	LITT HAT C	ZIXWATIC	1	Type	of Facility (4	1)					
Morris County Courthous	е								School (K-12	2)					
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County (6) Morris				County C	JSE ONLY)		_	Cour	thouse			ieu)			
Name of Monitoring Firm Hired I Birdsall Services Group	by Building	Owner (8)		ASCN 017	No.				tement Con ontracting		75 70				
Street Address 65 Jackson Drive								Addres Sarge	s ant Aveni	ue					
City, State, Zip Code Cranford, NJ 07016									p Code 07013						
Project Manager for Monitoring	Firm			Telephor			Teleph	none No	).		License N	lo.			
Mr. Kevin Burns Start Date (10)		Schedule	d Con		97-8900 Date (11)	,		689-6	28 I A Monitor		01099				7
12/13/12		02/10/1		inproduct.			J&S	Enviro	onmental	Labo	ratories L	LC	B		
Occupancy Status During Abate	ment (Chec	k Only On	e)					Addres	s e 22 Wes						
Facility Closed/Vacated Du Abatement Performed Outs	side of Nom					-	City, S	tate, Zi	p Code						
Other – Describe: Occupie							Unio	n, NJ	07081						
Scope of Work (Check All That All 23 sf or ≥3 lf  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	Apply)		enova emolit				×	Min Glo	I Containme ni-Enclosure ovebag Proc n-Exempted	edure					
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			x		Spra	ay-Appl			ofing	8,1	00 SF	x			
			х			Pipe	Insula	tion		1,0	50 LF	x			
			x		Duct In	sulatio	n & 30	00 SF	of VAT	2,5	50 SF	x			
Name of Registered Waste Hau	ler		100	IJDEP W		Cubic of Was			921-West 0   EN 500 A		ered Landfil				
Pyramid Contracting Corp				2613	140.	100			G.R.O.\		Inc.			-	
City, State Clifton, New Jersey						Dispos Throu	al Date		City, State		ennsylva	nia			
Completed by		Title				S	igrafug	1	/	11	7	ate	0		
Dimo Golcev		Gene	ral N	langer			11	N	4	/	12	2/05/1	2		
ASB-41 (R-06-08)						de	* Do n	ot use t	form for	asbes	tos licensur	e exen	npted	activi	ties.

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Date of Notification (1) 11/30/12			Manne	of Building s Count	g Owner/O	herator	(4)						
Agencies Notified Type Notification				Address ourt Stre	not.	- A	5 tr	E3105	CONTRO				
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Name of Facility Where Abatement is Takin Morris County Courthouse	g Place (	3)			35		Тур	of Facility ( School (K-1	500.00 500.00				
Street Address Washington Street		×10, 7						Subchapter	8 (Other than K private & comme		ldings	, hom	es,
City (5) Morristown							50,0	are Feet 000+	# of Floors	1	Bldg. 50+	Age	
County (6) Morris				Code (7) USE ONL			11 / may 1	ent Use (Pri urthouse	or if being demo	lished)			
Name of Monitoring Firm Hired by Building	Owner (8)	)		M No.		Name		atement Cor	ntractor (9)				
Birdsall Services Group	,	- 6						Contractin	g Corp.				
Street Address 65 Jackson Drive						11-21-06080-0	Sarg	eant Aven	iue				
City, State, Zip Code Cranford, NJ 07016			77. 54				200	Zip Code J 07013					
Project Manager for Monitoring Firm Mr. Kevin Burns			Telepho 908-4	ne No. 97-8900	)	Teleph 973-			License 01099				
Start Date (10) 12/10/12	Schedul 02/10/		mpletion	Date (11)				HA Monitor	Laboratories	LIC			38
Occupancy Status During Abatement (Chec	A Zeate view and					Street			Laboratorio				
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Occupied Building	Period of	Abate				City, S	tate, 2	ite 22 Wes Zip Code J 07081	st				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 if  ≥160 sf or ≥260 if		Renov Demol			1	×	Fu Mi GI	ill Containme ni-Enclosure ovebag Prod	No. of the Control of				
	Is	Loca	Hon	Ī		S. C.	1 140	II-Exemples	( ) and recirri	l l	Abat	emen	t
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	Yes	No	N/A								_	65	
Ground / 1st Floor		x	-			ing Ti		ofin-	7,800 SF	Х		H	1.00
*	-	X		Spr	ay-Appli			oting	8,100 SF	×	-	_	-
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Name of Registered Waste Hauler	1	X	NJDEP W		Cubic Y		o or		Registered Land				
yramid Contracting Corp.		1	Hauler ID 12613	No.	of Wast	e		G.R.O.\	V.S., Inc.				
City, State Silfton, New Jersey					Disposa Throug		)	City, State Morrisvi	le, Pennsylv	ania			
Completed by Dimo Golcev	Title Gene	eral N	langer		Sig	patere	de	16		Date 11/30/1	12		
ASB-41 (R-06-08)					de	До по	t use	this form for	asbestos licens	ıre exer	npted	activi	ies.



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7 - Code					MA.	PLOS	HADE		0805	
City State Up Code			alaphone	No	Telephone No.	-c ^	477	License No	144	
Project Manager lor	Monitoring Firm	, . }			856-7	19 -0	724			
	School	Jed Com	pletion 0	ale (11)	Harra of OSHA	PIL HIL	EMA	1		
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### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

					JAC 8:60 and		20.	ECEINE	A 8.
Date of Notification (1	16/12 .		Na	me of B	Wilding Owner	Operator (2	CONT	Sim The	0
Agences Nouried	Type Notification		Su	reel Add	Company of the Compan	T, 50	933	05 11.1:	52
□ <b>₽</b> ^ □ <b>©</b>		nto someon	Cir	v State	Zip Code INCEN		- K/(	8 2/3 6 hay	
□ 00H	Emergency (inclination)  Cancellation	philo	N <sub>2</sub>	me of C				Telephone Number	9
	Carbana		4=		Y INFORMATI		200		
Name of Facility When	e Abatement is Taking	Place (3)					Type of Facility (  School (K-12)		
1.59	1751000		-				Suparapter 8	Asia & commercial (Other (pay K-15)	pulangs
Street Address 46	20 CENTA	s.c.	A 6	<u> </u>		-	Square Feel	# of Floors	Bldo Age 40 T
Ciry (5) OCi	EDN CHY			200/	2000 (7) (STA	YE	Current Use (Pri	or It being demolist	ned)
County (6)	APE MAY		_	USE ON	LY		V V (	CANT	
Name of Morvioning F	im Hired by Building O	4∩ei	AS	CM No.	K	, L. C-M	COLN	c,	
Street Aggress	2/1		-1-		Sveet	369 S	. SPRU	cé Ave.	
			===	===	Cry. S	MAP	∞• _	DE, NJC	1805 -
City State Zip Code		<del>-</del> T	Teleph	one No	THOR	ana No		License No	14
Project Manager for I		· • •				TOSHA	19-0472		
Sian Daie 1101	/ , 3 /2	100 Col	1/1	عاده الا	1	DSE 1	OKHLEN		
	- Abalement (Che	x only o	ne)	ent		3695		E1 UE.	
Facility Closed Va	rmed Outside of Normal				Çiry.	SLaie Tip C	E SHAD	E, N. J.	08052
Ower - Describe	·					D Full Co	ontainment with h	legative Pressure	
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Aspesios Contain	nion of ning Material (ACM) ABATED	Used Main Cu	Soleh nenan siodia sian?	cel	Asbesios Co	Description on which the system of a congress of the system of the syste	s insulation.	(Specify SF or LF)	Hatew Removal
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1 .::	:,	YES			TI	LANSI	TE	18004	=  ^-
SIPIR	ia .	+-							=
				-				Registered Landfill	
Name of Register	ed Wasie Hauler		$\perp_{T}$	NOEP Hauder	O No. 01	Dic Yards	Name of	M, C, M.	U. A.
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gencies Notified Type Notification	n ,	10000	reet Addre			Ł	4	45.5 A.	00.	11112-1	42				
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DCA Cancellati	-		FACILIT	Y INFORM	ATIO	N							_		
Name of Facility Where Abatement is Ta Commercial Building Street Address	king Place (3)						Sch	acility (4) nool (K-12) ochapter 8 ner (i.e. pri	) (Othe	r than K-12 commerci	2) al build	ding	s, ho	mes	
95 River St. City (5)						S	etc quare 0.000	eet	# of	Floors		ildg.	Age	8	
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Hudson		13				Name of	Abater	nent Cont	ractor	(9)	-		- 117		-
Name of Monitoring Firm Hired by Buildi	ng Owner (8)		ASCM N			Green	envir	onmenta	al Ser	vices					
Street Address			10			Street A	rginia								_
City, State, Zip Code						City, Sta Jersey	te, Zip City	Code NJ 0730	)4						
Project Manager for Monitoring Firm		1	Telephone	No.		Telepho 201-3		55		License 1 01174	No.		10		
Start Date (10)	Scheduled		pletion Da	ate (11)		A la profita de la como		Monitor utions					Cq		
12-7-2012 Occupancy Status During Abatement (	100000000000000000000000000000000000000					Street A									
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe:	tire Period of Al Normal Facility I	oatem Hours	ent			City, Sta	ate, Zip	Code						2,22	
Scope of Work (Check All That Apply)		-													
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Name of Registered Waste Hauler Tri State Transfer Associate			NJDEP W Hauler ID 2A456		5.5000000000000000000000000000000000000	ic Yards /aste		1,000,000		stered Land terprises					
City, State	City, State				Disp	osal Date 8-2012	)	City, Sta Wayn	ate esbui	g Ohio.					
Bronx NY Completed by Tiffany Nunez	e Ma	anager	DI pi	3	Signatur	е				Date 12-4		012		_	

Date of Notification (1)			T	Name of	Building (	Owner/O	perator	(2)				area e	1		
Decem	ber 06, 2012		J	acobus	Pharm	aceutio	cal Co.		2012 D	FC 10					
Agencies Notified	Type Notification			Street Ad						re 10	PMI	2:	7		
⊠ EPA	Initial		c	ounty F	Road 68	83			A Star	7 4- 14		-	- 6		
DEP	Amended			City, Stat					2	103 (	COM	TPE	,		
DOL	Amendment		—  P	lainsbo	ro Tow	nship,	NJ		er i	LILEN.	SING		i.		Source Const.
⊠ DOH	Emergency (i	ncluding		Name of	Contact				1	elephone	Numb	oer			
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	and the second			FACIL	ITY INFO	ORMATIO	NC								
Name of Facility Where	WW. 150-1504-5	Place (3	)					Type of F	acility (4)						
Jacobus Pharmaceu	tical Co.								ool (K-12)		V 10\				
Street Address								Othe	chapter 8 (C er (i.e. priva	ther than te & comm	nercial	build	ings,	home	s,
County Road 683								etc.)							*
City (5)								Square F	eet #	of Floors		BI	dg. A	ge	
Plainsboro Township	, NJ									- 51					
County (6)				County C				Current U	se (Prior if I	100.0		83			
Middlesex										narmace	eutica	ıl			
Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCM	No.		Name	of Abateme	ent Contract	or (9)					
Sabre Health	200			l					oup, LLC						
Street Address							Street	Address							
1015 Zucksville Roa	d								VY N, ST	E 209					
City, State, Zip Code							City, S	state, Zip C	ode						
Easton, PA 18040								y Hill, NJ	08034						
Project Manager for Mon	itoring Firm			Telephon	e No.		Teleph	none No.		Charles and Charles	se No.				
Brent Altemose, CIH	, CSP			66.734				759 - 500		0078	1				
Start Date (10)		Schedule	ed Com	pletion D	Date (11)		Name	of OSHA N	Monitor						
9/26/1				2/31/1	2				oup, LLC.						
Occupancy Status Durin	g Abatement (Chec	k Only On	e)			7		Address							
Facility Closed/Vac	ated During Entire I	eriod of	Abatem	ent					VY N, ST	E 209					
Abatement Perform Other - Describe:	ed Outside of Norm	al Facility	Hours				City, S	State, Zip C	ode						
Other - Describe.							Cherr	y Hill, NJ	08034						
Scope of Work (Check A	ll That Apply)														
≥3 sf or ≥3 lf			Renova						ntainment v	vith Negat	tive Pre	essur	е		
≥160 sf or ≥260 lf			emolit	ion					nclosure pag Procedu	re	8				
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Newark Carting / Ro	vic			450	)9		15.3		umberland	Count	y Lan	dtill			
City, State			96			0.0000000000000000000000000000000000000	sal Date	- NO.	ity, State						
Newark / Riverdale,	NJ						2/31/1		ewburg, P	Ά	T D				
Completed by	14 S.	Title				8	Signatur	17/	1		Date				
Mike Cooper		Presid	dent				- Norman I	1/			12/6	/12			

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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use	lormally d Solely intenand odial St (12)	by aff?	Description of Asbestos Containing Material (ACM)  (i.e. thermal systems insulation, suffacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No.	? REC	10 PM 12: 10				· ·	
Penthouse AC-5	100	X		10 PM i2: i8 Fittings	8	$\perp X$		- 1	
TankRoom/SteamRoom	X	<del>(-)</del>	257	Fittings US CONTISteam Pipe CHS CONTISTEAM Pipe Dipe insulation	8 l/f	X			
-"-	$\forall$		ec L.H	6 LP Coadensate Pipe	70 l/f	X			
bathroom/locker rm	-	X		nine insulation	120 lf	X			
		$\Diamond$		VAT	50 sf	X			
along edges of existing walls	-	$\Diamond$		VAT & Mastic	100 sf	X			T
Cold Box		$\triangle$			43 ft	$\Rightarrow$	1		
Dapson Area	$+ \Diamond$			pipe insulation		-/->	V	+	+
	X			elbow	2				
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L

Date of Notification (1)		IN	Name of B	uilding O	wner/Op	erator (	2)		7 %	CE.	11/5	-				
	ber 12, 2012		Ja	acobus	Pharma	ceutic	al Co.		261			- ba	- 6_3			
Agencies Notified	Type Notification		S	Street Add	Iress				201	Z DEI	C 10	DM .				
	✓ Initial		C	ounty R	oad 683	3						LH 15	: i	ξ.		
EPA DEP	Amended	*	(	City, State	, Zip Cod	е			4)	ES.	OS C					*
DOL	Amendment #				ro Town	ship, N	NJ _			& L	حردت	4141	1.67	1		
DOH	Emergency (i	ncluding	1	Name of C	Contact					Tele	phone	vumbe		-		
DCA	Cancellation		T	om San										D		
				FACIL	ITY INFO	RMATIC	DN .	T	of Engility (A)				-			
Name of Facility Where	Abatement is Taking	Place (3)						_	of Facility (4)							
Jacobus Pharmaceu	tical Co.								School (K-12) Subchapter 8		r than K	-12)				
Street Address								X	Other (i.e. pri	ivate 8	comme	rcial bu	ıildi	ngs,	nomes	s,
County Road 683									etc.)							
City (5)								Squa	re Feet	# of	Floors		RIC	lg. A	je	
Plainsboro Township	o, NJ															
County (6)				County Co				Curre	ent Use (Prior							
Middlesex	A <sub>s</sub>			(STATE U.	SE ONL1)					10.1	rmaceı	utical				
Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCM	No.		Name	of Aba	atement Contr	ractor	(9)					
Sabre Health									Group, LL	.C						
Street Address							Street	Addre	ess							
1015 Zucksville Roa	d						1500 k	Kings	s HWY N, S	STE :	209					
City, State, Zip Code							City, S	tate,	Zip Code							
Easton, PA 18040							Cherry	y Hill	, NJ 08034							
Project Manager for Mon	nitoring Firm		- 1	Telephon	e No.		Teleph	one N	No.		Licens	e No.				
Brent Altemose, CIH			8	866.734	.0127		(973)	759 -	- 5000		00781					
Start Date (10)	1, 031	Schedule		npletion D					SHA Monitor				50.			
9/26/1	2			10/26/1			The M	IACK	Group, LL	.C.						
Occupancy Status Durin	a Abatement (Chec	k Only On		10/20/			Street	-	100							
U 037				nent			1500 I	King	s HWY N,	STE	209					
Abatement Perform	cated During Entire ned Outside of Norm	nal Facility	Hours	5					Zip Code							
Other - Describe:							Cherr	v Hill	I, NJ 08034	1						
Scope of Work (Check A	All That Apply)		- 115						134							
			longur	ation				X F	ull Containme	nt wit	h Negativ	ve Pres	sur	е		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli					M	lini-Enclosure							
△ 2.00 St St 2200 tt		لسا						- G	lovebag Proc lon-Exempted	edure	Non-Fris	ahlo Pri	nced	ure		
								N	OII-Exempled	( ) and	- NOII-1 III	T T			ement	
		2.5	Locat	2022-0-1											pe	
Location	on of		Norma ed Sole				scription		E-L (ACM)		Amount					
Asbestos-Containin			intena		Asbes	tos Con	taining i I system	wateri is insi	ial (ACM)		Specify	20	ZJ	-	Encapsulate	m
TO BE AS		Cus		Staff?	(1.0.	surfa	cing, V	AT, or		S	F or LF)		emo	Repair	aps	Enclosure
(13			(12)			other	miscella	neous	5)				Remova	<u>a</u>	ulat	иге
			NI-	N/A											O O	
		Yes	No	N/A			- 411-	0 000	ntio		900sf		X			
Maintenan	ice Shop	X		,—	а	spesto	os tile a	& Mia	ISUC	-			$\ni$		-	-
Bathro	X				"-				500sf		$\Rightarrow$			-		
Vestil	ΙX		*		_"_		70 1930 - 1930 - 1		50sf	/	X					
70011	00.0			1												
N 5 Desistered W	acta Haular			NJ DEP V	Vaste	Cubic	Yards	-	Name of	Regis	ered Lar	ndfill				_
Name of Registered Wa	aste natitei			Hauler ID		of Wa				1.						
Newark Carting / Ro	ovic			45	09		14.5		Cumber		County	/ Land	llift			
City, State			57	110000000000000000000000000000000000000	osal Dat		City, Stat									
Newark / Riverdale	. NJ				- Pa		10/26/		Newburg	g, PA	\					
Completed by	1000				Signatu	re//	7/2			Date						
Mike Cooper							1/1200	//				9/12	12			

 $<sup>\</sup>mbox{^{\star}}$  Do not use this form for asbestos licensure exempted activities.

October 03, 2012  Agencies Netified  Type Notification  Def	Date of Notification (1)		T	Name of E	Building O	wner/	Operator (2	2)	71 10		VEL	7	-				
Dock	Octob	per 03, 2012		J	acobus	Pharma	aceu	tical Co.									
Dock			4/2		Street Ad	dress			20	12 DEC 1	0	OM in					
Amendment # Plainsboro Township, NJ Name of Contact Tom Santbol Justification   Plainsboro Township, NJ Name of Facility Where Abatement is Taking Place (3)   Facility Where Abatement is Taking Place (3)   Facility Where Abatement is Taking Place (3)   Facility New Abatement is Taking Place (3)   Plainsboro Township, NJ   Separate Feet (3)   Se	M EDA	Initial	4	C	County F	Road 68	3				- 1	1714:	18				
Name of Facility Where Abatement is Taking Place (3)  Acobus Pharmaceutical Co.  Sircet Address  County Road 683  City (5)  Plainsboro Township, NJ  County Road 683  City (5)  Plainsboro Township, NJ  County Code (7)  Art Start	I DEE	Amended			City, State	e, Zip Cod	le		A	融ESTI	c n	No					
Name of Facility Where Abatement is Taking Place (3)  Acobus Pharmaceutical Co.  Sircet Address  County Road 683  City (5)  Plainsboro Township, NJ  County Road 683  City (5)  Plainsboro Township, NJ  County Code (7)  Art Start	□ DOF			- P	lainsbo	ro Towr	nship	, NJ	10	& 110	LIC	111 1 181					
	DOH.		ncluaing		Name of	Contact				-10[	Tel	ephone I	Numbe	r			
Name of Facility Where Abstement is Taking Place (3)   Type of Facility (4)   Jacobus Pharmaceutical Co.   Type of Facility (4)   Subchapter 8 (2)   Type of Facility (4)   Subchapter 8 (2)   Type of Facility (4)   Subchapter 8 (2)   Type of Facility (4)   Type of Facility	DCA			T													
Jacobus Pharmaceutical Co.  Street Address  City (5)  Plainsboro Township, NJ  County (and (7)  County (7)  County (8)  Middlesex  Name of Monitoring Firm Hired by Bulding Owner (8)  Street Address  The MACK Group, LLC  Street Address  1500 Kings HWY N, STE 209  City, State, Zip Code  County (1)  Stard Date (11)  Scheduled Completion Date (11)  Project Manage for Monitoring Firm  Brent Alternose, CIH, CSP  Stard Date (10)  Scheduled Completion Date (11)  Project Manage for Monitoring Firm  Brent Alternose, CIH, CSP  Stard Date (10)  Scheduled Completion Date (11)  Project Manage for Monitoring Firm  Brent Alternose, CIH, CSP  Stard Date (10)  Scheduled Completion Date (11)  Project Manage Abatement (Check Only One)  Stard Date (10)  Scheduled Completion Date (11)  Project Manage Abatement (Check Only One)  Stard Date (10)  Scheduled Completion Date (11)  Project Manage Abatement (Check Only One)  Stard Date (10)  Scheduled Completion Date (11)  Project Manage Abatement (Check Only One)  Stard Date (11)  Scheduled Completion Date (11)  Project Manage (ACM)  Street Address  Scoope of Work (back All That Apply)  23 st or 23 ll  Scoope of Work (back All That Apply)  23 st or 23 ll  Scoope of Work (back All That Apply)  23 st or 22 ll  Asbestos-Containing Material (ACM)  In Each Manage (Acm)  In Facility (12)  Read Scoope of Work (back All That Apply)  Project Manage (Acm)  In Facility (1)  Project Manage (Acm)  In Facility (1)  Project Manage (Acm)  In Facility (1)  Project Manage (1)  Asbestos Containing Material (ACM)  (i.e. hermal systems insulation, surfacing (1) and Non-Frable Procedure  Name of Registered Waste Hauler  Hauler ID No.  Name of Registered Landfill (Chity, State  City, State  Cumberland County Landfill  City, State  Cit					FACIL	ITY INFO	RMA							_			
Size Address  County Road 683  County Road 683  County Road 683  County Road 683  Square Feet # of Floors   Bidg. Age    Plainsboro Township, NJ  County (6)   County Code (7)   County Code (7)   County Code (7)   County (8)    Pharmaceutical   Floors   Bidg. Age    Pharmaceutical   Pharmaceutical    Name of Abatement Connection (9)    Street Address   Street Address    1015 Zucksville Road   City, State, Zip Code    City, State, Zip Code   City, State, Zip Code    County State, Zip Code   City, State, Zip Code    Caston, PA 18040   Telephone No.    Project Manager for Monitoring Firm   Telephone No.    Brent Alternose, CIH, CSP   Scheduled Completion Date (11)   Name of OSHA Monitor    Froject Manager for Monitoring Firm   Telephone No.   Glephone No.    Brent Alternose, CIH, CSP   Scheduled Completion Date (11)   Name of OSHA Monitor    Facility Closed/Vacated During Entire Period of Abatement Abatement Abatement Performed Outside of Normal Facility Hours    Abatement Performed Outside of Normal Facility Hours   Street Address    Scope of Work (hock All That Apply)   23 sf or 23 lf   Sign Facility Closed/Vacated During Entire Period of Abatement    Abatement Performed Outside of Normal Facility Hours   Sign Fluid Containment with Negative Pressure    Ministenciouse   Glovebag Procedure    Monitoriouse   Sign Fluid Containment with Negative Pressure    Ministenciouse   Glovebag Procedure    Monitoriouse   Sign Fluid Containment with Negative Pressure    Ministenciouse   Sign Fluid Containment	Name of Facility Where	Abatement is Taking	Place (3)						Type o	f Facility (4)	)						
County Road 683  City (5) Plainsboro Township, NJ  County (6)  Middlesex  Name of Monitoring Firm Hired by Building Owner (8) Sabre Health  Street Address  Street Address  Street Address  1500 Kings HWY N, STE 209  City, State, Zip Code Cherry Hill, NJ 08034  Project Manager for Monitoring Firm  Brent Altermose, CIH, CSP Start Date (19)  Facility Closed Variated During Entire Period of Abatement Other - Describer  Asbestos-Containing Material (ACM)  I Renovation Demolition  Asbestos-Containing Material (ACM) I Reality (13)  Was No N/A  Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler Newark (Carting / Rovic  Lice, State  Square Feet  # of Floors Bidg, Age Other (iii) Current Use (Prior if being demolished) Pharmaceutical  ASCM No.  Square Feet  # of Floors Bidg, Age Pharmaceutical  ASCM No.  Name of Abatement Contractor(9) The MACK Group, LLC  City, State, Zip Code Cherry Hill, NJ 08034  Freilig Closed Waste Hauler Non-Exempted (1) and Non-Frable Procedure	Jacobus Pharmaceu	ıtical Co.														10	
County Road 683	Street Address													ildi	nas.	home	s.
County (5)   Plainsboro Township, NJ   County (Code (7)   STATE USE (NA)   County (6)   County	County Road 683								et et	tc.)		200000000000000000000000000000000000000					
County (6)   County Code (7)									Square	e Feet	# 0	Floors		Bl	dg. A	ge	
County (6)   County Code (7)	Plainsboro Townshii	p. NJ						82				- 0.000					
Name of Monitoring Firm Hired by Building Owner (8)   ASCM No.   Name of Abatement Contractor (9)		,					10000		Curren	t Use (Prior	if bei	ng demo	lished)				
Name of Monitoring Firm Hired by Building Owner (8)   ASCM No.   Name of Abatement Contractor (9)					(STATE U	SE ONLY)	2000				Pha	rmace	utical				
Sabre Health Street Address City, State, Zip Code Cherry Hill, NJ 08034  Freight Altemose, Cith, CSP Start Date (10) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Street Address Street	Name of Monitoring Firm	n Hired by Building (	Owner (8)		ASCM	No.	100	Name o	of Abate	ement Contr	actor	(9)					
Street Address	Seas you sould were							The MA	ACK (	Group, LL	C						
1500 Kings HWY N, STE 209								Street A	Address	s							
City, State, Zip Code Easton, PA 18040  Project Manager for Monitoring Firm Brent Altermose, CiH, CSP Start Date (10)  Start Date (10)  Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Other Check Only One)  Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Maintenance Shop  Bathroom  Vestibule Penthouse AC-5 Name of Registered Waste Hauler No.  Telephone No. B66.734.0127 (973) 759 - 5000 00781  Name of OSHA Monitor The MACK Group, LLC.  Name of OSHA Monitor The MACK Group, LLC.  Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (1) and Non-Friable P		ad						1500 K	(inas l	HWY N. S	STE	209					
Easton, PA 18040  Project Manager for Monitoring Firm  Sternt Alternose, CIH, CSP  Start Date (10)  Scheduled Completion Date (11)  9/26/12  Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Qutside of Normal Facility Hours  Other - Describe:  Scope of Work (Check All That Apply)  23 sf or 23 lf  ≥ 160 sf or 2260 lf  In Facility (13)  Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of OSHA Monitor  The MACK Group, LLC.  Street Address  1500 Kings HWY N, STE 209  City, State, Zip Code Cherry Hill, NJ 08034  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (1) and Non-Friable Procedure Non-Exempted (1) and Non-Exempted (1) and Non		<u></u>															
Project Manager for Monitoring Firm Brent Altermose, CIH, CSP Start Date (10) Scheduled Completion Date (11) Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor The MACK Group, LLC.  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 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  Street Address 1500 Kings HWY N, STE 209 City, State, Zip Code Cherry Hill, NJ 08034  Scope of Work (Check All That Apply)  Street Address 1500 Kings HWY N, STE 209 City, State N, S								Cherry	Hill. I	NJ 08034							
Start Date (10)		nitoring Firm			Telephon	e No.	-					Licens	e No.				
Start Date (19)  9/26/12  Cocupancy 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)  23 sf or 23 lf  2160 sf or 2260 lf  Renovation Demolition  Renovation Demolition  Renovation Demolition  Street Address  City, State, Zip Code Cherry Hill, NJ 08034  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure  Abatement Type  Abatestos Containing Material (ACM) I DE CABATED In Facility (13)  Yes No N/A  Maintenance Shop  Bathroom Vestibule  Penthouse AC-5  Name of Registered Waste Hauler Non-Maintenance Procedure Non-Exempted (*) and Non-Friable Procedure  Abatement Type  Ababestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Street Address  Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Street Address  Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure  Abatement Type  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Full Containment with Negative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure No		a constitue a						(973) 7	759 - 5	5000		00781					
9/26/12 12/31/12 The MACK Group, LLC.  Occupancy Status During Abatement (Check Only One)    Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours   Other - Describe:		1, 031	Schedule					1.0			-					-	
Occupancy Status During Abatement (Check Only One)    Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe:   1500 Kings HWY N, STE 209	0-00-0000000000000000000000000000000000	2						The M	ACK (	Group LL	C.						
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe:    Scope of Work (Check All That Apply)			k Only On		12/01/1												
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) 1OBE ABATED In Facility (13)  Maintenance Shop  Bathroom Vestibule  Penthouse AC-5 Name of Registered Waste Hauler Newark Carting / Rovic City, State City, State City, State, Zip Code Cherry Hill, NJ 08034  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure  Abatement Type  Asbestos Containing Material (ACM) (Specify SF or LF)  Penthouse AC-5 Name of Registered Waste Hauler Non-Exempted (*) and Non-Friable Procedure  Asbestos Containing Material (ACM) (Specify SF or LF)  Penthouse AC-5 Name of Registered Waste Hauler Nound Name of Registered Landfill City, State Newark / Riverdale, NJ  Completed by  Title  Signification City, State Cumberland County Landfill City, State Newborg, PA  Date  10/2/14/2								1500 K	(inas	HWY N. S	STE	209					
Cherry Hill, NJ 08034    Scope of Work (Check All That Apply)	Facility Closed/Va	cated During Entire I	al Facility	Abaten Hours	nent S			_									
Scope of Work (Check All That Apply)    23 sf or 23 lf   2160 sf or 260 lf   Renovation   Demolition   Renovation   Renovation   Renovation   Demolition   Renovation   Renova	Other - Describe:																
23 sf or ≥3 lf   ≥160 sf or ≥260 lf	Scano of Work (Chack	All That Apply)						. Cricity	1 1111, 1	140 00001	-			_			
Demolition   Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non-Ex		All That Apply)	$\square$					12	Z =	Cantainma	nt wit	h Mogatiy	o Dros	cur	0		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Maintenance Shop  Bathroom Vestibule Penthouse AC-5 Name of Registered Waste Hauler Newark Carting / Rovic City, State Newark / Riverdale, NJ  Completed by  Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Per No N/A  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Per No N/A  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Per No N/A  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Pro Userial (Specify SF or LF)  Pro Dosf  Asbestos Containing Material (ACM) (Specify SF or LF)  Pro Dosf  Asbestos tile & mastic  900sf  Pipe  80 l/f  Name of Registered Landfill  Cumberland County Landfill  City, State  Newark / Riverdale, NJ  Completed by  Title  Signature  Asbestos Containing Material (ACM) (Specify SF or LF)  Asbestos Containing Material (ACM) (Asbestos Containing Material (ACM) (Specify SF or LF)  Asbestos Containing Material (ACM) (Specify SF or LF)  Asbestos Containing Material (ACM) (Specify SF or LF)  Pro Dosf  Asbestos Containing Material (ACM) (Specify SF or LF)  Pro Dosf  Asbestos Containing Material (ACM) (Specify SF or LF)  Pro Dosf  Asbestos Containing Material (ACM) (Specify SF or LF)  Pro Dosf  Asbestos Containing Material (ACM) (Specify SF or LF)  Pro Dosf  Asbestos Containing Material (ACM) (Specify SF or LF)  Pro Dosf  Asbestos Containing Material (ACM) (Specify SF or LF)  Pro Dosf  Asbestos Containing Material (ACM) (Specify SF or LF)  Asbestos Containing Material (ACM) (Specify SF or LF)  Pro Dosf  Asbestos Containing Material (ACM) (Specify SF or LF)  Asbestos Containing Material (ACM) (Specify S			Section 2		NEW 2000			Ď			iii wii	i Negatii	VC 1 163	Sui			
Is Location Normally Used Solely by Maintenance Pount (Ize)   Washestos-Containing Material (ACM)   Maintenance Pount (Ize)   Maintenance Shop   Yes   No   N/A      Maintenance Shop   Maintenance Shop   Maintenance Shop   Yes   No   N/A      Maintenance Shop	Z 2100 31 01 2200 11							2	Glo	vebag Proc	edure						
Location of Normally Used Solely by Maintenance/ Custodial Staff? (12)  Maintenance Shop  Maintenance Shop  Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)  Asbestos Containing Material (ACM)  Asbestos Containing Material (ACM)  (Specify SF or LF)  Asbestos Containing Material (ACM)  (I.e. thermal systems insulation, surfacing, VAT, or other material (ACM)  (I.e. thermal systems insulation, surfacing, VAT, or other material (ACM)  (I.e. thermal systems insulation, surfacing value of the material (ACM)  (I.e. th									Non	-Exempted (	*) and	Non-Fria	able Pro				
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  West No N/A  Maintenance Shop  Bathroom Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  Nowally Security Name of Registered Waste Hauler  Nowally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Asbestos Containing Material (ACM) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Security  Security  For LF)  Republic Specify Security Se										15			-	-			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Maintenance/ Custodial Staff? (12)  Yes No N/A  Maintenance/ Custodial Staff? (12)  Yes No N/A  Maintenance Shop  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Yes No N/A  Maintenance/ Custodial Staff? (12)  Yes No N/A  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  For LF)  Per No N/A  Maintenance/ Custodial Staff? (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Per LF  Popular  Per No N/A  Per											19						I -
Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  No  NAMe asbestos tile & mastic  900sf  -"-  500sf  Pipe  Name of Registered Landfill  Cubic Yards of Waste  Hauler ID No.  4509  15.3  Cumberland County Landfill  City, State  Newburg, PA  Date  10/3/12					, ,									ת		E	ш
Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  No  NAMe asbestos tile & mastic  900sf  -"-  500sf  Pipe  Name of Registered Landfill  Cubic Yards of Waste  Hauler ID No.  4509  15.3  Cumberland County Landfill  City, State  Newburg, PA  Date  10/3/12			Cus		025025000000000000000000000000000000000	(1.6.				tion,				B	Rep	aps	nclo
Maintenance Shop  Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  No N/A  asbestos tile & mastic  900sf  -"- 500sf  Pipe  NJ DEP Waste Hauler ID No. 4509  15.3  Cumberland County Landfill  Disposal Date 12/31/12  Newburg, PA  Date  10/2/12		(i) • • • • • • • • • • • • • • • • • • •		(12)	3		othe	r miscellan	eous)					2	pair	sula	sure
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Bathroom  Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  NJ DEP Waste Hauler ID No.  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  Title  Signature  Disposal Date  10/2/12			Yes	INO	N/A							000-f		/		-	-
Vestibule  Penthouse AC-5  Name of Registered Waste Hauler  NJ DEP Waste Hauler ID No.  Newark Carting / Rovic  City, State  Newark / Riverdale, NJ  Completed by  Title  Signature  Joseph Sol / f  Cubic Yards of Waste  Cubic Yards of Waste  Cubic Yards of Waste  Cubic Yards of Waste  Disposal Date  City, State  Newburg, PA  Date	Maintenan	ice Shop	$\perp \Delta$			а	sbes	tos tile &	ması	IIC				$\rangle$	4274		-
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Newark / Riverdale, NJ  Completed by  Title  Signature  Date  10/3/12					10 K V		Dis	posal Date	4.1	City, State	3						
Completed by Title Signature Date		, NJ						12/31/12	2	Newburg	, PA						
10/2/12			Title	=				Signature	101	10			22.00				
			Presid	dent			10	1/21.	//_				10/3/	12			

Date of Notification (1)		100000	-1	Name of	Building	Owner/0	Operator	(2)		17	13.99		1	Jan pro	173
	ber 17, 2012		- 1,	Jacobus	s Pharr	naceut	ical Co	),		h 1	<b>-</b> 0200000000000000000000000000000000000			- Loren	المساء ،
Agencies Notified	Type Notification			Street A						- 7	012 D	EC 1	n n	) & d : c	
⊠ EPA	Initial	Ţ.	1	County	Road 6	683									
DEP	Amended			City, Sta		1000000				<b>5</b> 2	& .	\$1 E	1 737		
DOL	Amendment			Plainsb	oro Tov	wnship	, NJ				E	Lick	Wat	No.	MOL
<b>⋈</b> рон	Emergency (	including		Name of	Contact					Telepho			1100	140	G
DCA	Cancellation		-	Tom Sa	ntoli		540		-					И	6
				FACI	L <b>ity</b> inf	ORMAT	ION	T =	- 107 741	•					
Name of Facility Where		g Place (3	3)					Type of	Facility (4)	*					
Jacobus Pharmacei	utical Co.								nool (K-12)		V 1	0.1			
Street Address									bchapter 8 ier (i.e. pri				dings	, hom	es,
County Road 683	66 6 1							etc	.)				-		
City (5)								Square I	Feet	# of Flo	ors	E	Bldg.	\ge	
Plainsboro Townshi	p, NJ									<u> </u>					
County (6)				County C		Y)		Current	Use (Prior	9000		- 19			
Middlesex					12					Pharma	aceuti	cal			
Name of Monitoring Fire	m Hired by Building (	Owner (8)		ASCM	No.		-100000-1000000		nent Contr						
Sabre Health		100			-	F 96			roup, LL	<u>C</u>					- 0 1
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1015 Zucksville Roa	ad								WY N, S	TE 209		*			
City, State, Zip Code							100	State, Zip							
Easton, PA 18040	-	4.7			15			y Hill, N	J 08034		-			>:	
Project Manager for Mo	and the second second			Telephor				hone No.			cense N	lo.			
Brent Altemose, CII	I, CSP			866.734				759 - 50	Alexando.	007	781				
Start Date (10)	1	Schedul		mpletion I		)		of OSHA							
9/26/1				12/31/1	2				oup, LL	C.				- 52	
Occupancy Status Duri							20,000	Address							
Facility Closed/Va	cated During Entire	Period of	Abate	ment				The second desired to the second	WY N, S	TE 209					
Other - Describe:	ned Outside of Norm	al Facility	/ Hour	S			No. 28 78 75	State, Zip							
	AU TI		-105.07.	-			Cherr	y Hill, N.	J 08034						
Scope of Work (Check	All Inat Apply)	57					1								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		powered .	Renova Demoli						ontainmen Inclosure	it with Ne	gative I	Pressu	re		
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Location			Norma ed Sol				escription					-	Τ'	T	T
Asbestos-Containin TO BE A		25077	aintena					Material (A s insulatio		Amou (Spec	102.00			m	m
In Fac		Cus		Staff?	(1.0		acing, VA		11,	SF or l		em	Re	сар	nclo
(13	)		(12)	<u> </u>		other	miscella	neous)				Remova	Repair	Encapsulate	Enclosure
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Maintanan	oo Chon	V	140	IV/A		achost	oo tilo S	& mastic		900	of.	V			
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Penthous	se AC-5		X				Pipe	76		80 L	/f	$\times$			
Name of Registered Wa				NJ DEP W	aste	Cubic	c Yards	1	Name of Re	egistered	Landfill				-
	000000			Hauler ID		of Wa									
Newark Carting / Ro	OVIC	. 170		450	)9	D:	15.3		umberla	nd Coul	nty La	indfill			
City, State					sal Date		City, State	D.4							
Newark / Riverdale,	NJ	7.01					12/31/1		ewburg,	PA	-				1
Completed by		Title Presid					Signature	1///_	0			ate	^		20
Mike Cooper								10	/17/1	2		1			

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

500 to A	ls	Locatio	on V	40	Description of				ement pe	t T
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use	d Solel internantodial-S (12)	y by oek	) (i.e.	Description of tos Containing Material (ACM) thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	1
20	ZUEL	10	PM <sub>A</sub> i2	: 18						-
Penthouse AC-5	325. 0	X	0011	Print.	Fittings	8	$\rightarrow$			
TankRoom/SteamRoom	X	ICEN	CONT SINC	AN	Steam Pipe	8 l/f	$\rightarrow$			
_"_	X			U.S.	LP Condensate Pipe	70 l/f	X			-
bathroom/locker rm		X			pipe insulation	120 lf	X			-
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Date of Notification (1)				Name of	Building (	Owner/Oper	ator (2	)	P-1,	1   \ /      V	ED				
Octob	er 19, 2012	7. I	J	acobus	Pharm	aceutical	Co.				10.00		-		
Agencies Notified	Type Notification			Street Ad	dress			2012 [	DEC I	0 PM	12:	7			
EPA	Initial		_		Road 68					•	11	, ,			
DEP	Amended	3			e, Zip Co			A	SID	S 00	NTE	01			
DOL	Amendment #	ncludina				nship, NJ	J	8	HC	ENE	NC.	G 1,	4.		
DOH	justification)			Name of					rie	eohbne	Numbe	er 🚜	19		
DCA	Cancellation		T	om Sar				W	٠.						
Name of Facility Where	Abatament is Taking	Place (3	1	FACIL	ITY INFO	ORMATION		ype of Facility (	4)				-		
		i lace (5	,				-	_							
Jacobus Pharmaceu Street Address	tical Co.	200					$\dashv$	School (K-1 Subchapter		er than k	(-12)				0
9 0 000								Other (i.e. p				uild	ings,	home	s,
County Road 683						-	_	etc.) Square Feet	1 # 0	Floors		DI	dg. A	70	
City (5)							1 '	square reet	# 0	FIGUIS		ы	ug. A	ge	
Plainsboro Township	o, NJ		- 177	County C	odo (7)		-	Current Use (Pric	or if boi	na domo	lichod		2 - 1		
County (6)					SE ONLY)	)	_   '	Julient Ose (File							
Middlesex	Liliand by Duilding O	uunos (9)		ASCM	No	I N	ame of	Abatement Con		rmace	uticai				
Name of Monitoring Firm	n Hirea by Building O	wher (o)		ASCIVI	NO.	1				(3)				93	
Sabre Health							treet A	CK Group, L	LC						
Street Address									OTE	200					
1015 Zucksville Roa	d					The second secon		ngs HWY N,	SIE	209					
City, State, Zip Code								te, Zip Code	,						
Easton, PA 18040	· · · · · · · · · · · · · · · · · · ·			Talanhan	o No		nerry elepho	Hill, NJ 0803	4	Licens	o No				
Project Manager for Mor				Telephon		2000									
Brent Altemose, CIH	I, CSP	Schedule		66.734				59 - 5000 OSHA Monitor	-	00781					
Start Date (10)		Schedule		Denie za		1000			1.0						
9/26/1 Occupancy Status Durin		Only On	Mark .	12/31/1	2	111147111111111111111111111111111111111	treet A	CK Group, L	LC.				-		
						-			CTE	200					
Facility Closed/Vac	cated During Entire P led Outside of Norma	eriod of	Abatem	ent				ngs HWY N, te, Zip Code	SIE	209					
Other - Describe:	ied Outside of Norma	ar r acinty	110015						4						
Scope of Work (Check A	II That Apply)					Cr	ierry	Hill, NJ 0803	4						
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		(Common )	Renova Demolit					Full Containm Mini-Enclosure		i Negativ	ve Pres	ssur	е		
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Asbestos-Containing TO BE AE		Ma	intena	nce/	Asbes (i.e.	tos Contain thermal sys	ing Ma stems i	terial (ACM)		mount Specify		70		E	щ
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(13)	ts ts		(12)			other misc	cellane	ous)				Remova	air	Encapsulate	Enclosure
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Maintenan	so Shop	X			2	sbestos t	ر & ماز	mastic		900sf	1	X		- 52	
					a			nastio			-	$\supset$			
Bathro	oom		$\rightarrow$			-	."			500sf	-	$\rightarrow$			
Vestib	ule		X			-	."-			50sf		X,			
Penthous	e AC-5		X			Pi	ipe			30 l/f		$\times$		5	
Name of Registered Wa				J DEP W		Cubic Ya	•	Name of	Registe	red Lan	dfill				
			H	lauler ID		of Waste						EII			
Newark Carting / Ro	OVIC			450	)9		5.3	Cumber		ounty	Land	Ш			-
City, State	22.5					Disposal		City, Stat							
Newark / Riverdale,	NJ	1 700					31/12	Newburg	g, PA		Data	-	_		
Completed by	82	Title	• 6 3 6 6 6 6 6 6			Sign	ature	7/2			Date	111			
Mike Cooper		Presid	dent		112				1-06		10/19	1/12			