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Name of Facility Where	Abstament in Takin	or Diago	2)	FAC	ILITY INF	ORMAT	ION								
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25 Park Boulevard									Other (i.e. pr	ivate	& commerc	iz) cial buil	dings	, hom	es,
City (5)					- 1				etc.) uare Feet		f Floors		10.73		
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Camden					USE ONLY)		of	fice B.	11	U.C	/			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCI	M No.		Name	of A	batement Cont	ractor	(9)				
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Street Addross							Street						r		
City, State, Zip Code	The state of the s						POI								
ony, state, zip code							35270		Zip Code	24					
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Stair Tre	ead			x		P	Mastic			70	6 SF	x			
interior door caulk	1st floor hall			х		-	Caulk				9 LF	x			
electrical room	m 1st Fl			X			ion Ga	sko	t l		LF	x			
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Vacant Building	ung Place	(3)					Тур	oe of Facility (4	,				-00-500	
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Street Address						Perr								_
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Project Manager for Monitoring Firm			Telepho			Teleph			,, 	License	e No.			
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Occupancy Status During Abatement (Ch			,			Street	Addr	ess						\dashv
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	Period of mal Facilit	Abaten ty Hours	nent s			City, St	tate,	Zip Code						
Scope of Work (Check All That Apply)					_									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				- X	M G	ull Containmen	dure					
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Name of Registered Waste Hauler		LAI	JDEP W	noto	0	- V1								
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City, State Elm NJ						osal Date		City, State Morrisville	. PA	1000	7			
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Project Manager for Monitoring Firm		1	Taleph	ena No.	Teleph	one No.	U/93Z	I Lisense N	là.			
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Provident

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Inv#	10731
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.IAC 8:60 and 5:16)

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Date of Notification (1)				Name	e of Buildin	g Owner/Operator ((2)	DEC 1	-8	2019	. ,	13.22
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(NJAC 5:23-8) justifica		unig		Name	e of Contac	t		Telephone Numi	per			
☐ Cancella	ation			Vic	tor Lobo	zzo		908-757-621	3			
				FA	CILITY IN	IFORMATION				7.00		
Name of Facility Where Abatement is	Taking P	lace (3)			22	Type of Facility (4)				
Residence							School (K-12)					
Street Address								(Other than K-12) vate and commer		uildin	gs,	
City (5)							Square Feet	# of Floors	BI	dg. A	ae	
Mountainside							2000	2		65	3-	
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demolis	hed)			
Union						•	Residence	-				
Name of Monitoring Firm Hired by Bui	lding Owr	ner (8)) [ASCM	No.	Name of Abateme	ent Contractor (9)					
Guardian Contracting, Inc.						Guardian Co	ntracting, Inc.					
Street Address						Street Address						
1889 Rte. 9, Unit 61						1889 Route 9	, Unit 61					
City, State, Zip Code						City, State, Zip Co	ode					
Toms River, New Jersey 0875	5					Toms River, I	New Jersey 087	55				
Project Manager for Monitoring Firm		- 1	Tele	phone	No.	Telephone No.		License No.		511100000		
Nicholas Fernicola			_15M2		-9932	732-349-9932		00624				
	Schedule		1.5		- 15 S	Name of OSHA M						
/ /				_ / .	19_	E.M.S.L. Anal	ytical					
Occupancy Status During Abatement		37-2	375			Street Address						
 ☐ Facility Closed/Vacated During Ent ☐ Abatement Performed Outside of N 					oribo	1056 Stelton						
Time of Abatement:AM						City, State, Zip Co		200				
Scope of Work (Check all that apply)						Piscataway, N	New Jersey 088	54				
						☐ Full Cont	ainment with Nega	ative Pressure				
⊠ ≥3 sf or ≥3 lf						Mini-Encl	osure					
☐ ≥160 sf or ≥260 lf	M	Demo	OIIIIO	n		☐ Glovebag ☒ Non-Exer	n Procedure opted (*) and Non	-Friable Procedur	е			
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Asbestos-Containing Material (ACM TO BE ABATED		Jsed : Maint				stos Containing Mat , thermal systems i		Amount (Specify	Removal	Repair	nca	nclo
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Guardian Contracting, Inc.	MATTER	-0	1 70	20223		2	T.R.R.F.					
City, State						Disposal Date	City, State	lammardi				
Toms River, New Jersey	T					12/13/19	Tullytown, F	Pennsylvania				
Completed By (Print or Type)	Title					Signature	/	Dat	- 1	- Land		
Nicholas Fernicola	Proje	ect M	ana	ger			1		41.	211	9	

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Name of Facility Where Abatement is Tal	king Place	(3)	FA	CILITY IN	FORM	ATION	T =	(=						
Private Residence Street Address		(0)					Т	e of Facilit	100					
City (5)							×	Subchapt	ter 8 (Other e. private & c	than K-	12) cial bu	ıilding	s, hor	nes,
Toms River, NJ 08753							Squ 160	are Feet	# of F 1969			Bldg.	Age	
County (6) Ocean County			County (STATE	Code (7) USE ONL	.Y)		Curi	rent Use (F	Prior if being	demolis	shed)			
Name of Monitoring Firm Hired by Buildin N/A	g Owner (8)	ASC	M No.		Name Spes	of Ab	atement C	ontractor (9))				
Street Address						Street	Addre							
City, State, Zip Code						City, S	tate, 2	Zip Code	IJ 07424			50-30		
Project Manager for Monitoring Firm			Teleph	one No.		Teleph	one N	10.		cense N	10.			
Start Date (10) 12.14.2019	Schedu	iled Coi	mpletion	Date (11))	973-8 Name (HA Monito		1383				
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Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	Period of	Abaton	nent s				/lerili	ne Ave, i	Apt C					
Other – Describe: Scope of Work (Check All That Apply)								Park, N	J 07424					
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demolit				×	Mir	ni-Enclosur ovebag Pro						
Location of	100	Locati Normali							a () and ive	JII-I Hab	16 110	Abate	emen	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intenar todial S (12)	ly by nce/	Asbes (i.e.	tos Cor therma surfa	escription on taining Ma I systems acing, VAT miscellane	iterial insula , or	(ACM)	Amou (Spec SF or I	ify	Remova	Repair	e Encapsulate	Enclosure
	Yes	No	N/A		Other	miscellarie	ous)				oval	air	sulate	sure
Basement Room/Closet			Х	Vinyl	Tiles	and asso	oc. N	lastic	150 S	SF.	Х			
						2								
Name of Decist														
Name of Registered Waste Hauler Spes Contracting LLC		1 20.00	IDEP Wauler ID	J 시간 ()	of Wa	Yards ste			Registered I	_andfill				
City, State Woodland Park, NJ 07424					1.0 Dispos	sal Date		City, State	9					
Completed by Branislav Pavlov	Title projec	ct mar	nager		Hall Oliver A. G.	ignature	1	Morrisvi	————	Date	e 13.2	010		
							(12.	13.2	019		

No cheek

Print Form

Date of Notification (1) 12-12-19 Agencies Notified Type Notification Initial Amended Amendment # Emergency (in justification) Cancellation		Name PR II	of Building Owr	er/Operato	or (2) erty Three Ur	bon Do		F	ii .	Wi	TUTTE TUT
EPA Initial Amended Amendment # Emergency (in justification)						Danke	newal I	10	Ш	fà.	
DEP Amended Amendment # Emergency (in justification)		33 C	Address otters Lane								
DOH justification)			tate, Zip Code Brunswick, N	JJ 08816			DE	L I	8 2	2019	
☐ DCA ☐ Cancellation	cluding	Name	of Contact		()	Te	lephone N	umber			
		100000000000000000000000000000000000000	Boumann CILITY INFORM	ATION		(7	32) 427=	4573			Landar .
Name of Facility Where Abatement is Taking F	Place (3)	170	SILIT IN OKW	ATION	Type of Facilit	y (4)					
Street Address 4000 Road to Grasselli					School (i Subchap Other (i.e etc.)	ter 8 (Oth	er than K- & commer	12) cial bu	ildings	s, hon	nes,
City (5) City of Linden, NJ 07036					Square Feet	# 0	f Floors		Bldg.	Age	
County (6) Union			Code (7) USE ONLY)		Current Use (F Old Storage	rior if bei	ing demolis	shed)		- 11/2	
Name of Monitoring Firm Hired by Building Ow Gallagher Bassett Services, Inc.	ner (8)	ASC	M No.	Name	of Abatement C acle Environi	ontractor	(9) Corp				
Street Address 2850 Golf Road				Street	Address Broad Street						
City, State, Zip Code Rolling Meadows, IL 60008				City, S	State, Zip Code stadt, NJ 070	72					
Project Manager for Monitoring Firm Michael Garambone		Telepho	one No. 631-9000	Telepi	none No. 939-6565	12	License N	No.			
	heduled Co	1000000		Name	of OSHA Monito	r	00756				
Occupancy Status During Abatement (Check O					Address					70.00	
Facility Closed/Vacated During Entire Peri Abatement Performed Outside of Normal I	od of Abate	ement		10-5	9 Jackson Av	enue	ű.				
Other – Describe:	acility 1100	115			tate, Zip Code I Island City, I	NY 111	01				
Scope of Work (Check All That Apply)	_				•		75 20				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	X Renov			×	Full Containr Mini-Enclosu Glovebag Pro Non-Exempto	re ocedure					
	Is Loca								Abate	emen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Norma Used Sol Maintena Custodial (12)	lely by ance/ Staff?	Asbestos Co (i.e. therm sur		laterial (ACM) insulation, T, or	(S	nount pecify or LF)	Removal	Repair	e Encapsulate	Enclosure
Exterior: Holding Tank	Yes No	-	-	For Dana						l fe	
		X		Far Pape	r	8	00SF	х			
Name of Registered Waste Hauler		NJDEP W	asta Cub	o Vordo	N						
Newark Carting, Inc.	1	Hauler ID 14509					ed Landfill orth Lan	dfill			
City, State Newark, NJ 07105				osal Date	City, Sta		19067				
Completed by	itle			Signature	T WOITIST	iiio, FA	13007	e			

State of New Jersey

Timellald	12	(0)	NOTE	PICATIO	N OF AS	ew Jerse BESTOS	ABATE	MENT	C	heck #	260	25		
Data of Natification (1)	10	U	1	II LF	يا الي	8:60 ar		ā	In	FC	F	<i>N</i>	7 [5	
Date of Notification (1) 12/11/2	2019			Name	of Buildin	g Owner/ T		(2) School	1111/	L	Ľo	J L		7
Agencies Notified	Type Notification	1		Street A	Address	7020				DEC	10	20	10	1
EPA DEP	× Initial Amended			City St	ate, Zip (Edger	stoune Rd		ar.	, 10	20	J	l-wei
X DOL	Amendmen			City, St	ate, Zip C		ceton, I	NJ 08540		ASBEST	0000	SAITE	OI 1	0.
X DOH	× Emergency justification	1			of Contac					lephone 1	lumber	IVG.	10L (X
DCA	Cancellation	n		8.00	att Soz	O FORMAT	1011			(609)	847-12	266		
Name of Facility Where			3)	FAC	ILIIY INI	FURIVIAI	ION	Type of Facility	ty (4)					
Street Address	Academic Build	ling						School (I						
176 Edgers	toune Rd.									er than K & comme		ldings	, hom	ies,
City (5) Princeton,	NJ							Square Feet 30000	# 0	of Floors		Bldg.	Age +/-	
County (6) Mercer				County (STATE	Code (7) USE ONL	y)		Current Use (I	Prior if be	ing demo	ished)			
Name of Monitoring Firm MECS	Hired by Building	Owner (8)		ASC	M No.			of Abatement C			. le-			
Street Address							Street	ens Environr Address	nentai	services	s, Inc.			
PO Box 341 City, State, Zip Code		_					1000000000	Box 322 tate, Zip Code						
Crosswicks, N.							Allen	town, NJ 08	501					
Project Manager for Mon Bill Weisgarber	itoring Firm			Telepho 609 29	ne No. 98-4070)		one No. 259-9688		License 00493	No.			
Start Date (10) 12/13/2019		Schedule		mpletion /16/201			Name MEC	of OSHA Monit	or					
Occupancy Status During		175.0	8.00					Address ox 341						
Abatement Perform Other – Describe: 6	ed Outside of Norn	Period of A nal Facility	Abater Hour	nent s			City, St	tate, Zip Code				/		
Scope of Work (Check A							Ches	terfield, NJ (08515					
≥3 sf or ≥3 lf		× R	enova	ation				Full Contain	ment with	Negative	Proces	ro.		
≥160 sf or ≥260 if			emoli				×	Mini-Enclose Glovebag Pr	ure rocedure					
		Is	Locat	ion				Non-Exemp	ted (*) an	d Non-Fri	able Pro		e emen	t
Location		N	lormal d Sole	lly		Des	scription	of				Ty	ре	
Asbestos-Containing TO BE ABA	ATED	Mai	ntena odial S	nce/				aterial (ACM) insulation,	10.00	mount Specify	, D	_	Enc	ū
In Facili (13)	ty	Cusi	(12)	otan :			cing, VAT		SF	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A				7			'a	-	late	лге
Mech Ro	X			Asbes	tos Fitt	tings		8	X					
Boiler Ro	X			Asbes	tos Fitt	tings		10	Х					
						(Wra	ap & Cı	ut)						
	Name of Degistered Martin Live						perglas	s pipe insul						
Name of Registered Was: Stevens Environmen	100000	JDEP W		Cubic of Was		100000 0000		red Landf	ill					
		18292			1		ss Land	till						
City, State Allentown, NJ					1 2	al Date /16/201	City, St.	ete ville, P	4		11			
Completed by Mahlon E. Stevens		Title Project	ct Ma	nager		S	ignature	MH		C	ate 12/11	/201	a	

Invillas	173			1		<i>P</i> 1 (79a ee		- i					Pi	rint Fo
2h2601	9		NOTII	FICATIO	tate of N	ESTOS	/ ABATE 1 12:12	MEN		D	E C	E			
Date of Notification (1) 12/2/20)19			Name o	of Building				renton		DEC	1 1 8	20	10	
Agencies Notified	Type Notification	1		Street A	Address	DIG	ocese	01 11	enton	ted Lo				10	lasam
□ ЕРА	× Initial			0110017	1001000	701	l Lawr	ence	ville Rd.		ASBEST	OSO	OMT	201	9
DEP × DOL	X Amended Amendmen	ıt#		City, St	ate, Zip C		vrence	ماانىد	, NJ 0863	in the same of the		ICENS	ING	IOL (X
	Emergency justification	(including	,	Name o	of Contact		VICIOC	VIIIC	, 145 0005		ephone N	umher	-11-5-11		
DOH DCA	Cancellation			М	ichael C	ogan					(609)		214		
Name of Facility Where	Abatement is Takin	na Place (2)	FAC	ILITY INF	ORMATI	ON	-							
Residentia		rig Place (3)					Тур	e of Facility						
Street Address								×	School (K- Subchapte Other (i.e.	r 8 (Oth	er than K-	·12)	ldinas	hom	es
City (5)									etc.)						
Lawrenceville	e, NJ 08638								are Feet 3500	# 0	f Floors 3		3ldg. / 90	4ge +/-	
County (6) Mercer					Code (7) USE ONLY	0	_	Curr	ent Use (Pri	ior if bei	ng demol	shed)			
Name of Monitoring Firm MECS	Hired by Building	Owner (8))	ASC	M No.				atement Co Environme			, Inc.			
Street Address PO Box 341							Street PO E	Addre	ess						
City, State, Zip Code									Zip Code						
Crosswicks, Nu Project Manager for Mon				T 1					n, NJ 0850	01					
Bill Weisgarber	iitoring Film			Telepho 609 29	ne No. 98-4070		Teleph 609 2				License 00493	No.			
Start Date (10) 12/4/2019		Schedul		mpletion /6/2019	Date (11)		Name MEC		HA Monitor						
Occupancy Status During	g Abatement (Che	ck Only Or	ne)				Street	Addre	ess				0.14		
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norr	Period of nal Facility	Abater y Hour	nent s				tate, Z	Zip Code						
Scope of Work (Check A							Ches	sterfie	eld, NJ 08	3515					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	п тпас Арріу)	× F	Renova Demoli	ation tion			×	GI	ull Containmoni-Enclosure ovebag Propon-Exempted	e cedure				- Δ	
		1	Locat						Z. Z	<u> </u>	2 14011 1 116	I I I	Abate	ement	:
Location Asbestos-Containing		Use	Norma ed Sole	lly elv bv	Anthon		cription				1 (2 con	-	13	ре	
TO BE ABA	ATED	Ma	intena todial	nce/		tos Conta thermal:	systems	insul		(8	mount pecify	Re	73	Enc	E
In Facili (13)	ty	040	(12)	Juli :	,,,	surfac other m	ing, VA' iscellan			SF	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								<u>a</u>	-	late	ire
Baseme	ent		Х		Th	nermal F	Pipe In	sulat	tion	1	10 If	Х			
lame of Registered Was	te Hauler			JDEP W	lasta	Cubic Y	/orde		Name of	Pagisto	rad Landf				
tevens Environmen				lauler ID 18292	No.	of Was			Name of Fairless						
City, State Ilentown, NJ						Disposa 12/	al Date 6/2019	9 ,	City, State		Α				
Completed by		Title					gnature	1	11/	/		ate			
lahlon E. Stevens		Proje	ct Ma	anager			11/1	(9			12/2/2	2019		

CK1312		NOTII (I	1990	State La		ABATEN 1d 12:120			IE U	1 8		no de mario en estret	A to the first state of the sta
Date of Notification (1) 12/16/19	2	190		of Building ne Coop		Operator (2)		UEL	, C		13	Green
Agencies Notified Type Notification EPA DEP Initial Amended				Address ate, Zip C	Code				ASBEST L	OS C	ONT	ROL	St.
DOL Amendment Emergency justification) DCA Cancellation	(including		Elizab Name d	oeth, NJ of Contact ne Coor	07201 t			Tel	ephone N	umber			
Name of Facility Where Abatement is Takin				ILITY INF									
Street Address	g Place (3	5)					Type of Facility School (K- Subchapte Other (i.e. etc.)	-12) er 8 (Othe	er than K- & commer	12) cial bui	ldings	, hom	es,
City (5) Elizabeth							Square Feet	# of	Floors		Bldg. /	Age	
County (6) Union				Code (7) USE ONL)	Y)		Current Use (Pi	ior if bei	ng demoli	shed)			
Name of Monitoring Firm Hired by Building (Owner (8)		ASC	M No.			f Abatement Co EAD PROF						
Street Address						Street A 6 WHI	ddress TE DOVE C	OURT					
City, State, Zip Code							te, Zip Code NOOD, NJ (08701					
Project Manager for Monitoring Firm			Telepho	ne No.		Telepho 732-66	ne No. 68-9078		License 1200	No.			
Start Date (10) 12/26/19	Schedule 12/27/1		npletion	Date (11)			OSHA Monitor						
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P	53	- 3				Street A							
Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours	S			City, Sta	te, Zip Code WOOD, NJ (
Scope of Work (Check All That Apply)				-		2711121	77000, 110	70701					-
≥3 sf or ≥3 if ≥160 sf or ≥260 if		enova emolit				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				e	
Location of		Locati ormal			Doc	oriotics o				10110	Abate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	d Sole ntenar odial S (12)	nce/		tos Conta thermal surfac	scription of aining Mat systems in cing, VAT, niscellaneo	erial (ACM) nsulation, or	(Sp	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure	
INTERIOR	No	N/A		DIDE II					-		ate	е	
INTERIOR				PIPE IN	NSULAT	ION	16	0LF	x				
Name of Registered Waste Hauler NEWARK CARTING		H	JDEP Wauler ID 1		Cubic of Was		Name of IESI	Register	ed Landfil	1			
City, State NEWARK, NJ				al Date	City, Stat		PA						
Completed by JOSEPH PERLSTEIN	Title OWNE	ER				gnature			Da	ate 2/16/1	9		

CK 131L	+		NOTIF (F	Pursuan	NOF ASI	-8:60 a	12 12	24"		Y'	DEC	101	กงก	Application of the second second second	
Date of Notification (1)	V1684	H			of Building F Const			(2)		L	UEU	10 6	UIJ		
Agencies Notified EPA	Type Notification Initial				Address ast Cou	ınty Lir	ne Road	d		AS	BESTOS LICE	CON		. &	
DEP X DOL	Amended Amendment Emergency				ate. Zip C wood, N		1								
DOH DCA	justification) Cancellation				of Contact Constr						ephone N 2-367-0				
Name of Facility 100				FAC	ILITY INF	ORMAT	ION								
Name of Facility Where Street Address	Abatement is I akir	ig Place (3)						of Facility (School (K-1 Subchapter Other (i.e. p tc.)	2) 8 (Oth	er than K- & commer	12) cial bui	dings	, hom	ies,
City (5) Lakewood								Squar	e Feet	# 0	f Floors	E	Bldg. A	\ge	
County (6) Ocean				County (STATE	Code (7) USE ONLY	0		Currer	it Use (Pric	or if bei	ng demoli	shed)			u.V.
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.				ement Con PROFE			*			
Street Address								Addres:	s OVE CC	URT					
City, State, Zip Code								tate, Zip	Code D, NJ 08	3701					
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	one No			License 1200	No.			
Start Date (10) 12/26/19		Schedule 12/31/		npletion	Date (11)		Name	of OSH	A Monitor PROFES	SSIO	17:00:000	*20-20			
Occupancy Status During	g Abatement (Chec	k Only Or	ne)				Street	Address	3		INALO				
Facility Closed/Vaca Abatement Perform	ated During Entire F ed Outside of Norm	Period of A	Abaten Hours	nent			6 WH		OVE CO	URT					
Scope of Work (Check A	Il That Apply)								D, NJ 08	3701					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	тпат Арргу)	processes.	Renova Pemolit				×	Mini- Glov	Containme Enclosure ebag Proce Exempted	edure				3	
Location	of	l N	Locati Iormal	ly		De	scription	of					Abate Ty	ment pe	t
Asbestos-Containing TO BE ABA In Facili (13)	ATED .	Ma Cust	d Sole intenar odial S (12)	rice/		tos Cont thermal surfac	aining Ma systems cing, VAT niscelland	aterial (insulati , or		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
EXTERI	OR	Yes	No	N/A			SIDING			24	0005			ē	
							IDING			34	00SF	x			
Name of Registered Was	te Hauler		[N	JDEP W	laste	Cubic	Vards		Name of P	egistor	od Landfil	1			
NEWARK CARTING			Н	auler ID 1509		of Was			Name of R IESI	eyistel	eu Landii	1			
City, State NEWARK, NJ				-500 (2008		Dispos 12/31	al Date /19	1/2	City, State BETHLE	НЕМ	PA				
Completed by JOSEPH PERLSTEII	V	Title OWN	ER			S	ignature				10000	ate	a		

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Date of Notification (1) 12/12/2019 INVIORE	38		Greg		ner/Operator	r (2)			D	EC	8	20	119	Joseph Control of the
Agencies Notified Type Notification Type Notification Initial	n			Address					ASBE	STOS	CONS	ONT ING	ROL	8
X EPA X Initial X DEP Amended X DOL Amendmer Emergency				ate, Zip Code ield, NJ 070	90			Incom-orange		Mary Mary Mary Mary Mary Mary Mary Mary	BILINA	-		1000
DOH justification DCA Cancellation)		Name of Greg	of Contact Chu				Tel	ephone	Numbe	er			
Name of Facility Where Abatement is Taki	na Dlago /	2/	FAC	ILITY INFORM	IATION	I T	(= - ''')							
House	ng Place (3)				Т	e of Facility (100						
Street Address						×	School (K-1 Subchapter Other (i.e. p	8 (Oth	er than I & comm	K-12) ercial b	uild	ings,	home	es,
City (5) Westfield						Squ N/A	etc.) are Feet \	# o'	f Floors		100	dg. A	\ge	
County (6) Union				Code (7) USE ONLY)		1000	rent Use (Prid USE	or if bei	ng demo	olished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8))	ASCI	M No.			atement Cor atement, In		(9)					
Street Address					Street 11 R		ess ngren Aver	nue						
City, State, Zip Code		7					Zip Code NJ 07512			-				
Project Manager for Monitoring Firm			Telepho	ne No.	Teleph 9733				Licens 0131					
Start Date (10) 12/24/2019	Schedul 12/25/		npletion	Date (11)			SHA Monitor tement, In	C.				-		
Occupancy Status During Abatement (Che	ck Only O	ne)			Street	CONTRACTOR OF								
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: Occupied	Period of a	Abaten y Hours	nent s		City, S	tate, 2	Zip Code	nue						
Scope of Work (Check All That Apply)					1010	wa, i	NJ 07512							
≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renova Demolit			×××××××××××××××××××××××××××××××××××××××	Fi M G	ull Containme ini-Enclosure lovebag Proc on-Exempted	e cedure					0	
Location of		Locati Normal	ly		Description		J. Z.O. Ipto	1	21101111	Tubio i		Abate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole iintenar todial S (12)	nce/	Asbestos C (i.e. then	Containing Nonal systems urfacing, VA er miscellar	Materia s insu .T, or	lation,	(S	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure
December	Yes	No	N/A										ate	roi .
Basement		X		Pi	ipe Insula	ition		1	5 LF	2	1			
Name of Registered Waste Hauler		100000	JDEP W		bic Yards Waste		Name of F			dfill				
tlantic Carting City, State			3085	TB	BD		Grand C		1	-				
Vayne, NJ				TB	/.		City, State Pen Arg		4					
Completed by Dliver Hegedis	Title Proje	ct Ma	nager		Signature	1				Date 12/12	2/20	019		

CH 2017		NOTI	O SI FICATION Pursuant	tate of Ne NOF ASE 10 NJAC	w Jerse ESTOS 8.60 an	ABATE	MENT		D) E	1	<u>W</u> [n n
Date of Notification (1) 12/12/2019	36	0		of Building ns Instit						. 08	C 1	8 8	019	
Agencies Notified Type Notification X EPA Initial	1		Street A	Address tle Point	t on Hu	ıdson				ASBE	STOS LICEN			&
X DEP Amended X DOL Amendmen				ate, Zip Co ken, NJ					-		hal What	10111		
Emergency justification DCA Cancellatio)			f Contact						lephone to				
			FACI	ILITY INF	ORMAT	ION								
Name of Facility Where Abatement is Takin Davidson Building Street Address	ng Place (3)					×	of Facility (School (K-1 Subchapter	, 2) 8 (Oth	er than K	(-12)	ildina		
1 Castle Point on Hudson City (5)								Other (i.e. p etc.) ere Feet		of Floors	rciai bu		Age	es,
Hoboken							N/A		N/	A		N/A	Age	
County (6) Hudson				Code (7) USE ONLY)		Hou	ent Use (Prid ISE	or if be	ing demo	lished)			
Name of Monitoring Firm Hired by Building Briggs Associates	Owner (8)		ASCN 0004					tement Con ement, In		(9)				
Street Address 3 Crosswicks Street							Addre	ss gren Aver	nue					
City, State, Zip Code Bordentown, NJ 08505		-				City, S	State, Z	ip Code IJ 07512						
Project Manager for Monitoring Firm Michael Hoodak			Telephoi	ne No. 98-5520		Teleph		0.		License 01311				
Start Date (10) 12/23/2019	Schedule 12/24/2		mpletion I	Date (11)		Name	of OS	HA Monitor ement, In		0.01.				71 1
Occupancy Status During Abatement (Che	ck Only Or	ne)				Street		A STATE OF THE STA			-	- 2700	0	
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Occupied	Period of A	Abate Hour	ment rs			City, S	tate, Z	gren Aver	iue			G		
Scope of Work (Check All That Apply)					_	1 oto	wa, N	IJ 07512						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renov Demol				×	Mir Glo	Il Containme ni-Enclosure ovebag Proc n-Exempted	edure				ıre	
Location of	1757	Loca											temen ype	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intena	ely by ance/ Staff?		tos Cont thermal surfac		Material s insula T, or		(5	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										ate	e.
Davidson Building Room # 242		X			VAT	& Ma	stic		4(00 SF	X	-		
Name of Registered Waste Hauler			NJDEP W	aste.	Cubic	Varde		Name of F	Pagiete	rod Land	6II			
Atlantic Carting		ŀ	Hauler ID		of Was			Grand C			1111			
City, State Wayne, NJ					Dispos	al Date	/	City, State Pen Arg		Α				
Completed by Oliver Hegedis	Title Proje	ct Ma	anager		S	ignaturé	1/				Date 12/12/	201	9	

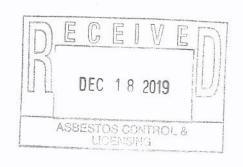
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Agencies Notified	Type Notification				Address Vashingt	on Stre	eet		UU	DEC	18	201	9	land language
EPA DEP X DOL	Initial Amended Amendment	# 3		City, St	ate, Zip Co	ode			<u> </u>	ASBEST	OS CC	NTR	OL &	1
ĭ DOH	Emergency (-		of Contact	7 102			Tel	ephone N	CENSI lumber	NG		
X DCA	Cancellation	À		Bill Ba	arrett					3-802-2				
Name of Facility Where	Ahatement is Taking	n Place (3)	FAC	ILITY INF	ORMAT	ION	Type of Facility	(4)				oreo (area	
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Street Address 213 Washington St	reet 11th, 12th,	13 & 14	4th Flo	oor				Subchapte Other (i.e.	er 8 (Oth	er than K- & comme	-12) rcial bui	ldings	, hom	es,
City (5) Newark								Square Feet 400,000	# o	f Floors	1.3	Bldg. /	Age	
County (6) Essex					Code (7) USE ONLY)		Current Use (P Commercial		ng demol	ished)	10		
Name of Monitoring Firm Tiger Environmenta		Owner (8))	ASCI	M No.		Name	of Abatement Co	ontractor	(9)	D /D /			
Street Address								Environmenta Address	al Safe	ty Corp.	. D/B/A	A PA	L En	VILO
256A Jefferson Cou	urt							2 Queens Pla	za Sou	ıth				
City, State, Zip Code Lakewood, NJ 0870	01						700 700	tate, Zip Code I Island City, N	NY 111	01				
Project Manager for Mon Kelly Walton	itoring Firm		- 1	Telepho 732-9	ne No. 48-9458		100000000000000000000000000000000000000	none No. 349-0900		License 00853	No.			
Start Date (10) 11/25/2019		Schedul 01/25/		pletion	Date (11)			of OSHA Monito						
Occupancy Status During	g Abatement (Checi	k Only O	ne)					Address	,			9 V	_	-
Facility Closed/Vac								Beach 98th St	reet					
Abatement Perform Other – Describe:	ed Outside of Norm	ai Facility	Hours			_	U / 100-100-100-100-100-100-100-100-100-100	tate, Zip Code kaway Park, N	IY 1169	94				
Scope of Work (Check A	II That Apply)							,						
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		4.00	Locatio										ement ype	
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City, State Shirley, NY 11967							al Date	Sily, Sta	te	OH 44	688		7	
Completed by		Title		e 12 m			ignature	1 - 111			ate			
Ann A. Ali		Com	pliance	e Adm	in			1//		1	2/12/2	2019	è	

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

	N	(Pt	CATION irsuant Pa	ate of New OF ASBE to NJAC 8 AL Job#	STO: 3:60 a 19-1/	S ABATE and 12:12 213 Add	0) Mat		ease se	111		guar		shee		
Date of Notification (1) 12/09/2019				Building (rudentia				npany	of Ame	erica	DE	C	18	20	19	
Agencies Notified Type Notification		118	Street A	ddress ashingto	n St	reet										
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	cluaing	- 0	Bill Ba								hone N -802-2		er			
Name of Facility Where Abatement is Taking F Wash Building	Place (3))	FACI	LITY INFO	RMA	TION	Тур	pe of Fa								
Street Address 213 Washington Street 11th, 12th, 13	3 & 141	th Flo	oor				×	Subch	ol (K-12) napter 8 (i.e. pri	(Other			uild	ings,	home	es,
City (5) Newark								uare Fee 0,000	et	# of F	loors		100	dg. A)+	ge	
County (6) Essex			County (Code (7) JSE ONLY)			2000	rrent Uso		if being	demo	lished)			
Name of Monitoring Firm Hired by Building Ow Tiger Environmental Inc	/ner (8)		ASCM	1 No.				batemer vironm				. D/E	3/A	PAL	Env	/ir _{El} r
Street Address 256A Jefferson Court			1			Street 11-0		ress ueens	Plaza	South	1					
City, State, Zip Code Lakewood, NJ 08701								, Zip Coo and Ci		1110	1					
Project Manager for Monitoring Firm Kelly Walton		113	Telepho 732-94	ne No. 18-9458	1	Telep 718-		No. -0900			License 00853					
	chedule 1/25/2		npletion	Date (11)		1000000		SHA Mo	200000000000000000000000000000000000000							
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	100000	Locati						- Control Hoverno					,	Abate	ment	
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440.51	Yes	No	N/A	Cl T	I. A	A 4: - 0	D		_,;_	04.00	20.05				a	
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Name of Registered Waste Hauler		N	JDEP W	/aste	Cub	ic Yards			ne of Re	010000000000000000000000000000000000000		- ACC				
ATC			lauler ID 4310	No.	50	Vaste Yards			nerva l	Enterp	orises					
City, State Shirley, NY 11967					Control Control	oosal Date 27/2019		Wa	, State	ourg, C	DH 4	4688				
Completed by Ann A. Ali	oliano	e Adm	iin		Signatur	e //	A				Date 12/0	9/2	019	724-524		

213 WASHINGTON STREET - ADDITIONAL MATERIAL

FLOOR	LOCATION	TYPE OF MATERIAL	FOOTAGE
11TH	JANITOR'S CLOSET	PIPE INSULATION	40 LF
12TH	JANITOR'S CLOSET	PIPE INSULATION	40 LF
13TH	JANITOR'S CLOSET	PIPE INSULATION	40 LF
14TH	JANITOR'S CLOSET	PIPE INSULATION	40 LF





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

Date of Notification (1)					(P	P	AL Job#	19-1213	3 Add	Mate	rial -		and the same of				
Agencies Notified DEP DEP DEP DOL Amendment # 1 Amendment # 2 Amendment # 2 Amendment # 3 Amendment				7.00//6.00					•		pany of An	A. nerica	SBESTO	S 60	NTR	OL 8	
Initial			Type Notification		-	1871559 5710		- moun			party of the	101100	MINISTER STATES	178011	N CI		3.790
Name of Facility Where Abatement is Taking Place (3)	X EPA		Initial			21/2007			et				-				
Mame of Facility Where Abstement Is Taking Place (3)	DEP X DOL			# 1													
Name of Facility Where Abatement is Taking Place (3) Street Address Street Address Subchapter (9)			Emergency		_	200720	10.00					Tel	ephone Nu	mber			
Name of Facility Where Abatement is Taking Place (3) School (K-12) Scho	X DCA											97	3-802-21	75			
Street Address Street Address Square Feet Ref Floors Sidg. Age Square Feet Ref Floors	Name of	Facility Where	Abatement Is Takin	g Place (3))	FACI	LITY INFO	ORMATIC	ON	Тур	e of Facility (4	4)					
213 Washington Street 11th, 12th, 13 & 14th Floor					,						School (K-1	2)					
Newark			reet 11th, 12th,	13 & 14	th FI	oor				×	Other (i.e. p				dings,	home	es,
Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Street Address 256A Jefferson Court Street Address 256A Jefferson Court Street Address 256A Jefferson Court City, State, Zip Code Lakewood, NJ 08701 Project Manager for Monitoring Firm Kelly Walton Scheduled Completion Date (11) 01/25/2020 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Long Island City, NY 11101 Name of OSHA Monitor Wojclech Kowalczyk Street Address 11-02 Queens Plaza South Telephone No. O0853 Start Date (10) 11/25/2019 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Abatement Performed Outside of Normal Facility Hours Other - Describe: Full Containment with Negative Pressure Mini-Enclosure		ζ	490 Janes - Land VII and Land Land Conference (Land Land							400	0,000	21		5		ge	
Tiger Environmental Inc Sireet Address City, State, Zip Code Lakewood, NJ 08701 City, State, Zip Code Lakewood, NJ 08701 City, State, Zip Code Long Island City, NY 11101 Project Manager for Monitoring Firm Kelly Walton Telephone No. 732-948-9458 718-349-0900 00853 Start Date (10) O1/25/2019 Cocupancy Status During Abatement (Check Only One) Start Date (10) O1/25/2019 Cocupancy Status During Abatement (Check Only One) Size Closed/Accated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Scope of Work (Check Ali That Apply) Size of Solely by Maintenance Coust-Containing Material (ACM) TO BE ABATED In Facility (13) To State Address Size Address Street Address Street Address Tas Beach 98th Street City, State, Zip Code Rockaway Park, NY 11694 Street Address Tas Beach 98th Street City, State, Zip Code Rockaway Park, NY 11694 Street Address Tige Description of Abatement Performed Outside of Normal Facility Hours Size Address Tas Beach 98th Street City, State, Zip Code Rockaway Park, NY 11694 Street Address Tas Beach 98th Street City, State, Zip Code Rockaway Park, NY 11694 Street Address Tas Beach 98th Street City, State, Zip Code Rockaway Park, NY 11694 Street Address Tas Beach 98th Street City, State, Zip Code Rockaway Park, NY 11694 Street Address Tas Beach 98th Street City, State, Zip Code Rockaway Park, NY 11694 Street Address Tas Beach 98th Street City, State, Zip Code Rockaway Park, NY 11694 Street Address Tas Beach 98th Street City, State, Zip Code Rockaway Park, NY 11694 Facility Closed/Acated During Entire Procedure Abatement Type Facility Closed/Acated During Entire Procedure Abatement Type Facility Closed/Acated During Entire Procedure Abatement Type Facility C		3)										r if bei	ng demolis	hed)			
256A Jefferson Court				Owner (8)		ASCN	/ No.							D/B/A	PAL	. Env	/iror
Lakewood, NJ 08701 Project Manager for Monitoring Firm Kelly Walton Telephone No. 732-948-9458 718-349-0900 00853 Scheduled Completion Date (11) 11/25/2019 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other — Describe: Scope of Work (Check Ali That Apply) 32 sf or ≥3 ff ≥160 sf or ≥260 if Scope of Work (Check Ali That Apply) 15 Location of Asbestos-Containing Material (ACM) I TO BE ABATED In Facility (13) 11th Floor 11th Floor 12th Floor 12th Floor 13th Floo			urt									a Sou	ıth				
Start Date (10)			01									Y 111	01				
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≥3 sf or ≥3 lf			M That Applied						Rock	kawa	ay Park, N	/ 116	94				
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ATC Hauler ID No. 24310 of Waste 50 Yards Minerva Enterprises City, State Disposal Date 11/27/2019 Waynesburg, OH 44688 Completed by Title Signature Date Date Signature Date Date Date Completed Signature Date Date Completed Signature Date Date Date Completed Signature Date Date Completed Signature Date Date Date Completed Signature Date Date Date Completed Signature Date Date Date Completed Signature Date Date Completed Signature Date Date Completed Signature Date Date Completed Signature Date Date Date Completed Signature D	Name					VIDED V	1		***************************************	Duct	pun						
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			SCHOOL ST. 112 S. SCHOOL ST. SCHOOL			(2-71)							OH 446	888			
Ann A. Ali Compliance Admin 11/27/2019				110000000	plian	ce Adm	nin	S	ignature		#_				2019		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Check # 2395 Date of Notification (1) Name of Building Owner / Operator (2) December 13, 2019 30 Montgomery Partners, LLC c/o Cushman & Wakefield Agencies Notified Type Notification Street Address **EMERGENCY** ⊠EPA 30 Montgomery Street, Suite 200 DEC 18 2019 DEP **⊠**DOL Initial City, State & Zip Code ASBESTOS CONTROL & LICENSING Amended Jersey City, NJ 07302 Øрон Amendment # DCA Cancellation Name of Contact Telephone Number Ingrid Noonan 201-508-5292 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Office Building School (K-12) Street Address Subchapter 8 (Other than K-12) 30 Montgomery Street Other (i.e., private & commercial buildings, home, etc.) Square Feet # of Floors Bldg. Age City (5) 318,708 45 Jersey City Current Use (Prior if being demolished) Office Building County (6) County Code (7) Hudson USE ONLY Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Arcadis U.S., Inc. Synatech, Inc. Street Address Street Address 10 Friends Lane 829 Radio Road City, State & Zip Code City, State & Zip Code Newtown, PA 18940 Little Egg Harbor, NJ 08087 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Firoz Jan 267-685-1800 609-296-6916 00817 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor December 14, 2019 January 30, 2020 Synatech, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 829 Radio Road Abatement Performed Outside of Normal Hours City, State & Zip Code Other - Describe: Little Egg Harbor, NJ 08087 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥ 50 If Renovation Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted(*) and Non-Friable Procedure Location of Is Location Normally Used Description of Abatement Type Asbestos-Containing Material (ACM) Solely by Maintenance or Asbestos-Containing Amount (Specify SF TO BE ABATED Custodial Staff? (12) Material (ACM) or LF) IN Facility (i.e., thermal systems (13)insulation, surfacing, VAT Encapsulate Enclosure Remova Repair or other miscellaneous) N/A Yes No 4th Floor Vacant Space X Floor Tile and Mastic 18,000 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill Hauler ID No. Synatech, Inc. 27429 Fairless Hills City, State Disposal Date City, State Little Egg Harbor, NJ 08087 January 31, 2020 Morrisville, PA Completed By Title Signature Date lane Diane Aloia **Executive Administrator** December 13, 2019

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Date of Notification (1)	21 10				D. 2000		g Owner/Operator ((2)					
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Agencies Notified	Type Notific	cation			Stree	t Address			THE DEC.	0 20		favor	-
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(NJAC 5:23-8)	justificat					e of Contac			Telephone Nun	nber			
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					FA	CILITY IN	FORMATION						
Name of Facility Where A	batement is	Takin	g Plac	e (3)				Type of Faci	lity (4)				
Williams Residence	Ř.							School (K					
Street Address								☐ Subchapt	er 8 (Other than K-1)				
									., private and comme	ercial bu	uildin	js,	
City (5)			000000000000000000000000000000000000000					homes, e		1=			
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Princeton								4846	2.5		171		
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use	(Prior if being demoli	shed)			0
Mercer								Residence	e				
Name of Monitoring Firm I	Hired by Buil	ding (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor	(9)			700	
Finog Environmenta	al			2010			Active Enviro	onmental Te	chnologies, Inc.				
Street Address							Street Address		omiologico, moi				_
617 Stokes Rd. #4-3	18						203 Pine Stre	ot					
City, State, Zip Code													
I AM and Mark Decrees							City, State, Zip Co						
Medford, NJ 08055							Mt. Holly, NJ	08060					
Project Manager for Monit	oring Firm			Tele	ephone	No.	Telephone No.		License No.				
									01299-01				
Start Date (10)	2000	Sched	luled C	omple	tion Da	ite (11)	Name of OSHA M	lonitor					
12 /18 / _	19	_1	2_/	2()_/	19							
Occupancy Status During	Abatement (Check	conly	one)			Street Address	310000					
☐ Facility Closed/Vacated					ment		Oli Cot / tadi Coo						
☐ Abatement Performed						scribe	City State 7in Co	al a					
Time of Abatement:	AM	PN	Λ/	PM-		AM	City, State, Zip Co	ode					
C (1M, 1, /0), 1, III						3							
Scope of Work (Check all	that apply)						□ Eull Cont	ninmont with N	Jagatina Dragonia				
≥3 sf or ≥3 lf			⊠ Re	enovat	ion		☐ Mini-Encl		Negative Pressure				
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			100	Locat						Λb	atem	ent T	ype
Location of				Norma ed Sole			Description of			R	R	Ш	Ш
Asbestos-Containing M TO BE ABAT		1)		intena			stos Containing Mat		Amount	em	Repair	пса	ncic
IN Facility				todial		(1.6	 thermal systems i surfacing, VAT, 		(Specify SF or LF)	Remova	₹.	Encapsulate	Enclosure
(13)				(12)			other miscellaned		01 01 21)	_		ilate	ē
			Yes	No	N/A							CD	
Basement			П			Insulati	on		75 SF		П	П	П
						mount			75 51	-	Ш	ш	ш
			Ш										
					П							П	П
					=	-				+=	1]]
			Ц	Щ								Ш	Ш
Name of Registered Waste				8.8	JDEP \		Cubic Yards of		gistered Landfill				
Active Environmenta	al Technolo	ogies	, Inc		25704		Waste 1	Waste R	ecovery Solution	S			
City, State					20104		Disposal Date	City, State					
Mt. Holly, NJ							12/20/19	Myersto	wn. NJ				
Completed By (Print or Typ	ne)	Title					Signature	1,5,5,5			,		
Shannon Bach	,,			al Ca	ordi	tor	Signature	SARA	11	ate			
ACD 11		DI	spos	ai 00	ordina	1101	11140	(JUL)	×~ 1	29	11	7	

ASB-41 JAN 13

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

LNHIU	500)	9	State of Ne	w lore	DV.					ı		1860 N. O.
CK2206 PA	AID	NOT	TFICATIO (Pursuar	ON OF ASE	BESTOS 8:60 ar	ABATE nd 12:12	0)		EG				J D D C
Date of Notification (1) 12-11-19				of Building Homes (r (2)		850				5
Agencies Notified Type Notificat	ion		100000000000000000000000000000000000000	Address	Di-			dig to	DEC	1 8	20	19	- 11
EPA Initial DEP Amended	i			Princeton					2 03/12/12/12	10.14			_i_
DOL Amendm	ent # cy (includin	ıq.	Palis	ades Par	k, NJ	07650		.† (1427/100 ±)		2:15		e ee ma	
DOH justification Cancella	on)			of Contact ael Garbu					elephone N 201) 697-				
Name of Facility Where Abatement is Ta	Ising Diese	(2)	FAC	CILITY INFO	ORMAT	ION		- 1	201) 001	0000			
Private Home	King Place	(3)					Type of Facilit	5805 %					
Street Address							School (F Subchape Other (i.e etc.)	ter 8 (Ot	ther than K- & commer	12) cial bu	ilding	s, hor	nes,
City (5) Palisades Park							Square Feet	#	of Floors		Bldg.	Age	
County (6) Bergen				Code (7) USE ONLY)			Current Use (F	Prior if b	eing demoli	shed)			
Name of Monitoring Firm Hired by Buildir N/A	ng Owner (8	3)	ASC	M No.			of Abatement C Contracting		or (9)				
Street Address							Address East Grand	St.					
City, State, Zip Code							tate, Zip Code beth, NJ 072	01					
Project Manager for Monitoring Firm			Telepho	one No.			one No. 216-9603		License I	No.			21500
Start Date (10) 12-20-19	Schedu 12-23-	led Co	mpletion	Date (11)			of OSHA Monito		10,200				
Occupancy Status During Abatement (Ch							Contracting Address	LLC					
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe:	e Period of rmal Facilit	Abater y Hour	ment 's				East Grand	St	7				
Scope of Work (Check All That Apply)							beth, NJ 072	01					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Description 1	Renova Demoli				x z	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				·e	
Location of	100	Locat Norma	100		-						Abat		t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intena todial ((12)	nce/	(i.e. t	os Conta hermal : surfac	cription of aining Massystems ing, VAT iscellance	aterial (ACM) insulation, , or	(5	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
0	Yes	No	N/A		10					<u>a</u>	3.	ate	re
Garage		Х			Pipe	Insulati	on	6	0 LF	X			
Name of Registered Waste Hauler		1 44	IDED W	ante 1	0.11								
Delfa Contracting LLC			IJDEP Wa lauler ID I 35240	No.	Cubic Y of Wast 4				red Landfill source R		ery F	acili	ty
City, State Elizabeth, NJ				100	Disposa 12-23-		City, Stat						
Completed by Jaime Delgado	Title Proje	ct Ma	ınager		Sig	nature	1		Da	te -11-1	19		

Inv#10837

1 k	11298	PAD				N OF AS				IT .		5	E 1	1 1	Œ	1
	Date of Notification (1) 12/12/19					of Buildin Gilbert	g Owner	/Operato	r (2)			DEC	1 8	201	9	A THE PARTY OF STREET
	Agencies Nutified EPA DEP OOL	Type Notification Initial Amended Amendmen			City, St	Address tate, Zip (Code)1				SELST(3
X	DOH DCA	Emergency justification Cancellation	(includin	g	Name o	of Contac Gilbert					T <u>e</u>	lephone N	lumber			
-	3 00.1	Caricellation				ILITY IN	EODMA1	TION				-	-			
N	lame of Facility Where	Abatement is Takir	ng Place	(3)	170	VICTI IIV	ONWIA	IION	Ту	oe of Facility	(4)					
	etreet Address								×	School (K Subchapte Other (i.e. etc.)	er 8 (Oth private	& commer	-12) rcial bu	ildings	, hom	nes,
7.5	akewood								Sqı	uare Feet	# 0	f Floors		Bldg.	Age	
3	ounty (6) Ocean				County (STATE	Code (7) USE ONL	y)			rent Use (P me	rior if be	ng demol	ished)			
N	ame of Monitoring Firm	Hired by Building	Owner (8	()	ASCI	M No.		Name AAA	of Al	oatement Co	ontractor	(9) NALS				
St	treet Address							Street 6 WF		ess DOVE C	OURT	0				
Ci	ity, State, Zip Code						122	City, S	tate,	Zip Code DOD, NJ (
Pr	roject Manager for Moni	toring Firm			Telepho	one No.		Teleph	one			License 1200	No.			
	art Date (10) 2/23/19		Schedu 12/25/		mpletion	Date (11))			SHA Monito		NALS				
00	ccupancy Status During	Abatement (Chec	k Only O	ne)				Street		Marie Marie Control						
	Facility Closed/Vaca	ted During Entire I	Period of	Abater	ment					DOVE C	OURT					
×			nai Facilit	y Hour	'S					Zip Code OOD, NJ (08701					
Sc	cope of Work (Check All	That Apply)	32-220													-112
x	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demoli				×	M G	ull Containm ini-Enclosur lovebag Pro on-Exempte	e cedure				e	
	Location	of		Locat Norma			D.	v and although							ement pe	
	Asbestos-Containing N TO BE ABA In Facility (13)	Material (ACM) TED	Ma	ed Sole intena todial (12)	nce/ Staff?		tos Cont thermal surfa	scription taining M systems cing, VAI niscelland	ateria insu r, or	lation,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	EVTERIO	ND.	Yes	No	N/A										te	ŧυ
	EXTERIO	DR					S	SIDING			25	00SF	х			
												· · · · · · · · · · · · · · · · · · ·	-			
		**************************************											+			
	me of Registered Waste WARK CARTING	e Hauler		H	JDEP Wauler ID		Cubic of Was	Yards ste		Name of IESI	Register	ed Landfii	I			
	y, State WARK, NJ							sal Date /19		City, Stat		PA				
	mpleted by SEPH PERLSTEIN	ľ	Title	IER				ignature				Da	ate 2/12/1	19		

State of New Jersey

CK51072	DATE	NOTIFICATION OF	of New Jersey		DECE	IVE
Agencies Notified Typ	Notification	Name of Build	ASBESTOS ABATE JAC 8:60 and 12:120 ing Owner/Operator (2		DEC 1	8 2019
1 -02	Initial Amended Amendment #	Street Address City, State, Zip (0 N)-3		ASSESTOR (ZGMTROLÆ Sing
: 🗵 🗚 📗 📗	inergency (including usuification) ancellation	Marc Marc	SRW N.)	0875	Telephone Number	
Street Address	is raking Place (3)	FACILITY IN		pe of Facility (4)	732-341-	6451
City (3) Tom S RIVER	(/:			School (K-12) Subchapter 8 (Othe Other (i.e. private &	or than K-12) c commercial buildings, ho	Ties etc.)
County (5)		County Code (7)	Squa	re Feet # oi	Floors Bide Ag	1
Name of Monitoring Firm Hired by Bui	Hine Over (8)	(STATE USE ONLY)	Curre	nt Lise (Prior if being	demolished)	
Street Address	ourie Countie (2)	ASCM No.	Name of Abara	man C	2	
		1	Street Address	2 Ahateme	irt Dein Tieri	110
City, State, Zip Code			1/212 13	elms.	A -	
Project Menager for Monitoring Firm			1 . 71	.000		
Start Date (10)		Telephone No.	Telephone No.		Esto)5	
12/72/19	Scheduled Compi	egion Date (11)	Name of OSHA M	onitor	cense No. EVAZO	Ì
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire) Abatement Performed Outside of Name	- 5		Street Address			j
Abetement Performed Outside of Norm Other – Describe:	enod of Abatement al Facility Hours		1	B. B		-
cope of Work (Check All That Apply)			City, State, Zip Code			_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renovation Demolition		☐ Fuli Conta	innent with Negative		
	,		☐ Gloveban P	ronnium.		
Location of	Is Location	-	Mon-Exemp	ned (*) and Non-Fria	ble Procedure	
Asbestos-Comeining Material (ACM) TO SE ABATED In Facility (13)	Normally Used Solaly by Maintenance/ Custodial Staff? (12)	(i.e. thermal systems	ription of ing Material (ACM) s insulation, surfacing T, or cellancous)	Amount (Specify SF or LF)	Abatement Type Reg	
0.161	Ves No N/A	distribusion of the state of th	relianconz)		Bhenpsulate Repair Removal	
_ Cht Sde		Sidine				
		1		1000		
f Registered Waste Hauler						
WELLC TO	NIDEP Was Hauler ID N ZoS47	of Waste	1:14	egistered Landfill		
TENT IN IT	de	Disposal Date	leid, diane	Whown F		
SCHOOL INC.	is Resident.		THE	Date	2/13/11	

State of N.I Notification of Asbestos Abatement Proj. #: 19-280 (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 2019 $\frac{1}{1}$ $\frac{1}{2}$ $\frac{1}{1}$ $\frac{1}{1}$ $\frac{1}{1}$ $\frac{1}{1}$ $\frac{1}{1}$ $\frac{1}{1}$ $\frac{1}{1}$ Joseph & Rita Marts Agencies Notified Type Notification Street Address ☐ EPA Initial ASSECTOS COSTROLA Amended LICENSING DEP City, State, Zip Code Amendment #: DOL Emergency Chatham, NJ 07928 (including DOH Name of Contact Telephone Number justification) DCA Joseph & Rita Marts Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Residential Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Square Feet Bldg. Age # of Floors City (5) County (6) 1,700 SF County Code (7) 90 (State use only) Current Use (Prior if being demolished) Chatham, NJ 07928 Morris Residential Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) KLOMAX, LLC Street Address Street Address 309 W. End Ave City, State, Zip Code City, State, Zip Code Hopatcong, NJ 07843 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 833-455-6629 02007 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) KLOMAX, LLC 12/29/19 01/03/2020 Street Address Occupancy Status During Abatement (Check only one) 309 W. End Ave Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Hopatcong, NJ 07843 Scope of Work (check all that apply) Full Containment w/negative pressure >3 sf or >3 lf Mini-enclosure Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of Ε by maintenance/custodial E е asbestos-containing e n Amount Description of asbestos-containing staff(12) n m material (acm) to be p C material (ACM) (Specify SF or 0 C abated in facility (13) a а Yes LF) No N/A ٧ P Basement Pipe Insulation 108 LF X Basement Chimney Flute Patch 1 SF X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill KLOMAX, LLC 0038241 1 1/2 yds TULLYTOWN, RESOURCE RECOVERY

Disposal Date

Signature?

TBD

Titie

Owner

City, State

TULLYTOWN, PA

Date

12/13/19

City, State

Paige Boylan

Hopatcong, NJ 07843

Completed by (Print or Type)

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

			-	-	district the state of	LITTLE CAPTE	Charles Control
1000	尾	P	E		W	Œ	12/
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1 1 1							and the contract of the contra
1170	ž.						

1000		LLL.												1	
Date of Notification (1) 12/12/2019				Nam Wes	ne of Buildin st Essex Y	g Owner MCA	Operator (2)			EChec	Q 2 k# 15	019	11.		
Agencies Notified	Type Notification				et Address	on Arra				open a service		A	i de de		
□ EPA ☑ DEP	⊠ Initial				S Livingst	1.24	3510 ^{\$}	(A. A.	(7:01 1	121					
⊠ DOL	☐ Amended Amendment # ☐ Emergency (ir			Livir	State, Zip (ngston, Ne	Code w Jerse	y 07039		Commence (Sec.)	Table properties according	- Printegal, 4E, 4-8,	· · · · · · · · · · · · · · · · · · ·	in distant		
☑ DOH □ DCA	justification) Cancellation	lolddilig		Nam	e of Contac	t		Telephone Number							
Name of Facility Where	e Abatement is Takir	ng Place	(3)	F	ACILITY IN	FORMAT		-112 (4)							
West Essex YMCA	o i isatoment io Takii	ig i lace	(3)				Type of Fa								
Street Address 321 S Livingston Av	е						□ Schoo □ Subch ☑ Other	l (K-12) apter 8 (Othe (i.e. private 8	er than K- commer	12) cial build	ings,	home	s, etc.	.)	
City (5) Livingston, New Jers	sey 07039						Square Fee		# of F			Bldg. 50+			
County (6) Essex	Coun (STA	ty Code (7)	(7) Current Use (Prior if being demo				molished) nal Center								
Name of Monitoring Fir Detail Associates, In	m Hired by Building C.	Owner (8)	AS	ASCM No. Name of Abatement Contractor Lilich Corporation										
Street Address 560 Sylvan Ave, Suit	e 3065						Street Addre		-						
City, State, Zip Code Englewood Cliffs, Ne	w Jersey 07632						City, State, 2 Woodland	Zip Code Park, New	Jersey						
Project Manager for Mo Anthony Valentine	nitoring Firm				Telephone No. 201-569-6708 Telephone No. 973-225-8400				License No. 01104						
Start Date (10) 12/23/2019		Schedul 12/27/2	led Co	mpletio	on Date (11)		Name of OS Iris Environ	HA Monitor mental Lab	oratories	s, LLC					
Occupancy Status Durin		Development Education	(C1974)				Street Addre			···					
□ Facility Closed/Vac □ Abatement Perform □ Other – Describe:	cated During Entire F ned Outside of Norm	Period of an all Facility	Abaten y Hours	nent	r		City, State, Z	ip Code	maidhe Tare						
Scope of Work (Check A	All That Apply)						Union, NJ (7/083							
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	гластрруу		Renova				□ Fu	II Containme	nt with Ne	egative P	essu	re			
_ 100 01 01 L200 II			Demolit	ion			□ Mi ⊠ Glo	ni-Enclosure ove Bag Proc n-Exempted	edure / L	imited Co	ntain	ment	&Ten	t	
		1 .	Is ocation								1	Abate	ement		
Location Asbestos-Containing		N	ormall	/	Ashes		scription of aining Materia	L (A CNA)	Λ		-	1 9	ре		
TO BE AB	ATED	Use	ed Sole by	ely		thermal	systems insula		nt	nou	Re	70	Enc	m	
(13)		110	ntenan ustodia	7/			cing, VAT, or niscellaneous)		(Spe	ecif F or	Remova	Repair	Encapsulate	Enclosure	
BLDG	1	Yes	No	N/A			ĹF)		a	_	late	ıre			
Basement			Χ		Elbow Fit	ting Ins	sulation		15 (ea)		х				
		+													
2															
Name of Registered Was	te Hauler		0.000		Waste	Cubic Y	/ards	Name of Re	egistered	Landfill				\dashv	
Lilich Corporation				auler II 18724		of Wast	te	Fairless L							
City, State Totowa, New Jersey						Disposa 12/27/2		City, State Morrisville	, PA						
Completed by Adriana Olejarova		Title Pre:	sident			Sig	Signature Date 12/12/2019								
ASB-41 (R-06-08)						(* Do not use th	nis form for a	sbestos li	censure	exem	pted a	ctiviti	es.	
							-								

Try# 168	\$50	State of 1	New Jersey - 1	Notification of A	Asbestos Abata	amant.								
CK 3500	A				J.A.C. 8:60-7 and 12:120-7)									
Date of Notification (1) December 13, 2019				Name of Bu	ilding Owner/Operato	44 (24)								
Agencies Notified		1 11 115		The Valle	ey Hospital	DEC 18 2019								
⊠ EPA		Notificatio	n Type	Street Addre	ess	0 2013								
☐ DCA			Notification	223 North	Van Dien Aver	nue								
x DOL		Amend		City, State, 2	Zip Code	NORMATION OF THE STATE OF THE S								
⊠ DEP		Emerge	ency (including	Ridgewo	od, NJ 07450-	2736 LICENSING								
x DOH		Justin	cation)	Name of Cor	Name of Contact									
			510	William Stas	iak	201-447-8141								
Name of Facility Where Abatem	nent is Ta	aking Place (3)	FACIL	ITY INFORMATION										
Former Warehouse/Ca	ar Dea	lership	43	Type of Facili	ty (4)									
				School (K-	School (K-12) Subchapter 8 (other than K-12)									
Street Address				X Other (8 (other than K-12)									
565 Maple Avenue				Sa. Feet	Inknown # of F	cial buildings, homes, etc.)								
City (5) County (6)			County Code (7)	39.7 001.	# 01 F	Floors: 1 Bldg. Age: 70+ years								
	Berger		(State Use Only)	Current Use (prior if being demolis	shed): Car Dealership								
Nome of M.					3	Silvery. Car Dealership								
Name of Monitoring Firm Hired b	by Bldg. (Owner (8)	ASCM No.	Name of Contr.	actor (0)									
Colden Corporation				GREENWO	OD ARATEMENT	T CONSULTANTS, INC.								
Street Address						CONSULTANTS, INC.								
131 Varick Street # 939				Street Address	Street Address									
City, State, Zip Code				511 MAIN S	TREET									
New York, NY 10013				City State, ZipC	Code 07405									
Project Manager for Monitoring F Jim Miades	<u>irm</u>	Telephone N	umber	Telephone Num	Butler, NJ 07405 Telephone Number									
Scheduled Start Date (10)		347.435.	3561	973-492-047	973-492-0477 License Number 00840									
December 30, 2019	-	Scheduled C	ompletion Date (11)	Name of OSHA	Name of OSHA Monitor									
Occupancy Status During Abate	ement ((February	15, 2020	EMSL inc.										
racility Closed/Vacated F	Juring F	ntire Deried	E A L	Street Address	Street Address									
Abatement Performed Ot	itside of	Normal Facili	tv Hours -	1056 Stelto	n Dood									
Describe			,	City, State, Zip (Code									
Other – Describe: Vacant				Piscataway,	NJ 08854	ii.								
Source of Work (Check all that ap	ply)													
225					v. Eull Con	4-1								
\geq 3 sf or \geq 3 lf $\square \geq$ 160 sf or \geq 260			Renova	ation	Mini-Enc	tainment with Negative Pressure								
<u>□≥ 100 \$10F≥ 260</u>			x Demo	olition		ag Procedure								
					x Non-Exe	mpted (*) and Non-Friable Procedure								
Location of Asbestos-Containing					x Wrap & Ci	ut								
Material (ACM) in Facility (13)		Is Location No	ermally Used Solely	Description of Asbes	tos Amo	upt label -								
, and the state of		YES NO	todial Staff? (12)	Containing Material	ACM) (i.e. (Spo	cify SF								
	.	54 055	- 101	thermal systems insu surfacing, VAT, or ot	ulation, or LF	Remove Repair Encap Enclose								
Interior of Building			X		ner miscen.)									
Exterior			X	Joint Compound Mirror Mastic	2,500	1 - 1 I I I								
		1		VAT & Mastic	300s 2,980									
	- 1			Window Caulking	500 1									
				Vapor Barrier Mechanical	1,000									
				TSI	100s									
				Fire Doors	900lf 10 ea	1 1 1 1								
Name of Reg. Waste Hauler	IN	JDEP Waste I	Hauler ID #	ACM Non-Friable R	loofing 9.000									
See Hauler Below # 1 & 2	S	See Below	THE STATE OF THE S	Cubic Yards of W	/aste:	Name of Registered Landfill								
Hauler #1) Groonward &				120 Cu.Yds.		Fairless Landfill/								
Hauler #1) Greenwood Abate NJ DEP # 12561	ement	Consultants	s, Inc Butler, N.	J 07405	Disposal Date	Grand Central Landfill City, State								
110 021 11 12001					February 15,	FL-1000 New Ford Rd. Morrisville PA								
Hauler #2) Newark Carting, In	ic. – Nei	wark, NJ 045	509, NJ DEP # 1955	1	2020	19067 Permit#18072								
						GCL-1963 Pen Argyle Rd, Pen Argyle, PA 18072								
Completed by (Print or Type)	Title			Signature		Permit # 100265								
Marin Graure	Sr.	PROJECT	MANAGER			<u>Date</u>								
			and the second s	Marin Grau	ne	December 13, 2019								
AC # 2020-694					WHEN S									

IAN# 16851 CX37963

JAN 13

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

Nicholas Fernicola		Projec	t Man	ager					12/13/19					
Completed By (Print or Type	•	Title				12/24/19 Tullytown, Pennsylvania Signature Date								
City, State Toms River, New Je	rsey					Disposal Date 12/24/19	City, State	Donnovive=:						
Guardian Contractin	ng, Inc.		H	auler II 20223		Waste 3	T.R.R.F.							
Name of Registered Waste			N	JDEP V	Vaste	Cubic Yards of	Name of Regist	ered Landfill						
			П											
exterior-gable ends			\boxtimes		asbesto	s siding		800 sf						
		Yes	77	N/A					te					
Location of Asbestos-Containing N TO BE ABA IN Facility (13)	Material (ACM) TED	Us M	ls Loca Norma sed Sole aintena stodial (12)	illy ely by ince/	Asbes (i.e.	Description of stos Containing Mat , thermal systems i surfacing, VAT, other miscellaneo	ferial (ACM) nsulation, or	Abatement Type Repair Removal						
 ≥3 sf or ≥3 if ≥160 sf or ≥260 if 			enovat emoliti			☐ Mini-Encl	ainment with Neg osure procedure mpted (*) and Nor		re					
Scope of Work (Check all						Piscataway, N	lew Jersey 088	354						
Abatement Performed Time of Abatement:	Outside of No AM-	rmal Facil	ity Hou PM	rs - Des -	Scribe AM	City, State, Zip Code								
Facility Closed/Vacate	ed During Entire	e Period o	f Abate	ment		1056 Stelton								
Occupancy Status During						Street Address								
12 /23 /	19			4_ /	10 (0)	E.M.S.L. Anal								
Start Date (10)	S	cheduled	Comple	etion Da	ate (11)		Name of OSHA Monitor							
	itoring Firm		I el	epnone	hone No. Telephone No. 732-349-9932			License No. 00624						
Project Manager for Moni	itorina Eirm		1	a m b -	N-		New Jersey 08							
City, State, Zip Code		1				City, State, Zip Co								
0.4. 0.4. =						1889 Route 9	, Unit 61							
Street Address			-			Street Address	O' The second of							
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10000				1999	ntracting, Inc.							
Name of Monitoring Firm	Hired by Build	ling Owne	r (8)	ASCM	l No.	Name of Abateme								
Ocean				300	y code (/	MOTATE OSE ONLY)	Residence	or if being demoli	sned)					
County (6)				Cou	nty Code /7	7)(STATE USE ONLY)	800 sf	1	65					
Brick							Square Feet	# of Floors	Bldg. Age					
City (5)							homes, etc.)							
Street Address							☐ Subchapter 8 ☐ Other (i.e., p	Other than K-12 (Other than K-12)	2) ercial buildings					
Residence							School (K-12	2)						
Name of Facility Where	Abatement is T	aking Pla	ce (3)				Type of Facility	(4)						
				FA	CILITY IN	FORMATION								
	☐ Cancellat			Lir	nda	7.7		732-528-38						
(NJAC 5:23-8)	☐ Emergen		ing		e of Contac		Telephone Number							
☑ DOH □ DCA	Amendme		_	100000000000000000000000000000000000000		, NJ 08736								
⊠ DOLWD	☐ Amended				State, Zip (Code								
⊠ EPA					O Box 9			To the second additional of the second	AMERICA POST A CONTRACT OF THE					
Agencies Notified	Type Notifica	ation		-	et Address			3	1163					
12 /	13 /	19			ie of Buildin	ng Owner/Operator	(2)		0/0					
Date of Notification (1)		D				4C 0.00 and 5.1		UEU I	2019					

* No not use this form for schooles licensure avameted activities

Inv#1	0852	NOTIF	St FICATION	ate of New Jers	ey S ABATE	MENT		C		W.		Pr	nt F	
Date of Notification (1) 12/13/19	PAID		Pursuant Name o	to NJAC 8:60 and f Building Owner S Pinder Priva	od 12:12 Operator	0) r (2)	The state of the s	DE(3 18	2019	100 miles	1 12	County Branch	
Agencies Notified Ty			Street A	Address	tte i ion	10	7.8	51.51	OS CO CEVSIN	3736			1	
DEP DOL	Amended Amendment # Emergency (includin justification) Cancellation	g	City, State, Zip Code Surf City NJ 08008 Name of Contact				Telephone I				Number			
	Caricellation		Jame	S LITY INFORMAT	MON									
Name of Facility Where Abat	52 51 100 cm and a september 100 and a date 1000 to contact 1 september 1	(3)	IAU	LITT HAT ONNIA	1014	Туре	of Facility (4)			-			
James Pinder Private	Home						School (K-12	2)						
Street Address						П	Subchapter 8	(Othe						
							Other (i.e. pr etc.)	ivate 8	commerc	ial buil	aings,	nome	es,	
City (5)							are Feet	1	of Floors Bldg. Ag			\ge		
Surf City NJ 08008	*************					1000 ÷ 1					35+			
County (6) Ocean		1		Code (7) USE ONLY)		Current Use (Prior if being demolished)								
Name of Monitoring Firm Hire	ad by Building Owner (-	ASCN		LAC		use & Gara	_	(0)					
N/A	ed by building Owner (3)	ASCI	/I NO.		e of Abatement Contractor (9)								
Street Address			Pernaco Inc. Street Address								_			
			PO Box 329						**					
City, State, Zip Code			City, State, Zip Code							-				
9,578 97 83N					70.750.750.750		st Berlin NJ 08091							
Project Manager for Monitoria	ng Firm		Telepho	ne No.	Telepl	phone No. License No.								
		609-685-9984 856			753-	9800	1	00727						
Start Date (10)	mpletion	Date (11)	Name	of OS	HA Monitor									
12/26/19	1/19			Sam	ne									
Occupancy Status During Ab	eatement (Check Only C	One)			Street	Addre	ess	10 40					10	
Facility Closed/Vacated Abatement Performed C Other – Describe:	During Entire Period of Dutside of Normal Facili	Abater ty Hour	ment 's		City, S	State, Z	Zip Code							
Scope of Work (Check All Th	at Apply)											*	_	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
				Ι	6	No.	on-Exempted	(*) and	Non-Frial	ole Pro			_	
		Is Locat Norma								Abatement Type				
Location of Asbestos-Containing Mat		sed Sole							Amount		Г	-	Г	
TO BE ABATE	D W					s insulation,		(S	(Specify		Z	Encapsulate	!	
In Facility (13)		(12)			acıng, VA miscellar			SF	or LF)	Remova	Repair	nsdi	Lingoodia	
8.00.40	Yes	No	N/A							<u>a</u>	7	late	1	
Francis a Oldin		140		F.,	· · · · O:	r.		400	20.05	+-	-	-	-	
Exterior Sidir	ng	-	X	EX	erior Si	ding		160	00 SF	x			_	
17				Lange Control										
		T												
Name of Registered Waste H	lauler		NJDEP W		Yards		Name of R	egiste	red Landfil	1				
United Roll Off		1 1	Hauler ID No. of Waste			G.R.O.W.S.								
City, State	****	1	22459	4 Dien	seal Data	The state of the s					_			
Elm NJ					sal Date		City, State Morrisvi		19067					
Completed by	Title				Signature	9	WOITIGNI			ate			_	
Anthony T Perna		sident	t		1	7				2/13/	19			