No check State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/operator (2) Date of Notification (1) DEC 2 1 NJ DOT North Region Headquarter 12/20/2011 Type Notification Agencies Notified 200 Stierli Ct X Initial EPA DEP DOL CONTROL & Amended City, State, Zip Code LICENSING Amendment #_ Mt Arlington, NJ 07856 Emergency (including DOH DCA iustification) Name of Contact relephone Number---Cancellation C/O Carl Perello **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Abandon private house (Part 1 of 2) School (K-12) Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private & commercial buildings, 485 North Rd, Parcel 85 homes, etc.) Square Feet # of Floors Bldg. Age City (5) 4000 50+ Little Falls County Code (7) (STATE USE ONLY Current Use (Prior If being demolished) County (6) former private house Passaic Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner ASCM No. Genesis Contracting Corp 00103 (8) L. Robert Kimball & Associates Street Address Street Address 106 Gold St 411 Riverview Plaza City, State, Zip Code City, State, Zip Code Green Brook, NJ 08812 Trenton, NJ 08611 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 01090 908-809-0315 609-989-5260 Robert Kowalczyk Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Genesis Contracting Corp 01/13/12 12/30/2011 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 Renovation >3 sf or_>3 lf Glovebag Procedure Demolition X >160 sf or >260 lf X Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Used Solely by Description of Location of Asbestos Containing Material (ACM) Amount Asbestos -Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify REMOUR Custodial TO BE ABATED SF or LF) surfacing, VAT, or Staff? IN Facility other miscellaneous) (12)(13)N/A Yes No 190 SF X VAT X Kitchen 45 SF X Mastic Kitchen (behind a drywall) X 260 SF Transite panels X Kitchen, Bed, Bath & Basement X 3670 SF Texture Fiberboard X Bedroom, Closet & Hall Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. of Waste G.R.O.W.S. Landfill Genesis Contracting Corp Disposal Date City, State City, State Morrisville, PA TBD Green Brook, NJ Date Signature Title Completed By 12/20/2011 President Victoria Burga

to red

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

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Date of Notification (1)				Name of Building Owner/Operator (2) US EPA											
Agencies Notified Type Notification				Street Address 2890 Woodbridge AVeC 2 1 2011											
EPA DEP	Initial			ZOJO WOOD TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO TH											
DEP	Amended Amendme		_	City, State, Zip Code Edison, NJ 08837											
1000	☐ Emergenc		g	Name of Contact Telephone Number											
DOH DCA	justification Cancellation					ery (Chenega	Global	i elebridalis della	(4)		-	لبي			
						ORMATION		1			_				
Name of Facility Where	Abatement is Ta	aking Place	e (3)	- 170	CILIT III	OTMATION	Type of Facility (4)								
Ivallie of Facility vincin	US EPA			#209			☐ School (K-12)								
Street Address					Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings,										
2890 Woodbridge A							homes, etc.)								
City (5)		1	TT				Square Feet 100,000SF								
County (6)	<u>E</u>	dison, N	41	T Cou	nty Code (7) (STATE	Current Use (Prior if being demolished)								
County (6)	iddlesex				ONLY)	offices/labs									
Name of Monitoring Fire		ing Owner	-	ASCM	No.	Name of Abater									
(8)	MECS					Stevens Environmental Service									
Street Address						Street Address									
	PO Box	341				City Chata Zin (Box 322	_			_			
City, State, Zip Code	Crosswicks, N	JI 0851	5		City, State, Zip Code Allentown, NJ 08501										
Project Manager for Mo			Oregonal Age	ephone	No.	Telephone No. License No.									
	Veisgarber Jr		(60	9) 29	8-4070	(609) 259-9688 00493									
Start Date (10)	S	cheduled C			ate (11)	Name of OSHA Monitor MECS									
12/29/11			2/30			N	IECS								
Occupancy Status During Abatement (Check only one)						Street Address	PO	Box 341							
☐ Facility Closed/Vacated During Entire Period of Aba ☐ Abatement Performed Outside of Normal Facility Ho				rs		City, State, Zip C									
✓ Other - Describe: 7AM-3:30PM						J., J. J. J.		ks, NJ 08515							
Scope of Work (Check all that apply)					Full Containment with Negative Pressure										
⊠≥3 sf or ≥3 lf				ion		Mini-En	Mini-Enclosure								
≥160 sf or ≥260 lf Demoli				on		Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
ls Loca							Abatement								
llie-		10 500.00	ormally Sole	55 675		Description o	f		Туре						
Location of Used Sol Asbestos-Containing Material (ACM) Mainten					Asbes	tos Containing Ma	terial (ACM)	Amount	R	Z.	ш	Щ			
TO BE ABA			ustodia Staff?	al	(i.e.,	thermal systems surfacing, VAT	insulation,	(Specify SF or LF)	Removal	Repair	ıcaç	clos			
IN Facili (13)	ity		(12)			other miscellane		0. 0. 2. /	val		Encapsulate	Enclosure			
		Yes	No	N/A							ate				
hallw	201/	+	_	×		floor tile/ma	ıstic	200 SF	×						
nanw	=														
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Name of Registered Waste Hauler NJDEP W						Cubic Yards Name of Registered Landfill									
Stevens Environmental Services Inc. Hauler ID N					292	of Waste 2 CU		T.R.R.F., Ir	IC.						
City, State						Disposal Date	City, State	m 11	D.4						
Allentown, NJ					12/30/11// / Tullytown, PA							_			
Completed By Mahlon E. St	Title Pr	Signature		Date	12/1	9/11									
ivianion E. St	CVCIIS		OJCC	LIVIAL	nager	-/-									

ASB-41 MAR 00

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

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

Job #: 1112-1606 Check #: NA

								1:	THE RESERVE TO SERVE THE PERSON OF THE PERSO	Andrew St. and St.	•					
Date of Notification (1) 12/5/11				Name of Building Owner / Operator (2) ECEIVE												
Agencies Notified EPA	Type Notific	- 1	Street Address 154 Cooper Road, Suite 1301													
☐ DEP		Initial					Zip (Code		EC 2 1 2011		刀				
⊠ DOL		ended #1 ON HOL		-		n, Nontact	08091	8091					r			
□ DOH □ DCA		Emergency Cancellation						arpless	BESTOS CONTRO	Telephone Number						
	F	AC	LIT	Y INF	ORMATION	LICENSING										
Name of Facility W		nent is Taking Plac	ce (Type of Facility	V (-T/	and the second second		The contract of the	i,			
Jersey American Pub									er 8 (Other tha		and a compression of the local	es asam mas				
Street Address 300 Columbia Avenue									e. private & commercial buildings, homes, etc.)							
300 Columbia A	venue							Square Feet	# of Floo							
City (5)		County (6)	Co	unty	y Co	ode (7)	2,500	1.5	177	970					
Lindenwold								Current Use (F	Prior if being de	emolished)						
Name of Monitorin	a Firm Hired	hy Building Owne	r (8)			ASC	M No		ement Contrac	tor (9)						
Horizon Enviror	mental					. 78.	T	IOID		orp.			0030000			
Street Address						1		IOLD								
P.O. Box 316 City, State & Zip C	ode															
Thorofare, NJ 0																
Project Manager for Monitoring Firm Telepho							oer	Telephone Nu	License N	ense Number 00862						
Steve/Dave Flanigan 856-848-								609-702-040 Name of OSH		00862						
Scheduled Start Date (10) Scheduled Completion Date (11) 12/19/11 12/23/11 Possibly (2) Phases)	EMSL Analytical								
Occupancy Status During Abatement (Check only one)								Street Address								
Facility Closed/Vacated During Entire Period of At						eme	ent	107 Haddon				Acres de				
Abatement Performed Outside of Normal Hours								City, State & Z Westmont, I	-							
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Scope of Work (C	Name of the second second	apply)			150					1		Dros				
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≥3 sf or ≥3≥160 sf ≥2			X			olitic			100000000000000000000000000000000000000	ag Procedures						
Z 2100 31 2200 11										empted and Nor						
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									prepared c							
Loodiioi oi					catio	on sed			Description of Asbestos-Containing			Abatement Type				
Asbestos-Containing N Material (ACM)					ly b	y		Material (AC	(Specify SF or LF)			Enc	щ			
TO BE ABATED M						e or taff?		(i.e., thermal sy insulation, surfac		Remova	Repair	caps	Encisoure			
in Facility Ct (13)					ai 3 2)	taii:			or other miscellaneous)			¥.	Encapsulate	ure		
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Exterior				F		X	Tra	nsite Siding		1,600 SF		H	H	H		
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Name of Registered Waste Hauler						ler II	Naste No.	Cubic Yards of Waste								
Horizon Disposal						226	12	5 Disposal Date	GROWS City Clark							
City, State Trenton, NJ								12/22/11	City, State Morrisville, PA	4						
Completed By (Print	t or Type)		-830		Title Adn	nin.		Signature			Date 12/16/	11				

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No Check The same State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/operator (2) Date of Notification (1) 12/20/2011 NJ DOT North Region Headquarter Type Notification Street Address Agencies Notified 200 Stierli Ct X Initial EPA DEP DOL Amended City, State, Zip Code ASBESTOS CONTROL & Amendment # Mt Arlington, NJ 07856 Emergency (including justification) LICENSING DOH DCA 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 private house (Part 1 of 2) School (K-12) Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private & commercial buildings, 485 North Rd, Parcel 85 homes, etc.) Square Feet # of Floors Bldg. Age City (5) 4000 50+ Little Falls County Code (7) (STATE Current Use (Prior If being demolished) County (6) **USE ÓNLY** former private house Passaic Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner Genesis Contracting Corp 00103 (8) L. Robert Kimball & Associates Street Address Street Address 106 Gold St 411 Riverview Plaza City, State, Zip Code City, State, Zip Code Green Brook, NJ 08812 Trenton, NJ 08611 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 01090 908-809-0315 609-989-5260 Robert Kowalczyk Scheduled Completion Date (11) Name of OSHA Monitor Start Dale (10) Genesis Contracting Corp 01/13/12 12/30/2011 Occupancy Status During Abatement (Check only one) Street Address 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 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclosure >3 sf or >3 lf Renovation Glovebag Procedure
X Non-Exempted (*) and Non-Friable Procedure Demolition X >160 sf or >260 lf Abatement Is Location Type Normally Used Solely by Description of Location of Asbestos Containing Material (ACM) Asbestos -Containing Material (ACM) Maintenance/ Amount (i.e., thermal systems insulation, Custodial (Specify TO BE ABATED surfacing, VAT, or PE-10JA SF or LF) Staff? IN Facility other miscellaneous) (12)(13)Yes 190 SF VAT X X Kitchen 45 SF X Mastic Kitchen (behind a drywall) Transite panels 260 SF X Kitchen, Bed, Bath & Basement X 3670 SF Texture Fiberboard Bedroom, Closet & Hall X Name of Registered Landfill Cubic Yards Name of Registered Waste Hauler NJDEP Waste Hauler ID No. 32980 of Waste G.R.O.W.S. Landfill Genesis Contracting Corp City, State Disposal Date City, State

Green Brook, NJ

Completed By

Victoria Burga

Title

President

TBD

Signature

Morrisville, PA

Date

12/20/2011

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

Job #: 1111-1605 Check #: 2527

Date of Notification (1) 11/30/11				Name of Building Owner / Operator (2) New Joan Gravitz We Joan Gravitz												
Agencies Notified Type Notification				Ms. Joan Gravitz Street Address												
						South Demonstrate Assessed										
DEP	☐ Initia	ı		and the same of the same			ebook Avenue Share and Share above a specific sp									
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						NJ 08	402			7-1	<u> </u>					
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						TY INF	ORMATION	A STATE OF THE STA		ar e free	graph and the					
Name of Facility Where Abatement is Taking Place (3)							Type of Facil		7.00							
Residential Property Street Address																
								oter 8 (Other th								
3 South Brunswi	ick Avenue						Other (i.e. private & commercial buildings, homes, etc.)									
							Square Feet # of Floors Bldg. Age									
City (5)		County (6)	Co	unty	Code	(7)	2,750	3		920						
Margate		Atlantic					Current Use	(Prior if being	demolished)							
							Residential									
Name of Monitoring	Firm Hired b	y Building Own	ner (8)		AS	CM No	Name of Abatement Contractor (9)									
Tiger Environme									rvices, Corp.							
Street Address					-	A	Street Addre			2.5-2-6.50	A		-			
16 West Elizabet	h Avenue						3859 Sylon	Blvd.								
City, State & Zip Co	ode						City, State &	Zip Code				XX.YU.YAS				
Linden, NJ 07036	6						Hainesport	, NJ 08036								
Project Manager for	Monitoring F	irm	Telep	hone	Nun	nber	Telephone N	Telephone Number License Number								
Kelly Walton			908-	862-	4301		609-702-0400 00862									
Scheduled Start Da	te (10)	Scheduled Cor	mpletio	on Da	te (1	1)	Name of OSI	HA Monitor								
12/14/11		12/16/11					EMSL Anal	ytical								
Occupancy Status During Abatement (Check only one)						Street Address										
Facility Closed/Vacated During Entire Period of						City, State & Zip Code										
Abatement Performed Outside of Normal Hours																
Describe:							Westmont,	NJ 08108								
	ea															
Scope of Work (Che	eck all that a	pply)						V 24-27								
6			Transition of the last				Full Containment with Negative Pressure									
≥3 sf or ≥3 l	f		\boxtimes	Rei	novat	ion	☐ Mini-Enclosure☐ Glove Bag Procedures									
≥160 sf ≥26	0 If			Der	moliti	on										
								Non-Ex	Exempted and Non-Friable Procedure							
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	tos-Containir	ng		nally			Asbestos-Cor		(Specify							
	erial (ACM)			olely		. 1	Material (A		SF or LF)	77		En	m			
	BE ABATED		100000000000000000000000000000000000000	tenar			(i.e., thermal s			en	Repair	cap	ncl			
ir	n Facility		Cust	odial (12)	Staff	?	insulation, surfac			Remova	pa	nsc	Enclsoure			
						_	or other miscell	laneous)		<u>n</u>	_	Encapsulate	īe			
			Yes	No	N/A							_				
Basement			Ш	Ш			Wrap	- CARRON	100 LF		Ш	Ш	Ш			
Crawlspace						Pipe	Wrap		150 LF			Ш	Ш			
				П	T											
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Name of Registered	Waste Hau	ler		N.	DEP	Waste	Cubic Yards	Name of Red	gistered Landfill							
Traine of trogletores	. Tradio maa			100000		ID No.	of Waste	110	9.010.00 20.10							
Horizon Disposa	I				226	612	5	GROWS								
City, State				-			Disposal Date	City, State								
Trenton, NJ							12/17/11 Morrisville, PA									
Completed By (Print or Type)				Tit	le		Signature A			Date			\neg			
Kim Trumbetti					dmi	n.	12/14/11									
Mill Hullibetti							HX111 1/2			12117111						

1325

State of New Jersey Michael March NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 12/16/11 Joe Nia / Residence Type Notification Street Address Agencies Notified 21 2011 118 25th Street **EPA** Initial City, State, Zip Code × Amended DEP Spray Beach NJ 08008 ASBESTOS CONTROL & X DOL Amendment # Emergency (including Number Name of Contact justification) DOH Joe DCA Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Joe Nia / Residence School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, X 118 25th Street etc.) # of Floors Bldg. Age City (5) Square Feet 35 +1000 Spray Beach NJ 08008 County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) County (6) Garage ocean Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Pernaco Inc. Street Address Street Address PO Box 329 City, State, Zip Code City, State, Zip Code West Berlin NJ 08091 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 00727 856-753-9800 Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) Pernaco Inc. 12/31/11 12/28/11 Street Address Occupancy Status During Abatement (Check Only One) PO Box 329 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: West Berlin NJ 08091 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Demolition Mini-Enclosure 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/ Enclosure (i.e. thermal systems insulation, (Specify Remova TO BE ABATED Repair Custodial Staff? SF or LF) surfacing, VAT, or In Facility (12)other miscellaneous) (13)Yes No N/A 900 SF Exterior Siding Exterior Siding Cubic Yards Name of Registered Landfill NJDEP Waste Name of Registered Waste Hauler Hauler ID No. of Waste G.R.O.W.S. **United Containers** 22459 2 Disposal Date City, State City, State 12/31/11 Morrisville PA 19067 Elm NJ

Signature

Date

12/16/11

Anthony T Perna

Completed by

Title

President