UL 3351



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	[)EC	2	6	2017	

Date of Notification (1)	,			N	ame of	Building C	wner/Operator (2)					
12 /	18 / 1	17			Monn	nouth Co	unty Park Syst	ems Board of F	Recreation			- 44	L&
Agencies Notified	Type Notificatio	n		S	treet A	ddress				LICEN	ISIN	Ğ	
⊠ EPA	☐ Initial						Springs Road						
☑ DOLWD	☐ Amended			c		te, Zip Coo							
□ DOH	Amendment	NY 00 500	_			oft, NJ 07							
□ DCA	☐ Emergency justification)		ng	N		Contact			Telephone Num	ber			\neg
(NJAC 5:23-8)	Cancellation					Eiseman	ın						
					FACI	LITY INF	ORMATION						
Name of Facility Where	Abatement is Tak	ing Pla	ce (3)				Type of Facility (4	1)				
Residential	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		P. T. 100					School (K-12)					
Street Address								☐ Subchapter 8 ☐ Other (i.e., pri	(Other than K-12 vate and comme	?) rcial build	linas.		
Otrect Address								homes, etc.)	vate and comme				
City (5)								Square Feet	# of Floors	Bldg	. Age		
Upper Freehold													
County (6)					County	Code (7)(STATE USE ONLY)	Current Use (Price	or if being demoli	shed)			
Monmouth													
Name of Monitoring Fin	m Hired by Buildin	g Owne	er (8)	A	SCM N	0.	Name of Abateme	ent Contractor (9)					
Bio Terra Solution		3					ALL PRO MA	NAGEMENT LL	.C				
Street Address							Street Address						
P.O. Box 1224							27 Outwater	Lane					
City, State, Zip Code							City, State, Zip C	ode					
Union, NJ							Garfield, NJ	07026					
Project Manager for Mo	onitoring Firm		T	Telep	hone N	lo.	Telephone No.		License No.				
Rick Estaquio	3			973	-494-	3762	973-928-4888	3	1188				
Start Date (10)	Sc	heduled	d Cor	mpleti	on Date	e (11)	Name of OSHA N						
12 / 28	/ 17	01	1	04	_ / _	17	ALL PRO MA	NAGEMENT LI	LC				
Occupancy Status Dur	ing Abatement (Cl	neck on	ly on	e)			Street Address						
☐ Facility Closed/Vac					ent		27 Outwater	Lane					
☐ Abatement Perform	ed Outside of Nor	mal Fac	cility	Hours	- Desc	ribe	City, State, Zip C	ode					
Time of Abatement	:AM	_PM/_	_	_PM		AM	Garfield, NJ	07026					
Scope of Work (Check	all that apply)								-ti Deceases				
	,		Don	ovatio	n		☐ Full Cor ☑ Mini-En	ntainment with Neg	gative Pressure				
≥3 sf or ≥3 lf				nolitio			☐ Gloveba	ag Procedure					
		10-11					☑ Non-Ex	empted (*) and No	n-Friable Proced			-4 T	
				Locati ormal			Description	of		Aba		1	
Locati Asbestos-Containi				Sole		Asbes	stos Containing M	laterial (ACM)	Amount	Remova	Repair	nc	Enclosure
TO BE A				ntenar		(i.e.	, thermal systems	s insulation,	(Specify SF or LF)	SVOI	air	apsu	nso
IN Fa			Gusic	(12)	olan:		surfacing, VA other miscellar		31 01 11 7	<u> </u>		Encapsulate	е
(1	3)	Y	'es	No	N/A		otrici miocona.					(D	
Basement			7			Gasket	Material		1 LF	\boxtimes			
Apt, #2, 1st Floor E	Podroom Close		5			VAT			20 SF				
Apt, #2, 15 Floor E	Seuroom Glose			20 20 C	77000	1							
						-					П	П	П
				Ц		<u> </u>	Ouble Vendere	Name of Dog	stered Landfill				
Name of Registered V	Vaste Hauler			100	JDEP lauler I		Cubic Yards of Waste	\$1000000000000000000000000000000000000		S North	andfil	/ Tulls	rtown
All Pro Manageme	ent LLC / ATC			Ó	34860	I SW-24310	As Needed		Landfill / G.R.O.W.	.o. Norui L	anuill	Luny	COWII
City, State		the second	77-1-				Disposal Date	City, State	D4/**	II. Da			
Garfield, NJ / Shir	lev, NY						TBD	Bethlehem	, PA/ Morrisvi				
Completed By (Print		Title					Signature	Cg.		Date			
Allen Monchik		Pro	Project Manager Allen Wonchik 12/18/17										



CK# 1415

										/ ~	,	1.	_		_	
Date of Notification (1)			11,0146		Building O			(2)		TE	JE	C		П	M	F
12/16/17				Commercial		(3 00)	Ρ				11-	, 0		Ш	V	15
Agencies Notified	Type Notification		1700	Street Ad	_{aress} Frestmon	ot Ava				HE	3					
☐ EPA	× Initial		- 1		e, Zip Cod					-	11	DE(0	6	2017	\dashv
EPA DEP DOL	Amended Amendment	#	1000		e, zip cod en, NJ 08					11	Ц	DEC	, _	U	2011	
X DOL	Emergency			0.000.000.000.000.000.000		3103				Tolo	phone.	Mumbe	ar	Same.		
DOH DCA	justification)		ı	Name of	Contact					1		BEST	ros			L &
☐ DCA	Cancellation			EACIL	ITY INFO	PMATIC)N			_	LaptoriorCrassicities		ICE	VISIN	G_	
Name of Facility Where A	batement is Takin	g Place (3)		FACIL	III INTO	CIVIALIC	714	Туре с	of Facility (4)					-11-14	400	
Commercial Buildin		3 ,						☐ s	ichool (K-12)							
Street Address	9							T S	ubchapter 8	(Othe	r than h	(-12)				
1420 Crestmont Av	Φ.							X C	other (i.e. priv	rate &	comme	ercial b	ouildi	ngs, l	nomes	5,
									tc.) e Feet	# of	Floors		Blo	lg. Ag	ie .	
City (5)								10,00		2	dest-manorax		100)+		
Camden				County C	odo (7)			115	nt Use (Prior		a demo	olished	1)			
County (6)					SE ONLY)				mercial Bl		ig doine		,			
Camden		0 (0)		ASCM	Na		Nome		ement Contra	_	(0)					
Name of Monitoring Firm	Hired by Building	Owner (8)			NO.				Contracting							
n/a				n/a				Addres	9.75	y IIIC						-
Street Address									de Ave							
n/a								tate, Zi								-
City, State, Zip Code									J 07026							
n/a				Falankan	a Na			none No			Licens	e No		-		-
Project Manager for Mon	itoring Firm			Γelephon n/a	e No.		3,5	160.60			0125					
n/a					(dd)				A Monitor		0120		-	101		-
Start Date (10)		Scheduled	Com	ipietion L	Jate (11)				Contracting	a Inc						
12/25/17	Ab atamant (Oha		`					Addres		9 1110						-
Occupancy Status During									de Ave							
Facility Closed/Vaca Abatement Perform								tate, Zi	3.50.50/(Cal./Cit				_	-		_
Other – Describe:	ed Odiside of Norr	nai r aciiity i	10013	»		_			NJ 07026							
Scope of Work (Check A	II That Apply)						Gai	ioia, i	10 07 020							\neg
_	ii Illat Apply)						2	d	Containmen	t with	Nogoti	vo Pro	ceur	2		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Standards .	enovat emoliti						i-Enclosure	it with	Negau	ve rie	SSUIT	5		
2 100 \$1 01 2200 11		<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0,,			F		vebag Proce				D	a alcono		
								■ Nor	n-Exempted	") and	Non-F	паріе			ment	
			ocati										,	Ту		
Location			ormall Sole				scription		(4004)		mount	Ī				
Asbestos-Containing TO BE ABA			ntenar		Asbesto (i.e. t	os Cont thermal	system	viateriai s insula	tion.		pecify		Z.	71	Enc	回
In Facil		Custo	dial S (12)	Staff?	Ç	surfac	cing, VA	T, or		SF	or LF)		Remova	Repair	aps	clos
(13)	-		(12)			other n	niscella	neous)					val	ä.	Encapsulate	Enclosure
		Yes	No	N/A											Ф	
Garag	je		х		Tank	Insul	ation		10	00 SF		<				
Garag				х	Pipe I	Insualt	ion (V	Vrap &	Cut)	18	30 LF		K			
Name of Registered Was	ste Hauler		1.1	JDEP W	27910124 C		Yards		Name of R	egiste	ered Lar	ndfill	-200			
Harmony Contractin	ng Inc			lauler ID 33058	No.	of Wa	ste		GROWS	S Lar	ndfill					
City, State			U	00000		10000000	sal Date)	City, State			725		_	-	
Garfield, NJ						TBD		55	Morrisvi		PΑ					
Completed by		Title					Signatur	e _				Date				
Tina Caporino		Secre	etarv			1 7	Ma	//	ain			12/	16/	17		
тна Сароппо		20010	1				A COL	-	VVV0						-	

Chilipa	and collection of	NOT	Pu (Pu	TION	OF ASI	Jersey BESTOS ABAT C 8:60 and 5:1	TEMENT	DE	G DEC		7	V - [
Date of Notification (1)				Name	of Building	g Owner/Operator (2)	 	JEU	20	-20	1/
12 /	19 / 1	7		Jac	k & Kare	n Ferriday						
Agencies Notified	Type Notification			Street	Address			ASB	ESTO	SC	TNC	ROL
⊠ EPA	☐ Initial								LIC	ENS	ING	
⊠ DOLWD	Amended			City, S	State, Zip C	Code					_	
☑ DOH ☐ DCA	Amendment #		,	Hav	wthorne,	NJ 07506						
(NJAC 5:23-8)	justification)	, roidan ig	,	Name	of Contac	t		Telephone Numb	per			NE
	☐ Cancellation			Kar	en Ferric	day						
				FAG	CILITY IN	IFORMATION						
Name of Facility Where	Abatement is Takir	ng Place	(3)				Type of Facility (4)				
Residential							School (K-12)					
Street Address							Other (i.e., pri	(Other than K-12) ivate and commer		uilding	ıs,	
City (E)							homes, etc.)	T	150			
City (5) Hawthorne							Square Feet	# of Floors	BI	dg. A	ge	
County (6)				Cour	tr Cada (7	VETATE HEE ON! VA	Current Use (Pric	a if haire dansii	la a al\			
Passaic				Cour	ity Code (/)(STATE USE ONLY)	Current Use (Pric	or it being demoils	nea)			
Name of Monitoring Firm	Hired by Building	Owner ((8)	ASCM	No	Name of Abateme	ent Contractor (9)					
Bio Terra Solution		Owner	,	/ (OO)VI	140.		NAGEMENT LL	С				
Street Address	F1					Street Address						
P.O. Box 1224						27 Outwater	Lane					
City, State, Zip Code						City, State, Zip Co	ode					
Union, NJ						Garfield, NJ	07026					
Project Manager for Mor	nitoring Firm		Tele	phone	No.	Telephone No.		License No.				
Rick Estaquio			97	73-494	-3762	973-928-4888	3	1188				
Start Date (10)	The second secon	duled C				Name of OSHA M	Monitor					
12 /20 /		12/	29	_ / _	17	ALL PRO MA	NAGEMENT LL	.C				
Occupancy Status Durin	g Abatement (Ched	ck only o	one)			Street Address						
☐ Facility Closed/Vacat					125	27 Outwater	Lane					
Abatement Performe Time of Abatement:	d Outside of Norma	II Facility	y Hour PM-	s - Des	cribe AM	City, State, Zip Co						
					,	Garfield, NJ	07026					
Scope of Work (Check a ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	III that apply)		novati			Mini-End Gloveba	tainment with Negalosure g Procedure empted (*) and Nor		re			
			Locat						-	ateme	ent T	ype
Location Asbestos-Containing			Norma ed Sole		Asha	Description of stos Containing Ma		Amount	-			1
TO BE AB	ATED `	Ma	intena	nce/		., thermal systems		(Specify	Remova	Repair	Encapsulate	Enclosure
IN Faci (13)	lity	Cus	todial (12)	Staff?		surfacing, VAT other miscellane		SF or LF)	val		sula	sure
(13)		Yes	No	N/A		other miscellane	ous)				ite	
Basement	//				Insulati	on		80 LF				
									П	П	П	П
			П									П
		Ħ										
Name of Registered Wa	ste Hauler	1		J L JDEP I		Cubic Yards of	Name of Regist	ered Landfill		ГП		
All Pro Management L			F	lauler II	D No.	Waste		ndfill/ G.R.O.W.S. North	h I ands	ill / T"	utour	VI.
City, State	237710	Jan Carlo	0	J34860 /	SW-24310	As Needed Disposal Date	City, State	.c.m. c.r.c.w.s. North	. Lanuil	ar rull	yrown	
						Dioposai Date	Oity, Otale					

Garfield, NJ / Shirley, NY

Allen Monchik

Completed By (Print or Type)

Title

Project Manager

TBD

Signature

Allen Monchik

Bethlehem, PA / Morrisville, PA

Date

12/19/17

2h 235	55 [P	N O TH		NOTE		BES	ersey TOS ABAT 60 and 5:1			E (E		V) [
Date of Notification (1)			32 C.W. 1		Name	of Building	Owr	ner/Operator (2)		-01	C	26	-20	17
12/	20 /	17			Esp	osito Co	nstr	uction							
Agencies Notified	Type Notifica	ation			Street	Address				A	SBE	STO	SC	TNC	BOI
⊠ EPA					253	Main St	reet,	Suite 385						ING	
☑ DOLWD	☐ Amended					tate, Zip C									
☑ DOH	Amendme				Mat	awan, N.	J 077	747							
DCA (NJAC 5:23-8)	☐ Emergend justification		cluaing			of Contact				Telephone N	umber				
V	Cancellati				Jen	nifer Esp	osit	.0							
					FAC	CILITY IN	FOR	MATION							
Name of Facility Where A	Abatement is T	aking	Place	(3)					Type of Facility	(4)			_		-
Commercial				(-)					School (K-12						
Street Address									☐ Subchapter	8 (Other than K	-12)				
500 8th Street									Other (i.e., p		mercia	al bui	lding	5,	
City (5)									Square Feet	# of Floors		Bld	g. Ag	ie.	
Asbury Park									equa.o.cot	511.156.15		-	9.7.8		
County (6)					Coun	tv Code (7)(STA	TE USE ONLY)	Current Use (Pr	rior if being dem	nolishe	(b:		-17-12	=
Monmouth						, (<i>N</i>	/				-,			
Name of Monitoring Firm	Hired by Build	ding O	wner (8)	ASCM	No.	Nar	ne of Abatem	I ent Contractor (9))					
Bio Terra Solutions		J	,				F		NAGEMENT L						
Street Address							Stre	et Address							-
P.O. Box 1224							2	7 Outwater	Lane						
City, State, Zip Code							City	, State, Zip C	ode						
Union, NJ							100	arfield, NJ							
Project Manager for Moni	itoring Firm	1-11		Tele	phone I	No.	Tele	ephone No.		License No					
Rick Eustaquio				97	3-494	-3762	9	73-928-4888	3	1188					
Start Date (10)	S	Schedu	uled C	omple	tion Da	te (11)	Nan	ne of OSHA N	Monitor						
01 /02 /	18	_ 0	1_/	19	_ / _	18	Α	LL PRO MA	NAGEMENT L	.LC					
Occupancy Status During	Abatement (0	Check	only o	ne)			Stre	et Address							-
☐ Facility Closed/Vacate					nent		2	7 Outwater	Lane						
☐ Abatement Performed							City	, State, Zip C	ode				===		-
Time of Abatement: _	AM	PM	1/	_PM-		AM	G	arfield, NJ	07026						-1
Scope of Work (Check al	I that apply)							V-1	10 CO						
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			□ Re 図 De						tainment with Ne closure g Procedure empted (*) and No						
			10.00	Locat	2007							Aba	ateme	ent Ty	/pe
Location		.		lorma d Sole				Description of						1	
Asbestos-Containing TO BE ABA		1)		intena				Containing Ma rmal systems		Amount (Specify		Remova	Repair	Encapsulate	Enclosure
IN Facili			Cust	odial	Staff?	(s	urfacing, VAT	, or	SF or LF)		val	7	Insc	sure
(13)		Ì	Yes	(12) No	N/A	1	oth	ner miscellane	eous)					ate	(D)
Basement					×	HVACI	Duct	s		100 SF					
Crawlspace						Soil De	bris			300 SF				П	
1st Floor								s behind wa	alls	22 SF					귀
2 nd Floor			П	П		HVACI	Juct	e & trunke l	pehind walls	140 SF				П	\exists
Name of Registered Was	te Hauler				JDEP 1		1	oic Yards of		stered Landfill		K.Y.			_
All Pro Management LL				H	lauler II	O No.	Wa	ste	IESI Bethlehe	em Landfill / M				ses /	
City, State	.U/AIC			0	034860	SW-24310	-	s Needed posal Date	G.R.O.W.S. N City, State	lorth Landfill /	Tullyt	own			_
**	ıv						1	BD	100 May 100 Ma	DA / \$5 1 - 111		187		Lapa	CII
Garfield, NJ / Shirley, N		1 700					1		Bethlehem, I	PA / Morrisville	-		ynes	ourg,	OH
Completed By (Print or T	ype)	Title		RA-				Signature		,	Date		1000		
Allen Monchik		PI	roject	Man	ager			Allen	Monchik	2	12	20/	17		

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:120-

7) CONTINUATION SHEET



	_			77 CONTINOATION SHEET						1
				500 8th Street		Abatemen	t Type	ASBES	TOS CO	NTROL 8
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	Nor S Main	s Locat rmally Solely tenano al Staff	Used by ce/Cust	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a I	R e p a i r	E n c a p s u	E n c l o s u r e	TVU Zer er Constitution and analysis
	Yes	No	N/A							
Waiting Room			X	VAT	400 SF	Х				
W. W C.										
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Completed by: (Print or type) Allen Monchik	Title:	Project Manager	Signature:	Date:/20/1
			1 795	

Dec 20 2017 10:06AM Hazmat Diagnostic LLC 9739283994

page 2

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NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to MIAC \$:80 and 12:12)

DEC 2 6 2017

DEC 2 6 2017

CHARBESTICS CONTROL & LICENSING

Data of Notification (1) 12/20/2017			ms of Bui					.8				-		(
Agencies Natified Type Notification		100000000000000000000000000000000000000	eel Adori 16 CLA		VAV	Æ			8				/	
SPA Initial Amended Am			y State, I			305				~		/	0.	
E DON Justification Ganodiation	chalud	100.00	ME of Co AFAEL		STO			, ,	Tels	phone Num	Mar			
	67 (81		FACILIT	YIMPOP	PHATIC	MC	TVDD	of Facility (4)						-
Name of Fedility Where Abetiment is Texing INFINITY INSTITUTE Street Address	Piete (3)	70 E- 12 -				_	RI I	School (K-12) Subchapter B		r then K-12	K			
193 OLD BERGEN ROAD							5 2	Other (i.e. pro- stc.)	vate á	commerc a	المانط	ngs. h	ente e	
CAY (E) JERSEY CITY								re Feet	# of 3	Floore	70	ig. Ag *	8	
County (8)			TATE US		-	_		sat Usa (Pricr Cational	ופס זו	ig demolish	9ඒ)			
Name of Monitching Firm Hard by Building O AHERA CONSULTANTS	wher (a)		ABCM N 0057	0		Name HAZI	MAT	DIAGNOS	TIC I	(9) _LC				
Small Address PO BOX 385							LEN	WILD AVE						
City, State, Z.p. Code OCEANVILLE, NJ 08231						City, S BLO	iato, i	ZIP COOP NODALE, N	JJ 07	403				
Project Manager for Wonitoring Firm ERIC CLARKSON			elephone 109 652			Teleph 973		vo. 3995		License N 01181	٥.			
Sar. Data (10) 12/21/2017	Scheduler		deilon Da	(11) e3i		Name HAZ	of OS MAT	DIAGNOS	TIC	LLC				
Occupancy Status During Abatement (Chao	k Only One	9)				Street								
Facility Closed/Natisted During Entire F Absencert Performed During of North	al Fatiliv	batama Hours	I NL			City, 9	steta.	MLD AVE		74.03				
Other - Describe: 8007 4:00pm - 12:30	5117				_	5LO	OMI	NGDALE,	MJ Ú	1400				
Scope of Work (Check As That Apply) ES 23 of 07 23 if ≥160 of 07 \$280 if		enovati smolitic					N N	uil Containms Ind-Endosure Sovebag Proc Inn-Exempled	i adura				ð	
	15	Locatio	. 1					,				Abeb	ement pe	
Location of Asbestos-Containing Material (ACM) PO BE ABATED In Facility (13)	A USB Mak	iomath & Solai intenan odlal S (12)	A ph	Ashas (i.g.	tos Cor theirns suri	miscetta Maning Ma Maning Ma Maning Maning Maning Maning Maning Maning Maning Maning Maning Maning Maning Maning Maning Maning Maning Maning Ma Maning Ma Maning Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma Ma	Mater na ina AT, or			Amount Spealty (F of LF)	Removal	Repair	Encepsulate	Enclosure
Infinity Institute Storage Room	1 25	×			Pip	a insul	ation	1	-	DLF	×			1
manag managa otologa reasi.													+	
Name of Registered Waste Rauler		I k	JDEPW	melo	Guk	c Yards		· Name of	Regis	derec _anch	RB B			İ
HAZMÁT DIAGNOSTIC LLC		Н	iauter 10 i 035440	Na.	TBC	na ste		G.R.O.	w.s					
City, State BLOOMINGDALE, NJ 07403					PBE TBE	osal Da	10	MORR	isvi	LLE, PA				
Completed by Yabana Rotaru	Title	k				Signatu	11%	11/2/	1		0a1a 12/20/	201	7	

CIL 2354

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

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- Į)EC	21	5 	2017	7	
 ASR	ESTO	18.0	10.	ITDO		

Date of Notification (1)	12020 AVA					T:	er/Operator (2)		ПП	UL	·	_ (J ()	UII
12/	20 /	17		Peg	asus En	terpr	ises, LLC		- 1						
Agencies Notified	Type Notifica	tion		Street	Address					A	SBES	STO	SC	ONT	ROL
⊠ EPA	Initial □			111	0 Hamilto	on Bl	lvd., Suite 2	2A	į			LIC	ENS	SING	
⊠ DOLWD	☐ Amended			City, S	state, Zip C	Code									
☑ DOH ☐ DCA	Amendme		,	Sou	th Plaint	field,	NJ 07078								
(NJAC 5:23-8)	justification		1	Name	of Contact	t			Tele	phone Nu	ımber				\neg
	☐ Cancellati	on		Clif	f Wang										
				FAC	CILITY IN	IFOR	MATION								
Name of Facility Where A	batement is T	aking Place	(3)					Type of Facility	(4)						\neg
Commercial								☐ School (K-12							
Street Address								☐ Subchapter to				hui	Idina	•	
1 Brook Street								homes, etc.)		and Comm	ileiGia	bui	iuirig	5,	
City (5)				211 7211				Square Feet	# 0	f Floors		Blo	g. Ag	je	\neg
Jersey City															
County (6)				Coun	ty Code (7)(STAT	TE USE ONLY)	Current Use (Pr	ior if be	eing demo	olished	i)			\neg
Hudson							8	***							
Name of Monitoring Firm I	Hired by Build	ing Owner	(8)	ASCM	No.	Nam	ne of Abateme	ent Contractor (9)							\neg
Bio Terra Solutions						A	LL PRO MA	NAGEMENT L	LC						
Street Address						Stre	et Address								\neg
P.O. Box 1224						27	Outwater	Lane							
City, State, Zip Code						City,	, State, Zip Co	ode							
Union, NJ						G	arfield, NJ	07026							
Project Manager for Monit	oring Firm		Tele	phone I	No.	Tele	phone No.		Lic	ense No.					
Rick Eustaquio			J.	3-494		97	73-928-4888		1	188					
Start Date (10)	1.00	cheduled C					ne of OSHA M								
/	18	01 /	26	_ / -	18	A	LL PRO MA	NAGEMENT L	LC						
Occupancy Status During			200			Stre	et Address	-							
☐ Facility Closed/Vacate						27	Outwater	Lane							
Abatement Performed Time of Abatement:						City,	, State, Zip Co	ode							
						G	arfield, NJ	07026							
Scope of Work (Check all	that apply)						□ Full Con	tainment with Neg	antivo !	Droccuro					
≥3 sf or ≥3 lf			novati				Mini-Enc		gative	riessuie					
☐ ≥160 sf or ≥260 lf		⊠ D∈	emolitic	n				g Procedure	- Frie	hla Danaa	d				
		1 10	Locat	ion	T		□ Non-Exe	mpted (*) and No	n-Fna	ble Proce		A I-			
Location	of		Norma	ly			Description of	of						ent Ty	
Asbestos-Containing N			ed Sole				Containing Ma	terial (ACM)		Amount		Remova	Repair	Enc	Enclosure
TO BE ABA		U. B. U	todial		(i.e		mal systems urfacing, VAT			(Specify F or LF)		970	air	apsı	nso
(13)	,		(12)	1	-		er miscellane			. 0. 1.		=		Encapsulate	re l
		Yes	No	N/A										W	
Basement				\boxtimes	Gray Pi	ipe In	sulation			100 LF		\boxtimes			
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N (D- 1: 1)					<u></u>	10:								Ш	
Name of Registered Wast			10000	JDEP \ auler II		Cub	ic Yards of	Name of Regis			IA 2 W	orth	Ione	ien i	
All Pro Managemen	t LLC / ATC				SW-24310	A	s Needed	Tullytown / Min				oiul	LdIIC	/	
City, State							osal Date	City, State							
Garfield, NJ / Shirle	y, NY					TI	BD	Bethlehem, PA	/ Morri	isville, PA	/ Wayı	nesb	urg,	ОН	
Completed By (Print or Ty	pe)	Title					Signature				Date				
Allen Monchik		Projec	t Man	ager			Allon.	Manchik	6		12/	20/	17		

<u>Ch354</u>)	١	NOTI	FICA (Pu	TION	t to NJA	ES C8:	TOS ABAT :60 and 5:10	6)	DE	G DEC	E 2	6	V 1017	
Date of Notification (1)		4-				action and a second		ner/Operator (2)	had book					
/	20 /	17	_		Peg	asus En	terp	rises, LLC				-	and the second	No. of Lots	- WHILE SHAPE
Agencies Notified	Type Notifica	ation			Street	Address				ASB	ESTO				1L&
⊠ EPA					111	0 Hamilto	on B	lvd., Suite 2	2A	L	LIU	EN	SIN	j	-
⊠ DOLWD	Amended				City, S	tate, Zip C	ode								
☑ DOH	Amendm		ludina	83	Sou	th Plainf	ield,	, NJ 07078							
☐ DCA (NJAC 5:23-8)	justificati		luuliig			of Contact				Telephone Nu	umber		-		
(☐ Cancellat				Clif	f Wang									
					FAC	CILITY IN	FOR	RMATION							
Name of Facility Where A	Abatement is 7	Taking	Place	(3)					Type of Facility ((4)					
Commercial									School (K-12		40)				- 1
Street Address									Subchapter 8 Other (i.e., pr			hui	dings		- 1
17-23 Bates Street									homes, etc.)	ivate and com	ricidiai	Dui	unig	te.	
City (5)									Square Feet	# of Floors		Bld	g. Ag	е	\neg
Jersey City															
County (6)					Coun	ty Code (7	(STA	TE USE ONLY)	Current Use (Pri	or if being dem	olished)			
Hudson															
Name of Monitoring Firm	-	ding Ov	wner (8) /	ASCM	No.	Nar	me of Abateme	ent Contractor (9)						
Bio Terra Solutions							Α	LL PRO MA	NAGEMENT LI	LC					
Street Address							Stre	eet Address							
P.O. Box 1224							2	7 Outwater	Lane						
City, State, Zip Code							City	, State, Zip Co	ode						
Union, NJ							G	arfield, NJ	07026						
Project Manager for Moni	toring Firm			Tele	ohone	No.	Tele	ephone No.		License No.					
Rick Eustaquio				97	3-494	-3762	9	73-928-4888		1188					
Start Date (10)		Schedu	led C	omplet	ion Da	te (11)	Nar	ne of OSHA M	1onitor	.,			- T-		
01 /04 /	18	01	/	26	_ / _	18	Α	LL PRO MA	NAGEMENT LI	LC .					
Occupancy Status During	Abatement (Check	only o	ne)			Stre	eet Address							
□ Facility Closed/Vacate	ed During Enti	re Peri	od of	Abaten	nent		2	7 Outwater	Lane						
☐ Abatement Performed							City	, State, Zip Co	ode						$\overline{}$
Time of Abatement: _	AM	PM	/	_PM-		AM		arfield, NJ							
Scope of Work (Check all	that apply)														\dashv
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf				novatio molitio				☐ Mini-End☑ Gloveba	tainment with Neg dosure g Procedure empted (*) and Nor						
			Is	Locati	on			E HOWEL	p.tos () and Not			Δha	temo	nt Ty	me
Location				Vormai				Description of				1			
Asbestos-Containing		1)		d Sole intena				Containing Ma		Amount	200	Pm	Repair	nca	Enclosure
TO BE ABA				todial S		(i.e		rmal systems surfacing, VAT		(Specify SF or LF)	6	200	aj-	psu	nso
(13)	,	-		(12)		-		her miscellane		0. 0. 2. 7	-			Encapsulate	ē
Basement		-	Yes	No	N/A	Cress Di	I			50 LF		7			
					pe II	nsulation		200000000000000000000000000000000000000		3					
Office Area						VAT				650 SF	12	3	Ш	Ш	Ш
			Ш								L				
Name of Registered Was	te Hauler			N	JDEP I	Vaste	Cut	oic Yards of	Name of Regis		000-50-0	9000			
All Pro Managemen	nt LLC / ATO	:			auler II	O No. SW-24310	Wa	ste s Needed	IESI Bethlehem Tullytown / Mine			orth	Land	fill /	
City, State								posal Date	City, State						
Garfield, NJ / Shirle	y, NY							BD		/ Morrisville, PA	/ Wave	ach	ura (ЭН	
Completed By (Print or Ty	CT- 1000 CC	Title	7.55					Signature	1		Date		91		
Allen Monchik	7.73-8.		oject	Man	ager				Monchik		12/2	0/	17		

Ch 235	do	NOTI		TÍÓN	OF ASE	ew Jersey BE STO S ABAT C 8:60 and 5:10		DEO	r 2	<u> </u>	\ <u>\</u>	E
Date of Notification (1)	4			Name	of Building	Owner/Operator (2)	114 45		0	<u> 201</u>	-
12 /	20 / 17	7		Peg	asus En	terprises, LLC			ONE CAMERIE	in the later of th	SOLUMN STATE OF THE STATE OF TH	NIMP MAIL
Agencies Notified	Type Notification			Street	Address			ASBES	LICE	COL	VTRO	DL a
⊠ EPA	☑ Initial			1110) Hamilto	on Blvd., Suite 2	2A	THE CHILDREN STATE OF CONCERNMENT AND	_1 U L	11/011	nceasons VCI	Programmy (1)————————————————————————————————————
☑ DOLWD ☑ DOH	Amended Amendment #			City, S	tate, Zip C	ode						
□ DCA	☐ Emergency (ir					ield, NJ 07078						
(NJAC 5:23-8)	justification) Cancellation				of Contact Wang			Telephone Number	er er			
				FAC	ILITY IN	FORMATION				-		
Name of Facility Where	Abatement is Takin	g Place	(3)				Type of Facility ((4)				
Commercial							School (K-12) (Other than K-12)				
Street Address								ivate and commerc	ial bu	ilding	s,	
25 Bates Street			1									
City (5)							Square Feet	# of Floors	Bio	dg. Ag	je	
Jersey City County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)			
Hudson		Carrent osc (i ii	or it being demonst	icu)								
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCM I	No.	Name of Abateme	ent Contractor (9)					
Bio Terra Solutions	3					ALL PRO MA	NAGEMENT LI	LC				
Street Address						Street Address						
P.O. Box 1224						27 Outwater						
City, State, Zip Code						City, State, Zip C						
Union, NJ Project Manager for Mon	itarina Eirm		Tolo	phone N	lo.	Garfield, NJ Telephone No.	07026	License No.				_
Rick Eustaquio	itoling Film			3-494-		973-928-4888	2	1188				
Start Date (10)	Sche	duled C	0.50	na cheanaoide	activates.	Name of OSHA N		1100				
01/_04_/		01_ /	5.1		25 (5)	ALL PRO MA	NAGEMENT LI	LC				
Occupancy Status During	g Abatement (Chec	ck only o	ne)			Street Address						
☐ Facility Closed/Vacate					••	27 Outwater						
Abatement Performed Time of Abatement: _						City, State, Zip C						
Scope of Work (Check a					30002	Garfield, NJ	07026					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	і (пасарріу)		novati molitic			☐ Mini-End ☐ Gloveba	g Procedure	native Pressure	e			
1,404,000,7440,000			Locat						Ab	ateme	ent Ty	уре
Location Asbestos-Containing TO BE AB, IN Facil (13)	Material (ACM) ATED	Use Ma Cus	ed Sole intena todial ((12)	ely by nce/ Staff?	Asbe (i.e	Description of stos Containing Ma and thermal systems surfacing, VAT other miscelland	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	CONTRACTOR OF THE PROPERTY OF	Yes	No	N/A				4	-			
Basement Utility Roo	om				VAT			100 SF			Ш	Ш
			П	П					П		П	П

Name of Registered Waste Hauler All Pro Management LLC / ATC City, State

Garfield, NJ / Shirley, NY

NJDEP Waste Hauler ID No. 0034860 / SW-24310

Cubic Yards of Waste As Needed

Name of Registered Landfill IESI Bethlehem Landfill / G.R.O.W.S. North Landfill / Tullytown / Minerva Enterprises

City, State

Disposal Date

TBD

Bethlehem, PA / Morrisville, PA / Waynesburg, OH Date

Completed By (Print or Type) Allen Monchik

Project Manager

Signature Allen Monchik

12/20/17

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) Pegasus Enterprises, LLC 17 20 12 1 Street Address Agencies Notified Type Notification

Name of Facility Where Abatement is Taking Place (3)

Name of Monitoring Firm Hired by Building Owner (8)

Occupancy Status During Abatement (Check only one)

 □ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe

Time of Abatement: ____AM-___PM/___PM-_

☐ Amended

Amendment #

justification)

☐ Cancellation

☐ Emergency (including

⊠ DOH

☐ DCA

⊠ DOLWD

(NJAC 5:23-8)

Commercial

9 Brook Street

Bio Terra Solutions

Project Manager for Monitoring Firm

01 / 04 / 18

Scope of Work (Check all that apply)

Garfield, NJ / Shirley, NY

Completed By (Print or Type)

Allen Monchik

Street Address

Jersey City

Street Address

Union, NJ

Start Date (10)

≥3 sf or ≥3 lf

≥160 sf or ≥260 lf

P.O. Box 1224

City, State, Zip Code

Rick Eustaquio

City (5)

County (6) Hudson

ESTOS ABAT 8:60 and 5:16	5)		E [2017		
Owner/Operator (2	2)	heal horal			1	-
erprises, LLC		and the same of th	and the same of	BARN DESCRIPTION OF	السيا	
n Blvd., Suite 2	A	ASBEST(OS CO CENSI		L&	A. P. Santa
de						
eld, NJ 07078						
		Telephone Number				
				-		
ORMATION						
	Type of Facility (☐ School (K-12) ☐ Subchapter 8 ☐ Other (i.e., pri homes, etc.)		al buildin	ıgs,		
	Square Feet	# of Floors	Bldg. /	Age		
STATE USE ONLY)	Current Use (Pri	or if being demolishe	ed)			
Name of Abateme	ent Contractor (9) NAGEMENT LI	LC				
Street Address						
27 Outwater	Lane					
City, State, Zip Co	ode					
Garfield, NJ	07026					
Telephone No.		License No.				
973-928-4888	3	1188				
Name of OSHA N						
Appendix the college protestics and desire	NAGEMENT LI	LC				
Street Address	_					
27 Outwater	A STATE OF THE STA					
City, State, Zip C						
Garfield, NJ	07026					
☐ Mini-End	a Procedure	gative Pressure n-Friable Procedure				
10.75			Abate	ment Ty	уре	
Description	of	Amount	70 7		四	

Bethlehem, PA / Morrisville, PA / Waynesburg, OH

Date

12/20/17

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Use Ma	d Sole intena todial (12)	ely by ance/ Staff?		Description o stos Containing Ma , thermal systems i surfacing, VAT, other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(15)	Yes	No	N/A							(D	
Roof				Black A	sphalt Roof Shi	ngle	5,000 SF				
Name of Registered Waste Hauler All Pro Management LLC / ATC		1	NJDEP I		Cubic Yards of Waste As Needed		istered Landfill n Landfill / G.R.O.W.S. synesburg, OH	. Norti	Land	dfill /	
City, State					Disposal Date	City, State					

1110 Hamilton Blvd., Suite 2A

South Plainfield, NJ 07078

FACILITY INFORMATION

County Code (7)(STATE USE ONLY)

City, State, Zip Code

Name of Contact

Cliff Wang

ASCM No.

Telephone No.

Scheduled Completion Date (11) 01 / 26 / 18

☐ Renovation

□ Demolition

Is Location

Project Manager

973-494-3762

TBD

Allen Monchik

Ch 151	P		ot	FIC (P	ALIGI	OF AS	lew Jersey BESTOS AC 8:60 a	ABAT	EMENT	DE	G	E		V [
Date of Notification (1)					Name	of Buildin	g Owner/Op	nerator (2)		nec	0 (3 21	117	$-\parallel$
12 /	22 /	17				rizon	ig Owner/Op	Derator (2)	111	UEC	2 t) (J11	1
	-		-												
Agencies Notified	Type Notific ☐ Initial	ation				t Address				ASB	ESTO				. &
⊠ DOLWD	☐ Amende	d			-) Holmde					LIC	ENS	SING		
□ DHSS	Amendm	-				State, Zip (
☐ DCA	☐ Emerger	ncy (inclu	ding			Imdel, N.				1					
(NJAC 5:23-8)	justificati Cancella				0.00	of Contac x Baylor				Telephone N	Numbe	r			
					FA	CILITY IN	NFORMAT	ION				2		-8.76	
Name of Facility Where Al	patement is	Taking P	lace	(3)					Type of Facility (4)	775				
Verizon									☐ School (K-12						
Street Address									Subchapter 8				7.0		
970 Holmdel Road									Other (i.e., pr homes, etc.)	ivate and con	nmercia	al bu	ııldıng	JS,	
City (5)						-			Square Feet	# of Floors		Bl	dg. A	ae	
Holmdel, NJ 07733									10,000	3			50		
County (6)					Cou	nty Code (7	7)(STATE USE	ONLY)	Current Use (Prid	or if being der	nolishe	d)	203		
Monmouth												,			
Name of Monitoring Firm H	lired by Buil	ding Ow	ner (8	3)	ASCM	No.	Name of A	Abateme	ent Contractor (9)			_			
USA Environmental	Managaen	nent Ind	.				JVN R	estorat	ion Inc						
Street Address							Street Add	dress		72-22-5					
8436 Enterprise Ave	nue						47 Fos	ter Roa	ad						
City, State, Zip Code							City, State	e, Zip Co	ode				11.700		
Philadelphia, PA 191	53						Staten	Island	NY 10309						
Project Manager for Monito	oring Firm		0.11	Tel	ephone	No.	Telephone	e No.	-	License No	D.				
Mark Jenkins				2	15-365	-5810	718-60	5-6256		00774					
Start Date (10)	5	Schedule	d Co	mple	etion Da	ite (11)	Name of 0	OSHA M	onitor		-17-17-1	_			
01 /02 / _	18	01	_ /	_3	1_ /	18	Testor	Tech							
Occupancy Status During	Abatement (Check or	nly o	ne)			Street Add	dress							
☐ Facility Closed/Vacated					ment		10 59	lackso	n Avenue						
Abatement Performed (scribe	City, State	. Zip Co	ode				_		-
Time of Abatement:	AM	PM/ <u>5</u>	:00F	PM- <u>1</u>	:30AM		LIC NY								
Scope of Work (Check all t □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	hat apply)	-	Ren				□ N	Ini-Encl	ainment with Nega osure	ative Pressure	е				
									mpted (*) and Nor	n-Friable Proc	edure				
				Loca								Aba	ateme	ent Ty	уре
Location o Asbestos-Containing M		1)		orma d Sol	ely by	Acho		ription of	f terial (ACM)	Amount		R	R	Щ	Щ
TO BE ABAT	ED	-30			ance/	(i.e	., thermal s	ystems i	nsulation,	(Specify		Removal	Repair	Encapsulate	Enclosure
IN Facility			Justo	(12)	Staff?		surfacir	g, VAT,	or	SF or LF))	val	7	Sul	sure
(13)		Y	es	No	N/A		other mis	cellaneo	ous)					ate	
Basement A/C Equipm	ent Room	B	1			Duct In	sulation			80SF					
		Г	1	П									П	П	П
			1	_											
			1	<u> </u>								Ш	Ш	Ш	Ш
Name of Registered Waste	Hauler				JDEP \		Cubic Yard	ds of	Name of Regist						
Newark Carting				1	lauler II NJ-56		Waste 15		G.R.O.W.S.	, Inc.					
City, State							Disposal D	ate	City, State						
Hackettstown, NJ							01/31/1	8, ,	Morrisville,	PA					
Completed By (Print or Typ	e)	Title					Signa	tyre/			Date				\exists
Ralph Barnhardt		Pro	ject	Mar	nager			W///L	Mond		12.	- 2	7-1	201	7

Ch 0143	319		N PTH (P	ICATION urayant	ete of Nev I OF ASB TA N. AC	w Jerse ESTOS 8:60 an	у АВАТЕ d 12:120	MENT	The state of the s		B G		<u> </u>	2015	G	
Date of Notification (1) 12-22-17				Name o	f Building	Owner/0	Operator	(2)		L	UEU	2		<u>CU 17</u>		
Agencies Notified	Type Notification			Street A	ddress Hadley F	34 				A	SBEST)L &	
DEP X DOL	Initial Amended	ii.	t	City, Sta	ate, Zip Co	ode		15-21-29-	L			CEN	SIIV	G		
177527	Amendment Emergency justification)		\vdash		Plainfie f Contact	Ia NJ				ΙΤε:			*-11		-	
DOH DCA	Cancellation				Neville	ORMATI	ION				_					
Name of Facility Where PSEG Hinchmans		g Place (3)	1 110		OT COLOR		-	of Facility (4	930						
Street Address 685 Hamburg Turn	000								School (K-1: Subchapter Other (i.e. p etc.)	8 (Oth			build	lings,	home	es,
City (5) Wayne									e Feet	# o	f Floors		10000	ldg. A	ge	
County (6) Passaic					Code (7) USE ONLY)			nt Use (Pric		ng demo	lished	1)			
Name of Monitoring Firm	Hired by Building	Owner (8))	ASCN N/A	/ No.			of Abat	tement Con	tractor		nc		1505-0		
Street Address N/A				11111			Street	Addres	1999-1889 1881 1881 1881 1884		V1003 1	110.	_			
City, State, Zip Code					· · · · · · · · · · · · · · · · · · ·		City, S	state, Zi	p Code							
N/A Project Manager for Mor	nitoring Firm		T	Telepho	ne No.			nank, I	NY 11980 o.)	License	No.				
N/A Start Date (10)		Schadul		N/A	Date (11)			924-8	111 IA Monitor		01136					
01-03-18		06-03-	-18	uhietiou	Date (11)		WRS	Envir	ronmenta	I Sen	vices In	c.				
Occupancy Status During Facility Closed/Vac		2.5		nent				Addres Id Doo	s ck Road							
Abatement Perform Other – Describe:	ed Outside of Norm	al Facility	y Hours			_	100 miles (100 miles (tate, Zip nank, I	p Code NY 11980)			>(
Scope of Work (Check A	II That Apply)															
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		and the same of th	Renova Demolit				×	Min Glo	Containme i-Enclosure vebag Proc i-Exempted	edure	153				a.	
		23	Locati							17				Abate	ment	
Location Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED	Use Ma	Normal ed Sole intenar todial S (12)	ly by nce/		tos Cont thermal surfa	scription taining M systems cing, VA niscellan	faterial s insula T, or		(S	mount Specify For LF)		Removal	Repair	Encapsulate	Enclosure
Control I		Yes	No	N/A			Datata				0.05	-			o .	
Control H	ouse	+		X			Brick			б	0 SF	X				
										(D=0-10		+				
	2.4															
Name of Registered Was Waste Management			Н	JDEP W auler ID 7273		Cubic of Was TBD			Name of F Fairless			fill	10			
City, State Elizabeth, NJ 07201				210		2000	sal Date		City, State Morrisvi		19067	,			-	
Completed by		Title				3777777	igr)ature		Montovi			Date				
Raymond Tutiven		Supe	ervisor	f			1	nort	late	>		12-2	2-1	17		

CK Was		NOTIF (F	CATION Pursuant	ete of Nev LOR ASB to WAC	v Jerse ESTOS 8:60 an	ABATE d 12:120	MENT			E C	C 2		2017	n (E)
Date of Notification (1) 12/20/17				f Building Muller	Owner/	Operator	(2)				<u> </u>		2011	
Agencies Notified Type Notification			Street A						F	ASBES L	TOS	CON	NTRO IG)L &
□ EPA				ate, Zip Co n Towns		J 0771:	2				E MARINE	West State	NOTE TO SERVE	Wattoon
➤ DOH justification) DCA Cancellation	_		Name o	f Contact Muller					Telenho	ne Nur	her			0
Name of Facility Where Abatement is Takir	a Diago (2/	FAC	ILITY INFO	ORMAT	ION	T	- 5 E 11th - 745						
Street Address	ig Place (3)						of Facility (4) School (K-12) Subchapter 8 Other (i.e. priv				linas	home	20
City (5) Ocean Township								etc.) re Feet	# of Flo			ldg. A	-00.00-0.00	
County (6) Monmouth				Code (7) USE ONLY,)			nt Use (Prior i		emolish	ed)			
Name of Monitoring Firm Hired by Building	Owner (8))	ASCN	Л No.		100000000000000000000000000000000000000		tement Contra		LS				
Street Address						1	Addres	s DOVE COL	IRT					
City, State, Zip Code								ip Code DD, NJ 087	01					
Project Manager for Monitoring Firm			Telepho	ne No.			one No 668-9		Lic 12	ense No).			
Start Date (10) 12/26/17	Schedul 1/2/18	ed Cor	mpletion	Date (11)				A Monitor PROFES	SIONAL	LS				
Occupancy Status During Abatement (Chec	ck Only O	ne)			- 1		Addres		IDT	15				
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:						City, S	tate, Zi	DOVE COU p Code DD, NJ 087				-		
Scope of Work (Check All That Apply)														
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City, State NEWARK, NJ					Dispo	sal Date	X 2 E	City, State BETHLEH	IEM DA	1	1			
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Pote of Notification (1)		(Pursu	ant tou	Name of Buildin	ng Ov	wner/	Operator (2)						
Date of Notification (1)				MERCK SHARP	% DC	OHME	CORP.	And the second s	ſ)FC	26	2017		
12 / 18 /17 Agencies Notified Type Notificati	00			Street Address			D 0 D0V							1-
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EPA Initial No				City, State, Zip C					ASBE	STO	S CO	NTRO	L &	
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X DOH On Hold	uon			Name of Contact	·†			Telenhone Nun	nhor				-	
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				L ITY INFORMATIO	ON									
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MERCK SHARP & DOHME CORPORATI	ON						Subchapte	er 8 (Other than	K-12)					
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Name of Monitoring Firm Hired by Build	lina Owi	ner (8)	1 (3	ASCM N			7.007.00-07	ment Contracto)= (Q)					
ENVIRONMETAL HEALTH INVESTIGATI				104				MENTAL CORP		ION				
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City, State, Zip Code					- 1		State, Zip (
SPARTA, NEV					\rightarrow		Call Control Englished St.	V YORK 10901						
Project Manager for Monitoring Firm	48	elephon		ber	- 1		hone Num	No. 40.00	ense l	Numbe	er			
WILLIAM S. KERBEL, CIH Expected State Date (10)		73-729-5	THE STATE OF THE S	Data (44)			69-7500	110	01					
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A Suiter Describe. Moriday	i nday re	am-5.50	pin		ľ	City, c	State, Zip (NEW	/ YORK, NEW Y	ORK	10016				
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X >160 SF OR 260 LF Location of	Lolo	cation	Т	Non-F Description o				<u> </u>	Τ.	•				
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in Facility (13)	Yes N	f (12)	-	or other misc	cellane	eous)	8		12		E S	SUF		
	res N	1							-		m	m		
1ST FLOOR MENS ROOM		X	FIRE	PROOFING				285 SF	X	_				
addition to scope:														
1st FLOOR MENS ROOM		×	FLOC	R MASTIC				215 SF	X					
80 L MER		×	DUCT	INSULATION				9 SF	X					
Name of Registered Waste Hauler	NJDEP		Cubic	Yards of Waste				red Landfill						
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33	Hauler	ID No. 939		15	- 1			JNTY RESOUR		ANAG	EMEN	IT SE		
City, State	15	338	Disno	sal Date		City, S		R DRIVE/ROUT	⊏ 15		26			
FREEHOLD, NEW JERSEY			2000	/17-6/30/18	K	TON	COMERY	, PA 17752		/	/	1		
Completed by (Print or Type) Title				Signature	//	//		Date	e / ~	7/	10/	1	7	
BENJAMIN SANCHEZ DIRI	ECTOR (OF OPE	RATIO	NS /	1/	X	1 /		10	41	0/	1	/	

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NOTIFICATION OF ASSESTOS ABATEMENT Pursuant In NAIC 3 6857 and 12120-7 and					State of	New Jersey			Г		P 6			- I-
Date of Notification (1)			NOT	TIFICA	ATION OF A	SBESTOS ABA	ATEME	ENT			E (\mathbb{V}
MERCK SHARP & OCHME CORP. DEC 2 6 20			(Pursu					(2)					+
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PA					Stre	et Address					υĽ	UZ	0 21	1
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DOL	——————————————————————————————————————		100 mm							A	SBES	TOS	CONT	780
Name of Contact DOA			ficatio	n	RAH	HWAY, NEW JE	RSEY	07065	Lecon	E TORREST HONE DAVISOR	Descriptions of the	-IOEN	ISING	DEVICE
Name of Facility Where Abatement is Taking Place (3) Name of Facility Where Abatement is Taking Place (3) MERCK SHARP & DOHME CORPORATION Street Address 22 EAST LINCOLN AVENUE - BUILDING 80 K 13,800 County (6) County (6) County Code (7) County Code (7) County Code (7) County Code (7) Count Code (7) Code (7) Code (7) Code (7) Code (7) Code (7) Code (7) Code (7) Code (7) Code					Nam				T= .					
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Same of Facility (4)						Contraction to the second second	714		1					
School (K-12) School (K-12) Subchapter 8 (Other than K-12)	Name of Facility Where Abatement	t is Taking	Place	e (3)	ACILITI	NFORMATION	Typ	e of Facili	ty (A)					-
MERCK SHARP & DOHME CORPORATION Subchapter & (Other flex nK-12)							1,46							
County (6)	MERCK SHARP & DOHME CORPO	RATION								an K-12	2)			
Square Feet							X	Other (ie.	private & com	ımcl. bl	ldgs., h	omes,	etc.)	
County Code (7) County Code (7) County Code (7) County Use (Prior if being demolished) Corporative (Prior if being demolished) Code (Corporative		DINO SS I					Sc							1
AAHWAY UNION (STATE USE ONLY) ASCM No. Name of Abatement Contractor (9) NAME AL HEALTH INVESTIGATIONS, INC. 104 North Albert						4.0.1	-		1			53		
ASCM No. 104 105									rior if being de	molish	ed)			
INVIRONMETAL HEALTH INVESTIGATIONS, INC. 104 PAR ENVIRONMENTAL CORPORATION Street Address S155 WEST SHORE TRAIL SPOOK ROCK ROAD City, State, Zip Code SPARTA, NEW JERSEY 07871 Telephone Number Fleiphone Number	011		wner	(8)	[SIAII		_	10.000	mont Cont	ate-10	`			-
Street Address Stre	ENVIRONMETAL HEALTH INVESTI	GATIONS,	INC.	1-/		100000000000000000000000000000000000000								
State Stat	Street Address					10.501	_			u OIV	TION			
SPARTA, NEW JERSEY 07871 SUFFERN, NEW YORK 10901 Troject Manager for Monitoring Firm Telephone Number 973-729-5649 Sched. Completion Date (11) 12 / 19 /17 Month Day Year Month Day Year	355 WEST SHORE TRAIL						313	SPOOK R	OCK ROAD					
Telephone Number Telephone N							City,	State, Zip	Code					
VILLIAM S. KERBEL, CIH 973-729-5649 845-369-7500 1101		, NEW JER	_				-	Table 1 Annual Control	Management of the state of the)1				
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REEHOLD CARTAGE, INC. 25 HIGHWAY 33 Ty. State REEHOLD, NEW JERSEY Disposal Date 10 LYCOMING COUNTY RESOURCE MANAGEMENT SE 447 ALEXANDER DRIVE/ROUTE 15 City, State MONTSOMERY, PA 17752 Date Date Disposal Date 12/19/17-6/30/18 Disposal Date 12/19/17-6/30/18 Disposal Date 12/19/17-6/30/18 Disposal Date 12/19/17-6/30/18	ST FLOOR MENS ROOM			X	FIRE PRO	OFING			285 SF	X				
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Date /	completed by (Print or Type)	Title					2/1	X		ate /	1/	, /	/	
	ENJAMIN SANCHEZ	DIRECTOR	OF	OPER	RATIONS	/-	7)	(/	ا	1	4/5	6/	17	-



CHECK # 24857

Date of Notification (1)					of Building Own			Г		2 (6)		пп	7 -
12-15-17 Agencies Notified	Type Notification	,		Street A	Englewood F	roperties	, LLC		DE	; (G	E		
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× DOL	Amendmen				stown, NJ 07	960		1	7 [ULU	20	LU	1
▼ DOH	Emergency justification)	1		of Contact			1	elephone I	Number		, WHERE	#1.00mm
☐ DCA	Cancellation	n		Keith				-		116	DENS	TE	OL &
Name of Facility Where A	Abatement is Takir	ng Place (3)	FAC	ILITY INFORM	ATION	Type of Fa	acility (4)			JLIVO	IIVG	1000
•			-,					ol (K-12)					
Street Address							Subc	hapter 8 (Ot					
800 Sylvan Avenue							X Other etc.)	(i.e. private	& comme	ercial bu	ildings	, hom	es,
City (5)						93	Square Fe	1 0	of Floors		Bldg.	Age	
Englewood Cliffs							100,000	3			50+		
County (6) Bergen					Code (7) USE ONLY)		Comme	se (Prior if be	eing demo	lished)			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASC	л No.	Name		nt Contracto	or (9)				
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Street Address	0.11.1100					100000000000000000000000000000000000000	Address	57					
494 Eighth Avenue,	Suite 1403					1) 00000000000	Broad Str	7007000					
City, State, Zip Code New York, NY 1000	1						tate, Zip Co stadt, NJ (
Project Manager for Moni			- 1	Telepho	ne No.		one No.	7.0.2	License	e No.			
John Leitner					290-5925		939-6565		00756				
Start Date (10) 12-26-17	V.	Schedul 06-30-	ed Cor	npletion	Date (11)		of OSHA M				10		
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	Th-4 A1-)					New	York, NY	10018					
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(13)			(12)	_	othe	er miscellan	eous)	1500	nio 4 2000 € 40 000 * 4	oval	pair	Encapsulate	Enclosure
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2nd Floor (P	Partial)		х	Ceil	ing Glue	Dots		5000	х				
Name of Registered Wast	e Hauler		N	JDEP W	aste Cut	oic Yards	Nar	ne of Regist	ered Land	fill			
ATC, Inc. / JBT (5007			Н	auler ID 1310		Vaste	1000000	nerva Ente		32500			
City, State Shirley, NY / Bronx, N	1Y				Dis _i	posal Date		, State ynesburg	, OH 44	688			
Completed by		Title				Signature		11		Date			
Richard Doran		Proje	ct Ma	nager		1/	de	1.0		12-15-	17		

B & G proj. #: 2018-01

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Date of Notification (1)	Name	of Building Ow	ner/Operator (2	2)		IF	EGE	3 1 7	VI IE	3
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		ate, Zip Code	amenaranastas				Entered and the second of the second	VIEW CONTROL OF		I
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		FAC	CILITY INFORM	IOITAN	N					
Name of facility where abatement is	taking place (3))				Type of Facility				
Audrey Simpson							ol (K - 12)			
Street Address	-					The state of the s	hapter 8 (Other (Private/Comm		12)	
Street / Iddiess						Bldgs	./Homes, etc.			
Cib. (5)	County (6)			T 0-		Square Feet	# of Floors	Bld	g. Age	
City (5)	County (6)			0.0000000	unty Code (7) ate use only)	Current Use (F	Prior if being de	molishe	d)	_
Phillipsburg, NJ 08865	Warren					residential			-,	
Name of Monitoring Firm Hired by B	ldg. Owner (8)		ASCM No.		Name of Abatement	Contractor (9)		183		
			n/a		B & G Restorati	ion, Inc.				775
Street Address					Street Address 105 Ryerson R	load				
City, State, Zip Code					City, State, Zip Code					
5.9, 5.2.5, <u>-</u> , 5.3.5				1	Lincoln Park, I	NJ 07035				
Project Manager for Monitoring Firm		Phone Num	ber	_	Telephone Number	•	License Num			
					(973)696-686		00378	1		_
Scheduled Start Date (10)	Sched. Com	pletion Date (11)		Name of OSHA Moni B & G Restorat					
01/02/2018	01/03/20	18			Street Address					_
Occupancy Status During Abatement	- 15 day - 1				105 Ryerson R	oad	12			
Facility closed/vacated during e Abatement performed outside of					City, State, Zip Code					
Describe:	n normal racinty	nours-		_	LincolnPark, N.	1 07035				
Other-Describe: Scope of Work (check all that apply)									51.1	=
П	Renovation			П	Full Containment w/neg	native pressure	Glovebag p	rocediii	ro.	
	160 sf or ≥260	lf			Mini-enclosure	gative pressure	Non-friable			
	Is location norm		ly				R	R	E	1220
asbestos-containing	by maintenance staff(12)			ion of a	asbestos-containing	Amount	e m	e	n	E
material to be abated in facility (13)			- material			(Specify LF)	SF or o	a	a	C
	Yes N	lo N/A					v e	r	p .	_
pasement furnace & laundry rm		X	duct (wra	р&с	ut)	25 lf	X	1	밁	
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			-					╫╫	H	뒥
						_	ㅡㅡ	#	 	i
Registered Waste Hauler	NJDEP Ha		Cubic Yards of	Waste				1-1		_
B & G Restoration, Inc.	19563	3 Disposal	1 Date		AND REAL PROPERTY AND REAL PROPERTY.	Resource & R	ecovery Cer	iter	,	-
City, State Lincoln Park, NJ			/04/2018		City, State Tullytown,	PA				
	Title		Signature		Gordana Luna		Date			
Gordona Luna	ConratanilTr		1		Jordana Tuna		12/20/20	47		

C1/1086	N		AT/QN	te of Nev OF ASBI	ESTOS	ABATE	MENT 0)			EG	Ē [\mathbb{V}	E	ī
Date of Notification (1)				Building	Owner/C	perator	r (2)		m					
12/21/2017 Agencies Notified Type Notification		_	Steve	remarkan.					Ш	DEC	26	201	7	1
		1	Street Ac	aress					1					
EPA X Initial Amended			City, Stat	te, Zip Co	de					ASBESTO	S CO	NTRO)L &	
DOL Amendment		_ [on, NJ				Į.	e de la companya		ENSI		Trosalturado	-
Emergency (i justification)	ncluding	1	Name of						Tel	ephone Nur	nber			
DOH justification) DCA Cancellation			Steve	Misar										
Nigra of Facility When Abeta and in Talia	DI (0)		FACIL	ITY INFO	DRMATI	ON	T =							
Name of Facility Where Abatement is Taking Private Home	Place (3)						Тур	e of Facility (200					
Street Address							H	School (K-1 Subchapter		er than K-1	2)			
							×	Other (i.e. p	rivate	& commerci	al buil	dings,	home	es,
City (5)		4-1-1-1-1					Sau	etc.) are Feet	1#0	f Floors	TP	ldg. A	ne.	
Paterson							Oqu	0.01.001	"	1110010		lug. /	go	
County (6)			County C	Code (7)			Curr	ent Use (Pri	or if bei	ing demolish	ned)			100
Passaic		1	STATE U	SE ONLY)				•						
Name of Monitoring Firm Hired by Building C	Owner (8)		ASCM	No.		Name	of Ab	atement Cor	tractor	(9)				
						Ren	nova	Safety LL	.C					
Street Address						2 TO 1 TO 1 TO 1	t Addre							
0''. 0' 7'. 0							rosby							
City, State, Zip Code						35.00		Zip Code	0					
Project Manager for Monitoring Firm		1.	Telephor	ne No		400	hone N	n, NJ 0750		License N	0			
1 Toject Manager for Monitoring 1 inn			releption	ie ivo.				·8711		01332	0.			
Start Date (10)	Scheduled	Com	pletion D	Date (11)				SHA Monitor		01002				-
01/03/2018	01/05/2		***************************************	, ,		Ren	noval	Safety LL	.C					
Occupancy Status During Abatement (Check	Only One)				Street	t Addre	ess						
Facility Closed/Vacated During Entire P	eriod of Ab	atem	ent			8 C	rosby	/ Ave						
Abatement Performed Outside of Norm Other – Describe: 8:00 am -5:00 pm	al Facility I	Hours						Zip Code						
						Pate	ersor	n, NJ 0750	2					
Scope of Work (Check All That Apply)	TOTAL STATE OF					Г	7							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novat				Ė	_ M	ull Containm lini-Enclosure		n Negative F	ressu	re		
			011				× G	lovebag Pro	cedure		no-a to to delicar on			
		7.0-011		7			_I N	on-Exempte	d (*) an	d Non-Friat	le Pro	Navara and	e ement	
		ocation or mall			1925	8 0	20						ре	
Location of Asbestos-Containing Material (ACM)	Used	Solel	y by	Asbes		scription taining l		al (ACM)	Δ	mount			m	
TO BE ABATED	Custo	tenar	2000000		thermal	system	ns insu		(5	Specify	Re	R	Encapsulate	Enc
In Facility (13)	0.000 C.011	(12)	200000000			cing, V <i>i</i> niscella)	SI	F or LF)	Removal	Repair	psu	Enclosure
** 30	Yes	No	N/A					·			<u>a</u>	-	late	ire
Pagement	700	110			D:	La a cal				5015				
Basement			X		Pipe	Insula	alion		1.	50 LF	X		Х	
	-													
Name of Registered Waste Hauler		25000	JDEP W			Yards		Name of	Registe	ered Landfil				
Removal Safety, LLC		999	auler ID 037007		of Wa	SIE		GROW	/S No	rth				
City, State					57. W.	sal Date	9	City, Stat	e	in the second				
Paterson, NJ					TBD			Morrisy		^o a				
Completed by	Title				,5	Signatur	9'	1//	, ,	Da	ate			
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Chil#3299

Date of Notification (1)	U U U				Name	of Buildin	g Ow	ner/Operator (2	2)		0 E	п	ПП	
12/	22 / _	17				izon	-	***************************************		Ine	3 [\mathbb{V}	
Agencies Notified	Type Notifica	ation		\exists	Street	Address	500 F V 10			1131				
⊠ EPA				-	15 E	East Mor	ntgor	mery Place,	Lower Level		FC 2	6 2	017	
□ DOLWD □	☐ Amended			t	City, S	State, Zip (Code				-6-	0 6	VII	- 1
□ DHSS □ □ □ □ □ □ □ □ □	Amendme				Pitt	sburgh,	PA 1	5212		1				
DCA (NJAC 5:23-8)	☐ Emergend		ling	ŀ		of Contac				Tielephone Shan	BEDS	CON	TRO	L&
(145/10/3.25-0)	☐ Cancellat					hony Po						10111	<u> </u>	-
	-				FAC	CILITY IN	IFOF	RMATION						
Name of Facility Where A	batement is T	aking Pla	ace (3)					Type of Facility (4)				
Verizon Hackettstov		•							School (K-12)					
Street Address									Subchapter 8					
114 Valentine St.									Other (i.e., pr homes, etc.)	ivate and comme	ercial bu	ilding	S,	
City (5)					to and the state of the	The second second			Square Feet	# of Floors	Blo	dg. Ag	ge	
Hackettstown														
County (6)					Coun	ity Code (7	7)(STA	TE USE ONLY)	Current Use (Pri	or if being demol	shed)			
Warren														
Name of Monitoring Firm			er (8)	1	ASCM	No.	Nar	me of Abateme	ent Contractor (9)					
USA Environmental	Manageme	ent					В	BRISTOL EN	VIRONMENTAL	_, INC.				
Street Address							Stre	eet Address						
8436 Enterprise Ave	9						1	123 BEAVER	R STREET					
City, State, Zip Code	KR1.02-812-20110-0						City	y, State, Zip Co	ode					
Philadelphia, PA 19	153						В	BRISTOL, PA	19007					
Project Manager for Monit	oring Firm		T	ele	ohone	No.	Tele	ephone No.		License No.				
Mark Jenkins				21	5-365	-5810	2	15-788-6040		00509				
Start Date (10)		Scheduled		36		1150 A	Nar	me of OSHA M	lonitor					
1 / 8 /	18	1	_ / _	12	_ / _	18	В	RISTOL EN	VIRONMENTAL	_, INC.				
Occupancy Status During	Abatement (0	Check on	ly one	:)			Stre	eet Address						
Facility Closed/Vacate	50 100 HOLES IN STREET HOLES IN SUCH						1	123 BEAVER	R STREET					
Abatement Performed Time of Abatement:						cribe	1 5	, State, Zip Co						
			<u>.00</u> r IV	1-1.	30/AIVI		В	BRISTOL, PA	19007					
Scope of Work (Check all	that apply)							⊠ Full Cont	cinmont with Non	ativa Progruss				
□ >3 sf or >3 lf		\boxtimes	Reno	vatio	on			☐ Mini-Enc	tainment with Neg losure	ative Pressure				
≥160 sf or ≥260 lf			Demo	litio	n			☐ Glovebag	g Procedure					
			1.1.			T		☐ Non-Exe	mpted (*) and Nor	n-Friable Proced				
Location	o.f		Is Lo	mal				Description o			Ab	atem	ent T	уре
Asbestos-Containing N			Jsed S	Sole	ly by	Asbe	estos	Containing Ma		Amount	Re	Repair	Enc	Enc
TO BE ABA	TED		Maint Sustod				e., the	ermal systems	insulation,	(Specify	Remova	pair	aps	Enclosure
IN Facility (13)	у			12)	Jan:			surfacing, VAT, her miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
(15)		Ye	es I	Vo	N/A		Oti	ner miscenane	ous)				te	
1st Floor Storage Area	1					Floor T	ile a	nd Mastic		306 SF	\boxtimes			
Basement AC Room #	‡1] [Pipe Fi	tting	ıs		33 LF				
Name of Registered Wast	e Hauler			F157-15	JDEP \		0.000	oic Yards of	Name of Regis	tered Landfill				
SERVICE TRANSPO	RT GROUP	, INC.			auler II 20990		Wa	ste	MINERVA I	LANDFILL				
City, State							Dis	posal Date	City, State					
NEW CASTLE, DE 1	9720								WAYNESB	URG, OH 4468	88			
Completed By (Print or Ty	pe)	Title	0-00-				J	Signature	1		ate			
Brian Scafiro	- XX	Estir	nato					Brian	Scolino	19PL	12-	22	-1	7

Ch 1037		DIFIG	MONTA	te of New OF ASBE d NJAC 8	STOS A	BATEN	MENT) <u>E</u> (G [5		7 [
Date of Notification (1)				Building C	wner/Op	perator	(2)				F0	0.0	0.0	6 7	-
12/21/2017			Greg F						IN L	1 D	EC .	26	20	11	1
Agencies Notified Type Notification			Street Ad	ldress											
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DEP Amended Amendment #			0.50	e, Zip Coo wood, N		ın				-	LICE	ENS	ING	and an accordance	
Emergency (in		_ -	Name of		0 0704				Tele	ephone N	Jumbe	ər			
DOH justification) DCA Cancellation			Greg F						100	spriorie i	varrib.	. 1			
- Box				ITY INFO	RMATIC	ON	-								
Name of Facility Where Abatement is Taking	Place (3)					Туре	of Facility (4	-)						
Private Home								School (K-12	2)						
Street Address								Subchapter of Other (i.e. pr				المانات	nac	homo	
								etc.)	ivate c	x Comme	i Ciai L	Juliai	ngs,	nome	5,
City (5)							Squa	re Feet	# of	Floors		Blo	dg. A	ge	
Maplewood															
County (6)			County C	Code (7) ISE ONLY)			Curre	ent Use (Prio	r if bei	ng demo	lished	1)			
Essex	(0)									(0)					
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.				atement Con Safety LL		(9)					
Street Address						Street					A. Santa and Santa				
City State Zin Code							osby	Ave Zip Code							_
City, State, Zip Code						1.00		, NJ 07502	2						
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph	none N	lo.		License	e No.				
						973-	-400-	8711		0133	2				
				Date (11)				HA Monitor							
01/04/2018	01/05/							Safety LL	C						
Occupancy Status During Abatement (Check	Only Or	ne)					Addre								
Facility Closed/Vacated During Entire Po							osby								
Abatement Performed Outside of Norma Other – Describe: 8:00 am -5:00 pm	ai Facility	Hours	5					Zip Code , NJ 0750:	2						
Scope of Work (Check All That Apply)						raid	515011	, 140 07 50					_		
≥3 sf or ≥3 lf	X F	Renova	tion			Г	7 50	ıll Containme	nt with	Nogativ	o Pro	ccur	0		
≥ 25 f of ≥ 25 f or ≥ 260 lf		Demolit					Mi	ni-Enclosure	E)	i Negativ	/e rie	SSUI	6		
						>	-	ovebag Prod on-Exempted		d Non-Fi	riahla	Proc	edur	2	
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Asbestos-Containing Material (ACM)		ed Sole		Asbest		scription aining N		al (ACM)	Д	mount				т	
TO BE ABATED In Facility	1000000	intena todial	100000000000000000000000000000000000000	(i.e.	thermal	system cing, VA		lation,		Specify F or LF)		Rer	Re	nca	Encl
(13)		(12)				niscella)	01	OI LI)		Remova	Repair	Encapsulate	Enclosure
MAC (ACCOUNT)	Yes	No	N/A	d								<u>a</u>		ate	Ге
Basement	1		X		Pipe	Insula	ation		6	35 LF		x		x	
											-				
			+												
Name of Registered Waste Hauler			JDEP W	lasts	Cubic	Varda		Name of	Dogist	arad Lan	dfill				
		1000	Hauler ID		of Was			The state of the s			IQIIII				
Removal Safety, LLC		0	03700	7	3			GROW	S No	πn					
City, State Paterson, NJ					Dispos	sal Date	9	City, State Morrisy		09					
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tate 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) 22 Dr. Martha Cole 12 1 17 26 Type Notification Agencies Notified Street Address **⊠** EPA ASBESTOS CONTROL & □ DOLWD ☐ Amended City, State, Zip Code LICENSING **⊠** DHSS Amendment #0 Bethesda, MD 20814 □ DCA ☐ Emergency (including Name of Contact Telephone Number justification) (NJAC 5:23-8) ☐ Cancellation Dr. Martha Cole FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Proposed CVS Metuchen School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 45 Pearl Street homes, etc.) City (5) # of Floors Square Feet Bldg. Age Metuchen, NJ 08840 9500 1 55÷ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Middlesex Vacant Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) NA Alliance Environmental Systems Street Address Street Address 700 Turner Way 550 East Union St. City, State, Zip Code City, State, Zip Code Aston, PA 19014 West Chester, PA 19382 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Don Heim 610-558-8902 610-701-9000 00508 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __1__/_9__/_18 3 / 2 / 18 AFT Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 28 N. Pennel Road ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7AM-____PM/3:30PM-___AM Media, PA 19063 Scope of Work (Check all that apply) ≥3 sf or >3 If □ Renovation Mini-Enclosure ≥160 sf or ≥260 lf ☐ Demolition Glovebag Procedure ■ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Remova Repair Encapsulate Enclosure Used Solely by 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 Ground Floor Floor Tile 5360 SF X M Basement X Floor Tile & Mastic 200 SF X Exterior X Plaster Wall Coating 600 SF X П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Richard Burns & Co Western Berks Community Landfill 19955 30 City, State Disposal Date City, State Phila., PA TBD Birdsboro, PA Completed By (Print or Type) Title Signature Date

13 # 18001

Mark Griffin

Estimator

State of NJ Notification of Asbestos Abatement

(Bursuan to NJAC 8:60-7 and 12:120-7) 2018-03 B & G proj. #: Check # 8740 Date of Notification (1) Name of Building Owner/Operator (2) $|\frac{1}{2}|/|^2|^2|/|\frac{1}{2}|^7|$ Vincent Klebaur Agencies Notified Type Notification Street Address EPA DEC 26 2017 X Initial DEP City, State, Zip Code Amendment DOL Cranford, NJ 07016 ASSESTOS CONTROL & X DOH Name of Contact Telephone Number NSING Cancellation ☐ DCA Vincent Klebaur FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Vincent Klebaur Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Cranford Union 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 Project Manager for Monitoring Firm Phone Number Telephone Number License Number (973)696-6869 00378 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 01/04/2018 01/05/2018 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: Scope of Work (check all that apply) ☐ Demolition Full Containment w/negative pressure X Renovation Glovebag procedure Mini-enclosure Non-friable procedure × >3 sf or >3 lf ≥160 sf or ≥260 lf Is location normally used solely Location of Е е by maintenance/custodial Amount asbestos-containing Description of asbestos-containing n m p staff(12) C (Specify SF or material to be material (ACM) C а a abated in facility (13) Yes N/A No A X Basement pipe insulation 108 If Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# B & G Restoration, Inc. Tullytown Resource & Recovery Center 19563 Disposal Date City, State Tullytown, PA Lincoln Park, NJ 01/05/2018 Signature Completed by (Print or Type)

Gordana Luna

12/22/2017

Gordana Luna

Secretary/Treasurer

(M)(C)	•	(Pi	ırsuant	to NJAC	8:60 an	d 12:120	0)				nc	0.2	6	2017	The state of the s	
Date of Notification (1) 12/21/17				f Building		Operator	(2)		1		_UE	L C	U	CULL		
Agencies Notified Type Notification			Street A		on Ctro				T	AS	BES	TOS	CON	ITRO	L&	
EPA Initial DEP Amended Amendment #				ashingtonte, Zip Co		eet			L			PERC TURES	VIIOP	G		
DOL Amendment #				May, NJ												
□ Emergency (ir justification) □ DCA □ Cancellation	iciuaing			f Contact ke Petro	naci				Т-	11	115.55	83				
				LITY INFO		ON										
Name of Facility Where Abatement is Taking Victorian Towers	Place (3))					Ту	oe of Facility (i.			
Street Address 608 Washington Street							×	Subchapter Other (i.e. p	r 8 (Oth				dings	home	es,	
City (5) Cape May							1000	uare Feet 0,000	# c	of Floor	S		ldg. A	Age		
County (6) Cape May				Code (7) USE ONLY)				rrent Use (Pri	or if be	eing der	molish	ied)				
Name of Monitoring Firm Hired by Building Or Vertex	wner (8)		ASCM	I No.				batement Cor	ntracto	r (9)						
Street Address						Street			500							
700 Turner Way						355000000000		ational Roa	d							
City, State, Zip Code Aston, PA 19014								Zip Code A 19341								
Project Manager for Monitoring Firm Dave Turotsy			Telephor	ne No. 58-8902		Teleph 484-		No. -8884		Licei 011	nse N 61	٥.				
				Date (11)				SHA Monitor								
December 20, 2017 I Occupancy Status During Abatement (Check	ebrua		, 2018			EMS										
Facility Closed/Vacated During Entire Pa			ent					te 130 Nor	th							
Abatement Performed Outside of Norma Other – Describe: Work only in segregate	I Facility	Hours			_			Zip Code nson, NJ								
Scope of Work (Check All That Apply)																
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoliti				×	()	Full Containm Mini-Enclosure Glovebag Pro Non-Exempte	e cedure					e		
2 (2 2	1,000	Locati			370	200	===							ement rpe		
Location of Asbestos-Containing Material (ACM)	Used	d Sole	y by		tos Cont		/later	ial (ACM)	- 1	Amount	50			ш		
TO BE ABATED In Facility	100000000000000000000000000000000000000	odial S (12)		(i.e.		systems cing, VA				Specify F or LF		Remova	Repair	ncaps	Enclosure	
(13)	Yes	No	N/A		other n	niscellar	neou	s)				oval	air	Encapsulate	sure	
Handicap Accessible Units (10 ea)			Х	Text	ured C	eiling	Trea	atment	1,0	000 S	F	X				
Lobby			Х		Ceili	ng Stu	ICCO		1,	500 S	F	Х				
Each Window			Х	Text	ured C	eiling	Trea	atment	6	00 SF	=			Х		
See Attached																
Name of Registered Waste Hauler Waste Management		100000	JDEP W auler ID		Cubic of Was			Name of GROW			andfill					
City, State			-		100	sal Date		City, Stat		, Gilli						
Trenton, NJ					TBD	Jai Dale		Morrisv		PA						
Completed by	Title	nle -	Mari		S	ignature	,	0 11		Date						

	ecoservices, LLC			EC		VE	
Location of Asbestos Containing Material (ACM) To Be Abated In Facility	Is location normally used solely by Maintenance/ Custodial Staff? Yes No N/A	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	DEG	Abatem	ent Type	Enclosure
Throughout	N/A	Pipe Fitting Insulation	25 EA	X			
Mens Room	N/A	Tile and mastic	144 SF	Х			
Ladies Room	N/A	Tile and mastic	144 SF	Х	45		
Kitchen	N/A	Tile and mastic	10 SF	X			
Office	N/A	Tile and mastic	140 SF	Х			
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							-

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Ing	DEC	26	2017		
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Date of Notification (1)		- 57		Na	me of Build	ing Owner/Operator	(2)	11119 né	12	6 2	017	-
		7				ommunications	(2)		U L	0 2	.017	
Agencies Notified Type No				Str	reet Address	3		ASBES	TOS	CON	TDO	0
⊠ EPA					1609 Pacif	ic Avenue		AODEC	LICEN	ISIN	3	_ CL
☑ DOLWD ☑ Amen ☑ DOH Amen	ided dment #	£ 12	14 4 14 .	Cit	y, State, Zip	Code			IN TOTAL PROPERTY.	TVOLT, TELEVISION		-
□ DCA □ Emer		10.0		- 1	Atlantic Ci	ty, NJ 08401						
(NJAC 5:23-8) justific	cation)	iioiaai	ng.	Na	me of Conta	act		Telephone Nu	ımber			
☐ Cance	ellation			1	Alex Baylo	r		*	2000000			
Name of Facility Where Abatement	io Tokin	~ DI-	(0)	F	ACILITY	NFORMATION						
Verizon Atlantic City Centra			ce (3)				Type of Facility					
Street Address	Office	<i>-</i>					School (K-1	12) · 8 (Other than K-	12)			
1609 Pacific Avenue							Other (i.e.,	private and comm	nercial	buildi	ngs,	
City (5)							homes, etc	*				
Atlantic City							Square Feet	# of Floors		Bldg.	Age	
County (6)							88,066	7		+-7	5	
Atlantic				Co	ounty Code	(7)(STATE USE ONLY)	TOTAL TOTAL CONTRACTOR	rior if being demo	-04-04111140)		
	11.11		(0)			· ·	Harris of the second Charles	mmunications	į.			
Name of Monitoring Firm Hired by B USA Environmental Inc	uilding (Dwner	(8)	ASC	M No.	Name of Abateme	37.7					
Street Address						BRISTOL EN	VIRONMENTA	AL, INC.				
8346 Enterprise Avenue						1123 BEAVE						
City, State, Zip Code Philadelphia, PA 19153						City, State, Zip Co						
Project Manager for Monitoring Firm			1-			BRISTOL, PA	19007					
Mark Jenkins				lephon		Telephone No.		License No.				
Start Date (10)	Cobod	1.10			55-5810	215-788-6040	Lancard Control	00509				
12 /13 /17		SN		toL	Date (11)	Name of OSHA M BRISTOL EN		LINC				
Occupancy Status During Abatement	(Check	only					MONINENTA	L, INC				
☐ Facility Closed/Vacated During Er				ment		Street Address 1123 BEAVER	CTDEET					
Abatement Performed Outside of	Normal	Facilit	y Hou	rs - De	escribe							
Time of Abatement:AM	PN	1/5:00	PM-2	1:00A	М	City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all that apply)							•	1708 GANS				
≥3 sf or ≥3 If		⊠ Re	novat	ion			ainment with Neg	gative Pressure				
≥160 sf or ≥260 lf			moliti			☐ Glovebag	Procedure					
						☐ Non-Exen	npted (*) and No	n-Friable Procedu	ıre			
Location of			Loca: Norma			_			At	patem	ent T	уре
Asbestos-Containing Material (AC	M)	Use	d Sole	ely by	Asbe	Description of stos Containing Mate		Amount	Re	Re	E	m
TO BE ABATED IN Facility			intena	ince/ Staff?	(ie	., thermal systems in	sulation,	(Specify	Removal	Repair	cap	Enclosure
(13)		000	(12)	Otan :		surfacing, VAT, other miscellaneo		SF or LF)	/al		Encapsulate	sure
\$#00000E		Yes	No	N/A		other miscellaneo	us)				ate	
1st Floor Turbine/Store Room					VAT / M	astic (Same Area	1)	1085 SF			П	
1st Floor Turbine/Store Room						tor Exhaust Insul		200 SF				
1st Floor HSB/New Pad Area					VAT / M	astic		1055 SF				
1st Floor Temporary Store Room	1				VAT / M	astic		210 SF				
Name of Registered Waste Hauler					Waste	Cubic Yards of	Name of Regist					
Bristol Environmental Inc					D No.	Waste		eman Environn	nenta	l Par	k	
City, State				1870	0	Disposal Date	City, State					
Bristol, PA						TBD	Egg Harbor	Township				
Completed By (Print or Type)	Title					Signature	-55	-				
Dillan DeCaro		imat	or				101	/ Da	te/,/	1.	3	
SB-41			7/4			Dellan	D'Caro/	Il 10	114	//	/	

ASB-41 JAN 13 0017070

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

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Date of Notification (1)		_				ng Owner/Operator	(2)	THE DE	C 2	6	201	7
		7		Ve	erizon Co	mmunications						
Agencies Notified Type No ⊠ EPA □ Initial	ification	1		11 223	et Address			ASBES	TOS	CON	ITRO	SJC
	ded				A WOOD IN THE COLUMN	c Avenue		AND DESCRIPTION OF THE PERSON	LICE	NSIN	G	
	dment :	#6-12/	14/17		State, Zip							
□ DCA □ Emer		ncludin	g			y, NJ 08401						
(NJAC 5:23-8) justific	cation) ellation				e of Contac ex Baylor			Telephone Num	ber			
						NFORMATION						
Name of Facility Where Abatement	is Takir	ng Plac	e (3)				Type of Facility (4	1)				
Verizon Atlantic City Centra	Offic	е					School (K-12)					
Street Address				-10			Subchapter 8			9.00		
1609 Pacific Avenue							Other (i.e., prin	vate and comme	rcial t	ouildir	gs,	
City (5)							Square Feet	# of Floors	E	Bldg. /	Age	
Atlantic CIty							88,066	7		+-7		
County (6)				Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Prio	r if being demolis	shed)			3110.70
Atlantic							Verizon Com	munications				
Name of Monitoring Firm Hired by B	uilding	Owner	(8)	ASCN	No.	Name of Abateme	ent Contractor (9)					
USA Environmental Inc						BRISTOL EN	VIRONMENTAL,	, INC.				
Street Address				7.		Street Address						
8346 Enterprise Avenue						1123 BEAVER						
City, State, Zip Code						City, State, Zip Co						
Philadelphia, PA 19153			T=-			BRISTOL, PA	19007				7	
Project Manager for Monitoring Firm			100	ephone		Telephone No.		License No.				
Mark Jenkins					5-5810	215-788-6040		00509				
Start Date (10)12		duled C			ate (11)	Name of OSHA M		catoria:				
				10/1			VIRONMENTAL,	INC				
Occupancy Status During Abatemen						Street Address						
☐ Facility Closed/Vacated During E ☐ Abatement Performed Outside of					oribo	1123 BEAVER						
Time of Abatement:AM	P	M/5:00	PM-2	:00AM	cribe	City, State, Zip Co						
						BRISTOL, PA	19007					
Scope of Work (Check all that apply)							ainment with Negat	tive Pressure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		⊠ Re					osure					
△ ≥160 St 01 ≥260 II		☐ De	moliti	on		☐ Glovebag	Procedure npted (*) and Non-l	Friable Procedur	6			
		Is	Loca	ion					T	atem	ent T	vne
Location of			lorma			Description of				_		Ť.
Asbestos-Containing Material (AC TO BE ABATED	(M)		intena	ely by nce/		stos Containing Mat , thermal systems in		Amount	Removal	Repair	nca	nclo
IN Facility		Cust		Staff?	(1.6.	surfacing, VAT,		(Specify SF or LF)	oval	=	Encapsulate	Enclosure
(13)		Vaa	(12)	NI/A	-	other miscellaneo	ous)				late	е
1st Floor Penetrations		Yes	No	N/A	VAT / Ma	actic		6 SF				
2 nd Floor Frame Room Penetra	ions				VAT / Ma			6 SF				
3 rd Floor Office Penetrations		П			VAT / Ma			6 SF				
6th Floor Hallway Penetrations			П		Mastic	astic						
Name of Registered Waste Hauler				JDEP V	The second second	Cubic Yards of	Name of Register	6 SF		Ш	Ш	Ш
Bristol Environmental Inc			1000	auler ID	No.	Waste		ed Landfill nan Environm	onfo	Dar	L	
City, State	-			18706		Disposal Data		INTERPRETATION	GIILd	raf		
Bristol, PA						Disposal Date TBD	City, State Egg Harbor T	ownship				
Completed By (Print or Type)	Title					Signature		Date	e /		/	
Dillan DeCaro	Es	stimat	or			Dillan	De Caro /		2/1	41	17	7

ASB-41 JAN 13

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Date of Notification (1)	10 /	17						wner/Operator unications	(2)		EC 2	2 6	201	7
	Type Notifi ☑ Initial	ication			0.0000000000000000000000000000000000000	et Address		/enue		ASBE	STOS	CO NSIN	VTR	OL &
		3.50			City	State, Zip					BERTHER BOOK SERVICES OF	No. of the Paris	WINDY CRISTIC	-
☑ DOH ☐ DCA	Amendr Emerge	-			/	lantic Ci								
(NJAC 5:23-8)	justifica	ation)	oluuli	9		e of Conta				Telephone Nur	mber			
	☐ Cancell	lation				ex Baylo				4				
Name of Facility Where Ab	atement is	Taking	Dlac	0 (2)	F.F	ACILITY	INFO	RMATION	Tr	74				
Verizon Atlantic City				e (3)					Type of Facility School (K-1					
Street Address	- Contrain	011100	77			o			☐ Subchapter	8 (Other than K-1	2)			
1609 Pacific Avenue									Other (i.e., homes, etc	orivate and comme	ercial b	uildir	gs,	
City (5)									Square Feet	# of Floors	E	ldg. A	\ge	
Atlantic City					-				88,066	7		+-7	5	
County (6)					Cou	inty Code	(7)(ST/	ATE USE ONLY)	N 20.20	rior if being demol	lished)			
Atlantic				(0)	1.00				And the second second second	mmunications				
Name of Monitoring Firm H USA Environmental I		ilding O	wner	(8)	ASCN	l No.			ent Contractor (9	5)				
Street Address								reet Address	VIICOMMENTA	CL, INO.			23,50	
8346 Enterprise Aver	nue						111/12/2002	1123 BEAVE	R STREET					
City, State, Zip Code								y, State, Zip C						
Philadelphia, PA 191	53						1 1 1 1 1 1 1	BRISTOL, PA						
Project Manager for Monito	ring Firm			Te	lephone	No.	Tel	lephone No.		License No.		HD 22 m		
Mark Jenkins				1 2	215-36	5-5810	2	215-788-6040)	00509				
Start Date (10) 12 / 13 /		Schedu	uled C	Comp	HOL			me of OSHA N	Ionitor VIRONMENTA	I INC				
Occupancy Status During A		(Check	only	one)				eet Address	· · · · · · · · · · · · · · · · · · ·					-
☐ Facility Closed/Vacated			759		ement			123 BEAVE	RSTREET					
Abatement Performed O						scribe		y, State, Zip Co				-		
Time of Abatement:	AM	PM	/ <u>5:00</u>)PM-2	2:00AM		1	BRISTOL, PA						
Scope of Work (Check all th	at apply)													
≥3 sf or ≥3 lf≥160 sf or ≥260 lf]	⊠ Re	enova emolit					Procedure	gative Pressure	ıre			
			4.55	Loca							Ab	atem	ent T	уре
Location of Asbestos-Containing Ma	torial /ACA	4)		Norma	ally lely by			Description o			R	R	Ш	ш
TO BE ABATE		")	Ma	inten	ance/			Containing Ma ermal systems i		Amount (Specify	Remova	Repair	ncap	Enclosure
IN Facility (13)			Cus	todial (12	Staff?			surfacing, VAT,		SF or LF)	val	7	Encapsulate	sure
(13)		T	Yes	No	1		Ott	her miscellane	ous)				te	
Ist FI. Outside Central S	Staircase					VAT / N	Masti	c		50 SF		П	П	П
lst Floor Turbine Room	Exhaust	t	П	П	Ī	Debris	Clea	n Up						
hase						000110	0100				+			
					12									
Name of Registered Waste H	Haulor			Ц.	LIDEDI	Mosta	101	io Vo-df	Now (D	tered to select		Ш	Ш	Ш
Bristol Environmental				10.00	NJDEP N Hauler II 18706	No.	Was	oic Yards of ste	Name of Regis	tered Landfill eman Environn	nenta	Par	k	
City, State							Disp	oosal Date	City, State					
Bristol, PA							TI	BD	Egg Harbo	r Township				
Completed By (Print or Type) Dillan DeCaro)	Title Est	imat	or				Signature	19161	Da	ate /	1/1	7	

Chh# 3297

Date of Notification (1)	10	/	17		- 1		ding Owner/Operato	r (2)	BE	rg	Ē- [V	
Agencies Notified ☑ EPA ☑ DOLWD	Type N ⊠ Initia ⊠ Ame	al	on				ific Avenue			C 2	6	201	7
☑ DOH ☐ DCA (NJAC 5:23-8)	Ame	ndmen	(inclu		4	ty, State, Zi Atlantic C ame of Conf	ity, NJ 08401			LICE	ASIM	!TRO)L
(NJAC 3.23-8)	Cano					Alex Baylo	1000		Telephone N	umbe	Ī	-114120000000	SACTOR!
	1						INFORMATION			-			
Name of Facility Where	Abatemen	t is Tak	ing P	lace (3)		7.012177	III ORIENTION	Type of Facili	itv (4)				
Verizon Atlantic Ci	ty Centra	al Offic	ce					School (K-	-12)				
Street Address								Subchapte	er 8 (Other than K- , private and comr	12)	1 1 1		
1609 Pacific Avenu	е							homes, et	, private and comr c.)	nercia	l build	lings	1
City (5)								Square Feet	# of Floors		Bldg	. Age	-
Atlantic CIty								88,066	7		+-		
County (6)					Co	ounty Code	(7)(STATE USE ONLY)	Current Use (I	Prior if being demo	olished	i)		
Atlantic									ommunications				
Name of Monitoring Firm		Building	Own	er (8)	ASC	M No.	Name of Abatem	ent Contractor (9)				
USA Environmental	Inc		540-017				BRISTOL EN	VIRONMENT	AL, INC.				
Street Address							Street Address						
8346 Enterprise Ave	nue						1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip C	ode					
Philadelphia, PA 191							BRISTOL, PA	19007					
Project Manager for Monito	oring Firm				lephon		Telephone No.		License No.		******		_
Mark Jenkins						5-5810	215-788-6040		00509				
Start Date (10)	4-					ate (11)	Name of OSHA M	25.1215.67					
12 /13 / _	1/	-	12_	/ _1	5 /	17	BRISTOL EN	VIRONMENTA	L, INC				
ccupancy Status During A		*****************					Street Address						
Facility Closed/Vacated							1123 BEAVER	STREET					
Abatement Performed C Time of Abatement:							City, State, Zip Co	de				-	
			VI/ <u>3.0</u>	UF IVI-Z	UAIV	1	BRISTOL, PA	19007					
cope of Work (Check all th	nat apply)								8500 20				_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf				enovat emoliti				osure Procedure	gative Pressure n-Friable Procedu	re			
37 MW			100	s Loca						At	atem	ent 7	īv
Location of Asbestos-Containing Ma	terial (ACI	M)	Use	Norma ed Sole	ely by	Acho	Description of	riol (A CAA)	AND CONTRACTOR STREET		1	T	-
TO BE ABATE)	Ma	aintena	nce/		stos Containing Mate , thermal systems in		Amount (Specify	Remova	Repair	Encapsulate	
IN Facility (13)			Cus	todial: (12)	Stan?		surfacing, VAT, o	or	SF or LF)	val	=	Insc	
(10)			Yes	No	N/A	1	other miscellaneou	15)				ate	1
Floor Turbine/Store I	Room		П			VAT / Ma	astic (Same Area)	1085 SF				-
Floor Turbine/Store	Room						or Exhaust Insula		200 SF				
Floor HSB/New Pad A	Area					VAT / Ma			1055 SF				I
Floor Temporary Stor	re Room			П		VAT / Ma	estic		210 SF				L
ne of Registered Waste H					JDEP V			Name of Registe			Ш		L
ristol Environmental				Ha	uler ID 18706		Waste		ened Landilli eman Environm	ental	Parl	(
State					10100	1	Disposal Date	City, State					
ristol, PA							TBD	Egg Harbor	Township				
pleted By (Print or Type)		Title					Signature		Date	-			
llan DeCaro		Est	imate	or				Delaro		2-6	8-1	7	

ISB-41 DD17070

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

Date of Notification (1)		_		L	(0.11			Ш	D	E 1	JE	X	W	F
	/_	17	_	N		ding Owner/Operations	100000		K			U 1		Ξ
Agencies Notified Type N ⊠ EPA ☑ Initia ⊠ DOLWD ☑ Ame	al	tion		1	treet Addres 1609 Paci	ss fic Avenue				DEC	21	6 2	017	
	ndme	nt # <u>5-1</u>		/	ity, State, Zi Atlantic C	p Code ity, NJ 08401		T		ASBEST	OS C	CON.	TRO	L
(NJAC 5:23-8) justii	fication	y (inciu 1)	aing		ame of Cont			_	To	lephone N	CEN		<u> </u>	_
☐ Cand					Alex Baylo	or		()+	110	iephone N	unibe	-		
						INFORMATION				-				
Name of Facility Where Abatemen	t is Ta	king P	ace (3		AOILITI	INI OKNIATION	Type of Faci	lita /	4)					
Verizon Atlantic City Centra				,			School (K							
Street Address							── ☐ Subchapt	er 8	(Oth	er than K-	12)			
1609 Pacific Avenue							Other (i.e. homes, e	., pri	vate	and comm	nercia	l buil	dings	i,
City (5)							Square Feet		14,	of Floors		DI		_
Atlantic City							88,066		1 2	7			. Age 75	2
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Atlantic					,	() NOTHINE OUT ONE !	Verizon C					1)		
Name of Monitoring Firm Hired by E	Buildin	g Own	er (8)	ASC	M No.	Name of Ahater	nent Contractor		mul	ncauons		1.00		_
USA Environmental Inc			1.7			The same transfer and become any and any	NVIRONMENT		INI					
Street Address				1		Street Address	V V I I CONTRICTO	ΛL,	, IIVC	<i>.</i>				
8346 Enterprise Avenue				1123 BEAVE	RSTREET									
City, State, Zip Code				City, State, Zip (35 M M C C C C C C C C C C C C C C C C C		_					_		
Philadelphia, PA 19153						BRISTOL, P								
roject Manager for Monitoring Firm		77-11-1	Te	lephon	e No.	Telephone No.	10001	-	Lio	ense No.				_
Mark Jenkins					55-5810	215-788-604	n		100	0509				
tart Date (10)	Sche	eduled	Comp	letion E	Date (11)	Name of OSHA I			0	0303				_
12 /13 /17					17		VIRONMENTA	۱۵	INC					
ccupancy Status During Abatement	1					Street Address		ν.,						
Facility Closed/Vacated During Er				ement		1123 BEAVE	DOTDEET							
Abatement Performed Outside of					scribe	City, State, Zip C								
Time of Abatement:AM	F	M/ <u>5:0</u>	0PM-2	2:00AN	Л	BRISTOL, PA								
cope of Work (Check all that apply)				-		BRISTOL, PA	19007	W.C.D						_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emoliti			Mini-Enc Glovebas Glovebas					re			
		1	Loca								At	aten	nent "	T
Location of Asbestos-Containing Material (ACI	M)		Norma ed Sole		Achee	Description o tos Containing Ma						_	1	-
TO BE ABATED	,		intena		(i.e.,	thermal systems i	nsulation,			nount pecify	Remova	Repair	Encapsulate	
IN Facility (13)		Cus	todial (12)	Stan?		surfacing, VAT, other miscellaned	or			or LF)	val	-	Jusc	
()		Yes	No	N/A	1	other miscellanet	ous)						ate	1
Floor Penetrations					VAT / Ma	stic		-	6	SF			П	1
Floor Frame Room Penetrati	ons				VAT / Ma	stic			6	SF		П		1
Floor Office Penetrations					VAT / Ma	stic			6	SF				-
Floor Hallway Penetrations					Mastic				6	SF		П		1
ne of Registered Waste Hauler			N.	JDEP V	Vaste (Cubic Yards of	Name of Regist	eren					Ц	-
ristol Environmental Inc			1	uler ID	No. V	Vaste	ACUA Hane				ental	Pari	k	
State				18706		Disposal Date	City, State					· uii		_
ristol, PA						TBD	Egg Harbor	To	wnc	hin				
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llan DeCaro		timate	or			Dillan	DeCaro	11	M	C Date))	P -	17	
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ASB-41 DD17070

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

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Date of Notification (1)	10	1	17		-			Owner/Operator	(2)	lad test			- Januario - A	
				3		verizori C	,0111	imunications		ASBE	STO	00	NITO	01
Agencies Notified	Type No		on			reet Addres				1	LICE	NSI	VG	OL
☑ EPA ☑ DOLWD						1609 Pacif				Secretary Property and Company	A Service of Linear	MAINTH BORDS	and constrain	STREET, S
Ø DOLWD			t #5-1	2/8/17	, Ci	ty, State, Zip	р С	ode						
□ DCA	☐ Emer							NJ 08401						
(NJAC 5:23-8)	justifi	ication)		Na	me of Conta	act			Telephone N	umber			
	☐ Canc	ellation	n			Alex Baylo	or							
						FACILITY	INF	ORMATION		7/2		-		
Name of Facility Where A				ace (3)					Type of Facility	3,- 7				
Verizon Atlantic City	y Centra	I Offi	ce						School (K-12)	40)			
Street Address									Subchapter 8 Other (i.e., pr	ivate and comn	12) nercial	buila	inas	
1609 Pacific Avenue	1								homes, etc.)				90	
City (5)									Square Feet	# of Floors		Bldg	Age	
Atlantic Clty									88,066	7		+-7	75	
County (6)					C	ounty Code	(7)(5	STATE USE ONLY)	Current Use (Pric	or if being demo	olished	i)		
Atlantic										nmunications				
Name of Monitoring Firm H	lired by B	uilding	Owne	er (8)	ASC	M No.	1	Name of Abatem	ent Contractor (9)					
USA Environmental	Inc								VIRONMENTAL	INC.				
Street Address	346 Enterprise Avenue						15	Street Address		,				
8346 Enterprise Avenue y, State, Zip Code								1123 BEAVE	R STREET					
ty, State, Zip Code							10	City, State, Zip Co						
ity, State, Zip Code Philadelphia, PA 19153								BRISTOL, PA						
Project Manager for Monito				Te	lephon	e No	+	elephone No.		License No.				-
Mark Jenkins				1	- ii	55-5810	1.	215-788-6040		00509				
Start Date (10)		Sche	duled			Date (11)	N	lame of OSHA M		00000				
12/13/	17					17	1		/IRONMENTAL	INC				
Occupancy Status During A		L. its					S	treet Address						
☐ Facility Closed/Vacated I					ment			1123 BEAVER	STREET					
Abatement Performed O						escribe		ity, State, Zip Co	CONTRACTOR OF STREET					
Time of Abatement:							1	BRISTOL, PA						
cope of Work (Check all the	at apply)							5,4,6,62,7,						
7 - 2 - 4 2 14			N/ D					□ Full Conta	inment with Negat	tive Pressure				
] ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf				enovat emoliti										
									npted (*) and Non-	Friable Procedu	ire			
			100	s Locat Norma							Ai	patem	ent 7	Гуре
Location of Asbestos-Containing Mat	erial (ACI	(A)		ed Sole		Achor	ctoo	Description of Containing Mate	riol (A CNA)		R	R	ш	П
TO BE ABATEI		v.,	100000	intena				ermal systems in		Amount (Specify	Remova	Repair	ıcap	Enclosure
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Dillan DeCaro		Es	timat	or				Dellar	De Caro	1800	12-	- 8	-1	7

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

Date of Notification (1)					iono o.oo and	,	Process 13	0 [9-1	
	/ 17	7			ding Owner/Opera		11) 5	5		, W	
	Notification					5					
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⊠ DOH Am	nendment #	4-11/29	117	City, State, Zi				-			
DCA Em	nergency (in tification)	ncluding	-	Name of Cont	ity, NJ 08401		ASBE	STOS	CON	ITRO	DL
□ Car	ncellation		1.	Alex Baylo			Telephone	Numb	ASIM	G	THE REAL PROPERTY.
Name of Facility Where Abateme	nt is Taking	Place	31	FACILITY	INFORMATION	1=					
Verizon Atlantic City Cent			٥)			Type of Fac					
Street Address						School (I	<-12) ter 8 (Other than F	(12)			
1609 Pacific Avenue						○ Other (i.e.)	private and com	merci	al buil	dings	3,
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Atlantic					, Manual Col Civer		(Prior if being dem	olishe	ď)		
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USA Environmental Inc						VVIRONMENT					
Street Address					Street Address		AL, IIIO.				_
8346 Enterprise Avenue					1123 BEAVE	R STREET					
City, State, Zip Code					City, State, Zip C						_
Philadelphia, PA 19153					BRISTOL, PA						
Project Manager for Monitoring Firm	n	T	elepho	ne No.	Telephone No.		License No.				
Mark Jenkins				65-5810	215-788-6040)	00509				
Start Date (10)	Schedule	ed Com	oletion	Date (11)	Name of OSHA N	Monitor			-		_
/					BRISTOL EN	VIRONMENT	AL, INC				
Occupancy Status During Abatemer	nt (Check o	nly one)			Street Address						
Facility Closed/Vacated During E Abatement Performed Outside of	ntire Period	d of Aba	tement		1123 BEAVE	R STREET					
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Location of Asbestos-Containing Material (AC		Norm Jsed So			Description of				patem	1	-
TO BE ABATED	1	Mainten	ance/	Asbest	os Containing Mate thermal systems in	erial (ACM)	Amount	Removal	Repair	Encapsulate	
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Floor Turbine/Store Room		-								Ф	
Floor Turbine/Store Room					stic (Same Area		1085 SF	\boxtimes			
Floor HSB/New Pad Area					r Exhaust Insula	ation	200 SF	Ø			
Floor Temporary Store Room			-	VAT / Mas			1055 SF				
ne of Registered Waste Hauler		14	JDEP V	VAT / Mas	24:30:4		210 SF				
ristol Environmental Inc			auler ID		ubic Yards of	Name of Regist					
State		1.0	18706				man Environm	ental	Park		
ristol, PA				1	sposal Date TBD	City, State Egg Harbor	Townshi-				
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llan DeCaro	Estima	itor			Signature	1 ge Caro	1. Date	1/20	0/	7	

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Mark Jenkins	Jillig Filli			11	lephor		Telephone No.		License No.									
tart Date (10)		Scho	dulad			-365-5810 215-788-6040 In Date (11) Name of OSHA Monitor				. 00509								
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ccupancy Status During A] Facility Closed/Vacated							Street Address											
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(13)				(12)	T	-	other miscellaned			01 01 11	'	=		ulat	1			
	- 10209		Yes	No	N/A				-					(D				
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Floor Frame Room P	enetrati	ons			\boxtimes	VAT / Ma	stic			6 SF					1			
Floor Office Penetrati	ions					VAT / Ma	stic			6 SF		\boxtimes	П	\Box	-			
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(NJAC 5:23-8) jus	stification)	(Inclu	aing	N	ame of Cont			1=								
	ncellation				Alex Baylo			Telephone	Numbe	er						
Name of Facility Where Abateme	ant is Taki	na Di	500 /2	,	FACILITY	INFORMATION										
Verizon Atlantic City Cent			ace (3)			Type of Fac				5/25					
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Name of Monitoring Firm Hired by	Building (Owne	er (8)	TASC	CM No.	Name of Abate			is							
USA Environmental Inc	3		(-)	1	2101 110.											
Street Address				1			NVIRONMEN	TAL, INC.								
8346 Enterprise Avenue						Street Address										
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City, State, Zip Code						City, State, Zip	Code									
Philadelphia, PA 19153						BRISTOL, P	A 19007									
Project Manager for Monitoring Fire	m		Te	lephor	e No.	Telephone No.		License No.		100000		-				
Mark Jenkins			1 2	215-36	35-5810	215-788-604	0	00509								
Start Date (10)	Sched	uled	Comp	etion [Date (11)	Name of OSHA	Monitor									
11/30/17	_ 1.	2	/	1 /	17	BRISTOL FA	VIRONMENT	AL INC								
Occupancy Status During Abateme	nt (Check	only	one)			Street Address		AL, 1110								
☐ Facility Closed/Vacated During I				ment												
Abatement Performed Outside o	f Normal I	Facili	ty Hou	rs - Do	ecribe	1123 BEAVE										
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Time of Abatement: AM-	RETER	E 6	247	- 62	11/17	BRISTOL, PA	19007									
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Location of			Vorma			Description o	f		1000	batem	T	T				
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Agencies Notified Type No ⊠ EPA ⊠ Initial				Street Add	ress			ASBES				OL
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	dment#	3-11/2	77/17	City, State,	Zip Code							
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(NJAC 5:23-8) justific	cation)			Name of Co			Te	lephone	h from-			
Cance	ellation			Alex Ba	ylor		110	repriorie	IVUM	ber		
				FACILIT	Y INFORMATION					1		
Name of Facility Where Abatement i	s Taking	Place	(3)			Type of Fac	ility (A)					
Verizon Atlantic City Central	Office					School (F						
Street Address						── Subchapt	ter 8 (Oth	er than h	<-12)			
1609 Pacific Avenue						Other (i.e homes, e	private	and com	nmer	cial b	uilding	gs,
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Name of Monitoring Firm Hired by Bui	lding Ow	ner (8) AS	CM No.	Name of Abatem	ent Contractor	(9)	ication	5			
USA Environmental Inc						VIRONMENT						
Street Address					Street Address		They sive	•				
8346 Enterprise Avenue					1123 BEAVE	RSTREFT						
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Philadelphia, PA 19153					BRISTOL, PA							
Project Manager for Monitoring Firm		1	Telepho	ne No.	Telephone No. License No.							
Mark Jenkins				65-5810 215-788-6040								
Start Date (10)	chedule	d Com	pletion	Date (11)	Name of OSHA M		00	508				
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ccupancy Status During Abatement (C	heck on	ly one))		Street Address	IRONMENTA	L, INC					
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Street Address							── Subcha	apter 8	(Other than	K-12)		
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Atlantic City							88,066		# of Floors	i	1	ig. Ag
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Street Address							ENVIRONMEN	VIAL,	INC.			
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Project Manager for Monitoring Firm)		T	elenho	one No.	BRISTOL, I						
Mark Jenkins			1			365-5810 215 789 6040						
Start Date (10)	Sche	duled	1 Com		Date (11)		**		00509			
11 /21 /17		01		400	Date (11)	Name of OSHA						
Occupancy Status During Abatement	(Chec	k onl	y one)			Street Address	NVIRONMEN	, II	***			
Facility Closed/Vacated During En	itire Pe	riod	of Aba	tement	t	1123 BEAVE	R STREET					
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Date of Notification (1)		Name	of Building O	10			ne	0 090	Los				
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Name of Facility Where Abatem	nent is Taking Place (2	FACI	LITY INFORMAT	NOI									
Verizon Atlantic City Cen	Itral Office)		Ty	oe of Facility	(4)							
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1609 Pacific Avenue				×	Subchapter	8 (Other th	ıan K-12)	1					
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Name of Monitoring Firm Hired by	v Duilding O			Ve	rizon Con	nmunicat	ione	eu)					
USA Environmental Inc	/ building Owner (8)	ASCM No.	Name of A	batement Co	ntractor (9)		10115						
Street Address			BRISTO	L ENVIRO	NMENTAL	. INC.							
8346 Enterprise Avenue			Street Addr	ess		,	_						
City, State, Zip Code			1123 BE	AVER STR	EET								
Philadelphia, PA 19153			City, State,	Zip Code									
Project Manager for Monitoring Firm			BRISTOL	_, PA 1900	7								
Mark Jenkins	. 1000	phone No.	Telephone N			License N	lo.						
Start Date (10)		5-365-5810		5040	1	00509	10.						
11/21/17	Scheduled Complet	ion Date (11)	Name of OSI	A Monitor									
		_ / _17	BRISTOL	ENVIRON	MENTAL.	NC.							
Occupancy Status During Abatemen	it (Check only one)		Street Addres										
☐ Facility Closed/Vacated During El	ntire Period of Abatem	ent	1123 BEA	VER STRE	ET								
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(13)	N	16	other miscellan	eous)	٥	F or LF)	1 20	Encapsulate Repair	Enclosure				
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Street Address						Street Addre						-
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City, State, Zip Code	18					City, State, 2	Zip Code					
Philadelphia, PA 19153					27-0	BRISTOL	., PA 19007					
Project Manager for Monitoring Fi	rm				one No.	Telephone N	lo.	License N	10.			
Mark Jenkins					365-5810	215-788-6	5040	00509	070.2			
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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) 10 10 / 17 Verizon Communications DEC 26 2017 Agencies Notified Type Notification Street Address Ø EPA ☑ Initial 1609 Pacific Avenue DOLWD ASRESTOS CONT City, State, Zip Code DOH. Amendment #1 - 11/3/17 LICENSING Atlantic City, NJ 08401 DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Alex Baylor FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Verizon Atlantic City Central Office ☐ School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 1609 Pacific Avenue homes, etc.) City (5) Square Feet # of Floors Atlantic City Bldg. Age 88.066 7 County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) 4-75 Atlantic Verizon Communications Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contrador (9) USA Environmental Inc BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 8346 Enterprise Avenue 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Philadelphia, PA 19153 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mark Jenkins 215-365-5810 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __10 / 24 / 17 ON / HO / LD BRISTOL ENVIRONMENTAL, INC Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-___PM/5:00PM-2:00AM City, State, Zip Code BRISTOL, PA 19007 cope of Work (Check all that apply) □ Full Containment with Negative Pressure] >3 sf or >3 If □ Renovation Mini-Enclosure 1 ≥ 160 sf or ≥ 260 If ☐ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Normally Location of Abatement Type Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Removal Enclosure Maintenance/ Encapsulate TO BE ABATED Amount (i.e., thermal systems insulation, IN Facility Custodial Staff? (Specify surfacing, VAT, or (12)SF or LF) (13)other miscellaneous) Yes No N/A Floor Turbine/Store Room П X VAT / Mastic (Same Area) 1085 SF X П П Floor Turbine/Store Room П X Generator Exhaust Insulation 200 SF X П loor HSB/New Pad Area X VAT / Mastic 1055 SF X oor Temporary Store Room \Box X VAT / Mastic 210 SF X of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. tol Environmental Inc Waste ACUA Haneman Environmental Park 18706 tate Disposal Date tol. PA

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Name of Abatement Contractor (9)							1	Verizon Con	or it being dem	olishe	d)		
Street Address 8346 Enterprise Avenue 1123 BEAVER STREET City, State, Zip Code Philadelphia, PA 19153 Oject Manager for Monitoring Firm Mark Jenkins 215-365-5810 Telephone No. 215-788-6040 00509 Telephone No.		Building !	Owner	(8)	SCM No.	Name of A	bateme	nt Contrador (0)	illunications	5			
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Street Address				BRISTO	JL ENV	TRONMENTAL	., INC.		
8346 Enterprise Avenue				Street Add					
City, State, Zip Code						STREET			
Philadelphia, PA 19153	32			City, State,					
Project Manager for Monitoring Firm	17	1		BRISTO		9007			
Mark Jenkins	1	elephon		Telephone I			License	No.	
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Ok#3275

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

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DCA justification Cancellation			Stev	e of Contact e Iacovo	-			Tel	ephone N	umhe	r -		
Name of Facility Where Abatement is Taki	ing Place	(3)	FA	CILITY INFOR	RMATION	17	was of Facility	(4)					
O'Connor Hall Street Address 2 Convent Road City (5)							ype of Facility School (K- Subchapte Other (i.e. etc.)	-12) er 8 (Othe	er than K- & commer	12) cial bu		ıs, hor	nes,
Morristown							quare Feet 1,130	# of	Floors		Bldg.	Age	
County (6) Morristown			Count (STATI	y Code (7) E USE ONLY)		C	urrent Use (Pr	ior if beir	ng demoli	shed)		P7455	
Name of Monitoring Firm Hired by Building Bioterra Solutions	Owner (8	3)	ASC	CM No.	Nam Un	ne of	Abatement Co Safety LLC	ntractor	(9)	-			
Street Address 1130 W Chestnut St					Stree	et Ad	dress le Ave #F2						
City, State, Zip Code Union, NJ 07083					City,	State	e, Zip Code				-		
Project Manager for Monitoring Firm Rick Eustaquio			Teleph	one No.	Tele	phone	ook, NJ 07(e No.		License N	Vo.			
Start Date (10) 12-29-2017	Schedu 01-07-	led Co	mpletion	Date (11)	Nam	e of C	S-0099 OSHA Monitor		01317				
Occupancy Status During Abatement (Chec					- 1		Safety LLC						
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm	Pariod of	A batas	ment		121		e Ave #F2						
Other – Describe: Scope of Work (Check All That Apply)	iai i aciiit	y riour	S				, Zip Code ook, NJ 070	58			7		
													-
≥3 sf or ≥3 If ≥160 sf or ≥260 If	_	Renova Demolii	ition tion		1	×	Full Containme Mini-Enclosure Blovebag Proc	edure					
	Is	Locati	on				Non-Exempted	() and i	иоп-нпар	T Pro		e ement	
Location of	l llee	Vormal	ly by by		Description	n of						ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	I lead Sololy by			Asbestos Containing Material (i.e. thermal systems insula surfacing, VAT, or other miscellaneous)			(Spe	ount ecify r LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A							<u> </u>		ate	Ге
				\$	See Attac	hed							
				-									
Name of Registered Waste Hauler													
United Safety LLC		Ha	JDEP Wauler ID 36820	No. of	ubic Yards Waste		Name of R		d Landfill				
City, State ⊃ine Brook, NJ				1.7	sposal Date		City, State Tullytown	D D A					-
Completed by Vanco Petkov	Title Projec	et Mai	nager		Signature	7	Transform	ı, ı- /\	Date	e -12-2	0.4=		-

Abatement Type	n n c c c c c c c c c c c c c c c c c c	- L - L - L - L - L - L - L - L - L - L	. 0												
Abatem	∝ о д к г														
		13 con 1844 200 18		;	×	>	<	×		×	×		×	×	>
	Amount (Specify SF or LF)			214	2 11	7 LF		130 LF		5 LF	3 LF		30 LF	40 LF	80 I E
Description of Ashestos Containing Materials	(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)			Pipe Insulation		Pipe Insulation		Pipe Insulation		Pipe Insulation	Pipe Insulation	Dina Inaulation	t pe trisdiation	Pipe Insulation	Pipe Insulation
Is Location Normally	olely by nance/	N/A													
ls Location Normally	Used Solely by Maintenance/ Custodial Staff? (12)	Yes No		×		×		×	-	×	×	×	<	×	×
Location of Asbestos-Containing Material (ACM)	TO BE ABATED In Facility (13)		Basement Hallway outside Main Electrical	Room	Basement Hallway by Elevator	December 1	Dasement Laundry Koom Lounge	Basement Hallway outside Land in	castion transway outside Laundry Koom	Basement outside Trunk Room	Bacamant Hall.	Bathroom	Basement Hallway outside Class of 1956		Basement Trash Room

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DEC 26 2017

ASBESTOS CONTROL & LICENSING

	N		CATION	ite of New	ESTOS	ABATE				E C	; E				nt Fc
Date of Notification (1)		· .	Namo of	Building (Dumor/O	norator	(2)		ПП						-
12/18/17			PSEG	Fossil, L	LC, H	udsor	Gene	erating \$	tation	ASBES	TOS	CO	NTB	OL 8	<u></u>
Agencies Notified Type Notifica	ation	1 3	Street Ac	ddress d and Va				L		L	ICE	NSI	1G		
EPA Initial DEP Amend DOL Amend	led ment #			te, Zip Co		6				1					
≥ DOH Emerge			Name of	Contact Clouse					Tele	ephone N	Numb	er			
X DCA Cancel	lation			LITY INFO	DRMATI	ON									
Name of Facility Where Abatement is	Taking Place (3)	TACIL	LITT HAT C	KWAT	OIN	Туре	of Facility ((4)						
Hudson Generating Station								School (K-1	12)						
Street Address Duffield and Van Keuren Aven	iue						X	Subchapter Other (i.e. petc.)				buildi	ngs,	home	s,
City (5) Jersey City							Squar	re Feet 0,000	# of	Floors		70	dg. A	ge	
County (6) Hudson			County C	Code (7) JSE ONLY)	-			nt Use (Pri tric Gene				d)			
Name of Monitoring Firm Hired by Buil	Iding Owner (8)		ASCM	l No.			of Abai	tement Cor ce	ntractor	(9)					
Street Address		a a					Addres								
City, State, Zip Code							State, Zi nam P	p Code ark							
Project Manager for Monitoring Firm			Telephor	ne No.			hone No 410-9			License 00225					
Start Date (10) 1/1/18	Schedule 12/31/1		pletion [Date (11)		Name MEC		IA Monitor							
Occupancy Status During Abatement	(Check Only On	e)				Street	Addres	SS							
Facility Closed/Vacated During E Abatement Performed Outside of Other – Describe:						City, S	5 Linwood Ct City, State, Zip Code Hamilton, NJ 08690								
Scope of Work (Check All That Apply)						пап	шкоп,	NJ 0009	0			-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	× F	tenova emoliti					Mir Glo	I Containm ni-Enclosur ovebag Pro n-Exempte	e cedure					e	
	5.5	Locati											Abate	ement pe	
Location of Asbestos-Containing Material (AC TO BE ABATED In Facility (13)	M) Use	ntenance/ odial Staff? (12) Asbestos Co				Description of potaining Material (ACM) Amount all systems insulation, facing, VAT, or SF or LF) r miscellaneous)					Removal	Repair	Encapsulate	Enclosure	
Dowerbourg & Apiellan, Chrise	Yes 1 Owerhouse & Aniclary Structures					r/Pipe Insul., Transite, Tile 160 sqft / 260 x						~		Х	
Powernouse & Anicilary Struct	X		Boller	/Pipe i	nsui.,	Iransi	te, i lie	100 S	qit / 20	恒	^	X	X	^	
.t															
Name of Registered Waste Hauler Waste Management of New Je	Hauler ID No. of Wa					Yards ste		Name of Tullyto				cove	ry		
City, State Elizabeth, NJ 07114-2436					Dispo TBD	sal Date	е	City, Sta Tullyto		1900	7				
Completed by Erin Gorman	Title Mana	ager -	Env C	omplian		Signatur	re				Date	18/1	7		

no a		NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)							G		V	
Date of Notification (1) December 18, 2017					Name of Build Exelon Ger				DEC	26	2017	
Agencies Notified (x) EPA (x) DEP		Notification (x) Initial N () Amende	Votification		Street Addres P.O. Box 3	88, U.S. F	Route 9	AS		OS CON CENSIN		&
(x) DOL (x) DOH (x) DCA		() Cancelle	ed		Forked Rive	er, New J	ersey 0873	31	ımhor			
					Edwin O'Br			1 101.140	mber	_		
				FACILITY IN	FORMATION					6.		
Name of Facility Where Abate	ement is T	aking Place (3)		Type of Facilit							
Oyster Creek Generatin	ng Statio	n		annego egun ek aneza	() School (K- () Subchapte (x) Other (i.e.	r 8 (other th		dae hom	ios oto			
<u>Street Address</u> 741 U.S. Route 9 South	1				Sq. Feet:			ors: <u>Vari</u>				
City (5)	ounty (6)		County (Code (7)								
Forked River O	cean		(State U		Bldg. Age Current Use (p	orior if being	demolished)					
Name of Monitoring Firm Hire Accredited Environment			#00021				Name of Co Advanced			ontracto	ors	
Street Address 28 North Pennell Road					Street Address 120 North L	- 3	t					
City, State, Zip Code Media, PA 19063					City State, Zip Lancaster,		2					
Project Manager for Monitorin Tony Smith	ig Firm	Telephone 1 610-842-0			Telephone Nu 800-437-04				Number Number Number			
Scheduled Start Date (10) January 1, 2018		Scheduled (Decembe			Name of OSH. Keith Drehe		er Creek Ge	eneratir	ng Stat	ion		
Occupancy Status During Aba) Facility Closed/Vacated Du) Abatement Performed Out	uring Entir	e Period of Al	patement		Street Address P.O. Box 38		Route 9					
Describe					City, State, Zip Forked Rive		ersey 0873	1				
Other – N/A Describe – Notification is fo	or contina	encv. no pla	nned aba	atement			•					
Source of Work (Check all tha		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							- reducing			
) Demolition (x) Renovati) Large Proj. (>160 SF or >2) Full Containment with Neg	260 LF AC gative Pres	ssure ()	Mini-Enclos		60 LF ACM) (ove bag Procedu		°roj. (<25 SF (or <10 LF	ACM)			
ocation of Asbestos- Containing Material (ACM) in Facility (13)	Solely I Staff? (todial	Description of thermal system surfacing, VAT	ns insulation,	Amount (S	Specify SF or	LF)	120	nent Typ		
Site-wide (contingency)	YES	NO	NA NA	misc.) Misc.			<25 SF		Rem.	Rep. E	Encap E	nciose
one was (contingency)	†		Х	IVIISC.			223 31					
	1											
Name of Reg. Waste Hauler (PSC Industrial)		NJDEP Was	te Hauler I SW2497		Cubic Yards of <1	Waste		Name o Con		<u>andfill</u> a Landf	Fill	
<u>City, State</u> 2869 Sandstone Drive, I	Hatfield,	PA 19440			1		Disp. Date 12/31/16		1	ity, State Iorgant	_	PA
Completed by (Print or Type)		Title Sr Enviro	nmontal	Chamiet	Signature	IN AL	Rie	<u>Date</u>	12.	10.1-	7	

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

Telephone 609-984-6620

9/18/00

* COURTESY NOTICE NOTIFICATE SENT TO NJ DOL NOTIFICATE (Pursu

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		everage control	TOO O				
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12/14/17 gencies Notified Type Notification		U	ISEPA I	Region I	l A		2)							
gencies round		-	reet Addr	ess adway 18	8th fl.					ASBEST L	OS C			&
EPA Initial Amended Amendment #		Ci	ty, State,	Zip Code k,NY 10					Industrial					
Emergency (includi justification) DCA Emergency (includi justification) Cancellation	ing	0.000	ame of Co Hunter Y						Tele	ohone Numl	ber			
			FACILIT	Y INFOR	MATION			E - 104 - 741						-
Name of Facility Where Abatement is Taking Plac Kiltone Superfund Site Street Address	e (3)					_	Sc St	Facility (4) chool (K-12) bchapter 8) R (Othe	r than K-12) commercia	ı I buildir	ngs, h	omes	,
722 South 6th Street							et	c.)						
City (5) Vineland							Square 400		1	Floors	50	g. Ag	e 	
County (6)		C (S	County Co STATE US	de (7) E ONLY)		_	Vaca	nt garage	Э	ng demolishe	ed)			
Name of Monitoring Firm Hired by Building Owner	r (8)	1	ASCM N	No.				atement Contractor (9)						
tune of memory						THE REAL PROPERTY.		elopment Group,Inc.						
Street Address						189		end Stre	et					
City, State, Zip Code						City, S New	tate, Zip Bruns	Code wick, NJ	0890	11				
Project Manager for Monitoring Firm		T	Telephone	e No.			none No 565-36			License No 01284	0.			
Start Date (10) Sch	eduled C	Com	pletion D	ate (11)		Name EM8		A Monitor						;=
Occupancy Status During Abatement (Check Onl	lv One)					Street	Addres	S	11					
Facility Closed/Vacated During Entire Perior	d of Aba	tem	ent				Box 87							
Abatement Performed Outside of Normal Facility Other – Describe:	acility Ho	ours			_		State, Zip nerville	, NJ 088	76					
Scope of Work (Check All That Apply)						-				9 500 038 Z	20 0000			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	Ren Dem						Min	i-Enclosure	e cedure	n Negative F			a.	
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	Is Lo											Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custod	enar	ly by nce/	(i.e. thermal systems insulation,					(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							1500	-			-
Garage			X			Siding	3			1500	×			
No. of Deviatored Wests Hauler		I	NJDEP W	/aste	Cubic	: Yards		Name of	Regis	tered Landf	ill			
Name of Registered Waste Hauler Nova Development Group, Inc		H	Hauler ID		of Wa			GROV		c.		10_	- 1	N=
City, State New Brunswick,NJ	y, State					sal Da 2018	te	City, Sta Morris						
Completed by	Title Presid	lent	t		5	Signatu	ire .	Toau.	Mi		0ate 12/14/	/17		

SENT TO NJ DOL NOTICE NOTICE State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

1 10 4	(P				nd 12:120			11-	nec 2	6 2	017	-11	J.
ate of Notification (1) 2/14/17		US	EPA R	egion II	r/Operator	(2)	<u> </u>		0.10			-	
gencies Notified Type Notification			et Addres	ss Iway 18tl	h fl.			F	ASBESTOS LICE	NSING	HOL	. či	
EPA Initial Amended Amendment #		City	, State, Z ew York	ip Code ,NY 100			bone	Teler	hone Numbe	er			-
Emergency (inclu justification) DOH DCA Emergency (inclu justification) Cancellation	ding	Н	me of Cor unter Yo	oung			,	Telep	mone riamo	-	_		
	22 (2)		FACILITY	/ INFORM	ATION	Type of F	acility (4)						
lame of Facility Where Abatement is Taking Pla Kiltone Superfund Site Street Address	ice (5)						ool (K-12) chapter 8 er (i.e. priv	10tha	r than K-12) commercial	building	s, hon	nes,	
720 South 6th Street						Square F)		Floors		Age		1
City (5) Vineland County (6)		Co	ounty Cod	le (7)			Use (Prior t garage	if beir	ng demolishe	d)			
Cumberland Name of Monitoring Firm Hired by Building Owr	ner (8)	1/3	ASCM N		Nam	e of Abater	ment Cont	ractor	(9) p,lnc.				
					Stre	et Address	100						
Street Address					189	9 Townse		et					
City, State, Zip Code				City, Ne	State, Zip w Bruns\	Code wick, NJ	0890)1				_	
Project Manager for Monitoring Firm		Т	elephone	No.	73	phone No. 2 565-36	55		License No 01284).			-2.1
Start Date (10)	Scheduled Completion Date (11						A Monitor						
Occupancy Status During Abatement (Check	Only One))				eet Address D Box 87							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	riod of Ab I Facility H	atem	ent			y, State, Zip omerville		376					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If	Re X De	enova emolit	ition ion			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proce					edure		
	Ι			V							Abate Typ	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mai	ntena	lly ely by ance/ Staff?	Asbesto (i.e. t	thermal sys	otion of ng Material stems insula g, VAT, or cellaneous)	ation,		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
, ,	Yes	No	N/A			I'			800	κ.			
Garage			X		Sic	ding		-					
											-		-
							Name	of Por	gistered Land	fill			
Name of Registered Waste Hauler			NJDEP \	No.	of Waste		GRO						
Nova Development Group, Inc			NJ -807		Disposal Date City, State								
City, State New Brunswick,NJ Jan						18			PA, e	Date			
Completed by Todd Grant	Title President					/	Toan	M	aux	12/14	/17		

Print Form

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) PSEG Fossil, LLC, Linden Generating Station 12/12/2017 ASBESTOS CONTROL & Street Address Type Notification Agencies Notified LICENSING 4001 South Wood Ave Initial EPA City, State, Zip Code Amended × DEP Linden, NJ 07036 Amendment # DOL Emergency (including Telephone Number Name of Contact justification) × DOH Guy Rivera Cancellation DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Linden Generating Station School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, 4001 South Wood Ave etc.) # of Floors Bldg. Age Square Feet City (5) 60 800,000 Linden Current Use (Prior if being demolished) County Code (7) County (6) Electric Generating Station (STATE USE ONLY) Union Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Absolut Ace Street Address Street Address PO Box 295 City, State, Zip Code City, State, Zip Code Florham Park License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 00225 973-410-9217 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) MECS 12/31/2018 1/1/2018 Street Address Occupancy Status During Abatement (Check Only One) 5 Linwood Ct Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Plant manned 24 hours, limited access to abatement areas City, State, Zip Code Hamilton, NJ 08690 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf × Mini-Enclosure Demolition ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Description of Location of Used Solely by Amount Asbestos Containing Material (ACM) Encapsulate Asbestos-Containing Material (ACM) Enclosure Removal Maintenance/ (i.e. thermal systems insulation, (Specify Repair TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or In Facility (12)other miscellaneous) (13)Yes No N/A X 2.835 CF Boiler/Pipe Insul., Transite, Tile Powerhouse & Anicllary Structures X Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler Hauler ID No. of Waste Tullytown Resource Recovery Waste Management of New Jersey 105 17273 Disposal Date City, State City, State Tullytown, PA 19007 TBD Elizabeth, NJ 07114-2436 Date Signature Title Completed by 12/12/2017

EH&S Manager

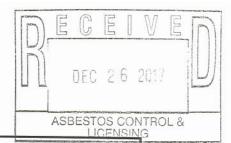
Print Form

Guy Rivera

MUL		ı	NOT		MOIT		BES	Jersey STOS ABAT :60 and 5:1		DE	C	E		V	E
Date of Notification (1)				1	Name	of Building	g Ow	mer/Operator ((2)		DEO	-	-	20 1	
12 /	21 /	17			lives	cinth Hou	7,555	(C)===			NEW CONTRACTOR	- American			
Agencies Notified	Type Notifica	ation	-0	-+		Address				ASI	BESTO				SJC
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☐ DCA (NJAC 5:23-8)	☐ Emergen justification		luding			of Contac				Telephone N	umher				
(140/10 0.20-0)	☐ Cancellat			1		new Test	8			Telephone iv	-				
	N-32			1.			-	RMATION					-		
Name of Facility Where A	hatement is T	aking	Place	(3)	FA	SILIT IN	IFUR	RIVIATION	Type of Facility	(4)					
Commercial	ibatement is 1	akirig	i lace	(5)					School (K-1)						
Street Address			2502-1						Subchapter		(-12)				
500 8th Street									Other (i.e., p		mercial	ouild	ings	ξ,	
City (5)									homes, etc.	# of Floors		Olda	۸۵	_	
Asbury Park									Square reet	# 01 1 10015	1	3ldg	Ayı	C	
County (6)				_	Cour	ty Code (7	VSTA	TE USE ONLY)	Current Use (Pr	rior if being dem	nolished				-
Monmouth					Cour	ity Code (/	ДОТА	ITE OSE ONET)	Current Ose (F)	ioi ii beilig deli	iolisticu,				
Name of Monitoring Firm	Hired by Build	dina O	wner ((8)	ASCM	No	Nar	me of Abatem	ent Contractor (9)						
Bio Terra Solutions							1		NAGEMENT L						
Street Address			21				_	eet Address							_
P.O. Box 1224								7 Outwater	Lane						
City, State, Zip Code								y, State, Zip C				-			
Union, NJ							1 33	Sarfield, NJ							
Project Manager for Moni	toring Firm			Tele	phone	No.		ephone No.		License No					\dashv
Rick Eustaquio	8070			97	3-494	-3762	1000	73-928-4888	3	1188					
Start Date (10)	S	Schedu	ıled C	omple	tion Da	te (11)	Nar	me of OSHA N	Monitor						
01 /02 /	20000				_ /		A	LL PRO MA	NAGEMENT L	LC					
Occupancy Status During	Abatement (0	Check	only o	ne)			Stre	eet Address							-
□ Facility Closed/Vacate					nent		2	7 Outwater	Lane						
☐ Abatement Performed	Outside of No	ormal F	acility	/ Hour	s - Des	cribe		, State, Zip Co					-	-	-
Time of Abatement:	AM	PM	/	_PM-		AM		arfield, NJ							
Scope of Work (Check all	that apply)														
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf				novati molitic					tainment with Ne closure g Procedure empted (*) and No						
				Locat							I	bate	mer	nt Ty	/pe
Location Asbestos-Containing N		,		Vorma d Sole		0 - 1		Description of				1	0	Ш	Ш
TO BE ABA		,	Ma	intena	nce/			Containing Ma ermal systems		Amount (Specify	Kemova	, cooun	3.	Encapsulate	Enclosure
IN Facilit	у		Cust	odial ((12)	Staff?			surfacing, VAT		SF or LF)	a Sa		1	sula	sure
(13)		T	Yes	No	N/A		oti	her miscellane	ous)					ate	
Basement						HVAC	Duct	s		100 SF	D				
Crawlspace					\boxtimes	Soil De	bris			300 SF	D	1 1	7	П	П
1st Floor						HVAC	Duct	s behind wa	ills	22 SF	E				
2 nd Floor						HVAC	Duct	s & trunks b	ehind walls	140 SF	D	1 1	7	П	П
Name of Registered Wast	e Hauler				JDEP \	paratonia terenti		oic Yards of	Name of Regis						_
All Pro Management LLO				Н	auler II	No.	Wa	ste	IESI Bethlehe	m Landfill / Mi			pris	es /	
City, State				100	134000 /	SW-24310		s Needed posal Date	City, State	orth Landfill /	ullytov	/n			-
Garfield, NJ / Shirley, N	Y							BD		PA / Morrisville	DA /14	aur	ach	Here	Oh
Completed By (Print or Ty		Title						Signature	Detiliellelli, F	A / WOTTISVIIIe	Date	ayıı	เรม	urg,	ОП
Allen Monchik	P-0/	300000000	niert	Mana	ner				7.1 1.1	,					
THOU MOUNT		101	oject	iniciii	age!			Allen	Monchik	,	12/2	1/17			

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:120-7) CONTINUATION SHEET



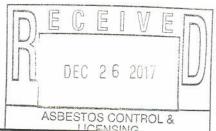
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	_			500 8th Street		Abateme	nt Type	AND THE PROPERTY OF	Mark of the second
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	Mair odi	ial Staf	Used by ce/Cust	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a	R e p a i r	Encapsu I	E n c l o s u r
	Yes	No	N/A						
Waiting Room			Х	VAT	400 SF	X		-	
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Title:	Project Manager	Signature:	Date:
			Date.
		Allen Monchie	12/21/17
	Title:	Title: Project Manager	Title: Project Manager Signature: Allen Monchik

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	DEC	26	2017		
	ASBEST	OS CC CENSI	NTRO	L &	

Date of Notification (1)				Name	of Buildin	g Owner/Operator (2)		11	DEC	00	200	17	
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				LS	posito Ct	onstruction		_	NORTH AND A WORLD	and the second		_		
	Notification			Stree	t Address				ASE	ESTO	SC	ONT	ROL &	
A Committee of the Comm	tiai nended					reet, Suite 385		-		LIC	ENS	ING	A PROPERTY AND A PROP	
	nended nendment #	£		City,	State, Zip (Code								
□ DCA □ En	nergency (in		g g	Ma	tawan, N	J 07747								
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	stification)		T.00	Name	of Contac	t		Tele	phone N	umber				
L Ca	incellation			Jer	nnifer Es	posito								
				FA	CILITY IN	FORMATION		-						
Name of Facility Where Abatem	ent is Takin	g Place	e (3)				Type of Facility	(4)						
Commercial							School (K-1	2)						
Street Address							☐ Subchapter ☑ Other (i.e., p	8 (Othe	er than K	-12)	huile	inaa		
500 8th Street							homes, etc.	.)	and Comi	Herciai	Dulic	ings,		
City (5)							Square Feet	# of	f Floors		Bldg	Age		
Asbury Park														
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (P	rior if be	eing dem	olished)			
Monmouth						_	300				5			
Name of Monitoring Firm Hired to	y Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)						
Bio Terra Solutions						ALL PRO MA	NAGEMENT L	LC						
Street Address														
	P.O. Box 1224						27 Outwater Lane							
City, State, Zip Code				City, State, Zip Code										
11 - 20 - 20 - 20 - 20 - 20 - 20 - 20 -	Union, NJ						07026							
Project Manager for Monitoring F	irm		1000000	phone		Telephone No.		Lice	ense No.					
Rick Eustaquio					-3762	973-928-4888		1	188					
Start Date (10)					te (11)	Name of OSHA M	onitor							
01/02/18_	V			_ / -	18	ALL PRO MA	NAGEMENT L	LC						
Occupancy Status During Abater						Street Address								
☐ Facility Closed/Vacated Durin	g Entire Pe	riod of	Abater	nent		27 Outwater I	_ane							
Abatement Performed Outsid Time of Abatement:A	e of Normal	Facilit	y Hour	s - Des	cribe	City, State, Zip Co	de							
		VI/			Alvi	Garfield, NJ	07026							
Scope of Work (Check all that ap	ply)						**************************************	200.00.00000000000000000000000000000000						
≥3 sf or ≥3 lf		Re	novati	on		☐ Full Cont Mini-Encl	ainment with Ne	gative P	ressure					
≥160 sf or ≥260 lf		⊠ De	molitio	n		☐ Glovebag	Procedure							
		l lo	Locat	0.00			mpted (*) and No	n-Friab	le Proce	dure				
Location of		1	Vormal	lv		Description of				A	bate	ment	Туре	
Asbestos-Containing Material	(ACM)	Use	d Sole	ly by	Asbes	stos Containing Mat	erial (ACM)	A	mount	7	7 2		四	
TO BE ABATED IN Facility			intena todial S		(i.e.	., thermal systems in	nsulation,	(5	Specify	Kemova	Topall	Cap	Enclosure	
(13)		-	(12)	_		surfacing, VAT, other miscellaned		SF	or LF)	l a	-	Encapsulate	ure	
A 07		Yes	No	N/A								6		
Basement				\boxtimes	HVAC D	oucts		1	00 SF		1 [] [
Crawlspace				\boxtimes	Soil Del	oris		3(00 SF	×	3 6			
1st Floor				\boxtimes	HVAC D	ucts behind wal	ls	2	22 SF					
2 nd Floor				\boxtimes	HVAC D	ucts & trunks be	ehind walls	14	40 SF	×	1	1		
Name of Registered Waste Haule	er		1 0 000	JDEP V	2000000	Cubic Yards of	Name of Regis	stered L	andfill					
All Pro Management LLC / ATC				auler IE 34860 /	No. SW-24310	Waste As Needed	IESI Bethlehe G.R.O.W.S. N	m Land orth La	lfill / Min ndfill / T	ierva E	nter	orises	1	
City, State						Disposal Date	City, State	- rest leads		any tov				
Garfield, NJ / Shirley, NY						TBD	Bethlehem, P	A / Mor	risville.	PA/W	avn	sbur	а, ОН	
Completed By (Print or Type)	Title)				Signature				Date			5,	
Allen Monchik Project Manager						Allen Monchik 12/20/17								
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:1207) CONTINUATION SHEET



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	\vdash			500 8th Street		Abatem	ent Type	WHEN THE PARTY	D THE STATE OF THE
Faculty (13) Solely by Maintenance/Cust odial Staff (12)		Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SE	R e m o v a l	R e p a i	E n c a p s u l	E n c I o s u r		
	Yes	No	N/A				1	1	е
Waiting Room			Х	VAT	400 SF	Х	-	-	+
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Completed by: (Print or type)	[~ ^ ^	
Allen Monchik	Title:	Project Manager	\$ignature:	Date:/ 12/20/17

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) 12-20-2017 US Army Engineer District, Philadelphia Contracting Division Agencies Notified Type Notification Street Address ASBESTOS CONTROL & Wanamaker Building, 100 Penn Square East \boxtimes **EPA** LICENSING DEP Initial (Courtesy City, State & Zip Code Notification) DOL Amended Philadelphia, PA 19107 DOH Emergency Name of Contact Telephone Number Cancellation DCA Rich Sosdorf **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Building 342 Navair Cryogenics Lab Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) Joint Base-McGuire-Dix # of Floors Square Feet Bldg. Age City (5) County (6) County Code (7) 12,000 56 Current Use (Prior if being demolished) Lakehurst, NJ Burlington Cyrogenics Lab Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. Resource Management Group, LLC Health & Safety Services, LLC 117 Street Address Street Address 2115 Hamilton Avenue, Suite 202 PO Box 365 City, State & Zip Code City, State & Zip Code Trenton, NJ 08619 Berlin, NJ 08009 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number 609-977-6159 856-839-2432 01185 Mr. Jim Proctor Name of OSHA Monitor Scheduled Start Date (10) Scheduled Completion Date (11) 12-21-2017 1-08-2018 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 City, State & Zip Code X Abatement Performed during Normal Hours Union, NJ 07083 Describe: 8:00AM - 4:30PM Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure Renovation Mini-Enclosure ≥3 sf or ≥3 If Glove Bag Procedures ≥160 sf ≥260 lf Demolition Non-Exempted and Non-Friable Procedure Abatement Type Amount Is Location Description of Location of Asbestos-Containing (Specify Normally Used Asbestos-Containing SF or LF) Material (ACM) Solely by Material (ACM) Enclosoure Remova Repair (i.e., thermal systems Maintenance or TO BE ABATED Custodial Staff? insulation, surfacing, VAT in Facility (12)or other miscellaneous) (13)Yes No N/A □ Roof membrane 2.650 SF Roof "A" Flashing material/tar 350 SF Roof "A" X Roof "A" Flashing sheeting 350 SF Flashing material/tar X 230 SF Roof "D" 3,000 SF Vinyl Floor Tile Cryogenics Lab Interior Door Frame Caulk 6 SF Cryogenics Lab Interior Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. of Waste Grows Landfill TRD Resource Management Group, LLC 0035218 Disposal Date City, State City, State Morrisville, PA TRD Hamilton, NJ 08619 Date 12-20-2017 Completed By (Print or Type) Brian Haney Title: President Signature

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Date of Notification	(1) 12-20-2017	Name US Ar	of Build mv End	ling Ow aineer	ner / Operator(District, Philad	elphia Contrac	ting Division	BARTO COL MINE SONO	CONTRACTOR AND AND AND AND AND AND AND AND AND AND		_
	Type Notification	Street	Addre	SS			MODESTUS	CONTE NSING	(OL &	×	
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□ DEP	☐ Initial (Courtesy Notification)	City, S	State &	Zip Co	ode						
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□ DOH	Emergency		of Co						д КП	111111	-1 1
DCA	Cancellation	Rich S	Sosdor	f			1				
		FAG	CILITY	INFO	RMATION						
Name of Facility W	here Abatement is Taking Pla	ace (3)			Type of Facility School (K-						
Building 342 Nav	rair Cryogenics Lab					r 8 (Other than	K-12)				
Street Address	. 5:				Other (i.e.	private & comm	ercial buildings	s, home	s, etc	:.)	
Joint Base-McGu	Ire-DIX				Square Feet	# of Floors	Blo	dg. Age			
41. (5)	County (6)	County (Code (7)	12,000	1	56				
City (5)	1	County) Duuc (1	,	Current Use (P	rior if being dem	nolished)				
Lakehurst, NJ	Burlington				Cyrogenics La		-				
CAR 16 - 16 - 17	- Firm Hirad by Building Own	or (8)	ASCI	И No.	Name of Abate	ment Contracto	r (9)				
Health & Safety S	g Firm Hired by Building Own	161 (0)	117	,,,,,,,	Resource Ma	nagement Gro	up, LLC				
Street Address	Services, LLO				Street Address						
PO Box 365						Avenue, Suite 2	202				-
City, State & Zip C	ode				City, State & Zi	ip Code					
Berlin, NJ 08009					Trenton, NJ C		License No	ımher			\neg
Project Manager fo	or Monitoring Firm	Telephone		er	Telephone Nur 609-977-6159		Licerise 14	0118	5		
Mr. Jim Proctor		856-839-			Name of OSH						
Scheduled Start D		1-08-2018	ate (11)		J&S Environr	nental Laborat	ories Inc				
12-21-20	During Abatement (Check o				Street Address						
Facility Clo	sed/Vacated During Entire F	eriod of Ab	atemer	nt	2333 Route 2	22 West				_	
Abatemen	t Performed during Normal H	lours			City, State & Z						
Describe:	8:00AM - 4:30PM				Union, NJ 07	083					
Facility Oc	ccupied During Abatement										-
	heck all that apply)				0	□ Full Cont	ainment with N	egative	Pres	sure	
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≥3 sf or ≥3		⊠ Re	enovation emolition) TI			g Procedures				
≥160 sf ≥2	260 If	П ре	HIOHUOI	1		☐ Non-Exer	npted and Nor	-Friable	Prod	cedu	re
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	in Facility	Custodia (12		11	or other miscella	aneous)		\\\ \alpha	=	Encapsulate	Enclosoure
	(13)	Yes No			0. 00.					CD	
Exterior Façade				1 st & 2	nd Layer of expans	ion Joint Caulk	5 SF				LI-
	r-Inside exterior fire door	一一一		Insula	ation Material		190 SF		Ш	Ц	닏
Building Exterior	1-IIIside exterior fire door	+ 11 1								Ш	14
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		+片 누	ᆉ片								
(5	- d Mosta Haular		V.IDEP	Waste	Cubic Yards	Name of Regis	stered Landfill				
	red Waste Hauler	1	Hauler I	D No.	of Waste	Grows Landfill					
Resource Manager	ment Group, LLC	10	0035218			City, State					
City, State Hamilton, NJ 08619	9				Disposal Date TBD	Morrisville, PA				0.5	
	rint or Type) Brian Haney		Title: Pr	esident	Signature)			Date	12-2	0-20)17
Completed by (F	or 1,900, Disarrisancy						_				

no ac	٨		ICATION	ate of Ne I OF ASB to NJAC	ESTOS	ABATE		т			E G			₩ [
Date of Notification (1) 12-15-17				f Building Holding			(2)				-DEC	-2	6 20)17-
Agencies Notified Type Notification			Street A	ddress lhemus	Lane					AS	SBEST	OS (CONT	ROL
DEP X Amended Amendment				ate, Zip Co ewater, N					las				onva	
Emergency (i justification) DCA Emergency (i justification) Cancellation	ncluding			f Contact	ey				I Ta	lenhone N	drimher			14
			FACI	LITY INF	ORMATI	ON								-16
Name of Facility Where Abatement is Taking American Cyanamid GWTF Street Address	Place (3))						School (K-1 Subchapter	2) 8 (Oth			ildina	, hom	
20 Polhemus Lane							×	Other (i.e. petc.)			i Ciai Du	ilairig:	s, nom	ies,
City (5) Bridgewater							Squ N/A	uare Feet A	# o	f Floors A		Bldg. N/A	Age	
County (6) Somerset			County (Code (7) USE ONLY)		Cur	rrent Use (Pri	or if be	ing demo	lished)			
Name of Monitoring Firm Hired by Building C N/A	wner (8)		ASCN N/A	1 No.				batement Cor vironmenta			nc.			
Street Address N/A						Street 17 O		ress lock Road						
City, State, Zip Code N/A								Zip Code k, NY 1198	0					
Project Manager for Monitoring Firm N/A	-		Telephor	ne No.		Teleph 631-9		No. -8111		License 01136				
	Schedule 09-17-1		mpletion (Date (11)				SHA Monitor vironmenta	al Ser	vices, Ir	nc.			
Occupancy Status During Abatement (Check	Only One	e)				Street				·				
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of A al Facility	baten Hours	nent 3			City, S	tate,	Zip Code						
						Yaph	nank	k, NY 1198	0					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	present .	enova emolit				×	N G	full Containme Mini-Enclosure Blovebag Prod Ion-Exempted	e cedure				ire	
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Maii Custo	d Sole ntena odial S (12)	nce/ Staff?	Asbes (i.e.	tos Cont thermal surfac	scription aining N systems cing, VA niscellan	lateri s insu T, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
Gwtf Bldg / North Containment Tank	Yes	No	N/A X		Trar	nsite pi	ipe		30	00 LF	X		CD	
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Name of Registered Waste Hauler		I N	JDEP W	aste	Cubic '	Yarde		Name of	Registr	red Land	fill			
WASTE MANAGEMENT		Н	lauler ID 7273		of Was	and the second		FAIRLE						
City, State ELIZABETH, NJ	7				Dispos TBD	al Date		City, State Morrisv		A 1906	57			
Completed by Amanda Vallone	Title Admir	1 Ор:	s Mana	ger	S	ignature		1. Vi	1/1	/	Date 12-15-	17		

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Date of Notification (1) 12/21/2017				lame of I	Building Ow Misar	/ner/Opera	ator (2)			DEC 2	2 6	2017		IU,
	Type Notification		5	Street Ad	dress					<u>(m) (m)</u>					
□ EPA [7 Initial PRO	CEPURE									ASBESTOS	100	VTR() <u>8</u>	
DEP	× Amended	Chang		8.570	e, Zip Code							NSIN		, L. C.	
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DOH DCA DCA	justification)	3		Name of Steve I						I Tele	nnone Kilimi	ner .			
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Name of Facility Where At	patement is Taking	Place (3))	FACIL	III INFOR	NOTATION	1	Туре	of Facility (4	1)					
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Street Address									Subchapter Other (i.e. p	8 (Otherivate &	er than K-12)	build	nas l	nome	s.
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City (5)								Squa	are Feet	# of	Floors	Ble	dg. Ag	je	
Paterson					1 (7)			0	ent Use (Pric	n if hair	a domolish	١,٩/			
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Name of Monitoring Firm I	Hired by Building (Owner (8)		ASCM	No.	Na	ame o	of Ab	atement Con	tractor	(9)				
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Project Manager for Monit	oring Firm			Telephor	ie ivo.		The same		-8711		01332				
Start Date (10)		Schedule	ed Com	pletion [Date (11)				SHA Monitor						
01/03/2018		01/05/				P	Rem	iova	Safety LL	.C					
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Asbestos-Containing TO BE ABA		Ma	intena	nce/	Asbesto	s Containi hermal sys	ing N	/later s insi	ial (ACM) ulation.		mount Specify	R	71	Enc	En
In Facilit		Cus	todial S (12)	Staff?	•	surfacing	g, VA	T, or		ŠI	F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)						other misc	cellar	neous	5)			val	=	ılate	ure
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Name of Registered Was	te Hauler			NJDEP W	1.0000000	Cubic Yar			Name of	Regist	ered Landfill				
Removal Safety, LL0	0		1 8	Hauler ID 003700	STATE OF THE STATE	of waste			GROV	VS No	orth				
City, State						Disposal	Date	9	City, Sta						-111
Paterson, NJ		T				TBD	. ,	7.	Morris	ville, f					
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Lasko Veskov		Pres	sident			$-\infty$	WIL	pi)	eagu			<u> </u>	201		

Notification of Asbestos Abatement ant to NJAC 8:60-7 and 12:120-7) 2017-186-C B & G proi. #: Check # 8739 EMERGENCY*** Date of Notification (1) Name of Building Owner/Operator (2) 1 12 1/12 12 1/11 17 Somerset Hills Board of Education Type Notification Agencies Notified Street Address DFC 26 2017 EPA 25 Olcott Avenue Initial ☐ DEP City, State, Zip Code ASBESTOS CONTROL & LICENSING Amendment DOL Bernerdasville, NJ 07924 Telephone Number Name of Contact X DOH Cancellation ☐ DCA Dan McDougal **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Administration Building (NON Sub-8) Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. 25 Olcot Avenue Bldg. Age Square Feet # of Floors County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) Somerset Bernardsville, NJ 07924 Adminstration Building Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. EnviroVision B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 20-21 Wagaraw Road, Building 35E City, State, Zip Code City, State, Zip Code Fair Lawn, NJ 07410 Lincoln Park, NJ 07035 License Number Telephone Number Phone Number Project Manager for Monitoring Firm (973)696-6869 00378 973-636-9145 Guillermo Morales Name of OSHA Monitor Sched, Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 12/23/2017 12/29/2017 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) 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: Scope of Work (check all that apply) Full Containment w/negative pressure Glovebag procedure Demolition **X** Renovation ■ Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf x >3 sf or >3 lf E Is location normally used solely E Location of e by maintenance/custodial Amount asbestos-containing Description of asbestos-containing m p staff(12) (Specify SF or material to be material (ACM) 0 a a abated in facility (13) V Yes N/A No p e Sprinkler rm., Storage rm. plaster debris on floor-decontamina 90 saft 9-12 ends X damaged elbow ends right/left side stairwell Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# B & G Restoration, Inc. 19563 Tullytown Resource & Recovery Center Disposal Date City, State City, State Tullytown, PA Lincoln Park, NJ 12/26-29/2017 Signature Date Completed by (Print or Type) Title

Ciordana Luna

Gordana Luna

Secretary/Treasurer

12/22/2017

State of NJ

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8 & G proj. #: 201	7-196-C	10	No	dification of A	e of NI spesios Abatament 8:507 and 12:120-7)	U U DEC 2 6 2017
and substitute to the	-100-0		(Pura	HADING NYAC	\$:50-7 and 12:120-7)	The state of the s
Date of Notification (1)				T. FME	GENCA.	Chels#8730S CONTROL
11 12 1/12 12 1/11	7	Name	of Suliding (Ownst/Operator ((2)	
Agencies Notified Type N	otrication	So	merset Hill	a Board of Ed	lucation	
LI EPA	nitial		Address			
	CHD61		Oloott Ave			To recommend the second
☑ DOL ☐ A	mandment	Be	inte, Zip Coo	ia e, NJ 07924		
⊠ DOH _		Name	of Contact	6, 140 01824		1.1.70
□ DCA □ C	ancallation	11	in McDoug			Telephone Number
		1 20	-			
Name of feelilly where abates	MANY It soline	nines (n	. F	ACILITY INFOR	MATION	- Constitution
Administration Building	- (MAN) A	hiera (s	•}			Type of Fsolidy (4)
Steel Address	A TUON 20	0-5)				School (K - 12)
25 Olcot Avenue						Subchapter 8 (Other than K-12)
City (5)						Other (Private/Commercial Bidgs./Homes, etc.
		ounty (6)			County Code (7)	Square Feet # of Floors Blog. Age
Bemardsville, NJ 079	24 8	Bomers	Bi		(State use only)	Current Use (Prior if being demplished)
Name of Mondering Firm Hare EnviroVision	d by Bidg. Ow	(\$) renv		ASCM No.		
Street Address				ACCIM 160	Name of Assignment	Contractor (9)
20-21 Wagaraw Road	D. Hatta	A = =			B&G Restoral	ilon, Inc.
Uny, Sizes, Zio Cada	, building :	35E			105 Ryerson F	Road
Fair Lawn, NJ 07410					City, Siste, Zp Code	
Froject Manager for Monitoring	Firm		Phone Num	bar	Lincoln Park,	NJ 07035
Guillarmo Morales			973-638-9		(973)596-686	9 Program a Mrsupet
Scheduled Start Date (10)			Hatton Date (11)	Name of OSHA Mon	VA318
12/23/2017	12	/29/201	17		E & G Restorat	ion, Inc.
Occupancy States During Abate	ment (Check	only one)	and the same of th	Street Address 105 Ryerson Re	and .
Facility classification of the Abstraction performed out Describe:	ing entre pai	rice of ab I facility i	Alternani. Youre.		City, State, Zip Code	Dag
Other Describe:	-				1:	
Scope of Work (check all that a	pply)				LincolnPark, N.	07035
☐ Gernolition	Z Renovati	on			T Sul Commi	114
国 >3 m ot >3 # [] ≥180 af of				Full Containment wineg	- A Land hiteagrand
Location of asbestos-containing	Is locatio	ברת מה תב האפסיה בת	ly used solel	/	ST WITH STREET	Non-frieble procedure
material to be	Staff(12)	-nangers		Description	of asbestos-containing	Amount 6 8 E E
ebated in lacking (13)	Yes	No	N/A	Material (A)	DM)	(Specify SF or m p p n
prinkler rm., Storage rm.			X	Diagno Jak	5 A	1 -7 10 17 19 17
aht/left side stairwell			×	damaged elb	is on floor-decontamin	
A Company of the second		-			- Contract	9-12 ends
_						
G Restoration, Inc.	INJOE	PHaule	II.	Die Yarda of War		
V. State	1	9563		1		S to Colify
incoln Park, NJ			Disposal Da	ila 20 mai :-		esource & Recovery Center
impleted by (Print or Type) fordana Luna	Title			29/2017 Signature	Tullytown, P	4
- Tarie Luna	Secretar	y/Treas	urer	W. Mrdt@	Gradena Lana	Date
						12/22/2017
						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1



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

									Check	¢ # 8738				_
Date of Notification	1 (1)	Na	ame of I	Building Ow	ner/Operator	(2)			boundary.		e i	ח ת		
1 12 1/12 11	1/117			e Hardma		0.3140				E G	EU	\mathbb{V}		_In
Agencies Notified	Type Notificat	ion Str	reet Add	dress					11m					
☐ EPA	X Initial								i f	DEC	26	201	7	الل
☐ DEP			ty, State	, Zip Code					-					1
X DOL	Amenda	ment	Oakla	nd, NJ 07	436				- A	SRESTO	15.00). (T) (C) /	Q 1 0	
✗ DOH		1 1	me of C	Contact	W = 100000 2 Am 10 Am			***		ne Numb			<i>>=</i> 0.	
☐ DCA	Cancella	ation	Laura	O'Conne	ell								WHAT I	
				FAC	CILITY INFO	RMATIC	N					=		
Name of facility wh	nere abatement i	s taking plac	ce (3)					П	Type of Facility	(4)				
100-00 (100-00) (100-00 (100-00 (100-00) (100-00 (100-00) (100-00 (100-00) (100-00 (100-00) (100-00) (100-00 (100-00) (100-00) (100-00) (100-000 (100-00) (1			(-/							ool (K - 12)			
George Hardr	пап							_		hapter 8 (-12)	
Street Address										(Private/0s./Homes,		ercia!		
								╌╽┟	Square Feet	# of Floo	ors	Bl	dg. Ag	ge
City (5)		Count	ty (6)				ounty Code (7)							
Oakland, NJ	07436	Berg	gen			(S	tate use only)		Current Use (residential	Prior if bei	ng den	nolishe	ed)	
Name of Monitorin	g Firm Hired by	Bldg. Owner	r (8)		ASCM No		Name of Abatem	ent Co						
		ū	, ,		n/a		B & G Resto							
Street Address			-				Street Address		11, 1110.					
							105 Ryerso	n Ro	ad		170			
City, State, Zip Cod	е						City, State, Zip Co							
							Lincoln Pa	- 55	J 07035	Trans	N			
Project Manager for	r Monitoring Firm	1		Phone Num	ber		Telephone Numb (973)696-6			Licens 0	e Num 0378	oer		
	. ((0)	10-b-d	0	tion Date (17		Name of OSHA		r					
Scheduled Start Da	ite (10)			etion Date (1	11)		B & G Resto	oratio	n, Inc.					
01/03/2018			4/2018	3			Street Address	_						
Occupancy Status I				tomont			105 Ryerso		ad —————					
Facility closed Abatement pe	a/vacated during erformed outside						City, State, Zip C	ode						
Describe: Other-Descri	ha:						LincolnPark	, NJ	07035					
Scope of Work (ch		v)												
☐ Demolition	X	Renovation	1				Full Containment w	//nega	tive pressure	✗ Glove	ebag pi	rocedi	ure	
× >3 sf or >3 lf		>160 sf or >	260 If			X	Mini-enclosure				friable			
Location of				ly used sole	ly						R	R	E	T_
asbestos-cor		by mainter staff(12)	nance/c	ustodial	Descri	iption of	asbestos-containin	g	Amount	05	e m	e p	n	n E
material to be abated in fac		Yes	No	N/A	- materi	ial (ACM)		(Specify LF)	SF or	o v	a	а	C
		103	140	V2.00.00							е	ļ.	p	1_
gas meter rm a	THE RESIDENCE PROPERTY OF THE PERSON NAMED IN COLUMN			X	pipe ins	sulation	1		10 lf		X	H	블	+
outside gas me	ter room			X	pipe				15 lf 6 lf		╁	H	X	H
boiler room hallway				X	pipe pipe				4 lf		묶	H	X	H
				-	7 7 7 7						뉴	H	H	古
Registered Waste F			P Haule	er ID#	Cubic Yards	of Wast								
B & G Restora	tion, Inc.	-1	9563	IDiana.	1 Data		THE RESERVE THE PARTY OF THE PA	wn R	esource & F	Recovery	/ Cen	ter		
City, State Lincoln Park, N	٧J			Disposal 01/	05/2018		City, State Tullytov	vn, P	А				91	
Completed by (Prin		Title			Signature)				Date			- 30	
Gordana Luna		Secretar	y/Trea	surer	1		Gordana Lun	a		12/2	1/20	17		

D&S Proj. #: 17-346		F			esto:	s Abatement and 12:120)		G E E C 2 6	<u> </u>			
Date of Notification (1)	П	Name of Bu	ilding Own	er/Operator (2)				2/02			Laman	1
1 2 /1 9 /1 7		MADISO	ON & CAI	LIFORNIA, L	LC		ASBE	STOS C	ONTI	ROL	3	\dashv
Agencies Notified Type Notificat	on §	Street Addre					7,032	LICENS	SING	-	Design and the second	
		9 CALIF	ORNIA A	VENUE								
Amendment #:		City, State,										
DOL Emergency		Paterson	, NJ 075	03								
DOH (including justification)	I	lame of Cor					Telephone	e Number				
DCA Cancellation		Dusko J	oldzic									
Caricenation				LITY INFORMA	TION	ř.	_			_		
N	. Andrian ad	(2)	FACI	LITTINFORWA	ATION		Type of Facility (4	()				
Name of facility where abatement is	s taking pl	ace (3)						+) (K - 12)	i.			
MADISON & CALIFORNIA	LLC						☐ Subcha	pter 8 (C	ther th	nan K	-12)	
Street Address							Other (I	Private/C	omme			
9 CALIFORNIA AVENUE								Homes, e		RI	dg. A	ne .
City (5)	Cou	nty (6)			Cou	nty Code (7)	Square reet	# 01 T 1001	3	D.	ag. / (90
o.i, (o)		3 (-)				te use only)	Current Use (Pr	ior if bein	g dem	olishe	ed)	
Paterson		SSAIC				1.502					>2.50 r .	- VA
Name of Monitoring Firm Hired by B	Bldg. Own	er (8)		ASCM No.		Name of Abatement	Contractor (9)					
						D & S RESTOR	ATION, INC.					
Street Address						Street Address						
01. 01.1. 71. 0.1.					_	20 California A			-	Salita		-
City, State, Zip Code						City, State, Zip Code						
Project Manager for Monitoring Firm		I Ph	none Numbe	ar	-	Paterson, NJ 07 Telephone Number	7503	License	Numb	er		
r roject manager for morntoring r inn		1,,	iono ivamb	51		973-345-8020			1169			
Start Date (10)	IScher	Completic	on Date (11	1	_	Name of OSHA Mon	itor					
60 at at		100	on Date (11	1		D & S Restorat	ion, Inc.	0.00000				
12/20/17 Occupancy Status During Abatemen	01/12				_	Street Address						
Facility closed/vacated during		Company of the Company	ment			20 California A						
Abatement performed outside						City, State, Zip Code						
Describe: NORMAL H	OURS				-	Paterson, NJ 07	7503					
Scope of Work (check all that apply							Full Containment wa	/negative	press	ure		
$\square > \underline{3} \text{ sf or } > \underline{3} \text{ If}$	/ Renovation	n					Mini-enclosure		p.000			
≥160 sf or ≥260 lf	Demolitio	1				\boxtimes	Glovebag procedure		e.: . l. l .			
			used solely			Ш	Non-Exempted (*)	and Non-	R	R	E	
Location of asbestos-containing	by mainte	enance/cus			n of a	sbestos-containing	Amount		e m	e	n	E n
material (acm) to be abated in facility (13)	staff(12)	1	T	material (A		J	(Specify SI	For	0	p a	c a	C
abated in facility (15)	Yes	No	N/A						v e	i r	р	-
boiler room		LX		PIPE INSUI	LATI	ON	10 l ft		\boxtimes			
so. office closet		X		vat			35 sq ft					
ex. boiler rm./chimney		$\square X$		transite/roof			30/30 sq ft		\boxtimes			
high roof flashing/lower flat roof		LX.		black flashin	ig/bla	ck roof material	60/240 sq ft		\boxtimes			닏
middle roof	1,	LX		black/gray re		Di	1,800 sq ft		\boxtimes	Ш	Ш	
Registered Waste Hauler D & S RESTORATION, INC.	NJD 135	EP Hauler I 506		ibic Yards of W 5 yds	aste	Name of Registered TULLYTOWN.	RESOURCE RE	COVER	Y			
City, State			Disposal D			City, State				per (vencue		
PATERSON, NJ 07503			12/22/11			TULLYTOWN	, PA					
Completed by (Print or Type)	Title	ENT		Signature				Date	2015			
BOGDAN JOLDZIC *	PRESID Do not us		for asbesto	s licensure exe	moter	d activities.		12/19/	201/			

ASR-41





E	C			\mathbb{V}	E	M
	DEC	2	6	2017		

Date of Notification (1)				Nam	e of Buildir	g Owner/Oper	ator (2)						
12/2	20/2017						2007	ers :	IradiAsq	STDS	CO1	VTRO	S JC
Agencies Notified	Type Notificatio	n		Stre	et Address					LICE			
EPA EPA	Initial			_		10	Statio	n St	reet				
☐ DEP	Amended Amendment	#		City,	State, Zip								
	☐ Emergency (includin	g			Mar	nalapan	, NJ	07726				
M DOH ☐ DCA	justification)			Nam	e of Contac	it ·			Telephone Nu	mber			
					Anne	Ciely							
				FA	CILITY IN	ORMATION							
Name of Facility Where			e (3)				Type of	Facility	(4)			Seyler.	
	idential							ool (K-12					
Street Address		38		20	0		Othe	chapter 8 er (i.e., pr es, etc.)	3 (Other than K- rivate & commer	12) cial bui	lding	S,	
City (5)							Square		# of Floors	IE	Bldg. /	Age	
	lishtown	, NJ	07	726			25.00)	2			+/	
County (6) Middle	2011			Cou	inty Code (7) (STATE			or if being demo	lished)		+/-	
Name of Monitoring Firm	Hired by Building	Owner	=	ASCN	I No	Name of Aba	temerit Contr				_		
701	MECS	OWNER		AUGIV	1110.				nental Servi	T			
Street Address						Street Addre		VIIOIII	iental Servi	.es, 1.	IIC.		
	PO Box 34	41				Otroot / taare	33	PO B	ox 322				
City, State, Zip Code						City, State, Zi	in Code	100	5X 522				_
Cro	osswicks, NJ	0851.	5			21		ntown	, NJ 08501				
Project Manager for Moni	toring Firm		Tele	phone	No.	Telephone No			License Ne.		100		=
Bill Wei	sgarber		(60	9) 29	8-4070	(609)	259-9688			0049	3		
Start Date (10)	Sche	eduled C	omple	tion Da	ate (11)	Name of OSH	A Monitor						
1/2/2018		1/5/		3				ME	ECS				- 1
Occupancy Status During	3 (8)					Street Addres		Manufacture States	and the second second				_
Facility Closed/Vacate	d During Entire P	eriod of	Abater	ment				PO Bo	ox 341				
Abatement Performed Other - Describe: 88		al Facilit	y Flour	S		City, State, Zip							
Name and the second second second second second second second second second second second second second second							Cross	swicks	NJ 08515				
Scope of Work (Check all	that apply)					TEULO	Containment	with Noor	ative Pressure				
≥3 sf or ≥3 lf			novati			Mini-I	Enclosure		alive Plessure				
≥160 sf or ≥260 lf		☐ De	molitio	n		XX Glove	ebag Procedu	ire	-Friable Proced	150			
-		Is I	ocatio	n	10	1 111011-1	Exchipica ()	and Non	-Thable Floced	T	bate	ment	$\overline{}$
1		No	ormally					İ		1	Тур		
Location of Asbestos-Containing Ma		Mair	Solely	ce/	Asbesii	Description os Containing N		,	Amount				
TO BE ABATE IN Facility	<u>D</u>	100	istodia Staff?			hermal system	s insulation,		(Specify	Z Z	77	Enc	m
(13)		100	(12)			surfacing, VA other miscellar			SF or LF)	Remova	Repair	aps	clos
		Yes	No	N/A						val	=	Encapsulate	Enclosure
Basement/Craw	vl	Х			Ashes	tos Fit	tings.		1.2	X			
										1 0			
Name of Registered Waste	e Hauler		110000	DEP V		Cubic Yards	Name o	f Registe	ered Landfill				
Stevens Environme	ental Service	s, Inc.	Ha	uler ID 182	No. 192	of Waste 1		/ 1	Fairless Lan	dfill			
City, State	144 455.0					Disposal Date	City, Sta						
-	Allentown, N	IJ		440		1/5/2014	61 . /	100	Morrisville,	PA			
Completed By	Title					Signature	Michael Landson	7	Date				_
Mahlon E. Stev	ens	Pro	oject	Man	ager	-1-41	4 4			20/	17		

Date of Notification (1)	4	N	OTIFI)	CATH Pursu	ON OF A	New dersey ABBESTOS AB AC 8:60 and 5	:16)				<u>V</u> [n n
	22 /	17		Na	me of Build County of	ding Owner/Operator f Passaic (Pag	or (2)	II II DEC	2 6) 20	1/-	-
Agencies Notified EPA	Type Notific	cation		Str	eet Addres	ss		ASBEST	OS C		ROL	&
□ DOLWD		ed			01 Grand		-	le le le le le le le le le le le le le l	OENG	MING	and the second	ORCHESTON.
□ DHSS	Amendm			10.00	/, State, Zi							
DCA (NJAC 5:23-8)	☐ Emerger	ncy (includ	ling			NJ 07505						
(NOAC 5.23-0)	justificat Cancella	10000 C-18			ne of Cont			Telephone Nu	ımber			
	L Caricella	ation	1	A	ndrew T	hompson						
Name of Facility Mills				F	ACILITY	INFORMATION			2			
Name of Facility Where A	Abatement is	Taking Pla	ace (3)				Type of Facilit	ty (4)				
Passsaic County C	ourthouse i	Annex B	uildin	g			☐ School (K-	12)				
Street Address				10-10			Subchapte	r 8 (Other than K-	12)			
63 Hamilton Street							homes, etc	private and comm	nercial	buildi	ngs,	
City (5)							Square Feet	# of Floors		DIJ	^	
Paterson							40,000	# 01 F100FS		Bldg.		
County (6)				Co	unty Code	(7)(STATE USE ONLY)		Prior if being demo			7 yrs	
Passsaic					,	(1)(011112 002 01421)	Vacant	rior it being demo	lished)		
Name of Monitoring Firm	Hired by Build	ding Owne	er (8)	ASC	M No	Name of Abeter	nent Contractor (9					
Langan			7-7	100000000000000000000000000000000000000	099			∌)				
Street Address				000			atement Inc					
300 Kimball Drive						Street Address						
City, State, Zip Code						2 Henderson						
Parsippany, NJ 0705	54					City, State, Zip C						
Project Manager for Monit			1-				ell, NJ 07006					
Vijay Patel		-2	(60-4900	Telephone No. (973) 808-16	16	License No.				
Start Date (10)	S	Scheduled				Name of OSHA	Monitor					
	_	01		6 /	18	Superior Aba	atement Inc					
Occupancy Status During	Abatement (C	Check only	one)			Street Address						
Facility Closed/Vacated	During Entire	e Period o	f Abate	ement		2 Henderson	Drive					
Abatement Performed (Outside of No	rmal Facil	ity Hou	rs - De	scribe	City, State, Zip Co						
Time of Abatement: _A		/PN	Λ	AM		West Caldwe						
Scope of Work (Check all t	hat apply)											
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			enovat emoliti			☐ Mini-Enc	a Procedure					
			s Loca	tion		□ Non-Exe	mpted (*) and No	n-Friable Procedu	ire			
Location of			Norma	lly		Description o	f		At	atem	ent Ty	уре
Asbestos-Containing Ma TO BE ABATE	aterial (ACM)	Use	ed Sole aintena	ely by	Asbe	stos Containing Ma	terial (ACM)	Amount	Re	Re	匝	Щ
IN Facility	<u>= U</u>	Cus	todial	Staff?	(i.e	., thermal systems i	insulation,	(Specify	Removal	Repair	Encapsulate	Enclosure
(13)			(12)			surfacing, VAT, other miscellaned	or or	SF or LF)	<u>val</u>]	lusc	sur
74 27		Yes	No	N/A		outer miscenarie	ous)				ate	Œ
Fround, 1st, 2nd, 3rd F					Pipe Ins	sulation		1,553 LF		П	П	П
Fround, 1st, 2nd, 3rd F		ic 🗌			Pipe Jo	int Insulation		826 EA		П		
Fround, 1st, 2nd and 3					Wall an	d Ceiling Plaster		41,793 SF				
round, 1st, 2nd and 3			\boxtimes		Plaster	Skim Coat		1,030 SF				
ame of Registered Waste I				JDEP V		Cubic Yards of	Name of Regist			ш	ш	ш
Service Transport Gro	oup, Inc		1000	auler ID SW21	100 TO 17	Waste	Minerva La					
ity, State				04471	17	1500 Disposal Date	City, State	7997556 T 0-83T				
New Castle, DE						Various	Waynesbur	ah Ou				
ompleted By (Print or Type) T	Title					**ayılesbur	,				
Nick Petrovski	er.	Preside	nt			Signature	1/1/	Dat				
P 41						1///6	1/1/10	2100 1	7-	77	-/	7

m.	E	C			\mathbb{V}	
K		**********				
	-	DEC	2	6	2017	

Date of Notification (1)				Nam	e of Build	na C	Diamor/O	norotor	(2)	+H+H-	DEC	2 (5 21	117	100
	17	: :		Ivaiii	e or Build	ing C	Jwner/O	perator	(Page 2 d	Seed book	BLO .		_ L. (× 1. 4	-
Agencies Notified Type Notif ☐ EPA ☐ Initial				Stree	et Address	3				ASE	BESTOS LICE		ONT		. &
☑ DOLWD☑ Amend☑ DHSSAmend		3		City,	State, Zip	Coc	de						N. W. S. S. S. S. S. S. S. S. S. S. S. S. S.		100
☐ DCA ☐ Emerge			3												
(NJAC 5:23-8) justifica	ation)	A1.511.00.00.00	,	Nam	e of Conta	ct				Telephone	Number	ŗ			
		110-110-1		FA	CILITY	NFC	DRMAT	ION			-				
Name of Facility Where Abatement is	Taking	Place	(3)						Type of Facility	(4)		-			
Passsaic County Courthouse				ı					☐ School (K-1	2)					
Street Address 63 Hamilton Street						-31,111			Subchapter Other (i.e., p	8 (Other than orivate and co	K-12) mmercia	ıl bı	uilding	gs,	
City (5)									homes, etc.)					
Paterson									Square Feet	# of Floor	s	BI	dg. A	ge	
County (6)				Cou	nty Code	(7)(S	TATE USE	ONLY)	Current Use (P	rior if being de	emolishe	d)			
Name of Monitoring Firm Hired by Bu	ildina O		0) [ACON	N.	1									
The or monitoring i init i lifed by Bu	nung O	wilei (0)	ASCM	No.	N	ame of A	Abateme	ent Contractor (9)					
Street Address						Si	treet Add	dress		2007			- 25		
011															
City, State, Zip Code						Ci	ity, State	e, Zip Co	ode						
Project Manager for Monitoring Firm			Tele	phone	No.	Te	elephone	e No.		License N	0.				
Start Date (10)	Schedu	led Co	omple	tion Da	ite (11)	Na	ame of C	SHA M	lonitor					-	
	====	/		_ /				01 13 (10)	omor						
Occupancy Status During Abatement						St	reet Ado	ress							
Facility Closed/Vacated During Ent	ire Peri	od of A	Abate	ment											
Abatement Performed Outside of N Time of Abatement: _AMP	iormai F M/	_PM-	Hour	s - Des _AM	cribe	Cit	ty, State	, Zip Co	ode						
Scope of Work (Check all that apply)			7,31	10.4 (27-01)		1					-27	_			
]	Rer Der	novati	on n			\sqcup M	ini-Encl	ainment with Neg osure Procedure	gative Pressur	е				
				2007			□N	on-Exer	npted (*) and No	n-Friable Proc	edure				
Location of			Locat ormal				Danas					Aba	ateme	nt T	уре
Asbestos-Containing Material (ACN	A)		Sole		Asbe	stos	Contain	iption of	erial (ACM)	Amount	- 7	ZD	Z.	Щ	Щ
TO BE ABATED		Mair	ntena		(i.e	., the	ermal sy	stems in	nsulation,	(Specify	l	Removal	Repair	cap	nclo
IN Facility (13)		Ousid	(12)	otaii:			surfacing			SF or LF)) 2	2	7	Encapsulate	Enclosure
No. 16	-	Yes	No	N/A		- 01	uiei iiiisi	Jenane (ous)					ate	(D
Ground, 1st, 2nd and 3rd Floors			\boxtimes		Plaster	Deb	bris			550 SI	F D	3			
Ground, 1st, 2nd and 3rd Floors	-				Suspen	ded	Ceilin	gs w/A	CM debris	15,500 S	F [3			
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Ground, 1st, 2nd and 3rd FI-Cha	ses [\boxtimes		Duct Se	em	Tape			8 SF	-				
Name of Registered Waste Hauler			1335	IDEP V auler ID		13-245 Yes	bic Yard ste	s of	Name of Regist	tered Landfill					
City, State	117-00-119-1	-				Dia	nocal D	ato.	Oit Oit						1
						DIS	posal Da	a(E	City, State						
Completed By (Print or Type)	Title						Signat	ire.	,		Date				
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		17	_					(Page 3 of 3)				
Agencies Notified ☐ EPA ☐ DOLWD	Type Noti				Stre	et Address			ASBE	STOS	CO	NTRO IG	OL
☐ DHSS	1000000	dment #3			City,	State, Zip	Code			. 5-1			110 0424
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63 Hamilton Street								Other (i.e., p	rivate and comm	2) ercial b	ouildir	ngs,	
City (5)	•	-						homes, etc.					8.
Paterson								Square Feet	# of Floors	E	3ldg.	Age	
County (6)				===	Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demol	ished)			_
Name of Monitoring Firm	Hired by Bu	uilding Owr	er (8))	ASCN	1 No.	Name of Abatem	ent Contractor (9)					
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Project Manager for Mon	itorina Firm			Tolo	phone	Ne			0.				
, and a gold for more	nomig i mii			i ele	priorie	NO.	Telephone No.		License No.				
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Occupancy Status During	Abatement	(Check on	ly one	e)			Street Address						
Occupancy Status During ☐ Facility Closed/Vacate	Abatement ad During En	(Check on tire Period	ly one	e) ater	nent		Street Address						
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Cocupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location Abbestos-Containing M TO BE ABA IN Facility	g Abatement ed During En l Outside of N AMP that apply) of Material (ACI TED	(Check on tire Period Normal Face M/F	Reno Demo	e) pater dours vatic catilio	nent s - Des _AM on on y y by nce/	Scribe	City, State, Zip Co	ainment with Neg losure g Procedure mpted (*) and Nor f terial (ACM) nsulation, or		-	Repair	T	Ť
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(NJAC 5:23-8)	justification)		g		e of Contac			Telephone Numb			
	☐ Cancellation			Lance Carries	drew Tho			I elebitotie idfilit	oer		
			-			FORMATION					
Name of Facility Where Ab	batement is Taki	ng Plac	e (3)	- 17	OILS III	at OKMMITTOR	Type of Facility	./4)			
Passsaic County Co				2			School (K-1				
Street Address				-			Subchapter	8 (Other than K-12))		
63 Hamilton Street							Other (i.e.,	private and commen	clal b	uildin	gs,
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Project Manager for Monito			Tel	phone	Mo	Telephone No.	11, 140 01000	I I I I I I I I I I I I I I I I I I I			
Vijay Patel				•	0-4900	(973) 808-161	e	License No.			
Start Date (10)	Sche	duled (te (11)	Name of OSHA M		00411			
10 / 23 /		01				Superior Aba					
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m = 1.10 0, 0, 1200 "			irronu	211		☐ Glovebag) Procedure noted (*) and No	n-Friable Procedure			
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Asbestos-Containing Ma TO BE ABATE		Ma	intena	nce/	Asbes	stos Containing Mai	terial (ACM)	Amount	Rem	Repair	nca
IN Facility		Cus	- T. (7.5)	Staff?	(surfacing, VAT,		(Specify SF or LF)	Remova	Nir.	Encapsula
(13)		Yes	(12) No	N/A		other miscellaned	ous)	,	_		Encapsulate
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specimes day and and a			\boxtimes		Pipe Ins	ulation		1,553 LF			
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	loors & Attic					d Ceiling Plaster		37,293 SF	×		
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Date of Notification (1)					Nam	e of Ruildi	na O	wner/Operator	(2)						
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Agencies Notified ☑ EPA ☑ DOLWD	Type Notification					et Address	757						CONT N		
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DCA (NJAC 5:23-8)	☐ Emergen justification		cluding	g	Nam	e of Conta	ct			Televis	N				
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Name of Facility Where									Type of Facility ((4)					
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Street Address 63 Hamilton Street									Subchapter 8	ivate and co	K-12) mmerc	ial b	uildin	os.	
City (5)				-					homes, etc.)						
Paterson									Square Feet	# of Floor	3	В	dg. A	ge	
County (6)					Cou	nty Code (7)(\$7	ATE USE ONLY)	Current Use (Price	or if being de	emolish	ed)			
Name of Monitoring Firm	Hired by Build	ling O	wner ((8)	ASCM	No.	I N:	ame of Ahatem	ant Contractor (9)						
-				,			1	anie or Pibatein	BIT CONTRACTOR (8)						
Street Address							St	reet Address							
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Project Manager for Moni	toring Firm			Tel	ephone	No.	Te	lephone No.	<u> </u>	License N	lo.				
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☐ Facility Closed/Vacate ☐ Abatement Performed	d During Entire	e Peri	od of	Abate	ment										
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Location of Asbestos-Containing N		.	Used		ely by	Asha	eine	Description of Containing Mai	f terial (ACM)	A	.	_	_		
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Date of Notification (1)	12 /	17			Name	of Buildin	g Ow	ner/Operator	(Page 3 of 3)	\$	BESTO	JS (CON	TRC)L &
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Agencies Notified ⊠ EPA	Type Notific	ation			Street	Address							-1101/2-2		
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Street Address									Other (i.e., pr	ivate and con	mercia	al bu	ilding	S,	
63 Hamilton Street									homes, etc.)						
City (5)									Square Feet	# of Floors		Ble	ig. A	ge	
Paterson					10										
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Name of Monitoring Firm	Hired by Buil	ding O	wner ((8)	ASCM	No.	Na	me of Abatem	ent Contractor (9)						
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Project Manager for Mon	itoring Firm			Tel	ephone	No.	Tel	ephone No.	License No.						
Start Date (10)					etion Da		Nas	me of OSHA N	fonitor			See Die			
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Name of Registered Waste Hauler NJDEP W Hauler ID					Cut	oic Yards of ste	Name of Regist	ered Landfill							
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Name of Facility Where A	Abatement is T	Taking F	Place (3)				Type of Facility	(4)			-	-	
Passsaic County C	ourthouse A	Annex	Build	ing				School (K-12	2)					
Street Address			V 16047-214						8 (Other than K-		11 24			
63 Hamilton Street								homes, etc.)	rivate and comm	nercial bi	ulldan	js,		
City (5)								Square Feet	# of Floors	В	ldg. A	ae	-	
Paterson								40,000	4		127	T-17		
County (6)					Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pr	for if being demo					
Passsalc							100 M	Vacant	9	77/				
Name of Monitoring Firm	Hired by Build	ding Ow	mer (8) [ASCM	No.	Name of Abatement Contractor (9)							
Langan					0009	9		Superior Abatement Inc						
Street Address							Street Address							
300 Kimball Drive							2 Henderson Drive							
City, State, Zip Code							City, State, Zip Code							
Parsippany, NJ 070					West Caldwell, NJ 07006									
Project Manager for Moni		-		Tele	phone I	No.	Telephone No. License No.							
Vijay Patel					Harris and the	0-4900	(973) 808-1616 00411							
Start Date (10)	Is	Schedul	ed Cor				Name of OSHA M		00411		A CONTRACTOR		_	
10 / _16_ /						18	Superior Aba	AND SOME SOME SOME SOME SOME SOME SOME SOME						
Occupancy Status During							Street Address					_		
☑ Facility Closed/Vacate					nent		2 Henderson	Drive						
☐ Abatement Performed						cribe	City, State, Zip Co							
Time of Abatement:	AMPN	N	PM		_AM		West Caldwell							
Scope of Work (Check all	I that annly)						Treat Galatto	11, 110 01 000						
V	· Lieux Cipiping /							ainment with Neg	gative Pressure					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Rend				☐ Mini-End							
△ 2100 SI GI 2200 II		_	T Detti	OHILO	11			mpted (*) and No	n-Friable Proced	fure				
			ls L	ocat	ion	<u> </u>					atem	ent T	vne	
Location			No Used	mal			Description o				1		1	
Asbestos-Containing I TO BE ABA		1)	Main				stos Containing Ma ., thermal systems i		Amount (Specify	Rem	Repair	nce	nc	
IN Facilit			Custo	0.00	Staff?	(1.6	surfacing, VAT,	or	SF or LF)	Remova	¥.	Isq	Enclosure	
(13)		-		(12)	T		other miscellane		in new construction of the second			Encapsulate	9	
		-	Yes	No	N/A						_			
Ground, 1st, 2nd, 3rd	Floors & A	ttle [] I	X		Pipe Ins	sulation		1,553 LF					
Ground, 1st, 2nd, 3rd	Floors & A	ttic [X		Pipe Jo	Int Insulation		826 EA					
Ground, 1st, 2nd and	3rd Floors			X		Wall an	d Ceiling Plaster	г	37,293 SF					
Ground, 1st, 2nd and	3rd Floors]		X		Plaster	Skim Coat		1,030 SF					
Name of Registered Wast	te Hauler			100	JDEP V		Cubic Yards of	Name of Regis	stered Landfill					
Service Transport G	Group, Inc				auler ID SW21		Waste 1000	Minerva La	andfill					
City, State					STEE	1.1	Disposal Date	City, State						
New Castle, DE							1/16/2018	Waynesbu	rgh, OH					
Completed By (Print or Ty	vpe)	Title					Signature	, ,,		Date	_	-		
Nick Petrovski	, /		siden	ŧ				/ ///			+	- /	-	
ASB-41				_			MAN	JANA CO	MAN	10	-7	-/	1	

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	DEC	2	6	2017		

Date of Notification (1)			-	Name	of Buildin	a Ow	ner/Operator (21			-			
10 /	05 / 1	7				9	The political of	(Page 2 of	3) ASE	BEST	SC	CON	TRC)L &
Agencies Notified ☑ EPA ☑ DOLWD	Type Notification Initial Amended				t Address	N-J-			onessipas osolului	LI(ISIN	G	u podrem
☑ DHSS	Amendment :			City,	State, Zip (J008								
☐ DCA (NJAC 5:23-8)	Emergency (i justification)	ncluding	9	Name	of Contac	1			Telephone N	lumba	r			
(140/10 0.20-0)	☐ Cancellation			1,400.110	, or ornar	•			1 orophorio (1	edinoc	1			
					CILITY IN	FOR	RMATION							
Name of Facility Where	Abatement is Takir	g Place	(3)					Type of Facility (4)		-			
Passsaic County C	ourthouse Ann	ex Bui	ldin	g				School (K-12)						
Street Address			HILOSOP					Subchapter 8 Other (i.e., pri	(Other than Fivate and com	(-12) Imercii:	al bu	ildino	is.	
63 Hamilton Street				-2100M mm HEL				homes, etc.)				1141112	-1	
City (5)								Square Feet	# of Floors		Blo	dg. A	ge	
Paterson														
County (6)				Cou	nty Code (i	7)(STA	TE USE ONLY)	Current Use (Price	or if being den	nolishe	ed)			
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	No.	Nar	me of Abatem	ent Contractor (9)		_				
Street Address				1		Stre	eet Address							
City, State, Zip Code	,					City	, State, Zip Co	ode						
Project Manager for Mon	itoring Firm		Te	elephone	No.	Tel	ephone No.		License No),				
Start Date (10)	Sche	duled C	omp	letion Da	ite (11)	Nar	ne of OSHA N	fonitor					-	
		/												
Occupancy Status During						Stre	eet Address					_		
☐ Facility Closed/Vacate														
Abatement Performed Time of Abatement: _					scribe	City	, State, Zip Co	ode						
Scope of Work (Check al	I that apply)												_	
≥3 sf or ≥3 if >160 sf or >260 if		☐ Re					☐ Mini-End	tainment with Neg dosure g Procedure	ative Pressure	9				
							☐ Non-Exe	mpted (*) and Nor	n-Friable Proc	edure				
Lavadas		100		ation nally			B d . e	,			Ab	atem	ent T	_
Location Asbestos-Containing		Use	ed Sc	olely by	Asbe	stos	Description of Containing Ma		Amount		Re	Repair	En	Enclosure
TO BE ABA	ATED			nance/ al Staff?		e., the	rmal systems	Insulation,	(Specify		Remova	pair	Encapsulate	dos
IN Facili (13)	ny	000	(12				surfacing, VAT her miscellane		SF or LF)		<u>m</u>		sula	ure
,,		Yes	No	o N/A				(5)					ନି	
Ground, 1st, 2nd and	3rd Floors				Plaster	Deb	ris		550 SI	F	×			
Ground, 1st, 2nd and	3rd Floors				Susper	nded	Ceilings wi	ACM debris	15,500 S	F	\boxtimes			
Ground, 1st, 2nd, 3rd	Floors & Attic				Duct In	sula	tion		1,210 SI	P	X			
Ground, 1st, 2nd and	3rd FI-Chases				Duct S	eem	Tape		8 SI	F	\boxtimes			
Name of Registered Was	te Hauler			NJDEP Hauler I		Cut	oic Yards of ste	Name of Regist	iered Landfill					
City, State						1	posal Date	City, State						
Only, Otale						DIS	possi pals	Oity, Otato						
Completed By (Print or T	ype) Tit	le					Signature			Date				

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	DEC	2	6	2017	STATE OF STA

Date of Notification (1)				11	Name	of Buildin	a Ow	ner/Operator (2)						_
10/	05 /	17		1	14011110	or burear	9 000	non-operator ((Page 3 of 3)	A	SBES			NTF NG	ROL
Agencies Notified EPA	Type Notifica	ation			Street	Address		411435-555		MINISTERNAL CONTRACTOR AND CONTRACTOR	L. CONSTRUCTOR	HU L	140	TY CI	- HOMEDANING
☑ DOLWD ☑ DHSS	Amended Amendm	ent #1		(City, S	itate, Zip (Code								\neg
☐ DCA (NJAC 5:23-8)	Emergen justification Cancellat	оп)	ng	Ī	Name	of Contac	t			Telephone N	lumber				
					FAC	CILITY IN	FOR	RMATION			.				
Name of Facility Where A					7/1/0/000				Type of Facility (•					
Passsaic County C	ourthouse /	Annex B	uildir	ng					School (K-12 Subchapter 8		(40)				
Street Address 63 Hamilton Street									Other (i.e., pr	ivate and com	rmercia	bui	lding	s,	
City (5)							211-222		homes, etc.)	N - C F1		-			
Paterson									Square Feet	# of Floors		RIO	lg. A	ge	
County (6)			-	-1	Coun	ty Code (7	Y)(STA	TE USE ONLY)	Current Use (Pri	or if being den	nolished	n			
							,,					-,			
Name of Monitoring Firm	Hired by Build	ding Owne	r (8)	A	SCM	No.	Nar	ne of Abatem	ent Contractor (9)						
Street Address							Stre	eet Address						_	_
City, State, Zip Code							City	, State, Zip C	ode						
Project Manager for Moni	toring Firm		T	elep	hone l	No.	Tele	ephone No.		License No).				
Start Date (10)		Scheduled					Nar	ne of OSHA N	fonitor						
Occupancy Status During							Stre	et Address							
☐ Facility Closed/Vacate	ed During Entir	re Period	of Aba	atem											
☐ Abatement Performed Time of Abatement: _						cribe	City	, State, Zip Co	ode						
Scope of Work (Check all	that apply)												-		-
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		-	Renov	1000				☐ Mini-End	ative Pressure						
			Is Lo	catio	n	I		□ 14011-FVC	inpled () and Not	11 Itable F 100	-	Aha	tem	ent Ty	me.
Location	NT 17	. 11	Non sed S	mally			0.040075475	Description of		****		1			
Asbestos-Containing TO BE ABA		" h	ainte	nan	ce/			Containing Ma mal systems		Amount (Specify		Removal	Repair	Encapsulate	Enclosure
IN Facility (13)	ty	a	ıstodi 1)	al St (2)	2111			urfacing, VAT ner miscellane		SF or LF))	Na la	•	sule	sure
(10)		Ye		lo	N/A		Ott	ici illisocilaric	ous)			1		ite	
1st Floor Space 1-14	Q.		×			Woode	n Do	or with Cor	e Insulation	20 SI	F	X			
Ground, 1st, 2nd and 3rd Floors						Floor T	ile a	nd Mastic		17570 SI	F [X			
Ground, 1st, 2nd and	3rd Floors		IX			Old Ele	ctrlc	Panel Boar	rd	56 SI	F	3			
Ground and 1st Floor	rs (Exterior)		X	1		Window	v/Do	or/Louver C	aulk	210 LI	F	a			
Name of Registered Was	te Hauler			1	DEP V	Vaste No.	Cub	oic Yards of ste	Name of Regist	tered Landfill		- 1		70	
City, State			-	1	-		Disp	posal Date	City, State						
		,									-				
Completed By (Print or Ty	/pe)	Title						Signature			Date				

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SBESTOS CONT	

D. I. 531 05 0 (4)			-			(D () ()				-					
Date of Notification (1) 09 /	29 /	17						er/Operator ()		ASB	ESTOS	CO	VTRO	71 8	
				_				(, -0-		CONTRACTOR OF THE PERSON NAMED IN COLUMN	LICE	NSIN	G	JL (4	
Agencies Notified EPA	Type Notificat	tion				Address								No. 2 contract Section	
⊠ DOLWD	☐ Amended			-		Grand S									
☐ DHSS	Amendme	nt #				tate, Zip C		0.5							
☐ DCA	☐ Emergence	y (includ	ding	-	divinistants.	rson, N.		105		T					
(NJAC 5:23-8)	justificatio					of Contact				Telephone Nu	mber				
	☐ Cancellation	on			10-10-1	rew Tho				1-					
					FAC	ILITY IN	FOR	MATION							
Name of Facility Where		accountant in		1200					Type of Facility						
Passsaic County (Courthouse A	nnex E	Build	ing					School (K-12		10\				
Street Address										8 (Other than K- rivate and comm		ildino	s.		
63 Hamilton Street	t								homes, etc.						
City (5)									Square Feet	# of Floors	BI	dg. A	ge		
Paterson									40,000	4		127	rrs		
County (6)					Count	ty Code (7)(STAT	TE USE ONLY)	Current Use (Pr	ior if being demo	lished)				
Passsaic									Vacant						
Name of Monitoring Firm	n Hired by Build	ing Own	er (8)	1	ASCM I	No.	Nam	ne of Abateme	ent Contractor (9)	0					
Langan					0009	9	S	uperior Aba	itement Inc						
Street Address							Street Address								
300 Kimball Drive							2 Henderson Drive								
City, State, Zip Code							City, State, Zip Code								
Parsippany, NJ 07					West Caldwell, NJ 07006										
	Project Manager for Monitoring Firm						Telephone No. License No.						13/45		
Vijay Patel	3				ohone I 73) 56	0-4900	(973) 808-1616 00411								
Start Date (10)	S	chedule	d Cor	- 5			,	ne of OSHA N			17				
10 / 10 /	SV DOMESTO				_ / _		S	uperior Aba	tement Inc						
Occupancy Status Durin								et Address							
Facility Closed/Vaca	댓글이번 50000 보지 않아 네 네 네 네 네.				nant			Henderson	Drivo						
☐ Abatement Performs	스타기 한다이 없으면 살았다면 소리에는 보고 하다 없는데 없다.					cribe		State, Zip C							
Time of Abatement:									II, NJ 07006						
Scope of Work (Check a	all that apply						4.6	est Calume	ii, NJ 07000					_	
Scope of Work (Check a	all triat apply)								tainment with Ne	gative Pressure					
≥3 sf or ≥3 lf ≥4 co = f == 2 co = lf			Reno	200000000000000000000000000000000000000				Mini-End							
≥160 sf or ≥260 lf		Ш	Dem	OHIO	n				g Procedure empted (*) and No	on-Friable Proce	dure				
			ls L	ocati	on							atem	ent T	vpe	
Locatio	n of			rmal				Description of	of			_		1	
Asbestos-Containing)	Used Main					Containing Ma rmal systems		Amount	Remova	Repair	Encapsulate	Enclosure	
TO BE AE					Staff?	(1.6		urfacing, VAT		(Specify SF or LF)	ova	=	psu	msc	
(13)				(12)	1			ner miscellane			-		late	e.	
50 V	2.1	Y	'es	No	N/A								10		
Ground, 1st, 2nd, 3i	rd Floors & At	ttic [\boxtimes		Pipe In	sulat	tion		1,553 LF	\boxtimes				
Ground, 1st, 2nd, 3	rd Floors & At	ttic [\boxtimes		Pipe Jo	oint li	nsulation		826 EA	\boxtimes				
Ground, 1st, 2nd an	nd 3rd Floors					Wall an	id Ce	iling Plaste	r	37,293 SF					
Ground, 1st, 2nd an	nd 3rd Floors]	\boxtimes		Plaster	Skir	n Coat		1,030 SF	\boxtimes				
Name of Registered Wa	aste Hauler			1000	JDEP \		985500	oic Yards of	Name of Regi	stered Landfill					
Service Transport	Group, Inc			Н	auler II		Was	ste 000	Minerva L	andfill					
City, State					SW21	17		oosal Date	City, State						
New Castle, DE								2/22/2017	Waynesbu	urgh, OH					
Completed By (Print or	Type\	Title				11-1-11		Signature		- 1770 CO	Date				
Nick Petrovski	1300)		sider	n#				Oignature	1/1/1	1//	9	. ~	9.	17	
THICK I GLIOVSKI		110	oluci					111	11-11/h	rentw	1-	1	9-	1/	

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N				on.			
		JEC	2	6	2017		الطا

Date of Notification (1)					Name	of Building	g Owi	ner/Operator (2)			_		-	
						,	3) ASBESTOS CONTROL & LICENSING								
Agencies Notified Type Notification ☑ EPA ☑ Initial ☑ DOLWD ☐ Amended					Street Address										
☑ DOLWD ☑ DHSS		City, State, Zip Code													
☐ DCA (NJAC 5:23-8)		Name of Contact				Telephone Number									
					FAC	ILITY IN	IFOR	MATION		900,700					
Name of Facility Where Abatement is Taking Place (3)									Type of Facility (4	4)					
Passsaic County Courthouse Annex Building							School (K-12) Subchapter 8 (Other than K-12)								
Street Address 63 Hamilton Street								Other (i.e., private and commercial buildings, homes, etc.)							
City (5)			- 101						Square Feet	# of Floors	T	Bld	g. Ag	e	
Paterson															
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Prio	r if being den	nolished)			
Name of Monitoring Firm Hired by Building Owner (8) ASCM No.						No.	Name of Abatement Contractor (9)								
Street Address							Street Address								
City, State, Zip Code							City, State, Zip Code								
Project Manager for Monitoring Firm Telephone No.							Tele	ephone No.	D. License No.						
Start Date (10) Scheduled Completion Date (11)							Name of OSHA Monitor								
Occupancy Status Durin	g Abatement (0	Check or	nly on	e)			Stre	et Address						SON	
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describ Time of Abatement: _AMPM/PMAM						cribe	City, State, Zip Code								
Scope of Work (Check a	II that apply)														_
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf	,		Rene Dem					☐ Mini-End	tainment with Nega dosure g Procedure mpted (*) and Non						
				ocat								Aba	teme	ent T	уре
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) User Main Custo			Used Main Custo					Description of Containing Ma rmal systems urfacing, VAT ner miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)		Domousi	Repair	Encapsulate	Enclosure
			-	No	N/A	Plaster Debris				250 51	= D	7		_	
Ground, 1st, 2nd and 3rd Floors Ground, 1st, 2nd and 3rd Floors									ACM debris	550 SF M debris 15,500 SF			П		
Ground, 1st, 2nd, 3rd Floors & Attic						Duct In						3			
Ground, 1st, 2nd and 3rd Fl-Chases			-			Duct Se	eem	Tape				П		П	
Name of Registered Waste Hauler				N	JDEP V				8 SF						
City, State						Disposal Date			City, State						
Completed By (Print or Type) Title							1	Signature		Date					

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

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	Co. L. Talance in the management of	7	201	6	2	DEC		
	Salar a Salar and Salar an	7	201	6	2	DEC		

Date of Notification (1)					Name	of Building	g Owr	ner/Operator (2)	ASBE				OL	Š.
	29 /	17	_						(Page 3 of 3)	TO THE PERSON NAMED IN COLUMN 1	LICE	NSI	NG	u de la come	MA SPRINGER
Agencies Notified EPA	Type Notifica				Street	Address									
☑ DOLWD ☑ DHSS	Amended Amendme				City, S	tate, Zip C	ode							-	
□ DCA	☐ Emergend		ludina												
(NJAC 5:23-8)	justification Description n)			Name	of Contac	t			Telephone N	lumbei					
					FAC	ILITY IN	FOR	MATION	*	1		-			_
Name of Facility Where A	Abatement is T	aking	Place	(3)					Type of Facility	(4)					
Passsaic County C	ourthouse A	Innex	Build	ding					School (K-12						
Street Address									Subchapter i Other (i.e., p			al bui	ldina		
63 Hamilton Street									homes, etc.)		meroie	וועם וג	ildii ig	э,	
City (5)									Square Feet	# of Floors		Blo	g. Ag	ge	
Paterson															
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	ior if being den	nolishe	ed)			
Name of Monitoring Firm	Hired by Build	ling Ov	wner (8	3)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)						
Street Address					***************************************		Stre	et Address							
City, State, Zip Code							City	, State, Zip Co	ode						
Project Manager for Mon	itoring Firm			Tele	phone l	No.	Tele	ephone No.		License No					
Start Date (10)					tion Dat		Nan	ne of OSHA N	fonitor						
Occupancy Status During							Stre	et Address			-				-
☐ Facility Closed/Vacate															
Abatement Performed Time of Abatement:						cribe	City	, State, Zip Co	ode						
Scope of Work (Check al	l that apply)							_		No. 1850		-			
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			Rer Der		1.52000			☐ Mini-End	tainment with Neg losure g Procedure mpted (*) and No						
		T	ls	Loca	tion				()			Aba	ateme	ent Ty	/pe
Location				orma	illy elv bv			Description of							-
Asbestos-Containing TO BE ABA)			ince/			Containing Ma mnal systems		Amount (Specify		Remova	Repair	Encapsulate	Enclosure
IN Facili			Cust	odial (12)	Staff?	(4.5	s	urfacing, VAT	, or	SF or LF)		val	7	lnsc	sure
(13)			Yes	No	N/A		oth	ner miscellane	ous)					ate	LU .
1st Floor Space 1-14	A			\boxtimes		Woode	n Do	or with Cor	e Insulation	20 SF	=				
Ground, 1st, 2nd and	3rd Floors			\boxtimes		Floor T	ile a	nd Mastic		17570 SF	=	\boxtimes			
Ground, 1st, 2nd and	3rd Floors			\boxtimes		Old Ele	ctric	Panel Boar	rd	56 SF	=				
Ground and 1st Floor	rs (Exterior)			\boxtimes		Windov	v/Do	or/Louver C	aulk	210 LF	=				
Name of Registered Was	te Hauler			1000	IJDEP V lauler ID		Cub	oic Yards of ste	Name of Regis	stered Landfill					
City, State	24.6						Disp	oosal Date	City, State						
Completed By (Print or T	ype)	Title					L	Signature			Date	Â		-	
ACD 41								L							

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Date of Notification (1)	1		(1	ursuant to 14.	JAC 8:60 :	and 12:12	0)		DEC	2	6 21	017
12-16-	-17		1.	Name of Buildi	,	. 1	>	1 6				
Agencies Notified	Type Notifica	tion	10	<u> </u>	Ven	166	man,	FILES THE	t de	080	CONT	rroi
[] EDA	2		3	treet Address	0	- 11	11/	11/1/	LI	CEN	SING	TROL
□ EPA □ DEP	☐ Initial ☐ Amende		1		818	S Hitz	defenti	eld Rel	NATURE SHOWS	ArCaliamore area	HAVE STOREGE	
□ DOL	Amender Amendm		10	ity, State, Zip		11.						
	☐ Emergen	cy (including		U)	renu	4 HIL	LN	J 08	00	7_	2	
□ DOH	justificati	ion)	N	ame of Contac	1	1-		Telephon	This area			
□ DCA	☐ Cancellat	ion		Tie	¥ (6280	1	1 (Flexion				
V 07 W			1	FACILITY I	1							
Name of Facility Where Aba	atement is Takir	ng Place (3)		/ .	III OILIIIA	1101	Type of Fa	cilin/(A)				- (11/0-)
	200	Most	ne	Hall			_					
Street Address	11 1	1	1	Sh i			☐ School ☐ Subch	ol (K-12)				
1012	- Hadi	antiel	7	DA.		1	☐ Other	napter 8 (Other than K (i.e. private & comm	-12) amial b	wildin	- La	
City (5) / /	1	121	7 1							unum	gs, 1101	nes, en
Chel	1011 4	4//	111	/			Square Feet	01 1 10013		B	de As	je .
County (6)	1701	i ce	100	inty Code (7)			6000			1	10)
(min	en		(ST	inty Code (7) ATE USE ONLI	1)			(Prior if being demol				
Name of Monitoring Firm Hir	red by Building	Owner (8)					ν	aion HAL	_			
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ccupancy Status During Abate					1	Street Add	ress		-			
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Abatement Performed Out: Other – Describe:	of Normal !	racility Hours	Him-1			City, State.	Zip Code					
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							Glovebag Pro	cedure				
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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)		IU		Name o	f Buildin	g Owner / Operator	(2)		F	C. F	П	71/7	F
Agencies Notified	Cember 21, 20 Type Notificati				ds Regi	onal Board of Educ	cation		11)	<u> </u>	U	\mathbb{W}	5
Agericles Notified	Type Notificati	OII		Oli CCL 7	idal033								
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DEP										7.0 6	0 2	Uil	- 14
⊠DOL	Initial				ate & Zip						Giel seense		
⊠ рон	Amen	ded dment#		Little E	gg Harb	or, NJ 08087			ASE	BESTOS (CONT	ROL	L&
DCA	The second secon	ellation		Name o	of Contac	t				Telephon	e Nun	ber	-
No. of Control of Cont	_			Stephe	n Brenn	an, Business Admi	nistrator	•		_			
	l			FAC	ILITY	INFORMATION							
Name of Facility When	re Abatement is	Taking P	lace (3)			Type of Faci							
Pinelands Regional I	High School					School		0 322	200				
Street Address								ther than K					- 1
565 Nugentown Road	d						*		mercial build			C.)	
0" (5)						Square Feet 22.00		# of Floors	3	Bldg. Age	48		- 1
City (5) Little Egg Harbor						Current Use		eina demol			40		
Little Egg Harbor						Public Build							
County (6) Ocean			ounty Code										
Name of Monitoring Fi	irm Hired by Bu				ASCM	No. Name of Aba	atement C	ontractor (9)				
TTI Environmental, I		-			0003	Synatech, Ir	nc.						
Street Address 1253 North Church S	troot					Street Addre							
City, State & Zip Code						City, State &)					\neg
Moorestown, NJ 080	57					Little Egg H		08087					
Project Manager for M Jim Guilardi	lonitoring Firm			ephone N 3-840-880		Telephone N 609-296-691	16		License N	Number 0081	7		
Scheduled Start Date		Scheduled	Completion			Name of OS		or					
January 2, 2 Occupancy Status Du		(Check o		ry 8, 2018		Synatech, In Street Addre							$\neg \neg$
	d/Vacated Dur			Abatemen	t	829 Radio F							
	erformed Outsi	de of Norr	mal Hours			City, State &	Zip Code)	27	Ni.			
Other - Desc	ribe:					Little Egg H	larbor, N.	J 08087					
Facility Occup	pied During Ab	atement											
Scope of Work (Check	call that apply)						-						
					10 E				vith Negative P	ressure			
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≥160 sf or ≥260	J IT			Demondo	1			ag Procedu	re and Non-Friabl	e Procedu	ro		
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	••					or other mis	cellaneou	s)		Removal	Repair	aps	ıclo
					N1/A			- 1		oval	air	Encapsulate	Enclosure
			Yes	No	N/A							e	
2 nd Floor Hallways – 2	Areas				Х	Floor Tile a	nd Masti	c	1,240 SF	X			
Name of Registered V	Vaste Hauler		NJDEP V	Vaste	Cubic \	ards of Waste	Name	of Register	ed Landfill				
			Hauler ID	No.					and the second are desired as the second are desired to the second are				
Synatech, Inc.			27	429	5 Dispos	al Date	City, S	tate					
City, State					Dispus	a. Dato							
Little Egg Harbor, NJ	J 08087	1				y 9, 2017	Morris	ville, PA					
Completed By		Title			Signati	11111	page	Da	ite				
Diane Aloia		Exec. Ac	dministrat	or		live all	LA		ecember 21, 2	2017			

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

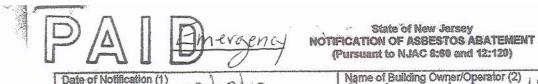
Name of Building Owner / Operator (2)

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M	nec	2.6	2017	

Date of Notification	(1)						Owner / Operator	(2)		L 0 L017	
12-21-2017 Agencies Notified	Type Notific	ation		Street		leglio		-	Charles for the state of	Colonia - Se esta de Colonia de Colonia de Colonia de Colonia de Colonia de Colonia de Colonia de Colonia de Co	
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☐ DCA	☐ Can	cellation	(Cristin	a Dil	1eglio					
				FA	CILI	TY INFO	DRMATION				
Name of Facility Wh	nere Abatem	ent is Taking PI	ace (3				Type of Facilit	y (4)			
Residense		•	****	*			School (K				
Street Address								er 8 (Other tha			
									nmercial building).)
		To				()	Square Feet	# of Flo	ors	dg. Age	
City (5)		County (6)	Co	unty (code	(7)	1,620	Daisa if baina d	amaliahad\	40	
Lawrenceville, NJ 0	8648	Mercer					Residential	Prior if being d	emolished)		
Name of Monitoring	Eirm Hirod	by Building Own	or (8)		TASI	CM No.	Name of Abat	ement Contrac	rtor (9)		
Health and Safety S		by building Own	iei (0)		117			nagement Gro			
Street Address	0.11000				1		Street Addres				
P.O. Box 365							2115 Hamilton	Ave, Suite 20)2		
City, State & Zip Co	de						City, State & Z				
Berlin, NJ 08009							Trenton, NJ 0		Tr. N		
Project Manager for	Monitoring	Firm	Telep			ber	Telephone Nu		License Nu	umber 01185	
Mr. Jim Proctor	1- (10)	0-1-1-1-10	856-4			`	609-914-4279 Name of OSH			01103	
Scheduled Start Da 12-30-20		Scheduled Cor	12-30-		te (11)		ental Laborato	ories. Inc.		
Occupancy Status I							Street Addres				
		During Entire P			ateme	ent	2333 Route 2				
		during Normal H					City, State & 2	Zip Code			
Describe:							Union, NJ 070	083			
		g Abatement									
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□ >0 -f>01	ı£		\boxtimes	Dor	novati	on		☐ Mini-En		sgalive i ress	iuic
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☐ ≥100 SI ≥20	10 II			Dei	HOILL				empted and Non-	-Friable Proc	edure
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1	n Facility (13)		Cust	odial (12)	Stan :	1	insulation, surfactor or other miscella	aneous)		Repair	Enclosure Encapsulat
	(13)		Yes	No	N/A	1	or other missene	aricodo)		=	at e
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Resource Manager	ment Group,	LLC		00	3521	8	TBD	Grows Landfi	ill		
City, State							Disposal Date	City, State			
Trenton, NJ 08619							TBD	Morrisville, P.	A		
Completed By (Prin	nt or Type)			Tit	tle		Signature			Date	
Mr. Brian Haney					eside	nt	11)			12-21-2017	0

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☑ DEP ☐ Amende	ant #		CH	ly, State,	Zip Code NJ 07038			_	-		1	1/	
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DCA Gancella	tion		Ja	mes Peri	rette			Ι	Talaphone	Numb	per		
Name of Facility Where Abatement is Ta Heritage Middle School	king Plac	ca (3)		FACILITY	INFORMA	TION					+		
Street Address							Type of Fac	1,50				12	/000
120 Foxcroft Drive							School Bubch	enters 9 /c	Other than I	K-12)			-1
Day (6) Livingston: New Jersey 07039				_			Other (i.e. prive	te & comm	erdal			
County (6)			70				20,000	.	of Floors			g. Ag 55+	
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ity, State, Zip Code						506 M	Address IcBride Ave				1		
len Rock, NJ 07452						City, St	tate, Zip Code land Park, N				+		
roject Menager for Monitoring Firm		_	Telep	phone No		Telepho	ола Мо	ew Jers	<u> </u>	-			maineres.
(art Date (10) 2/22/2017	School	niad C	1	652-111		973-22	25-8400		License 01104	No.	-		i Ço d
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Date of Notification (1)			/_\	1 6	Nam	e of Buildir	ng Owner	Operator	(2)	-HD				
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Agencies Notified	Type Notifica					McAndr et Address	ew							
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					FA	CILITY	NFORMA	NOITA						
Name of Facility Where A	Abatement is T	aking	Place	(3)					Type of Facility	y (4)			11:51 - 11:	
Private house									School (K-	12)				
Street Address		1500000			100				Subchapter	8 (Other than	K-1 2)			
									Other (i.e., homes, etc	private and c	ommercia	l build	dings,	
City (5)				4571-57					Square Feet		rs	Bldc	. Age	
Nutley, NJ 07110												Diag	, Age	
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Essex								2002 - 2003 - 200 2		ii daing d	.01110110110	ω ₁		
Name of Monitoring Firm	Hired by Build	ling O	wner	(8)	ASCM	No.	Name	of Abatem	ent Contractor (9	9)				
							Gr Tec			~)				
Street Address								Address						
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City, State, Zip Code								ate, Zip C						
							10	NJ 074						
Project Manager for Moni	toring Firm	11 12 2 2 2	-1704	Tele	phone	No.	Telepho		70	License I	No			
							973-63			51-000EEE4755	•0.			
Start Date (10)	S	chedu	ıled C	omple	tion Da	ate (11)	_	of OSHA N	Monitor	01127				
01 /03 /	18				/		3							
Occupancy Status During	Abatement (C						Street A		nsultants,Inc					
□ Facility Closed/Vacate	d During Entire	e Peri	od of	Abate	ment		1		Name to substitute the					
☐ Abatement Performed	Outside of Nor	rmal F	acilit	v Hour	s - Des	scribe	20-21 V	Vagaraw	Road, Bldg .#	35E				
Time of Abatement:	AM	PM		PM_		AM	1	ate, Zip Co						
Scope of Work (Check all	that apply)	-		-			Fair La	wn, NJ 0						
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>3 sf or >3 If > 160 sf or >260 If		ļ		novati molitic				Mini-Enc	losure					
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Name of Registered Waste	e Hauler		277.72%	NJD	EP Waste	Hauler ID No.	Cubic Yar	ds of Waste	Name of Regis	stered Landfill			<u> </u>	
Gr Tech LLC				0	03378	5	TBE			o.oa Lanumi				
City, State				10	00010		Disposal		T.R.R.F. Inc					
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CIA FAX CIA 4189

Date of Notification (1)	2/18/1	7		Name R 4	of Building Owner A LANA	1	VELOPH	ENT. 1240	W B	
Agencies Notified	ype Notification	n		1 0 . "	Address	Λ:	IIU			
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Name of Facility Where Ab	sternent is Taki	ng Place	(3)	P-1916	CALITY INFORMAT	1-11-11-11	Type of Facilit	y (4)		de Antonio de la constante de
				and the same of th			School (1		400	
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City (5)			nestrate apendo	dary denientation of the			Square Feet	# of Floors		Bldg.
ELIZAB	eth	COM	. •			·	3,000			Blog.
County (6)	ON			County	Code (7)		Current Usa (F	Prior If being demoil HOUSE	snea)	
Name of Monitoring Firm Hi		Owner (8)	ASC	M No.	1	of Abatement C		<u>in in an an</u>	Name and Company
							<u>naigh</u>	100		-11-2-1-00
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City, State, Zip Code	audius providenci się się a tentricki sy new chode com mon	ere menderen angelere et en elektris		ildanistani ili phidostroni	, kanan dan salam sang sa Aging penjangan kanan penganakan berbahan dan dan dan dan dan dan dan dan dan d	City, S	Bride	0 · C.U	889	7
Project Manager for Monitor	ing Firm	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		Telepho	one No.	and the second of	one Non Q	License	The state of the state of	
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Date of Notification (1) 12/19/17					f Building AD OF				-		020				
Agencies Notified	Type Notification	<u>S</u> (0		Street A 620 O	ddress CEAN A	AVE	1,949				ASBEST(OS CO DENS		ROL	&
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Name of Facility Where A	Abatement is Takir	ng Place (3)		FACI	LITY INF	ORMAT	ION	Typ	e of Facility	(4)			11/20 == 0		
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Street Address 620-624 Ocean Ave	9							x	Subchapter Other (i.e. petc.)				dings	home	es,
City (5) Long Branch					#3.5e			Squ	iare Feet	# o	f Floors	В	Bldg. A	\ge	
County (6) Monmouth				County ((STATE L	Code (7) USE ONLY)		Cur	rent Use (Pri	or if bei	ng demolis	hed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	I No.	0.531/5			oatement Cor AD PROFE						
Street Address							Street 6 Wh		ess DOVE C	OURT					
City, State, Zip Code									Zip Code OOD, NJ 0	8701					
Project Manager for Mon	itoring Firm			Telephor	ne No.		Teleph 732-		No. 9078		License N 1200	lo.			
Start Date (10) 12/20/17		Scheduled 12/26/17		pletion (Date (11)				SHA Monitor AD PROFE	SSIO	NALS				
Occupancy Status During							Street 6 W/F		ess DOVE CO	OURT					
Facility Closed/Vaca Abatement Performe X Other – Describe: _	ated During Entire and Outside of Norr	Period of Ab nal Facility F	atem lours	ent			City, S	tate,	Zip Code	999999					
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City, State NEWARK, NJ						Dispos 12/26	sal Date 3/17		City, Stat BETHL		1 PA				
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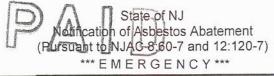
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Name of Facility Where A	Abatement is Ta	iking P	Place ((3)					ype of Facility (
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Street Address								×		vate and commer	cial bui	dings	1	
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Camden								- 1		merial Space				
Name of Monitoring Firm	Hired by Buildi	ng Ow	ner (8	3)	ASCM N	Vo.	Name of Abaten	nent	Contractor (9)					
PARS Environment	tal, Inc.						Shade Envi	roni	mental, LLC					
Street Address							Street Address							
500 Horizon Drive,	Suite 540						623 Cutler A	Avei	nue					
City, State, Zip Code							City, State, Zip	Code	е					
Robbinsville, NJ 08	3691						Maple Shad	le, N	NJ 08052					
Project Manager for Mon				Tele	phone I	No.	Telephone No.			License No.				
Rafael Torres					9-890-		856-755-009	99		00842				
Start Date (10)	S	chedul	led Co		tion Dat	12-28-20-2	Name of OSHA	Mor	nitor	71 - 7				
01 /04 /	12.5			95,000	_ / _		EMSL Analy			9				
Occupancy Status During	g Abatement (C	heck o	only o	ne)			Street Address							
							200 Route 1	130	North				1.55	
Abatement Performed							City, State, Zip	Code	е					1 -
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Scope of Work (Check a	Il that apply)									201 A 101 A				
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City, State							Disposal Date		City, State					
Voorhees, NJ							01/12/2018		Morrisville	, PA				
Completed By (Print or 1	Гуре)	Title				1	Signature		10	D	ate			
Christina Lynch		Vic	ce Pr	esid	ent of	Operatio	ns ()MAS	X	a) to		12/2	0/	17	

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

Date of No			16/17 tification			Name o		ng Owne	er / (Operator (2)		K						
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Agencies	EPA	Х	Emero	ency Notifi	ration	Street	Address				1		UE	U C	U	2017	-	기
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riamo or i				sidence		(-)			. 5	School (K-12)								
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City, State	City, State									Disposal Date			State	(See				
	ton, NJ									12/18/1	7	Morr	isville,	Pa				
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B & G proj. #: 2017-186



8736 Check # 8733

Date of Notification (1)	Name of Building Ow	ner/Operator (2)				7 7 7	=	2 proper
1 2 / 2 0 / 1 7	Somerset Hills B	Board of Edu	cation] W	E	
Agencies Notified Type Notification	Street Address			IIN				111
EPA Initial	25 Olcott Avenu	ue			DEC. 26	201	7	
DEP X DOL X Amendment	City, State, Zip Code Bernerdasville,	N.I 07924						lease of the lease
▼ DOH	Name of Contact			Telephó	Ne Nomber of	NTR	OL 8	X
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	Dan McDougal		Street Annual Control				_	
		CILITY INFORM	ATION	T= (= :::	740			
Name of facility where abatement is taking	ng place (3)			Type of Facility School	ol (K - 12)			
Administration Building (sub ch	apter 8)			=	hapter 8 (Other th	han K-	12)	
Street Address					(Private/Comme	rcial		
25 Olcot Avenue				Square Feet	# of Floors	Blo	lg. Ag	ge
City (5)	County (6)		County Code (7)					
Bernardsville, NJ 07924	Somerset		(State use only)		Prior if being dem	nolishe	d)	
Name of Monitoring Firm Hired by Bldg.		ASCM No.	Name of Abatement	Admnistration (9)	on Building			
EnviroVision	Owner (b)	ASCIVI NO.	B & G Restora					
Street Address		1	Street Address	tion, mc.				
20-21 Wagaraw Road, Buildin	ng 35E		105 Ryerson	Road				
City, State, Zip Code			City, State, Zip Code					
Fair Lawn, NJ 07410			Lincoln Park,	NJ 07035	111			
Project Manager for Monitoring Firm	Phone Num		Telephone Number (973)696-686	39	License Numb	ber		
Guillermo Morales	973-636-9		Name of OSHA Mor				-	
	Sched. Completion Date (1	11)	B & G Restora	ition, Inc.				A. Jan
** 12/23/2017 米米	12/30/2017		Street Address	Danel				
Occupancy Status During Abatement (Ch K Facility closed/vacated during entire			105 Ryerson F					
Abatement performed outside of no			City, State, Zip Code					
Describe:Other-Describe:			LincolnPark, N	IJ 07035			76	
Scope of Work (check all that apply)								
☐ Demolition	ovation		Full Containment w/ne	egative pressure		ocedu	re	
x > 3 sf or > 3 lf ≥160	sf or ≥260 If		✗ Mini-enclosure		☐ Non-friable	proced	ure	
Location of	cation normally used sole naintenance/custodial				R	R	E n	E
asbestos-containing material to be		Description material (on of asbestos-containing ACM)	Amount (Specify	SF or o	p a	С	n c
abated in facility (13)	es No N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		LF)	v	i	a p	L
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Registered Waste Hauler B & G Restoration, Inc.	19563	Cubic Yards of V 5	Tullytown	Resource & R	ecovery Cen	ter	-	
City, State Lincoln Park, NJ	Disposal 01/0	Date 02/2018	City, State Tullytown,	PA				
Completed by (Print or Type) Title		Signature	Gordana Luna		Date			
Gordana Luna Sec	retary/Treasurer		Yordana Zuna		12/20/201	7		

RECEIVED 12/18/2017 04:55PM Dec 18 2017 16:53 NJ Asbestos Control 609:633.0664 page 1 State of NJ Notification of Asbestos Abatement 2017-188 B & G proj. #: (Pursuant to NJAC 8:80-7 and 12:120-7) *** EMERGENCY *** Check # 8733 6 2017 Date of Notification (1) Name of Building Owner/Operator (2) 11 2 /11 15 1/11 17 Somerset Hills Board of Education ASBESTOS CONTROL & Agencies Notified Type Nathication Street Address ☐ EPA Initial 25 Olcott Avenue DEP City, State, Zip Code B DOL Amendment Bernerdssville, NJ 07924 M DOH Name of Contact Cancalistion Telephone Number DCA Dan McDougal FACILITY INFORMATION Name of facility where absterment is taking place (3) Type of Facility (4) Administration Building (sub chapter 8) 8 School (K - 12) Subchapter 5 (Other than K-12) Street Address Other (Private/Commargial 25 Olcot Avenue Bidgs./Homes, etc. Square Faet | # a! Floors City (6) Bldg. Age County (8) County Code (7) Bernardsville, NJ 07924 (State use only) Somerset Current Use (Prior if being demolished) Name of Montoring Firm Hired by Blog. Crumer (8) Admnistration Building ASCM No. Name of Absterner/I Contractor (9) EnviroVision B & G Restoration, Inc. Street Address 20-21 Wagaraw Road, Building 35E 105 Ryerson Road City, State, Zip Gode City, State, Zip Code Fair Lawn, NJ 07410 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm elephone Numbe Phone Number Icansa Numbe Guillermo Morales 973-636-9145 (973)696-6889 00378 Scheduled Start Date (10) Sched, Completion Date (11) Name of OSHA Monitor B & G Restoration, Inc. 12/22/2017 12/30/2017 Sireel Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vecased during emire period of absternent,
Absternent performed outside of normal facility hours-City, State, Zip Code Describe: ______ Other-Describe: LincolnPark, NJ 07035 Scope of Work (check all that apply) Demolition **Z** Renovation Full Containment w/negative pressure 🔣 Glovebag procedure 2 >3 ef or >3 if ☐ ≥160 of or ≥260 if Mini-saclosure Non-Hable precedure Location of is location normally used solely sabestos-containing by maintenance/custodial E material to be 5馀所(12) Description of asbestos-containing Amount п m absted in facility (13) material (ACM) (Specify SF or LF) P e Yes 0 NA Helway pipe runs & albows 27 - 35 H lower level girl's room pipe runs & elbows 120 - 135 lf Registered Waste House NJDEP Heut 19563 B & G Restoration, Inc. of Registered Langill 5 Tullytown Resource & Recovery Center City, State

01/02/2018

Secretary/Treasurar

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Tullytown, PA

Date 12/15/2017

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State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) 2017-186 B & G proj. #: Check # 8733 MERGENCY*** Name of Building Owner/Operator (2) Date of Notification (1) 11 |2 |/|1 |5 |/|1 |7 | Somerset Hills Board of Education Type Notification Agencies Notified Street Address DEC 26 2017 ☐ EPA 25 Olcott Avenue X Initial DEP City, State, Zip Code Amendment ASBESTOS CONTROL & DOL Bernerdasville, NJ 07924 Telephone Number ENSING Name of Contact X DOH Cancellation Dan McDougal ☐ DCA **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Administration Building (sub chapter 8) Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. 25 Olcot Avenue Square Feet # of Floors Bldg. Age County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) Somerset Bernardsville, NJ 07924 Admnistration Building Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) EnviroVision B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 20-21 Wagaraw Road, Building 35E City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Fair Lawn, NJ 07410 License Number Telephone Number Phone Number Project Manager for Monitoring Firm (973)696-6869 00378 973-636-9145 Guillermo Morales Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 12/22/2017 12/30/2017 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) 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: Scope of Work (check all that apply) Full Containment w/negative pressure ★ Glovebag procedure | Renovation Demolition Non-friable procedure Mini-enclosure >160 sf or ≥260 lf X >3 sf or >3 lf E Is location normally used solely E e Location of n by maintenance/custodial Amount n Description of asbestos-containing m p asbestos-containing C staff(12) (Specify SF or C 0 material to be material (ACM) a L V abated in facility (13) Yes N/A No X 27 - 35 If pipe runs & elbows Hallway 120 - 135 If X pipe runs & elbows lower level girl's room Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# Tullytown Resource & Recovery Center 19563 B & G Restoration, Inc. Disposal Date City, State Tullytown, PA 01/02/2018 Lincoln Park, NJ

Signature

Secretary/Treasurer

Ciordana Luna

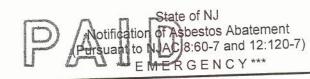
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B & G proj. 6: 2017-185	(Purst		estos Abatement :80-7 and 12:120-7)	Check	DEC	2 6 201	7
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Guillermo Morales	973-630		(973)896-6 Name of OSHA M	-	00378	3	
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Other-Describe:			LincolnPark.	NJ 07035			
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B & G proj. #: 2017-188



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Jersey City, NJ		Huds	-			-115	Name of Abatemen	school (r		3)			
Name of Monitoring I	Firm Hired by Bld	g. Owner	(8)		ASCM No.	-							
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Street Address						118	105 Ryerson	Road					
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City, State, Zip Code							Lincoln Park	, NJ 07035					
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Project Manager for N	Monitoring Firm		1 11011	0 1401110	~,		(973)696-68			00378			_
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Occupancy Status D	uring Abatement	(Check on	ily one)	ont		11	City, State, Zip Coo						
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City, State Lincoln Park, NJ					2/2017		Tullytov	wn, PA		Date			V.
Completed by (Print or Type) Title Signature						Gordana Lus	na		12/20/2	017			
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Dec 20 2017 15:48 NJ Asbestos Control 609.533.0664 page 1			F	ECEIVED 12/20/	2017 03 :49PM	
Date of Notification of Asbestate Anathematic (Pulsisisman, Name of Building Owner) and 12:102-7) Date of Notification (1) L12 1/2 19 1/L 12 L12 L12 L22 L23	Dec 20 2017 15:48 NJ Asbestos	Control 609,633,066				GELVEID
Date of Notification Till 1 1 1 1 1 1 1 1 1	B & G proj. d: 2017-188	(Pursuant	tion of Asbes	tos Abatement 0-7 and 12:120-7)	The second secon	34
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DoL	Agencies Notified Type Notification EPA	Street Address 2495 Kennedy B	ter School			
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Street Address Z495 Kannedy Boulevard County (6) Jersey City, NJ 07305 Name of Monitoring Firm Hirsd by Bidg. Owner (8) N/A Street Address City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 Project Manager for Monitoring Firm Phone Number City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 29 C666 City, State. 20 C66	Name of traffic where abeternent is tak	ing place (3)			8chopl (K	- 12)
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Name of Menitering Firm Hired by Edg. Owner (8) ASOMNO. Name of Menitering Firm Hired by Edg. Owner (8) ASOMNO. Name of Abstantial Contractor (6)		County (6)	THE REAL PROPERTY.	County Code (7)	Guerra (tea (Print	(Pholog demolished)
Name of Abatement Contractor (6) R & G Restoration, Inc.		Hudson		(State use only)	school (non su	b 8)
N/A Street Address City, State, zip Code City, State, zip Code Project Manager for Monitoring Firm Scheduled Start Date (10) 12/12/12017 Cocupancy Status During Abstament (Check only one) Facility closed-viscated during entire period of abstament. Describe: City State, zip Code Lincoln Park, NJ 07035 Telephona Number (973)696-8899 Name of OSHA Monitor 12/12/12017 Cocupancy Status During Abstament (Check only one) Facility closed-viscated during entire period of abstament. Describe: City State, zip Code Lincoln Park, NJ 07035 Telephona Number (973)696-8899 Name of OSHA Monitor 10 State (10) State (1	Jersey City, NJ 07308		I ASCM No.	Name of Absterne		
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Encount Project Manager for Monitoring Firm Phona Number P	Street Address			The state of the s	The second secon	
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12/21/2017 12/22/2017	Description Start Date (10)	School Completion Date	(11)	B&G Rest	oration, Inc.	i i many
Company Status During Abstament (Chack only one) Facility closed/vscated during entire period of abstament, Abstament performed outside of normal facility hours- Describe: City, State, Zly Gode LincolnPark, NJ 07035				Street Address	20.	
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Describe: City - Describe: LincolnPark, NJ 07035	A debut become as	Hire period of sostement.		City, State, Zip C	pde	
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Name of Facility Where Abatement is Taking F)i=ce (S)	F	ACIL	TA INFORM	THUR	Type o	Facility (4)			-		phonon
RECIODICE Street Address				_	-		mer (Le. pri	(Other Dan K-12) vals & commerda	l bulldi			i,
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City, State, Zip Code		T Tal	ephon	s No	Mic		ark, NJ 07	432 License N	0.			
Project Manager for Monitoring Firm Start Date (10)	Schedulae				20 Nan	1-262-5	841 A Monitor	00158				
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Scope of Work (Chack All That Apply) 23 of or 23 if 2160 of or 2250 if		enovation				MI	nt-Enclosure	ant with Negative F adem (M) and Non-Friat			.	
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Newark, NJ 07105				1	12/13/	<u>In</u> 9	Hen Ar	pyl. PA 08702	Ista			_
Completed by	Title				Signs	かれず音	1 .	1		110/		

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Date of Notification (1) 12/15/17	Check #	3107			Building Own				School		DEC	26	20	17		
	ype Notification		+	Street Ad	Idress						and the second second	assessiones-2	270000	no-40/45889464		
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DEP DOL	Amendment		_		us, NJ 076						ALL CONTRACTOR OF THE PARTY				and the same of th	d
□ DOH	Emergency (justification)	including		Name of	689					Tele	phone N	lumbe	er			
☐ DCA ☐	Cancellation	_1_		- Maleria	gene Fiel	Waw	N									
Name of Facility Where Ab	atement is Taking	g Place (3)	FACIL	ITT INFOR	WATIO	N .	Тур	e of Facility (4	1)						
Visitation Academy								X	School (K-12		r than V	10\				
Street Address 222 N Fairview Ave								X	Subchapter Other (i.e. pr	rivate 8	comme	rcial b	uildi	ngs,	home	s,
City (5)								Squ	etc.) iare Feet	# of	Floors		Ble	dg. A	ge	
Paramus					- Value				,000	2)+		
County (6) BERGEN				County C	Code (7) ISE ONLY) _				rent Use (Prio hool	r if bei	ng demol	lished)			
Name of Monitoring Firm H	lired by Building (Owner (8)		ASCM	No.		Name		patement Con	tractor	(9)					
Omega Environment		7250							ices Corpo	ration						
Street Address						1 2	Street		ess Street							
280 Hyuler Street City, State, Zip Code								-	Zip Code							
South Hackensack									rg, NJ 070	93						
Project Manager for Monito	oring Firm			Telephon	ne No.		Teleph		No. -1700		License 01074					
Alex Palets Start Date (10)		Schedule	ed Cor	mpletion E	Date (11)				SHA Monitor		0107		_			_
12/27/17		12/30/	17				Sam	e as	above							
Occupancy Status During						1	Street	Addr	ess							
Facility Closed/Vacate Abatement Performed Other – Describe: St	d Outside of Norm	Period of A nal Facility	Abater Hour	nent s		.	City, S	State,	Zip Code				<i>(216</i>		10000	
Scope of Work (Check All	That Apply)															
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Room 10)9	100	X	1377		Plaste	er cei	iling		6	0 SF	2	ζ.			
Name of Registered Waste	e Hauler		1.35	VJDEP W Hauler ID	100000000000000000000000000000000000000	Cubic Y			Name of							
Tri-State Transfer Ass	soc			19551	t	tbd		0.00	Minerva		erprises	5				
City, State						Disposa tbd	al Date	3	City, Stat Wayne		ОН					
Bronx, NY Completed by		Title					gnatur	e//	2/7			Date				
Gina Betances		Offic	e ivia	nager				K	Vina).—		12/	15/	17		

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Date of Notification (1) 12/18/17				of Building Constru		Operator	r (2)				DEC	26	_20	17
Agencies Notified Type Notification EPA Initial	on			Address Park Ave)					ASB	ESTO LIC	S C(ENS	NTF NG	10L 8
DEP Amended Amended Amendme				ate, Zip C vood, N		1	11.00						MIDLENGE	
X Emergenci justificatio Cancellati			Name o	of Contact					Tel	enhono N	, makar			
			FAC	ILITY INF	ORMAT	ION								
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Street Address 247 Ramtown-Greenville Rd					Himes-1		×	School (K- Subchapte Other (i.e.	r 8 (Oth			ldings	, hom	ies,
City (5) Howell							200.00	etc.) Jare Feet 000	# 0	Floors		Bldg.	Age	
County (6) Monmouth				Code (7) USE ONL	r)		17 (22 10)	rent Use (Pr	ior if bei	ng demoli	shed)			
Name of Monitoring Firm Hired by Buildin	g Owner (8)		ASCI	M No.				patement Co						
Street Address						Street	Addr	III. CONTRACTOR III. CONTRACTOR III.						
City, State, Zip Code			- 11 - 11 - 13 - 13 - 13 - 13 - 13 - 13					Zip Code	8701					
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph 732-6	none	No.		License 1200	No.				
Start Date (10) 12/21/17	Schedule 12/28/1		mpletion	Date (11)		Name	of OS	SHA Monitor						
Occupancy Status During Abatement (Che	28 (1)					Street	Addr	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe:	Period of A mal Facility	baten Hours	nent s			City, St	tate,	DOVE C						
Scope of Work (Check All That Apply)						LAKE	= ٧٧ (OOD, NJ 0	18/01					
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Location of Asbestos-Containing Material (ACM)	Used	ormal Sole	ly by	Achae		scription		al (ACM)	^-	nount	-	1)	ре	
TO BE ABATED In Facility (13)	200 (0)	ntenar odial S (12)			thermal surfa	systems cing, VAT niscelland	insu T, or	lation,	(S	pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								a	,	ate	re
EXTERIOR					(full de	emo)Ro	ofin	g	40,0	00 SF	х			
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Name of Registered Waste Hauler NEWARK CARTING		H	JDEP W auler ID 1509		of Was 120	Yards ste		Name of IESI	Register	ed Landfi	I			
City, State NEWARK, NJ					Dispos 12/28	al Date /17		City, State		PA				
Completed by JOSEPH PERLSTEIN			S	ignature				D	ate		11123			

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Date of Notification (1)						Owner/Operator (2		DEQ 2	152	34	511	7
	20 /	17		Lerto	ch Wreck	king & Disposal				1	7	
Agencies Notified	Type Notificati	ion		Street A	Address			ASBESTOS	CON	TROI	_&	
⊠ EPA				PO	Box 1362	2		LICE	NSIN	<u> G</u>	certinesserer	CONT. INSPER
⊠ DOLWD	Amended Amendmer	#		City, St	ate, Zip Co	ode						
☑ DOH ☐ DCA	Emergency		1	Wall	, NJ 0771	19						
(NJAC 5:23-8)	justification		,	Name o	of Contact			· · · ·	7			
*************	☐ Cancellation	n		Dou	g			P 0.0		5		
				FAC	ILITY INF	FORMATION						
Name of Facility Where A	batement is Ta	king Place	(3)				Type of Facilit					
Residence							School (K-	12) r 8 (Other than K-12)	i			
Street Address							Other (i.e., homes, etc	private and commer	cial bui	ldings	;,	
City (5)		- 24					Square Feet	# of Floors	Bld	lg. Ag	е	
Wall							1800	1	6	55		
County (6)				Count	ty Code (7)	(STATE USE ONLY)	Current Use (I	Prior if being demolis	hed)			
Monmouth							Residence	е				
Name of Monitoring Firm	Hired by Buildi	ng Owner	(8)	ASCM N	No.	Name of Abateme	ent Contractor ((9)				
Guardian Contraction	ng, Inc.					Guardian Co	ntracting, Inc	Э.				
Street Address						Street Address						
1889 Rte. 9, Unit 61						1889 Route 9	9, Unit 61					
City, State, Zip Code						City, State, Zip C	ode					
Toms River, New Je	ersey 08755					Toms River,	New Jersey	08755				
Project Manager for Moni	toring Firm		Tel	ephone N	No.	Telephone No.		License No.				
Nicholas Fernicola			1.0	32-349-		732-349-9932	2	00624				
Start Date (10) 01 / 03 /	0.00000	cheduled 0		etion Dat 5/		Name of OSHA N E.M.S.L. Ana						
Occupancy Status During	Abatement (C	heck only	one)			Street Address						
☐ Facility Closed/Vacate				ement		1056 Stelton						
☐ Abatement Performed	Outside of No	rmal Facili	ty Hou	rs - Des		City, State, Zip C	ode					ME211112
Time of Abatement: _	AM	PM/	PN	l	AM	Piscataway,	New Jersey	08854				
Scope of Work (Check al ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	I that apply)		enova			☐ Mini-End ☐ Gloveba	closure ag Procedure	Negative Pressure	ire			
		l I	s Loca						Ab	ateme	ent T	ype
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IN Facili		Cu		Staff?	(surfacing, VA7	Γ, or	SF or LF)	<u>a</u>	,	sula	ure
(13)			(12	1	-	other miscelland	eous)				ite	
		Yes	1000					00.15				
basement		$ $ \Box			asbesto	os pipe insulati	on	90 If				
										Ш	Ш	1
Name of Registered Was	te Hauler		-	NJDEP	Waste	Cubic Yards of	Name of Re	egistered Landfill				
Guardian Contract				Hauler II		Waste 5	T.R.R.F.					
City, State				20223		Disposal Date	City, State		7-1-1			
Toms River, New J	ersey					01/05/18	Tullytov	vn, Pennsylvania				
Completed By (Print or T		Title				Signature	1	1	ate	1	1	
Nicholas Fernicola		Projec	ct Ma	nager			\ \ \ \ \ \ \	ent	12	120	11-	7

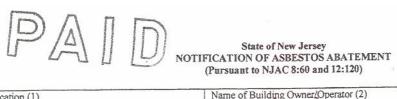
Date of Notification (1)	P		State of New Je. CATION OF ASSEST Arsuger to JAC 8:60				G [EC	<u> </u>	<u>V</u>	
12/11/7		N	ame of Building Owne	r/Operator	(2)					
Agencies Notified Type Notificati	on	Si	treet Address			ASBE	STO	S.CO	NTR	OL&
EPA Di Initial Di Amended			On Bry	1 69		Transmission textrescons	LICI	ENSI	NG	
DOL Amendme	(including		School Sc	e so	80	Telenin	,, ,)
Name of Facility Where Abatement is Taking	Place (3)		FACILITY INFORM	ATION	I T 6 P - 7 :-			_		
Resident	, 1 1000 (3)		Ċ.		Type of Facilit	5 (35.0				
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Name of Monitoring Firm Hired by Building (wner (8)	A	SCM No.	Name o	of Abatement Cor	1 1 1	7	11		1
Street Address	-			Street A	ddress 1	hatement j	/\ Liu	7:11	1271	111
Cine State Zin Code				121	2 Bullin	Elen P	The	_		
City, State, Zip Code					ate, Zip Code	NITO	: i	. 77		
Project Manager for Monitoring Firm	-	Telep	phone No.	Telepho	<u> VLICO</u> ne No. K344-C	License				
Start Date (10)	Scheduled	Completion	1 Date (II)		OSHA Monitor	114 01				
Occupancy Status During Abatement (Check Or	5 5	11/		Street Ac	Idress					
□ Facility Closed/Vacated During Entire Per □ Abatement Performed Outside of Normal I □ Other – Describe:	od of Abate acility Hou	ment rs		City, Star	te, Zip Code			9		
Scope of Work (Check All That Apply)										
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Lecation of		ocation rmally	,					Abat	tement	
Asbestos-Containing Material (ACM) TO BE ABATED	Used S	Solely by tenance/	Asbestos Conta	cription of ining Mater	rial (ACM)	Amount			I	
In Facility (13)		ial Staff? 12)		AT, or		(Specify SF or LF)	Removal	Repair	heap	Enclosure
(13)		No NA	other m	iscellaneou	s)	6. 600-200-58	oval	Dair	Encapsulate	osure
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7 nd & 3rd Floor		17	Plaster Li	1,		10,000 SF	1/			\dashv
			Plan Fil			JUC TH	/		-	-
Name of Registered Waste Hauler									1	
ANI INE LL C		NJDEP W Hauler ID 2054	No. of Waste		Name of Reg	gistered Landfill				
City, State DC 1411CC 11.			Disposal	Date ED	City, State,	utown K	7			
Completed by Joseph T Hall.	ride V. RIE	zident.	Sign	arure)	11	Date	2/	111	1)	

m A I	State				ation of Asbestos A 8:60-7 and 12:120-7)	batem	ent	E C		77 11	7 6	
GAC Project # 060-17))	(Pursua	ant to N.J.A.C.	22		1D)-	E C		[] [Y		
Date of Notification (1)	0.0045				Name of Building Owner/C RUTGERS, THE ST	perator	PD2-	VTIP	OF N	1		
December 1 Agencies Notified		fication T	vpe		Street Address		ЦЦ	UC	VC	0 20	17	
	X	Initial N	otificat	A 100 AN	ENVIRONMENTAL I	HEALT	H & S.	AFET	Y DE	PT.		
☑ EPA ☑DCA				ication #	27 ROAD 1, BLDG 4	086, 14	IVING	42DE2	1050	TIMOS	ROL &	
☑ DOL		=merge justifica		cluding	PISCATAWAY, NJ 0	8854			LICEN	SING		CONTRACTOR OF THE PARTY OF THE
☑ DEP- No Longer REQUIRED		Cancelle		Ī	Name of Contact	NIV/	L Te	elenhon	e Niimi	her		
☑ DOH					MICHAEL SMITH, E HEALTH & SAFETY		1					
			The latest and the la	FACILITY INF	ORMATION							
Name of Facility Where Abatement is	Taking Pl	lace (3)			Type of Facility (4) School (K-12)							
KATZENBACH HALL, BLD	G# 833	5.1			Subchapter 8 (other than	K-12)						
Street Address 173 RYDERS LANE, DOUG	I ASS	CAMPI	us		Other (i.e. private & com	nmercial b	ouildings	, homes	, etc.)			
		O/MINI			Sq. Feet: 59,170	# of Flo	oors: 4	Bldg	. Age:	80+	years	S
NEW BRUNSWICK Count MI	y (6) DDLES	EX		Code (7) lse Only)	Current Use (prior if being	demolis	hed): \$	STUDE	NT RES	SIDEN	CE HA	\LL
Name of Monitoring Firm Hired by Blo	ig. Owner	(8)	ASCM N	Vo.	Name of Confractor (9)							
ATC			0098		GREENWOOD ABAT	EMENT	T CON	SULT	ANTS	, INC.	8	
Street Address					Street Address							
3 TERRI LANE					511 MAIN STREET							
City, State, Zip Code					City State, ZipCode							
BURLINGTON, NJ 0801		ephone N	umbor		BUTLER, NJ 07405 Telephone Number		T Li	cense N	lumber			
Project Manager for Monitoring Firm BRIAN KEARNY		9-386-			973-492-0477			0840				
Scheduled Start Date (10)			ompletion	n Date (11)	Name of OSHA Monitor							
12/22/17	12/	/30/17			ENVIROVISION, INC).						
Occupancy Status During Abateme	ent (Chec	k only or	ne)		Street Address							
□ Facility Closed/Vacated During □ Abatement Performed Outside of				τ	20-21 WARGARAW	ROAD						
Describe	i i i i i i i i i i i i i i i i i i i	i donity i	10010		City, State, Zip Code							
Other- Describe: Schedule: 5PM - 5AM (24 HO	IIDC 9 V	WEEKE	NDS A	S NEEDED)	EAID! AWN NI							
Schedule: SPIVI - SAIVI (24 HO	UNO &	VYLLIXL	INDO A	o Needed)	FAIRLAWN, NJ					24		
Scope of Work (Check all that apply)						Full Con	ntainmer	nt with I	Vegativ	e Pres	sure	
□ ≥ 3 sf or ≥ 3 lf				⊠ Renovation		Mini-Enc	closure					
≥ 160 sf or ≥ 260 lf				■ Demolition		Gloveba	~				rood	uro
Location of Asbestos-Containing	le I ocatio	n Normal	ly Used	Description of Asi	pestos Containing Material		mount	A		nt Type		ure
Material (ACM) in Facility (13)	Solely by	Maint./Cu		(ACM) (i.e. therm VAT, or other mis	nal systems insulation, surfaci		Specify S r LF)	SF Re	emove	Repair E	Encap	Enclose
1	Staff? (12 YES	- Marian	NA	VAT, or other this	ceii.)	0.						
B-30		X		VAT		1	500 SF	F D	3			
	1 200	DEDIV	1-111-	10.4	T = 11 11 1 2 200 1	30 C	v In	lame of	Registe	red Lar	ndfill	
Name of Reg. Waste Hauler See Hauler Below #1 & 2		DEP Was e Below		1D#	Cubic Yards of Waste:	30 C	.	3.R.O.\	N.S. N	lorth l	_andf	ill
Hauler #1) Greenwood Abatement	Consultar	nts, Inc	Butler, !	NJ 07405			/2017			ty, Stat		Mill
NJDEP # 12561 Hauler #2) Newark Carting, Inc., N	ewark, N	J 04509				12/00	12011		1000	d. Morr 9067	isville,	, Pa
NJ DEP # 4509									1100000	15-736-	1700	
Completed by (Print or Type)	Title				Signature		_	Date_		S. Legalia		_
RAYMOND C. PEDALINO	SEN	NOR P		T	Raymond C. S	Pedali	ino	De	cemb	er 12	, 201	7

punning project	P***						Check	#	30	6	7
		tate of N			cation of Asbestos A . 8:60-7 and 12:120-7)	batemen	D)_L	CE I	\mathbb{V}		
GAC Project #1060-17	7 U							EC 2 6	2017	- 11	+
Date of Notification (1)					Name of Building Owner/C				0017		
Decemb	er 11,				RUTGERS, THE ST	ATEUNIN	EKSIIY	אל או א	2011	- 1	-
Agencies Notified		Notification			Street Address		CAFETY	DEDT /F	2010		
E 50.		⊠Initial I			ENVIRONMENTAL						+
□ EPA		☐ Amend			74 STREET 1603, B	LDG 4116	, LIVINGS			_ &_	4
□ DCA		□ Emerg	jency (i	ncluding	City, State, Zip Code			LICENSIN	IG	CONTRACTOR OF THE	
X DOL		justific	cation)		PISCATAWAY, NJ	08854		46.410			
☑ DEP- No Longer REQUIRE	ED	□Cance			Name of Contact		Telephone	Number			
⊠ DOH					MICHAEL F. SMITH	<u>, ENV.</u>	-				
					HEALTH & SAFETY	,					
				FACILITY INF	FORMATION						
Name of Facility Where Abateme	ent is Tak	ing Place (3)			Type of Facility (4)						
FACILITIES OFFICE, BI	LDG#	7228			☐ School (K-12)						
					☐Subchapter 8 (other than	ı K-12)					
Street Address					Other (i.e. private & con		ngs, homes,	etc.)			
85 UNIVERSITY AVENU	JE, NE	WARK CA	AMPUS			of Floors: 2			ırs		
				Code (7)		9					
	County (6			Jse Only)	Current Use (prior if being	demolished)	: ACADEM	IC OFFICES	3		
NEWARK	ES	SEX	Totale (
										-	_
Name of Monitoring Firm Hired b		Owner (8)	ASCM		Name of Contractor (9)						
ATC Group Services L	LC		0009	8		ELIENT O	ONIGHT TA	NITO INIO			
					GREENWOOD ABAT	EMENT C	ONSULTA	NIS, INC.			4
Street Address					Street Address						
3 TERRI LANE					F44 MAIN CTREET						
					511 MAIN STREET						
City, State, Zip Code					City State, ZipCode						
BURLINGTON, NJ 0	8016				BUTLER, NJ 07405						
Project Manager for Monitoring F	-irm	Telephone	Number		Telephone Number		License Nur	nber			
BRIAN R. KEARNEY		609-386	-8800								
					973-492-0477		00840				4
Scheduled Start Date (10)			TENES .	on Date (11)	Name of OSHA Monitor	_					
12/21/17		01/03/20	18		ENVIROVISION, INC	<i>.</i>					
Occupancy Status During Aba	tement (Check only o	ne)		Street Address						
☐ Facility Closed/Vacated Dur	ring Entir	e Period of A	batemen	it	20-21 WARGARAW	ROAD, BLI	DG# 35E				
	side of N	ormal Facility	Hours -								4
Describe: Schedule: 5PM - 5	5AM Da	ily (24 HO	JRS & V	WEEKENDS	City, State, Zip Code	10					-
AS NEEDED)					FAIRLAWN, NJ 0741	10					
☒ Facility Occupied During A	batemer	nt									
Scope of Work (Check all that an	oply)	23-24019			1						
						Full Contain	ment with Ne	gative Press	sure		
				⊠ Renovation		Mini-Enclos	sure				
□ > 160 sf or > 26	in If			☐ Demolition		Glove bag	Procedure / 1	Wrap & Cut			
<u> </u>				_ Domonton		Non-Exem			Proced	ure	
Location of Asbestos-Containing	ı İsla	cation Norma	Ilv Used	Description of As	bestos Containing Material	Amour		tement Type			٦
Material (ACM) in Facility (13)		ly by Maint./C			nal systems insulation, surfaci	ing, (Speci	fy SF				-
, (,		? (12)		VAT, or other mis		or LF)	Rem	ove Repair E	ncap Er	nclose	â
	YES	S NO	NA								
BASEMENT MER	X		1	Boiler Gack	et, Roping, Insulation	n. 20 L	F 🗵		T		-
BASEMENT MER					et, Roping, msulation	', 20'	-				1
				etc. (TSI)							-
											_
Name of Reg. Waste Hauler	-	NJDEP Wa	ste Haule	r ID#	Cubic Yards of Waste:	5 CY		egistered Lan	1120725		
See Hauler Below #1 & 2		See Belo					G.R.O.W.	S. North L	andfill	1	
		ultorte I	D. 41 1	N I 07405		Disposal Da	te	City, State	<u> </u>		\dashv
Hauler #1) Greenwood Abatem	ent Cons	suitants, Inc.	- Butter,	NJ 0/405		Disposal Da		100 New		ill	
NJDEP # 12561	o Nome	el: NI 04500				4/2/2040		Rd. Morri			
Hauler #2) Newark Carting, In NJ DEP # 4509	c., ivewa	IN, 110 04309				1/3/2018		19067			
NJ DEF # 4503								215-736-1	700		
Completed by (Print or Type)	- 1	Title			Signature		Date				-
Completed by (Print or Type) RAYMOND C. PEDALIN	000000 2	SENIOR F	ROIE	C.T.		7,,	-	er 11, 201	17		
NATINGNO G. PEDALII	2007-0-0-1	MANAGE			Raymond C. Pe	edatino		, 3			
		MANAGE						AND DESCRIPTION OF THE PARTY OF			

	P	NOTA	CATION	ate of Ne I OF ASB to NJAC	ESTOS	ABATE	MEN 0)	Ol Cl	HEC	K #1	1718)		
Date of Notification (1) 12/11/2017			Name of BORC	f Building DUGH C	Owner/O	perator SSBO	(2) PRC)		EC		7	V/ [8	
Agencies Notified Type Notifi			Street A	ddress JTH MA	IN ST	REET			13					
				te, Zip Co SBORC		3028			ШЦ	DE	C 26	20)17	世
✓ DOH Emer	gency (including cation) ellation			f Contact	SABON	١E			Tel	enhana t	LICENS	INC		&
			FACI	LITY INF	ORMATI	ON					LIOLING	IIVG	-	-
Name of Facility Where Abatement is RESIDENTIAL	s Taking Place (3	3)					Ту	pe of Facility School (K-	3 8					
Street Address							~	Subchapte Other (i.e. etc.)	r 8 (Othe			lding	ıs, hor	nes,
City (5) GLASSBORO								quare Feet 500	# of 2	f Floors		Bldg 60+	Age	
County (6) GLOUCESTER			County (Code (7) USE ONLY)			rrent Use (Pr ESIDENTI		ng demo	lished)			
Name of Monitoring Firm Hired by Bu STRATEGIC ENVIRONMEN	uilding Owner (8) TAL		ASCN	No.				Abatement Co RED ENVIR			SERV	ICE	SIN	 Э.
Street Address 1634 SOUTH DELAWARE S	TREET					Street 570		ress EMS RUN						
City, State, Zip Code PAULSBORO NJ 08066						City, S MUL	State	, Zip Code CA HILL NJ	08062	2				
Project Manager for Monitoring Firm Telephone No. Telephone No. Licen 856-423-5711 610-304-4676 0114														
Start Date (10) 12/12/2017	Schedul 12/14/		npletion I	Date (11)		Name EMS		OSHA Monitor	3					
Occupancy Status During Abatement		50				Street 200		fress . 130 NOR	ТН					
Facility Closed/Vacated During I Abatement Performed Outside of Other – Describe: VACANT RE	of Normal Facility SIDENTIAL PR	Hours OPERT	ent Y					, Zip Code MINSON N	J 0807	77				
Scope of Work (Check All That Apply	')	- 10				asserine are				wire -				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	- parameter	Renova Demolit				¥	} ;	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				ure	
	Is	Locati	on									Aba	ateme	nt
Location of Asbestos-Containing Material (AC TO BE ABATED	CM) Use Ma	Normalled Sole intenar	ly by nce/				/late	rial (ACM) sulation,		mount Specify	R		Type	En
In Facility (13)	- Cus	(12)	Tan:			cing, VA niscellar			SF	or LF)	Removal	Kepair	Encapsulate	Enclosure
OLITAIDE DEDIMETED ODO	Yes	No	N/A	TDA	LOITE	110116	SE /						Ф	
OUTSIDE PERIMETER GRO		X					SIDING		0 SF	X				
FIRST FLOOR		X		SHEET			ACCOUNTS	32/18	30 SF	X				
BACK BUILDING			X		DUC	CT WR	IAP		5	SF	X	100	1.	
Name of Registered Waste Hauler		LAI	JDEP W	lasts	Cubic	Varda		None of	Dominto	20 d l 00 a	1611	_		
ASSURED ENVIRONMENTA	Н	auler ID 034895	No.	of Was			Name of MINEF		NDFIL					
City, State MULLICA HILL NJ						sal Date 1/2017		City, Stat WAYN		RG, OH	H			
Completed by RON SWANSON	Title GEN	IERAI	LMAN	AGER	S	ignature	K	well	xun 0	M	Date 12/11	201	7	

11 2017 16:50 NJ Asbestos Cor	2017 16:50 NJ Asbestos Control 609,633,066														
12/11/2017 12:00PM 1850	١ ١	AS5	URED 5	ERVICES		D)-		PA		824					
	P) /N	FIFICA	State of New Je TION OF ABBEST Want to NJAC 8:60	rsey O\$ ABA	TEMENT			DE	C :	26	03/ 20			
Date of Notification (1) 12/11/2017							CHE	CK:	#17	18					
Acondes Notes	Bo	ne of Building Own DROUGH OF G	er/Opera	tor (z) BORO		ASPESTOS CONT. LICENSING									
The Houngs	nou		\$tre	BOUTH MAIN S	- I fines	ART AND COMMON TO SERVICE OF SERV	THE PERSON NAMED IN	DRS HOWEN	-2 0 0 1	7					
DEP Amende	d		City	State Zin Code					ψ.	1					
Emergency /Including				ASSBORO NJ	08028		1	* * * *		í	_	-			
Justificat	I I I I I I I I I I I I I I I I I I I					FRANK COSSABONE Telephone Number									
Name of Facility Where Abalement is T. RESIDENTIAL	abla - Pie	78.	The same of the sa	AGILITY INFORMA						7.09.5					
	HVIII P P IN	ca (3)				Type of Fac	ality (4)			_		_			
Sirael Address						School	(K-12)	•							
GLASSBORO					Other	ubchapter 5 (Other than K-12) ther (i.e. private & commercial buildings, home (c.)									
County (8)				2		Square Fast	押	of Floors							
GLOUCESTER			Count	y Code (7) E USE ONLY)	(Prior if he		60-⊦								
Name of Monitoring Firm Hired by Buildin STRATEGIC ENVIRONMENTAL	g Owner	(8)	1	- HESIDENTIAL							id)				
Street Address		ASCM No. Name of Absternant Contractor (9) ASSURED ENVIRONMENTAL SERVICES IN													
1634 SOUTH DELAWARE STREET				Street Address 570 CLEMS RUN								10,			
City, State, Zip Code PAULSBORO NJ 08086				City. State. Zip Corto											
Project Manager for Monitories Ciam				MULLICA HILL NJ 08082											
Start Data (10)			,856-4	856-423-5717 610-304-4678				License No. 01145							
12/12/2017 Scheduled Comp				effon Date (11) Name of OSHA Monitor											
Occupancy Status During Abelement (Che	ck Only (Cent			Street A										
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other - Describe: VACANT RESIDE	Period of	Abaten	nent t		200 F	T. 130 NOF	HTF								
TENDERIVE PROPERIV					City, Sta	AMINSON	e, Zip Ccdo MINSON NJ 08077								
Scope of Work (Check All That Apply) 23 sf or 23 if						11100181	10000/								
≥160 sf or ≥280 lf	tion ion		8	Full Contains Mini-Englosu Glovebag Pro	acedura										
Location of	la Location Normally					ou () and	(°) and Non-Friat		Abatement						
Asbestos-Containing Material (ACM) TO BE ABATED	Usa Me	intenen	y by	Aspealos Conta	detien of Ining Mat	Arial (A Ann	American		-		Туре				
in Facility (13)	Cus	todial St	lest?	(i.a. mermai a	yslems maulation,		Amount (Specify		공	20	Enc	0			
	Yes	No	N/A	other mis	scallaneo	us)	SF or LF)		Remoyal	Repair	Encupsulate	Enclosure			
OUTSIDE PERIMETER GROUND	1		X	TRANSITE H	OURE	SIDINA	DING				alte	8			
FIRST FLOOR		-	X	SHEET				X							
BACK BUILDING			X		WRAP	100000000000000000000000000000000000000	260 5 S	0.00	X						
ame of Registered Weste Hauler							0.0		X	-	,]				
SSURED ENVIRONMENTAL		Hau	EF Was lier ID No 34895	of Waste	rds.	Name of F	Jame of Registered Landfill MINERVA LANDFILL								
ty, state ULLICA HILL NJ			7000	Disposal	Data	City, State				_					
ON SWANSON	Title			12/14/20	atu/a	WAYNE	SBURG	, OH							
	GENE	RALN	MANAG	BER SIGN	Toka	sel you	MOOM	Date 12	/11/20)17		-			
						The second secon									



CK 4397

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

Date of Notification (1)		IN	lame of	Building Owner/	Operator (2	2)		-) E 0		П	7\ /7									
Date of Notification (1)	1	anc or	MR. FO				Ш) <u> </u>	E	U	\mathbb{V}										
Agencies Notified Type Notification		S	treet Ad	dress				TIF	3												
□ EPA □ Initial					Ш	H DE	2	6 7	017												
□ DEP □ Amended		C	ity, Stat	e, Zip Code HESTER	-		-	atta io		-											
DOL Amendment #_ Emergency (inc	luding	- L	Jame of		Tele	phone Numb	enci	CON	2001	_											
DOH justification Cancellation	ASEN			1	P. Pich ii . S		1 1101		-&												
D DCA D Cancellation	TION					24-SI			THE STATE OF THE S												
Name of Facility Where Abatement is Taking Place		Type o	f Facility (4))																	
MR. FRASET			chool (K-12 ubchapter 8		than K-12)																
Street Address		- C	ther (i.e. pri	vate &	commercial b	uilding	zs, hor	nes, et	c.)												
City (5)		Square	Feet	1000000	Floors		dg. A														
CHESTER						-	200														
County (6)			County C	Code (7) SE ONLY)	Current Use (Prior if being demolished)																
Name of Monitoring Firm Hired by Building Own	er (8)		ASCM	I No.	Name	of Abate	ment Contra														
Thank of the state					Bes	t Ro	moval	Tn	c												
Street Address					Street	Address			5 8												
								ver	Stree	t_											
City, State, Zip Code						State, Zip															
6700		Hackensack, NJ 07601																			
Project Manager for Monitoring Firm	e No.	Telephone No.																			
Start Date (10)	ite (11)	2.01 – 3.29 – 7.44.4 00.388 Name of OSHA Monitor																			
12/29/17	117		Ome	oa E	nviro	nmei	ntal														
Occupancy Status During Abatement (Check Only		Omega Environmental Street Address																			
☐ Facility Closed/Vacated During Entire Perio		280 Huyler Street City, State, Zip Code																			
Abatement Performed Outside of Normal Facility Hours Other - Describe: 8199 SH TO \$199								22	10 EVENTAR 0												
		South Hackensack, NJ 07606																			
Scope of Work (Check All That Apply)		enovatio			,	☐ Full Containment with Negative Pressure															
≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	on Mini-Enclosure																				
		Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure																			
		_							Abatement Type												
Location of	Location ormally			Description of					_	_											
Asbestos-Containing Material (ACM)	i Solely		Asbestos C	s Containing Material (ACM) al systems insulation, surfacing,				Amount (Specify			En	m									
TO BE ABATED In Facility	1000000	odial St		(i.e. thermal s	ystems inst VAT, o				F or LF)	Remova	Repair	Encapsulate	Enclosure								
(13)		(12)	other miscellaneous)							val	Ħ.	ulate	шге								
	Yes	No	N/A							-	_										
BASEMENT/CRAWL SPACE				THERMAL SY	STOH IL	WOTTATION HON			SLF	X											
Name of Registered Waste Hauler		IDEP W	100 CO 10	oic Yards	,	Name of F	egistered Landfill														
279	Ha	Hauler ID No. of Waste 21/29 Minarys Enterpris								000	т	TC									
Best Removal Inc City, State	1710	7109 Minerva Enterprises, LI Disposal Date, City, State									1111										
Hackensack, N.J 07601			/2/18 Waynesburg, OH 44688																		
Completed by Title						Signature / Date															
J. Maiorano	Est	ima	tor			Valarano 12/19/17															

ChileT		юще	State of New Jersey FICATION OF ASBESTOS ABATEMENT Pursuant to NJAC 8:60 and 12:120)							EC		\mathbb{V}	U				
Date of Notification (1) 12/20/17		Name of Building Owner/Operator General Services Adminis								DEC	26	201	7				
	401 Market Street P							ADDEDICO CONTINCE A									
EPA Initial Amende Amendr	ed	City, State, Zip Code						LICENSING									
DOL Amendr	nent # ncy (including	-		en, NJ 08	8101		1										
DOH justifica	tion)	Name of Contact Tony Lopez															
L DOA Caricein	ation	_1		LITY INFO	RMATION	V			-				d.				
Name of Facility Where Abatement is T	Туре	of Facility (4))														
US Post Office and Court Hou	School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,																
Street Address																	
401 Cooper Street							- 6	etc.) re Feet	# of	Floors	F	Ida A	ide.				
City (5) Camden							180,		t # of Floors Bldg. Age 7 85								
County (6)			County C		Curre	nt Use (Prior	ished)										
Camden			(STATE L	JSE ONLY)		-	Offic	ces & Cou	rthou	se							
Name of Monitoring Firm Hired by Build Health & Safety Services	ASCN n/a	No.			of Abat	tement Contr	ontractor (9)										
Street Address S																	
1 9 200 000								00 Federal Street State, Zip Code									
Berlin, NJ 08009								mden, NJ 08105									
Project Manager for Monitoring Firm	ne No.	1		none No			License										
Jim Proctor	52-1311		856 630 3288 01303 Name of OSHA Monitor														
Start Date (10) 12/30/17	Date (11)	Self monitor															
Occupancy Status During Abatement (Street	Address															
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Ci							State, Zip Code										
Other - Describe: Occupied																	
Scope of Work (Check All That Apply)	7 =	l Containmer	at with	Negative	Drocen	ro											
X ≥ 3 sf or ≥ 3 lf								Full Containment with Negative Pressure Mini-Enclosure Claushag Presedure									
—								Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	Locat										Abatement						
Location of	vorma	liy		Desci	ription	of					Ty	/pe	1				
Asbestos-Containing Material (ACN	d Sole intena			s Containing Material nermal systems insula						70		En	Ш				
TO BE ABATED In Facility	todial (12)	Staff?	(1.6. t	surfacin	ig, VA	T, or	111011,		or LF)	Remova	Repair	caps	Enclosure				
(13)		(12)	_	other miscellaneous						oval	air	Encapsulate	sure				
	Yes	No	N/A														
Basement			X	VAT & Ma			stic	ic 220 sf			x						
Name of Registered Waste Hauler	JDEP W				Name of Registered La				ndfill								
Champion Dianocal				Hauler ID No. of Waste 32707 2			Grows Landifill										
City, State		Disposal	Date		City, State		Δ										
Hainsport, NJ Completed by			nature	Morrisville, PA													
Completed by Title Jeff Yekenchik Owner							//	1		1 1	12/20/	17					
							- Bours	N			_						