### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

1112-4431 Check #3643

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

Date of Notification				Nam	e o	f Bui	lding	Owner / Operat	or-(	2) E P E	W E	[]	I	1		
A	12/14/11	-4'						rsey Division	of	Property Man	agement 8	Co	ns	tru	ctio	n
Agencies Notified EPA	Type Notific	ation		Stree PO I						35						
□ DEP		I -			14777777777		Zip C	ode	111	DEC 1	9 1441		+		-	
□ DOL	-	nded						25-0034	W	U DEG		1	1			
☑ DOH	☐ Eme	rgency		Nam					1			èlen	nor	ne N	lumb	er
□ DCA	☐ Cand	cellation		Geo	rge	ette	Bund	h	-	ASBESTOS (	ONTROL &					
				FΔ	CI	IIT	/ INF	ORMATION	L.	111,53	3180 L				-	
Name of Facility Wi	nere Abatem	ent is Taking P	lace					Type of Fac	ility	(4)	CAPT.				,16	
NJ Executive Sta		•		•				School					47,30	* Saleton		
Street Address								The same of the sa		r 8 (Other than K						
125 West State S	treet								17-	orivate & comme		City Communication			etc.)	
011 (5)		To	10		_	1 (	7)	Square Feet	t	# of Floors	В	ldg. A	\ge	•		
City (5)		County (6)	C	ounty	Co	de (	()	0 (11	<b>(D</b>		<u> </u>			22.001	-	
Trenton		Mercer							200	ior if being demo	lisned)					
N	Flore I Board I	D. ildia a O	(0	,		100	M No.	State House			0/	V - 2		0		
Name of Monitoring USA Environmen		by Building Owl	ier (8	)	1	450	IVI INO.	AbateTech		ment Contractor (	9)					
Street Address	itai					10.0	19/10	Street Addre		10.			7.5	_		
344 West State S	treet							PO Box 25								
City, State & Zip Co	de		1000000					City, State 8						4901		175135
Trenton, NJ 0861			I :					Lumbertor			1		_	4		
Project Manager for		irm		phone -656-			er	Telephone N 609-265-21		iber	License N	umbe 00		0		
William Weisgarl Scheduled Start Da		Scheduled Cor					-	Name of OS	0.000	Monitor		00.	J Z .			
1/13/12		Scrieduled Col		6/12	ale.	(11)		EMSL Ana								
Occupancy Status I		ment (Check o	nly or	ne)				Street Addre				5.511657711				
Facility Clos	sed/Vacated	During Entire F	eriod	of Ab		mer	nt	108 Haddo								
		utside of Norm						City, State 8	- 5							
Describe:	Friday 2 <sup>nd</sup>	Shift start, S	atur	day 2	sh	ifts	,	Westmont	, N.	J 08108						
□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Sunday 1° upied During	t shift, Mon E	3reak	dow	n											
Scope of Work (Che			0.00	es the	-				- XXX						×	_
Coope of Train (on	Jon all that a	PP-37							$\boxtimes$	Full Contain	ment with Ne	egativ	/e	Pres	sure	÷
≥3 sf or ≥3 l	f		$\boxtimes$			atio				] Mini-Enclosu						
≥160 sf ≥26	0 If			De	mo	litior	l			Glove Bag P				<u></u>		
								D	L	Non-Exempt						
	ocation of tos-Containin	ng.		Loca mally		E30		Description Asbestos-Co			Amount (Specify	A	Da	em	ent i	уре
	erial (ACM)	'9		Solely				Material (A			SF or LF)		_		щ	m
TO E	BE ABATED			ntena				(i.e., thermal				1	PA	Repair	cap	nclo
i i	n Facility		Cus	todial	10000	aff?		insulation, surfa or other misce				6	Remova	pair	Encapsulate	Enclosure
	(13)		Yes	(12) No		I/A		or other misce	nan	eous)		=	-		ate	(D)
Lower Level Treas	urer's Confe	erence Room			+	7	P	ipe & Fitting	Ins	ulation	155 LF	E	1	П	П	IT
Lower Level Treas			H		ti	Ħ		Floor tile &			358 SF			Ħ	Ħ	Ħ
Zower Zover mede			H		ti	fi						٦ř	Ť	Ħ	П	Ħ
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													]			
Name of Registered	Waste Haul	ler	13	60000			Vaste	Cubic Yards	N	ame of Registere	ed Landfill					
AbstoTook Inc	39			1000	aule 8 <b>75</b>		No.	of Waste	-	RRF Landfill						
AbateTech, Inc.				10	010		-	Disposal Date		ity, State		-	-			-
City, State Lumberton, NJ								1/16/12		ullytown, PA						
Completed By (Prin	t or Type)			Ti	tle			Signature		٨		Date	9			
Gwen Trumbetti	y			0	pps	s. Co	ord.	21	1	1		12/	14	1/1	1	

1110-4394 Check # 3642

Date of Notification (1)	7		N	ame	e of	Build	dina	Owner / Opera	ator	(2)	A company of the comp	man and a second	_		
12/14/11								rvice	remarks.	S P P E	: N W E				
Agencies Notified Type Notific	ation					dres			117	NE UE	a U U Jim				
□ EPA □ Initia						liso				7.1					
	nded #4							Ode 4044		III DEC	1 9 2011	12/			
	rigency					Cont		07962-1911	100	1) DEC	1 ×	Telepho	no N	lumb	205
	cellation		1 (C) SA			Jone			-			i elebile	nie i	vuiii	Jei
									1	ASELST(	S CONTROL &	L		_	3
Name of Facility Where Abatem	ont in Taking DI		(2)	FA	CIL	ITY	INF	ORMATION		40,000	CEMBING	market and a second of			
JCP&L/First Energy	ent is Taking Pi	ace	(3)					Type of Fac			addition or other .		41		
Street Address			Carlos.						95	er 8 (Other tha	n K-12\				
147 Route 31 North											nmercial buildir	nas hom	es e	etc )	
								Square Fee		# of Floo		Bldg. Ag			
City (5)	County (6)	C	our	nty (	Cod	e (7)	)					Bidg. / ig	•		
Flemington	Hunterdon					. ,		Current Use	e (P	rior if being de	emolished)				
								Utility Bui	100 M	The second secon					
Name of Monitoring Firm Hired b	y Building Own	er (8	3)		A	SCM	1 No		_	ement Contrac	tor (9)	-		-	
1 Source Safety & Health								AbateTecl			(-)				
Street Address						11.5		Street Addre	000000000000000000000000000000000000000						
140 South Village Ave. Suite	<u>∍ 130</u>							PO Box 25							
City, State & Zip Code Exton, PA 19341								City, State 8							
Project Manager for Monitoring F	irm	Tolo	nh	ono	Nim	mbei	r	Lumberto Telephone I			License 1	lumbar			
Brian Hovendon	MANAGA.	610	- 10 CO CO					609-265-2			License	0052	a		
	Scheduled Com	-	12000			7.0		Name of OS	W			0002			
10/31/11		12/3			(	.,		EMSL Ana							
Occupancy Status During Abater						-		Street Addre				W	-		
Facility Closed/Vacated I	ALTERNATION OF THE PROPERTY OF				aten	nent		108 Haddo	on A	Ave.					
Abatement Performed O		I Ho	ours	s –				City, State 8							
Describe: 3:30 PM to								Westmont	t, N	J 08108					
Facility Occupied During					0/4/0		50 311/11/55								
Scope of Work (Check all that ap	iply)								г	☐ Full Cont	tainment with N	logativo	Droc	ouro.	
≥3 sf or ≥3 lf		M	ı	Ren	ova	tion			F	Mini-Enc		vegative	ries	Suie	
≥160 sf ≥260 lf		H			noliti				F		ag Procedures				
_		_							7		mpted and Nor	n-Friable	Pro	cedu	re
Location of	100	ls	Lo	cati	on			Description	on c		Amount	Aba			
Asbestos-Containin	9	Nor				t		Asbestos-Co	ntai	ining	(Specify				
Material (ACM) TO BE ABATED		s Mair		ely b		-		Material (A (i.e., thermal)			SF or LF)	20		Enc	ᄪ
in Facility	100	Cust				200	i	nsulation, surfa				Remova	Repair	aps	Clos
(13)				12)				or other misce				val	air	Encapsulate	Enclosure
G 80		Yes	N	10	N/A	A		W. D. C. L. L. W. C. L						Œ	
Basement Laundry Room				X				Floor tile &	Ma	astic	344 SF				
Hallway leading to Ladies R	oom		[		X			Floor tile &	Ma	stic	156 SF				
The state of the s									-						
		Ц		4											
		Щ	L	4									Ш		
Name of Posistered Wests Live			Ļ	<u> </u>		10/	T	Cubia Val	-	Inner (D)	1		Ш	Ш	
Name of Registered Waste Haule	ar .					' wa ID N		Cubic Yards of Waste	1	lame of Regis	tered Landfill				
AbateTech, Inc.				, iai		750		12	T	RRF Landfi	II				
City, State								Disposal Date		ity, State					-
Lumberton, NJ								12/30/11		ullytown, P	A				
Completed By (Print or Type)				Title	3	-11		Signature <sup>)</sup>		L-		Date	-	_	
Gwen Trumbetti				Op	os. (	Cool		(01/	1/	1		12/1	4/11		)
						200		10	_			7			/

1110-4394 Check # 3642

which of the south above of the or

Date of Notification	(1) 12/14/11					f Buildir		wner / Operato	or (2)		NA E G	7			
Agencies Notified EPA	Type Notific	ation		Stree	et A	ddress dison		- 111		1 6 E T	W 5				
☐ DEP ☑ DOL ☑ DOH ☐ DCA	☐ Eme	l nded #5 rgency cellation		City, <b>Nor</b> i Nam	Sta rist e of	te & Zip	p Co <b>NJ 0</b> ct	2.1.1		DEC 19	Z011  L	eleph	one I	Numl	ber
					ACII	LITY IN	NFC	RMATION		LICENSI	VG				
Name of Facility WI JCP&L/First Ene		ent is Taking Pla	ace (	3)				Type of Faci		y telegalasian kannak a <del>ndas</del> -a n		en Linear (AMA)			
Street Address	igy				-					Other than K-		, eggs systems			
147 Route 31 No	rth									ate & commer				etc.)	
City (5)		County (6)	Co	unty	Cor	de (7)		Square Feet		# of Floors	BI	dg. A	ge		
Flemington	**	Hunterdon		unity	CU	ue (1)		Current Use	(Prior	I if being demol	ished)				
								Utility Build							
Name of Monitoring  1 Source Safety		y Building Own	er (8)		P	ASCM N	No.	Name of Aba AbateTech		t Contractor (	9)				
Street Address 140 South Village		e 130						Street Addre							
City, State & Zip Co					2001250			City, State &							
Exton, PA 19341 Project Manager for	Monitoring F	irm	Teler	hone	a Ni	ımber	_	Lumberton Telephone N			License Nu	ımhor	27	-	_
Brian Hovendon	Worldoning i	- DT 2000		<b>524</b> -				609-265-21			Licerise IV	005			
Scheduled Start Day 10/31/11		Scheduled com	pletic		ate (	(11)	****	Name of OSI EMSL Anal							
Occupancy Status [	During Abater		y on	B)	_			Street Addre	***						
Terrorite Control of the Control of		During Entire Pe				ment		108 Haddo							
	3:30 PM to	utside of Norma Midnight	l Ho	urs –				City, State & Westmont,							
Facility Occ	upied During	Abatement						Trostmont,	140 00	7100					٠
Scope of Work (Che	eck all that ap	oply)								Full Contains	a ant with Na	antive	Dro		
≥3 sf or ≥3 lf	f		M	Rei	nov	ation			H	Full Containn Mini-Enclosu		gauve	Pie	ssure	,
≥160 sf ≥260	0 If			Dei	moli	ition				Glove Bag Pr					
										Non-Exempte					
	ocation of os-Containin	a		Locat nally		ed		Description Asbestos-Con			Amount (Specify	Ab	atem	ent T	ype
Mate	erial (ACM)		S	olely	by			Material (A	CM)		SF or LF)	72	200	Ē	m
	BE ABATED  Facility	100		tenar odial		5750003		(i.e., thermal s sulation, surfac				Removal	Repair	caps	Enclosure
	(13)			(12)				r other miscell				\\ \delta	\	Encapsulate	sure
5			Yes	No	N.	/A					244.05	K4			
Basement Laund Hallway leading t		oom				1		Floor tile & I Floor tile & I			344 SF 156 SF		H	Н	H
i laliway leading t	o Laules IX	Oom	H	H	TE	1		riour the acr	viastic	<b>'</b>	130 31	H	H	H	H
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Name of Registered	Masta Haul		Ш	L	ILE	D Wood		ubic Yards	Nom	e of Registere	d Londfill		Ш	Ш	Ш
AbateTech, Inc.	vvaste naut	31			aule	r ID No 3 <b>750</b>		f Waste		F Landfill	u Lanuilli				
City, State					10	77 30	D	isposal Date	City,	State	-				
Lumberton, NJ Completed By (Print	or Typo\			Tit	lo.		-	1/31/11 ignaturė	lully	rtown, PA		Date	-		
Gwen Trumbetti	or rype)	57				Coord		Siparule 1	N			12/1	4/1	1	

#### State of New Jersey 1111-4422 NOTIFICATION OF ASBESTOS ABATEMENT. Check # 3541 1111-4422

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

Agencies Notified   Type Notification   Street Address   Seep Street   S	Date of Notification									Owner / Operat	or (2)						
Separation   Sep	Agencies Notified	12/15/11 Type Notific	ration	-						c Library	174				_	-	
DEP   Initial   Mariended #1   Mar		Type Notine	ation		123		-		1300	1		DEC 1	1003	$\Box II$			
DOL   Amended #1   Madison, N.J 07940   Amended #1   Name of Contact   Name of		☐ Initia	al .								U LI	1/1/2/	1 2011	ma.eth		-	
DOH		☐ Ame	ended #1								İ			i			
DCA	□ DOH	☐ Eme	ergency								hacz	ASBESTUS U	Jivinuk & [T	elepho	ne N	lumb	er
Name of Facility Where Abatement is Taking Place (3)  Madison Public Library  Street Address  39 Keep Street		☐ Can	cellation		N	lan	су	Ad	lamcz	yk L	г максилингий	LICENS	iko				
Madison Public Library    School (K-12)					-	F	AC	ILIT	TY INI	ORMATION	- 16, c.	Day of the story and apply to a			- 4	A	
Subchapter 8 (Other filae, private & commercial buildings, homes, etc.)   Square Feet			ent is Taking F	Place	(3	)	0.55										
Other (i.e., private & commercial buildings, homes, etc.)   Square Feet		Library				all cons											
City (5)  Madison  Morris  County (6)  Morris  County Code (7)  Madison  Morris  Current Use (Prior if being demolished) Library  Name of Monitoring Firm Hired by Building Owner (8)  ASCM No.  Ascending Abatement Contractor (9) AbateTech, Inc.  Street Address  1253 North Church Street  City, State & Zip Code  Moorestown, NJ 08057  Project Manager for Monitoring Firm  Telephone Number  Bis-840-8800  Scheduled Start Date (10) 12/12/11  Occupancy Status During Abatement (Checkony) one)  Facility Closed/Vacated During Enthre-Period of Abatement Abatement Performed Outside of Normal Hours  Describe:  Facility Occupied During Abatement  Scope of Work (Check all that apply)  Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Material (ACM) TO BE ABATED In Facility (13)  Name of Registered Waste Hauler  Name of Registered Waste Hauler  Name of Registered Waste Hauler  Name of Registered Landfill  Disposal Date  Disposal Date  City, State  Disposal Date  Current Use (Prior if being demolished)  Lubar (Prior if being demolished)  LabateTech, Inc.  Street Address  1elephone Number Fleiphone Number Fleiphone Number Fleiphone Number Glosy-85-2107  005-29-8107  Name of OSHA Monitor EMISL Analytical  Street Address 108 Haddon Ave.  Use Street Address 108 Haddon Ave.  Non-Exempted and Non-Friable Procedure  Non-Exempted and Non-Friable Procedure  Asbestos-Containing Material (ACM) Solely by Material (ACM) Floor tile & Mastic  2,120 SF  Manuer of Registered Landfill  Abatement Type  Abate Tech, Inc.  Name of Registered Landfill  Name of Registered Landfill  Disposal Date  1/2/20/11  Tullytown, PA  Date  Date  Disposal Date  1/2/20/11  Tullytown, PA  Date													· · · · · · · · · · · · · · · · · · ·				
City (5) Madison County (6) Morris Current Use (Prior if being demolished) Library  Name of Monitoring Firm Hired by Building Owner (8)	39 Keep Street															etc.)	
Madison   Morris   Current Use (Prior if being demolished)   Library	City (E)		To(0)				_		/7\	Square Feet	t	# of Floors	В	ldg. Ag	е		
Library  Name of Monitoring Firm Hired by Building Owner (8)  TTI Environmental  Street Address  Street Address  PO Box 25  City, State & Zip Code  Lumberton, NJ 08048  Telephone Number  Sepecify State & Zip Code  Lumberton, NJ 08048  Telephone Number  Sepecify State & Zip Code  Lumberton, NJ 08048  Telephone Number  Sepecify State & Zip Code  Lumberton, NJ 08048  Telephone Number  Street Address  PO Box 25  City, State & Zip Code  Lumberton, NJ 08048  Telephone Number  Stephone Number  609-265-2107  Name of OSHA Monitor  EMSL Analytical  Street Address  Non-Exempted and Non-Friable Procedure  Non-Exempted and Non-Exempted and Non-Friable Procedure  Non-Exempted and Non-Friabl			- 1 to 12	1	٥٥١	inty	Co	ae	(7)	0 111	/D: :						
Name of Monitoring Firm Hired by Building Owner (8)  TIT IEnvironmental  Street Address 1253 North Church Street 1253 No	Madison		Morris							The second secon	(Prior i	being demo	olished)				
AbateTech, Inc.   Street Address   Str	Name of Monitoring	Firm Hirad I	y Building Ou	nor /	′O\		_	10	CM No		260 200 000	Cantanatan	(0)				
1253 North Church Street   PO Box 25   City, State & Zip Code   Lumberton, NJ 08048   City, State & Zip Code   City State Nuring Abatement (Check only one)   City State & Zip Code   City State   C	TTI Environment		by building Ow	nei (	(0)			ASI	CIVI INC	AbateTech	, Inc.	Contractor	(9)				
City, State & Zip Code    City, State & Zip Code   City, State & Zip Code   Cumberton, NJ 08057		ch Street															
Project Manager for Monitoring Firm   Seg-840-8800   Seb-40-8800   Scheduled Start Date (10)   Scheduled Complete (10)   12/20/11   Name of CSHA Monitor   EMSL Analytical   Street Address										City, State &	Zip Co						
Scheduled Start Date (10)   Scheduled Completion Date (11)   12/12/11   12/12/11   12/12/1		- Company of the Comp		T								8048					
Scheduled Start Date (10) 12/12/11    Name of OSHA Monitor EMSL Analytical   Scheduled Completion Date (11)   12/20/11   Name of OSHA Monitor EMSL Analytical   Scheduled Completion Date (11)   12/20/11   Name of OSHA Monitor EMSL Analytical   Scheduled Completion Date (11)   12/20/11   Name of OSHA Monitor EMSL Analytical   Scheduled Completion Date (11)   12/20/11   Name of OSHA Monitor EMSL Analytical   Scheduled Completion Date (11)   12/20/11   Name of OSHA Monitor EMSL Analytical   Scheduled Completion Date (11)   12/20/11   Name of OSHA Monitor EMSL Analytical   Scheduled Completion Date (11)   Name of OSHA Monitor EMSL Analytical   Scheduled Completion Date (11)   Scheduled Completion Date (Sheck Analytical   Scheduled Completion Date (Sheck Analytical   Scheduled Completion Date (Site of Monitor EMSL Analytical   State Advances	Jim Guilardi	Monitoring I	-irm	100000	77.7°								License N		29		
Occupancy Status During Abatement (Check only one)			Scheduled Co	mple	tio	n Da	ate	_		Name of OS	HA Mor	nitor					
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Hours – Describe:   Facility Occupied During Abatement Scope of Work (Check all that apply)   ≥3 sf or ≥3 lf			ment (Checklo				10.00	<b>-</b>									
Describe:							oate	eme	ent		1771753						
Facility Occupied During Abatement   Full Containment with Negative Pressure   Full Containment with Negative P		Performed O	utside of Norm	al F	łou	rs –				City, State &	Zip Co	de					
Scope of Work (Check all that apply)    Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Stope of Work (Check all that apply)   Maintencourse of Countries (Specify Stope of Amount Asbestos-Containing (Specify Stope of Amount (Specify Stope of Amount (Specify Stope of Amount (Specify Stope of Asbestos-Containing (Specify Stope of Amount (AcM) Stope of Amount (Specify Stope of Amount (Specify Stope of Amount (Specify Stope of Amount (AcM) Stope of Amount (Specify Stope of Amount (AcM) Stope of Amount (Specify Stope of Amount (AcM) Stope of Amount (Specify Stope of Amount (Specify Stope of Amount (AcM) Stope of Amount (Specify Stope of Amount (AcM) Stope of Amount (AcM) Stope of Amount (Specify Stope of Amount (AcM) Stope of One of Amount (AcM) Stope			0							Westmont,	NJ 08	108					
Sale of ≥3 If							_										
≥3 sf or ≥3 lf	Scope of Work (Che	eck all that ap	opiy)									Full Contain	ment with Ne	evitene	Pres	cure	
≥160 sf ≥260 lf  Demolition  Glove Bag Procedures Non-Exempted and Non-Friable Procedure  Location of Asbestos-Containing Material (ACM) Momentally Used Solely by Maintenance or Custodial Staff? (12) Yes No N/A  Throughout  Throughout  Description of Asbestos-Containing (Specify Material (ACM) SF or LF)  (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)  Floor tile & Mastic  2,120 SF  Name of Registered Waste Hauler  NJDEP Waste Hauler ID No. 18750  Disposal Date Lumberton, NJ  Completed By (Print or Type)  Title  SignatUre  Rescription of Amount (Specify Material (ACM) SF or LF)  Report Type  Abatement Ty	☐ ≥3 sf or ≥3 lf	f		$\nabla$	1	Re	nov	atio	on					gauve	1 10.	Suic	
Non-Exempted and Non-Friable Procedure    Location of Asbestos-Containing Material (ACM)   Solely by Material (ACM)   Material (ACM)   Solely by Material (A				F	i				0.07								
Location of Asbestos-Containing Material (ACM) Normally Used Solely by Maintenance or Custodial Staff? (12) Yes No N/A  Throughout Floor tile & Mastic 2,120 SF  Name of Registered Waste Hauler  AbateTech, Inc.  Is Location Normally Used Solely by Material (ACM) SF or LF)  Normally Used Solely by Material (ACM) SF or LF)  Material (ACM) SF or LF  Material	Z000.			_	1							the state of the s		Friable	Pro	cedu	re
Asbestos-Containing Material (ACM) Solely by Material (ACM) SF or LF)  TO BE ABATED in Facility (13)  Throughout  Throughout  Asbestos-Containing Material (ACM) SF or LF)  Maintenance or Custodial Staff? (12) or other miscellaneous)  Throughout  Floor tile & Mastic  2,120 SF  Name of Registered Waste Hauler  NJDEP Waste Hauler ID No.  18750  TRRF Landfill  City, State  Lumberton, NJ  Completed By (Print or Type)  Title  Signature  Absestos-Containing Material (ACM) SF or LF)  Material (ACM) SF or LF)  Registers Wastems insulation, surfacing, VAT or other miscellaneous)  Floor tile & Mastic  2,120 SF  Material (ACM) SF or LF)  Registers Waste  Cubic Yards of Waste  TRRF Landfill  City, State  Tullytown, PA  Date	Lo	cation of		1	s L	oca	tior	1	1	Description	-						
Maintenance or Custodial Staff? (12)			g	No				ed									· ·
Throughout    Floor tile & Mastic   2,120 SF													SF or LF)	الع	_	En	ш
Throughout    Floor tile & Mastic   2,120 SF							100000	4500000						e e	₹ep	äp	ıclo
Throughout    Floor tile & Mastic   2,120 SF				Ou.				:						ova	air	sula	Sur
Name of Registered Waste Hauler  NJDEP Waste Hauler ID No. of Waste				Yes				I/A				<b>'</b>				te	(D
Hauler ID No. 18750 TRRF Landfill  City, State Lumberton, NJ  Completed By (Print or Type)  Title  Disposal Date 12/20/11 Tullytown, PA  Date	Throughout						[			Floor tile & I	Mastic		2,120 SF				
Hauler ID No. 18750 TRRF Landfill  City, State Lumberton, NJ  Completed By (Print or Type)  Title  Disposal Date 12/20/11 Tullytown, PA  Disposal Date 2 City, State 12/20/11 Tullytown, PA  Disposal Date 2 City, State 12/20/11 Tullytown, PA							[										
Hauler ID No. 18750 TRRF Landfill  City, State Lumberton, NJ  Completed By (Print or Type)  Title  Disposal Date 12/20/11 Tullytown, PA  Disposal Date 2 City, State 12/20/11 Tullytown, PA  Disposal Date 2 City, State 12/20/11 Tullytown, PA							[										
Hauler ID No. 18750 TRRF Landfill  City, State Lumberton, NJ  Completed By (Print or Type)  Title  Disposal Date 12/20/11 Tullytown, PA  Disposal Date 2 City, State 12/20/11 Tullytown, PA  Disposal Date 2 City, State 12/20/11 Tullytown, PA																	
Hauler ID No. 18750 TRRF Landfill  City, State Lumberton, NJ  Completed By (Print or Type)  Title  Disposal Date 12/20/11 Tullytown, PA  Date																	
Hauler ID No. 18750 TRRF Landfill  City, State Lumberton, NJ  Completed By (Print or Type)  Title  Disposal Date 12/20/11 Tullytown, PA  Disposal Date 2 City, State 12/20/11 Tullytown, PA  Disposal Date 2 City, State 12/20/11 Tullytown, PA										12	1						
AbateTech, Inc.  18750 20 TRRF Landfill  Disposal Date Lumberton, NJ  Disposal Date 12/20/11 Tullytown, PA  Date	Name of Registered	Waste Haul	er								Name	of Register	ed Landfill				
Lumberton, NJ  12/20/11 Tullytown, PA  Completed By (Print or Type)  Title Signature , Date	AbateTech, Inc.					116					TRRE	Landfill					
Completed By (Print or Type) Title Signature , Date	City, State								III - Al-2000						=		
Completed By (Print or Type)  Title Opps. Coord.  Signature 12/15/11	Lumberton, NJ									12/20/11	Tully	town, PA					
Gwen Trumbetti Opps. Coord. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		or Type)						_		Signature	1						
	Gwen Trumbetti					O	ps	. C	oord.	1 XN	L'I			12/1	5/1	ssure etc.)	- 15

no chock

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

1108-4358 Check # 3538

Date of Notification	The second secon							Owner / Opera		(2)		2011	10	11	
Agencies Notified	<b>12/15/11</b> Type Notific	nation	-					alth Systems	\$	1100	150 19	7011	-	1	
⊠ EPA	Type Nound	Callon		63/2-09/20		Add	ress ific A	/A			Dra			1	
☐ DEP	☐ Initia	al					& Zip			- \ \ \ \		IIIIII- 8	572		١
⊠ DOL		ended #3		At	lan	tic C	ity, N	J 08401		1	ASSESSION LICENS	The second		per	
□ DOH		ergency		10000			ontact		1		Control of the Contro	Teleph	one	Numl	oër"
☐ DCA	_ ∐ Can	cellation		Pa	atric	ck W	alsh			Law Comment					
					FAC	CILIT	Y INI	FORMATION		· · · · · · · · · · · · · · · · · · ·			-	/0.55 - TO	
Name of Facility Wh			Place	(3)		- 222		Type of Fa				gs, homes, etc. Bldg. Age  lumber 00529  egative Pressur  -Friable Proced Abatement	382		
AtlantiCare Region Street Address	onal Medic	cal Center						Schoo		1.S-235/A	152 9520	gs, homes, etc. Bldg. Age  lumber 00529  egative Pressur  Friable Proced Abatement  Removal  Date			
1925 Pacific Ave.										er 8 (Other than			egative Pressure Prizable Proced Abatement Removal Control Con		
1323 I acilic Ave.								Square Fee		# of Floor				etc.)	
City (5)		County (6)	Ic	oun	tv C	ode	(7)	OqualeTec	Ci	# 01 1 1001	5	Number 00529  Negative Pressuration Abatement  Removal  Date			
Atlantic City		Atlantic		-	., -		(.)	Current Us	e (P	rior if being der	nolished)	seviewe			
								Medical C		TO THOSE THE PROPERTY OF TAXABLE					
Name of Monitoring	Firm Hired I	by Building Ow	vner (8	3)		ASC	CM No			ment Contracto	r (9)				
TTI Environment	al		100	9B				AbateTec	h, I	nc.			homes, etc. Age  ber 10529		
Street Address	. l. O4 4							Street Addr					ive Pressurable Procedabatement		
1253 North Churc City, State & Zip Coo		Samuel Control						PO Box 2		- 0 - 1 -	-		homes, etc. g. Age  ative Pressu  iable Procec Abatement  Removal  ate		
Moorestown, NJ								City, State Lumberto			87				
Project Manager for		Firm	Tele	pho	ne	Numb	per	Telephone			License N	Number		,	
Jim Guilardi	-		856	-84	0-8	800	1	609-265-2							
Scheduled Start Dat	e (10)	Scheduled Co				e (11)	1	Name of OS							
12/2/11	Al	1/01/1/		9/12	2	_		EMSL Ana							
Occupancy Status D	uring Abate ed/Vacated	ment (Uneck of During Entire I	only or	1e)_ Lof /	Δha	teme	nt	Street Addr 108 Hadde							
		utside of Norm				tome		City, State 8							
Describe:			100000000000000000000000000000000000000					Westmon	Co. Land						
Facility Occu	ipied During	Abatement							-,						
Scope of Work (Che	ck all that ap	pply)													2011-0
≥3 sf or ≥3 lf				-					L			Vegative	Pre	ssure	3
≥160 sf ≥260			A			ovatio olition			F	Mini-Enclo	sure Procedures				
Z -100 01 -200					ZCIII	Olldoi	•		F			n-Friabl	e Pro	cedi	ire
Lo	cation of		Is	Loc	catio	n	0 - 3-411	Description	on o		Amount	All the state of t	77.311.1	1.00001000000	1000000
	s-Containin	g	Non					Asbestos-Co	ontai	ining	(Specify		T	ssure ccedu ent	
	erial (ACM) E ABATED		Mair	Solel				Material (/ (i.e., thermal			SF or LF)	Z.		Enc	m
	Facility		Cust					insulation, surfa				emo	(ep	aps	Enclosure
	(13)			(12				or other misce				val	ji.	ulat	sure
			Yes	N	_	N/A								Ф	
Operating Room (	Corridor		Ц		4	Ц		Masti	ic		400 SF				
				1	╬	H						ᆜ님	e Pressure Procedute Proce		H
			H	+	+	H						Telephone Nur  Teleph	H	H	
			H	H	+	H	-						H	H	
			H	1	1	H		53				ᅢ	Pressure Procedatement	H	H
Name of Registered	Waste Haule	er		1	JJD	EP V	Vaste	Cubic Yards	N	lame of Registe	red Landfill			ш	
				F		ler ID		of Waste					elephone Nur  s, homes, etc dg. Age  gative Pressu  Friable Procec  Abatement  Removal  Date		
AbateTech, Inc.						1875	0	12	_	RRF Landfill					
City, State Lumberton, NJ								Disposal Date	A 10 P23500	ity, State					
Completed By (Print of	or Typo)			1-	Ti+I ~			2/29/12	1	ullytown, PA		ID-1			
Gwen Trumbetti	or rype)				Title Opp	s. Co	ord.	Signature	1				e Pressu le Procedoatement	1	
								> n	,0			12/1	0/1	1	

Noneck

State of New Jersey

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

1107-4333 SUB8

Date of Notification				1	Nam	e of	Build	ling C	Owner / Operat	or (2)				1/1	1 11	-	
	12/14/11			1	Kea	rny	Boa	rd of	Education			)FC	9 2011	- 111			
Agencies Notified EPA	Type Notifi	cation		10			ldres	_	ý	-/	1	- 20	V 2011	11 1.	11		
□ DEP	☐ Initi	al		-			is A				L	-		_	1		
DOL DOL		ended #2			72755			Zip Co <b>0703</b>			AS	BESTOS	CONTROL &				
☑ DOH		ergency					Cont			-	-	LIOLI	011418	F-11-	1		
DCA		cellation					Dev				- 12	and an investor w	×1.4.2.1.1.	Telep <u>h</u>	one	vumi	ber
				Ī.													
Name of Facility Wh	acro Abatan	ant in Taking I	21	- /2	FA	CIL	ITY	INFC	PRMATION							A .	
Kearny High Sch			Place	9 (3	)				Type of Faci								
Street Address	OUI-T TIAC	) L I				-			Subchar				2)				
336 Devon Street	ł												د) ial building	as hon	200	oto \	
	•								Square Feet		# of Flo			ldg. Ag		eic.)	
City (5)	·	County (6)	10	Coi	untv	Cod	e (7)		- Coquaio i coi		77 01 110	5015		iug. At	je.		
Kearny		Hudson			,		- (- /		Current Use	(Prior	if being	demolis	shed)	-		-	
					257				School	(, ,,,,,,	Doing	aomon.	incu)				
Name of Monitoring	Firm Hired	by Building Ow	ner (	(8)		A	SCM	No.	Name of Aba	atemer	nt Contra	ctor (9					-
Briggs Environm	ental		- 25						AbateTech			(F)					
Street Address					100				Street Addre								
3 Crosswicks Str	OUT OF THE PARTY O								PO Box 25						350		
City, State & Zip Co Bordentown, NJ									City, State &								
Project Manager for		Firm	Tol	lon	hono	Min	mber		Lumberton								
Mike Hoodak	wormorning		1633233			5520			Telephone N 609-265-21				License N	umber 0052	00		
Scheduled Start Dat	e (10)	Scheduled Co		_			_		Name of OSI		nitor		- No. 10 11 11 11 11 11 11 11 11 11 11 11 11	0032	.9		-
7/18/11	, ,		3 7 7 7 7	29/		( .	.,		EMSL Anal								
Occupancy Status D	uring Abate	ment (Check o	nly c	ne	)				Street Addres		-						
		During Entire F				aten	nent		108 Haddor								
	Performed C	outside of Norm	nal F	lou	rs –				City, State &								
Describe:	i	. A b - 4 4							Westmont,	NJ 08	3108						
Scope of Work (Che			-												-		
ocope of work (one	ck all triat a	ppiy)								$\boxtimes$	Full Cor	ntainme	ent with Ne	enative	Pre	ssure	۵.
≥3 sf or ≥3 lf			$\boxtimes$	]	Rer	nova	tion			$\boxtimes$	Mini-En			-gao		Joure	
≥160 sf ≥260	) If			j	Der	noliti	ion			X	Glove E	ag Pro	cedures				
													and Non-	Friable	Pro	cedu	ıre
	cation of				ocat			30-000	Description				mount	Aba	atem	ent T	ype
	os-Containir erial (ACM)	ng			ally l lely l	Used	1		Asbestos-Con		1		Specify	alv.=s			
	E ABATED					ce o	r		Material (A0 (i.e., thermal sy			51	or LF)	71		四	m
	Facility		1.0000000000000000000000000000000000000			Staff	550		sulation, surfac					em (	Repair	сар	nclo
	(13)				(12)				r other miscella					Remova	bair	Encapsulate	Enclosure
Circh Class			Yes	3	No	N/A	4		Pipe Insulatio	n /EC			08 LF	-		हिं	Ф
First Floor Second Floor				+	M		-							- N			
Second Floor			H			H	-		ipe Insulatio Insulation (G	-	-		88 LF		H	H	H
Second Floor		- 1-	H			H	-	ipe	Plaster		Day)	_	0 LF 040 SF		Η	H	H
Third Floor			H	_		H			Plaster				160 SF		Η	H	H
Third Floor			Ħ		X	П		Р	ipe Insulatio		(:		46 LF		H	H	H
Third Floor			Ī	_	d	Ī	F		Insulation (G				0 LF		Ħ	Ħ	H
Name of Registered	Waste Haul	er				DEP			ubic Yards		e of Regi		the second secon	I KA			-
							ID No	o. of	f Waste		1						- 1
AbateTech, Inc.					18	750			15		F Landi	Fill					
City, State Lumberton, NJ								Di	isposal Date	City,		2.4					
Completed By (Print	or Tunal				T:41				2/29/12	lully	town, F	A				-	
Completed By (Print )	or rype)				Title		Coor		gnature	1	-			Date	414		
						۰. ۱		۳.	XM	/				12/1	4/1	1	

## State of New Jersey 110 NOTIFICATION OF ASBESTOS ABATEMENT

1107-4333

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

Data of Natification	(4)		dominion of	151				0 10	- Parket	15 16 1					
Date of Notification	12/14/11							Owner / Operation	tor (	2) 5	an province here and and	The second			4
Agencies Notified	Type Notific	ation					ress	or Education	111		1 9 2011	11.77		-	
				10000000			Ave.	A		III DEC	7 9 2011	means.			
DEP	☐ Initia				5000		& Zip					1		10	
⊠ DOL	<u> </u>	nded #3					J 070	32	_	LASSIST	OS CONTROL &				
□ DOH		rgency cellation					ontact		-	L	CENSING IT	elenbe	she i	lumi	ber
□ DCA	L Cand	cellation		IVII	cna	ael L	Devita		<u></u>		garang delengte og med en selektropis				
				F	FAC	ILI	TY INI	ORMATION			Alberta Contractor	A sector of a represent			
Name of Facility Wh		ent is Taking F	Place	(3)				Type of Fac							
Kearny High Sch Street Address	001							☐ School							
336 Devon Street										8 (Other than					
336 Devon Street								Square Fee		# of Floo	mercial building			etc.)	
City (5)		County (6)	10	Coun	ty C	odo	(7)	Square Fee	et.	# 01 F100	rs B	ldg. Ag	e		
Kearny		Hudson	1	Journ	ty C	oue	(1)	Current Llee	/Dri	or if being de	moliphod)	*********			
Reality		nuason						School	e (PII	or it being de	monsnea)				
Name of Monitoring	Firm Hirad h	y Building Ow	nor (	9)		IAC	CM No		oton	nent Contract	or (0)	-			
<b>Briggs Environm</b>		building Ow	nei (	o)		AS	CIVI INC	AbateTech			01 (9)	-800-00-00-0			
Street Address								Street Addre							
3 Crosswicks Str City, State & Zip Co	DEVICE CO.									PO Box 25					
Bordentown, NJ								City, State 8  Lumbertor							
Project Manager for		irm	Tele	epho	ne	Num	ber	Telephone N			License N	umber	- Here	-	
Mike Hoodak				29				609-265-21				0052	29		
Scheduled Start Dat	te (10)	Scheduled Co	mple	tion I	Date	e (1 <sub>1</sub> 1	)	Name of OS	SHA	Monitor					
7/18/11		-	2 2 2 1 PC - White	29/12	2			EMSL Ana		cal					
Occupancy Status D	ouring Abater ed/Vacated I	ment (Check o During Entire F	nly o	ne)	Aba	teme	ent	Street Addre		VA					
		utside of Norm					80.1	City, State &					-	_	
Describe:								Westmont							
Facility Occu	upied During	Abatement							,						
Scope of Work (Che	ck all that ap	oply)							2000	1 1879 MANAGES AC-	90 - 10 Sept. 100	¥	.00		
			K-2	_					Ц		ainment with Ne	egative	Pre	ssure	е
≥3 sf or ≥3 lf			$\bowtie$	5 EE		vatio				Mini-Encl					
≥160 sf ≥260	J 11		Ш	ט	em	olitio	n		$\boxtimes$		g Procedures ( npted and Non-			500	uro
10	cation of		le	s Loc	atio	'n	T	Description			Amount				иге Туре
	os-Containing	g		rmall				Asbestos-Cor			(Specify	7,00	I	I	Type
	erial (ACM)			Solel	ly by	У		Material (A	ACM)		SF or LF)			ш	
	BE ABATED		1035	nten				(i.e., thermal				Re	Z,	nca	=
In	Facility (13)		Cus	todia (12		iaii?		insulation, surfa or other miscel				Remova	Repair	Encapsulate	Enclosure
	(10)		Yes			N/A		or other miscer	nanc	ous)		<u>a</u>	-	late	ĪĒ
Mechanical Room	1 233					4185223		Pipe Insul	atio	n	25 LF				1/4
Pool Area								Pipe Insul	atio	n	200 LF				
First Floor				$\boxtimes$				Floor tile &		0.000	13,820 SF	$\boxtimes$			
Second Floor		9			1			Floor tile &		275/270-2	600 SF	$\boxtimes$			
Third Floor			Ц			Ц		Floor tile &		tic	200 SF		Ц	Ц	Щ
Lower Core Roof								Roof Fe		501:	10,000 SF		Ц	H	H
Lower Core Roof			Ш					Roof Flas			3,000 SF		Ш		
Name of Registered	Waste Haule	er		0.124			Naste No.	Cubic Yards of Waste	Na	me of Regist	ered Landfill				
AbateTech, Inc.				100	187		110.	15	TF	RRF Landfil	1				- "
City, State					12			Disposal Date		y, State		8.	225-25		
Lumberton, NJ							1	2/29/12)		illytown, PA	A				
Completed By (Print	or Type)			1	Γitle			Signature	n			Date	77		
Gwen Trumbetti				C	Opp	s. C	oord.	Ani	t			12/1	4/1	1	

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## State of New Jersey 1 NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

1111-4421 Check #3540

Date of Notification	(1) 12/15/11	Name of Building Seton Hall Univ	Owner / Operator (2)	尼瓜州居	
Agencies Notified	Type Notification	Street Address	11) 5		
		400 South Oran		6 6011	NUM
DEP	Initial	City, State & Zip C	Code       DI	EC 19 2011	
⊠ DOL	Amended #2	South Orange,			1
□ DOH □ DCA	Emergency Cancellation	Name of Contact Michael Marcor	1	BESTOS CONTROL &	Telephone Number
П рск	Cancellation			LICENSING	
		FACILITY INF		The transfer of the transfer and the state of the state o	*
	here Abatement is Taking P		Type of Facility (4) School (K-12)	V 1- * 3 =	
Street Address	rsity- Fahy Lecture Hal	I DI	Subchapter 8 (Other	than K-12)	
400 South Orang	ie Ave.		Other (i.e. private &		as. homes, etc.)
	,				Bldg. Age
City (5)	County (6)	County Code (7)	10,000	2	90
South Orange	Essex		Current Use (Prior if beir	g demolished)	
			University		*
	Firm Hired by Building Ow	ner (8) ASCM No			
Omega Environn	nental		AbateTech, Inc.	00529	
Street Address	4		Street Address PO Box 25		
280 Huyler Street City, State & Zip Co			City, State & Zip Code		
South Hackensa			Lumberton, NJ 08048	3	
Project Manager for		Telephone Number	Telephone Number	License N	Number
Geiser Fajardo		201-489-8700	6ø9-265-3207		00529
Scheduled Start Da 12/27/11		mpletion Date (11) 1/6/12	Name of OSHA Monitor EMSL Analytical		
	During Abatement (Check o		Street Address		
	sed/Vacated During Entire F		108 Haddon Ave.		
	Performed Outside of Norm	al Hours	City, State & Zip Code		
Describe:	unied During Abetement		Westmont, NJ 08108		
Scope of Work (Che	upied During Abatement				
Scope of Work (On	cok all that apply)		☐ Full (	Containment with N	legative Pressure
≥3 sf or ≥3 l	f	Renovation		Enclosure	
≥160 sf ≥26	O If	Demolition	to the second of	e Bag Procedures	
					n-Friable Procedure
The state of the s	ocation of tos-Containing	Is Location Normally Used	Description of Asbestos-Containing	Amount (Specify	Abatement Type
	erial (ACM)	Solely by	Material (ACM)	SF or LF)	
TO E	BE ABATED	Maintenance or	(i.e., thermal systems		Re Re
i	n Facility (13)	Custodial Staff? (12)	insulation, surfacing, VAT or other miscellaneous)		Enclosure Encapsulate Repair Removal
	(13)	Yes No N/A	or other miscenarieous)		=   # 6
Throughout			Floor tile & Mastic	900 SF	
·······································				1	
			[0.1. V ] [11	11 11 150	
Name of Registered	I Waste Hauler	NJDEP Waste Hauler ID No.	Cubic Yards Name of R	legistered Landfill	W W
AbateTech, Inc.	: ·	18750	12 TRRF La		
City, State Lumberton, NJ			Disposal Date City, State Tullytown		
Completed By (Print	t or Type)	Title	Signature		Date
Gwen Trumbe		Office	Court		12/15/11
		Coord.	ZIV		

State of NJ Notification of Asbestos Abatement

D&S Proj.	#: MS 11-493		No (Pu	otificatio ursuant	n of Asbe to NJAC 8	stos / 3:60 a	Aba and	tement 12:120)	And the second	开广	06	¢.	0	16	ı
								The second secon	120	丁林尼	EN				_
	(4)	Name	of Building	Owner/O	perator (2)			11四1 图 17	15	il til lia	Company of the control of the contro				
Date of Notification	1/11 11 1	AN	THONY I	OASCO							- 151		_		_
Agencies Notified			Address				900-00-00	111 111 111	cr 1	9 7011	in the second				
EPA	Initial	11	SPRUCE	AVEN	UE				_0		1				_
☐ DEP	Amended		State, Zip C						and the second	A logress	-1				
☑ DOL	Amendment #:		RWOOD		)27			AS	6131U3	CONTROL &					
_	Emergency (including		of Contact					-	and the second	Telephone N	lumber	ì			
DOH	justification)	1			,							15			
☐ DCA	☐ Cancellation	A	YNOHTN				_		_						
				FACILIT	TY INFORMA	NOITA			-	(F - 115 - (A)				_	
	where abatement is tal	king place	(3)						Туре	of Facility (4) School (	K - 12)				
Name of facility v	where abatement is al	g F	-								ter 8 (Othe	r than	K-12	)	
ANTHONY I	DASCO					_	_			Other (Pr	ivate/Com	mercia	al		
Street Address											omes, etc.		Bldg	Age	
563 SPRUCE	AMENITE								Squ	are Feet #	of Floors		Diag.	rigo	
	AVENUE	County	(6)					ode (7)	-	rrent Use (Pric	r if boing d	emoli	shed)	_	_
City (5)						(Sta	ite us	se only)	Cu	rrent Use (Pric	i ii being o	CITION	onou		V 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
GARWOOD	)	UNIO					No	me of Abatement	Contra	actor (9)					
Name of Monito	oring Firm Hired by Bld	g. Owner (	8)		ASCM No.		1	& S RESTOR				7			
						_		eet Address	ATIO	11, 1110.					
Street Address			9				I CAMBOOS	20 California A	ve						
0001								, State, Zip Code							
City, State, Zip C	Code							Paterson, NJ 0							_
- 7.	,							ephone Number	7505		License N	umbe	r		
Project Manage	r for Monitoring Firm		Phor	ne Numbe	er		1	973-345-8020	)		00	159			
							Na	ame of OSHA Mo	nitor						
Start Date (10	0)	Sched.	Completion	Date (11	)			D & S Restora	tion, I	nc.			_		
		12/23/	11					reet Address							
12/17/11	tus During Abatement							20 California A		e		_			
	land/uncated during 6	entire perior	1 of aparen	ent.	42		Ci	ty, State, Zip Cod	е						
Abateme	nt performed outside of	of normal fa	acility hours	-			П	- NII (	7502						
Describe	escribe: NORMAL Ho	OURS						Paterson, NJ (	17303	Containment v	/nogative	oressi	ire		
Other-De	k (check all that apply	)								Containment v -enclosure	//legauve	pressi	,,,,		
Scope of vvoi	> <u>3</u> If	Renovation	n					F	7 Glov	ehan procedu	re				
		Demolition						Ī	Non	-Exempted (*)	and Non-f	riable I R	proce	dure	
<u> ≥160 sf</u>	or ≥260 lf		n normally u	sed solel	vI			1				e	e	E n	E
Location	n of	by mainte	nance/cust	odial	Descri	ption o	of ast	estos-containing		Amount (Specify	SF or	m	p a	C	n
asbesto materia	s-containing I (acm) to be	staff(12)			- materi	al (AC	M)			LF)		v	i	a p	L
abated	in facility (13)	Yes	No	N/A								e	4	П	+
				1	pipe inst	ılatior	1			20 l ft		X	片	片	뷰
Basement		-			1							#	片	片	計
			-	+	1							井	片	片	干
		-	-	1								분	ዙ	片	卡
		-		-	1					1				الا	15
	Lata Davier	INJE	EP Hauler	ID#	Cubic Yards	of Wa	ste	Name of Registe TULLYTOW	red La	INDTIII ESOURCE R	ECOVE	RY			
Registered W	STORATION, INC		506		1 yd		_		14, KI	JOO OROLL					17.53
City, State		==1=		Disposal				City, State TULLYTOV	VN. P	A					
PATERS(	ON, NJ 07503	7		12/19		70		TOLLTION			Date				
Completed b	y (Print or Type)	Title			Signatu						12/16	5/11			
BOGDAN	N JOLDZIC	PRESI	DENT	for sehe	stos licensur	e exen	npted	activities.							

### State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

D&S Proi.	#: MS 11-504			(Pursuar	nt to NJAC	8:60	and	12:120)		1 6	- 11	1 .	7 6		
545119,	MISTER							i in a state of the state of th		HE CO	64		13		
Date of Notification	(1)	Nan	ne of Bui	ding Owner/	Operator (2)	-		post of selecting College and the	(P)		PP	<u></u>			
1 12 1/11 16			ROCK I	OUTTON					C	E I W	BI	11			
Agencies Notified	Type Notification	n Stre	et Addre	ss		A STORY									
☐ EPA	Initial Amended	73	37 VAL	LEY ROA	D				)FC	1 9 201		Щ_			
DEP	Amendment #:_	City	, State, Z	ip Code							1				
DOL	Emergency			UNG, NJ	07060			1 6	7000 T	161.144.	Numbo	_			
☑ DOH	(including justification)	Nam	ne of Cor	ntact	10		1		Li	Telephon	e Number	<b>'</b>			
☐ DCA	Cancellation	<u> </u>	BROCK	DUTTON				of September 14 20							
	l <del>=</del>			FACIL	ITY INFORMA	ATION		And Street Co.	20-10			· 4 m · %			
Name of facility w	here abatement is	taking place	(3)						Тур	e of Facility (	4) I (K - 12)	)			
BROCK DUT	ron									Subch	apter 8 (C	Other tha	an K-1	2)	
Street Address	ION									Other (	Private/C	commer	cial		
									Sa	47,040000 <del>0</del> ,00000	Homes, e		Bld	g. Ag	e
737 VALLEY	ROAD	10.5	(6)			Coul	nty C	Code (7)	34	uale i coi	<i>II</i> 01 1 100				
City (5)		County	(6)			100000000000000000000000000000000000000		se only)	Cı	urrent Use (P	rior if beir	ng demo	lishe	i)	
WATCHUNG	7	MIDI	DLESE	X											
Name of Monitori	ng Firm Hired by B				ASCM No.		Nar	ne of Abatement	Contr	actor (9)					
								& S RESTOR	ATIC	ON, INC.					
Street Address							-	eet Address							
				I was a second	2, 6		37.87	20 California A					-		
City, State, Zip Co	de							, State, Zip Code							
						-		Paterson, NJ 0	7503		Hicens	e Numb	er	_	
Project Manager f	or Monitoring Firm		P	hone Numbe	er		Tele	ephone Number 973-345-8020	í			00159	·.		
							Nai	me of OSHA Mor							
Start Date (10)		Sched.	Complet	ion Date (11	)		25.000	D & S Restorat		Inc.					
12/28/11		01/06/	12				Str	eet Address							
Occupancy Status	During Abatemen	t (Check on	ly one)				.553	20 California A		e				_	
☐ Facility clos	ed/vacated during	entire period	d of abat	ement.			City	y, State, Zip Code	9						
	performed outside		acility hor	urs-		_		D : NI 0	7502						
Other-Desc	cribe: NORMAL H	IOURS				-	_	Paterson, NJ 0		Containment		o proce	ure	=	
	check all that apply									-enclosure	wriegan	ve press	uic		
$\ge 3$ sf or $>3$	lf 🛛	Renovation	1					×	Glov	ebag proced	ure				
≥160 sf or :	≥260 If	Demolition					•		Non	-Exempted (*	) and No	n-friable	Proc	E	Г
Location of	i	Is location	normall	y used solely				140		Amount		e	е	n	E n
asbestos-c	ontaining	by mainter staff(12)	nance/cl	ISTODIAI	Descrip material			estos-containing		(Specify	SF or	m o	p	c	C
material (a abated in f	cm) to be acility (13)	Yes	No	N/A	materia	I (ACIVI	,			LF)		v e	i	p	L
abates		100			PIPE INS	TIT A T	CION	<u> </u>		204 L FT		Ď	亡		
BASEMENT			$\square X$		PIPE INS	ULAI	IG F	PIPES & ELBC	ws	50 L FT & 24	ELBOWS			X	
BASEMENT			LX		BAKE HI	SATIF	101	Il ES & EEB C		30211					
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				4	<del> </del>		_								
		INIDE	P Haule	VEID# 1	Cubic Yards o	f Wast	e N	lame of Register	ed Lar	ndfill					
Registered Wast	e Hauler )RATION, INC.				3 YDS		_   .	TULLYTOWN	I, RE	SOURCE I	RECOV.	ERY			
City, State		==-1-=		Disposal I			T	City, State	NT D						
PATERSON,	NJ 07503			12/29/1				TULLYTOW	N, PA	1	Date	9			
Completed by (P	rint or Type)	Title	TIN ION		Signature						100000	16/11			
BOGDAN JO	)LDZIC	* Do not us	e this for	m for asbest	os licensure	exempt	ted a	ctivities.							

10369758

#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1) 14 DECEMBER 2011		-				ing Owner/Operator (2) HALT REFINING, LLC	TE	O E		15	
Agencies Notified  (X) EPA		Notification (X) Initial N			Street Address PAULSBORO	REFINERY, 4 PARADISI	7 1 2	FP 1	n ev	177	A second
() DEP (X) DOL (X) DOH		( ) Amende ( ) Cancelle	d Certificat	ion -	City, State, Zip PAULSBORO,		L		ed Live	711	
( ) DCA					Name of Conta		Tel. Nu	mber 5	CONTRO G	L &	
				FACILITY	INFORMATION	7 21				Table on westerning to	- Femous-market
Name of Facility Where At NUSTAR ASPHALT REFI	oatement is T NING, LLC -	aking Place (3 PAULSBORO	3)	1,10,0,1	Type of Facility ( ) School (K-			Albana		e vale.	or.
Street Address 4 PARADISE ROAD					(X) Other (i.e.	private & commercial bldg  A # of Floors_		es, etc.			
City (5) PAULSBORO	County (6) GLOUCEST	ER	County C (State Us		Bldg. Age ~						
Name of Monitoring Firm H N/A	Hired by Bldg	. Owner (8)	ASCM No N/A	0.	Name of Contr BRANDENBUI	actor (9) RG INDUSTRIAL SERVIO	CE COMI	PANY			
Street Address N/A					Street Address 2217 SPILLMA						
City, State, Zip Code N/A		6			City State, Zip BETHLEHEM,						
Project Manager for Monito N/A	oring Firm	Telephone N/A	Number		Telephone Nur (610) 691-1800	0	License 00721	Numbe	<u>er</u>		
Scheduled Start Date (10) 3 JANUARY 2012		Scheduled ( 27 JANUAR	Y 2012	Date (11)	Name of OSHA N/A	A Monitor					
Occupancy Status During ( ) Facility Closed/Vacated ( ) Abatement Performed	d During Entir Outside of No	e Period of Alormal Facility	batement Hours -		Street Address N/A	i					
( ) Describe - DEMOLITIO ( ) Other - Describe - WOR	ON OF ABANI RK HOURS, I	DONED TANK MON-FRI, 07:	(S AND PIF :00 - 15:30	PING	City, State, Zip N/A	Code					
Source of Work (Check all	that apply)			*		4					
(x) Demolition () Rend () Large Proj. (>160 SF of () Full Containment with	or >260 LF A0	CM) ( ) SM Pr	roj. (>25<16 Mini-Enclos	60 SF or >10	) <260 LF ACM) Glovebag Proce	( ) Minor Proj. (<25 S	F or <10	LF ACN	A)		
Location of Asbestos- Containing Material (ACM)	Is Loca	ation Normally by Maint./Cus	Used	Description thermal sys insulation,	n of ACM (i.e. stems	Amount (Specify SF or	LF)	Abater	ment Ty	<u>pe</u>	
Facility (13)	YES	NO	N/A		ner miscell.)			Rem.	Rep.	Encap	Enclose
NONE								1000000			
							1.113			_	
Name of Reg. Waste Haul N/A	er	NJDEP Was N/A	ste Hauler I	D#	Cubic Yards of N/A	Waste	Name o		_andfill		
City, State N/A					Disp. Date N/A		City, Sta N/A	<u>ite</u>			
Completed by (Print or Typ	pe)	<u>Title</u>			Signature	A 1	<u>Date</u>				
Jennifer Strobel		Contract Ad	ministrator		1 /100	ite	14 DEC	EMBER	k 2011		

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414 Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00

REMEMBER	R - MAIL IN HA	RD C	SP)	Str SATION Sugnt	ote of Ne HOP ASE MONJAC	ew Jerse BOTEST BIR 08:8	ру АВАТЕМІ 8 12:120)		icility (4) (K-12) (K-12) (Inc., private & commercial buildings. (Inc., private & commercial buildings. (Inc.) (In					
Date of Notification (1		- project 400	al area	Nama	of Buildin	ng Öwner/	Operator (	2)	Achrera					
Agoncios Notitied	Type Notification			Straet	Address			LINE		12	-			1
EPA DEP DOL	Inilial Amended Amendment #		_	City, 8	itate, Zip	Code				001		7	~~	
DOH DCA	Emergency (ir justification)  Cancellation	soluding		Name	of Conta	cl		MAINT	7			#		-
		-					ON 75 S	Topic Austria		1± .		<u>ارد.</u> لا ز	لا رايدو	1
YMCA Building Street Address 135 Madison Ave	re Abaloment is Takin	g Place	(3)		Н			School (K-1) Subchapter Other (Le., p	2) 5 (Other the rivate & con	n K-1 2) nmercial	buildi	ingā.		
City (5)								Square Feat	# of Flor	7ra	19586537	10 m	ge	
Elizabeth, NJ 072	VI		-,	Cour	ity Code ONLY)	(7) (STAT	re	Current Use (Pr		demolish	-			=
	Irm Hired by Building			ASCM	No.	Name	of Absterne	ent Contractor (9						
Stroot Address	nviommental Serv	ices in	c_	00100		Street	Address			40		====		
1913 Atlantic Ave						City, 51	ate, Zip Co	ode	Suite 2	18	==			3
Manasquan, NJ 0	CONTRACTOR OF THE PARTY OF THE		Tol	nhone	No.			/012	License	No.				=
Project Manager for h Jason Hooper			732	2-223-	2225	973-	389-008		1000		_			=
Start Date (10) 12/19/2011		duled C 23/20		ation Da	to (11)				Inc.					-
Occupancy Status Di	uring Abatement (Che	ck only	one)	ament.				Avenue. PM	B Suite 2	218_				•
Abstomont Performant Other - Describe:	mad Outside of Norma	i Facilit	y Hou	rs		City, 6	tate, Zip Ci	ode						-
Scope of Work (Chec >3 af or >3 if >180 af or >280 ii	k all that apply)		enoval lamo	lition			Mini-End	dosure g Procedure				bate	ment	_
Lecati Asbestos-Contoinin 10 8E A IN Fa	g Material (ACM) BATED	Usod Mai	ormali 1 80io ntanai ustodi staff?	ly Hy by nca/ Iol	Asbe (1-8	stos Cont , thermal surfac	systems li systems li sing, VAT,	erial (ACM) reulation, or	(Spec	ify	Rem		_	-
(1:		-	(12)	Т		othar n	nisocilaneo	us)			IBAG	air	ulate	
2nd floor		Yes	No	X X	Pipe/E	gowner/Operator (2) ster Union County  Ave.,  Code 07201  IVALVE ADPONED  IVALVE Appears  Code 07201  IVALVE ADPONED  IVALVE Appears  Code 07201  IVALVE Appears  IVALVE Appears  Code 07201  IVALVE Appears  Individual Number  Construction  Sequence Foot 20,000 SF 4  Courrent Use (Prior if being damolished)  YMCA  Name of Absternant Contractor (9) DIA General Construction, Inc.  Streat Address  City, State, Zip Code Ciliton, NJ 07012  Tolephone No 973-389-0089  Name of OSHA Monitor DIA General Construction, Inc.  Streat Address 1360 Ciliton, Avenue, PMB Suite 218  City, State, Zip Code Ciliton, NJ 07012  Tolephone No 973-389-0089  Name of OSHA Monitor DIA General Construction, Inc.  Streat Address 1360 Ciliton, Avenue, PMB Suite 218  City, State, Zip Code Ciliton, NJ 07012  Full Containment with Negative Preseura  Mini-Enclosure Covabug Procedure  Non-Exampted (*) and Non-Friable Procedure  Abatement Type  Couble Yards  Signatura  Cubic Yards  Minerva Landfill  Disposal Date 12/23/2011  Waynesburg, OH 44688  Signatura  Date 12/15/2011								
				-										1
				1	YMCA of Easter Union County  Street Address  FACILITY INFORMATION  Type of Pacility (4)  School (K-12)  Subchapter 8 (Other than K-1 2)  Subchapter 9 (Other than K-1									
Name of Registered Service Transpor				Hauler 1	D No.			Minerva L			-711			-
City State			=			Dispos	sal Dato	aspection  Aspecting						
New Castle, DE	1 116	in			-	.		1		Date		_		=

#### State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 12/15/2011 Glenwood Apartment & Country Club Agencies Notified Type Notification Street Address EPA X Initial 1655 US HWY 9 DEP Amended City, State, Zip Code X DOL Amendment # Old Bridge, NJ 08857 Emergency (including ⊠ DOH □ DCA justification) Name of Contact Cancellation Bernadette Poppel FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Apartments Bldg. School (K-12) Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private & commercial buildings, 48 Cottonwood Lane homes, etc.) City (5) Square Feet # of Floors Bldg. Age Old Bridge 2000 SF 60+ County (6) County Code (7) (STATE Current Use (Prior if being demolished) USE ONLY) Middlesex Apartments Bldg. Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9) (8) N/A DIA General Construction, Inc. Street Address Street Address 1360 Clifton, Avenue, PMB Suite 218 City, State, Zip Code City, State, Zip Code Clifton, NJ 07012 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-389-0089 00693 Start Date (10) Name of OSHA Monitor Scheduled Completion Date (11) DIA General Construction, Inc. 12/27/2011 12/28/2011 Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1360 Clifton, Avenue, PMB Suite 218 Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Clifton, NJ 07012 Scope of Work (Check all that apply) Full Containment with Negative Pressure >3 sf or >3 If X Renovation Mini-Enclosure >160 sf or >260 lf Govebag Procedure Demolition Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Normally Type Location of Used Solely by Description of Asbestos-Containing Material (ACM) Maintenance/ Asbestos Containing Material (ACM) Amount Encapsulate Custodial TO BE ABATED (i.e., thermal systems insulation, (Specify Enclosure Remova Repair staff? surfacing, VAT, or IN Facility SF or LF) (13)(12)other miscellaneous) Yes No N/A Crawl Space Pipe/Elbow Insulation 200 LF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. 20970 of Waste Service Transport Group Minerva Landfill Disposal Date City, State City, State 12/28/2011 Waynesburg, OH 44688 New Castle, DE

Completed By

Krutarth Jagad

Signature

12/15/2011

Title

President

Donect

Date of Notification (12/1	1) 6/2011				ne of Build	ing Owner/Operate	or (2)	DEC 19 20	İ	here	7	
Agencies Notified	Type Notifi	ication		Stre	et Addres	s n Avenue		PRESTOS CONTRO	11 &	1	-	_
DEP DOL	Amenda Amenda		_	City	, State, Zip			LIUTING. PH		, and 1		<u>!</u>
DOH   DCA	justifica Cancella	ation)	ig		ne of Conta			Telephone Nur	mber			
				F/	ACILITY IN	IFORMATION		4	_		5%	
Name of Facility When Former East Clinton	e Abatement is on Street Sho	Taking Plac opping Cer	e (3) iter				Type of Facilit					700
Street Address	0.							8 (Other than K-1 private & commerc		ildina	_	
15-29 East Clinton	Street						homes, etc	c.)	aai bu	naing	s,	
City (5) Newton							Square Feet 10000 SF	# of Floors	_   9	Bldg. 50+	Age	
County (6) Sussex				USI	unty Code E ONLY)	(7) (STATE	Vacant Build		ished	)		
Name of Monitoring Fin				ASCM	900RF		ment Contractor (	9)				
(8) J& S Environ	mental Service	ces	_	N/A Valiant Associates, LLC Street Address								
Street Address 2333 Rt 22 West						Street Address 145 Mill Stre						
City, State, Zip Code Union, NJ 07083						City, State, Zip (	NJ 07501					
	Project Manager for Monitoring Firm				No.	Telephone No.		License No.			-	
Sherry Gelsomino					-0063	973-553-53	74	01108				
Start Date (10) 1/03/2012		Scheduled 0 1/13/2012		etion D								
Occupancy Status Dur	ing Abatement	(Check only	one)	EUT/	Valiant Associates, LLC Street Address							_
Facility Closed/Vaca						145 Mill Stre						
Abatement Performe Other - Describe:	ed Outside of N	ormal Facilit	y Hou	rs		City, State, Zip C Paterson, N						
Scope of Work (Check  >3 sf or >3 lf  >160 sf or >260 lf	all that apply)		enovat emol			Mini-En Goveba	ag Procedure	gative Pressure	edure			
		No	ocatio	1				9.	1	Abate Ty		t
Location Asbestos-Containing I TO BE ABA IN Facili (13)	Material (ACM) TED	Mair Cu s	Solel ntenan ustodia staff? (12)	ce/		Description of tos Containing Mat thermal systems i surfacing, VAT, other miscellaned	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes No								_		e	
See Attached		N/A										
									-			
Name of Registered Wa	iste Hauler		I N	JDEP \		Cubic Yards	Name of Regis	stered Landfill				
Service Transport Group				auler ID	No.	of Waste	Minerva La		4			
City, State New Castle, DE						Disposal Date 1/13/2012	City, State Waynesburg	gh, OH			).	
Completed By Title						Signature	J	Date				_
Miodrag Stamenovio		Project M	anag	er		Triade	or Color	12/16/	2011			

#### State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 12/16/2011 Coremark Union, LLC Type Notification Agencies Notified Street Address 392 Main Street X Initial EPA DEP DOL Amended City, State, Zip Code Amendment #\_ ASBESTUS COM Wyckoff, NJ 07481 Emergency (including ☑ DOH justification) Name of Contact -- Telephone Number DCA Cancellation Daniela N. Sahade FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Former Townley Post Office School (K-12) Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private & commercial buildings, 1020 Salem Road homes, etc.) City (5) Square Feet # of Floors Bldg. Age 2000 SF Union 60+ County Code (7) (STATE Current Use (Prior if being demolished) County (6) USE ONLY) Vacant Building Union Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner ASCM No. Valiant Associates, LLC (8) N/A Street Address Street Address 145 Mill Street City, State, Zip Code City, State, Zip Code Paterson, NJ 07501 Project Manager for Monitoring Firm Telephone No. License No. Telephone No. 973-553-5374 01108 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor Valiant Associates, LLC 12/26/2011 12/30/2011 Occupancy Status During Abatement (Check only one) Street Address 145 Mill Street Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Paterson, NJ 07501 Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure 1>3 sf or >3 lf Renovation ∑≥160 sf or ≥260 lf Govebag Procedure Demolition Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Normally Type Used Solely by Description of Location of Asbestos-Containing Material (ACM) Maintenance/ Asbestos Containing Material (ACM) Amount Encapsulate Custodial (i.e., thermal systems insulation, (Specify TO BE ABATED Removal Repair staff? surfacing, VAT, or SF or LF) IN Facility (12)other miscellaneous) (13)N/A Yes No Red & Grey 9" X 9" Floor Tiles 1,400 SF Rear Section 1,775 SF Black Roofing Material Roof Name of Registered Landfill Cubic Yards Name of Registered Waste Hauler NJDEP Waste Hauler ID No. 20990 of Waste Service Transport Group Minerva Landfill Disposal Date City, State City, State 12/30/2011 Waynesburgh, OH New Castle, DE Signature Date Completed By Title

Miodrag Stamenovic

Project Manager

6/2011

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Howele

Date of Notification (1)  Apartices Notified (X) EPA (X) DEP (	D 1 - (11-1/51/ (1)					Name of Build	ina Oumar/Or		CE	1 1	/  5	1			
	Date of Notification (1)						ing Owner/OL	Defailor (2)	(U) 15	f) 17	1	41 111			
(X) EPA (X) DEP (X) DEP (X) DOH (X) DO	12/16/2011							ISIL							
Control   Cont			( ) Initial	Notification				ШШ	DEC 1	9 20	)11	B			
	(X) DEP (X) DOL	*	( ) Eme	ON HOLD) rgency (incl					ASBESTOS	CONTR	0L &	1			
Name of Facility Where Abatement is Taking Place (3)							act		Tel. Nu	mber			1		
Name of Facility Where Abatement is Taking Place (3)   1   1   1   1   1   1   1   1   1			1		EACH ITY II			the take			-		4		
School (K-12)	Name of Escility Where A	hatement is T	aking Place	(3)	FACILITY II		v (4)					-			
Square   Feet   1680  # of Floors	Burgess Pharmacy	Datement is 11	aking r lace	101		( ) School (K- ( ) Subchapte	12) r 8 (other than	n K-12)	ildinas ha	omes et	c				
County (5)   County (6)   County (6)   County (6)   County (60d (7)   Called Use Only)   Current Use (prior if being demolished)															
Name of Monitoring Firm Hired by Bidg. Owner (8)   ASCM No.   AS		County (6)		County	Code (7)	Square .Feet:	1680 # 01	Floors 1	Blag. A	age A	pprox 5	J+			
Street Address								lemolished)							
Street Address   NJ 00774		Hired by Bldg.	Owner (8)		No.	Name of Contr JVN RESTOR	ractor (9) ATION INC.								
8913 Riverside Drive						Street Address									
City   State   Zip Code   North Bergen, NJ 07047   Staten Island, New York 10309   Telephone Number   Tel	, <del>Marie 1122 - 1128</del>														
North Bergen, NJ 07047															
Project Manager for Monitoring Firm   Telephone Number   Telephone								309							
Denoits Rivera   718-213-1431   718-605-6256   NJ 00774								303	License	Numbe	<u>r</u> .				
Scheduled Start Date (10)						718-605-6256			NJ 007	74					
Occupancy Status During Abatement (Check only one) (X) Facility Closed/Vacated During Entire Period of Abatement () Abatement Performed Outside of Normal Facility Hours Other - Pescribe  Surce of Work (Check all that apply) (X) > 3 sf or > 3 lf (X) > 50 sf or ≥ 260 lf  Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Roof  Floor  Normally Yes No N/A  Roof  Floor  Name of Reg. Waste Hauler Express Waste LLC  NJ-B04  NJ-B04  Sitenet Address  8913 Riverside Drive City. State. Zip Code North Bergen, NJ 07047  Source of Work (Check all that apply) (1) Full Containment with Negative Pressure (1) Minl-Enclosure (2) Glovebag Procedure (3) Non-Exempted (4) and Non Friable Procedure (3) Non-Exempted (4) and Non Friable Procedure (4) Non-Exempted (4) and Non Friable Procedure (5) Non-Exempted (4) and Non Friable Procedure (6) Minl-Enclosure (7) Non-Exempted (4) and Non Friable Procedure (7) Non-Exempted (4) and Non Friable Procedure (8) Non-Exempted (4) and Non Friable Procedure (9) Non-Exempted (4) and Non Friable Procedure		1			on Date (11)	1.15 3.25 3.25									
( X) Facility Closed/Vacated During Entire Period of Abatement ( ) Abatement Performed Outside of Normal Facility Hours  Other - Describe  8913 Riverside Drive  City, State, Zip Code  North Bergen, NJ 07047   ( ) Full Containment with Negative Pressure	12/19/2011		1/31/201	2											
( ) Abatement Performed Outside of Normal Facility Hours Other - Describe    September   Distribution   City, State   Disp. Date   Dat	Occupancy Status During (X) Facility Closed Vacate	Abatement (C	Check only of	one) Abatemen	t										
Source of Work (Check all that apply)  (X) ≥3 sf or ≥ 3 lf (X) ≥160 sf or ≥260 lf  (X) ≥160 sf or ≥260 lf  (X) ≥160 sf or ≥260 lf  (X) ≥160 sf or ≥260 lf  (X) Renovation  (X	( ) Abatement Performed				•		ALEMAN AND AND AND AND AND AND AND AND AND A								
Source of Work (Check all that apply)  (X) ≥3 sf or ≥ 3 lf (X) ≥160 sf or ≥260 lf  (X) Renovation  (Nomally Secrety SF or LF)  (Non-Enclosure  (Anount (Specify SF or LF)  (Anount (Speci	Other - Describe					City, State, Zir	<u>Code</u>								
( ) Full Containment with Negative Pressure ( ) Mini-Enclosure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and Non Friable Procedure ( ) Mon-Exmpted ( X ) and N	/-					North Bergen, NJ 07047									
(X) ≥ 3 sf or ≥ 3 lf (X) ≥ 160 sf or ≥ 260 lf  (X) Renovation  (X) Amount (Specify SF or LF)  Abatement Type  Renovation  (X) Renovation  (X) Renovation  (X) Renovation  (X) Renovation  (X) Renovation  (X) Renovation  (X) Renovation  (X) Amount (Specify SF or LF)  About (Secify	Source of Work (Check al	I that apply)				( ) Full Co	ontainment wit	th Negative	Pressure						
Location of Asbestos-Containing Material (ACM) Normally Used Solely by Maintenance./ Custodial Staff? (12) Yes No N/A Perimeter Base Flashing 80 LF  Floor	(X) ≥3 sf or ≥ 3 lf (X) ≥160 sf or ≥ 260 lf					( ) Mini-Enclosure ( ) Glovebag Procedure									
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Roof  Roof  Roof  Rem. Rep. Encap Enclose  Suffrequency  Cuts Cuts Cartes of Waste  Suffrequency		Is Lo	cation	Description o		Amount (Sp	pecify SF or	LF)		ent Typ	<u>e</u>				
Roof  Roof  Name of Reg. Waste Hauler Express Waste LLC  City, State Newark, N.J.  Completed by (Print or Type)  John Tardy  Name of Perimeter Base Flashing  Staff? (12) Yes No N/A  Perimeter Base Flashing  80 LF  X  VAT  Goo SF  X  Cubic Yards of Waste  5  Cubic Yards of Waste  1/31/2012  Name of Reg. Landfill Cumberland County Landfill Cumberland County Landfill Cumberland County Landfill Completed by (Print or Type)  John Tardy  Senior Project Manager	Asbestos-Containing Mate		Used	Solely by	surfacing, VA					Rem	Ren I	Encan F	enclose		
Roof  Roof  X  Perimeter Base Flashing  80 LF  X  Floor  X  VAT  600 SF  X  Name of Reg. Waste Hauler Express Waste LLC  NJDEP Waste Hauler ID # NJ-804  City, State Newark, N.J.  Completed by (Print or Type)  John Tardy  Staff? (12) Yes No N/A  Perimeter Base Flashing  80 LF  X  Landfill Cubic Yards of Waste  5  Cubic Yards of Waste 1/31/2012  Disp. Date 1/31/2012  City, State Newburg, PA  Date 12/16/2011		2			miscell.)					rtom.	Trop.	ziioap c	21101030		
Roof  Roof  Roof  Name of Reg. Waste Hauler Express Waste LLC  Name of Reg. Waste Hauler Express Waste LLC  Name of Reg. Waste Hauler Express Waste LLC  Name of Reg. Waste Hauler ID # NJ-804  City, State  Newark, N.J.  Completed by (Print or Type)  John Tardy  Perimeter Base Flashing  80 LF  X    Name of Reg. Landfill   Cumberland County Landfill   Cumberland County Landfill   City, State   Newburg, PA    Disp. Date   1/31/2012   Newburg, PA   Date   12/16/2011			Sta	ff?											
Roof   X															
Name of Reg. Waste Hauler Express Waste LLC  Name of Reg. Waste Hauler ID # NJ-804  City, State  Newark, N.J.  Completed by (Print or Type)  John Tardy  Senior Project Manager  A VAT  600 SF  X    Mame of Reg. Landfill   Cumberland County Landfill	Roof			1	Perimeter Ba	se Flashing	80 LF			Х			Γ '		
Name of Reg. Waste Hauler Express Waste LLC  NJDEP Waste Hauler ID # Suppress Waste LLC  City, State  NJ-804  Disp. Date 1/31/2012  Newark, N.J.  Completed by (Print or Type)  John Tardy  Senior Project Manager  Disp. Date 1/31/2012  Name of Reg. Landfill Cumberland County Landfill  City, State Newburg, PA  Disp. Date 1/31/2012  Newburg, PA  12/16/2011	Floor				VAT		600 SF			Х					
Express Waste LLC  NJ-804  5  Cumberland County Landfill  City, State  Newark, N.J.  Completed by (Print or Type)  John Tardy  Senior Project Manager  Disp. Date  1/31/2012  Newburg, PA  Date  12/16/2011							-		-						
Newark, N.J.  Completed by (Print or Type)  John Tardy  Title  Senior Project Manager  Newburg, PA  Date  12/16/2011		Express Waste LLC NJ-804									ndfill				
Newark, N.J.  Completed by (Print or Type)  John Tardy  Senior Project Manager  Date  12/16/2011	City, State	City, State													
Completed by (Print or Type)  John Tardy  Senior Project Manager  Signature  Date  12/16/2011						Λ	1					tofill.			
Soliii raidy					Signature /	/	1	Date							
ASB-41 *Do not us this form for asbestos licensure exempted activities.	John Tardy Senior Project Manager				1 10 4	and		12/16/2	011						
	ASB-41	****	*Do not u	s this form t	for asbestos licer	estos licensure exempted activities.									

PaiD ? 200,00 M.O. # 19152823318 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/operator (2) 12/16/2011 NJ DOT North Region Headquarter DEC 1 0 2011 Type Notification Agencies Notified Street Address 200 Stierli Ct Initial **EPA** DEP Amended ASBESTUS CUNTROL & City, State, Zip Code Amendment # LICENSING Emergency (including Mt Arlington, NJ 07856 DOH DCA justification) Name of Contact Telephone Number Cancellation C/O Carl Perello **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Abandon gas station School (K-12) Subchapter 8 (Other than K-1 2) Street Address 図 Other (i.e., private & commercial buildings, 485 Rt 46 Parcel 93 homes, etc.) City (5) Square Feet # of Floors Blda, Age Little Falls 500 50 +County Code (7) (STATE USE ONLY Current Use (Prior If being demolished) County (6) former gas station Passaic Name of Monitoring Firm Hired by Building Owner Name of Abatement Contractor (9) ASCM No. (8) L. Robert Kimball & Associates Genesis Contracting Corp 00103 Street Address Street Address 411 Riverview Plaza 106 Gold St City, State, Zip Code City, State, Zip Code Trenton, NJ 08611 Green Brook, NJ 08812 Project Manager for Monitoring Firm Telephone No. License No. Telephone No. 609-989-5260 908-809-0315 01090 Robert Kowalczyk Start Date (10) Name of OSHA Monitor Scheduled Completion Date (11) Genesis Contracting Corp 01/13/12 12/26/11 Street Address Occupancy Status During Abatement (Check only one) 106 Gold St Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: schedule for demolition Green Brook, NJ 08812 Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure >3 sf or >3 lf Renovation Glovebag Procedure

Non-Exempted (\*) and Non-Friable Procedure >160 sf or >260 lf Demolition Abatement Is Location Normally Type Used Solely by Description of Location of Asbestos -Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ ncapsulate (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Remova Staff? SF or LF) surfacing, VAT, or IN Facility (12)other miscellaneous) (13)No N/A Yes 30 SF mastic associated w/cove base X Office X 20 SF X Exterior (around seams & grooves) caulking X 150 SF tar X Roof (attendant booth& canopy) X 50 SF shingles Exterior Roof (detached shed) X X

Name of Registered Landfill

Date

12/16/2011

G.R.O.W.S. Landfill

City, State Morrisville, PA

Victoria Burga

President

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

Title

NJDEP Waste

Hauler ID No.

Cubic Yards

Disposal Date

Signature

of Waste

TBD

Name of Registered Waste Hauler

Genesis Contracting Corp

City, State

Green Brook, NJ Completed By

#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1)						ding Owner/O			חח ו	2 -	7]
12/15/11	V15/11					ation	MEG	巨儿	W	C IT	111
T					17		111111111111111111111111111111111111111	L 13	<u> </u>	-11	111
Agencies Notified		Notification	Type		Street Address 100 Campus		IIST				
(X)EPA		(X) Initial N	otification		City, State, Z			0 1 0	2011	-#1	#
(X)DOL		( ) Amende		tion	City, State, Z	D Code	III MI DE	C 19	2011	Lacron	1
(X)DOH		( ) Cancelle			Florham Park	N I 07932				1	1
() DCA		( ) Canoon			Name of Con		TeLA	Lumbar			
( ) 56.1					Frank Piecho		1,				1
				EACH ITY IN	FORMATION	Cia		FIRENS	INU		
N	b = t = = = = t = :	Talda - Diana	(2)	PACILITY		to (4)	<u> </u>	-		areas to	
Name of Facility Where A BASF – Building No. 3 P		Taking Place	3)		Type of Facili	1	, and district and the con-	or the delicate of the latest	War War Statement	parent e	
BASE - Building No. 3 P	VAC building				( ) Subshapt	or 8 (other tha	n K-12)			4	aga da dento adistri
Ct t Address					(Y) Other (i.e.	nrivate & con	nmercial bldgs., hor	nes etc			
Street Address					(X) Other (i.e.	private a con	imercial blogs., nor	1103, 010.			
1 James Street				12	Sq. Feet 2	1920	# of Floors 2				
	County (6)		County C	Code (7)	1 04.1 001	1020				12.	
City (5) Belvidere	Hunterde	nn.	(State U		Bldg. Age 30	) +/-					
Belvidele	- Hunteru	) i i	Totale O.	Se Offig)			lemolished) Ware	ehouse			
Name of Manitoring Firm	Lirod by Pida	Owner (9)	ASCM N	•			Name of Contractor				
Name of Monitoring Firm	nired by Blag	. Owner (o)	00104	<u>0.</u>			NCM Demolition an		liation I	D.	
			00104				NOW Demondon an	u i terrice	nation, L		
Environmental Health Inve	estigations, In	C.									
Street Address	ress				Street Addres						
	Shore Trail				404 N. Berry Street						
655 West Shore Trail											
City, State, Zip Code	Zip Code				City State, ZipCode						
	107871				Brea, CA 92821						
Sparta, NJ 07871					<u> </u>						
Project Manager for Monit					Telephone Number License Number						
William S. Kerbel, CIH		973-79-564	9		484-480-8931 01066						
01 11 101 10 1 101		Cabadulad	2	D-4- (44)	Name of OSHA Monitor						
Scheduled Start Date (10) 1/3/2012	l .	Scheduled ( 2/10/2012	ompletion	Date (11)	Testor Tech						
1/3/2012		2/10/2012			Testor recir						
Occupancy Status During	Abatament (	hock only on	۵)		Street Addres	<u> </u>					
(X ) Facility Closed/Vacate	ad During Ent	ire Period of A	hatement		10 59 Jackso						
( ) Abatement Performed	Outside of N	omal Facility	Hours -		10 00 00000						
( )/toutomoner onomics	· Outoido oi i i	y			City, State, Zi	n Code	L.I.C. New York	. 11101			
Describe Vacant Bldg. To	Be Demolish	ed			City, State, 219 Code						
21,920 sf building to be d	emolished in	its entirety									- 1
Other - Describe			-								
Source of Work (Check al	I that apply)										
(X) Demolition () Ren				100 05 . 10 .	000154014	( ) Min De-	: /-DE CE10 I	E A CRA			
(X) Large Proj. (>160 SF				160 SF 0F > 10 <	260 LF ACM)		oj. (<25 SF or <10 L Friable Outdoor W				- 1
(X ) Full Containment with			Mini-Enc				pecify SF or LF)		nent Typ	20	
Location of Asbestos-		ation Normally		Description of thermal system		Amount (Sp	becity of the	Abatei	icit i y	<u> </u>	
Containing Material (ACM		by Maint./Cus	iodiai	surfacing, VAT		1					1
Facility (13)	Staff?		NA	307-198-10	, or other			Rem.	Rep.	Encap	Enclose
There is the first	YES	NO	NA	miscell.)		100.00		X			T
Throughout Interior	X			Pipe Fittings		100 ea		X			
Throughout Interior	X			Pipe Insulation		150 lf					
Throughout Interior	X		COLUMN TO THE STATE OF THE STAT	VAT & Mastic		920 sf		X			$\vdash$
SW Corner Interior& Exter				Transite Panel		800 sf		X			
Vessels Outside	Vessels Outside X Tar Paper					1300 sf & 4	u ea	X			
				Window & Doo	or Caulk	1600 lf		X		1,000	
1.17				Roof Flashin		600 sf		X			
Name of Reg. Waste Hauler NJDEP Waste Hauler ID #					Cubic Yards o	f Waste	Name	of Reg. I	andfill		
Service Transport Group A901 #20990 / SW2117				17	40			/a Enterp			
City, State							Disp. Date		ity, State		
SECTION AND AND AND AND AND AND AND AND AND AN						2	2/10/12	l v	/aynesb	urg, OH	
58 Pyles Lane – New Castle, DE					I 6:		15.4				
Completed by (Print or Ty	pe)	Title	-11-0	d:6	Signature	000	Date 12/15/	11			
Jon Monagan		Pr	oject Coor	dinator	A mar Dans	E. Mona	Man 12/15/	11			
Jon Monagan Project Coordinator					XIIICHILL	~,,IIIIII	Mun				

			1	
			*	DEGEIV
Notification of Demolitio	n or Renovation	(224)	<del></del>	
X. Description of Planned Dem Building will be demolished us	olition or Renovation	Work and Methods to I		DEC 19 201
		£	A WANTED TO A PARTY OF THE PART	ASBESTOS CONTROL LICENSING
XI. Description of Engineering Demolition or Renovation Site: Wet materials during cutting of hoists or lifts or use dust-tight for VAT and chemical removals	perations, use rotary chutes.Use glovebag	roof cutting instrument ging for pipe & fitting in	s, lower the sulations, f	materials to the ground using Full negative air containments
XII. Waste Transporter#1 Wast	e Management			
Address: 100 Ave. A				
City: Newark	County: Essex	MAN SECTION OF THE SE	State: NJ	Zip: 07114
Contact: Susan Rubinetti (Layton)			Telephone: 20	
Waste Transporter#2 Service	e Transport Group. In	nc.		
Address 58 Pyles Lane				
City New Castle	County New Castle		State DE	Zip 19720
Contact Tom Gaudet			Telephone 30	
XIII. Waste Disposal Site Mine	rva Enterprises		EPA Certificat	tion Number: PO104984
Address: 9000 Minerva Rd				
ity: Waynesburg	County: Stark		State: PA	Zip: 44688
ontact: Sara Pomera			Telephone: 33	30-866-3435
(IV. If the Demolition was Orde	red by a Government	Agency, Please Identify	the Agency	v Below:
lame		Title		
uthority				
ate of Order (MM/DD/YY)		Date Ordered to	Begin (MM/DD/	YY)
(V. For Emergency Renovation	ıs:			
NATE and HOUR of Emergency: (MM/DD/Y Description of SUDDEN, UNEXPECTED EV		(HH:MM)		
xplanation of how the Event caused unsa	ife conditions, or a serious d	disruption of industrial operatio	ns	
CVI. Description of Procedures riable Asbestos Material Becon Restrict work area and regulate, methods.	mes Crumbled, Pulve	rized or Reduced to Po	wder	
(VII. I Certify that an Individual, lite During the Demolition or Ro his Person will be Available for	enovation, and that E	vidence that the Requir	ed Training	has Been Accomplished by
Con athour M	lonoRou	(Signature of Owner/Operator)		(Date) 12/15/11
Will. I Certify that the Above Inf	Mrc O	(Signature of Owner (Owner)		(Date) 12/45/41
XXIII TO THE TOWN Y	Manau	(Signature of Owner/Operator)		(Date) 12/15/11

#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1) 12/15/11					Name of Build BASF Corpora	ation	Operator (2)	DFC	10	.71	1		
Agencies Notified  (X ) EPA (X ) DOL (X ) DOH ( ) DCA	*	Notification  (X) Initial No.  ( ) Amende.  ( ) Cancelle.	otification d Certificat	ion	Street Address 100 Campus I City, State, Zi Florham Park Name of Cont Frank Piechoe	Drive p Code , NJ 07932 act		ASBES	ICENSI	secretary.			
				FACILITY IN	FORMATION	ě					Charge ! water	Ber zone	
Name of Facility Where Aba BASF – Building No. 6 – Sol Street Address			(3)		Type of Facilit ( ) School (K- ( ) Subchapte (X) Other (i.e.	12) er 8 (other th		gs., home	es, etc.				
				-	Sq. Feet 57	·60	# of Floors	4					
Belvidere	County (6) Hunterdo		County C (State Us	se Only)	Bldg. Age 30 Current Use (	+/-	demolished)	Wareh		-			
Name of Monitoring Firm Hir			ASCM N 00104	<u>o.</u>			Name of Co NCM Demo			diation, L	Р		
Environmental Health Invest Street Address	igations, Inc	3.	<u> </u>		Street Address 404 N. Berry S								
655 West Shore Trail		Special and the second											
City, State, Zip Code					City State, Zip								
Sports N I 07871	ta, NJ 07871				Brea, CA 928	21							
					Telephone Nu	mber		License	Numb	er			
William S. Kerbel, CIH	ject Manager for Monitoring Firm Telephone Number				484-480-8931			01066					
Scheduled Start Date (10) 1/16/2012		Scheduled 0 2/24/2012	Completion	Date (11)	Name of OSHA Monitor Testor Tech								
Occupancy Status During At (X) Facility Closed/Vacated () Abatement Performed O	<b>During Enti</b>	re Period of A	Abatement		Street Address 10 59 Jackson								
( ) Abatement i enormed e	415166 61 11	.,,,a,, a.,,			City, State, Zip Code L.I.C. New York, 11101						William .		
Describe Vacant Bldg. To Be 4324 Sf vacant building to be	e Demolishe e demolishe	ed ed in its entire	ty.										
Other - Describe													
Source of Work (Check all the	at apply)												
(X) Demolition () Renova (X) Large Proj. (>160 SF or () Full Containment with No	>260 LF A	CM) ( )Small	Proj. (>25< Mini-Enclo	<160 SF or >10 <	<260 LF ACM) Glovebag Proced		Proj. (<25 SF n-Friable Outo			C			
Location of Asbestos-		tion Normally		Description of			Specify SF or	LF)	Abater	ment Typ	е		
Containing Material (ACM) in		by Maint./Cus		thermal system									
Facility (13)	Staff?	(12)		surfacing, VAT	r, or other				Rem.	Rep.	Encap E	Enclose	
O H. I dia- Dark	YES	NO	NA	miscell.) Transite Panel	le	150 sf			X				
South Loading Dock	X	-		Fittings & Pipe		178 lf			<del>^</del>				
Throughout Interior				Roofing	Lines	5500 sf			X				
	Action ( County					800 If			X				
				Fire Doors		12 ea			X				
Throughout X Fire Door				. 110 00013									
Name of Reg. Waste Hauler NJDEP Waste Hauler ID #					Cubic Yards o	f Waste		Name o					
Service Transport Group  A901 #20990 / SW2117				117	40			Minerva					
City, State						Disp. Date 2/24/2012			City, State Vaynesb				
58 Pyles Lane - New Castle					T 6:/			Deta					
Completed by (Print or Type) Jon Monagan  Title Project Coordinator				dinator	Signature	MP	Magau	<u>Date</u> 12/15/1	1				
					/		7						

Notification of Demolition or Renovation(continued)  X. Description of Planned Demolition or Renovation Work and Methods to be Use Building will be demolished using wet dust suppression methods with Mechani  XI. Description of Engineering Controls and Work Practices to be Used to Controls	201 80	ECEIVEI sarpeneds 9 2011
X. Description of Planned Demolition or Renovation Work and Methods to be Us Building will be demolished using wet dust suppression methods with Mechani  XI. Description of Engineering Controls and Work Practices to be Used to Contr	201 80	s & repareds 9 2011
X. Description of Planned Demolition or Renovation Work and Methods to be Us Building will be demolished using wet dust suppression methods with Mechani  XI. Description of Engineering Controls and Work Practices to be Used to Contr	201 80	s & methods 9 2011
	1	ASPESTOS CONTROL &
Demolition or Renovation Site:  Wet materials during cutting operations, use rotary roof cutting instruments, low hoists or lifts or use dust-tight chutes. Use glove bagging for pipe & fitting insula caulking, fire doors and Transite etc.	wer the n	naterials to the ground using
VIII Waste Tarrange and Waste Management	THE WATER COMPA	ACCORDER AND LONG TO THE STREET OF THE STREET
XII. Waste Transporter#1 Waste Management		
Address: 100 Ave. A		L
	te: NJ	Zip: 07114
Contact: Susan Rubinetti (Layton)	ephone: 201	-206-2258
Waste Transporter#2 Service Transport Group, Inc.		
Address 58 Pyles Lane		
City New Castle County New Castle State	te DE	Zip 19720
Contact Tom Gaudet Tele	phone 302	-778-5930
XIII. Waste Disposal Site Minerva Enterprises EPA	Certification	on Number: PO104984
Address: 9000 Minerva Rd		
City: Waynesburg County: Stark Stark	e: PA	Zip: 44688
Contact: Sara Pomera Tele	phone: 330	I-866-3435
XIV. If the Demolition was Ordered by a Government Agency, Please Identify the	Agency	Below:
Name Title		
Authority		
Date of Order (MM/DD/YY)  Date Ordered to Begi	n (MM/DD/Y	Υ)
XV. For Emergency Renovations:		
DATE and HOUR of Emergency: (MM/DD/YY) (HH:MM)		
Description of SUDDEN, UNEXPECTED EVENT  Explanation of how the Event caused unsafe conditions, or a serious disruption of industrial operations		
XVI. Description of Procedures to Be Followed in the Event that Unexpected Asb Friable Asbestos Material Becomes Crumbled, Pulverized or Reduced to Powder Restrict work area and regulate, wet material, notify appropriate regulatory agen methods.	•	
XVII. I Certify that an Individual, Trained in the Provisions of this Regulation (400 Site During the Demolition or Renovation, and that Evidence that the Required This Person will be Available for Inspection During Normal Business Hours (Required Signature of Owner/Operator)	raining h	as Been Accomplished by
XVIII/I Certify that the Above Information is Correct  Manual (Signature of Owner/Operator)		(Date) 12/15/11

#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1) 12/15/11			****		Name of Build BASF Corpora	ling Owner/G ation	Operator (2)	))[[	CE			m
Agencies Notified  (X ) EPA (X ) DOL (X ) DOH ( ) DCA	ti.	(X) Initial No ( ) Amende ( ) Cancelle	otification d Certificat		Street Addres 100 Campus I City, State, Zij Florham Park, Name of Cont Frank Piechoe	Drive p Code , NJ 07932 act	White contract the second seco			9 za	i	
				FACILITY IN	FORMATION			Section .				
Name of Facility Where Al BASF – Building No. 2 Ne			(3)		Type of Facilit ( ) School (K- ( ) Subchapte	12) er 8 (other th					·	
Street Address  1 James Street					(X) Other (i.e. Sq. Feet 70	-	mmercial bld of Floors#	- T. 18	es, etc.			
City (5) Belvidere	County (6) Hunterdo	on	County C (State Us		Bldg. Age _30 Current Use (p	) +/-	demolished)	Warel	nouse			
Name of Monitoring Firm			ASCM No 00104	<u>).</u>	1		Name of Co NCM Demo			diation, I	.P	
Environmental Health Inve	estigations, In	C.		<del>, , , , , , , , , , , , , , , , , , , </del>	Street Address			MICH CONTRACTOR				
Street Address					Street Address 404 N. Berry Street							
655 West Shore Trail City, State, Zip Code					City State, ZipCode							
					Brea, CA 92821							
Sparta, NJ 07871	oring Firm	Telephone I	Vumber		Telephone Number License Number						- (A)	
William S. Kerbel, CIH	ager for Monitoring Firm Telephone Number				484-480-8931 01066							
Scheduled Start Date (10) 1/9/2012		Scheduled ( 2/10/2012	Completion	Date (11)	Name of OSHA Monitor Testor Tech							
Occupancy Status During (X) Facility Closed/Vacate () Abatement Performed	ed During Ent	ire Period of A	Abatement	3 12	Street Address 10 59 Jackson Ave.							
Describe Vacant Bldg. To 70020 sf warehouse build	Be Demolishing to be dem	ed olished in its	entirety		City, State, Zip Code L.I.C. New York, 11101							
Other - Describe												
Source of Work (Check all	that apply)											
(X) Demolition () Reno (X) Large Proj. (>160 SF of () Full Containment with	or >260 LF AC	CM) ( )Small I	Proj. (>25< Mini-Enclos	160 SF or >10 <	260 LF ACM) ovebag Procedur		Proj. (<25 SF o Friable Outdo		ACM)			
Location of Asbestos- Containing Material (ACM) Facility (13)	Is Loca ) in Solely Staff?	ation Normally by Maint./Cus (12)	Used stodial	Description of thermal system surfacing, VA	ACM (i.e. ms insulation,		Specify SF or		Abater Rem.	ment Ty	<u>De</u> Encap	Enclose
5 (5)	YES	NO	NA NA	miscell.)		6500 sf			X	I TOD.	поар	
Roof Flashing	X			Roof Flashing		0500 81			^			
Name of Reg. Waste Hauler NJDEP Waste Hauler ID #					Cubic Yards of	f Waste		Name o				
Service Transport Group A901 #20990 / SW2117					40			Minerva				
City, State							Disp. Date 2/10/12			City, Stat Vaynesb		
58 Pyles Lane - New Castle, DE					T & ·			D-/				
Completed by (Print or Type) Jon Monagan  Title Project Coordinator				dinator	Signature	DMm	1002	<u>Date</u> 12/15/1	1			
		Killenan	CHIMI	merine 1	-							

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				m) ECFIW
Notification of Demoliti	THE RESIDENCE OF THE PERSON NAMED IN		. 1	I TI DEP 1 A TOLL
X. Description of Planned De Building will be demolished				& methods
Bullaling will be delitolished	using wet dust suppre	.551011 Incurous with meet	i	ASBESTUS CONTROL &
			į L.	LICENSING
			775	The state of the s
XI. Description of Engineerin	a Controls and Work	Practices to be Used to C	ontrol Emmis	ions of Asbestos at the
Demolition or Renovation Sit				
Wet materials during cutting	operations, use rotary	y roof cutting instruments	s, lower the m	aterials to the ground using
hoists or lifts or use dust-tig	ht chutes.			
XII. Waste Transporter#1 Wa	aste Management			
Address: 100 Ave. A				
City: Newark	County: Essex		State: NJ	Zip: 07114
Contact: Susan Rubinetti (Layton)	1	*	Telephone: 201-	
Waste Transporter#2 Ser	vice Transport Group	Inc.	decision to the same	
Address 58 Pyles Lane	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
City New Castle	County New Cas	stle	State DE	Zip 19720
Contact Tom Gaudet	Journ Jun Jun		Telephone 302-	
	nenta Enterorises		The second secon	Number: PO104984
XIII. Waste Disposal Site Min	nerva Linterprises		EFA Certification	Humber, PO104304
Address: 9000 Minerva Rd	County: Stark		State: PA	Zip: 44688
City: Waynesburg	County. Stark		Telephone: 330-	Li
Contact: Sara Pomera	1 11 0	-A A Disease Identife		
XIV. If the Demolition was Or	dered by a Governmen		ruie Agency i	seiow.
		Title		
Authority			Begin (MM/DD/XX	1
Authority Date of Order (MM/DD/YY)			Begin (MM/DD/Y)	)
Authority Date of Order (MM/DD/YY) XV. For Emergency Renovati		Date Ordered to	Begin (MM/DD/Y)	)
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati  DATE and HOUR of Emergency: (MM/D	DYY)		Begin (MM/DD/Y)	)
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati  DATE and HOUR of Emergency: (MM/D	DYY)	Date Ordered to	⊳ Begin (MM/DD/Y)	)
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati  DATE and HOUR of Emergency: (MM/D	DYY)	Date Ordered to	⊳ Begin (MM/DD/YY	)
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati  DATE and HOUR of Emergency: (MM/D	DYY)	Date Ordered to	⊳ Begin (ΜΜ/DD/Υ)	)
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati  DATE and HOUR of Emergency: (MM/D  Description of SUDDEN, UNEXPECTED	DOYY) D EVENT	Date Ordered to		)
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati  DATE and HOUR of Emergency: (MM/D  Description of SUDDEN, UNEXPECTED	DOYY) D EVENT	Date Ordered to		)
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati  DATE and HOUR of Emergency: (MM/D  Description of SUDDEN, UNEXPECTED	DOYY) D EVENT	Date Ordered to		)
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovation  DATE and HOUR of Emergency: (MM/D  Description of SUDDEN, UNEXPECTED  Explanation of how the Event caused units of the second of the	DOMY) DEVENT  unsafe conditions, or a seriou	Date Ordered to (HH:MM),	ns	
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati DATE and HOUR of Emergency: (MM/D Description of SUDDEN, UNEXPECTED  Explanation of how the Event caused of the superior of the Event Caused of the SUDDEN of the Event Caused of the E	DIVY) DEVENT  unsafe conditions, or a seriou es to Be Followed in the	Date Ordered to  (HH:MM), s disruption of industrial operation	ns Asbestos is l	ound, or that Previously Nor
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati DATE and HOUR of Emergency: (MM/D Description of SUDDEN, UNEXPECTED  Explanation of how the Event caused of the substitution of Procedure  XVI. Description of Procedure  Friable Asbestos Material Be	DEVENT  DEVENT  Unsafe conditions, or a seriou  es to Be Followed in the comes Crumbled, Puln	Date Ordered to  (HH:MM), s disruption of industrial operation of the Event that Unexpected verized or Reduced to Po	ns Asbestos is l	-ound, or that Previously Nor
Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati DATE and HOUR of Emergency: (MM/D Description of SUDDEN, UNEXPECTED  Explanation of how the Event caused of the substitution of Procedure  Friable Asbestos Material Berestrict work area and regular	DEVENT  DEVENT  Unsafe conditions, or a seriou  es to Be Followed in the comes Crumbled, Puln	Date Ordered to  (HH:MM), s disruption of industrial operation of the Event that Unexpected verized or Reduced to Po	ns Asbestos is l	-ound, or that Previously Nor
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Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovati DATE and HOUR of Emergency: (MM/D Description of SUDDEN, UNEXPECTED  Explanation of how the Event caused unit Explanation of how the Event caused unit Explanation of Procedure Friable Asbestos Material Ber Restrict work area and regular methods.  XVII. I Certify that an Individu	DIVY) DEVENT  Insafe conditions, or a seriouses to Be Followed in the comes Crumbled, Pulsate, wet material, notificate, Trained in the Province.	Date Ordered to  (HH:MM),  s disruption of industrial operation the Event that Unexpected verized or Reduced to Poly appropriate regulatory a	ns Asbestos is l wder agencies, com	ound, or that Previously Nor mence cleanup using wet 61, Subpart M) Will be On-
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Name Authority Date of Order (MM/DD/YY)  XV. For Emergency Renovation DATE and HOUR of Emergency: (MM/DD) Description of SUDDEN, UNEXPECTED  Explanation of how the Event caused of the second of the Event caused of the second o	es to Be Followed in the comes Crumbled, notificate, wet material, notificate, renovation, and that for Inspection During	Date Ordered to  (HH:MM),  s disruption of industrial operation the Event that Unexpected verized or Reduced to Poly y appropriate regulatory a visions of this Regulation Evidence that the Requir Normal Business Hours ( (Signature of Owner/Operator)	Asbestos is l wder agencies, com (40CFR, Part ed Training ha Required one (1) ye	Found, or that Previously Normence cleanup using wet  61, Subpart M) Will be Ones Been Accomplished by ar after promulgation).

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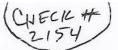
Date of Notification (1) 12/2/11	<del>-7</del>		T		Building 0			r (2)				11/	11.3			
Agencies Notified	Type Notification			Street Ad 31 Par	ddress k Street			ř		DE	3 19	2011	1			
EPA DEP X DOL	Amended Amendmen		_		te, Zip Coo air, NJ 0			77	-	ASBES	TOS GONI	ROL &				
□ DOH DCA	Emergency justification) Cancellation			Name of Gloria	The residence of the			Sec. Copyri	***		ephone N					
Name of Facility Where House	Abatement is Takir	ng Place (3)		FACIL	LITY INFO	RMATIC	ON	Туре	of Facility (					- 4		
Street Address 32 Parkway West								×	Subchapter Other (i.e. p	8 (Oth			ldings	, hom	es,	
City (5) Bloomfield								Squa N/A	are Feet	# o N/	f Floors A	10.00	Bldg. /	Age		
County (6) Essex				County C	ode (7) ISE ONLY)		_	Curr	ent Use (Pri	or if be	ng demol	ished)	劃			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	No.				atement Cor tement, In		(9)					
Street Address		. 4						Addre	ess gren Avei	nue						
City, State, Zip Code Project Manager for Monitoring Firm									Zip Code NJ 07512							
Project Manager for Monitoring Firm									lo. 3685		License #0067					
Start Date (10) Scheduled 12/13/11 12/14/11				Completion Date (11)  Name of OSHA Monitor  D&S Abatement, Inc.												
Occupancy Status During Facility Closed/Vac. Abatement Perform Other – Describe:	ated During Entire led Outside of Norr	Period of Ab	atem	nent			11 R City, S	State, Z	gren Aver Zip Code	nue						
Scope of Work (Check A	57051970-11-1		-	Totowa, NJ 07512							1					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova molit	E0255.11				∯ Mi GI	ill Containme ni-Enclosure ovebag Prod on-Exempted	e cedure				e e		
1		0.00,966	ocati	23/3/20									Abat	emen	t	
Location Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED	Used Main Custo	Normally sed Solely by laintenance/ stodial Staff? (12)  No N/A			os Conta thermal s	system ing, VA	Materia s insul T, or	ation,	(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure	
basement						pipe i	insula	tion		9	6 LF	Х				
Name of Registered Waste Hauler				JDEP Wa	2970/2020	Cubic Y			Name of	511-5 <del>5</del> 1111-51			.1	L		
D&S Abatement, Inc.				20996	10.	TBD			Waste I		gement	of PA				
City, State Totowa, NJ						Disposa TBD	al Date		City, State Tullytov		4		Å.	ecessis i e e e e e e e e e e e e e e e e		
Completed by Deanna Brkusanin  Title Project M				nager		Sig	griature	Milit	Relly	teer	Date					

120 90 108 976

1		•			J.00 ana 12.		3 P E		1.03			
Date of Notification (1) 12/2/11				Building ( ine Bun	Owner/Opera ce	or (2)	5 6 6	. 11 11 15				
Agencies Notified Type Notification    X   EPA   X   Initial			Street Ac 90 Mou		nony Road		DEC	1 9 1011	1			1
DEP Amended Amendment		_		te, Zip Co dsville,	de NJ 07924		ASRESTOS	CONTROL &			i e	
□ Emergency (     □ justification)     □ DCA     □ Cancellation	including		Name of Katheri	Contact ine Bun	се	L	Lici	Telephone Nui	nber	j		
			FACIL	ITY INFO	RMATION					963		
Name of Facility Where Abatement is Taking House  Street Address	g Place (3)				44		of Facility (4 School (K-12 Subchapter 8		2)			
90 Mount harmony Road						×	Other (i.e. pr etc.)	ivate & commerci	al build			es,
City (5) Bernardsville						Squa N/A	re Feet	# of Floors N/A		ldg. A /A	ge	
County (6) Morris			County C	ode (7) ISE ONLY)		Curre		r if being demolis	ned)			
Name of Monitoring Firm Hired by Building (N/A	Owner (8)		ASCM	No.	1 2 2 2 2 2		tement Cont ement, Inc		None			
Street Address		П			1000	eet Addre Rosen	ss gren Aven	ue				
City, State, Zip Code	. %					y, State, Z	ip Code IJ 07512					
Project Manager for Monitoring Firm		Telephor	ne No.	Tel	ephone N '3-345-8	0.	License N #00675	lo.				
Start Date (10) 12/15/11				d Completion Date (11) Name of OSHA Monitor								
Occupancy Status During Abatement (Chec	ALL AND AND AND AND AND AND AND AND AND AND					eet Addre						
Facility Closed/Vacated During Entire F	eriod of A	baten	nent				gren Aven	ue				
Abatement Performed Outside of Norm  Other – Describe: Occupied	al Facility	Hours			1,000,000	y, State, Z otowa, N	ip Code IJ 07512					
Scope of Work (Check All That Apply)						1						
≥3 sf or ≥3 if ≥160 sf or ≥260 if		enova emolit				× Mi	ni-Enclosure ovebag Proc	edure				
		100		ANNUA -		L No	n-Exempted	(*) and Non-Frial	ole Pro			
	- 20	Locat Iormal									ement rpe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	d Sole	ly by	Asbes (i.e.	thermal syst surfacing,	ontaining Material (Ad nal systems insulation facing, VAT, or miscellaneous)		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
crawl space	1.00	X			duct ins	ulation		100 SF	x			
associated with oil tank	X			pipe ins			3 LF	x				
Name of Registered Waste Hauler		100000	JDEP W		Cubic Yard	is	Name of F	Registered Landfil	1			
D&S Abatement, Inc.			lauler ID 20996	No.	of Waste TBD			Management o	f PA			
City, State Totowa, NJ					Disposal D TBD	ate	City, State Tullytow					
Completed by Title Deanna Brkusanin Project m			anager		Sign	Marie Olle	W B. W	11	ate 2/02/	11		

				OF ASBE				CK	华	33	5		_	2
Date of Notification (1)		TI	Name of	Building (	Ner/O	perator	(2)		A St. Winds	APPROV		•		
12-15-2011			Bella C	leaning	& Car	ting-	<b>2</b> ത		entari	Health &	Sepior S	ervice	2	
Agencies Notified Type Notific	ition	1	Street Ad 9 Prosi	dress pect Str	eet	0),1	3 6		1	=(signature	11 .	00 K	la	
DEP Intifal Amend	-d			e. Zip Co		M		Date	-12	54	me: I	-		
N DOL Amend	ment #	_		vood, N		b	DFO	19	2011					
[x] Emergi	ency (Including	-	Name of			11	1/11	, 13.		phone Nu	mber			-
DOH justifica     □ Cancel			Ben			1	95500 a 1200 a							
			FACIL	ITY INFO	RMATIC	NC		TUS CONT						
Name of Facility Where Abatement is		)			L.		Type o	Earlity (	4)		J .			
Commercial Property for Dem	0				1	LI.	□-s	chool (K-1	2)	digita promoner.	t pake			
Street Address					i etterne.			bchapter	8 (Oth	er than K-1 L commen	(2)	inas	homa	.0
62 Linden Street							1 544.0	mer(i.e., p c.}	mvale (	X COMPANIENT	NOI PARILU	ıı ıŅ⇒'	IIQIIIG	۵,
City (5)						aute in the	Square	Feet	# 01	Floors	8	dg. A	ge.	
Hackensack	-						3,000	\$F	1		5	0+		
County (6)			County C							ng demoks		-111		
Bergen			(SYATE U	se only)	2				ALC: AND PARTY OF	rty for D	emo			
Name of Monitoring Firm Hired by Buil	ding Owner (8)		ASCM	No.	7	Name	of Abate	ment Con	tractor	(9)				
n/a			n/a		1	Jada	ar Cont	racting,	LLC					
Street Address	***			-		Street	Address			-				-
n/a					22 1	Troy La	ne						-2:::2::2	
City, State, Zip Code					City, 5	State, Zip	Code	0 0 - N I - N I						
n/a						Linc	oln Pa	k. NJ O	7035					
Project Manager for Monitoring Firm		- [	Talephon	e No.	1	Telepi	hone No.			License			10 10 10 10 10 10 10 10 10 10 10 10 10 1	
n/a			n/a			973	-706-79	950		01088				
Start Date (10)	Schedule	ed Con	npletion D	ate (11)	1	Name	of OSH	A Monitor	X					
12/19/2011	12/28/	2011			1	Jada	ar Conf	racting.	LLC					
Occupancy Status During Abatement	Check Only Or	(e)				Street	Address							
Facility Closed/Vacated During E	nthe Period of A	Abaten	nent			22 1	Froy La	ne						
Abstament Performed Outside of	Normal Facility	Hours	•			100000000000000000000000000000000000000	State, Zip							
M Other - Describet Sam - 60m						Line		rk, NJ 0						
Scope of Work (Check All That Apply							= op	lease se	e aita	iched wo	orte prip	cedu	res	
☐ ≥3 sf or ≥3 1/	The state of the s	Renova	ot mile the least of the			[				n Negative	Pressu	re		
≥160 af or ≥260 lf	X I	Jemoli	tion			1		Enclosur rebag Pro						
2000001							Non	Exemple	d (T) ar	d Non-Fri	able Pro	cedur	e	
	1.	Locat	ion										emen	L
Location of		Norma	lly		De	scriptio	n of				-	1	rpe T	1
Asbestos-Containing Material (AC		ed Sole		Asbes	toe Cont	alning	Material	(ACM)		incomit Comme	711		g	m
TO BE ABATED	The second secon	todial	SECTION SECTION 1	(r.e.	inermal surfa	cing. V	ns Incula AT. or	uon,		Specify For LF)	Remova	Repair	P P	Enclosure
In Facility (13)		(12)					(audeni			v - 0.00 (5-0.00 A	E No	1	Encapsulate	15
	Yes	No	N/A										9	
		-	+	-	'n ha d	lenos.	ed of a				1			
Entire Building		-	1						-		+	-	-	$\vdash$
AND AND AND AND AND AND AND AND AND AND				asbe	stos co	nisini	ing mat	enals			-	_	_	<u></u>
					111-2-9									
Name of Registered Waste Hauler		1 1	NJDEP W	laste	Cubic	Yarde		Name of	Regist	ered Land	16H		1	1
		1,113	Hauler ID		of Wa	12/0		IESI						
Yannuzzi & Sons		_   1	17497		TBD								-	
City, State				30		sal Dat	8	City, Sta		Da				
Hillsborough, NJ					TBD			Bethle	nem.		D-1			
Completed by	Title				1	gnatu	re A. v	D	•	0-	Date 12-15	201	1	
Lillie Lazarevich	Sec	retary	1		I a	UN	cien	4200	(LADA	1	127	ZV I	'	

the ck					BESTOS AB 8:60 and 1:		Stages				416	36	
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Date of Notification (1)	2011				Owner/Ope	rator (2)	KI	Promoteurs unit d'arrandire, array					
December 15, Agencies Notified Type Not				Ily Const	truction		1111 55		11	44			
Agencies Notified Type Not	tillCation				Courth	- [1	JUJ DE(	2 1 9 2011	/ 1.	4] [			
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Ninemail .	ification) ncellation			ad Khan		11. 74	TO WARE COMME	20 373 SAN SAN SAN SAN SAN SAN SAN SAN SAN SAN	10.11001				
					ORMATION	1,	· · · · · · · · · · · · · · · · · · ·			-	Ť		
Name of Facility Where Abatement	t is Taking Place (3	3)					pe of Facility (4	)		*********			
Baltusrol Golf Club							School (K-12	?)					
Street Address								Other than K					
201 Shunpike Rd							etc.)	ivate & comme	ercial buil	aings	, hom	es,	
City (5)						Sq	uare Feet	# of Floors		Bldg.	Age		
Somerset, NJ													
County (6)				Code (7)		Cu	rrent Use (Prior	r if being demo	lished)				
Somerset			(STATE	USE ONLY	/	-		golf clu	b				
Name of Monitoring Firm Hired by	Building Owner (8)		ASCI	M No.	N	ame of A	batement Cont	ractor (9)					
AET			0021		Th	ne MAC	K Group, LL	.C					
Street Address			Para (Ali)		S	treet Add	ress						
907 Doolittle Drive					15	00 King	0 Kings HWY N, STE 209						
City, State, Zip Code				C	ity, State	, Zip Code				de delico			
Bridgewater, NJ 08807							II, NJ 08034			0			
Project Manager for Monitoring Fire	m		Telepho		1000	elephone		License	e No.				
Eric Houseknecht				18-1108		,	- 5000	00781					
Start Date (10)	Schedul	ed Co		Date (11)			SHA Monitor						
1/3/12			1/24/1	2	-		K Group, LL	.C.					
Occupancy Status During Abateme	ent (Check Only Or	ne)			2070	treet Add							
Facility Closed/Vacated Durin Abatement Performed Outside	g Entire Period of	Abate	ement				gs HWY N, S	STE 209					
Other - Describe:	e of Normal Facility	Hou	15		10000		, Zip Code						
Scope of Work (Check All That App	oly)				CI	епу п	II, NJ 08034						
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demoi	ration lition				Full Containmer Mini-Enclosure	nt with Negativ	e Pressu	re			
							Glovebag Proce						
							Non-Exempted (	") and Non-Fria	ble Proce	Services reprint the	emen	+	
		Loca Norma									ype	•	
Location of Asbestos-Containing Material (	Hes		lely by	Achor	Descri stos Contain	ption of	rial (ACM)	Amount			T	T	
TO BE ABATED	Ma		ance/		thermal sys			(Specify	고	-	Enc	g	
In Facility	Cus	(12	Staff?		surfacing			SF or LF)	Remova	Repair	aps	Enclosure	
(13)				-	other misc	cenaneou	5)		ova	<u>a</u> .	Encapsulate	ure	
	Yes	No	N/A			16					(D		
Attic	X				trar	nsite		6900 s/f	$\times$				
_"_	X			contam	ninated fib	erglass	insulation	5250 s/f	X				
_"_				1		pe		600 l/f	X	1			
		V	/	1				45 l/f	$-\langle \rangle$	+-		<del> </del>	
3rd floor  Name of Registered Waste Hauler		$\Box$	NJ DEP \		Cubic Yai	pe	Name of R	egistered Land	Ifill			L	
Name of Registered Waste Hauter		7.7	Hauler IE		of Waste		Traine of the	egioterea Lario					
Freehold / American Waste			159	939		28	The second of the second of	/ Minerva Er	nterpris	es			
City, State					Disposal		City, State						
Freehold, NJ / Warren OH					100000		Morrisville	e, PA / Wayı		g, Ol	1	-	
Completed by Title				1/24/12 Morrisville, PA / Waynesburg, OH Signature Date									
Mike Cooper	Presid	dent			1			1	2/15/1	1			



#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 15/11 GARTINTECH Type Notification Street Address Agencies Notified 200r 200b 200b 200b 200b Inital: 155 ASBESTOS CONTROL & Amended City, State, Zip Code LICENSING Amendment # GREEN FIELD Emergency (including □ 2004 justification) Telephone Number Name of Contact Cancellation RUCE SMEUNIC FACILITY INFORMATION Type of Facility (4) \*.ame of Facility Where Abatement is Taking Place (3) RESIDENCE School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings homes, etc.) # of Ficors Square Feet County Code (7) (STATE Current Use (Prior if being demolished) VACANT USE ONLY) Name of Abatement Contractor (9) ume of Monitoring Firm Hired by Building Owner ASCM No. LEMOD INC Street Address Street Address 3695, SPRUCE DUE City, State, Zip Code it. State, Zip Code SHADE Project Manager for Monitoring Firm Telephone No. 856-779-0472 Name of OSHA Monitor Scheduled Completion Date (11) J'an Date and JOSEPH 1/10/12 Street Address Decupancy Status During Abatement (Check only one) 369 Facility Closed Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code \_\_ Other - Describe Lope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Renovation Glovebag Procedure Demolition Non-Exempted (\*) and Non-Friable Procedure Auatemat Is Location AX. Normally Description of Used Solely by Location of Amoun! Asbestos Containing Material (ACM) Maintenance/ Asbestos-Containing Material (ACM) (Specify (i.e., thermal systems insulation, Custodial Repair TO BE ABATED surfacing, VAT, or other miscellaneous) SF OX LF) Staff? IN Facility (12)Yes NIA X RANSITE SIDING Name of Registered Landfill Cubic Yards NUDEP Waste e ut Registeren Waste Hauler 17904 of Waste Disposal Date MADE, NIJ. Signature

2327

Date of Notification (1) 12/15/11					wner/Ope			**				
	Notification nitial	100	Street Add 55 Nimr				U U DE	C 19 2011	lance of the lance	7		
DEP A	Amended Amendment #		City, State Salem N			organical con-	ASE	ESTOS CONTROL	&-'			,
⊠ DOH j	Emergency (including ustification) Cancellation		Name of 0 Pat			and production	- Committee and the second	Telephone Nu			.+5.	ş £
Name of Facility Where Abatem		)	FACIL	ITY INFO	RMATION	I I	ype of Facility (4	()	Alley out it is		2	
Patricia Anderson / Resident Street Address	lence					— F	School (K-1: Subchapter	8 (Other than K-1	2)			
55 Nimrod St						×	Other (i.e. p etc.)	rivate & commerc			10.01	3,
City (5) Salem NJ 08079					X	1	quare Feet 000 +	# of Floors 2	35	dg. Aq	ge 	
County (6) Salem			County C (STATE U			_   0	urrent Use (Prid	or if being demolis	hed)		FESSION V	
Name of Monitoring Firm Hired N/A	by Building Owner (8)		ASCM	No.		Name of Pernac	Abatement Con	tractor (9)				
Street Address			1		- Table 1	Street Ad PO Bo						
City, State, Zip Code				1.			e, Zip Code Berlin NJ 080	91				
Project Manager for Monitoring	Firm		Telephon	e No.	11	Telephor 856-75	ne No. 33-9800	License 00727	No.			
Start Date (10) 12/27/11	Schedule		npletion D	ate (11)		Name of Pernac	OSHA Monitor					
Occupancy Status During Abate	ement (Check Only Or	ne)			1.22	Street Ad			***			
Facility Closed/Vacated Do Abatement Performed Out Other – Describe: Home C	tside of Normal Facility	Abaten Hours	nent s		100		x 329 te, Zip Code 3erlin NJ 080	101				
Scope of Work (Check All That						west	Senin NJ 060		7-12			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renova Demoli		•		×	Mini-Enclosur Glovebag Pro				e	
		Locat	tion				Non Exemple	G ( / G. 10 ) ( 10 )		Abate	ement rpe	
Location of Asbestos-Containing Mater TO BE ABATED In Facility (13)	ial (ACM) Use Ma Cus	Norma ed Sole intena	ely by ance/ Staff?		tos Conta thermal s surfaci		terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Pagament	Yes	INO	X		nine i	nsulati	on	180 lf	x			$\vdash$
Basement			+^		- Pipo i	Houlda						
						7			-		-	-
Name of Registered Waste Ha	uler		NJDEP W	/aste	Cubic Y		Name of	Registered Land	fill			J.,
United Containers	1		Hauler ID 22459	No.	of Wast	te	G.R.O	.W.S.				
City, State Elm NJ	-				Disposi 12/30/	al Date	City, Sta Morris	<sub>ite</sub> ville PA 19067		1		
Completed by Anthony T Perna	Title Pres	ident	t		Si	gnature			Date 12/15/	11		

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)				)/1 	Mon	a of Duild		· · ·	1 K 02		C01			12
9/	30 /	11			Pr	inceton	Uni	owner/Operator versity-Office	of Design and	Construction	n	ŧ		
Agencies Notified ☐ EPA ☑ DOLWD	Type Notifi  ☑ Initial  ☑ Amende	ed			20	et Address 0 Elm D State, Zip	r							
□ DHSS   □   □   □   □   □   □   □   □   □	Amendr					inceton,		2 44 6	DEC 19	9 2011 11	III			
☐ DCA (NJAC 5:23-8)	☐ Emerge justifica	ency (in	cludin	g		e of Conta		00044	<del></del>	The state of the s	1			
(110710 0.20 0)	Cancella					bert Ort		1 '	ASBESTOS GOI	Telephone N	umger			
								- Common of the	LIFT	Cher a	+			
Name of Facility Where A	Ahatement ie	Taking	- Dlace	2 (2)		CILITY	INFC	DRMATION	-					
Princeton Universit			Flace	3 (3)				State make it had	Type of Facility	(4)	9			
Street Address	ty- oauwiii	Hall		_					School (K-12	2) 8 (Other than K	-12). 🧳			
Washington Rd		V <sub>0</sub>							Other (i.e., p	rivate and comr	nercial b	uildir	igs,	
City (5)									Square Feet	# of Floors	E	Bldg. /	Age	
Princeton														
County (6) MERCER				5	Cou	nty Code	(7)(S	TATE USE ONLY)	Current Use (Pr	ior if being dem	olished)			
Name of Monitoring Firm	Hired by Bui	ilding C	wner	(8)	ASCM	No.	N	ame of Abateme	ent Contractor (9)			-	-	
ATC Associates Inc	:							BRISTOL EN	VIRONMENTA	L, INC.				
Street Address					1		S	treet Address						-
Bromley Corporate	Center-Th	ree Te	erri La	ane				1123 BEAVE	R STREET					
City, State, Zip Code	THE PERSON NAMED IN						С	ity, State, Zip Co	ode	4.37				
Burlington, NJ 0801								BRISTOL, PA	19007					
Project Manager for Moni	toring Firm		2000	Te	elephone	No.	Te	elephone No.		License No.				
Michael Keehn					609-386	0088-8		215-788-6040	1	00509				
Start Date (10)					oletion Da			ame of OSHA M BRISTOL EN	lonitor VIRONMENTAI	L, INC.	20720			
Occupancy Status During	Abatement (	(Check	only o	one)			St	reet Address						
☐ Facility Closed/Vacate	d During Ent	ire Per	iod of	Abat	tement		1	1123 BEAVER	R STREET					
Abatement Performed Time of Abatement: 7:							Ci	ty, State, Zip Co	ode					
Scope of Work (Check all	that apply)									-				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			⊠ Re □ De					☐ Mini-Encl		18	dure			
			Is	Loc	ation	F -	-	Z HON ZACI	inpice ( ) and No	1-1 Habie 1 Tocat		atom	ent T	ima
Location of Asbestos-Containing Massestos-Containing Massestos-Containing Massestos Asbestos	Material (ACM TED	Л)	Use Mai	d So	nally blely by nance/ Il Staff?		e., th	Description of Containing Matermal systems is surfacing, VAT, ther miscellaneous	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
3 <sup>rd</sup> Floor	-		Yes	No									6	
						ACM W	rind	ow frame cau	IIK & glazing	6,527 LF			Ш	
Metal Shop A-Level R	oom A-12					ACM C	aulk			150 SF				
Name of Registered Waste SERVICE TRANSPO		INC		11.00	NJDEP \ Hauler II	No.	10/3886	bic Yards of aste	Name of Regist G.R.O.W.S.	ered Landfill	DFILL			
City, State NEW CASTLE DE 19					20990		Dis	posal Date	City, State	LE, PA 1906				
Completed By (Print or Typ	oe)	Title						Signature			Date /	- 1		
Brian Scafiro	,	ATT. POST PERSON	timat	or				Brian &	Cafire		12/13	3/11		

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) (1 # 2192

Date of Notification (1)				Nam	e of Build	ing Owner	/Operator	(2)	JR I U	1 10			
9 / _	30 /	11						of Design and	Construction	n			
Agencies Notified	Type Notificati	on		Stree	et Address			3		7.6			
☐ EPA	☑ Initial			20	0 Elm Di	r		300					
□ DOLWD					State, Zip	Carrier Mary Co.	111 11	DEC 19				_	
☑ DHSS	Amendmen					NJ 0854	DE	DEO 1 4					
DCA	☐ Emergency		3			N				-			
(NJAC 5:23-8)	justification  Cancellatio	-		100000000000000000000000000000000000000	e of Conta		1	Accellus Ern Dicksom	Telephone N	umber			
				FA		NFORM	ATION	Land in the second	3				
Name of Facility Where A			(3)			i in		Type of Facility	(6.0)	Age and profile			-
Princeton Universit	y- Jadwin Ha	11						School (K-1					
Street Address								Subchapter	8 (Other than K	-12)			
Washington Rd								homes, etc.	orivate and comr	nerciai b	ulioin	gs,	
City (5)								Square Feet	# of Floors	B	ldg. A	ne	
Princeton		30						1	6. 1 166.6		iug. /	ige	
County (6)				Cou	nty Code	(7)(STATE L	ISE ONLY	Current Use /P	rior if being dem	aliahad\			
MERCER					, 0000	(, )(0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	OL ONE I)	Current ose (F	nor it being dem	olisnea)			
Name of Monitoring Firm I	lired by Buildin	g Owner	8)	ASCM	No.	Name o	of Abatem	ent Contractor (9			-		
ATC Associates Inc	d.	=		PACKET SOMETH				VIRONMENTA					
Street Address			ne n				Address	*				-	-
Bromley Corporate	Center-Three	Terri La	ne			1123	BEAVE	R STREET					
City, State, Zip Code						City, St	ate, Zip C	ode					
Burlington, NJ 08010	The second secon					BRIS	STOL, PA	19007					
Project Manager for Monito	oring Firm		Te	lephone	No.	Telepho	one No.		License No.				
Michael Keehn			1	609-386		215-	788-6040	)	00509				
Start Date (10)		eduled C					of OSHA N				8.5-6.5		
10 /10 / _		12 /	1000	<u>so</u> / .	_11_	BRIS	TOL EN	VIRONMENTA	L, INC.				
Occupancy Status During	135	- 5				Street A							
☐ Facility Closed/Vacated ☐ Abatement Performed 0					ariba			RSTREET					
Time of Abatement: 7:0					cribe	1	ate, Zip Co						
Scope of Work (Check all t	hat apply)					BKIS	TOL, PA	19007		112			
				900			Full Cont	ainment with Neg	ative Pressure				
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>		⊠ Rei					Mini-Encl	losure	•				
☑ 2100 St 01 2200 II			HOIL	1011			Non-Exer	Procedure mpted (*) and No	n-Friable Proced	dure			
		100000		ation							atem	ent T	vne
Location of			om	ally lely by			scription of			-	_	_	-
Asbestos-Containing Ma				ance/	Asbe	stos Cont	aining Mat	terial (ACM)	Amount	en	Repair	8	8
TO BE ABATI	<u>= U</u>			Staff?	(1.6		systems i cing, VAT,	nsulation,	(Specify	Remova	a-	aps	Enclosure
(13)			(12	_			niscellane		SF or LF)	<u> </u>		Encapsulate	re
		Yes	No									· O	
3 <sup>rd</sup> Floor					ACM W	indow fr	ame cau	ılk & glazing	6,527 LF				
Metal Shop A-Level Ro	om A-12		$\boxtimes$		ACM C	aulk			150 SF	$\boxtimes$			
									322	П	П	$\overline{\Box}$	
Name of Registered Waste	Hauler			VJDEP V		Cubic Ya	ards of	Name of Regis	tered Landfill				
SERVICE TRANSPOR	T GROUP IN	С	1	dauler ID		Waste			NORTH LAN	DFILL			1
City, State				20990		Disposal	Date	City, State					
NEW CASTLE DE 197	20					Disposal	Date		LE, PA 19067	7			
Completed By (Print or Type		le	-			Sico	ature	III OI (I (I O VII					
Brian Scafiro	20 Au	e Estimato			130		pature	Pr		Date			
Dilaii Guaiii G			••				rian	Scofero	17				

Date of Notification (1)				Nar	ne of Build	dina O	wner/Operator	(2)	1 1	AND A SECURE		•	*	
9 / 3	30 / 1	1		P	rinceton	Univ	ersity-Office	of Design an	d Constructi	on 🕞	No.	ne.		
1 —	ype Notificatio	n	SI I	Stre	et Addres	S		K	oc IV	13			N.	
	Amended			City	, State, Zip		e.	THE DE	P 10 200	9.1	11	111	31	
□ DHSS	Amendment			1	rinceton,			I I DE	C 19 201	1	Toy	71		
DCA (NJAC 5:23-8)	<ul><li>Emergency ( justification)</li></ul>	incluair	ig		ne of Cont			l beneven	Telephone	Numba		-	Į.	
10	Cancellation			R	obert Or	tega		ASBE.	STOS CA	dullipe	•		1	
	-						RMATION	M. S. California	LIGH			-	ģ	
Name of Facility Where Aba	tement is Taki	ng Plac	e (3)				TON TON	Type of Facility	/ (4)	de la compa			+	
Princeton University-	Jadwin Hall							School (K-1		Sec. 18. 3		repertury sequences	- 16 22	
Street Address	110000		part of the same		11-30 - 1860 - 1860 - 1860 - 1860 - 1860 - 1860 - 1860 - 1860 - 1860 - 1860 - 1860 - 1860 - 1860 - 1860 - 1860	- 10		☐ Subchapter	8 (Other than I	K-12)				
Washington Rd								homes, etc.	private and con	nmercia	al bu	iildin	gs,	
City (5)								Square Feet	# of Floors		Ві	dg. A	oe	
Princeton									000000000000000000000000000000000000000			3	3-	
County (6) MERCER				Co	unty Code	(7)(ST	ATE USE ONLY)	Current Use (P	rior if being der	nolishe	d)			
Name of Monitoring Firm Hir	ad by Duildina	0	(0)	1400	4.53	1								
ATC Associates Inc	ed by Building	Owner	(8)	ASC	VI No.			ent Contractor (9	•					
Street Address						_		VIRONMENTA	AL, INC.					
Bromley Corporate Ce	ntor Three	Formi I					reet Address							
City, State, Zip Code	inter-timee	em L	ane				1123 BEAVE							
Burlington, NJ 08016						1	ty, State, Zip Co							
Project Manager for Monitoria	na Firm		Tre	elephone	. No		BRISTOL, PA	19007						
Michael Keehn	ng i min		1		6-8800	1	lephone No. 215-788-6040		License No	).				
Start Date (10)	Scho	dulad C			ate (11)				00509					
10 / 10 / 1	101				11		me of OSHA M	ionitor VIRONMENTA	LINC					
Occupancy Status During Ab	atement (Chec							AIKOMMEMIA	L, INC.					
☐ Facility Closed/Vacated D				ement		-	reet Address 1123 BEAVER	CTREET						
					scribe		y, State, Zip Co							
Time of Abatement: 7:00/						1	BRISTOL, PA							
Scope of Work (Check all tha	t apply)	-Ennistrative					П г.:: 0	-11 24 11		-				- COST
≥3 sf or ≥3 lf		⊠ Re	nova	tion			☐ Mini-Encl	ainment with Negosure	gative Pressure	:				
≥ 160 sf or ≥260 lf		☐ De	moli	tion			☐ Glovebag	Procedure						
		T Is	Loc	ation	1		⊠ Non-Exer	npted (*) and No	n-Friable Proce					
Location of		5.5	lorm	360005722			Description of			L	Aba	tem	ent T	ype
Asbestos-Containing Mate				lely by	Asb	estos	Containing Mat	erial (ACM)	Amount		Re	Re	En	Enclosure
TO BE ABATED IN Facility	)	- LINE OF THE R.		ance/ I Staff?	(i.e		ermal systems i		(Specify		Remova	Repair	caps	clos
(13)	3. 1		(12	)			surfacing, VAT, her miscellaned		SF or LF)	1	<u>a</u>		Encapsulate	ure
		Yes	No	_									ē	
3 <sup>rd</sup> Floor					ACM W	Vindo	ow frame cau	lk & glazing	6,527 LF	0	<b>3</b>			
										Ε	][			
										Г	7	П	П	
Name of Registered Waste Ha	auler		T	NJDEP	Waste	Cub	oic Yards of	Name of Regis	tered Landfill				_	
SERVICE TRANSPORT			1	Hauler II		Was			NORTH LA	NDFIL	L			
City, State				20990		Disr	posal Date	City, State			75.5 			
NEW CASTLE DE 19720	)					,			LLE, PA 1906	37				
Completed By (Print or Type)	Title					1	Signature				W.			
Brian Scafiro	1 1	stimat	or				Brian	Scafino	23	Date 11/2	23	/11		
D 44										_/				

ASB-41 MAY 11 B 5/1096 - B State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT E C E W E D

Date of Notification (1	30	_ / _		_		Name of Build	ding Owner/Opera	10r (2) (5)	and Crossil. S		15		
Agencies Notified ☐ EPA ☑ DOLWD	⊠ Ini	Notific itial nended				200 Elm D	s Or					lear as	1
DHSS DCA	An 🗆 En	nendm nergen	ent #3.	-10/26 luding	/11	City, State, Zip Princeton,			ASBESTOS CON LICENSIA	VG			
(NJAC 5:23-8)	Jus	tification ncellat	on)			Name of Conta	act	76° - 1° 12 <sub>0</sub>	Telephone	Numbe	er	-	
		-					INFORMATION					er v	- 49
Name of Facility Where	Abateme	nt is T	aking F	Place (	3)	ACILITY	INFORMATION	T=		-25000-0			
Princeton Univers	ity- Jad	win H	all					Type of Faci					
Street Address Washington Rd								Other (i.e.	er 8 (Other than , private and cor	K-12) nmerci	al buil	dinne	
City (5) Princeton					one man			homes, e	10.)				
County (6)								WEST COURT	# CI 1 1001S		Blog	. Age	9
MERCER						County Code (	7)(STATE USE ONL)	Current Use (	Prior if being der	nolishe	d)		
Name of Monitoring Firm	Hired by	Buildir	ng Owr	ner (8)	AS	CM No.	Name of Abate	nent Contractor (	(0)				
ATC Associates Inc	<u> </u>						BRISTOL E	NVIRONMENT	AL INC			200	
Street Address	<b>^</b>					700-500-00-00-00-00-00-00-00-00-00-00-00-	Street Address		AL, INC.				
Bromley Corporate City, State, Zip Code	Center-	Three	Terri	Lane			1123 BEAV	R STREET					
Burlington, NJ 0801	16						City, State, Zip (						_
Project Manager for Monit							BRISTOL, P	A 19007					
Michael Keehn	ioing rim	n				one No.	Telephone No.		License No.				_
Start Date (10)		Tech	a di ila d		609-3	886-8800	215-788-604		00509				
10/10/	11	Sch	eaulea 11	Comp	letion	Date (11)	Name of OSHA I			-			_
Occupancy Status During		1/2	<del></del>			/	BRISTOL EN	VIRONMENTA	AL, INC.				
Facility Closed/Vacated	During F	nt (Une	CK On!	y one)			Street Address					_	_
Abatement Performed (	Outside of	Norm	al Faci	lity Ho	ement	Vacanita L	1123 BEAVE						
I Ime of angrement. I'll	HIVE A	100001					City, State, Zip C			-		-	_
CEV#3-12/26 +1	hat apply)	DLY	- 5:	30A1	n -/.	30 PM	BRISTOL, PA	19007					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			⊠ R	enova emoliti	ion on		Glovebac	Procedure					
			1	s Loca	tion	Т	Non-Exer	npted (*) and No	n-Friable Proced	ure			
Location of			He	Norma ed Sole	lly		Description of			A	batem	ent T	y
Asbestos-Containing Ma TO:BE ABATE	D	ivi)	Ma	aintena	nce/	Aspesio	os Containing Mat	erial (ACM)	Amount	Re	Re	m	
IN Facility			Cus	todial (12)	Staff?	(i.e., t	hermal systems in surfacing, VAT,	nsulation,	(Specify	Removal	Repair	Encapsulate	
(13)			Yes	No	LAUA		other miscellaneo	us)	SF or LF)	<u> 22</u>		sula	
Floor				×	N/A							ê	
						ACM Wind	dow frame cau	k & glazing	6,527 LF				1
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o of Decistored Monte III	- 1 -										<u></u>	-	-
e of Registered Waste Harris RVICE TRANSPORT		INC		NJ Ha	DEP \		bic Yards of	Name of Registe	ered Landfill	1-1			L
State					0990			G.R.O.W.S.	NORTH LAND	FILL			
W CASTLE DE 19720	)					Dis	posal Date	City, State MORRISVILL					
pleted By (Print or Type)		Title					Signature	WOLLKIO AILL					
an Scafiro		Est	imato	r			h.	la l'	Dat	e /	,		7

Date of Notification (1)				Name of Buil	Mine O 10	厅了匠匠		15	1	
9 / 30	/11			Princetor	Iding Owner/Operator University-Office	e of Design an	d Construction			
☐ EPA ☐ Initia				Street Addres	ss	DE	n nost			The second secon
	ended endment # <u>2</u>	-10/24	1144	City, State, Z	ip Code	1-1		20 DFM	<u> </u>	1
□ DCA □ Eme	rgency (inc	dudina	111		, NJ 08544	ASB	ESTOS CONTROL	ů		-
(NJAC 5:23-8) justi	fication)	accinig	Ī	Name of Con			Telephone N			
☐ Can	cellation			Robert Or	tega	- Charper - con		nmber		
				FACILITY	INFORMATION	and plate the second section	are a second properties		gersante siño	Si de de
Name of Facility Where Abatemen	t is Taking	Place (	(3)			Type of Facility	(A)			
Princeton University- Jadw	rin Hall					School (K-1	07/02/04/05			
Street Address						── □ Subchapter	8 (Other than K-	-12)		
Washington Rd						Other (i.e., phomes, etc.	orivate and comm	nercia	l buildir	ngs,
City (5)						Square Feet	# of Floors		DIA	
Princeton						- 400.0 1 001	W OI FIOOIS		Bldg.	\ge
County (6)				County Code	(7)(STATE USE ONLY)	Current Use (P)	rior if being demo	olichou	, ·	
MERCER							nor il bellig derric	Jiisnec	1)	
Name of Monitoring Firm Hired by E	Building Ow	ner (8)	AS	SCM No.	Name of Abatem	nent Contractor (9)				
ATC Associates Inc						VIRONMENTA				
Street Address					Street Address		L, 1140.			_
Bromley Corporate Center-T	hree Ter	ri Lan	e		1123 BEAVE	RSTREET				
City, State, Zip Code		-			City, State, Zip C					_
Burlington, NJ 08016					BRISTOL, PA					
Project Manager for Monitoring Firm		1	eleph	one No.	Telephone No.		License No.			_
Michael Keehn			609-	386-8800	215-788-6040	)	00509			
Start Date (10)	Schedule	d Com	pletion	Date (11)	Name of OSHA N		00309			
10 / 10 / 11				/_11		VIRONMENTAL	INC			
Occupancy Status During Abatemen	Annual Control of the		The latest terms of the la		Street Address	VIIIOMILITAL	-, INC.			
Facility Closed/Vacated During Er	ntire Period	of Aba	stemer	nt	1123 BEAVE	CTDECT				
Abatement Performed Outside of	Normal Fac	cility Ho	ours - I	Describe	City, State, Zip Co					
Time of Abatement: 7:00AM-3:31	0PM/	_PM	/	AM	BRISTOL, PA					
cope of Work (Check all that apply)	-y .5	MM-	1,3	OPM	DRISTOL, PA	19007				
] ≥3 sf or ≥3 lf ] ≥160 sf or ≥260 lf		Renov Demoi			☐ Mini-Encl	ainment with Nega osure Procedure npted (*) and Non-		Ire		
V		Is Loc	The state of the s			T			pateme	nt T
Location of Asbestos-Containing Material (ACI	M) U	Nom sed So	olely by	/ Ash	Description of					
TO BE ABATED	1	Mainter ustodia	nance/	Asbes	stos Containing Mate , thermal systems in	erial (ACM)	Amount	Removal	Repair	inca
IN Facility (13)		151001a (12		<b>'</b>	surfacing, VAT.	or I	(Specify SF or LF)	ova	=	sqe
(10)	Ye	1		A	other miscellaneo	us)	,	-		Encapsulate
Floor				ACM Wi	ndow frame caul	k & glazing	6,527 LF	+		
			10		The same saul	r a glazilig	0,32/ LF	×		
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ERVICE TRANSPORT GROUP	INC	'	2099		Waste		ORTH LANDE	ILL		
State					Disposal Date	City, State				_
EW CASTLE DE 19720						MORRISVILL	E. PA 19067			
pleted By (Print or Type)	Title				Signature		15			
rian Scafiro	Estima	tor			Brian &	Scalin 1	) Date	واه	1/11	

9 / 30	/ _ 1	11			Name of Bui	Iding Owner/Ope	rator	(2) (2)	WE	111			_
☐ EPA ☐ DOLWD ☐ DHSS ☐ DCA (NJAC 5:23-8)	pe Notification Initial Amended Amendment ( Emergency ( justification) Cancellation	# <u>1-1</u>	0/14/ <sup>4</sup>	11	Street Addre 200 Elm I City, State, Z	ip Code n, NJ 08544	ince -	DEC 15	2011 L	2	er .	i	
Name of Facility M/ham Al					FACILITY	INFORMATIO	N	A CAS PRINT	134 P. P.			á	
Name of Facility Where Abates Princeton University- Ja	ment is Takin	g Pi	ace (3)					Type of Facility	(4)				
Street Address	IOWIN Hall						- 1	School (K-1	2)				
Washington Rd								☐ Subchapter	8 (Other than k	-12)			
City (5)						•		homes, etc.	private and com	mercia	al build	dings	٠
Princeton								Square Feet	# of Floors		Bldg	And	_
County (6)				7								. Aye	
MERCER				1	Jounty Code	(7)(STATE USE OF	VLY)	Current Use (Pr	ior if being dem	olishe	d)	_	
Name of Monitoring Firm Hired	by Building C	Jwne	or /8\	TAS	01111						~,		
ATC Associates Inc	-,	,,,,,	. (0)	AS	CM No.	Name of Aba	temer	t Contractor (9)		-		_	
Street Address			X			BRISTOL	ENV	IRONMENTA	L, INC.				
Bromley Corporate Cente	er-Three Te	erri	Lane			Street Addres					-	-	_
City, State, Zip Code						1123 BEA							
Burlington, NJ 08016						City, State, Zi							-
roject Manager for Monitoring F	irm	3=U6007	Tel	enho	ne No.	BRISTOL,		9007					
Michael Keehn			111111		86-8800	Telephone No			License No.				a l
tart Date (10)	Schedu	iled	Comple	etion	Date (11)	215-788-60			00509				
10 / 10 / 11	11		/ 2	5	/	Name of OSH						_	-
ccupancy Status During Abaten								RONMENTAL	, INC.				
Facility Closed/Vacated During	Entire Perio	od of	Abate	ment		Street Address							-
Abatement Performed Outside	of Normal F	acili	ty Hou	s - D	escribe	1123 BEAV							
Time of Abatement: 7:00AM-	3:30PM/	F	M			City, State, Zip							_
ope of Work (Check all that app	oly)			-		BRISTOL, I	PA 15	3007					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	<u> </u>	] De	enovatio	n		Glovet	nan Pr	ocedure	tive Pressure Friable Procedu	re.			
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Asbestos-Containing Material (	ACM)	Use	d Solel	v bv	Asbes	Description tos Containing N	of Astori-	I (ACAA)	1. 1.00		patem		T
TO BE ABATED IN Facility		Cust	intenar odial S	taff?	(i.e.,	thermal systems	s insu	lation,	Amount (Specify	Remova	Repair	nc	
(13)			(12)			surfacing, VA other miscellan	T. or		SF or LF)	ova	¥.	psc	1
	Y	es	No	N/A		other miscellan	eous)					Encapsulate	
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e of Registered Waste Hauler			NJE	EP V	Vaste C	ubic Yards of	Na	me of Registere	d Landill				
RVICE TRANSPORT GRO	UP INC			ler ID 0990		/aste	0	ROWS NO	ORTH LANDF			10	975
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an Scafiro	Estim	ato	r			Signature		0 1.	Date				-

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9 / 30	/ 11			Name of Bui	lding Owner/Opera	or (2)	W The state of the	215	0		
Agencies Notified  ☐ EPA ☐ DOLWD 0790 ☐ DHSS 55/b ☐ DCA ☐ NJAC 5:23-8)  ☐ Type No ☐ Initia ☐ Ame ☐ Ame ☐ Lemei ☐ Justifi	otification I Inded Indment #_ Igency (indication)		. [	Street Addre 200 Elm I City, State, Z	n University-Offi ss Dr ip Code n, NJ 08544	DEC 19  ASPESTOS COLLICERS	2011	7			
☐ Cano	ellation			Robert Or		LIGHTON	Telephor	ne Numb	er		
Name of English Who as Ab.				FACILITY	INFORMATION				200		
Name of Facility Where Abatement Princeton University- Jadwi	is Taking	Place	(3)			Type of Fac	cility (4)				
Street Address	ii naii					School (	K-12)				
Washington Rd						☐ ☐ Subchar	oter 8 (Other tha	n K-12)			
City (5)			-					ommerc	ial bu	ilding	js,
Princeton						Square Fee	# of Floo	ors	Blo	ig. Ag	qe
County (6)			T	County Code	(7)(STATE USE ONLY				1		<b>3</b> (700)
MERCER			1		WIND INTE USE ONLY	Current Use	(Prior if being d	emolishe	ed)	_	_
Name of Monitoring Firm Hired by Bu	uilding Ow	mer (8)	AS	CM No.	Name of Abaten	nent Control	(0)				
ATC Associates Inc					BRISTOL E	VIRONNEN	(9)				
Street Address					Street Address	- THORMEN	IAL, INC.				
Bromley Corporate Center-Th	ree Ter	ri Lan	е		1123 BEAVE	RSTREET					
City, State, Zip Code  Burlington, NJ 08016					City, State, Zip C						
Project Manager for Monitoring Firm					BRISTOL, P					- 8	
Michael Keehn		1		one No.	Telephone No.		License N	0			
	C-1 ::			386-8800	215-788-6040	)	00509	0.			100
10 / 10 / 11	ocnedule 4.4	d Com	pletion	Date (11)	Name of OSHA N						_
	_17	- ' _	25	/ _11	BRISTOL EN	VIRONMENT					
Coupancy Status During Abata							AL, INC.				
Ccupancy Status During Abatement (	Check on	ly one			Street Address		AL, INC.				_
Facility Closed/Vacated During Entill Abatement Performed Outside of N.	Check on re Period	of Aba	tement	\'L	Street Address 1123 BEAVER	RSTREET	AL, INC.				_
Facility Closed/Vacated During Entill Abatement Performed Outside of N.	Check on re Period	of Aba	tement	\'L	Street Address 1123 BEAVER City, State, Zip Co	R STREET	AL, INC.				_
Facility Closed/Vacated During Entil Abatement Performed Outside of N Time of Abatement: 7:00AM-3:30F	Check on re Period	of Aba	tement	\'L	Street Address 1123 BEAVER	R STREET	AL, INC.				_
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Facility Closed/Vacated During Entity  Abatement Performed Outside of Note Time of Abatement: 7:00AM-3:30F  cope of Work (Check all that apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM)  TO BE ABATED  IN Facility  (13)	Check on ire Period ormal Face PM/	ly one) of Aba cility Ho PM- Renova Demolii Is Loca Norm sed So lainten stodial (12) No	ation alion ally lely by ance/	Asbest (i.e.,	Street Address  1123 BEAVER City, State, Zip Co BRISTOL, PA    Full Conta   Mini-Enclo   Glovebag   Non-Exem    Description of tos Containing Mate thermal systems in surfacing, VAT, co other miscellaneous	R STREET  de 19007  sinment with Ne Desure Procedure Apted (*) and No erial (ACM) sulation, or eris)	Amount (Specify SF or LF)	A Removal		Encapsulate	-
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Facility Closed/Vacated During Entitle Abatement Performed Outside of Note Time of Abatement: 7:00AM-3:30 People of Work (Check all that apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility  (13)  Floor	Check on ire Period ormal Face PM/	of Abasility Ho PM- Renova Demoli Is Loca Norm sed So ainten stodiai (12) No	ation alion ally lely by ance/	Asbest (i.e.,	Street Address  1123 BEAVER City, State, Zip Co BRISTOL, PA    Full Conta   Mini-Enclo   Glovebag   Non-Exem    Description of tos Containing Mate thermal systems in surfacing, VAT, co other miscellaneous	R STREET  de 19007  sinment with Ne Desure Procedure Apted (*) and No erial (ACM) sulation, or eris)	Amount (Specify SF or LF)	Removal		Encapsulate	-
Facility Closed/Vacated During Entitle Abatement Performed Outside of N. Time of Abatement: 7:00AM-3:30F Cope of Work (Check all that apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM)  TO BE ABATED  IN Facility  (13)  Floor	Check on ire Period ormal Face PM/	ly one) of Aba ility Ho PM Renova Demoli ls Loca Norm sed So lainten stodial (12) No	ation alion ally lely by ance/	Asbest (i.e.,	Street Address  1123 BEAVER City, State, Zip Co BRISTOL, PA    Full Conta   Mini-Encla   Glovebag   Non-Exen  Description of los Containing Mate thermal systems in surfacing, VAT, cother miscellaneous dow frame cauli	R STREET  de 19007  sinment with Ne soure Procedure ented (*) and No erial (ACM) sulation, or erial (ACM) sulation, or erial (ACM)	Amount (Specify SF or LF)	A Removal		Encapsulate	-
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 12-14-2011 The Hampshire Companies Agencies Notified Type Notification Street Address DEC 1 9 2011 83 South Street **EPA** Initial City, State, Zip Code Amended DEP ASBESTOS CONTROL & × DOL Amendment # Morristown, NJ 07960 Emergency (including HCENSING ..... Name of Contact × DOH justification) Mr. Nathan Kim Cancellation DCA A St. Winnersteinen **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Former Pathmark Administrative Office School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, × 200 Milik Street etc.) City (5) Square Feet # of Floors Bldg. Age 40,000 SF ~50 Years Carteret 2 Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY) Pre - Demolition Middlesex Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. East Coast Haz Mat Removal, Inc. **EWMA** Street Address Street Address 100 Misty Lane 494 E. 41 Street City, State, Zip Code City, State, Zip Code Paterson, NJ 07504 Parsippany, NJ 07054 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 00507 973-345-0022 973-345-0022 Leslie Olszewski Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor December 27, 2011 January 26, 2012 The same as above Street Address Occupancy Status During Abatement (Check Only One) × Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Outside - Exterior Work 7am to 4 pm × Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glovebag Procedure × Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Encapsulate Maintenance/ (Specify Enclosure TO BE ABATED (i.e. thermal systems insulation, Remova Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)Yes No N/A X 3060 LF Flashing Material X Exterior Roof Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. of Waste IESI - Bethlehem Landfill Newark Carting, Inc. 45 04509 Disposal Date City, State City, State 01-16-2012 Bethleham PA Newark, NJ 07105

Date 12-14-2011

Signature

Project Managr

Completed by

Leslie Olszewski

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Wenney Print Form

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State of New Jersey APPROVED! PAUL HORNER, NJDOL

NOTIFICATION OF	ASBESTOS ABATEMENT	
(Pursuant to	NJAC 8:60 and 5:16)	

				(Pu	rsuar	t to NJ	AC 8	:60 and 5:	16	)	OF Fd	194			
Date of Notification (1)			E-Yes		Name	of Buildir	ng Ow	ner/Operator	r (2	NECE		Tin.			
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Project Manager for Moni	toring Firm		1	Tele	phone	No.	Tel	ephone No.			License No	).			
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<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

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Name of Registered Landfill Cubic Yards

NUDEP Waste Hauler ID No 17904 Registerio Waste Hauler of Waste

Disposal Date

Signature

## No check

Date of Notification (1) 12–12–11				Name of Building Owner/Operator (2) Rutgers-The State University of New Jersey														
Agencies Notified	Type Notification			Street Address														
Ճ EPA						27 Road 1, Building 4086												
□ DEP  ☑ DOL							Piscataway, NJ 08854											
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Name of Facility Where Aba	tement is Taking F	Place (3)	) .				Type of Facilit	ty (4)						
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93 Lipman Drive	-		15		7.5		☐ Subchap	ter 8 (Ott	ner than K	-12)				
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Project Manager for Monitoring Firm				phone No.		Teleph	istown, E	A 194						
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