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31 / 5 / / / /						833-455-662 Name of OSHA N		or.	02007				
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Project Manager for Monitoring F					1	City, State, Zip Code		*****	-		**	
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Street Address							Street Address						
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2000 <b>**</b> ********************************							Paterson, NJ 07	503					
Project Manager for Monitoring Firm	1		Phone Num	nbe	er		Telephone Number	303	License	Numi	ber		
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Occupancy Status During Abatemen							20 California Av	enue					
Facility closed/vacated during Abatement performed outside							City, State, Zip Code						
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Scope of Work (check all that apply				_				full Containment w	/negative	nrees	uro		
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basement		X		1	boiler insula			40 sq ft		X	H	H	一
Registered Waste Hauler	TALID	EP Haule	- ID# 1 (		bic Yards of V	Vacto	Name of Daristan 1	Landell					
D & S RESTORATION, INC.	135		1 1		yds.	203IC	Name of Registered TULLYTOWN,		COVER	Y			
City, State PATERSON, NJ 07503			Disposal	Da	ite		City, State TULLYTOWN,		-				
Completed by (Print or Type)	Title			-	Signature	_	- / /	171	Date	_			
BOGDAN JOLDZIC	PRESID	ENT			Br		N	THE SECOND CO. S.	12/05/	19			

Dec 05 2019			os Contro 1458060	01 609,6	33,0664	D&S	page 1		C E I	₩ [E	-111
då\$ Proj.	#: <u>19-265</u>			Nousi (Pursu	State cation of Asi uant to NJAC	oesto	J s Abstement 0 and 12:120)		1	2019 AY	
Date of Notification	(1)				ner/Operator (2)	ī			about the same of	7/	A.T. LAND
Agencies Motified  EPA  DEP  DOL  DOH	Inklat Amended Amendment # Emergency (including		Sylvia A Street Addr City, State, union, n	Zip Coda j 07083				VIANTE VIANTE	ie Number		
☐ DCA	justification Cancellatio		Sylvia A	gnone	3			- i c:apnor	ie maudel		
	The second section of the sect				ILITY INFORM	ATIO	4				
Name of facility wi Residential Street Address	here abstement	is taking p	lace (3)			-		Subch	(4) If (K - 12) apter 8 (Other (Private/Comm /Homes, etc.		1
Chy (5) union, nj 0708	23	Cou	inty (8)				inty Code (7) the use only)	3quare Feet 1,200 SF Current Use (P Residential	02	60 . molished)	Age
Name of Monitoring N/A Street Address City, State, Zip Cod-		Bldg. Own	ler (B)		ASCM No.		Name of Abalismen  D & S RESTO  Sirect Address  20 California  City, State, Zip Cod  Paterson, NJ (	nt Contractor (9)  RATION, INC.  Ave.		•	
Project Manager for	Monitoring Firm	1	Ph	one Numb	ėr		973-345-802	0	License Nun 0116		
Start Date (10)			d. Completic	n Date (11	)		Name of OSHA Mo	100 per 100 miles (100 per 100			
12/06/19 Occupancy Status I Facility closed Absternent pe Describe: Other-Describ	Vvacated during eformed outside	entire per of normal	iod of abate	merd.			Street Address 20 California A City, State, Zip Cod Paterson, NJ 0	8			
Scope of Work (ch	80 H 🖸	Renovation Demolition					POR	Full Conteinment w Mint-enclosure Glovebag procedur Non-Exempled (*)	re and Non-frisb		The Person Name of Street, or other Desires, or
esbestus-con meterial (ecm absided in fact	) to be	etaff(12) Yes	No	N/A	Descriptio material (/	n of a ACM)	sbestes-containing	Amount (Specify S LF)	V	PCS	n
basement basement		21-20-12-	X		Pipe Insulat	***************************************		68 LF	×	tota	
Our en le fit			X		boiler insula	don		40 sq ft			HH
										H	믞
Registered Waste H D & S RESTOR City, State		NJD 13:	EP Hauler II 506		ubic Yards of V yds. ste	Vacto	Name of Registers TULLYTOWN City, State	d Landill I, RESOURCE RE	COVERY		الساء
PATERSON, N. Completed by (Print BOGDAN JOLI	or Type)	Tide PRESIC			Signature	_	TULLYTOWN	N, PA	Date	S	
ACD 41		District Control	-	or asbasto	a licensure exe	mole	activities.		12/05/19		

TNVH	= 1121	2/	4					F. 19	mes aus	= @	F	17	n P	rint
CK30108 PA	ID)	NOTI	FICATION	ON OF ASBI	ESTOS AB	ATE 2:12	MENT	e en		EG	L		/ [	The second second
1	A 196-25				Owner/Ope	rato	r (2)			DE		20	19	1 1 5
	n								-					İ
			Olicet	Address					L.	18668	1080	CRI	MOL	લ
≥ DEP			City, S	State, Zip Co	de				contract of the contract of	restriction management	TICKIN	illia.		the second second
DOH justification	1)	ig							Tele	phone N	Number	H - 1-2-3		
DCA Cancellation	n				34					•				
Name of Facility Where Abatement is Tak	ing Place	(3)	FAC	CILITY INFO	RMATION		T							
Date of Notification (1)   Name of Building Owner/Operator (2)   DEC   2019														
Date of Natification (1)   Name of Building Owner/Operator (2)   Residence   Name of Building Owner/Operator (2)   Residence   Name of Building Owner/Operator (2)   Residence   Name of Street Address   Name of Contact   Locus Lucksinger   Name of Facility Where Abatement is Taking Place (3)   Street Address   Street Address   Name of Contact   Locus Lucksinger   Name of Facility Where Abatement is Taking Place (3)   Street Address   Street Ad														
							X O	ther (i.e. p	rivate &	comme	rcial bui	ldings	, hom	ies,
									# of	Floors		3lda /	Age	
											9 (6)	-	.9~	
Union			County (STATE	Code (7) USE ONLY)			Curren	t Use (Prio	r if bein	g demol	ished)			
Name of Monitoring Firm Hired by Building A. Seine Lighthouse Solutions	Owner (8	3)	ASC	M No.	Na B	ime rink	of Abate	ement Cont	tractor (	9)				
													2-1-2	
					12	256	Libert	y Avenue	Э					
South Orange, NJ 07079														
Sarah Calandra									1000		No.			
	Schedu	led Co	mpletion	Date (11)	100									11179
	1								Soluti	ions				
	Penod of nal Facilit	Abater y Hour	nent s		City	y, St	tate, Zip	Code						_
					– Sc	outh	n Oran	ge, NJ 0	7079					
x ≥3 sf or ≥3 lf	_					×	Mini-l Glove	Enclosure ebag Proce	dure					
	ls	s Locat	ion						) and i	VOIT- TIE	DIE FIO	100		-
Location of		Normal	lly .		Descript	ion	of							
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	aintena	nce/	Asbesto	s Containin	a Ma	aterial (A	ACM)					Щ	m
In Facility	Cus		Staff?		surfacing,	VAT	Γ, or	on,			Rem	Rep	псар	nclo
(13)		r		-	other misce	llane	eous)				ova	pair	sula	Sur
Basement	Yes	7 STREET	N/A		D: 11	,	w//		المنافعة في المنافعة		1		te	CD.
Dascillent	-	X	-		Pipe W	rap	р		110	LF	X			
			-											
											-			
Name of Registered Waste Hauler		l N	JDEP W	/aste	Cubic Yards		l N	Name of Re	nietoro	d I ande	11			
lewark Carting		Н	auler ID 1509	1000	of Waste	•	100	Naste M	307-3			1		
City, State East Orange, NJ				1	Disposal Da	ite		City, State Penn Arg	vle. P.	Α				
Completed by	Title				Signati	ire i	/ /	40	J, 1 1		ate			
lison Lamers	Office	e Man	ager		1 4	MI	MA	1011			J.C			

Date of Notification (1)	・ IC UDA	NOT	IFICATIO (Pursuan	State of New NOF ASBES	TOS ABATE 30 and 12:12	0)	T	EG		W.	111	A PART OF THE PART
12-06-19				of Building Ov n county Te			I & Special	Services	1	2019		
Agencies Notified Type Notification	1		Street	Address			. с. ороди	in manager of the same	samanings Sign (mark)	NAS ABBOT	l dame-	- !
EPA Initial Amended				East Ridge			ļ.	ASBESTO LIC	ENSIN	uriti G	. th	Î
X DOL Amendmen	it #			tate, Zip Code mus Nj 076								****** 1
■ Emergency justification	(includin	g		of Contact				Telephone	Numbe			
DCA Cancellation	•		100000000000000000000000000000000000000	e Thomas				201-343				
Name of Facility Where Abatement is Takin	ng Place	(3)	FAC	ILITY INFOR	MATION	Typ	e of Facility (4					
Building 275	3	(-)				П		0.00				
Street Address							School (K-12 Subchapter	8 (Other than I	K-12)			
275-285 Pascack rd						×	Other (i.e. pr etc.)	rivate & comm	ercial bu	ilding	s, hom	es,
City (5) Paramus						Squ	are Feet	# of Floors		Bldg.	Age	
County (6) Bergen County		2/6/4	County	Code (7) USE ONLY)				r if being demo	olished)			
Name of Monitoring Firm Hired by Building	Owner (8	8)	ASCI	-	Nome		chnical sch					
TTI Enviromental inc	owner (e	'/	AGGI	VI INO.			errprises LI					
Street Address					Street							
1253 N Church St					28 L							
City, State, Zip Code Moorestown NJ 08057					City, S		Zip Code Park					
Project Manager for Monitoring Firm Mike R Stocku	8		Telepho		Teleph			Licens				
Start Date (10)	Schedu	led Co		408800 Date (11)	9739		924 SHA Monitor	0112	9			
12-23-19	12-23		mpiedon	Date (11)	Marc							
Occupancy Status During Abatement (Chec	ck Only O	ne)		<del></del>	Street		MACTED .					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of	Abate	ment				berland av	е	*			
Abatement Performed Outside of Norm Other – Describe:	nal Facilit	y Hou	rs		1,200,354,000		Zip Code NJ 07502					
Scope of Work (Check All That Apply)					Pale	rson	NJ 07502					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Survey made	Renov Demol			×	M GI	ini-Enclosure lovebag Proce	nt with Negativedure (*) and Non-Fi			re	
	Is	s Loca	tion				Zii Zizonipiou	( ) and 14011-1 1	Table I		emen	t
Location of		Norma			Description					Т	уре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	aintena	ance/ Staff?	(i.e. the	Containing M rmal systems surfacing, VA her miscellan	insul T, or	lation,	Amount (Specify SF or LF)	Kemova	Repair	Encapsulate	Enclosure
	Yes	No	N/A						<u> </u>	]	late	re
Room 313			x	12x1	12 bronw fl	oor t	ile	10SF		x		
Name of Registered Waste Hauler			UDES:									
DYV Enterprises LLC		1	NJDEP W Hauler ID 0034140	No. of	ubic Yards Waste OYds		Name of Re Newark	egistered Land Carting	dfill			
City, State		-			sposal Date		City, State					
Lincoln Park NJ Completed by	7711				1 0		Newar n	07105				
Dorian Carpio	Title Man	ager			Signature	W76	hul		Date 12-23	-19		

TOVA	ILU II			_		826							L		
UK223	D PA	MD	IITON I)	CATIO	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE	MENT 0)	The Charles are found	Ũ	E C	E			
Date of Notification (1) 12-06-19					of Building				. 900		050	1 1	001	8	A CONTRACTOR
Agencies Notified	Type Notification	1			Address	Techn	ical So	chool	& Specia	Sen	vice\$/EU	, 11	201	9	المستأ
-		'			ast Rid	aewood	d Ave		Maria and Maria		omalije hteesth	ALCOHOLD ST			ĺ
× EPA × DEP × DOL	X Initial Amended				ate, Zip C						<u>ASGEST</u>	CENSI		01.8	
× DOL	Amendmen		_	Paran	nus Nj 0	7652			Ĵ. v.a.	anti Philipp	be?	Cheller	1.000		Regional Company
Ĭ DOH	Emergency justification	)			of Contact					Te	elephone N	Number			
DCA	Cancellation	n			e Thoma	7,007				2	01-3436	000			
Name of Facility Where	Ahatement is Takir	ng Place (3	١	FAC	ILITY INF	ORMAT	ION	T	- 5 F 11% - 7	41		!			
Maintenance Barn	ibatoment to Taki	ig i iace (o	,					Туре	of Facility (						
Street Address								H	School (K-1 Subchapter	2) 8 (Otl	ner than K	(-12)			
Jerry Schwartz way	,							×	Other (i.e. p	rivate	& comme	ercial bu	ilding	s, hom	ies,
City (5)								Squa	etc.) are Feet	# (	of Floors		Bldg.	Age	
Paramus												2	-	J	
County (6)					Code (7)				ent Use (Prid		ing demo	lished)			
Bergen County					USE ONLY	,		1000000	chnical sch						
Name of Monitoring Firm TTI Environmental in		Owner (8)		ASC	vi No.				atement Cor		r (9)				
Street Address					-			Addre	errprises L	LC	<u> </u>				
1253 N Church St								isa L							
City, State, Zip Code				in the second					Zip Code						
Moorestown NJ 080	057						100000000000000000000000000000000000000	oln P							
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	none N	lo.		License	No.			_
Mike R Stocku					408800			94269			01129	)			
Start Date (10) 12-23-19				mpletion	Date (11)				HA Monitor						
Occupancy Status During	Abatament (Cha	12-23-1						celo a							
			3500			3	Street 252		ss perland av	<b>'</b> 0			***		
Facility Closed/Vaca Abatement Performe	ited During Entire ed Outside of Norr	Period of A nal Facility	bater Hour	nent s					ip Code		40				
Other – Describe: _						_			NJ 07502	1					
Scope of Work (Check Al	I That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		and the same of th	enova				×	Mir Glo	Il Containme ni-Enclosure ovebag Proc n-Exempted	edure	<del>-</del>			re	
		ls l	Locat	ion					T				Aba	emen	it
Location			ormal Sole			Des	scription	of					T	уре	
Asbestos-Containing TO BE ABA		Mair	ntena	nce/		tos Cont thermal					mount Specify	7		E	т
In Facili		Custo	odial 3 (12)	Staff?	(1.0.	surfac	cing, VA	T, or	ation,		F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		-	· · - /	_		other n	niscellar	reous)	1			oval	air.	sulat	sure
		Yes	No	N/A										6	
Locksmith"s	office			Х		Dryw	all pla	ster		2	25SF				X
								-							
												_	1	-	+
Name of Registered Was	te Hauler		N	JDEP W	aste	Cubic	Yards	-	Name of F	Registe	ered Land	fill			$\vdash$
DYV Enterprises LL0			1 1	lauler ID		of Was			Newark			estore).			
City, State				034140	,	10Yd	al Date		City, State						
Lincoln Park NJ						Dispus	ai Dale		Newar r		105				
Completed by		Title				S	ignature	1	1	., 01		Date			
Dorian Carpio		Mana	ger				1	100	1111			12-23	-19		

TANT 10070 State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NIAC 2:50 and 5:40)

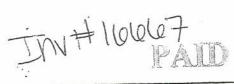
11.	且人則			(12	ursua	nt to NJA	AC 8:60 and 5:1	6) (h	011(#	39	19.	2	
Date of Notification (1)	<u> </u>	40			1		g Owner/Operator (	(2)				W	E
/	6 /	19	_		Ric	der Unive	ersity			<i>y</i> Ea	L!	LU Mariana	
Agencies Notified	Type Notific	cation			Stree	t Address			1170				201,00
⊠ EPA ⊠ DOLWD	☐ Initial				208	33 Lawre	nceville Road		DE	c 1	1	2019	
⊠ DOLVVD	Amende Amendm	_			City,	State, Zip (	Code					-0.0	- 1
□ DCA	☐ Emerger	_		1	Lav	wrencevi	lle, NJ 08648		l l	.01 125-a25	a tamining	C.A. III.	
(NJAC 5:23-8)	justificat			,	Name	of Contac	:t		Telephone Num	ber	CALLED TO SERVICE	1110	12 G1
	☐ Cancella	ition			Wa	lter Eddy	1		609-896-508	30	(2,74)	acustnit A	-27.252
					FA	CILITY IN	IFORMATION						
Name of Facility Where A				(3)				Type of Facility (	4)			- 20	
Rider University - F	ine Arts Bu	uilding	3					School (K-12)					
Street Address								Subchapter 8 Other (i.e., pri	(Other than K-12 vate and comme	?) rcial bu	ildin	75	
2083 Lawrenceville	Road							homes, etc.)	vate and domine	i olai be	and n	90,	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Lawrenceville								75,000	2		50		
County (6)					Cour	nty Code (7	()(STATE USE ONLY)	Current Use (Price	or if being demoli	shed)			
Mercer								school					
Name of Monitoring Firm	Hired by Buil	ding O	wner (	8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Pennoni					102		Plymouth En	vironmental Co	mpany, Inc				
Street Address							Street Address						
515 Grove Street, S	uite 1B						923 Haws Av	enue					
City, State, Zip Code							City, State, Zip Co	ode					
Haddon Heights, N.	J 08035						Norristown, F	PA 19401					
Project Manager for Monit	toring Firm			Tele	phone	No.	Telephone No.		License No.				
Brian Clark				8	56-656	-2944	610-239-9920	Ľ.	0398				
Start Date (10)		Schedu	ıled C	omple	tion Da	te (11)	Name of OSHA M	lonitor			-		
12 / 23 /	19.	1	/	8	/	20_	Plymouth En	vironmental Co	mpany, Inc.				
Occupancy Status During	Abatement (	Check	only o	ne)			Street Address						
☐ Facility Closed/Vacate	d During Enti	re Peri	od of	Abate			923 Haws Av	enue					
Abatement Performed					rs - Des	cribe	City, State, Zip Co						
Time of Abatement: 7:	:00AM- <u>3:30</u> F	PM/	P	VI	AM		Norristown, F						
Scope of Work (Check all	that apply)		- 49										
M > 2 - f > 2 If			-				☐ Full Cont	tainment with Nega	ative Pressure				
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or &gt;260 lf</li></ul>			⊠ Rei □ Dei				Mini-Enc     Glovebage     Glovebag						
			_ 50.					mpted (*) and Non	-Friable Procedu	re			
				Loca						Ab	atem	ent T	уре
Location		.		lorma	lly ely by		Description o		10 No. 10 No. 10		_	_	1
Asbestos-Containing N TO BE ABA		<sup>(1)</sup>		intena		Asbe	stos Containing Ma ., thermal systems i	terial (ACM)	Amount (Specify	Remova	Repair	nca	nclo
IN Facilit			Cust		Staff?	(1.0	surfacing, VAT,		SF or LF)	ova	=	Encapsulate	Enclosure
(13)		-	.,	(12)	T	-	other miscellane	ous)				late	Ю
room 204			Yes	No	N/A				Serentini	1_			_
room 281							roofing material		2SF				Ш
room 283							roofing material		2SF				
room 285				$\boxtimes$		soundp	roofing material		2SF				
room 287						soundp	roofing material	1	2SF				
Name of Registered Wast					JDEP \		Cubic Yards of	Name of Registe	ered Landfill				
Robinson Waste Dis	sposal				17304		Waste 1	GROWS La	ndfill				
City, State							Disposal Date	City, State					
Voorhees, NJ 08043							1/8/20	Moorisville,	PA				
Completed By (Print or Ty	rpe)	Title					Signature			ate	a:		
James M. Kelly	00000F1	Vic	ce Pre	eside	ent					11/	di	a	

500001 # MI

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

CK 9068

		<b>7.</b>						111-57	15 10	1 5	11	<u>///</u>	15
Date of Notification (1)	1 0					Owner/Operator	(2)		F		<u> </u>	U 	13
12/6	119 :			1	10	2004	100						-
Agency Notified	Type Notification		Stre	et Adi	dress	016-00		1	DE	C 11	20	119	
D EPA	☐ Initial		1	OX	<u>52</u>	SHERED	AN AN	F	1			10	
II DEP IZ DOL	☐ Amended Amendment#		City	, State	e, Zeo C	oge .		1	1	i wewen	Terroria Serv	ta saara	
JA DOL	D Emergency (include	ng	- E	<u>= la</u>	ZA	BETH,	03,01	J. Taba	hone Num	Shore Also	THE LAN	16,27	1
₩ HOOFE	justification)  D Cancellation	7	Nam				= CETA		5-72		90	12	-
D DCA	u Cancesason		1114			SCHLISS	· · · · · · · · · · · · · · · · · · ·	109	5-10	-1		-	$\dashv$
			FA	CILIT	YMFC	RMATION		10					$\dashv$
	e Abatement is Taking Pla				• ,		Type of Facility	(4)					1
SHERDAN	GARDENS:	HON.	6	ZD	04	المد	☐ School (K-12						1
Street Address						:	Other (i.e. pr	ivate &	than K-12 commercia	) I building	s.		
1083	SHERIDAN	CA	E	"			homes, etc.		•				
could (a)				;			Square Feet	# of F		Bldg.		6	
ELEZA	Cetil						30,000	1. 2	2_	1	36	O	
00-4-50			Cot	mity C	ode (7)	(STATE USE	Current Use (P			shed)			
N SIN U	<b>6</b>		ON	LY)	•		BLDG	· ,	APTS	5			
Name of Monitoring F	irm Hired by Building Own	er As	SCM No.			Name of Abaten	ent Contractor (	9)	-				
(8)						Best Re	moval In	С					
Street Address						Street Address					- 10	13.7	
				5.48		450 Sou	th River	St					
City, State, Zip Code						City, State, Zip (							
						Hackens	ack, N.J	. 07	601		2-23		
Project Manager for M	lonitoring Firm	Tele	phone N	60.		Telephone No.		Licen	se No.	20:500			
	:					201-329	-7444 -	0	0388		_		
Start Date (10)	Scheduled C	ompletion	n Date (	11)		Name of OSHA		•					
12/16/1	9 1		7)16	7_			Environm	enta	11				
Occupancy Status Du	ring Abatement (Check on	ly one)	!			Street Address	* 12						-
☐ Facility Closed/Vac	ated During Entire Period	of Abater	pent			and the second second second	uyler St						
Ahatement Perform	ned Outside of Normal Fac	dity Hours	s _	a	.]	City, State, Zip (		»T	· .	7606			-
	8:00AM TO	5:00	2 6 1-	'	1	5. на	ckensack	, N .	J. U/	000			
Scope of Work (Chec	k all that apply)			2			Containment with	Negati	ve Pressur	æ			1
Ø23sfor≥3¥			1777	Renov Demoi	ation '		Enclosure ebag Procedure			*			
© ≥ 160 sf or ≥ 260 ff			<b>u</b> 1	DEHIU	HOH		-Exempted (*) as	d Non-F	riable Proc	edure		-	
<u> </u>		ls I	ocation	T							400000	abam	
		No	amally		2	,					T	Type	
	ation of ining Material (ACM)		Solely b tenance		Asbes	Description stos Containing M	aterial (ACM)	`	Amount			9	m
TOBS	ABATED	Cu	stodial	.	(i.e.	, thermal systems surfacing, VA			(Specify SF or LF)		em.	Renhir	nolo
	Facility (13)	1	(12)	4	-35	other miscellan			Si Gi LIT		Removal	Renhir	Enclosure
and the state of t	<b>3</b> - <b>4</b>	-					,	8			-	9	
· · ·		1 1	No 1	WA							-	+	+
BASSIVEDT CA	4WLSPACE-A			1	HERV	LALS PSIE	KSI DID WATE	لب	165	LF	K	1	+
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Name of Registered \			EP Was	te Ha	uler	Cubic Yards of	Name of Reg	istered l	andfill				-
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City, State	ack , N.J. 07	7601				Disposal Date		2.1	PA	1724	n		
Completed by	Title	001				Signature /	NEWBUR	011	1.11.	Date	٧_		
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N. IIHIUK	Man 1 Der	тшаг	OT			1 / 10					Į.		•



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

CK 9066

		1 11	-	D 35-	Owner/Operator	(3)	F7 0		7 57 67	7	3 1 157
Date of Notification (1)		INS	erne or H	) .	JEFFE	RS	IN E C		] W	(E	
Agency Notified Type Notification		St	reet Ac	- Million	20:1						-
								2 1 4			- Laboratoria
D EPA		Ci	ity, Star	te, Zip C	ode .		EN IN DE	6 1 1	2019	)	1
DOL Amendment#			-	EAN	euc.	NJ O	7666				4
Emergency (include)	ing	N	ame of	Contact	M. C.	•	Telephone Num	ber 19d			
☐ DOH justification) ☐ DCA ☐ Cancellation	*	1	. /	TR	JEHER	'S			-		
					RMATION		Court was conversable	and the second second			=-
Name of Facility Where Abatement is Taking Pl	ace (3)			-	-	Type of Facility	(4)				
MR JEHEK						☐ School (K-12)	<u> </u>				
	<u>&gt;</u>			<del></del>	·	C Subchanter 8	(Other than K-12)				distanting the same of the sam
Street Address	. 1	1				Dither (i.e. pri	vate & commercia	pusong	5,		
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TRANSCIC					MOTATE HOE		ior if being demoir				$\dashv$
County (6) BERGEN			NLY)	Code (/)	(STATE USE	Content ose (1)	Si DEN CE	5			
	1 4/	~300			Name of Abatem	nent Contractor (9	372010				$\dashv$
Name of Monitoring Firm Hired by Building Own (8)	RET A	SCM N	40.			moval In					Annual
					Street Address		<u> </u>			_	$\dashv$
Street Address							C+				
					City, State, Zip	th River	SL				$\dashv$
City, State, Zip Code						ack, N.J	07601				
	1=:		M		Telephone No.	ack, N.J	License No.		-		-
Project Manager for Monitoring Firm	ieic	ephone	e No.		201-329	-7444 -	00388				1
Start Date (10), A Scheduled	Complete	a Data	(44)		Name of OSHA		1 00000		=		7
210	16 /		Ċ.,,			Environm	ental				
0ccupancy Status During Abatement (Check of		11	1		Street Address						$\neg$
		•			280 H	uyler St	E		82		-
☐ Facility Closed/Vacated During Entire Period ☐ Abatement Performed Outside of Normal Fa	of Abate	ment			City, State, Zip		``				
Dother - Describe: & AM TO THE	PM	13	*				,N.J. 07	7606			
Scope of Work (Check all that apply)							N 5 Passanii				
Ø≥3s'or≥3#			a Ren	ovation		Containment with Enclosure	Negative Pressu				-
D≥160 stor≥260 ff			□ Dem		El Glos	ebag Procedure	8 8				
			-		U Non	-Exempted (") an	d Non-Friable Pro	centre	Abat	ame	nt
		Locatio							T	pe	$\dashv$
Location of		ormaliy I Solel		-	Description	of	Amount			-	
Asbestos-Containing Material (ACM) TO BE ARATED	0.00000000	ntenan		Asbe	stos Containing II	iatemai (ACM) s insulation.	(Specify		2 2	Encapuulate	Enclosure
IN Facility	1	stock Staff?			surfacing, VA	T, or	SFCLF		Removal	ned	180
(13)		(12)			other miscellar	leous)			9 7	ate	Fe
	Yes	No	N/A		50		sulfure con				
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1	-		N		LUAL SOLFAE		385	Fi:	8		П
BASE MENT	+		1	13 HCK	WAL SURFACE	1,00	203	,		1	
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None of Decisional Minds House	I NI	DEDI	Vaste I	famlar	Cubic Yards of	Name of Rec	istered Landfill		1		
Name of Registered Waste Hauter Best Removal Inc		No.	ACOCC L	portunical	Waste			11.		. •	
Dest Wemonal IIIC		17	109		1 307	CUMBERL	AND COUN	TY LA	NOF	الرأ	-
City, State					Disposal Date	City, State		,			
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Completed by Title					Signature/	. A :	,	Date	: 1		,
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CK 6015 15	s AII	NOTI	FICATIO	nt to NJA	BESTOS C 8:60 a	ABATEMEN nd 12:120)	Т	DEC		$\mathbb{V}$	E	The second distribution of the second distributi
Date of Notification (1) 12/05/2019			Name City	of Buildin of Perth	g Owner Amboy	Operator (2)		Check#	1 1	2019	l	ابر ا
Agencies Notified Type Notificatio	n			Address High Stree	et			ASSESTO	\$ 00	versoms NTAC	11.74	<u> </u>
□ DEP □ Amended	-4-44		City, S	State, Zip (	Code	rsey 08861		(K)	ENSH	13	-tnos-	torgo vero
⊠ DOL Amendme     ⊠ Emergenc	including	<u> </u>		of Contac		sey 08861		Telephone N	umbor			
□ DCA □ Cancellation			0.000000	el Cleave				732-826-20				
Name of Facility Where Abatement is Tak City Hall	ing Place	(3)	FAC	CILITY IN	FORMAT	Type of Fa	acility (4)					
Street Address 260 High Street			<del></del>			□ Schoo □ Subch ☑ Other	apter 8 (O	ther than K-12) a & commercial buil	dings, l	nomes	, etc.	)
City (5) Perth Amboy, New Jersey 08861						Square Fe 30,000	o	# of Floors	$\neg$	Bldg. /		
County (6) Middlesex			County (STATE	Code (7)	Y) _	Current Us	e (Prior if I	peing demolished) ate Apartment Bldg				
Name of Monitoring Firm Hired by Building Pennoni	Owner (8	)	ASC	M No.	Harris Control	Name of At	atement C	Contractor (9)				
Street Address 31 W. 34 <sup>th</sup> Street, 8 <sup>th</sup> floor						Street Addr 246 Union	ess	·d				
City, State, Zip Code New York, New Jersey 10001			<u> </u>			City, State, Totowa, N	Zip Code					
Project Manager for Monitoring Firm Ralph Coppola				one No 35-9763		Telephone   973-225-8	No.	License 01104	No.	-	-	
Start Date (10) 12/06/2019	Schedul 12/09/2			Date (11	) .	Name of OS	SHA Monito					
Occupancy Status During Abatement (Che	ck Only O	ne)				Street Addre	ess					
□ Facility Closed/Vacated During Entire □ Abatement Performed Outside of Non □ Other – Describe: 4 PM	Period of a	Abaten y Hours	nent s			City, State, Union, NJ	Zip Code	t .				
Scope of Work (Check All That Apply)											-	
⊠3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		Renova Demolit				□ M □ G	ini-Enclosu lovebag Pr	ocedure / Limited C	ontain	ment :	Tent	
	Is	Locat	ion				on-Exempt	ed (*) and Non-Fria	ble Pro	Abate	emen	t
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Asha	De:	scription of aining Materia	I (A CNA)			Ту	ре	Т
TO BE ABATED In Facility	10000	intena todial S		(i.e	. thermal	systems insucing, VAT, or	ation,	Amount (Specify SF or LF)	Ren	Re	Enca	Enc
(13)	Yes	(12) No	N/A		other n	niscellaneous	i.	01 01 21 7	Removal	Repair	Encapsulate	Enclosure
Crawlspace	х			0&M	Cleanup	Debris		32 LF	Х			
Name of Registered Waste Hauler		K1	JDEP W	Vacto	Coler	Vande	T N					
Lilich Corporation		Н	auler ID 18724	37377	of Was			f Registered Landfil s Landfill	ı			
City, State Totowa, New Jersey 07512					Dispos 12/09/	al Date 1/2019	City, Sta Morrisv	ite ille, PA			jii	
Completed by Adriana Olejarova	Title Presi	dent			1 1	ghature	05		ate   2/05/	2019		
ASB-41 (R-06-08)						* Do not use	this form fo	or asbestos licensur	e exen	noted a	activi	ties.

page 1

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Purpuent to NJAC 8:50 and 12:120)

ote of Notification (1) 2/05/2019			Nan	ne of Bu ty of Pa	ilding Own	er/Operator (2)	<u></u>	harden de actes.	115			ووده الرار
gencies Notified	Type Notification			et Addn High S				1 AUGE	AJCE LICE	taj Visin		01.4
EPA DEP DOL	回 Initial D Amanded Antendment #	udine	Pe	th Amb		Jersey 08881		Telephone Num			1	4
DOH	Emergency ineligible processing including incl	nand	Da	ne of Co niet Cla	aver		M. M.	732-828-2010				
				FACILIT	YINFORK	Type of Fadil	by (A)					
ity Hall Ireat Address	Abatement is Taking P	lace (3)				D School (K	(-12)	then K-12) conmercial building	ga, hom	es, etc	:.)	A total distance of the same o
60 High Street	20004					Square Feet 30,080		# of Floors		. Age	_	
ern Amboy, New Jo	HISCA 0869 I		Co	unty Co	ds (7)	Current Use	(Prior if bein Private	g damolished) Apenment Bidg				
	m Hired by Building Ov	mer (8)	1	aeçm n		Name of Abs	tement Cont ration	ractor (9)				
Pennoni Street Address 31 W. 34 <sup>th</sup> Street, 8 <sup>e</sup>	- floor					Street Addres	gorieastq ie					
City, State, Zip Code Sew York, New Jerse				-		City, State, Z Tolows, Ne	M Jersey 9	7512				
Project Manager for M		14 192	1 7	lephone	No 9783	Telephone N 973-226-84	p. 00	Licensa N 01104	o.			
Raiph Coppola Start Date (10) 12/06/2019		Scheduled 12/09/201		lation D	ata (11)	Name of OS	HÀ Moniter Mental Lat	poratories, LLC				
	ing Abstoment (Check	Only One)				Street Addre	53			12000		
				7.0		2333 Route	22 West					
☐ Facility Closed/V ☐ Abatement Perfo ☑ Other – Describe	mosted During Entire Porms Outside of Norms	al Facility H	loure			City, State, 2 Union, NJ	Zip Code 07083				-	
Scope of Work (Chec	(All That Apply)											1
23 ef or ≥3 ff			isevon oitilem			. Q M	ini-Enclosur	cedure / Limited (	ontainn	nens T	ent	
							on-Exempte	d (*) and Non-Fria	PIG PISI	Ahata	mənl	
			ocatio							Ту		
Asbectos-Contain TO SE In F	tion of Ling Material (ACM) ABATED acility 13)	Used Mair Qusto	ormeli Solei stanesi osal 9 (12)	y by ce/	Assest	Description of 22 Containing Materi thermal systems insu- surfacing, VAT, or other miscallaneous	ulation,	Amount (Specify SF or LF)	Removál	Repeir	Encapsulate	Endowne
	. 0	Yes	No	NIA				-	1.	<del> </del>	-	$\vdash$
Crawispace		x	_		OEM C	leanup Debris		32 LF .	×	+		OW
		+		-					_	T		
		1-1		+								
Name of Registered	Waste Hauler			WDEF V		Cubic Yards of Wasts	1	of Registered Land	เสท			
Lilich Corporation			1	18724		Disposal Date	GRY. S	ss Landfill	<del></del>			
City, State Totowa, New Jer	sey 07612					12/09//2019	Morrie	iville, PA	Data			
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State of New Jersey

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Date of Notification (1)			Name	of Buildi	ng Ov	vner/	Operator (2)		II TOWN			Check	#-	3532	2
12/6	/19			n Unive						; <u>6</u> E		2	1		
Agencies Notified	Type of Notific	cation		Address					III I			110	11	1	-
[] EPA	[] Initial		1000	) Morri	s Av	e.			STATE OF STA	DEC 1	1 2019		1		
[] DEP	Notificati	on -	City C	V-1- 7:-	0 1				14 H	UEC 1	1 2019	ندا أ	2		
[X] DOL	[] Emergency			State, Zip											
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[] DCA				of Conta					. Tele	phone Nun	aber (C)	atturation of			
	[] Cancellat	ion	Suza	anne K	upie	C			973	3-737-51	109				
					FAC	ILIT	YINFORMATION								_
Name of Facility Where	Abatement is	Taking F	Place (3	3)				Type of	Facility (4)						-15500
Kean University	<ul> <li>Science</li> </ul>							11	School (K-	12)	than K-12) d commercial				
Street Address			3					l ti	Other (i.e.	private and	commercial	buildi	ngs,		
1000 Morris Ave.									nomes, et	C.)					
City (5)		Coup	4. (6)			^		Square	Feet	# of Floor	11. 65	lg. Ag	е		
Union		Coun					nty Code (7) ATE USE ONLY)	20000	Use (Prior i	2 f boing don	~6	0			_
William States Strong						(01)	THE GOL ONET)	college	OSE (FIIOI I	i being den	noiisnea)				
Name of Monitoring Fire		ding Ow	ner	ASCM N	lo.		Name of Abateme								
TTI Environment	aı			0003			J	upiter E	Environm	ental Se	ervices, Ir	IC.			
9 East Stow Roa	4						Street Address			_					
City, State, Zip Code	u					4	City State 7in 0	23 Cha	ngebrid	ge Road	l, Suite 10	0			
Marlton, NJ 0805	3						City, State, Zip Co		ook, NJ	07058					
Project Manager for Mo	nitoring Firm	Te	lephon	e Numbe	r	7	Telephone Number		0011, 110	01000	License N	umbe	r		
Jim Guilardi				5-8800			9	73-575	5-8700				08	52	
Scheduled Start Date (1/3/19	(0) Sch			Date (1	1)		Name of OSHA M		28	v 2020 S					
			2/31/					ris Envi	ironment	al Labor	ratories, L	LC.			
Occupancy Status Durin [] Facility Closed	ng Abatement ( Vacated During	Check o	nly one Period	) of Δhater	ment		Street Address	200 D							
<ul><li>[] Abatement Peri</li></ul>	ormed Outside	of Norm	nal Faci	lity Hours	3 -				ute 22 V	Vest			1	į.	i.
Descri [x] Other – Descri	be: be: <u>partially va</u> c	natad	23				City, State, Zip Co		1107000	,					
		Jaieu						Jillott, I	NJ 07083	)					
Scope of Work (Check a	all that apply)														
[] Demolition				[]	Ren	ovati	on	[ ] [x		itainment w Enclosure	vith Negative	Press	ure		
[] ≥3 sf or ≥3 lf	0.15							[]	Gloveba	g Procedu					
[x] ≥160 sf or ≥26	0 11							[x	] Non – F	riable Prod	cedure			Acres E	
		1140 236	Is Loca ormally				Descri	otion of				1000		men	nt
Location			Solely	by			Asbestos -		ng		Amount	R	R	Е	E
Asbestos – Co Material (A			intenan dial Sta	ce/Cus			Materia		<u></u>		(Specify	E	E	N	N
TO BE ABA		100	aiai Ota	11 (12)			(i.e., therm insulation, su				SF or LF)	M	P	C A	
In Facilit	y						or other mis					V	î	Р	0
(13)		Yes	No	N/A								A	R	S	S
Rooms C339, C340,	C341		Х		VAT	Γ, ta	ble tops, glue dab	s, hood t	trinsite		1400 SF	L X		U	U
Maria															
Various areas – room	s 145, 156		X		VAT	Γ, gl	ue dabs, trinsite			2	2000 SF	X			
236, 325 Name of Registered Wa	oto Haules	1.	11055	10/		0 :	· .v								
Jupiter Environme			IJDEP Hauler I				oic Yards Waste		f Registere						
- aprior Livilorille	I Ital Oct VIC	,00	0478			-, 0	10	Allian	ce Land	Ш					

City, State

Pine Brook, NJ

Pane Repic

Completed By (Print or Type)

ASB-411

Note: Work at Rooms C339, C340, C341 should be completed by 1/14/19. Amendment #1, 5/9/19: Work at rooms 145 and 156 is scheduled for 5/20/19 to 6/3/19.

Disposal Date 1/17/19 +

Signature

City, State

Taylor, PA

Date

12/6/19

Amend #2, 12/6/19: Work at C236 and C325 is scheduled for 12/17/19 to 12/31/19. Includes removal of VAT/mastic and transite.

General Manager

Inv# 16687

### NOTIFICATION OF ASBESTOS ABATEMENT

Agencies Notification [] EPA [] DEP [] Initial Notification [] Cancellation [] Chy, State, Zip Code [] Soboblished and commercial buildings, beneat, etc.]  Soboblished and commerc	- PA			(Pu	rsuant	to NJA	AC 8:60-7 and 12	::120-7)					`heek	# 0	)E 46	
Agencies Notified [] EPA [] DEP [] DEP [] DOL [] Initial Hollification [] Cancellation [] Canc	Date of Notification (1)		Name	of Build	ling Ow	/ner/O	perator (2)		Partie	NE /	<u></u>		********	JP EYCLA	1040	7
Topic   Topi		fication		ALC: NO STATE OF THE PARTY OF T		У				# 0 man	ل					- Arab
Interest	1 //	ilcation			7.5	6			1 200	3				STEELS ST.		Service Control
City, State, 2 po code   City, State, 2 po c	[] Initial	tion								ill n	FC	1 1 201	Ďi.	- Comment		ļ
DOA	[X] DOL [] Emergen	су						NEW YEAR	3/25	1		1 1 701	7	112		Ì
Name of Facility Where Abatement is Taking Place (3)   Kean University — Miron Center   FACILITY INFORMATION     Name of Facility Where Abatement is Taking Place (3)     Kean University — Miron Center   FACILITY INFORMATION     Street Address   FACILITY INFORMATION     Suppose of Miron Commental Services   Facility - Galley - -	[x] Ameno	17.575.5	Unic	n, NJ	0708	33			1	Language	en monde	a construction de la constructio	ere e e e e e e e e e e e e e e e e e e	Ţ		
Name of Facility Where Abatement is Taking Place (3)   Kean University — Miron Center   Facility Where Abatement is Taking Place (3)   Kean University — Miron Center   Type of Facility (4)   School (V6+12) (Other the R-12)   School (V6+12) (Other the R-12)   Other (1e, private and commercial buildings, homes, etc.)	[ ] DCA		Name	of Conta	act				Te	lephone N	lumb	envenia	OL.			1
Name of Facility Where Abstement Is Taking Pilace (3)   School (K-12)   Street Address   Type of Facility (4)   School (K-12)   Subchapter (8 (ther than K-12) Subchapter (9 (ther than	[] Cancella	ation	Suza	anne k	(upie	С			97	3-737-	510	9		and the second	41	duar
School (K-12)   School (K-12)   School (K-12)   School (K-12)   School (K-12)   School (K-12)   Subchapter 8 (Other than K-12)   Subchapter 9 (Other than K-12)   Street Address 9 (Other than K-12)   Street Address 9 (Other than K-12)   Street Address 3 (Other than					FACI	ILITY I	NFORMATION				-		2.50		_	
1   Cluer   pryarie and commercial outrologs, homes, etc.)   County (6)   County (5)   County (6)   County	Name of Facility Where Abatement is	Taking P	lace (3	3)				Туре	of Facility (4	)						
1   Cluer   pryarie and commercial outrologs, homes, etc.)   County (6)   County (5)   County (6)   County		enter							School (F Subchap	(-12) ter 8 (Othe	er tha	an K-12)				
County (6)   County (6)   County (7)   County Code (7)   Code (7	3 T T T T T T T T T T T T T T T T T T T								] Other (i.e	. private a	ind c	ommercial I	ouildir	igs,		
County (6)								Squa	ere Feet	# of Flo	ore	RIA	α Δα			
Name of Monitoring Firm Hired by Building Owner   ASCM No.   O003   TTI Environmental   Name of Abatement Contractor (9)   Street Address   323 Changebridge Road, Suite 100   Street Address   323 Changebridge Road, Suite 100   City, State, Zip Code   Martlon, NJ 08053   Project Manager for Monitoring Firm   Telephone Number   856-985-8800   Scheduled Start Date (10)   Sched. Completion Date (11)   1/31/20   Cocupancy Status During Abatement (Check only one)   1/31/20   Cocupancy Status During Abatement (Check only one)   Describe:   Abatement Performed Outside of Normal Facility Hours - Describe:   Mini- Enclosure   Mini-								250	000	2		~60		5		
Name of Monitoring Firm Hired by Building Owner   ASCM No. 0003		oranice and			1	(STAT	E USE ONLY)	Curre	ent Use (Prior ge	if being d	lemo	lished)				
Street Address   Str		ilding Ow	ner		Vo.			ent Co	ntractor (9)							
9 East Stow Road City, State, Zip Code Martton, NJ O8053 Project Manager for Monitoring Firm				0003		4		lupite	r Environi	mental 3	Ser	vices, In	С.			
City, State, Zip Code           MarIton, NJ 08053           Project Manager for Monitoring Firm         Telephone Number 856-985-8800           Scheduled Start Date (10)         Sched. Completion Date (11) 1/31/20         1/31/20           4/15/19         1/31/20         Name of OSHA Monitor Iris Environmental Laboratories, LLC           Occupancy Status During Abatement (Check only one)         [] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours – Describe: partially vacated         Street Address         2333 Route 22 West           City, State, Zip Code Union, NJ 07083         City, State, Zip Code Union, NJ 07083         City, State, Zip Code Union, NJ 07083           Scope of Work (Check all that apply)           [] Demolition [] Renovation         [] Full Containment with Negative Pressure [] Min – Enclosure [] Glovebag Procedure           [] Value = Val								222	h = l' -			0 : 40				
Maritton, NJ 08053						+	City State Zin C	ode	nangebrio	ige Roa	ad,	Suite 100	)	-	-	
Telephone Number							The state of the s		Brook, NJ	07058						
Scheduled Start Date (10)							Telephone Numb	er			T	License Nu	ımbeı			
Alto   1/31/20	The state of the s								75-8700				00	380	52	
Street Address   2333 Route 22 West					1)				nvironmer	ntal I ah	ora	tories I	C			
Abatement Performed Outside of Normal Facility Hours – Describe:   Describe:   Describe: partially vacated   Disparation   Description   Description of   Description of   Normally Used   Solely by   No   N/A	Occupancy Status During Abatement	(Check or	nly one	)		1 1			TTTTTTTTTT	itai Lab	ora	torics, L				
City, State, Zip Code	[] Abatement Performed Outsid	ng Entire I e of Norm	Period al Faci	of Abate	ment		2	333 F	Route 22	West						
Scope of Work (Check all that apply)  [] Demolition [] ≥3 sf or ≥3 lf [X] ≥160 sf or ≥260 lf    Location of Asbestos – Containing Material (ACM) (Le., thermal systems insulation, surfacing, VAT, or other miscellaneous)    Secondary State   Secondary State   Signature	Describe:		u	my riour			-						Va. 1947			
[] Demolition [] Renovation [] Full Containment with Negative Pressure Mini - Enclosure [Mini - Enclosure] Mini - Enclo		acated						Jnion	i, NJ 0708	33						
Sality	Scope of Work (Check all that apply)								[] Full Ca	ntainmen	4	. Nameline f				
X   ≥160 sf or ≥260 lf   X   Non – Friable Procedure   X   Abatement Type   Asbestos – Containing Material (ACM) (Specify   E   E   N   N   Material (ACM) (Specify   E   E   N   N   N   P   C   C   N   N   P   C   C   N   N   P   C   C   N   N   P   C   C   N   N   P   C   C   N   N   P   C   C   N   N   P   N   N   P   N   N   N   N	• • • • • • • • • • • • • • • • • • • •			[]	Reno	vation	U.		[x] Mini –	Enclosure	t Witt	1 Negative I	ress	ıre		
S Location   Normally Used   Solely by   Asbestos - Containing   Material (ACM)   (Specify E E N No N/A   Normally Used   Solely by   Asbestos - Containing   Material (ACM)   (Specify E E N No N/A   Normally Used   Solely by   Asbestos - Containing   Material (ACM)   (Specify E E N No N/A   Normally Stems   SF or LF)   Material (ACM)   Normally Stems   SF or LF)   Material (ACM)   Normally Stems   Normally St																
Location of Asbestos – Containing Material (ACM)  Material (ACM)  TO BE ABATED In Facility (13)  Greek Lounge, exterior  Crawlspace, various  Various areas  Nomally Used Solely by Asbestos – Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify E E N N N N N N P C C C insulation, surfacing, VAT, or other miscellaneous)  For LF)  M P C C C O A A L V I P O A R S S S C Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  For LF)  M P C C C O A A L V I P O A R S S S C Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  For LF)  M P C C C O A A L V I P O A R S S S C Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  For LF)  M P C C C O A A L V I P O A R S S S S S S S S S S S S S S S S S S			s Loca	tion	Т		1000		[v] 11011	THADIC I I	T	iui e	ΙΔh	ater	man	+
Asbestos - Containing Material (ACM)  TO BE ABATED In Facility (13)  Greek Lounge, exterior  Crawlspace, various  Various areas  NJDEP Waste Hauler Jupiter Environmental Services  Material (ACM)  (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Material (ACM)  (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  NF or LF)  M P C C C C C C C C C C C C C C C C C C	Location of	No											Ту	e	Heli	
Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Greek Lounge, exterior  Crawlspace, various  Various areas  X  VAT, caulk/glaze, fire doors  TSI  VAT, glue dabs, TBD  Name of Registered Waste Hauler Jupiter Environmental Services  Name of Registered Waste Hauler Jupiter Environmental Services  Name of Registered Landfill  City, State Pine Brook, NJ  Completed By (Print or Type)  Title  Signature  Itel   Asbestos - Containing	Mai									1 0						
In Facility (13)  Yes No N/A  Or other miscellaneous)  Or other miscellaneous		too	lial Sta	ff (12)			(i.e., therm	nal syst	ems						-	
Greek Lounge, exterior Crawlspace, various Various areas  NJDEP Waste Jupiter Environmental Services  NJDEP Waste Hauler ID No. 04782  Disposal Date Pine Brook, NJ  Completed By (Print or Type)  Title  NAR S S L U U VAT, caulk/glaze, fire doors  1900 SF X  VAT, caulk/glaze, fire doors  1900 SF X  VAT, glue dabs, TBD  Sound Frequency  VAT, glue dabs, TBD  Name of Registered Landfill Alliance Landfill Alliance Landfill  City, State Taylor, PA  Signature  Date	In Facility		T	T	1		or other mis	urracing scellane	J, VAI, eous)					A	311985	
Greek Lounge, exterior  Crawlspace, various  X  VAT, caulk/glaze, fire doors  1900 SF  X  Various areas  X  VAT, glue dabs, TBD  Sources  VAT, glue dabs, TBD  Various areas  Name of Registered Waste Hauler  Jupiter Environmental Services  NJDEP Waste Hauler ID No. 04782  City, State  Pine Brook, NJ  Completed By (Print or Type)  Title  Signature  Date	(13)	Yes	No	N/A					5.50 <b>5.7</b> 0				1.0	R		S
Crawlspace, various X TSI 250 LF X Various areas X VAT, glue dabs, TBD 5000 SF X Name of Registered Waste Hauler Jupiter Environmental Services NJ City, State Pine Brook, NJ Disposal Date Pone Pone Pone Pone Pone Pone Pone Pon	Greek Lounge, exterior		X	+	VAT	, caul	k/glaze, fire do	ors	-	-	190	00 SF	L	+	U	<u>U</u>
Name of Registered Waste Hauler  Jupiter Environmental Services  NJDEP Waste Hauler ID No. 04782  City, State Pine Brook, NJ  Completed By (Print or Type)  Title  Disposal Date 5/2/19 +  Signature  Date  Date	Crawlspace, various	×			TSI									+	1	
Jupiter Environmental Services Hauler ID No. 04782 Of Waste Alliance Landfill  City, State Pine Brook, NJ Completed By (Print or Type)  Title  Signature  Disposal Date Taylor, PA  Signature  Date	Various areas		Х		VAT	, glue	dabs, TBD				500	00 SF	Х			
Jupiter Environmental Services Hauler ID No. 04782 Of Waste Alliance Landfill  City, State Pine Brook, NJ Completed By (Print or Type)  Title  Signature  Disposal Date Taylor, PA  Signature  Date	Name of Registered Waste Hauler		IDEP	M/asto	L	Cubic	Varde	Nom	a of Danistan							
City, State Pine Brook, NJ Completed By (Print or Type)  Title  Disposal Date 5/2/19 + Taylor, PA  Signature  Date			auler I	D No.												
Pine Brook, NJ  Completed By (Print or Type)  Title  Signature  Date			04782	2		Dier -	11.70									
Completed By (Print or Type)  Title  Signature  Date	Pine Brook, NJ															
Done Donie	Completed By (Print or Type)	Title				J. 5ml		Tay	/			Date				100-1
	Pane Repic	Ger	neral	Mana	ger		K-	-	(-	<b></b>			9			

Note: Work at Greek lounge/crawlspace should be completed by 4/30/19.

Amendment #1, 12/6/19: Work in corridor will take place 12/23/19 to 1/30/19, consisting of VAT/mastic removals (4,000SF).

## IN# 1.010800 B & G proj. #: 2019-271

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

	Į,				*** Sub cl	hapte	r 8 ***	Chec	k #9785				_
Date of Notification	1 (1)	IIN	lame of E	Building Owr	ner/Operator (2	2)			@ F I	N/I	E	Erran-	erca-c
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Agencies Notified	Type Notifica		treet Ado					IIAII			-	200	1 4 4
☐ EPA	Initial			ar Street					EC 11	201	9		
₩ DOL	Amend			, Zip Code k, NJ 071	ne					erva . i		ě	ľ
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□ DCA	☐ Cancell	1.1						The second section of the second second	SOCIOLE THE PARTY NAMED IN PARTY.		and the same	Park Carrier	5
			Paulin	ius Egu				9/3-	733-7355			_	
				FAC	ILITY INFORM	MATIO	N						
Name of facility wh	nere abatement	is taking pla	ice (3)					Type of Facilit	y (4) ool (K - 12)				
Weequahic H	igh School (S	Sub 8)							chapter 8 (C		han K	-12)	
Street Address								Othe	er (Private/C	omme		,	
279 Chancelle	or Avenue							Square Feet	s./Homes, e		I BI	dg. A	ine.
City (5)		Coun	ty (6)			T Co	unty Code (7)	Square reet	# 01 1 1001	3		ug. /	gc
Newark, NJ (	17112	Ess	av			1 /222	ate use only)	Current Use		g den	nolish	ed)	
Name of Monitorin					ASCM No.		Name of Abatemen	High Scho	Ol .			_	
TTI Environn		Diag. Owne	1 (0)		0003		B & G Restora						
Street Address						=	Street Address	ation, mo.					
1253 North (	Church Stree	t					105 Ryerson	Road					
City, State, Zip Cod Moorestown							City, State, Zip Code						
Project Manager for			Tr	76 NI I			Lincoln Park	, NJ 07035	711	N			
James A Gu			1	Phone Numb 356-840-8		.	Telephone Number (973)696-68	69	License 00	378			
Scheduled Start Da		ISched		tion Date (1			Name of OSHA Mo	nitor					
12/20/2019	10 (10)		8/2019				B & G Restora	ation, Inc.					
Occupancy Status (	Ouring Abateme		200 (222, 900)27 - 20 (10 5 22	// 	A STATE OF THE STA	MARKET STATES	Street Address 105 Ryerson	Road					
✗ Facility closed		- Lattice Deposit Not to the Control of the Control		tement.			City, State, Zip Code					_	-
Abatement per Describe:	erformed outside	of normal f	acility ho	urs-									
Other-Describ	oe:					_	Lincoln Park,	NJ 07035					
Scope of Work (ch							- W 32 - W - A		opening of				
☐ Demolition	X	Renovation				_	Full Containment w/n	egative pressure	Glovel	0.0000000			
>3 sf or >3 lf	X	≥160 sf or ≥				ш	Mini-enclosure		Non-fr	R			
Location of asbestos-con	taining	by mainte		y used solely istodial		ion of	asbestos-containing	Amount		е	R e	E n	E
material to be	9	staff(12)			material			(Specify LF)	SF or	m o	p a	c	C
abated iii iac	iity (13)	Yes	No	N/A						v e	i	р	L
Room 222				X	pipe insu			30 LF		X			
Room 222				X	VAT & ma	astic		700 SF		X			111
				4-						뷰	H	님	#
<del></del>										쓔	H	H	十
Registered Waste H			P Hauler	r ID# C	ubic Yards of	Waste						ш	1-
B & G Restora	tion, Inc.	l1	19563	Disposal	10			entral Landfill					
City, State Lincoln Park, I	NJ				)/19 - 12/28	/19	City, State Pen Argy	yle, PA				100	
Completed by (Print	or Type)	Title		-1	Signature		6,0		Date	. /			
Gordana Luna		Secreta	ry/Trea	surer			Gordana Luna		12/0	9/20	19		

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

Inv #10685

				,		*** Subch	napte	r 8 ***			Chec	k#	9784				_
Date of Notification	(1)	1	Name o	of Building	Own	er/Operator (2	)	-	V	!	ME	(C	E		WI		190
1 12 1/10 16	1/11 19 1			ark Pub			,			i		(U	1 1	[]	n i	-	
Agencies Notified	Type Notifica	tion	Street A							- 1	123					- 11	
	▼ Initial			edar Str	eet	*:				ales del deservoir de		DE	C 1	1 2	2019		[
₩ DOL	Amend	Iment		ate, Zip C vark, NJ		06				The second of	L		105 (	XXX	TROL	 . &	Transfer (Mar)
X DOH			Name o	f Contact	-					<del></del>	Telepho						
☐ DCA	Cancel	lation	Pau	ılinus Eç	gu						973-						
					FAC	ILITY INFORM	IATIO	N				70					
Name of facility wh	nere abatement	is taking	place (3)							Тур	e of Facility	(4)					
Newton Stree	t School (Su	b 8)										semi s	K - 12) er 8 (O		han K-	-12)	
Street Address												- 100	vate/C			,	
150 Newton S	Street										Bldg	s./Ho	mes, e	tc.			
City (5)		I C	ounty (6)				Co	inhi Cod	- (7)	50,0	uare Feet	2	of Floor	S	50+	dg. A	.ge
	7100							unty Code ate use o	5.33		rrent Use (	-	if bein	a den		d)	
Newark, NJ (		_	ssex							ea	rly childh						
Name of Monitoring TTI Environm		Bldg. Ov	vner (8)			ASCM No.		Name o	of Abatement	Contra	ictor (9)						
	Territar IIIC,					0079		-	G Restora	tion, I	nc,						
Street Address 1253 North (	Church Stree	et							Address Ryerson f	Road							
City, State, Zip Cod								City, Sta	ate, Zip Code							-	
Moorestown,									icoln Park,	NJ 07	7035						
Project Manager for		n		Phone I					one Number 73)696-686	30		L	icense				
Jim Guillardi				609-30		S2000 A			of OSHA Mor				00	378		_	
Scheduled Start Da	te (10)	Sch	ned. Com	oletion Da	ite (11	1)			G Restora		nc.						
12/20/2019		0	1/01/202	20					Address								
Occupancy Status I	During Abateme	nt (Chec	k only one	e)				105	Ryerson F	Road							
Abatement pe	d/vacated during erformed outside				•			City, Sta	ate, Zip Code								
Describe:	oe: occupied						_	Linc	olnPark, N	J 070	35						
Scope of Work (ch		y)															
☐ Demolition	X	Renova	ation				X	Full Conta	ainment w/ne	gative	pressure		Glove	oag pr	ocedu	re	
$\square > \underline{3} \text{ sf or } > \underline{3} \text{ if}$	X	≥160 sf	or <u>&gt;</u> 260 If					Mini-encl	osure				Non-fr	iable	proced	lure	
Location of			tion norm			1					300.30.000		ellender VI	R	R	E	E
asbestos-con		by mai	ntenance	/custodial					containing		Amount	0=		e m	e p	n	n
material to be abated in faci		Yes	No		N/A	material (	(ACM)				(Specify LF)	5F 0	)T	o v	a	а	C
		100												е	r	р	-
Room 110 Clos					X	walll & cei		plaster			800 SF			X	닏	ᆜ	14
Room 110 Clos	et	<u> </u>	_	_  _	X	wall plaste	22.2				80 sf			X		븜	井
Vestibule		-	#	_	X	The same of the sa	CHICAGO CO.	-			1,480 sf			X	님	븜	#
Basement			#=		X	pipe insula				_	140 lf			X	H	븜	H
Registered Waste H	auler	IN.	JDEP Hau	uler ID#	X C	ubic Yards of V		Name	of Registered	Landfi		_		X	Ш	Ц	
B & G Restorat			19563	1	_  _	25			Grand Ce					- // 1/10)			
City, State Lincoln Park, N	11				sal D 2/20	ate /19 - 01/02/	20	City, S	State Pen Argyl	e, PA							
Completed by (Print		Title				Signature		Q, 1	na Luna		***************************************	100	Date				-
Gordana Luna		Secre	tary/Tre	easurer				Jordan	na Luna			1	12/08	5/201	9		

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22	10		NC	TIFI	CATIO	ON OF A	New Jersey SBESTOS ABA	TEMENT		n 3 detail 3, near air	مدت تحصصها	<del>-</del>	
CK0158	PAI	M		(	Pursu	ant to NJ	AC 8:60 and 5:	16)		EC 1	1 ;	2019	Section and
Date of Notification (1)	•	- manager	_				ng Owner/Operator	(2)					1
/	9 /	1	9		C	ounty of	Camden	Job N	lumber: 1910-				
Agencies Notified	Type Notin	fication	1		Stre	et Address			2 Colored C	LICK			1 102
☑ EPA ☑ DOLWD	☐ Initial	dad			5	20 Market	Street			TEL GARDON POLICE	CTT-MENIAPING	artistar **	/
☑ DHSS	Amend		#			, State, Zip							
☐ DCA	☐ Emerge			ng		amden, N							
(NJAC 5:23-8)	justifica			_		ne of Conta			Telephone N	lumber			
	☐ Cancel	lation			С	hris Tass	<u> </u>		609-670-	1929			
N					F	ACILITY II	NFORMATION						
Name of Facility Where A	batement is	s Takin	g Plac	ce (3)				Type of Facilit	ty (4)				
City Hall 6 <sup>th</sup> Floor								School (K-					
Street Address								Subchapte	r 8 (Other than K private and com	(-12) marcial h	uildin	ac	
530 Market Street								homes, etc	c.)	i i i ci ci di ci	unan	gs,	
City (5)								Square Feet	# of Floors	B	ldg. A	\ge	
Camden								TBD	18		192	9	
County (6) Camden					Cou	unty Code (	7)(STATE USE ONLY)	1	Prior if being dem	olished)		F/551,4170	
	F		_					Commerci					
Name of Monitoring Firm I Pennoni Associates		ilding (	Owner	(8)	ASCN	/I No.	Name of Abatem		*				
Street Address	V.							d Mold Service	es, Corp.				
515 Grove Street							Street Address	V-2-2-7					
City, State, Zip Code					1		1835 Underw						
Haddon Heights, NJ							City, State, Zip C						
Project Manager for Monito				Tol	ephone	Ma	Delran, NJ 08	8075					
Brian Clark	Jing i iiii					7-0505	Telephone No.	•//	License No.				
Start Date (10)	- 1	Sched	uled (			ate (11)	609-702-0400 Name of OSHA M	***	00862				
12 /20 / _						19	EMSL Analyt						
Occupancy Status During A								icai, inc.		12			
□ Facility Closed/Vacated					ment		Street Address	4- 400 N - 41					
Abatement Performed C	Outside of N	lormal	Facilit	y Hou	rs - Des	scribe	200 U.S. Rou						
Time of Abatement:	AM-	PN	Λ/	PM		AMI	City, State, Zip Co						
Scope of Work (Check all the	hat apply)	PRI	har-	2ncl	SNH		and the second s	i, NJ 00077					
			_		atur	day I S'n	HAM Full Cont	ainment with Ne	gative Pressure,				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>				enovat		288.0	☐ Mini-Enc	losure	1 WKAP &	cut			
				arionu	<i>7</i> 11		⊠ Non-Exel     ■ Non-Exel	mpted (*) and No	on-Friable Proced				
				Loca						-	atem	ent T	vne
Location of Asbestos-Containing Ma				Norma ed Sole			Description o						
TO BE ABATI		")	Ma	intena	nce/	Asbes (i.e.	stos Containing Mai , thermal systems i	terial (ACM)	Amount (Specify	Removal	Repair	пса	ncic
IN Facility			Cus	todial (12)	Staff?	,	surfacing, VAT,	or	SF or LF)	oval	7	Encapsulate	Enclosure
(13)		ŀ	Yes	No.	N/A	1	other miscellaned	ous)				late	е
6 <sup>th</sup> Floor					N/A	Floor Til	le& Mastic		200 SF			П	
6 <sup>th</sup> Floor						Pipe Ins						7	
			П	П		i ipe iiis	diation		180 LF				뷔
													뷔
Name of Registered Waste	Hauler				JDEP V	Naste	Cubic Yards of	Name of Regis	stered Landfill		Ш	Ц	Ц
Waste Management				0.0000	auler IC		Waste	Grand Cer					
City, State					17273		Disposal Data		iuai				
Lafayette, NJ							Disposal Date 12/30/2019	City, State Penn Argy	le. PA				
Completed By (Print or Type	2)	Title					Signature	\	ometines serve	Date			
Kaysi Gruner		0.0000000000000000000000000000000000000	fice A	ssist	ant		971	1	L	Date	19		
SB-41							MA			12-9	11		

03 2019 03:49PM NJ A	Asbestos C	Control 60	09.633.06	564		page 1		Tr	W#1	101	101
B & G proj. #: 2019-	263	AII	(2010)	*** EMER	bes 8:60 GE	tos Abatement	G G	Check	# VI (6		
11 12 1/10 13 1/11 18 Adencies Notified Type No	m*	Merec Street Ad	Building Q lith Levin	Wher/Operator (2			i Naacan		11/		
D DEP In	ittei Nendment	City, State	a, Zip Code	7049		A CHECKE SECTION	LICE LICE	Jeren ,	<u> </u>	Porton I	
E DOH ☐ Cal	ncellation	Name of C	ontact				TT	elephon	ie Number		
		Mere	dith Levir							7	
Name of facility where abetem Meredith Levine	ent is teking	piece (3)		CILITY INFORM	ATIC		Type of	Facility (	(4)		
Syeat Address								Subcha Other ( Bidgs./t	l (K - 12) apter 8 (Other Private/Comm Homes, etc.	inan K- srcial	12)
City (5) Montcleir, NJ 07042	E	sunty (8)			Č6 (51	unty Code (7) ate use only)	Current	Use (Pr	s of Floors ior It being den		g. Age
Name of Mondaring Firm Hired	by Skig. Ow	mer (S)		ASCM No.		Name of Absternant of B & G Restoration	ontractor	7975			
Cay, State, Lip Gods Project Manager for Monitoring P	#IM	[P	hone Numi			Street Address 105 Ryerson Ro City, Stele, Zip Gode Lincoln Park, N Yelephone Number					
Scheduled Start Data (10) 12/05/2019		id. Completi	on Dale (1	7)		(973)596-5869 Name of OSHA Monito	97		CO378	mr	
Company Status During Abaten Facility closed/vacated duri Abatement performed outsi Describe: Other-Describe:	nent (Check		ment.			B & G Restoration Street Address 105 Ryerson Ro City, State, Zip Code Lincoln Park, NJ	ad				
Coppe of Work (check all that ap Dempition  >3 sfor>3 if					∃ F	rap & cut uli Containmant w/nage		re 🔲	Glovebeg pro	probes	
Lecation of	la locatio	an nonrally (	odial odial	Description	ofas	bestos-conteining	Amo	uni offy SF	Nan-frieble p	K B R	E 0
asbestos-containing material to be abated in facilty (13)	Binff(12)	No.	NIA	material (AC	, aces		laba			8 0	1 1 1
asbestos-containing	Yes Yes	No	N/A	duct insulation		wrap & cut)	LF)		. v	p	-
astestos-containing material to be absted in facility (13) master bedroom bathroom	Yes Yes	No	N/A			wrap & cut)	LF)		V	, , ,	旧
asbestos-containing metarial to be abated in facility (13)  master bedroom bathroom  registered waste Hauler  a G Restoration, Inc.	Yes INJOE	P Haular IC		duct insulation	on (	Name of Registered La Grand Central La	66 sf		. v	, , ,	
asbestos-containing metarial to be absted in facility (13)  master bedroom bathroom  registered Waster Hauler  8 & G Restoration, Inc.	Yes NJDE	P Haular IC	Cli	duct insulation	on (	National Programmers In	66 sf		. v	, , ,	

State of NJ Notification of Asbestos Abatement

B & G proj. #:

2019-263

(Pursuant to NJAC 8:60-7 and 12:120-7)
\*\*\* FMFRGENCY \*\*\*

D G O proj. #.			***	EMERO	GEN	ICY ***	Check #	9776				<u>.</u>
Date of Notification (1)	IIN	ame of Build	dina Owne	er/Operator (2)		re-						
1 2 / 10 3 / 1 9		Meredith	724	,			EGFI	Wisi	22100	Į.		
Agencies Notified Type Notificat	ion S	treet Addres	S				Company of the state of the sta	0	Tentinent gran	Plantes terrinal		
DEP Amend		ity, State, Zi Montclaii		042			DEC. 1 / 20	19	ml / vzs/			
₩ DOH	- 11	ame of Cont	act			1 7.8	Telephone	Number				
☐ DCA ☐ Cancell	ation	Meredith	Levine			* **** ** ****************************	Control of the second					
			FACIL	LITY INFORM	ATION	1						
Name of facility where abatement	s taking pla	ice (3)					Type of Facility (4	(K - 12)				
Meredith Levine								pter 8 (Oth	ner th	ian K-	12)	
Street Address							X Other (I	Private/Cor Homes, etc	nme			
								of Floors		Blo	g. Ag	e
City (5)	Cour	ity (6)	HIMPSON THE PROPERTY OF THE PR			inty Code (7)		181-1		- Cala	4)	
Montclair, NJ 07042	Ess	sex			(Ota	ite use only)	Current Use (Pri residential	or it being	aem	olisne	2)	
Name of Monitoring Firm Hired by	Bldg. Owne	er (8)		ASCM No.	T	Name of Abatement	Contractor (9)					
					_	B & G Restorati	on, Inc.					
Street Address						105 Ryerson R	oad					
City, State, Zip Code					-	City, State, Zip Code						
		To	N .			Lincoln Park, I	NJ 07035	License N	lumb	201		
Project Manager for Monitoring Firm	п	Pno	one Numbe	er		(973)696-686	9		378			
Scheduled Start Date (10)	Sched	. Completion	n Date (11	)	-	Name of OSHA Moni		-				
12/05/2019	12/0	06/2019				B & G Restorat	ion, inc.			-		
Occupancy Status During Abateme	nt (Check o	only one)				105 Ryerson R	oad			36		
Facility closed/vacated during Abatement performed outside						City, State, Zip Code						
Describe:					-	Lincoln Park, N	J 07035					
Scope of Work (check all that app	ly)				X	wrap & cut						-
☐ Demolition 🕱	Renovation	n				Full Containment w/ne	gative pressure [	Gloveb	ag pr	ocedu	re	
<b>X</b> >3 sf or >3 if □	≥160 sf or					Mini-enclosure		Non-fria				1
Location of asbestos-containing		n normally u enance/cust		1	an af .	asbestos-containing	Amount		R e	R	n E	E
material to be	staff(12)	T	Γ	material		[18] (18] [18] [18] (18] (18] (18] (18] (18] (18] (18] (	(Specify S LF)	For	m o	p a	a	C
abated in facility (13)	Yes	No	N/A						v e	r	p .	-
master bedroom bathroom			X	duct insul	ation	(wrap & cut)	68 sf		X	片	#	ዙ
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,					- CANADO SE AN							
					Masta	IN	1					Ш
Registered Waste Hauler  B & G Restoration, Inc.		EP Hauler II 19563	U# C	ubic Yards of 2	vvaste	Name of Registered Grand Central						
City, State Lincoln Park, NJ			Disposal D	Date 2/06/2019		City, State Pen Argyl, PA						
Completed by (Print or Type)	Title			Signature				Date			- 1	_
Gordana Luna	Secreta	ary/Treasi	irer	1		Gordana Luna		12/03	3/20	19		

Date of Notification (1)	∑ 2019-26†	Tos Control	No (Pur	Od State of State of A State stant to NJAC *** EMER	page 1 te of NJ sbestos Abateme 8:60-7 and 12:12 RGENCY ***		DOL	esercianista en a	V E
11/2/10/2/		Nem	of Building of Chard Hart	Owner/Operator (		1-344	-2 - vanatha a a	MORNORY	
	ype Notification	Art I mann	Address				DE		1
FI PEP	initial [					IL		77	
M DOL	Anendm	City,	state, Zip Cor	de		1417	NICHA		
DOH DOH		I NE	Wark, NJ (	7106		"			
DCA C	Cancellat	ion	of Contact				Telep	hone Number	
		II RI	chard Hari				ه ـ ـ ا		
Namo of facility where a	ibatement is	taking piene M	F	ACILITY INFORM	MATION				
Richard Hart			,			1	pe of Facili	ty (4)	
Street Address	FIRST PROPERTY TO SE							noof (K - 12) schapter 8 (Oth	
							E Othe	er (Private/Com	mercial Mercial
City (5)	-	County (6)				- 5	quara Feel	# of Floors	Bidg.
Newark, NJ 07106	6	Essex			County Code (7) (State use only)	-	4		
Name of Monitoring Firm	Hired by Bio		Western	ASCM No.		1 1 50	Sciennial	(Prior if being d	(bedeilone
				Macay No.	Name of Abate				Control Control Control
Street Address				ACTOR/OFFICERAL	B & G Res	toration	ino,		
					I I SOME STANDED WEST				
Cay, State, Zip Code		-			105 Ryers	on Road			
Day, State, Zip Code					City, State, Zip	Code Code	and the same of		
City, State, Zip Code Project Manages for Monito	oring Firm		Phone Num	nber	City, State, Zip Lincoln P	Code Code Park, NJ 0	and the same of		
Project Manager for Monito			1		City, State, Zip Lincoln P Telephone Num (973)696	Code Code Park, NJ 0	and the same of	License Nur	
Project Menages for Monito		Sched. Comp	etion Date (		City, State, Zip Lincoln P Lincoln P Telephone Num (973)696 Name of OSHA	Code Code Park, NJ 0 nbar -6869	7035	License Nuj 0037	
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2019-261

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

B & G proj. #:	2019-26	61		(Pursu	ant to NJAC	8:60 8:60	0-7 and 12:120-7) ENCY ***	Cha	ck # 9775				
Date of Notification	(1)					-	-1401	1 2 100	760		77 1		
1 1 2 1 / 1 0 1 2 Agencies Notified I	1/119			Building Ov d Hart	wner/Operator (	2)			C E I			U E	A THE STATE OF THE
EPA	Type Notifi	cation	Street Add	dress				111111	ro 1.			111	337
☐ DEP	X Initia	al	City State	, Zip Code				_ [13 A1] <b>U</b>	EC 1	20	9		
<b>⋉</b> DOL	Ame	ndment	Newa	rk, NJ 07				7.682	eros cu Licensi	10 17 1 10 17 1 11 18 18	ÖL.	d A	
₩ DOH	☐ Cano	ellation	Name of C					Teleph	one Numbe	CONTRACTOR OF THE PARTY OF THE	20 pt 100 to	dimerkiy en 12	ma = -2
			Richa	rd Hart	011 (7) (1) (7)								
Name of facility who	ere abatemer	nt is taking r	place (3)	FA	CILITY INFORM	MATIC	DN	T=- (= ::::					
Richard Hart		3 ,	(0)					Type of Facility School	/ (4) ool (K - 12)		0.0		
Street Address				~				☐ Subo	chapter 8 (C	ther	than	K-12)	j
0.0007,1001033								Bldgs	r (Private/C s./Homes, e	tc.			
City (5)		Cot	unty (6)			Co	ounty Code (7)	Square Feet	# of Floor	S	E	Bldg. A	Age
Newark, NJ 07	7106	Es	ssex			(SI	tate use only)	Current Use (	Prior if bein	g der	nolish	ned)	
Name of Monitoring	Firm Hired b	y Bldg. Owr	ner (8)		ASCM No.		Name of Abatement					-	
							B & G Restora						
Street Address							Street Address 105 Ryerson F						
City, State, Zip Code	2					-	City, State, Zip Code		<del>viiliaa salaasia</del>				
Project Manager for M	Annitorina Eir	m	T T D		100.00		Lincoln Park,	NJ 07035					
- 18	:5:			hone Numi	***		Telephone Number (973)696-686	9	License 00	Numl 378	er		
Scheduled Start Date	(10)	Sche	d. Complet	ion Date (1	1)		Name of OSHA Mon	177.5			F1:		7.5
12/04/2019			05/2019				B & G Restorat	ion, inc.					_
Occupancy Status Du							105 Ryerson R	oad					
Facility closed/v Abatement performance Describe:	ormed outsid	g entire per e of normal	od of abate facility hou	ement. rs-			City, State, Zip Code						
Other-Describe						-	Lincoln Park, N	J 07035					
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Demolition	X	Renovation	n			☐ F	full Containment w/neg	gative pressure	✓ Gloveb	ag pro	ocedi	ıre	
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abated in facility	(13)	Yes	No	N/A				LF)	A 50%	o v	a	a p	L
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B & G Restoration	n, Inc.		9563	U#   CC	ibic Yards of W 1	aste	Name of Registered I Grand Central I	Landfill andfill					
City, State Lincoln Park, NJ				Disposal Da	ate /05/2019		City, State Pen Argyl, PA					•	
Completed by (Print or Gordana Luna	Type)	Title Secretar	y/Treasu	rer	Signature		Gordana Luna		Date 12/02/	2019		ν_	

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Date of Notification (1) 12/4/19				of Building						DEC	1 0	20	19		
Agencies Notified  EPA DEP DEP Amended Amendmer			City, Sta	Address ate, Zip C n Towns				- Land	ASE	BESTO	OS GO JENS	MTI	ROL	&	
Emergency justification Cancellation	(including			of Contact		J			1.0	ephon 2-672					
Name of Facility Where Abatement is Taki	na Place /	2)	FAC	ILITY INF	ORMAT	ION	T =								
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County (6) Monmouth			County Code (7) (STATE USE ONLY)  Current Use (Prior if being demolis home						nolishe	ed)					
									batement Contractor (9) AD PROFESSIONALS						
Street Address	et Address Street Address 6 WHITE DOVE COURT														
ity, State, Zip Code		70					Zip Code OOD, NJ	08701							
roject Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-		No. 9078		Licer 1200	nse No )	•			
tart Date (10) 12/16/19	Schedul 12/17/		npletion	Date (11)				SHA Monito D PROF		NALS	 S				
ccupancy Status During Abatement (Che Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of	Abaten	nent	31		City, S	HITE	DOVE C Zip Code OOD, NJ		***		=			
cope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renova Demolit				×	Ft M	ull Containr ini-Enclosu lovebag Pron-Exempt	ment with						
Location of	- 1 CC 22	Locati	988866		Do	scription			7 (7 (8)	. 11011	, masic		Abate		
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Sole intenar todial S (12)	nce/		tos Con thermal surfa		lateria insu T, or		(S	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A		DIDE II	NSULA	TIO	NI	1	20LF				ite	Ф
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ompleted by OSEPH PERLSTEIN	Title OWN	IER			S	ignature		-			Date 12/4				

3992600

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) 12/07/2019 Ryan Lopez Agencies Notified Type Notification Street Address **EPA** Initial DEP Amended City, State, Zip Code X DOL Amendment # Union, NJ 07083 Emergency (including × DOH Name of Contact justification) Telephone Number DCA Cancellation Ryan Lopez **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residential Property School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, × etc.) City (5) Square Feet # of Floors Bldg. Age Union 1,500 2 1935 County (6) County Code (7) Current Use (Prior if being demolished) Union (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Danvic Contracting LLC Street Address Street Address 240 S. 5th St. City, State, Zip Code City, State, Zip Code Elizabeth, NJ 07206 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 908-906-4123 01355 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12/16/2019 12/17/2019 Iris Environmental Laboratories, Inc. Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours
Other – Describe: OCCUPIED City, State, Zip Code × Union, NJ 07083 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure × ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Normally Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Maintenance/ Amount TO BE ABATED Encapsulate (i.e. thermal systems insulation, (Specify Removal Custodial Staff? In Facility Repair surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement X Pipe Insulation 10 LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Danvic Contracting LLC Fairless Landfill 37574 City, State Disposal Date

TBD

Signature

Title

Owner

City, State

Morrisville, PA

Do not use this form for asbestos licensure exempted activities.

Date

12/07/2019

Elizabeth, NJ

Completed by

Jeymy Donneys

Inv# 1608	(7)			5	State of N	New	Jersev	,	TIME TO THE TOTAL PROPERTY.	Sales Sa		-		
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Date of Notification (1)	0010			Name	e of Buildin	ng Ov	vner/Operator	(2)	Pro S					71.32
12 / 05 /	2019	_		Gre	gg Walls	s			U III DI	EC 1	1	2019	)	POTT PRESENT
Agencies Notified Type Notifica	ation			Stree	et Address	1000		-						-
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Project Manager for Monitoring Firm			Tele	phone	No.		ephone No.	Park, NJ 07	424 License N			_	-	_
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Scope of Work (Check all that apply)		WINDS NO.				20-177	□ Full Cont	ainment with Ma	gotivo Proces	-				
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Date of Notification (1)		Nam	ne of Building Owner		or (2)		DEC 11	201	19				
Agencies Notified Type Notification	n	Stree	et Address	. 1		1		201	9	- Comment	2		
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Project Manager for Monitoring Firm		Telepi	none No.		Neck, New	Jersey	07722 License N						
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Management & Enviro. C	onsulting	Servic	98				onmental, LLC								
Street Address PO Box 341						Street Address	220000								
City, State, Zip Gods		623 Cutter Avenue City, State, Zip Code									-				
Chesterfield, NJ 08515						Maple Shade									
Project Manager for Monitoring	Firm		Tele	phone	Nà.	Telephone No.		License No.			ar in				
Bill Welsgarber			609-298-4070 856-766-0099 00842												
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S Facility Closed/Vacated Duri				nont		200 Route 13	© North								
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Tovalle	2018		St	ate of	New J	ersey				Check	# 16	779				
JW1,	DATE					TOS ABATEMENT		2								
Date of Notification						7 and 12:120-7 Owner/Operator			FR	E	P W	1 1	Drug Drug			
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	[]Cancellat	ion														
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Carol Dalessio			_					]School		5.7						
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Street Address						[X]Other (i.e., private & commercial buildings, homes, etc.)										
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Name of Monitoring F. Owner (8)	irm hired by B	urrarng	ASC	M No.		Name of Abate			10-0							
N/A Street Address				AZTECH MANAGEMENT, Inc.												
Street Address						86 Christopher St.										
City, State, Zip Code	9					City, State,				-						
						Montclai			42							
Project Manager for 1	Monitoring Fire	n Tel	ephon	e Numb	er	Telephone Numl	ber		Į.	icens	e Numi	ber				
		N/	A			(973) 744	-880	0		003	71					
Scheduled Start Date	The state of the s	. Compl			(11)	Name of OSHA N	Monito	-			8		19			
12 21 19 Month Day Ye	ear Mon		2 av	19 Year		N/A			-							
Occupancy Status Dur	ing Abatement	(Check	only	one)		Street Address	s									
[X]Facility Clos of Abatement												02-17-00-2				
[ ]Abatement Per	formed Outside tibe: «OffHours			Facili	ty	City, State,	Zip Co	de								
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Scope of Work (Check	all that apply	y)					a		hh N	D						
[X]>3 sf or	>3 lf	[3	[]Renc	vation	ı	[ ]Full [x]Mini-			th Negative	Pres	sure					
[ ] <u>≥</u> 160 sf o	r ≥260 lf	1	]Demo	lition	1	[X]Glove			re							
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TO BE ABA		te	enance	≥/	ins	(i.e., thermal sulation, surfa			LF)	V Z	A	S	S			
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City, State		14	, 0-50		Dis	posal Date	_	, State								
Montclair, NJ	07042				1	2/23/19	Br	onx,	NY, 104	14						
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Constantine Vi		: side:	nt				7.	ti. 1	Aio.		e 6/201	9				
						(Ch	744	nep	11/100	1						
36 E 45th Street							1977									

12/6/2019

Constantine Vivian

President

NT# | UU | U Check # 16777 AM DATE NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification (1) Name of Building Owner/Operator (2) John Passanante 12/6/2019 Agencies Notified Type Notification Street Address DEC 2019 [ ]EPA [X] Initial Notification [ ] DEP City, State, Zip Code [ ]Amended West Orange, NJ, 07052 ASBESTOS CONTROLIA [X] DOL Notification LICENSING [X] DOH Name of Contact Telephone Number [ ]EMERGENCY John Passanante [ ]DCA [ ]Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) John Passanante - [ ]School (K-12) [ ]Subchapter 8 (Other than K-12) Street Address [X]Other (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age County County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) West Orange West Orange Name of Monitoring Firm hired by Building ASCM No. Name of Abatement Contractor (9) Owner (8) AZTECH MANAGEMENT, Inc. Street Address Street Address 86 Christopher St. City, State, Zip Code City, State, Zip Code Montclair, NJ 07042 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number N/A (973) 744-8800 00371 Scheduled Start Date (10) Sched. Completion Date (11) Name of OSHA Monitor 12 17 19 12 19 N/A Day Year Month Month Day Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period of Abatement [ ]Abatement Performed Outside of Normal Facility City, State, Zip Code Hours - Describe: «OffHours Descript» [ ]other - Describe: «Other Occupancy Descript» Scope of Work (Check all that apply) [ ]Full Containment with Negative Pressure [X]>3 sf or >3 lf [X] Renovation [X]Mini-Enclosure [ ]>160 sf or >260 lf [ ]Demolition [X]Glovebag Procedure [ ]Non-Friable Procedure Abatement Type Is Location Location of Description of Normally NCAP Asbestos-Containing NCHOSD Asbestos-Containing Used Amount Solely Material (ACM) Material (ACM) EP (Specify MOV By Main-TO BE ABATED (i.e., thermal systems SF or tenance/ AI In Facility insulation, surfacing, VAT, LF) Custodial A U (13)Staff (12)
Yes No N/A or other miscellaneous) R E Basement Pipe Insulation 35 LF

Completed By (Print or Type) Tit Constantine Vivian Pr

Name of Registered Waste Hauler

Montclair, NJ 07042

AZTECH MANAGEMENT, INC.

Title President

NJDEP Waste

Hauler ID No. 17040

Cubic Yards

of Waste .5

Disposal Date

12/20/19 Bronx, NY, 10474

City, State

Name of Registered Landfill

Tri - State

Date 12/6/2019

City, State

1004125 INV# 10	1001			C4-4 5 N									1 1				
PA	AID	NOT	TIFICATI (Pursua	State of N ION OF AS ant to NJA	BESTO	SABATE	EMENT (0)		EC	E							
Date of Notification (1) 12/06/2019				e of Buildin		r/Operato	r (2)			. 1			_				
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Name of Facility Where Abatement is Ta	king Place	(3)	FA	CILITY INF	ORMA	TION	Type of Fac	ility (4)									
private house							School	20 935									
Street Address							Subcha	pter 8 (C	Other than K	(-12)							
City (5)			etc.)						te & comme	rcial bu	uilding	s, ho	m				
Bloomfield							Square Feet	#	f of Floors		Bldg.	Age					
County (6)			Count	y Code (7)			Current Use	/Drior if I	oina dome	i'-b-ad\							
Essex			(STATE USE ONLY)						Prior if being demolished)								
Name of Monitoring Firm Hired by Buildin	g Owner (8	3)	ASCM No. Name of Abatement Co						ontractor (9)								
Street Address																	
				Street Address 246 Gaston Ave.													
City, State, Zip Code							tate, Zip Code						_				
							eld NJ 0702										
Project Manager for Monitoring Firm		Teleph	one No.			one No.		License	No.			-					
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Abatement Performed Outside of No. Other – Describe:	mal Facilit	y Hour	S			City, State, Zip Code											
Scope of Work (Check All That Apply)						Garfie	eld NJ 0702	26									
≥3 sf or ≥3 if	[Z]	<b>7</b>				তো											
≥160 sf or ≥260 lf		Renova Demolii				Ê	Full Contain Mini-Enclos	ment wi	th Negative	Pressi	ure						
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	Is	Locati	ion				Non-Exemp	ted (*) ar	nd Non-Fria	ble Pro	Ocedur Abate		+				
Location of		Normal	ly		Des	cription o	ıF.					уре	ı				
Asbestos-Containing Material (ACM)  TO BE ABATED	Ma	ed Sole iintenai	nce/	Asbest	os Conta	aining Ma	terial (ACM)	110	Amount			ш					
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ame of Registered Waste Hauler		N.	JDEP W	aste	Cubic Y	'ards	Name	of Registe	ered Landfill								
Rizov LLC		Ha	auler ID 037825	No.	of Wast				Landfill								
ity, State		00	020		TBD Disposa	al Date	City, Sta		Landilli								
Sarfield NJ					TBD		11 2000000	rille PA									
ompleted by leksandra Rizova	Title					nature	1		Date								
Aleksandra Rizova Owner  ZATO 12/06/2019																	

Dec 06 19, 01:02p

Date of Notification (1)

12/08/2019

EPA

DEP

DOL

DOH

DCA

Drivele house

Seest Address

Bloomfield County (6)

Street Address

Start Date (10)

12/08/2019

City, State, Zip Code

Project Manager for Monttering Firm

Other - Describe:

2160 sfor 2260 W

23 st ar 25 11

Scope of Work (Check All That Apply)

Location of

Acceptos-Containing Material (ACM)

TO SE ASATED

in Fadility

[13]

Basement

Hauler ID No.

0037825

Ties

Owner

of Weste

Disposal Date

Stensture

ZA

TED

TED

Name of Registered Weste Hauler

City (6)

Essax

133

133

Agencies Nothied

Goran Rizov

Type Notification

Inillel

Amended

Amendment #

lustification)

Cancalization

page 1 9732727726 0.2 7 1 8145 L MITELE State of New Jersey NOTIFICATION OF ASSESTED A SATEMENT DOL 10 DAY Name of Building Owner/Operator (2) Patricle Tryan Elfeet Address City, State, Zip Code MANIES 200 W/ 100 Bloomfield NJ Emergency (including Name of Contact Telephone Humber Patricia Tryan FACILITY INFORMATION Name of Fedity Where Abatement is Taking Flace (3) Type of Fecility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, elc.) Square Fost # of Floors elda. Ago County Code (7) Gerrent Use (Prior II being demblished) (STATE USE CHET) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abstament Contractor (9) RIZOVLLC Street Address 248 Gaston Ave. City, State, Zip Code Garrield NJ 07028 Tobahana No. Telephone No. License No. (652)262-8008 01389 Schaduled Completion Date (11) Name of CSMA Monitor 12/10/2019 RECV LLC Occupancy Status During Abstracts (Creck Only One) Street Address 246 Gaston Ave. Facility Closed/Vacated During Entire Period of Abatement Absterner Performed Outside of Normal Facility Hours City, State, Zip Code Garfield NJ 07026 Renovation Full Containment with Negative Pressure Demestion Mint-Focionum Glovebag Procedure Nen-Esampted (°) and Non-Eriable Presedure is Location Abstract Type Normally Description of Used Solely by Asbestos Containing Materiel (ACM) Acresment Walntenanca/ Enuspendate (I.a. thermal systems insulation, (Specify Regulation Custodal Staff? Rapper surisding. VAT. or SP OF LEY (12) other miscellanecus) Yes No NIA K Bolar 100 SF × NJOSP Weste Cubic Yerda Name of Registered Landiel

RIZOV LLC

Gerfield NJ

Completed by

Aleksandra Rizova

Chy, State

Date

12/06/2019

Fairless Hilla Landfill

Clay, State

Morisville PA

Lnv#	106	74	Alse		e of								
Proj. #: 19-269		•				tos Abatement 60 and 12:120		Firm E	@ E	n n	11 8	2 7	Dayney
CK 1190	PA	AID)	(1 31)	dunt to 1407	.00	00 and 12,120	,	DE	GE	1		וועו	A PARTIES OF THE PART
Date of Notification (1)   1   2   /   0   5   /   1   9		Name of E		vner/Operator (	2)			D	EC 1	1 20	119	To State of	
Agencies Notified Type Notific	cation	Street Add							or the second		ritoria	أدع	$\rightarrow$
DEP Amended								ASIE	ESTOS ( LICEN	DOME OFFICE	MOL.	结	in the second
DOL Amendment	#:	City, State	, Zip Code						and Carlons	20111 6 404			
DOH Emergence (including			air, NJ 07	042									
justificatio		Name of Co	ontact					Telepho	ne Numb	er			
DCA Cancellati	ion	David											
			FAC	CILITY INFORM	ЛАТІС	ON							
Name of facility where abatemen	it is taking p	place (3)						Type of Facility					
Residential									ol (K - 12		than b	(12)	
Street Address							-	○ Other	hapter 8 ( (Private/ ./Homes,	Comm		(-12)	
							_	Square Feet	# of Flo		В	ldg. A	\ge
City (5)	Col	unty (6)				ounty Code (7)		1,200 SF	02		70		
Montclair, NJ 07042	Es	sex			(Si	tate use only)		Current Use (F Residential	Prior if be	ng der	nolish	ed)	
Name of Monitoring Firm Hired by	y Bldg. Owr	ner (8)		ASCM No.	Щ	Name of Abaten	nent						
N/A						KLOMAX, I		3.34					
Street Address					_	Street Address						_	
						309 W. End	Ave	)					
City, State, Zip Code						City, State, Zip C	ode						
Project Manager for Monitoring Fire	<u> </u>	In			_	Hopatcong,		07843					
r 19,000 Manager for Monitoring Fill		P	one Numb	er .		Telephone Numb			License 0200		ber		
Start Date (10)	ISche	d. Completic	on Date (1	1)	_	Name of OSHA	_	itor	0200				
15 N			on Date (1	1)		KLOMAX, I		2000					
12/17/19 Occupancy Status During Abateme		2/2019				Street Address							
Facility closed/vacated during			ment			309 W. End		:					
Abatement performed outside	e of normal	facility hour	rs-			City, State, Zip C	ode						
Describe: NORMAL 1	HOURS				-	Hopatcong, 1	NIC	17843					
Scope of Work (check all that app								Full Containment w	/negative	nroce			
≥3 sf or ≥3 lf	Renovation	on					_	Mini-enclosure	megauve	hies	uie		
≥160 sf or ≥260 lf   □	Demolitio	n						Glovebag procedu				******************************	
Location of	Is locatio	n normally i	used solely	1				Non-Exempted (*)	and Non-	T R	R	E	T
asbestos-containing material (acm) to be	staff(12)	enance/cust	odial			sbestos-containing	g	Amount		e m	e p	n	E n
abated in facility (13)	Yes	No	N/A	material (/	ACM)			(Specify S LF)	F or	0	a .	a	C
Kitchen	-			Di I L						е	r	р	
ANTOHOLI		LX		Pipe Insulat	ion			26 LF		X		ᆜ	
-							_			#	片	부	ዙ
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							-			片	H	片	ዙ
Registered Waste Hauler KLOMAX, LLC		EP Hauler II		ubic Yards of W	/aste	Name of Registe				1			
City, State		8241 Ir	Disposal D	yds ate			N, 1	RESOURCE RE	COVER	Y			
Hopatcong, NJ 07843		ľ	TBD			City, State TULLYTOW	N	PA					
Completed by (Print or Type)	Title			Signature,		1	11,	***	Date			_	
Paige Boylan	Owner			42	2				12/05/	19			
ACD 44	" Do not us	this form f	or ashesto	e licanestra ava	mnter	d activities							