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Agencies Notified ⊠ EPA	Type Notif	ication	1		100000000000000000000000000000000000000	et Address			t		er e	. 4 44,	
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☑ DHSS	Amend		#			State, Zip (1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		11.44.2		
☐ DCA	☐ Emerge		ncludi	ng			NJ 07960						
(NJAC 5:23-8)	justifica					e of Contac			Telephone Num	ber			
	☐ Cancell	ation			Ke	eith Slansl	ky		973-955-760	2			
					FA	ACILITY IN	FORMATION						
Name of Facility Where Al	batement is	Takin	g Plac	e (3)				Type of Facility (4	1)				
NJ DOT								School (K-12)		15			
Street Address								☐ Subchapter 8 ☐ Other (i.e., pri			uildin	ae	
Route 71- MP 553.05	5							homes, etc.)	vate and comme	Ciai D	unun	ys,	
City (5)				1111				Square Feet	# of Floors	В	ldg. A	ge	
Asbury Park, NJ													
County (6)					Cou	inty Code (7)	(STATE USE ONLY)	Current Use (Prio	r if being demolis	hed)			
Monmouth								Substation		HING 3340			
Name of Monitoring Firm H	lired by Bui	ilding (Owner	(8)	ASCN	No.	Name of Abatem	ent Contractor (9)					
ATC Associates							AbateTech, I	nc.					
Street Address							Street Address	2278		-			
3 Terri Lane							30 Maple Ave	e. PO Box 25					
City, State, Zip Code							City, State, Zip Co	ode					
Burlington, NJ 08016	3						Lumberton, I	NJ 08048					
Project Manager for Monito	ring Firm			Tele	ephone	No.	Telephone No.		License No.	-			
John Lutz				6	09-571	1-7522	609-265-2107	•	00529				
Start Date (10)		Sched	luled (Comple	etion Da	ate (11)	Name of OSHA M	Ionitor					
_2 / _7 / _	19		2	1 _ 1	5_ /	19	EMSL Analyt	ical					
Occupancy Status During A	Abatement (Check	c only	one)			Street Address					- 20	
☐ Facility Closed/Vacated					ment		200 Route 13	0 North					
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Scope of Work (Check all th	hat apply)							,,					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	3.5. 65.			enovati			☐ Mini-Enc ☐ Glovebag	Procedure		2			
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City, State				-			Disposal Date	City, State					
Lumberton, NJ							2/15/19	Tullytown, P.	A				
Completed By (Print or Type	e)	Title					Signature		Dat			_	
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Date of Notification (1) 1 /	29 /	19					ng Owner/Operator stEnergy Compa		1-5435 Che	:k #110	34		
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Name of Facility Where A	Abatement is	Taking	Place	e (3)	17	CILITI	41 OKWATION	Type of Facility	(4)				
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County (6)					Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being dem	olished)			
Monmouth								Substation					
Name of Monitoring Firm	Hired by Bui	ilding Ov	wner	(8)	ASCN	No.	Name of Abatem	ent Contractor (9)					
ATC Associates							AbateTech, I	nc.					
Street Address		-C-10.7715-				*0	Street Address						
3 Terri Lane							30 Maple Ave	e. PO Box 25					
City, State, Zip Code	121 *				2		City, State, Zip Co	ode					
Burlington, NJ 0801							Lumberton, N	NJ 08048					
Project Manager for Monit	oring Firm			Tele	phone	No.	Telephone No.		License No.				
John Lutz						-7522	609-265-2107	•	00529				
Start Date (10)		Schedul					Name of OSHA M	lonitor					
///					_ /	19	EMSL Analyti	ical					
Occupancy Status During							Street Address						
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Abatement Performed (Time of Abatement:	Outside of N	lormal F	acility	/ Hour	s - Des	scribe	City, State, Zip Co	ode					
Scope of Work (Check all t						.^\IVI	Cinnaminson	, NJ 08077					
Lance of the second	mat apply)						☐ Full Cont	ainment with Neg	ative Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf				novati			☐ Mini-Encl	losure					
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AbateTech, Inc.				100000	iuler ID 18750	50/59/55/59	Waste 2	G.R.O.W.S.	Landfill				
City, State							Disposal Date	City, State					
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Completed By (Print or Type	e)	Title					Signature	1/	[ate		_	
Gwen Trumbetti		Ope	ratio	ons C	oordi	nator	1(N	VA		1-2	9	19	8

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Monmouth									Substation					
Name of Monitoring Firm I	Hired by Bu	ilding	Owner	(8)	ASCN	1 No.	N	lame of Abateme	ent Contractor (9)					
ATC Associates								AbateTech, I	nc.					
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3 Terri Lane								30 Maple Ave	e. PO Box 25					
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Burlington, NJ 08016	6							Lumberton, N	NJ 08048					
Project Manager for Monito	oring Firm			Te	lephone	No.	-	elephone No.		License N	0.			
John Lutz				1	609-57°	1-7522		609-265-2107		00529				
Start Date (10)		Sched	duled C	omp	etion Da	ate (11)	Na	ame of OSHA M	lonitor			_		
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Scope of Work (Check all to	hat apply)									720				
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(10)			Yes	No	N/A		U	ther miscellaneo	ous)				ate	
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Name of Registered Waste	Hauler				JDEP V	Vaste	Cul	bic Yards of	Name of Registe	ered Landfill		3 -	710	
AbateTech, Inc.				100	lauler IE	No.	Wa	aste	G.R.O.W.S.					
City, State					18750		Dis.	posal Date	City, State					-
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Gwen Trumbetti	Š.		erati	ons	Coordi	nator			\mathcal{N}			0	10	
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Agencies Notified Type Notification	חכ			Address			* =	X			-
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DOH Emergence justification		ng		of Contact			* Telephone	Alumba		77	
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Name of Facility Where Abatement is Tak	ting Place	(3)	FA	CILITY INF	ORMATION					E4	
Residential Property		(0)				Type of Facility	10.525				(B) (B)
Street Address						School (K Subchapt	er 8 (Other than	K-12)			
City (5)						Other (i.e etc.)	. private & comm	nercial bu	ildings	, hon	nes,
Rahway						Square Feet	# of Floors	Т	Bldg.	Age	
County (6)			County	Code (7)		1,714	2		1940)	
Union				USE ONLY		Current Use (P	rior if being dem	olished)			
Name of Monitoring Firm Hired by Building	g Owner (8)	ASC	M No.	Name	of Abatement C	ontractor (9)				
Street Address					Dan	vic Contractin	g LLC				
outer Address						Address					
City, State, Zip Code						South 5th St.					
						State, Zip Code abeth, NJ, 072	206				
Project Manager for Monitoring Firm	2		Telepho	one No.		none No.	Licens	e No.		-	
Start Date (10)	School	lad C-				906-4123	0135	5			
12/14/2018	12/21	/2018	mpletion	Date (11)	F3 4456 F3 F3 F3 F4 F4 F4	of OSHA Monito nvironmental					
Occupancy Status During Abatement (Che	ck Only C	one)				Address	Laboratories				
Facility Closed/Vacated During Entire	Period of	Abate	ment			Route 22 We	est				
Abatement Performed Outside of Nor Other – Describe: OCCUPIED	mal Facili	ty Hour	S			tate, Zip Code				-	
Scope of Work (Check All That Apply)					— Unio	n, NJ, 07083					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Language	Renova Demoli			I X	Mini-Enclosur	(T)	re Pressu	ıre		
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	Yes	No	N/A			0003)		v <u>a</u>	¥	Encapsulate	ure
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Name of Registered Waste Hauler		81	IDED	note.	0.11						
Danvic Contrating LLC		H	JDEP Wauler ID		Cubic Yards of Waste		Registered Land	fill			
City, State		3	7574		2	Fairles	s Landfill				
Elizabeth, New Jersey					Disposal Date TBD	City, Stat					
Completed by	Title				Signature	Morrisv	ille, PA				
Jeymy Donneys	Own	er			Jigi idiale	1)		Date 12/01/2	2018		
					/	/					- 1

CK 1292 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 12/11/2018 Oliver Ramalhosa Agencies Notified Type Notification Street Address **EPA** Initial DEP City, State, Zip Code Amended X DOL Amendment # Union, NJ 07083 Emergency (including DOH Name of Contact (ustification) Telephone Number DCA Cancellation Oliver Ramalhosa **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private Street Address School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, X City (5) etc.) Square Feet # of Floors Bldg. Age Union County (6) County Code (7) Current Use (Prior if being demolished) Union (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) G S C Services Corp Street Address Street Address 1465 Route 23 South, #111 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-750-0752 01253 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12/12/2018 12/13/2018 EnviroVision Consultants Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Fair Lawn, NJ 07410 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf X Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Normally Location of Type Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Maintenance/ Amount TO BE ABATED (i.e. thermal systems insulation, Encapsulate Custodial Staff? (Specify Enclosure In Facility Remova surfacing, VAT, or (13)(12)SF or LF) other miscellaneous) Yes No N/A Basement X TSI 80LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. G S C Services Corp of Waste TRRF 0036309 City, State Disposal Date City, State Wayne, NJ Tullytown, PA Completed by Title Signature Date Daniela Antic Owner 12/11/2018

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Date of Notification (1)			1000	lame of 6	200 m	Owner/Ope	erator	(2)	[13]	1 - 10	nav			
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Name of Facility Where	Abstract in Takin	a Diago (3)		FACIL	ITY INFO	RMATION	1	Type of Facility	(4)					
Private	Abatement is Takin	g Flace (5)						School (F						ĺ
Street Address							\dashv	Subchap	er 8 (Oth	er than K-12	2)	000000 1		
Olicel Address								Other (i.e etc.)	. private	& commercia	ai build	ings,	nome	s,
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Somerset			(SE ONLY)		-							
Name of Monitoring Fin	m Hired by Building	Owner (8)		ASCM	No.			of Abatement C		(9)				
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Street Address						11 8		Address Route 23 S	outh #	111				
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City, State, Zip Code								ne, NJ 0747)					
Project Manager for M	anitorina Firm		17	elephon	e No.			none No.		License N	o.			
Project Manager for M	officoring i will			оюртоп	•	-		750-0752		01253				
Start Date (10)		Scheduled	Com	pletion D	ate (11)	1	Name	of OSHA Monit	or					
12/20/2018		12/21/20	18				Envi	roVision Cor	sultant	S				
Occupancy Status Dur	ing Abatement (Che	ck Only One)			1 2		Address	<u> </u>					
Facility Closed/Va	acated During Entire	Period of Ab	atem	ent				1 Wagaraw	Road		-			
Abatement Perfor	med Outside of Non	mal Facility F	lours			(tate, Zip Code	440					
Other - Describe							Fair	Lawn, NJ 07	410					
Scope of Work (Check	All That Apply)	-					Г	7 - " - " - "		h Nagotiya I	Denceur	·o		
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DCA Can	cellation			a Yaso				1	Telepho	one Nu	mber			1 2 Y
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Name of Facility Where Abatement Residential Property	is Taking Place (3	3)					Тур	e of Facility	(4)		-			
Street Address								School (K-	12)					
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City (5)							×	etc.)			iai byi	laing	s, non	ies,
Cranford							1000	are Feet	# of Floo	ors	- 1	Bldg.	- STORY	
County (6)			Caunty	Code (7)			18		2			1936	3	
Union			(STATE	USE ONL	n		Cur	rent Use (Pri	or if being di	emolis	ned)			
Name of Monitoring Firm Hired by B	uilding Owner (8)		ASC	M No.		Name	of Ab	atement Co	ntractor (Q)					
St						Dany	vic C	ontracting	LLC					
Street Address			14 - 02 - 12 - 14 - 14 - 14 - 14 - 14 - 14 - 1			Street .					-	_		
City State 71- C-1-						124	Colu	mbia Ave	2					
City, State, Zip Code								Zip Code						
Project Manager for Monitoring Firm			- · ·					, NJ 0720	6					
The state of the s			Telepho	опе но.		Teleph				ense N	0.		_	
Start Date (10)	Schedule	d Cor	nnietion	Date /11				4123 iHA Monitar	01:	355				
12/21/2018	12/28/2	018		Date (1)	,			onmental l	shoratori	ac Ir				
Cecupancy Status During Abatemen	(Check Cnly On-	e)				Street /			Laboratori	CS, II	16	-		
Facility Closed/Vacated During Abatement Performed Outside	Entire Period of A	baten	nent				70,150,050,07	ite 22 We	st					
Abatement Performed Outside of Other - Describe:	of Normal Facility	Hour	5			City, St	ate, z	Zip Code				_	-	
Scope of Work (Check All That Apply						Union	n, N.	J 07083						
E-D	")													
≥3 sf or ≥3 if ≥160 sf or ≥260 if	TOWNS .	enova					Fu	II Containme	ent with Nega	ative P	ressu	re		
	£1 0.	31110111	2011			×	G	ni-Enclosure ovebag Proc	edure					
							No	n-Exempted	(*) and Non	-Friabl	e Pro	cedu	re	
I amatica of	174533	_ocati											emen	į.
Location of Asbestos-Containing Material (AC	Used	Sole	ly by	Achai	De:	scription of aining Ma	of	1/4010	######################################		-	1)	/pe	
TO BE ABATED	Mair	ntenar		(i.e	. thermal	systems	insul	ation,	Amoun (Specif	-	20		E	_
(13)		(12)			surfac	cing, VAT	, or		SF or Li		Removal	Repair	aps	Clos
	Yes	No	N/A		ouiei ii	mscenarie	(2005)				Val	air	Encapsulate	Enclosure
Basement	1.00	140											œ	
	-++		X		Pipe	Insulati	ion		45 LF		X			
*														
					60									
							_		-					
Name of Registered Waste Hauler			JDEP W		Cubic			Name of F	Registered La	andfill				
Danvic Contracting LLC			auler ID I 7574	No.	of Was	ste			Landfill					
City, State		101		-	1000	al Date		City, State						
Elizabeth, New Jersey					TBD	ui Jaie		Morrisvi						
Completed by	Title				Si	ignature	-/			Dat	e	_		
Jeymy Donneys	Owner	•					1)		17/25/2013/6	inoin	010		





K1370 PAII	NOTII	Pursu	ION OF	of New Jers - ASBESTO NJAC 8:60 a	S ABATEN and 12:120)	CK		38	200	7		٦
ate of Notification (1) 1/24/2019		Nam Der	ne of Bu nholtz /	uilding Owne Associates	r/Operator	(2)	***	圓	Check#	1379	100	11	
gencies Notified Type Notification		Stre 14	et Addr Cliffwo	ess od Ave, Su	ite 200				AN 28	2019	1		- Mr
EPA ☒ Initial DEP ☐ Amended DOL Amendment #.		City	, State, tawan,	Zip Code New Jerse	y 07739			· Landelburg			9.1		
Emergency (in justification DOH	cluding		ne of C					732-9	none Numbe 956-3108	er	1779 1 200	28	
1 DCA 2 Canternation			FACILI	TY INFORM	ATION								-
ame of Facility Where Abatement is Taking an Remo Restaurant	Place (3)					Type of Factors ☐ Schoo ☐ Subch ☑ Other	l (K-12)	Other th	an K-12) mmercial bl	dgs, ho	mes,	etc.)	
15 Oakland Street						Square F	eet	# of F	loors	Bldg	. Age 55+	_	
Red Bank, New Jersey			unty Co	ode (7) SE ONLY)		Current U	Jse (Prior Restau	if being rant	demolished	d)			
Monmouth Name of Monitoring Firm Hired by Building Carrinkerhoff Environmental Services Inc.	Owner (8)		ASCM I		Name	e of Abatem n Corporati	ent Cont		9)				
Street Address 1805 Atlantic Avenue						et Address McBride A	ve						
City, State, Zip Code Manasquan, New Jersey 08736					City,	State, Zip Codland Par	Code k, New .	Jersey					
Project Manager for Monitoring Firm Gary W Fleming			elephon 32-223		Tele 973	phone No. -225-8400	16		License No 01104	•			
Start Date (10) 02/04/2019	Scheduled	Comp 02/09/	letion D 2019	Date (11)	Nam Iris	ne of OSHA Environme	Monitor ental Lab	oratori	es, LLC				- 27
Occupancy Status During Abatement (Chec					Stre 233	et Address 3 Route 22	2 West						
 ▼ Facility Closed/Vacated During Entire □ Abatement Performed Outside of Norm □ Other – Describe: 	Period of Ab nal Facility H	ateme ours	ent		City	, State, Zip nion, NJ 0	Code 7083						
Scope of Work (Check All That Apply) □≥3 sf or ≥3 lf □≥160 sf or ≥260 lf		novatio				☐ Mini-E	nclosure	cedure	Negative Pro				
						MOII-L	ZXCITIPTO	(/ =::-			Abate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair Custo	ocation Solely Solely otenan odial Solely (12)	y y by ice/	(i.e. th	Descriping Containing Sermal Systems Surfacing, other misce	ng Material (ems insulati VAT, or	ACM) ion,	(S	mount specify F or LF)	Removal	Ty Repair	Encapsulate	
Main Building	Yes	No	N/A X	Parapet \	Wall Roo	fing		1300) SF	x			
vidili Dullullig													
													-
2													
Name of Registered Waste Hauler		10000	NJDEP V		Cubic Yar of Waste 20	rds	Fairles	s Landfi	tered Landf	ill			
Lilich Corporation City, State Woodland Park, New Jersey			18724		Disposal 02/09/2		City, St		A	Date			
Completed by Adriana Olejarova	Title Presi	dent			Sign	fature (2)	100 V	4e		Date 01/24	/2019)	_

UK-	19XU	是是是	里 /(F	Pursuan	t to NJAC	8:60 an	d 12:120)		E) E		M		j*,
Date of Notification (1) 01/24/2019				Name of Denho	of Building oltz Associ	Owner/0 ates	Operator	(2)		Ch	neck	# 13	380	em = 2 SB	The state of the s
Agencies Notified	Type Notification				Address fwood Ave	e, Suite	200		10	JA	N 2	8	201	9	1
□ EPA ⊠ DEP ⊠ DOL	☑ Initial☐ AmendedAmendment			City, St	ate, Zip Co an, New J	de		SAME TO SERVICE OF THE SERVICE OF TH		Augustian			i i		
☑ DOH □ DCA	Emergency justification Cancellation	1000 - 000000 000 000	1		of Contact Grigorian		i i			Telephone I 732-956-3		er	1 25 50	115	57 20
				FAC	ILITY INFO	RMATI	ION								- 12-21
Name of Facility Where a Racioppi's Restaurant	Abatement is Takin t	g Place (3)					ATM COS	of Facility (4)						
Street Address 107 Oakland Street								□ Su	bchapter 8 (C	Other than K-1 te & commer		dgs,	home	es, et	c.)
City (5) Red Bank, New Jerse	у				M19				e Feet 000	# of Floors 1		В	ldg. A		
County (6) Monmouth					Code (7) USE ONLY)			Currer	nt Use (Prior	if being demo	lished	1)		-	
Name of Monitoring Firm Brinkerhoff Environme	Hired by Building ental Services Inc	Owner (8)	ASCI	M No.		Name Lilich		ement Contra	7.000.000.0					
Street Address 1805 Atlantic Avenue							Street A		TO the second						
City, State, Zip Code Manasquan, New Jers	sey 08736						City, St Wood		p Code ark, New Je	ersey					
Project Manager for Mon Gary W Fleming	itoring Firm			Telepho 732-22	one No 3-2225	- 0	Teleph 973-22			License 01104					
Start Date (10) 02/06/2019		Schedu		npletion 9/2019	Date (11)				A Monitor nental Labo	ratories, LL0		3-27			
Occupancy Status During	g Abatement (Chec	k Only O	ne)				Street /		s 22 West						
☑ Facility Closed/Vac☐ Abatement Perform☐ Other – Describe: _	ated During Entire ed Outside of Norm	Period of nal Facilit	Abater y Hours	nent			City, St	tate, Zip							
Scope of Work (Check A □≥3 sf or ≥3 lf ⊠≥160 sf or ≥260 lf	ll That Apply)		Renova Demoiii					Mini-	Enclosure	with Negative	Pres	sure		2.71.0	
į.									e bag Proced Exempted (*)	lure) and Non-Fri	able F	roce	edure		
		1000	Locat										Abate Ty	317.2000	
Location Asbestos-Containing			Norma ed Sole	-			scription						1 9	Je	
TO BE ABA In Facili (13)	ATED	362 030	aintena stodial ((12)			thermal surfa	taining M systems cing, VA niscellan	insulat T, or		Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A										ate	Ге
exterior Front of Building	8			X	Exterior			151500) LF >				
Perimeter of Exterior	Roof	-		X	Parapet	Wall F	Roof Co	re		825	SF >	(
							0			14					
Name of Registered Was	te Hauler			JDEP V	Vaste	Cubic	Yards		Name of Re	gistered Land	Ifill				
Lilich Corporation			F	lauler ID 18724		of Was	ste				-1111				
City, State Woodland Park, New	lorsov			10/24			sal Date	1	Fairless Lan						
Completed by	Бегоеу	Title					9/2019 Signature	2	Morrisville,	PA	Date				_
Adriana Olejarova		Presi	dent				7.8	HO	76-65		01/2	4/2	019		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Project # Check # 4534 (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 01/16/2019 Pat White Agencies Notified Type Notification Street Address **EPA** Initial DEP City, State, Zip Code Amended 2019 DOL Amendment # Chatham, NJ 07928 Emergency (including Name of Contact DOH Telephone Number justification) DCA Cancellation Pat White **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, City (5) Square Feet # of Floors Bldg. Age Chatham, NJ County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Morris Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Nick Restoration LLC Street Address Street Address 72 Brookside Rd City, State, Zip Code City, State, Zip Code Randolph, NJ 07869 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973933-2550 01358 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 01/26/2019 01/28/2019 IRIS Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Rt 22 West Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Union, NJ 07083 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e. thermal systems insulation, (Specify Custodial Staff? Removal in Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement area X TSI × 140 LF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill of Waste Hauler ID No. Nick Restoration LLC G.R.O.W.S 0033782 TBD City, State Disposal Date City, State Randolph, NJ TBD Tullytown, Pa Completed by Title Signature Date

01/16/2019

Nikica Mrda

President

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Date of Notification (1) 01/23/2019					Owner/O y Urbar				1			201 .)	-	-
Agencies Notified Type Notification	1		Street A	Address V. 34th S	Street					- 4-1-11					-
EPA Initial Amended Amendmen	t #			ate, Zip C	ode Y 10120						Y - 44				
DOH justification Cancellation)			f Contact				***************************************	an included the second	Telephone 212-265	Numbe	r			
land land			FAC	ILITY INF	ORMATIC	ON									
Name of Facility Where Abatement is Takin Market Halsey Building	ng Place (3)					Ty	pe of Facil					9150000		
Street Address 165 Halsey Street							5	Subcha	pter 8 (C	Other than I te & comm	K-12) ercial b	uildir	ıgs,	hom	es,
City (5) Newark								uare Feet 50,000		# of Floors 12		Bld 50	g. A	ge	
County (6) Essex				Code (7) USE ONL	n		Ci	rrent Use	(Prior if I ding	being demo	olished)	N			
Name of Monitoring Firm Hired by Building RK Occupational & Environmenta	Owner (8 I, Inc.)	ASCN 0009			Name Bako	of A	Abatement onstructi	Contrac	tor (9) Restoration	on, Inc				
Street Address 401 St. James Ave.						Street	Add								
City, State, Zip Code Phillipsburg, NJ 08865		To the second second					, Zip Code NJ 075								
Project Manager for Monitoring Firm Jon Gilbert			Telepho 908-4	ne No. 34-6316	3	Teleph 973-		No. 6-7010		Licens 0666					
Start Date (10) 02/06/2019	Schedul 02/16/			Date (11)				SHA Moni Onstructio		lestoratio	n. Inc				\neg
Occupancy Status During Abatement (Cher	ck Only O	ne)				Street	Ado	Iress							
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Mon-Fri:3pm-11:30	nal Facility	Abater y Hour	nent s			City, S	tate	oute 46 S		D					
Scope of Work (Check All That Apply)						loto	wa,	NJ 0751	12						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	2005INES	Renova Demoli				1		Mini-Enclos Glovebag F	sure Procedui	vith Negativ re and Non-Fr			rines.	2	
Location of		Locat Norma	lly		Des	cription	of			and the second s		3577	-	ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole iintena todial ((12)	nce/		stos Conta thermal s	ining IV systems ing, VA	fate s ins T, o	г		Amount (Specify SF or LF)	Kemova	3	Renair	Encapsulate	Enclosure
	Yes	No	N/A								_ =			ate	Te
B-2 Old Water Tank Room		X			Tank I	-				95 SF	Х				
B-2 Old Water Tank Room		X			Elbow	insula	atio	n	45	5 Elbows	Х		2		
B-1 Garage Washington Side	-	X			Duct I	nsula	tior	1	1	450 SF	Х		1		
Name of Registered Waste Hauler Bako Construction & Restoration, In	nc.	1	IJDEP W lauler ID 0889		Cubic Y of Wast 15		531186		10 miles 10	stered Land		ana	ger	nen	t
City, State Totowa, NJ			,		Disposa TBD	al Date		City, S Morri	tate sville,	PA					
Completed by Damir Valjevac	Title Proje	ect Ma	anager	· · · · · · · · · · · · · · · · · · ·	Sig	nature					Date 01/23	/20	19		

Date of Notification (1)				Name	of Building	0	10	(0)	**					
1/29/2019				Chris	s Pepe	Owner	Operato	r (2)		FFD	7	0.01/		
Agencies Notified	Type Notification	n	-		Address				112	FEB	1	2019)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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DEP	Initial Amended		ŀ	City S	tate, Zip Co	nda					\$ 17	1.5		*
X DOL	Amendme				klin Lake:		07417			1.2				
⋉ DOH	Emergenc justification	y (including	ŀ		of Contact	0, 110,	07417		TT					
DCA	Cancellation			Mike					16	elephone N	lumbe			
					ILITY INFO	DRMAT	ION							
Name of Facility Where	Abatement is Tak	ing Place (3))			ZI CIVIZATI	1014	Type of Facility	(4)					
Private Home								School (K-						
Street Address								Subchapte	12) r 8 (Oth	ner than K	-12)			
								X Other (i.e.	private	& commer	rcial bu	ilding	s, hor	nes,
City (5)	A Company							etc.) Square Feet	1#0	of Floors		Bldg.	۸۵۵	
Franklin Lakes								- 4-4-01 000	" "	1110015		ыug.	Age	
County (6)					Code (7)			Current Use (Pri	or if he	ina demoli	ched)			
Bergen				(STATE	USE ONLY)			ζ	0. 11 00	ing demon	Si icu)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	M No.		Name	of Abatement Cor	ntractor	(9)		_		
0:								oval Safety LL		(0)				
Street Address								Address	1000					
04.04.7							8 Cr	osby Ave						
City, State, Zip Code							City, S	tate, Zip Code						
Project Manager 5 - M -							Pate	rson, NJ 0750	2					
Project Manager for Moni	toring Firm			Telepho	ne No.			one No.		License	No.			
Start Date (10)							973-	400-8711		01332				
02/07/2019		Scheduled		pletion	Date (11)		Name	of OSHA Monitor						
Occupancy Status During	Abotom and (Ot	02/11/2					Sam	e as (9)						
Person			*				Street	Address						
Facility Closed/Vacar Abatement Performe	ted During Entire	Period of Ab	atem	ent										
X Other – Describe: 8	:00 - 16:30	nai Facility F	lours				City, St	ate, Zip Code						
Scope of Work (Check All	That Apply)													
≥3 sf or ≥3 lf	ттас дрргу)						_							
≥160 sf or ≥260 lf		Danish and	novat molitic				×	Full Containme	nt with	Negative	Pressu	ıre		
The state of the s		N De	monuc	Ji i			Ê	Mini-Enclosure Glovebag Proc						
								Non-Exempted	(*) and	Non-Frial	ble Pro	cedu	e e	
			ocatio	2000							T		ement	t
Location of Asbestos-Containing M	of	Used	rmally		N 90 =	Des	cription of	of				Ty	/pe	
TO BE ABA	TED	Maint	enan	ce/	Asbesto	s Conta	aining Ma	aterial (ACM) insulation,		mount			ш	
In Facility	/	Custoo	dial St	aff?	(1.6. ti	surfac	ing, VAT	, or		pecify or LF)	Ren	Re	nca	Encl
(13)		,	12)		(iscellane		0.	or Er /	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							1 20		ate	re
Enterance r	oom			х		Flo	or tiles		05	0.05	+			-
						1 10	or thes		25	0 SF	Х		X	
		+	-											
Name of Built														
Name of Registered Waste	Hauler			DEP Wa	0.000.000	Cubic Y		Name of R	egister	ed Landfill	_			
Removal Safety, LLC			900000	uler ID 1 37007		of Wast	e	GROWS						
City, State			00	3/00/		2 Dispose	J D-4	50.500	ווטאו כ	11				
Paterson, NJ						Disposa TBD	u Date	City, State						
Completed by		Title					inotice i	Morrisvi	iie, PA					
Lasko Veskov		Preside	ent			1	nature)	1/1	_	Da				
			Windley			CX	25/20	2 (les lun		1/	29/20	J19		

Print Form

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

Date of Notification (1) 01/28/2019	30.70	(Name La C	of Building Casa Don	Owner/ Pedro	Operato	r (2)	FE	В	1 2	019	
Agencies Notified Type Notification EPA Initial				Address Roseville	Aven	ue		Francisco	7.5	1.	*	
X DEP Amended Amendment		_		tate, Zip Co ark,NJ,0					7-		27.513	(+ 1 + 1)
DOH justification) Cancellation			Chris	of Contact stopher P				Telephone I 973-485-		r		5,5
Name of Facility Where Abatement is Takin Private House	g Place (3))	FAC	CILITY INF	ORMAT	ION	Type of Facility (4)				
Street Address							School (K-12 Subchapter of Other (i.e. pretc.)	2) 3 (Other than K ivate & comme	-12) rcial b	uilding	s, hon	nes,
City (5) Newark,NJ							Square Feet N/A	# of Floors N/A		Bldg. N/A	Age	
County (6) Essex			County (STATE	Code (7) USE ONLY)		Current Use (Prior Private House	if being demo	lished)			
Name of Monitoring Firm Hired by Building (N/A	Owner (8)		ASC	M No.		Name EHW	of Abatement Cont / ABATEMENT	ractor (9) LLC				
Street Address							Address RANKLIN STRI	EET				
City, State, Zip Code				× ***		City, Si	ate, Zip Code ERSON,NJ 075	24			<u> </u>	
Project Manager for Monitoring Firm		T	Telepho	one No.			one No. 333-5144	License 01274				
Start Date (10) 01/29/2019	Scheduled 01/30/20	Com 019	pletion	Date (11)		Name of EHW	of OSHA Monitor ABATEMENT	LLC				
Occupancy Status During Abatement (Check		to				Street A	Address RANKLIN STEE					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: OCCUPIE	eriod of Ab al Facility F	atem	ent			City, St	ate, Zip Code ERSON,NJ,075					
Scope of Work (Check All That Apply)	E-may											
≥3 sf or ≥3 If ≥160 sf or ≥260 If		novat				×	Full Containmen Mini-Enclosure Glovebag Proce Non-Exempted (dure				
		ocatio					Non-Exempled () and Non-Fria	ible Pri	Abate	ement	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Used :	Solely	y by	Asbesto	s Conta	cription of aining Ma	iterial (ACM)	Amount		13	/pe	
In Facility (13)	Custod (lial St 12)	taff?		surfac	systems ing, VAT iscellane	insulation, , or ous)	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
BASEMENT		No X	N/A	P	IPE IN	SULAT	TON	60			te	Ф
				•		OOLAI	ION	60	X			
Name of Registered Waste Hauler EHW ABATEMENT LLC		Ha	DEP Wa uler ID I 37095	No.	Cubic Y of Wast N/A		4	gistered Landfil				
City, State PATERSON,NJ					Disposa TBD	al Date	City, State Bronx,NY	Λ				-
Completed by Victor Espiritu	Title Project	Mar	nager			nature	1/2 /A/	/ Da	ate 1/28/	2019		-

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 01/28/2019 MSHG CONTRACTORS LLC Agencies Notified Type Notification Street Address 55 SHAWNEE AVENUE FPA Initial × DEP Amended City, State, Zip Code X DOL Amendment # ROCKAWAY, NJ, 07866 Emergency (including Name of Contact DOH justification) Telephone Number DCA Cancellation MSHG **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) PRIVATE HOUSE School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, × etc.) City (5) Square Feet # of Floors Bldg. Age ROCKAWAY N/A N/A N/A County (6) County Code (7) Current Use (Prior if being demolished) **MORRIS** (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) N/A EHW ABATEMENT LLC Street Address Street Address 89 FRANKLIN STREET City, State, Zip Code City, State, Zip Code PATERSON, NJ, 07524 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-333-5144 01274 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 02/06/2019 02/08/2019 EHW ABATEMENT LLC Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement 89 FRANKLIN STREET Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: PATESON, NJ, 07524 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation × Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Normally Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED Encapsulate (i.e. thermal systems insulation, Enclosure (Specify Custodial Staff? Removal In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A FIRST FLOOR X VAT 5 1500 X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste EHW ABATEMENT LLC TRI STATE TRANSFER 0037095 N/A City, State Disposal Date City, State PATERSON.NJ TBD **BRONX.NY** Completed by Title Sign/ature Date VICTOR ESPIRITU PROJECT MANAGER 01/28/2019

State of New Jersey

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) (k5au4

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Date of Notification (1)	29 / 1	9			e of Buildii nda Slus	ng Owner/Operator ((2) / Job #1901	2207 . C	FEB	1 20	019	
Agencies Notified							7 300 #1901-	2397 C	nk. #526	04		5
EPA	Type Notification Initial	1		Stree	et Address			-	w 4	S. F. F.		
☑ DOLWD	☐ Amended			211				• • • •				***
☑ DHSS	Amendment	#		- B	State, Zip							
☐ DCA	☐ Emergency (includin	g			, NJ 08012						
(NJAC 5:23-8)	justification)			- Caroneston	e of Conta	TO 200		Telepho	ne Numb	er		
	☐ Cancellation			Mr	. Evan Li	lly						
				FA	CILITY II	NFORMATION						
Name of Facility Where A	Abatement is Takir	ng Plac	e (3)				Type of Facility	(4)				
Residential Propert	ty						School (K-12					
Street Address							Subchapter Other (i.e., p	rivate and	nan K-12) commerc	cial buildin	ngs,	
City (5)							homes, etc.)			Dide	۸	
Blackwood							Square Feet 1122	# of Flo	oors	Bldg.	Age	
County (6)				Cou	nty Code (7)(STATE USE ONLY)				87		
Camden				Cou	nty Code (I)(STATE USE UNLY)	Current Use (Pr	ior if being	demolish	ned)		
Name of Monitoring Firm	Hirad by Building	Oumar	(0)	ACCM	I Ma	IN	Residential					
Horizon Environme		Owner	(0)	ASCM	NO.	Name of Abateme						
Street Address	IIIdi						d Mold Service	s, Corp.				
PO Box 316						Street Address	20 8					
						3859 Sylon B						
City, State, Zip Code	•					City, State, Zip Co		romatico — — liko			100	
Thorofare, NJ 08086					-	Hainesport, N	IJ 08036					
Project Manager for Moni	37.0			ephone		Telephone No.		Licens	e No.		1	
Steve & Dave Flanig				56-848	NAME OF STREET	609-702-0400		0086	62			
Start Date (10) / / /				etion Da	ate (11) 19	Name of OSHA M EMSL Analyti						
Occupancy Status During	Abatement (Chec	k only	one)			Street Address						
□ Facility Closed/Vacate	d During Entire Pe	eriod of	Abate	ement		200 U.S. Rout	te 130 North					
☐ Abatement Performed	Outside of Norma	l Facilit	y Hou	irs - Des	scribe	City, State, Zip Co						_
Time of Abatement:	AMP	M/	_PM	l	_AM	Cinnaminson						
Scope of Work (Check all	that apply)						, 110 00077					
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		⊠ Re				Mini-Encl	ainment with Neg osure procedure npted (*) and No				RE	
		Is	Loca	tion			Tipica () and ito	ii i nabic i	10000010	Abaten	oont T	
Location			Norma			Description of	f				1	1
Asbestos-Containing N				ely by ance/	Asbe	stos Containing Mat	terial (ACM)	Amo		Removal	Encapsulate	Enclosure
TO BE ABAT IN Facility		100000000000000000000000000000000000000		Staff?	(I.e	e., thermal systems in surfacing, VAT,		(Spe SF or		air	aps	losu
(13)	•		(12)			other miscellaned		31 01	Li)	=	ulat	Ге
		Yes	No	N/A							(O	
Basement					Floor T	ile & Mastic		610	SF		П	П
											+=	
		+=-									Ш	Ш
						1/		12			П	П
Name of Registered Waste	e Hauler		1	NJDEP \		Cubic Yards of	Name of Regis	tered Land	fill			Щ
Waste Management			H	lauler II		Waste	Grand Cen					
City, State				17273	3	5 Disposal Date						
Lafayette, NJ						2/13/19	City, State Penn Argyl	e, PA				
Completed By (Print or Ty	pe) Title	9				Signature	4	2	Date			
Kimberly A. Trumbe	tti C	ffice (Coor	dinato	•	KI	1			-5-00-0	19	
SB-41						LX	1			-29-1		\Box
IAY 11	*	Do not	use ti	his form	for asbest	os licensure exempt	ed activities.					

CKOTT PA	ID	State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)															
Date of Notification (1) 1/28/2019			Name Lak	e of Build	ling Owne Townhor	r/Operato	r (2) Eatontown				141	-	111				
Agencies Notified Type Notification	on		Stree 33 \	t Address Nood A	s ive Sout	h, Suite	600		FEB		20	9	1 - 1				
DEP Amended Amendmen	nt #		City, S Iseli	State, Zip n NJ 0	Code 8830			i i i i i	Protection 1			11.5	:				
DOH justification Cancellation	n)	g		of Conta s Marti					Telephone 732-444-	Numbe	r						
Name of Facility Where Abatement is Tak	ing Dlass	/O\	FA	CILITY	NFORMA	TION			1.52.171.1010								
Full House	ing Place	(3)					Type of Facili	ty (4)									
Street Address							Subchap Other (i.e	School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings									
City (5) Eatontown NJ							etc.) Square Feet 8,000	Square Feet # of Floors BI				Age 8					
County (6) Monmouth			County (STATE	Code (7	7) "LY)		Current Use (I	Prior if	being demo	lished)	101						
Name of Monitoring Firm Hired by Building	Owner (8)	ASC	M No.		Name Chec	of Abatement C	Contrac	tor (9)								
Street Address						Street 54 N	וטוועו										
City, State, Zip Code						City, St	tate, Zip Code ta NJ 07871										
Project Manager for Monitoring Firm		383	Telepho	one No.	<u></u>	Teleph	one No. 570-2645		License								
Start Date (10) 2/10/2019	Schedule 2/28/2	ed Cor	mpletion	Date (11	1)	Name	of OSHA Monito	or	01334								
Occupancy Status During Abatement (Che	100000000000000000000000000000000000000						kmark Indus	strial									
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of A	haton	nent			54 M	Address organ Dr ate, Zip Code										
Scope of Work (Check All That Apply)							parta NJ 07871										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Service .	enova emolit				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure										
	Is	Locati	on				Non-Exempte	ed (**) a	ind Non-Fria	ble Pro	Abat						
Location of	N	ormal	ly		Des	cription c	of.				500000000000000000000000000000000000000	ептеп /ре	L				
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntenar odial S (12)	nce/	Asbe (i.e	stos Conta thermal surfac	aining Ma	terial (ACM) insulation, or		Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure				
Outoribour	Overhang Yes No									=		ate	ਰ				
Overhang		X			flashir	g mate	rial	3	800 LF	Х							
Name of Registered Waste Hauler		1															
Atlantic Carting			NJDEP Waste Cubic Yards Hauler ID No. of Waste 20						ered Landfill agement								
City, State Wayne NJ					Disposa	I Date											
0					15	lulleyto			11				1				

Completed by Corey Stankovic

Title CEO

Date 1/28/2019

Signature

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Print	1 (3(1))

CX 1888 PATO	NO			OF ASBES NJAC 8:0							707 7/83		į			
Date of Notification (1) 1/30/19		2750	ame of toda da Tre	Building Ov nner	vner/C	Operator	(2)		5 14	FEE	1	2019	1	1 11		
Agencies Notified Type Notification		S	treet Ad	dress					1_							
EPA □ Initial Amended Amendment #_				e, Zip Code on, NJ 0					Pv.				- 41			
☐ DOH Emergency (incl. justification)	uding	1 8	lame of						Tele	phone Nu	ımber					
DCA Cancellation		1	da Tre	0.0000000					1	-				_		
Name of Facility Where Abatement is Taking P	lace (3)		FACIL	ITY INFOR	RMAT	ION	Тур	e of Facility (4	1)							
Residential Home	(0)						School (K-12	5 100								
Street Address							×	Subchapter Other (i.e. pr	8 (Othe	er than K-	12) cial buik	dings,	home	s,		
City (5)			27-2		<u> </u>		Squ	etc.) are Feet	# of	Floors		ldg. A				
Princeton							270		2			5 +/-				
County (6) Mercer			County C STATE U	ode (7) SE ONLY)			Re	rent Use (Prio sidential H	ome		shed)					
Name of Monitoring Firm Hired by Building Own Project Manager	ner (8)		ASCM	No.				es Abateme		(9)						
Street Address						Street 280		ess Iidland Ave).							
City, State, Zip Code		-					y, State, Zip Code addle Brook, NJ 07663									
Project Manager for Monitoring Firm		1	Telephor	ne No.		Teleph	Telephone No. License No. 201-600-3184 01305									
Chart Date (40)	chadula	d Com	nletion [Date (11)		307 307 320	Name of OSHA Monitor									
1/31/19 2	/5/19	-100 00-000	piction	Jaic (11)				programme to								
Occupancy Status During Abatement (Check C						Street	Addi	ess								
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: 8 A.M to 4 P.M	riod of Al Facility	batem Hours	ent		_	City, S	State,	Zip Code								
Scope of Work (Check All That Apply)																
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		enovat emoliti				2	- 1	Full Containmon Mini-Enclosure Glovebag Proc Non-Exempte	e cedure	-			e			
	le	Locati	on									Abat	ement	t		
Location of	N	ormall	ly	0.000.00		escription		24740 (VANOTANG 1800)		(F)		T	/pe			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Solei ntenar odial S (12)	nce/		herma surf	ntaining I al system acing, VA miscella	ns ins AT, o	r	(mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure		
	Yes	No	N/A								-	-	-			
Main Room		X				VAT				41 SF	X		-			
3 Bedrooms		X				VAT				23 SF	X	-	-			
Storage/Utility		Х				VAT				75 SF	X			-		
Bathroom		Х				VAT				17 SF	X			<u></u>		
Name of Registered Waste Hauler All Stages Abatement		H	IJDEP W lauler ID 036593	No.	1777.40	Cubic Yards Name of Registered Landfill of Waste Grand Central Sanitary Land 2 vd				ndfill						
City, State Saddle Brook, NJ		Disposal Dis					е	City, Sta Pen Ar		PA						
Completed by Richard Cristofol	Title Pres	ident				Signatu	re	44	1		Date 1/30/	19				

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D	rir	1	Fr	rm

OX 2578		State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)							EG	F		?	
Date of Notification (1) 1/30/2019	显》		Name o	of Building	Owner/		(2) ayen		FEB	1	201	19	
Agencies Notified Type Notification			Street A	Address				i	was recorded to	- Te 1819-105			
EPA X Initial Amended			City, St	ate, Zip C	ode			1	Averillari 140		MTS Radi	, ,	á.
X DOL Amendment			7.4			Princeto	on, NJ 0854	0			56 9560		1,000. (100
☑ DOH justification) ☐ DCA ☐ Cancellation			Е	of Contact Betsy Sa	ayen			Te	elephone No	umber			
Name of Facility Where Abatement is Takir	g Place (3)	FAC	ILITY INF	ORMAT	ION	Type of Facili	ity (4)				17.7	
Residential							School (
Street Address									her than K- & commerc		ldings	, hon	nes,
City (5) Princeton, NJ 0854	0						Square Feet 3500	# (of Floors	E	3ldg. /		
County (6) Mercer				Code (7) USE ONL	n		Current Use (Prior if be	eing demolis	shed)			
Name of Monitoring Firm Hired by Building MECS	Owner (8)	ASC	И No.			Name of Abatement Contractor (9)						
Street Address PO Box 341					Street	Stevens Environmental Services, Inc.							
City, State, Zip Code						PO Box 322 City, State, Zip Code							
Chesterfield, NJ (Project Manager for Monitoring Firm	8515		Telepho	no No		Allentown, NJ 08501 Telephone No. License No.							
Bill Weisgarber				98-4070)	100 min 100 mi	259-9688		00493	NO.			
Start Date (10) 2/11/2019	Schedul		mpletion 2/15/201	Date (11) 19		Name MEC	of OSHA Monit S	tor					
Occupancy Status During Abatement (Chec			Street Address										
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of an all Facility	Abater y Hour	nent s			ox 341 ate, Zip Code terfield, NJ	08515						
Scope of Work (Check All That Apply)						Offics	terrieia, No	00313					
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	_	Renova Demoli				×	Glovebag Procedure				e		
		Locat									Abate		t
Location of Asbestos-Containing Material (ACM)	Use	Norma d Sole intena	ly by		tos Cont		aterial (ACM)	Α.	Amount		Γ,		
TO BE ABATED In Facility (13)	0.0000000000000000000000000000000000000	todial (12)	Staff?	(i.e.	surfac	systems cing, VAT niscelland			Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
(1.0)	Yes	No	N/A		oulet II	nocenari	sous)			val	=	ulate	ure
Basement	X		Th	ermal I	Duct In	sulation		12 If	Х				
Crawl Sapce			Th	ermal [Duct In	sulation		30 If	Х				
					(Wra	ap & Cu	ıt)						
Name of Devictor (IM-1-1)													
Name of Registered Waste Hauler Stevens Environmental Services		100	NJDEP Waste Hauler ID No. 18292 Cubic Yards of Waste			ste		of Registers ss Lanc	ered Landfil dfill	E.			
City, State Allentown, NJ			Disposal Date City,					ty, State orrisville, PA					
Completed by Mahlon E. Stevens	ct Ma	Manager Signature							ate 1/30	/201	9		

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	7.3	11 -	1,23	11	1177
		1.1	12-	11	1.0

Date of Notification (1)		10000			Name of Building Owner/Operator (2)											
1 /	29 /	19			JCP&L/FirstEnergy Company / Job #1901-5435, Check #11018 2019											
Agencies Notified	Type Notifica	tion			Street	Address			4		The Late Co.		5 +1			
⊠ EPA	Initial				10 I	egion Pl	ace-	Building A		A ASIA FRAN	Yes Co	Mil				
□ DOLWD	Amended				City, S	tate, Zip C	ode			term of the company		bear.	*	te		
⊠ DHSS	Amendme				Mor	ristown,	NJ 0	7960								
DCA (NJAC 5:23-8)	☐ Emergeno justification		Juding		Name	of Contact				Telephone Nu	mber					
(10/10 0.00 0)	☐ Cancellati	9.51			Kei	h Slansk	y			973-955-76	602					
					FAC	ILITY IN	FOR	MATION								
Name of Facility Where A	Abatement is T	aking	Place	(3)					Type of Facility (4)							
NJ DOT									School (K-12		12)			1		
Street Address									☐ Subchapter 8 ☐ Other (i.e., p	ivate and comm	12) nercial bu	ilding	S,			
Route 71- MP 573.7	0								homes, etc.)							
City (5)									Square Feet	# of Floors	BI	dg. Ag	ge			
Asbury Park, NJ																
County (6)					Coun	ty Code (7)	(STAT	TE USE ONLY)	Current Use (Pri	or if being demo	olished)					
Monmouth									Substation							
Name of Monitoring Firm	Hired by Build	ing O	wner (8)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)							
ATC Associates							AbateTech, Inc.									
Street Address			70 To -				Street Address									
3 Terri Lane							30 Maple Ave. PO Box 25									
City, State, Zip Code							City	State, Zip Co	ode							
Burlington, NJ 0801	16						Lumberton, NJ 08048									
Project Manager for Moni	toring Firm			Tele	phone l	No.	Telephone No. License No.									
John Lutz				60	9-571	7522	609-265-2107 00529									
Start Date (10)	S	chedu	uled C	omple	tion Da	e (11)	Name of OSHA Monitor									
2/_7_/	19	2	2/	_15	_ / _	19	El	MSL Analyti	ical							
Occupancy Status During	Abatement (C	heck	only o	ne)												
☐ Facility Closed/Vacate						186	20	00 Route 13	0 North							
Abatement Performed							1000	State, Zip Co								
Time of Abatement: _	AIVI	PIV	W	_PIVI		- IVI	C	innaminson	, NJ 08077							
Scope of Work (Check all	that apply)							□ Full Cont	rainmant with New	rative Pressure				1		
			⊠ Re	novat	on			☐ Mini-Enc	tainment with Neg losure	gative Flessure						
□ ≥160 sf or ≥260 lf			☐ De					Glovebag	g Procedure	- Fishle Beer	4					
		-					-	Non-Exe	mpted (*) and No	n-Friable Proced		-1	T			
	·	- 1		Loca: lorma				Description o				ateme				
Location Asbestos-Containing I		,			ely by	Asbes	stos (Containing Ma		Amount	Rem	Repair	Enc	incl		
TO BE ABA	TED	´		intena	nce/ Staff?		, thei	mal systems	insulation,	(Specify	Remova	air	apsi	Enclosure		
IN Facilit (13)	ty		Cusi	(12)	otaii:			urfacing, VAT, er miscellane		SF or LF)	-		Encapsulate	re		
(13)		Î	Yes	No	N/A		-						(0			
Exterior Pole #JC163	8AP					Asbesto	os ris	sers		11 LF						
		\neg														
		-										П	П			
		-										П	П			
Name of Registered Was	to Hauler				JDEP \	Naste	Cub	ic Yards of	Name of Regis	stered Landfill				_		
AbateTech, Inc.	te nadiei			100	lauler II	No.	Was		G.R.O.W.S							
City, State					18750			osal Date	City, State							
Lumberton, NJ							2/	15/19	Tullytown	, PA						
Completed By (Print or Type) Title						Signature					Date	ar	94010	_		
Gwen Trumbetti		ions	Coord	inator			1118		1-	29	-10	1				

CK11013	AIR	OTIF	CATI (Pursi	CATION OF ASBESTOS ABATEMENT Pursuant to NJAC 8:60 and 5:16)									
Date of Notification (1)			Na	me of Build	ing Owner/Operato	r (2)		EEB	1	20	1 0		
/	/	-	1		stEnergy Comp		-5435 Check	c #110	13	20	13		
Agencies Notified Type No				eet Address		30.	Zva.	1.,17	\$ 15.00	% ["L""			
☐ EPA ☐ Initial ☐ Amen			1	0 Legion	Place- Building	A			100				
	dea dment#		Cit	y, State, Zip	Code								
	gency (inclu	dina	l V	Norristown	n, NJ 07960								
(NJAC 5:23-8) justific	cation)	9	Nai	me of Conta	ict		Telephone Number						
☐ Cance	ellation		K	eith Slans	sky		973-955-7						
		0.42	F	ACILITY I	NFORMATION								
Name of Facility Where Abatement	is Taking Pla	ace (3)			THE OTTIME TOTAL	Type of Facility	(4)						
NJ DOT	T-1					School (K-12	• •						
Street Address						Subchapter 8	(Other than K-	12)					
Route 71- MP 555.18						Other (i.e., p	rivate and comn	nercial	buildi	ngs,			
City (5)						homes, etc.)			21.1	•			
Asbury Park, NJ						Square Feet	# of Floors	1	Bldg.	Age			
County (6)			Co	unty Code /	7)(STATE USE ONLY)	Comment Head (D)	1						
Monmouth			00	anty Code (I J(STATE USE UNLT)		or it being demo	olished)					
Name of Monitoring Firm Hired by Bu	uilding Owne	er (8)	ASCI	A No	Nome of Abeter	Substation							
ATC Associates	anding Owne	,, (O)	Acci	VI INO.		ent Contractor (9)							
Street Address					AbateTech, I	nc.							
3 Terri Lane					Street Address	BO B							
City, State, Zip Code					30 Maple Ave								
Burlington, NJ 08016					City, State, Zip C								
Project Manager for Monitoring Firm		TTO	lonhone	Ma	Lumberton, I	NJ 08048							
John Lutz		2700	ephone	1-7522	Telephone No.		License No.						
Start Date (10)	Scheduled				609-265-2107		00529						
<u>2</u> / <u>7</u> / 19			5 /	130	Name of OSHA N								
		0.7	<u> </u>		EMSL Analyt	ical							
Occupancy Status During Abatement			28		Street Address								
☐ Facility Closed/Vacated During En☐ Abatement Performed Outside of N	lire Period o	f Abate	ement		200 Route 13	0 North							
Time of Abatement:AM	PM/	PM	- -	AM	City, State, Zip Co								
Scope of Work (Check all that apply)			-	-	Cinnaminson	, NJ 08077							
Ocope of Work (Check all that apply)					□ Eull Cont	ainmant ith N							
≥3 sf or ≥3 lf	⊠R	enovat	ion		☐ Mini-Encl		tive Pressure						
☐ ≥160 sf or ≥260 lf		emoliti	on		☐ Glovebag	Procedure							
		s Loca	tion	1	⊠ Non-Exer	mpted (*) and Non-	Friable Procedu	ıre					
Location of		Norma			Description			Ab	atem	ent T	уре		
Asbestos-Containing Material (ACM	Λ) Us	ed Sole		Asbes	Description of tos Containing Mat	erial (ACM)	Amount	Re	Re	四	En		
TO BE ABATED IN Facility	0.000	aintena stodial		(i.e.,	thermal systems in	nsulation,	(Specify	Removal	Repair	cap	Enclosure		
(13)		(12)	Otan:		surfacing, VAT, other miscellaneo	or or	SF or LF)	/al	,	Encapsulate	ure		
	Yes	No	N/A	1	other miscellaneo	lus)				te			
Exterior				Asbesto	s risers		40.15	-	_		-		
			-	Aspesto	5 115615		10 LF	×	Ш				
¥													
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Name of Registered Waste Hauler			JDEP V	Vaste 1	Cubic Yards of Name of Registered Landfill				Ц		Ш		
AbateTech, Inc.			auler ID		Waste	reason was considered to							
City, State			18750		2	G.R.O.W.S. L	alluilli						
Lumberton, NJ				1	Disposal Date	City, State							
Completed By (Print or Type)	T:0				2/15/19	Tullytown, P.	Α						
Gwen Trumbetti	Title				Signature	+	Da						
SB-41	Operati	ons C	oordi	nator	IM	K	j.	-29	1	9			

	P	AI	M	\TIF1	0471	State of	New Jersey						
CKIIN	+	A. A.S., A.S.	LINC) -	Pursu	ON OF A	New Jersey SBESTOS ABA JAC 8:60 and 5:	TEMENT 16)	M E C	F		M	11.12
Date of Notification (1)					Nai	me of Build	ding Owner/Operator	(2)				- 19-11-	
1 /	29	1	9		J	CP&L/Fir	rstEnergy Compa	ny / Job #1901	-5435 Check	#110	17		
Agencies Notified	Type Not	ification	n			eet Address			FEE		1_2	019	
⊠ EPA	Initial				(0.000000)		Place- Building	Δ					
☑ DOLWD	☐ Amen				_	, State, Zip					V 51		
□ DHSS		dment a		_	1 330		n, NJ 07960						exect.
DCA (NJAC 5:23-8)	☐ Emerg		includi	ng		ne of Conta						+1 +11	
(**************************************	Cance	,				eith Slan	(WACC)	_	Telephone Nun 973-955-76				
					F	ACILITY I	INFORMATION						
Name of Facility Where A	batement i	s Takin	ng Plac	ce (3)				Type of Facility	(4)			-7	
NJ DOT								School (K-12)				
Street Address									Other than K-12 (Other and comme		wildir	nae	
Route 71- MP 572.44	1							homes, etc.)	wate and comme	1 Clair	diidii	193,	
City (5)								Square Feet	# of Floors	E	Bldg. /	Age	
Asbury Park, NJ													
County (6)					Cou	unty Code ((7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)		- 191	
Monmouth								Substation					
Name of Monitoring Firm F	lired by Bu	iilding (Owner	(8)	ASCN	I No.	Name of Abateme						
ATC Associates							AbateTech, I	nc.					
Street Address							Street Address						
3 Terri Lane							30 Maple Ave	. PO Box 25					
City, State, Zip Code						City, State, Zip Code							
Burlington, NJ 08016							Lumberton, N						
Project Manager for Monito	ring Firm				ephone		Telephone No.		License No.				
John Lutz				1		1-7522	609-265-2107		00529				
Start Date (10)						ate (11)	Name of OSHA M						
//					5_/		EMSL Analyti	cal					
Occupancy Status During A							Street Address						
☐ Facility Closed/Vacated ☐ Abatement Performed C	During Ent	tire Per	iod of	Abate	ment		200 Route 130) North					
Time of Abatement:	AM-	normai PN	racilit M	y Hou PM	rs - Des -	AM	City, State, Zip Co						
							Cinnaminson,	NJ 08077					
Scope of Work (Check all the	nat apply)						□ Eull Contr	innant with Nan-	* D				
≥3 sf or ≥3 If			_	novat	100000		☐ Mini-Encl	ainment with Nega osure	live Pressure				
☐ ≥160 sf or ≥260 lf			∐ De	moliti	on		☐ Glovebag	Procedure	Fig. D	39			
		- 1	le	Local	tion		⊠ Non-Exen	npted (*) and Non-	Friable Procedure	1	7		
Location of				Norma			Description of			_	_	ent T	1
Asbestos-Containing Ma		A)		d Sole intena			stos Containing Mate	erial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABATE IN Facility	<u>-D</u>				Staff?	(i.e.	 thermal systems in surfacing, VAT, 	sulation,	(Specify	VOV	air	aps	lost
(13)		1		(12)			other miscellaneo		SF or LF)	=		ulat	Ire
			Yes	No	N/A							e	
Exterior						Asbesto	os risers		15 LF				
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					-								
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Name of Registered Waste I	Hauler				JDEP V	Vacto	Cubio Vorde -f	Name of Decision	and I as dell		Ш	Ш	Ц
AbateTech, Inc.				auler ID		Cubic Yards of Waste	Name of Register						
City, State				0.00000	18750	100000000000000000000000000000000000000	2	G.R.O.W.S. Landfill					
Oity, Otate							Disposal Date	City, State					

Gwen Trumbetti ASB-41 **MAY 11**

Lumberton, NJ

Completed By (Print or Type)

Title

Operations Coordinator

2/15/19

Signature

Tullytown, PA

Date

1-29-19

IT

190 (4)	State of New Jersey
0/0/12/0	NOTIFICATION OF ASBESTOS ABATEMEN (Pursuant to NJAC 8:60 and 5:16)
01211210	(1 disdall to NOMO 0.00 allu 5.10)

Date of Notification (1)				Nar	Name of Building Owner/Operator (2)										
1/	/ _1	9			JCP&L/FirstEnergy Company / Job #1901-5435 Check #11016										
	otification	n		Stre	et Address								-		
☐ EPA ☐ Initia				1	Legion	Pla	ce- Building A	\							
☑ DOLWD ☐ Ame	ended endment :	ш		City	State, Zip	Cod	de								
	ergency (na	M	orristowr	1, N	J 07960								
	fication)	moludi	iig	Nan	ne of Conta	ct			Telephone N	lumber					
☐ Can	cellation			K	eith Slans	sky			973-955-						
N				F	ACILITY I	NFO	ORMATION								
Name of Facility Where Abatemer	it is Takir	ng Plac	ce (3)					Type of Facility (4)							
NJ DOT								School (K-12		40)					
Street Address Route 71- MP 568.66								☐ Subchapter (i.e., p	rivate and com	-12) mercial	buildir	ngs,			
City (5)								homes, etc.)							
Asbury Park, NJ								Square Feet	# of Floors		Bldg. A	4ge			
County (6)				Cou	inty Code (7)(S	TATE USE ONLY)	Current Use (Pri	or if being dem	olished)				
Monmouth								Substation	3						
Name of Monitoring Firm Hired by	Building	Owner	(8)	ASCN	1 No.	N	ame of Abateme	ent Contractor (9)							
ATC Associates						100	AbateTech, In								
Street Address						St	treet Address						117		
3 Terri Lane							30 Maple Ave	. PO Box 25							
City, State, Zip Code		1				-	ity, State, Zip Co								
Burlington, NJ 08016							Lumberton, N	IJ 08048							
Project Manager for Monitoring Firm	n		Tel	ephone	No.	Te	elephone No.		License No.				-		
John Lutz			6	09-57	1-7522		609-265-2107	7 00529							
Start Date (10)	Sched	duled C	Compl	etion Da	ate (11)	Na	ame of OSHA M	onitor							
//19	. 4			5_ /	19		EMSL Analyti	cal							
Occupancy Status During Abateme					Street Address										
Facility Closed/Vacated During I						:	200 Route 130) North							
Abatement Performed Outside of Time of Abatement:AM	f Normal	Facilit	y Hou	rs - Des	scribe	Cit	ty, State, Zip Co	de							
		VI/			_AIVI	(Cinnaminson,	NJ 08077							
Scope of Work (Check all that apply	')						□ Eull Conta	sinmont with Non-	ativa Dranavia						
≥3 sf or ≥3 If		⊠ Re					☐ Mini-Enclo		alive Pressure						
≥160 sf or ≥260 lf		☐ De	moliti	on			☐ Glovebag	Procedure	Friehle Decem						
		Is	Loca	tion			M Moll-Exell	npted (*) and Non	-Friable Proced						
Location of		1	Norma	lly			Description of				batem	T	1		
Asbestos-Containing Material (A	CM)		d Sole intena	ely by	Asbes	stos	Containing Mate	erial (ACM)	Amount	Removal	Repair	Enc	Enclosure		
TO BE ABATED IN Facility				Staff?	(i.e.	, the	ermal systems in surfacing, VAT.	sulation,	(Specify SF or LF)	SAOL	a-	apsi	uso		
(13)			(12)	1			ther miscellaneo		or or Lir)	=		Encapsulate	е		
		Yes	No	N/A								(b)			
Exterior Pole #JC1568					Asbesto	os r	isers		9 LF						
Name of Registered Waste Hauler			1000	JDEP \			bic Yards of	Name of Registe	ered Landfill						
AbateTech, Inc.			Н	Hauler ID No. Waste G.R.O.W.S. Landfill 2											
City, State					posal Date	City, State									
Lumberton, NJ			2	/15/19	Tullytown, F	PA									
Completed By (Print or Type)				Signature	A		Date		200						
Gwen Trumbetti	ons (Coordi	nator		1 (1	1		1-2	9-1	9					

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

MINING			NO					ESTOS ABA		- 1	(A) P	П	B 2	,
UCILIO	YAU			(1	Pursu	ant to NJ	AC	8:60 and 5:	16)	E	C E		$f_{t_1^{i_1}}$	i'-
Date of Notification (1)					100000000000000000000000000000000000000			Owner/Operator		1140		1940.05.	+ 10 A	1
/	29 /	1	9		J	CP&L/Firs	stEr	nergy Compa	ny / Job #190	1-5435 Che	ck_#10	935	2019	į
	Type Notific	cation	1		Stre	et Address				1 1 1	_CD	1 /	UIS	- 1
	Initial				10	Legion F	Plac	ce- Building A	A					
	☐ Amende	11100				State, Zip				A Post in	1. 11. 15.	17,1		Trak
☑ DHSS □ DCA	Amendn Emerge			_		orristown						- 45,5		30 S
(NJAC 5:23-8)	justificat		iiciuuli	ig	Nam	ne of Contac	ct	N. 10050 Ph. 1-1-1-77 V.		Telephone N	Number			
	☐ Cancella	ation			K	eith Slans	sky			973-955-				
					F	ACILITY IN	NFC	DRMATION						
Name of Facility Where Ab	atement is	Takir	g Plac	e (3)					Type of Facility	(4)				
NJ DOT									School (K-1					
Street Address									Subchapter			mildin	~~	
Route 71- MP539.16									Other (i.e., phomes, etc.		imerciai	Juliali	gs,	
City (5)									Square Feet	# of Floors		3ldg. A	\ge	
Asbury Park, NJ											1			
County (6)					Cou	inty Code (7	7)(ST	TATE USE ONLY)	Current Use (P	rior if being den	nolished)			
Monmouth									Substation					
Name of Monitoring Firm Hi	red by Build	ding (Owner	(8)	ASCN	1 No.	Na	ame of Abateme	ent Contractor (9)				
ATC Associates								AbateTech, I	nc.					
Street Address							St	reet Address						
3 Terri Lane							;	30 Maple Ave	e. PO Box 25					
City, State, Zip Code							Cit	ty, State, Zip Co	ode					
Burlington, NJ 08016							1	Lumberton, N	J 08048					
Project Manager for Monitor	ing Firm				ephone		Te	elephone No.		License No				
John Lutz						1-7522	6	609-265-2107	96	00529				
Start Date (10)						ate (11)	15353	ame of OSHA M	g-cargana.					
/ /					5_/	19	E	EMSL Analyti	ical					
Occupancy Status During Al							Str	reet Address						
Facility Closed/Vacated [22	2	200 Route 13	0 North					
Abatement Performed On Time of Abatement:	AM-	rmai PN	Facilit //	y Hou PM	rs - Des -	Scribe	5000	ty, State, Zip Co						
						-/\livi	(Cinnaminson	, NJ 08077					
Scope of Work (Check all the	at apply)							□ Full Cont	ainment with No.	ativo Proceuro				
≥3 sf or ≥3 lf			⊠ Re					☐ Mini-Encl	ainment with Neg osure	jative Pressure				
☐ ≥160 sf or ≥260 lf			☐ De	moliti	on			☐ Glovebag	Procedure	- Frieble Dece	dian			
			le	Loca	ion			M Mou-Exel	npted (*) and No	n-Friable Proce				
Location of			1	Norma	lly			Description of			Townson.	atem		1
Asbestos-Containing Mat)		d Sol	ely by			Containing Mat	erial (ACM)	Amount	Ren	Repair	Enc	Enc
TO BE ABATE IN Facility	<u>D</u>				Staff?	(i.e.		ermal systems in		(Specify	Removal	air	aps	Enclosure
(13)				(12)	,			surfacing, VAT, her miscellaned		SF or LF)	1 2		Encapsulate	ıre
30 30			Yes	No	N/A								е	
Exterior						Asbesto	os ri	isers		10 LF			П	
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		\dashv							-					
		-		200	-							Ш		
Name of Desistant d Marta II	laufa a													
Name of Registered Waste H	lauler			1133	JDEP V	VALUE (12/12/12/12/12/12/12/12/12/12/12/12/12/1	Cub	oic Yards of	Name of Regis					
AbateTech, Inc.				1	18750		2		G.R.O.W.S.	Landfill				
City, State							3	posal Date	City, State					
Lumberton, NJ							2/	/15/19	Tullytown,	PA				
Completed By (Print or Type)		Title	100		N. C.			Signature	N		Date		^	
Gwen Trumbetti		OF	erati	ons (Coordi	nator			WA		1-9	9-	17	

ASB-41 MAY 11

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

1500 PATO	ı		CATION		Jersey STOS ABATE 60 and 12:120		EGE		7	15	60
Date of Notification (1)		-	Name of	Building O	wner/Operator	(2)	* * ** ** ** ** ** ** ** ** ** ** ** **	G- 1	n a		1
January 29, 2019		- 1		Financia		1 1	*			j,	
Agencies Notified Type Notification			Street A		псогр		FEB	1-71	110		- /
			O Box			1		- 4	113	1.7	***
EPA Initial DEP Amended				te, Zip Cod	9						
DOL Amendment	#1	1					1. 1. 1. 1. 1.	* #			
Emergency (Name of	NJ 0751	1-0699		T-11 1 1 1	B . 1		1000	_
DOH justification) DCA Cancellation		100					Telephone Nur			3. 10.0	- 190
DCA Cancellation		F		Manager			(973) 234-70	26			
Name of Facility Where Abatement is Taking	a Place (3	3)	FACI	LITY INFO	RMATION	Type of Facility ((4)				-
Former KMart	9 . 1000 (0	1									
Street Address						School (K-1		51			
							· 8 (Other than K-12 private & commerci		dinas	hom	es
180 Broadway						etc.)		u	ugo,		
City (5)						Square Feet	# of Floors	В	ldg. A	Age	
Elmwood Park											
County (6)			County C			Current Use (Pri	or if being demolish	ned)			
Bergen			(STATE U	(SE ONLY)			empty				
Name of Monitoring Firm Hired by Building (Owner (8)		ASCM	No.	Name	of Abatement Cor					
A.E.S.L.	95 - 53				1800 HEE	ACK Group, L					
Street Address						Address					
2200 Paterson Plank rd # 7					0.0000000000000000000000000000000000000		STE 200				
City, State, Zip Code						Kings HWY N, tate, Zip Code	31E 209				_
MICH. 48 (2010) 100 (2010) 41 (104) 100 (1010) 1010					350						
North Bergen, NJ 07047			Talaata	ne M-		Hill, NJ 0803					_
Project Manager for Monitoring Firm		10.0	Telephor			one No.	License N	0.			
Carmello Altomonte	0.1	100	01-864		1	759 - 5000	00781				-
Start Date (10)	Schedule			Date (11)		of OSHA Monitor					
2/11/19			12/30/1	9		ACK Group, L	LC.				
Occupancy Status During Abatement (Chec	k Only Or	ie)			Street	Address					
Facility Closed/Vacated During Entire F					1500 k	Kings HWY N,	STE 209				
Abatement Performed Outside of Norm Other - Describe:	al Facility	Hours			City, S	tate, Zip Code					
					Cherry	Hill, NJ 0803	4				
Scope of Work (Check All That Apply)											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Contraction of the last of the	Renova Demoliti				Mini-Enclosure Glovebag Pro-					
	1	7	1				, ,	1.500		emen	t
1972,0000		Locati Normal								/pe	
Location of Asbestos-Containing Material (ACM)	Use	d Sole	ly by	Ashesto	Description s Containing M		Amount				T
TO BE ABATED	N 50000 0	intenar todial S			nermal systems		(Specify	Z	711	Enc	1
In Facility	Cus	(12)	otan :		surfacing, VA		SF or LF)	emo	Repair	aps	
(13)					other miscellan	cous)		Removal	air	Encapsulate	
	Yes	No	N/A					1-		е	
See attached	X				See attach	ned	See attached	X			T
230 41401104	/\				ooo attaol		Joe allacited	//			+
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Name of Registered Waste Hauler		110	J DEP W auler ID	299	Cubic Yards of Waste	Name of	Registered Landfill	1			1
laviagle / Faraball / On a day		- 1	450		TBD	Minerva	Enterprises, LL	C			
Newark / Freehold / Sharran						IIVIIIICIVA	LITERIATIONS. LL				
Newark / Freehold / Spartan City, State			130								_
City, State	ΡΔ		450		Disposal Date	City, Stat	е				
	PA Title		430			City, Stat Waynes					

Date of Notification (1)				Name o	f Building	Owner/	Operator	(2)	-11-+	FE	D	1	2010	1
Janua	ary 15, 2019				s Finan			,		, rc	D	ł	2019	j
Agencies Notified	Type Notification			Street A		ioiai oo	ı, P			-				
⊠ EPA	Initial			PO Box	699					Fy	11 5	7.5		
DEP	Amended		İ		ate, Zip C	Code			707			100		
DOL	Amendmen	t #	_ -		, NJ 07		99			Test on the				5-65
□ DOH	Emergency justification		Ī		f Contact				Tel	ephone Nu	mher			-
DCA	Cancellation	1		Project	Manag	er			190900000	3) 234-70				
			LITCH 100		ILITY INF		ION		(0).	0) 204-10	20			
Name of Facility Where	Abatement is Takir	ng Place (3)	1					Type of Facility	(4)					
Former KMart								School (K-	12)					
Street Address								Subchapte	r 8 (Oth	er than K-1.	2)			
180 Broadway								Other (i.e. etc.)	private i	& commerci	al buil	dings	, hom	ies,
City (5)								Square Feet	# 01	Floors	- 1	Bldg.	Age	
Elmwood Park	See a													
County (6)					Code (7)			Current Use (Pri	or if bei	ng demolisi	ned)		-	
Bergen				(STATE)	USE ONLY	·				empty				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	No.		Name o	f Abatement Co	ntractor			_		
A.E.S.L.							The MA	ACK Group, L	LC					
Street Address							Street A							-
2200 Paterson Plank	rd # 7						1500 K	ings HWY N,	STE 2	209				
City, State, Zip Code	**				2.4			ate, Zip Code		-10:20				
North Bergen, NJ 07							Cherry	Hill, NJ 0803	4					
Project Manager for Mon				Telepho	ne No.		Telepho			License N	0.			
Project Manager Car	mello		2	01-864	1-6583		(973) 7	59 - 5000		00781				
Start Date (10)		Schedule	d Con	npletion l	Date (11)		Name o	f OSHA Monitor						
1/30/19			•	12/30/1	9		The MA	CK Group, L	LC.					
Occupancy Status During	g Abatement (Chec	k Only One	e)				Street A						1100	
Facility Closed/Vac	ated During Entire	Period of A	baten	nent			1500 K	ngs HWY N,	STE 2	209				
Abatement Performe Other - Describe:	ed Outside of Norm	nal Facility I	Hours	3				ate, Zip Code						
							Cherry	Hill, NJ 0803	4					
Scope of Work (Check Al	I That Apply)			X.44					-					
≥3 sf or ≥3 lf		The state of the s	nova				\geq	Full Containm	ent with	Negative P	ressu	re		
≥160 sf or ≥260 lf		∑ De	molit	ion			-	Mini-Enclosure	3					
							\triangleright	Glovebag Prod Non-Exempted	(*) and	Non-Friable	Proce	dure		
		ls I	ocati	on			-		17		1	7.50	emen	t
Location	of	5000000	ormal			Do	scription o						/pe	
Asbestos-Containing	Material (ACM)	Used	Sole tenar		Asbes	tos Cont	aining Ma	terial (ACM)	Ar	nount			-	
TO BE ABA	tv	Custo			(i.e.	. thermal	systems	nsulation,		pecify	Re	Z	nca	Enc
(13)	-1		(12)				cing, VAT niscellane		SF	or LF)	Remova	Repair	psu	Enclosure
407 5.795			27								Val	=	Encapsulate	ure
		Yes	No	N/A										
See attac	hed	X				See	attache	ed	See a	attached	X			
											-			
		-					W-1872-17							-
Name of Registered Was	te Hauler		l AT	I DED III		0								
ame or negratered was	ie riaulei		11 333.0	J DEP W auler ID I		Cubic of Was		Name of I	Register	ed Landfill				
Newark / Freehold / S	partan			450			TBD	Minerva	Entern	rises II	C			
City, State	-					Dispos	al Date	City, State		nioco, LL				
Newark, NJ / Freedold	d, NJ / Donora.	PA					2/30/19			ЛH				
Completed by		Title					12/30/19 Waynesburg, OH Signature Date							
Mike Cooper		Preside	nt				1	1991-	-		5/19			
								A STATE OF THE PARTY OF THE PAR		1/1:	119			

06.0441	ITAL			(1	ursua	nt to NJ/	AC 8	3:60 and 5:1	6)	9		A 01152			1	
Date of Notification (1)					Nam	e of Buildir	ng Ov	wner/Operator	(2)		GP# 000				Ŷ	
01/	29 /	19			Mi	ke Adilet	to			- 1	FE	В]	2019		
Agencies Notified	Type Notific	cation			Stree	t Address			-		1					
⊠ EPA											/	7 - 5			-	
⊠ DOLWD	☐ Amende				City,	State, Zip	Code)	12			11,		1140		0.000
☑ DOH ☐ DCA	Amendn			•		klyn, NJ										
(NJAC 5:23-8)	☐ Emerger justificat		cluain	g		e of Contac				Т	elephone	Numh	er			
(☐ Cancella	1000				ke Adilet	535			1.	Cicpilotie	INGITIE	CI			
					FA	CILITY	VFO	RMATION					_			-
Name of Facility Where A	batement is	Taking	Place	(3)					Type of Facility	v (4)						
Adiletto Residence									School (K-	12)						
Street Address				-312					Subchapte	r 8 (C	ther than	K-12)				
									Other (i.e., homes, etc.		ite and co	mmer	cial b	uilding	s,	
City (5)					-1920				Square Feet		# of Floor	S	В	ldg. A	эе	
Oaklyn									1,298		2			80		
County (6)					Cou	nty Code (7)(ST/	ATE USE ONLY)	Current Use (F	Prior i	f being de	molish	ned)			
Camden									Residence		-		8.T0.T3			
Name of Monitoring Firm	Hired by Buil	lding O	wner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9	9)	-111-12-11-11-1					
Environmental Desi	ign, Inc.						4		onmental, LLO	1.00						
Street Address								reet Address	-							
5434 King Avenue,	Suite 101						6	323 Cutler Av	venue							
City, State, Zip Code					37/12-19		Cit	y, State, Zip Co	ode							
Pennsauken, NJ 08	109							Maple Shade								
Project Manager for Monit	toring Firm			Tele	phone	No.	-	lephone No.			License N	lo.	_			-
Tim Gromen				8	56-616	-9516	8	356-755-0099	ì		00842					
Start Date (10)		Schedu	uled C	omple	tion Da	ite (11)	Na	me of OSHA N	lonitor				-			-
02 /07 /	19	_ 02	2_/	08	3_ /	19	E	EMSL Analyt	ical, Inc.							
Occupancy Status During	Abatement (Check	only o	one)			Str	eet Address						-		
□ Facility Closed/Vacate	d During Enti	ire Peri	iod of	Abate	ment		2	200 Route 13	0 North							
Abatement Performed							Cit	y, State, Zip Co	ode							
Time of Abatement:	AM	PM	1/	PM		AM		innaminson								
Scope of Work (Check all	that apply)				=====		-		*							
		3	⊠ Re	navat				☐ Full Cont	ainment with Ne	egativ	e Pressu	re				
□ ≥160 sf or ≥260 lf			☐ De					☐ Mini-Enc ☐ Glovebag								
			1,-1,-1,-1		30,40,40			☐ Non-Exe	mpted (*) and N	on-F	riable Pro	cedure	3			
	_			Locat									Ab	ateme	nt T	ype
Location of Asbestos-Containing N		n)		Norma d Sole		Acho	oton	Description o Containing Ma				e.	R	Z.	Щ	щ
TO BE ABA	TED	"		intena				emal systems i			Amount (Specify		Removal	Repair	ıcap	ıclos
IN Facility (13)	У		Cust	(12)	Staff?			surfacing, VAT,			SF or LF		val		Encapsulate	Enclosure
(13)			Yes	No	N/A	1	OU	her miscellane	ous)						ate	
Basement to 2 nd Floor	•	-			1-	Duct D					20.05				_	
Date ment to L 11001		-				Duct Pa	ipei			_	60 SF	100		Ш	Ц	Ш
			Ш													
													П		П	П
Name of Registered Waste	e Hauler			N	JDEP \		Cut	oic Yards of	Name of Regi	stere	d Landfill				ш	_
Freehold Cartage				Н	auler II		Wa	ste	Fairless L							
City, State					15939	,	1 Dist	posal Date	City, State							
Freehold, NJ								2/08/2019	Morrisville	e. P/	Α.					
Completed By (Print or Type	oe)	Title								-, . ,	*	TD-/				
Christina Lynch	/	100000000000000000000000000000000000000	e Pre	eside	nt of (Operation	15	Signature				Date		.0		
		710	-0110	Joine	01	- peration	13	Mila)		11/	24	19		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

NOCK			NOTIF	ICATIO	State of No N OF ASI It to NJAC	BESTOS	ABATE	EMENT		CHEC	K #66	10	- Control of the Cont	4-1	
Date of Notification (1) 01-28-19					of Building sen Pha			r (2)	7						
Agencies Notified	Type Notification Initial				Address Route 2	.02 Sou	uth			F	EB	1	201	0	
	× Amended Amendment				tate, Zip C an, NJ 0				191	<u> </u>			201	<i>-</i>	i i
DOH DCA	Emergency (justification) Cancellation	including			of Contact					Telepho				3 Ap.	
	_ Odricellation			102.000/02	ILITY INF		ION			(908) 8	372-33	300		0.00	
Name of Facility Where Ab	atement is Takin	g Place ((3)	1 10	VICTI I IIVI	OKWAT	ION	Туре	of Facility (4)					
Street Address 1000 Route 202								×	School (K-12 Subchapter 8 Other (i.e. pri etc.)	Other tha	an K-12 nmercia) al buil	dings,	hom	es,
City (5) Raritan									re Feet	# of Floo	ors		ldg. A	2000	
County (6) Somerset					Code (7) USE ONLY	n			ent Use (Prior nmercial	if being de	emolish	ed)			
Name of Monitoring Firm Hi Environmental Health	ired by Building (Investigators	wner (8 , Inc.)	ASCI	M No.				tement Contr).				
Street Address 655 West Shore Trail								Addre: Broad	ss Street						
City, State, Zip Code Sparta, NJ 07871									ip Code NJ 07072						
Project Manager for Monitor Bill Kerbel	ring Firm			Telepho (973)	one No. 651-104	0	Teleph	none N	0.	Lice 007	nse No).		1945	
Start Date (10) (2)Project Postponed((3)01-29-19	Schedul 08-31-	ed Con	W	Date (11)		20.00	of OSH	HA Monitor	001					
Occupancy Status During A		Only O	ne)				Street	Addres	ss						
Facility Closed/Vacated Abatement Performed	Outside of Norma	al Facility	/ Hours						son Aveni	ne					
X Other – Describe: Sec	tion of bldg. will b	e not be	occupie	ed during	abatemer	nt			d City, NY	11101					
Scope of Work (Check All T	hat Apply)	-						_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	Min Glo	Containmen i-Enclosure vebag Proced i-Exempted (dure					
			Locati							7	11001		Abate	ment	8
Location of Asbestos-Containing Ma		Use	Normali d Sole	ly by	Asbes	Des tos Conta	scription aining M	of laterial	(ACM)	Amount	.		Ty		
TO BE ABATE In Facility (13)	<u>ED</u>	100000000000000000000000000000000000000	intenar todial S (12)			thermal surfac		insula T, or		(Specify SF or LF	/	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								-		ate	co
Bldg. B: 1st Floor E				Х		Tr	ransite			3,530\$	F	х			
Bldg. B: 1st Floor E	-			Х	1	ransite)	195SF	=	х			
Bldg. B: 1st Floor E	-			х		VA	T/Mast	ic		12,8208	F	х			
Bldg. B: 2nd Floor E				х		ACM p		sink		10SF		х			
Name of Registered Waste H Newark Carting, Inc.	Hauler		H	JDEP W auler ID 1509	1000000000	Cubic \ of Was			Name of Re G.R.O.W.			fill			
City, State Newark, NJ 07105			104	1308		TBD Disposa TBD	al Date		City, State						
Completed by Richard Doran		Title	-4.1.1				gnature		Morrisville	, PA 190	Date				
Tionard Dolan		Proje	ct ivia	nager		1	15	1	60%-1	11/C	01-2	28-1	9		

FEB

Title Of Project: 1000 Route 202, Raritan, NJ 08869 Additional Materials / Floors Pg. 2

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify Square Feet or Linear Feet)	Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)
	N/A	Transite	3,075SF	Removal
Bldg. B: 2nd Floor East Wing	N/A	Transite Countertop	85SF	Removal
Bldg. B: 2nd Floor East Wing	N/A	VAT/Mastic	18,440SF	Removal
Bldg. B: 2nd Floor East Wing	N/A	Transite	1,075SF	Removal
Bldg. B: 3rd Floor East Wing		Transite Countertop	25SF	Removal
Bldg. B: 3rd Floor East Wing	N/A	VAT/Mastic	7,800SF	Removal
Bidg. B: 3rd Floor East Wing	N/A	V /(1/11000010		

Date of Notification (1)				State of New CATION OF ASBE rsuant to NJAC 8	STOS ABA 60 and 12:	120)			ূন ্	F		7
1-29-2019			1	Name of Building O	wner/Opera	tor (2)	17					
Agencies Notified Type Notifi	cation			violidelez interr	ational Ir	ic.	: 1		FEB	1	00	
□ EPA □	000001			treet Address	1				FED	- 1	20	9
DEP Initial	dad			00 Deforest Av				1				
Amend	dment #	3	C	ity, State, Zip Code				1 V	1 47	100	1	
IXI DOLL Emerg	ency (inc	luding	- -	ast Hanover, N	J 07936				1			
DCA justifica	ation) Ilation		Na C	ame of Contact			- 1.					
				lenn Stock				Telephoi 732-33	ne Nur	nber		
Name of Facility Where Abatement is Commercial	Taking Pl	lace (3)		FACILITY INFOR	MATION			02-00	71-540	J5		
- Tolal		(-)				Type of Fac	ility (4)					
Street Address						School						
100 Deforest Avenue						Subcha	pter 8 (O	ther than	n K-12	1		
City (5)						Other (i	.e. private	& com	mercia) I build	inas.	non
East Hanover, NJ 07936						Square Feet		of Floors				
County (6)			10			100000	3	or intoor	0	Bid	dg. Ag	e
Morris			(STA	inty Code (7) ATE USE ONLY)		Current Use (eina do-	noli-t-	44	+	
Name of Monitoring Firm Hired by Buildi	ing Owne	or (2)						any den	iolishe	d)		-115-51
	-3 OWITE	. (0)	A	SCM No.	Name	of Abatement (Contracto	r (0)				
Street Address					Gree	n Environme	ental Se	ervices	110			
#/s					Street	Address		71 11003	, LLO			
City, State, Zip Code					235 \	/irginia Aver	nue					
					City, St	ate, Zip Code						
Project Manager for Monitoring Firm			T = -		Jerse	y City, NJ 0	7304					
			Telep	hone No.	Telepho	ne No.	- Selfen	Lies				
tart Date (10)	Sah-	dul- 1 c			201-3	33-8855		Licens 01174				
1-29-2019			ompletic	on Date (11)	Name of	f OSHA Monito	r					
ccupancy Status During Abatement (Ch	eck Only	0013			Green	Environme	ntal Ser	vices	110			
7	Jon Offiny	One)			Street A	ddress	. 501	.1003,	LLC			
Facility Closed Magazina D.	- D ·	100										
Abatement Performed Outside Entire	e Period o	of Abate	ment			rginia Avent	ıe					
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe:	e Period o rmal Faci	of Abate ility Hou	ement rs		235 Vi	rginia Avenu te, Zip Code						
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe:	e Period (rmal Faci	of Abate ility Hou	ement rs		235 Vi	te, Zip Code						
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 lf	mai Faci	llity Hou	rs		235 Vi	rginia Avenu te, Zip Code City, NJ 07						
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 lf	mai Faci	Renov	ation		235 Vi	te, Zip Code City, NJ 07	304					
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 lf	mai Faci	llity Hou	ation		235 Vi City, Stat Jersey	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure	304 ent with N	Vegative	Press	ure		
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe: ope of Work (Check All That Apply) ≥3 sf or ≥3 lf	mai Faci	Renov	ation		235 Vi City, Stat Jersey	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prog	ant with N					
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: ope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X	Renov Demoi	ation ition		235 Vi City, Stat Jersey	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure	ant with N				re	
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: ope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X	Renov Demoi	ation ition		235 Vi City, Star Jersey	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prog	ant with N			ocedu Abat	emen	t
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: ope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED	Vs	Renov Demoi	ation ition	Aspestos Cont	235 Vi City, Stat Jersey	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prot Non-Exempter	ent with Necedure	Non-Fria		ocedu Abat		t
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe: ope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Ws Ms	Renov Demol	ation ition ion lly lly by	(i.e. thermal	235 Vi City, Stat Jersey	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prot Non-Exempter	ant with Necessary	Non-Fria	ible Pro	ocedu Abat	emen ype	Г
Pacility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: ope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED	Ws Ms	Renov Demol	ation ition ion lly lly by	(i.e. thermal	235 Vi City, Stat Jersey	Full Containm Mini-Enclosure Glovebag Pro Non-Exempter	ent with Necedure	Non-Fria	ible Pro	Abat Ty	emen ype	Г
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: ope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ws Ms	Renov Demol	ation ition lly lly by nce/ Staff?	(i.e. thermal	235 Vi City, Stat Jersey	Full Containm Mini-Enclosure Glovebag Pro Non-Exempter	ent with Necedure	Non-Fria	ible Pro	Abat Ty	emen ype	Г
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe: ope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Us M. Cus	Renov Demol	ation ition ion lly lly by	(i.e. thermal surfac other m	Z35 Vi City, Stat Jersey scription of alining Mate systems ins ing, VAT, o iscellaneous	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prov Non-Exempter rial (ACM) sulation, r s)	ent with Necedure	Non-Fria		ocedu Abat	emen	Г
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: Dope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) 2nd Floor NW	Us M. Cus	Renov Demol	ation ition lly lly by nce/ Staff?	(i.e. thermal surfac other m	235 Vi City, Stat Jersey	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prov Non-Exempter rial (ACM) sulation, r s)	ent with Ne cedure d (*) and l	Non-Fria ount ecify LF)	Removal	Abat Ty	emen ype	t
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Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) 2nd Floor NW 3rd Floor NW	Us M. Cus	Renov Demol	ation ition lly lly by nce/ Staff?	(i.e. thermal surface other m	235 Vi City, Stat Jersey scription of aining Mate systems insing, VAT, o iscellaneous insulation	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prod Non-Exempted rial (ACM) sulation, r s)	and with Ne control of the control o	ount ccify LF)	Removal X	Abat Ty	emen ype	Г
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: Dope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) 2nd Floor NW 3rd Floor NW	Us M. Cus	Renov Demol	ation ition illy lly by nce/ Staff?	(i.e. thermal surface other m	235 Vi City, Stat Jersey scription of aining Mate systems insing, VAT, o iscellaneous insulation	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prod Non-Exempted rial (ACM) sulation, r s)	and with Ne control of the control o	ount ccify LF)	Removal X	Abat Ty	emen ype	Г
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: Dope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) 2nd Floor NW 3rd Floor NW	Us M. Cus	Renov Demol	ation ition illy ly by nce/ Staff? N/A	Aspestos Cont (i.e. thermal surfac other m Duct Duct I	235 Vi City, Stat Jersey scription of aining Mate systems insystems insing, VAT, o iscellaneous insulation insulation	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prod Non-Exempted rial (ACM) sulation, r s)	and	ount cify LF)	Removal X	Abat Ty	emen ype	Г
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: Dope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) 2nd Floor NW 3rd Floor NW e of Registered Waste Hauler In Environmental Services, LLC	Us M. Cus	Renov Demol	ation ition illy lly by nce/ Staff?	Duct Duct I	235 Vi City, Stat Jersey scription of aining Mate systems insystems insing, VAT, o iscellaneous insulation insulation	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prod Non-Exempted rial (ACM) Sulation, r s) Name of Re	and	ount cify LF)	Removal X	Abat Ty	emen ype	Г
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: Dope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) 2nd Floor NW 3rd Floor NW e of Registered Waste Hauler In Environmental Services, LLC State	Us M. Cus	Renov Demol	ation ition ily ly by nce/ Staff? N/A DEP Wa	Duct I	235 Vi City, Stat Jersey scription of aining Mate systems insing, VAT, o iscellaneous insulation i	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prod Non-Exempted rial (ACM) sulation, r s) Name of Re Fairless L	and	ount cify LF)	Removal X	Abat Ty	emen ype	Г
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: Cope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) 2nd Floor NW 3rd Floor NW 3rd Floor NW e of Registered Waste Hauler En Environmental Services, LLC State Ey City, NJ	Us M. Cus	Renov Demol	ation ition ily ly by nce/ Staff? N/A DEP Wa	Aspestos Cont (i.e. thermal surfac other m Duct Duct I Saste Cubic Ya of Waste 2 Disposal	235 Vi City, Stat Jersey scription of aining Mate systems insing, VAT, of iscellaneous insulation insulation.	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prod Non-Exempted rial (ACM) sulation, r s) Name of Re Fairless L City, State	andfill	ount cify LF)	Removal X	Abat Ty	emen ype	Г
Facility Closed/Vacated During Entire Abatement Performed Outside of No. Other – Describe: Cope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) 2nd Floor NW 3rd Floor NW e of Registered Waste Hauler En Environmental Services, LLC State	Us M. Cus	Renov Demoi	ation ition lly ly by nce/ Staff? N/A DEP Wauler ID N 34889	Duct I Suste Cubic Yaste Disposal 2-4-201	235 Vi City, Stat Jersey scription of aining Mate systems insing, VAT, of iscellaneous insulation insulation.	te, Zip Code City, NJ 07 Full Containm Mini-Enclosure Glovebag Prod Non-Exempted rial (ACM) sulation, r s) Name of Re Fairless L	andfill	ount cify LF)	Removal X	Abat Ty	emen ype	Г

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 1/29/18 Matt Porpora Private Home Agencies Notified Type Notification Street Address **EPA** Initial DEP City, State, Zip Code Amended X DOL Amendment # Beach Haven NJ 08008 Emergency (including Name of Contact DOH justification) Telephone Number DCA Cancellation Dave **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Matt Porpora Private Home School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, City (5) Square Feet # of Floors Bldg. Age Beach Haven NJ 08008 1000 35 +County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Ocean Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) N/A Pernaco Inc. Street Address Street Address PO Box 329 City, State, Zip Code City, State, Zip Code West Berlin NJ 08091 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 856-753-9800 00727 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 2/8/19 2/15/19 Same Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure

Location of		Is Location Normally Used Solely by Description of						Abatement Type					
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intenar todial S (12)	nce/	Asbestos Containing Mate (i.e. thermal systems in surfacing, VAT, other miscellaneo	sulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure			
	Yes	No	N/A				<u>m</u>	,	ate	Ге			
Exterior Siding			х	Exterior Sidin	g	1600 sf	Х						
Name of Registered Waste Hauler United Roll Off		H	DEP Waller ID I		Name of I	Registered Landfil	ı						

Title

President

Disposal Date

Signature

2/15/19

Completed by

Anthony T Perna

City, State

Elm NJ

Date

1/29/18

Morrisville PA 19067

City, State

Date of Notification (1)					Mam	e of Buildir	ng Owner/Operator	(2)				-	
1/	25 /	19	_				Iniversity-Office		Constructi	∂n 🖫	A D	7	.
Agencies Notified	Type Notific	ation		1		t Address			ir i ilə ilə il	<i>31</i> [5]	11 19		2
⊠ EPA					20	0 Elm Dr.		i i					1
⊠ DOLWD		-		. h	City.	State, Zip	Code		FI	EB 1	202	73	· ř
☑ DHSS	Amendm			2			NJ 08544	į	21, 11	-D I	201	9	-
□ DCA (NJAC 5:23-8)		icy (incl ion)	uding	+		e of Contac			1=1.				1
(1.0.10 0.20 0)	☐ Cancellat					bert Orte	501		Telephone	11 - 12			-
							-		609-258	-1841		17 65	432
Name of Facility Where	Abatament is 7	Takina F	21 (0)		FA	CILITY IN	FORMATION						
Princeton Universi								Type of Facility					
Street Address	ty-New Grad	duate (ollege	Ro	om 2	2412		School (K-1)	2)	14 40)			
SOLO AND EURO INVESTMENTON								Subchapter Other (i.e., p	o (Other than rivate and cor	K-12) nmercial l	huildin	ns	
College Rd W & Sp	ringdale Rd							homes, etc.)	THO COIGH	ound!!!	90,	
City (5)								Square Feet	# of Floors	i [Bldg. A	\ge	_
Princeton											70	10000	
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being de	molished))		-
MERCER								Office/Class					
Name of Monitoring Firm		ding Ow	ner (8)	A	SCM	No.	Name of Abateme	ent Contractor (9)					
TTI Environmental	Inc				0000	03		VIRONMENTA					
Street Address				_			Street Address		<u></u>				-
1253 North Church	Rd						1123 BEAVE	STREET					
City, State, Zip Code				_			City, State, Zip Co						_
Moorestown, NJ 08	057						BRISTOL, PA						
Project Manager for Moni			T.	oloni	hone	No		19007					130000
Michael Keehn	toring i iiii		1			-8800	Telephone No.		License No).			
Start Date (10)	16	ا ، اه م ط ه					215-788-6040		00509				
		Schedule 2					Name of OSHA M						
					_ ′ -	19	BRISTOL EN	/IRONMENTA	L, INC.				
Occupancy Status During							Street Address						
☐ Facility Closed/Vacate	Outside of No	e Period	of Aba	teme	ent		1123 BEAVER	RSTREET					
Abatement Performed Time of Abatement: 72	Outside of No	ormai Fa M/	DM.	ours	- Des	cribe	City, State, Zip Co	de					
		1411			_Aivi		BRISTOL, PA	19007					
Scope of Work (Check all	that apply)						2 <u>22</u> 1						
				otion				ainment with Neg	ative Pressure	e			
≥160 sf or ≥260 lf		X	Renov										
			Renov				=						
			Renova				Glovebag	Procedure	n-Friable Proc	edure			
			Demoli Is Loc	ition	n		Glovebag		n-Friable Proc		batem	ent T	VD
Location			Is Loc Norn	ation ation	n		☐ Glovebag ☑ Non-Exer Description of	Procedure npted (*) and No	n-Friable Proc	Al	batem		1
Location (Naterial (ACM)		Demoli Is Loc	ation ation	n by		Glovebag Non-Exer Description of stos Containing Mat	Procedure npted (*) and No erial (ACM)	Amount	Al	_		1
Location of Asbestos-Containing No. 100 BE ABA IN Facility	Material (ACM) TED)	Is Loc Norm Used So Mainter Custodia	ation nally olely nanc	n by		Glovebag Non-Exer Description of stos Containing Mat, thermal systems in	Procedure npted (*) and No erial (ACM) nsulation,	Amount (Specify	Al	_		1
Location of Asbestos-Containing Machine TO BE ABA	Material (ACM) TED)	Is Loc Norm Used So Mainter Custodia (12	ation nally plely nanc al Sta 2)	by ce/ aff?		Glovebag Non-Exer Description of stos Containing Mat	Procedure npted (*) and No erial (ACM) nsulation, or	Amount	A Remov	_		1
Location of Asbestos-Containing Machine Machin	Material (ACM) TED)	Is Loc Norm Used So Mainter Custodia	ation nally plely nanc al Sta 2)	n by		Description of stos Containing Mat , thermal systems in surfacing, VAT,	Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify	Al	_	t Encapsulate	1
Location of Asbestos-Containing No. 100 BE ABA IN Facility	Material (ACM) TED)	Is Loc Norm Used So Mainter Custodia (12 es No	cation nally olely nanc al Sta 2)	by ce/ aff?		Description of stos Containing Mat, thermal systems is surfacing, VAT, other miscellaneous	Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify	A Removal	Repair		Enclosure
Location of Asbestos-Containing N TO BE ABA IN Facility (13)	Material (ACM) TED) (Is Loc Norm Used So Mainter Custodia (12 es No	cation nally polely nanc al Sta 2)	by ce/aff?	(i.e.	Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaneoulation	Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal 🛛	Repair		Enclosure
Location of Asbestos-Containing N TO BE ABA IN Facility (13)	Material (ACM) TED) (Y	Is Loc Norm Used So Mainter Custodia (12 es No	cation nally olely nancal Sta 2)	by ce/aff?	(i.e.	Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaneoulation	Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify SF or LF)	A Removal	Repair		Enclosure
Location of Asbestos-Containing N TO BE ABA IN Facility (13)	Material (ACM) TED) (Is Loc Norm Used So Mainter Custodia (12 es No	cation nally olely nancal Sta 2)	by ce/aff?	(i.e.	Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaneoulation	Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal 🛛	Repair		Eliciosure
Location of Asbestos-Containing Machine Machin	Material (ACM) TED) (Y	Is Loc Norm Used Sc Mainter Custodia (12 es No Mainter Custodia)	cation nally polely nancal Sta 22)	by ce/aff?	(i.e.	Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaneoulation	Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal 🛭	Repair		ype Enclosure
Location of Asbestos-Containing N TO BE ABA IN Facility (13)	Material (ACM) TED y) (Is Loc Norm Used So Mainter Custodia (12 es No III III III III III III III III III	cation ca	by ce/aff?	Pipe ins	Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaneoulation	Procedure inpted (*) and No inerial (ACM) insulation, or inus)	Amount (Specify SF or LF) 35 LF 96 SF	Removal 🛛	Repair		Liiciosuia
Location of Asbestos-Containing N TO BE ABA' IN Facility (13) Room 2412	Material (ACM) TED y e Hauler) (Y	Is Loc Norm Used So Mainter Custodia (12 es No III III III III III III III III III	cation cation nally blely nanccal State (Control of the Control of	by by lee/ aff? N/A DEP Weller ID	Pipe ins Floor tile Vaste	Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaneoulation	Procedure inpted (*) and No erial (ACM) insulation, or ous) Name of Regist	Amount (Specify SF or LF) 35 LF 96 SF	Removal 🛭	Repair		Liicioadia
Location of Asbestos-Containing Management Processing States Asbestos-Containing States Asbestos-Containin	Material (ACM) TED y e Hauler) (Y	Is Loc Norm Used So Mainter Custodia (12 es No III III III III III III III III III	cation cation nally blely nanccal State (Control of the Control of	by ce/aff? N/A	Pipe ins Floor tile Vaste	Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaned culation	Procedure inpted (*) and No erial (ACM) insulation, or inus) Name of Regist FAIRLESS	Amount (Specify SF or LF) 35 LF 96 SF	Removal 🛭	Repair		1
Location of Asbestos-Containing N TO BE ABA' IN Facility (13) Room 2412 Room 2412 Image: Asbestos-Containing N TO BE ABA' IN Facility (13) Room 2412 Image: Asbestos-Containing N TO BE ABA' IN Facility (13) In Section 1	Material (ACM) TED y e Hauler) (Y	Is Loc Norm Used So Mainter Custodia (12 es No III III III III III III III III III	cation cation nally blely nanccal State (Control of the Control of	by by lee/ aff? N/A DEP Weller ID	Pipe ins Floor tile Vaste	Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaned culation	Procedure inpted (*) and No erial (ACM) insulation, or ous) Name of Regist FAIRLESS City, State	Amount (Specify SF or LF) 35 LF 96 SF	Removal 🛭	Repair		1
Location of Asbestos-Containing N TO BE ABA' IN Facility (13) Room 2412 Room 2412 lame of Registered Waste BRISTOL ENVIRONMIty, State BRISTOL, PA 19007	Material (ACM) TED Y Be Hauler MENTAL, INC) (Y	Is Loc Norm Used So Mainter Custodia (12 es No III III III III III III III III III	cation cation nally blely nanccal State (Control of the Control of	by by be/aff? N/A DEP Weller ID	Pipe ins Floor tile Vaste	Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaned culation Cubic Yards of Waste Disposal Date	Procedure inpted (*) and No erial (ACM) insulation, or inus) Name of Regist FAIRLESS	Amount (Specify SF or LF) 35 LF 96 SF	Removal 🛭	Repair		Liiciosuia
Location of Asbestos-Containing N TO BE ABA' IN Facility (13) Room 2412 Room 2412 It ame of Registered Waste BRISTOL ENVIRONMents	Material (ACM) TED Y Be Hauler MENTAL, INC	y C.	Is Loc Norm Used So Mainter Custodia (12 es No III III III III III III III III III	cation cation nally blely nanccal State (Control of the Control of	by by be/aff? N/A DEP Weller ID	Pipe ins Floor tile Vaste	Description of stos Containing Mat, thermal systems in surfacing, VAT, other miscellaned culation	Procedure inpted (*) and No erial (ACM) insulation, or ous) Name of Regist FAIRLESS City, State FAIRLESS	Amount (Specify SF or LF) 35 LF 96 SF	Removal 🛭	Repair		Liicioadia

Date of Notification (1)					Nan	ne of Build	ding Owner/Operator	(2)	To the state of			- 12 - O.	-
/	25 /	1	19		P	rinceton	University-Office	of Design and	d Construc	tion_			
Agencies Notified	Type Notif	ficatio	n		Stre	et Addres	s			FFR		2019	
⊠ EPA ⊠ DOLWD	⊠ Initial				20	00 Elm D	r.						
⊠ DHSS		100	#4 41	00140	City	State, Zip	p Code						
⊠ DCA					Pi	inceton,	, NJ 08544		2.7.	1.7			
(NJAC 5:23-8)	justifica	ation)		9	Nam	e of Conta	act		Telephone	Number			-
	☐ Cancell	lation			Ro	bert Ort	tego		609-25				
					FA	CILITY	INFORMATION			- 11 - 13		-	_
Name of Facility Where At								Type of Facility	(4)			-	_
Princeton University	-New Gra	adua	te Co	lege	Room	2412		School (K-1	2)				
Street Address								Subchapter	8 (Other than	K-12)			
College Rd W & Spri	ingdale R	d						Other (i.e., p	nvate and co	mmercial	buildin	igs,	
City (5)								Square Feet	# of Floor	's I	Bldg. /	Ane	
Princeton											70	ige	
County (6)					Cou	nty Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being de	emolished			
MERCER								Office/Class		orrionorie e	')		
Name of Monitoring Firm H		ilding	Owner	(8)	ASCN	l No.	Name of Abateme	(max)				248	
TTI Environmental In	IC				000	03		VIRONMENTA					
Street Address							Street Address		-,				_
1253 North Church R	ld						1123 BEAVE	RSTREET					
City, State, Zip Code							City, State, Zip Co						_
Moorestown, NJ 0805							BRISTOL, PA						
Project Manager for Monito	ring Firm			Tel	ephone	No.	Telephone No.		License N	lo			_
Michael Keehn				6	09-386	-8800	215-788-6040		00509	10.			
Start Date (10)		Sche	duled (Comple	etion Da	ite (11)	Name of OSHA M	onitor					_
1/28/	19	0	N	HO	1201		BRISTOL EN	/IRONMENTAI	L. INC.				
Occupancy Status During A	batement (Chec	k only	one)			Street Address						_
☐ Facility Closed/Vacated	During Enti	ire Pe	riod of	Abate	ment		1123 BEAVER	STREET					
Abatement Performed O	utside of N	orma	l Facili	y Hou	rs - Des	cribe	City, State, Zip Co						
Time of Abatement: 7:0	<u>U</u> AM- <u>6:30</u> F	PM/_	P	W	AM		BRISTOL, PA						
Scope of Work (Check all th	at apply)												
≥3 sf or >3 If			⊠ p.	enovat			□ Full Conta	ainment with Neg	ative Pressur	re			
☐ ≥160 sf or ≥260 lf			1,000	emolitic			☐ Mini-Encle						
							Non-Exen Non-Exen	npted (*) and Nor	n-Friable Pro	cedure			
V //				Local				T			batem	ent T	Vne
Location of Asbestos-Containing Ma		A)		Norma ed Sole		١	Description of					1	
TO BE ABATE		1)	Ma	intena	nce/	Asbe	estos Containing Mate e., thermal systems in	erial (ACM)	Amount	em	Repair	ince	inci
IN Facility			Cus	todial ((12)	Staff?	,	surfacing, VAT,	or	(Specify SF or LF		¥	squ	Enclosure
(13)			Yes	No	N/A	- 50	other miscellaneo	us)		′ -		Encapsulate	ē
Room 2412				×	IN/A	Ding in	sulation						
Room 2412									35 LF	×			
					-	Floor ti	ie		96 SF	×			
				Ш									
(B)													
ame of Registered Waste F BRISTOL ENVIRONME		10		100	JDEP V auler ID		Cubic Yards of Waste	Name of Regist					
ity, State	, IIV				18706	10.000	J	FAIRLESS I	LANDFILL				
BRISTOL, PA 19007							Disposal Date	City, State	W 1 0 B4				,
ompleted By (Print or Type))	Title						FAIRLESS I	TILLS, PA				
	,	100000000					Signature	1 1.	· .	Date /	8/1	_	
Brian Scafiro	- 1	E-	stimat				///						

· APPROVED BY:

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

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Date of Notification (1)					No	me of Ruild	ing Owner/Operator	(0)		IFU		~	(.
		1					University-Office		Construction		11		
Agencies Notified EPA	Type Notific	cation	1			eet Address		· .	FEB		20)19	
⊠ DOLWD	Amende	ed				00 Elm Di			L P		61	/13	1
☑ DHSS	Amenda	nent#			1	y, State, Zip							- 15
DCA	⊠ Emerger	ncy (i	nclud	ng	-		NJ 08544		Tan day				100
(NJAC 5:23-8)	justificat					me of Conta			Telephone Nun	nber		5 100	
	LI Cancella	HION			F	lobert Ort	ego		609-258-18	41			
Name of Francisco					F	ACILITY I	NFORMATION						
Name of Facility Where A								Type of Facility					_
Princeton University Street Address	y-New Gra	duate	e Co	llege	Room	1 2412		School (K-12	2)				
College Rd W & Spr	ringdale Ro	t						Other (i.e., p	8 (Other than K-12 rivate and comme	2) ercial l	buildi	ngs,	
City (5)								Square Feet	# of Floors	. 11	3ldg.	Ann	
Princeton								1		Ι,	70	Age	
County (6)					Co	unty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)		-	
MERCER							the temperature of all the dimension of prime (confidence) dimension € to	Office/Class		oneu/			
Name of Monitoring Firm I		ding C	Owner	(8)	ASCI	VI No.	Name of Abatem	ent Contractor (9)			_		
TTI Environmental In	nc				000	003		VIRONMENTA					
Street Address							Street Address		-,				
1253 North Church F	Rd						1123 BEAVE	R STREET					
City, State, Zip Code					2002		City, State, Zip Co						
Moorestown, NJ 080							BRISTOL, PA						
roject Manager for Monito	oring Firm			Te	lephone	No.	Telephone No.		License No.			-	
Michael Keehn					09-38	6-8800	215-788-6040	l'	00509				
tart Date (10)	S	ched	uled (Comp	etion D	ate (11)	Name of OSHA M	Ionitor	1 30000	100			
1/28/	19	2	2		1_/	19	BRISTOL EN	VIRONMENTAL	INC.				
ccupancy Status During A	Abatement (C	Check	only	one)			Street Address						
Facility Closed/Vacated	During Entire	e Peri	iod of	Abate	ement		1123 BEAVER	RSTREET		60			
Abatement Performed C	Jutside of No	rmal I	Facilit	у Но	ırs - De	scribe	City, State, Zip Co						
Time of Abatement: 7:0	UAM-6:30P	IVI/	P	M	AM	I	BRISTOL, PA						
cope of Work (Check all th	hat apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			⊠ Re				☐ Mini-Encl	ainment with Nega osure procedure npted (*) and Non		_			
			ls	Loca	tion	T		1	Thank Thoogan	_			
Location of				d Sol	ally ely by		Description of				atem	_	1
Asbestos-Containing Ma TO BE ABATE			Ma	intena	ince/	Asbes	stos Containing Mat , thermal systems in	erial (ACM)	Amount	Remova	Repair	Enc	Enclosure
IN Facility			Cust		Staff?	(1.6.	surfacing, VAT,	or	(Specify SF or LF)	NOL	ai-	aps	losi
(13)		-		(12)	_	-	other miscellaneo	ous)	01 01 11)	1 20		Encapsulate	re
		-	Yes	No	N/A							O	
oom 2412		-				Pipe ins			35 LF				
om 2412		.				Floor tile	e		96 SF				
		-											
		- 11					-						
70 of Darling d Marin		- 1				Almaka I	Cubic Yards of	Name of Registe					
me of Registered Waste H				1000	JDEP V auler ID	No.	Waste						
RISTOL ENVIRONME v, State				1000		No.		FAIRLESS L					
RISTOL ENVIRONME				1000	auler ID	No.	Waste	FAIRLESS L City, State	ANDFILL				
RISTOL ENVIRONME v, State	ENTAL, INC			1000	auler ID	No.	Waste	FAIRLESS L	ANDFILL				

Date of Notification (1)				Name	of Building	Owr	ner/Operator (2)	FEB	1 2	019		13)		
/	19			Jos	eph S. Fi	uma	ıra		; 3	5	9-	31	> "		
Agencies Notified Type Notifica ⊠ EPA □ Initial	tion			Street	Address				1.00	-					
□ DOLWD □ Amended			-												
□ DOH Amendme					tate, Zip C										
□ DCA □ Emergend		ing			ville, NJ		21								
(NJAC 5:23-8) justification	n)				of Contact				Telephone Numb	er					
☐ Cancellati	on			Jos	eph S. Fi	uma	ıra								
Name of Equility Where Abstract is T	alsiaa Dla	(0)		FAC	ILITY IN	FOR	MATION	· · ·							
Name of Facility Where Abatement is T Residence	aking Pia	ace (3)						Type of Facility	e de la companya de l						
Street Address								School (K-12	:) 3 (Other than K-12)						
Street Address									rivate and commerc		ilding	IS,			
City (5)								Square Feet	# of Floors	Bl	dg. A	ae			
Brick						1500 1 65									
County (6)				Coun	tv Code (7)	(STA	TE USE ONLY)		or if being demolis						
Ocean						4		Residence	or it coming contions						
Name of Monitoring Firm Hired by Build	ing Own	er (8)	A	SCM I	No.	Nan	ne of Abateme	ent Contractor (9)					-		
N/A		100						X -7							
Street Address							Guardian Contracting, Inc. Street Address								
× ×					6.	18	889 Route 9								
City, State, Zip Code							, State, Zip Co								
						Т	oms River,	New Jersey 08	755						
Project Manager for Monitoring Firm		Т	elep	hone I	No.	Tele	phone No.		License No.						
						7	32-349-9932	!	00624						
	cheduled	Com	pleti	on Dat	te (11)	Nan	ne of OSHA N	lonitor							
02 /11 /19	02	. / _	12	_ / _	19	Е	.M.S.L. Ana	lytical							
Occupancy Status During Abatement (C						Stre	et Address	***							
☐ Facility Closed/Vacated During Entir						10	056 Stelton								
Abatement Performed Outside of No Time of Abatement:AM						City	, State, Zip Co	ode							
					uvi	Р	iscataway, I	New Jersey 08	854						
Scope of Work (Check all that apply)							☐ Full Conf	tainment with Neg	native Pressure						
≥3 sf or ≥3 lf		Renov					☐ Mini-Enc	losure	julivo i rossuro						
⊠ ≥160 sf or ≥260 lf	\bowtie	Demo	litior	1				g Procedure moted (*) and No	n-Friable Procedur	Δ			1		
		Is Lo	catio	on					77 710010 7 7000001	1	atem	ent T	vne		
Location of	- .	Non					Description of	of					T		
Asbestos-Containing Material (ACM		Jsed S Mainte					Containing Ma		Amount	Removal	Repair	nca	Enclosure		
TO BE ABATED IN Facility		ustodi			(i.e.	, the	rmal systems urfacing, VAT	insulation,	(Specify SF or LF)	ova	i ≡	psu	uso		
(13)		(1	2)				ner miscellane		Si OiLi)	=		Encapsulate	6		
	Ye	es N	10	N/A								· CD			
exterior					asbesto	s si	ding		1500 sf						
]												
]												
		Г]							П		П	П		
Name of Registered Waste Hauler			0.25	JDEP V		Cubic Yards of Name of Registered Landfill				1					
Guardian Contracting, Inc.							ste	T.R.R.F.							
City, State							osal Date	City, State							
Toms River, New Jersey							2/12/19	Tullytown,	Pennsylvania						
Completed By (Print or Type)	Title						Signature	1	Date /						
Nicholas Fernicola	Proje	ect Ma	ana	ger			1		1 129/19						

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

11,400	X THE	7 d	(F	urs	suant	to NJAC	8:60 and 5:16	i) .,··				11	Ш
Date of Notification (1)	0			N			Owner/Operator (2		t FEB	1 ,20	19 _	D	-31
		19			Profe	essional	Government As	ssociates, LLC	1))	10) 5	5
Agencies Notified	Type Notification	on		S	Street A	ddress		Ti-	1	i je	7		
					909 E	Belmont	Avenue	B					
☑ DOLWD	Amended Amendmen	+ #		C	City, Sta	ate, Zip Co	ode						
⊠ DOH □ DCA	Emergency	-	na		North	n Haledo	n, NJ 08508						
(NJAC 5:23-8)	justification		.5	N	lame o	f Contact			Telephone Numb				
	☐ Cancellatio	n			Anth	ony			973-445-7373				
					FACI	ILITY IN	FORMATION	- c= ::::					_
Name of Facility Where	Abatement is Ta	king Plac	e (3)					Type of Facility (☐ School (K-12	200				
Residence								Subchapter 8	(Other than K-12)				
Street Address								Other (i.e., pr homes, etc.)	ivate and commerc	ial buil	dings	,	
0:1- (5)								Square Feet	# of Floors	Bldd	g. Ag	9	
City (5)								1500	1	6		- 00	
Toms River				-1	Count	v Code (7)	(STATE USE ONLY)		or if being demolish	ned)			
County (6) Ocean					Count	y code (r)	(OTATE COE ONE I)	Residence					
Name of Monitoring Fire	n Hired by Buildi	na Owne	r (8)	TA	SCM N	lo.	Name of Abateme						
N/A	Titled by Ballal	ng Owno	. (0)	'				ntracting, Inc.					
Street Address							Street Address						
01100171001000							1889 Route 9	9, Unit 61					
City, State, Zip Code				-			City, State, Zip C	ode					
							Toms River,	New Jersey 08	755				
Project Manager for Mo	nitoring Firm		T	elep	hone N	No.	Telephone No.		License No.				
							732-349-993	2	00624				
Start Date (10)	Sc	cheduled		7			Name of OSHA	Monitor					
02 /08	/19	02	1_	11	_ / _	19	E.M.S.L. Ana	alytical					
Occupancy Status Duri							Street Address						
☐ Facility Closed/Vaca	ated During Entire	e Period	of Ab	atem	nent	200	1056 Stelton						
☐ Abatement Perform Time of Abatement	ed Outside of No	rmal Fac	ility H	lours	s - Desc	cribe AM	City, State, Zip C						
							Piscataway,	New Jersey 08	854				
Scope of Work (Check	all that apply)						☐ Full Cor	ntainment with Ne	gative Pressure				
≥3 sf or ≥3 lf			Reno				Mini-En						
≥160 sf or ≥260 lf		\bowtie	Demo	olitio	n			ag Procedure empted (*) and No	on-Friable Procedu	re			
			Is Lo	ocati	on			, ,,		Ab	atem	ent T	уре
Location	on of			mal			Description			D.	R	Щ	m
Asbestos-Containir			Jsed Maint				estos Containing M e., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
TO BE A		C			Staff?	(1.0	surfacing, VA	T, or	SF or LF)	Val	,	sula	sure
. (13				(12)	NI/A	-	other miscellan	eous)				te	
		Ye		No	N/A				1100 sf				\vdash
exterior				X		aspest	os siding		1100 31				17
			1 1							$\perp \Box$			븯
] [Ш	Ш	Ш
1] [V.					
Name of Registered W	laste Hauler			1.505	JDEP !		Cubic Yards of		istered Landfill				
Guardian Contra				Н	20223		Waste 3	T.R.R.F.					
City, State					LULL		Disposal Date	City, State					
Toms River, New	Jersey						02/11/19	Tullytowr	n, Pennsylvania				
Completed By (Print o	r Type)	Title					Signature		//	ate		1	
Nicholas Fernico		Proi	ect l	/lan	ager		1	11.41.	1	1/	18	1 1	7

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

14350	+	A. 32.E. E.	Pur	suant t	to NJAC	8:60 and 5:16)	FFR	1.	2010	ļ.	
Date of Notification (1)				Name of	Building (Owner/Operator (2)	, 120	1 2	.019	Ì	: 1.
01 /	28 / 19	9			cia McGr	oary		1-3.5	1.12	17	1	_
Agencies Notified	Type Notification			Street A	ddress						**	
⊠ EPA	☐ Initial								11/4	n s	•	
□ DOLWD □ □ □ □ □ □ □ □ □	Amended			City, Sta	te, Zip Co	de						
☑ DOH	Amendment #			Red E	Bank, NJ	07701						
☐ DCA (NJAC 5:23-8)	justification)	licidaling		Name of	Contact			Telephone Number	er			
(1407 10 0.20 0)	☐ Cancellation			Patrio	cia McGr	roary				_		
				FACI	LITY INF	ORMATION						
Name of Facility Where	Abatement is Takir	ng Place (3)				Type of Facility (
Residence							School (K-12) (Other than K-12)				
Street Address							Other (i.e., pr	ivate and commerc	cial build	dings,		
				-			homes, etc.)					
City (5)					100		Square Feet	# of Floors	1	g. Age		
Red Bank							1000	1	65	5		
County (6)				County	Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)			
Monmouth							Residence					
Name of Monitoring Firm	n Hired by Building	Owner (8) [ASCM N	0.	Name of Abateme	ent Contractor (9)					
Guardian Contract						Guardian Co	ntracting, Inc.					
Street Address	3,					Street Address						
1889 Rte. 9, Unit 6	1					1889 Route 9	, Unit 61					
City, State, Zip Code					-	City, State, Zip C	ode					
Toms River, New	Jarsey 08755						New Jersey 08	755				
Project Manager for Mo			Tele	phone N	lo.	Telephone No.		License No.				
Nicholas Fernicola				32-349-	no anno and a	732-349-9932	2	00624				
		eduled Co	J., 272			Name of OSHA N						
Start Date (10)		02 /				E.M.S.L. Ana						
Occupancy Status Duri	ng Abatement (Che	eck only o	ne)			Street Address	V					
☐ Facility Closed/Vaca	ated During Entire I	Period of A	Abate	ment		1056 Stelton						
☐ Abatement Performe	ed Outside of Norm	nal Facility	Hou	rs - Desc	cribe	City, State, Zip C						
Time of Abatement:	AM	PW/	_PIVI		-\IVI	Piscataway,	New Jersey 08	3854				
Scope of Work (Check	all that apply)					M Full Cor	ntainment with Ne	native Pressure				
≥3 sf or ≥3 lf		⊠ Re	novat	tion		☐ Mini-En		gative i resoure				
≥160 sf or ≥260 lf			moliti			Gloveba	ag Procedure	Frieble Dropodu	100			
1202	3					∐ Non-Ex	empted (") and N	on-Friable Procedu		ateme	nt Tu	,DO
		10000	Loca									
Location				lely by	Ashe	Description estos Containing M		Amount	Removal	Repair	Encapsulate	Enclosure
Asbestos-Containin TO BE A				ance/		e., thermal systems	s insulation,	(Specify	VOU	a-	aps	osu
IN Fac	cility	Cus	todial (12	Staff?		surfacing, VA		SF or LF)	<u>n</u>		ulat	re
(13	3)	Yes	No		1	other miscellan	eous)				Ф	
					popco	rn ceilin		760 sf		П		
living room/hallway	y/bearooms				popeo		ja:			П		
					1							
												닏
Name of Registered W	Vaste Hauler			NJDEP	Waste	Cubic Yards of	Name of Reg	istered Landfill		H		
Guardian Contra				Hauler I 2022		Waste 02/11/19	T.R.R.F.					
City, State						Disposal Date	City, State					
Toms River, New	/ Jersey						Tullytow	n, Pennsylvania	1			
Completed By (Print o	or Type)	Title	77.			Signature	/	0	Date	j	1 .5	
Nicholas Fernico		Proiec	t Ma	nager		1	1	1	112	15/	1 7	

CV 350218	AIN	TIF	ICAT (Purs	ION OF A	New Jersey SBESTOS ABA IAC 8:60 and 5:	TEMENT		2 E	Addings of	17	
Date of Notification (1)						**************************************					1
120 March 1997	40		N		ing Owner/Operator	(2)	FE FE	B	1 2	019	1
	19			LG Prperti	es		1 9	35	9,2	4	
Agencies Notified Type Notif	ication		S	treet Address	3		-	7	7		• •
☐ EPA ☐ Initial ☐ Amend				P O Box 3	35		Policie Co			-	
☑ DOLWD ☑ DOH Amend Amend	200 C		C	ity, State, Zip	Code				10.7		2.41
	ency (includ	ling		Central Va	ley, NY 10917						
(NJAC 5:23-8) justifica	ation)	ing		ame of Conta			Telephone No	ımhor			
☐ Cancell	lation			Moshe We	iss		845-662-4				
				FACILITY I	NFORMATION		043-002-4	-022			
Name of Facility Where Abatement is	Taking Pla	ace (3	5)			Type of Facility	(4)		-		
Apartment Building						School (K-1	2)				
Street Address			10000			─ Subchapter	8 (Other than K-	12)			
143 Delaware Street						M Other (i.e., phomes, etc.	private and comn	nercial b	uildir	gs,	
City (5)						Square Feet	# of Floors	15	11-1		
Woodbury						10,000	2		Ildg. /	age	
County (6)				County Code	(7)(STATE USE ONLY)				80		
Gloucester				ounty code	(1)(STATE USE UNLT)	Control Control Control Control Control Control	rior if being demo	olished)			
Name of Monitoring Firm Hired by Bu	ildina Owne	er (8)	ASI	CM No.	Nome of Abote	Apartment					
Guardian Contracting, Inc.	g Own	31 (0)	/101	SIVI INO.	The second control of	nent Contractor (9					
Street Address						ontracting, Inc.					
1889 Rte. 9, Unit 61					Street Address						
City, State, Zip Code					1889 Route 9						
Toms River, New Jersey 0875	5				City, State, Zip C		5.				
Project Manager for Monitoring Firm		1-				New Jersey 08	755				
Nicholas Fernicola		1		ne No.	Telephone No.		License No.				
The state of the s	0-1-11			49-9932	732-349-993		00624				
01 /29 /19		/ _	31	Date (11) /19	Name of OSHA N E.M.S.L. Ana						
Occupancy Status During Abatement	(Check only	y one)		Street Address						
☐ Facility Closed/Vacated During Ent	ire Period o	of Aba	atemen	t	1056 Stelton						
Abatement Performed Outside of N Time of Abatement:AM	lormal Faci	lity H	ours - [Describe	City, State, Zip C	ode					
	PIVI/		IVI	AM	Piscataway,	New Jersey 08	854				
Scope of Work (Check all that apply)											
≥3 sf or ≥3 if≥160 sf or ≥260 if		Renov Demol			∐ Mini-End ☐ Gloveba	tainment with Neg closure g Procedure empted (*) and No		lure			
in the second se			cation				0.0000		atem	ent T	vne
Location of Asbestos-Containing Material (ACM	. 116		nally olely b	,	Description of	of			1	T -	T
TO BE ABATED	l N	lainte	nance/	ASDE	stos Containing Ma	iterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility	Cu		al Staff	? (1.6	e., thermal systems surfacing, VAT,	or	(Specify SF or LF)	SVOI	음	aps	uso
(13)		(1		_	other miscellane	ous)	SF UI LF)	<u> =</u>		ulat	Ге
basement	Yes	-								Ф	
basement		1		tank ins	sulation		130 sf				
	$ \frac{\square}{\square}$										
N. Co.											
Name of Registered Waste Hauler				P Waste	Cubic Yards of	Name of Regist	ered Landfill				
Guardian Contracting, Inc.			Haulei 202	ID No. 23	Waste 4	T.R.R.F.					
City, State Toms River New Jersey					Disposal Date	City, State					
Toms River, New Jersey	an all				01/31/19	Tullytown,	Pennsylvania				
Completed By (Print or Type) Nicholas Fernicola	Title Projec	t Ma	nager		Signature	1		ate	. II	9	

State of New Jersey

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OCTOTI PA	M	NOT	TFICATIO (Pursuar	ON OF A	AC 8:60 a	S ABATE and 12:12	0)		EG		Management 1	V - 1	
Date of Notification (1) 01/29/19			Name Marie		ng Owner	/Operator	(2)		FE	3	1 20)19	11
Agencies Notified Type Notificatio	n		Street	Address								. 1.24	
EPA X Initial DEP Amended			City C	Made 71	0 1			<u> </u>	Property.	17 A F	- 1.		
X DOL Amendmen	nt #			state, Zip				the last	* 15 FW		627.01		
DOH Emergency justification)	ng		of Conta	ct			Te	elephone N	Number			
DCA Cancellation	n		Mario					1					
Name of Facility Where Abatement is Taki	ng Place	(3)	FAC	SILITY IN	IFORMAT	TION	Type of Facilit	v (4)				415	
Street Address City (5)							School (F Subchape Other (i.e etc.)	<-12) ter 8 (Oth	ner than K & comme	-12) rcial bu	ildings	s, hor	mes,
Boonton							Square Feet	# 0	of Floors		Bldg.	Age	
County (6) Morris			County (STATE	Code (7) -Y)		Current Use (F	Prior if be	ing demol	ished)			
Name of Monitoring Firm Hired by Building	Owner (3)	ASC	M No.		Name o	of Abatement C	ontractor	(9) NALS				
Street Address						Street A							
City, State, Zip Code							ITE DOVE (ate, Zip Code	COURT					
Droinet Manage (14)						LAKE	WOOD, NJ	08701					
Project Manager for Monitoring Firm			Telepho			Telepho 732-6	one No. 68-9078		License 1200	No.			
Start Date (10) 02/08/19	02/12	19	mpletion	Date (11)		f OSHA Monito EAD PROF		NALS				
Occupancy Status During Abatement (Chec	Period of	Abator	ment			Street A	ddress TE DOVE C	OURT					
Abatement Performed Outside of Norm Other – Describe:	nal Facilit	y Hour	S			City, Sta	ite, Zip Code WOOD, NJ (
Scope of Work (Check All That Apply)							, , , , , , , , , , , , , , , , , , ,	00701					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				×	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				۵	
		Locat									Abate	emen	t
Location of Asbestos-Containing Material (ACM)	Use	Norma ed Sole	ly by	Asbe	Des	scription o	f terial (ACM)			-	Т	ре	Т
IO BE ABATED In Facility (13)	TO BE ABATED Maintenance/ In Facility Custodial Staff?				. thermal surfac	systems i	nsulation, or	(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
(14)	Yes No N/A				other m	niscellane	ous)			oval	oair	sulate	sure
INTERIOR				INS	INSULATION ON BOILER 10SF x								
					PIPE IN	SULAT	ION	2	LF				
Name of Registered Waste Hauler													
NEWARK CARTING		Н	JDEP Wa auler ID 1 1509	aste No.	Oubic You of Was		Name of IESI	Register	ed Landfil				
City, State NEWARK, NJ				Disposal Date City, State 02/12/19 BETHLEHEM PA									
Completed by JOSEPH PERLSTEIN Title OWNER						gnature	DETTIL		Da	ite 1/29/1	9		

1010			(arouar	III to NOAC 6.0	ou and 12:12	20)					1	
Date of Notification (1) 01/29/19			Name Isaac	of Building Ov C Shulman	vner/Operato	or (2)	FI.	EB 1	20)19	2. d 4. i	
Agencies Notified Type No.	tification		Street	Address							e feet	
X DOL Ame	ended endment #		City, S	State, Zip Code			7		1.	7 1	-	
DOH justi	ergency (including fication)		Name	of Contact			Telep	hone Niim	har			
	cellation		Isaac	Shulman			i relean)	ibei			
Name of Facility Where Abatement	is Taking Place (3	5/	FAC	CILITY INFORI	MATION							
, and the state of	is running riace (c	9)				Type of Facil	ity (4)					
Street Address		77,02				School ((K-12) oter 8 (Other t	han K-12)	c			
						X Other (i.	e. private & co	ommercia	l build	lings, h	omes	
City (5) Teaneck						etc.) Square Feet	# of Flo	oors	В	ldg. Ag	e	
County (6)			0	0.1.5								
Bergen			(STATE	Code (7) USE ONLY) _		Current Use (Prior if being	demolishe	ed)			
Name of Monitoring Firm Hired by B	uilding Owner (8)		ASCI	M No.	Name	of Abatement (Contractor (9)		-		77	
Street Address						LEAD PRO	FESSIONA	LS				
5 Table 1 Tabl						Address HTE DOVE	COURT			75.57		
City, State, Zip Code						tate, Zip Code	0001(1					
Project Manager for Monitoring Firm					LAKE	WOOD, NJ	08701					
r reject manager for Monitoring Firm			Telepho	ne No.		one No. 668-9078	0.000	cense No.	0			
Start Date (10) 02/12/19	Old O			Date (11)		of OSHA Monito	1 77	200				
Occupancy Status During Abatemen	02/18/1				AAA	LEAD PROF	ESSIONA	LS				
Facility Closed/Vacated During						Address ITE DOVE (COURT					
Abatement Performed Outside of Other – Describe:	of Normal Facility I	Hours	nent		City, St	ate, Zip Code WOOD, NJ						
Scope of Work (Check All That Apply)					WOOD, NO	00701					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Printed.	enova emoliti			X	Full Containment with Negative Pressumini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Pro						
	Is L	ocatio	on			Tron Exempt	Cu () and No	II-FIIable I		bateme	nt	
Location of Asbestos-Containing Material (AC	M) Used	rmall	y y by		Description of	of		_		Туре		
TO BE ABATED In Facility (13)	Main Custoo	tenan dial S (12)	taff?	(i.e. thern su	ontaining Ma nal systems rfacing, VAT er miscellane	or	Amour (Speci SF or L		Removal	Encapsulate	Enclosure	
INTERIOR	Yes	No	N/A	DIDE	INCLUAT	101				te	0	
				PIPE	INSULAT	ION	80LF	x		-		
									+			
ame of Registered Waste Hauler		N	DEP Wa	note I o :								
EWARK CARTING		Ha	uler ID N 509	lo. of W	ic Yards /aste	Name of IESI	Registered L	andfill				
ty, State		04	509	8 Dian	anal Data							
EWARK, NJ					Disposal Date City, State BETHLEHEM PA							
ompleted by DSEPH PERLSTEIN	Title OWNE	R			Signature			Date 01/20	V40			
	PH PERLSTEIN OWNER				01/29/19							

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· Charles	111111	. FUIII

CK 1887 PA	N N	IOTIF (F	Sta FICATION Pursuant	ate of Ne OF ASB to NJAC	ESTOS	ABATE	MENT					1/2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Date of Notification (1) 1/25/19				Building		Operator	(2)		ř	T-EB	1 2	019		Ì
Agencies Notified Type Notification			Street A	ddress				St.		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	· Car		- 2	
EPA		_	10000	te, Zip Co nfield, N		21				*****	- *	175	* . ***.	i www.
DOH justification Cancellation	M 135.0		Name of	Contact el Chan	152 3500000				of money	lephone Nur	nber			
			1404.000.400.000	LITY INF	_	ION				125				
Name of Facility Where Abatement is Takin	ng Place (3))					Туре	of Facility ((4)					
Apartment Building Street Address 392 S. Washington Ave.							×	Other (i.e. p	8 (Oth	ner than K-12 & commerci		dings,	home	es,
City (5) Bergenfield								etc.) ire Feet 0	# 0	of Floors	3.5	3ldg. A		
County (6) Bergen			County C	Code (7) ISE ONLY)		Curre		or if be	ing demolish		.0 17		
Name of Monitoring Firm Hired by Building Project Manager	Owner (8)		ASCM	l No.			ne of Abatement Contractor (9) Stages Abatement							
Street Address						Street	Addre	ss						
City, State, Zip Code		ш.				500,220,000		dland Ave	e. 					
D. i. at Marie and T. i. at T.						Saddle Brook, NJ 07663								
Project Manager for Monitoring Firm	901-50		Telephor	ne No.		Telephone No. License No. 01305								
Start Date (10) 1/29/19	Schedule 1/31/19		mpletion [Date (11)		Name	of OSI	HA Monitor						
Occupancy Status During Abatement (Che		=::::: 	******			Street /	Addre	SS						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: 8A.M to 4 P.M						City, St	tate, Z	ip Code						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova				×	Mir	ni-Enclosure ovebag Pro	e cedure	n Negative P			e	20
I assistant	11 12 22 22	Locat	339530000									Abate Ty	ment pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair Custo	d Sole ntena odial (12)	ely by ance/ Staff?		tos Cont thermal surfa	scription taining M systems cing, VA niscellan	ateria insula T, or		(8	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Basement	Yes	No	N/A	-	_	VAT			<i>E</i> .	42 SF	-			
Dascillett	+	Х	+			٧٨١			54	72 OF	X			_
		III. s												
Name of Registered Waste Hauler All Stages Abatement		F	NJDEP Warder ID I	No.	Cubic of Was 2 yd			F 540 100		ered Landfill al Sanitar		ndfill		

Disposal Date

Signature

TBD

Title

President

Completed by

Saddle Brook, NJ

Richard Cristofol

City, State

Date

1/25/19

City, State Pen Argyl, PA

Print Form

CV 724		Î			OF ASB		ABATE		724	<i>~</i>	· ^ /s/SDS/ps/somplygage	SECTION STATES	control to the		
Date of Notification (1) 1/16/19	. •				f Building Alu Pri			(2)		II.			7		
Agencies Notified	Type Notification		-	Street A	Easte State				1					111	111
⊠ EPA	✓ Initial									- 1	EB	1 20	19		111
DEP	Amended		Ī		ate, Zip Co					;					***
□ DOL	Amendment : Emergency (i			Love	ladies N	J 0800	8			[]		V	7		
☑ DOH	justification)	noidung			f Contact					Tele	ephone N	lumber		(1)	
☐ DCA	Cancellation			Dave					- 223	1	34				200
Name of Facility Where	Abatement is Taking	Place (3	3)	FAC	ILITY INF	ORMATI	ON	Type	of Facility (4)					
Dave Alu Private I		, , , , , , , , , , , , , , , , , , , ,	- /					_	(0)	52					
Street Address									School (K-1 Subchapter	8 (Othe	er than K-	-12)			
									Other (i.e. p	rivate 8	comme	rcial buil	dings,	home	es,
City (5)									etc.) e Feet	# of	Floors	E	Bldg. A	ge	
Love ladies NJ 080	800							1000)	1		150	35+		
County (6)				County	Code (7)			Currer	nt Use (Prid	or if beir	ng demol	ished)			95. 3
Ocean				(STATE	USE ONLY)		Hous	se						
Name of Monitoring Firm	n Hired by Building C	wner (8)		ASCN	И No.				ement Con	tractor	(9)	. 2	0		
N/A							1. 2. 230	naco Ir				2 9	505		
Street Address								Addres				_ }	275		
City State 7in Code								Box 32					277	=	
City, State, Zip Code							D 9550	State, Zip	p Code n NJ 080	101		30	ōŽ:	3	
Project Manager for Mor	nitorina Firm			Telepho	ne No			none No		181	License	New	10	工	
	morning i min			rolopilo	no ivo.			753-9			00727	-	西灣		
Start Date (10)	T	Schedule	ed Cor	npletion	Date (11)		11/1/2000	STATE OF STA	A Monitor		00121	₩.	PI	-	-
1/25/19		2/1/19					Sam	ne				90	至是	Ė	
Occupancy Status Durin	g Abatement (Check	Only Or	ne)				Street	Address	s		-		100		
▼ Facility Closed/Vac	ated During Entire P	eriod of A	Abaten	nent											
Abatement Perform Other – Describe:	ned Outside of Norm	al Facility	/ Hours	3		_ [City, S	tate, Zip	Code						
Scope of Work (Check A	III That Apply)														
≥3 sf or ≥3 lf			Renova					Full	Containme	ent with	Negative	Pressu	ıre		
≥160 sf or ≥260 lf		\times	Demolit	ion			-	Glov	i-Enclosure vebag Prod						
							×	Non	-Exempted	i (*) and	Non-Fri	able Pro	cedur	е	
		Is	Locat	ion	,									ement	
Location			Normal			Des	scription	of					13	ре	
Asbestos-Containing TO BE AB			intena			tos Conta					nount pecify	71		四	т
In Faci	lity	Cus	todial ((12)	Staff?	(1.6.	surfac	cing, VA	T, or	uori,		or LF)	Remova	Repair	Encapsulate	Enclosure
(13)			(12)			other m	niscellar	neous)				oval	a.	sula	sure
	w=	Yes	No	N/A										te	
Exterior S	Siding			х		Exter	rior Sid	ding		18	00 sf	х			
Name of Registered Was	ste Hauler		222	JDEP W		Cubic '		T	Name of I	Registe	red Land	fill	-		
United Roll Off			11 (28)	lauler ID 2459	No.	of Was	ste		G.R.O.	W.S.					
City, State							al Date		City, State		1000	- / (CONT.) (
Elm NJ		T:41-				2/1/19	<u> </u>		Morrisv	ille PA	A LINE OF THE PARTY OF THE PART	1			
Completed by Title Anthony T Perna President						Si	ignature	2		_		Date 1/16/1	9		

Print Form

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hK#	IMET
MATH	1(1)55

Date of Notification (1) 12/09/2018		Name of Building Owner/Operator (2) John View											
Agencies Notified Type Notification			Street Address										
EPA Initial DEP Amended Amendmen	nt#	(including Name of Contact											
DOH Emergence justification Cancellation	y (including					Telephone Numbers							
Name of Facility Where Abatement is Tak	ing Place (3)	F	ACILITY IN	ORMAT		Type of Facility	///						
Residential Property Street Address			School (K-12) Subchapter 8 (Other than K-12)										
City (5) Belleville						Other (i.e. petc.) Square Feet 994	# o	rcial bi	Bldg. Age				
County (6) Essex		County Code (7) (STATE USE ONLY)			Current Use (Pri	ing demo							
Name of Monitoring Firm Hired by Building	A				e of Abatement Contractor (9) NIC Contracting LLC								
Street Address		Stree			et Address South 5th St.								
City, State, Zip Code						ity, State, Zip Code ilizabeth, NJ, 07206							
Project Manager for Monitoring Firm			Telephone No.						pense No. 1355				
Start Date (10) 12/20/2018	18				Name of OSHA Monitor Iris Environmental Laboratories, Inc								
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement					Street Address 2333 Route 22 West								
Abatement Performed Outside of Nor Other – Describe: OCCUPIED	ours	rs C			City, State, Zip Code Union, NJ, 07083								
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		X Renovation Demolition				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
Location of		cation mally	Description							Abatement Type			
Asbestos-Containing Material (ACM) TO BE ABATED		Solely by enance/ ial Staff? 12)	Asbes	stos Cont thermal surfa	scription o taining Ma I systems i cing, VAT, miscellane	terial (ACM) nsulation, or	Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure	
Basement	Yes		X Pipe Insula						_	6	(D		
				Pipe	Insulation	on	10	00 LF	X				
N										-			
Danvic Contracting LLC			WDEP Waste Hauler ID No. 17574		Yards ste	Name of Registered Landfill Fairless Landfill							
City, State Elizabeth, New Jersey			Dispos TBD	sal Date	City, State Morrisvi	e							
Completed by Jeymy Donneys	Title Owner				Signature				Date 12/09/2018				