State of New Jersey

Check # 15765

								ſ	Che	eck #	1576	56	
		N/OTT 7		ate of New	STOS	ABATEMENT		Lassymann	ME	G			E
		(Purst		- NITAC 8-60	-7 an	id 12:120 //	(2)	1	I had				
of Notification			Name	of Building	g Owne	er/operacor	(2)			DEC	1.4	20	16_
12/6/2016			Ctro	et Address					Service Services				
ncies Notified T	ype Notificat	cion	Stre	ec man		- 53				ESTO	20.0	CAL	DOL
[]EPA	[X]Initial	tion			- Cod	io			ASD	110	JENS	SING	1101
[]DEP	Notifica	CIOH	City	, State, Zi	p Coa	106				LIC	J 1 4 C		
[X]DOL	[]Amended Notifica	tion	Ne	ewark,NJ	, 0 1.	100		Telephone N	umber				
	NOCILICO	10101		of Contact				refeblione 1		*			
[X]DOH	[X] EMERGENCY	I	A	lfred Do	ugl	as		. —					
[]DCA	[]Cancella	tion											
					Y INFO	TORMATION	Type	of Facility	(4)				
ne of Facility Whe	re Abatement	is Tak	king E	Place (3)				Idebool (K-	12)				
fred Douglas	5							1 Cababanter	8 (Other	thar	n K-1	.2)	
							[2	xlother (i.e cial buil	. privat	e & (COmme		
reet Address	200								of Floor	re F	alda.	Age	
								10 200	# of F1001 2		8!		
		Count	y (6)		Count	ry Code (7)	1	ent Use (Pri	Direct .	ing d	_		d)
ty (5)		Esse			(STAT	E OSE ONDE	Curr	ent Use (FII	101 11 201				
ewark						Name of Abate	Ц	Contractor	(9)				
me of Monitoring F	rirm hired by	Build	ling	ASCM No.	N	Name of Abate	ment MANIA	GEMENT.	Inc.				
me of Monitoring . mer (8)								GDETLET				7.	
/A					9	Street Addres	s	1 C+					
reet Address						86 Chris							
						City, State,	Zip C	ode					
ity, State, Zip Co	de					Montclai	ir,	NJ 07042	۷			1 -	_
				1 Number	_	Telephone Num	mber		I	Licen		ımbe	c
roject Manager for	Monitoring H	firm	N/A	phone Number	. 1	(973) 74	4-88	300		00.	371		
			7			Name of OSHA							
cheduled Start Dat	e (10) Sch		omple	tion Date (1		N/A							
12 07	2016	12			0	14/11							
Month Day	Tear	Month	Da:	nly one)	-	Street Addre	ss						
Month Day ccupancy Status Du [X]Facility Cl	osed/Vacated	Durin	g Ent	ire Period									
of Abateme	nt	-: do 0	f Nor	mal Facility	y	City, State,	Zip	Code					
of Abateme []Abatement P													
Hours - Des	cribe: «Other	Occup	ancy	Descript»									
	1 -11 +bat s	pply)				[]Ful:	1 Con	tainment wit	h Negativ	re Pre	essur	e	
case of Work (Che	CK all mar c					r lMin:	i-Enc.	losure					
Scope of Work (Che			гx	1Renovation				Desandure					. m.
(%1>3 sf 0	or >3 lf		[X	Renovation]Demolition		[V]C]O	rre-ba	g Procedure	ce				
(%1>3 sf 0			[X]Demolition		[X]Glo	ve-ba	g Procedure ble Procedur	re		Abat	eme	E
[X] >3 sf o	or >3 lf f or >260 lf		[Lo]Demolition Is ocation		[X]Glo	ve-ba	g Procedure ble Procedur	re Amoun		R	R	E
[X]>3 sf c []>160 sf	or >3 lf f or >260 lf		[Lo]Demolition		[X]Glo []Non Descript	ve-backers of the contains	g Procedure ble Procedur of ning			R E M	RE	E N C A
[X]>3 sf o []>160 sf Locati	or >3 lf f or >260 lf on of Containing		Lo No	Is ocation ormally Used Solely		[X]Glo []Non Descript Asbestos-C Material	tion contain (ACM mal sy	g Procedure ble Procedur of ning M) ystems	Amoun (Speci SF or	fy	R	R E P A	ENCAPS
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE	or >3 lf or >260 lf on of containing l (ACM) ABATED		Lo No	Is ocation ormally Used Solely y Main-enance/		[X]Glo []Non Descript Asbestos-C Material (i.e., therm	tion contain l (ACM mal sy	g Procedure ble Procedur of ning M) ystems ng, VAT,	Amoun (Speci	fy	R E M O V A	REP	E N C A
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE In Fac	or >3 lf or >260 lf on of containing l (ACM) ABATED cility		Lo No S By	Ts ocation ormally Used Solely y Main- enance/ enstodial aff (12)		[X]Glo []Non Descript Asbestos-C Material	tion contain l (ACM mal sy	g Procedure ble Procedur of ning M) ystems ng, VAT,	Amoun (Speci SF or	fy	R E M O V	REPAI	ENCAPSU
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE In Fac	or >3 lf or >260 lf on of containing l (ACM) ABATED		Lo No S By	Ts ocation ormally Used Solely y Main- enance/ stodial aff (12) No N/A	in	[X]Glo []Non Descript Asbestos-C Material (i.e., therm nsulation, su or other mis	tion contain 1 (ACM mal sy 1 scella	g Procedure ble Procedur of ning M) yystems ng, VAT, aneous)	Amoun (Speci SF or	fy	R E M O V A	REPAI	ENCAPSU
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE In Fac	or >3 lf or >260 lf on of containing l (ACM) ABATED cility		Lo No	Is ocation ormally Used Solely y Main-enance/stodial aff (12)	in	[X]Glo []Non Descript Asbestos-C Material (i.e., therm	tion contain 1 (ACM mal sy 1 scella	g Procedure ble Procedur of ning M) yystems ng, VAT, aneous)	Amoun (Speci SF or LF)	fy	R E M O V A L	REPAI	ENCAPSU
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE In Fac	or >3 lf or >260 lf on of containing l (ACM) ABATED cility		Lo No	Ts ocation ormally Used Solely y Main- enance/ stodial aff (12) No N/A	in	[X]Glo []Non Descript Asbestos-C Material (i.e., therm nsulation, su or other mis	tion contain 1 (ACM mal sy 1 scella	g Procedure ble Procedur of ning M) yystems ng, VAT, aneous)	Amoun (Speci SF or LF)	fy	R E M O V A L	REPAI	ENCAPSU
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE In Fac	or >3 lf or >260 lf on of containing l (ACM) ABATED cility		Lo No	Ts ocation ormally Used Solely y Main- enance/ stodial aff (12) No N/A	in Pij	[X]Glo []Non Descript Asbestos-Co Material (i.e., therm nsulation, su or other mis	tion contain (ACM mal syntaciascella	g Procedure ble Procedur of ming M) ystems ng, VAT, nneous)	Amoun (Speci SF or LF)	fy r F	R E M O V A L	REPAIR	ENCAPSUL.
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE In Fac (1	or >3 lf or >260 lf on of Containing 1 (ACM) ABATED cility 3)		Loc No.	Demolition Is Cocation Cocation	in Pij	[X]Glo []Non Descript Asbestos-Co Material (i.e., therm nsulation, su or other mis pe insulation	tion contain (ACC) mal synrfaciscella	g Procedure ble Procedur of ming M) ystems ng, VAT, nneous)	Amoun (Speci SF or LF)	fy r F	R E M O V A L	REPAIR	ENCAPSUL.
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE In Fac (1 Basement	or >3 lf or >260 lf on of containing l (ACM) ABATED cility 3)	er	LC NG	Demolition Is Cocation Cocation	Pi]	[X]Glo []Non Descript Asbestos-C Material (i.e., therm nsulation, su or other mis pe insula Tubic Yards of Waste 1.0	tion contain (ACM) mal symmetric scella	g Procedure ble Procedur of ning M) ystems ng, VAT, nneous) On Name of Regi	Amoun (Speci SF or LF) 85 I	fy r F	R E M O V A L	REPAIR	ENCAPSUL.
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE In Fac (1 Basement Name of Registere AZTECH MAN	or >3 lf or >260 lf on of containing l (ACM) ABATED cility 3)	er	LC NG	Demolition Is Cocation Cocation	Pi]	[X]Glo []Non Descript Asbestos-C Material (i.e., therm nsulation, su or other mis pe insula Tubic Yards of Waste 1.0 Disposal Date	tion contain (ACM mal symmetric scella	g Procedure ble Procedur of ning M) yystems ng, VAT, aneous) On Name of Regi	Amoun (Speci SF or LF) 85 I	F andfi	R E M O V A L	REPAIR	ENCAPSUL .
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE In Fac (1 Basement Name of Registere AZTECH MAN City, State	or >3 lf or >260 lf on of containing 1 (ACM) ABATED cility 3) dd Waste Haule AGEMENT,	er	LC NG	Demolition Is Cocation Cocation	Pi]	[X]Glo []Non Descript Asbestos-C Material (i.e., therm nsulation, su or other mis pe insula Tubic Yards of Waste 1.0	tion contain (ACM mal symmetric scella	g Procedure ble Procedur of ning M) ystems ng, VAT, nneous) On Name of Regi	Amoun (Speci SF or LF) 85 I	F andfi	R E M O V A L	REPAIR	ENCAPSUL .
[X] >3 sf o [] >160 sf Locati Asbestos-O Materia TO BE In Fac (1 Basement Name of Registere AZTECH MAN	or >3 lf or >260 lf on of containing 1 (ACM) ABATED cility 3) dd Waste Haule AGEMENT,	er	LC NG	Demolition Is Cocation Cocation	Pi]	[X]Glor []Non Descript Asbestos-Co Material (i.e., therm sulation, su or other mis pe insulation pe insulation in the mis management of waste 1.0 or other mis of waste 1.0 or other mis management of waste 1.0 or other mis management of waste 1.0 or other mis of waste 1.0 or other mis management of waste 1.0 or other mis of waste 1.0 or other mis or oth	ove-ban-Frial tion of contain (and mal symmetric scellar atio	g Procedure ble Procedur of ning M) yystems ng, VAT, aneous) On Name of Regi	Amoun (Speci SF or LF) 85 I	F andfi	R E M O V A L	R E P A I I N	ENCAPSUL .
[X]>3 sf o []>160 sf Locati Asbestos-O Materia TO BE In Fac (1 Basement Name of Registere AZTECH MAN City. State	or >3 lf or >260 lf on of containing 1 (ACM) ABATED cility 3) ad Waste Haule AGEMENT,	er INC	Lc No	JDEP Waste auler ID No. 7040	Pi]	[X]Glo []Non Descript Asbestos-C Material (i.e., therm nsulation, su or other mis pe insula Tubic Yards of Waste 1.0 Disposal Date	ove-ban-Frial tion of contain (and mal symmetric scellar atio	g Procedure ble Procedur of ning M) yystems ng, VAT, aneous) On Name of Regi	Amoun (Speci SF or LF) 85 I	F andfi	R M O V A L X	R E P A I I N	ENCAPSUL .

									V games		0	-	6	-Kth	ntto
CK 805	NO	(Pu	CATION Irsuant 1	ate of New OF ASBES to NJAC 8:	STOS ABA	:120)		100 mg		G DEC				TI.J
Date of Notification (1) 12-09-16				Building O		rator	(2)				nri	7 1	4 8	2010	deschaffer.
Agencies Notified Type Notification EPA Initial	1	- 1	Street Ad 40 Def	ddress orest Ave	€.				The second secon	ASB			CON)L &
DEP Amended Amendmen				te, Zip Cod anover N		;									
Emergency justification DCA Cancellation)	- 11 0		Contact Caravella					Tele	phone	Numb	<u>er</u>			
Name of Facility Where Abatement is Takin	ng Place (3)		FACIL	LITY INFO	RMATION	-	Туре	of Facility (4	+)						
Private Residence Street Address							TI S	School (K-1) Subchapter Other (i.e. p	8 (Othe	er than	K-12) iercial	build	ings,	home	es,
City (5) West Amwell							- e	etc.) e Feet	# of	Floors		BI	dg. A	ge	
County (6) Hunterdon			County C	Code (7) USE ONLY)		-	Curre	nt Use (Pric	r if beir	ng dem	olishe	d)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	No.				ement Con racting L		(9)					
Street Address					5	22 7	Addres 7th St								
City, State, Zip Code					- 1			p Code NJ 0708	7						
Project Manager for Monitoring Firm			Telephor	ne No.	79 8220		one No 216-9			Licens 0120					
Start Date (10) 12-12-16	Scheduled 12-13-1		pletion [Date (11)				IA Monitor racting L	LC						
Occupancy Status During Abatement (Che	ck Only One	:)			1 7		Addres	-							
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:					Ci	ity, S	tate, Zi	p Code NJ 0708	7						
Scope of Work (Check All That Apply)	- V.					JIIIO	ii City	145 07 00	-						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit	4-14-15-1				Min Glo	Containme i-Enclosure vebag Prod	edure						
	Т.,						J Noi	n-Exempted	(*) and	Non-F	-паріе		Abate		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Used Mair	Is Location Normally Used Solely Maintenan Custodial St			Descri os Containi hermal sys surfacing other miso	ing N stems g, VA	faterial s insula T, or		(8	mount Specify or LF)		Remova	Ty Repair	e Encapsulate	Enclosure
(13)	Yes	No	N/A		other mise	Jonai	10000)					a	7	late	Ire
Entire Property		Х		Demo	olition /As	sbes	stos D	ebris				Х			
Name of Registered Waste Hauler		IN	JDEP W	/aste	Cubic Ya	rds		Name of	Registe	red La	ndfill				
Caravella Demolition Inc		H	lauler ID	200	of Waste 80			IESI			2-11-		1.000 - 1.00 m 1		
City, State E. Hanover, NJ 07936	Disposa				Disposal 12-12-										
Completed by Jaime Delgado	Title Proj. I	Vlana	ager.		Sign	ature		2			Date 12-	.09-	16		

Check#12510

State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-16 Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ 2016 December 9, 2016 Street Address Agencies Notified Notification Type ENVIRONMENTAL HEALTH & SAFETY DEPT. ☑Initial Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUSROL & **DEPA** ☐ Amended Notification # DCA City, State, Zip Code ■ Emergency (including PISCATAWAY, NJ 08854 X DOL justification) Telephone Number ☑ DEP- No Longer REQUIRED Name of Contact □Cancelled MICHAEL SMITH, ENV. X DOH **HEALTH & SAFETY FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) ☐ School (K-12) QUAD III ☐ Subchapter 8 (other than K-12) Street Address ☑ Other (i.e. private & commercial buildings, homes, etc.) LIVINGSTON CAMPUS # of Floors: 3 Bldg. Age: 60+ years Sq. Feet: N/A County Code (7) County (6) Current Use (prior if being demolished): ACADEMIC (State Use Only) **PISCATAWAY MIDDLESEX** Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. 0098 ATC GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **268 MAIN STREET** City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BURLINGTON, NJ 08016 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number **BRIAN KEARNY** 609-386-8800 00840 973-492-0477 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12/21/16 12/20/16 ENVIROVISION, INC. Street Address Occupancy Status During Abatement (Check only one) □ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD □ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other – Describe: Schedule: 4PM - 5AM (24 HOURS AS NEEDED) FAIRLAWN, NJ Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure **⊠**Renovation ■ Mini-Enclosure \boxtimes > 3 sf or \ge 3 lf Slove bag Procedure / Wrap & Cut ☐ Demolition $\square \ge 160 \text{ sf or } \ge 260 \text{ lf}$ ■ Non-Exempted (*) and Non-Friable Procedure Abatement Type Amount Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Solely by Maint./Custodial Material (ACM) in Facility (13) Remove Repair Encap Enclose VAT, or other miscell.) or LF) Staff? (12) YES NO NA < 9 LF X TSI B-33-1 X Name of Registered Landfill NJDEP Waste Hauler ID # 5 CY Name of Reg. Waste Hauler Cubic Yards of Waste: G.R.O.W.S. North Landfill See Below See Hauler Below #1 & 2 Disposal Date City, State Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 100 New Ford Mill NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 12/21/2016 19067 NJ DEP # 4509 215-736-1700 Date Signature Completed by (Print or Type)

Raymond C. Pedalino

December 9, 2016

MANAGER

SENIOR PROJECT

RAYMOND C. PEDALINO



homo	E	0	E	П	1///	E	-
	6	U	15	Ц	/ _A /	Ь.	
153							
11 11		nea	4	,	2216		111

[5									111 111 -	-04		1010	11		
Date of Notification (1) 10 /	16 /	15			1		ng Owner/Operator ow W Jersey Depart	No.	Smil best	EC 1	4 6	2016	1 12 miles		
Agencies Notified	Type Notifica	ation	V.			t Address	, , , , , ,		ASBES	TOS	CON	TRO)L &		
⊠ EPA	☐ Initial				10	35 Parkw	ay Ave., CN 600			LICEN					
☑ DOLWD ☑ DHSS	Amended Amendme		2/12	/16	City,	State, Zip	Code								
□ DCA	☐ Emergend			10	Tre	enton, N	J 09625								
(NJAC 5:23-8)	justification		g		Name	e of Conta	ct		Telephone Nu	mber					
	☐ Cancellat	ion			Lu	is Limo									
					FA	CILITY II	NFORMATION								
Name of Facility Where A	batement is T	aking Pl	ace (3)				Type of Facility (4)							
Route 7 Bridge								School (K-12)	12)						
Street Address								Subchapter 8			uildin				
Rt 7								homes, etc.)	orivate and commercial buildings,)			ys,			
City (5)								Square Feet	# of Floors	В	ldg. A	ge			
Kearny															
County (6)							7)(STATE USE ONLY)	Current Use (Price	or if being demo	lished)					
Bergen	ergen							V 100 (100 (100 (100 (100 (100 (100 (100							
Name of Monitoring Firm	me of Monitoring Firm Hired by Building Owner (Name of Abateme	ent Contractor (9)							
Cardno ATC	Cardno ATC						BRISTOL EN	VIRONMENTAL	, INC.						
Street Address							Street Address								
3 Terri Lane							1123 BEAVE	R STREET							
City, State, Zip Code							City, State, Zip Co	ode							
Burlington, NJ 0801	6						BRISTOL, PA	19007							
Project Manager for Monit	oring Firm			Tele	phone	No.	Telephone No.		License No.						
John Lutz				60	9-386	-8800	215-788-6040		00509						
Start Date (10)	10-14-20-0	cheduled				Company of the Compan	Name of OSHA M	lonitor							
5/23/	16	12	. / _	9	_ / .	16	BRISTOL EN	VIRONMENTAL	, INC.						
Occupancy Status During	Abatement (C	Check on	ly on	e)			Street Address								
☐ Facility Closed/Vacated							1123 BEAVE	R STREET							
Abatement Performed	Outside of No	rmal Fac	ility F	lour	s - Des	cribe	City, State, Zip Co	ode							
Time of Abatement:	AIVI	PIVI/		PM-		AM	BRISTOL, PA	19007							
Scope of Work (Check all	that apply)														
≥3 sf or ≥3 lf			Reno	vati	าก		☐ Full Cont ☑ Mini-Enc	ainment with Nega	tive Pressure						
≥160 sf or ≥260 lf		_	Dem				⊠ Glovebag	Procedure							
							Non-Exer Non-Exer	mpted (*) and Non-	-Friable Proced	ure					
Location of	, f		Is Lo	ocati rmal			Descriptions			Ab	atem	ent Ty	уре		
Asbestos-Containing N			sed	Sole	ly by	Asbe	Description of estos Containing Mar		Amount	Re	Re	E	Ē		
TO BE ABAT	TED .		Maint		nce/ Staff?		e., thermal systems i	nsulation,	(Specify	Remova	Repair	сар	Enclosure		
IN Facility (13)	/			12)	otan :		surfacing, VAT, other miscellane		SF or LF)	/al		Encapsulate	ure		
(/		Ye	s	No	N/A		othermocelane	543)				te			
Underside of bridge p	iers					Sheet p	packing		2800 SF						
							0.250								
			I	7	П					ПП	П	П	П		
Name of Registered Waste	Hauler			N.	JDEP V	l Vaste	Cubic Yards of	Name of Registe	ered Landfill						
SERVICE TRANSPO	RT GROUP,	INC.		a 1 4 7 7	auler II		Waste	MINERVA LA							
City, State				1	20990)	Disposal Date	City, State							
NEW CASTLE, DE 19	720						Siopodi Date		RG, OH 4468	8					
Completed By (Print or Typ		Title					Signature	1							
Brian Scafiro	,~)	Estin	ato:	-			- /	la D.	1	ate /2/14	/11				
		Louil	atol				prim	Scafero	1-11	10/12	116	,			
SB-41 BY 11 B 5 15 10	2	* Do n	ot us	o thi	c form	for achort	os licensura evemn	tad activities	0						

ASB-41 MAY 11 B 515/02

no ck

Date of Notification (1)				Na	me of Build	ing Owner/Operato	r (2)		DEC.	3 7	2
	16 /	15				ew Jersey Depar		poration			
Agencies Notified	Type Notificati	on		Str	eet Address	5		ASSE	STO	8 0	ON
⊠ EPA	Initial			1	035 Park	way Ave., CN 60	0	1	LIV	ENS	MC
☑ DOLWD ☑ DHSS	Amended Amendmen	t #8-1	2/8/16	City	y, State, Zip	Code					
□ DCA	☐ Emergency			T	renton, N	J 09625					
(NJAC 5:23-8)	justification)	3	Nar	me of Conta	act		Telephone Nu	mber		
	☐ Cancellatio	n		L	uis Limo						
N				F	ACILITY I	NFORMATION					
Name of Facility Where Al Route 7 Bridge	patement is Tal	king Pla	ace (3)				Type of Facility				
Street Address							School (K-1)	²⁾ 8 (Other than K-1	2)		
Rt 7							Other (i.e., p	rivate and comm	ercial	buildi	ngs,
City (5)							homes, etc.				
Kearny							Square Feet	# of Floors		Bldg.	Age
County (6)				100	unty Code (7)(STATE USE ONLY)	Current Hee /De	in a life to a large of			
Bergen				100	unity Code (1)(STATE USE ONLY)	Current Use (Pr	for it being demoi	lished,)	
Name of Monitoring Firm H	ired by Building	Owne	r (8)	ASCI	VI No	Name of Ahatem	ent Contractor (9)				
Cardno ATC	,	, 5.,,,,,	(0)	, 1001	140.	(IVIRONMENTA				
Street Address				L		Street Address	TVIICONNILITA	L, INC.			
3 Terri Lane						1123 BEAVE	RSTREET				
City, State, Zip Code						City, State, Zip C					
Burlington, NJ 08016						BRISTOL, PA					
Project Manager for Monito	the state of the s		Tel	ephone	e No.	Telephone No.		License No.			
John Lutz					6-8800	215-788-6040)	00509			
tart Date (10)00 STE 1	2/8/16 Sch	eduled				Name of OSHA M		00000			
5/23/					16		VIRONMENTAL	INC.			
Occupancy Status During A	batement (Che	ck only	one)			Street Address					
Facility Closed/Vacated I		3.5	- 15	ment		1123 BEAVE	RSTREET				
Abatement Performed O						City, State, Zip Co					
Time of Abatement:	AMF	PM/	PM		_AM	BRISTOL, PA					
cope of Work (Check all th	at apply)							200 A12			
] >3 sf or >3 lf		ПВ	enovat	ion		☐ Full Cont Mini-Encl	ainment with Nega	ative Pressure			
≥160 sf or ≥260 lf			emoliti				Procedure				
		T 1	s Loca	ion	1	Non-Exer	mpted (*) and Non	-Friable Procedur			
Location of			Norma			Description of			Ab	atem	ent T
Asbestos-Containing Mat			ed Sole		Asbes	stos Containing Mat		Amount	Re	Re	En
TO BE ABATE	₫		intena todial		(i.e.	, thermal systems in		(Specify	Removal	Repair	caps
(13)			(12)]	surfacing, VAT, other miscellaned		SF or LF)	<u>n</u>		Encapsulate
		Yes	No	N/A							e
nderside of bridge pier	'S				Sheet pa	acking		2800 SF			
									П	П	П
			П	П							
			IN	IDEP V	Vaste	Cubic Yards of	Name of Registe	red Landfill			
me of Registered Waste H	auler		114			Waste	N				
		D.	H	auler I	0.0000000	vvaste	MINERVA LA	ANDFILL			
SERVICE TRANSPORT		Э.	H					ANDFILL			
SERVICE TRANSPORT y, State	GROUP, INC	С.	H	auler I		Disposal Date	City, State	RG, OH 44688			-
me of Registered Waste H BERVICE TRANSPORT y, State NEW CASTLE, DE 1972 mpleted By (Print or Type)	GROUP, INC		H	auler I			City, State		e /		

pe Notific Initial Amended Amendm Emergen Justification Cancellat	eation d ent #7 cy (incon)	-12/5/ cluding	16	Name of B State of Street Addit 1035 Pa City, State, Trenton Name of Co Luis Lim	rkway Ave., CN	eartment of Tran	sporation ASF	EST		ONTI ONTI
pe Notific Initial Amended Amendm Emergen Justification Cancellat	eation d ent #7 cy (incon)	-12/5/ cluding	16	Street Address Street Address 1035 Pa City, State, Trenton Name of Co Luis Lim	F New Jersey Depress rkway Ave., CN (Zip Code	artment of Tran	sporation ASF	EST	08 C	ONT
pe Notific Initial Amended Amendm Emergen Justification Cancellat	eation d ent #7 cy (incon)	-12/5/ cluding	16	Street Addition 1035 Pa City, State, Trenton Name of Co Luis Lim	ress rkway Ave., CN (Zip Code		sporation ASF	EST(OS C	ONT
Initial Amended Amendm Emergen lustificatio Cancellat	d ent # <u>7</u> cy (inc on) ion	luding	16	1035 Pa City, State, Trenton Name of Co Luis Lim	zip Code	500	ASI	LIC	OS CO	ONT IING
Amended Amendm Emergen Justification Cancellat	ent # <u>7</u> cy (inc on) ion	luding	16	City, State, Trenton Name of Co Luis Lim	Zip Code	000	1	L-11	2 TIVE	MAG
Amendm Emergen ustificatio Cancellat	ent # <u>7</u> cy (inc on) ion	luding	16	Trenton Name of Co	•					
Emergen iustificatio Cancellat	cy (incon) ion	luding		Name of Co Luis Lim	, NJ 09625					
ustificatio Cancellat	on) ion			Luis Lim						
		Place (2)		ontact		Telephone	Numbe	er	
ment is T	aking I	Place (2)	2000 400 00	10				7300 7300	
ment is T	aking I	Place (21	FACILIT	Y INFORMATION					
			3)			Type of Facility	(4)			
						School (K-1	2)			
						Subchapter	8 (Other than I	<-12)		
						Other (i.e., phomes, etc.	private and con	nmerci	al build	lings,
						Square Feet	# of Floors		Dida	٨٠٠
						1	" 011 10013		Blug	. Age
			1	County Cod	e (7)(STATE USE ONL	Current Use (Pr	ior if heing den	olicho	4)	
						,	ior il bellig dell	ionsne	u)	
y Buildir	ng Owi	ner (8)	AS	CM No.	Name of Abate	ment Contractor (9)				
Cardno ATC Street Address					Street Address		-, 110.			
						ER STREET				
irm		T	elepho	ne No.			I icones No			
			609-3	86-8800		0				
Sch	edule	- 1					00509			
	ON						INC			
ent (Che	ck onl					THOMBERIAL	, 1140.			
				{		D CTDEET				
of Norma	al Faci	lity Ho	urs - D	escribe						
F	PM/	P	/I	AM	1 2.00 St 57					-000/2002
iv)					BRISTOL, FA	19007				
,	_				☐ Full Conf	ainment with Negat	ive Pressure			
	_				Mini-Enc	osure	, ro r rossare			
	D 0	CITIOIL	OH		⊠ Glovebag ⊠ Non-Exe	Procedure	rioblo Deservi			
							Tiable Procedu	_		
044					Description of				T	
(CM)	Ma	aintena	ince/	Asbe	stos Containing Mat	erial (ACM)	Amount	Ren	Rep	Enc
	Cus		Staff?	(1.6.				Von	air	Encapsula
	V	T	Taura	-			OF OF EFT	<u>a</u>		ula
	res	No	-						1	6
			\boxtimes	Sheet pa	acking		2800 SF	X		7/
										=+=
				 						
				-						
										7/5
		92.53		23.272	Cubic Yards of	Name of Registered	d Landfill			
IP, INC.	•				Waste					
			.0000		Disposal Date					
					-		OH AAGOO			
Title					Signature					
V. 10.000	imete)r			Signature	1- D.	1000	1-	1.	
	irm Sch Lent (Che Entire F of Norm Lentire F of	Scheduled Scheduled Sched	Scheduled Comp Scheduled Comp Scheduled Comp Scheduled Comp Scheduled Comp Scheduled Comp Scheduled Comp Scheduled Comp Scheduled Comp Scheduled Scheduled Comp Scheduled Sched	irm Telepho 609-3 Scheduled Completion Scheduled Completion For Hold Interest (Check only one) Entire Period of Abatement of Normal Facility Hours - D PM/PM- Ity) Renovation Demolition Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Custodial Staff?	irm Telephone No. 609-386-8800 Scheduled Completion Date (11) Bent (Check only one) Entire Period of Abatement of Normal Facility Hours - DescribePM/PMAM PMAM Scheduled Completion Date (11) Bent (Check only one) Entire Period of Abatement of Normal Facility Hours - DescribePM/PMAM Benovation We Solely by Maintenance/ Custodial Staff? (12) Yes No N/A	Street Address Stre	Dy Building Owner (8) ASCM No. Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 609-386-8800 Scheduled Completion Date (11) BRISTOL ENVIRONMENTAL Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL ENVIRONMENTAL Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State WAYNESBURG Title Signature One of Cathering Street Address 1123 BEAVER STREET City, State WAYNESBURG Disposal Date City, State WAYNESBURG	Dy Building Owner (8) ASCM No. Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 609-386-8800 Scheduled Completion Date (11) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 215-788-6040 00509 Scheduled Completion Date (11) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 215-788-6040 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 215-788-6040 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Total Containment with Negative Pressure Ciovebag Procedure Ciovebag	Dy Building Owner (8) ASCM No. Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. O509 Scheduled Completion Date (11) Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Thurning Particular Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Thurning Particular Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Thurning Particular Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Thurning Particular Address Signature Address Addr	Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC.

1 11-		-	-	
year a				g and
				11
1 11	TITO	4 4	0047	w 11

10	Date of Notification (1)					Name of B	uilding Owner/Operat	or (2)	I had hard				
SEPA Do Intel Do De	10 /	16		15		State of	New Jersey Depa	artment of Tran	sporation				
	Agencies Notified	Type Not	ificatio	п		Street Addr	ess		A	SBES	TO	SOC)NTR(
BARNON Cardinate Cardina		Initial						10	1			21/101	140
Trenton, M J 9625													
Name of Facility (Where Abstement is Taking Place (3) Route 7 Bridge Street Address													
Cancellation		_ Emerg	ency (ation)	includ	ing				1=				
Name of Facility Where Abstement is Taking Place (3) Route 7 Bridge School (K-12) Scho			11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		- 1				Telephor	ne Num	ber		
Name of Facility Where Abatement is Taking Place (3)													
Street Address	Name of Facility Where Aba	tement is	Takin	n Plan	ne (3)	PACILITY	Y INFORMATION	1-					
Street Address City (5) County (6) County (7) (STATE USE ONLY) County (7) (STATE USE ONLY) County (8) County		10.110111110	Takin	9 1 101	Je (J)								
Rt 7 City (5) Kearny County (6) Bergen Name of Monitoring Firm Hired by Building Owner (8) Street Address 3 Terri Lane Street Address 3 Terri Lane City, State, Zip Code Burlington, M. J 08016 Project Manager for Monitoring Firm John Lutz Star Date (10) pr sitz / 2/5 Scheduled Completion Date (11) 5 / 23 / 16 Telephone No. John Lutz Star Date (10) pr sitz / 2/5 Scheduled Completion Date (11) 5 / 23 / 16 Star Zip Code BRISTOL, PA 18007 Scope of Work (Check all that apply) Pice of Abatement: Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:								School (K-1	2)				
Cardno ATC								Uther (i.e., i	private and c	n K-12) cial l	wildie	
County (6) Bergen County Code (7)/STATE USE ONLY) Current Use (Prior if being demolished)								homes, etc.)	onnie	Ciai	Julion	igs,
County (6) Bergen County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)	A CONTRACTOR OF THE PROPERTY O							Square Feet	# of Floo	rs	E	Ida. A	\ge
Bergen Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (5) BRISTOL ENVIRONMENTAL, INC. Street Address 3 Terri Lane City, State, Zip Code Burrilington, NJ 08016 Project Manager for Monitoring Firm John Lutz Street Address 1123 BEAVER STREET City, State, Zip Code Burrilington, NJ 08016 Project Manager for Monitoring Firm John Lutz Start Date (10) FF S176 / 2/5 Scheduled Completion Date (11) 5 / 23 / 16													
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Street Address Street Address 3 Terri Lane City, State, Zip Code Burlington, NJ 08016 Project Manager for Monitoring Firm Telephone No. G09-386-8800 City, State, Zip Code BRISTOL, PA 19007 Telephone No. John Lutz Scheduled Completion Date (11) S / 23 / 16 Scheduled Completion Date (11) S / 23 / 16 Scheduled Completion Date (11) S / 23 / 16 Scheduled Completion Date (11) S / 23 / 16 Scheduled Completion Date (11) S / 23 / 16 Scheduled Completion Date (11) S / 23 / 16 Scheduled Completion Date (11) SRISTOL ENVIRONMENTAL, INC. Street Address Str	1					County Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being de	emolish	ned)	-	
Street Address Stre													
Street Address 3 Terri Lane City, State, Zip Code Burlington, NJ 08016 Project Manager for Monitoring Firm John Lutz Start Date (10) FF SITE /2/5 Scheduled Completion Date (11) 5 / 23 / 16 12 / 9 / 16 Start Date (10) FF SITE /2/5 Scheduled Completion Date (11) Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Performed Outside of Normality 3 stor 3 if Project Manager for Monitoring Firm Berital (ACM) Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Performed Outside of Normal Performed Outside of Normality 3 stor 3 if Project Manager for Monitoring Firm Berital (ACM) Abatement With Negative Pressure Mini-Enclosure Solore-Exempted (*) and Non-Friable Procedure Normality Used Solely by Normality Used Solely		d by Build	ding O	wner	(8) AS	SCM No.	Name of Abatem	ent Contractor (9)			_		
Street Address Stre	Cardno ATC				1		BRISTOL EN	VIRONMENTAL	INC.				
City, State, Zip Code Burlington, NJ 08016 Project Manager for Monitoring Firm John Lutz Start Date (10)									,		-		
Burlington, NJ 08016 Project Manager for Monitoring Firm John Lutz Start Date (10)	3 Terri Lane						1123 BEAVE	RSTREET					
Burlington, NJ 08016	City, State, Zip Code						City, State, Zip Co	de					
Project Manager for Monitoring Firm	Burlington, NJ 08016												
John Lutz 609-386-8800 215-788-6040 00509 Start Date (10) FF SITE 12 5 Scheduled Completion Date (11) 5	Project Manager for Monitoring	Firm			Telepho	ne No.			License Me				
Start Date (10) FF SITE 12 Scheduled Completion Date (11) 12	John Lutz			1	609-3	86-8800	A STATE OF THE STA						
Scope of Work (Check all that apply) □ 23 sf or ≥3 if □ Renovation □ Demolition Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) □ DE BEABATED IN Facility (13) □ DE ABATED	Start Date (10)0 FF SITE 12	15 50	hedul	ed Co	mpletion	Date (11)	Name of OSHA Mo	nitor	00303				
Street Address Str									INC				
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/_PMAM City, State, Zip Code BRISTOL, PA 19007	Occupancy Status During Abate	ment (Ch	neck of	nly on	e)		-						
Abatement Performed Outside of Normal Facility Hours - Describe Tirne of Abatement:AMPM/AM	□ Facility Closed/Vacated During	g Entire	Period	of Al	patement			STREET					
Scope of Work (Check all that apply)	☐ Abatement Performed Outside	e of Norr	nal Fa	cility F	Hours - D	escribe							
Scope of Work (Check all that apply) □ ≥3 sf or ≥3 lf □ Renovation □ Demolition □ Mini-Enclosure □ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure □ Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*) and Non-Exempted (*)	Time of Abatement:Al	VI	PM/_		PM	_AM							
□ ≥3 sf or ≥3 lf □ Renovation □ Demolition □ Solvebag Procedure □ Non-Exempted (*) and Non-Friable Procedure □ Non-Exempted (*) and Non-Exem	Scope of Work (Check all that ap	nly)					BRISTOL, PAT	3007					
Section Sec		37					☐ Full Contain	ment with Negati	io Deceause				
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Total abate in Type Asbestos Containing Material (ACM) Maintenance/ Custodial Staff? (12) Yes No N/A Sheet packing Sheet packing Sheet packing Abatement Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) SF or LF) Total abatement Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Sheet packing Abatement Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SF or LF) Total abatement Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SF or LF) Total abatement Type Abatement Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SF or LF) Total abatement Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) SF or LF) SF or LF) Total abatement Type Abatement Type Specify SF or LF) SF or LF SF or L	☐ ≥3 sf or ≥3 lf						Mini-Enclos	ure	re Pressure				
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) To Be Abated Processing (Acmount (Specify Service) (Specify	≥ 100 si di ≥200 ii		M	Demo	inton		☐ Glovebag P	rocedure					-
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) To Be Abated Process Abatement Type Asbestos Containing Material (ACM) Maintenance/ Custodial Staff? (12) Yes No N/A Sheet packing Sheet packing Sheet packing Abatement Type Abatement			T	Is Lo	cation	T	⊠ Non-Exemp	teo (*) and Non-F	riable Proced	lure			
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Yes No N/A Asbestos Containing Material (ACM) Maintenance/ Custodial Staff? (12) Yes No N/A Sheet packing 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) 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) 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) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing (ICM) (i.e., th	Location of		1				Description of	1		A	bater	ment '	Туре
Yes No N/A Inderside of bridge piers Sheet packing Sheet packing 2800 SF Sheet packing 2800 SF Sheet packing Sheet pac	Asbestos-Containing Material (ACM)	1			Asbest		al (ACM)	Amount	R	R	m	m
Yes No N/A Inderside of bridge piers Sheet packing Sheet packing 2800 SF Sheet packing 2800 SF Sheet packing Sheet pac			D 0.00				thermal systems insu			me	epa	nca	ncic
Yes No N/A Inderside of bridge piers Sheet packing Sheet packing 2800 SF Sheet packing 2800 SF Sheet packing Sheet pac									SF or LF)	Val	5	psu	Sur
me of Registered Waste Hauler ERVICE TRANSPORT GROUP, INC. State EW CASTLE, DE 19720 Disposal Date Disposal Date Signature Signature Date Dat			Yes	N	N/A	1	other miscellaneous	1				late	0
me of Registered Waste Hauler ERVICE TRANSPORT GROUP, INC. State EW CASTLE, DE 19720 Disposal Date Disposal Date Signature Signature Date Dat	nderside of bridge piers			П	M	Sheet pag	ckina		2000 05	-	-	-	
me of Registered Waste Hauler ERVICE TRANSPORT GROUP, INC. State EW CASTLE, DE 19720 Title Signature Signature Signature Signature Disposal Date Signature Date Date			-	-		- Par			2000 SF	+	Ш	Ш	Ш
me of Registered Waste Hauler ERVICE TRANSPORT GROUP, INC. State EW CASTLE, DE 19720 Title Signature Festimator Cubic Yards of Waste Cubic Yards of Waste MINERVA LANDFILL Disposal Date Signature Signature Date				1	-								
me of Registered Waste Hauler ERVICE TRANSPORT GROUP, INC. State EW CASTLE, DE 19720 Title ian Scafiro NJDEP Waste NJDEP Waste Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste City, State WAYNESBURG, OH 44688 Date Date			Ш										
Revice Transport Group, Inc. Name of Registered Waste Hauler Name of Registered Landfill										1			
ERVICE TRANSPORT GROUP, INC. Hauler ID No. 20990 Waste MINERVA LANDFILL	me of Registered Waste Hauler			1	VIDEP W	aste Ci	ubic Yards of Na	me of Registered	andfill				븨
State EW CASTLE, DE 19720 Disposal Date City, State WAYNESBURG, OH 44688 Inpleted By (Print or Type) Title Signature Festimator	ERVICE TRANSPORT GRO	UP, INC		1		No. W	anta I						
EW CASTLE, DE 19720 WAYNESBURG, OH 44688 Ipleted By (Print or Type) Title Signature Festimator	, State				20990	Die			· I he ha				
ipleted By (Print or Type) Title Signature Date //	EW CASTLE, DE 19720					J.	· 1 .:		OU 44000				
ian Scafiro Estimator Date /		Title						ATRESBUKG,	Un 44688				1
Drian Scafero 1 12/2/16		1	tim as	-			Signature	7 1. 1	Date	1	1		
		ES	umati	Uľ			Drian &	cafero La	1 10	2/2/	16		
B 5 15 10 2 *Do not use this form for asbestos licensure exempted activities.	B515102	* Do	o not u	ise thi	s form fo	r asbestos lin	censure exempted an	tivities					

D)-	E	C			V	E	
		DEC	1	4	2016		

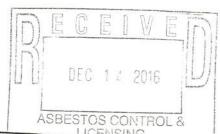
Date of Motification (4)											-			
Date of Notification (1)	40				Name o	f Building Owne	er/Operat	or (2)		e e				
	16	/_	15	-	State	of New Jers	ey Depa	rtment o	f Trans	poratio	PASPE	CT	300	'ON
Agencies Notified	Type N		ion		Street A	ddress				1	MODE	110	JEN	NION
⊠ EPA						Parkway Ave	CN 60	10		-				
☑ DOLWD ☑ DHSS	⊠ Ame		1 MF 4	. Malla	0"	e, Zip Code	., 011 00							
□ DCA	☐ Eme	mamer	(inclus	1/23/16		n, NJ 09625			2.					
(NJAC 5:23-8)	justif	cation	(maud	ing	Name of				,			NAME OF THE OWNER.		
	☐ Cano				Luis L					Teleph	none N	umbe	er	
Name of Facility Where Ab	batement	is Tak	ing Pla	co (3)	PACILI	TY INFORMA	TION							
Route 7 Bridge	N. 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			SC (0)				Type of				337		
Street Address								School	ol (K-12)	(0.1)				
Rt 7								Subci	U.E. prin	(Other fi	han K-	12)	14. "	
City (5)								1	-, -10.)	rate and	COMM	ercia	סוועם ו	ings
Kearny							Square F	eet	# of Flo	oors	7	Bldg.	Ane	
County (6)												- 1		ngc
				1	County Co	de (7)(STATE US	E ONLY)	Current U	se (Prior	if being	demoli	ished)	
Bergen	- 41 -	11.17					1			3			/	
ame of Monitoring Firm Hire	eo by Bui	liging (Jwner (8) A	SCM No.	Name of	Abateme	nt Contract	or (9)					_
								IRONME		NC				
reet Address						Street Add			, ,					
3 Terri Lane						1123 B	EAVER	STREET						
y, State, Zip Code						City, State								
Burlington, NJ 08016						BRISTO	50 NT 23							
ject Manager for Monitoring	g Firm			Telepho	ne No.	Telephone		Licens						
ohn Lutz			1								nse No.			
			- 1	609-3	86-8800	215-788	-6040				VO.			
t Date (10) ON SITE /	1/23 50	chedul	ed Con	609-3	86-8800 Date (11)	215-788 Name of OS		itor		00509	VO.			
1 Date (10) 0 W SITE / 5 / 23 / 16				npletion	Date (11)	Name of OS	SHA Mon			00509				
5 / 23 / 16	_	12	_ / _	npletion 7	B6-8800 Date (11) /16	Name of OS BRISTO	SHA Mon			00509	¥0.			
5 / 23 / 16 upancy Status During Abate	ment (Cf	12 heck o	/ nly one	npletion 7	Date (11) /16	Name of OS BRISTOI Street Addre	SHA Mon L ENVIF	ROKMEN.		00509	VO.			
_5/ _23/ _16	ement (CI ng Entire de of Norr	12 heck o Period mal Fa	nly one of Aba	7) stement	Date (11) /16	Name of OS BRISTOI Street Addre 1123 BE/	SHA Mon L ENVIF SS AVER S	ROKMEN.		00509	VO.			
5 / 23 / 16 upancy Status During Abate	ement (CI ng Entire de of Norr	12 heck o Period mal Fa	nly one of Aba	7) stement	Date (11) /16	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z	SHA Mon L ENVIF SS AVER S ip Code	TREET		00509	νο.			
	ement (CI ng Entire de of Norr M	12 heck o Period mal Fa	nly one of Aba	7) stement	Date (11) /16	Name of OS BRISTOI Street Addre 1123 BE/	SHA Mon L ENVIF SS AVER S ip Code	TREET		00509	YO.			
	ement (CI ng Entire de of Norr M	12 heck o Period mal Fa	nly one of Aba	7) stement	Date (11) /16	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL	EHA Mon LENVIF ess AVER S ip Code , PA 19	TREET	TAL, INC	00509 C.				
	ement (CI ng Entire de of Norr M	heck of Period mal Fa	nly one of Abo cility H	npletion 7) stement ours - Do	Date (11) /16	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL	SHA Mon L ENVIF SS AVER S ip Code , PA 190	TREET 007 ment with Ne	TAL, INC	00509 C.				
	ement (CI ng Entire de of Norr M	heck of Period mal Fa	nly one of Aba cility H	npletion 7) stement ours - Do	Date (11) /16	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL	SHA Mon L ENVIF ISS AVER S IP Code , PA 190 Containment of the page 100	TREET DO7 Dent with Nee	TAL, INC	C.				
	ement (CI ng Entire de of Norr M	12 heck o Period mal Fa PM/	nly one of Aba cility Ha	npletion 7 i) stement ours - Do M	Date (11) /16	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL	SHA Mon L ENVIF ISS AVER S IP Code , PA 190 Containment of the page 100	TREET DO7 Dent with Ne	TAL, INC	C.				
	ement (CI ng Entire de of Norr M	12 heck o Period mal Fa PM/	nly one of Abacility Harana	npletion 7) stement ours - Definition	Date (11) /16	Name of OS BRISTOI Street Addre 1123 BE/ City, State, Z BRISTOL Full (Mini- Glove Non-I	SHA Mon L ENVIR SS LVER S ip Code , PA 190 Containm Enclosure bag Pro Exempte	TREET DO7 Dent with Nee	TAL, INC	C.	dure	bater	ment	
	ement (Ci ng Entire de of Norr M	heck of Period mal Far PM/	nly one of Aba cility Ha Renova Demoli	npletion 7) atement ours - Do tion tion ally ely by	Date (11) / 16 escribe _AM	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL Full (Mini- Glove Non-t	SHA Mon L ENVIF SS AVER S ip Code , PA 190 Containm Enclosur abag Pro Exempted	TREET DO7 Dent with Nee cedure d (*) and No	FAL, INC	C.	dure A	bater	1	_
	ement (Ci ng Entire de of Norr M	12 heck o Perioc mal Fa PM/	nly one of Aba cility Ha Renova Demolia Is Loca Norma sed Sol	npletion 7) atement ours - Do tion ation ally ely by ence/	Date (11) / 16 escribe _AM Asbesi	Name of OS BRISTOI Street Addre 1123 BE/ City, State, Z BRISTOL Full (Mini- Glove Non-I	SHA Mon L ENVIF SS AVER S ip Code , PA 190 Containm Enclosur abag Pro Exempted	TREET DO7 Dent with Nee cedure d (*) and No	Pative Pon-Friable	C. ressure e Proced	dure A		1	_
	ement (Ci ng Entire de of Norr M oply)	12 heck o Perioc mal Fa PM/	nly one of Aba cility Ha Renova Demoli	npletion 7) atement ours - Do tion ation ally ely by ence/	Date (11) / 16 escribe _AM Asbesi	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL Full (Mini- Glove Non-t Descriptio tos Containing thermal system surfacing, VA	SHA Mon LENVIF iss AVER S ip Code , PA 190 Containm Enclosur ebag Pro Exempte n of Material as insulat AT, or	TREET DO7 Dent with Nee cedure d (*) and No	Pgative P	C. ressure e Proced	dure A	ter Repair	1	_
	ement (Ci ng Entire de of Norr M oply)	12 heck o Perioc mal Fa PM/	nly one of Aba cility Haran Renova Demolia Is Loca Norma sed Soliaintena stodial	npletion 7) atternent bours - De finition attion attion ally ely by ance/ Staff?	Date (11) / 16 escribe _AM Asbesi	Name of OS BRISTOL Street Addre 1123 BE/ City, State, Z BRISTOL Full (Mini- Glove Non-to Description tos Containing in thermal system	SHA Mon LENVIF iss AVER S ip Code , PA 190 Containm Enclosur ebag Pro Exempte n of Material as insulat AT, or	TREET DO7 Dent with Nee cedure d (*) and No	Pgative P	C. ressure e Proced	dure		1	Type Enclosure
	ement (Ci ng Entire de of Norr M oply)	heck o Perioc mal Fa PM/	nly one of Abi cility Hi Renova Demolii Is Loca Norma sed Sol aintena stodial (12)	npletion 7) atement ours - Do ation ation ally ely by ance/ Staff?	Date (11) / 16 escribe _AM Asbesi	Name of OS BRISTOL Street Addre 1123 BEA City, State, Z BRISTOL Full (Mini-	SHA Mon LENVIF iss AVER S ip Code , PA 190 Containm Enclosur ebag Pro Exempte n of Material as insulat AT, or	TREET DO7 Dent with Nee cedure d (*) and No	Pgative P	C. ressure e Proced	dure A		nt Encapsulate	_
	ement (Ci ng Entire de of Norr M oply)	heck o Perioc mal Fa PM/	Renova Demolii Is Loca Norma sed Sol aintena stodial (12)	npletion 7) atement ours - Do ation ation ally ely by ance/ Staff?	Date (11) / 16 escribe _AM Asbesi	Name of OS BRISTOL Street Addre 1123 BEA City, State, Z BRISTOL Full (Mini-	SHA Mon LENVIF iss AVER S ip Code , PA 190 Containm Enclosur ebag Pro Exempte n of Material as insulat AT, or	TREET DO7 Dent with Nee cedure d (*) and No	Pgative P	ressure e Proceduction for LF)	dure A		1	_
	ement (Ci ng Entire de of Norr M oply)	heck o Perioc mal Fa PM/	nly one of Abi cility Hi Renova Demolii Is Loca Norma sed Sol aintena stodial (12)	npletion 7) atement ours - Do ation ation ally ely by ance/ Staff?	Date (11) / 16 escribe _AM Asbesi	Name of OS BRISTOL Street Addre 1123 BEA City, State, Z BRISTOL Full (Mini-	SHA Mon LENVIF iss AVER S ip Code , PA 190 Containm Enclosur ebag Pro Exempte n of Material as insulat AT, or	TREET DO7 Dent with Nee cedure d (*) and No	Pative Pon-Friable Am (Sp	ressure e Proceduction for LF)	dure Removal		1	_
	ement (Ci ng Entire de of Norr M oply)	12 heck o Period mal Fa PM/ Us M Cut Yes	Renova Demolii Is Loca Norma sed Sol aintena stodial (12) No	npletion 7) attement ours - De stion stion stion stion stion N/A N/A	Date (11) / 16 escribe _AM Asbesi	Name of OS BRISTOL Street Addre 1123 BEA City, State, Z BRISTOL Full (Mini-	SHA Mon LENVIF iss AVER S ip Code , PA 190 Containm Enclosur ebag Pro Exempte n of Material as insulat AT, or	TREET DO7 Dent with Nee cedure d (*) and No	Pative Pon-Friable Am (Sp	ressure e Proceduction for LF)	dure A Removal		1	_
	ement (Cing Entire de of Norri M	Luster Lu	Renova Demolii Is Loca Norma sed Sol aintena stodial (12)	npletion 7) atement ours - Do ation	Date (11) / 16 escribe _AM Asbesi	Name of OS BRISTOL Street Addre 1123 BEA City, State, Z BRISTOL Full (Mini-	SHA Mon LENVIF iss AVER S ip Code , PA 190 Containm Enclosur ebag Pro Exempte n of Material as insulat AT, or	TREET DO7 Dent with Nee cedure d (*) and No	Pative Pon-Friable Am (Sp	ressure e Proceduction for LF)	dure Removal		1	_
	ement (Cing Entire de of Norri M	12 heck o Period mal Fa PM/ Us M Cut Yes	Renova Demolii Is Loca Norma sed Sol aintena stodial (12) No	npletion 7) attement ours - De stion stion stion stion stion N/A N/A	Date (11) / 16 escribe _AM Asbesi	Name of OS BRISTOL Street Addre 1123 BEA City, State, Z BRISTOL Full (Mini-	SHA Mon LENVIF iss AVER S ip Code , PA 190 Containm Enclosur ebag Pro Exempte n of Material as insulat AT, or	TREET DO7 Dent with Nee cedure d (*) and No	Pative Pon-Friable Am (Sp	ressure e Proceduction for LF)	dure Removal		1	_
	ement (Cing Entire de of Norri M	12 heck o Period mal Fa PIM/ Vs M Cus Yes	Renova Demolii Is Loca Norma sed Sol aintena stodial (12) No	npletion 7) atement ours - Definition ation ation ation ation Ation ally ely by ance/ Staff? N/A	Date (11) / 16 escribe _AM Asbes (i.e.,	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL Full (Mini- Glove Non-I Description tos Containing Ithermal system surfacing, VA other miscellar cking	SHA Mon L ENVIR ISS AVER S IP Code , PA 190 Containm Enclosure bag Pro Exempter of Material at its insulat AT, or neous)	TREET DO7 Dent with Ne e cedure d (*) and No (ACM) tion,	Pative Pon-Friable Am (Sp	ressure e Proced nount necify or LF)	dure Removal		1	_
	ement (Cing Entire de of Norri M	12 heck o Period mal Fa PIM/ Vs M Cus Yes	Renova Demolii Is Loca Norma sed Sol aintena stodial (12) No	npletion 7) attement ours - De Attion attion attion attion attion attion attion attion attion DEP Wa wher ID N	Date (11) / 16 escribe _AM Asbes (i.e.,	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL Description tos Containing I thermal system surfacing, VA other miscellar	SHA Mon L ENVIR SS LVER S ip Code , PA 190 Containment bag Pro Exempted Material Is insulat T, or neous) Name	TREET DO7 Dent with Ne e cedure d (*) and No (ACM) tion,	Pegative Pon-Friable Any (Sp SF c	c. ressure e Procect nount secify or LF)	dure Removal		1	_
	ement (Cing Entire de of Norri M	12 heck o Period mal Fa PIM/ Vs M Cus Yes	Renova Demolii Is Loca Norma sed Sol aintena stodial (12) No	npletion 7) atement ours - Definition ation ation ation ation Ation ally ely by ance/ Staff? N/A	Asbess (i.e., Sheet pace	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL Description to Scontaining Ithermal system surfacing, VA other miscellar	SHA Mon L ENVIR SS AVER S ip Code , PA 190 Containm Enclosure bag Pro Exempted n of Material as insulat AT, or neous) Name Min	TREET DO7 Dent with Ne e cedure d (*) and No lition, of Register	Pegative Pon-Friable Any (Sp SF c	c. ressure e Procect nount secify or LF)	dure Removal		1	_
Jeancy Status During Abate acility Closed/Vacated Durin batement Performed Outsid me of Abatement:Al c of Work (Check all that ap sf or ≥3 If 60 sf or ≥260 If Location of estos-Containing Material (TO BE ABATED IN Facility (13) ide of bridge piers Registered Waste Hauler CE TRANSPORT GROU	ement (Cing Entire de of Norri M	12 heck o Period mal Fa PIM/ Vs M Cus Yes	Renova Demolii Is Loca Norma sed Sol aintena stodial (12) No	npletion 7) attement ours - De Attion attion attion attion attion attion attion attion attion DEP Wa wher ID N	Asbess (i.e., Sheet pace	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL Full (Mini- Glove Non-I Description tos Containing Ithermal system surfacing, VA other miscellar cking	SHA Mon L ENVIF SS AVER S ip Code , PA 190 Containm Enclosur ebag Pro Exempte n of Material I s insulat AT, or neous) Name MIN City, S	TREET DO7 Dent with Ne e cedure d (*) and No lion, of Register lERVA LA	Pagative Pon-Friable Am (Sp SF c	ressure e Proced nount secify or LF)	dure Removal		1	_
	ement (Cing Entire de of Norri M	12 heck o Period mal Fa PIM/ Vs M Cus Yes	Renova Demolii Is Loca Norma sed Sol aintena stodial (12) No	npletion 7) attement ours - De Attion attion attion attion attion attion attion DEP Wa wher ID N	Asbess (i.e., Sheet pace	Name of OS BRISTOI Street Addre 1123 BEA City, State, Z BRISTOL Description to Scontaining Ithermal system surfacing, VA other miscellar	SHA Mon L ENVIF SS AVER S ip Code , PA 190 Containm Enclosur ebag Pro Exempte n of Material I s insulat AT, or neous) Name MIN City, S	TREET DO7 Dent with Ne e cedure d (*) and No lition, of Register	Pagative Pon-Friable Am (Sp SF c	ressure e Proced nount secify or LF)	dure Removal		1	_

n.	E	G	E	ij	\mathbb{V}	In'
Ñ		DEC	4	4	2016	

Date of Notification (1)			181			
- I	/ 1	E	Name of	Building Owner/Opera	tor (2)	ASBESTOS CONTRO
			State	of New Jersey Dep	artment of Trans	LICENSING PORTION
	e Notification	7	Street Ad			
	nitial mended		1035 P	arkway Ave., CN 6	00	
	mended mendment á	6-5124146	014	, Zip Code		
DDCA DE	mergency (in	actuding		n, NJ 09625		
(NJAC 5:23-8) ju	stification)	.o.comig	Name of C			T
Ca	ncellation		Luis Lin	то		Telephone Number
			FACUL	TY INFORMATION		
Name of Facility Where Abatems	ent is Taking	Place (3)	· MOIL!	THE ORMATION	Tr	
Route 7 Bridge					Type of Facility ((1)
Street Address					School (K-12)	(Other than K-12)
Rt 7					DUTTE (i.e., Driv	(other than K-12) rate and commercial buildings,
City (5)					,,	oon mercial bulldings,
Kearny					Square Feet	# of Floors Blog. Age
County (6)			16	(7) (07)		
Bergen			County Coo	e (7)(STATE USE ONLY)	Current Use (Prior	if being demolished)
Name of Monitoring Firm Hired by I	Building Our	no. (0)	1			
Cardno ATC	outioning Own	ner (8)	ASCM No.	Name of Abateme		,
Street Address				BRISTOL ENV	TRONMENTAL, I	YC.
3 Terri Lane				Street Address		
				1123 BEAVER	STREET	
City, State, Zip Code				City, State, Zip Cod	e	
Burlington, NJ 08016				BRISTOL, PA 1	9007	
roject Manager for Monitoring Firm		1	ione No.	Telephone No.		cense No.
John Lutz			386-8800	215-788-6040	A Comment	00509
	Scheduled	Completion	Date (11)	Name of OSHA Mon	itor	,0005
5 /23 /16	ON	HOLI)	BRISTOL ENVIR	ONMENTAL INC	4
cupancy Status During Abatement (Check only	one)		Street Address		·•
Facility Closed/Vacated During Entit	e Period of	Abatemen	t /	1123 BEAVER S	TDEET	
Abatement Performed Outside of No	rmal Facilit	y Hours - D	Describe F	City, State, Zip Code	IREEI	
Time of Abatement:AM	_PM/	_PM	_AM		105	
pe of Work (Check all that apply)				BRISTOL, PA 190	107	
	0.202000			☐ Full Containm	ent with Negative Pri	
3 sf or ≥3 ff 160 sf or ≥260 ff	☐ Ren ☑ Den	ovation		WINI-Enclosure	9	essure
.00 5/ 6/ 2205 1/	Ø De⊓	ioiition		☑ Glovebag Proc	edure	1
	IsL	ocation	T	M Won-Exemples	(°) and Non-Friable	Procedure
Location of		rmally	1	Description of		Abatement Type
bestos-Containing Material (ACM)		Solely by enance/	Asbestos	Containing Material (ACM) Amo	
TO BE ABATED IN Facility		ial Staff?	(i.e., th	ermal systems insulati	on, Spe	Enclos Encap Encap Remov
(13)		(2)		surfacing, VAT, or ther miscellaneous)	SF or	Enclosure Encapsulate Repair Removal
	Yes A	lo N/A	. 0.	mer miscellaneous)		
side of bridge piers			Sheet pack	· !		
		1-1	Sheet pack	ing	2800	SF Ø D D D
		Int				
		10				0 0 0 0
Registered Waste Hauler						
1701		JDEP Wa	\$100 BOOK 100 BOOK 10		of Registered Landfill	
CE TRANSPORT GROUP, INC		20990	lo. Waste	MINI	ERVA LANDFILL	
,			Dispo	sal Date City, Str	ate	
ASTLE, DE 19720				3 SSC 0	NESBURG, OH 44	COD
By (Print or Type) Title			15	ionature	-	
cafiro Esti	mator		17	h 1 . D	1.0	Date / . / .

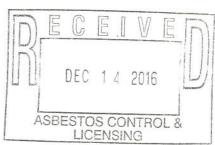
Dec. 10		
114	7 3	67 THE FO
DEC	E 2	2016
		-010

Date of Notification (1)	Name of	Building Owner/Opera	far (2)	ASBESTOS CONT	FROL
10 /16 / 15	State	of New James Den	nor (2)	LIV-INCHAS	
Agencies Notified Type Notification	- Carte	of New Jersey Dep	anment of Tran	sporation	
Ø EPA Ø Initial	Street Add				
☑ DOLWD ☑ Amended	1035 Pa	erkway Ave., CN 6	00		
□ DHSS	City, State,				
□ DCA □ Emergency (including	Trenton	, NJ 09625			
(NJAC 5:23-8) justification)	Name of Co	ontact		Telephanati	
☐ Cancellation	Luis Lim	10		Telephone Number	
	FACILITY	YINFORMATION			
Name of Facility Where Abatement is Taking Place (3)			Type of Facility (
Route 7 Bridge			School (K-12)	4)	
Street Address			TI I Subchanto - 0	1011	
R17				(Other than K-12) vate and commercial buildings,	
City (5)					Š
Kearny			Square Feet	# of Floors Bldg. Age	
County (6)	County Code	(7) (07475 (105 6			
Bergen	County Code	(7)(STATE USE ONLY)	Current Use (Prior	if being demolished)	-
Name of Standards Standards Standards	COLCAL			,	
Cardno ATC	SCM No.	Name of Abatemen	nt Contractor (9)		
Street Address		BRISTOL ENV	RONMENTAL, I	VC.	- 1
3 Terri Lane		Street Address			
Zity, State, Zip Code		1123 BEAVER			- 1
		City, State, Zip Code			
Burlington, NJ 08016		BRISTOL, PA 1	3007		
roject Manager for Monitoring Firm Telephor	ne No.	Telephone No.	lie	ense No.	
	86-8800	215-788-6040	1	0509	
art Date (10) Scheduled Completion D	Date (11) h	Vame of OSKA Monit	or ·	0508	
5 / 23 / 16 6 / 3 /	_16_	BRISTOL ENVIR			7
supancy Status During Abatement (Check only one)	9	freet Address	יייירג, ותינ		
acility Closed/Vacated During Entire Period of Abatement	1	1123 BEAVER ST			7
batement Performed Outside of Normal Facility Hours - Des	cribe		KEEI		1
ime of Abstement:AMPM/PM,	AM CI	ty, State, Zip Code			1
e of Work (Check all that apply)	1 6	BRISTOL, PA 1900	17		
1 12.55		T Full Containmen	ne serieb Alan		1
sf or ≥3 lf ☐ Renovation 50 sf or ≥260 lf ☐ Demolition		☐ Full Containmer Mini-Enclosure	n wan regative Pres	ssure	
30 sf or ≥260 lf		X Glovebac Proce	dune	4	
Is Location		Non-Exempted (*) and Non-Friable P	Procedure	
Location of Normally				Abatement Type	
estos-Containing Material (ACM) Used Solely by		Description of ontaining Material (A(
TO BE ABATED Maintenance/ IN Facility Custodial Staff?	(i.e., them	nal systems insulation	1 11100		
IN Facility Custodial Staff? (13) (12)	SUF	facing, VAT, or	SF or L	Nov air	
Yes No N/A	other	miscellaneous)	1 0, 0, 2	2 LE LE	*2
de of bridge piers				6	
de of bridge piers	eet packing		2800 S		
in in in i					
gistered Waste Hauler NJDEP Waste	Cubic Ya	rds of Name of	Registered Landfill		
E TRANSPORT GROUP, INC. Hauler ID No.	Waste	EAINED	VA LANDFILL		
20990	Dieser				
TLE, DE 19720	Disposal I				
		WAYKE	SBURG, OH 4468	8	
y (Print or Type) Title	Sinna	tire			



Date of Notification (1)	701	ASBESTOS CONTRO
	Name of Building Owner/Operator (2)	LICENSING
	State of New Jersey Department of Transp	Poretion
Agencies Notified Type Notification	Street Address	
Ø EPA Ø Initial	1035 Parkway Ave., CN 600	
Ø DOLWD Ø Amended	City, State, Zip Code	
☑ DKSS Amendment #2-5/26/16	Trenton, NJ 08625	
DCA Emergency (including justification)	Name of Contact	
☐ Cancellation	Luis Limo	Telephone Number
	Leie Little	
Name of Facility Where Abatement is Taking Place (3)	FACILITY INFORMATION	
	Type of Facility (4)	
Route 7 Bridge	□ School (kr < 2)	
Street Address	I Subchance a co	ther than K-12)
Rt 7	homes, etc.)	iner than K-12) e and commercial buildings,
City (5)		¥5-
Kearny	1 1"	of Floors Blog. Age
County (6)	ounty Code (7)(STATE USE ONLY) Current Use (Prior if b	
Bergen	Se (Prior if b	eing demolished)
lame of Monitoring Firm Hired by Building Owner (8) ASCI	N No. Name of Abatement Contractor (9)	
Cardno ATC	REISTOL ENGROSISTING	
reel Address	BRISTOL ENVIRONMENTAL, INC. Street Address	.
3 Terri Lane		
v. State. Zip Code	1123 BEAVER STREET	1
Surlington, KJ 08016	City, State, Zip Code	
	BRISTOL, PA 19007	
, september	Licens	e No.
	0050	99
, , , , , , , , , , , , , , , , , , , ,	(11) Name of OSHA Monitor	
5 / 23 / 16 5 / 27 /	16 BRISTOL ENVIRONMENTAL, INC.	1
pancy Status During Abatement (Check only one)	Street Address	
cility ClosedNacated During Entire Period of Abatement	1123 BEAVER STREET	
tement Performed Outside of Normal Facility Hours - Describ	De Course	
e of Abatement:AMPM/PMAM	BRISTOL, PA 19007	
of Work (Check all that apply)	Dido TOE, PA 15007	1
	☐ Full Containment with Negative Pressure	
or ≥3 If ☐ Renovation sf or ≥260 If ☑ Demolition		e /
si di 2200 il	☑ Glovebag Procedure	1
Is Location	☑ Non-Exempted (*) and Non-Friable Proce	dure -
Location of Normally	Denovirálio de	Abatement Type
os-Containing Material (ACM) Used Solely by	Description of sbestos Containing Material (ACM)	
TO BE ABATED	(i.e., thermal systems insulation,	Enclosure Encapsulate Repair
IN Fecility Custodial Staff? (13) (12)	surfacing, VAT, or	Not air by sol
Yes No N/A	other miscellaneous)	
of bridge piers	packing 2800 SF	
tered Waste Hauler NJDEP Waste	Cubic Yards of Name of Registered Landfill	
RANSPORT GROUP, INC. Hauler ID No.		
20990	MINERVA LANDFILL	
.E, DE 19720	Disposal Date City, State	
· .	WAYNESBURG, OH 44688	
rint or Type) Title	1000	1

no ck



Date of Notification (1)		Name	of B. ((d): 0 (o)		LLICENSING
10 /	16 / 15	State	of Building Owner/Ope	erator (2)	
Agencies Notified	Type Notification	100	of New Jersey De	partment of Trans	sporation
Ø EPA	M Initial	Street A			
Ø DOLWD		104	Perkwey Ave., CH	600	
Ø DHSS	Amendment #1-10/23/1		e, Zip Code		
DCA (NJAC 5:23-8)	Emergency (including justification)	Name of C	n, NJ 09625		
	☐ Cancellation	Luis Lit			Telephone Number
Name of Facility Where Aba	fement is Taking Place (3)	FACILIT	ty information		
Route 7 Bridge	Terming (Nette (5)			Type of Facility (4	1)
Street Address				School (K-12)	
Rt 7				Subchapter 8 (Other than K-12) afe and commercial buildings,
lity (5)				homes, etc.)	ste and commercial buildings,
Kearny				Square Feet	of Floors Blog. Age
ounty (6)	7	County Code	/71/07/75/105 011111		Joseph Age
3ergen	1	Coomy Cobe	(7)(STATE USE ONLY)	Current Use (Prior if	being demolished)
me of Monitoring Firm Kired t		CM No.			,
ardno ATC		O.17 160.	Name of Abatemen	nt Contractor (9)	
el Address			Street Address	IRONMENTAL, INC	5.
Terri Lane			1123 BEAVER		
State, Zip Code			City, State, Zip Code		1
lington, RJ 08016		1	BRISTOL, PA 19	1.0	
f Manager for Monitoring Firm	Telephone	No.	Telephone No.	1007	/
7 Lutz	609-386		215-788-6040	Licen	se No.
ate (10)	Scheduled Completion Da		ame of OSKA Monito	005	ios
/ 19 / 15	ON HOLD		BRISTOL ERVIRO		
icy Status During Abatement	(Check only one)		reel Address	THERETAL, INC.	1
y Closed/Vacated During Enti			123 BEAVER STR	PPP	
nent Performed Outside of No	ormal Facility Hours - Descri	ibe to		EEI	
f Abatement:AM	PM- AN	7	, State, Zip Code		
Vork (Check all that apply)			RISTOL, PA 19007		1
13) (C.1) (C.1)			☐ Full Containment Mini-Enclosure	with Name:	
≥3 K >r ≥260 K	☐ Renovation ☑ Demolition	=	THE THREE PRINTS OF THE PARTY O		e /
2000	23 DOMORRON		☑ Glovebeg Procedo ☑ Non-Exempted (°)	Ure	ſ
	Is Location		2 · · · · · · · · · · · · · · · · · · ·	The Ron-Frieble Prope	dure
Location of	Wormally Used Solely by	De	escription of	1	Abatement Type
Containing Material (ACM) O BE ABATED	Maintenance/	Asbestos Con	taining Material (ACh	Amount	2 2 m m
IN Facility	Custodial Staff?	(i.e., inerme.	systems insulation, cing, VAT, or	(Specify	Enclosu Encapsu Encapsu Repair
(13)	Yes No N/A	other m	iscellaneous)	SF or LF)	Enclosure Encapsula Repair
	= 1 - 1 - 1 - 1			_ /	Enclosure Encapsulate Repair
bridge piers	□ □ ⊠ Sheet	packing .		2800 SF	
				10000	
- Ir					
					nininini
					금금님
d Waste Hauler	NJDEP Waste	Cubic Yards	of Name of Reg	sistered Landfill	
VSPORT GROUP, INC.	Keuler ID No. 20980	Waste	MINERVA	LANDFILL	
		Disposal Date		To the first	
RE (696A	1		1		

20990

State of New Jersey APPROVE DATOMOVOORHEES NOTIFICATION OF ASBESTOS ABATEMENT (Pursuent to NJAC 8:60 and 6:16)

Ch #2894 Date of Notification (1) Name of Building Owner/Operator (2) 96 / 15 10 State of New Jersey Department of Transporation Agencies Notified Type Notification Street Address D EPA M mitiel 1035 Perkwey Ave., CH 600 DOLWD ☐ Amended City, State, Zip Code D DHSS Amendment # DEmergency (including Trenton, NJ 08625 DOCA (NJAC 5:23-B) justification) Name of Contact Cancellation Telephone Number Luis Limo FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Route 7 Bridge □ School (K-12) treet Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, RIT Y (5) Square Feel learny # of Floors Blog Age County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) inty (6) ergen e of Monitoring Firm Hired by Building Owner (8) ASCM NO. Name of Abatement Contractor (8) rdno ATC BRISTOL ENVIRONMENTAL, INC. Address Street Address erri Lane 1123 BEAVER STREET ate. Zip Code City, State, Zip Code ngton, RJ 08016 BRISTOL, PA 19007 hanager for Monitoring Firm Telephone No. Telephone No. LUEZ License No. 609-366-8600 215-768-6060 Scheduled Completion Date (11) 00508 Name of OSHA Monitor / 19 / 15 11 / 28 / 15 BRISTOL ENVIRORMENTAL, INC. Status During Abatement (Check only one) Street Address losed/Vacated During Entite Period of Abatement 1123 BEAVER STREET ni Periormed Outside of Normal Facility Hours - Describe City, State, Zip Code batement: ____AM-___PM/ BRISTOL, PA 19007 k (Check all that apply) Full Containment with Negative Pressure ☐ Renovation ☑ Demolition Mini-Enclosure 260 H S Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location ocation of Normally Abstement Type Description of Used Solely by taining Material (ACM) Asbestos Containing Meterial (ACM) Maintenance/ Encapsulate 3E ABATED Amount (i.e., thermal systems insulation, Custodial Staff? ! Fecility (Specify surfacing, VAT, or (12) (13)SF or LF) other miscelleneous) Yes No NIA (ge piers X Sheet packing 2800 SF X ste Kauler NJDEP Weste Cubic Yards of Name of Registered Landfill Hauler ID No. ORT GROUP, INC. Weste

MINERVA LANDFILL

CK103524

	0			11(1)	9				
Date of Notification (1)	Na	me of Building Owner/	operator (2)	RMI	A NEC 1	4/	19	1	en
Agencies Notified Type Notification	Stri	eet Address	,	1 1	SEESTOS		TO	N 8	
DEP Initial Amended Amendment	200	y, State, Zip Code () Mell	15ten	112	7 105	10H	9_	JL O	
DOH Emergency (Including Nar	ge of Contact	100	1 1	Talanhana N	ımher			
□ DCA . □ Cancellation	1	FACILITY INFORMAT	MeAI)					
Name of Facility Where Abatement is Taking	g Place (3)	K.		Facility (4)					
Street Address Do Meisten	Auc		□ Sub	iool (K-12) schapter 8 er (l.e. pri) (Other than K- vate & commerc	12) dal bui	ildings	s, hon	1es.
City (5)	1100		etc. Square F)	# of Floors	_	Bldg.		
County (6)	l Cau	inty Code (7)	60,	000	3		3	69	cof
10 menset	(STA	ATE USE ONLY)			if being demolis	7	٢,	0	FE
Name of Monitoring Firm Hired by Building C	Owner (8) A	SCM No.	Name of Abatem	ent Contr	actor/(9)	-/	ON	45/	4
Street Address West St	tone 12	init	Street Address	DV	572		<i></i>	~ 1	2
City, State, Zip Code	J		City, State, Zip C	poor	tstoo	OL) ,	n	1.1
Project Manager for Monitoring Fifth	el Tele	phone No.	Telephone No.	D-2) J. License I	No. ()	0	76	8
	Scheduled Complet	tion Date (11)	Name of OSHA N	Monitor	T				
Occupancy Status During Abatement (Check			Street Address	, , ,					\neg
Facility Closed/Vacated During Entire Policy Abatement Performed Outside of Normal Other – Describe:	eriod of Abatement	uns	City, State, Zip Co	ode					
Scope of Work (Check All That Apply)							_		\dashv
≅ ≥3 sf or ≥3 if □ ≥160 sf or ≥260 if	Renovation Demolition	ment on	Mini-En	closure	with Negative F				
	Is Location		' □ Non-Ex	empted (*) and Non-Friab			e ement	
Location of Asbestos-Containing Material (ACM)	Normally Used Solely by		cription of			_		ре	\dashv
TO BE ABATED In Fadility	Maintenance/ Custodial Staff?	(i.e. thermal :	aining Material (AC systems insulation, ing, VAT, or	M)	Amount (Specify SF or LF)	Rer	Re	Enca	Enc
(13)	(12)	other m	iscellaneous)		SF OI LF)	Removal	Repair	Encapsulate	Enclosure
Bailed Room	Yes No N/	A			6/1-			8	
Julicolo 100010		WRAA	OF NON	ر ا د	1010		-		\dashv
		FRIAble	c FRAM.	-	10 Ag At		-	V	\dashv
Name of Registered Waste Hauler	NJDEP	Waste Cubic Y			,				
WASTE MANAGE	Ment y				istered Landfill				
City, State EWING, NJ		Disposa	Date City	State	INSQU	ll	<u> </u>	A	A
TOTA WASHAWA	Title DNES		nature // a	che	Date Date	12	19	1	6
ASB-41 (R-06-08)	<i>V</i>	1	Do not use this for	m for asb	estos licensure	exemp	oted a	ctivitie	 98.

State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: 2016-176

100		(P)		Contract	W	E	1
11);	- 15-	(U)		L)	T.	15.	.111
Che	ck#	815	5 1	A	2016	•	11/

								Check	7 0 1 0,0 1	0 0	110	-1-				
Date of Notification	n (1)	I I Name	e of Build	ding Own	er/Operator (2))						-				
11 2 / 1 2	1/1161	11	nthia E			***		ASE	ESTOS (CONT	ROL	8				
Agencies Notified	Type Notification		t Addres	25-200-01-01				lana.	LIUZI	OHEC						
☐ EPA	X Initial															
DEP		City,	State, Zi	p Code												
X DOL	☐ Amendm			NJ 079	01											
X DOH	_	Name	of Cont	act				Telephone	e Number							
□ DCA	☐ Cancella	tion C	ynthia	Baker					+ - • -							
					ILITY INFORM	IATIO	N.									
				FAC	ILIT INFORIV	ATIO		Type of Facility (4)							
Name of facility wi	nere abatement is	taking place ((3)						(K - 12)							
Cynthia Bake	r							Subcha	apter 8 (Othe	er than	K-12)					
Street Address							(1)		Private/Com	mercia	1					
									Homes, etc. # of Floors	_	Bldg. Ag	ge				
City (5)		County (6)			Co	unty Code (7)		10 000000000000000000000000000000000000	_ _						
	07004	Linian				(St	ate use only)	Current Use (Pr	rior if being o	emolis	hed)	701-4-11-12				
Summit, NJ		Union				L.,	This of Abstract (residential								
Name of Monitorin	ng Firm Hired by E	lidg. Owner (8)		ASCM No. n/a	- 1		t Contractor (9)								
						_	B & G Restorati	on, inc.								
Street Address							105 Ryerson R	oad								
City, State, Zip Coo	le					_	City, State, Zip Code									
,							Lincoln Park, I	NJ 07035								
Project Manager fo	r Monitoring Firm		Pho	ne Numb	per		Telephone Number	<u> </u>	License No							
							(973)696-6869 00378 Name of OSHA Monitor									
Scheduled Start Da	ate (10)	Sched. Co	mpletio	n Date (1	1)		B & G Restorat									
12/22/2016		12/23/2	2016				Street Address									
Occupancy Status	During Abatemen	t (Check only	one)				105 Ryerson R	on Road								
Facility close	d/vacated during	entire period o	of abater	nent.			City, State, Zip Code									
Describe:	erformed outside	or normal facil	nty nours	·			LincolnPark, N.	1 07035								
Other-Descri						-	-	7 0 7 0 0 0								
Scope of Work (ch							F. II O - tain-mont w/nor	estivo proceuro [Gloveba	nroce	dura					
Demolition	X	Renovation				_	Full Containment w/neg	jative pressure [Non-frial	1000						
>3 sf or >3 lf		≥160 sf or ≥26				X	Mini-enclosure			R F		_				
Location of asbestos-col	ntaining	Is location no by maintenar				ion of	asbestos-containing	Amount		e	n	E n				
material to b	e	staff(12)			material			(Specify S LF)	SF or	a	c	C				
abated in fac	cility (13)	Yes	No	N/A						/ i	р					
basement boile	er room			×	pipe (wra	р&с	ut)	7 If		X C		旦				
										415	111	분				
									I	井늗		14				
1									L	井늗	 	#				
	Jaulos	INJEST	Janier II	D# 17	Subic Yards of	Waste	Name of Registered	Landfill			1	1				
Registered Waste I B & G Restora	tion, Inc.	NJDEP I 195		J# C	1	. 14310	Tullytown	Resource & Re	ecovery C	enter						
City, State			1	Disposal I			City, State	DΛ								
Lincoln Park, I				12/	23/2016 T Signature	Tullytown, PA										
Completed by (Prin Gordana Luna		Title Secretary/	Treasu	rer	Signature		Gordana Luna		12/12/2	2016						

211022

State of New Jersey

TI			W_	Print Form
	DEC	14	2016	الالا

CK400				to NJAC						DEA	4 A	2016				
Date of Notification (1)		T	Name o	f Building	Owner/C	Operator	(2)	111	la.	DEC	1 4	2010)			
12/11/2016			Delta	Interior	Constr	uction,	Inc	-	***************************************							
Agencies Notified Type Notification			Street A					***************************************	AS	BESTOS LICE	CO	NTR	OL a	X		
EPA Initial		L		erman A	(E001072			1		1_10-2	HOM:	903				
DEP Initial Amended Amendment	#		55.3	ate, Zip Co Arlingto		7031										
Emergency	(including	_		f Contact	11, 145 0	77031			Tol	ephone Nur	nhor	_				
DOH justification) DCA Cancellation				vid Chis	slev				1 616	sprione ivui	nper					
				LITY INFO	-	ON										
Name of Facility Where Abatement is Takir Columbia Bank	g Place (3	3)					Type	of Facility (4	1)							
Street Address								School (K-1								
604 Amboy Ave							7	Subchapter Other (i.e. p				dings,	home	es,		
City (5)								etc.) re Feet	# of	Floors	TE	ldg. A	ae			
Woodbridge, NJ							N/A		1		1	N/A				
County (6) Middlesex			County (Code (7) USE ONLY		_	Curre	nt Use (Pric K	r if beir	ng demolish	ned)					
Name of Monitoring Firm Hired by Building	Owner (8)	1	ASCN					tement Con		*						
Briggs Associates			0004					prise of N	IJ, Inc							
Street Address 3 Crosswicks Street							Addres	s 6th Stree	4							
City, State, Zip Code			- A					p Code	,,				-	_		
Bordentown, NJ 08505						100		Park, NJ (7508							
Project Manager for Monitoring Firm			Telepho	ne No.			one No			License N	0,					
Michael				98-5520		973-	595-6	955		00641						
Start Date (10) 12/12/16	Schedule 6/20/1		npletion l	Date (11)				IA Monitor	I Inc							
Occupancy Status During Abatement (Chec						S/M Enterprise of NJ, Inc. Street Address										
Facility Closed/Vacated During Entire	Period of	Abaten	nent			5/31/2-0-5/4		Box 8265								
Abatement Performed Outside of Norm Other – Describe: Occupied/unoccupie	nal Facility ed	/ Hours	5		_	000000000000000000000000000000000000000		e, Zip Code on, NJ 07508								
Scope of Work (Check All That Apply)							,									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Larensey	Renova Demolit				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure										
	1					×	Nor	n-Exempted	(*) and	l Non-Friab	le Pro					
	100	Locati	10000										ement pe			
Location of Asbestos-Containing Material (ACM)	Use	Normal d Sole	ly by	Ashes	Des tos Cont	scription		(ACM)	A	mount		ı i				
TO BE ABATED		intenai todial S			thermal	systems	s insula		(S	pecify	Rei	R	Encapsulate	Enc		
In Facility (13)		(12)				cing, VA niscellar			51	or LF)	Remova	Repair	psul	Enclosure		
NAME OF THE PROPERTY OF THE PR	Yes	No	N/A								<u>a</u>		ate	re		
Ground Floor		х			Flo	or Tile	es		35	00 SF	x					
Name of Registered Waste Hauler		I NI	IDED IA	/asta	Cubic	Varda		Name of E	Panieta	red Landfill						
Services Transport Group, Inc	Proup Inc. Hauler ID No.							IESI	registe	rou Lanuilli						
City, State	20990					sal Date		City, State	9							
New Castle, DE					6/20/			A STATE OF THE PARTY OF THE PAR		PA 1972	20					
Completed by	Title				S	ignature	110	WAR			te					
Danah Haroun	Sec.					HU	VVV	YLL		12	2/11/	16				

0, -																	
Date of Notification (1)			14.000		Name	of Building	g Owne	2)		DEC	1	4 :	2016				
	13 /	16	_		Ver	izon						- 55		-010			
Agencies Notified	Type Notifica	ation			Street	Address				ACI	BESTO	0 /	201	TO	N 0		
⊠ EPA					1 V	erizon W	'ay			Mot			SIN		JL &		
⊠ DOLWD		F			City, S	State, Zip C	Code			Laurana	ALL COLORS	-1 /	A. Li Y.	4.21			
□ DHSS	Amendme		377		Bas	sking Rid	lae. NJ	07920									
☐ DCA (NJAC 5:23-8)	☐ Emergen		luding	1		of Contac	(1 7 1 - 2000 - 101			Telephone	Number	8		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
(110/10/0.20/0)	☐ Cancellat					x Baylor	77			-							
					FAG	CILITY IN	FORM	IATION	:								
Name of Facility Where A	Abatement is T	aking	Place	(3)		7.5			Type of Facility ((4)							
Verizon									School (K-12								
Street Address									Subchapter 8				1.0				
95 William Street									Other (i.e., pr homes, etc.)	ivate and cor	mmercia	i bu	laing	S,			
City (5)			1110						Square Feet	# of Floors	s	Blo	g. Ag	10			
Newark, NJ 07102									10,000	3		0.0	9.7.5	,0			
County (6)					Cour	nty Code (7)(STATE	USE ONLY)	Current Use (Prior if being demolished)								
Essex																	
Name of Monitoring Firm		ding O	wner (8)	ASCM	No.	Name	of Abateme	ent Contractor (9)								
USA Enviornmenta	I						JVN	N Restora	tion Inc								
Street Address							Street	Address									
8436 Enterprise Ave	enue						47	Foster Ro	ad								
City, State, Zip Code							City, S	State, Zip Co	ode								
Philadelphia, PA 19	153						1 200		NY 10309								
Project Manager for Moni	toring Firm			Tele	phone	No.	Telepl	hone No.		License N	lo.						
Mark Jenkins					5-365			-605-6256		00774							
Start Date (10)	Is	Schedu	ıled C			te (11)											
05/_02/	2.5					16	1.1000000000000000000000000000000000000	of OSHA Materials	ionitor								
Occupancy Status During				×			Street Address										
□ Facility Closed/Vacate					nont		70-000762										
☐ Abatement Performed	2000					crihe			n Avenue								
Time of Abatement: 7								State, Zip Co									
		- C - S - S - S - S - S - S - S - S - S					LIC	NY 11101	<u> </u>								
Scope of Work (Check all	that apply)							T Full Con	tainment with Neg	ative Pressu	re						
≥3 sf or ≥3 lf			⊠ Re	novatio	on			☐ Mini-Enc		ative r ressu	10						
≥160 sf or ≥260 lf			☐ De	molitio	n				g Procedure		·						
								Non-Exe	mpted (*) and Nor	n-Friable Pro		(C) (C)					
Location	of			Locati Normal			_	\aaaintiaa a				Aba	teme	ent T	уре		
Location Asbestos-Containing I		0		d Sole		Asbe		escription on the contract of	iterial (ACM)	Amoun	t	Re	Repair	E	E		
TO BE ABA	TED	,		intena			., therm	al systems	insulation,	(Specify	y	Removal	pair	Encapsulate	Enclosure		
IN Facilit	:y		Cust	todial S (12)	staπ?			facing, VAT		SF or LF	=)	/al		sula	ure		
(13)		1	Yes	No	N/A		otner	r miscellane	ous)					ite			
Exterior			×			Windov	v Caull	kina		180SF	: 1	X					
4 th Floor Office					 - -			l mastic		4,300S	-	X		$\overline{\Box}$			
Exterior 10 ^{th,} 8 th Floor	rs							ng / Tar		240SF		X	П	$\overline{\Box}$			
Exterior 8th Floor		-				Pipe Fit				10LF		X	П				
Name of Registered Wast	e Hauler				JDEP \	11 13	,	Yards of	Name of Regis					_			
Newark Carting	ic Hadici			Н	auler II	O No.	Waste		G.R.O.W.S		1						
City, State						NJ-566 40 Disposal Date City, State											
Hackettstown, NJ								31/16	Morrisyille	,PA							
	(ne)	Title							1/1		Date		-				
Completed By (Print or Type) Ralph Barnhardt Project Manager									11. 1	12-13-6016							
Ralph Barnhardt Project Manager									mon		16	1	/	101	121		

Date of Notification (1)	Name of Building Owner/Operator (2) DEC 1 4 20							2046	-									
09/	12 /	16				rizon				DE	J	4	ZUI)				
Agencies Notified	Type Notific	ation			Stree	t Address					-	-					1	
⊠ EPA	□ Initial	ation				erizon W	lavi				1	ASE	EST				OL &	
☑ DOLWD		d				State, Zip							1_1	CEN	ISir	G		
☑ DHSS	Amendm	ent#	1		12.5													
□ DCA	☐ Emerger		cluding	9				NJ 07920										
(NJAC 5:23-8)	justificat	200			110000000000000000000000000000000000000	of Contac					Tele	phone N	Numbe	er				
	☐ Cancella	ition			Ale	x Baylor												
A1					FA	CILITY IN	IFO	RMATION										
Name of Facility Where A	Abatement is	Taking	Place	(3)					100	of Facility (4								
Verizon										hool (K-12)	2) 8 (Other than K-12)							
Street Address							her (i.e., pri				ial bu	ildino	IS.					
95 William Street							mes, etc.)											
City (5)							e Feet	# of Floors Bldg. Age			ge							
Newark, NJ 07102							000	3										
County (6)					Cour	nty Code (7	7)(STA	ATE USE ONLY)	Curren	nt Use (Prio	r if be	eing der	nolish	ed)				
Essex																		
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)										tractor (9)								
USA Enviornmenta	rnmental JVN Restoration Inc									С								
Street Address		-					Str	eet Address	-									
8436 Enterprise Ave	enue																	
City, State, Zip Code				47 Foster Road City, State, Zip Code											-			
Philadelphia, PA 19	153						2000	Staten Island		0309								
Project Manager for Moni				Tele	phone	No.		ephone No.			Lice	ense No)		-			
Mark Jenkins				10000	15-365		1 80	18-605-6256			00774							
Start Date (10)	15	Sched	uled C			te (11)		me of OSHA M			00774							
05/_02_/						/ 16 Testor Tech												
Occupancy Status During					Street Address													
□ Facility Closed/Vacate			915.0															
☐ Abatement Performed																		
Time of Abatement: 7:	:00 AM-3:30	PM/_		PM	AN	Л	11 83	J, State, Zip Ct .IC NY 11101										
Scope of Work (Check all	that apply)								8									
	11.27									it with Nega	tive F	ressure	е					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re					☐ Mini-Enc		dure								
<u> </u>				TTOTAL	,,,			Non-Exe Non-Exe	mpted ((*) and Non-	-Friab	le Proc	edure					
				Loca										Ab	atem	ent T	уре	
Location				Norma				Description o						Z	Z	т	т	
Asbestos-Containing N TO BE ABA		1)		intena				Containing Ma ermal systems				Amount Specify		Remova	Repair	nca	nclo	
IN Facilit			Cus		Staff?	(5	surfacing, VAT,	, or	J.,		F or LF)		oval	₹	Encapsulate	Enclosure	
(13)			Voc	(12) No	N/A	-	ot	her miscellane	ous)					877		late	œ.	
Exterior			Yes	No	N/A	Windov	v C-	ulking				180SF		\boxtimes				
4 th Floor Office					_			nd mastic			0.0							
4 Floor Office						Floor	ne a	no mastic			4,	,300SF						
			ᆜ											Ш	Ш	Ш	Ш	
N 75																		
						Vaste No.	Cut	oic Yards of		e of Registe		andfill						
Newark Carting						6	4		G.	R.O.W.S.,	Inc.							
City, State							Dis	posal Date	City,	State								
Hackettstown, NJ			0	7/15/16	Mo	rrisville,F	PA											
Completed By (Print or Ty	pe)	Title					Signature Date											
Ralph Barnhardt		P	rojec	t Mar	ager			1/1/	-2-	/	/							
								111/	3									

ASB-41 MAY 11

D / (N ///); ///				1						1						
Date of Notification (1)				1000		g Own	er/Operator (E)EC	1 4	21	116			
/		16		Ver	izon			1	had be					11		
Agencies Notified	Type Notifica	ition		Street	Address				1	L						
⊠ EPA				1 V	erizon W	ay			Chrysa	ASBE					L &	
□ DOLWD	☐ Amended				State, Zip C				i.		LIC	-1717		1	_	
□ DHSS	Amendme	W. W. W. W. W. W.	_		king Ric		J 07920									
DCA (NJAC 5:23-8)	☐ Emergend justification		ig		of Contac	_			17	Telephone Nu	ımher				-	
(NJAC 5.23-6)	☐ Cancellati				x Baylor				1.	elephone 140	2111001					
	Cariociiae										ranco, la				_	
				FA	CILITY IN	IFOR	MATION									
Name of Facility Where A	Abatement is T	aking Plac	e (3)					100	e of Facility (4)							
Verizon								School (K-12)								
Street Address									Subchapter 8 (0 Other (i.e., priva	ate and comr	nercia	bui	ldinas	S.		
95 William Street									homes, etc.)				- 3	3.5		
City (5)								are Feet	# of Floors		Bld	g. Ag	е			
Newark, NJ 07102					10,000 3											
County (6)	County Code (7)(STATE USE ONLY) Current Use (Pric									if being dem	olished	d)	-			
Essex						,,			**************************************							
Name of Monitoring Firm	e of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contract														-	
USA Enviornmenta	The Wald of the Address of the Control of the Contr	JVN Restoration Inc														
Street Address				L								=				
8436 Enterprise Av	00110					00	et Address 7 Foster Ro									
	enue															
City, State, Zip Code							State, Zip C		10000							
Philadelphia, PA 19	200000000	17-1811-0-0				12000	taten Island	YNE	10309							
Project Manager for Mon	itoring Firm			lephone			phone No.			License No.						
Mark Jenkins				215-365			18-605-6256			00774						
Start Date (10)	S	cheduled	Comp	letion Da	te (11)	Nan	ne of OSHA N	Monito	or							
05/02/	16	12	/ _3	1 /	16	Te	estor Tech									
Occupancy Status During	Abatement (0	Check only	one)			Street Address										
☐ Facility Closed/Vacate		0.00		ement		10	59 Jackso	on Av	venue							
Abatement Performed	1(7.2)				cribe		State, Zip C								\neg	
Time of Abatement: 7	:00 AM-3:30	PM/	PM-	AN	Λ	20000000	C NY 1110									
Scope of Work (Check al	I that apply)						0 101 1110	-								
Scope of Work (Grieck at	іі шасарріу)						⊠ Full Con	tainm	nent with Negat	ive Pressure						
≥3 sf or ≥3 lf			enova				☐ Mini-End	closur	re							
≥160 sf or ≥260 lf			emoli	tion			☐ Gloveba		ocedure ed (*) and Non-l	Eriable Droce	dure					
			ls Loc	ation	T		□ Non-Exe	inple	d () and Non-	Thable Froce	Judic	۸he	tome	ent Ty	100	
Location	of		Norm				Description of	of			+					
Asbestos-Containing				lely by	Asbe	estos (Containing Ma		I (ACM)	Amount		Remova	Repair	Enc	Enclosure	
TO BE ABA	ATED	l N		ance/ I Staff?	(i.e		mal systems		ation,	(Specify		Nov	air	aps	losi	
IN Facili	ity		(12				urfacing, VAT er miscellane			SF or LF)		<u>a</u>		Encapsulate	Jre	
(13)		Yes			1	Otti	er miscenane	sous)						te		
F. da dian					Mindo	Ca	Illing			180SF			П	П		
Exterior				Ц	Windo	w Cal	Jiking			10031	_		ш	ш	Ш	
		П	П	П												
											-		$\overline{\Box}$			
								1.61	15-11	1 1			Ц		Ш	
Name of Registered Waste Hauler NJDEP Waste							ic Yards of ste		ame of Registe							
Newark Carting	66	40)		G.R.O.W.S.,	inc.										
City, State							osal Date	Ci	ity, State							
Hackettstown, NJ						07	7/15/16		Morrisville,P	A						
Completed By (Print or T	vpe)	Title				1	Signature /	10	1/		Date			100000	-	
	,,,,		ct Ma								2×					
Ralph Barnhardt Project Manager									111-6							

ASB-41 MAY 11