

PAID

State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:60 and 12:20)

check #15

RECEIVED  
DEC 28 2018  
CENTRAL  
LICENSING

Date of Notification (1): 8/21/18		Name of Building Owner/Operator (2): HUDSON BAY DEVELOPMENT CO., INC.	
Agencies Notified  ( ) EPA (X) DEP (X) DOL (X) DOH ( ) DCA	Type Notification ( ) Initial Notification ( ) Amendment Notification (X) Emergency ( ) Cancellation	Street Address: 250 SADDLE RIVER ROAD	
	City, State, Zip Code: SADDLE BROOK, NJ 07663		Telephone Number: 201-368-1626
	Name of Contact: MIKE GUTTUSA		

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3): RESIDENTIAL		Type of Facility (4): ( ) School (K-12) ( ) Subchapter 8 (Other than K-12) (X) Other (i.e., private & commercial buildings, homes, etc.)	
Street Address: 123 SKILLMAN TERRACE		Square Feet: NA	# of Floors: 2
City & State (5): SADDLE BROOK, NJ		Bldg. Age: A	
County (6): BERGEN	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished): RESIDENTIAL	
Name of Monitoring Firm Hired by Building Owner (8): ENVIRONMENTAL CONSULTING GROUP, LLC		ASCM No.: NA	Name of Abatement Contractor (9): S/M Enterprise of NJ, Inc.
Street Address: 71 ARCH STREET		Street Address: 339 North 6 <sup>th</sup> Street	
City, State, Zip Code: PATERSON, NJ 07522		City, State, Zip Code: Prospect Park, NJ 07508	
Project Manager for Monitoring Firm: FERNANDO	Telephone No.: 973-418-4036	Telephone No.: (973) 595-6955	License No.: 00641
Start Date (10): 8/21/18	Scheduled Completion Date (11): 8/22/18	Name of OSHA Monitor: S/M Enterprise of New Jersey, Inc.	
Occupancy Status During Abatement (Check only one) (X) Facility Closed/vacated During Entire Period of Abatement ( ) Abatement Performed Outside of Normal Facility Hours ( ) Other - Describe:		Street Address: P.O. Box 8265	
		City, State, Zip Code: Haledon, NJ 07538	

Scope of Work (Check all that apply):

( )  $\geq 3$  sf or  $\geq 3$  lf  
 (X)  $\geq 160$  sf or  $\geq 260$  lf

(X) Renovation  
 ( ) Demolition

( ) Full Containment with Negative Press  
 ( ) Mini Enclosure  
 ( ) Glovebag Procedure  
 (X) Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial/Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			Enclosure
	Yes	No	N/A			Removal	Repair	Encapsulation	
EXTERIOR		X		GYPSON BOARD	500 SF	X			

Name of Registered Waste Hauler: ROVIC TRANSPORT		NJDEP Waste Hauler ID No.: 20785	Cubic Yards of Waste:	Name of Registered landfill: GRAND CENTRAL
City, State: WAYNE, NJ	Disposal Date: 9/17/18	City, State: PENARGUIL, PA		
Completed By: MIKE ALTADOUKA	Title: PRESIDENT	Signature: 	Date: 8/21/18	

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STATE OF NEW JERSEY  
NOTIFICATION OF ASBESTOS ABATEMENT  
(PURSUANT TO NJAC 8:60-7 AND 12:120-7)

check # 028

Date of Notification (1) 12 / 27 / 18		Name of Building Owner / Operator (2) JET AVIATION OF AMERICA	
Agencies Notified		Street Address 112 CHARLES LINDBERG DRIVE	
<input type="checkbox"/> EPA	<input checked="" type="checkbox"/> Initial	City, State, Zip Code TETERBORO, NJ 07608	
<input type="checkbox"/> DOH	<input type="checkbox"/> Amended	Name of Contact HEATHER KELLOGG	
<input checked="" type="checkbox"/> DOL	<input type="checkbox"/> Amendment	Telephone Number 201-462-4027	
<input type="checkbox"/>	<input type="checkbox"/> Emergency w/ justification		
<input type="checkbox"/>	<input type="checkbox"/> Cancellation		

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) TETERBORO AIRPORT			Type of Facility (4)		
Street Address 114 CHARLES LINDBERG DRIVE			<input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e., private & commercial bldgs., homes, etc.)		
City (5) TETERBORO	County (6) BERGEN	County Code (7)	Square Feet 20,000	# Of Floors 1	Building Age 39
Name of Monitoring Firm Hired by Bldg. Owner (8) GZA GEOENVIRONMENTAL, INC			ASCM NO 00126		
Street Address 55 LANE ROAD, SUITE 407			Street Address 32 Williams Parkway		
City, State, Zip Code FAIRFIELD, NJ 07004			City, State, Zip Code East Hanover, NJ 07036		
Project Mngr. For Monitoring Firm BEN SALLEMI		Telephone Number 973-774-3300	Telephone Number 973-884-8682		
Sched. Start Date (10) 01 / 09 / 19		Sched. Completion Date (11) 04 / 30 / 19	License Number 00860		
Occupancy Status During Abatement (Check Only 1)			Name of OSHA Monitor NORTHSTAR CONTRACTING GROUP, INC.		
<input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement			Street Address 32 Williams Parkway		
<input checked="" type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe: _____			City, State, Zip Code East Hanover, NJ 07036		
<input type="checkbox"/> Other - Describe: 7:00AM-3:30PM MON-FRI					

Scope of Work (Check All That Apply)

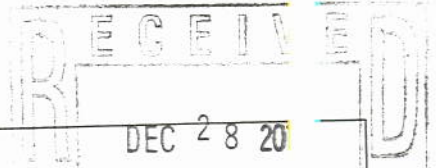
<input type="checkbox"/> Demolition	<input checked="" type="checkbox"/> Renovation	<input type="checkbox"/> Full Containment with Negative Pressure
<input type="checkbox"/> ≥3sf or ≥3lf		<input type="checkbox"/> Mini - Enclosure
<input checked="" type="checkbox"/> ≥160 sf or ≥260 lf		<input type="checkbox"/> Glovebag Procedure
		<input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos Containing <u>TO BE ABATED</u> in Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff (12)	Description of Asbestos - Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type		
				R E M O V E M E N T	R E P A I R	E N C A P S U L E
	YES NO N/A					
HANGAR ROOF	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	ROOFING	16,000 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HANGAR ROOF	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	ROOF FLASHING	400 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OFFICE ROOF	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	PARAPET TAR	700 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name of Registered Waste Hauler NORTHSTAR CONTRACTING GROUP, INC		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill FAIRLESS LANDFILL	
City, State EAST HANOVER, NJ		Disposal Date	City, State MORRISVILLE, PA		
Completed by (Print or Type) STEVEN STILES		Title PROJECT MANAGER	Signature <i>Steven Stiles</i>	Date 12 / 18	

State of New Jersey  
**NOTIFICATION OF ASBESTOS ABATEMENT**  
(Pursuant to NJAC 8:60 and 12:20)

**CK 1538 PAID**



Date of Notification (1): 10/26/18		Name of Building Owner/Operator (2): ELM REALTY INVESTMENT CO.	
Agencies Notified  (X) EPA (X) DEP (X) DOL  (X) DOH ( ) DCA	Type Notification  ( ) Initial Notification (X) Amendment Notification ( ) Emergency ( ) Cancellation	Street Address: 1203 W. GEORGE'S AVE.	
		City, State, Zip Code: LINDEN, NJ 07036	
		Name of Contact: BOB FAIR	Telephone Number: 973-908-451-0665

**FACILITY INFORMATION**

Name of Facility Where Abatement is Taking Place (3): COMMERCIAL		Type of Facility (4): ( ) School (K-12) ( ) Subchapter 8 (Other than K-12) (X) Other (i.e., private & commercial buildings, homes, etc.)	
Street Address: 720 WEST EDGAR RD.		Square Feet: NA	# of Floors: 2
City & State (5): LINDEN		Bldg. Age: 1A	
County (6): UNION	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished): STORAGE	
Name of Monitoring Firm Hired by Building Owner (8): ENVIRONMENTAL CONSULTING GROUP, LLC		ASCM No.: NA	Name of Abatement Contractor (9): S/M Enterprise of NJ, Inc.
Street Address: 71 ARCH STREET		Street Address: 339 N. 6 <sup>TH</sup> . STREET	
City, State, Zip Code: PATERSON, NJ 07522		City, State, Zip Code: Prospect Park, NJ 07508	
Project Manager for Monitoring Firm: FERNANDO VILLA		Telephone No.: 973-418-4036	Telephone No.: (973) 595-6955
			License No.: 00641
Start Date (10): 10/28/18	Scheduled Completion Date (11): 1/31/19	Name of OSHA Monitor: S/M Enterprise of New Jersey, Inc.	
Occupancy Status During Abatement (Check only one) ( ) Facility Closed/vacated During Entire Period of Abatement ( ) Abatement Performed Outside of Normal Facility Hours (X) Other - Describe: M-S 8AM - 5PM		Street Address: 339 N. 6 <sup>TH</sup> . STREET	
		City, State, Zip Code: PROSPECT PARK, NJ 07508	

. Scope of Work (Check all that apply):  
  $\geq 3$  sf or  $\geq 3$  lf       Renovation  
  $\geq 160$  sf or  $\geq 260$  lf       Demolition  
 Full Containment with Negative Pressure  
 Wrap & Cut  
 Glovebag Procedure  
 Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial/Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type		Enclosure
	Yes	No	N/A			Removal	Repair	
EXTERIOR		X		FLASHING/ROOFING	1,200 LF/ 80,000 SF	X		
EXTERIOR		X		TRANSITE	20,000 SF	X		
EXTERIOR		X		WINDOW CAULKING	1,200 LF	X		
GROUND FLOOR/FLOOR TILES		X		PIPE INSULATION	190 LF/900 SF	X		

Name of Registered Waste Hauler: GUILIANO ENVIRONMENTAL		NJDEP Waste Hauler ID No.: 2195765	Cubic Yards of Waste: 100	Name of Registered landfill: IESI
City, State: NEW CASTLE, DE	Disposal Date: 12/15/18	City, State: WAYNESBURG, OH		
Completed By: MIKE ALTADOUKA	Title: PRESIDENT	Signature:	Date: 11/20/18	