Date of Notification		14.2							Owner / Operator	(2)		92 40	020				
A NI-4:6:	12/23			_			ddre		of Education			9 8				_	
Agencies Notified EPA	Type N	lotification		1 85		0.00		ss ect S	troot								
	M	Initial						Zip C						***			_
☐ DEP		Amended						J 086									
이 이 이 경기를 가게 되었다.				- Inne	_		-	ntact	30				् ी _प	elepho	ne N	umb	er.
DOH □ DCA		Emergency Cancellation		100					ollins				'	перто	16 14	umb	CI
					FA	CII	LITY	INF	ORMATION				T .				
Name of Facility WI	here Ab	atement is Taking F	Place	e (3					Type of Facilit	y (4)						0.5	- 4
Grace Dunn MS		.	180000						School (K		NON SUBC	HAPT	ER 8				
Street Address									Subchapt	er 8 (Other than h	(-12)					
401 Dayton Stree	at t										ate & comme		building	s, hom	es, e	tc.)	
Dayton Street	, L								Square Feet		# of Floors			dg. Ag			
City (5)		County (6)		Co	unty	Co	de (7)									2
Trenton		Mercer							Current Use (I	Prior i	f being dem	olishe	d)				
4.000,000,000,000									School								
Name of Monitoring			vner	(8)		1	ASC	M No.									
Environmental C	onnec	tion							Bristol Envi		nental, Inc.						
Street Address 120 North Warre	n Strai	at .							Street Addres		et						
City, State & Zip Co		,,					-		City, State & Z				-				
Trenton, NJ 0801									Bristol, PA								
Project Manager for		ring Firm	Te	elen	hone	e N	umb	er	Telephone Nu			Lic	ense Nu	ımber			
Jim Frisbee			60	9-	392-	42	00_		_			00	509				
Scheduled Start Da 12/26/1		Scheduled Co			on Da 0/13		(11)		Name of OSH Bristol Envi								
Occupancy Status		Abatement (Check		20 V E 17 V		_			Street Addres			er te					
		ated During Entire							1123 Beave								
	Perforn	ned Outside of Norr	mal	Ηοι	urs -	7a	ım to	3pm	City, State & 2								
Describe:						D .			Bristol, PA	19007	7						
Scope of Work (Ch		During Abatement 7	AIVI	το .	3:30	PIV	1					9,000					
Scope of Work (Cit	eck all	насарріу)									Full Contai	nment	with Ne	gative	Pres	ssure	Э
≥3 sf or ≥3	If		5	ZI.	Re	nov	vatio	n		Ħ	Mini-Enclos	sure					
≥160 sf ≥26			Ē	i			litior			Ħ	Glove Bag	Proce	dures				
Z =100 01 =20	20.11		_	_						\boxtimes	Non-Exem			Friable	Pro	cedu	ure
L	ocation	of	1	Is	Loca	tior	n		Description					Aba			
	tos-Cor		N		nally				Asbestos-Cont	aining		(Sp	ecify				T
Ma	terial (A	CM)			olely				Material (AC			SF c	or LF)	₂₀	1000	Encapsulat	ш
	BE ABA		3 1 1 2 2 3 3 3 3 3		tena		2012/2012/2014		(i.e., thermal sy					Remova	Repair	cap	Enclsoure
1	n Facili	ty	Cı	usto	odial		aff?	1	nsulation, surfac					OV8	air	sul	100
	(13)		V	es	(12) No		N/A		or other miscella	aneou	(8)			<u>=</u>		ate	G,
A 27 9 D 4				7		+			Nailcret		-	3/16	SF	\vdash \sqcap	\Box		+
A-37 & B-4			++	╡┤		+	H		VAT	-			SF		H	H	H
A-37 & B-4			+-	4	-		屵		VAI	-		340	3 31		H	H	H
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		and the second	++	+	님		Н					-	-	+Η	H	H	Ħ
Name of Degisters	d Mast	Laulor				ID		Vaste	Cubic Yards	Nam	e of Registe	red I	andfill				
Name of Registere	u vvasie	e naulei			121.64			No.	of Waste	Ivaiii	e of registe	icu L	ariann				
Service Transpo	rt Inc.					099		, 140.	2 Cu yds.	Gro	ws Landfil	I					
City, State									Disposal Date		State						
New Castle, DE									12/30/13	Mor	risville, PA	\		15			
Completed By (Prin		oe)			1 10000	itle			Signature	11)			Date		_	
Gino Pizzigor	ni				50.0		ect		M.		4			12/2	3/1	3	
					18	ian	nage	i.	xur	50	2 8						

GI 13194

Job #: 1109-1594 Check #: 3448

Date of Notification	(1)		Na Ca	ame o	of Build	ding Ov	vner / Operator (iates, c/o Edward	(2) D. Sheehan, E	sq.	11	*			
Agencies Notified EPA	Type Notifica	ition	St	reet /	Addres	ss							1	
☐ DEP ☑ DOL	☐ Initial		C	amde	ate & n, NJ 0 of Con		de		DEC	2 / L-	ephone	Nij	mber	
□ DOH □ DCA		gency ellation	100			heehan				, , , ,			, 1	
				FAC	ILITY	INFO	RMATION						. 7	
Name of Facility W Camden Plaza Hotel	here Abateme	ent is Taking Pla	ace (3)				Type of Facility School (K-	12)						
Street Address 500-510 Cooper Stre	net .						Subchapte Other (i.e.	er 8 (Other that private & com	n K-12) mercial	buildings,	home	s, etc	c.)	
500-510 Cooper 500	7G1						Square Feet	# of Floo		Bldg	g. Age			
City (5) Camden	*	County (6) Camden	Cou	inty C	ode (7	7)	75,000 Current Use (P Vacant	rior if being de	emolishe	85 y ed)	ears			
Name of Monitoring	g Firm Hired b	y Building Own	er (8)		ASC	M No.	Name of Abate Asbestos and N	ement Contraction Services,	tor (9) Corp.					
Street Address							Street Address							
PO Box 316 City, State & Zip C Thorofare, NJ 08086						-	City, State & Z Hainesport, NJ	ip Code						
Project Manager fo	or Monitoring F	Firm	0.000		Numb	er	Tolophone Nu		Lic	ense Nur	nber 00862			
Dave or Steve Flani Scheduled Start D 1/9/14		Scheduled Con	856-84 npletio				Name of OSHA							
Occupancy Status	During Abate		nly one	e) of Aba	ateme	nt	Street Address 107 Haddon Av							
		outside of Norma					City, State & Z Westmont, NJ							
Scope of Work (C	22-75-70 A.S.	nnly)												
		PPI)		_		na.o		Full Cor		nt with Neg	gative	Pres	sure	
≥3 sf or ≥3 ≥160 sf ≥2					novatio molitio		, i		ag Proc	edures				
2100 SI 22	200 11		KZ	50.				Non-Ex		and Non-F	_			
	Location of			Locat			Description Asbestos-Cont		1	nount pecify	Aba	teme	ent I	ype
	estos-Containi aterial (ACM)	ng		olely	Used by		Material (AC	CM)		or LF)	, D	_	Enc	m
	BE ABATED		570300000000000000000000000000000000000		nce or Staff?		(i.e., thermal sy nsulation, surfac	stems ing VAT			Remova	Repair	Encapsulate	Enclsoure
	in Facility (13)		Cust	(12)			or other miscella	aneous)			<u>va</u>	Ŧ	ulate	l e
			Yes	No	N/A		00000		100 SF			П	П	П
Roof			ዙ	H		Roofin	ng		100 31					Ö
					\boxtimes							무	무	믐
			뷰	H		-						日	占	甘
			H	占	\boxtimes					7000	X	日	P	H
				무		-						H	H	怡
Name of Register	red Waste Hau	uler		1			Cubic Yards of Waste	Name of Reg	istered	Landfill				0.0000000000000000000000000000000000000
Horizon Disposal					226		4	GROWS						
City, State Trenton, NJ							Disposal Date 1/10/14	City, State Morrisville, P	A		Date			
Completed By (P				1,5000	itle . dmin		Signature				12/2	3/13		

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

Date of Notification (1) December 23, 2013	88				Name of Buil		Operator (2)					
Agencies Notified		Notification	Type		Street Addre					-		
(X) EPA () DEP		(X) Initial N	otification ed Certifica	ation	4 Paradise R	load	1	£10.	. L	EC 5]	
(X) DOL (X) DOH		() Cancelle	ed							**		-,
() DCA		1			Paulsboro, N			! Tel Nu			· # 2	
(/ 2 3					Name of Con Nick Antonio			: I GI NI	mner.			1
	2000 HELD			FACILITY IN	NFORMATION							
Name of Facility Where Al	batement is 7	Taking Place (3)		Type of Facil	ity (4)		DF.	. 2	7 201	_	-
			 		() School (K	-12)				Z 200	3	f
NUSTAR Asphalt Refinery	<u>/</u>				() Subchapt	er 8 (other t	han K-12)					j
Street Address					(X) Other (i.e.	. private & c	ommercial blo	igs., home	es, etc.			
4 Paradise Road					Sq. Feet	# 0	f Floors					
City (5)	County (6)		County (Code (7)		" °	1 10015		_			
				se Only)	Bldg. Age							83 ju
Paulsboro	Gloucester		3 months and a second	- mile-seconos (Vol.	Current Use (prior if being	g demolished)	: Instrum	ent & \	Velding	Shops	
Name of Monitoring Firm I	lired by Bldg	. Owner (8)	ASCM N	<u>lo.</u>			Name of Co	ontractor (9)			
N								27 22 1812	1/282	27 8335		
None Street Address			L		T 04		Brandenbu	rg Industri	al Sen	rice Cor	npany	
Street Address					Street Addres	<u>is</u>						
					2217 Spillman	n Drive						
City, State, Zip Code					City State, Zip							
					20, 200, 20,							
					Bethlehem, P	ennsylvania	18015					
Project Manager for Monito	oring Firm	Telephone I	Number		Telephone Nu	ımber		License	Numb	er		
					1							
Scheduled Start Date (10)		Scheduled (Completion	Doto (11)	Name of OSH	A Monitor		00721				
January 13, 2014		January 18,		Date (11)	Name of OSF	IA IVIONITOI				8.		
		canaary ro,	2014		Brandenburg	Industrial Se	ervice Compa	nv				
Occupancy Status During					Street Addres							
(X) Facility Closed/Vacated												
() Abatement Performed (Outside of No	ormal Facility I	Hours -		2217 Spillman							
Describe_Immediate work	area to be ve	sected during	ahatamani	67	City, State, Zi	<u> Code</u>						
activities	area to be va	icated during	abatement									
					Bethlehem, Pe	ennsylvania	18015					
Other -					Dominorio, i	Jimoy Ivania	10010					
Describe				1		75	=======================================					
Source of Work (Check all	that apply)					S#						
() Demolition () Reno	wation											
(X) Large Proj. (>160 SF or		M) () SM Pro	ni (>25<16	50 SF or >10 <26	SOLEACM) (\ Minor Pr	oi. (<25 SF or	<101E A	CR#\		-	
() Full Containment with I	Negative Pre	ssure () I	Mini-Enclos		ovebag Procedu		oj. (420 Oi Oi	TIOLI A	Olvi)			
Location of Asbestos-		tion Normally		Description of			Specify SF or	LF)	Abater	nent Ty	ре	
Containing Material (ACM)		by Maint./Cus	todial	thermal system								
Facility (13)	Staff?	(12) NO	NA	surfacing, VAT miscell.)	, or other				Rem.	Rep.	Encap I	Enclose
West Bridge Area	- 123	T NO	X	Pipe Insulation		200 lf			X	Kep.	Liicap	Ticlose
vicet Bridge / Hou				1 ipo modiación		20011			^-			<u> </u>
									-			
							. 72					
Name of Reg. Waste Haule	<u> </u>	NJDEP Was	te Hauler I	D#	Cubic Yards of	f Waste		Name of	Reg. I	andfill	-X4-2012	
		04000			_							
Brandenburg Industrial Ser	vice Co.	21838			2			G.R.O.W				
City State							Dian Data	(Waste I				
City, State							Disp. Date		2	ity, Stat	E	
Bethlehem, PA							January 201	4	N	lorrisvill	e. PA	
Completed by (Print or Typ	<u>e)</u>	Title			Signature			Date				
	3.0				0	`	_	V				
Jennifer Strobel		Contract Adr	ninistrator	y .	(\)	$\backslash \nearrow$	1	Decemb	er 23, 2	2014		
						\supset	15					

Mail to: NJDEP-DSHW-BRRTP

401 E. State St., PO 414 Trenton, NJ 08625-0414 Telephone 609-984-6620

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

Date of Notification (1) December 19/2013	3 Check#2547	,		Name	of Building	Owne	r/Operato	r (2)								-
Agencies Notified	Type Notification				ed Heart	Chur	ch									*
EPA	I Initial	1			Address errace Av	enue)			DE	EC 2	7 2	113			i
DEP DOL	Amended Amendmen	nt #			state, Zip Co nelle Park		07662									-
DOH DCA	Emergency justification Cancellatio)		20	of Contact e Roman	0				TΔ	lenhon	Numb	er			-
Name of Facility 148				FAC	CILITY INFO	ORMA	TION			1						
Name of Facility Where A Sage Day School	Abatement is Takir	ng Place (3	3)					Тур	e of Facility	(4)						
Street Address								×	School (K-	12)						
295 Rochelle Avenu	ue							P	Subchapter Other (i.e.)	8 (Oth	er than & comn	K-12) nercial	buil	dinas	hor	nee
City (5) Rochelle Park, NJ (7660		-		3)			Squ	etc.) are Feet		f Floors			Bldg.		1105,
County (6)	77002			County	Code (7)				000	3			6	0+	nge	
BERGEN				(STATE	Code (7) USE ONLY)			Sch	rent Use (Pri	or if bei	ng dem	olished	1)			
Name of Monitoring Firm McCabe Environme	Hired by Building	Owner (8)			M No.		Name	of Ab	atement Cor	ntractor	(9)		-	-		
Street Address				001	18			_	ces Corpo	ration	1					
464 Valley Brook Av	/enue						Street 426 6		ess Street							
City, State, Zip Code Lyndhurst, NJ 0707	1								Zip Code			544 X		-		
Project Manager for Moni			_	Telepho	one No		Teleph		rg, NJ 070	93						
Jim Ruff	9741			201-4	38-4839		7.	_2'~,			Licens 0107					
Start Date (10) 12/20/2013		Schedule	d Cor	mpletion	Date (11)											
Occupancy Status During	Abatement (Chec	k Only One	3)				Street		es Corpor	ation						
Facility Closed/Vaca	ted During Entire F	Period of Al	baten	nent					above							
Abatement Performe Other – Describe: Si	tarting at 3:00 PM	nal Facility	Hours	S			City, St	ate, Z	ip Code					6		
Scope of Work (Check All	That Apply)															-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		COLUMN TO SERVICE STATE OF THE PERSON SERVICE STATE OF THE	enova emolit				×	Glo	II Containme ni-Enclosure ovebag Proc	edure						
		la l	0004					No	n-Exempted	(*) and	Non-F	riable F				
Location	of	No	ocati ormal	ly		De	scription (of					,	Abate Ty	ment pe	t
Asbestos-Containing N TO BE ABA	Material (ACM)	Used Main	Sole tenar		Asbesto	s Cont	taining Ma	aterial	(ACM)	Ап	nount					
In Facility		Custo	dial S		(i.e. th	hermal	systems cing, VAT	insula	ation,		ecify	1	9	מ	Ence	E
(13)			(12)		1.4		niscellane			SF	or LF)	Vallova		Repair	Encapsulate	Enclosure
Classroom	#11	Yes	No	N/A											ate	roi
Gladdroom	# 1 1		X	\vdash		Pipe	Insulati	ion		10	LF	x	1			
												-	1			
			li T										+	-	_	
Name of Registered Waste	Hauler			JDEP W		Cubic	Yards		Name of R	egistere	ed I and	Ifil)	\perp			
Freehold Carting Inc				auler ID I 939	No.	of Was			Waste M							
City, State PO Box 5010, Freehol	d, NJ 07728						al Date		City, State		-					-
Completed by		Title					ignature		Tullytown	Land		D-1				
Gina Salvador		Office I	Man	ager			y lattile	B	luas-	_	100	Date 12/19	/20	113		

	NOTIF	ICATION Pursuant	to NJAC	8:60 and 12:1	20)		******		_	_	
				Owner/Opera		200	gec 27	. Hij			-
ite of Notification (1) 12-24-1	3	Street A	Address .	chae I	DOT VIT		72		i.f		1
gencies Notified Type Notification				760	BRICK, F		land	1.	1:	-	ڶ
EPA Initial Amended	4	City, St	tate, Zip C	Rick.	NJ	087	D3 hone Number			-	
DOL Amendmen	(including	Name	of Contac	1 1 11	ewman.	· Telep	Holle Mallios				
DOH justification	on	IT)		FORMATION		· (4)			4	\dashv	
ame of Facility Where Abatement is Tak	ting Place (3)				Type of Facilit	(-12)					
Single family	Dw	e 11.1	5 —		School (I	iter 8 (Other e. private &	than K-12) commercial bui	idings, t	nomes		
treet Address 730 Mai	a Ste	Lec +			etc.) Square Feet		Floors	Bldg. Ag	ge		
Sity (5) 22	. 1	NT	08	1736		To see a le	demolished)	100	4 (\rightarrow	
Manasquan		Cour	nty Code	(7)	- Single		ng demolished)	well	15		
County (6) Monmouth	(0)		SCM No.		Name of Abatement	Contractor	(9)	5	In		
Name of Monitoring Firm Hired by Build	ing Owner (8)		N	A	Street Address	een	nologie				
Street Address	227				P.O. B.	· 25	*				1
P.O. DOX	33 T		05	33	City State, Zip Coo	evat	N2 (180	33	5	1
City, State, Zip Code	W?	Te	lephone N	33	Telephone No.	771	License No.	30	14		
Project Manager for Monit Sri .g Firm	loa	160	09 75	58-3365	Name of OSHA M	onitor	100		-	-	1
Start Date (10)		led Compl	etion Dat	e (11)	EPC	Techn	ologies	Inc			-
Start Date (10) 3, 3014 Occupancy Status During Abatement	(Check Only O	ne)	113		Street Address	Box 3	37				4
			nt		City, State, Zip Co	ode		85.	スユ		
Abatement Performed	of Normal Facili	ity Hours			New Eg	yp+	NJ C	00.			
Scope of Work (Check All That Apply	<i>y</i>)				≫⊠° Full Co	ntainment v	with Negative P	ressure			
3 sf or ≥3 lf		Renovat Demoliti	ion on		☐ Mini-E Gloveb	nclosure pag Proced	ure and Non-Friab	le Proce	edure		
□ ≥160 sf or ≥260 lf			—т		□ Non-E	xempted (and Non The	A	baten		
		Is Locati Normal	on		Description of		Amount		T		_
Location of	CM)	Used Sole Maintena	ly by	Asbestos C	ontaining Material (A	on,	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Asbestos-Containing Material (A	(Custodial (12)	Staff?	CI	rfacing, VAT, or er miscellaneous)		31 01 2. 7	oval	air	ulate	anne
In Facility (13)	_	-T.:-	T	J	-027700-742-8897			4-	-	-	_
		es No	INA	tosula	lian Debris	ORDIDIS	190 LF		-	-	-
Basement		X	+	Boiler	Debris		6 SF	X	+-		1
Basement		×	+	O.				+	1		
		-		1	ubic Yards	Name of I	Registered Land	fill			0
Name of Registered Waste Haule	er		NJDEP Hauler I	D No.	f Waste 2	Wast	e Manag	ener	st c	E	4
EPC Techno	logies		170	and i	Disposal Date	City, Stat	e 11/2	PA			
EPC Techno City, State New Egypt Completed by Steve Schenke	, Al	15			1-10-14 Signature	Morn	isville			4-1	1
	- 10	-			Signatute		7	1	- ~	4- 1	1.
New Egyp	<u> </u>	Title Pres	. 0 4	-	Steres	Dock	oh	100	~	•	

State of Nov Jursey NOTEFICATION OF ASSESTED ABATEME (Purposet to NAAC 8:58 and 12:128)

chick 4.839.

12-24-2013	A	LPINUE LEARNI	NG GROUP, I	WC.
Agency Holles Typo Hollins	7	77 PARAMUS	ROAD	The second secon
DEPA DEP Amondos Amondos		ARAMUS, N.	5 07652	
- R DOM - Justification	None Name	. PURCELL	Wellerholm !	
D DCA D Camerica		CLITY INFORMATION	,	
Name of Facility When: Abatismust is '	Initian Place (3)	•	Type at Fealty (4)	
ALPING LEARNIN	6 GROUP, I	N.C	C School (K-12) C Scholapter & (Cher then -B Other (As. princip & colors	K-12)
830 LINWOOD A	VENUE WES	T	factors, old.)	
CM S .	•		7500 3	113 98405
PARAMUS.	· Cen	my Code (7) (STATE USE	Current Upo (Prior F boing de	meliched)
BERGEN	COL	LY)	RESIDENCE	
Name of Manhains Firm Hind by Ball (5)	iding Owner ASCM No	, , , , , , , , , , , , , , , , , , , ,	Removal Inc	
Smit Address		Street Address	River St	
CDr. States, Zip Code	(5.7)	Con Stein 7in	Cede	01 .
Proper Manager for Manager Prin	. L. Toliphone II	Hacker Telephane No.	Isack, N.J. 076	7 01
			0038	8
1-6-2014	1-17-2014	Onega Ei	vironmental In	c ·
Opening States Dates / Statement		Sant Address 280 Huy	1	
Carrier Classed Vicented During Sali	no Period of Abalament count Booling Flours	Car. State. 200	Cade	
BOOM-DOOM 7 AM -	5 pm	South E	lackensack, N.J	. 07606
Sapp of this (Ched of Category) Classoforts F	0.6	enoration -8 libi	Containment with Magadiro Pro Englasson	
82100 der 2200 f	-01		ship Provides Scoupled (*) and Main-Friedly	Resident
	is Location			700
Anhestes Containing Mahasis (AC TO BE ASSAUR) M Basily (13)	Used Solely by Maintainment Controllal - State - (12)	Description Ashestes Containing M (i.e., thermal options subjects, VA) other missibles	of Association (ACNO) - Associ	Annapudas Roght Roght
Basement	, Yes No Ni		- 400	0 5FX
BASEMENT CRAWL PIPE		THERAMAL INSU	LATION 500	(FX
KITCHEN	X	LINOLEUM	300) SF X
Best Removal Inc	17109	Whate	Name of Registration	prises
Hackensack, l		Disposal Date	City, State	
Company To		1-17-14	1-0,7-0-0,7	Date
R. VELDRAN 1	Sstimator	R. Veldian	۸	12-24-2013

							Dec 24 1	2013 10:	OOam PO	01/001			
	NO	(Lense	NON O	heritare, m	5105 ADA :60 and 12:			NJ DE	pf. oyHealth & Si			S	
	The second secon	Na	me of E	Stuffding (himedOpen	ateur (2)	SHAH	Ell	12/24/	7	,0	2	
Date of Notification (1)	2		reet Ad		asant		<u>~</u>	1 100	200	was:			
12-23-1	Type Noincation	1		32		Oap	<u>Sir</u>			1			
EJ EPA	El Initial U Amended	C	ly, Stat	e, Zip Cr	ide 	N.5	08844		phone Number			7	
D DEP	Amendment &	-	arrie rif	Contract	,			Tels	DIRATE FALL				
**************************************	WALLES CONTRACTOR	1"	1	Pas	TUA	HAH	<u> </u>					-	
図 DCA	CI Cancellation		FACI	LITY IN	FORMATIO	N	Type of Facility	(4)				-	
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CK 4967

Date of Notification (1)			Name of I	Building Ow	vner/Op	erator	(2)							·
Agencies Notified Type Notif		100	Street Ad 4000 H	dress ADLEY F	ROA		1		DE	1 7	- 119			
DEP Ame	nded ndment #			e, Zip Code I PLAINF		NJ 0	7080							
DOH justif	rgency (including ication) cellation		Name of CHRIS	Contact TOPHER	R MOR	ENO	82		Tele	ohone Nu	umber			
Name of Facility Where Abatement P.S.E.G. Street Address	is Taking Place (3)	FACIL	ITY INFOR	RMATIO	N	☐ So	f Facility (4 chool (K-12 ubchapter)	2)	,	***	* ' b	34	y 6
422 UNIVERSITY AVE.	-						⊠ o et	ther (i.e. pr c.)	ivate &	commer	cial buil			s,
City (5) NEWARK	9						Square 17291	90.000	3	Floors	5	ldg. A 5 YF	_	
County (6) ESSEX			County C (STATE U	ode (7) SE ONLY)	1100		SWIT	t Use (Prio CH STA	TION		shed)			
Name of Monitoring Firm Hired by E ENVIRONMENTAL TACTIC			ASCM 0045					ment Cont YSTEMS			CA			
Street Address 64 BROAD STREET							Address WHITE	HEAD A	VE.					
City, State, Zip Code MATAWAN, NJ 07747							State, Zip JTH RI	Code VER, NJ	0888	2				
Project Manager for Monitoring Firm TOM GEIGER	1		Telephor 732-29			Telepl	hone No			License 0111				
Start Date (10) 1/7/2014	Schedul 1/10/2		npletion [Date (11)				A Monitor YSTEMS	S OF A	MERIC	CA			
Occupancy Status During Abateme							Address	HEAD A	VE.					
Facility Closed/Vacated During Abatement Performed Outside Other – Describe: OCCUPIED	of Normal Facility	/ Hours	S	ONLY	_	3533	State, Zip JTH RI	Code VER, NJ	0888	2				
Scope of Work (Check All That App						Г	7				_			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoli					Mini Glov	Containme -Enclosure rebag Prod -Exempted	edure				n <u>a</u>	
	ls	Locat	ion				i Non	-Lxemplec	() and	2 14011-1 11	able i it	Abat	emen /pe	t
Location of Asbestos-Containing Material (A TO BE ABATED In Facility (13)	ACM) Use	Norma ed Sole aintena itodial (12)	ely by ince/ Staff?		os Conta hermal :	system	Material is insulat AT, or		(8	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
2ND & 3RD FLOORS		X	ING	V	VIRE /	ACM	SOCK		12	20 LF	Х			
												-		
Name of Registered Waste Hauler WASTE MANAGEMENT		H	NJDEP W Hauler ID 1125		Cubic of Was	ste		Name of GROW			Ifill			
City, State ELIZABETH, NJ					Dispos TBD	al Date	е	City, Stat		E, PA		,		
Completed by CAROL RAIMO	Title OFF	ICE N	иGR.		S	ignatu	re Vrs.	Ra	ies	20	Date /	23	//	3

Print Form

CK # 4998 [

Date of Notification (1), $12/23/13$			lame of	Building O G.	wner/O	perator ((2)							7
Agencies Notified Type Notification		100	Street A	ddress HADLEY	PΩΔ				DEC					
EPA Initial Amended		.0	City, Sta	te, Zip Cod	ie			-	<i>U</i> 5-6	2 /	9		-	
DOL Amendment #		200		H PLAIN Contact	FIELD), NJ 0	7080		Tele	phone Num	her		- /	
DOH justification) Cancellation				40	BK	ASO	LE)	/	100	priorie Num				
Name of Facility Where Abatement is Taking	Place (3)		FACI	LITY INFO	RMATIC	ON	Type	of Facility (4)				-	
PSEXG - ATH	ENI	A					□ s	School (K-1	2)					
Street Address VAN VLIE	7	1	100	_			M c	Other (i.e. p		r than K-12) commercia		lings,	home	es,
City (5)	/	00	urci				Squar	tc.) e Feet	# of	Floors	В	ldg. A	ge	
County (6) D		10	County (Code (7)			, ,-	248 at Use (Pri	or if heir	g demolishe	Af,	bx .	87	urs
PASSAIL		1	STATE	JSE ONLY)	-		- 75	wi7			TA	Ti	ON	/
Name of Monitoring Firm Hired by Building O' ENVIRONMENTAL TACTICS	wner (8)		ASCN 004					ement Cor		(9) AMERICA				
Street Address						Street	Addres	S						
64 BROAD STREET City, State, Zip Code								EHEAD A	AVE.					
MATAWAN, NJ 07747								VER, NJ	0888	2				
Project Manager for Monitoring Firm TOM GEIGER			Telephor 732-29	ne No. 92-2217		Teleph	ione Mo			License No 01111	L			
Start Date (10)	Schedule	d Com	pletion	Date (11)	11			A Monitor	S OF A	MERICA				
Occupancy Status During Abatement (Check	Only On	e)	110	1017	7	Street	Addres	s		WILL COT				
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal								EHEAD /	AVE.					
Other - Describe: Occupied by	ACCEAS	sar	ajela.	tors on	ly			IVER, N	0888	2				
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23 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				-	Min	i-Enclosure	е	Negative Pr	essui	re		
						2		vebag Pro		l Non-Friable				
l costice of	100	Location			Des						timi tent		ement pe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Used	d Solel intenar	y by		os Cont	scription aining M systems	faterial			nount pecify	77		g	m
In Facility (13)	Cust	odial S (12)	staff?	(i.e.	surfac	cing, VA	T, or	uori,		or LF)	Remova	Repair	Encapsulate	Enclosure
(10)	Yes	No	N/A		outor it	inoconai	icodo)				'al		late	Ire
OPERATORS ROOM		X		ACM	Flor	RTI	Lé of	MASTIC	5	525F	X			
OUTSIDE WINDOWS		X		ACM	wix	Now	CA	LKing	(904 904	X			
Name of Registered Waste Hauler		N	JDEP W	Vaste	Cubic	Yards		Name of	Registe	red Landfill				
WASTE MANAGEMENT			auler ID 1125	No.	of Was	ste 10		GROW						
City, State ELIZABETH, NJ						sal Date		City, Stat		E, PA				
Completed by	Title	o= · ·				Signature	1			Dat	e 9/		/	
CAROL RAIMO	OFFI	CE M	IGR.				an	eal X	ais	NO 1	2/2	13,1	13	3

ate of Notification (1)	1	Job #: 9	441.1		Name of Build	ling Owner/Opera	101 (2)					1			1
	<i>(</i>				nspira Healt	hcare Network								-	
2/17/13 gencies Notified	Notification	Type			Street Addres	ss					7	į			1
jencies Notined					165 Bridgeto	n Pike		UFF 2	7 :	112		+			+
] EPA	☐ Initial No	tification			City, State, Z	p Code						i			
DEP DOL	Amended	d dment#			Mullica Hill,	N.J 08062						1			+
DOH	☐ Emerger	ncy (includ	ding	-	Name of Cor	tact			T	elepho	ne Nu	mbei	0.70	6- P	
DCA	justificat	tion)									-	• /	1	, ,	
	☐ Cancella	ation			Samuel Ver									200	
					FACILITY IN	FORMATION	Type	of Facility	(4)	-					٦
lame of Facility Whe	ere Abatemen	t is Taking	g Place	(3)			□ Sc	hool (K-12	2)						
nspira Healthcare E	Bridgeton - 2	nd Floor C	Class R	ooms F	allway			Labortor !	2 (Oth	er than	K-12))	المالمان		
Street Address							⊠ Ot	her (i.e. pr	ivate	& (com	mercia	ai bui	liaing	5,	
333 Irving Avenue			93.43					mes, etc.) e Feet	# of	Floors		Blo	ig. Ag	је	
City (5)							40,00		3			30	<u>+</u>		
Bridgeton					0 1 0 0	e (7) (STATE	Curre	nt Use (pr	ior if b	eing d	emolis	hed)			
County (6)	2				USE ONLY	e(I) (SIAIL		h Center							
Cumberland						Name of Cont	_	TOO TOO	-						
Name of Monitoring	Firm Hired by	y Building	Owner	(8)	ASCM No.	AND ARROWS AND ADDRESS AND ADD		intion In							
Criterion						The Prime G	roup Remed	iation, in							
Street Address						A CONTRACTOR OF THE PARTY OF TH									
3370 Progress Way	v					4343 'G' Stre City, State, Z	in Code								
City, State, Zip Code	е					10.00									
Bensalem, PA 190						Philadelphia		Lie	cense	Numbe	er				
Project Manager for	r Monitoring F	irm	Telepho	ne Num	ber	Telephone N	umber								
Jim Weltz			215-244	-1300		1		00	858						_
JIIII AAGITE						1001									
	te (10)	Schedu	led Con	npletion	(11)	Name of OSI									
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Date of Notification (1)		Name of Building Owner/Operator (2) Rowan University														
12 -23-13					sity											
Agencies Notified Type Notification EPA Initial			Street Ad RT 322			20 20					_					
DEP Amended Amendment #				te, Zip Co oro NJ						UEG	21		•			
Emergency (in	cluding			Contact					Tele	phone	Num	ber				
DOH justification) Cancellation			Jack G						1			E .		*		
			FACIL	LITY INFO	RMAT	ION								7.172		
Name of Facility Where Abatement is Taking WESBY HALL	Place (3)				3000000		Type of Facility (4) School (K-12)									
Street Address RT 322					Subchapter of the property of	(Othe				fings,	home	es,				
				etc.)	c.)											
City (5) GLASSBORO , NJ							Square Feet # of Flo 1500 1			Floors	pors Bldg. Age 65					
County (6) ocean			County C	ode (7) ISE ONLY)			Current Use (Prior if being de				olishe	ed)				
Name of Monitoring Firm Hired by Building Ov	wner (8)		ASCM	No.		Name	of Abat	ement Conf	ractor	(9)						
355 A 100 1000						Ani 8	e of Abatement Contractor (9) & Joe LLc									
Street Address							Address 2 Burlington Ave									
City, State, Zip Code		City, State, Zip Code Delanco .NJ . 08075														
Project Manager for Monitoring Firm		1	Telephor	ne No.	-		nco .N	THE PURE PROPERTY OF THE PARTY		Licen	se No				-	
					1				0701	7010						
	30-14 1-30-14		ompletion Date (11) Name self					IA Monitor								
Occupancy Status During Abatement (Check	Only One)	Street					s								
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma								p Code								
Other – Describe:																
Scope of Work (Check All That Apply)						les.	-									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova moliti	7. S. T. T. T.		Min Glo	Full Containment with Nega Mini-Enclosure Glovebag Procedure										
		- vac	No.						Exempted (*) and Non-Fr			n-Friable Procedure Abatement				
		ocati ormall												pe		
Location of Asbestos-Containing Material (ACM)	Used	Sole	ly by	Ashes		scription taining N		(ACM)	Δι	nount				_		
TO BE ABATED	Main Custo	tenar			thermal	system	s insula		(S	pecify		Re	R	inca	En	
In Facility (13)	(Carlot 11200000000000000000000000000000000000	(12)	Aun.			icing, VA miscellar			SF	or LF)		Remova	Repair	Encapsulate	Enclosure	
(10)	Yes	No	N/A		outer i	Till Occilian	icodoj					/al	7	late	ıre	
basement Hallway			х		(ACN	d) Floo	or tile		36	50sqf	Osqft					
) () () () () () () () () () (
9																
Name of Registered Waste Hauler			JDEP W auler ID		of Wa	Yards		Name of F	875E	red La	ndfill					
J Robinson Waste			8687		40cy			Wm Of City, State						<u> </u>		
City, State Bellmawr NJ						Disposal Date TBD										
Completed by							nature Date 12-23-1						,			

PMO 200 # JOJZ

Print Form

Date of Notification (1) 12/21/13			Nam	e of Building Own	er/Operator	r (2)						_		
			Aspres Carpentry Corp											
Agencies Notified Type Notifica EPA Initial	ation			t Address Frederick St				Ū	EC 2	2-7-	2010			
DEP Amende	ed		City,	State, Zip Code										
X DOL Amenda				eret, NJ 07008	3		•		•			9		
iustification	ncy (includi	ng	_	e of Contact			- 1							
DCA Cancell			Dav	id Aspres			1 16	ephone	NUMB	er				
Name of Equility Whom Alex			FA	CILITY INFORM	ATION				_					
Name of Facility Where Abatement is T Private property	aking Place	(3)	ď			Type of Facility	y (4)	-		_		_		
Street Address						School (K	0.00000							
						Subchapt	ter 8 (Oth	er than k	(-12)					
56 Christopher St					1	X Other (i.e	ercial b	z) ial buildings, homes						
City (5)						Square Feet	elc.)							
Carteret						800 SF			Bldg. Age					
County (6)			Count	y Code (7)										
Middlesex			(STAT	E USE ONLY)		Current Use (Prior if being demolished) House								
Name of Monitoring Firm Hired by Build	ing Owner (8)	ASC	CM No.	Name	of Abatement Co	ontractor	(0)			-			
NA						ica Enterpris		(3)						
Street Address						Address	dioc c							
NA						orthfield Ave								
City, State, Zip Code							- 1							
NA						State, Zip Code st Orange, NJ 07052								
Project Manager for Monitoring Firm			Teleph	one No.	Telepho		07052							
NA		-	releptio	JII W		License								
Start Date (10)	Schedu	led Co	mpletion	Date (11)	Name	f 00114 44		01203						
01/03/14	01/07	/14	p.o.o.	· Sato (11)	NA	f OSHA Monitor	r							
Occupancy Status During Abatement (Cl	heck Only C	ne)				-								
Facility Closed/Vacated During Enti			200000		Street A	adress								
Abatement Performed Outside of N	ormal Facilit	Abate V Hour	ment rs		1000	. =								
X Other – Describe:		,			1 550	ite, Zip Code								
Scope of Work (Check All That Apply)					NA									
≥3 sf or ≥3 lf	[V]				[
≥160 sf or ≥260 lf	Parties and Partie	Renova Demoli			-	Full Containm	ent with N	Negative	Press	ure				
		- 0111011	illori			Mini-Enclosur Glovebag Pro								
					X	Non-Exempte	d (*) and	Non-Fria	able Pr	ocedu	ге			
		Locat						8		1907, 171	emen	t		
Location of Asbestos-Containing Material (ACM)		Norma ed Sole		De	escription of	f				T	ype			
TO BE ABATED		intena		Asbestos Con	taining Mat	terial (ACM)	Am	ount			m			
In Facility	Cus	todial S	Staff?	(i.e. therma	l systems in icing, VAT,	nsulation,		ecify	Re	R	nos	E		
		(12)		other	miscellane	ous)	SF C	r LF)	Remova	Repair	lsdi	Enclosure		
(13)			N/A			80			la	=	Encapsulate	ure		
(13)	Yes	No		V		1				_				
	Yes	NO		-			275.5							
Exterior	Yes	No	Х		site shing		300	SF	Х			1		
	Yes	No			site shing of flashing		300 20 s		X					
Exterior	Yes	No	Х											
Exterior	Yes	No	Х											
Exterior Exterior	Yes		X	Roc	of flashing	3	20 3	SF	Х					
Exterior Exterior	Yes	N	Х	Roc	of flashing	Name of F	20 s	SF d Landfil	Х					
Exterior Exterior Same of Registered Waste Hauler Exterior	Yes	N. H:	X X JDEP W	Roc	of flashing	3	20 s	SF d Landfil	Х					
Exterior Exterior Same of Registered Waste Hauler Exterior Sity, State	Yes	N. H:	X X JDEP Wauler ID	aste Cubic of War TBD	of flashing	Name of F	20 S Registerer W.S Lar	SF d Landfil	Х					
Exterior Exterior Same of Registered Waste Hauler America Enterprise Corp Sity, State Vest Orange, NJ	Yes	N. H:	X X JDEP Wauler ID	aste Cubic of War TBD	f flashing Yards ste	Name of F G.R.O.V City, State	20 S Registere W.S Lar	SF d Landfil	Х					
Exterior	Yes	N. H:	X X JDEP Wauler ID	aste Cubic No. of Wa: TBD Dispos	f flashing Yards ste	Name of F	20 S Registere W.S Lar	SF d Landfill	Х					

PAID \$ 200 # 5052

		1000000		ne of Building Owner/Operator (2)									
	84		Aspres Carpentry Corp										
Type Notification					li .								
X Initial					-						2 24		
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Emergency (With the second		200			Teler	hone Num	ber			
	10)								20	13			
Caricellation					ATION						1.0		
Abatement is Takin	Place (3)		TAGIL	11 110 010		Type of	Facility (4))	***	\$ 10.50 F			-
	7					TI So	hool (K-12	2)					
		-				Subchapter 8 (Other than K-12)							
								commercia	ommercial buildings, nom				
					-			# of I	Floors	Bldg. Ag			
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		TC	ounty Co	nde (7)		Section of the section of		r if bein	a demolish	ed)			
						House	е						
m Hired by Building	Owner (8)		ASCM	No.					9)				
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onitoring Firm	T	elenhone	e No	1 0000000	•			License N	0.		_	_	
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cated During Entire	Period of Ab	ateme	ent		150.54.115	State 7in	Codo						-
	nai Facility F	lours			100000000000000000000000000000000000000	State, Zip	Code						
Other – Describe:					- NA								
	_			100	- NA								
All That Apply)	F971 -				- NA	٦	0 1.		Name tive 5				111 1841
All That Apply)		novati			- NA		Containme		Negative F	Pressu	re		
		novati		11000	- NA	Mini- Glov	-Enclosure rebag Proc	e edure				-	
All That Apply)					- NA	Mini- Glov	-Enclosure	e edure			cedur		_
All That Apply)	De		on		- NA	Mini- Glov	-Enclosure rebag Proc	e edure			cedur Abate	ement	t
All That Apply)	Is L	emolitic	on on y		Descriptio	Mini- Glov Non-	-Enclosure rebag Prod -Exempted	e cedure d (*) and	• I Non-Friab		cedur Abate		t
All That Apply) ion of fing Material (ACM)	Is L No Used	molitic	on on y y by		Description Containing	Mini- Glov Non- n of Material	-Enclosure rebag Prod -Exempted	e cedure d (*) and	* I Non-Friat	ole Pro	cedur Abate Ty	ement pe	Γ
All That Apply) ion of ng Material (ACM)	Is L No Used Main Custo	ocation Solely atenan	on on y y by uce/	(i.e. th	Descriptions Containing ermal system	Mini- Glov Non- n of Material (ns insulat	-Enclosure rebag Prod -Exempted	e cedure d (*) and Ar (S	• I Non-Friab	ole Pro	cedur Abate Ty	ement pe	Γ
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All That Apply) ion of ing Material (ACM) BATED cility	Is L No Used Main Custo	ocation Solely atenan	on on y y by uce/	(i.e. th	Descriptions Containing ermal system surfacing, V	Mini- Glov Non- on of Material (ns insulat AT, or	-Enclosure rebag Prod -Exempted	e cedure d (*) and Ar (S	Non-Friate	ole Pro	cedur Abate Ty	ement	I
All That Apply) ion of ing Material (ACM) BATED cility 3)	Is L No Used Main Custo	cocation ormally Solely atenanodial St	on y y by ice/ taff?	(i.e. th	Descriptions Containing ermal system surfacing, V	Mini- Glov Non- on of Material (ns insulat AT, or aneous)	-Enclosure rebag Prod -Exempted	ecedure d (*) and Ai (S	Non-Friate	ole Pro	cedur Abate Ty	ement pe	Enclosure
All That Apply) ion of ing Material (ACM) iBATED cility 3)	Is L No Used Main Custo	cocation ormally Solely atenanodial St	on y y by ice/ taff? N/A	(i.e. th	Descriptions Containing ermal system surfacing, Vother miscella	Mini- Glov Non- n of Material and sinsulated AT, or aneous)	-Enclosure rebag Prod -Exempted	edure d (*) and Ai (S SF	Mon-Friate mount pecify or LF)	Removal	cedur Abate Ty	ement pe	I
All That Apply) ion of ing Material (ACM) BATED cility 3)	Is L No Used Main Custo	cocation ormally Solely atenanodial St	on y y by ice/ taff?	(i.e. th	Descriptions Containing ermal system surfacing, Vother miscella	Mini- Glov Non- n of Material and sinsulated AT, or aneous)	-Enclosure rebag Prod -Exempted	edure d (*) and Ai (S SF	Mon-Friate mount specify or LF)	Removal	cedur Abate Ty	ement pe	I
All That Apply) ion of ing Material (ACM) iBATED cility 3)	Is L No Used Main Custo	cocation ormally Solely atenanodial St	on y y by ice/ taff? N/A	(i.e. th	Descriptions Containing ermal system surfacing, Vother miscella	Mini- Glov Non- n of Material and sinsulated AT, or aneous)	-Enclosure rebag Prod -Exempted	edure d (*) and Ai (S SF	Mon-Friate mount specify or LF)	Removal	cedur Abate Ty	ement pe	I
All That Apply) ion of ing Material (ACM) iBATED cility 3)	Is L No Used Main Custo	cocation of the control of the contr	on on y y by loce/ taff? N/A X JDEP W	(i.e. th	Descriptions Containing ermal system surfacing, Vother miscella Roof flash	Mini- Glov Non- n of Material (ns insulat AT, or aneous)	-Enclosure yebag Prod -Exempted (ACM) tion,	cedure d (*) and (S SF	Mon-Friate mount specify or LF)	Removal X	cedur Abate Ty	ement pe	Ι
All That Apply) ion of ing Material (ACM) BATED cility 3)	Is L No Used Main Custo	cocation of the composition of t	on y y by ice/ taff? N/A X X	aste	Descriptions Containing ermal system surfacing, Vother miscella Fransite shape Roof flash	Mini- Glov Non- n of Material (ns insulat AT, or aneous)	-Enclosure yebag Prod -Exempted (ACM) tion,	Ar (S SF 300	mount specify or LF) 0 SF	Removal X	cedur Abate Ty	ement pe	Γ
All That Apply) fon of ing Material (ACM) BATED cility 3) rior erior	Is L No Used Main Custo	cocation of the composition of t	on on y y by loce/ taff? N/A X JDEP W auler ID	aste	Descriptions Containing ermal system surfacing, Vother miscellar ransite shape Cubic Yards of Waste TBD Disposal Date	Mini- Glov Non- n of Material ins insulat AT, or aneous)	-Enclosure vebag Proc -Exempted (ACM) tion, Name of G.R.O. City, Stat	And (S) SF 300 200 Register W.S L	mount pecify or LF) 0 SF SF ered Landfill	Removal X	cedur Abate Ty	ement pe	Γ
All That Apply) fon of ing Material (ACM) BATED cility 3) rior erior	Is L No Used Main Custo	cocation of the composition of t	on on y y by loce/ taff? N/A X JDEP W auler ID	aste	Descriptions Containing ermal system surfacing, Vother miscellar Roof flash	Mini- Glov Non- n of Material ins insulat AT, or aneous)	-Enclosure vebag Proc -Exempted (ACM) ition, Name of G.R.O.	And (S) SF 300 200 Register W.S L	mount pecify or LF) 0 SF SF ered Landfill	Removal X	cedur Abate Ty	ement pe	Γ
All That Apply) fon of ing Material (ACM) BATED cility 3) rior erior	Is L No Used Main Custo	cocation of the composition of t	on on y y by loce/ taff? N/A X JDEP W auler ID	aste	Descriptions Containing ermal system surfacing, Vother miscellar ransite shape Cubic Yards of Waste TBD Disposal Date	Mini-Glov Non-Material ins insulat AT, or aneous)	-Enclosure vebag Proc -Exempted (ACM) tion, Name of G.R.O. City, Stat	And (S) SF 300 200 Register W.S L	mount specify or LF) O SF or Landfill A	Removal X	Repair	ement pe	Γ
1	Initial Amended Amendment Emergency (justification) Cancellation Abatement is Taking Taking Abatement by Building of Continuous Firm Abatement (Check Continuous Aba	Initial Amended Amendment # Emergency (including justification) Cancellation Abatement is Taking Place (3) The Hired by Building Owner (8) The Scheduled 01/07/14 The Abatement (Check Only One acated During Entire Period of Abatemed Outside of Normal Facility History The Amended Amended Abatement (Check Only One acated During Entire Period of Abatemed Outside of Normal Facility History The Amended Amended Amended Abatement (Check Only One acated During Entire Period of Abatemed Outside of Normal Facility History The Amended Amended Amended Amended Abatement (Check Only One acated During Entire Period of Abatemed Outside of Normal Facility History The Amended Amen	Type Notification Initial Amended Amendment # Emergency (including justification) Cancellation Abatement is Taking Place (3) The state of the sta	Type Notification Initial Amended Amendment # Emergency (including justification) Cancellation FACILI Abatement is Taking Place (3) County	Type Notification Street Address 139 Frederick St 139 Frederick St City, State, Zip Code Cateret, NJ 0700 Name of Contact David Aspres FACILITY INFORM Abatement is Taking Place (3) County Code (7) (STATE USE ONLY) Mare of Contact David Aspres FACILITY INFORM ASCM No. County Code (7) (STATE USE ONLY) Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres FACILITY INFORM ASCM No. Mare of Contact David Aspres Taken Ta	Type Notification X	Type Notification Initial	Type Notification X	Type Notification Initial	Street Address 139 Frederick St 140 Fredrick St 140 Frederick St 140 Fredrick St 140 Fredr	Type Notification	Street Address 139 Frederick St 130 Frederick St 139 Frederick	Street Address 139 Frederick St 139 Frederick

Check# 10121

Date of Notification (1) 12–24–13			Name o	of Building Owner/	Operato	or (2)	1160	<u></u>			21	<u>~1</u>		
Agencies Notified Type No		3	Street /	Address 7th Stree			-	1-2	-	7				
⊠ DOL Am	ended endment # ergency (including	- [Cinc	ate, Zip Code cinnati, OH	452	202	27	13	T.					
IX DOH just	ification)			of Contact Rother		<i>y</i> = 1	Telephoi	Telephone Number						
Name of Facility Where Abatemen Macy's - Woodbridge			FAC	ILITY INFORMAT	ION	Type of Facility (4) School (K-12) Subchapter 8 (Other than K 12)								
Street Address 250 Woodbridge Cent	er Drive					U Subchapte	I O (Other ma	8 (Other than K-12) rivate & commercial buildings				nes,		
City (5) Woodbridge						Square Feet 50,000	# of Floo	rs	42yrs.					
County (6) Middlesex				Code (7) USE ONLY)		Current Use (Prior if being demolished) retail store								
Name of Monitoring Firm Hired by Pennoni Associates	Building Owner (8)		ASC	M No.	l .	of Abatement Co	ntractor (9)	1 00		Tna	9893			
Street Address						mouth Envi	ronnenca	1 (6)	• /-	LITIC	•			
515 Grove Street, S	uite 1B		1,		Haws Aven	ue					41-00-00			
City, State, Zip Code Haddon Heights, NJ	00035				A 19401									
Project Manager for Monitoring Firm		T	elepho	ne No.		none No		nse No.	-					
Joe Anello, Jr.		8	56-5	47-0505)	0	0398				*		
Start Date (10)	Scheduled	Comp	oletion	Date (11)		of OSHA Monitor		1.0		_				
1-6-14 Occupancy Status During Abateme	nt (Check Only One)		4-14			mouth Envi	ronmenta	11 (20	• 1	Inc	•			
☐ Facility Closed/Vacated During Abatement Performed Outside	Entire Period of Ab	ateme	ent	20	923	23 Haws Avenue , State, Zip Code								
Other - Describe:	- Control of the cont	- Iours			A 19401									
Scope of Work (Check All That App	ly)													
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	□ Re □ De	novatio molitio			Mini-Enclosure Glovebag Pro-									
	Is Lo	ocation	n				V/ ==== -1==		Abatement					
Location of	Llood	rmally Solely	1000-100		cription			. -		Ту	ре			
Asbestos-Containing Material (A <u>TO BE ABATED</u> In Facility (13)	Maint Custoo	enanc	e/	Asbestos Conta (i.e. thermal surfac other m	systems ing, VA	s insulation, T, or	Amount (Specify SF or LF	8 1100	Removal	Repair	Encapsulate	Enclosure		
Northeast stairwell		-	IVA	C1	•		en remember		-					
THE COLOR OF THE C		X		fireproof	ing		1,500		Х					
Name of Paginters d Whate Use		T 1015												
Name of Registered Waste Hauler Newark Carting		Hau	DEP W	No. of Was	te		Registered La	ndfill						
City, State		45	09	40		IESI								
Newark, NJ				1-24		City, State Beth	: lehem, 1	PA						
Completed by	Title				gnature	· V	7	Date						
Timothy E. Bryan	Vice-I	Pres	iden	it /	1	1 115	12	2-24-13						

PAND \$ 200 CK# 5051

Print Form

Date of Notification (1)		Name of Building Owner/Operator (2)																
12/20/13			Danco Construction Street Address															
Agencies Notified	Type Notification		1 6						100000000000000000000000000000000000000									
□ EPA	× Initial			PO Bo														
DEP	Amended		- 1		e, Zip Coo													
X DOL	Amendment Emergency (rville, N.	J 077	51											
DOH DCA	justification)	molading	- 1 - 3	Name of						Tale	phone Ni	ımhor	9					
DCA	Cancellation			Control of the Control	atarese					*		<u> </u>	_					
N		DI (0)		FACIL	ITY INFO	RMAT	ION	Type of Facility (4)										
Name of Facility Where	Abatement is Takin	g Place (3)																
Private property				100				School (K-12)										
Street Address								Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, h						s,				
155 Conover Rd			_					×	etc.)			1.5		ALCO COL	(80)			
City (5)								Square Feet # of F			Floors	ors Bldg. Age 50 +						
Marlboro, NJ						-		5000 SF 1					0 +					
County (6)				County C	code (7) ISE ONLY)			1-92000	ent Use (Prior	if bei	ng demoli	shed)						
Monmouth			L						rage		15)							
Name of Monitoring Fim	n Hired by Building	Owner (8)							atement Contr									
NA						77			Enterprise (Corp								
Street Address							Street		ess field Ave									
NA ·							1000											
City, State, Zip Code							Zip Code	052										
NA							est Orange, NJ 07052											
Project Manager for Moi		l elephor	ne No.		lelepi	none i	No.	}	01203	NO.								
Start Date (10)	Com	pletion D	Date (11)		Name	of OS	SHA Monitor			-								
01/04/14		01/14/14		NA NA														
Occupancy Status Durin	ng Abatement (Chec	k Only One)		Stree					eet Address									
Facility Closed/Vac	cated During Entire	Period of Aba	atem	tement NA					A									
Abatement Perform	ned Outside of Norr								City, State, Zip Code									
Other – Describe:				NA					NA									
Scope of Work (Check A	All That Apply)	7																
≥3 sf or ≥3 lf		Rer	nova	ovation					Full Containment with Negative				ative Pressure					
≥160 sf or ≥260 lf		Der	noliti	olition					Mini-Enclosure Glovebag Procedure									
									on-Exempted	(*) an	d Non-Fri	able Pro	cedur	е				
		leli	ncati	cation							Abatement							
Locatio	n of	No	rmali	у		D	Description of						Ту	ре				
Asbestos-Containing		Used Maint				os Co	ntaining I	Materi	al (ACM)	A	mount			ш				
TO BE AS		Custo			(i.e.		al system				Specify F or LF)	Ren	Re	nca	nol			
In Fac (13)		(12)	50000000			miscella			31	- OI LF)	Remova	Repair	Encapsulate	Enclosure			
		Yes	No	N/A								<u>a</u>		ate	6			
		165	140										-	-	\vdash			
Exteri	ior			X		Ro	of shing	gles		50	00 SF	Х						
-			24-2-2-2									1						
Name of Registered Wa	este Hauler		N	JDEP W	aste	Cubi	c Yards		Name of R	Registr	ered Land	fill			\vdash			
			933.5	auler ID		of W	aste		G.R.O.V			ortin)						
America Enterprise	Corp		3	2980		TBE			- 1		_arruilli			010001				
City, State							osal Date	-	City State									
West Orange, NJ						TBE	/		fullytow	n, P								
Completed by		Title	22				Signatur											
Eli Brito	ingr				12/20/13						13							

PMO \$ 200 CKH 5057

Print Form

Date of Notification (1)		Name of Building Owner/Operator (2)														
12/20/13				Danco Construction Street Address												
Agencies Notified	Type Notification															
□ EPA [× Initial		1	PO Box								-		$\overline{}$		
DEP X DOL	Amended	ш		7.1	e, Zip Code		.1							2		
X DOL	Amendment : Emergency (_	ville, NJ	0//5			1-1					_		
DOH DCA	justification)	,	-000	lame of 0					Tel	enhone Nu	mber			1		
DCA	Cancellation				atarese		ON				-	, 11		_		
Name of Facility Where Al	natement is Taking	Place (3)		FACIL	ITY INFOR	(MAII)	UN	Type of Facility (4)								
Private property	Datement is Taking	3 1 1000 (0)						The same and the s								
Street Address	- //							School (K-12) Subchapter 8 (Other than K-12)								
155 Conover Rd									& commerc	mercial buildings, homes,						
City (5)								etc.) Square Feet # of Floo			ors Bldg. Age					
Marlboro, NJ								5000 SF				50 +				
County (6)				County C	ode (7)				se (Prior if be	na demolis	shed)			-		
Monmouth					SE ONLY)			Garage	<u>\$</u>		- 10					
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCM	No.		Name	of Abateme	nt Contractor	(9)		24.77		\neg		
NA	oo by Landing	(-)							prise Corp	4.04						
Street Address						-	Street	Address				-				
NA							29 N	orthfield /	Ave							
City, State, Zip Code					City, S	tate, Zip Co	de									
NA	NA						Wes	est Orange, NJ 07052								
Project Manager for Moni		Telephon	e No.		Teleph	one No.		License	No.							
NA								01203								
Start Date (10)		Scheduled		pletion D	Date (11)			of OSHA M	onitor	50 House						
01/04/14		01/14/1					NA									
Occupancy Status During	Abatement (Chec	k Only One	:)					eet Address								
Facility Closed/Vaca	ted During Entire I	Period of Al	oatem	ent			NA									
Abatement Performe Other – Describe:	ed Outside of Nom	nal Facility	Hours				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	state, Zip Co	ode							
	***						NA						_			
Scope of Work (Check Al	That Apply)	_					-	Total Containment with Name time Drangue								
23 sf or ≥3 lf		-	enova				-	Full Containment with Negative Pressure Mini-Enclosure					ге			
× ≥160 sf or ≥260 lf			emoliti	OH				Glovebag Procedure								
							>	Non-Ex	empted (*) ar	nd Non-Fria	able Pro					
		Is	_ocati	on							Abate	ement pe				
Location	of		ormali Sole				scription					Γ΄,	-	\Box		
Asbestos-Containing TO BE ABA			ntenar		Asbesto	os Con	taining N	Material (AC	(M)	Amount Specify	Z		E	m		
In Facili		Custo	dial S	Staff?		surfa	cing, VA	AT, or		F or LF)	Remova	Repair	aps	Enclosure		
(13)	-		(12)			other	miscella	neous)			va	a-	Encapsulate	sure		
		Yes	No	N/A									6			
Exterio	nr			X	-	Roc	of shing	ıles	50	000 SF	Х					
LAtoric		+		~		- 100	71 0111178	,								
		1									-					
Name of Registered Was	te Hauler		0.0	JDEP W	San		Yards	Na	ame of Regis	ered Land	fill		2.5			
America Enterprise	Corp			lauler ID 2980	No.	of Wa		G	R.O.W.S	Landfill						
City, State	(A)		3.	2000	-		sal Date	e	State				-			
West Orange, NJ						TBD			ullytown, F	PA						
Completed by		Title					Signatur	//	110		Date		1000	0		
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CK # 5051

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Date of Notification (1) 12/20/13		Name of Building Owner/Operator (2) Danco Construction Street Address																
Agencies Notified	Type Notification	-	1	Street Ad	dress	7			D	Fr.	2 7 20	10		1				
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DEP	InitialAmended				e, Zip Cod				3.					-				
X DOL	Amendment		_	Morgan	nville, N	J 07751								į				
X DOH	Emergency (justification)	including	1	Name of	Contact				14	1111122-1112	phone No			1				
DOH DCA	Cancellation			Dan Ma	atarese													
				FACIL	ITY INFO	RMATIO												
Name of Facility Where	Abatement is Takin	g Place (3))					Type of Facility (4)										
Private property								School (K-12)										
Street Address					(2)			Subchapter 8 (Other than K-12) Other (i.e. private & commercial bu					uildings, homes,					
155 Conover Rd								etc.)										
City (5)							1	Square			Floors							
Marlboro, NJ								5000		1			0 +					
County (6) Monmouth				County C (STATE U	code (7) ISE ONLY)		_	Curren	it Use (Prio ge	r if beir	ng demoli	shed)						
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.	1	Name o	of Abate	ement Cont	ractor	(9)							
NA							Amer	ica Er	nterprise	Corp								
Street Address					Street A	Address	S											
NA					29 No	orthfie	ld Ave											
City, State, Zip Code					(City, St	, State, Zip Code											
NA					West	Oran	ge, NJ 07	7052										
Project Manager for Mor		Telephor	ne No.		Teleph	one No			License	No.								
NA									01203									
Start Date (10)		Schedule	ed Con	npletion [Date (11)	100		of OSH	A Monitor				50//26%					
01/04/14		01/14/	14				NA)/5 20-21-11-20		serseures							
Occupancy Status Durin	g Abatement (Che	ck Only Or	ie)					eet Address										
Facility Closed/Vac	ated During Entire	Period of A	Abatem	nent			NA											
Abatement Perform	ned Outside of Norr	nal Facility	Hours	3				tate, Zip	Code									
Other – Describe:							NA	4										
Scope of Work (Check A	All That Apply)																	
≥3 sf or ≥3 lf		-	Renova						Containme		Negative	Pressu	ire					
× ≥160 sf or ≥260 lf			Demolif	tion	Mini-Enclosure Glovebag Procedure													
							×	Non-Exempted (*) and Non-Frial					able Procedure					
		Is	Locat	ion	141									ement	t			
Locatio	n of	1	Normal	lly		Desc	cription	of					1	/pe	_			
Asbestos-Containing	g Material (ACM)		ed Sole		Asbes	tos Conta	ining M	laterial	(ACM)		mount	_		m m				
TO BE AB		1000000	todial S		(i.e.	thermal s	ystems	s insula Tor	tion,		Specify or LF)	dem	Repair	cap	nolo			
(13)			(12)			other mi					J. 2. /	Remova	pair	Encapsulate	Enclosure			
		Yes	No	N/A										ate	0			
Exteri	ior			X		Roof	shing	les		50	00 SF	Х						
		+		-														
		_		-							*			-				
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Name of Registered Wa	ste Hauler		0.0	JDEP W lauler ID		Cubic Y of Wast		-	Name of I	Maria de la compansión de		mli						
America Enterprise	Corp		100	2980	.10.	TBD			G.R.O.\	W.S L	andfill							
City, State		-		gardina yezh		Disposa	al Date		City, State									
West Orange, NJ						TBD		//	Tullytov	vn, P	A							
Completed by		Title			122-17-1	Sig	gnature	//	1/1			Date						
Eli Brito		Proi	Mna	г			12/20/13											