

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

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Date of Notification (1) 12/4/2015				Building Cersey Tu			(2)		24	115 C	ic .	0		= ()	
Agencies Notified Type Notification EPA Initial			Street Ac 581 Ma						45	BF	ro	0	AM (0: 3	3
DEP Amended Amendment #				te, Zip Coo oridge N						&E.	ICE	NS	ING	RO	L
Emergency (ir justification) DCA Cancellation	ncluding			Contact omelsdo	orf				Tele	phon	Num) J	7.0		
			FACIL	LITY INFO	RMATI	ON									
Name of Facility Where Abatement is Taking NJ Turnpike Interchange 11-Phase)						of Facility (4 School (K-1	2)	1000	78 0704				
Street Address Mile Post 91.3							×	Subchapter Other (i.e. p etc.)					ings,	home	s,
City (5) Elizabeth							Squ	are Feet	# of	Floor		BI	dg. A	ge	
County (6)				Code (7) JSE ONLY)			Curr	ent Use (Prid	or if beir	ng der	olishe	ed)			
Name of Monitoring Firm Hired by Building C Ahera Consultants	wner (8)		ASCM 0005					atement Cor							
Street Address P O Box 385						Street 205		ess e 46 West							
City, State, Zip Code Oceanville NJ								Zip Code			-				
Project Manager for Monitoring Firm John Smoyer			Telephor	ne No.		Telepi 973		No. 4244		Lice 011	se No).			
	Schedule	ed Com		Date (11)		Name	of OS	SHA Monitor above							
Occupancy Status During Abatement (Check						Street								-	-
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:						City, S	State,	Zip Code							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renovat Demoliti				>	K G	ull Containm lini-Enclosure llovebag Pro- lon-Exempte	e cedure					e	
		Locati												ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normall d Solel intenar todial S (12)	ly by nce/		tos Cont thermal surfa		Materi ns insu AT, or		(S	moun specif or Li		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											е	2
Boiler Room			X	/ <u>*</u>	Pipe	Insula	ation		1	2 LF		X		×	
Name of Registered Waste Hauler		IN	JDEP W	Vaste	Cubic	Yards		Name of	Registe	red I	ndfill				
Academy Construction		Н	auler ID 033442	No.	of Wa	ste		GROW			- arm				
City, State Totowa				9	Dispo TBD	sal Date	9	City, Star Morrisv		Α					
Completed by Zlate Geleski	Signatur	9	f sele	U/2	1	Da 12	te /4/20	015							

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

RECEIVED

Date of Notification (1)			Nama	of Duildin	~ 0	10 .			-			-	1 5	CD
12/4/2015			New	of Buildin Jersey	g Owner. Turnpik	Operato (e	r (2)		78	D	EC ,	In	Ba.	
Agencies Notified Type Notification EPA DEP Initial Amended	n		581 N	Address Main St					A Si	ES	TO	s c	an On	0:5
DOL Amendme	nt #	_		tate, Zip (dbridge						- [.16E	NS	ING	NU
DOH justification Cancellation				of Contac				T	elephon	_				
				ILITY IN		ION				<u></u>				
Name of Facility Where Abatement is Tak NJ Turnpike Interchange 8a-Phas	ing Place (3) se II)					Type of Fac	ility (4)		71.00				
Street Address Mile Post 73,7							School Subcha	apter 8 (Ot	her thar	K-1	2)			
City (5)							etc.)	i.e. private		erc	ial bu	ilding	s, hon	nes,
Janesburg							Square Feet	#	of Floor			Bldg.	Age	
County (6)			County (STATE	Code (7) USE ONL	Y)		Current Use	(Prior if be	eing der	olis	ned)		3	
Name of Monitoring Firm Hired by Building Ahera Consultants	Owner (8)		ASC 000	M No. 57		Name Acad	of Abatement lemy Const	Contracto	r (9)	-				
Street Address P O Box 385						Street	Address Route 46 W			<u></u>				
City, State, Zip Code Oceanville NJ						City, S	tate, Zip Code)		-				-
Project Manager for Monitoring Firm	oject Manager for Monitoring Firm						wa NJ 0751	2	Licer	0 N	•			
John Smoyer Start Date (10)	hn Smoyer						332 4244		0118		0.			
12/16/2015	Scheduled 12/31/20	015	pletion	Date (11))		of OSHA Mon as above	itor		-				
Occupancy Status During Abatement (Che							Address			_				
Facility Closed/Vacated During Entire Abatement Performed Outside of Nori Other – Describe:	Period of Ab mal Facility H	atem Hours	ent	54		City, St	ate, Zip Code			-		_		
Scope of Work (Check All That Apply)										_				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	promote the second	novati molitic				×	Full Contai Mini-Enclos Glovebag F	sure Procedure						
(2)	Is Lo	ocatio	n				Non-Exem	oted (*) an	d Non-I	iabl	e Pro	V0000 E	re emen	
Location of Asbestos-Containing Material (ACM)	No. Used	rmally Solely			Des	cription	of						/pe	
TO BE ABATED In Facility (13)	Maint Custoo	tenand	ce/	Asbes (i.e.	thermal surfac	aining Ma systems sing, VAT niscelland	aterial (ACM) insulation, , or eous)	(5	mount Specify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								a		late	ле
Boiler Room		Х		Pip	e fitting	S	2	9 LF		Х		х		
										_				
Name of Registered Waste Hauler		I N. II	DEP W	asta	Cubic	/ords	Tu							
Academy Construction		Hai	uler ID I	No.	of Was			of Registe WS Lan		till				
City, State Totowa					Dispos: TBD	al Date	City, S	tate sville PA		200				
Completed by Zlate Geleski	Title VP					gnature	k 9/2	126		Date	4/20	15		
	-					11/10	W JUE	W21411	'	12/	+12U	10		

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

Date of Notification (1) NOV. 30, 2015				Name of COLTS	Building (S NECK	Owner/O REFO	perator RMEI	(2) D CHU	JRCH			RE	C	= \	/F	ħ
Agencies Notified	Type Notification			Street Ac 72 HIG	dress HWAY	37 WE	ST				1	MS DEC				
DEP DOL	Amended Amendment	#			te, Zip Co S NECK		7722			19	۵	info:	100	ব্য	1 10:	94
DOH DCA	Emergency justification) Cancellation			Name of STACE	Contact EY SAV	AGE				Tele	nł	BES INAMIAM	PALE	VSII	HTF	OL
☐ BCA	Cancellation	I.			ITY INFO		ON.	11							-	
Name of Facility Where A				I AOIL	2111 1141 0	21(1117)		Туре	of Facility (4)						
Street Address 72 HIGHWAY 37 W									School (K-1 Subchapter Other (i.e. p	8 (Othe				lings,	home	es,
City (5) COLTS NECK								Squa	etc.) re Feet 0 SF	# of 2	FI	ors		ldg. A 950	ge	
County (6) MONMOUTH				County C	Code (7)		12		nt Use (Pri JRCH	or if beir	ng	emolishe	ed)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	l No.				tement Cor Touch As			oateme	ent C	orp.	, Inc	
Street Address								Addres	ss son Stre	et .	-					
City, State, Zip Code							City, S	State, Z	ip Code	NGA21152 1951W						
Drainet Manager for Mar	sitasina Firm			Telephor	no No			t Lon	g Branch	, NJ 07	_	34 ense No				
Project Manager for Mor N/A	illoring Firm							.222.8)040	's:			la la
Start Date (10)	115	Scheduled	Con	npletion [Name N/A	of OSI	HA Monitor							
Occupancy Status Durin		ck Only One)	1			Street	Addres	ss		_					
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr	Period of Al mal Facility	deten	nent			City, S	State, Z	ip Code		_					
Scope of Work (Check A	All That Apply)							_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Contract of the Contract of th	enova emolit	200000000000000000000000000000000000000			2	Mir Glo	II Containm ni-Enclosur ovebag Pro	e cedure						
-	(48)		CONTRACTOR					NO	n-Exempte	u () and	<u>1 r</u>	on-Filabi	PIO		ement	
16		3000	ocat ormal	PW .		D							Æ		ре	
Asbestos-Containing TO BE AB In Faci (13)	g Material (ACM) BATED lity	Used Mair	Sole tena	ly by		tos Cont thermal surfac		Materia s insula AT, or	ation,	(S	p€	int ify LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							_				te	, CD
Boiler R	loom	Х	•				TSI				4(LF	×			
	*									(S	-					
											-	-				
Name of Registered Wa				JDEP W		Cubic of Was	Yards		Name of			Landfill				
Finishing Touch Ast	pestos Abateme	ent Corp.,		2058	.10.	.5			TRRF		11					
City, State West Long Branch,	NJ 07764					12/16	sal Date 3/15)	City, Sta Tullyto		4					
Completed by Joseph P. Miller		Title Presi	dent			S	ig atur	e	1 Ml	h.	_	Dai 11	e /30/	15		
						1100	100	1 1			-					

State of New Jersey - Notification of Asbestos Abatement

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

										-07	63	1. 1	
Date of Notification (1)					755 5 B	Name of Building Owner/O	Operator	(2)		TOS	10		-
December 3, 2015 Agencies Notified		Noti	ification ⁻	Tuno		Street Address			_	Z.C.	707	4	_
Agencies Notified		X		al Notifi	cation	78 Graham Terrace				S C C	呈	V	
⊠ EPA		70000	Amende		Grand Property	City, State, Zip Code			_	467	Ö	, and	and it
□ DCA		12.50			ncluding	Saddle Brook, NJ 0	7663			70	6		
x DOL			justifica		loidding	Name of Contact			Tel	ohone Num	ber		
⊠ DEP			Cancel			Glenn Wisniewski		:0					
x DOH			Odilooi	100	FACILITY INF	ORMATION			_				
Name of Facility Where Abate	ement is T	aking P	lace (3)		PACIEITIN	Type of Facility (4)			_				
Residence	SINGILIS I	aning i	1000 (0)			School (K-12)							
						Subchapter 8 (other than	K-12)						- 1
Street Address						Other (i.e. private &		cial buil	din	s, homes, ef	tc.)		
78 Graham Terrace						Sq. Feet: Unknown	# of F	loors	2	Bldg. Age	<u>:</u> 50+	- year	s
<u>City (5)</u>	County	(6)			Code (7)		100		_				
Saddle Brook	Berge	en		(State L	Jse Only)	Current Use (prior if being	demolis	shed):	R	sidence			
Name of Monitoring Firm Hire	ed by Bldg	. Owner	r (8)	ASCM	No.	Name of Contractor (9)							
EnviroVision,inc						GREENWOOD ABAT	EMEN	T CO	N.S	II TANTS	S. INC.		
Street Address						Street Address				22171111	,		
Officer Address						<u>Stroser laurisos</u>							
20-21 Wagaraw Road	d. Blda	# 35E	Ē			268 MAIN STREET							
City, State, Zip Code	.,					City State, ZipCode							
Fairlawn, NJ 07410						Butler, NJ 07405				terres and			
Project Manager for Monitorin	ng Firm		ephone N			Telephone Number			Lic	ise Number			
Fred Larson		97	73-636-	9145				2	00	40			
0.1 . 1.1 . 1.0 . 1.0 . 1.00		-	11.10	I - C -	- D-1- (44)	973-492-0477			00	40			_
Scheduled Start Date (10)			cembe		n Date (11)	Name of OSHA Monitor							
December 5, 2015		De	cembe	er 0, 20	15	EMSL Inc.							
Occupancy Status During A	batemen	t (Chec	k only or	ne)		Street Address			_	-			
Facility Closed/Vacat					nent								
Abatement Performe	d Outside	of Nor	mal Faci	lity Hour	S -	1056 Stelton Road			_				
Describe						City, State, Zip Code							
Other - Describe: V	acant												
						Piscataway, NJ 088	54						
Source of Work (Check all th	at annly)												
Cource of Work (Officer all th	at apply/						Full Co	ntainm	nen	with Negati	ve Pres	sure	
≥ 3 sf or ≥ 3	lf				Renovation			Enclosi					
□≥ 160 sf or ≥					Demolition		Glovel	oag Pro	DCE	ure			
	81456					X	Non-	Exemp	tec	(*) and Nor			edure
Location of Asbestos-Contain	100000000000000000000000000000000000000		n Normal		Description of Ast	pestos Containing Material		mount	CF	Abateme	nt Type		
Material (ACM) in Facility (13		olely by aff? (12	Maint./Cu	ustodial	(ACM) (i.e. therm VAT, or other mis	al systems insulation, surfaci	ing, (S	Specify r LF)	SF	Remove	Repair E	ncap	Enclose
		ES (12	NO	NA	VAT, or other mis	oon.,	"	/					
1 st Floor				X	VAT /Linoleu	ım & Mastic x 3 Laye	rs 4	50 sf		X			
						,			_				
Name of Reg. Waste Hauler		NJE	DEP Was	te Hauler	ID#	Cubic Yards of Waste:			Na	e of Registe	ered Lar	dfill	
See Hauler Below # 1 &	2	Se	e Below	/			5		Me	adowfill L	andfill		
Hauler #1) Greenwood	Abatem	ent C	onsulta	nts. Inc	Butler, NJ 0	7405	Disposa	al Date	2		ity, State		
NJ DEP # 12				,	,		Dece	mbei	6	10,000	oute 2, E		
Hauler #2) Newark Car		. – New	vark. N.I	04509.	NJ DEP # 19551		2015				ridgepor 04-842-2		•
, , , , , , , , , , , , ,	- 51	-00	, . 10	,									
Completed by (Print or Type)	1	Title				Signature			Da	The same of the sa	- Ballanen	447)	
Marin Graure		SEN	IIOR P	ROJEC	T	Marin Gra	1100		D€	cember :	3, 201	5	
		MAN	NAGER	3		march gra	ure						

Greenwood Project No. 2015-542

MO 23028764657

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

RECEIVED

												4 Pm	1.1		
Date of Notification (1) 11/16/15					Building			r (2)	2	115 DE(In	RM ti	2. 6		
Agencies Notified	Type Notification			Street A						-		arı it	j. 9	3	
X EPA	× Initial			81 Mo	untain A	Ave.			A	SEEST	DSC	THIN	~ -		
× EPA × DEP × DOL	Amended Amendment	#			te, Zip Co					SBES:	DEN	ING	RU		
ĭ DOH	Emergency justification)				Contact						one Nu				
X DCA	Cancellation			F401	LID/INE	ODMAT	ON								
Name of Facility Where	Abatement is Takin	g Place (3))	FACI	LITY INF	ORIVIATI	ON	Type	of Facility (4)					
Joe Extreme Demo		9 1 1000 (0)							School (K-1						
Street Address								Ħ	Subchapter	8 (Other					
81 Mountain Ave.								×	Other (i.e. petc.)	orivate & c	mmerc	ial buil	dings	, hom	es,
City (5)								Squa	are Feet	# of F	ors	E	Bldg. /	Age	
Millburn									y						
County (6) Essex County					Code (7) USE ONLY)		Curr	ent Use (Pri	or if being	demolis	hed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name	e of Ab	atement Cor	ntractor (9	W-1-2-1-1-1				
	2000 0000	ER SENTIN					Pro	Abat	ement						
Street Address							700000	t Addre 9 87tl	ess h Street S	uite A4					
City, State, Zip Code								Zip Code							
						0.0000000000000000000000000000000000000		rgen, NJ (7047						
Project Manager for Mor	nitoring Firm		Telepho	ne No.		100000000000000000000000000000000000000	hone N	No. 6305	01 (6	cense I	No.				
Start Date (10)		Schedule	d Cor	noletion	Date (11)				SHA Monitor		1223		-		
12/02/15	19	12/12/1	5	p.odo	outo (1.1)		0.800.33		M CONSU	JLTING	.LC				
Occupancy Status Durin	g Abatement (Chec	k Only On	e)					t Addre	ess UTE EAS	T CLUT	107				
Facility Closed/Vac Abatement Perform	ated During Entire	Period of A nal Facility	baten	nent s					Zip Code		107				
Other - Describe:							100000000000000000000000000000000000000		J 07083						
Scope of Work (Check A	II That Apply)						9_								
≥3 sf or ≥3 lf			enova						ull Containm		gative	Pressu	ire		
≥160 sf or ≥260 lf		Пр	emolit	tion			Ė	171	ini-Enclosur lovebag Pro						
									on-Exempte	d (*) and I	on-Fria	ble Pro	cedu	re	
			Locat											emen ype	t
Location Asbestos-Containing			lormal d Sole		A = h = =		scriptio		-1 (A ONA)	۸	unt		Т	Ī	Т
TO BE AB		100000000000000000000000000000000000000	ntena	nce/ Staff?	(i.e.	thermal	system	ns insu	al (ACM) lation,	(Sp	(E12) (E12)	_Z	77	Enc	Ē
In Facil (13)	*	Cust	(12)	Stall?			cing, V		,	SF c	LF)	Removal	Repair	Encapsulate	Enclosure
(15)				T		Ou lei i	Illocella	lileous	' I			val	=	ılate	ure
		Yes	No	N/A			0: 1:			4.00		-	-		-
Exteri	or					Siding]		1,00	SF	x				
										_		_	_		
Name of Registered Was	ste Hauler			JDEP W	laste	Cubio	Yards		Name of	Registere	l andfi				
SAN TON SERVICE			H	lauler ID		of Wa			The Contract of the Contract o	WLANC			/IISI/	N	
		2	2430		Die	col Det	2				, OIVIII		21.4		
City, State KENILWORTH, NJ					Dispo	sal Date	5	City, Stat							
Completed by		Title	VOCANCE -			1 8	Signatur	P/1/01	1 Parts	a a	200	ate			
Bryan Parra		ct Ma	anager			M)	1441	TRULL	Į.	1	1/16/	15			



Energency

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

CK 52.52

Date of Notification (1) 12/7/15					Building Ow Arozek p										
Agencies Notified Typ EPA DEP	lnitial Amended		1		dress vn Ave e, Zip Code						ASBE	2015 D		7	
DOL	Amendment # Emergency (ir justification)		_ la	avallett ame of 0	e NJ 087 Contact					Teleph	- C	DEC nber			
DOH DCA	Cancellation		В	Brando		88 A TI	ON			1	50	20		-	_
Name of Facility Where Abate Arthur Mrozek private h		Place (3)		FACIL	ITY INFOR	IWA II	ON	S	f Facility (4 chool (K-12 ubchapter	2) 8 (Other t	ON TRE	2)	; ,		
Street Address 12 Brown Ave								X O	ther (i.e. pr	rivate & c	merci	al build	ings, I		5,
City (5) lavallette NJ 08735	79				1 (7)			700	t Use (Prio	1		35	5+		
County (6) Ocean				County C	ode (7) SE ONLY)				ched Ga	and the state of t	(siliolis	neu)			
Name of Monitoring Firm Hire N/A	ed by Building O	wner (8)		ASCM	No.			of Abate aco In	ement Con	tractor (9)					
Street Address								Address Box 32							
City, State, Zip Code					10			state, Zir t Berlir	Code NJ 080	91					
Project Manager for Monitori		Ī	elephor	e No.			none No 753-98		100	ense 1 727	No.				
Start Date (10) 12/8/15	Scheduled		pletion [Date (11)		Name		A Monitor							
Occupancy Status During Al	batement (Check	Only One)				Street	Addres	S						
Facility Closed/Vacated Abatement Performed Other – Describe:	d During Entire P Outside of Norm	eriod of Al al Facility	oatem Hours	ent		_	City, S	State, Zi	p Code						
Scope of Work (Check All TI ≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf	hat Apply)		enovat emoliti	30 Tol 40				✓ Min	Containm	е	Jative	Pressu	re		
									vebag Pro		n-Fria	ble Pro	cedur	е	
		Is	Locatio	on										ement rpe	
Location of Asbestos-Containing Me TO BE ABATE In Facility (13)	aterial (ACM)	Used Mai	ormall d Solel ntenar odial S (12)	ly by nce/		os Co therma surf	escriptio ntaining al systen facing, Va miscella	Material ns insula AT, or		(Sp	unt ify LF)	Removal	Repair	Encapsulate	Enclosure
Exterior Sid	ina	100		X		Ext	erior S	iding		700	SF	x			
Exterior ord															
-															
									I Mana of	Register	Lond	611	_		
Name of Registered Waste United Containers	Hauler		Н	IJDEP W lauler ID 2459		7.5333635	ic Yards /aste		G.R.O.		Land				
City, State Elm NJ							osal Dat	е	City, Sta Morris	te ville PA	9067				
Completed by Anthony T Perna		Title Presi	dent				Signatu	FE	7			Date 12/7/1	5		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Check#2368 (Pursuant to NJAC 8:60 and 5:16)

MAY 11

Sept.	Date of Notification (1)			N	lame of	f Building C	wner/O	perator (2)							
Sept.	12/07/	15		Jo	ohn Bi	las										
South Description Descri	Agencies Notified Type Notificat	ion		5	Street A	ddress			/			7.		-		
Amendment # DRAS Canada Ca	☐ EPA 🔀 Initial			5	14 Bri	nlev Aver	nne					-	~	2		
Amendment # DRAS Canada Ca	□ Amended □ Amended											U	-	2	أنائح	
Trivate notices Street Address 134 Britley Avenue County (6) Mommouth Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Centractor (9) Gr Tech LLC City, State, Zip Code Wayne, N) 07470 To Ba ABABED In Feditity (13) Asbestos-Containing Material (ACM) In Sache Abatement Abbestos-Containing Material (ACM) In Sache Abatement Asbestos-Containing Material (ACM) In Sache Abatement Asbestos-Containing Material (ACM) In Sache Abatement Asbestos-Containing Material (ACM) In Sache Abatement Abatement Potomacounts Asbestos-Containing Material (ACM) In Sache Abatement Asbestos-Contai	□ DHSS Amendment	nt #	_		2000			0						2	-	
Trivate notices Street Address 134 Britley Avenue County (6) Mommouth Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Centractor (9) Gr Tech LLC City, State, Zip Code Wayne, N) 07470 To Ba ABABED In Feditity (13) Asbestos-Containing Material (ACM) In Sache Abatement Abbestos-Containing Material (ACM) In Sache Abatement Asbestos-Containing Material (ACM) In Sache Abatement Asbestos-Containing Material (ACM) In Sache Abatement Asbestos-Containing Material (ACM) In Sache Abatement Abatement Potomacounts Asbestos-Containing Material (ACM) In Sache Abatement Asbestos-Contai			ing	- Limit			NJ 0/12	0			Telenhone	Jumphor		-	-	7
Trivate notices Street Address 134 Britley Avenue County (6) Mommouth Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Centractor (9) Gr Tech LLC City, State, Zip Code Wayne, N) 07470 To Ba ABABED In Feditity (13) Asbestos-Containing Material (ACM) In Sache Abatement Abbestos-Containing Material (ACM) In Sache Abatement Asbestos-Containing Material (ACM) In Sache Abatement Asbestos-Containing Material (ACM) In Sache Abatement Asbestos-Containing Material (ACM) In Sache Abatement Abatement Potomacounts Asbestos-Containing Material (ACM) In Sache Abatement Asbestos-Contai											No seminario de la constitución	1	1		T	7
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Street Address 14 Brintley Avenue Square Feet Fef Floo Square Feet Feet Square Feet Feet Square Feet	Private house											.				-
County Code (7) (STATE USE ONLY) Current Use (Prior if being of molished)	Street Address			-					Su	bchapter 8	(Other than	(-1 2) a	Õ			
Square Feet	514 Dainlass Assessed										ivate and or	minercia	- CIII	ılıyə,		
Street Address Street Addres				-						05 50	# of Floo		Bldd	a. Age		
Country (6) Country (6) Country Code (7) (STATE USE ONLY) Current Use (Prior if being d molished) Monmouth										7						
Mommouth Name of Monitoring Firm Hired by Building Owner (\$)			-		County	Codo (7) (C	TATE //C	E ONI VI	Curro	nt liea (Dri	ar if heina d	molishe	(d)			\neg
Name of Monitoring Firm Hired by Building Dwner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address S76 Valley Rd #283 City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. Uclease Wayne, NJ 07470 Telephone No. Telephone No. Uclease Wayne, NJ 07470 Telephone No. Telephone No. Uclease Wayne, NJ 07470 Telephone No. Uclease Wayne,	County (6)				County	Coue (1) (3	IAIL 03	SL ONLI)	Curre	111 030 (1 11)	or in boning o	1110110110	,			
Gr Tech LLC	Monmouth									(0)						
Street Address City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Telephone No. Telephone Mo. Telephone No. Telephone Mo. Te	Name of Monitoring Firm Hired by Build	ling Own	er (8)) A	SCM N	lo.	Name o	f Abateme	ent Cor	itractor (9)						
Steel variety Steel variet						(Gr Tech	1 LLC								
City, State, Zip Code	Street Address						Street A	ddress								
Project Manager for Monitoring Firm						1	576 Va	lley Rd#	283							
Wayne, NJ 07470 Telephone No. Telephone	City, State, Zip Code						City, Sta	ate, Zip C	ode							
Telephone No. Telephone No. Telephone No. 973-638-1777 01127						,	Wavne	NJ 074	70							
Start Date (10)	Project Manager for Monitoring Firm			Teler	phone N		-		-		License	0.				
Start Date (10) 12 / 17 / 15 Scheduled Completion Date (11) 12 / 18 / 15 Envirovision Consultants, Inc Cocupancy Status During Abatement (Check only one) Street Address	Troject manager to memoring tuni	ect Manager for Monitoring Firm									01127					
12	Chart Date (10)	Sahadula	1000	mnlet	ion Dat				Annitor		01127			_		
Occupancy Status During Abatement (Check only one) Assignment Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM- PM PM AM PM AM PM Clean up and decontamination with result in Containment with Negative Pressure Ire Incompleted By (Print or Type) Street Address				100		15										
Second Pack Closed Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM- PM PM AM AM PM PM AM AM PM PM AM AM					_ ′ -			The second secon	onsulta	ints,Inc						_
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM- PM/ PM AM					-		Street A	Address								
Time of Abatement: AM- PM PM AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (Check all that apply) Sas of or >3 if Full Containment with Negative Press In It It Containment with Negative Press In It It It Non-Exempted (*) and Non-Friable Press In It It Non-Exempted (*) and Non-Friable Press In It It Non-Exempted (*) and Non-Friable Press In It It It Non-Exempted (*) and Non-Friable Press In It It It Non-Exempted (*) and Non-Friable Press In It	[1] [2] [2] [1] [1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2									, Bldg .# 3	35E					
Scope of Work (Check all that apply) Scope of Work (Check all that apply)	AM-	ormal Fa	cility	Hours	s - Des	oribe A & &	City, St	ate, Zip C	ode							
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Satisfies of the second containing Material (ACM) Substitute Sub	Scope of Work (Check all that apply)												oressi	ıre		
Second Demolition Second Tent with Non-Exempted (*) and Non-Friable P Second Seco	₩ > 2 of or > 2 lf	\sim	7 Don	oveti	20		Н	Mini-En	closure							
Non-Exempted (*) and Non-Friable P Seconds	> 160 sf or > 260 lf						\forall	Gloveba	a Proc	edure 🗌	Tent with N	gative F	Pressi	ure		
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Basement Description of Asbestos Containing Material (ACM) Maintenance / Custodial Staff? (12) Yes No N/A								Non-Exe	empted	(*) and No	n-Friable P	cedure				
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Waintenance/ Custodial Staff? (12) Yes No N/A Pipe insulation Name of Registered Waste Hauler Gr Tech LLC City, State Wayne, NJ 07470 Completed By (Print or Type) N.Jevtic 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) 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) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SiF or F) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SiF or F) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SiF or F) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SiF or F) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SiF or F) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SiF or F) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SiF or F) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SiF or F) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SiF or F) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SiF or F) Asbestos Containing Material (ACM) (i.e., thermal systems insulation (i.e., thermal systems insulation IS LF Disposal Date SiF or F			Is	Locat	ion								Aba	iteme	nt Ty	ре
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Sunating (12) Sunating (NAT, 0) Other miscellaneous Other		1)				Asbes	stos Con	taining Ma	aterial	(ACM)			em	ер	nca	nclo
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Yes No N/A				(12)									<u>n</u>		late	e e
Basement		,	Yes	No	N/A											1
Name of Registered Waste Hauler Output Output Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Lanc Output Output TR.R.F. Inc Output	D	I	7	П		Ding ingu	lation				15 I F		X	П	П	П
Name of Registered Waste Hauler Output Outpu	Basement		_	_		Pipe insu	Hation				13 LF				=	
Name of Registered Waste Hauler Output Outpu		L		Ш	Ш	1									Ш	Ш
Name of Registered Waste Hauler Output Outpu		I	7	П	П											
Name of Registered Waste Hauler Output Outpu		-	_				11-11-25						П			
Gr Tech LLC City, State Wayne, NJ 07470 Completed By (Print or Type) N.Jevtic ASB-41 Disposal Date City, State TBD T.R.R.F. Inc City, State TBD Tullytown, PA Signature Lewic Wenad Date 12/07/2015						11 15 11				(D	-1	11	ш	ш		ш
City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) N.Jevtic N.Jevtic Owner TBD Tullytown, PA Date 12/07/2015	Name of Registered Waste Hauler			NJ.	UEP Wasti	e Hauler ID No.	Cubic Y	ards of VVa	sie Na	me of Regi	stereo Lanc					
Wayne, NJ 07470 Completed By (Print or Type) N.Jevtic N.Jevtic ASB-41 TBD Tullytown, PA Signature Peutic Wenad 12/07/2015	Gr Tech LLC			(003378	35	TB	D	T.F	R.R.F. Inc						
Completed By (Print or Type) N.Jevtic ASB-41 Signature Signature Jewic Wenad 12/07/2015							Dispos	al Date	Cit	y, State						
Completed By (Print or Type) N.Jevtic ASB-41 Signature Signature Jewic Wenad 12/07/2015	Wayne NI 07470						TR	BD	Tul	llytown. P	A					
N.Jevtic Owner Jewic Wenad 12/07/2015 ASB-41		Title	-					STREET, STREET	1			Dat	e			
ASB-41		-1.00000						3	# 1			1 500		115		
# Do not one this form for achastan licensure exempted activities		Owne	er						//ew	- wen	na		0.7720	113	_	_
	ASB-41 MAY 11	n p)o no	i use i	this for	n for asbes	aos licen	isure exen	v npted a	ctivities.						

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

Date of Notification (1)				Building C			(2)			9810	- i-		14	E
Agencies Notified Type Notification] EPA Initial		3		ringfield		ıe				2015 ASR	JEC .	10	PH	1: ;
DEP Amended Amendment # Emergency (in				e, Zip Coo t, NJ 079						ASB,	LIE	S CEN	GNI	RO
DOH justification) DCA Cancellation	oluuliig		ame of fark Y	Contact eager					Tel	ephone Ni	nber	-146	MG	
Name of Facility Where Abatement is Taking	Place (3)		FACIL	ITY INFO	RMATIC	N	Туре о	f Facility (4	1)					
Residential Building Street Address 29 EVCLID AVE							S	chool (K-12 ubchapter ther (i.e. pr c.)	8 (Oth			ldings	, home	es,
City (5) Summit							Square		# 0	f Floors		3ldg.	Age	
County (6) Union County		C (S	ounty C	ode (7) SE ONLY)				t Use (Pric			ned)			
Name of Monitoring Firm Hired by Building Ov EDI	vner (8)		ASCM 0095	No.			of Abate	ement Con pany, Inc	tractor	Maria Disease				
Street Address 5434 King Avenue	1					Street	Address							
City, State, Zip Code Pennsauken, NJ 08109						City, S	State, Zipon, NJ	Code						
Project Manager for Monitoring Firm Tom Pruno	ect Manager for Monitoring Firm					Teleph	none No			License	10.			
Start Date (10)	Scheduled	Comp	oletion D		,	Name		A Monitor		00704			-	
N2 02 2015 Occupancy Status During Abatement (Check	Only One	05 (COL	>			Address	any, Inc			in the second			
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	eriod of At I Facility I	oateme Hours	ent		_	City, S	State, Zip	Code	·				-	
Scope of Work (Check All That Apply) 2 ≥3 sf or ≥3 lf							7							
≥3 \$1 or ≥3 X ≥160 \$f or ≥260 f	-	enovati emolitio				XXX	Mini Glov	Containme -Enclosure /ebag Prod -Exempted	e edure				ıre	
Location of		_ocatio							1/2/			Aba	tement ype	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Used Mair	Solely ntenand odial St (12)	by be/	Asbest (i.e.	es Conta thermal surfac	system cing, VA	Material s insulat AT, or	(ACM) lion,	(-	Amount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	Yes	No	N/A		other m	niscellar	neous)				oval	air	sulate	sure
KITCHEN			×		FU	OOR	17	LE	50	00 S	-			
BASEMENT			X	719	Ϋ́C Ι	NS.	XAT	101)		6 L				
Name of Registered Waste Hauler			DEP W		Cubic of Was					ered Land				
Newark Carting, Inc City, State			409			al Date		City, State			Officer 1000			
Newark, NJ	770						_1	Bethleh		PA /				<u> </u>
Completed by Marek Wasiak	Title Vice-F	Presid	lent		S	ignatur.	Ch	1 h	al	N	ate 2	DI /	105	.5



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

700			(Pu	ırsuant t	o NJAC 8	:60 and	12:120)			F	-	00	- / +	2	
Date of Notification (1) 11/25/2014					Building C Burlingto			(2)			2015 L	_	- E	- 1 7	E	D
Agencies Notified	Type Notification		1738	Street Ac		20110					CB 19 F	:C	10	P	1 1:	27
EPA DEP	X Initial Amended				cust Ave		a.Co., 15-				ASSE & ephone N	T	DC.	00		-1
X DEP X DOL	Amendment				ton, NJ						&	1	CFA		YTR	OL
X DOH X DCA	Emergency (justification) Cancellation	including	100	Name of Mr. Jim	Contact Countr	yman				Tele	ephone f	ımı	per	918	G	
Name of Facility Where	A h = 1 = = = = 1 = T = 1 : = = = = = = = = = = = = = = = = =	- DI (0	,	FACIL	ITY INFO	RMATI	NC	_		4						
Burlington High Sch		g Place (3)					×	se of Facility (4 School (K-1)							
Street Address 100 Blue Devil Way	,								Subchapter Other (i.e. p	8 (Othe				ings,	home	es,
City (5) Burlington								Squ	uare Feet	# 01	Floors		В	dg. A	ge	
County (6) Burlington				County C	Code (7) ISE ONLY)		_		rrent Use (Pric	or if bei	ng demc	she	ed)			
Name of Monitoring Firm AHERA Consultant		Owner (8)		ASCM 0057					batement Con mpany, Inc		(9)					
Street Address PO Box 385			A.				Street 208		ress get Avenue				-			
City, State, Zip Code Oceanville, NJ 082	31								Zip Code NJ 07011							
Project Manager for Mor John Smoyer	nitoring Firm	Ø.		Telephor 609-65	ne No. 52-1833		Teleph 973-		No. -8828		Licens 00704	No	•			
Start Date (10) 12/23/2015		Schedule 12/30/2		npletion [Date (11)				SHA Monitor empany, Inc).						
Occupancy Status Durin	g Abatement (Chec	k Only Or	ne)				Street	Add	ress			Opposite the same of the same				
× Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr	Period of A	Abatem / Hours	nent S		_	City, S	State	, Zip Code			-				
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)		Renova Demolit						Full Containme Mini-Enclosure Glovebag Prod Non-Exempte	e cedure	· · · · · · · · · · · · · · · · · · ·				e	
90			Locati									Ì	1	Abate Ty	ement pe	i .
Locatio Asbestos-Containing <u>TO BE AB</u> In Faci (13)	Material (ACM) ATED , lity	Use Ma	ed Sole iintena todial S (12)	ely by nce/	Asbes (i.e.	tos Cont thermal surfa	scription taining f system cing, VA niscella	Mate is ins AT, o	r	(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A											ਰ	
Metal S	Shop		X			Pip	e fittir	ngs		3	80 EA		х		*	
Name of Registered Wa	ste Hauler	,	l n	NJDEP W	Jaste	Cubio	Yards		Name of	Pagist.	ered Lan	fill				
Freehold Cartage, I				Hauler ID 5939		of Wa			Wester							
City, State Freehold, NJ						Dispo	sal Date	3	City, Stat Birdsbo		Α					
Completed by Voytek Roszkowski		Title Pres	ident				Signatur	e	Oskre	E)l	,	Dat 11		2015		

Cx \$ 499P

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

Date of Notification (1)	2/8/15			Name	of Building	g Owi	ner/Operator	(2) Ahn		88		15.0		U Ti
Agencies Notified	Type Notifica	ition	\dashv	Street	Address			***************************************		-U	5	38	- (7
□ ₽A	Initial Amended						630 Pri	inceton - Kir	igston Rd	00		6	- 4	7
DEP DOL	Amendme	ent#	_	City, S	tate, Zip C	ode	Dr	inceton, NJ (08540	ENS		-0		6
⊠ DOH	Emergence justificati	cy (including on)	}	Name	of Contac	t	11.	meeton, 143	Telephone					-
□ DCA	Cancellati	ion					n Ahn	· · · · · · · · · · · · · · · · · · ·		, 4	79-	244	4	-
				FAC	ILITY INF	ORM	ATION				10	•	9	
Name of Facility Where								Type of Facility						
Street Address	K	Residenti	aı					☐ School (K-1		K-12))			
Officer Address	630 Prince	eton - Ki	ngsto	on Rd				Other (i.e.,) homes, etc		nercia	I build	dings,		
City (5)		D = 1						Square Feet	# of Floc	S	Ble	dg. A	70	
	Pr	inceton,	NJ	T 0	. 0 . 1 . /	7) (0	TATE	2400	2	malia		70	+/-	_
County (6)	Mercer .				nty Code (7 ONLY)	/) (5	IAIE	Current Use (F	rior if being c	molis	nea)			
Name of Monitoring Firm		ding Owner	_	ASCM	No.	Nar		nent Contractor (_
(8)	MECS					_		ens Environ	mental Se	vice	s, In	ıc.		_
Street Address	PO Box	3/11				Stre	eet Address	PO	Box 322					
City, State, Zip Code	City, State, Zip Code						, State, Zip C		DOX JZZ					
	Crosswicks, NJ						27. 17 12	Allentow	n, NJ 08:	21				
	Project Manager for Monitoring Firm Bill Weisgarber						ephone No. (609) 25	0.0600	License		0493	2	0-10-01	
Start Date (10)		Scheduled (8-4070 te (11)	- Nar	ne of OSHA I				U 4 7.			_
12/23/15)		2/31		(11)	140	110 01 001 111		vironment	.1				_
Occupancy Status Duri	ng Abatement	(Check only	one)			Str	eet Address	4 D 1	1 D1					
Facility Closed/Vaca Abatement Performe						Cib	, State, Zip C		eley Plac					_
Other - Describe:	ed Outside of IV	Olitiai i aciii	ty i lou			City	r, State, ZIP C		d, NJ 077	8				_
Scope of Work (Check	all that apply)						□ Full Cor	ntainment with N	egative Press	ire				
≥3 sf or ≥3 lf			enovat				☐ Mini-En	closure	-ga	0.3				
≥160 sf or ≥260 lf			emolitio	on .			Non-Ex	ag Procedure empted (*) and N	lon-Friable P	cedur	e			
			Location Location Location								P	Abate Typ		
Location Asbestos-Containing		Use	d Sole	ly by	Achee		Description of ontaining Ma		Amour		-			
TO BE ABA	TED	0	ustodi Staff?	al		then	mal systems	insulation,	(Specif		Re	Z.	Enca	Enc
IN Facilit (13)	ty		(12)				rfacing, VAT er miscellane		SFOLL	10	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							=		ate	e.
Crawl S			Th	erm	al Pipe In	sulation	80 lf		×					
		_									_			
Name of Registered Wa	aste Hauler			NJDEP '	Waste	Cu	bic Yards	Name of Rec	gistered Lanc	<u> </u>				
Stevens Environ		vices. In	- 11	Hauler II			Naste 2 CU	/ Marrie or ries	GROW		dfill			
City, State		10.			posal Date	City, State	7					_		
Completed By	Allentow						2/31/15, Signature	47/	Morris	ille,	PΑ			_
	Completed By Mahlon E. Stevens Title Project Ma										12/8	8/15		

ASB-41

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

Cx#25000

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

Date of Notification (1)	1014 =			Name	of Buildin	g Owner/Operator							
	2/8/15					CI	nambers Prop	perties	D	_	2 5		_
Agencies Notified EPA	Type Notification Initial	1		Street	Address		20 Nassau St	reet	25		S DEC		WANT TO
□ DEP	Amended Amendment	#		City, S	tate, Zip C		: NII (00542	5	¥	-	(()
⊠ DOH	Emergency (i	including	ī	Niema	-f Ct		inceton, NJ (TO)	0	_	¥ 4
DCA DCA	Cancellation			Name	of Contac	t remiah Obert		Telephone	damh	ar 			
The state of the s	Open A			EAC		ORMATION				1	_		
Name of Facility Where	Ahatement is Takir	no Place	(3)	FAC	ALII T INF	ORMATION	Type of Facility	/ (4)	0-	<u></u>	100		السا
Traine or Facility Trillies		ail Sto					School (K-1	2011/2019	7.	2	CO		
Street Address							Subchapter Other (i.e.,	8 (Other tha	K-12)	مائديما ا	dia		
	20 Nas	ssau S	treet				homes, etc		iercia	Dulk	illigs,		
City (5)		0 0					Square Feet	# of Floo	3	BI	dg. A		
	Princ	eton,	NJ	T 6			20000	4			85-	- /-	_
County (6)	/Iercer				ONLY)	7) (STATE	Current Use (F	rior if being c	molisi	nea)			
Name of Monitoring Firm	Hired by Building	Owner	_	ASCM	No.		nent Contractor (53					
(8)	MECS						ens Environ	mental Se	vice	s, In	c.		
Street Address	DO D 2/	11				Street Address	DO 1	D 222					
City, State, Zip Code	PO Box 34	+1				City, State, Zip C		Box 322					_
City, State, Zip Code	Crosswicks,	NJ				City, State, Zip C		n, NJ 085)1				
Project Manager for Mo			100000000000000000000000000000000000000	ephone		Telephone No.		License			200		
	eisgarber			_	8-4070		59-9688		0)493	3		_
Start Date (10) 12/19/15	Sche	eduled C	omple 1/31/		te (11)	Name of OSHA		vironment	1				
Occupancy Status Durin	ng Abatement (Cho			10		Street Address	DD Dir	Hommont	_				_
☐ Facility Closed/Vaca				ement			4 Berk	eley Place					
Abatement Performe		al Facilit	y Hou	rs		City, State, Zip C			0.0				
Other - Describe:							Freehole	d, NJ 077	8				_
Scope of Work (Check	all that apply)					☐ Full Co	ntainment with Ne	egative Press	re				
≥3 sf or ≥3 lf ≥160 sf or >260 lf			enovat emolitic			Mini-En	closure ag Procedure	•					
		Пре	THOILIC)		Non-Ex	empted (*) and N	on-Friable Pr	cedur	е			
			Locati							P	bater Typ		
Location		Used	Sole	ly by	5V: 00 00	Description o					1 1 1		
Asbestos-Containing TO BE ABA			ntenar ustodi:			tos Containing Ma thermal systems		Amoun (Specif		<u>ت</u>		E	Ш
IN Facility		,	Staff? (12)		(surfacing, VAT	, or	SF or LF		Remova	Repair	aps	Enclosure
(13)			2 2			other miscellane	ous)			val	=	Encapsulate	ure
D 10 '	D-1'	Yes	No	N/A	mi	1n: T	a1.a.t.'	A = 10		100			
Red Onion		-	×	-		ermal Pipe In		45 lf	_	X			
Basem	ent	. ×		-	11	nermal Pipe Ir	isuiation	10 11	_	×			*:
				-				-			\vdash	\dashv	
Name of Registered Wa	ste Hauler	-	1	JDEP \	Vaste	Cubic Yards	Name of Rec	istered Land					
Stevens Environ		es Inc	1	Hauler ID		of Waste 2 CU		GROWS	Lan	dfill			
City, State	III DEI VIC	00, 1110	·- .	102	272	Disposal Date	City, State	/		4111			=
	Allentown,	NJ				1/31/16		Morrisy	ille,	PA			
Completed By	Tit	le		0000000		Signature	1/		te				_
Mahlon E. St	evens	P	rojec	t Mar	nager	_ ////				12/8	3/15		_
ASB-41 MAR 00	*	Do not u	ise thi	s form	for asbest	os licensure exer	npted activities.						

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

Date of Notification (1)			Name	of Building C	Owner/Operator (2	2)						
12 /7 /	15		Pat	erson Boa	rd of Educatio	n/ Job #1511-4	967 Chec	#779	5			
Agencies Notified Type Notification	tion		Street	Address								
			201	Memorial	Drive			D	6	200	10.00	
☑ DOLWD ☐ Amended			City, S	tate, Zip Coo	de			5			والمرامي والمرامي	
□ DHSS			Pate	erson, NJ (07501			50 LL	1	DEC	1"	
DCA Emergence (NJAC 5:23-8) Emergence justification		3		of Contact			Telephone	Tumbe		5		-
(NSAC 5.23-6)	1		Edv	vard Schla	ffer			TITE OF		0	2	1 2
					ORMATION			ASC.	7	PH	10	=
Name of Facility Where Abatement is Ta	okina Dlace	(3)	FAC	JILIT INFO	ORMATION	Type of Facility (' (4)	Z Z	2		-	
[2] 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	aking Place	; (3)				M School /K-12	١	0-	-1	••		O
East Side High School						Subchapter 8	(Other than	(-12)	2			
Street Address						Other (i.e., pr	ivate and co	ımerci	al bu	ildings	, ,	
150 Park Avenue						homes, etc.) Square Feet	# of Floor	-	Ric	g. Ag		
City (5)						Square reet	# 0111001		Dic	ıy. Ay	C	
Paterson, NJ 07501			10	. 0 1 77/0	TATE LIGE ONLY	Current Use (Pri	as if bains de	naliaha	24/			
County (6)			Coun	ity Code (7)(S	STATE USE ONLY)		. 159	HOUSTIE	eu)			
Passaic		I	10011			High Schoo	l .					
Name of Monitoring Firm Hired by Build	ing Owner	(8)	ASCM	No.		ent Contractor (9)						
Omega Environmental					AbateTech, Ir	nc.						_
Street Address				8	Street Address							
280 Huyler Street					30 Maple Ave							
City, State, Zip Code				0	City, State, Zip Co							
South Hackensack, NJ 07606					Lumberton, N	NJ 08048						
Project Manager for Monitoring Firm			phone I		Telephone No.	G.	License N).				
Geiser Fajardo			1-489		609-265-2107		00529					
A CONTROL OF THE PARTY OF THE P	cheduled C				Name of OSHA M							
12 /24 /15	12		_ / _	15	EMSL Analyti	ical						
Occupancy Status During Abatement (C				5	Street Address	2000000						
☐ Facility Closed/Vacated During Entire				. L	200 Route 13	27-110-100-200-200-200-200-200-200-200-200						
Abatement Performed Outside of No Time of Abatement:AM	rmal Facili		s - Des	2011 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	City, State, Zip Co							
WOYKING INTO SATURACY AT Scope of Work (Check all that apply)	d Suna	au		/ divi	Cinnaminson	i, NJ 08077						
Scope of Work (Check all that apply)		J			□ Full Conf	tainment with Neg	ativo Proces					
☐ >3 sf or >3 lf	⊠ Re	enovati	on		☐ Mini-Enc		Jauve Flessi	C				
⊠ ≥160 sf or ≥260 lf	D	emolitic	n		Glovebag	g Procedure						
		v			⊠ Non-Exe	mpted (*) and No	n-Friable Pro	edure	_			
and the second of the second o		s Locat Norma							Ab	ateme		/pe
Location of Asbestos-Containing Material (ACM)	114	ed Sole		Ashesto	Description of os Containing Ma		Amour		Rer	Repair	Enc	Enc
TO BE ABATED	Ma	aintena			thermal systems	insulation,	(Specir	(4)	Removal	oair	caps	Enclosure
IN Facility	Cus	todial (12)	Stan?		surfacing, VAT other miscellane		SF or L)	<u>a</u>		Encapsulate	ure
(13)	Yes	No	N/A		other miscellane	ous)					te	
Room #204					yer Floor Tile	& Mastic on	889 S					
Room #213				Single La	yer Floor Tile	& Mastic on	743 S			П	П	П
100m #210				Concrete				-				$\overline{\Box}$
		╁						-	듬			
Name of Degistered Wests Usuar			JDEP \	Masta	Cubic Yards of	Name of Regis	tered Landfi		ш			Ц
Name of Registered Waste Hauler AbateTech, Inc.		100	lauler II	2000	Naste	G.R.O.W.S						
attendants one son to constate Post and the Post			18750		32 Disposal Date	City, State		_				
City, State		*			12/29/15	Tullytown,	PA					
Completed By (Print or Type)	Title		O '	!nata:	Signature	TIME		Date	71	71	10	5
Gwendolyn Trumbetti	Operat	ions (coord	iliator	(1111			4	11	1 -	/

ASB-41 MAY 11

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