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City (5)							<u> </u>	etc.) re Feet	# of FI	000000000000000000000000000000000000000		Blc g. /		
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Street Address							Addre	ss gren Aver	nue					
City, State, Zip Code								ip Code J, 07512						
Project Manager for Monitoring Firm			Telepho	ne No.		C \$155,000 de 100	none N 345-8		1000	icense				
Start Date (10) 12/22/2017	Scheduler 12/23/2		npletion	Date (11)				HA Monitor ement, In	c.					
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Name of Registered Waste Hauler D&S Abatement, Inc.		Н	JDEP Wauler ID 0996		10000000	ic Yards /aste)		Name of I						
City, State Totow, NJ					Disp	osal Date		City, State Moorisv						
Completed by Ned Joksimovic	Title Projec	t Ma	nager			Signature	E	7/			Date 12/11/2	2(17		

Print Form

Abatement Performed Outside of Normal Facility Hours City, Stare, Zip Code City, Stare,	4 929	9) /১							-	
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Project Manager for Monitoring Firm Telephone No.	City, State, Zip Code						YEUR: IN	TIL			
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Name of OSHA Monitor	E COLOR				659	C346-1	916 8	10%	753		
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Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code	Occupancy Status During Abatement (Check)	Only Oney	///								
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≥3 sf or ≥3 lf											
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Date of Notification (1) Content Content Content	ıt# (includii	ng	Stre	me of Building Owner An Hong eet Address 77 Fig. Lang y, State, Zip Code Lag hance ne of Contact Skyl	_	Cavating Ln By	ASB	ESTO LIC	2 2 S CC ENSI	ON FE	17	The state of the s
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County (6)						1 /		shed)	1/			4
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Project Manager for Monitoring Firm			Teleph	ione No.			License	No.	3.5.			
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12/23/17	1/	73	//)	Date (11)	Name o	f OSHA Monito	r					
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☐ Abatement Performed Outside of Normal F ☐ Other — Describe:	od of Aba acility H	atemen ours	ŧ		City, Sta	ite, Zip Code						
Score of Work (Check All That Apply)												
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TO BE ABATED	Telephone No. Telep											
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Stock Address Shoot (K-12)												
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Name of Registered Waste Hauler					rds	Name of R	tegistered Landfill	1_1	- 1		-	
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City, State 1) 6 (4446) 11 1			.c 9T/	Disposal			11. f	0.				
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Agencies Notified	Type Notification	I	W B	4 2 5	ampa Av	venue		ASBESTOS C	T 100	ROL	&	
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				FACI	LITY INF	ORMATION						
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Hamilton							10,000	2	30	0		_
County (6)				County	Code (7)	STATE USE ONLY)	Police Station	r if being demolishe n	:a)			
Mercer	Llisad by Duilding C	wner (8) A.	SCM N	0	Name of Abatem	ent Contractor (9)					
Name of Monitoring Fir PARS Environme		Wilei (O	, , , ,	JOIN 11			onmental, LLC					
Street Address	Tital, IIIo.			0.75		Street Address						
500 Horizon Drive	e, Suite 540					623 Cutler A		.1.	_			_
City, State, Zip Code						City, State, Zip C Maple Shade						
Robbinsville, NJ Project Manager for Mo			Telepi	hone N	lo.	Telephone No.		License No.				
Rafael Torres	om.og		609	-890-7	7277	856-755-009		00842				_
Start Date (10) 01 / 02		luled Co				Name of OSHA I						
Occupancy Status Dur						Street Address						
○ Status Dur	ated During Entire Pe	riod of A	Abatem	ent		200 Route 1	30 North					
☐ Abatement Perform	ned Outside of Norma	I Facility	Hours	- Desc	cribe	City, State, Zip C	Code					
Time of Abatement	t:P	M/	_PM		/IVI	Cinnaminso	n, NJ 08077					_
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(all that apply)		novatio molitior				an Procedure	ative Pressure		ngya (Shansan)		(2)
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Between Men's &	Women's Cells				-	ittings (Wrap a		15 LF	[3	П		-
			\boxtimes		I Dino E	stinge (Mran al	nn taiff	IV L	I K Z	1 1		10

ASB-41 JAN 13

City, State

Janitor's Chase

Name of Registered Waste Hauler

Freehold Cartage

Completed By (Print or Type)

Freehold, NJ

Christina Lynch

Cubic Yards of

Disposal Date

1/05/2018

Signature

Waste

NJDEP Waste

Hauler ID No.

15939

Vice President of Operations

Title

Date

12/13/17

Name of Registered Landfill

Morrisville, PA

City, State

GROWS North Landfill

al

1218

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

Date of Notification (1)			1				20,	1	E	(G	E	U	M	E	M
12-12-2017			Coll	e of Buildi ege of S	ing Owner Saint Eli	r/Operato zabeth	or (2)								
Agencies Notified Type Notified			Stree	t Address						DE	C 2	2	2917		الما
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Emer	ndment #_ gency (including	1	-		NJ 079	60					TOS	VSII	113) L &	
DOA Justini	cation) ellation			of Conta e Iacov				-	-Tel	ephor	ne Nu	mber			
Name of Facility Where Abatement is	Taking Place (*	3)	FA	CILITY IN	FORMA	HON							- Y		
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Street Address 2 Convent Road				B	77		Subch	l (K-12) apter 8 ((i.e. priv	(Oth	er tha	n K-1	2)	trut.		
City (5)		- 5	(0)	1	>		etc.) Square Fee								nes,
Morristown County (6)			12				71,130		5	Floor	S		B dg. 92	Age	
Morristown			County (STATE	y Code (7 E <i>USE ONL</i>) 		Current Use College	(Prior i	f beir	ng dei	molish	ned)			
Name of Monitoring Firm Hired by Bu Bioterra Solutions	ilding Owner (8)		ASC	OM No.		Name	of Abatement and Safety L	Contra	ctor	(9)			_		
Street Address 1130 W Chestnut St						Street	Address laple Ave #			77.			-		
City, State, Zip Code Union, NJ 07083						City, S	tate, Zip Code					_			
Project Manager for Monitoring Firm Rick Eustaquio				one No.		Teleph	Brook, NJ	07058	-	Licer	ise No)			
Start Date (10)	Schedule	d Co		94-376		1	276-0099 of OSHA Mon	itaa		0131					
12-29-2017	01-07-2	2018		1	*		d Safety LL								
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Abatement Performed Outside of Other – Describe:	Normal Facility	Hour	nent s			City, St	ate, Zip Code						-		
Scope of Work (Check All That Apply)						Pille	Brook, NJ (17058					.,		
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Location of Asbestos-Containing Material (ACN		ormal Sole		Ashar	Des	cription	of				-		Ту	ре	
TO BE ABATED In Facility (13)	Custo	itenar dial S (12)	2015 C7060 L	(i.e	thermal: surfac	systems sing, VAT iiscellane	aterial (ACM) insulation, , or eous)		(Sp	ount ecify or LF)		Removal	Repair	Encapsulate	Enclosure
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Jnited Safety LLC		Ha	IDEP Waller ID I 36820	No.	of Wast			of Regis s Land		d Lan	dfill				
City, State Pine Brook, NJ		1-5			Disposa TBD	al Date	City, St	ate					-		-
Completed by	Title					inature	Tullyto	own, P	'A	-	Date				
/anco Petkov	Project	Mar	nager		1	COST	May 12	2 - 16			12-1	2-2	017		

Basement Trash Room		Basement Hallway outside Class of 1956	Basement Hallway outside Gender Neutral	Basement outside Trunk Room	Basement Hallway outside Laundry Room	Basement Laundry Room Lounge	Room Basement Hallway by Elevator	Basement Hallway outside Main Electrical	Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) 2 10 86 ABATED BEGINNING ASBESTAB) ASBESTAB ASBEST
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Date of Notification (1)				Building Ov			(2)	1	16	EG	EI	W	E		1	
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DOH justification) Cancellation		-5-10	Kevin V					E-construction	NO MORNEY	1201	00 001	a t mit l	ı X			
L box		<u> </u>		ITY INFOR	RMAT	ION				-	- 14 4000				-	
Name of Facility Where Abatement is Taking	Place (3)						Тур	e of Fac	cility (4	1)						
Corpus Christie School							X	Schoo				40)				
Street Address							H	Other	i.e. p	8 (Otne rivate 8	er than K- & commer	rcial b	uildir	ngs, h	ome	s,
215 Kipp Avenue								etc.)								
City (5)								are Fee ,000	et	2	Floors		50	lg. Ag	е	
Hasbrouck Heights			\b0	-d- (7)				35	o (Pric		ng demoli	shed)				_
County (6) BERGEN			County C STATE U	SE ONLY)			10 10 20 CO	hool	6 (1110	n ii beii	ng demon	Silcu)				
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.		0.2500.0000.0000		patemer								
N/A								ices C	orpo	ration						
Street Address						Street 426		ress n Stree	4							
City Chata 7:a Code						2000		Zip Co				1				
City, State, Zip Code						100		erg, NJ		93						
Project Manager for Monitoring Firm		Т	Telephor	ne No.		Telep)		License 01074					
						00000000000		-1700 SHA M			01074					_
	Scheduled Dec 26-2			Date (11)				s abov								
Occupancy Status During Abatement (Check	Only One)				Street	t Addı	ress								
France 1 5 50 500 Mar 1997			ent													
Abatement Performed Outside of Norma	al Facility H	Hours				City, S	State,	, Zip Co	de							
Other – Describe: Star at 9 AM																
Scope of Work (Check All That Apply)						ī	٦,	- " 0			a Nagative	o Drog	CUE			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	1000	novat						Full Con Mini-End			n Negative	e Pres	SSUF	Э		
2100 \$1 01 2200 11							× (Gloveba	ag Pro	cedure	nd Non-Fri	iahle l	Proc	edure	2	
		and the same				L		NOII-EXE	emple	u () ai	IG INOTI-I II	abic			ment	
	7/50	ocation or mall												Ту	ре	
Location of Asbestos-Containing Material (ACM)	Used	Sole	ly by	Asbest		escriptio ntaining		rial (AC	M)	A	Amount				Ш	_
TO BE ABATED	Main Custo	tenar		(i.e.	therma	al systen	ns ins	sulation,	,		Specify F or LF)		Ren	Re	ncal	Encl
In Facility (13)		(12)	ZCOTT.			acing, V. miscella				3	r or Lr)		Remova	Repair	Encapsulate	Enclosure
(10)	Yes	No	N/A					XI.					77		ate	œ.
Basement-Girl's Bathroom		X		Pipe	insu	ılation-	wrap	o & cu	t	:	20 LF	2	ζ.			
Daschient Siris Bathleoni																
		-	-										P-su-			
			-													
Name of Registered Waste Hauler		10,000	JDEP V		2000	ic Yards	disay	Na	ame of	Regist	tered Land	dfill				1
Tri-State Transfer Assoc		200	lauler ID 9551	No.	of W	aste		M	liner	a Ent	erprises	3				
City, State						osal Dat	te		ty, Sta		011					
Bronx, NY					tbd			_ N	Vayne	espur	g, OH					
Completed by	Title					Signatu	re /	2)/		X-		Date		2017		
Gina Betances	Office	Ma	nager	7,			K	flu	la.	3		12/	121	_01/		_

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

	12		(1	Pursuant	to NJAC	8:60 a	nd 12:120))	11	[7]	EC	F	n n	7 12	Piles
Date of Notification (1) 12/15/17							Operator of Educ		n	K			I W		1
Agencies Notified	Type Notification	n	-	Street A						Ш	DEC	22	201	7	111
☐ EPA	× Initial			0.0000000000000000000000000000000000000	th Ave.							_	201	l	L
DEP X DOL	Amended Amendmen	s+ #		35500	ate, Zip Co		7047			A	SRECTO	20.00	THE OWNER, WHEN		
	Emergency		-		Drange,	NJ U	7017			Conduction Conduction	SBESTO	ENSIA	NTRO)L&	
DOH DCA	justification Cancellatio			1000 PM (1000 T)	f Contact Lambkii	_				Te	tephone N	Number.	A CA	William Street	PERSONAL PROPERTY OF
N DOA	L Caricellatio	11		110000000000000000000000000000000000000	LITY INF		TION	-							
Name of Facility Where	Abatement is Taki	ng Place (3)	PACI	LITTINE	ORWA	IION	Туре	of Facility (4)					
Dionne Warwick Ir	stitute							_	School (K-1						
Street Address									Subchapter	8 (Oth					
120 Central Ave.									Other (i.e. p etc.)	rivate	& comme	rcial bu	ildings	, hom	es,
City (5)								TOTAL MARKET BEAUTY	re Feet	# 0	of Floors		Bldg.	Age	
East Orange								50,0	000	2			50+		
County (6)					Code (7)			Curre	ent Use (Prid	or if be	ing demo	lished)			
Essex				•	JSE ONLY										
Name of Monitoring Firm		Owner (8)		ASCN					atement Con						
AHERA Consultan	ts, inc.			0005) /				Construc	tion I	nc.				
Street Address P.O. Box 385							Street			:4- 4	4				
City, State, Zip Code									6 West Su	lite 14	4				
Oceanville, NJ 082	31						2000		tip Code NJ 07512						
Project Manager for Mor				Telephor	ne-No		Teleph	- 22			License	No			
Eric Clarkson	memig r min				52-1833		973-8				01155	310000000			
Start Date (10)		Schedule	d Co	mpletion (-			HA Monitor		000				
12/28/17		01/18/1		85	- 100 A		N/A								
Occupancy Status Durin	g Abatement (Che	ck Only On	e)				Street	Addre	SS				-		
➤ Facility Closed/Vac	ated During Entire	Period of A	bate	ment			N/A								
Abatement Perform Other – Describe:	ned Outside of Nor	mal Facility	Hour	rs			City, St	tate, Z	ip Code						
							N/A								
Scope of Work (Check A	II That Apply)	22.2													
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			enov				×	Fu	II Containme		h Negative	e Press	ure		
2 100 SI 01 2200 II			emol	ition					ni-Enclosure ovebag Proc						
									n-Exempted			iable Pr	ocedu	re	
		7.22	Loca	0.71.0										ement ype	t
Location			orma	ally ely by			escription						T	ype	Г
Asbestos-Containing TO BE AB		Mai	ntena	ance/			ntaining M al systems				Amount Specify	70		En	ш
In Faci		Custo	odial (12)	Staff?	(surf	acing, VA	T, or			F or LF)	Removal	Repair	aps	Enclosure
(13)			(, ~)			other	miscellan	eous)				oval	<u>===</u>	Encapsulate	sure
		Yes	No	N/A										0	
Boiler R	oom	X			F	lue P	ipe Insu	lation	n	3	00 SF	X		X	
		-												-	
		+		-								-	-	-	
Name of Registered Was	eta Hauler			NJDEP W	anto	C.L	c Yards		Name of F	Doo!-/	nenel 1 1	1611		l,	
			100	Hauler ID		of Wa				1576		IIIII			
Academy Construct	ion inc.		C	34422	ar stedard	3			GROW	S Lar	natill				
City, State							osal Date		City, State				10-11-20		
Totowa, NJ						TBD			Tullytow	n, P					
Completed by		Title					Signature	1	11	/		Date			
John Geleski		PM					-/1	3	Select	1		12/15	1/		
														- contract of	
ASB-41 (R-06-08)						/	* Do no	t use t	his form for	asbes	tos licens	ure exe	mpted	activi	ties.



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

Check # 4080

Date of Notification (1)				Name o	of Building ()wner/	Operator	(2)		Pres 1	F	<u></u>	C	П	1//	P
12/15/2017			100		cong Tov				ietrict	IIM	L	6	L		\mathbb{V}	
	ype Notification				Address	VIISIII	p odric	001 D	ISTITUT	Ims						
	FI resear		1:	321 St	tonehen	ae Dr	ive								-	
EPA DEP	Initial Amended				ate, Zip Co					T		EC-	2	- 2	017	
DOL	Amendment			Phillips	sburg, N	J 088	365									1
□ DOH	Emergency justification)				of Contact	-	-			Te	ephone	Num	ber	CHCHESO	nerodinaments	-
DCA [] Cancellation		le le	Brian F	Fleming						ASHL	.017			ROL	. &
				A	ILITY INFO	RMAT	TION				STATISTICS OF LAND	-	OVERHAL CO.	-anneada	THE STREET	
Name of Facility Where Ab	atement is Takin	g Place (3)					Туре	of Facility	(4)						
Lopatcong School									School (K-	12)						
Street Address									Subchapte					r.		
263 Rt 57									Other (i.e. etc.)	private	& comn	nercia	bullo	ings,	nome	es,
City (5)								Squa	are Feet	# 0	f Floors		В	ldg. A	ge	
Phillipsburg N.	J															
County (6)					Code (7)			Curr	ent Use (P	ior if be	ing dem	nolishe	ed)			
Warren County				(STATE	USE ONLY)	200										
Name of Monitoring Firm H	ired by Building	Owner (8)		ASCI	M No.		Name	of Ab	atement Co	ntractor	(9)					
RAMM							Nick	Rest	oration L	LC.						
Street Address	3			-			Street	Addre	ess							
77 Nottingham Rd							72 Br	ooks	ide Rd							
City, State, Zip Code							City, S	State, 2	Zip Code							
Fair Lawn							Rand	olph	NJ 078	369						
Project Manager for Monito	ring Firm			Telepho	ne No.		Teleph				Licen	se No				
Rodger Headrick			(201)4	75-9880		973-9	33-2	2550		0113	3				
Start Date (10)		Schedul	ed Con	pletion	Date (11)		Name	of OS	HA Monito	-						
12/27/2017		12/29/2	2017				IRIS									
Occupancy Status During A	batement (Chec	k Only Or	ne)				Street	Addre	ss							
Facility Closed/Vacate	d During Entire I	Period of	Abatem	ent			2333	RT 2	22							
Abatement Performed	Outside of Norn						City, S	State, Z	Zip Code							
Other - Describe: 2	7111					_	Union	n, NJ	07083							
Scope of Work (Check All T	hat Apply)															
≥3 sf or ≥3 lf		■ F	Renova	tion				Fu	II Containn	nent with	Negat	ive Pr	essur	e		
≥160 sf or ≥260 lf			Demolit	ion				Mi	ni-Enclosu	re						
									ovebag Pro on-Exempte		d Non-f	riable	Proc	cedur	e	
		le	Locati	on											ment	
Location of	:	10000	Normal			D	escription	o f				Į		Ту	pe	
Asbestos-Containing Ma	aterial (ACM)		d Sole		Asbest		taining N		I (ACM)	A	mount				m	
TO BE ABATI	ED		intenar todial S		(i.e.		l system		ation,		Specify		Rei	R	nca	Enc
(13)			(12)				acing, VA miscellar			Si	or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	1								a		late	re
0. 0.0		100		130/3												
Storage & Gym area			×		TSI					5 LF			X			
			-									-				
Name of Registered Waste	Hauler		LN	JDEP W	lasta I	Cubi	Yards		I Nome -	Paciet	rod I r	4611				
	i iaulei			auler ID		of Wa			Name of		red Lar	ICIIII				
Nick Restoration LLC			33	3782		TBD			G.R.O.	W.S						
City, State	107060					Dispo	sal Date	8	City, Sta	te						
Randolph, N	201009					TBD		100	Tullyto	νp, PA	A					
Completed by		Title				T	Signature	2/	1-1	1/11	7	Date				
Elvira Mrda		Presi	dent				4	10	109 l	1/1	4	12/1	5/2	017		

-		0.00	-			
Р	rı	nt	-	0	rm	٦

14 2455												Pr	int
Date of Notification (1) 12-7-2017		NOI	LName o	ate of New of OF ASBES to NJAC 8:6 f Building Ov Drive Com	STOS A 60 and wner/Op	BATEM 12:120 perator	(2)	BI			7 6	F	7
			Street A 540 R City, Sta	ddress avine Ct. ate, Zip Code					DEC 22	2017	7		
■ DOH ■ just	endment # ergency (includ ification) ncellation	ing		off, NJ 074 f Contact Cirino	181	y		ASB	ESTOS CONTENENT	Mbeo!	- &		1
Name of Facility Where Abatement Commercial Garages	t is Taking Plac	e (3)	FACI	LITY INFOR	RMATIO	ON	Type of	Facility (4)					
Street Address 75-81 Jordan Avenue				<u> </u>			☐ Su	her (i.e. priva	Other than K-1	2) ial buil	dings,	hom	es
City (5) Jersey City, NJ 07304							Square 3250	Feet	# of Floors 1	100	Bldg. A	ge	
County (6) Hudson			County (Code (7) USE ONLY)		_	Current	Use (Prior if	being demolis	hed)			
Name of Monitoring Firm Hired by	Building Owner	(8)	ASCN	1 No.				ment Contra conmental	ctor (9) Services, L	LC			
Street Address							Address /irginia	Avenue					_
City, State, Zip Code							tate, Zip ey City,	Code NJ 07304					-
Project Manager for Monitoring Fire	n		Telepho	ne No.			one No. 333-88	55	License N	No.			
Start Date (10) 12-8-2017	12-1	4-201	ompletion 7	Date (11)	100		of OSHA e as ab		To the second se				
Occupancy Status During Abateme Facility Closed/Vacated During Abatement Performed Outside Other – Describe:	g Entire Period	of Abate	ement urs				Address tate, Zip	Code					_
Scope of Work (Check All That App	oly)				-								_
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	×	Reno	vation olition			×	Mini-E Glove	Enclosure bag Procedu	with Negative ure and Non-Frial			9	
Location of		Is Loc			D			ZAGIIIPIGU ()	and Non-i na	DIC 1 TO	Abate		t
Asbestos-Containing Material (A TO BE ABATED In Facility (13)	ACIVI)	Jsed So Mainter Sustodia (12	nance/ Il Staff?		Contai	ystems ng, VA7	aterial (A insulation	ACM) on,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	
Roof	Ye									<u> </u>		ate	
Root		×		- H	Roofin	g mate	erial		3250 SF	x			-
Name of Registered Waste Hauler Green Environmental Service	es, LLC		NJDEP W Hauler ID	No.	Cubic Y		1	ACCOUNTS ACCOUNTS	istered Landfil				
City, State Jersey City, NJ 07304			0034889		5 Disposa 2-14		(City, State Morrisville		uiiii	_		
Completed by Liliana Serrano	Title Of		anager		Sig	nature		u Jek	D	ate 2-7-2	017		

17-12-12 12:55 440-1	P P		SHE	CAT	State of	page mental 1 >> i f New Jersey ASBESTOS ABA	609 633 06	E C) E		V	2
Date of Nantication (1)				(Purs	uant to N	UAC 8:60 and 5:	16)		ń o	2	201	7
12 /	12 /	17			Melissa A	ppost	(2)		· -			-
Agencies Nobiled	Type Notific	ation			neet Address							
	⊠ lobal				4661 120100		, }	ASBES	POS C	OOA	TRO)L
⊠ DOK	Amendo			CI	ly, State, Zi	o Code		L	CEA	SM	G	August 1
□ DCA	⊠ Ememen	EV finch	rd Ina			ve, NJ 08069			1			-
(sement 215249)	JUMENICAN	on)		Na	me of Con	lad		Telephone N		Name and Address of the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, where the Owner, which is the Owner, where the Owner, which is the Ow	VARIANCE (STORY	
	Concellar	Jon	militad & J.		Mollese A	bbott		I BUOLINES	lumber			
Name of Street			60		FACILITY	INFORMATION		~	-		-	
Name of Facility Where Abo	element is T	axing P	iace (3)		ONMATION	Type of Facility	(4)				
Abbott Residence Sirest Address				-			School (K-1: Subchapler Other (La., p	(Other than K	-12) mercial	bulld	lings,	
Pennsgrave							Square Feet	# of Floors		die.		_
Saurey (8)	-			13			2 555		- 1	1	Age	
Salem				00	punty Code	(7)(STATE USE OHLY)	Current Use (Pri	or if being dam	cilshor	1		-
Name of Monitoring Firm His	red by Both	na Own	mr (Ct	1			Rosidence			E:		
Management & Enviro	o. Consult	no Sa	er (6) Nibas	ASC	M No.	Name of Abelema	ont Contractor (8)				-	PARA.
Sirest Address			41448				nmental, LLC					
PO Box 341						Street Address			-	-	-	-
CRy State, Zip Code						623 Cutler Av						
Chesterfield, NJ 08615	5					City, State, Zip Co						HATTINANI)
Project Manager for Manitori			7.	lephon	a ble	Maple Shade,	NJ 08052					
Bill Walsgarber					6 Na. 18-4070	Telephone No.		License No.			-	-
Sian Doie (10)	Se	hedular	Come	lation r	ate (11)	858-755-0099		00842				
12 / 18 / 1	17	12	1 .	14 /	17	Name of OSHA M						-
Occupancy Status During Ab	stoment (C)	امد نامد				Street Address	al, ιπ¢.		oog meeting			
LE PROMEY Closed/Vacated Di	utino Entire	Barbar .		ment		200 Route 130	Mant					-
THE PROPERTY OF STREET AND ADDRESS OF STREET	FRIME OF LIAM	MARIE CAN	dit t.t.		aoribe	City, State, Zip Cor		**************************************				
The same of the sa	_^	_PM/	Ph	1	_AM	Cinnaminson,						-
Scope of Work (Check all that	(apply)	CONTRACTOR ON		-					-			
⊠ ≥3 sfor ≥3 ¥ □ ≥160 af er ≥260 f			tenova	lon		Glovebac	Inment with Nega sure Procedura pled (*) and Non-		ura			
Location of		1	Nami	n like					-	Atem	ent T	
Asbestos-Containing Mases TO BE ABAYED	rial (ACM)	Us	ed 80	Bly by	Asber	Description of stos Containing Mate	risi (Arten	A		-	-	-
IN Focial			stodial	Staff?	(i.e.	_ Demil suctame in	eniaties .	Amount (Specify	Removal	Rugate	N.	-
(13)		-	(12)		4	surfacing, VAT, e other miscellaneou	r 6)	ਉਸ ਹੈ। ਪੁਸੰ)	3	-	Escapaulado	The same of the
		Yes		N/A			-				de	1
Basement			X		Pipe Ins	ulation		75 LF	+=	-	_	-
asement			X		Tank Ins				X			
		吉	-	-	i = tirt Hill	- MANO(I		25 SF	X			C
		_								П		Ī
				0					-			_
Sam of David			-	-	Vacto I	Cubic Yards of	I B					
Jamo of Registered Westo Hat	ulor		N	JDEPY			MITTE OF RACHESIA	RE LONGE	-			
Freshold Cartage	ule:		H	auler ID	No.	Wante	GROWS Nort	ed Landfill h Landfill				
Freshold Cartage	uler		H	JDEP V auler ID 15939	No.	Waste	GROWS Nort	ed Landfill h Landfill				
Freshold Cartago Phy, Stale Freshold, NJ	uler	1	H	auler ID	No.	Waste	GROWS Nort	h Landfill				
ity, Stale	TK	le	H	auler IC 15939	No.	Disposal Dato 12/14/2017	GROWS Nort	h Landfill				_

CK 6181

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

•						to NJAC				In E	E C	EI	WI	3 F	7	
	e of Notification (1) /11/17					f Building Contracti					2 🔍			The second secon	The state of the s	
Age	encies Notified Ty	pe Notification			Street A 783 No	ddress ewark A	ve				DEC	22	2017	i i	7	
×	DEP DOL	Amended Amendment				ate, Zip Co / City, N		306		AS	SBESTO	OS CON	ITROL	. &	\neg	
×	DOH DCA	Emergency (i justification) Cancellation	including			f Contact s Rivera		G.		And the second		·SINSIN	ч.	maked to 1	was end	
Nor	ne of Facility Where Aba	tomont in Takina	Dlaga (2/	FACI	LITY INFO	ORMA	TION	T	f F 11th -	(4)					
	3 Newark Ave	ternerit is Taking	, riace (3)					Тур	e of Facility School (K-						
	eet Address 3 Newark Ave								×	Subchapte Other (i.e. etc.)	r 8 (Othe			dings,	home	es,
	rsey City								Squ	are Feet	# of	Floors	E	Bldg. A	ge	
	inty (6) dson	9 8				Code (7) USE ONLY)		Cur	rent Use (Pr	ior if bein	g demoli	shed)			
Nar	ne of Monitoring Firm Hir	ed by Building C	Owner (8))	ASCN	1 No.				atement Co AD PROFE						
Stre	eet Address							Street 6 WI		ess DOVE C	OURT					
City	, State, Zip Code	2								Zip Code OOD, NJ 0	8701					
Pro	ect Manager for Monitori	ng Firm			Telepho	ne No.		Telepi 732-		No. 9078	2	License 1200	No.		20100-000	
	t Date (10) /21/17		Schedul 12/27/		npletion I	Date (11)				SHA Monitor		NALS				
Occ	upancy Status During Ab	patement (Check	Only Or	ne)				Street								
×	Facility Closed/Vacated Abatement Performed (Other – Describe:	During Entire P Outside of Norm	eriod of all Facility	Abatem y Hours	nent			City, S	state,	Zip Code						
	pe of Work (Check All Th	nat Apply)						LAK	EVVC	DOD, NJ 0	18701					
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		MACHINE STATE OF THE PARTY OF T	Renova Demoliti					M G	ull Containm lini-Enclosur lovebag Pro lon-Exempte	e cedure				e	
				Locati											emeni vpe	t
	Location of Asbestos-Containing Mai <u>TO BE ABATE</u> In Facility (13)		Use Ma	Normall ed Sole aintenar todial S (12)	ly by nce/		tos Co therm sur	Description ontaining National System facing, VA miscellar	Materi s insu T, or	ılation,	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A										Ф	
	EXTERIOR							SIDING				0SF	х			
	EXTERIOR	?					F	ROOFIN	G		90	0SF	x			
				L												
NE	ne of Registered Waste F WARK CARTING	nauier		Н	JDEP W auler ID 1509		1	ic Yards /aste		Name of IESI	Register	ed Landt	III			
NE	, State WARK, NJ						1000000	osal Date 27/17		City, Stat		PA				
	npleted by SEPH PERLSTEIN		Title OWN	NER		***************************************		Signature	9				ate			

	RECEIVED				00PM 2013	297440	1	BEST REMOV	/AL	INC	-	
7 2017 12:36 NJ Ast	pestos Control	609,63	3.066	4	F	age 1		EGEI	$\overline{\mathbb{V}}$		The second second	
4374			9					K 4374			-	
				TCATIO	State of New Jens IN OF ASSESTO II to NJAC 8:60 :	SABATE	MENT	ASBESTOS CO LICENS	DNT ING	ROL	&	
Date of Notification (1)			-	Name o	Building Owner		2)] 1	0.00000		+		-
1 Z / 7/	Type Notification		_			THO	MPSON	<u>il''</u>	1			
D EPA	Torcial		ĺ	Stant A	ddorth				/			
DEP DOL	Amended		Ì		ate, Zip Code		12.13	O COLD IN CO. IN	-	7		\vdash
-	Amondment Emorgency (i	netuding		M	Contact	PAR	IC L NJ:	07432	•••••			1
D DCA	justification) Caroellation		-		IL. THOM	PEON		Telephone Num	545			
Name of Pacifity Where					LITY INFORM							_
Police of Partity of Marie			PSO	٠.	,		Type of Pacifity					
Street Address					•		School (K-1	8 (Other than K-12)				
City (5)							-Er Osher (i.e. p	rivete & commercial	builds	ngs, he	enes, 1	etta.)
Mioh	AND PARK	_			***		Squara Feet	# of Floors	E	ide.	# 4	ς .
County (6)				County	Code (7)			r if being demotished	,	17	-1 .	٠.
Name of Monitoring Firm	The state of the s			2600 C 0000 C	USE ONLY)		1	ESIDEN CE				
a money or reconstruction a state	STHOOL ON DRINGING OF	ATTC: (B)		ASC	No.	0.000	of Abstement Cost	***				
Street Address							t Romana				-	_
City, Space, Zip Code						450	South Ri	ver Stree	t			
and the same of and						10000	hnie, Zip Code KETIS & C.K.,	NI 07601				
Project Manager for Moni	coring From		T	Telephon	ne No.	Telaph	ione No.	Licerase No		_		
Start Dise (10)		Schedule	of Court	Harian D	th ZIII	201	-329 - 7440	0038	8			
12/12/1				2/13								
Occupancy States During						1	Pa Enviro					
D Abatement Performs Other - Describe:	and During Entire For d Outside of Normal 1	od of Aha acility Ho	itement Nutra			280 City S	Huyler S	treet				
L		2 5:	55 1					sack. NJ	076	06		
Scope of Work (Check Al	That Apply)											
☐ ≥160 sf æ ≥260 kg			Renova: Demolít			-8	Mini-Enclosure Glovebag Proce	duc		<i>(</i> 2000)		
		1	s Locati	STI STI	T -		Non-catampung	(9) and Non-Priable)	Proced	Abab	omen's	
Locario Asbestos Contafning	n of		Normali ed Solel	5		Description		gazerszeszten	-	· T)	pe sq	_
TO BE AS	ATED		aintenar modial S			scom lasti	laterial (ACM) lation, surfacing	Amount (Specify	7	200	Fine	E
(13)			(12)		othe	VAT. or miscellan		SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							12	
BASEMEN	τ			1	THERMAL S	STEM	ושפעונתוסטו	9545	79			
		1										
Name of Registered Waste	· ·	1_										
			H	M 43GL	No. of W	ic Yards	I CHARLES SANGO	Registered Landfill				
Best Removal	Inc			1710		>-/-	/ MINE	rva Enter	DF1	Ses	,	LLC
Hackensack.	N.I. 07601				Diap	12/13/	7 Chy, Star	70	·		•	
Completed by		Title				Signature	1	esburg, OF				-
J. Maiorano		Est	ime	tor		_ <u> </u>	reisem		12	17/	7	
ASE 41 (R-06-03)					ř	U.	Do not use this for	m. Soc estrectos licensu	NA exio	mpted	activ	itius.

NOTIFICATION OF ASBESTOS ABATE (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 14 / 17 12 Disantis Contracting, LLC Agencies Notified Type Notification Street Address **⊠** EPA 313 Halyard Road ☑ DOLWD ☐ Amended City, State, Zip Code **⊠** DOH Amendment #_ ASBESTOS CONTROL & Ortley Beach, NJ 08751 LICENSING ☐ DCA ☐ Emergency (including Name of Contact Telephone Number (NJAC 5:23-8) justification) ☐ Cancellation Frank Disantis **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Lavallette 700 sf 1 65 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Ocean Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Guardian Contracting, Inc. Street Address Street Address 1889 Route 9, Unit 61 City, State, Zip Code City, State, Zip Code Toms River, New Jersey 08755 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 732-349-9932 00624 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12 / 26 / 17 12 / 27 / 17 E.M.S.L. Analytical Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 1056 Stelton Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-__AM Piscataway, New Jersey 08854 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ >3 sf or >3 If □ Renovation Mini-Enclosure □ Demolition ≥ 160 sf or ≥ 260 lf ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Encapsulate Remova Repair Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A exterior X asbestos siding 700 sf X П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Guardian Contracting, Inc. T.R.R.F. 20223 3 City, State Disposal Date City, State Toms River, New Jersey 12/27/17 Tullytown, Pennsylvania Completed By (Print or Type) Title Signature Date Nicholas Fernicola Project Manager

State of New Jersey

24.74

State of New Jersey

- al	2	NO		OF ASBESTOS to NJAC 8:60 an) [CEI	\mathbb{V}	E	n	
Date of Notification (1) 12-7-2017		10		f Building Owner/ Drive Compan				EC 22	201	7	IJ,	
Agencies Notified	Type Notification		Street A 540 R	address avine Ct.					Name of the last			T
DEP DOL	Initial Amended Amendment	#		ate, Zip Code off, NJ 07481		- Vertical	ASBE	STOS CO LICENSII	NTRO VG	L &		
× DOH	Emergency justification)	(including		f Contact			Tel	ephone Nun	nber			
☐ DCA	Cancellation			ILITY INFORMAT	ION					-		
Name of Facility Where A Residential	Abatement is Takin	g Place (3)		7		Type of Facili						
Street Address			<u></u>	1/10		Subchar	ter 8 (Oth	er than K-12 & commercia		dings, l	nome	S,
City (5) Jersey City, NJ 073	04		18	1		Square Feet 2000	# o	f Floors		ldg. Ag 0+	je	
County (6) Hudson		·	County (STATE	Code (7) USE ONLY)		Current Use (Prior if be	ing demolish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCI	M No.		of Abatement n Environm			.C			
Street Address					Street A	Address 'irginia Ave	nue					
City, State, Zip Code						ate, Zip Code y City, NJ (7304					
Project Manager for Mon	itoring Firm		Telepho	one No.	Telepho 201-3	one No. 33-8855		License N 01174	0.			
Start Date (10) 12-8-2017		Scheduled 12-14-20	Completion)17	Date (11)		of OSHA Moni as above	tor					
Occupancy Status During	g Abatement (Chec	k Only One			Street A	Address						
Facility Closed/Vaca Abatement Perform Other – Describe:					City, St	ate, Zip Code						
Scope of Work (Check A	II That Apply)											
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf			novation molition		× ×	Mini-Enclo Glovebag I	sure Procedure	h Negative F			1	
		A000000000	ocation rmally		L100.00.00.00.00.00.00.00					Abate Typ		
Location Asbestos-Containing TO BE ABA In Facil (13)	Material (ACM) ATED	Used Main Custo	Solely by tenance/ dial Staff? (12)	Asbestos Cor (i.e. therma surf		aterial (ACM) insulation, Γ, or	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No N/A	<u>_</u>	_						е	
Roof			X		fing mate			000 SF	х			
House per		1	X	1000000	ingle sid			000 SF	x			
Basem	ent		X	Pip	e insulat	tion		60 LF	X			
Name of Registered Was	ete Hauler		NIDERN	Masta Cubi	c Vards	Name	of Pegist	ered Landfill				

Name of Registered Landfill Hauler ID No. of Waste Green Environmental Services, LLC G.R.O.W.S. North landfill, 0034889 10 City, State Disposal Date City, State Jersey City, NJ 07304 12-14-2017 Morrisville, PA Completed by Title Signature Date Liliana Serrano Office manager 12-7-2017 CL 33337 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT PA [D (Pursuant to NJAC 8:60 and 5:16)



Date of Notification (1)	Na -		Name	of Building	Owner/C	Operator (2)	ME	GEI	VIS	1	1	
/	17		Unl	imited Ho	omes				<u> </u>	7 5	1	8	7
Agencies Notified Type Notifica	tion		Street	Address						047		Ш	
			PO	Box 205					DEC 222	U1/		7	
☑ DOLWD ☐ Amended			City, S	State, Zip C	ode								
□ DOH Amendme		-	Brie	elle, NJ 08	8730		-	101	BESTOS CON	TROL	2		
DCA Emergence (NJAC 5:23-8)		ig	Name	of Contact				AO	Telephone Num				
☐ Cancellati			Rol	ert Schw	vartz		le	Andrews machine (+ 1	f	ACCUSATION OF THE	NAME OF TAXABLE PARTY.	CHOOL WAT	
			FA	CILITY IN	FORMA	TION							
Name of Facility Where Abatement is T	aking Plac	e (3)					Type o	f Facility (4	4)				
Residence							☐ Sch	nool (K-12)					
Street Address									(Other than K-12		ما المان		
								nes, etc.)	vate and comme	rciai bu	illaing	S,	
City (5)							Square		# of Floors	Bl	dg. Ag	ie .	
20 124							250		2		65		1
County (6)			Cour	nty Code (7)	VSTATE II	SE ONLY			or if being demoli				
			Oou	ity oode (i)	NOTHIE O	OL ONL!)		idence	n n bonig domon	onou)			
	ina Owno	· /0\	ASCM	No	Nomo	f Ahatam		tractor (9)					
MIDIT MANUEL ST.	ing Owner	(0)	ASCIVI	NO.	100000000000000000000000000000000000000	dian Co							
N/A							ntracti	ng, inc.		4			
Street Address					Street A								
						Route 9		51				1,000	
City, State, Zip Code						ate, Zip C							
					Toms	s River,	New Je	ersey 087	755				
Project Manager for Monitoring Firm		Te	lephone	No.	Telepho	ne No.			License No.				
					732-3	349-9932	2		00624				
A) 12					Name o	f OSHA N	/Tonitor						
12 / 29 / 17	01	/ _ 0	2 /	18	E.M.S	S.L. Ana	lytical						
Occupancy Status During Abatement (C	Check only	one)			Street A	ddress							
☐ Facility Closed/Vacated During Entir	e Period o	f Abat	ement		1056	Stelton							
					City, Sta	ate, Zip C	ode						
Time of Abatement:AM	PM/	PN	Λ	AM	(200	25 25		ersey 088	354				
Scope of Work (Check all that apply)						• • •							-
								t with Neg	ative Pressure				
≥3 sf or ≥3 lf ≥3 sf or >360 lf		lenova] Mini-End] Gloveba		dure					
⊠ ≥100 st 01 ≥200 tr		CITIOII	.1011						n-Friable Proced	ure			
		ls Loc	ation							Ab	atem	ent T	уре
Location of		Norm			De	scription of	of			D	D	т	m
Asbestos-Containing Material (ACM)		lely by			taining Ma			Amount	Removal	Repair	Encapsulate	Enclosure
	10.00		I Staff?	(1.e		I systems cing, VAT		on,	(Specify SF or LF)	ova	=	psu	Sur
(13)		(12	2)			niscellane			/	-		late	G.
	Yes	No	N/A										
exterior				asbesto	os sidin	g			3500 sf				
	П	П	П										
Name of Registered Waste Hauler			NJDEP	Waste	Cubic Y	ards of	Nam	e of Regist	tered Landfill				
Guardian Contracting, Inc.			Hauler I 2022		Waste 4		Т.	R.R.F.					
City, State					Disposa	al Date	City,	State					
Toms River, New Jersey					01/02	2/18	Tu	illytown,	Pennsylvania				
Completed By (Print or Type)	t Address State, Zip Code ct Manager for Monitoring Firm Date (10) pancy Status During Abatement (Check only acility Closed/Vacated During Entire Period of Datement Performed Outside of Normal Facilime of Abatement: a MPM/ e of Work (Check all that apply) S of or ≥3 If So of or ≥260 If Location of Sebestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Yes rior Cu ardian Contracting, Inc. State ms River, New Jersey Dieted By (Print or Type) Title					gnature	1	1	// [Date		1	
Nicholas Fernicola	CRO-D-LOW-OOK	ct Ma	nager			- and Control	1	12/1	1	12/	18/	17)

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



							line)	Westerf Const Co	end.	S. COMMAN		
Date of Notification (1)	18 /	17				Owner/Operator (EGE	IVER	73	3	20	7
						ilig, ELC			1	-) 1	
Agencies Notified EPA	Type Notificat	tion			Address Leighter	Avenue		Miles and a service of the service o				
☑ DOLWD	☐ Amended				tate, Zip C		J DEC 22	2 2017 19	4			
⊠ DOH	Amendme	_		Description Co.		nt, NJ 08742						
DCA (NJAC 5:23-8)	☐ Emergenc justificatio		3		of Contact		ASBESTOS C	Telephone Numb	er			-
(NJAC 3.23-6)	Cancellation				c Dai		LICENS	NO.	1			
						FORMATION						
Name of Facility Where	Abatement is Ta	aking Place	(3)	170	71E11 1 1141	ORMATION	Type of Facility ((4)				
Residence		J					School (K-12					
Street Address								(Other than K-12)	ial bu	ildina		
							homes, etc.)	ivate and commerc	iai bu	maing	S,	
City (5)							Square Feet	# of Floors	Blo	dg. A	ge	
Point Pleasant							600 sf	1		65		
County (6)				Coun	ty Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)	T.		
Ocean							Residence					
Name of Monitoring Firm	Hired by Buildi	ing Owner	(8)	ASCM I	No.	Name of Abateme	ent Contractor (9)					
N/A						Guardian Co	ntracting, Inc.		440			
Street Address						Street Address						
						1889 Route 9						
City, State, Zip Code						City, State, Zip Co						
	April 1 and persons		1= .	11.0			New Jersey 08					
Project Manager for Mon	nitoring Firm		I ele	phone I	No.	Telephone No. 732-349-9932	1 77	License No. 00624				
Start Date (10)	9	cheduled C	`omple	tion Dat	0 (11)	Name of OSHA M		00624				
12 / 29 /	A0000 - 10000	01 /				E.M.S.L. Ana	A DIVING TOO					
Occupancy Status During		St. was a street				Street Address	iy tioai					
☐ Facility Closed/Vacate				ment		1056 Stelton						
☐ Abatement Performed	(6.25)				cribe	City, State, Zip Co	nde			_		
Time of Abatement: _							New Jersey 088	854				
Scope of Work (Check a	Il that apply)					,,					_	
	-						tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		-	enovat emoliti			☐ Mini-End	closure g Procedure					
					·			n-Friable Procedure	е			
	_	143	S Loca Norma				_		Ab	atem	ent T	1
Location Asbestos-Containing		1.1	ed Sol		Asbes	Description of stos Containing Ma		Amount	Re	Repair	Enc	Enclosure
TO BE ABA	ATED	Ma	aintena	nce/ Staff?		., thermal systems	insulation,	(Specify	Removal	pair	caps	closi
IN Facil (13)	ity	Ous	(12)			surfacing, VAT other miscellane		SF or LF)	<u>a</u>		Encapsulate	re
(.0)		Yes	No	N/A			.525/				O	
exterior					asbesto	s siding		600 sf				
exterior					flue pip	е		10 sf				
			П	П					П	П	П	П
Name of Registered Was	ste Hauler		1	JDEP V	Vaste	Cubic Yards of	Name of Regis	stered Landfill	1-			
Guardian Contract			1200	lauler IE 20223	No.	Waste 3	T.R.R.F.					
City, State						Disposal Date	City, State					
Toms River, New J	ersey					01/02/18	Tullytown,	Pennsylvania				
Completed By (Print or T	ype)	Title				Signature		// Da	te /	1		
Nicholas Fernicola	8	Projec	t Man	ager			M: to	1 1	2/1	81	1/7	7

^	N	10				12		,	Check	0.0	\ <u>\</u>	•	
(D) (A)	711	NOTIFI	St CATION	ate of New I OF ASBE	Jersey	BATEM	ENT		TE GE	20	// F		7
\[\bu \]		(Pu	ırsuant	to NJAC 8	3:60 and	12:120)				U	<u>U</u> [7	
Date of Notification (1) 12-18-1	7		Name o	f Building C	S to	perator (2	1/1	51	ONSEC 2	2 21)17	-	
Agencies Notified Type Notification	F1.6 N	137 1	Street A	ddress	ハチ	1		K	1 2115		4.	. 1	
☐ EPA Initial ☐ Amended			City, Sta	ate, Zip Coo	de	100	MILUG	1 -	ASBESTOS (TNO	ROL	&	
DOL Amendment:					rwo	xxl	, · N	-) 07	92	7		vertex-stand
DOH justification) DCA Cancellation			Name	f Contact haz	Fo	ley			Tolont	,			
Name of Eacility Where Abatement is Taking	Place (3)	FACI	LITY INFO	RMATIO		Type of Fa	cility (4	4) خ	-			
Single family		vell	ing				□ Şchoc	0.730					
Street Address	1			e e		5	Subch Other etc.)	apter (i.e. p	8 (Other than K-1 rivate & commercial	2) ial buil	dings,	home	es,
City (5) South Orange	Λ	15	:	,	*		Square Fee	et	# of Floors	E	Bldg. A	ige H-	
County (6)		(County (Code (7) USE ONLY)			Current Use	e (Pric	or if being demolis	hed)	,,		
Name of Monitoring Firm Hired by Building C	wner (8)		ASCN	No.		Name of	Abatemer	nt Con	tractor (9)	io.	\$	In	. 1
Street Address Box 3	37			4 - 4 - 4		Street A	ddress	28	337	3		100 C	
City, State, Zip Code	NJ	5	80	533	3		te, Zip Coo	de	ZIA ta	0	8	13	3
Project Manager for Monit Iri gy-irm	2	The second	Telepho	ne No. 7 <i>5</i> 8-3		Telepho	100	37	License N	io.	19	4	
Start Date (10) 12-28-17			pletion	Date (11)		Name of	OSHA Mo	nitor	mologies	I	00		
Occupancy Status During Abatement (Check			-	-		Street A	ddress		٦			NETTE.	
Facility Closed/Vacated During Entire P Abatement Performed Outside of Normal							te, Zip Coo		337				
Other – Describe: Scope of Work (Check All That Apply)						Nec	u Egy		TU	285	53	3	
≥3 sf or ≥3 lf	28 F	Renovat	ion				Full Cont	ainme	ent with Negative I	ressu	re		
☐ ≥160 sf or ≥260 lf		Demoliti				1	Mini-Enc	losure g Proc				Α.	
	Is	Location	n				TOTAL EXO	I. Dicoc	() and Holl Had	T	Abate	ement	
Location of Asbestos-Containing Material (ACM)		Normally ed Solely		Achaote		cription o	f terial (ACN	4)	Amount	-	1 9	pe	
TO BE ABATED	100	intenan todial S			thermal s		nsulation,	',	(Specify SF or LF)	Ren	Re	encal	Encl
In Facility (13)		(12)			other mis				37 07 21)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							1		е	
Basement	X			Pipe	I	sulo	ition	,	100 LF	X			
	-							-		+			
								-		+-			
Name of Registered Waste Hauler		1000	JDEP W	0.000	Cubic Y		Nan	ne of F	Registered Landfil	1			
EPC Technologies	>	Ha	uler ID		of Wast	d	W	ash State	e Manage	nen	to	F P	A
1 1 4 5	NJ	· s				29-1			isville 1	PA ate			
Steve Schenker	PRE	side	nt		Sig	nature See	e)So	IL.	h	2-1	8-	17	



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

Check # 4081

			(Pt	ırsuant	to NJAC	8:60 and	12:120)	200			п	17 1	7 5	-
Date of Notification (1)				Name o	f Building	Owner/Op	perator	(2)	In	1E	C E		V	5	M
12/16//2017			I	Mine H	till Scho	ool Distr	ict			1-15	0 1				111
Agencies Notified	Type Notification			Street A					H	5			nic Port	- 1	
-	E Liver		4	2 Car	nfield Av	ve					DEC. 2	2 2	2017	1	الكا
EPA DEP	Initial Amended			City, Sta	ate, Zip Co	ode			111	4	0111				
DOL	Amendment #			/line H	lill, 078	03				1			-		
DOH	Emergency (in justification)	ncluding			f Contact		-			Tele	phone N	amber!	TRO)L&	
DCA	Cancellation			Carolin	na Rodr	iauez			1	I AU				MACTHER	al Property and a
						ORMATIO	N		Recogni						
Name of Facility Where	Abatement is Taking	Place (3	3)					Тур	e of Facility	(4)					
School									School (K-						
Street Address									Subchapte				dinac	home	20
42 Canfield Ave									Other (i.e. etc.)	private o	commen	ciai buii	uirigs,	HOITE	28,
City (5)	7							Squ	are Feet	# of	Floors	E	Bldg. A	ge	
Mine Hill, N.	J														
County (6)					Code (7)	n		Curi	rent Use (Pr	ior if beir	ng demoli	shed)			
Morris				SIAIE	USE ONLY		-								
Name of Monitoring Firm	n Hired by Building O	wner (8))	ASC	И No.		Name	of Ab	atement Co	ntractor	(9)				
Aero Environmenta	al					1	Nick F	Rest	toration L	LC					
Street Address							Street	Addr	ess						
275 Rt 10 East						17	72 Br	ooks	side Rd						
City, State, Zip Code							City, S	tate,	Zip Code						1
Succassuna, NJ 07					7/1				, NJ 078	69					
Project Manager for Mor	nitoring Firm		- 1	Telepho			Teleph	one l	No.		License	No.			
Michael Berta					20-9061		97393				01133				
Start Date (10)	1			pletion	Date (11)		. 10 (0.00.00.00.00.00.00.00.00.00.00.00.00.0	of OS	SHA Monitor						
12/28/2017		2//29/					RIS								
Occupancy Status Durin	ng Abatement (Check	Only O	ne)				Street								
	cated During Entire Po								22 West						
Other – Describe:	ned Outside of Norma	al Facility	y Hours						Zip Code						
							Jnion	, N	J 07083						
Scope of Work (Check A	All That Apply)						F	3							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoliti						ull Containn Iini-Enclosu		Negative	Pressu	ire		
E 100 SI 01 E 200 II			Jemoni	1011				H 10	lovebag Pro						
								N	on-Exempte	ed (*) and	Non-Fria	able Pro		2.42.25.20.20.10	
			Locati											ement	t
Locatio		1000	Normal	200			cription						Τ,	PC	
Asbestos-Containing TO BE AB			ed Sole aintenar			stos Conta . thermal s					nount pecify	70		Ē	ш
In Faci		Cus	todial S	Staff?	(1.6		ing, VA				or LF)	Remova	Repair	cap	nclo
(13)			(12)			other mi	iscellar	eous	;)			ova	ar.	Encapsulate	Enclosure
		Yes	No	N/A										6	(0
Halloway various lo	ocation		×		TSI					60 LF			X		
, , , , , , , , , , , , , , , , , , , ,					1.0.					00 21		+	1		\vdash
		-		-	-					-		+	-		H
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Name of Registered Wa	ste Hauler			JDEP Wauler ID		Cubic Y			Name of	Register	red Landf	ill			
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City, State	0000000		100	20010	_	Disposa	al Date		City, Sta	ite					
Randolph	, NJ					TBD			Tullyto						
Completed by		Title				Sig	gnature	;	1	,		Date			
Elvira Mrda		Presi	dent				Ell	111	a l	loa	le 1	2/16/2	2017		

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Date of Notification (1)		Т	Name o	f Building C	Owner/Opera	ator	(2)		1					H
12/18/17					truction C				K					711
Agencies Notified Type Notification	n		Street A	ddress						DEC	2 2	201	7	+++
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EPA Initial Amended Amendme			City, Sta	ite, Zip Cod	ie									
∑ DOL Amendme		_	Berlin	NJ 0800	9			ĺ	A	ASBEST	OS CO	NTR	OL &	
DOH justification	y (including		Name o	f Contact						ephone N				
☐ DCA ☐ Cancellation			Chris	Nugent					1	-				
			FACI	LITY INFO	RMATION									
Name of Facility Where Abatement is Tak	ing Place (3	3)					Type	of Facility ((4)					
Mercer County Court House								School (K-1	(2)					
Street Address		8						Subchapter					400,000	
209 North Broad St.								Other (i.e. petc.)	orivate &	& comme	rcial bu	ldings	, home	es,
City (5)								re Feet	# of	Floors		Bldg. A	\ge	
Trenton NJ 08625							100		5		1	35+		
County (6)		T	County	Code (7)				nt Use (Pri	or if bei	ng demol				
Mercer				USE ONLY)			hou			3 20.1101				
Name of Monitoring Firm Hired by Building	Owner (8)		TASCN	/ No	Na	ame		tement Cor	ntractor	(9)				
N/A	, (0)		. 10011				aco l			(0)				
Street Address			1				Addres						-	
Oli Cot Address							Box 3							
City, State, Zip Code						00		ip Code						
oity, State, Zip Code					1			in NJ 080	104					
Design Manager for Manifester Fire			Talaaba	NI-					791	11	01-			
Project Manager for Monitoring Firm			Telepho	ne No.	4 533		one N			License 00727				
01-15-1-70	101-11			D-1- (14)			753-9			00727				
Start Date (10)			npietion	Date (11)				HA Monitor						
1/2/18	1/31/1					am								
Occupancy Status During Abatement (Ch	eck Only Or	ie)			Str	reet	Addres	SS						
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:					Cit	ty, S	tate, Z	ip Code						
Scope of Work (Check All That Apply)											AV AV			
	EZI -					1	7							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				E		l Containm ni-Enclosure		Negative	Press	ure		- 1
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Location of		Normal d Sole			Descrip						-	т.	T	\vdash
Asbestos-Containing Material (ACM) TO BE ABATED		intenar			os Containir thermal syst					mount Specify	77		四	m
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(13)		(12)			other misce					MONTH NO.	ova	air	sula	Sur
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Name of Registered Waste Hauler		51.5	JDEP W	10 17 1 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Cubic Yard	ds		Name of	Registe	red Land	fill			
Horizon Disposal Ser.		- 63	iauler ID 0416	NO.	of Waste 10			G.R.O.	W.S.					
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City, State					Disposal D			City, Stat		A 19067	7			
Trenton NJ	T				1/3//18			IVIONIS	VIIIC P					
Completed by	Title	14			Signa	ature	1				Date	117		
Anthony T Perna	Pres	ident					-	-			12/18	111		- 1

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

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I Ц	DEC	22	2017	

(P	ursuant	to NJAC	8:60 and 12:120))	DEC 22	017	11	L	
Date of Notification (1)	Name	of Buildin	g Owner/Operator	H COM	FRACTIN	6		y	
Agencies Notified Type Notification		Address	55 RT	50	LICENSING	ROLE	2	1	_
DEP Manended Amendment #_ Emergency (including	City, S	State, Zip (code ITEM FIT	LO N'	J 082		THE REAL PROPERTY.	-	_
DOH justification justification	Name	of Contac	LUCE		Telephone Numb	er 			_
	FAC	CILITY INF	ORMATION						_
Name of Facility Where Abatement is Taking Place (3)				Type of Facility School (K-1	2)				
Street Address				Other (i.e., p	8 (Other than K-12 private & commercia) Il buildi	ings,		
City (5)				homes, etc. Square Feet	# of Floors		g. Aç		
MARGATE		. O-d- /	7) /CTATE	1500	rior if being demolis		50	Т	=
County (6) ATL AWTIC		ONLY)	7) (STATE	VAC	LANT		- 11		_
Name of Monitoring Firm Hired by Building Owner	ASCM	No.		nent Contractor (S	IN C				
Street Address			Street Address			,			
			369 City, State, Zip C		EUCE ALL			_	-
City, State, Zip Code			MAP	LE SH	ADE MI, J	0	80	52	=
Project Manager for Informationing 7 mm.	elephone			9-0472		14			_
Start Date (10) Scheduled Comp		te (11)	Name of OSHA	Monitor N /	<i>t</i>				_
Occupancy Status During Abatement (Check only one	9)		Street Address						
Facility Closed/Vacated During Entire Period of Aba Abatement Performed Outside of Normal Facility He	tement		City, State, Zip C	code			_		=
Other - Describe:								_	=
Scope of Work (Check all that apply)				ntainment with Ne	egative Pressure				
			Mini-End Gloveba Non-Ext	an Procedure	on-Friable Procedu	re			
Is Loca							bater Typ		
Location of Used So	lely by		Description of tos Containing Mat	f terial (ACM)	Amount			m	
Asbestos-Containing Material (ACM) TO BE ABATED Mainten Custo	dial	(i.e.,	thermal systems i	nsulation,	(Specify SF or LF)	Ren	Repair	ncap	Enclosure
IN Facility (12 (13)			surfacing, VAT, other miscellaned	ous)	0, 0, 2, 7	Removal	pair	Encapsulate	sure
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10						+-	_		
						+	-		
	NUDEP		Cubic Yards	Name of Reg	gistered Landfill				
Name of Registered Waste Hauler KITMACO INC	Hauter IC		of Waste	A	CUA				_
City, State	1//		Disposal Date	City, State	4S HUITVIL	IE	-		
MAPLE SHADE NI.)			Signature -	1/20	Date		<u> </u>	7	
Completed By KLEMM SUP	,		_ 24	WIL					

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



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Date of Notification (1)	-15-17			Name	of Buildin	g Owner/Operator	LODNIK	ASDESTOS CON	ITRO	1 &		
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Agencies Notified	Type Notification			Sueer	70	0 Hau	KNI K	NE			UNLTRENG.	-
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MS DOL □DEP	Amendment #		_	City, O		EXAM C	ITY 1	J. J 08	22	6		
	Emergency (in	nctuding	' -	Name	of Contac			Telephone Number	Ħ			
XIDOH □DCA	justification)			INGILIC	SAV							_
] WA												
				FAC	ILITY IN	ORMATION	Type of Facility	v (4)	-			_
Name of Facility When	e Abatement is Takir	g Place	(3)				School (K-1					
R	ESIDENCE						Subchapter	8 (Other than K-12)				
Street Address				–				private & commercia	buildin	ngs,		
							Square Feet	# of Floors	Bld	g. Ag	e	_
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County (6)				Coun	ty Code (ONLY)	7) (STATE	MACI	ANT				
CIAU	E MAY					I New of Alberta	nent Contractor (_
Name of Monitoring Fit		Owner		ASCM I	V 0.	Name of Abater	O INC	-				
(8) W	1/4		_			KLEIN	0 7100	. 1		_		=
Street Address	-					Street Address	SPRIX	- 1/11-				
Street Addition			8			369.3	. JPKU	E MOE				=
City, State, Zip Code						City, State, Zip (SHAPE	W. J 08	05	Z		
City, State, ap occo						MAPCE	THURE	License No.	93	_		=
Project Manager for M	lonitoring Firm		Tele	phone I	No.	Telephone No.	9-0472		44			
Project Malogor 10	97					826-11	7-0176	-				_
Start Date (10)	Sche	eduled C	omple	tion Da	te (11)	Name of OSHA	Monitor					
12-26-1	7 "	1 -	3 -	-18			NIA					_
Occupancy Status Du	ring Abatement (Che	eck only	one)			Street Address						
TH Family ClosedN/20	ated During Entire P	enod of	Abate	ment								
Abatement Perform	ned Outside of Norma	al Facilit	y Hou	rs		City, State, Zip	Code					
Other - Describe:												
Scope of Work (Chec	k all that apply)					☐ Full Co	ontainment with N	legative Pressure				
		По	enovat	ion		☐ Mini-Er	nclosure	1 (72)				
≥3 sf or ≥3 lf			emotitic			Glovet	pag Procedure	Non-Friable Procedu	re			
≥160 sf or ≥260 lf		بعو				PANOTE	xempled () and i	1	A	bater	ment	
			Location							Typ	е	_
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Asbestos-Containin	on of or Material (ACM)	Mai	ntenar	nce/	Asbe	stos Containing Man, thermal systems	aterial (ACM)	(Specify	R	D	Encapsulate	
TO BE A	BATED		ustodia Staff?		(i.e	surfacing, VA	T, or	SF or LF)	Removal	Repair	psu	
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(13)	-		Tim	1						-	
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				LIDED	Mode	Cubic Yards	Name of Re	egistered Landfill				
Name of Registered \	Waste Hauler			NUDEP Hauler II		of Waste	C. U) . !	Д		
KLUMCO	IWC.			179	Dil_	3		1, 5, 10, 0				
City, State						Disposal Date	City, State	ODBINE	- 19			
MAPLE	SHADE	N.J					_	Date				=
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IVALI HINEL -												

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



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Date of Notification (1)	18-17			Nar		ARD+ W	200000000000000000000000000000000000000	ASBE	STOS CONT	[BOL	8 1	E	A
Agencies Notified	Type Notificati	on		Str	eet Address		THUE	V	CIDANS	1			+
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□ DCA	☐ Cancellation			1401	TIV			///	L.	DC1		TRO	18
				1=				- 1-	ASBES	100	000	C	MAN.
Name of Facility Where A	Abstament is Tal	ina Dla	20 (2)	۲.	ACILITY	FORMATION	I Time of F	oility (4)	ASBES	105	200	and the same	
I value of Pacifity value of	RESIDEN	1. E	ce (3)				Type of Fa	1	Market States . W.				
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Street Address								i.e., privat	e & commerci		lding:	3,	
City (5)	DWOOD	CI	12	T			Square Fe	et #	of Floors	В	Bldg. A	- 33	
County (6)	DWOOD	CVC			unty Code (7) (STATE	Current Us	e (Prior if	being demolis	shed)	50		_
CAPE	MAY			US	E ONLY)			VACK					
Name of Monitoring Firm (8)	Hired by Building	Owne		ASC	il No.	Name of Abaten							
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Street Address						Street Address	0 0	20 4	r- 11 .				
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City, State, Zip Code						City, State, Zip C		HADE	WJ	081	70	7	
Project Manager for Moni	toring Firm		Tel	ephone	e No.	Telephone No.		TL	icense No.				.5
	:#2		_	877		856-7	19-04	72	0041	14			
Start Date (10)	Sch	•			ate (11)	Name of OSHA	Monitor	1					
12-26-1		1-	3 -	18			M	/A					
Occupancy Status During	Abatement (Ch	eck onl	y one)			Street Address							
Facility Closed/Vacated	d During Entire P	eriod o	f Abate	ment									_
Abatement Performed	Outside of Norm	al Facil	ty Hou	irs		City, State, Zip C	ode	-					548 (T)
Other - Describe:													_
Scope of Work (Check all	that apply)					Π F. W C		- No	- D	9			
☐>3 sf or ≥3 lf		ПR	enovat	ion		☐ Fui Cor	ntainment with	n Negative	e Pressure				
1 ≥160 sf or ≥260 lf			emolitic			Gloveba	g Procedure						
		7				Non-Exe	empted (*) an	d Non-Fri	able Procedur	_			_
		100	Location Location			•				1 4	Abater Typ		
Location of			Sole			Description of		1		_	. ,,,		_
Asbestos-Containing Ma			ntenan			os Containing Mat			Amount			ᄪ	П
TO BE ABATE IN Facility	<u>D</u>	1	ustodia Staff?	si	(I.e.,	thermal systems in surfacing, VAT,			Specify F or LF)	Ren	Re	Car	nclo
(13)			(12)			other miscellaneo			,	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A						<u>B</u>		ate	Э
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Name of Registered Waste	Hauler		11 1100	JDEP V		Cubic Yards	Name of F	Registered	d Landfill				
KLIMCO.	Duk		H	auter ID	No.	of Waste	(M ((I MI)	И			
City, State	274		-11	170	4	Disposal Date	City, State		y Ville		_		
	LADE N	J						1000 L	MIE	NI.	5		
Completed By	Title		21 -		2	Signature	0.00	,	Date	15-	17	-myesa.	
MICHAEL GO	wal	SUL	tin	1120	16	- Mee	VX) M	_	-116	()	1/		

KX4400 State of New Jersey OTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) 2 2 2017 Name of Building Owner/Operator (2)
PINELIAMOS Date of Notification (1) DNSTRUCTION Type Notification Street Address Agencies Notified ESTOS CONTROL & LICENSING DEPA M Initial Amended City, State, Zip Code Amendment # DOL 08243 SEA Emergency (including DOH DCA justification) Name of Contact Cancellation FRAMI FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) RESIDENCE School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) 500 ISLE CITY County Code (7) (STATE Current Use (Prior if being demolished) County (6) USE ONLY) VACHALI Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner KLUMC Street Address Street Address 369 City, State, Zip Code City, State, Zip Code MAPLE Telephone No Project Manager for Monitoring Firm Telephone No. 856-77 Name of OSHA Monito Scheduled Completion Date (11) Start Date (10) 17 -71-17 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: Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure Renovation Glovebag Procedure Demolition 2160 sf or ≥260 lf Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Used Solely by Description of Location of Asbestos Containing Material (ACM) Amount Maintenance/ Asbestos-Containing Material (ACM) (Specify (i.e., thermal systems insulation, Custodial Removal TO BE ABATED Staff? surfacing, VAT, or SF or LF) IN Facility other miscellaneous) (12)(13)N/A Yes No TRAW SITE SIDIN

City, State

MICHAC

Name of Registered Waste Hauter

NUDEP Waste Hauter ID No. Cubic Yards of Waste Name of Registered Landfill

Disposal Date City, State

VODD BIWE

Completed By Title Title

Signature -

Date 12-17-17

- 1 -00	Y													Prir	nt Fo
ac 6531	NO		ATION (te of New OF ASBES NAC 8:	STOSA	BATEN		FIRE		GE					
Date of Notification (1) 12/18/17				Building O v Wurst l						EC 2	2 20	17		الا	
Agencies Notified Type Notification		S	treet Ad	dress					- SALLOWING CO.	ALCOHOLOGIC CONTRACTOR		-	1 0		71
☐ EPA ☐ Initial									ASBI	ESTOS (CON I SING	RC	La		\perp
DEP Amended Amendment	ŧ	- 22		e, Zip Cod wn NJ 0				Description of the Control of the Co	THE REAL PROPERTY.		- MATERIAL PROPERTY.	Dist			
X Emergency (i			lame of		70130				Tel	ephone N	lumbei				
☑ DOH justification) ☐ DCA ☐ Cancellation		1.8	Brian	oomaa											
	D. 701		FACIL	ITY INFO	RMATIC	NC	т.	as of Facility	74)						
Name of Facility Where Abatement is Taking Andrew Wurst Private Home	Place (3)						ly	pe of Facility							
Street Address							H	School (K- Subchapte	r 8 (Oth						
							X	Other (i.e. etc.)	private	& comme	rcial bu	ıildi	ngs,	home	s,
City (5)					8		933	uare Feet	# 0	f Floors			dg. A	ge	
Waretown NJ 08758							17.3	+000	1				5+		
County (6) Ocean			County C STATE U	ode (7) SE ONLY)			1000	ırrent Use (Pr ouse	rior if be	ing demo	lished)				
Name of Monitoring Firm Hired by Building C	wner (8)		ASCM	No.		Name		Abatement Co	ontractor	(9)					
N/A						Perr	nac	o Inc.							
Street Address				3)		Street		dress (329							
City, State, Zip Code								, Zip Code							_
City, State, Zip Code								erlin NJ 08	3091						
Project Manager for Monitoring Firm		Т	elephon	e No.		Teleph				License					
21-4 2-4- (42)	Cabadulad	Com	plotion F) oto (11)				3-9800 OSHA Monito	r	00727					_
Start Date (10) 1/2/18	Scheduled 1/8/18		pietion L	Jale (11)		Sam		JOI IA MOIILO							
Occupancy Status During Abatement (Chec	Only One)				Street	Add	dress							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:			ent		_	City, S	State	e, Zip Code							
Scope of Work (Check All That Apply)						_									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	novat moliti				2	1	Full Containr Mini-Enclosu Glovebag Pro Non-Exempto	re ocedure						
	lo I	ocatio	n					TYON-Exchipt	1	id (voil-)	Tubic i		Abate	ment	
Location of	No	ormall	y		Des	scription	n of				-		Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Custo	tenan	ice/		thermal surface		as in		(Amount Specify F or LF)		Remova	Repair	Encapsulate	Enclosure
R 93	Yes	No	N/A											ite	е
exterior siding			х		exte	rior si	ding	g	12	200 SF	2				
floor tile			x		Be	edroor	ns		2	00 SF	2	2			
kitchen & living room			Х		Vin	yl floo	ring	}	6	00 SF	2	2			
							-21.75								
Name of Registered Waste Hauler United Containers		Н	JDEP W auler ID 2459	2015	of Wa	Yards ste			D.W.S.	ered Lan	atill				
City, State Elm NJ					Dispo:	sal Date	Э	City, St Morris		PA 1906	57				
Completed by	Title			TOTAL LO		Signatur	e			1	Date			nutra se	
Anthony T Perna	Presid	dent				C	1				12/1	8/	17		

Print Form

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State of New Jersey
Notification of Asbestos Abatement
(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

19/1		الا	(Pur	suant to N.J.A.C	. 8:60-7 and 12:120-7)	Tarres .	FC	FIVED
Jate of Notification (1)	. // 14	k A=1 0			Name of Building Owner/Op	perator (2)) E (05 05 11
12/15/17	-	2769			Roxbury Public Schools	110	4	
Agencies Notified		Notification	Type		Street Address 42 N. Hillside Avenue		111	EC 2 2 2017 1
⊠ EPA	101	Initial No		j	City, State, Zip Code	14	4	
□ DCA ⊠ DOL		☐ Amended		aatiaa (inalustiaa	Succasunna, NJ 07876			
□ DEP		justification)		cation (including	Name of Contact Mr. Leo Coakley	. -	Telepho	ne Number NTROL &
⊠DOH		☐ Cancelled			Board President			SING
				FACILITY INI	FORMATION	been		
Name of Facility Where Abatems	ent is Ta	eking Place (3)	PACILITY IN	Type of Facility (4)			
Franklin Elementary Sch			<u> /</u>		图 School (K-12)			
Street Address				***************************************	Subchapter 8 (other tha		دادات	
8 Meeker Street					Sq. Feet: # of Floors: 1 Blo		1964 1964	iomes, etc.)
	(C)		0	0-1-77	Current Use (prior if being of		Element	ary School
City (5) Count Succasunna	y (b) Morr	ris		y Code (7) Use Only)				
Succasuma	111011		Totato	OSC Omy				
Name of Monitoring Firm Hired b	y Bldg.	Owner (8)	ASCM	l No.	Name of Contractor (9)			
Street Address					Panoramic Window & Doo Street Address	r Systems	Inc.	
Street Address					712 Sergeantsville Road			
					A CONTROL OF STATE OF			
City, State, Zip Code					City State, Zip Code			
Project Manager for Monitoring F	irm	Telephone I	Vumber		Stockton, NJ 08559 Telephone Number		License	Number
					P (732)926-0900		01237	
Scheduled Start Date (10) 12/26/17		Scheduled (02/02/18	Complet	ion Date (11)	Name of OSHA Monitor			
12/20/17		02/02/10			IAQ GURU LLC			
Occupancy Status During Abater					Street Address			
☐ Facility Closed/Vacated During ☐ Abatement Performed Outside	g Entire	Period of Al	oatemer	nt 3:00-11:00nm	87 Main Street			
Describe	01 14011	man admity i	iours	5.00-11.00piii	City, State, Zip Code			
□Other – Describe:								
Liother – Describe:					Lincoln Park, NJ 07035			
Course of Mode (Obsole all that a								
Source of Work (Check all that a	ppiy)							
≥ 3 sf or ≥ 3 lf				⊠ Renov	ation \square N	Mini-Enclos	ure	
⊠ ≥ 160 sf or ≥	260 lf			□ Dem		Glovebag		е
	r			T		n-Friable P		
Location of Asbestos- Containing Material (ACM) in		cation Norma Solely by	illy		sbestos Containing Material rmal systems insulation,	Amou	nt ify SF or	Abatement Type
Facility (13)		./Custodial S	staff?	surfacing, VAT,		LF)	119 01 01	Remove Repair Encap Enclose
The state of the s	(12)							
Exterior 119 Floor to	YES	NO	NA 🗵	AC	M perimeter caulk	1852	F	
ceiling window wall				1	in perimeter oddik	appro		X
openings & 31 windows								
in punched masonry								
Name of Reg. Waste Hauler		NJDEP Was	ste Haul	ler ID #	Cubic Yards of Waste			f Registered Landfill
Panoramic Window & Dr Sys II	nc	0036057					Chrin Br	os. Sanitary Landfill
	10					Disposal D	ate	City, State
								Easton, PA
								1
Completed by (Print or Type)		Title			Signature		Date	
Mark M Jovic		PM			VIXh	/	12/15/17	7
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1100														Pri	nt Fo
CK 1296.		OTIFI (P	ursuant	ate of New OF ASBE to NJAC 8	S:60 and	ABATE 12:120	0)	T [0,5	i C	E		\mathbb{V}		M
Date of Notification (1) 12-07-17				Building (ella Dem		perator	(2)			DE	C 2	2	2017		凹
Agencies Notified Type Notification			Street A	ddress orest Av											
EPA Initial Amended		-		te, Zip Co						ASBES	TOS	CO	VTRO)L&	
DOL Amendment Emergency		_		lanover l		36				(170 m)	LIUL	and control of the	- DATE OF THE PARTY OF THE PART		
DOH justification Cancellation				Contact Caravella	3				Tel	ephone	Numi	ber			
Name of Facility Where Abatement is Takin	a Diago (2	2)	FACI	LITY INFO	RMATIC	NC	Tyr	oe of Facility	(4)			_			
Private Home	y Flace (3)						School (K-	164 M						
Street Address				-				Subchapte Other (i.e.	er 8 (Oth				linas	home	oe.
City (5)					10-14-30-14		E Sou	etc.) uare Feet	S. Paragamento	f Floors	ah ta daga ka	0.00			,
City (5) Paterson													ldg. A	ge	
County (6) Bergen			County (Code (7) USE ONLY)			Cui	rrent Use (Pi	ior if be	ing den	nolishe	ed)			
Name of Monitoring Firm Hired by Building (N/A	Owner (8)		ASCN	1 No.				batement Co ontracting		(9)					
Street Address		•				Street 522						77-52 127.		0-15-5	
City, State, Zip Code								Zip Code							
								ity NJ 070	87						
Project Manager for Monitoring Firm			Telephor	ne No.			216	-9603		0120	se No)6	•			
Start Date (10) 12-11-17	Schedule 12-22-		npletion I	Date (11)				SHA Monito ontracting							
Occupancy Status During Abatement (Chec	k Only Or	ne)				Street 522		1) (전) (전) (조) (조) (조) (조) (조) (조) (조) (조) (조) (조							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm					-		9/178756	Zip Code							
Other – Describe:					_	1500		ity NJ 070	87						
Scope of Work (Check All That Apply)						Г	٦.								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit					-	Full Containn Mini-Enclosu Glovebag Pro	re ocedure						
	I lo	Locat	ion					Non-Exempte	ed (*) an	d Non-	Friable		Abate		
Location of	1	Vormal	lly	410 MV NO	Des	cription	n of						Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	d Sole	nce/	Asbest (i.e.	tos Conta thermal	aining N system	Mater s ins	rial (ACM) ulation,	1	mount Specify	- 1	R	77	Enc	g
In Facility (13)	Cus	todial ((12)	ыап?			ing, VA	T, o	r	S	F or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									<u>a</u>	7	ate	re
Entire Property		×		Dem	olition .	Asbes	stos	Debris				X			
Name of Registered Waste Hauler		1	JDEP W	/aste	Cubic '	Yards		Name o	f Regist	ered La	ndfill				
Caravella Demolition Inc		4	lauler ID 356	No.	of Was				IESI						
City, State E. Hanover, NJ 07936					Dispos	al Date)	City, Sta Bethle		A					
Completed by	Title	tuvar				ignature	8	10		- 1 T	Date				
Jaime Delgado	Proj.	Mana	ager.				/	10			12-	07-	17		

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

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		1,000	•		4

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Date of Notification (1) 12/14/17					Building C				. IID	15	6	5 1	A			
Agencies Notified	Type Notification			Street Ac	dress										111	\parallel
□ EPA	M Initial									,	DEC	5 5	50	17	L	1
DEP	Amended			City, Stat	te, Zip Coo	de		i ii		1					T	
☑ DOL	Amendment		-	Love la	adies N	J 080	80			VOE	RESTO	9.00	NITE	201	2	\neg
☑ DOH	Emergency (justification)	including		Name of	Contact					Tele	phone l	Numb	iG.	1111		
DCA	Cancellation			Jim	· ·				Localitation				_	,	2000	SULLING HAR
				FACIL	ITY INFO	RMATI	ION									
Name of Facility Where		g Place (3)						Type (of Facility (4))						
Jimmy McEnerney	Private Home				4		1		School (K-12		- 0 1	(40)				
Street Address								図	Subchapter 8 Other (i.e. pri etc.)				uild	ings,	home	s,
City (5)						V.		Squar	e Feet	# of	Floors		Ble	lg. A	ge	
Love ladies NJ 080	800							1000)+	1			3	5+		
County (6) Ocean				County C	ode (7) ISE ONLY)			Currer	nt Use (Prior	if beir	ng demo	olished)			
Name of Monitoring Firm	Hired by Ruilding (Jumer (8)		ASCM	No		Name	20,000	ement Conti	ractor	(9)					
N/A	Timed by building (Swile (0)		ACCIVI	140.			naco li		20101	(0)					
Street Address							,	Addres		-				-		
2100171001000								Box 32	3.5							
City, State, Zip Code									p Code							-
Oity, Otato, 2.p oodo									n NJ 0809	91						
Project Manager for Mon	itorina Firm			Telephor	ne No.			none No			Licens	e No.				
. rojestinanager ist indi					170000			753-9			0072	7				
Start Date (10)		Schedule	d Con	npletion [Date (11)		Name	of OSH	A Monitor							
12/23/17		12/29/1	7				Sam	ie								
Occupancy Status During	g Abatement (Chec	k Only One	e)				Street	Addres	s							
Facility Closed/Vaca	ated During Entire F	Period of A	batem	nent							٥					
Abatement Perform	ed Outside of Norm	al Facility	Hours				City, S	tate, Zi	p Code							
Other – Describe: _					V-00-0-00	_										
Scope of Work (Check A	ll That Apply)															
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≥160 sf or ≥260 lf		D D	emolit	ion			lesis	-	i-Enclosure vebag Proce	dura						
							>		vebag Proce n-Exempted		Non-F	riable	Proc	edure)	
		le	Locati	on									1	Abate	ment	
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Asbestos-Containing			d Sole ntena			os Con	taining N	Naterial			mount				ш	m
TO BE ABA			odial S		(i.e.		I system icing, VA		tion,		pecify or LF)		Ren	Re	ncal	incl
In Facili (13)	ity		(12)				miscellar			Oi	01 11)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									2		ate	ē
exterior siding bel	hind attached			х		exte	erior sid	ding		30	00 SF		x			
Shed	S															
Name of Devision of Name	sto Uouton		1 8	JDEP W	laste	Cuhia	Yards		Name of R	anieto	red I an	dell			9952	
Name of Registered Was	ste naulei		10000	lauler ID		of Wa				177	TOU LUIT	am				
United Containers			2	2459		2			G.R.O.V							
City, State						1.0000000000000000000000000000000000000	sal Date		City, State							
Elm NJ						12/2			Morrisvi	ile P/	1906					
Completed by		Title				3	Signature	9				Date	1 / 12	7		
Anthony T Perna		Presi	dent				(A COLUMN THE PROPERTY OF THE PARTY OF THE PA			12/	4/1	1		

CV N1/1/1	sarg.	Tr	10								Pr	rint F
CK 2468	1 /	NOTIF	CATION	ate of New Jerse OF ASBESTOS to NJAC 8:60 an	ABATE	MENT						
Date of Notification (1) 12/8/2017	77 "	, (.	Name of	Building Owner/ of Passaic		650		EGE		7 [1
Agencies Notified Type Notification	1		Street A		Venue		Inno	DEC 2	2 20	17		\parallel
X EPA		-	City, Sta	te, Zip Code			best been	0.00			-	
Emergency	(including	-	Paters Name of	on, NJ 07503			A	SBESTOS Telephone	CONTR	ROL	3	
X DOH justification X DCA Cancellatio			Mr. Jac	ck Nigro			Some	reichilotte	ADD THOSE		Andrew Marie	-
Name of Facility Where Abatement is Taki	ng Place (3)	FACII	LITY INFORMAT	ION	Type of	Facility (4)					
The Westervelt - Vanderhoef Hou	se						hool (K-12)	011 11 11	. 10			
768 Paulison Avenue							ner (i.e. priva	Other than Kate & comme		dings	hom	es,
City (5) Clifton						Square 2,800	Feet	# of Floors 2	0.085	3ldg. <i>F</i> 90	ge	
County (6) Passaic			County C	Code (7) USE ONLY)				being demo Recreatio				
Name of Monitoring Firm Hired by Building LANGAN Environmental Services)	ASCM 00099				nent Contra ting, LLC	ctor (9)				
Street Address 300 Kimball Drive					- W. C.	Address Valley	Road, Su	ite K				
City, State, Zip Code Parsippany, NJ 07054					City, S	State, Zip						
Project Manager for Monitoring Firm Vijay Patel			Telephor	ne No. 660-4900	Telepl	hone No.) 928-50		License 00874				
Start Date (10) 12/18/2017	Schedul 12/31/	ed Cor	mpletion E		Name	of OSHA		00011	20			
Occupancy Status During Abatement (Che					(55)	Address	ung, LLO					
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	Period of mal Facility	Abater y Hour	ment s		· City, S	State, Zip (
Scope of Work (Check All That Apply)		108-3-3 (F			Way	ne, New	Jersey 0	7470				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli			2	Mini-E Glove	nclosure bag Procedi	with Negative ure and Non-Fri				
	16.5	Locat	2000000				xempled ()	and Non-Fi	able F10	Abate	ement	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Norma ed Sole aintena todial ((12)	ely by nce/	Asbestos Con (i.e. thermal surfa		Material (A s insulatio \T, or		Amount (Specify SF or LF)	Remova	Repair	e Encapsulate	Enclosure
	Yes	No	N/A						'al	-	late	Ire
Basement - Work Area # 1		Х		Pipe	Insula	ation		60 LF	x			
Basement - Work Area # 2	-	X		Pipe	Insula	ation		100 LF	х			
Manage of Davids and Manage of Davids												
Name of Registered Waste Hauler Service Transport Group, Inc.		1	IJDEP Wa lauler ID 1 0990		Yards ste	17.00		istered Land nterprises,				
City, State New Castle, Delaware				Dispo: TBD	sal Date		City, State Waynesbu	ırg, Ohio				
Completed by Predrag Sarcev	Title Vice	Presi	ident	3	Ignature				Date 12/8/20)17		

2017 15:52 NJ Asbestos Con	trol 60	9.633	.0664			page	1	[Tana	EG	E \	M		-11	111
12/15/2017 12:48 20128	20321				AMA	С		1101-				F	AGE	
UL 1029		нот	FICATI	TO MINES	Navy Jorse SBHSTOS NO 8:50 an	y ABATE	三味理料 201					117	1	
Date of NothCatton (1)	7	7	Name	of Bulla	na Owner	Öürenstr	W (2)	+	ASBES	TOS (SIN	Ğ		
According to the Apallian Control Cont														
ACTIFICATION BY, ABBIERTOS, ABAPTEMENT Politic of North April 19 Politic														
DOH justificatio	n)	¥g	1	1477	ع − Sw	ETZ						•		
Name of Factify Where Abatement is Tal	ung Prace	(3)	FA	CILITY IN	FORMAT	OM	Trun	n of the office	745					
		(4					8	School (K Subchapt Other (I.s.	-12) or 8 (Other i	laun K-1	12) Seel 50	Miller	n hoe	Plaket
WAST CALDWELL							Bou	erc.)	A of F	oons.		ENd's.	Age	ros,
			County	y Code (7 Euglis Om	n			rent Use (P			(000)	6	7	
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Start Date (10)	Schedu	led/Co	mpigion	O# (11)					0158				
ACTION CARRIAGO (1) Polit of NorthCaston (1														
MOTE CATEON DE ASBEST COS ASAPTEMENT (Paragraphs of NAJA B 655 and 18-120) Diffe of NorthCaspon (1)														
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	199												Pi	
	dendi '			·	**************************************		Qio	ni-Enclosus Ovebse Pre	DROUPS				10	
Location of									Per description of the last	ar P Com Co	Ī	Abat	brevere	
Assessor Containing Meternal (ACM) TO BE ANATED In Facility	Use	of Sole Interestodial S	ly by need	As bee	themsel a themsel a surfaci	ning Mi yeteme ng, VAT	etorisi Insula . or	(ACM) sVan,	(හිරුපත්	fy	Rano			Enclos
1.5	Yes	No	N/A		hish-down a second		,		Y. W. L. L. W. L. L. W. L. L. W. L.		E .	4	の選択	ENTH
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wark Carting, Inc.	,	H	Ol volus				*				Lan	<u>-</u> l		
Newark, N.J. 07105		****			Disposal	01/7	امدہ	City, State						
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

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Date of Notification (1)	19 /	17				of Building		er/Operator (2	2)	ME	CEIV	2			
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Agencies Notified EPA	Type Notifica	tion				Address 5 East Ve	etera	ns Highway	,		DEC 22 20	11/		1	
⊠ DOLWD	Amended	nt #			City, S	tate, Zip C	Code				AND A CO. A LT	2001	2.	7	
□ DCA	Amendme		ludina		Jac	kson, NJ	085	27		AS	BESTOS CONT	HOL	QL.		
(NJAC 5:23-8)	justificatio		luuliig		Name	of Contact	t				Telephone Numb	er		STATE OF THE PARTY	
	☐ Cancellati	on			Bill	Mershor	1								
					FAC	CILITY IN	IFOR	MATION				*			
Name of Facility Where A	Abatement is T	aking	Place	(3)	111156-112		15,15,25,03100		Туре	of Facility (4)		-		
Building										chool (K-12)					
Street Address											(Other than K-12) ivate and commer		ildina	c	
315 Beachview Ave	enue									omes, etc.)	ivate and comme	CIAI DU	liulrig	5,	
City (5)		=							Squa	re Feet	# of Floors	Blo	dg. Ag	ge	
Manahawkin									600	00 sf	1		60		
County (6)					Coun	ty Code (7)(STAT	TE USE ONLY)	Curre	nt Use (Pri	or if being demolis	hed)			
Ocean									Bu	ilding					
Name of Monitoring Firm	Hired by Build	ing Ov	wner (8)	ASCM	No.	Nan	ne of Abateme	ent Cor	ntractor (9)					
Guardian Contracti	ng, Inc.						G	uardian Co	ntract	ting, Inc.					
Street Address							Stre	et Address							
1889 Rte. 9, Unit 61							18	889 Route 9	, Unit	61					
City, State, Zip Code							City	, State, Zip Co	ode						
Toms River, New Je	ersey 08755						To	oms River,	New .	Jersey 08	755				
Project Manager for Mon	itoring Firm			Tele	phone	No.	Tele	phone No.			License No.		-		
Nicholas Fernicola				73	2-349	-9932	73	32-349-9932			00624				
Start Date (10)	S	chedu	led C	omple	tion Da	te (11)	Nan	ne of OSHA M	onitor						
01 /02 /	18	01	1/	_ 12	/ _	18	E.	.M.S.L. Ana	lytica	I					
Occupancy Status During	Abatement (C	Check	only o	ne)			Stre	et Address							
□ Facility Closed/Vacate	ed During Entir	e Peri	od of	Abater	ment		10	56 Stelton							
☐ Abatement Performed							City	, State, Zip Co	ode						
Time of Abatement: _	AM	PM	/	_PM-	<u> </u>	AM	Pi	iscataway, l	New J	Jersey 088	354				
Scope of Work (Check al	I that apply)			V-1											
≥3 sf or ≥3 lf			☐ Re					☐ Mini-Enc	losure		ative Pressure				
≥160 sf or ≥260 lf		,	⊠ De	ПОШИС	m			☐ Gloveba ☑ Non-Exe			n-Friable Procedu	re			
			Is	Locat	ion							Ab	atem	ent T	уре
Location				lorma d Sole				Description of			200	R	Z.	Ш	ш
Asbestos-Containing TO BE ABA)		intena		Asbe	stos (Containing Ma rmal systems	iterial ((ACM)	Amount (Specify	Removal	Repair	ncal	nclo
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(13)		4	V	(12)	NI/A	-	oth	er miscellane	ous)					ate	
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Name of Registered Was				1325	IJDEP \ lauler II		Cub	ic Yards of ste			tered Landfill				
Guardian Contracti	ng, mc.	-3-11-			20223		30	0		.R.R.F.		7.5-5-0-0	Tary Inc	(1545)	
City, State Toms River, New Je	ersev							osal Date 1/12/18	1	, State ullytown,	Pennsylvania				
Completed By (Print or T	~~~~ .	Title					-	Signature	HÀ			ate /	1		
Nicholas Fernicola			oject	Man	ager		6.0	Signature	_	al)		7/1	7	

18 2017 16:50 NJ Asbestos Cont 017-12-18 10:40 Date of Neilification (1)		Shac	le En	State of ON OF uant to I	of Now Jorsey ASBESTOS ABA UJAC 8:60 and 5:	609 633 (TEMENT 18)			10	P 2	2/4 2 20
12 / 18 /	17		Na	ma of Sui	Iding Owner/Operator	(2)		ASBE	STO	FNIC	ONTR
								,1	1	-140	SIIVG :
				****				1	0	- 23 - 27 (2)	
Ø DOH Amendmen	nt#	-						-			
OCA S:23-8) Smergens	(inclu	ding	100	Andford	Lakes, NJ 08055		,	a			
	'n		100000		Control of the Contro		Talaphone No	redmu	,		-
Name of Facility Where Abatement is To	king Pi	ace (3	-	7916171	INFORMATION	Tuna of Early	6. (4)				
Street Address						School (K	(y (4) -12)				
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OHy (5)								uercie!	o ulid	ings,	
Modford Lakes						1	# of Plopre				
County (6)			Ćq	unty Code	(7)(STATE USE ONLY)		100		80		
Burlington		-Constant				Residence		NS790)		
Management & Enviro. Constitu	a gen	er (B)	ASC	VI No.	Name of Abatems	ant Contractor (9)		-	- Carrie	
Street Address	2 0e:	AIRES				onmental, LL	<u> </u>				
PO Box 341						(Om tran					
City, State, Zip Code		-						_			
Project Manager for Monitoring Firm	-				Maple Shade						
Bill Weisgarber							License No.				
Start Date (10) Sch	12 19 17 Emilia Elimoya Trispa Nonfaction Street Address Street Address District Amendment st										
12/19/17	12	1 _ 2						4157000			
Occupancy Status During Abatement (Che	ck only	one)									
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THE ALMOST ALBERT AND THE PROPERTY OF THE PROP	PM	_PA	4-	_AM							
Scope of Work (Check all that apply)				-							
☐ ₹180 81 01 ₹360 Ä	-	amoli	làn	74	☐ Glovebea	Procedure		146			
Location of		None	n Phy				10000	The Person Name of Street, or other Designation of the Person of the Per	alan	i inst	VID.
Asbestos-Containing Material (ACM)	Us as	ed Se	laly by	Asb	88105 Containing Mate	MAI /AMER	Amount		-	_	O' Seculations
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1107	Yea	-	-	1	other miscalleneou	(£u	or or LP)	1		utate	100
Laundry Room, Hall & Basement	-		-	Vormi	uilles Calling to	-61		+	_	_	
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	-	-	Name and Address of the Owner, where the Owner, which the Owner, which the Owner, where the Owner, which the				W-044		Q		
	-	1	-	-							
Name of Registered Wasta Haular		14		Mante					-	-	
Freehold Cartage	·*	F	auter (C	No.							
City, State			15939		Clacesal Date		orth Landfill	4			
Freshold, NJ							PA				
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	A	NOTIFI	CATIO	tate of Ne V OF ASB to NJAC	ESTOS	ABATE	MENT		I C	EI		E						
Date of Notification (1) 12/11/2017	P	7	Name o	of Building ence	Owner/0	(2)		<u> </u>	ا كا	l W	<u> </u>							
Agencies Notified Type Notification			Street A	Address					DEC	, 22	201	7	الا	/				
X			City, Sta	ate, Zip Co	ode			ASBESTOS CONTROL &										
■ Emergency (ii justification) ■ DCA ■ Cancellation	ncluding		Name of Contact Telephone Number Akeem Valley															
Name of Facility Where Abatement is Taking	3)	FAC	ILITY INF	ORMATI	ON	Type of	Tune of Equility (4)											
Residence	,,					_	pe of Facility (4)											
Street Address						Sul	School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,											
City (5) Irvington					Square Feet # of 1458 2			oors		3ldg. <i>A</i> 11	dg. Age							
County (6) Essex	County (6) Counts (STAT																	
Name of Monitoring Firm Hired by Building O A. Seine Lighthouse Solutions		ASCN	M No.			Name of Abatement Contractor (9) Brinks Tank Services							1					
Street Address PO Box 354					200000000000000000000000000000000000000	et Address 56 Liberty Avenue												
City, State, Zip Code South Orange, NJ 07079					tate, Zip (de, NJ (
Project Manager for Monitoring Firm Sarah Calandra		Telepho 201-34	ne No. 19-2666		100000000000000000000000000000000000000	one No. 462-746	5	License No. 01316										
12/26/17	Date (11)		Name of OSHA Monitor A. Seine Lighthouse Solutions															
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Pe		ont				et Address Box 354												
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	l Facility	Hours	ent		_		State, Zip Code th Orange, NJ 07079											
Scope of Work (Check All That Apply)																		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf						×	Mini-E Glove	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure					۵					
	377	Locati							The Country He				Abatement Type					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) In Facility (13) In Facility (13)					tos Cont thermal surfac	Description of Containing Material (ACM rmal systems insulation, urfacing, VAT, or			Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure				
(13)	Yes	No	N/A		other n	niscellan	leous)				val	Ħ	ulate	ure				
Basement X					Pip	oe Wra	р		20 LF		X							
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic	Yards	N	lame of Re	gistered	I Landfill								
Newark Carting			auler ID 1509	No.	of Was		ν	Vaste Ma	70									
City, State East Orange, NJ					Dispos	al Date		ity, State Penn Argy	yle, PA	4								
Completed by Alison Lamers Title Office Man					S	Signature Date												

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21, 17 191			St	ate of New J	ersey			N							
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Date of Notification (1) 12/13/17	J	2 5	Name of Leroy	Building Ow	ner/Operate	or (2)			` !		1	×.		
Agencies Notified Type Notification	-/A	1 1	Street A				10		0000	17	IIU,	1			
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EPA Initial Amended	1	-	City. Sta	te, Zip Code			100	07000	The state of the s		1	1			
DOL Amendment			135.0	ng, NJ 078	328		A	SBEST	OS CONT	ROL	Ł				
 ✓ Emergency justification) 		-		Contact					tephone Nu						
DCA Cancellation	Grobe			4	1										
			FACI	LITY INFORM	MATION										
Name of Facility Where Abatement is Takir Home	g Place (3)					-	ype of Facility								
Street Address					0.0-0.12-0.000		School (K-		ner than K-1	21					
Street Address							Other (i.e.	private	& commerc	al buil	dings,	hom	es.		
City (5)						-	detc.) Square Feet	# ,	of Floors		ldg. /	00			
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County (6)		T	County (Code (7)			Current Use (P	rior if be	eina demolis						
Morris				ISE ONLY) _		11.7	nome		•	niody					
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	1 No.	Nam	Name of Abatement Contractor (9)									
					AB	SE	nvironment	al Ser	vices, LL(2					
Street Address					0.000		ddress								
) Box 483, 4 E Gate Drive											
City, State, Zip Code		City, State, Zip Code Glenwood, NJ 07418													
Droject Manager for Manitoring Firm	ao No		Telephone No. License No.												
Project Manager for Monitoring Firm		Telephor	ie No.	U 540333		16 No. 64-2276		703	3 110.						
Start Date (10)	Scheduled	Con	npletion I	Date (11)			OSHA Monito	r	1.00	-					
12/21/17	12/31/17			,											
Occupancy Status During Abatement (Chec			Stree	et Ac	ddress										
Facility Closed/Vacated During Entire	Period of Ab	aten	ent												
Abatement Performed Outside of Norr Other – Describe:					City,	Stat	te, Zip Code								
Scope of Work (Check All That Apply)	_				9										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova				\vdash	Full Containn Mini-Enclosu		h Negative	Pressu	re				
2100 \$101 2200 11	≥160 sf or ≥260 lf Demolition														
							Non-Exempte	ed (*) ar	nd Non-Frial	ole Pro	Market Control				
	ocati ormal	322.4								Abater Typ					
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TO BE ABATED	Main Custo			(i.e. the	rmal syster	ms ir	nsulation,	(Specify	Re	æ	Encapsulate	1170		
In Facility (13)		(12)			surfacing, V her miscell:			S	F or LF)	Remova	Repair	ipsu	Enclosure		
V-7/	Yes	No	N/A	0.		J., O.	,00,			<u>a</u>		late	Te.		
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basement			X	k	oipe insul	e insulation			85 LF	X					
Name of Registered Waste Hauler		1000	JDEP W		ubic Yards		Name o	r f Regist	ered Landfil				E		
Freehold Cartage			auler ID 5939	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	f Waste BD		Weste	estern Berks Landfill							
City, State		1 1	3000		isposal Dat	e	City, Sta	ite							
Freehold, NJ				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	BD	-	Birdsb		A						
Completed by	Title				Signatu	re	1			ate					
A. Scott Higgins	Presid			12/1						17					

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

		NO					STOS ABAT ::60 and 5:1		MEG	EI	M	匠				
Date of Notification (1)		/ner/Operator (U		<u>U</u>	5	M								
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Agencies Notified	Type Notific	ation	1	Stree	t Address			- 1	· W DEU		CUI/	- 11				
⊠ EPA		17		617	7 Anders	on A	venue	<u> </u>	4.0		William .	The same of the sa				
☑ DOLWD ☑ DHSS	Amended Amendm			City,	State, Zip (Code		ASBESTOS CONTROL &								
□ DCA	☐ Emergen		-	Cli	ffside Pa	rk, N	J 07010	LICENSING								
(NJAC 5:23-8)	justificati		9	Name	of Contac	t			Telephone N	lumber						
**	☐ Cancella	tion		Ale	x Baylor											
				FA	CILITY IN	IFO	RMATION				-					
Name of Facility Where Abatement is Taking Place (3)								Type of Facility	/ (4)							
Verizon								School (K-1								
Street Address									8 (Other than he private and com		uildina	ıs				
617 Anderson Aven	nue							homes, etc				,-,				
City (5)								Square Feet	# of Floors	E	Bldg. A	dg. Age				
Cliffside Park, NJ 07010								10,000	3		50					
County (6)	Cour	nty Code (7	7)(STA	ATE USE ONLY)	Current Use (F	rior if being den	nolished)	9								
Bergen																
Name of Monitoring Firm	ASCM	No.	Na	me of Abateme	ent Contractor (9	Contractor (9)										
USA Environmental				IVN Restorat	tion Inc											
Street Address						10000000	eet Address									
8436 Enterprise Avenue							47 Foster Road									
City, State, Zip Code	4.50						y, State, Zip Co									
Philadelphia, PA 19			1= .			-	Staten Island	NY 10309								
Project Manager for Monit Mark Jenkins	ephone			ephone No.		License No).									
Start Date (10)		Sala advila d (15-365			18-605-6256	<u> </u>	00774							
01 / 03 /	1,000.00	Scheduled (etion Da 9 /		10000	me of OSHA M	lonitor								
				_ ′ .	10		estor Tech									
Occupancy Status During	125		370				eet Address									
☐ Facility Closed/Vacate ☐ Abatement Performed					cribe		0 59 Jackso	41.619.11.7241.7376								
Time of Abatement:					SCIDE		y, State, Zip Co									
Scope of Work (Check all	that apply)						IC NY 11101									
Scope of Work (Check all	шаг арріу)					9										
≥3 sf or ≥3 lf ≥3 sf or ≥3 lf		enovat				☐ Mini-Enc	losure									
≥160 sf or ≥260 lf			emoliti	on				g Procedure mpted (*) and N	on-Friable Proc	edure						
			s Loca			1					Abatement Type					
Location		20200	Norma ed Sol				Description o						T			
Asbestos-Containing N TO BE ABA		Ma	aintena	ance/			Containing Ma ermal systems i		Amount (Specify	Remova	Repair	nca	nclo			
IN Facility		Cus	todial (12)	Staff?	(5	surfacing, VAT,	or	SF or LF)	oval	=	Encapsulate	Enclosure			
(13)		Yes	No.	N/A	1	ot	her miscellane	ous)				ate	CD.			
Pagament Cable Vaul	4	10.70			Floor	:1	unal Manadia		405005							
Basement Cable Vault					Floor I	iie a	nd Mastic		1250SF			Ц	Ш			
			П	П						П	П	П	П			
Name of Registered Wast	e Hauler		1	JDEP \		Cul	oic Yards of									
Newark Carting			100	lauler II	D No.	Wa	ste	G.R.O.W.S., Inc.								
City, State				NJ-56	36		0 posal Date	City, State								
Hackettstown, NJ							8/25/17		e PA							
Completed By (Print or Ty	ne)	Title	3111					1//	Morrisville,PA							
Ralph Barnhardt	he)	Projec	+ 7/10-	2005			Signature	1 /// -		Date 17	16-1	7				
Naipii Dailiilalut		Frojec	r ivial	iager			11/11/1	12-19-17								

ASB-41 MAY 11

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

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Date of Notification (1) 12-14-17		(1 410	Name of	Buildir	ngrOwne	er/Operator (2) pany and Chemou	ırs Company	DEC	55 2	2017		1-)	
Agencies Notified	Notification Type Street Address Rt 130 South					7)	OS CONTROL &							
☑ DEP ☑ DOL	☐ Initial ☐ Amended		City, State				ASBESTICENSING							
☑ DOH ☐ DCA	☐ Emergency (Incl Justification) ☐ Cancellation	uding	Name of O		ct		Telenhone Number							
			ITY II	NFORM	ATION									
Name of Facility Where A Chamber Works Plant	batement is Taking P	lace (3)					Type of Facil	52013 28						
Street Address Rt 130 South							School (K Subchapt Other (i.e. homes, e	er 8 (other the private & co	nan K-12) ommercial buildings,					
City (5) Deepwater							Square Feet	# of Flo	ors	BI	dg.	Age	ž	
County (6) Salem					unty Co E ONLY	de (7) (STATE ()	ng demolished)							
Name of Monitoring Firm Hired by Bldg. Owner (8) Harvard Environmental					Name of Contractor (9) County Environmental									
Street Address 761 Pulaski Hwy					Street Address 461 New Churchmans Rd.									
City, State, Zip Code Bear, De				ate, Zip Code Castle, DE 19	720									
Project Manager for Monit Wesly Morrison	none No. 326-2333		Telephone Number License N (302) 322-8946 00578											
Scheduled Start Date (10) 1-2-18						of OSHA Monitor ty Environmer	ntal (1822003)						
Occupancy Status During	1					Address New Churchma	ans Road							
☐ Facility Closed/Vacate ☐ Abatement Performed ☐ Other – Describe: Uno	Outside of Normal Fa ccupied area.	d of Abate cility Hou	ement irs -		City, S	tate, Zip Code Castle, DE 19								
Scope of Work (Check all $\boxtimes \ge 3$ sf or ≥ 3 If $\boxtimes \ge 160$ sf or ≥ 260 If				ovation olition	☐ Mini-Enclo☑ Glovebag									
			Is Location							Abatemer Type			nt	
			Normally sed Solely I Maintenance Custodial Staff? (12)			Description stos Containing M thermal systems surfacing, VA other miscellan	laterial (ACM) insulation, T, or	Amou (Spec SF or I	ify	Removal	Repair	Encapsulate	Enclosure	
Thermal Systems	Yes					nal coverings throu	ighout area		X	19	-			
Thermal Systems			X		Therm	nal coverings throu	ngs throughout area 10,000LF ngs throughout area 3,000SF				X	X		
Floor Tile /Mastic Name of Reg. Waste Haul	er	I N	JDEP Wast	to Hai		tile and mastic thr Cubic Yards of	oughout area Name of Re	2,300SF		X				
S&J Transport.	<u> </u>	ID) No. 3217	io i idi	anor	Waste >30	Constoga	y. Lanumi						
City, State Woodstown, NJ						Disposal Date TBD	City, State Morgantow	n, PA						
Completed by Evelyn Walsh	Title Office Manage	r				Signature 7	7		Date 12-1	4-17	7			

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

Date of Notification (1) 12/19/2017					Building O)wner/C	perator	(2)	DE	G		\mathbb{V}		M	1	
Agencies Notified X EPA X DEP X DOL	Type Notification Initial	#		25000	ddress te, Zip Coo Orange,		7079	be)EC	227	2017		U		
× DOH DCA	Emergency justification) Cancellation	(including		Name of Terri N	Contact lelson	8		an near	ASB	STE	S CON ephone	Numbe	- & er	P# 7:49		
Name of Facility Where A House Street Address	Abatement is Takin	g Place (3)	FACI	LITY INFO	RMATI	ON	X Squar	of Facility (4 School (K-12 Subchapter 8 Other (i.e. pr etc.)	2) 3 (Oth ivate of	& comme f Floors		BI	dg. A		es,
South Orange County (6) Essex				County (Code (7) USE ONLY)			N/A Currei Hous	nt Use (Prio	N// r if bei		olished	110.000	/A		
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	l No.		D&S	Abate	ement Cont ement, Inc		(9)					
Street Address City, State, Zip Code	-5. 11.000.				1		11 R City, S	state, Zi	s ren Aven p Code J, 07512	ue						
Project Manager for Mon	itoring Firm			Telephor	ne No.		Teleph	one No 345-8).		Licens 0131					
Start Date (10) 12/29/2017	Abatamant (Char	Schedule 12/30/2	017	npletion [Date (11)		D&S	Abate	A Monitor ement, Inc). -						
Occupancy Status During Facility Closed/Vaca Abatement Perform Other – Describe: 9	ated During Entire I ed Outside of Norn	Period of A	batem				11 R City, S	tate, Zi	ren Aven	ue						
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ll That Apply)	and the same of th	enova emolit				×	Min Glo	Containme i-Enclosure vebag Proce n-Exempted	edure					9	
Location		100	Locati			D.		8							ment	
Asbestos-Containing TO BE AB/ In Facil (13)	Material (ACM) ATED	Mai	d Sole ntenar odial S (12) No	nce/		os Cont thermal surfa	scription aining N systems cing, VA niscellar	faterial s insula T, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
Basem	ent		Χ			Pipe	Insula	tion		5	0 LF		X			
Basem	X			Duct	Insula	ition		2	5 SF		X					
Name of Registered Was			Н	JDEP W auler ID 0996	Contraction of the Contraction o	Cubic of Was TBD			Name of R				Α			
City, State Totow, NJ						Dispos TBD	sal Date		City, State Moorisvi		PΑ					
Completed by Ned Joksimovic		Title Proje	ct Ma	nager		S	ignature	A	N			Date 12/1	9/2	017		

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Chek# 12936 Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ

GAC Project # 060-17 Date of Notification (1) December 13, 2017 Agencies Notified Notification Type ☑Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) ☐ EPA ■ Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS DCA ■ Emergency (including City, State, Zip Code X DOL PISCATAWAY, NJ 08854 justification) ☑ DEP- No Longer REQUIRED Name of Contact Telephone Number □ Cancelled X DOH MICHAEL F. SMITH, ENV. 5 VI HEALTH & SAFETY | |) FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) OLSON HALL, BLDG# 7229 DEC 22 2017 ☐ School (K-12) □ Subchapter 8 (other than K-12) Street Address X Other (i.e. private & commercial buildings, homes, etc.) **NEWARK CAMPUS** Sq. Feet: N/A # of Flooks WESBIdgs Age: T60+ years LICENSING City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC OFFICES NEWARK (State Use Only) ESSEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC Group Services LLC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City State, ZipCode City, State, Zip Code BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Completion Date (11) Scheduled Start Date (10) Name of OSHA Monitor 12/22/17 01/08/2018 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address 20-21 WARGARAW ROAD, BLDG# 35E ☐ Facility Closed/Vacated During Entire Period of Abatement □ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 8AM – 5PM Daily (24 HOURS & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ■ Mini-Enclosure **X**Renovation □ > 160 sf or > 260 lf □ Demolition Slove bag Procedure / Wrap & Cut Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA ROOMS 001 & 003 X TRANSITE BENCH TOPS 800 SF X ROOMS 001 & 003 TRANSITE FUME HOOD PANELS X X 200 SF ROOMS 001 & 003 X TSI - Pipe Insulation <9 LF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cubic Yards of Waste: 5 CY G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below City, State Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date 100 New Ford Mill NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 1/8/2018 19067 NJ DEP # 4509 215-736-1700 Completed by (Print or Type) Signature Date RAYMOND C. PEDALINO SENIOR PROJECT December 13, 2017 Raymond C. Pedalino MANAGER

State of New Jersey - Notification of Asbestos Abatement

(Pursuant b

C. 8:60-7 and 12:120-7) Date of Notification (1) Name of Building Owner/Operator (2) December 13, 2017 Sika Corporation Notification Type Agencies Notified Street Address ☑ Initial Notification 875 Valley Brook Avenue X EPA ☐ Amended Certification City, State, Zip Code DCA ■ Emergency (including Lyndhurst, NJ 07071 x DOL Telephone Number/TROI justification) Name of Contact X DEP Lance Baresic □ Cancelled x DOH FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Sika Corporation ☐ School (K-12) ☐Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) 875 Valley Brook Avenue Sq. Feet: Unknown # of Floors: 2 Bldg. Age: 50 years City (5) County (6) County Code (7) (State Use Only) Lyndhurst Bergen Current Use (prior if being demolished): Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) 00079 EnviroVision Consultants inc. GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 20-21 Wagaraw Road, Bldg # 35E **511 MAIN STREET** City, State, Zip Code City State, ZipCode Fairlawn, NJ 07410 Butler, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Fred Larson 973-636-9145 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor December 27, 2017 December 28, 2017 EMSL inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1056 Stelton Road Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe Other - Describe: 7am-7pm Piscataway, NJ 08854 Source of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure \geq 3 sf or \geq 3 lf Renovation □ > 160 sf or > 260 Demolition x Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type (Specify SF Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA QA Lab-3rd Floor X TSI 16 LF X Bldg# A-75 Name of Reg. Waste Hauler Name of Registered Landfill NJDEP Waste Hauler ID # Cubic Yards of Waste: See Hauler Below # 1 & 2 See Below Meadowfill Landfill G.R.O.W.S Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJ DEP # 12561 NY DEP # December 28, Route 2. Box 68 Bridgeport, WVA Hauler #2) Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551 2017 304-842-2784 Completed by (Print or Type) Signature Marin Graure SENIOR PROJECT December 13, 2017 Marin Graure MANAGER

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

CHECK #1719

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Date of Notification (1) 12/12/2017	W,	7	BOR(of Building OUGH (Owner/O DF SW	Operator EDESI	r (2) BOR	10						
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DOH DCA Emergency (justification) Cancellation	including			of Contact RGE W	AGNEF	?			Tele	phone Nur	-			
		-	FAC	ILITY INF	ORMAT	ION		ASBE	STOS'C	ONTROL	&			
Name of Facility Where Abatement is Taking RESIDENTIAL	g Place (3)					Typ	e of Facility		OING	STREET, CO.	Nector (A)		
Street Address							日	School (K- Subchapte	r 8 (Othe	r than K-12	2)	-12		and vincining
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City (5) SWEDESBORO							Squ 12	iare Feet 32	# of 1	Floors		3ldg. <i>1</i> 76	Age	
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Name of Monitoring Firm Hired by Building C STRATEGIC ENVIRONMENTAL	Owner (8)		ASC	M No.		Name ASS	of At	atement Co ED ENVIF	ntractor (9) NTAL SE	RVI	CES	INC	
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City, State, Zip Code PAULSBORO NJ 08066								Zip Code A HILL NJ	08062	9				
Project Manager for Monitoring Firm ED KEEGAN											٥.			
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Completed by RON SWANSON	Title GEN	ERAI	MAN	AGER	S	ignature	Ku	cella	XW OO N	7 Dat		2017	į.	

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City, State, Zip Code PAULSBORO NJ 08068						ists, Zip Code LICA HILL N			_		
Project Manager for Monitoring Firm ED KEEGAN			Teleph 856-	one No. 423-5711	Taleph	one No. 304-4676	License 01145			-	_
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#4694

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NUAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) **Emsburg Bakery** 12/11/17 Agencies Notified Type Notification Street Address 300 North Tennessee Avenue X X **EPA** Initial City, State, Zip Code DEP Amended DOL Amendment # Atlantic City, NJ 08401 ASBESTOS CONTROL & Emergency (including Name of Contact Telephone Number X DOH justification) DCA Cancellation Jack Malloy FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Ginsburg Bakery School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, 300 North Tennessee Ave etc.) City (5) Square Feet # of Floors Bldg. Age Atlantic City 50.000 2 30 +County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Atlantic Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health & Safety Services Site Enterprises, Inc. Street Address Street Address PO Box 365 6626 Delilah Road City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Egg Harbor Township, NJ 08234 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 609-567-1250 01172 James Proctor 856-452-1311 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor Health & Safety Services, Inc. 12/21/2017 01/05/2018 Occupancy Status During Abatement (Check Only One) Street Address PO Box 365 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code X Other - Describe: vacant Berlin, NJ 08009 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure $\overline{\times}$ Demolition Mini-Enclosure ≥160 sf or ≥260 lf X Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Encapsulate Maintenance/ TO BE ABATED (i.e. thermal systems insulation, (Specify Removal Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)No N/A Yes X Pipe Insulation 350 LF X Throughout Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Site Enterprises Inc. **ACUA** 0035220 20 cy City, State Disposal Date City, State 01/05/2018 Egg Harbor Township, NJ Egg Harbor Township Title Signature Date Completed by OM 12/11/2017 Eric Keys

State of New Jersey

CK # 6194

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Date of Notification (1) 12/18/17				f Building ole Con			r (2)	110	E	GE		/		1
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Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	hone No),		License	No.			
Start Date (10) 12/28/17	Schedule 1/4/18	d Con	npletion [Date (11)		The state of the s		A Monitor PROFE	SSIO					
Occupancy Status During Abatement (Chec		20	nesers:			1	Addres	s OOVE CO	URT					
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City, State NEWARK, NJ					Dispo 1/4/1	sal Date 8		City, State		1 PA				
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City, State, Zip Code		Lattro-essayo						, Zip Code OOD, NJ 0	8701						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-		e No. 3-9078		Licens 1200	e No.				
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Completed by JOSEPH PERLSTEIN	Title OWN	ER			S	Signature	9				Date				

Dec 15 2017 12:57 NJ Asbestos Control 609.633,0664 12/15/2017 11:38 9733399747

Screet Address

City, State, Zie Code

County Code (7)

Telephone No.

12/17/17

Name of Contact

Type Notification

Initial

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Name of Fastisty Where Abstances is Taking Place (8)

Name of Monttoring film Hirad by Building Owner (A)

Occupancy Status Guring Abstement (Chack Only One)

Facility Closed/Vacated During Entire Period of Abotement

Abatement Performed Outside of Normal Feelilty Hours

Other - Describe: 08:00 AM - 3:30 PM

Date of Notification (1)

DEP

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Project Manager for Monitoring Film

Sample of Work (Chack All That Apply)

Brian

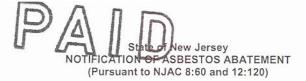
page 1 UNICORN CO PAGE 03/04 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operage (2) William Southerland Irvington, NJ 07111 Telephone Humber William Southerland FACILITY INFORMATION YPE OF BEGING (4) School (K-12) Subchapter 5 (Other than K-12) Other (I.e. private & Commercial buildings, homes, etc.) # d' Floom 914g. Aga 2100 1900 Current Lise (Prior if being damplished) (STATE USE ONLY) Residential ASCM No. Name of Abdressent Contractor (9) Unicorn Contracting Corp. Streut Address 32 Willow Way City, Sinte. 2ip Cage Woodland Park, NJ 07424 Talaphens No. Leanse No. 973-333-9176 01331 Spheduled Completion Date (LL) Name of DENA Monitor Enviroussion Consultants, inc. Street Add: Hu 20-21 Wagaraw Rd., Bldg. \$5-E City, State Zip Code Fair Lawn, NJ 07410

12/15/17

21 23 5f or ≥3 ff 2 2160 if or ≥250 if			Renovation Demolition	N	Pull Containment wit Mini-Enclosure Glovabag Procedure Non-Exempted (*) an			13		
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Street Address							Street	Addres	S			372			
							PO	Box 48	33, 4 E Gate	e Drive					
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							Glen	wood	, NJ 07418	l.					
Project Manager for Mon	itoring Firm		Telepho	ne No.		Teleph	none No).	Licen	se No					
<u></u>							973-	764-2	276	703					
Start Date (10)		Scheduled	Con	npletion	Date (11)		Name	of OSH	IA Monitor						
12/27/17		1/26/18													
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(13)			(12)	,		other	miscellar	neous)				oval	air	Encapsulate	Enclosure
		Yes	No	N/A										te	· w
Crawl space bel	low kitchen			X		pipe	e insula	tion		300 LF		×			
						FF									
Name of Registered Was	te Hauler		9,775	JDEP W			Yards		Name of Reg	gistered Lar	ndfill			50.71111	
Freehold Cartage			0.00	auler ID	No.	of Wa			Western E	Berks Lar	ndfill				
City, State	OIL BOOK AND A COLUMN	111100)10-10-1111111	110	3000			sal Date		City, State						
Freehold, NJ						TBD			Birdsboro,	PA					
Completed by							Signature		1		Date				
A. Scott Higgins		Presid	ent				e Horizoldi o	11				14/1	7		
						- Laboratoria	-								

CK # 17199

State of New Jersey

MFICATION OF ASSESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)				Name o	f Building O	wner/Ope	erator	(2)				_11_		1		
12/14/17				Donne	elly Const	truction			lastines.	E	P	E	Π	// To		7
Agencies Notified	Type Notification			Street A	oute 23 S	South				15	<u> </u>	<u>G</u>	1-1			111
EPA DEP X DOL	Initial Amended Amendmen	+ #		City, Sta	ate, Zip Cod e, NJ 074	e					DEC	22	20	17		#
	Emergency	(including	-	-	f Contact	470			- I	1				-12:74	-	1
× DOH □ DCA	justification Cancellation				tempert					lel	ephone	Num	ber		_	
	ouncellation				LITY INFOR	RMATION	J				LIU	ابلااسا	IVU			_
Name of Facility Where Baltusrol Golf Clulb		ng Place (3)		. , , , ,		TIMP TIO		Туре	of Facility (4)	A SIN ZERN OPERZENI	CHIMILTY WICK CO	NATION LO			
Street Address)								School (K-12			14 400				
201 Shunpike Road	4								Subchapter 8 Other (i.e. pr					dinas	hom	es.
City (5)	4								etc.)							
Springfield								310	are Feet 0	2	f Floors	5		81dg. / '0	\ge	
County (6)					Code (7)				ent Use (Prior	if bei	ng den	nolishe	ed)			
Union	II. II. D. II.	0 (0)			USE ONLY)				ce building							
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	A No.				atement Control			LLC				
Street Address								Addre			1000,					-
								200000000000000000000000000000000000000	83, 4 E Ga	ite D	rive					
City, State, Zip Code									ip Code J, NJ 0741	8						
Project Manager for Mon	itoring Firm		Telepho	ne No.	100		one N 764-2			Licen:	se No					
Start Date (10)		Scheduled	Con	npletion l	Date (11)			1,000,000	HA Monitor				No.		-	
1/2/18		1/26/18														
Occupancy Status During						S	treet /	Addre	SS							
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire ed Outside of Norr	Period of Ab nal Facility F	atem	ient		C	ity, St	tate, Z	ip Code							
Scope of Work (Check A	I That Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Processor .	nova moliti				×	Mir Glo	Il Containmer ni-Enclosure ovebag Proce n-Exempted (dure						
		1 1-1						1 140	n-Exempled () and	1 INOI1-1	Habie		Abate		
Location	of		ocati rmall			Descri	intion	- (pe	
Asbestos-Containing	Material (ACM)	Used Main				s Contain	ing M	aterial			mount				m	
TO BE ABA In Facili		Custo	dial S		21	ermal sys	, VAT	Γ, or	20		pecify or LF)		Remova	Repair	ncap	Encid
(13)		-	(12)		c	other misc	cellan	eous)					oval	oair	Encapsulate	Enclosure
		Yes	No	N/A											(D)	
Attic		Х		pipe f					30		X					
Attic - metal c				glue	dots				50		X					
2 2									2.00							
Name of Registered Was	te Hauler		10000	JDEP W auler ID	200	Cubic Yar of Waste	rds		Name of Re							
Freehold Cartage				5939		TBD			Western	Berk	s Lan	dfill				
City, State Freehold, NJ					1 2	Disposal (TBD	Date		City, State Birdsboro) P	1					
Completed by							ature	7	Direction	, , , ,		Date				
A. Scott Higgins		Preside	ent				4	e de				12/		7		

NOTIFICATION OF ASSESTED ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1) 12/14/17					of Building		Operator	r (2)			6 \ 6	<u>u</u>			
Agencies Notified	Type Notification				hoenix,	inc.				and the second			(ACOUNTY)	Nerrativens.	
		E.			Anders	on Ava	nua S	uite a	JE	GE				7	
EPA DEP	X Initial Amended		-	F 1	tate, Zip C		nuc, c	une 5	VIII						
▼ DOL	Amendmen				ee, NJ				7)						
▼ DOH	Emergency justification		3		of Contact				ent:	Telephone			- Long	1	
DCA	Cancellation				el Kim					relephon	0 1401110	O.	i		
				FAC	ILITY INF	ORMAT	ION		ASF	BESTOS C	ONTR	71	8	_	-
Name of Facility Where Office Building ~ O								Type of Fa	acility (4)	LICENS		www.ve	LANGUAGE PO		
Street Address	- Id Offitopractor	3 011100							ol (K-12)		LZ 40V				
1495 Palisade Ave	nue									(Other than ate & comr		build	dings	, hom	ies,
City (5)								etc.)	- 1	# -4 =1		T 5	1.1	V	
Fort Lee								Square Fe 3000	eet	# of Floors	S		lldg. <i>i</i> 32	\ge	
County (6)				County	Code (7)			occommendation.	o (Prior	if being den	naliaha	-)		
Bergen					USE ONL	n		office bu		ii being den	nonsneo	1)			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCI	M No.		Name	of Abateme	-	actor (9)		06.348			
							ABS	Environn	nental S	Services,	LLC				
Street Address								Address							
City, State, Zip Code								Box 483,		e Drive					
City, State, Zip Code							11 SOURCE OF STREET	State, Zip Co Iwood, NJ		3					
Project Manager for Mon	itoring Firm			Telepho	one No.		135.0	none No. 764-2276		Licen 703	ise No.				
Start Date (10)				npletion	Date (11)		Name	of OSHA M	onitor						
12/26/17		1/26/1													
Occupancy Status During		1970					Street	Address							
X Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norn	Period of an all Facility	Abaten y Hours	nent			City, S	tate, Zip Co	de						
_															
Scope of Work (Check Al	I I nat Apply)						1	7							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demolit				×	Mini-End Gloveba	closure g Proced						
					T		×	J Non-Exe	empted () and Non-l	Friable		cedur Abate		
Location			Locati Normal											pe pe	L
Asbestos-Containing		Use	ed Sole	ly by	Asbes		scription taining M	of faterial (ACI	M)	Amount				-	
TO BE ABA			intenai todial S			thermal	systems	s insulation,		(Specify		Re	IJ	Encapsulate	Enclosure
(13)	ıy		(12)				cing, VA niscellan			SF or LF)		Remova	Repair	nsdi	ios
% W		Yes	No	N/A				,				<u>a</u>	7	late	ire
Chimne	Э			X			tar			10 SF	×				
Rear ro		Х		fl	at roof			1000 SF	×						
Interio	r			Х	walls,	ceiling,	sheetr	ock,spack	de	205 SF	×				
								(4					•		
Name of Registered Wast	te Hauler		1000	JDEP W		Cubic		Nar	ne of Re	gistered Lar	ndfill				
Freehold Cartage	-		7330	auler ID 5939	NO.	of Was				Berks Lar	ndfill				
City, State Freehold, NJ						Dispos TBD	sal Date	100000000000000000000000000000000000000	, State dsboro	, PA					
Completed by		Title				S	ignature				Date				
A. Scott Higgins		Presi	ident					11	7		12/1	4/1	7		

Completed By (Print or Type) Title
Constantine Vivian President

/25/17 W

aynesburg, Ohio 44688

12/12/2017

MD # 2385 10 20468

Print Form

			ICATIO	tate of Ne N OF ASE t to NJAC	ESTOS	ABATE			i C	E		E	M	
Date of Notification (1) 12/11/2017		1		of Building ex Borol		perator	(2)		DEC	22	2017	***	U	
Agencies Notified Type Notifical	ion		Search .	Address							N East			
EPA Initial		1		n street				AS		os co		L &		
DEP Amende DOL Amende			15.0	ate, Zip C ex NJ , (-	LI	CENSI	NG	74/4/100 - 14/4	-	
	ncy (including	_ }		of Contact	SOLO POR VILL				Tol	ephone I	Numbo			
DOH justificati				ael Rest					I I CK	api ione i	ivallibel			
			FAC	ILITY INF	ORMATIO	ON			-					
Name of Facility Where Abatement is Ta	aking Place (3	3)						of Facility (School (K-1	0.51					
Street Address 1 Main Street							×	Subchapter Other (i.e. p etc.)				ilding	s, hom	nes,
City (5) Sussex							Squar 150	re Feet	# of	Floors		Bldg.	Age	
County (6) Sussex			County (STATE	Code (7) USE ONLY	n	_	Curre	nt Use (Prid	or if beir	ng demo	lished)			
Name of Monitoring Firm Hired by Buildi N/A	ng Owner (8)		ASCI	M No.				tement Con stos Rem			LLC			
Street Address							Addres Berg	enline A	/e. Ap	t. A-5				
City, State, Zip Code			City, S	tate, Zi	p Code gen NJ 07				Amp E. V. E. S					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph).		License				
Start Date (10) 12/21/2017	Schedule 12/29/2		npletion	Date (11)		Name o	of OSH	A Monitor						
Occupancy Status During Abatement (C	heck Only On	ie)				Street	Addres	s				V. C.		
Facility Closed/Vacated During Enti Abatement Performed Outside of N Other – Describe:	re Period of <i>A</i> ormal Facility	batem	nent			City, St	tate, Zi	o Code						
Scope of Work (Check All That Apply)			2010/10/20											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(Finance)	enova emolit				×	Mini	Containme i-Enclosure vebag Proc i-Exempted	edure				re	
	10 1000	Locati											emen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lormal d Sole intenar odial S (12)	ly by nce/		tos Conta thermal s	systems ng, VA7	aterial insulat Γ, or		(S	nount pecify or LF)	Remova	Repair	e Encapsulate	Enclosure
	Yes	No	N/A								<u> </u>	1	ate	ll'e
Kitchen	11/	Asbestos Linoleum 150 x												
													-	
Name of Barby 1984														
Name of Registered Waste Hauler Newark Carting Inc.		H	JDEP W auler ID 1509		of Wast			Name of R				/S		
City, State Newark NJ					Disposa TBD	I Date	Date City, State Morrisville, PA							
Completed by Michael Urbizagastegui			mature	1 35	15-	2	1	Date 12/11/	2017					

	145		FICATION	tate of New N OF ASB to NJAC	ESTOS	ABATE) [CE		V E	P	rint
Date of Notification (1) 12/11/17			1	of Building			(2)		L i	DEC 2.	2 20	17		#
Agencies Notified Type Notification	1			Luxury I	nomes			-	- Inches	TO WARRY TO THE OWNER OF THE PARTY.	No.	100000	-	-
☐ EPA ☐ Initial								- The second	ASB	ESTOS O	ONTR	OL 8		-
DEP Amended Amendment	ıt #		1 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	ate, Zip Co						44		NOT THE RE	Charles and	
Emergency	(including	3		arest Nj (11621				Тта	lephone Nu	ımhor			_
DCA justification Cancellation			100000000	Seidenm	ian				1 10	repriorie 140	minei			
Name of Facility Where Abatement is Takin	na Place (3)	FAC	ILITY INFO	ORMATI	ON	Type	f Equility	(4)					
Residential	ng Flace ((د)					_	f Facility chool (K-						
Street Address							☐ S	ubchapte	er 8 (Oth	er than K-	12)			
011 (5)		<u> </u>					et et	c.)	private	& commerc	cial bui	ildings	, hom	ies
City (5) Demarest							Square	Feet	# 0	f Floors		Bldg.	Age	
County (6) Bergen			County (STATE	Code (7) USE ONLY)		Curren	t Use (Pi	rior if be	ing demolis	shed)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCN	VI No.		Name	of Abate	ment Co	ontractor	(9)				_
N/A						The	Asbest	os Rer		Experts I	LC			
Street Address							Address		uro Ani	+ A E				
City, State, Zip Code							tate, Zip	nline a	ive Ap	I. A-5				_
98-99 PA 99							Section Section 1995	en NJ,	07047					
Project Manager for Monitoring Firm			20				one No. 951-63			License I	No.			
Start Date (10)				Date (11)		of OSHA	Monitor	r	7.000					
12/14/2017 Occupancy Status During Abatement (Cher	12/23/	- and				N/A	Address							
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of	Abate	ment rs				tate, Zip			71. 1021				
Scope of Work (Check All That Apply)														_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov					Mini- Glove	Enclosur ebag Pro	re ocedure	Negative			e e	
		Loca	797 22										ement /pe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Use Ma		ely by ance/ Staff?		tos Conta thermal		aterial (/		(8	mount Specify or LF)	Remova	Repair	Encapsulate	
(13)	Yes	(12) No	N/A		other m	niscelland	eous)				oval	pair	sulate	
Exterior	140	IWA		S	Siding			Cle	an Up	x				
Interior						VAT				an Up	x			
Name of Registered Waste Hauler		11	JDEP W	aste	Cubic \	Yards		Name of	Registe	red Landfil				
Newark Carting Inc.			Hauler ID 14509	No.	of Was				9250	gement (6		
0.7			7308		Dispos	al Date		City, Stat				<i>K</i> /A		_
City, State														
City, State Newark NJ Completed by	Title				TBD	gnature		Morris	ville, P.	-	ate			

4 2017 16:49 NJ Asbestos C 12/14/2017 09:01 201	ontrol 6 2620321	09,63	3,0664		// Adda	page	1	\ \[\bar{\bar{\bar{\bar{\bar{\bar{\bar{	E	C	E	
K# 1028				State	AMA	1	ME			DEC	PAG 2	(100 St. 100 St
	- 50	Νζ	TIFICA.	MON OF	ASTIESTO	-	MENT .		. h.	1/1	[1] 1	/
Date of Notification (1) 12/14/17				ne of Bul	liding Owner	//Operator	(3)		408	FK	JS (SEN	ONTR SING
Agencies Notified Type North	cston		Stre	el Addre	ODRE	JOD	HA	<u> </u>		4	_/	
EPA DEP Initial Amen			City	Sti						I	V	
	dment \$_ ency (includ	ling	- 🛴	^	VOLTH.	LAVE	N.5	07645	11		62'69	777
DOH Justific	ation) Kators			TIM	V150	SEEN		Te	· · · · E		-	, , , , , , , , , , , , , , , , , , ,
Hame of Facility Where Abelement is	Taking Pluc	æ (3)	F.	ACILITY	INFORMA"	TION	Type of Facil	局層面	F	-FL	· n a	
Street Address	£	- Andrews					O School	K-121		Ш	\mathbb{V}	L
CHUST 119 POCKLAN	AV	6					1 Subchar	ne \$ (Other than K	(-12) World b	uildin	gs. h	mes.
NOETHVALE			-			1	Square Feet	# of Figors	-2	Blog	. Age	1
COUMY (8) BELGEN	<u></u>		Cour	ty Code	(7) N/N		3500 Current Use (Prior al beling demo	shed	(PERMITTING	50	- Transaction
Name of Manifering Firm Hired by Bull	ding Owner	(6)		CM No.		Namao	f Abatement C	contractor (9)	DENS	SING	RO	- &
Street Address						A.MA	Contracti	ng Inc.			M. S. S. S. S. S. S. S. S. S. S. S. S. S.	NAME OF THE OWNER, OF
City, State, Zip Code							realand Ave	•	, and		1000	
Project Menager for Monitoring Firm			_			City, Sta Midlan	ite, Zie Code id Park, NJ	07432	- Specialis	delimento.	•	
			Talaph	ione No.		Telepho		Lloense	No,			
Start Date (10) /2/H/17		1-9 1-	amplettat Lo /17	n Date (1	17)	Name of	OSHA Manke	00156		<u></u>	**************************************	
Occupancy Status During Abatement (C	hack Only (lna)				Street Ad	idress	ental Services I	nc			
Facility Closed/Vacated During En Abatement Forformed Outside of I Other - Describe;	ire Period o Ionnal Facili	Abate Ny Hou	meni 12		-		lylar Street e, Zip Code					
Scope of Work (Check All That Apply)						Hacker	neack, NJ C	7808				
21 85 of or 22 80 H		Ranov Demoi					Glovebna Pre	amaria ann				
Location of		s Loca				فية	Non-Exemple	d (*) and Hon-Friel	ble Pro		re anar	
Asborros Containing Material (ACM) TO BE ASSTED	Ua. Ma	Norms ed Soli elmlans	ally by	Asbi	Micha Pandul	nietion of ining Mate	rriet (ACM)	Amount	-		ype	
in Facility (13)	Gus	rtodial (12)	Staff?	(1.0	o. unormai s Surfaci:	ystame in: 19. VAT, o 100 lbriege	wietlen,	(Speat) 8F or LF)	Removal	Repair	Encap	Emdogura
	Yes	Na	NA		-time (if)	e van eine lig def	(9)	WILLIAM TO THE TOTAL THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO	PBA	184	Encapsulate	RATIO
BASEMEN			K		VAT			31556	book			\dashv
		L										
Name of Registered Weeks Heuler												
Newark Carting Inc.		H	DEP W	este No.	Cubic Ya	fdş		Registered Landair	Ш			-
Chy, State Newark, NJ 07105		. 104	509		Disposal	4	Grand C	Central Sanitary	Land	1511		
Completed by	Tille				12)14 Sign	n 9		yl. PA 08702				
losaph Vocaturo	111970											

C/C 65 70			S ICATIO Puisuan	tate of New N OF ASBE t to MO C 8:	Jersey STOS ABATE	EMENT	г			C	E ^P			
Date of Notification (1) 12/5/17					wner/Operato	m 136.00			4	DEC	1-5	-20		
Agencies Notified Type Notification	า			Address	een Dougn	erty F	Private Hon	ne	ACE	ECTO	10.00	ONIT		
EPA Initial								NO.	ASE	ESTO	ENS			
DEP Amended DOL Amendmer	nt#			ate, Zip Cod	e d NJ 08260)								
☑ DOH ☐ Emergency justification		g		of Contact	00200	,		Telephor	ne Numbe	r.				
DCA Cancellatio			Frank	(. —	-					
Name of Facility Where Abatement is Taki	ng Place	(3)	FAC	ILITY INFOR	RMATION	Type	e of Facility (4	1						
James & Kathleen Dougherty Private						,,p.	School (K-12							
Street Address		ē =					Subchapter to Other (i.e. pr	(Other tha		uilding	s, hom	ies,		
City (5)	-17-1			-			etc.) are Feet	# of Floo	rs	Bldg.	Age			
North Wildwood NJ 08260		<u> </u>					00+	1	1	35+	3			
County (6)				Code (7) USE ONLY)		1	ent Use (Prior	r if being de	molished)			19-31		
Cape May Name of Monitoring Firm Hired by Building	Owner (8		ASCI		Name	House Name of Abatement Contractor (9)								
N/A	0,,,,,,	′′	7.00	vi ivo.		naco		ontractor (9)						
Street Address						t Addre								
City State 7in Code						Box 3								
City, State, Zip Code					V (5)(5)(3)		Zip Code rlin NJ 0809	01						
Project Manager for Monitoring Firm		Т	Telepho	ne No.		hone N			nse No.					
			856-753-9800					007						
Start Date (10) 12/15/17	Schedu 12/22							-						
Occupancy Status During Abatement (Che	ck Only O	ne)			Street	Addre	ess							
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of mal Facilit	Abaten y Hours	nent s		City, S	State, Z	Zip Code							
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				Full Containment with Nega Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-								
	ls	Locati	ion							Abat	ement	t		
Location of Asbestos-Containing Material (ACM)		Normal ed Sole			Description				. -	T 1	уре	Γ		
TO BE ABATED		aintena		(i.e. the	Containing Nermal systems	s insul		Amount (Specify	10 440	7	Enca	Ē		
In Facility (13)		(12)			surfacing, VA ther miscellar			SF or LF	/ Remova	Repair	Encapsulate	Enclosure		
	Yes	No	N/A						<u>a</u>]	ate	lle.		
exterior siding			х		exterior siding 1400 S									
Name of Pagistared Wests Usua		1	IDEE	landa I -										
Name of Registered Waste Hauler Jnited Containers		Н	JDEP W auler ID	5-10000000 H	Cubic Yards of Waste		Name of Re		andfill					
		2	2459	4			G.R.O.W	1.5						
City, State Elm NJ				1 00	Disposal Date		City, State Morrisvill	le PA 190	067					
Completed by	Title				Signature		1		Date		70-31			
Anthony T Perna	Pres	ident			1	0			12/5/	17				

0		PW	
Pr	nt	HO	rm
1 1	111	10	

		NOTIF	CATION	OF ASB	ESTOS	ABATE	MENT	D)/E	C E		V [n	7		
Date of Notification (1) 12-13-2017				f Building Remode			(2)		EC 2	2 20	17					
□ EPA ×	Notification Initial			almer A			-					1	9			
× DOL.	Amended Amendment #			ate, Zip Co ood NJ	de		E-Armer-com		LICEN	CONTR ISING	OL &					
× DOH	Emergency (includin justification) Cancellation	g		f Contact Robles					Tel	ephone N	Numbe	er	-			
				LITY INFO	ORMAT	ION			1			dagate.				
Name of Facility Where Abater Residential	nent is Taking Place	(3)					_	of Facility (-44			2000				
Street Address						100000	×	School (K-1 Subchapter Other (i.e. petc.)	8 (Oth	er than K & comme	(-12) ercial b	ouild	ings,	home	es,	
City (5) Belleville, NJ 07109								re Feet	# of	f Floors		1 333	dg. A	ge		
County (6) Essex				Code (7) USE ONLY,)		Curre	ent Use (Pri	or if bei	ng demo	lished)				
Name of Monitoring Firm Hired	by Building Owner (3)	ASCN	l No.				tement Cor			LLC					
Street Address						Street	Addre									
City, State, Zip Code		-				City, S	state, Z	ip Code y, NJ 073			31100-10-10					
Project Manager for Monitoring	Firm		Telephor	ne No.		Teleph	Telephone No. License 201-333-8855 01174									
Start Date (10) 12-14-2017		uled Con -2017	npletion (Date (11)		100000		HA Monitor								
Occupancy Status During Abat	ement (Check Only (One)					Addres	are numerous services								
Facility Closed/Vacated D Abatement Performed Out Other – Describe:	side of Normal Facili	f Abatem ty Hours	ent			City, S	tate, Z	ip Code								
Scope of Work (Check All That ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Apply)	Renova Demolit				×	Mir Glo	I Containme ni-Enclosure ovebag Prod n-Exempted	edure					dure		
Location of		ls Locati Nermal	у		De	scription	of					,		ment pe		
Asbestos-Containing Materi TO BE ABATED In Facility (13)	M Cu	sed Sole laintenar stodial S (12)	nce/ staff?		tos Cont thermal surfa	taining M systems cing, VA niscellar	Material s insula .T, or		(S	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure	
Basement	Yes	No	N/A	24242	D:						_			(D		
Dasement	X			Pipe	insula	tion		8	6 LF	X						
Name of Registered Waste Hau	ıler	N	JDEP W	/aste	Cubic	Yards		Name of I	Registe	red Land	Ifill					
Green Environmental Ser	vices,	10.000	auler ID 034889		of Wa			G.R.O.\				11				
City, State Jersey City, NJ						sal Date 1-2017		City, State Morrisv		Ą						
Completed by Liliana Serrano	ce manager Signature Date 12-13-2017															

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) Name of Building Owner / Operator (2) Franklin Hamilton, LLC 12-14-2017 DEC 2 2 2017 Agencies Notified

EPA

DEP

DOL Type Notification Street Address 1 Chester Circle Initial City, State & Zip Code ASBESTOS CONTROL & LICENSING Amended New Brunswick, NJ 08901 \boxtimes DOH Emergency Name of Contact Telephone Number DCA Cancellation Marie Latimer **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4)

School (K-12) Brookhaven at Franklin - Building #10 Street Address Subchapter 8 (Other than K-12) 23 Hawthorne Drive - Building #10 Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 4,000 Somerset, NJ Current Use (Prior if being demolished) Somerset Apartment Building Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. Health and Safety Services 117 Resource Management Group, LLC Street Address Street Address P.O. Box 365 2115 Hamilton Ave, Suite 202 City, State & Zip Code City, State & Zip Code Berlin, NJ 08009 Trenton, NJ 08619 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Mr. Jim Proctor 856-452-1311 609-914-4279 01185 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12-28-2017 12-29-2017 J&S Environmental Laboratories, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 West Abatement Performed during Normal Hours: City, State & Zip Code Describe: 8:30am - 6:00pm Union, NJ 07083 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf ≥260 lf Demolition M Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Abatement Type Amount Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulat Enclosure Remova Repair TO BE ABATED Maintenance or (i.e., thermal systems in Facility Custodial Staff? insulation, surfacing, VAT (13)or other miscellaneous) (12)Yes N/A No Boiler Room \boxtimes Pipe Wrap 10 LF X П Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Resource Management Group, LLC 0035218 TBD Grows Landfill City, State Disposal Date City, State Trenton, NJ 08619 TBD Morrisville, PA Completed By (Print or Type) Title Signature Date Mr. Brian Haney President 12-14-2017

CK = 310

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

Date of Notification (1) 12/13/17 Check #	3110				Building Own	er/Operator	(2)	TID)#	3 6	<u>La ll</u>	₩ [1		
Agencies Notified	Type Notification			Street Ad	dress ennedy Blv	vd		lazys text	DEC	2 2 2	2017		川		
DEP DOL	Initial Amended Amendment		_		e, Zip Code City, NJ 07	7307		AS	BEST	OS CON	TROL	Š.	-		
DOH DCA	Emergency (justification) Cancellation	including		Name of 0 Rev. Ni	Contact igel Mohar	nmed		Company of the Company	-Tele	phone No	mber	A. (70 - 17-34)		ė	
				FACIL	ITY INFORM	ATION	T	of Facility (4	\					1-2	
Name of Facility Where St Anne Church/So Street Address								School (K-12 Subchapter 8	?) 3 (Othe	r than K-1	12)	1:	h a as a		
255 Congress Stre	et							Other (i.e. pr etc.)	ivate &	commerc		2000		5,	
City (5) Jersey City							Squar 50,0	re Feet 00	# of 3	Floors	1000	ldg. A	ge		
County (6) HUDSON				County C (STATE U	ode (7) SE ONLY) _		Curre Sch	nt Use (Prio ool	r if bein	ng demolis	shed)				
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.			tement Cont es Corpor		(9)					
Street Address						1750000000	t Addres 69th S								
City, State, Zip Code					6	110000000000000000000000000000000000000		ip Code g, NJ 0709	93						
Project Manager for Mon		Telephon	e No.	111	hone N -295-1			License 01074	No.						
Start Date (10) 12/23/17		Schedule		mpletion [Date (11)		me of OSHA Monitor ame as above								
Occupancy Status Durin	og Ahatement (Chec		5000			Stree	t Addres	ss							
Facility Closed/Vac	cated During Entire ned Outside of Norr	Period of A	Abater	nent s		City,	State, Z	ip Code							
Scope of Work (Check)	All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		=	lenova emoli			[]	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						-0		
						E	_ No	n-Exempted	(and	3 Non-Fri	able Pi		emen	t	
		10000	Locat Norma	SERVICE		_						Т	уре		
Asbestos-Containin TO BE AB In Fac						Description Containing Frmal system Surfacing, Volume The miscella	Materia ns insul AT, or	ation,	(S	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A		Dina incul	otion		-	3 LF	x	+			
Basement-B				Pipe insul Clean up d				J LI							
Name of Registered Waste Hauler Tri-State Transfer Assoc				NJDEP W Hauler ID 19551	No.	Cubic Yards of Waste		Name of Minerva	000000000000000000000000000000000000000	ered Land erprises					
City, State				13001	C	Disposal Dat od	te	City, Stat Wayne		ОН					
Bronx, NY		Title			U	Bille reneroe.	ire /n	7/1	22319		Date				
Completed by Title Gina Betances Office Ma						Signature Date 12/13/17									

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



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	PNO	MELCATION	ate of Nev OF ASBI to NJAC	w Jersey ESTOS ABAT 8:60 and 12:1	EMENT 20)	ID-E	GE							
Date of Notification (1) 12/14/17				Owner/Operat onstruction	or (2)		DEC 2	2 2017		IJ				
Agencies Notified Type Notified	cation	Street A		unty Line R	oad	AS	BESTOS C	CONTRO	L &					
EPA X Initial Ameni	ded dment #	City, Sta	ate, Zip Co vood, NJ	de		BOTT Folian WANTED WAY FOR	LICEN	SING	median emilional	processors and the				
X Emerging justificial	ency (including ation)		f Contact				Telephone	e Number	÷.					
DCA Cance	liation		VIV	DMATION										
Name of Facility Where Abatement is 616 Hackett St	Taking Place (3)	FAC	ILII Y INFO	ORMATION	Туре	of Facility (4))			-				
Street Address						School (K-12 Subchapter 8								
616 Hackett St					×	Other (i.e. pri etc.)			ldings	js, homes,				
City (5) Lakewood					Squa 936	re Feet	# of Floors	S	Bldg. /	Age				
County (6) Ocean			Code (7) USE ONLY)		Curre	ent Use (Prior ne	if being den	nolished)						
Name of Monitoring Firm Hired by Bu	ilding Owner (8)	ASC	M No.			atement Contr	ACCOUNT MAKE	S						
Street Address				1 777		Address HITE DOVE COURT								
City, State, Zip Code				City,	State, Z	Zip Code OD, NJ 08		<u></u>						
Project Manager for Monitoring Firm		Telepho	ne No.	Tele	phone N 2-668-9	lo.		ise No.						
Start Date (10)	Scheduled (Completion	Date (11)	Nam	e of OS	HA Monitor								
12/19/17 Occupancy Status During Abatement	12/20/17 (Check Only One)	-			A LEAI	D PROFES	SSIONALS	S						
Facility Closed/Vacated During E	ntire Period of Aba	tement		100000000000000000000000000000000000000		DOVE CO	URT							
Abatement Performed Outside o Other – Describe:	f Normal Facility Ho	ours	City, State, Zip Code LAKEWOOD, NJ 08701											
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation nolition			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	Is I o	cation	T		E NO	n-Exempted	(") and Non-	Friable Pri	America Gr	re ement				
Location of	Norr	mally Solely by		Description					T	уре				
Asbestos-Containing Material (AC <u>TO BE ABATED</u> In Facility	Mainte Custodi	enance/ ial Staff?		tos Containing thermal syste surfacing, \	ms insul		Amount (Specify SF or LF)		Re	Encap	Encl			
(13)		12) No N/A		other miscell			0. 0. 2. /	Removal	Repair	Encapsulate	Enclosure			
INTERIOR	100 1	1071		Linoleum F	looring	1	150SF	x						
									-					
Name of Registered Waste Hauler		NJDEP W	Vaste	Cubic Yards	9.2	Name of Re	egistered La	ndfill						
NEWARK CARTING		Hauler ID 04509		of Waste		IESI	-3.4.4.44 60							
City, State NEWARK, NJ		4		Disposal Da 12/20/17	te	City, State BETHLE	HEM PA							
Completed by JOSEPH PERLSTEIN	Title OWNER	Signature Date												

Print Form

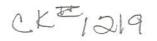
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راصما	/ / State of New Jersey
-	NOTIFICATION OF ASSESTOS ABATEMENT
i	(Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 12-18-2017	18-2017							_atter-day	Saint		2 E	3 11		E	1
				Address Box 1968	3					UE	C 2	2	201	7	U
X DEP Amended Amendment	#			tate, Zip C nont, We		inia 26	555-	1968	A	SBEST	OS	CON	ITDO	1 0	
Emergency justification) DCA Cancellation		g	-	of Contac				1000	******	lephone	THE IN	3 11 11			Атликативно <u>г</u>
	-		FAC	CILITY IN	FORMAT	ION		7							
Name of Facility Where Abatement is Takin Proposed Church	g Place	(3)			Ortivizati	1014	Тур	e of Facility	Cottonia.						
Street Address 47 Bassett Highway							×	School (K- Subchapte Other (i.e. etc.)	er 8 (Oth	er than & comn	K-12 nercia) ıl buil	dings	, hom	ies,
City (5) Dover								are Feet 450	# 0	f Floors	3		3ldg 32+	Age	
County (6) Morris			County (STATE	Code (7)	y)			ent Use (Pr	rior if be	ing dem	nolish				
Name of Monitoring Firm Hired by Building (Owner (8	3)	ASC	M No.			of Ab	atement Co		(9)					-
Street Address			1			Street	Addre	ess							
City, State, Zip Code	y, State, Zip Code						State, 2	Ave #F2 Zip Code							
Project Manager for Monitoring Firm		Toloob	ann 81-				k, NJ 07	058							
			Telepho			Telepi 973-	276-0			Licens 0131					
Start Date (10) 01-02-2018	Schedu 02-12-		8 Name of OSHA Monit United Safety LLC								34-2-20-2				
Occupancy Status During Abatement (Check	0.50	20				Street		1000							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of al Facilit	Abaten y Hours	nent S					Ave #F2 Zip Code							
Scope of Work (Check All That Apply)					-	Pine	Broo	k, NJ 070	058						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Property lives	Renova Demolit				×××××××××××××××××××××××××××××××××××××××	Mi Gl	II Containm ni-Enclosur ovebag Pro n-Exempte	e cedure					е	
	1 2	s Locati										-	Abate	ement	
Location of Asbestos-Containing Material (ACM)		Normal ed Sole		Anhaa		scription			100		-		Тy	pe	-
TO BE ABATED In Facility (13)	Cus	aintenar stodial S (12)	Staff?	(i.e.	stos Cont thermal surfac other m	systems cing, VA niscellan	s insula T, or	ation,	(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
1st Floor	Yes	No	N/A											r.	
Basement	X	-			VAT				80 SF	_	X				
1st Floor & Basement Throughout		-	NA 1:-		VAT	D.			00 SF	_	Х				
1st Floor	X			/Glue c		The second			53 SF	-	X				
Name of Registered Waste Hauler		IDEP W			ing Mastic, Black 1,000 SF X Yards Name of Registered Landfill										
Newark Carting Inc/United Safety LL	H	Hauler ID No. of Waste					IESI Landfill/GROWS Landfill								
City, State Newark, NJ/Pine Brook, NJ				Dispos TBD	al Date		City, State Bethleh		VTully:	towr	. P/	4			
Completed by Vanco Petkov	ct Ma	nager		Si	gnature	Tell	41	· 1,	T	Date					
								and the same			1.00				

ck#1219

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

			NOTI	FICATIO	N OF AS	BESTOS	ABATE	MENT		7	S.C		П	Π.//		_
Date of Notification (1)					of Building			5	- 11	// <u> </u>	- 5		U	V		M
12-18-2017	-			The (Church o	of Jesu	s Chris	t of L	atter-day	Saint	s DEC	0.7	s :::		\parallel	
Agencies Notified EPA	Type Notification				Address lox 1968	3				1	200	66	Ľ	417	1	91
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X DOL	Amendment Emergency	#_ (includin	g		of Contact		inia 26	555-1	968		California Comprehensive -	45.21	10	ROL.	&	
DOH DCA	justification) Cancellation			ivame	or Contact					Te	lephone	Nun	ber	Man Company of the	STATE OF STREET	-
Name of Facility Where A	Abstement is Tokin	a Place	(2)	FAC	ILITY INF	ORMAT	ION									
Proposed Church	Satement is Takin	y riace	(3)						of Facility (100						
Street Address								П	School (K-1 Subchapter	8 (Oth	er than	K-12)	2110	NET	
47 Bassett Highway								_	Other (i.e. p							ies,
Dover								Squa 41,4	re Feet 50	2	f Floors	5		3ldg. / 32+	Age	
County (6) Morris		li.		County (STATE	Code (7) USE ONL	n			ent Use (Prio	or if bei	ing dem	nolish	ed)			
Name of Monitoring Firm	Hired by Building (Owner (8	3)	ASC	M No.			of Aba	itement Con fety LLC	tractor	(9)					
Street Address							Street			-						
City State 7in Code									Ave #F2							
City, State, Zip Code									ip Code k, NJ 070	58						
Project Manager for Moni	toring Firm			Telepho	ne No.		Teleph	one N	0.		Licens	242 NO. 1912				
Start Date (10)		Schedu	led Cor	npletion	Date (11)		973-2 Name		U99 HA Monitor		0131	7				
01-02-2018		02-12-	2018		()				ety LLC							
Occupancy Status During		185	26				Street A									
Facility Closed/Vaca Abatement Performe	ted During Entire P ed Outside of Norma	eriod of al Facilit	Abaten y Hours	rs City, State, Zip Code							<u> </u>					
Other – Describe: Scope of Work (Check All	That Applie			Pine Brook, NJ 070					58					- 100		
× ≥3 sf or ≥3 lf	тпат Арргу)	×	Renova	tion			X Full Containment with Negative Pressure									
≥160 sf or ≥260 lf			Demolit				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure									
		I					×	n-Exempted	(*) and	Non-F	riable	Pro	cedur	е		
Location	of		Locati Normal			Day								Abate Ty	ement pe	
Asbestos-Containing N TO BE ABA	Material (ACM)		ed Sole aintenar		Asbes	tos Cont	scription aining M	aterial	(ACM)		mount				Ш	_
In Facility (13)		Cus	todial S (12)	Staff?	(i.e.		cing, VA7	r, or	tion,		pecify or LF)		Remova	Repair	Encapsulate	Enclosure
(10)		Yes	No	N/A		otner n	niscellan	eous)					val	air	ulate	sure
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Basement Thro	Х		Air	Cell Ir		-	ey	26	0 LF	1	Х					
Basement Thro	X		Pape	r Pipe	Insulati	on, B	rown	12	0 LF		Х					
Basement Throughout X					Joint	to Pipe	Insula	tion,	Grey	16	SSF		Х			
11					aste No.	Cubic of Was			Name of R	.45016-14.4-10.						
045					036820	TBD				ndfill/GROWS Landfill						
City, State Newark, NJ/Pine Brook, NJ						Dispos TBD	al Date		City, State Bethlehe	m PA	VTully	towr	, P/	Α		
Completed by Vanco Petkov		Title	ct Ma	nager		Si	gnature	202	550			Date	0.0	0.4-		
Talloo Tollov	iayei			6.00	2/1976	7 16	5-423		12-1	8-2	U17					



NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12 120)

Date of Notification (1) 12-18-2017					f Building				atter-day S						M		
Agencies Notified	Type Notification		-	Street A			-								H		
X EPA	× Initial			PO Bo	x 1968				West beautiful to the second	DE	3 2	2 20	17		1)		
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NAME OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OW	Amendment #		— L		ont, Wes	st Virg	inia 26	555-1	968 AS	BEST	05.0	ONTO	01	0			
DOH DCA	justification) Cancellation			Name o	f Contact				BEN CONTRACTOR NAMED INCOME.	Tele	ephone	Numb	er	UKO MINISTERNA	***************************************		
land .				FACI	LITY INFO	ORMAT	ION						1177 100				
Name of Facility Where A Proposed Church	Abatement is Taking	Place (3	3)					Туре	of Facility (4)							
Street Address									School (K-12 Subchapter 8		ar than	K 12)					
47 Bassett Highway	y							×	Other (i.e. pri				rcial buildings, hor				
City (5)	*						-		etc.) re Feet	# of	Floors		ТВ	ldg. A	ae		
Dover								41,4		2				2+			
County (6) Morris					Code (7) USE ONLY)			ent Use (Prior ehouse	if beir	ng dem	nolished	1)				
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCN	1 No		Name			actor	(9)						
				7.00.			Name of Abatement Contractor (9) United Safety LLC										
Street Address					Street Address 12 Maple Ave #F2												
City, State, Zip Code					City, State, Zip Code Pine Brook, NJ 07058												
Project Manager for Mon		Telepho	ne No.		Telephone No. License No. 973-276-0099 01317												
Start Date (10) 01-02-2018		Schedule		pletion	Date (11)		Name	of OSI	HA Monitor fety LLC			M. T.					
Occupancy Status During							Street										
(1 <u>-1-1-</u>)	ated During Entire Pe		20.250	ent					Ave #F2								
	ed Outside of Norma	I Facility	/ Hours	CIII			20		ip Code								
Scope of Work (Check A	II That Apply						Pine	Broo	k, NJ 0705	8							
≥3 sf or ≥3 lf	п тпас Арріу)	×	2	lia-			×	J	10	4	N14	: D					
× ≥160 sf or ≥260 lf			Renova Demoliti	701000000			X	Mir	l Containmer ni-Enclosure		Negati	ive Pres	ssur	е			
	ė.	(A)					×	,-	vebag Proce n-Exempted (l Non-F	Friable I	Proc	edur	9		
		ls	Location	on				110		Tidble !			dure atement				
Location	of	1	Vormall	У		De	scription	of					-	Ту	ре		
Asbestos-Containing TO BE ABA		Ma	ed Solel iintenar	nce/			taining M I systems				nount pecify		71		En	т	
In Facili		Cust	todial S (12)	staff?	(1.6.	surfa	cing, VA	T, or	1001,		or LF)		Remova	Repair	caps	Enclosure	
(13)		Ves	No	N/A		other	miscellar	ieous)					oval	air	Encapsulate	sure	
		Yes	INO	IN/A		Conti	nued Pa	age 3					-				
Basement Mechanic	al Room HVAC		X				on Cloth			6	SF		X				
1st Floor Exterior Fa	X		Fr	ame (Caulkin	g, Gre	еу	2	SF		X						
1st Floor Re	Х		Fa	cade	Caulkir	ng, Gr	ey	6	SF		X						
Name of Registered Was	te Hauler			JDEP W			Yards		Name of Re	egister	red Lar	ndfill					
Newark Carting Inc/L		auler ID 1509/00	No. 036820	of Wa	ste												
City, State Newark, NJ/Pine Bro	ook, NJ			172)		Dispo TBD	sal Date		City, State Bethlehe	m PA	VTully	ytown	, PA	4			
Completed by			8 3	Signature					Date								
Vanco Petkov	ct Ma	nager			1	S. B.	73 /		5	12-1	8-2	017					

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)				Name	of Buildin	ng Ow	ner/Operato	or (2)		E G		W	B	-	7		
Agencies Notified	Type Notification	n			Church		esus Chris	st of I	Latter-day	Saints				$\int \int \int dx dx$			
X EPA	× Initial				Box 196				141	DEC ;	22	lass	1	II II			
X DEP X DOL	Amended Amendme	nt#		City, S	State, Zip	Code	<i>"</i> · · · · · · · · · · · · · · · · · · ·					VIII	-/1	y	_		
▼ DOH	☐ Emergenc	y (includin	g		of Contac		/irginia 26	5555-	1968 ASE	ESTOS	CONT	NAME OF TAXABLE PARTY.	-				
DCA	justification Cancellation			Ivaine	or Corna	Cl				Teleph	one NL	mber	8	7			
Name of Facility Where	e Abatement is Tak	ing Place	(3)	FA	CILITY IN	FORM	MATION	T =				-	STATE STATE	nenom.			
Proposed Church	The station of the state	ing reace	(3)					Тур	e of Facility (4	***							
Street Address								H	School (K-12 Subchapter	(Other th	nan K-1	2)					
47 Bassett Highwa	ay 	- 4300						×	Other (i.e. pretc.)	ivate & co	mmerc	ial bu	ilding	s, hon	nes,		
Dover								Squi 414	are Feet	# of Flo	ors		Bldg.	Age			
County (6)				County	Code (7))		1 800	170650	2 if being d	emolic		62+				
Morris				(STATE	USE ONL	(Y) _		Current Use (Prior if being demolished) Warehouse									
Name of Monitoring Firm	m Hired by Building	Owner (8)	ASC	M No.		Name Unite	of Aba	atement Cont afety LLC	nt Contractor (9) LC							
Street Address						- 85	1 00000	et Address Maple Ave #F2									
City, State, Zip Code							Zip Code k, NJ 0705	58									
Project Manager for Mor	nitoring Firm		Telepho	one No.		Teleph 973-2	one N	lo.	Lio	ense N	0.						
Start Date (10) 01-02-2018		Schedul 02-12-	ed Co	mpletion 8	Date (11)			HA Monitor					AH 12 14			
Occupancy Status Durin	g Abatement (Che						Street		fety LLC								
X Facility Closed/Vac	ated During Entire	Period of	Ahatai	ment					Ave #F2								
Other – Describe:	ned Outside of Norr	nal Facility	/ Hour	rs					ip Code k, NJ 0705	8							
Scope of Work (Check A	II That Apply)																
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli	330000			×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
		ls	Locat	ion				ION	1-Exempted () and Nor	e Pro	Cedur					
Location			lorma d Sole		27 92	I	Description	of						ре			
Asbestos-Containing TO BE ABA	ATED	Ma	intena odial	nce/	Asbes (i.e.	tos Co thern	ontaining Ma nal systems	aterial insula	(ACM)	Amoun (Specif	-	70		En	Ш		
In Facili (13)	ity	Ousi	(12)	Jiair		Sui	rfacing, VAT er miscelland	. or		SF or LF		Remova	Repair	Encapsulate	Enclosure		
		Yes	No	N/A				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				val	Ĩ.	ulate	ure		
						Con	tinued Pa	ge 4									
1st Floor Cano	Х			Tra	ansite, Gr	еу		720 SF		Х							
Name of Registered Wast	te Hauler		N	JDEP W	aste	Cub	ubic Yards Name of Reo			egistered Landfill							
Newark Carting Inc/U	Inited Safety LL	_C		auler ID 1 4509/00			Waste			dfill/GROWS Landfill							
City, State Newark, NJ/Pine Bro				osal Date		City, State Bethlehem	PA/Tul	lytow	η ΡΔ								
Completed by				Signature	-	> 5	v i ui	Date									
/anco Petkov	Manager 12-18- 20						2017	17									

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

Date of Notification (1)			Name	of Building	Owner/Operator (2) // //		1/ 10	7 -				
/	17		Cos	mo Mart	elli		3	5-5					
Agencies Notified	tion		Street	Address		144	DEC 22 201	7	$/\!\!/\!\!/$				
□ DOLWD □ Amended			City S	tate, Zip C	ode			- 1	4	1			
□ DOH Amendme					d, NY 10314	ASBE	STOS CONTRO	_ /					
□ DCA		3		of Contact		The state of the s	Telephone Numb	52			-		
(NJAC 5:23-8) justificatio				mo Mart			Telephone didnir	001	I				
15100 2710000 5000000			FAC	CILITY IN	FORMATION								
Name of Facility Where Abatement is T	aking Place	(3)				Type of Facility (4)						
Residence						School (K-12)) (Other than K-12)						
Street Address						cial buildings,							
					1 " = = "								
City (5)						Square Feet # of Floors Bldg. Age							
Sea Bright					(7)(STATE USE ONLY) Current Use (Prior if being demolished)								
County (6)			Coun	ity Code (7)(STATE USE ONLY)	hed)							
Monmouth						Residence							
Name of Monitoring Firm Hired by Build	ing Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)							
Guardian Contracting, Inc.					Guardian Co	ntracting, Inc.							
Street Address				Street Address									
1889 Rte. 9, Unit 61					1889 Route 9), Unit 61				5451			
City, State, Zip Code					City, State, Zip C	ode							
Toms River, New Jersey 08755					Toms River,	New Jersey 08	755						
Project Manager for Monitoring Firm		Tele	phone	No.	Telephone No.		License No.						
Nicholas Fernicola		73	32-349	-9932	732-349-9932								
The state of the s	cheduled C			North Control	Name of OSHA N								
	12 /		_ / _	17	E.M.S.L. Analytical								
Occupancy Status During Abatement (0					Street Address								
☐ Facility Closed/Vacated During Entir				a sila a	1056 Stelton								
Abatement Performed Outside of No Time of Abatement:AM		7			City, State, Zip C								
Scope of Work (Check all that apply)				• 118791	Piscataway,	New Jersey 08	854						
	4					tainment with Neg	ative Pressure						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti			☐ Mini-End	closure g Procedure							
☐ ≥100 St 01 ≥200 tt		SITIONE	211				n-Friable Procedu	re					
	100	Loca						Ab	atem	ent T	уре		
Location of	Lie	Norma ed Sol			Description		nu k etu areotaratan e	R	R	Щ	Щ		
Asbestos-Containing Material (ACM TO BE ABATED		aintena			stos Containing Ma		Amount (Specify	Remova	Repair	cap	Enclosure		
IN Facility	Cus		Staff?		surfacing, VAT	, or	SF or LF)	val	-	Encapsulate	sure		
(13)	Yes	(12) No	N/A	1	other miscellane	eous)				ite			
garage				asbesto	os ceiling		150 sf						
2 nd floor balcony				asbesto	os flooring		100 sf						
Name of Registered Waste Hauler	-	1	NJDEP '	Waste	Cubic Yards of	Name of Regis	stered Landfill						
Guardian Contracting, Inc.		ŀ	dauler I 2022		Waste 5	T.R.R.F.							
City, State					Disposal Date	City, State							
Toms River, New Jersey					12/18/17	Tullytown,	Pennsylvania						
Completed By (Print or Type)	Title			12112-22-	Signature		// Da	ate /	7				
Nicholas Fernicola Project Manager										7			

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

		NO			BESTOS ABA C 8:60 and 5:		MENT IF	NECE	\mathbb{V}	E	1	11					
Date of Notification (1)					Name	of Building	Owner/Operator	(2)	l hor	2	~		#	111			
12/	15 /	17			Mes	ssercola	Excavating Co	., In	c.	ner 28	26	775	业	91			
Agencies Notified	Type Notifica	ition			Street	Address				1110 6 -		-	1	1			
⊠ EPA					549	East 3 rd	Street			THE REPORT OF THE PARTY OF THE	ON IT	DOI	2	-			
⊠ DOLWD	☐ Amended			Ī	City, S	tate, Zip C	ode			ASBESTOS C	SIMG	FIUL	CX				
☑ DOH ☐ DCA	Amendme	-	 na		Plai	nfield, N	J 07060			Francisco	water tradegra	COMPCHANT	PERSONAL LINES				
(NJAC 5:23-8)	justification		ng.		Name	of Contact				Telephone Numb	er						
	☐ Cancellati	ion			Fer	nando M	essercola			12							
					FAC	CILITY IN	FORMATION				_						
Name of Facility Where A	Abatement is T	aking Pla	ce (3	3)				Ty	ype of Facility	(4)							
Residence									School (K-1								
Street Address										8 (Other than K-12) private and commerce	ial bu	ildina	S				
								-	homes, etc.		nui bu	numg	Ĭ,				
City (5)								S	quare Feet	# of Floors	Bio	dg. Ag	je				
LB Twp.									700 sf	1	1	65					
County (6)					Coun	ty Code (7)(STATE USE ONLY,	ned)									
Ocean							Residence										
Name of Monitoring Firm	Hired by Build	ling Owne	r (8)	1	ASCM	No.	Name of Abatement Contractor (9)										
					564		Guardian C	ontr	racting, Inc.	10							
Street Address							Street Address										
							1889 Route		× 0.04 (5.00 (5.00)								
City, State, Zip Code							City, State, Zip										
							Toms River, New Jersey 08755										
Project Manager for Moni	itoring Firm			Tele	phone	No.	Telephone No.										
							732-349-993										
Start Date (10)	Comment of the Commen	cheduled					Name of OSHA		10,07001								
12 /28 /		12			_ / -	17_	E.M.S.L. An	alyt	ical								
Occupancy Status During							Street Address										
☐ Facility Closed/Vacate	-					. 21	1056 Stelto										
Abatement Performed Time of Abatement:							City, State, Zip										
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Scope of Work (Check al	I that apply)						□ Full Co	ntair	nment with Ne	egative Pressure							
≥3 sf or ≥3 lf			Rend	ovatio	on		☐ Mini-Er	nclos	sure	gative i ressure							
≥160 sf or ≥260 lf		\boxtimes	Dem	olitio	n		☐ Gloveb			on-Friable Procedure	_						
			le I	ocati	ion		⊠ No⊓-E	Kenip	oted () and M	OII-FIIADIE FIOCEGUII	1	atem	ant T	VOO			
Location	of		No	rmal	ly		Description	of				_					
Asbestos-Containing	Material (ACM			Sole	ly by		stos Containing N	/later		Amount	Remova	Repair	inca	Enclosure			
TO BE ABA					Staff?	(i.e	., thermal system surfacing, VA			(Specify SF or LF)	ova	ar.	sde	uso			
(13)	-57			(12)			other miscellar			0, 0, 2, ,	-		Encapsulate	6			
		Ye	s	No	N/A												
exterior			[\boxtimes		asbesto	os transite pan	els		700 sf							
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Name of Registered Was				1000	JDEP \ auler II		Cubic Yards of Waste		970	istered Landfill							
Guardian Contracti	rig, inc.				20223		3		T.R.R.F.								
City, State							Disposal Date		City, State								
Toms River, New Jersey							12/29/17		rullytown	ı, Pennsylvania							
Completed By (Print or Type) Nicholas Fernicola Title Project Manager							Signature			Da	te	_	1				
Nicholas Fernicola	ct N	/lana	ager				1-10	1 1	2/	15	11.	7					



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

Date of Notification (1)			T	Name	of Building	Owner/Operator (2) 5	P B I W	F	5					
	17		Sakoutis Brothers Disposal												
Agencies Notified Type Not ⊠ EPA □ Initial					Address Box 84			EC:22 201	7	IJ					
□ DOLWD □ Amen			ı	City, S	State, Zip C	Code									
	dment #			Col	ts Neck,	NJ 07722	ASRI	ESTOS CONTR	OL&		1				
	ency (includi ation)	ing	h	Name	of Contac	t	AODI	Telephone Nur	nber	THE COLUMN TWO IS NOT					
Cance				Joh	n Sakou	tis	In construction to the second								
				FA	CILITY IN	FORMATION		-K							
Name of Facility Where Abatement	is Taking Pla	ce (3)					Type of Facility	(4)	-						
Former Maryann's Bar							☐ School (K-12	2)							
Street Address						1		8 (Other than K-1		مالمان					
121 Rte. 537 East (Former a	ddress was	277	Rte	e. 537	East)		homes, etc.)	rivate and comme	ercial bu	manig	j 5,				
City (5)							Square Feet	# of Floors	BI	dg. A	ge				
Colts Neck							2000	2		65					
County (6)				Cour	ity Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demol	lished)		21111240				
Monmouth						Former Bar									
Name of Monitoring Firm Hired by B	uilding Owne	er (8)	A	SCM	No.	Name of Abateme	ent Contractor (9)								
Guardian Contracting, Inc.						Guardian Contracting, Inc.									
Street Address							7/-								
1889 Route 9, Unit 61						1889 Route 9), Unit 61								
City, State, Zip Code						City, State, Zip Co									
Toms River, New Jersey 087	55					Toms River,	New Jersey 08	755							
Project Manager for Monitoring Firm		Т	elep	hone	No.	Telephone No.									
Nicholas Fernicola					-9932	732-349-9932 00624									
Start Date (10)12 /27 /17	Scheduled 12					Name of OSHA M E.M.S.L. Ana									
Occupancy Status During Abatemen	it (Check onl	y one))			Street Address									
☐ Facility Closed/Vacated During E						1056 Stelton									
Abatement Performed Outside o						City, State, Zip Co	ode								
Time of Abatement:AM	PM/	—Р	W		AM	Piscataway, I	New Jersey 08	854							
Scope of Work (Check all that apply)														
$\boxtimes \ge 3$ sf or ≥ 3 lf $\boxtimes \ge 160$ sf or ≥ 260 lf		Renov Demol				 ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☑ Non-Exempted (*) and Non-Friable Procedure 									
		Is Lo							Ab	atem	ent T	ype			
Location of Asbestos-Containing Material (A TO BE ABATED IN Facility (13)	N N	Norr sed S Mainte ustodi (1	olel nan	y by ice/	Asbe (i.e	Description of stos Containing Ma , thermal systems surfacing, VAT	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure			
(13)	Ye	1	lo	N/A		other miscellane	ous)				te				
exterior			1		Asbest	os siding		1100 sf							
basement			1		duct ins	sulation		80 sf							
	П	TF	1	П					$\exists \Box$	П	П				
Name of Registered Waste Hauler			NJ			Cubic Yards of	Name of Regis	stered Landfill							
Guardian Contracting, Inc.			Ha	uler II 20223	O No.	Waste 8	T.R.R.F.	ACTION ENTITION							
City, State						Disposal Date	City, State								
Toms River, New Jersey				1/02/18	Tullytown,	Pennsylvania									
Completed By (Print or Type)				Signature	//	//	Date /		1						
Nicholas Fernicola	Proje	ct Ma	ana	ger			. tel	/	12/1	15/	1/7	7			

Elvira Mrda

State of New Jersey Check # 4079 Project # (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 12/15/2017 Princeton Day School
Street Address Agencies Notified Type Notification 650 Great Rd Initial FPA City, State, Zip Code Amended DEP Amendment # DOL Princeton, NJ 08540 Emergency (including ASBESTELEPHONE WUMBER & Name of Contact justification) DOH LICENSING Cancellation DCA Storey **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Princeton Day School Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) 650 Great Rd Square Feet # of Floors Bldg. Age City (5) Princeton, NJ Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) Mercer County Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Nick Restoration LLC RAMM Street Address Street Address Brookside Rd 77 Nottingham Rd City, State, Zip Code City, State, Zip Code Randolph NJ 07869 Fair Lawn License No. Telephône No. Project Manager for Monitoring Firm Telephone No. 01133 Rodger Headrick Start Date (10) 73-933-2550 201)475-9880 Name of OSHA Monitor Scheduled Completion Date (11) 12/28/2017 RIS 2/262017 Occupancy Status During Abatement (Check Only One) Street Address 2333 RT 22 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: 3pm Jnion, NJ 07083 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Description of Location of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Enclosure (i.e. thermal systems insulation, (Specify Removal TO BE ABATED Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)N/A Yes No < 8 L.F. TSI Attic entrance Room 209 Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste G.R.O.W.S Nick Restoration LLC ΓBD Disposal Date City, State City, State Randolph, NJ 07869 Tully town, PA Date Completed by Title Signature

President

12/152017

CK = 4390

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) ML. HARRISON 12/16/17 Agencies Notified Type Notification Street Address EPA Initial City, State, Zip Code ASBESTOS CONTROL & 0767 PENSING DEP DOL Amended TENAFL D Amendment # Emergency (including Telephone Number justification) DOH 0 YR GRASS DCA Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) MR-GRASS ☐ School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) Bldg. Age # of Floors City (5) Square Feet 1950 2500 Z Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) 120510ENCE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Best Removal Inc Street Address Street Address 450 South River Street City, State, Zip Code City, State, Zip Code Hackensack, NJ 07601 Project Manager for Monitoring Firm Telephone No. Telephone No. 00388 201-329-7444 Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) 27 Omega Environmental Street Address Occupancy Status During Abatement (Check Only One) 280 Huyler Street Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours
Other – Describe: 7300H 40 500 PM City, State, Zip Code South Hackensack, NJ 07606 Scope of Work (Check All That Apply) Full Containment with Negative Pressure _ ≥3 sf or ≥3 lf Renovation ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ (i.e. thermal systems insulation, surfacing, TO BE ABATED (Specify Custodial Staff? SF or LF) In Facility VAT, or (12)other miscellaneous) Yes No N/A BASEMENT 675 SF LAT NJDEP Waste Name of Registered Landfill Name of Registered Waste Hauler Cubic Yards Hauler ID No. of Waste Minerva Enterprises, LLC Best Removal Inc 17109 City, State Disposal Date 12/29/1 Hackensack, NJ 07601 Wavnesburg, Completed by Signature J. Maiorano Estimator

Do not use this form for asbestos licensure exempted activities.

CK # 4390

	144	(Pı	ATION resuant t	OF ASBESTOS	12 120)	MENT .		E C	KEF	30		7	
Date of Notification (1)		N	lame of E	Building Owner/Op			The state of the s	ac.	0 0 0 0	<u> </u>	The second second		
Agencies Notified Type Notification		S	treet Add	ress				UL	1 66 6	U17			×
□ EPA □ Initial □ DEP □ Amended Amendment #_□ Emergency (inch justification) □ DCA □ Cancellation	uding	- L	Varne of C	Bluce		Σ. ε	766	SBES L Tele	TOS CONT ICENSING phone Numbe	ROL	. &	STORE THE TOTAL	
Name of Facility Where Abatement is Taking Place	: (3)		FACIL	ITY INFORMAT	ION	Type of	Facility (4)					
Street Address						□ St	hool (K-12 bchapter 8 her (i.e. pri	(Other t	than K-12) commercial bu	ilding	s, hon	nes, et	c.)
City (5)				· · · · · ·			000	-	Floors		ig. Ag		
County (6) BE26EN			County Co	ode (7) SE ONLY)		Current	Use (Prior	if being	demolished) ひといく	-		=-	
Name of Monitoring Firm Hired by Building Owner	er (8)		ASCM	No.			nent Contra		76				
Street Address					Street	Address	noval th Ri		Street	_			
City, State, Zip Code					City, S	State, Zip	Code						
Project Manager for Monitoring Firm		7	Γelephon	e No.	Teleph	none No.	ack,		License No.	`			
Start Date (10) S	cheduled	l Compl	letion Da	te (1)) 7 / 1 7	3200 3000		-7444 Monitor		00388	<u>. </u>			7
Occupancy Status During Abatement (Check Only Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Fac Other – Describe: 739 AM	of Abat	ement urs	Ри		280 City, S	Huy. State, Zip	ler S Code	tree)76	06		
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovati emoliti		25	ار ا ا	Full Min	Containme -Enclosure	nt with l	Negative Press	ure			
	Is	Locati	on								Abate Tv	ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normall ed Solel aintenar todial S (12)	y by nce/	Asbestos Cor (i.e. thermal sys	escription ntaining Natems inst VAT, or miscella	Material (A ulation, su r	ACM) rfacing,	(Amount Specify For LF)	Removal	Repair	Encapsulate	Enclosure
BASENERT DOUBL ROOM	Yes	No	N/A	VA				15	OSF	×			
BASERCE BY DECOUR 1001				7.4									
			UDER !!!	100	c Yards		Name of	Register	ed Landfill				
Name of Registered Waste Hauler Best Removal Inc City, State			IJDEP W fauler ID	No. of W	acte		Mine City, Stat	<u>rva</u>	Enter				LLC
Hackensack, NJ 07601 Completed by	Title				Signatur	e /	Wayn		arg, Ol	12	141	117	
J. Maiorano	Est	tima	tor		X	1			sbestos licens	TP ave	mnta	l activ	rities

CA# 102)

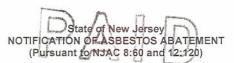
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		MAT	INCATIO	State of I	low Jeron	7 [Broama				<u>(</u>	<u>E</u>	10.2	
Outs of Notification (1)		reo	(Purbus	ON OF AS mit to NJA of Buildin	C B:00 ar	d 12;12	(0)	T	111 6	Ch U	eck	2/2	21	117
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Agencies Notified Type Notification	1	- Charlestone	Street	Address	_		-			ABBEX	TO	NSI	AITE	OL.
EPA Initial Amended Amended Amended Amended			City, 8	siala, Zip i GNLA4	Code	Pitter	11		3904		W. C	/		transcriptor Intellectual
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Name of Faseity Where Abetement is Tail	na Cinas	751	FA	CILTY	ORMAY	ÖN			877	15	'		1 1 1 1	111
FURYE Siroal Address Chylls				San Observation			A	School (K- Subchaple Diver (I.e.	12) r 8 (Other	Usen K-1	2) se pu	Vd Ing	s, hon	nes,
HIGHLAND PARK			County	Cade (T)			1	Sure .		2		Bidg.	40°	
MIDDLESSE			MTATE	Code (7) USE OWL	Y)	-	Cust	PLES	for if being	ellomáb (hed)) 		
Name of Mantaring Firm Hired by Building	Owner (1)	ABC	W No.		Nama	of Aqu	stement Co	ntractor (8	1				
Street Address				All manufactures decreases		Sirel	Addre	ontracting ss and Ave.			·			
City, Siste, Zip Code				-	*	City, 8	tato, 2	la Code			~~~			
Project Manager for Monitoring Firm			Talepho	ore No.		Midia	and P	ark, N.J.	1	Joanse N	6 .	<u> </u>		
Siant Date (10) /2/13/17	Schadu / &	pd Co	pplellon	Date (11)		Name	0/09	HA Monitor		00158				
Occupancy Status During Abatement (Chec	k Only C	ne)	, (***************************************	`	Bireet		ivironme	ntal Sen	/ices In	C,			
Facility Closed/Vacaled Euring Entire Absternant Performed Outside of Norn Ditter - Describe:	saled of sal Facili	Abatar y Hour	mant e			280 1	luylo	r Street Ip Code						
Scope of Work (Check All That Apply)				TT		Hack	ensa	ck, N.J. 0	7608					
#180 at or #360 it		Renova					Gio	l Conteiners d-Englesum pvebag Proc n-Exampteg	edure					
Location of Asbasios-Containing Material (ACM)		Loomi Normal Id Sele	lly .		Dec	station	of		L Faria N	STREET	Pro	Abah		
TO BE AGATED In Facility (13)	Cus	iodial S (12)	nice/ Steff?	Ashes (1.*).	ios Conts thermal e surfaci other mi	ysterns rg. VA1	insults.	(ACM)	Arno (Spe SF or	dfy	Resmoval	Repair	Esacapsadate	Enclosave
BASEMENT	Yes .	No	N/A	***	VA	7-			44	S SF			R	- Pa
and the second s	-													
ame of Registered Weste Heuler		H	DEPW	2210	Cutsic Y	ards							_	
Newark Carting, Inc.		H	Luier ID ISO9	No.	of Wasi	1	42.	Name of R Grand C			Lan	unii		
wowark, N.J. 07105	pangapasana.				13713	7/2	ser	City, Siste Pon Arg	yl, PA QI	3072				\dashv
3. McDanaid	Trib Pres	dent	A MINISTRALIA		810	majure	75	Dal			1/,	3/1	<u></u>	\dashv

CK= 10634

Print Form

State of New Jersey NOTIFICATION OF ASBESTOS ABATEME (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) VE Type Notification Agencies Notified Street Address **EPA** Initial DEP Amended City, State, Zip Code DOL ASSESTED SCONTROL & Amendment # Emergency (including Telephan Cansua Name of Contact DOH justification) DCA Cancellation YE NEWITA FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, City (5) Square Feet # of Floors Bldg. Age 500 County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. FRYMAR Street Address Street Address OBOX City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 267-78-1-4693 1A500 267-784-469 0127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12-12-1 STRANT Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Slovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ =ncapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)other miscellaneous) No N/A LIVING ROOM 500 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste WESTER 003 City, State Disposal Date 2-12-17 Title Signature Date





Date of Notification (1) 12/15/2017				Building C		Operator	(2)		E	CE		V		In	7
Agencies Notified Type Notification		S	Street Ad	ddress				IIM							
X EPA X Initial Amended Amendment:				te, Zip Coo it, NJ 07				Tank	 D			117	1	U	
□ Emergency (in justification) □ DCA □ Cancellation	including			Contact na Aguile	era				ARFE	enhane,	Numbe	30	L &		1
Name of Facility Where Abatement is Taking	Dlage (2)		FACI	LITY INFO	RMAT	ION	Tuno	of Facility (4)	1000				Westernal	1
House	g Place (3)							School (K-1							
Street Address							×	Subchapter Other (i.e. petc.)	8 (Oth	er than k & comme	(-12) ercial b	uildi	ings,	home	es,
City (5) Summit								re Feet	# o	f Floors A		Blo N/	dg. A	ge	
County (6) Union				Code (7) ISE ONLY)			Curre	ent Use (Pri se	or if bei	ng demo	olished)				
Name of Monitoring Firm Hired by Building ON/A	Owner (8)		ASCM	l No.				tement Cor ement, Ir		(9)					
Street Address							Addre osen	ss gren Ave	nue						
City, State, Zip Code						City, State, Zip Code Totowa, NJ, 07512									
Project Manager for Monitoring Firm	11	Т	elephor	ne No.			Telephone No. License No. 973-345-8685 01311								
Start Date (10) 12/27/2017	Scheduled 0 12/28/201		pletion [Date (11)				HA Monitor ement, In	IC.						
Occupancy Status During Abatement (Check	k Only One)					Street									
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm			ent			City, S	state, Z	gren Ave				_			
Other – Describe: occupied						Toto	wa, N	IJ, 07512							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X Rend					>	Mir Gle	II Containm ni-Enclosure ovebag Pro	e cedure					4	
	Is Lo	catio	in				Non-Exempted (*) and Non-Fr					able Procedure Abaten			
Location of	Non Used S	mally	/			scription					=	1	Ту	pe	
Asbestos-Containing Material (ACM) TO BE ABATED	Mainte	nan	ce/			taining N I system				mount Specify		0	77	Enc	Ē
In Facility (13)	Custodi (1	ai St 2)	tatt?		surfa	icing, VA miscellar	T, or		Si	or LF)	TO THE PERSON NAMED IN COLUMN TO THE	300	Repair	Encapsulate	Enclosure
()	Yes N	lo	N/A		ou ioi		.0000)				2	=		late	lre
Basrement	1.000000	<			Pipe	e Insula	ation		2	5 SF	}				
						10000									
Name of Registered Waste Hauler		1	IDEP W		Cubic of Wa	Yards		Name of	Registe	ered Lan	dfill				
D&S Abatement, Inc.		996	INO.	TBD		Waste Management of PA									
City, State Totow, NJ				TBD	sal Date		City, Stat Mooris		PA						
Completed by Ned Joksimovic	Mar	nager			Signature Date 12/15/2017										

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

Check # 10199

Date of Notification (1)				Nama	of Duilding Ou	noriOnomi	2- 121	7	16.		-		- 110 1000
Date of Notification (1)	12-15	-17	Z	Name (of Building Ow	menoperat		a Be	REDE	WH	0		
Agencies Notified	Type Notification			Street /	Address		111		0 10	15	-11	1	-
□ EPA .	✓ Initial		7,1	City St	ate, Zip Code		2116	11. 11		fUE	111	Щ	
DEP DOL	Amended Amendment #		001	Lity, St	TVON I	by th	0/5	ch .	X17-29	77-	74	#	
★ DOH	☐ Emergency (in justification)	ncluding	r	Name o	of Contact	7	1	1	Telenhone	Numbe	r	1	
□ DCA	☐ Cancellation			H9	nes I	20 v1	e	ASBES	31				
Name of Facility Where	Abatement is Taking	Place (3)	EAC	ILITY INFOR	MATIÓN	Type	of Facility	(4)				
	family		300	- 11:	. 5		1	School_(K-	. , , ,				
Street Address			0 11 1	410)			Subchapte	er 8 (Other than I	K-12)			
					(25)		/	etc.)	private & comm	ercial b	ulldin	gs, hor	nes,
City (5)	L. 11.	\mathbb{C}		1/7	- 67	7/7	Squa	re Feet	# of Floors			Age	
County (6)	DY THE	Ra	1	County	Code (7)	!!!	Сипте	nt I Ise (Pr	rior if being demo	nlished		30	<i>†</i> -
Mon	nouth	*.5			USE ONLY) _	**		11 000 (1 1	nor it being deriv	Jilet leu			
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCI	M No.	Nam	e of Aba	tement Co	ontractor (9)			Blow	
Street Address	e une le	316	2		MA	Stro	et Addres	- 16	chnol	1911	15	J	nL
P.O.	30x 33	57				Sile	Addres	Rox	337	9			
City, State, Zip Code		207		10	522	City	State, Z	ip Code	111		200	€	
NewE	RYPT,	N		OB	223	N	ew	Egy	IPT N	7 (19	20	15
Project Manager for Mon	beaks	i	16	Telepho	ne No. 758- 33		phone No	o. 330	Licens	e No.	2	PP	0
Start Date (10)		Schedule			Date (11)			A Monitor				1	-
Dec 36,	2017	lec	2	9	2017				hnologie	<u>.</u> .	Enc		
Occupancy Status During		45					Addres		227				
	ated During Entire Pe ed Outside of Norma						State, Zi		337				
☐ Other – Describe: _								gyot	TLL	08	15	33	
Scope of Work (Check A	II That Apply)							018					
≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf			enovat						nent with Negativ	e Pres	sure		
☐ 2100 \$1 01 2200 II			emoliti	OH		☐ Mini-Enclosure Glovebag Procedure							
					I		□ Nor	n-Exempte	ed (*) and Non-Fr	riable P			
		100000	Location Normall			.						atemer Type	п
Location Asbestos-Containing		Use	d Solel	y by	Asbestos	Descriptio Containing		(ACM)	Amount			m	
TO BE ABA			odial S			rmal systen surfacing, V		tion,	(Specify SF or LF)	Xei	3 6	ncap	Encl
(13)	-9		(12)			her miscella			0. 0. 2. 7	Kelliova	Keball	Encapsulate	Enclosure
		Yes	No	,N/A								te	В
Basemen	+	X			Pioe	Insu	rlat	iun	75 Li	FX			
	•												
Name of Registered Was	te Hauler		1000000	JDEP Wauler ID	STOCKED TO STOCK STOCKED STOCK	ubic Yards Waste	9	120000	Registered Land				- 1
	hnologies			170	00		Į.		teManag	ene	nt.	£ :	MY
City, State	, , , , A	15	91		D	isposal Date		City, Sta	uisville	PA			
Completed by	376	Title	N		lla	Signatur	-	- N	# June	Date			
Steve Sche	1. Kee		side	ent		SZ	(ميد	Sch	ch	12-	15	-1	7

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President

Do not use this form for asbestos licensule-exempted

Completed by

159-01

Carlos Almeida

V# 4185



p.3

12/11/2017

VIA Fax Check State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT EMERGENCY (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of NatiAcation (1) 12/11/2017 S & P Cranford Holdings Sweet Address Type Notification Acency Notified ASRESTOS CONTROL & 118 Lexington Avenue City, Signs, Zip Cods Of Inhial Q EPA LICENSING □ Amended ODEP Armendramers & COOL Cranford, NJ 07016 Emergency (including Telephone Number Name of Contact justification)

G Cancellation D DOH Mr. Salvatore Perillo Q DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Absternant is Taking Place (3) ☐ School (K-12) C) Subchapter 8 (Other than K-12) Street Address 10 Other (i.e. private & commercial buildings, 18-20 North Union Avenue homes, etc.) Square Feet # of Floors Bidg. Age CTRY (5) 5,000 Cranford Current Uso (Prior & being demolished) County Code (7) (STATE USE County (6) ONLY) Union Name of Absternant Contractor (9) ASCM No. Name of Montaring Firm Hirsd by Bullang Owner Novatach Inc. (6) Street Address Street Address P. O. Box 814 City, State. Up Code City, State, Do Cook 08857. Old Bridge, NJ Liperus No. Telephone No. Telephone No. Project Manager for Monitoring Firm. 00806 732-238-7500 Name of DBHA Monitor Scheduled Completion Date (11) Start Dale (10) 12/12/2017 12/13/2017 Occupancy Status During Abatement (Check only one) Street Address Correctly Closed/Vecsted During Entire Period of Absternent

Absternent Performed Outside of Normal Facility Hours

Other - Ogganities City, State, Zip Code Scope of Work (Check all that apply) O Full Containment with Negative Pressure @ Renovellon Mini-Enclosure 篇≥3 al or ≥ 3 11 Q Demoston O Glovebag Procedure □ ≥ 150 ml or ≥ 250 lf Mon-Exemplad (*) and Non-Friable Procedure Abalement la Location Type Normaliv Description of Lucation of Used Solely by Amount Encepedate Asbestos Containing Material (ACM) Astestos-Conteining Melerial (ACM) Enclosure Maintenance Regional (i.e., thermal systems in substicm, surfacing, VAT, or Rapeir (Specify Custodial SF or LF) IN Facility Staff? other miscellaneous) 113 (12) NIA Yes No X 3USF Clus/Mastic Behind Mirrors x Second Floor Name of Reputered Landin Waste Management of PA, Inc. Cubic Yards of NUDEP Waste Hauter Name of Registered Waste Hauler Waste IO No. 3 18501 Novatech Inc. City, State Disposal Date City, State 12/15/17 Morriaville, PA Old Bridge, NJ Signatura

CK# 7640

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)



Date of Notification	12/12/17 be Notificat	ion		of Building Ov		Operator (2)			(-
Agencies Notified X EPA	X Eme	rgency Notifica	Street A	Address fferson Ro	ad		ME	GE	1 W B	2 1 mm
DEP		I Notification	1.5007	ate & Zip Co				<u> </u>	n n F	-
X DOL		nded Notificati	i dioip	pany, NJ 0	7054					
X DOH	Can	cellation		of Contact			10 1	DEC 22	Telephor	ne Number
DCA			Keiran	Flanagan						
			FAC	ILITY INFO	RMA	ATION	ASDI	Born Princery		
Name of Facility Wh		ment is Taking ant Building			Тур	e of Facility (4) School (K-12)				-
Street Address						Subchapter 8 (
	40 Be	echwood Ro	oad			Other (i.e., priva		rcial build	dings, home	es, etc.
		1-			Squ		# of Floors		Bldg. Age	
City (5)		County (6)	County Co	de (7)		5,000	2			70
Summit		Union				ent Use (Prior if	f being demol	ished)		
						mer Office				
Name of Monitoring		by Building O	wner (8)	ASCM No.	100000000000000000000000000000000000000	ne of Abatement	of the said of the same of the same of the same of the same of the same of the same of the same of the same of	Control of the contro		
Langan Engineer	ing					bal Abatemer	nt Services,	LLC		
Street Address					0.0000000000000000000000000000000000000	et Address	2008 353V			
300 Kimball Drive					_	Schoolhouse	The state of the s			
City, State & Zip Coo						State & Zip Co				
Parsippany, NJ 0		F:	I= 1 · · ·			roe Townshi	p, NJ 0883′			
Project Manager for Vijay Patel			Telephone N 973-560-49	00	732	phone Number -605-9062		License	Number 0071 4	l .
Scheduled Start Dat 12/12/17	e (10)	Scheduled Co	mpletion Date 12/12/17	(11)	1155 GV607 (11)	ie of OSHA Mor bal Abatemer		LLC		
Occupancy Status D X Facility Closed	uring Abat	ement (Check During Entire F	only one) Period of Abate	ement	100000000000000000000000000000000000000	et Address Schoolhouse	Road			
Abatement Pe						State & Zip Co		752		
Describe: A			플레이트 (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			roe Townshi		ı		
Other - Descri			nical area o	nlv			p,	•		
Scope of Work (Che Demolition				,		Full Cont	ainment with	Negative	Pressure	
Large Project						Mini-Enc				
X Quantity is ≥ 3	SF or ≥ 3	LF ACM				X Glovebag				
Quantity is ≥						7	Non-Friable	2		
	ation of		Is Location	1	De	escription of		mount	Ahaten	nent Type
	s-Containir	ng	Normally Us			stos-Containing		pecify		: Removal,
Mater	ial (ACM)		Solely by		Ma	iterial (ACM)	Squ			ncapsulatio
	ABATED		Maintenance			hermal systems		or		closure)
	Facility		Custodial Sta			n, surfacing, VA		ear Feet)		
	(13)		(12)	0	r othe	r miscellaneous	5)			
2 nd F	loor Pipe	Chase	N/A			TSI pipe	1	5 LF	Ren	noval
Networ	king Roo	m	N/A			VAT	3	6 SF	Ren	noval
Jama of Dagistas J	Mastalli	ilos	NIDEDIA	a		0 V1 021	-1-			1611
Name of Registered Freehold Cart		uer	NJDEP Wast	e Hauler ID # 8693	Ŧ	Cu. Yds. of Wa	ste Nam		istered Lan	afill
City, State	9			0000		Disposal Date		State		
Trenton, NJ						12/12/1		ytown, i	Pa	
	or Typo)	Title				Signature	. jiuli	<i>y</i>	u	Date
completed By (Print										LI Certified
Completed By (Print Dominick Tring		Pres.				Dominick T	ningel:			12/12/17

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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

CK 7644

Date of Notification 12/12/17 Type Notification	n		Building Own		Operator (2)		11	
Agencies Notified	gency Notification	Street Add	dress				u i L	PEC 22 2017
	Notification		e & Zip Code			İ	ACDE	No. of Concession, Name of
X DOL Amend	ded Notification	New Bru	unswick, N	J		L		TOS CONTROL &
X DOH Cance	ellation	Name of 0	Contact				The Party Laboratory of the Pa	elephone Number
DCA		Robert F	Hersh					
		FACIL	ITY INFOR	MA	TION			
Name of Facility Where Abatemer BIdg. 115 Ex			Т		of Facility (4) School (K-12)			
Street Address	terior Excav	ation			Subchapter 8 (Other	than K-	12)	
	uibb Drive				Other (i.e., private &	comme	rcial building	
			S	Squar	re Feet # of	Floors	В	ldg. Age
City (5)	County (6)	County Code			NA	NA		NA
New Brunswick	Middlesex		100		nt Use (Prior if bein rior Pipe Trench	g demol	ished)	
Name of Monitoring Firm Hired by Environmental Tactics, Inc			SCM No. N	lame	of Abatement Con al Abatement Se			
Street Address		100		_	Address	1 11000,		
64 Broad Street			4	43 5	Schoolhouse Ro	ad		
City, State & Zip Code			C	City, S	State & Zip Code			
Matawan, NJ					roe Township, N	J 08831		
Project Manager for Monitoring Fir Tom Geiger		Telephone Nur 732-290-221			hone Number 805-9062		License N	umber 00714
	cheduled Com				of OSHA Monitor			00714
12/13/17		12/14/17			al Abatement Se	rvices,	LLC	
Occupancy Status During Abatem				Committee to the	Address			
Facility Closed/Vacated D	11.00				Schoolhouse Ro	ad		
Abatement Performed Out Describe:	tside of Normai	Facility Hours			State & Zip Code	1 00004		
	erior Work Ar	rea (evcavati		nonr	oe Township, N	J 08831		
Scope of Work (Check all that app		ca (cxcavati						
X Demolition	Renovatio	on			Full Containm	ent with	Negative P	ressure
Large Project					Mini-Enclosur			
X Quantity is ≥ 3 SF or ≥ 3 I	LF ACM				Glove-bag Pro	ocedure		
Quantity is ≥ 160 SF or ≥					X Other: Non-			
Location of		Is Location		Des	scription of	1	Amount	Abatement Type
Asbestos-Containing		Normally Used	d As		tos-Containing		Specify	(Specify: Removal
Material (ACM)	0.0	Solely by			erial (ACM)		are Feet or	
TO BE ABATED in Facility		Maintenance c Custodial Staff			ermal systems n, surfacing, VAT	Lin	ear Feet)	Encapsulation or Enclosure)
(13)		(12)			miscellaneous)			Linciosure)
Bldg. 115 Exterior Exca	vation	No	36" Ric	ckw	ell Pipe Tar (TSI)		6 LF	Removal
	-		-					
Name of Registered Waste Hauler	r N	NJDEP Waste	Hauler ID#		Cu. Yds. of Waste	Nam	e of Registe	ered Landfill
Freehold Carting		180	693		50	GRO	OWS	
City, State				1	Disposal Date		State	
Trenton, NJ					12/15/17	Mor	risville, Pa	the state of the s
Completed By (Print or Type) Dominick Tringali	Title Manager	•			Signature Dominick Tring	ali		Date 12/12/17
SB-41 JUN 95 G4667								

CKTIZYYZ

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

				1001	20 10 10			Chec	CK#			
Date of Notification (1)	cember 14, 2017			of Building ne Corpora		operator (2)				_		
Agencies Notified EPA DEP	Type Notification		Street	Address			DE	GEIVI				
DOL	☐ Initial ☐ Amended			tate & Zip C				EC 2 2 2017		十		
⊠DOH □DCA	Amendment #	#_			U I			The state of the s		_		
L DCA	Cancellation			of Contact Blackwell			ASBE	STOS CONTROT LICENSING	elephon	e Nun	nber	
			FA	CILITY	NFORM	TATION		12				
Name of Facility Where Celgene – Building D	Abatement is Taking F	Place (3)			T ₁	pe of Facility School (F						
Street Address						Subchap	ter 8 (Other than I	K-12)				
86 Morris Avenue					- I	Other (i.	e., private & cor	mmercial buildings		etc.)		
City (5)						133,00	0	3	ldg. Age 5 0	0 Yea	rs	
Summit, NJ						urrent Use (F ommercial	Prior if being demo	olished)				
County (6) Union		County Code USE ONLY_	(7)									
Name of Monitoring Firm McCabe Environmenta		ner (8)		ASCM N	1980	ame of Abate natech, Inc.	ement Contractor	(9)				
Street Address 464 Valley Brook Aven	11e #3A					reet Address 9 Radio Roa						
City, State & Zip Code	40, 11071				C	ty, State & Z	ip Code					
Lyndhurst, NJ 07071 Project Manager for Mo	nitoring Firm	Te	ephone N	umber		ttle Egg Har elephone Nur	bor, NJ 08087 mber	License Nur	mber			
John Chiavello Scheduled Start Date (1	0) Schadul	ed Completion	1-438-483			19-296-6916 ame of OSHA	\ Monitor		0081	7		
December 26,	2017	Marc	h 28, 2018		S	natech, Inc.						
Occupancy Status Durin Facility Closed	g Abatement (Check o Wacated During Entire		atement		1.00	reet Address 9 Radio Roa						
Abatement Per Other – Descri	formed Outside of Nor	mal Hours			100	ty, State & Z						
	ed During Abatement					ttie Egg Hai	bor, NJ 08087					
Scope of Work (Check a	ill that apply)											
≥ 3 sf or ≥ 50 lf			Renovatio	n		K 7	Full Containment Mini-Enclosure	with Negative Pressi	ure			
≥160 sf or ≥260 l	f		Demolition	i.		5 7	Glovebag Proced		-0.5040000			
Loca	tion of	Is Locati	on Norma	lly Used		Description		and Non-Friable Pro		atem	ent T	vne
Asbestos-Contain	ing Material (ACM) ABATED	Solely b	y Mainten dial Staff?	ance or		Asbestos-Co Material (A	ntaining	Amount (Specify S or LF)				JPC
IN F	acility	Cusio	ulai Stali :	(12)		i.e., thermal	systems	OI EF			m	_
(*	13)					ulation, surfa r other misce			Removal	Repair	ncal	Enclo
		Yes	No	N/A					oval	oair	Encapsulat	Enclosure
Building D – Basement)** 1.84 3.72		Х	F	loor Tile an	d Mastic	64 SF	X			
Building D – Exterior				Х		Window 0	Caulk	48 LF	_ x			
		_		-					- 1			
Name of Registered Wa	ste Hauler	NJDEP W		Cubic Ya	rds of Wa	aste	Name of Registe	ered Landfill				
Synatech, Inc.		Hauler ID	No. 429	4			Fairless Hills					
City, State				Disposal	Date		City, State					
Freehold, NJ 07728				March 29			Morrisville, PA					
Completed By	Title			Signature		111		Date				
Diane Aloia	Execu	tive Adminis	trator	1 NU	Ene (Mor		December 14, 2017				



State of New Jersey
NOTIFICATION OF ASSESTOS ABATEMEN (Pursuant to NJAC 8 60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) Artemis Yiannako Private Home 12/14/17 Agencies Notified Street Address Type Notification X FPA Initial City, State, Zip Code DEP Amended ASBESTOS CONTROL & X DOL Amendment # Surf City NJ 08008 Emergency (including Name of Contact Telephone Number justification) DOH Artemis DCA Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Artemis Yiannako Private Home School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Surf City NJ 08008 1000+ 1 35 +County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Ocean Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) N/A Pernaco Inc. Street Address Street Address PO Box 329 City, State, Zip Code City, State, Zip Code West Berlin NJ 08091 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 856-753-9800 00727 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12/29/17 12/23/17 Same Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) Renovation Full Containment with Negative Pressure ≥3 sf or ≥3 lf 区 ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbastos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Encapsulate Maintenance/ (Specify (i.e. thermal systems insulation, Removal TO BE ABATED Repair Custodial Staff? SF or LF) In Facility surfacing, VAT, or (12)(13)other miscellaneous) Yes No N/A 1000 SF **Exterior Siding** X Exterior Siding X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste G.R.O.W.S. United Containers 22459 3 City, State Disposal Date City, State 12/29/17 Morrisville PA 19607 Elm NJ Completed by Title Signature Date Anthony T Perna President 12/14/17

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

Data of Malifornian (4)		Nar	ne of B	Building Ow		perator (2)			5 10	1/1	7 10	<u></u>	
Date of Notification (1) 12-17-17			ry La				,	141	- 5			5		1/
Agencies Notified Type Notification		Stre	et Add	Iress				41	U	EC 55	2017	/	///	//
EPA Initial		City	State	, Zip Code				AS	REG	~	-01/	-//	4	H
EPA Initial Amended Amendment #				unna, NJ		76		And the Control of th	UEST	OS CONT	D.S.			
Emergency (Include	ding			Contact					Tola	nhana/Kliem	W69/ 5		4	
DOH justification) Cancellation		A constant	ary La			201							1	-
Name of Facility Where Abatement is Taking Place	ce (3)		FACILI	TY INFOR	MAHC	JN	Туре о	f Facility (4))					\neg
Private Home	. ,						☐ S	chool (K-12)					
Street Address							10	ubchapter 8 ther (i.e. pri c.)	(Othe vate &	r than K-12 commercia) I buildi	ngs, h	omes	5,
City (5)							Square	Feet	# of	Floors	Blo	lg. Ag	е	
Succasunna		T -					0	t Has (Dries	if hair	ng demolish	ad)			\dashv
County (6) Bergen		(ST	ATÉ US	ode (7) SE ONLY)		_								
Name of Monitoring Firm Hired by Building Owne	er (8)	1	ASCM	No.				ement Contracting LL		(9)				
N/A Street Address						THE PERMIT	Address							\neg
Street Address							7th St.							
City, State, Zip Code							tate, Zip n City	Code NJ 07087	7					
Project Manager for Monitoring Firm		Te	lephon	e No.			none No			License No	0.			
							216-96			01206				_
Otari Data (10)	eduled C -27-17	ompl	etion D	ate (11)		Delfa	a Cont	A Monitor racting Ll	_C					
Occupancy Status During Abatement (Check On	ly One)					7 11 5 5	Addres 7th St.							
Facility Closed/Vacated During Entire Perio Abatement Performed Outside of Normal Facility	d of Abat	emer	nt				State, Zi							-
Other – Describe: 7:00 Am - 5:00 Pm	acility 1101				_	1		NJ 0708	7		IV-NOSTWI ST			
Scope of Work (Check All That Apply)						_	_							
≥3 sf or ≥3 lf	Reno							Containme i-Enclosure		Negative F	ressur	е		
2160 sf or ≥260 lf] Dem	Olitior	1				Glo	vebag Proc	edure	d Non Erick	lo Dro	odur		
						L	□ Nor	n-Exempted	(*) an	d Non-Friab			ment	
	Is Loc				Do	scriptio	n of				_	Ту	ре	
Location of Asbestos-Containing Material (ACM)	Used S Mainte			Asbest	os Con	taining I	Material	(ACM)		Amount Specify	70		En	ш
TO BE ABATED In Facility	Custodia	al Sta		(i.e. 1	surfa	cing, V		BOH,		F or LF)	Removal	Repair	Encapsulate	Enclosure
(13)	- (1	2)			other	miscella	neous)				Va.	=	ılate	ure
	Yes N	0	N/A			=				10 SF	.,			
Basement	>	(VAT				10 31	X	-		-
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		1									+		_	-
					0.11	- Vasda		Name of	Pagiet	ered Landfi				
Name of Registered Waste Hauler		Ha	DEP W uler ID	No.	of Wa					esource F		erv F	acili	ity
Delfa Contracting LLC			3524	0	1									_
City, State Union City, NJ						osal Dat 28-17		City, Stat						
Completed by	Title					Signatu	re	4 -			ate 2-17-	17		
Jaime Delgado	Proj. Ma	ana	ger.				1	9				355 355	-	

							-7	ND			
	S	State of N	ew Je	rsey - Notifi	ication of Asbestos C. 8:60-7 and 12:120-7)	Abaten	ient/	Che	ak #	1/20	745
GAC Project # 060-17			(Purs	uant to N.J.A.C	C. 8:60-7 and 12:120-7)	ب	A 7	را کواند		Ares	,,,
Date of Notification (1)				-10)	Name of Building Owner	/Operator	(2)	~	OFF	1110	Sec
	ber 5, 2	2017		15/	RUTGERS THE S			SITY OI	- NJ		
Agencies Notified		Notification		U 6	Street Address						
□EPA		⊠Initial	Notifica	ition	ENVIRONMENTAL	. HEALT	H & SA	FETY I	DEPT.		
□ DCA		□ Amend	led Noti	fication #	27 ROAD 1, BLDG	4086, L	IVINGS	TON C	AMPUS	S	
⊠ DOL		□ Emer	gency (including	City, State, Zip Code				7 7 7		
DEP- No Longer REQUIR	RED		cation)		PISCATAWAY, NJ	08854	m) [= \	W E	
X DOH		□ Cance	elled		Name of Contact		111 - 12	3-L 22 N	mhor		
					MICHAEL SMITH,		Ē.,		_		
				EACH ITY IN	HEALTH & SAFET	Y		nec	222	017	Ш
Name of Facility Where Abater	ment is Ta	king Place (3)		PACILITY	Type of Facility (4)	-		ULU			
JOHNSON APTS, BLD					School (K-12)						
Street Address		***************************************			Subchapter 8 (other t	han K-12)	AS	BESTO	S CONT	ROL &	
BUSCH CAMPUS					Other (i.e. private & c	ommercia	buildings,	homes el	NSING		NO CONTRACTOR OF THE PARTY OF T
					Sq. Feet: N/A	# of Floor	s: 3 Bld	g. Age:	60+ ye	ars	
City (5) PISCATAWAY	County (6			/ Code (7) Use Only)	0						
PISCATAVVAT	MIDE	DLESEX	Totale	Ose Only)	Current Use (prior if beir	ig demolisi	ned): A	CADEMIC			
Name of Monitoring Firm Hired	by Blda (Owner (8)	ASCM	No	Name of Contractor (9)	-					
ATC	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	101	0098								
189 300 10 14					GREENWOOD ABA	TEMEN1	CONS	ULTAN'	TS, INC		
Street Address					Street Address						
3 TERRI LANE					511 MAIN STREET						
City, State, Zip Code											
BURLINGTON, NJ 080	016				City State, ZipCode BUTLER, NJ 07405						
Project Manager for Monitoring		Telephone	Number		Telephone Number		Lice	nse Numb	er		
BRIAN KEARNY	***************************************	609-386			COPPERATO SELECTION CONTROL				<u> </u>		
Cabadulad Start Data (40)		01.11.1			973-492-0477		008	340			
Scheduled Start Date (10) 12/15/17			2/20/17	on Date (11)	Name of OSHA Monitor						
12/13/17		14	2/20/17		ENVIROVISION, IN	C.					
Occupancy Status During Ab					Street Address						
Facility Closed/Vacated Du				nt	20 04 14/4 DO 4 D 4 14/	DOAD					
Abatement Performed Out	side of No	ormal Facility	Hours -		20-21 WARGARAW City, State, Zip Code	RUAD					
Describe Other – Describe: Shift I	ا مساما	2.00 034	E.00 A		City, State, Zip Code						
Mother - Describe: Silit i		3:00 PW = 24 hours a									
		24 110u15 d	is need	ieu)	FAIRLAWN, NJ						
Scope of Work (Check all that a	apply)										
<u> </u>				-		Full Con	tainment	with Nega	ative Pre	ssure	
□≥ 3 sf or ≥ 3 lf				Renovation	_	Mini-End					
$\boxtimes \geq$ 160 sf or \geq 2	260 11			■ Demolition			g Proced			e are estados arestados	
Location of Asbestos-Containin	a Isto	cation Norma	lly Used	Description of As	bestos Containing Material	Non-Exen	npted (*) a		riable P		
Material (ACM) in Facility (13)	9	ly by Maint./C			nal systems insulation, surfac	S	ecify SF	-	1779 - 77 O		.
	Staff YES	? (12) S NO	NA	VAT, or other mis	scell.)	or l	-F)	Remove	Repair I	Encap Enc	close
APT 874	1 1 2 3	NO NO	INA	\/AT			0.05	Test .	_		
APT 896		X		VAT	Enterthermony rectangly interest rate of		0 SF	X		\vdash	
		[A]	-	VAT	460000000000000000000000000000000000000	68	0 SF	X	8 F1	-	
Name of Reg. Waste Hauler		NJDEP Was	te Hauler	I #	Cubia Vand 1884 1	20.07	Nam	e of Regis	torod Lo	ndfill	
See Hauler Below #1 & 2	2	See Belov		.5.11	Cubic Yards of Waste:	30 CY		.O.W.S.			
Hauler #1) Greenwood Abaten		1000000		NI 07405		Dieness					
NJDEP # 28969	nent Cons	uitants, Inc	- Dutier, I	13 0/405		Disposal 12/20/			City, State 100 New	<u>e</u> Ford Mill	
Hauler #2) Newark Cartin	g, Inc., l	Newark, N.	J			121201			Rd. Morr	isville, Pa	San III
NJ DEP# 04509								1	19067 215-736-	1700	
Completed by (Print or Type)		<u> Fitle</u>			Signature		Date		10-130-		
RAYMOND C. PEDALI		SENIOR P		T	Raymond C. Pe	dolina		Decem	ber 5,	2017	
	P	MANAGER	3		Ludworth C. Le	vvvvvvv					

State of NJ

Notification of Asbestos Abatement

2017-127 6 NJAC 8:69-7 and 12:120-7) B & G proj. #: Check # 8731 ME RG Name of Building Owner/Operator (2) Date of Notification (1) 1 | 2 | / | 1 | 5 | / | 1 | 7 | Atlantic Health System Agencies Notified Type Notification Street Address ☐ EPA 100 Madison Avenue Initial 2017 ☐ DEP City, State, Zip Code Amendment DOL Morristown, NJ 07960 Telephone Number C & LICENSING X DOH Name of Contact Cancellation ☐ DCA Peter Palmer **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Morristown Medical Center, Anderson E Wing (NON Sub 8) Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. 100 Madison Avenue # of Floors Bldg. Age Square Feet County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Morristown Morris Hospital (non sub 8) Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. T&M Associates 0145 B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 11 Tindall Road City, State, Zip Code City, State, Zip Code Middletown, NJ 07748 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number License Number Phone Number (973)696-6869 00378 Kevin Burns 732-676-4000 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 12/18/2017 03/31/2018 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: work shift 3:30pm - 12:00am Scope of Work (check all that apply) Demolition | Renovation Full Containment w/negative pressure X Glovebag procedure Non-friable procedure >160 sf or >260 lf Is location normally used solely E Location of E е by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m staff(12) C (Specify SF or material to be C material (ACM) 0 a a LF) abated in facility (13) Yes No N/A p X pipe/pipe fitting insulation 22 If 1st floor renovation area Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID#

Lincoln Park, NJ Completed by (Print or Type) Gordana Luna

City, State

B & G Restoration, Inc.

Secretary/Treasurer

19563

Signature

12/18/17 - 04/02/18

Disposal Date

Gordana Luna

Tullytown, PA

12/15/2017

Tullytown Resource & Recovery Center

Sbestos Abatement NUAC 8:60-7 and 12:120-7) 2017-181 B & G proj. #: EMERGENCY*** 15 5 Date of Notification (1) Name of Building Owner/Operator (2) 1 |2 |/ 1 |4 |/ 1 | 7 | Lily Cardenas Agencies Notified Type Notification Street Address ☐ EPA Initial ☐ DEP City, State, Zip Code ASBESTOS CONTROL & Amendment DOL LICENSING Wharton, NJ 07885 Name of Contact DOH Telephone Number Cancellation □ DCA Pete Cosic **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Lily Cardenas Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age County Code (7) City (5) County (6) (State use only) Current Use (Prior if being demolished) Wharton, NJ 07885 Morris residential Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number License Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 12/15/2017 12/15/2017 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) ☐ Demolition | Renovation Full Containment w/negative pressure ☐ Glovebag procedure Non-friable procedure >3 sf or >3 If Mini-enclosure ≥160 sf or ≥260 lf Is location normally used solely E Location of E e by maintenance/custodial е п asbestos-containing Amount Description of asbestos-containing n m staff(12) C (Specify SF or material to be material (ACM) 0 C 2 а abated in facility (13) LF) Yes No N/A p basement boiler insulation 40 sf X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill B & G Restoration, Inc. 19563 Tullytown Resource & Recovery Center City, State Disposal Date Lincoln Park, NJ 12/18/2017 Tullytown, PA Completed by (Print or Type) Signature Gordana Luna Gordana Luna Secretary/Treasurer 12/14/2017

B & G proj. #: 2017-185

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

Check # 8730

B & G proj. #.			**	* E/	MEIR GIE	= N 1	6)1								
Date of Notification (1)	I I Name o	f Building Own	er/Op	erator (2)		ne a								
1 12 1/11 14		1.1	es Geffert		54 542			[7				<u>E</u>	#		-
Agencies Notified	Type Notification	Street A	ddress					1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	الله الم	3 9					
☐ EPA	X Initial								1	DEO 1	2 2 20'	7 1	U)		_
☐ DEP	1-2A 95 S2000	City, Sta	ate, Zip Code	074	F0				lac les	DEC .	C L L0				
X DOL	☐ Amendment		gewood, NJ	0/4	50					Telephone	Number	201.8			_
X DOH	Cancellation		f Contact						Å	ASBESTO	SLUNI	OLA			
☐ DCA	Cancellation	Jar	nes Geffert							*					
			FAC	CILITY	Y INFORMAT	TION			Type	of Facility (4	4)				_
Name of facility wh	nere abatement is tak	ing place (3)	· · · · · · · · · · · · · · · · · · ·					l lybe	School	(K - 12)				
James Geffer											apter 8 (O	ther than	K-12)	
										Other (Bldgs./	Private/Co	mmercia c.	11		
Street Address									Squ		# of Floor		Bldg.	Age	
		County (6)	_				ode (7)			1 15 h ala	- domoli	shed)		
City (5)						(Sta	ate us	e only)		rent Use (P sidential	rior if bein	g demon	Sileu)		_
Ridgewood,		Berger		T .	SCM No.	_	TNan	ne of Abatemen							_
Name of Monitorin	ng Firm Hired by Bldg	. Owner (8)		1 638	1/a		1	& G Restora							_
3/-	10					=	Stre	et Address							
Street Address							1	105 Ryerson							-
City, State, Zip Co	ode			V37/4			City	, State, Zip Cod Lincoln Park	e NJ 0	7035					
						_	1	ephone Number				Numbe	г		
Project Manager f	for Monitoring Firm		Phone Nu	mber	S)			(973)696-68	369		0	0378			
		10 1 -1 0	ompletion Date	(11)		_	Na	me of OSHA Me	onitor	Inc					
Scheduled Start I				(11)				8 & G Restor	alion,	IIIO.		W			
12/15/2017		12/15/						105 Ryerson	Road						
Occupancy Statu	s During Abatement (sed/vacated during er	Check only	of abatement.					y, State, Zip Co							
Facility clos	performed outside of	normal fac	ility hours-					Lincoln Park	N.I 07	7035					
Describe:						_	.	LINCOINFAIR	, 110 07						
	(check all that apply)						1	Containment wa	/negative	e pressure	₩ Glov	ebag pro	cedu	re	
☐ Demolition	n 🗶 F	Renovation				I.	300	i-enclosure			☐ Nor	-friable p	roce	lure	24
		160 sf or ≥2		ololy		100	J					R	R	E n	E
Location	of I	Is location r by mainten:	normally used s ance/custodial	olely	Descrip	tion c	of asb	estos-containing	g	Amoun (Specif	t y SF or	m	p	С	n c
material to	o be	staff(12)			materia	(AC	M)			LF)	,	v	i	a p	L
abated in	facility (13)	Yes	No N	I/A						18 lf		e X			
, boiler & stor	rage room			X	pipe insu	ulatio	on			1011					
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				_	1							ᆜᆜ	님	H	#
					1					1611					1—
Registered Was	ste Hauler	NJDE	P Hauler ID#	T	Cubic Yards	of Wa	aste	Name of Regist	tered La own Re	natili esource &	Recove	ery Cer	iter		
B & G Rest	oration, Inc.	-1^{-1}	9563 Disp	osal l	Date			City State	100			73)			
City, State Lincoln Pa	rk, NJ			12/	18/2017			Tullyto		1	Da	te			
Completed by		Title			Signature	9		Gordana Lu	na ma			2/14/20	17		
Gordana L	una	Secretar	y/Treasurer				-								

			0 T	1510			lew Jersey						_
VO CAT	`	N	011				BESTOS ABAT AC 8:60 and 5:1	6)	ECEI	\mathbb{V}		n	
Date of Notification (1)					Name	e of Buildin	ng Owner/Operator ((2)				H	
12 / _	14/	17	_		We	est-Ward	Pharmaceuticals	s	DEC 22	2017	-	U)	
Agencies Notified	Type Notific	cation			Stree	t Address		Ha ha	ULU C C	2011	1	CHARLES .	
⊠ EPA	☐ Initial	88			2 E	sterbroo	k Lane						4
☑ DOLWD ☑ DOH		(T)			City,	State, Zip	Code	- F	ASBESTOS COL LICENSIN	ATRO	L &		T
□ DCA	Amendm Emerger	1000	ıdino	į.	Ch	erry Hill,	NJ 08003	L	LICENOI	10	Total State of the last of the	(Separate	_
(NJAC 5:23-8)	justificat		adii ig	,	Name	e of Contac	ot		Telephone Nun	ber			
	☐ Cancella	ation			Jol	hn Reber	5.						
	,				FA	CILITY II	NFORMATION				2007.55		
Name of Facility Where A	Abatement is	Taking P	lace	(3)				Type of Facility	(4)				
West-Ward Pharma	aceuticals							School (K-12					
Street Address	19//								B (Other than K-12 rivate and comme		uldin	ae	
2 Esterbrook Lane								homes, etc.)		i Ciai Di	andiri	ys,	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Cherry Hill								50,000	2		70		
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
Camden								Commercia	Ĭ				
Name of Monitoring Firm	Hired by Buil	lding Ow	ner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
1Source Health and	d Safety, Inc	c.					Shade Enviro	onmental, LLC					
Street Address		1					Street Address						
140 South Village A	venue, Sui	te 130					623 Cutler Av	venue					
City, State, Zip Code							City, State, Zip Co	ode					
Exton, PA 19341							Maple Shade	, NJ 08052					
Project Manager for Moni	itoring Firm			Tele	phone	No.	Telephone No.		License No.			- 100	
Brian Hovendon				6	10-524	-5525	856-755-0099)	00842				
Start Date (10)		Schedule	ed Co	omple	tion Da	ite (11)	Name of OSHA M	lonitor	- 41				
12/15/	17	12	_ /	30	_ /	17	EMSL Analyt	ical, Inc.					
Occupancy Status During	Abatement (Check of	nly o	ne)			Street Address					1000	
□ Facility Closed/Vacate							200 Route 13	0 North					
Abatement Performed							City, State, Zip Co	ode		-			
Time of Abatement: _	AM	PM/_		_PM-		AM	Cinnaminson	i, NJ 08077					
Scope of Work (Check all	that apply)							CASE OF MARKETON					
			1 Par	novati	on		☐ Full Cont	tainment with Neg	ative Pressure				
≥160 sf or ≥260 lf				molitic				g Procedure					
							☐ Non-Exe	mpted (*) and No	n-Friable Procedu	re			
			120,000	Locat						Ab	atem	ent T	уре
Location Asbestos-Containing I		A)			ely by	Ashe	Description o stos Containing Ma		Amount	Re	Re	Ē	En
TO BE ABA	TED			ntena			., thermal systems	insulation,	(Specify	Removal	Repair	cap	Enclosure
IN Facilit (13)	У		Cust	(12)	Staff?		surfacing, VAT,		SF or LF)	/al	10	Encapsulate	ure
(13)		Y	'es	No	N/A	1	other miscellane	ous)				te	
Corridor 1146/Line 40	7 and 408			\boxtimes		Floor T	ile		6,000 SF				
Corridor 1146/Line 40	7 and 408	Г	7	\boxtimes		Mastic			6,000 SF	\boxtimes	П	П	П
			-						-,				
											Ш	Ш	Ш
		L							51 (412				
Name of Registered Wast Freehold Cartage	e Hauler			100	JDEP \	O No.	Cubic Yards of Waste	Name of Regist	ered Landfill orth Landfill				
City, State					15939	1	40 Disposal Date	City, State					
Freehold, NJ							12/30/2017	Morrisville,	PA				
Completed By (Print or Ty	pe)	Title					Signature		Da	ate		200	
Christina Lynch		Vice	Pre	eside	nt of (Operation	ns (M)	(ox	1.	214	11	7	

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м	rı	n	Т	ь.	\cap	rr	

Chaylos	F) Noti	TIO TIO	Late of New NOF ASBE	ersey STOS ABATE 60 and 12:12	MENT (EC	; []	\mathbb{V}		<u> </u>	7
Date of Notification (1) 12-14-2017	TOTAL		Name	of Building O	wner/Operato	1						
Agencies Notified Type Notification				Nieradka Address	****		DE	0 2 2	2017	Parties assessed	IJ	
☐ EPA ☒ Initial			Street	Address								
DEP Amended DOL Amendmen	t #			tate, Zip Code		450	ASBEST L	OS GON ICENSIN	ITROI	- &		1
▼ DOH	(includin	g		of Contact	River, NJ 07	458		TO SERVICE STREET, CO.	of Wilderstates		- 444 359	
DCA Cancellation			Paul	Nieradka			1 6	lephone N	umher			
Name of Facility Where Abatement is Takir	ng Place	(3)	FAC	ILITY INFOR	RMATION	Type of Facili	h. (4)					
Residential Street Address		1993				School (1991 (0)					
Street Address						Subchap	ter 8 (Oth	er than K-	12)	.,	s 10	
City (5)						etc.)		& commer				nes,
Upper Saddle River, NJ 07458 County (6)						Square Feet 2196	1 1	f Floors		Bldg. 58+	Age	
Bergen			County (STATE	Code (7) USE ONLY)		Current Use (Prior if be	ing demoli	shed)	-		
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASCI	M No.	Name	of Abatement (Contractor	(9)				
Street Address					Gree	n Environme	ental Se	rvices, L	LC			
						Address Virginia Aver	nue					
City, State, Zip Code					City, S	tate, Zip Code				-		
Project Manager for Monitoring Firm			Telepho	one No		ey City, NJ 0	7304					
Stad Date (10)					1 100	333-8855		License 01174	No.			
Start Date (10) 12-15-2017	Schedu 12-15	led Cor -2017	mpletion	Date (11)		of OSHA Monit	or					
Occupancy Status During Abatement (Chec						Address						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	eriod of	Abaten	nent									
Uther - Describe:	iai Facilit	y Hours	S		City, S	ate, Zip Code					515555	
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit			×	Full Contain Mini-Enclose Glovebag Pi	ure ocedure					
	Is	s Locati	ion			Non-Exemp	ted (*) and	d Non-Fria	ble Pro	2000	e ement	
Location of Asbestos-Containing Material (ACM)		Normal ed Sole			Description	of			_		pe	
TO BE ABATED In Facility	Ma	aintenar todial S	nce/	(i.e. the	ermal systems	aterial (ACM) insulation,	1000	nount pecify	R		Ē	m
(13)		(12)			surfacing, VAT her miscelland	Γ, or		or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A			5.5)			/al	=	ulate	ure
Garage		Х		F	Pipe insulat	ion	3	5 LF	Х			
	-											
Name of Registered Waste Hauler		IN	JDEP W	Insta	11-17							
Green Environmental Services		Н	auler ID 034889	No. of	ubic Yards f Waste			red Landfil Iorth Lar				
City, State					isposal Date	City, St		- Lai	idilli			
Jersey City, NJ Completed by	TIM-				2-15-2017		ville, PA	4				
Liliana Serrano	Title Office	e Man	ager	The second second	Signature	ules à	D 10		ite 2-14-2	2017		



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

	,	i uis	dani to		3000 DE 1070 V			F	6		151	111		
Date of Notification (1) 12/15/17		Na M	ime of Bi acrome	uilding Owi edia Inco	ner/Opera orporated	tor (2) d				3 6 6				
Agencies Notified Type Notification		100000000	reet Addi O Box			Å,			EC '	2 2 201	7	-2		
区PA Initial	1			Zip Code ack, NJ				ASBE	510	S COVICE	5 7 -			
Emergency (inc justification) DCA Emergency (inc justification) Cancellation	luding	1	ame of C ennifer				ger parket		Telep	hone Ni	L			
_ BCA Banton			FACILI	TY INFOR	MATION						2/			\dashv
Name of Facility Where Abatement is Taking F Bergen Record Bldg., Garage & War Street Address	Place (3) ehouse						Scho	acility (4) ool (K-12) chapter 8 er (i.e. priv	(Other	than K-12) I buildir	ngs, h	omes	,
150 River St. City (5)						Sq	etc.) quare F 50,000	2007	# of I	Floors	Bld 50	g. Ag	е	
Hackensack County (6)		C	ounty Co	ode (7) SE ONLY)		Cu	and the second	Jse (Prior		g demolish	ed)			
Bergen	vner (8)	(5	ASCM I		Na	ame of A	Abatem	ent Contr	actor (9)				
Name of Monitoring Firm Hired by Building Ov	viiei (o)		7100111			annuz		vironme	ntal S	Services,	Inc.			_
Street Address					1:	35 Kin	nnelor							
City, State, Zip Code						ity, State (innelo		07405						
Project Manager for Monitoring Firm		Т	elephon	e No.	Te	elephon 08-21	ne No. 8-088	0		License N 01228	0.			
Stall Date (10)	Scheduled 6/30/18	Com	pletion D	ate (11)	N: Y	ame of	osha zzi En	Monitor vironme	ental	Services	, Inc.			
Occupancy Status During Abatement (Check	***					treet Ad 135 Kir		n Rd						
Facility Closed/Vacated During Entire Poly Abatement Performed Outside of Normal Other – Describe:	eriod of Aba al Facility H	atem lours	ent		С	ity, Stat	te, Zip	STORY BARBARA						
Scope of Work (Check All That Apply)											207			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novat moliti				×	Mini-l	Enclosure	edure	Negative				
	-					N.	Non-	Exempted	(*) an	d Non-Fria			ement	
	0.77	ocati											ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenar	ly by nce/	Asbest (i.e.	Descr tos Contain thermal sy surfacin other mis	ystems ing, VAT,	aterial (/ insulati , or	ACM) on,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
24	Yes	No	N/A								+			-
See attached survey														
				V-15-5				News	Donie	tered Land	Fill			
Name of Registered Waste Hauler		F	NJDEP V Hauler ID		Cubic Y of Wast	e		GROW		GIGU LANG				
Yannuzzi Group, Inc.		1	7467		1,100 (City, Stat	te					
					4/30-6		3	Morrisv		PA				
City, State Kinnelon, NJ	Title				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Bas	_		Date	_		

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

				N.J.A.O.		1117	1.50		1-1-	-
			Name 0	f Building Ow	ner / Operator (2)		DEC 22	2017		
te of Notification			100000000000000000000000000000000000000	Higgins		had beal		2017		
	12/14/2017	tion	Street A	Address			Secretarion of the second second			
encies Notified	Type Notifica	HOH	Ott. God?			ASE	BESTOS CO	NTROL &		
⊠ EPA	☐ Initial		City, St	ate & Zip Cod	е		LICENSI	VG		
□ DEP □ DOL	☐ Amer		Belma	r, NJ				Telephone	Num	ber
		rgency	Name o	of Contact				relephone		
⊠ DOH □ DCA		ellation	Faine	Higgins						
			EAC	ILITY INFO	RMATION					
		T I T Dia		ILIT I III O	Type of Facility (4)				
ame of Facility W esidence	/here Abateme	ent is Taking Plac	e (3)		School (K-1:	2)	٧ 12\			
treet Address					Subchapter Other (i.e. p	8 (Other than	nercial huildi	nas homes	s, etc.)
lieel Address					Other (i.e. p	# of Floor	nerciai banan	Bldg. Age	,	,
					Square Feet	# 01 -1001			0+	
(L. /F)		County (6)	County C	ode (7)	2000		2		0.	
City (5)		Monmouth			Current Use (Pri	ior if being der	molisneu)			
Belmar		Michiliogeri			Residential					
	Firm Hisad I	by Building Owne	r (8)	ASCM No.	Name of Abater	nent Contracto	or (9)			
lame of Monitorin	ng Firm Hileu i	by Building Owne	. (0)		Alpha Environ	nmental Ser	vices			
					Street Address					
Street Address					2129 Route 3					
City, State & Zip (Code				City, State & Zir	Code				
Jily, State & Zip	5000				Hamilton, NJ	00010	License	Number		
Project Manager f	for Monitoring	Firm	Telephone	Number	Telephone Num 609-847-2956	ibei	2.00.10	01222	2	
-10ject Manager				400000	Name of OSHA					
Scheduled Start I	Date (10)	Scheduled Com	pletion Da	te (11)	EMSL Analyt					97.0
12/9/2	017	12/30/2017			Street Address					
	During Abot	ement (Check on	ly one)		107 Haddon	Δνα				
Ecoility C	locod/\/acatec	d Diffillia Elifficia	51100 01712	atement	City, State & Zi	n Code				
Abateme	at Dorformed	Outside of Norma	Il Hours –	7am to 3pm	Westmont, N					
	III Pellollinea				Westmont, i	19 00 100				
Describe	1									
Describe	1									
Describe Facility C	: Occupied Durin	ng Abatement				☐ Full Con	itainment wit	h Negative	Pres	sure
Describe Facility C Scope of Work (: Occupied Durin Check all that	ng Abatement	№ De	novotion	[Full Con	itainment wit	h Negative	Pres	sure
Describe Facility C Scope of Work (€ ≥3 sf or ≥	: Occupied Durin Check all that ≥3 If	ng Abatement		novation		Mini-End	closure ag Procedur	es		
Describe Facility C Scope of Work (: Occupied Durin Check all that ≥3 If	ng Abatement		novation molition		Mini-End	closure ag Procedur	es		
Describe Facility C Scope of Work (€ ≥3 sf or ≥	: Occupied Durin Check all that ≥3 If	ng Abatement	De De	emolition	[[Mini-End Glove B Non-Exe	closure	es Non-Friable		cedur
Describe Facility C Scope of Work (0 ≥3 sf or ≥ ≥160 sf ≥	c: Decupied Durin Check all that ≥3 If ≥260 If Location of	ng Abatement apply)	De ls Loca	emolition	Description Ashestos-Cont	Mini-End Glove B Non-Exe	empted and Amour (Specif	Non-Friable Aba	e Proc	cedur ent Ty
Describe Facility C Scope of Work ((≥3 sf or ≥ 160 sf ≥	ccupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain	ng Abatement apply)	Is Loca	emolition ation Used	Asbestos-Cont	Mini-End Glove B Non-Ext of aining	closure ag Procedur empted and Amour	Non-Friable at Aba	e Prod	cedur ent Ty
Describe Facility C Scope of Work ((≥3 sf or ≥ 160 sf ≥	c: Decupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM	ng Abatement apply) ning	Is Local Normally Solely	ation Used	Asbestos-Cont Material (AC (i.e., thermal sy	Mini-End Glove B Non-Exe of aining (M) restems	empted and Amour (Specif	Non-Friable at Aba	e Prod	cedur ent Ty
Describe Facility C Scope of Work ((≥3 sf or ≥ 160 sf ≥	c: Decupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE	ng Abatement apply) ning	Is Loca Normally Solely Maintena	ation Used Used Used Used	Asbestos-Cont Material (AC (i.e., thermal sy insulation, surface	Mini-End Glove B Non-Exe of aining (M) restems ing, VAT	empted and Amour (Specif	Non-Friable Aba	e Proc	cedur ent Ty
Describe Facility C Scope of Work ((≥3 sf or ≥ 160 sf ≥	c: Decupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE in Facility	ng Abatement apply) ning	Is Local Normally Solely	ation Used by ance or Staff?	Asbestos-Cont Material (AC (i.e., thermal sy	Mini-End Glove B Non-Exe of aining (M) restems ing, VAT	empted and Amour (Specif	Non-Friable at Aba	e Prod	cedur
Describe Facility C Scope of Work ((≥3 sf or ≥ 160 sf ≥	c: Decupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE	ng Abatement apply) ning	Is Loca Normally Solely Maintena Custodia	ation Used by ance or Staff?	Asbestos-Cont Material (AC (i.e., thermal sy insulation, surfac or other miscella	Mini-End Glove B Non-Ext of aining (M) rstems ing, VAT aneous)	empted and Amour (Speci	Non-Friable Abafy F) Removal	e Prod ateme	cedur ent Ty
Describe Facility C Scope of Work (0 ≥3 sf or ≥ ≥160 sf ≥	c: Decupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE in Facility	ng Abatement apply) ning	Is Loca Normally Solely Maintena Custodia (12 Yes No	ation Used by Ance or I Staff?	Asbestos-Content Material (AC (i.e., thermal sy insulation, surfactor other miscellar Pipe Insula	Mini-End Glove B Non-Exe of aining My setems ing, VAT aneous)	empted and Amour (Speciing SF or Line)	Non-Friable at Aba	e Prod ateme	cedur ent Ty
Describe Facility C Scope of Work (C ≥3 sf or ≥ ≥160 sf ≥ Ast	c: Decupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE in Facility	ng Abatement apply) ning	Is Loca Normally Solely Maintena Custodia (12	ation Used by Ance or I Staff?	Asbestos-Cont Material (AC (i.e., thermal sy insulation, surfac or other miscella	Mini-End Glove B Non-Exe of aining My setems ing, VAT aneous)	empted and Amour (Speci	Non-Friable Abafy F) Removal	e Prod ateme	cedur ent Ty
Describe Facility C Scope of Work (0 ≥3 sf or ≥ ≥160 sf ≥	c: Decupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE in Facility	ng Abatement apply) ning	Is Local Normally Solely Maintena Custodia (12 Yes No	ation Used by ance or I Staff?	Asbestos-Content Material (AC (i.e., thermal sy insulation, surfactor other miscellar Pipe Insula Pipe Insula	Mini-End Glove B Non-Exe of aining CM) restems ing, VAT aneous) tion	empted and Amour (Specir SF or L	Non-Friable Abarty F)	e Prod ateme	cedur ent Ty
Describe Facility C Scope of Work (C ≥3 sf or ≥ ≥160 sf ≥ Ask Basement Garage	ccupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE in Facility (13)	ng Abatement apply) ning 1)	Is Local Normally Solely Maintena Custodia (12 Yes No	ation Used by ance or I Staff? NJDEP Waste	Asbestos-Contention Material (AC (i.e., thermal sy insulation, surfactor other miscellar Pipe Insula Pipe Insula Cubic Yards	Mini-End Glove B Non-Exe of aining My setems ing, VAT aneous)	empted and Amour (Specir SF or L	Non-Friable Abarty F)	e Prod ateme	cedur ent Ty
Describe Facility C Scope of Work (C ≥3 sf or ≥ ≥160 sf ≥ Ast	ccupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE in Facility (13)	ng Abatement apply) ning 1)	Is Loca Normally Solely Maintena Custodia (12 Yes No	ation Used by ance or I Staff? NJDEP Waste	Asbestos-Content Material (AC (i.e., thermal sy insulation, surfactor other miscellar Pipe Insula Pipe Insula of Waste	Mini-End Glove B Non-Exe of aining M) retems ing, VAT aneous) tion Name of Reg	empted and Amour (Specifor SF or L 103 lf 80 lf	Non-Friable Abarty F)	e Prod ateme	cedur ent Ty
Describe Facility C Scope of Work (C ≥3 sf or ≥ ≥160 sf ≥ Ast Basement Garage Name of Regist	ccupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE in Facility (13)	ng Abatement apply) ning 1) ED	Is Loca Normally Solely Maintena Custodia (12 Yes No	ation Used by ance or I Staff? NJDEP Waste	Asbestos-Content Material (AC (i.e., thermal sy insulation, surfactor other miscellar Pipe Insulation Pipe Insulation (Cubic Yards of Waste	Mini-End Glove B Non-Exe of aining (M) vstems ing, VAT aneous) tion Name of Reg Grows Lan	empted and Amour (Specifor SF or L 103 lf 80 lf	Non-Friable Abarty F)	e Prod ateme	cedur ent Ty
Describe Facility C Scope of Work (C ≥3 sf or ≥ ≥160 sf ≥ Ast Basement Garage Name of Regist ALPHA ENVII	ccupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE in Facility (13)	ng Abatement apply) ning 1) ED	Is Loca Normally Solely Maintena Custodia (12 Yes No	ation Used by ance or I Staff? NJDEP Waste	Asbestos-Content Material (AC (i.e., thermal sy insulation, surfactor other miscellar Pipe Insula Pipe Insula of Waste	Mini-End Glove B Non-Exe of aining M) retems ing, VAT aneous) tion Name of Reg	empted and Amour (Specifor SF or L 103 lf 80 lf	Non-Friable Abarty F)	e Prod ateme	cedur ent Ty
Describe Facility C Scope of Work (C ≥3 sf or ≥ ≥160 sf ≥ Ast Basement Garage Name of Regist	ccupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE in Facility (13)	ng Abatement apply) ning 1) ED	Is Loca Normally Solely Maintena Custodia (12 Yes No	ation Used by ance or I Staff? NJDEP Waste	Asbestos-Content Material (AC (i.e., thermal sy insulation, surfactor other miscellar Pipe Insular Pipe Insular Pipe Insular Of Waste 1	Mini-End Glove B Non-Exe of aining cM) vstems ing, VAT aneous) tion tion Name of Reg Grows Lan City, State	empted and Amour (Specir SF or L	Non-Friable Abarty F)	e Prod ateme	cedur ent Ty
Describe Facility C Scope of Work (C ≥3 sf or ≥ ≥160 sf ≥ Ast Basement Garage Name of Regist ALPHA ENVII	ccupied Durin Check all that ≥3 If ≥260 If Location of bestos-Contain Material (ACM TO BE ABATE in Facility (13)	ng Abatement apply) ning 1) ED	Is Local Normally Solely Maintena Custodia (12 Yes No	ation Used by ance or I Staff? NJDEP Waste	Asbestos-Content Material (AC (i.e., thermal sy insulation, surfactor other miscellar Pipe Insulation Pipe Insulation (Cubic Yards of Waste	Mini-End Glove B Non-Exe of aining (M) vstems ing, VAT aneous) tion Name of Reg Grows Lan	empted and Amour (Specir SF or L	Non-Friable Abarty F)	Repair	cedur ent Ty

State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

			(Pursuan	t to N.J.A.C.	8:60-7 and 12:120-7)	FRE	C E I	WE	M						
Date of Notification (1)					Name of Building Owner/Ope Diocese of Paterson	erator(2)		<u> </u>							
December 12, 2017		Street Address													
Agencies Notified			I Notifica		777 Valley Road		DEC 22	2017	1						
X EPA		□Amende	d Certifica	ation	City, State, Zip Code										
DCA		□ Emerge			Clifton, NJ 07013	and the same of th	NE THE SECTION OF THE	SNILU() LX	. &						
x DOL		justifica			Name of Contact	AST	elenhana Ma	MADRICE							
X DEP		□ Cancel			Ben Dubbels				Charles.	4.45					
x DOH		☐ Cancer	leu	FACILITY INF	OPMATION	Kitting	**								
				FACILITY INF	Type of Facility (4)										
Name of Facility Where Abater	ment is Tak	ing Place (3)			☐ School (K-12)										
Saint Brendan Schoo	I			and the second second	Subchapter 8 (other than k	(-12)		100000000000000000000000000000000000000							
Street Address					Other (i.e. private & co	ommercial build	lings, homes,	etc.)							
154 East 1 st Street					Sq. Feet: Unknown ±	of Floors: 2	Bldg. Age	<u>e:</u> 70 yea	ars						
	County (6	1	County C	ode (7)											
City (5) Clifton	Passai		(State Us	e Only)	Current Use (prior if being of	demolished):									
			100111		Name of Contractor (9)										
Name of Monitoring Firm Hire	d by Bldg. (Owner (8)	ASCM No		No. of the Control of										
EnviroVision Const	ultants	inc.	00079		GREENWOOD ABATE	EMENT CO	NSULTAN	TS, INC.							
. Total source.					Street Address										
Street Address 20-21 Wagaraw Road	I Blda#	35E			511 MAIN STREET										
20-21 Wagaraw Road	.,				City State, ZipCode										
City, State, Zip Code	- 110 Van 2 Elect				Butler, NJ 07405										
Fairlawn N.I 07410							License Num	per							
Project Manager for Monitoring Firm Telephone Number				Telephone Number											
Fred Larson 973-636-9145					973-492-0477 00840										
William Control of the Control of th				Name of OSHA Monitor											
Scheduled Start Date (10) Scheduled Completion Date (11)				Name of OSTIA Worker					1						
December 26, 2017 December 27, 2017				EMSL inc.											
		(0)			Street Address										
Occupancy Status During A	batement	(Check only o	of Abatam	ent	-										
Facility Closed/Vacat	ted During	Entire Period	oility Hours	-	1056 Stelton Road										
Abatement Performe	d Outside	of Normal Fa	cility i lours		City, State, Zip Code										
Describe	7mm					054									
Other - Describe: 78	am-/pm				Piscataway, NJ 088	554									
Source of Work (Check all th	at apply)					Full Contain	ment with Ne	gative Pres	sure						
				Renovatio	n 1	Mini-End Mini-End									
≥ 3 sf or ≥ 3	If					v Glovehan l	Procedure								
□≥ 160 sf or ≥				Demolitio	11	Non-Exemp	ted (*) and N	lon-Friable	Proced	lure					
			.0.11	Description of /	Asbestos Containing Material	Amoun	t Abat	ement Type							
Location of Asbestos-Conta		Location Norm lely by Maint./	ally Used	(ACM) (i.e. the	rmal systems insulation, surfact	ing, (Specif	y SF Remi	ove Repair E	Encap E	nclose					
Material (ACM) in Facility (1	3) Sc	elely by Maint./ aff? (12)	Gustoulai	VAT, or other n	niscell.)	or LF)	IXCIII								
		ES NO	NA			0.15	ाठा								
Office		X		Pipe Insula	ation	9 LF	X								
Bookeepers Office		12.2		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				minternal La	ndfill						
Room # 2-1 st Floor		LNIDEDIA	aste Haule	r ID #	Cubic Yards of Waste:		Name of Re	gistered Lar	I						
Name of Reg. Waste Haule	2 2	See Bel			1		Meadowf								
See Hauler Below # 1	α Ζ	000 001	mauléan	te Inc - Ru	tler, NJ 07405	Disposal Da	ite 07	City, Stat Route 2,							
Hauler #1) Greenwo	ood Aba	tement Co	แรนเเลก	13, 1110. – Du		Decembe	er 27,	Bridgepo	ort, WVA	4					
MIDED	# 17667					2017		304-842-							
Hauler #2) Newark (Carting,	Inc. – Newa	rk, NJ 0	4509, NJ DEI	# 19331					100					
					Signature	-	Date								
Completed by (Print or Typ	e)	Title	DDC IF	CT			Decem	ber 12, 2	017						
Marin Graure		SENIOR		61	Marin Gra	ure									
		MANAG	ER												

B & G proj. #: 2017-141

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

ON HOLD

Check # 8636

			-		THE RESERVE AND ADDRESS OF THE PERSON NAMED IN						_						
Date of Notification (1)	- 11)		MEG	EI	\// [EI	7									
$\frac{1}{1}\frac{12}{12}\frac{1}{15}\frac{15}{117}$	- 11	Mediterr	anean T	owers West	Own	ers, Inc.			V L	=							
Agencies Notified Type Notifical	tion	Street Addre	SS				.]	11									
EPA Initial		555 Nor	th Aven	22 2	017		1)										
□ DEP		City, State, 2	Zip Code			1											
DOL (Amend	ment	Fort Lee	e, NJ 07	OS CONTROL &													
X DOH	-	Name of Cor	ntact		Telephone Number												
☐ DCA ☐ Cancell	ation	Steve S	deo			_											
			FAC	ILITY INFORM	ATION	1											
Name of facility where abatement	is taking p	lace (3)		The second second			Type of Facility										
Mediterranean Towers (NO	ON Sub	8)			Į		ool (K - 12)		han K	10)							
Street Address								chapter 8 (C r (Private/C			-127						
555 North Avenue							Bldgs	s./Homes, e	etc.								
Auditor Control Contro							Square Feet	# of Floo	rs	Bi	dg. A	Age					
City (5)	Cou	nty (6)				nty Code (7) te use only)	Current Use (Drior if bein	a den	nolish	ed)						
Fort Lee	Ве	ergen			(Ota	te use only)	apartment		ig den	molished)							
Name of Monitoring Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of Abatement Contractor (9)											
Sky Environmental Service	es Inc.					B & G Restoration, Inc.											
Street Address				Street Address 105 Ryerson Road													
140 Blvd.																	
City, State, Zip Code Mountain Lakes, NJ 0704	6		City, State, Zip Code Lincoln Park, NJ 07035														
Project Manager for Monitoring Firm	1	Ph	er	-	Telephone Number	M. T.	License		er								
Leonid Shereshevsky		97	3-588-48	321		(973)696-686		00	378								
Scheduled Start Date (10)	Sched	d. Completio	n Date (1	1)		Name of OSHA Mon B & G Restora											
10/24/2017	***(03/31/2018	B***			Street Address	tion, me.		_								
Occupancy Status During Abatemen	nt (Check o	only one)	Sant die a transit			105 Ryerson R	Road										
Facility closed/vacated during			ment.			City, State, Zip Code											
Abatement performed outside Describe:	of normal	facility hour	S-														
Other-Describe:					-11	Lincoln Park, N	1J 07035					1					
Scope of Work (check all that apply	')	-															
☐ Demolition 🔀	Renovation	on			X F	III Containment w/ne	gative pressure	Gloveb	ag pr	ocedu	ire						
>3 sf or >3 lf	≥160 sf or	≥260 If				lini-enclosure		☐ Non-fr	iable p	госе	dure	8					
Location of		n normally u		1				-	R	R	E	E					
asbestos-containing	staff(12)	enance/cust	odiai			bestos-containing	Amount (Specify	SF or	m	р	С	n					
material to be abated in facility (13)	Yes	No	N/A	material (A	ACIVI)		LF)		o v	a i	a p	Ľ					
athrooms from ontifo				achestes n	20000	rn coiling	25 saft r	or both	e	H	П	+					
pathrooms from apt#'s 3W,8S, 5V,10F,25R,11D,14E		X		asbestos p			" " "		X	$\overline{\sqcap}$	一	T					
				por odorra		отт орт	" " "	0 0	X	司							
12V, 19D, 22F, 24K,17S,6F 25B, 10V, 21P,2K, 6D,22W							11 11 11	H II II	X			I					
2-M,23L,22J,5U,15M,22W							11 11 11	и и и	X								
Registered Waste Hauler		EP Hauler II)# C	ubic Yards of W	Vaste	Name of Registered			0		5-70-5						
B & G Restoration, Inc.		19563	Van 15	5		- Indiana and a second a second and a second and a second and a second and a second and a second and a second and a second and a second and a second a second and a second and a second and a second and a second and	Resource & R	ecovery	cent	er	-						
City, State Lincoln Park, NJ			Disposal D 10/2	ate 4/17-3/31/18	8	City, State Tullytown,	PA										
Completed by (Print or Type)	Title			Signature				Date									
Gordana Luna		Gordana Luna		12/15	/201	7											

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

B & G proj. #:	2017-141	_	(Pursuant to NJAC 8:60-7 and 12.120-7) Check # 8636															
Date of Notification	(1)	Name	Name of Building Owner/Operator (2) Mediterranean Towers West Owners, Inc.															
11 10 1/11 10		Me	diterrane	an Tow	ers West C	wners	s, Inc.	1147	100		9 9	+	_					
Agencies Notified	Type Notification	Street	Address						nco		047							
₩ EPA	☐ Initial	55	5 North A	venue					DE	222	<u> </u>	111		-				
☐ DEP	☐ Initial	City. S	State, Zip C	ode				ĺ										
X DOL	X Amendme	nt Fo	ort Lee, N	J 0702	4	SBEST	BESTOS CONE Nurhber											
X DOH		1 1	of Contact					hasten structed	27529887793	OZNONG		1						
☐ DCA	Cancellation	on St	Steve Sdeo															
				FACILI	TY INFORMA	TION				5 = - 115h - 7.4	`							
Name of facility wh	nere abatement is t	aking place ((3)						Type		(K - 12)							
	n Towers (NON		TV					-			pter 8 (Oth Private/Con			2)				
Street Address								8		Other (F Bidgs./h	lomes, etc							
555 North Av	renue								Squa	re Feet	of Floors		Bldg	. Age	3			
City (5)		County (6)				y Code (7 use only		Current Use (Prior if being demolished)									
		Berge	n			(State	use only	'	apa	rtment bu	ilding	lding						
Fort Lee				-	ASCM No.	TIN	Name of A	Abatement										
Name of Monitoria	ng Firm Hired by Bl	ag. Owner (d	2)		7.00.1171		B&G	Restorat	tion, In	C								
	mental Service	5 1110.				= 5	Street Add	dress										
Street Address			105 R	Ryerson F	Road	- CONTRACTOR OF THE				and the same of	and the same							
140 Blvd.		- 0		, Zip Code		205												
City, State, Zip Co	_{akes,} NJ 07046				oln Park,	NJ 07	035	License	Jumbe	r								
Project Manager fo	Г	- 7	elephon (973	e Number 3)696-686	39		003											
Leonid She			973-	588-48	21			OSHA Mor										
Scheduled Start D		Sched. C	ompletion	Date (11)			B&G	Restora	ation, Ir	nc.			- Caleman					
10/24/2017		12/15/	2017				Street Ad		d									
	During Abatemen	(Check only	one)					Ryerson F										
Tradition class	advacated during	entire period	of abatem	ent.			City, State	e, Zip Code	е									
Abatement	performed outside	of normal fac	ility hours-	- In		_	Linco	In Park, I	NJ 070	35			900 and 1 and					
Describe:	ribe:					- 1									-			
	check all that apply)						nment w/ne	ogative	nressure	Gloveb	ag pro	cedu	re				
☐ Demolition		Renovation				A			egative	p10000	☐ Non-fr							
3 sf or 3	If 🗵	≥160 sf or ≥2					lini-enclo	Suic				R	R	E	TE			
Location of		Is location r	normally us	ed solely						Amount		e m	e p	n c	E n			
asbestos-c	ontaining	by maintena staff(12)	ance/custo	ulai	Descripti material		sbestos-c	containing		(Specify	SF or	0	a	а	C			
material to abated in f	be acility (13)	Yes	No	N/A	material	(, , , , , , ,				LF)		v e	i r	Р				
					asbestos	nonco	rn ceili	na		25 saft p	er bath	X			1111			
bathrooms from			×		per each	bathro	om apt			11 11 11 1		X			부			
	,25R,11D,14E				1					H H H		X	ᆜ	님	11			
12V, 19D, 22F	24K,17S,6F				Carrie Ca	CONTRACTOR OF STREET	THE STREET, STREET, STREET, STREET, STREET, STREET, STREET, STREET, STREET, STREET, STREET, STREET, STREET, ST			11 11 11		X	片	님	14			
The second secon	P,2K, 6D,22W									11 11 11		×		Ш				
2-M,23L,22J Registered Waste	5U,15M,22W		Hauler ID	# C	ubic Yards of	Waste	Name o	of Registere	ed Land	fill ource & R	ecoverv	Cent	ter					
B & G Resto	ration, Inc.	19	9563		5	DESCRIPTION OF	City, S		1111030				Lamon Control					
City State				isposal D	pate 24/17-12/15	5/17	Ony, C	Tullytowr	n, PA									
Lincoln Park		Tale			Signature		0,	na Luna			Date	0/204	17					
Completed by (P Gordana Lu	nnt or Type) na	Title Secretary	//Treasu	rer			10/10/2017											

CV 6540		anno.	· Property					_					- 20	int E			
CK 6540 P		OTIFIC (PL	Sta CATION Irsuant	of ASBI	w Jerse ESTOS 8:60 an	y ABATEI d 12:120	WENT	r	Dr	EC							
Date of Notification (1)		Name of Building Owner/Operator (2) DEC 1 8 2017										7	世				
12/11/17 Agencies Notified Type Notification		-	Cumberland County Improvement Authority Street Address														
				th High (Street				-	ASBEST			OL &				
DEP Amended			(3),(1)	ite, Zip Co							CENS	ING	-				
DOL Amendment Emergency (-		e NJ 08	332												
DOH justification)			Name of Contact Telephone Number Brian Nardone														
			FACILITY INFORMATION														
Name of Facility Where Abatement is Taking	g Place (3)						Тур	e of Facility (4)								
Demo Residential Street Address							H	School (K-1 Subchapter		er than K.	-12)						
211N 6th Street							X	Other (i.e. p				ildings	, hom	es,			
City (5) Vineland NJ 08360							(7)	are Feet		f Floors		Bldg. /	Age				
County (6)			County C	Code (7)				rent Use (Pri	2 or if hei	ina demol	ished)	35+					
Cumberland				JSE ONLY)				use	JI 11 DC	ing demoi	ioricaj						
Name of Monitoring Firm Hired by Building 0	Owner (8)		ASCN	î No.					ment Contractor (9)								
Synertech Inc.						Pern											
Street Address 228 Moore St.							312.20	dress x 329									
City, State, Zip Code							State, Zip Code										
Philadelphia PA 19148				Wes	t Be	Berlin NJ 08091											
Project Manager for Monitoring Firm Drew McMahon	100					Telephone No. License No. 856-753-9800 00727											
Start Date (10)		ST. SCHOOL WASHINGTON	Date (11)			Name of OSHA Monitor											
12/29/17	3	piction	Jule (11)		Sam												
Occupancy Status During Abatement (Check	9)				ess		723										
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	batem Hours	nent						•									
Scope of Work (Check All That Apply)																	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	enovat emoliti	lition					ull Containme ini-Enclosure lovebag Proc on-Exempted	edure									
	ls l	Locatio	on I			X	4 11	OTT EXCHIPTION	/ / un	a mon i n	T T		emen	t			
Location of	N	ormall Solel	у		De	scription	of				_	T	/pe				
Asbestos-Containing Material (ACM) TO BE ABATED	Mair	ntenan	ice/			taining IV systems		al (ACM)	170	mount Specify	N N	_	Enc	臣			
In Facility (13)		odial S (12)	taff?	XVIII.	surfa	cing, VA	T, or	1		or LF)	Removal	Repair	Encapsulate	Enclosure			
(10)	Yes	No	N/A		otheri	iliscellari	eous	,			val	=	ulate	ure			
Exterior Siding	1 100		x		exte	rior Sic	ling		15	00 SF	x	1					
\$		Walles 2							W-541155		+	1					
					-						+	1					
Name of Registered Waste Hauler		6000	JDEP W			Yards		Name of	Registe	ered Land	fill			1			
United Containers			auler ID 2459	No.	of Wa	este			rland	County	Land	fill					
City, State			Disposal Date				sal Date City, State					All address of					
Elm NJ Completed by				3	1/19/	18		Millville	NJ 0	8096							
	Title President							L. Santana Arterials			Date						

CK 65	10			water	200				<u>.</u>						Pri	nt Fo		
	F		100 E	St CATIO ursuant	ate of Nev I OF ASB TO NJAC	w Jerse ESTOS 8:60 an	y ABATE d 12:120	MEN D)	IT	Dr	EC	E		\mathbb{V}	13			
Date of Notification (1)			Operator			Ш	DE	C 1	8	2017		世						
12/11/17 Agencies Notified Tv		Cumberland County Improvement Authority Street Address																
	pe Notification				th High	Street			r		ASBES)L &			
EPA DEP	Initial Amended				ate, Zip Co							LICE!	SIN	IG_	-			
DOL DOL	Amendment			Millvil	le NJ 08	332												
⊠ DOH	Emergency justification)	7			f Contact				Telephone Number									
DCA L	Cancellation	ľ.		Brian														
Name of Facility Where Abat	ement is Takin	g Place (3	3)	FACI	LITY INFO	ORMAT	ION	Tv	pe of Facility	(4)						_		
Demo Residential								П	School (K-									
Street Address									Subchapter	r 8 (Oth	er than I	K-12)						
211N 6th Street								X	Other (i.e. petc.)	private	& comm	ercial l	ouild	ings,	home	es,		
City (5)								2	uare Feet		f Floors			Bldg. Age				
Vineland NJ 08360				Country	0 - d - (7)				000+	2		71. 1		5+				
County (6) Cumberland				(STATE	Code (7) USE ONLY				rrent Use (Pri ouse	or if be	ng demo	olished)			1		
Name of Monitoring Firm Hire	ed by Building	Owner (8)		ASCN	/ No.		Name		batement Cor	ntractor	(9)					-		
Synertech Inc.	,	(-,					1		o Inc.	1111 010101	(0)							
Street Address							Street	t Address										
228 Moore St.				-01-02-000			1700-07-000-0	PO Box 329										
City, State, Zip Code		City, State, Zip Code West Berlin NJ 08091																
Philadelphia PA 19148 Project Manager for Monitoring				Talanha	N-		Telephone No. License No.											
Drew McMahon		215-755-2305 85					6-753-9800 00727											
Start Date (10) 12/29/17		Schedule 1/19/1		npletion l	Date (11)		_	e of OSHA Monitor										
Occupancy Status During Ab	atement (Chec						Sam	t Address										
Facility Closed/Vacated			200	ont			Sueet	Add	1655		٠							
Abatement Performed O Other – Describe:							Zip Code											
Scope of Work (Check All Th	at Apply)							-										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Decadore	tenova emoliti				X		Full Containm Mini-Enclosure Glovebag Pro- Non-Exempte	e cedure								
		le	Locati	on				-	TOTAL EXOTAL STATE	<u>u () u</u>	<u> </u>	1	_	Abate				
Location of		l N	ormall	ly		De	scription	οf				_		Тур	e ,			
Asbestos-Containing Mate			d Solei intenar			tos Conf	aining N	later	ial (ACM)		mount		_		m	m		
In Facility	2	Cust	odial S (12)	Staff?	(1.6.	surfa	systems cing, VA	T, or			Specify or LF)		Removal	Repair	Encapsulate	Enclosure		
(13)			(12)	1		other n	niscellan	reou	s)				oval	<u>a</u>	sulat	sure		
		Yes	No	N/A								\dashv		_	e			
Exterior Sidin	9			Х		exte	rior Sic	ding		15	00 SF	2	ς .					
								1120000										
Name of Registered Waste H	auler		100	JDEP W auler ID		Cubic of Was	Yards		Name of	Registe	ered Lan	dfill						
United Containers			- 1	2459	110.	8	316		Cumbe	erland	Count	y Lan	dfil	1				
City, State							sal Date	Date City, State										
Elm NJ						1/19/	0.000		Millville	NJ 0	8096							
Completed by Anthony T Perna		Title Presi	dans			S	ignature	-	-			Date	111	7				
Anthony I Fella		LIES	ucill				1	1	The second section is a second section of the second section in the second section is a second section of the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the section of			12/1	1/1	1				