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

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Name of Facility Where Abatement i	is Taking	g Plac	e (3)	- ' -	CILITIII	VIORIVIATION	Type of Facility	(4)				-
Princeton University-Firesto	ne Libr	rary					School (K-1	70.05				
Street Address							☐ Subchapter	8 (Other tl	an K-12	2)		
Washington Rd							Other (i.e., p	private and	comme	ercial b	uildin	gs,
City (5)							homes, etc.					
Princeton							Square Feet	# of FI	ors	E	Bldg. /	ge
County (6)				Cou	inty Code (	7)(STATE USE ONLY)	Current Use (P	rior if being	demoli	shed)		
MERCER							Library					
Name of Monitoring Firm Hired by Bu	uilding C	wner	(8)	ASCM	l No.	Name of Abateme	ent Contractor (9	)	-			
ATC Associates Inc.						1 compression and control of the	VIRONMENTA					
Street Address						Street Address		,	-	-		
Three Terri Center						1123 BEAVE	RSTREET					
City, State, Zip Code						City, State, Zip Co			·-			
Burlington, NJ 08016						BRISTOL, PA						
Project Manager for Monitoring Firm			Tal		N-		19007		-2)			
Michael Keehn				ephone		Telephone No.		Licens	31 3000 Feb 1			
The state of the s					6-8800	215-788-6040		005	9			
Start Date (10)			comple	etion Da	ate (11)	Name of OSHA M	lonitor					
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			300	9_ /	16	BRISTOL EN	VIRONMENTA	L, INC.				
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Check & 0100

### State of New Jersey

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

				(Pur	suant to N.J.A.C.	. 0:00-7 and 12:120-7)			>	2016		
Date of Notification (1)						Name of Building St.Peters Episkopal Chi	Owner/C	pera	OLLI	33	TO THE	
Agencies Notified		No	otification	Туре		Street Address			-01 	00	0	Source III
⊠ EPA		7777	Initial Not			70 Maple Ave City, State, Zip Code			TOS C	2	9-1-0-1 1-20-20 1-20-2	-
□ DCA ⊠ DOL			Amended		on (including	Morristown,NJ Name of Contact ;Osh K	huhlall	Telen	rohe Nu	imhes	€	
⊠ DEP			stification)			Ivallie of Contact ,Con it	Hubian	10100	ZZ	ë	L	
⊠DOH			Cancelled	d							C	.7
					FACILITY INF	ORMATION				123		
Name of Facility Where A	batement i	s Takir	ng Place (	3) Ch	urch	Type of Facility (4)			-			
		1000				☐ School (K-12) ☐ Subchapter 8 (other t	han K-12)					
Street Address 70 Maple Avenue						XOther (i.e. private & con Sf 2200 Floors 2 Bld	nmercial build	lings., h	mes, e	tc.		
City (5)	County (6	)			/ Code (7)	Current Use (prior if being		):				1
Morristown	Morris			(State	Use Only)							
Name of Monitoring Firm	Ulrad by DI	da O	upor (9)	ASCM	No	Name of Contractor (9)			-			
N/A	nired by bi	ug. Or	Wilei (o)	ASCIVI	NO.	BL Contracting Inc						
Street Address						Street Address 5 Marguerite Lane						
City, State, Zip Cod						City State, ZipCode Towaco 07082						
Project Manager for Monit	toring Firm	Te	elephone N	Number		Telephone Number			e Numb	per		
						973-901-0153		0126				
Scheduled Start Date (10)	)		heduled 0	Completi	on Date (11)	Name of OSHA Monitor BL Contracting Inc.		l				
01/29/2016						3.			-			
Occupancy Status During  ☐ Facility Closed/Vacated ☐ Abatement Performed	d During E	ntire P	eriod of A	batemer	nt	Street Address 5 Marguerite Lane						
Describe						City, State, Zip Code						
□Other – Describe:						Towaco, NJ 07082						
Source of Work (Check al	I that apply	')				L			-			
Codioc of Fronk (Gillook at	T CHUC GPP.	-			55-74962 913							
☐ ≥ 3 sf or ≥ 3 ☑ ≥ 160 sf or					☐ Renovation ☑ Demolition	□GI	ni-Enclosure ovebag Proce ill Containme	edure	egative	Pressu	ге	
Location of Asbestos-	l la	Locati	ion Norma	ally	Description of As	sbestos Containing Materia			-	nent Tyr		
Containing Material (ACM Facility (13)	) in Us	sed So	olely by sustodial S	Staff?	(ACM) (i.e. there surfacing, VAT, o	nal systems insulation,	(Speci or LF)	ify SF		Repair 1		Enclose
	Y	ES	NO	NA 図	Boiler Asbestos	Inculation	63 sf		×	1	T	$\overline{}$
Basement				IXI	Boller Aspestos	sinsulation	00 31					
		45-73-55								+	-	
Name of Reg. Waste Hau		N.	JDEP Was	ste Haule	er ID#	Cubic Yards of Waste			of Regi	stered L	andfill	
Waste Management of Per	nnsylvania	32	2604	14				T.R.R	¥			
							Disposal D	ate		City, Sta Tullytow		
			*									
Completed by (Print or Ty	pe)	Tit	tle			Signature		Date				
Nedo Vasilic		_	esident			Nah Ung	silve	01/29	2016			
											U.S.	
	The second second second	1										

#### State of New Jersey

			NOT			ASBESTOS AB AC 8:60-7 and 12:			RE	0 =				
Date of Notification (1	1	Na	me of			Operator (2)			00.	CEIVE	Ch:	# 80	59	
Date of Notification (1	1/28/16					tment of Milita	ry Affairs		2016 FFR	2 AM 9	******			
Agencies Notified	Type of Notificat			ldress				A		< AM Q		171		
[] EPA	[X] Initial	10	)1 E	gerts (	Cross	ing Road		žuž.	BESTA	· .	99			
[] DEP	Notification	C:4	. Cta	e, Zip Co	do				& Lin	CONTR	0.		_	-
[X] DOL	[] Amended	La		nceville		08648				S CONTR NSING	UĮ			
[X] DOH	Notification	Na	me of	Contact					ephone Num					
[] DCA	[] Cancellation	n W	/illian	n McBr	ide			1		-				
			7	F/	ACILITY	INFORMATION				-				
Name of Facility Whe	ere Abatement is Ta	king Plac	e (3)				Type of Fa							
Hammonton Ari	mory						l Si	chool (K	(-12) er 8 (Other t	ıan K-12)		TECONS.		
Street Address							[x] O	ther (i.e omes, e	e, private and etc.)	commercial	bullain	gs,		
550 S. Egg Har	bor Road						Square Fee	nt.	# of Floor	T RId	q. Age	N		-
City (5)		County (	6)		Cou	nty Code (7)	40000	31	2	~70		9.		
Hammonton, N.	J 08037	Atlanti				ATE USE ONLY)	F2549 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	e (Prior	if being den	olished)				
Name of Monitoring F	irm Hired by Buildi	na Owner	· A	SCM No.		Name of Abatem	armory nent Contracto	or (9)			-			
TTI Environme				003			Jupiter En		mental Se	rvices, In	C.			
Street Address						Street Address	200 01							
1253 N. Church					_		323 Chang	gebric	ige Ra., i	uite 100			_	-
City, State, Zip Code Moorestown, N						City, State, Zip C	Pine Broo	k. NJ	07058					
Project Manager for I		Telep	hone	Number	_	Telephone Numb		,		License N	umber		_	
Mike Stocku	3	2000		-8800			973-575-8	3700			00	85	2_	
Scheduled Start Date 2/8/16	2107 16	ed. Compl 2/1	etion ( 9/16	Date (11)		Name of OSHA	Monitor J & S Env	rironm	nental La	oratories	, LLC	)		
Occupancy Status Di				. A b = 4 = = =		Street Address	2000 0	001	Λ./					
	ed/Vacated During Performed Outside of						2333 Rout	e zzv	V					-
Des	cribe:			5		City, State, Zip C	Union, NJ	0708	33					
	scribe: partially vaca	ant					OTHOTI, 140	0.00						
Scope of Work (Chec [] Demolition [] ≥3 sf or ≥3 lf [x] ≥160 sf or ≥	f			[]	Renova	ition	. [] [] [X]	Mini – Glove	ontainment ) Enclosure bag Procedu - Friable Pro		Pressi	ıre		
		(1-2)	Locat	CONT. C.		_					200	aten	nent	1
Locati	on of		mally l solely l				ription of - Containing			Amount	R		E	E
Asbestos -	Containing	Maint	enanc	e/Cus		Mater	ial (ACM)			(Specify SF or LF)	E	E	N	NC
Material TO BE A	todia	al Staf	(12)			mal systems surfacing, VA	Т,		SF ULLI)	O	A	A	L	
In Fa			21/2		or other m	iscellaneous)	)			V	I R	PS	O S	
(13	3)	Yes	No	N/A							Ĺ	11		U
Offices			X		VAT					1000 SF	X	4	4	
									-			+	+	
									-			+	+	2000
Name of Registered	Waste Hauler	NJ	DEP V	Vaste	900,000	bic Yards			red Landfill	-				101
Jupiter Environ	mental Service		uler ID	No.	Of	Waste	Minerv	a Lar	dfill					

2/23/16

Disposal Date

Signature

Hauler ID No. 04782

General Manager

Title

Waynesburg, OH

Date

1/28/16

City, State

Pine Brook, NJ

Completed By (Print or Type)

City, State

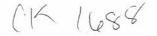


					CHARLES AND A					.5	2016	
Date of Notificati	ion (1) 1/2	8/16					Operator (2)			Po G	- E	スフ
	Type No	tification		Jenni	fer Zambr	ano				-0		1
Agencies Notifie	d				Address		_			==	<u> </u>	0
EPA		Emerger	ncy Notificati	on						THE	1 12	Emilia 6 7 8
DEP	X	Initial No	otification	City, S	tate & Zip (	Code				N C	1	ettlem m
X DOL		Amende	ed Notification	Fairh	aven, NJ (	07704				20	=	<
X DOH	1	Cancella	ation		of Contact					22	Telephor	ne Number
DCA		Garioone	20011		fer Zambı	rano				;	d dia	
DCA					CILITY IN		TION	tir		-	9	
			9-40-31		CILITIN							
Name of Facility	Where Al		is Taking Pla <b>idence</b>	ce (3)			of Facility (4 School (K-12					
Street Address		1,001					Subchapter 8		n K-12)			
olicel Address							Other (i.e., pr			buildi	inas, hom	es. etc.
							re Feet	# of Floo			Bldg. Age	
		- 1-		10		— Squa		# 01 1 100	015		Diag. Age	
City (5)			ounty (6)	County C	Code (/)		2,800				Desire Control	60
Fairh	aven	M	lonmouth			100000000000000000000000000000000000000	ent Use (Prio idence	r if being de	emolishe	1)		
Name of Monito	ring Firm	Hirod by E	Ruilding Own	or (8)	ASCM No		e of Abateme	ent Contrac	tor (9)			
Environmenta			bullating Own	51 (0)	AOON NO		oal Abatem			;		
Street Address						100000000000000000000000000000000000000	et Address					
64 Broad Stre	et						Schoolhou					
City, State & Zip	Code					City,	State & Zip (	Code				
Matawan, NJ						Mon	roe Towns	hip, NJ 0	8831			
Project Manage		torina Firm	n	Telephone	Number	Tele	phone Numb	er	Lic	ense	Number	
Tom Geiger	i ioi ivioiiii	tornig i iiri		732-290-2			605-9062		725040		0071	4.
Scheduled Start	Date (10)	Scl	heduled Com				e of OSHA M	Ionitor				
2/10		)	ricadica con	2/11/16	(11)	100000000000000000000000000000000000000	bal Abatem		ces, LL	;		
Occupancy Stat						1000000	et Address	100000000000000000000000000000000000000				
Facility	Closed/Va	acated Dur	ring Entire Pe	eriod of Aba	atement	443	Schoolhou	se Road				
Abatem	ent Perfor	med Outs	ide of Norma	I Facility Ho	ours -	City,	State & Zip (	Code				
X Describe	e: Area	Isolated	d During Al	patement		Mor	roe Towns	hip, NJ 0	8831			
	Describe:											
Scope of Work	(Check all	that apply	y)									
Demolit			X Renovati	on			Full C	ontainment	with Ne	ative	Pressure	<b>!</b>
Large P	roject						Mini-E	inclosure				
The state of the s		or≥ 3 LF	F ACM				X Glove	bag Proced	dure			
			260 LF ACM				Other:					
Quantity	Locatio		JOEL ACIVI	Is Locat	ion	D	escription of		Amou	nt	Ahate	ement Type
۸۵				Normally I	338.4		stos-Containi	ina	(Spec			fy: Removal,
	bestos-Co			Solely			aterial (ACM)	-	Square			Encapsulation
	Material ( TO BE AB			Maintenan			hermal syste		or			Enclosure)
6 <u>-</u>	in Faci			Custodial			on, surfacing,		Linear			2.2.2.
	(13)	-		(12)			er miscellane		Linour	551)		
	3050 75	W		161.4			v			_		
Baser	nent			N/A		TSI	Pipe Fitting	js	30 L		R	emoval
				7/						-		
Name of Regist	ered Mac	te Hauler		N.IDEP W	aste Hauler	ID#	Cu. Yds. of	Waste	Name o	Rea	istered La	ındfill
Freehold		.o i iddioi			18693	.oc#wasi	3		TRRF			
City, State	Carting				1000		Disposal Da		City, Sta	te		
Trenton, N	1.1						2/11		Tullyto		Pa	
		(ma)	Title				Signature			,		Date
Completed By (		ype)	1000					Ir Tuis	1;			1/28/16
Dominick	ırıngali		Pres.				Dominic	k Tringal	ı			1/20/10
								VEO.				
SB-41 JUN 95	G4667											

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)		Name of Building	Owner/Oper	rator (2)			~	_	$\sim 1$	
January 28, 201	6			nin H. Realty Corp	o.	3	2 8	58	04	
[ ] DEP [ ] Amen	Notification ded Notification	Street Address  City, State, Zip Co		wood Avenue, Sui	ite 308		,			
[x] DOH [x] Emerg	dment # gency (including	City, State, Zip Co		range, NJ 07017		Jumber:	2016	7	ر د ۱	
I I DCA	cation) ellation	Name of Contact Benja	min Herb		elephone	Jumber:	-		COMME	
	T.	ACILITY INFORM	I A TIONI				-	٥	in the same	
Name of Facility Where Abatement is Taking		ACILITY INFORM	IATION	Type of Facility (4)		- Ru	1		4	
Apartments	1 1400 (3)				School	(-12)	7	3	T	É
Street Address		Continues (* 1964) property of the continues of the conti		[ ]	Subcha	ter 8 (othe	Ethan k	10		
66-76 Melmore Ga	ardens			[ ]		e., privete	-	nencial	build	ings,
City	County (6)	County Code (7)		Square feet	homes,		Bldg.			
Oily	county (0)	(STATE USE ONL	Y)	6,000 sf	# OI 1	!	Diug. 1	80		
East Orange	Essex			Current Use (Prior if		iolished)				
Name of Monitoring Firm Hired by Building (	2(0)	4000401	II > 7	Apartm						
Guardian Contract	\$5 p. c.	ASCM No.	Name of	Abatement Contractor		acting, I	nc			
Street Address	115, 1110.		Street Ad		III COIIL	acting, 1	ino.			
1889 Route 9, Uni	t 61				oute 9,	Jnit 61				
City, State, Zip Code	755		City, Sta	te, Zip Code		т	. 0075	c 107	1	
Toms River, NJ 08 Project Manager for Monitoring Firm	Telephone Numb	per	Telephor	ie Number		w Jerse		3-12/	1	
Nicholas Fernicola	732-349-9932		VW0.00000000000000000000000000000000000	9-9932	182	0624	inoci			
Scheduled Start Date (10)	Scheduled Comp	letion Date (11)	Name of	OSHA Monitor						
1/29/16 Occupancy Status During Abatement (Check of	2/2/16		Ct - t A		L. Anal	tical				
	only one)  During Entire Period of A	hatement	Street A		telton R	ad				
	Outside of Normal Facility				- CITOII IX					
Other – Describe			City, Sta	te, Zip Code	way Ne	w Jersey	, 0885	1		
				Fiscala	way, INC	w Jersey	/ 00034	+		
Scope of Work (Check all that apply)			[ ]	Full Containment	with Neg	tive Pressi	ure			
[ ] >3 sf or ≥3 lf	[v] pou	ovation	[x]	<u></u>	52427					
$\begin{bmatrix} X \end{bmatrix} \geq 160 \text{ sf or } \geq 260 \text{ lf}$	5 5	nolition	l J	Glovebag Procedu Non-Exempted (*		Friable Pr	rocedure			
[]	[ ] 260	- I		Tvoii-Exempted (	) and Ivoi	Thable II	loccdure			
							Abaten	nent Ty	pe	
Location of	Is Location		Descriptio			.	R	R	Е	E
Asbestos-Containing Material (ACM)	Normally used Solely by		bestos-Co Material (A			ount ify SF	5 Ac.	77.0	N	N
TO BE ABATED	Maintenance/Custod		., thermal		120 220	LF)	IVI	Steel 1	C A	C L
in facility	Staff	ins	ulation, su					I I	Р	0
(13)	(12)	- 41	VAT, o						S U	S U
	YES NO N/A	I	er miscell	aneous)			A L		L	R
Promont			45.0						Е	Е
Basement	X	Pipe insulatio			500 1				X	
Basement	X	Boiler breech			50 sf				X	
Basement	X	Duct insulation	n		35 sf				X	
Name of Registered Waste Hauler	NJDEP Waste Hau		ards of Was		red Landf	ll				
Guardian Contracting, Inc. City, State	20223	sposal Date	City, St	T.R.R.F.		-				-
Toms River, New Jersey		**************************************		own, Pennsylvania	,	<u> </u>	c solowan			
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	_	/	1		Date 1/28/2	2016		



	N		CATION	of New OF ASBI to NJAC I	ESTOS	ABATE					R	E(	35	11	ED
Date of Notification (1) 1-29-2016				Building (						20					
Agencies Notified Type Notification			Street A 172 G	ddress ardfield	Avenu	e				Abi	ES	TOO		41-9	9: 5
EPA X Initial Amended Amendment #				te, Zip Co							ES	CEI	4311	AT F	70L
Emergency (ir justification)  DCA  Emergency (ir justification)  Cancellation	cluding		Name of	Contact Eglento					Tele	ephon	Num	ber	5.00	. 4	
				LITY INFO		ON			1						
Name of Facility Where Abatement is Taking Residential - Commercial	Place (3	3)					Туре	of Facility (4) School (K-12							
Street Address 977-979 Broadway							×	Subchapter 8 Other (i.e. pri	(Oth				lings,	home	es,
City (5) Bayonne, NJ 07002							Squa	etc.) are Feet 00	# of	Floor		1977	ldg. A	ge	
County (6) Hudson				Code (7) USE ONLY)	)		Curre	ent Use (Prior	if bei	ng dei	iolish	ed)	- And the		
Name of Monitoring Firm Hired by Building O	wner (8)		ASCN	1 No.				atement Contr							
Street Address						Street	Addre			rvice	, LL(				
City, State, Zip Code						City, S	tate, Z	nia Avenue Zip Code			-				
								ty, NJ 0730	)4						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 201-				Lice 011	se No	).			•
	Schedule 2-13-20		pletion I	Date (11)	271			HA Monitor above							
Occupancy Status During Abatement (Check	Only On	ne)				Street	Addre	ss							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	eriod of A	Abatem Hours	ent			City, S	tate, Z	Zip Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Pemoliti				×	Mi Gl	III Containmer ni-Enclosure ovebag Proce on-Exempted	dure					٩	
	ls	Locati	on						( )				Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normall d Solel intenar todial S (12)	ly by nce/	Asbest (i.e.	tos Cont thermal surfa	scription aining M systems cing, VA niscellar	Materia s insul .T, or	100000000000000000000000000000000000000	(5	mount specify or LF		Remova	Repair	e Encapsulate	Enclosure
	Yes	No	N/A				,					/al	7	ilate	ıre
Second floor		Χ				VAT			21	18 SF		Х			
Basement - Crawl Space		Х			Pipe	insula	tion		10	00 LF		X			
Exterior		Х				Siding			23	20 S	:	Х			
Roof		Х				Roof			3	772		X			
Name of Registered Waste Hauler		162.570	JDEP Wauler ID	al all and a second	Cubic of Was			Name of R	egiste	red La	ndfill				
Green Environmental Services  City, State		200	34889		30			G.R.O.W	/.S.1	North	Land	dfill			
Jersey City, NJ					2-15-	sal Date 2016	14	City, State Morrisvill	le, P	Δ	92.12				
Completed by Liliana Serrano	Title Office	e Man	ager		S	ignature		u Seru	Jil.	0	Dat 1-2	e 29-20	)16		



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

### RECEIVED

Date of Notification (1) 01-28-16			Building Ow ella Demol	ner/Operator ition	(2)	20	6 FEB	-2	A	14 9	: 5
Agencies Notified  EPA DEP Amer DOL  Type Notified  I linitial Amer Amer		City, Sta	ddress forest Ave. te, Zip Code lanover, N			A	BES & L	ros ICE	NS	INC	RO
DOH Emer	rgency (including cation) cellation	Name of	Contact andelt	0.000		Telephon					
Name of Facility Where Abatement i Private Residence	s Taking Place (3)	FACI	LITY INFOR	MATION	Type of Facility ( School (K-1	4)	-				
Street Address					Subchapter	8 (Other than private & com	nercial b				s,
City (5) Wayne		10	0-4-77		Square Feet  Current Use (Pri	# of Floor			g. Ag	je 	
County (6) Bergen		(STATE	Code (7) USE ONLY)	100 m	•		Ionsneu	,			
Name of Monitoring Firm Hired by B N/A	uilding Owner (8)	ASCN	/I No.	0.577.570.000	of Abatement Cor a Contracting L						
Street Address					Address 7th St.						
City, State, Zip Code					State, Zip Code n City NJ 0708	37					
Project Manager for Monitoring Firm	1	Telepho	ne No.		none No. 216-9603	Lice 012	se No.				
Start Date (10) 02-09-16	Scheduled 0 02-10-16	Completion	Date (11)		of OSHA Monitor a Contracting L						
Occupancy Status During Abatemer  Facility Closed/Vacated During Abatement Performed Outside Other – Describe:	Entire Period of Aba of Normal Facility Ho	tement urs		522 City, 8	Address 7th St. State, Zip Code	0.7					
Scope of Work (Check All That Appl				-   Unic	on City NJ 0708	57	-				-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	ovation olition			Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				)	
		cation								ment	
Location of Asbestos-Containing Material (A <u>TO BE ABATED</u> In Facility (13)	CM) Used S Mainte Custodi (1	nally olely by enance/ al Staff? 2)	(i.e. th	Description s Containing I ermal system surfacing, V other miscella	Material (ACM) is insulation, AT, or	Amour (Specif SF or Li		Removal	Repair	Encapsulate	Enclosure
Garage		( N/A		Siding		820 S	: 8				
				27							
Name of Registered Waste Hauler		NJDEP V	Vaste	Cubic Yards	Name of	Registered L	ındfill				
Delfa Contracting LLC.		Hauler ID 35240	No.	of Waste 4		wn Resour		ove	гу F	acili	ty
City, State Union City, NJ		•		Disposal Date 02-15-16		te wn, PA					
Completed by Jaime Delgado	Title Proj. Ma	anager.		Signatur	e /s		Date 01-2		6		

CK 000526

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

RECEIVED

Date of Notification (1) 01-28-16		0.0000000000000000000000000000000000000	ne of Buildir ravella D			(2)		2016	FE	-2	AP	9:	55	
Agencies Notified  Type Notification  EPA DEP DOL  Initial Amended Amendmer		40 City	Deforest , State, Zip	Ave.			¥1			OS CEM				
DOL Amendmer Emergency justification DCA Cancellation	(including	Nan	st Hanov me of Conta m Bande	act	936					Numb				
Name of Facility Where Abatement is Tak Private Residence Street Address	ng Place (3)	F	FACILITY II	NFORMAT	ION	SSO	of Facility (4) chool (K-12 ubchapter 8 other (i.e. pri tc.) e Feet	) 3 (Othe vate &	r thar comi	ıercial	build	ings,		s,
Wayne County (6) Bergen			unty Code (			Curren	nt Use (Prior	if beir	ng der	olishe	ed)			
Name of Monitoring Firm Hired by Building N/A Street Address	g Owner (8)	A	ASCM No.		Delfa	Address			(9)					
City, State, Zip Code					City, S	7th St. State, Zip on City		7						
Project Manager for Monitoring Firm			ephone No.		201	hone No 216-96	803		Lice 012	se No 16	•			
Start Date (10) 02-10-16	Scheduled 0 02-11-16	Comple	etion Date (	11)	Delfa	a Cont	A Monitor racting LL	_C						
Occupancy Status During Abatement (Ch  Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	e Period of Aba	temen	t		522 City, 8	Addres 7th St. State, Zip		 7						
Scope of Work (Check All That Apply)		7, 7, 7,			Office	on Only	140 07 00							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Constitution of the Consti	ovatior nolition				Min Glo	Containme i-Enclosure vebag Proc i-Exempted	edure	ā				ə	
	ls Lo	cation			_						1.5	Abate		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custod (*	enance ial Staf (2)	e/ \ \ ^3	sbestos Co (i.e. therma surf	escription ntaining l al system facing, V/ miscella	Material ns insula AT, or	(ACM)	(8	mour Specif or L		Removal	Repair	Encapsulate	Enclosure
Exterior		x			Siding	1		12	00 S	E	Х			
		1 1115		10.1	- V		Name of F	Dogist	arad I	and fill				
Name of Registered Waste Hauler Delfa Contracting LLC.		1000	DEP Waste ller ID No. 140	1	c Yards aste		Tullytow				ecov	ery F	acili	ty
City, State Union City, NJ				1	osal Date 15-16	9	City, State Tullytow		4					
Completed by Jaime Delgado	Title Proj. M	anag	er.		Signatur	re /	g g			01	te -28-	16		

OK 000575

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

RECEIVED

Date of Notification (1) 01-28-16					Building C Cammis		Operator	(2)		2016	EB	S C: NS	EM I	Q. E	Piny	
Agencies Notified	Type Notification		5	Street Ac	Idress		3		Δ	SEE	STE	5 0		, <del>,</del>	J	
DEP DOL	Initial Amended Amendment				e, Zip Coo h, NJ 07					œ	LIC	:NS	HG	ROL		
DOH DCA	Emergency (i justification) Cancellation	ncluding			Contact Cammis	a				Tel	ephon	Num	ber			
				FACIL	ITY INFO	RMAT	ION									
Name of Facility Where Private Home	Abatement is Taking	Place (3)						Тур	se of Facility ( School (K-1 Subchapter	2)	os thou	V 10				
Street Address									Other (i.e. p	rivate	& com	nercia	build			s,
City (5) Mahwah	20							Squ	uare Feet	#0	f Floor	i	В	dg. A	ge	
County (6) Bergen			(	County C	code (7) ISE ONLY)	_		Cui	rrent Use (Pri	or if be	ng de	nolishe	ed)			
Name of Monitoring Firm	n Hired by Building C	Owner (8)		ASCM	No.		100000000000000000000000000000000000000		batement Cor ontracting L		(9)					
Street Address							Street					-	-		-	
							522	7th	St.							
City, State, Zip Code							100000000000000000000000000000000000000		, Zip Code ity NJ 0708	37						
Project Manager for Mo	nitoring Firm			Telephor	ne No.		Telepi 201		No. -9603		Lice 012	ise No )6	).			
Start Date (10) 02-08-16		Schedule 02-09-1		pletion [	Date (11)				SHA Monitor ontracting L	.LC						
Occupancy Status Durin	ng Abatement (Check	k Only One	e)				Street									
Abatement Perform	cated During Entire F ned Outside of Norm						522 City, 8		St. Zip Code							
Other – Describe:						_	Unic	on C	ity NJ 0708	37						
Scope of Work (Check /	All That Apply)							_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Designation of the last of the	enova emoliti					<u> </u>	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure					2	
		Τ.		12020					NOII-EXEMPLE	u () ai	id Noi	Tilabi	110	Abate		t
Locatio	on of		Locati ormali			D	escription	n of						Ту	ре	
Asbestos-Containing TO BE AB In Fac (13)	g Material (ACM) BATED ility	Mai	d Sole ntenar odial S (12)	nce/		tos Cor therma surf		Mater ns ins AT, o	r	(	Amour Specif F or L	4	Removal	Repair	Encapsulate	Enclosure
Basen	nent		х				VAT			3	20 S	:	X			
5400.1			-									-				
										-						
		-		-												-
Name of Registered Wa	aste Hauler		IN	JDEP W	/aste	Cubi	c Yards		Name of	Regist	ered L	ındfill				
leader was the STA transfer on	Delfa Contracting LLC.						aste		Tullyto	35			ecov	ery F	acili	ty
City, State Union City, NJ						osal Date	е	City, Sta Tullyto		A						
Completed by		Title	10.00			T	Signatur	re	A			Da		4.0		
Jaime Delgado		Proj.	Mana	ager.				/	10			01	-28-	16		

CK 000 528

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

RECEIVED

\* Do not use this form for asbestos lie ensure exempted activities.

Date of Notification (1) 01-28-16				Building Own Ila Demolit		erator	(2)		2016	FEE	-2	AM	0.		
Agencies Notified Type Notification  EPA Initial				dress prest Ave. e, Zip Code					A 35	ES1	OS (	CON	TRI	11	
DEP Amended Amendment				anover, NJ	079	36							G	, (	
Emergency ( justification)  DCA  Emergency ( justification)  Cancellation	ricidaling	- 1	Name of Tom Ba					71	Tele	ephon	Numb	er			
Name of Facility Where Abatement is Taking	Place (3)		FACIL	ITY INFORM	MATIC	N	Ту	pe of Facility (	4)			100			
Private Residence Street Address							-	School (K-1 Subchapter Other (i.e. p etc.)	8 (Oth	er than	K-12) nercial	build	ings,	nome	s,
City (5) Wayne							Sc	quare Feet	# 0	Floor	1	BI	dg. A	je	
County (6) Bergen			County C	ode (7) SE ONLY)			Cı	urrent Use (Prid	or if bei	ng de	olishe	d)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	No.				Abatement Cor ontracting L		(9)					
Street Address						Street 522									
City, State, Zip Code								e, Zip Code City NJ 0708	37						
Project Manager for Monitoring Firm			Telephor	ne No.		Telepl 201		e No. 6-9603		Lice 012	se No )6	•			
Start Date (10) 02-09-16	Schedule 02-10-1		mpletion [	Date (11)				OSHA Monitor Contracting L	.LC						
Occupancy Status During Abatement (Chec	k Only One	e)				Street 522									
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of A nal Facility	baten Hour	nent s			City, S	State	e, Zip Code City NJ 0708	27						
Scope of Work (Check All That Apply)						OHIC	) I I (	JILY IND 07 OC			-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoli						Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure					Э	
	Is	Locat	tion										Abate		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mai	ntena	ely by ance/ Staff?	(i.e. the	Conta ermal surface	scription aining I system cing, V/ niscella	Mat ns ir AT,	erial (ACM) esulation, or	(	Amour Specil F or L	1	Removal	Repair	Encapsulate	Enclosure
Garage	х		Т	rans	site Bo	oar	ds	6	20 S	:	Х				
											-				
Name of Registered Waste Hauler		- 1	NJDEP W	/aste C	Cubic	Yards		Name of	Regist	ered I	andfill				
Delfa Contracting LLC.		1	Hauler ID 35240	2007	of Was			Tullyto	wn R			cov	ery F	acili	ty
City, State Union City, NJ				Dispos 2-15	sal Dat 5-16	е	City, Sta Tullyto		Α						
Completed by Jaime Delgado	Title Proj.	Man	ager.		S	Signatu	re	18			Da 01	te -28-	16		

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#### NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)		Name of	f Building O	wner/Opera	ator (2)	12		_		- 1 -					
January 29, 2				Zarrilli	Homes			2	8 8	1 3	5				
[ ] DEP [ ] A	tial Notifi	otification		Street A	ddress	:	antoloking Ro								
[X] DOH [X] E	nergency (	(including				Brick,	New Jersey 08	3723		~2					
DCA	tification) ncellation			Name of	f Contact Rich Z	arrilli		Telephone	Vumber	=		U TI			
			FAC	ILITY I	NFORM	ATION			- C3	8		0			
Name of Facility Where Abatement is Tak Residence	ng Place (	3)					-	] School	0000	-2		K			
Street Address							[ [ x	] Other (i	ter 8 (oth	e & con		177	ings,		
City	Cour	nty (6)		County C	Code (7) USE ONLY	)	Square feet 1200 sf	# of F	ors C	Bldg		0			
Brick	Oce	ean					Current Use (Pr	ior if being der	der tolished)						
Name of Monitoring Firm Hired by Buildi N/A	g Owner	(8)		ASCM N	lo.	Name of	Abatement Contra	ctor (9)	Contracting, Inc.						
Street Address						S. CONTROL POR									
City, State, Zip Code		1889 Route 9, City, State, Zip Code					9, Init 61								
Desired Manager G. Manitaria, Film	N 1				Tor		N w Jersey 08755-1271								
Project Manager for Monitoring Firm	Project Manager for Monitoring Firm Telephone Numb					732-349	e Number 9-9932		0624	umber					
Scheduled Start Date (10) 2/1/16		Scheduled 2/2/1		ion Date (11) Name of OSHA Monitor E.M.S.L. And					tical						
Occupancy Status During Abatement (Che  [ X ] Facility Closed/Vac  [ ] Abatement Perform  [ ] Other – Describe	ted Durin	g Entire Perio				Street Ad City, State	dress 105 e, Zip Code	6 Stelton R	ad	v 0885	54				
Scope of Work (Check all that apply)						[ ]		nent with Neg							
$\begin{bmatrix} & & >3 \text{ sf or } \ge 3 \text{ lf} \\ & & \geq 160 \text{ sf or } \ge 260 \text{ lf} \end{bmatrix}$		[ ] [x]	Renovat Demolit			[ ] [ x ]	Mini-Enclose Glovebag Pro Non-Exempt		Friable F	rocedu	re				
	T			T						Abate	ment '	Гуре			
Location of Asbestos-Containing Material (ACM TO BE ABATED in facility (13)	)	Is Location Normally usually solely by intenance/Custaff (12)  S NO	sed		Asbe M (i.e., insu	Description estos-Con laterial (A thermal s lation, sur VAT, o r miscella	taining CM) systems facing, r	(Spec	ount lfy SF _F)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E		
Exterior		X		Asbe	stos sidinį	g		325 s		X					
Name of Registered Waste Hauler NJDEP Waste Hauler II					0.11.37	10111	NI ON		Į.				1.47		
Guardian Contracting, Inc. 20223				ID No.	Cubic Yar	ds of Wast	e Name of Re	gistered Landf	Ц						
City, State Disposal Toms River, New Jersey 2/3/16						City, Sta	own, Pennsylv	ania							
Completed by (Print or Type) Nicholas Fernicola  Title Project Manager					ште		el			Date 1/29	/2016	5			

<sup>\*</sup>Do not use this form for asbestos licensure exempted activities.

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#### NOTIFICATION OF ASBESTOS ABATEMENT

D : 631.05 0 00									_						
Date of Notification (1)  January 29, 201		Name o	f Building C			8	8/2	)							
	tion Notificanded Noti			Street A		РОВ	ox 813		3883 3883	2016 F E	i	D m			
[x] DOL Amer	ndment#_ gency (in			City, Sta	ate, Zip Cod		ank, NJ 07701		TIC.	7-8	,	III.			
I DCA	ication) ellation			Name o	f Contact Gary C	Casazza		Telephone	lumber	3	-	TO VE			
			FAC	II ITV I	NFORM	ATION			-	-	ج.				
Name of Facility Where Abatement is Taking Residence	Place (3)		THO	IDIT I	IN ORD	ATION	Type of Facility	(4) ] School (	;-12)	201	w w				
0							ŗ		er 8 (oth	er than	k-12)				
Street Address							[x		:., privat		111111111111111111111111111111111111111	al build	lings,		
City	County	r (6)		County C (STATE	Code (7) USE ONLY	7)	Square feet 1200 sf	# of Fl		Bldg	. Age	55			
Rumson	Monr	nouth					Current Use (Pr	ior if being der	der olished)						
Name of Monitoring Firm Hired by Building Guardian Contract				ASCM N	lo.	ector (9) ardian Contr	icting	Inc							
Street Address							Street Address								
City, State, Zip Code	ry, State, Zip Code						e, Zip Code	9 Route 9, 1				2021			
Toms River, NJ 08 Project Manager for Monitoring Firm		Telephone 1	Jumbar			Tolombon			New Jersey 08755-1271						
Nicholas Fernicola		732-349-		Telephone Number 732-349-9932						umber					
Scheduled Start Date (10) 1/29/16		Scheduled 0	Completio	on Date (1	1)		OSHA Monitor	I.S.L. Analy							
Occupancy Status During Abatement (Check of						Street Ad	dress						_		
[ X ] Facility Closed/Vacated [ ] Abatement Performed 0							599	6 Stelton R	ad						
Other – Describe	Juisiue 0	i Nominari a	cinty 110	ui3		City, State	e, Zip Code Piso	cataway, Ne	v Jerse	y 088	54				
Scope of Work (Check all that apply)						[x]	Full Contains	nent with Nega	ive Pres	sure					
[ X ] >3 sf or ≥3 lf		гэ	Renovat			[ ]	Mini-Enclosu								
[ ] ≥160 sf or ≥260 lf		[x]	Demolit			[ ]	Glovebag Pro Non-Exempt	ed (*) and Non	Friable F	rocedu	re				
						4			V:	Abat	ement '	Гуре			
T C		Is Location				Description			00000000	R	R	Е	Е		
Location of Asbestos-Containing Material (ACM)	N	ormally us Solely by				estos-Con laterial (A		1 00 × 6	unt fy SF	Е	E	N	N		
TO BE ABATED	Maint	enance/Cu				thermal s			F)	M	P A	C	C L		
in facility		Staff				lation, sur				0	I	P	o		
(13)		(12)		+		VAT, o				V	R	S	S U		
	YES	NO	N/A		othe	er miscella	neous)			A L		L	R		
Basement		X		Duct	wrap			300 s		X		Е	Е		
					r										
				1											
Name of Registered Waste Hauler Guardian Contracting, Inc.	N	JDEP Waste	Hauler	ID No.	Cubic Yar	ds of Waste	Name of Re	gistered Landfi	i						
City, State Disposal Date Toms River, New Jersey 2/2/16						City, Sta	te wn, Pennsylv	ania							
Completed by (Print or Type) Title Signature					ure ·	- /	2 1			Date					
Nicholas Fernicola Project Manager						1				1/29	/2016	)			

<sup>\*</sup>Do not use this form for asbestos licensure exempted activities.

#### Diale Of Frem Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)		Name of	Building C	wner/Opera					2		7 -						
January 29, 2016				Jacobs	D	emolition & Car	ting	2	2 5	58	11						
	ion Notifica			Street Ac	ldress	P O Bo	ox	9		PUG	200	77 25	7000				
[x] DOL Amen	dment # gency (in			City, Sta	te, Zip Cod		squ	an, NJ 08736		3/1/2	012.	8-2	(1)	1			
IX I DOR	cation)			Name of	Contact Linda			Te	elephone N	ımber	الماسية	TE V	1	ED			
			FAC	ILITY I	NFORM	ATION					5-		17				
Name of Facility Where Abatement is Taking Residence	Place (3)	)					1	Type of Facility (4)	School (I		2	Ź	دن				
Street Address								[x]		ap : r 8 (other than k-12)  i. , private & commercial buildings,							
								[ \( \) ]	homes, e		0 00 0011	IIII OI OI	ii ouna				
Brick	Count	y (6)		County C	ode (7) USE ONLY	7)		Square feet 1500 sf	# of Flo		Bldg	Age 6	0				
	Ocea	n					(	Current Use (Prior if Residen		olished)							
Name of Monitoring Firm Hired by Building (	Owner (8	3)	-+	ASCM N	0.	Name of	Ab	patement Contractor (		7				$\neg$			
N/A	3	Z					n Contr	cting,	Inc.								
Street Address						Street Ad	ddre		-i+ 61								
City, State, Zip Code						City Stat	te. 7		oute 9, L	nit 61							
51.7, 51.11.1, 5.p cour	Lode						City, State, Zip Code Toms River, N					55-12	71				
Project Manager for Monitoring Firm	ect Manager for Monitoring Firm Telephone Number						732-349-9932 0 0						L tense Number 0 1624				
Scheduled Start Date (10) 2/1/16		Scheduled (		on Date (1	1)	Name of	OS	SHA Monitor	Analy	ioo1							
Occupancy Status During Abatement (Check of	only one	2/2/16	0			Street Ad	ddre		. Analy	icai							
[ X ] Facility Closed/Vacated			d of Abat	tement				1056 St	elton Ro	ad							
Abatement Performed 0	Outside o	of Normal Fa	acility Ho	urs		City, Stat	te,	Zip Code									
Other – Describe						•			way, Ne	/ Jerse	y 088	54					
Scope of Work (Check all that apply)						[ ]	1	Full Containment	with Nega	ve Pres	sure		1111-27-7				
Stope of Work (Check all alla apply)						į į		Mini-Enclosure									
[ ] >3 sf or ≥3 lf		[ ]	Renova	tion		[ ]		Glovebag Procedu	re								
[ X ] ≥160 sf or ≥260 lf		[ x ]	Demoli	tion		[x]		Non-Exempted (*	and Non-	riable I	rocedu	re					
				T						-	Abate	ement 7	уре				
		Is Locatio				Descriptio					R	R	Е	Е			
Location of	1	Normally us				estos-Con			Am	100000000000000000000000000000000000000	Е	E	N	N			
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>	Main	Solely by tenance/Cu				Material (A , thermal:			(Spec		М	P A	C A	C L			
in facility	Iviani	Staff	astourar			lation, su				- /	0	I	P	0			
(13)		(12)			69	VAT, o		200			V	R	S U	S			
	X PDG	210	27/4		oth	er miscella	ane	eous)			A		L	R			
_	YES	NO	N/A				200				L		Е	Е			
Exterior		X		Asbes	stos sidir	ıg			1500	f	X						
			17														
Name of Registered Waste Hauler  NJDEP Waste Hauler  NJDEP Waste Hauler				ID No.		rds of Wast	te	Name of Registe T.R.R.F.	red Landfi	1							
Guardian Contracting, Inc. City, State		2	0223 Dispos	sal Date	3	City, St	tate			-							
Toms River, New Jersey			2/3/1	6				vn, Pennsylvania									
Completed by (Print or Type)  Nicholas Fernicola  Title  Project Manager					ure	-		1			Date 1/29	9/2016	5				

<sup>\*</sup>Do not use this form for asbestos licensure exempted activities.

CK 1699

#### State of New Jersey NOTIFICAT (Pursu

TION OF ASBESTOS ABATEMENT uant to NJAC 8:60 and 12:120)	RECE
dant to None olde and 12.1207	いたしこ

(		(Purs	suant to	NJAC 8:60 a	and 12:120	))				RE	C,	EI	VF	Fi	
Date of Notification (1) 01/21/2016			ame of B	uilding Owne each	r/Operator	(2)			201	NE I FEE	1-1	) ,	M -	b	
Agencies Notified Type Notification		St	reet Add	ress							-	A	9	: 32	
☐ EPA ☑ Initial								Δ	S	IFS !	68	C. I.	11T	0.0	
DEP Amended Amendment #_			ity, State Iewark	, Zip Code NJ						IFST & LI	CE	45/	NG	70L	
	cluding	888	ame of C					Telepho	one	Numbe	r				
			FACILI	TY INFORM	ATION				_						
Name of Facility Where Abatement is Taking I	Place (3)					Тур	oe of Facility (4)								
House Street Address						H	School (K-12 Subchapter 8	Other th	nan	(-12)					
Street Address						×	Other (i.e. prietc.)	ivate & co	mm	ercial b	uildir	igs, h	omes	'	
City (5)						Sq	uare Feet	# of Flo	ors		Bld	g. Ag	е		
Newark				1 (7)		-	rrent Use (Prior	r if boing	don	liched				-	
County (6) Essex			County Co STATE US	SE ONLY)		Cu	irrent ose (Filo	i ii beirig (	uen	Jiisiicu	,				
Name of Monitoring Firm Hired by Building On Competent Supervisor	wner (8)		ASCM	No.			Abatement Cont ny Construct								
Street Address						Ro	dress ute 46 West								
City, State, Zip Code						City, State, Zip Code Totowa NJ 07512									
Project Manager for Monitoring Firm		7	Telephon	e No.	Tele	Telephone No. Lice									
						973 832 4244 011								_	
1 - 1 - 1 - 1 - 1	Scheduled 01/27/2		pletion D	Date (11)		Name of OSHA Monitor Same as above									
Occupancy Status During Abatement (Check	Only One	e)			Stre	Street Address									
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of A al Facility	batem Hours	ent		City	State	e, Zip Code			-					
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×	Full Containme Mini-Enclosure Glovebag Prod	e cedure							
St.							Non-Exempte	d (*) and l	Nor	Friable			ment		
		Locati Iormal											pe		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	d Sole intena todial S (12)	ly by nce/	(i.e. the	Descript Containing ermal system surfacing, ther misce	g Matems in VAT,	terial (ACM) nsulation, or		our ecif or L		Remova	Repair	Encapsulate	Enclosure	
	Yes	No	N/A										te	U	
Basement			X		pipe insi	ulatio	on	179	9 L		x		Х		
									_						
Name of Registered Waste Hauler			V IDED W	Vaste 1	Cubic Yard	ls	Name of	Register	ed I	andfill					
Academy Construction Inc				of Waste GROWS Lan											
City, State totowa NJ					TBD	Disposal Date City, State TBD Morrisville PA									
Completed by Zlate Geleski	itle Signature Helenh					Dat 01		2016	3						

Jan Zb ZUlb U3:Z[PM

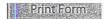
(K	1705	State of New Jersey IFICATION OF ASBESTOS ABATEME (Pursuant to NJAC 8:60 and 12:120)	RECEIVED
tification (1)		Name of Building Owner/Operator (2 Adam Heaven	2016 FEB -2 AM 9: 8
Notified	Type Notification	Street Address	ASB STAC
	Initial Amended Amendment #	City, State, Zip Code Newark NJ	ASB STOS CONTRO & LICENSING
	Emergency (including justification) Cancellation	Name of Contact Adam Heaven	Telephone N Imber
acility Wher	re Abatement is Taking Place (3)	FACILITY INFORMATION	Type of Facility (4)

Date of Notification (1) 01/29/2016			me of Bu Iam He		ner/Operator	(2)		2016	FEB	-2	) <u>A</u>	4 6	. 52
Agencies Notified  Type Notification  EPA  DEP  Initial  Amended	*	City		Zip Code				458 8	ST	OS SEA	CD 4811	HTE	₹0L
DOL Amendment # Emergency (ir justification) Cancellation		Na Ad	ewark in the second of the sec	ontact eaven				Telephone N			1011	<b>V</b> G	
Name of Facility Where Abatement is Taking house Street Address	Place (3)		FACILIT	TY INFORI	MATION	So So	Facility (4) chool (K-12) ubchapter 8 ( ther (i.e. priva	Other than K	12)	uildin	gs, h	omes,	
City (5) Nerark						Square	,,	# of Floors			g. Age		
County (6) Essex	ų.		cunty Co	ide (7) E ONLY)		Curren	t Use (Prior it	being demo	shed)				
Name of Monitoring Firm Hired by Building Competent Supervisor	Owner (8)		ASCM N	No.		Name of Abatement Contractor (9) Academy Construction Inc							
Street Address						Street Address 205 Route 46 West							
City, State, Zip Code						State, Zip owa NJ							
Project Manager for Monitoring Firm		T	elephone	e No.	100000000000000000000000000000000000000	832 42	Licens 0115						
Start Date (10) 02/10/2016	Scheduled 0 02/24/20		oletion D	ate (11)		e of OSH ne as a	A Monitor bove						
Occupancy Status During Abatement (Chec  Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:  Scope of Work (Check All That Apply)	Period of Aba	ateme ours	ent			State, Zi							
≥3 sf or ≥3 if × ≥160 sf or ≥260 if		novat				Mir	I Containmen ni-Enclosure ovebag Proce n-Exempted	dure		Proc	cedure	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Main Custoo		y ,/b <sub>y</sub> nce/	Asbest (i.e.	Descripti os Containing thermal syste surfacing, ' other miscel	Materia ms insul VAT, or	ation,	Amount (Specify SF or LF		Removal	Ty Repair	e Encapsulate	Enclosure
Basement	Yes	INO	X	Pipe	e insulation	wrap	ping)	300LF				Х	
N													
Name of Registered Waste Hauler		MODE! Widoto			The state of the s	Cubic Yards Name of Registered			ndfill				
Academy Construction Inc	Hauler ID No. of Wa 00334422 3				GROVVS Landini								
City, State Totowa NJ					Disposal D		City, State Morrisv	ille PA	T Dat	te			
Completed by Zlate Geleski				Signe	gure,	Jel.	1/			2016	5		

\* Do not use this form for asbestos lic insure exempted activities.

	CIL.	60	500	_
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_		mer s	400	
		200	E	1

Date of Notification (1)	1		N	ame of	Building	Owner/Operator	(2)		So LL	=		T	
1/28	116			B	AST		50	FEB		0	_		
Agency Notified	Type Notification		S	treet A	ddress			00	2		m		
D 504	2 Initial			26	55	R Z	5 M.S.	20	MUS	ROLE		1,000	
□ EPA □ DEP	☐ Amended		C	ily, Sta	te, Zip C	code	0708-		25 CO	3		4	
₽ DOL	Amendment #			10	110	N. NJ.	07583	5		-		T	
<b>д</b> бон	☐ Emergency (including justification)	9	N					Teleph	ne Nymbe	1		-	ģ
D DCA	☐ Cancellation			501	WH	Mecle	LAN				_		
						ORMATION							
Name of Facility Where	Abatement is Taking Place	e (3)					Type of Facility	(4)					
	ASF	- (-)					D School (V 1	2)					
	42.	74 dli 2011		****			☐ School (K-12 ☐ Subchapter	6 (Other t	an K-12)	3			
Street Address	- 2 1					ï	Dither (i.e. pr	ivate & a	mmercial l	ouildings			
2655	5 REZZW	62	(		<u> </u>		homes, etc.		- I	Pida Aco			_
City (5) .		- 1		1.,		* 14							
· NMIC	SV)						122000			66	XX	>	
County (6)					Code (7	(STATE USE	Current Use (P						
1) NIC	2N .		(	ONLY)	***			1	OFFE	ice			
Name of Monitoring Firm	n Hired by Building Owne	r A	SCM	No.	76 <sub>10</sub>	Name of Abater	nent Contractor (	9)					
(8) EH1			٠.,			Best Re	moval In	С					
Street Address		1:				Street Address	1.0					÷)	
	SHORE TRAI	ζ.		0		450 Sou	th River	St					
City, State, Zip Code	20,5 .00 1104	_	-			City, State, Zip		00					
	A. NJ. 09	871	ř.				ack, N.J	. 070	01				
Project Manager for Mo	primring Firm			e No.		Telephone No.		Licens					_
TO VON DOE					041		-7444 -	00	388				
Start Date (10)	Scheduled Co				251	Name of OSHA							
	1												
2/6/16	ng Abatement (Check only		- 70	Street Address									_
Occupancy Status Duri	ng Abatement (Check on	y one,		9			uyler St						
	ted During Entire Period o					City, State, Zip						_	_
☐ Abatement Performe ☐ Other – Describe: ⟨ ,	d Outside of Normal Facil	ity Hou	rs 	1			ckensack	Ν.	0.76	506			
						) D. II.	CKCHBUCK	, 11	- 070	-		3.	_
Scope of Work (Check	all trat apply)						Containment with	n Negativ	Pressure				
□≥3sfor≥3lf				☑ Rend □ Dem	noition	16 (C)	-Enclosure vebag Procedure			12			
D ≥ 160 sf or ≥ 260 lf		3		a bein	IONBON ,		-Exempted (*) ar		ible Proce	dure			
					<u> </u>							terne	nt
			Locati ormal	0.000						-	1	ype	
Local			Sole			Description stos Containing N		× .	Amount	+		m	_
	ing Material (ACM) ABATED		ntena: ustodi			a, thermal system			Specify	3	Repair	Encapsulate	Enc
	acility		Staff?			surfacing, VA	T, or		For LF)		pal	nsd	nso
(1	13)		(12)			other miscellar	neous)	1		1		late	16
		Yes	No	N/A	1							1	
0,00	Trol Room		10 (10)		.,	AT + MAS	Tie		18 50	中	<	T	Γ
NIESC CON	ا رود محمد ا			-	1	117 1053		-		- 1	1	+	
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	34								1000				
Name of Registered W				Vaste H	lauler	Cubic Yards of			1.57				
Best Rem	oval Inc	ID	No. 17	100		Waste 10 C 7	Minerv	a En	erpri	ses	, I	LC	
17109						/			POLICE .				_
City, State Hackensack , N.J. 07601					Disposal Date	City, State	a h	ΛL	1, 1, 40	0			
	Sack , N.J. U/601					2/12/16	wayne	spur	, 0h,	4400 Date	0		-
Completed by	1				Signature 1/28						21	16	,
J.Maioran						icansura avamento	7		-/-	1	-		



Emergenc 7

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Date of Notification (1)    Agencies Notified   Type Notification   Street Address   Soft Amended Blufflig   Amended   Amendment #   Soft Amended Blufflig   Amended   Amendment #   Soft Amended   Amended   Amended   Amendment #   Soft Amended   A	Date of Notification (1) 1/29/16			195000	ame of E Urisk	Building Ov	wner/C	perator	(2)	2016	CED.	7	YE	D			
Annexidation   Commendation   Comm				10000			vd.	T)		ASRE	<del>- 48 -</del>	? Al	10:	ê			
FACILITY INFORMATION   Type of Facility (4)   Camden County technical School   Street Address   School (K-12)   Subchapter (2) (Other han K-12)   Subchapter (3) (Other han K-12)   Subchapter (3) (Other han K-12)   Subchapter (4)   Subchapter	DEP DOL	Amended Amendment #						3		& /	ICEA	CON	TRI	71			
Name of Facility Where Abstement is Taking Place (3)   School (K-12)   Schoo		justification)	cluding	15,40		Contact					Telep	one N	imbe	1			
Since Address OBOB Browning Road  City (9) Pennsauken NJ 08110  County (6) Carnden  County (7) Carnden  County (8) Carnden  County (9) Carnden  County (19) Carnden  County					FACIL	ITY INFOR	RMATI	ON									
City (5) Pennsauken NJ 08110  County (6) Carniden  County (7) County (8) Carniden  County (8)			Place (3)						× Sc	chool (K-12	)						
Square Feet   for Fors   Side, Age   35+		ıd							0	ther (i.e. pr				uildi	ngs, h	nomes	s,
STATE USE ONLY)		110							Square	Feet	100000000000000000000000000000000000000	oors		1350000		je	
TTI Environmental Inc.  Street Address 1253 North Church St.  City, State, Zip Code Moorestown NJ 08057  Project Manager for Monitoring Firm Jim Guillardi  Star Date (10) 1/30/16  Street Address City, State, Zip Code West Berlin NJ 08091  Telephone No. S56-840-8800  S56-840-8800  S65-753-9800  S7727  Star Date (10) 1/30/16  Street Address City, State, Zip Code  Street Address City, State, Zip Code  City, State, Zip Code  Street Address City, State, Zip Code  City, State, Zip Code  Street Address City, State, Zip Code  Street Address City, State, Zip Code  City, State, Zip Code  Street Address City, State, Zip Code  Street Address City, State, Zip Code  City, State, Zip Code  Street Address City, State, Zip Code  City, State, Zip Code  City, State, Zip Code  City, State, Zip Code  Street Address City, State, Zip Code  Street Address City, State, Zip Code  City, State, Zip Code  Street Address City, State, Zip Code  City, State City, State Cubic Yards Of Waste Cubic Yards Of Waste City, State City, S									Curren	t Use (Prior	r if being	demol	ished	)			
Street Address 1253 North Church St.  City, State, Zip Code Moorestown NJ 08057  Project Manager for Monitoring Firm Jim Guilardi Sarchadoress Project Manager for Monitoring Firm Jim Guilardi Sarchadoress Se6-840-8800 Se6-753-9800 Se6-753-9800 Se753-9800 Se753-980			wner (8)		ASCM	No.					ractor (§	tor (E)					
City, State, Zip Code Moorestown NJ 08057  Project Manager for Monitoring Firm Jim Guillardi Start Date (10) 1/30/16  Scheduled Completion Date (11) 1/31/16  Same  Steet Address  Steet	Street Address							100000000000000000000000000000000000000	eet Address								
Project Manager for Monitoring Firm Jim Guilardi  Start Date (10) Scheduled Completion Date (11) 1/30/16  Cocupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  City, State, Zip Code  Street Address  City, State, Zip Code  City, State, Zip Code  City, State, Zip Code  Full Containment with 1 egative Pressure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Section of Asbestos-Containing Material (ACM) TOBE ABATED In Facility (13)  Facility (13)  Section Normally Used Solely by Maintenance Custodial Staff? (12) Yes No N/A  Feachers Conference Room  X  Floor Tile / Mastic  City, State Reposation Section of Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Name of Registered Waste Hauler United Containers  Name of Registered Waste Hauler United Containers  Title  Disposal Date 2/1/16  Signature  Date  Date	City, State, Zip Code			City					ity, State, Zip Code								
Start Date (10) 1/30/16  Scheduled Completion Date (11) 1/31/16  Same  Cocupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: weekend  City, State, Zip Code  City, State  City, St			Telephone No. Te					elephone No.				icense No.				_	
1/30/16   1/31/16   Same    Occupancy Status During Abatement (Check Only One)   Street Address    I Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours    Other – Describe: weekend    Scope of Work (Check All That Apply)    ≥ 3 sf or ≥ 3 if		Guilardi						0.5.00.00.0	Carroll Granes	(	0727	01				_	
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  City, State, Zip Code  Civ Code  Civ Code  Civ	1/30/16		1/31/16		piction E	oute (11)		Sam									
Abatement Performed Outside of Normal Facility Hours Other – Describe: weekend  Scope of Work (Check All That Apply)  23 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Teachers Conference Room  Normally (12)  Yes No N/A  Name of Registered Waste Hauler United Containers  Normally United Containers  City, State, Zip Code  Full Containment with I egative Pressure  Mini-Enclosure  Glovelap Procedure  Non-Friable Proceclure  Non-Friable Proceclure  Abatement Type  Abatement Provided (*) and Von-Friable Proceclure  Non-Exempted (	Occupancy Status Durin	g Abatement (Check	Only One)					Street	Address	3							
≥3 sf or ≥3 lf   ≥160 sf or ≥260 lf	Abatement Perform	ned Outside of Norma								Code							
Demolition    Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolition   Demolitical   Description of   Abatement   Type   Demolitical   Demolitical	Scope of Work (Check A	All That Apply)															
S Location of Normally Used Solely by Maintenance/ Custodial Staff? (12)   Yes   No   N/A   N/									Mini Glov	i-Enclosure vebag Proc	edure					2	
Normally Used Solely by Maintenance/ Custodial Staff? (12)   Yes   No   N/A			le l	anti-											Abate	ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes No N/A  Teachers Conference Room  Name of Registered Waste Hauler United Containers  Place Abster Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Name of Registered Waste Hauler United Containers  NJDEP Waste Hauler ID No. 22459  City, State Elm NJ  Completed by  Title  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Name of Registered (Si ecify SF ir LF)  NAME of Registered Waste Hauler  NJDEP Waste Hauler ID No. 22459  Disposal Date 2/1/16  Signature  Date 1/1/16  Date 1/1/16  Date 1/1/16  Date 1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	1						D.	accrintion	o of						Ту	ре	
Teachers Conference Room X Floor Tile / Mastic 22 ) SF X  Name of Registered Waste Hauler United Containers  City, State Elm NJ  Completed by  Title  Ploor Tile / Mastic 22 ) SF X  Cubic Yards of Waste G.R.O.W.S.  City, State Elm NJ  Disposal Date 2/1/16  Signature  Date	Asbestos-Containing TO BE AB In Faci	g Material (ACM) BATED lity	Main	enan dial S	ice/		os Cor therma surfa	ntaining ! al system acing, VA	Material ns insula AT, or		(SI	ecify		Removal	Repair	Encapsulat	Enclosure
Name of Registered Waste Hauler United Containers  City, State Elm NJ  Completed by  Title  NJDEP Waste Hauler ID No. 22459  Cubic Yards of Waste G.R.O.W.S.  Cubic Yards Of Waste G.R.O.W.S.  City, State Disposal Date 2/1/16  Signature  Date				No	N/A			T1 /1				CE		_		е	
Hauler ID No.   22459   G.R.O.W.S.	Teachers Confe	erence Room	X				Floor	lile / I	Mastic		- 22	155	-  2	K			
Hauler ID No.   22459   G.R.O.W.S.												-					
Hauler ID No.   22459   G.R.O.W.S.											-						
Hauler ID No.   22459   G.R.O.W.S.	Name of Pegistered Wa	ΙN	JDEP W	/aste	Cubi	c Yards		Name of	Registe	ste ad Landfill							
Elm NJ  Completed by  Title  Signature  Date  Date		United Containers Haul					of W	of Waste									
Completed by Title Signature Date									е			1906	7				
The second secon							Signatu	re		_				3			

Date of Notification (1)		Name of Building Owner/Operator (2)										
January 29, 2016		N	/londele	ez						- 160/males-17		
Agencies Notified Type Notification			Street Ad	ddress				Ü	ia.	2016		cares !
⊠ EPA		2	2-11 S	tate Rou	ite 208				Ò	67		73
DEP Amended			City, Sta	te, Zip Cod	de			-0	0	FEB		m
DOL Amendment #		— F	air Lav	vn, NJ						1		0
DOH Emergency (in justification)	icluding		Name of	Contact			Telephor	3 Humil	per .	2		[1]
DCA Cancellation		F	Project I	Manage	r		1	72.	-	300		11
			FACI	LITY INFO	RMATION		,,,	=		I		batheri
Name of Facility Where Abatement is Taking	Place (3	)				Type of Facility	(4)	<u></u>		9		
Pilot Test Building						School (K-	12)		7.7 	4		
Street Address						Other (i.e.	r 8 (Other tha private & com	nercial	build	lings.	home	es.
22-11 State Route 208						etc.)	pintate a con					
City (5)						Square Feet	# of Floo	3	В	ldg. A	ge	
Fair Lawn, NJ							TB	) .				
County (6)			County (	Code (7) USE ONLY)		Current Use (Pr	ior if being de	nolishe	ed)			
Bergen			(SIAIE C	JSE UNLI)			bak	ry				
Name of Monitoring Firm Hired by Building O	wner (8)		ASCN	No.	Nam	e of Abatement Co						
J&S Environmental			11832	2	The	LLC						
Street Address			7/		Stree							
2333 Route 22 West					1500	, STE 209						
City, State, Zip Code					City,	State, Zip Code						
Union, NJ 07083					Cher	ry Hill, NJ 0803	34					
Project Manager for Monitoring Firm			Telepho	ne No.	Tele	phone No.	Lice	ise No				
Sherrill Gelsomino		9	008-419	9-7613	(973	759 - 5000	007	11				
Start Date (10)	Schedule	ed Con	npletion l	Date (11)	Nam	e of OSHA Monito	r					
2/15/16			3/31/16	6	The	MACK Group,	LLC.					
Occupancy Status During Abatement (Check	Only Or	ne)			Stree	et Address						
Facility Closed/Vacated During Entire P	eriod of	Abaten	nent		1500	Kings HWY N	, STE 209					
Abatement Performed Outside of Norma	l Facility	Hours	5		City,	State, Zip Code						
Other - Describe:					Cherry Hill, NJ 08034							
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf		Renova				tive Pr	essu	re				
≥160 sf or ≥260 lf		Demolit	tion			Mini-Enclosu  Glovebag Pr						
					#		d (*) and Non-	riable f	Proce	dure		
	Is	Locat	ion							Abate		t
Location of	1	Norma	lly		Descripti	on of				Ту	pe	
Asbestos-Containing Material (ACM)		d Sole		Asbest		Material (ACM)	Amout				Ш	_
TO BE ABATED	2000	todial 3		(i.e.	thermal syste surfacing, \		(Speci SF or L		Rei	R	Encapsulate	Enclosure
In Facility (13)		(12)			other miscell		SI UIL	1	Remova	Repair	lusc	uso
	Rettet	00000	1.00000	1		*			<u>a</u>	=	ate	9
	Yes	No	N/A							-		-
1st FI, Employee Break room & adjacent hallway		X			Floor tile &	mastic	appr. 66	SF	X			
2nd Fl, Lab. Suites, Countertops & Fume Hoods	ume Hoods				Ebony B	oard	805 S	Ξ	X			
2nd Fl, Lab.					ipe Fitting i	nsulation	60 P		X			
Ziid i i, Lab.	, Las.					i i Sulution	001		/\	1		
		L	11.050.0	V4-							_	
Name of Registered Waste Hauler	NJ DEP Waste Hauler ID No.				Cubic Yards Name of Registered Landfill of Waste							
Newark / Freehold Carting						8.7 GROWS / TRRF / WM / Blue Ridge					ge	
City, State	9					Disposal Date City, State						
Newark / Freehold, NJ				3/31/16 Morrisville / Tullytc wn, PA								
Completed by Title					Signature - Date							
Steve King V.P.					1/29/16							

<sup>\*</sup> Do not use this form for asbestos livensure exempted activities.

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

CK. # 2952

Date of Notification (1)	10	Name of Building	g Owner / Opera	ator (2)	-	9		-				
Agencies Notified Type Not		Edna Mahan C	Correctional F	acility for \	Nomen	_						
Agencies Notified Type Not	illication	Street Address 30 Route 513				1992-199	2		-			
	itial	City, State & Zip	Codo			- 5	2016		7			
	mended #2-1/29/16	Clinton, NJ 08				Total Contract of the Contract	E	î	1 5			
	mergency	Name of Contact				Sol41	50		<u></u>			
	ancellation	Brian O'Neill	1			Tele	ohone	Num	iber.			
	arrodilation					HIGH			dam			
		FACILITY IN	FORMATION			ZC	3	M 10: 8	777			
Name of Facility Where Abate			Type of Fa			ING	E	<b>5</b>				
Edna Mahan Correctiona	Facility for Womei	1	☐ Schoo	(3		0.		(E)				
Street Address					er than K-12)		0	-				
30 Route 513					commercial b	uildings, h	ómes,	, etc.)	)			
0:4.75	10		Square Fee	et # o	f Floors	Bldg.	Age					
City (5)	1	ounty Code (7)										
Clinton	Mercer			e (Prior if bei	ing demolished							
			Prison									
Name of Monitoring Firm Hired		ASCM N		patement Co								
Environmental Connectio	n			vironment	al, Inc.							
Street Address			Street Addr									
120 North Warren Street City, State & Zip Code			1123 Beav			-						
Trenton, NJ 08010			City, State	[14] [14] [15] [15] [15] [15] [15] [15] [15] [15								
Project Manager for Monitoring	Firm	phone Number	Bristol, PA		[[:	11 1						
Steve Fairess	609-		Telephone Number Licer se Number (215) 788-6040 005( 9									
Scheduled Start Date (10)	Scheduled Completic			SHA Monitor	5							
1/29/16	1/30		Bristol Environmental Inc.									
Occupancy Status During Abat		Nilsenson American Indiana	Street Addre		41 1110.	-			_			
Facility Closed/Vacated			1123 Beav									
Abatement Performed	Outside of Normal Ho	urs - 7am to 3pm				-			$\overline{}$			
Describe: 4:00 PM -		N	Bristol, PA									
☐ Facility Occupied Durin	g Abatement: 8:30 AM	to 3 PM	, , , , , , , , , , , , , , , , , , , ,									
Scope of Work (Check all that a	apply)											
				Full	Containment w	th Negativ	e Pre	ssure	<u> </u>			
≥3 sf or ≥3 lf	$\boxtimes$	Renovation		Mini-	Enclosure				- 1			
≥160 sf ≥260 If		Demolition			e Bag Procedu							
				Non-	Exempted and	Non-Friab	le Pro	cedu	ire			
Location of		ocation .	Descriptio		Amou		batem	ent T	уре			
Asbestos-Containi		ally Used	Asbestos-Cor		(Speci		T	122				
Material (ACM) TO BE ABATED		enance or	Material (A (i.e., thermal s		SF or L	-)   z	7 7	inc	E			
in Facility			nsulation, surfa			Kemova	Repair	aps	clsc			
(13)		(12)	or other miscel			\ \alpha \	air	Encapsulate	Enclsoure			
39 to 20	Yes	No N/A						e				
dmin Building - Basement	t 🛛		Pipe Insula	ation	6 LF							
			•				In	F	Ħ			
							In	Ħ	Ħ			
							ITI	Ħ	Ħ			
		HHH					H	H	H			
	111	HHH					州	H	뉘			
ame of Registered Waste Haul	er	NJDEP Waste	Cubic Yards	Name of Re	egistered Land	II						
<u> </u>			of Waste		<u> </u>	25B						
ervice Transport Inc.		20990	<1 Cu yd	Minerva L	andfill.							
ity, State			Disposal Date	City, State								
ew Castle, DE			1/25/2016	Waynesbu	urg, OH							
ompleted By (Print or Type)			Signature	^	1	Date	6	/				
ino Pizzigoni		Project	4 -	0	/ /	2 1/	29/1	16				
\$550 N		Manager	Xuno 1	Brag	170	-1						

GI 16019

Date of Notification (1) Jan. 28, 2016			ame of E		ner/Operator	(2)				D			7
Agencies Notified Type Notification	1		reet Ado							Bold	7	833	1
_ /2 \	' )	\		ton Ave						-0	n <u> </u>	-1	-
EPA Initial Amended Amendment #	1			, Zip Code NJ 0701:	3					CE		2	
Emergency (inclu	uding /	7	ame of C			-		Telep	hone N	mber)		=	
DOH justification) Cancellation		1	ebbie					1	170 5	1	E,	0	
501			FACILI	ITY INFORI	MATION					7	=	4	
Name of Facility Where Abatement is Taking Pla	ace (3)					Туре	of Facility (4)				10	دما	
Park Field House						H	School (K-12) Subchapter 8		than K	(2)			
Street Address 1395 Main Ave						×	Other (i.e. pri	vate &	comme	cial buil	dings	homes	5,
City (5)						Squa	are Feet	# of F	loors	E	Bldg. A	ge	
Clifton						800					10		
County (6) Passaic			ounty C	ode (7) SE ONLY)		Cum	ent Use (Prior	if being	g demo	shed)			
Name of Monitoring Firm Hired by Building Own	ner (8)	$\vdash$	ASCM	No.	Name	of Ab	atement Contr	ractor (	9)	-			
Hillsdale Consulting	, ,						lanagement	t					
Street Address 217 Sunset Ave				776.75	Street 86 C		ess opher Stree	et					
City, State, Zip Code					City, S	state,	Zip Code						
Hightstown, NJ							, NJ 07042		11	Na			
Project Manager for Monitoring Firm Randy Lenhart	1 1	1 Olophidile 1101						License 00371					
Start Date (10) So				ate (11)			SHA Monitor Nanagemen	+					
	eb. 5, 2		2	8-16	Street								
Occupancy Status During Abatement (Check O					Ouco	71001	330						
Facility Closed/Vacated During Entire Peri Abatement Performed Outside of Normal I Other – Describe: Demo	od of Ac Facility I	lours	ent		City, S	State,	Zip Code						
Scope of Work (Check All That Apply)						-							
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		novat moliti				N G	ull Containme Aini-Enclosure Blovebag Proce Ion-Exempted	edure	2			ıre	
		-				- "	ton-Exempted	( ) are	TROTT	abic i i		tement	
		ocation of the control of the contro	255		Description						Т	уре	
Location of Asbestos-Containing Material (ACM)	Used	Solel	y by	Asbesto	Description S Containing I		ial (ACM)	Ar	nount			Ē	ш
TO BE ABATED		itenan idial S		(i.e. th	ermal system surfacing, V				pecify or LF)	Rem	Repair	ncap	inclo
In Facility (13)		(12)		(	other miscella			0.	,	Removal	pair	capsulate	Enclosure
	Yes	No	N/A									Te I	ф
field house			x	exteri	or vapor ba	arrier	paper	8	00 sf	x			
field house					VAT & Ma	astic		2	20 sf	x			
			X		534500000000000000000000000000000000000								1
field house			×		window gla		3		16 If	х			
field house				air-	-cell pipe ir	azing	ition		6 If	x			
		156397	X X JDEP W	/aste	-cell pipe ir	azing	ntion Name of F	Registe	16 If 6 If red Lar	x			
field house		156397	×	/aste No.	-cell pipe ir	azing	Name of F	Registe a Ente	16 If 6 If red Lar	x	<u> </u>		
field house  Name of Registered Waste Hauler		156397	X X JDEP W	/aste No.	-cell pipe ir Cubic Yards of Waste	azing nsula	ntion Name of F	Registe a Ente	16 If 6 If red Lar rprise	x			

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

	N		CATION	OF ASBE	STOS	ABATE		Cha	ck	. ,	40	17	9		
Date of Notification (1) 1/29/16				Building O			(2)			<del></del> t	( 0				
Agencies Notified Type Notifica	ation	1.000	Street A 555 Ri	ddress dgewood	d Aver	nue							چہ		
DEP Amend  X DOL Amend	ment #			ite, Zip Cod Ridge, NJ							U U		18 FK		TO TO
□ DOH		1.00	Name of Jim	f Contact					Tele	phon	Name	ier,	0	5	TO
			FACI	LITY INFO	RMATI	ON					_ <	au		- 190	1
Name of Facility Where Abatement is Street Address	Taking Place (3	)						of Facility (4 School (K-1) Subchapter	2)	r than	۰. ۲-12۱	75 X	MACO	W 18. 0	
555 Ridgewood Avenue							×	Other (i.e. p etc.)	rivate &	com		build	4	home	ร์วิ
City (5) Glen Ridge				8*	88		500	<u> </u>	3	Floor		70	dg. A	ge	
County (6) Essex				Code (7) USE ONLY)		_	Curre	ent Use (Prid	or if bein	g der	olishe	d)			
Name of Monitoring Firm Hired by Buil	ding Owner (8)		ASCN	ΛNo.				atement Con ronmental			LLC				
Street Address						Street PO E		ess 83, 4 E G	ate Dri	ive					
City, State, Zip Code								Zip Code d, NJ 074	18						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-				Lice 703	se No.				
Start Date (10) 2/8/16	Schedule 5/8/16	ed Com	pletion	Date (11)		Name	of OS	HA Monitor						5	
Occupancy Status During Abatement			200.00			Street	Addre	ess							
Facility Closed/Vacated During E Abatement Performed Outside of Other – Describe:					_	City, S	State, 2	Zip Code		-					
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	Total Control	Renova Demoliti				×	Mi GI	ull Containme ini-Enclosure lovebag Proc on-Exempted	e cedure					Э	
	10.5	Locati											Abate	ment pe	
Location of Asbestos-Containing Material (ACI TO BE ABATED In Facility (13)	intenar todial S (12)	blely by Asbestos Containing Material (ACM) Amount (i.e. thermal systems insulation, surfacing VAT or SE or LL)							)	Removal	Repair	Encapsulate	Enclosure		
lower level, old locker room	Yes	No	N/A		nino	insula	tion		60	0 LI		x			
lower level, old locker footi	1		X		bibe	IIISUId				U LI		^			
Name of Registered Waste Hauler		N	JDEP V	Vaste 1	Cubic	Yards		Name of	Registe	red I	ndfill				
Freehold Cartage		Н	auler ID	100 C C C C C C C C C C C C C C C C C C	of Wa			Wester	221-027 -021						
City, State Freehold, NJ		-			Dispo TBD	sal Date	1	City, Stat Birdsbo							
Completed by A. Scott Higgins	Title Pres	ident			,	Signature	2	^			Date 1/2	9/16	6		

(K 21050

K 21050														nt For				
	1		CATION		w Jersey ESTOS AB 8:60 and 12						RE	$C_{i}$	E/1	In				
Date of Notification (1) 1/29/2016					Owner/Ope PAPER			IY .		716	EB	<b>~</b> 2		40				
Agencies Notified  Type Notification  Street Address  ONE MARKET STREET  City, State, Zip Code											MECEIVED  MEFEB-2 AMID: 80							
DOL Amendment #	Amended Amendment # Emergency (including											- CENSING ROL						
DOH justification Cancellation	iciualing			f Contact NAPICK				is e	Telephon	Number								
Name of Facility Where Abatement is Taking	Place /	2)	FACI	ILITY INFO	ORMATION	1	T	-4 F10h / / /										
SOUNDVIEW PAPER COMPANY -			40				-	of Facility (4)										
Street Address ONE MARKET STREET							×	School (K-12 Subchapter 8 Other (i.e. pri etc.)	(Other than			dings,	home	es,				
City (5) ELMWOOD PARK								re Feet	# of Floor		Е	lldg. A	ge					
County (6) BERGEN		County (STATE	Code (7) USE ONLY	)	-	Curre	ent Use (Prior	if being der	olished)									
Name of Monitoring Firm Hired by Building O N/A		ASCN	M No.	1			tement Contr OTHERS (		TING									
Street Address			Street Address 11 VREELAND AVENUE															
City, State, Zip Code								tate, Zip Code DWA, NJ 07512										
Project Manager for Monitoring Firm		100 m · • 100 m						Lice 004	se No. 1 34									
2/10/2016	2/22/20	016	mpletion Date (11)  Name of OSHA Monitor  SAME AS (9) ABOVE															
Occupancy Status During Abatement (Check	Only Or	ne)			S	treet	Addres	ss										
Facility Closed/Vacated During Entire Pont Abatement Performed Outside of Normato Other – Describe;					_ C	ity, S	tate, Z	ip Code										
Scope of Work (Check All That Apply)						-11				-			- Lingson	$\overline{}$				
X       ≥3 sf or ≥3 lf       X       Renovation       X       Full Containment with Mini-Enclosure Glovebag Procedure								dure										
		100	180	Τ			J No	n-Exempted	(*) and Non-	riabl	e Pro			-				
Landlin of		Is Location Normally										Abatement Type						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intena	ely by ince/ Staff?		tos Contain thermal sys surfacing	Description of ontaining Material (ACM) Amou nal systems insulation, (Specifacing, VAT, or SF or lear miscellaneous)					Remova	Repair	Encapsulate	Enclosure				
and the least of t	Yes	No	N/A						TH		_		f	æ				
1ST FL BEHIND WEST OFFICE		X			PI	PE			6 LF				X					
2ND FL OFFICE CONVEYER AREA		X			PI	PE			6 LF				X					
3RD FL HVAC ROOM		Χ			PI	PE	Ξ		6 LF				X					
BASEMENT STORE RM		X			PIPE INS	ULA	TION		10 LF		Х							
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING		H	NJDEP W Hauler ID 18743		Cubic Yallof Waste			ROBERT SERVICE	egistered La		NT G	S.R.C	).W.S	5.				
City, State TOTOWA, NJ					Disposal 2/22/20			City, State	ŞVILLE, P	4								
Completed by VIVECA RAMOS	Title PRO	JEC <sup>-</sup>	r coof	RDINAT	1	ature	we (	cart	inn	Date -1/29/2016								