rg. 2

Date of Notification (1)					Name of R	uilding Owner/Operat		CK TO EX	50	3		7
12 /	16 / _		_		Verizor	l Company Company Coperat	or (2)	601	2	3		\(\frac{1}{2}\)
Agencies Notified EPA	Type Notifica	tion			Street Add	rese				8		
⊠ DOLWD	M Initial			- 1				. G	201	3	2	
☑ DHSS	Amended Amendme			h	City, State,	Montgomery Plac	e, Lower Level	\	20		-	
☐ DCA	☐ Emergence	nt #	refin a	- 1		7gh, PA 15212			1	5	-	7
(NJAC 5:23-8)	Justincatio	n)	uoing	h	Name of Co	gn, PA 15212			. 0	2	£.	5
	☐ Cancellation	on		1	Anthon			Telephone i	Numbe	r	_	-
Name of Facility Where A	batement is Ta	kina P	lace (31	PACILIT	Y INFORMATION				4'	_	-
Verizon Market CO			1000 (3)			Type of Facilit	ty (4)				_
Street Address							School (K-	12)				
95 William St							Subchapte	r 8 (Other than)	(-12)			
City (5)			_				homes, etc	private and com	mercia	al build	lings,	Œ.
Newark							Square Feet	# of Floors		Did	_	_
County (6)										Bldg	. Age	ĺ.
Essex				10	County Co	de (7)(STATE USE ONLY	Current Use /F	Prior if hains do-	nolini.			
	lies d b. T. ii						Office	somy den	wishe	a)		
Name of Monitoring Firm H	iired by Buildin	g Own	er (8)	AS	CM No.	Name of Abates	nent Contractor (S	21				
USA Environmental I	Managemen	t				BRISTOLE	NVIRONMENTA	7) Al 1010				
Street Address						Street Address	A INCHMEN IN	AL, INC.				
8436 Enterprise Ave						1123 BEAVE	ED STREET					_
City, State, Zip Code				_		City, State, Zip (
Philadelphia, PA 1915												_
Project Manager for Monitor	ring Firm		TT	elepho	ne No.	BRISTOL, P	A 19007					
Mark Jenkins					65-5810	Telephone No.		License No.				-
Start Date (10)	Sch	eduled	Com	pletion	Date (11)	215-788-604	7	00509				
_1 / 2 /	14	1	/	17	/14	Name of OSHA					_	_
Occupancy Status During At		$\dot{=}$	<u>'</u> –	<u>''</u>	14	BRISTOL EN	VIRONMENTA	L, INC.				
Facility Closed/Vacated D	Jurina Eatter 2	ck only	y one)	ii.		Street Address						_
Abatement Performed Ou	ulside of Norma	DONE	BdA 10	tement	l .	1123 BEAVE	R STREET					
Time of Abatement: 7:00	AM-3:30PM/	ai raici	iily Mo PM.	urs - D	escribe	City, State, Zip Co						
<u> </u>				^	INN	BRISTOL, PA						
cope of Work (Check all tha	it apply)											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		00	enova	lion		⊠ Glovahar	ainment with Neg losure Procedure Inpted (°) and Nor					
Location of			s Loca Norm						_		Constant	
Asbestos-Containing Mate	rial (ACM)	Us	ed So	lely by	Ash	Description of				batem	ent T	У
TO BE ABATED		M	ninten	ance/ Staff?	/SD	estos Containing Mat e., thermal systems in	erial (ACM)	Amount	Remova	20	m	1
IN Facility (13)		Cus	(12	Swii?		surfacing, VAT.	or I	(Specify	100	Repair	Encapsulate	-
()		Yes	TNo	-	┥	other miscellaneo	us)	SF or LF)	0	1	Sul.	
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FI. AC equipment room	n	×			Valve in	nsulation		2 LF	-	屵		L
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e of Registered Waste Hau	ler			JDEP	Wasta	Cubia						r
RVICE TRANSPORT	ROUP, INC	_	H	auler II	D No.	Cubic Yards of Waste	Name of Registe				=1	_
	, 1140			20990		- 100fG	MINERVA L				.	
State W CASTLE DE 19720						Disposal Date	City, State					

Date of Notification (1)	6 /	49		IN	lame of Bui	Iding Owner/Operator	(2)		20	3	_	
Agencies Notified T	rpe Notificat				Verizon treet Addre			500	\$ C C C	ठे	•	* 7
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☑ DHSS 6 9 8 9	Amended Amendmen			C	ity, State, Z	lontgomery Place	, Lower Level		100	Ò.	-	7
	Emergency	M#	-11			h, PA 15212			1	1		(0)
(NJAC 5:23-8)	justification	r (Inclui 1)	uing	N	ame of Con	III, PA 15212			G			\$
	Cancellatio	n			Anthony			Telephone N	lumber			
						<u> </u>				2		
Name of Facility Where Abat	ement is Tal	king Pl	ene /3		PACILITY	INFORMATION						
Verizon Market CO		g	uoc (3	'			Type of Facility				_	_
Street Address							School (K-12	2)				
95 William St						-	Subchapter & Other (i.e., pr	(Other than K	-12)			
City (5)							homes, etc.)	ante mile COLU	mercial	Duildi	ngs,	
Newark						15	Square Feet	# of Floors	1	Bldg.	Age	_
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Name of Monitoring Firm Hire	d by Dullat	_				.*	Office	•		,		
USA Environmental Ma			er (8)	ASC	CM No.	Name of Abatem	ent Contractor (9)					_
	nagement	:					VIRONMENTAL	INC.				
Street Address						Street Address		,				_
8436 Enterprise Ave		4 T-000 TO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1123 BEAVE	RSTREET					
City, State, Zip Code						City, State, Zip Co						
Philadelphia, PA 19153						BRISTOL, PA						
Project Manager for Monitoring	Firm		Te	lephor	ne No.	Telephone No.	. 10001	Total Section				
Mark Jenkins				215-3	65-5810	215-788-6040		License No.				
Start Date (10)	Sche	eduled			Date (11)	Name of OSHA M		00509				
1 / 2 / 14					14							
Occupancy Status During Abat							/IRONMENTAL	, INC.				
Facility Closed/Vacated Dur				arnani		Street Address					_	_
Abatement Performed Outsi	de of Norma	al Facil	ity Ho	ire - D	accriba	1123 BEAVER						
Time of Abatement: 7:00AN	A-3:30PM/_		PM	A	VI	City, State, Zip Co				_	_	_
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cope of Mork (Clieck all that a	ppiy)											_
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			S Loca Norma				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
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TO BE ABATED	(110101)	Ma	inten	ince/	Asbe	stos Containing Mate ., thermal systems in	orial (ACM)	Amount	Removal	Repair	W	
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FI. AC equipment room		×			Floor til	e and mastic		45 SF	X	-		Ē
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ne of Registered Waste Haule			N	JDEP I	Waste	Cubic Yards of	Name of Register					
ERVICE TRANSPORT GR	OUP, INC) .		auler (C 20990		Waste	MINERVA LA					
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W CASTLE, DE 19720				10	Disposal Date	City, State					
ERVICE TRANSPORT GROUP, INC). 	H	ouler IC 20990	No.	Cubic Yards of Waste	Name of Register MINERVA LA		1	=1	-1	_
e of Registered Waste Hauler			JDEP V	Naste T.	Cubic Voca						F
				 							
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cope of Work (Check all that apply)					BRISTOL, P	A 19007					
Abatement Performed Outside of Norm Time of Abatement: 7:00AM-3:30PM	nal Fac	ility Ho	urs - D	Describe M	City, State, Zip (
Facility Closed/Vacated During Entire	Period	of Aba	tement	t	1123 BEAV	R STDEET					_
Occupancy Status During Abatement (Ch	eck on	ly one			Street Address	TO INCIMIENTAL	L, INC.				
	1	1	17	/ 14		Monitor NVIRONMENTAL				_	_
Start Date (10)	hedule	d Com	pletion	Date (11)	Name of OSHA		00509				
Mark Jenkins			215-3	365-5810	215-788-60	40	License No.			-	-
Project Manager for Monitoring Firm		Ti	elepho	one No.	BRISTOL,	PA 19007					
Philadelphia, PA 19153		-			City, State, Zip				-	_	_
City, State, Zip Code		-				ER STREET					
8436 Enterprise Ave					Street Address			-			_
Street Address					BRISTOL	ENVIRONMENTA	L, INC.				
USA Environmental Manageme	nt	ile! (8)	AS	SCM No.	Name of Abate	ement Contractor (9)				_
Name of Monitoring Firm Hired by Build	inc O	mer /81			Marie Services	Office		HOUSING	M)		
Essex				County Cod	le (7)(STATE USE ON	Y) Current Use (F	rior if being do-	moliet	_		_
County (6)										, Ag	e
Newark						Square Feet	# of Floors				
City (5)						Other (i.e., homes, etc	Drivate and con	nmerci	al bui	dings	S,
95 William St						School (K-	PR (Other th-	K.42			
Verizon Market CO Street Address			2000037			Type of Facilit		- 7	-	-	_
Name of Facility Where Abatement is	Taking	Place	(3)	PACILII	Y INFORMATIO			6	.		_
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☐ Cancella	tion			Anthony			Telephone	Numb	er :	_;	57
(to to 5.25-5) Justincal	ion)	duding	-	Name of Co	gh, PA 15212		,	40 0)	1	
D DCA	rent#_		- 1	ONT, SURE,	ZIP Code		- 6	300		2	_
L Amende			ŀ	15 East	Montgomery Pl	ace, Lower Leve		6	6	Ġ.	
☑ EPA ☑ Initial				Street Add	000001011-		- Co /	``	3	_	3
Agencies Notified Type Notifi				130	ā		U.	- 7	3	,	
	13			Name of B Verizon	uilding Owner/Oper	ator (2)	700	S TAR CC		~	+
Date of Notification (1)					THORE 6:60 and		Ch# 2	5	7	-5°	

40 Mack

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

Suncot Partners Marketing & Terminals, L.P Eagle-Foint Facility	Date of Notification (1)				Nam	ne of Buildir	ng Owner/Operator	(2)			7	-	7
Spring Type Notification Street Address Street Ad	02 /03	_ / _	14		Si	unoco Pa	rtners Marketing	& Terminals,	L.P Eagle	Point F	aony	y 🖔	
SOLWD	- /r	e Notification	on		Stre	et Address					.0	~	
SOLWD		nitial								\$	<i>^</i>	0	٥.
Mestville, NJ 08993 Name of Contact Telephone Number Name of Contact Name of										1	0	-7	4
Name of Contact Telephone Number Telephone Nu				_	100					<	20	2	بن
Cancellation Ron Rosendorn FACILITY INFORMATION				ng							50%	1/2×	
Sunco Partners Marketing & Terminals, L.P Eagle Point Facility School (K-12) School (0.00		1000000		20-		Telephone	Number	1	27	2
Name of Facility Where Abatement is Taking Place (3) Sunoco Partners Marketing & Terminais, L.P Eagle Point Facility Street Address Subchapter 8 (Other than K-12) Subchapter 8 (Other th		ancellation	n		1				1	•	_		1
School (K-12) School (K-12) School (K-12) Street Address Street	lome of Facility M/h Al. 1				F/	ACILITY II	NFORMATION					6	
Street Address 1240 Crown Point Road								\$40 S\$1					
1240 Crown Point Road Signature Sig		ting & Te	rminal	s, L.P	Eag	gle Point I	Facility	School (K-1:	2)				
County (6) County (7) (8) Square Feet # of Floors N/A						50.11=41160\$\$\$\$		☐ Subchapter	8 (Other than	i K-12) mmercial	huildir	nae	
County (e)								homes, etc.)	ATTITICIO CIGI	Daliali	iys,	
Westville, N.J 08093								Square Feet	# of Floor	s	Bldg.	Age	
County (6) Gloucester Name of Monitoring Firm Hired by Building Owner (8) Kenny Atlantic Industrial Services, LLC Street Address 800 Billingsport Road City, State, Zip Code Paulsboro, NJ 08086 Project Manager for Monitoring Firm Tom Kennedy Start Date (10) 02 / 18 / 14 Cocupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement with Negative Pressure Manager for Work (Check all that apply) Sophistics of 2260 if State	Westville, NJ 08093							N/A	N/A			5-33	
Name of Monitoring Firm Hired by Building Owner (8) Kenny Atlantic Industrial Services, LLC Street Address 800 Billingsport Road City, State, Zip Code Paulsboro, NJ 08086 Project Manager for Monitoring Firm Tom Kennedy Start Date (10) Q2 / 18 / 14 Start Date (10) Q2 / 18 / 14 Start Date (10) PM- PM- AM Street Address 800 Billingsport Road City, State, Zip Code Paulsboro, NJ 08086 Project Manager for Monitoring Firm Tom Kennedy Start Date (10) Q2 / 18 / 14 Scheduled Completion Date (11) Abatement Performed Outside of Normal Facility Hours. Describe Time of Abatement:AMPMPMAM Street Address 800 Billingsport Road City, State, Zip Code Paulsboro, NJ 08086 Telephone No. 856-491-5934 S45-491-5934 S56-491-5934 S66-491-5934	ounty (6)				Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being de	emolisher		<u> </u>	_
Name of Monitoring Firm Hired by Building Owner (8)	Gloucester											س ا	
Street Address Str	ame of Monitoring Firm Hired	by Buildin	g Owne	r (8)	ASCN	/ No.	Name of Abatem			-90 (1 dl l	n i all	•••	
Street Address 800 Billingsport Road City, State, Zip Code Paulsboro, NJ 08086 Project Manager for Monitoring Firm Tom Kennedy Scheduled Completion Date (11) 02 / 18 / 14					0205350500	ose (1575):	43						
300 Billingsport Road City, State, Zip Code Paulsboro, NJ 08086 Project Manager for Monitoring Firm Tom Kennedy Start Date (10) 02 / 18 / 14 12 / 31 / 14 Coccupancy Status During Abatement (Check only one) Time of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement AM-PM-AM PM-AM Renovation Store of Work (Check all that apply) Saf or ≥3 if ≥160 sf or ≥260 if Location of Asbestos-Containing Material (ACM) IN Facility (13) Various Outdoor Areas Safe 491-5934 Safe-491-5934 Safe-491-						3		o industrial 5	CI AICG2				
City, State, Zip Code Paulsboro, NJ 08086 Project Manager for Monitoring Firm Tom Kennedy Start Date (10)									6))				
Paulsboro, NJ 08086 Project Manager for Monitoring Firm Tom Kennedy Start Date (10) 02 / 18 / 14 12 / 31 / 14 Coccupancy Status During Abatement (Check only one) □ Facility Closed/Vacated During Entire Period of Abatement □ Abatement Performed Outside of Normal Facility Hours - Describe □ Time of Abatement: □ AM-□ PM-□ AM □ PM-□ AM □ Stendation □ Demolition □ Street Address 800 Billingsport Road □ City, State, Zip Code Paulsboro, NJ 08086 City, State, Zip Code Paulsboro, NJ 08086 Stene Address 800 Billingsport Road □ City, State, Zip Code Paulsboro, NJ 08086 City, State, Zip Code Paulsboro, NJ 08086 Abatement Performed Outside of Normal Facility Hours - Describe □ Full Containment with Negative Pressure □ Mini-Enclosure □ Non-Exempted (*) and Non-Friable Procedure													
Project Manager for Monitoring Firm Tom Kennedy Telephone No. 856-491-5934 Section No. 856-491-5934 Section No. 856-491-5934 Name of OSHA Monitor		10											
Start Date (10)	100000000000000000000000000000000000000							J 08086					
Start Date (10) O2		Firm		1			Telephone No.		License N	10.			
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Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/PMAM	Facility Closed/Vacated Dur	ing Entire F	Period o	f Abate	ement	4.5	800 Billingsp	ort Road					
Paulsboro, NJ 08086 Scope of Work (Check all that apply) Scope of Work (Check all that ap	Abatement Performed Outs	de of Norm	nal Facili	ty Hou	ırs - De	scribe							
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Secondation Mini-Enclosure Glovebag Procedure		11.27	www.come				☐ Full Cont	ainment with Nec	ative Pressu	re			
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Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Various Outdoor Areas Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Thermal System Insulation Thermal System Insulation Thermal System Insulation Custodial Staff? (12) Yes No N/A Various Outdoor Areas Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Custodial Staff? Surfacing, VAT, or other miscellaneous Thermal System Insulation Surfacing, VAT, or other miscellaneous Thermal System Insulation Surfacing, VAT, or other miscellaneous Surfacing, VAT, or other miscellaneous Thermal System Insulation Surfacing, VAT, or other miscellaneous Surfacing, VA				e Loca	tion	1	☐ Non-Exer	ripted (*) and No	n-Friable Pro				
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Various Outdoor Areas SF or LF		al (ACM)	Us	ed Sol	ely by	Asbe			Amount	. 2	7 R	g	m
Various Outdoor Areas Comparison Compar	TO BE ABATED						., thermal systems in	nsulation,		, =	pai	cap	CO
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Name of Registered Waste Hauler Waste Management of NJ City, State Camden, NJ NJDEP Waste Hauler ID No. 17323 Name of Registered Landfill Waste Gloucester County Solid Waste Corruptive City, State Various City, State Various Swedesboro, NJ					-						1	1	늗
Name of Registered Waste Hauler Waste Management of NJ City, State Camden, NJ NJDEP Waste Hauler ID No. 17323 NJDEP Waste Hauler ID No. 17323 Disposal Date Various City, State Various Name of Registered Landfill Gloucester County Solid Waste Cor City, State Swedesboro, NJ			+=										
Waste Management of NJ Hauler ID No. 17323 Waste 400 City, State Camden, NJ Waste 400 City, State Various Waste City, State Swedesboro, NJ				1.501700									
Waste Management of NJ Hauler ID No. 17323 Waste 400 Gloucester County Solid Waste Cor Disposal Date Various Camden, NJ Waste 400 City, State Various Swedesboro, NJ	me of Registered Waste Hau	er						Name of Regist	ered Landfill				
City, State Camden, NJ Disposal Date Various City, State Swedesboro, NJ	Vaste Management of N.	I		H				N. C.		lid Was	te Cor	nnle	M
Camden, NJ Various Swedesboro, NJ	/, State				1/323	-						pid	
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Completed By (Brist or Time)		1				60	//78-5884-58-787-58-78	owedesbor	o, NJ				
Completed By (Print or Type) Title Signature Date		1					Signature	_					
Ron Rosendorn Environmental Specialist Rom Rosendorn 02-03	on Kosendorn	F	Enviror	nmen	tal Spe	ecialist	Q_{-}	Rosinal	() 0	02.	-03	-14	4
SB-41 * Do not use this form for asbestos licensure exempted activities		1	* D-				- 4 Jar 11	10	U- U				

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

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

									The same	<u> </u>			
Date of Notification (1) January 31, 20	14			Name of Bu	uilding C	Owner/Oper Semin	ator (2) ole Con	struction	(A) (E)	30	CH		
	ial Notifi	cation otification		Street Addr		128 Ba	artlett A	venue	San Charles	PAIO	<)	
[x] DOL Ar	endment ergency (# including		City, State,	Zip Cod	West (Creek, 1	NJ 08092	No Chi	Wife.	E		
I A DOII	ification)			Name of Co	ontact Joyce			Г	elephone Numb	or /	_#		
			FAC	CILITY IN	FORM	ATION							
Name of Facility Where Abatement is Taki Residence	ng Place (3)					Туре о	f Facility (4)	School (k-12)				
Street Address 99 Morton Drive	:							[x]	Subchapter 8 Other (i.e., pr homes, etc.)	A contract of the contract			dings,
City	Cour	nty (6)		County Code (STATE US)		7)	Square 1	feet 000 sf	# of Floors	Bld	g. Age	50	
Manahawkin	Oce							Resider		ed)			
Name of Monitoring Firm Hired by Buildir N/A	g Owner	(8)		ASCM No.				nt Contractor Guardia	(9) an Contractir	ıg, Inc.			
Street Address						Street Ad			oute 9, Unit	61			
City, State, Zip Code						City, Stat		Toms F	River, New Je	ersey 08	755-1	271	
Project Manager for Monitoring Firm		Telephone 1	Number			Telephon 732-34		r	Licens 0062	e Number 4			
Scheduled Start Date (10) 2/3/14		Scheduled 0 2/5/14		on Date (11)		Name of	OSHA M		L. Analytical				
Occupancy Status During Abatement (Chec		AND	d of Aba	tement		Street Ad	ldress	1056 S	telton Road				
Abatement Performe						City, Stat	te, Zip Co	ode	-				
						r 1			way, New Je		354		
Scope of Work (Check all that apply)						[]		i-Enclosure	with Negative P	ressure			
[X] >3 sf or ≥3 lf [X] ≥160 sf or ≥260 lf		[] [x]	Renova Demoli			[] [x]		vebag Procedi -Exempted (*	ire and Non-Friab	le Proced	ure		
7-210									7	Τ.,			
8		Is Location				Descriptio				R	R	E	Е
Location of Asbestos-Containing Material (ACM		Normally us Solely by				estos-Con laterial (A			Amount (Specify S	EE	E	N	N
TO BE ABATED		ntenance/Cu				, thermal			or LF)	M	P A	CA	C
in facility		Staff				lation, su	rfacing,			0	I	P	0
(13)		(12)			- 41	VAT, o				V	R	S	S
	YE	S NO	N/A		otne	er miscella	ineous)			A L		LE	R E
Exterior	1	X		Asbesto	s skirt				1100 sf	X			
	+								1	_	\vdash	1	
	-								-			_	
	+		<u> </u>	1				515				1	
Name of Registered Waste Hauler		NJDEP Waste	e Hauler	ID No. C	Cubic Ya	rds of Wast	e Na	me of Registe	red Landfill			1	
Guardian Contracting, Inc		20	0223		3			Γ.R.R.F.					
City, State Toms River, New Jersey			Dispo: 2/6/1	sal Date		City, Sta		nnsylvania					
Completed by (Print or Type) Nicholas Fernicola	Title Proj	ect Manage		Signature	1:0	Lef.	1	/	1	1/3	1/201	4	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

			,,		0.000			3	1	4	
Date of Notification (1) 1/31/2014			Name of	Building O		ator (2) Site Contractors	, Inc.	3/2	3	100	
L. 3	ion Notification ded Notifica		Street Ad			rk Avenue	6°C	3	8		1
[x] DOL Amen	dment # gency (includ	ling	City, Stat	te, Zip Cod		ood, New Jersey	08701	(A)	O.	(5)	: \
IX I DON	cation) llation		Name of		Perlstein		Telephone Number		7.7	?	
L.		FAC	CILITY I	NFORM	ATION						
Name of Facility Where Abatement is Taking Residence Street Address	Place (3)					Type of Facility (4)	School (k-12) Subchapter 8 (oth				
756 Coral Avenue						[x]	Other (i.e., private homes, etc.)			al build	ings,
City	County (6))	County Co	ode (7) USE ONLY	n	Square feet 1000 sf	# of Floors		. Age	0	
Lakewood	Ocean					Current Use (Prior Resid	if being demolished) ence				
Name of Monitoring Firm Hired by Building O N/A	Owner (8)		ASCM N	0.	Name of	Abatement Contracto Guard	or (9) lian Contracting,	Inc.			
Street Address					Street Ad		Route 9, Unit 61	life-2			
City, State, Zip Code					City, Stat	e, Zip Code Toms	River, New Jerse	ey 087	55-12	271	
Project Manager for Monitoring Firm	Tel	lephone Number	г		Telephon 732-34	e Number 9-9932	License N 00624	umber			
Scheduled Start Date (10) 2/3/14	Scl	heduled Comple 2/5/14	tion Date (1	1)	Name of	OSHA Monitor E.M.S	S.L. Analytical				
Occupancy Status During Abatement (Check					Street Ac	ldress	Stelton Road				
[X] Facility Closed/Vacated					City Sta	te, Zip Code	Stellon Road				_
Other – Describe					City, Sta		taway, New Jerse	y 088	54		
Scope of Work (Check all that apply)					[]	Full Containme Mini-Enclosure	nt with Negative Pres	sure			
[] >3 sf or ≥3 lf	[] Renov			֓֞֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	Glovebag Proce	edure	_			
[X] ≥160 sf or ≥260 lf	[x] Demo	olition		[x]	Non-Exempted	(*) and Non-Friable l				
						_		Abat	ement	Гуре	
I andian of	2000000	Location mally used			Description of the Description o		Amount	R	R	E	E N
Location of Asbestos-Containing Material (ACM)		olely by			Material (A		(Specify SF	E M	E P	N C	C
TO BE ABATED		ance/Custodia	al		., thermal		or LF)	0	A	A	L
in facility		Staff		ins	ulation, su VAT, o			v	I R	P	O S
- (13)		(12)		oth	er miscell			A		U	U
H 32	YES	NO N/A						L		L E	R E
Exterior		Х	Asbe	stos sidir	ng		800 sf	X			
									-		-
			_				_	-	\vdash	\vdash	\vdash
News of Decision of Wests Wests	NITT	DEP Waste Haul	er ID No	Cubic V	ards of Was	te Name of Regi	stered Landfill		<u></u>		
Name of Registered Waste Hauler Guardian Contracting, Inc.	INJL	20223	Market Control	3		T.R.R.F.					
City, State Toms River, New Jersey		Disp 2/6	posal Date /14		City, S	_{tate} town, P eri nsylvar	nia /	V-0-2-			
Completed by (Print or Type) Nicholas Fernicola	Title Project	Manager	Signat	ture	che	14.	1	Date 1/3	: 1/201	4	

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

	NOTI	FICATI (Pur	ON O	F ASBEST NJAC 8:60 at	OS AB	ATF 0)	EMENT		\$ 50°	ANIN KE	7	OFCE WA	
Date of Notification (1) January 31, 2014			Na	ame of Building O	wner/Opera Miller				u	63	190	12	
DEP [] Amend	Notification ed Notification			reet Address	e	-	town Lane		7	100		(5: 1. 60	0
I X I DOL			N	ame of Contact Jim M	Tucker	rton, 1	NJ 08087	Telephor	ne Number	-	0		
Name of Facility Where Abatement is Taking P Residence	Place (3)		FACIL	ITY INFORM	ATION	Туре	e of Facility (School	ol (k-12)				
Street Address 12 West Schuykill	Road			ě			[] [x]	Other	hapter 8 (other (i.e., private es, etc.)	& com	mercia	l buildir	ıgs,
City Little Egg Harbor	County	72370		ounty Code (7) TATE USE ONL		Сип		or if being dence	f Floors 1 demolished)	Bldg.	Age 60)	
Name of Monitoring Firm Hired by Building C N/A Street Address	Owner (8)		A	SCM No.	Name of Street A			rdian Co	ntracting, I	nc.			
City, State, Zip Code					City, Sta	88 833	Code Tom		New Jerse		55-12	71	
Project Manager for Monitoring Firm Scheduled Start Date (10)		Telephone N		Date (11)	Telepho 732-34 Name o	49-99	32 A Monitor		License Nu 00624	imber			
2/3/14 Occupancy Status During Abatement (Check of [x]] Facility Closed/Vacated [] Abatement Performed of [] Other – Describe	During I	2/5/14 Entire Period f Normal Fac	of Abater	nent s	Street A	ate, Zip	105cp Code Pisc	nent with 1			54		
[] >3 sf or ≥3 lf [x] ≥160 sf or ≥260 lf		LJ	Renovation Demolition		[x	j	Glovebag Pro	ocedure	Non-Friable I		100		
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)		Is Location formally us Solely by tenance/Cu Staff (12)	ed	(i.	Descript sbestos-C Material e., therma sulation, VAT ther misce	ontain (ACM al syste surfaci , or	ing () ems ing,	(5	Amount Specify SF or LF)	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		Asbestos sid	ing			9	00 sf	X			
N. CD. Stand Wests Houles		NJDEP Wast	e Hauler	ID No. Cubic	Yards of W	aste	Name of R	egistered I	andfill				
Name of Registered Waste Hauler Guardian Contracting, Inc. City, State			0223 Dispos	al Date	City,	State	T.R.R.	F.					
Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola		ect Manag		Signature	cho	Ψ-	Ter	1		Dat 1/3	e 1/14		
	*	Do not use	this forn	for asbestos li	censure ex	empte	ed activities.						

40 crock

Completed By (Prin	it or Type) Tit	ile Estima	ator				in Scofere	/ pe)/3	/		_
City, State NEW CASTLE						Signature	MORRIS	SVILLE, PA 1906		/	1,4	/
	NSPORT GROUP IN	С		Hauler I	D No.	Waste Disposal Date	G.R.O.W	V.S. NORTH LAN				-
Throughout Lev				NJDEP		Cubic Yards o	f Name of Re	egistered Landfill		1	-	_
Throughout Leve	els B and A		10	12		Compound		20 LF				
Throughout Leve	els C, B and A					nsulation		24,690 SF				1
Throughout Leve				12				4,660 SF				
		Yes	No	N/A	Floorti	ile and mastic		71,198 SF				1
Asbestos-Contai TO BE IN	ation of ning Material (ACM) ABATED Facility (13)	Use Ma	Locati Normal d Sole intena todial ((12)	lly ely by nce/	Asbe (i.	Description estos Containing l e., thermal system surfacing, V other miscella	Material (ACM) ns insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
Scope of Work (Chec ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		⊠ Rer	novatio molitio	on on		⊠ Mini-E	an Procedure	egative Pressure	re Aba	ateme	ent T	yp
☐ Facility Closed/Va	cated During Entire Per med Outside of Normal nt: 7:00AM-3:30PM/	iod of A Facility	batem Hours	- Desc	cribe	City, State, Zip BRISTOL, F	Code				_	_
OFF SITE UN	iring Abatement (Check	only or	ne)		14	Street Address			(39)			
Michael Keehn	Schedu		mpleti		(11)	Name of OSHA	the state of the s					
Burlington, NJ 0 Project Manager for N				hone N		Telephone No.	0	License No. 00509				
City, State, Zip Code	2016					BRISTOL, P.						_
Three Terri Cent	er					1123 BEAVE City, State, Zip C						_
Street Address						Street Address	D STREET					
Name of Monitoring Fi	rm Hired by Building Ow Inc.	/ner (8)		O0098		BRISTOL EN	VIRONMENTA	L, INC.				
County (6) MERCER							Library ent Contractor (9)				to	
City (5) Princeton		1			O-d- (7)	STATE USE ONLY)	Current Use (Pri	ior if being demolishe	ed)	_		_
Street Address Washington Rd			_				Other (i.e., pr homes, etc.) Square Feet	# of Floors	Bldg.			_
lame of Facility Where Princeton University	Abatement is Taking P	lace (3) y)				School (K-12)	(Other than K-12)	. 1 1 1 1 1 1 1 1 1 1			
				FACIL	ITY INF	ORMATION	Type of Facility (4)	<u> </u>			
DCA (NJAC 5:23-8)	justification) Cancellation	11	1	Rober	Contact t Ortega				•			
DHSS	Amendment #1-1		1 .		ton, NJ	08544	- "G"	Telephone Number		31023	-	_
] EPA] DOLWD	⊠ Amended	104144			e, Zip Coo		18/1/27	ر. کات				
gencies Notified	Type Notification Initial			eet Add		Q	1/08 CA	78.62				
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						a	1000			Construction Construction				-
121		N	OTI		TIOI	State of Ne N OF ASE nt to NJA	BESTO	SABAT	EMENT	Ck# 2	54	13	P	<u>(,)</u>
Date of Notification (1)					Nam	e of Building	g Owner/0	Operator (2	2)	· ·	<u> </u>	1		Ta.
	15 /	14	_		Pr	inceton U	niversit	y-Office o	of Design and	Construction	O'A	١٥	, ,	1
Agencies Notified	Type Notificat	tion		-	Stree	t Address					2	4,	0.	0
X EPA 1432	Initial				20	0 Elm Dr.					10	(J)		14/2
DOLWD 7562	☐ Amended				City.	State, Zip C	Code				-<!--</del-->	B . (0	~
☑ DHSS 1519	Amendme		-			inceton, N		4				0/2	10	. 7
☑ DCA '74'4'9 (NJAC 5:23-8)	☐ Emergenc justificatio		uding			e of Contac				Telephone Numb	рег	~	57	27
(NJAC 3.23-0)	☐ Cancellation				0.000	bert Orte					-		J07	·
-			_			CILITY IN		TION			2		A.	7
Name of Facility Where	Abatement is Ta	aking F	Place	(3)		CILITI	TOKINA	TION	Type of Facility	(4)		-		
Princeton Univers				(0)					School (K-12					
Street Address		LIDIG	y						Subchapter ■	8 (Other than K-12)				
Washington Rd									Other (i.e., p	rivate and commer	cial bu	ılding	s,	
City (5)			-						Square Feet	# of Floors	Blo	ig. Ag	ge	
Princeton									_ 4			9.1		
County (6)		-			Cor	unty Code (7	7)(STATE I	JSE ONLY)	Current Use (Pr	ior if being demolis	hed)			
MERCER					55,	, 0000 (/	,,_,,,_	2= 21.21)	Library					
Name of Monitoring Firm	m Hired by Ruild	ling Ov	vner (8) [ASC	/ No.	Name	of Abateme	ent Contractor (9))				
ATC Associates Ir		mig O	, , , , , , , , , , , , , , , , , , ,	,		98	The second		VIRONMENTA					
Street Address			-					Address		,				-
Three Terri Center							1		R STREET					
City, State, Zip Code								tate, Zip Co				-		
Burlington, NJ 080	016							STOL, PA						
Project Manager for Mo				Tele	phon	e No		one No.		License No.	-		211-24	-
Michael Keehn	miloting Film			1		6-8800		788-6040	Œ	00509				
	10	'ohodu	lod C			ate (11)		of OSHA M		30000			-	-
Start Date (10) 1 / 30	/ 14	4				14			VIRONMENTA	LINC				
									VIII CIAMEIA I	,			- 17	
Occupancy Status Durin								Address	R STREET					
☐ Facility Closed/Vaca ☐ Abatement Performs						escribe								
Time of Abatement:								tate, Zip Co						
							BRIS	STOL, PA	19007					
Scope of Work (Check a	all that apply)		⊠ Re □ De	novat moliti				☑ Mini-Enc ☑ Gloveba	losure g Procedure	gative Pressure	re			
			. Is	Loca	tion	T			F (/ (/			atem	ent T	ype
Locatio	n of			lorma	ally			escription o				1	1	
Asbestos-Containing	g Material (ACM)			ely by ance/	7,500			iterial (ACM)	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
TO BE AB IN Fac	SATED Sility		13001250	odial	Staff?	(1.6		al systems acing, VAT		SF or LF)	oval	17	nsd	Sur
(13)		1		(12)		_		miscellane		***************************************			ate	0
Aug. 17 (17) (17)			Yes	No	N//	Α					-	-	_	
Throughout Levels	C, B and A		\boxtimes			Floorti	le and n	nastic		71,198 SF	Ø			
Throughout Levels	C, B and A		\boxtimes			Pipe In	sulation	n		4,660 SF	×			
Throughout Levels		-	\boxtimes			Joint C	Compou	ınd		24,690 SF				
					믐	Pipe Fi				20 LF				
Throughout Level B						Pipe Fi		Yards of	Name of Dec	stered Landfill		1_	1	
Name of Registered Wa SERVICE TRANSF		INC				ID No.	Waste	13440306451453445345	G.R.O.W.	S. NORTH LAND	FILL			
City, State		- (= 1,10		Dispos	al Date	City, State					
NEW CASTLE, DE									MORRISV	ILLE, PA 19067				
Completed By (Print or	Type)	Title						ignature	1	1-0 Da	ate	1	1.	/
Brian Scafiro		Es	tima	tor			12	Buss	Safiro /	1	1/	15/	14	
					-				/	1		,		

ASB-41 **MAY 11**

\$ 5 140 13 - 4 * Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)				-	Name	of Building	g Owner	Operator ((2)		The same of the sa		()	
01 /	15 /	14	_		75.3		San Contraction of the		of Design and	Constructien	MEED	5	1.00	>
Agencies Notified EPA	Type Notifica ☑ Initial	ation			200000000	Address Elm Dr.				16	200	6	,	5
☑ DOLWD						State, Zip C					, U		-	_ (
☑ DHSS	Amendme	Control of the Contro			100	nceton, N		4		-	110		4	5
☐ DCA	☐ Emergen		uding					4			1			0
(NJAC 5:23-8)	justification					of Contac	55.0			Telephone Num	ber	0		
	Cancellat	ПОП	-		KOI	pert Orte	ga			1		,		
					FA	CILITY IN	NFORM.	ATION			ē	7		
Name of Facility Where				(3)					Type of Facility (poeto.				
Princeton Universi	ty-Firestone	Libra	ry						School (K-12)	Other than K-12)\			
Street Address										ivate and comme		uilding	js,	
Washington Rd									homes, etc.)					
City (5)									Square Feet	# of Floors	BI	dg. A	ge	
Princeton														
County (6)					Cour	nty Code (7	7)(STATE	USE ONLY)	100 AT 10 TO 10 AT	or if being demoli	shed)			
MERCER									Library					
Name of Monitoring Firm	- 75	ding Ov	vner ((8)	ASÇM	No.			ent Contractor (9)					*********
ATC Associates In	С.								IVIRONMENTAL	., INC.				
Street Address							0.0000000	Address						200
Three Terri Center									R STREET					
City, State, Zip Code								tate, Zip C						100
Burlington, NJ 080							BRI	STOL, PA	A 19007					
Project Manager for Mon	itoring Firm			A STATE OF	phone			one No.		License No.				
Michael Keehn					09-386			-788-6040		00509				
Start Date (10) OFF STIE UNTIL)	2/5/14	Schedu 4				te (11) 14		of OSHA N STOL EN	Monitor VIRONMENTAL	., INC.				
Occupancy Status During	g Abatement (0	Check of	only o	ne)			Street	Address					247.707	
☐ Facility Closed/Vacate	ed During Enti	re Perio	od of	Abate	ment		112	3 BEAVE	R STREET					
☐ Abatement Performed								tate, Zip C				-		
Time of Abatement: 7	7:00AM- <u>3:30</u> F	PM/	PI	W	AM			STOL, PA						
Scope of Work (Check al	Il that apply)											1	_	-
 ≥3 sf or ≥3 if ≥160 sf or ≥260 if 		-	= _	novati molitic				Mini-End Gloveba	tainment with Neg- closure g Procedure empted (*) and Nor		re			
				Locat							Ab	atem	ent T	ype
Location				lorma d Sole				escription o			R	Z	т	m
Asbestos-Containing TO BE ABA		1)		intena					aterial (ACM) insulation,	Amount	Remova	Repair	nca	ncic
IN Facili			Cust		Staff?	(1.6		acing, VAT		(Specify SF or LF)	ova	=	Encapsulate	Enclosure
(13)		10		(12)	1	-		miscellane					late	(O)
			Yes	No	N/A							_		_
Throughout Levels C	, B and A	_				Floor ti				1,465 SF	×			
Office A-7J			\boxtimes			Windov	w Caulk	S		96 LF				
Throughout Levels C	, B and A	_				Duct we	ork			1775 SF				
		1	\boxtimes											
Name of Registered Was SERVICE TRANSPO		INC		10000	JDEP V	O No.	Cubic ' Waste	Yards of	Name of Regist G.R.O.W.S.	ered Landfill NORTH LAND	FILL			
City, State					20990		Dispos	al Date	City, State				5	
NEW CASTLE, DE									. San amara a mara a	LE, PA 19067				
Completed By (Print or Ty	ype)	Title					Si	gnature	1 1	/ Da	ate /	1	, /	
Brian Scafiro		Est	timat	tor				Brisa	Scofin /	10	1/31	//	4	

ASB-41 MAY 11 B 5 14003 B

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

Ck# 2544

Date of Notification (1)					Nam	e of Buildin	g Owner/Operator (2)			100	_	
01/	15 /	14					Iniversity-Office	· ·	Construction	A CONTRACTOR OF THE PROPERTY O	7	CA	
Agencies Notified	Type Notifi	cation			Stree	t Address			U.		_	(}
☐ EPA					20	0 Elm Dr.			7	4 6	3	· K	0
☑ DOLWD 7562	☐ Amende	383 (1				State, Zip			- E.	()	6	. (0	1
☑ DHSS 1579	Amendr						NJ 08544		5	200	_	•	1
	☐ Emerge		cludin	g	-	e of Contac			1=1-1-1-1			5	`~
(NJAC 5:23-8)	justifica Cancelli				100000000000000000000000000000000000000		7.7		Telephone Nu	moer, ?		43	_
		ation		_		bert Orte	•				3	-8	n
Name of Facility Where At	natement is	Taking	Place	(3)	- FA	CILITY	NFORMATION	Type of English	(4)		0		
Princeton University			7	- (0)				Type of Facility School (K-12	75-1-76-1	6	2		
Street Address				-				☐ Subchapter	8 (Other than K-1	12)	7		
Washington Rd								Other (i.e., p homes, etc.)	rivate and comm	ercial bu	uilding	s,	
City (5)								Square Feet	# of Floors	TRI	dg. Ag	10	
Princeton											ug. / (,-	
County (6)					Cou	inty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	(ished)		_	-
MERCER						•	, , , , , , , , , , , , , , , , , , , ,	Library					
Name of Monitoring Firm H	lired by Bu	ilding C	Owner	(8)	ASCN	l No.	Name of Abateme	ent Contractor (9)				_	
ATC Associates Inc.								VIRONMENTA					
Street Address			-				Street Address					_	_
Three Terri Center							1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip Co	ode				-	
Burlington, NJ 08016	3						BRISTOL, PA						
Project Manager for Monito	oring Firm			Te	ephone	No.	Telephone No.		License No.				_
Michael Keehn				6	09-38	5-8800	215-788-6040	i	00509				
Start Date (10)	T	Sched	luled C	ompl	etion Da	ate (11)	Name of OSHA M	lonitor				-	
1 / 30 /	14		4/	<u> </u>	4/	14	BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During A	Abatement	(Check	only	one)			Street Address						
☐ Facility Closed/Vacated							1123 BEAVER	RSTREET					
Abatement Performed C							City, State, Zip Co	ode					
Time of Abatement: 7:0	10AM- <u>3.30</u>	PWI_		IVI	AIV		BRISTOL, PA	19007					
Scope of Work (Check all to	hat apply)						П Б.: II О	-i					
≥3 sf or ≥3 lf			⊠ Re	nova	tion		Mini-Encl	ainment with Neg losure	jative Pressure				
≥160 sf or ≥260 lf			De De	molit	ion		☐ Glovebag	Procedure					
			· ·				⊠ Non-Exer	mpted (*) and No	n-Friable Proced	ure			
Ili			100	Loca Norm						Ab	ateme	nt T	уре
Location of Asbestos-Containing Ma		VA)			lely by	Áshe	Description of stos Containing Mat		Amount	20	20	m	m l
TO BE ABATI		,	115577E		ance/		., thermal systems i		(Specify	Removal	Repair	cap	Clos
IN Facility			Cus	todiai 12)	Staff?		surfacing, VAT,		SF or LF)	<u> </u>		Encapsulate	Enclosure
(13)			Yes	No		1	other miscellaned	ous)				ate	
Throughout Levels C, i	B and A		⊠ ⊠			Floor ti	le and mastic		1,465 SF	- I			
Office A-7J	J dila A												님
			70.00	-			v Caulk		96 LF			ᆜ	띧
Throughout Levels C, I	B and A					Duct we	ork		1775 SF				
	,					<u> </u>							
Name of Registered Waste		n 1110		100	NJDEP I		Cubic Yards of Waste	Name of Regis					
SERVICE TRANSPOR	GROUI	PINC	1 6		2099			9 69-09-03/425-2-12/03/45/5/6/6	NORTH LAN	DFILL			
City, State							Disposal Date	City, State					
NEW CASTLE, DE								MORRISVI	LLE, PA 19067	7			
Completed By (Print or Type)	Title	-				Signature		/ - [ate /	,		
Brian Scafiro		Es	timat	tor			Ai	Scales.	1	1/18	5/1	4	
\SB-41		1				***	Journ	7	7	1	/ '	/	
MAY 11 DCILLAN.	3 -B	• [o not	use t	his form	for asbest	os licensure exempt	ted activities.					

MAY 11

State of New Jersey APPROVED : PAUL NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NIAC 8:50 and 5:40) (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)	- 44						er/Operator (2	2)	SESTOS & LICE	_	6	CL)	
1 / 30 /	14	_		Str	rancis Mo	eaica	ii Center	A	I.C.	6 p	٠.			
Agencies Notified Type Not	ication			Street	Address			0.0.00000	Telephone Nu	. /	15	: 4	,	
☐ EPA ☐ Initial					Hamilton				& 1/0°	Con	-		,	
☑ DOLWD ☐ Amen ☑ DHSS Amen	ment#		- [tate, Zip Co				CA	5/20	P	01		
□ DCA □ Emerg					nton NJ 0					1.16		-4		8
(NJAC 5:23-8) justific		,			of Contact				Telephone Nu	mber				
☐ Cance	llation			Chu	ck Laws	on			1			_		
				FAC	ILITY IN	FORI	MOITAN							
Name of Facility Where Abatement	s Taking	Place	(3)					Type of Facility ((4)			Attractor		
St Francis Medical Center								☐ School (K-12		40)				
Street Address								☐ Subchapter 8☑ Other (i.e., pr	ivate and comm	nercial	buil	dings	S,	
601 Hamilton Ave								homes, etc.)				J	**	
City (5)								Square Feet	# of Floors		Bld	g. Ag	е	
Trenton								70,000	3		6	0+		
County (6)				Coun	ty Code (7)	(STAT	E USE ONLY)	Current Use (Pri	or if being demo	olished)			
MERCER								Hospital						
Name of Monitoring Firm Hired by E	uilding C	Owner (8)	ASCM	No.	Nam	e of Abateme	ent Contractor (9)			X-2			
Environmental Connection						В	RISTOL EN	VIRONMENTA	L, INC.					
Street Address				911-1-1-1-1		Stre	et Address	3.000						
120 North Warren Street						11	23 BEAVE	R STREET						
City, State, Zip Code		3 5 M/A				City,	State, Zip Co	ode						
Trenton, NJ 08010						В	RISTOL, PA	19007						
Project Manager for Monitoring Firm			Tele	phone	No.	Tele	phone No.		License No.		č 100 l l l			
Brian Holbig			60	9-392	-4200	21	5-788-6040)	00509					
Start Date (10)	Sched	iuled C	omple	tion Da	te (11)	Nam	ne of OSHA N	Monitor						
2 / 3 / 14		2/	3	_ / _	14	В	RISTOL EN	VIRONMENTA	L, INC.					
Occupancy Status During Abateme	nt (Chec	k only o	one)			Stre	et Address							
☐ Facility Closed/Vacated During				ment		11	23 BEAVE	R STREET						
☐ Abatement Performed Outside of					cribe	City	State, Zip C	ode						
Time of Abatement: 8:00AM-8:	00PM/_	P	M	AM			RISTOL, PA							
Scope of Work (Check all that appl)													-
	•	EZ 5					☐ Full Con	tainment with Neg	gative Pressure					
≥3 sf or ≥3 lf		⊠ Re					⊠ Gloveba	a Procedure						
							☐ Non-Exe	empted (*) and No	n-Friable Proce	dure				
			Loca								Aba	_	ent T	
Location of	~		Norma	illy ely by		-4 (Description of	of aterial (ACM)	Amount		D D	Repair	En	Enclosure
Asbestos-Containing Material (A	CM)	Ma	intena	ince/			mal systems		(Specify		Removal	pair	caps	clos
IN Facility		Cus	todial (12)	Staff?		S	urfacing, VAT	, or	SF or LF)	!			Encapsulate	ure
(13)		Yes	No	N/A	1	oth	er miscellane	eous)					te	
		-	-	5151560	ļ		•		20 LF	-	3	П		
Interview Room					Pipe Ins	sulat	ion		20 LF	_		_	_	-
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			П											
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N			൰.	NJDEP	Macte	Cub	ic Yards of	Name of Regi	stered Landfill					
Name of Registered Waste Hauler	INC		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hauler I		Was			S. NORTH LAI	NDFIL	L			
BRISTOL ENVIRONMENTA	., 1140.			1870	6		Cu Yd							
City, State							oosal Date	City, State	ILLE, PA 1906	67				
BRISTOL, PA 19007						21	3/14	MORRISV	ILLE, FA 1300			- One		
Completed By (Print or Type)	Titl						Signature	0	1-1	Date	2 1	//	//	
Gino Pizzigoni	E	Estima	tor				Sino 1	ezzegorie	11	1/3	0	//	7	

Date of Notification (1)		1	Name of	Building C)wner/0	perator	(2)	Chec	M.	100	077	U. J	1	^
1/31/14		١ ١	Wells F	argo Ho	ome N	1ortgag	je		33	CO.	6	٠	- 3	_
Agencies Notified Type Notification X EPA X Initial		1 2	Street Ad 1 Hom	ddress e Campi	us			Chec	€,	100	C_{\wedge}	19/2	4 5	
DEP Amended Amendment				te, Zip Coo oines, IA		28				1	SING	RO	,	
Emergency justification)	(including	1 12		Contact	1 1000-0		1000			phone N		2000		
DCA Cancellation			Rob Ja	iguar								8 W	1	
Name of Facility Mileson Abotement in Takin	a Diago (2)		FACIL	LITY INFO	RMAT	ION	Type	of Facility (4	1				Þ	
Name of Facility Where Abatement is Takin Street Address 120 Greenwood Avenue	g Place (3,)						School (K-12 Subchapter of Other (i.e. prestc.)	2) 8 (Othe			lding	s, hon	nes,
City (5) East Orange							Name and Address of the Owner, when the Owner,	re Feet	# of 2	Floors		3ldg. 50	Age	
County (6) Essex				Code (7) USE ONLY)		Current Use (Prior if being demolished)								
Name of Monitoring Firm Hired by Building	Owner (8)							me of Abatement Contractor (9) 3S Environmental Services, LLC						
Street Address		Stree 4 E					ss Orive, PO	Box 4	83					
City, State, Zip Code					City, State, Zip Code Glenwood, NJ 07418									
Project Manager for Monitoring Firm		Telephor	ne No.	-0.0		none No 764-2			License 703	No.				
Start Date (10) 2/10/14	Schedule		pletion (Date (11)		Name	of OSH	HA Monitor						
Occupancy Status During Abatement (Che	ck Only On	ie)				Street	Addres	SS			- 2			-
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: vacant house	Period of A	Abatem	ent		_	City, S	State, Z	ip Code		-				
Scope of Work (Check All That Apply)				21115016										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		tenovat emoliti				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						ıre		
		Location										Aba	teme ype	nt
Location of		Normall d Solel		A - L		escription		(ACNA)	Α-	mount		Т	1	T
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intenar todial S (12) No	ice/		therma surfa	Itaining i I system acing, VA miscella	s insula T, or		(S	pecify or LF)	Removal	Repair	Encapsulate	Enclosure
3 floors of main house			x		ceil	ing pla	ster		100	00 SF	x			
3 floors of main flouse		×			all plas				00 SF	x				
Name of Registered Waste Hauler Freehold Cartage	JDEP W auler ID 5939		of Wa	Yards aste		Name of I		red Land	ifill					
City, State Freehold NJ	Disposal Date TBD				Date City, State Morrisville PA									
Completed by	Signature													
Completed by Andrew Scott Higgins Title President					1/31/14									

Notification of Asbestos Abatemonal Notification of Asbestos Abatemonal Pursuant to NJAC 8:60-7 and 12:120-7)	Check #6383
oursuant to NJAC 8.8047	- 12

		(Pursu	ant to NJA	ERGE	NCY***	· Charles Super	1 by heat	1)				1
	2013-198		-		2014	ÉTO -						
B & G proj. #:		of Building O	wner/Operat	or (2)	2014	FEB -6	PM 12					
- tion	(1) Name	of Bullaing	is									\
Date of Notification	1/11/1	orge Arsen			ر. به	ESTOS	CONT	ROL	-	-		
Date of Notification	Type Notification Street	et Address 80 Claremo	nt Road			Z Lille	HOTHG	<i>a</i> .		93.2 <u>000</u>		
Agencies Notified EPA	1 - 1 J		- 40					Telephone	Numbe			
☐ EPA	Initial City	, State, Zip Co Bernardsvill	le, NJ 079	24				/ Telephone				
	Amendment	3emardovii					7500000	1				
		me of Contact George Ar	senis									
DOH	☐ Cancellation	George	FACILITY	INFORM	IATION		TTVD	e of Facility	(4)	2)		
☐ DCA			FACILITY	1141 0.1.			1 100	الما عداد		// Whel ule	n K-12)	
	i ling pl	ace (3)				, j t 2					cial	
of facili	ty where abatement is taking pl		1				71	Bldg	S./Morrio	-,	Bldg. Age	
George A	rsenis						1 5	quare Feet	# of F	1		
George						- in (7)	- -	Current Use	Drior if	being dem	nolished)	
Street Addre	ont Ruge				County	Code (7) ise only)	15	Current Use	il I			-3
380 Clar	emont Road	ounty (6)			(State	120 01177		residentia	-			
City (5)	NI 07924 S	omerset			L_ITN	ame of Aba	atement Co	ontractor (9)				=-
				ASCM N	11	R& GR	estoration	i, Inc.			-	_
201	Monitoring Firm Hired by Bldg. C	Wile: (-)			<u></u>	Addre	255					
Name of the	N/A		-		11	105 Rye City, State,	Zin Code					-
Street Ad	dress	4,434				City, State,	n Park, N	J 07035	-	License N	umber	
						- Janhone	Mulliper			0378		
City, State	e, Zip Code		Phone Nur	nber		1	DA-DAUZ					
	Annitoring Firm		Phone			-	ACHA MO	nitor				
Project N	Manager for Monitoring Firm	Sched. Com	Notion Date	(11)		R&C	Restora	tion, Inc.				
	2 ato (10)	Sched. Con	pletio.			Street A	Ryerson F	Road				
Schedu	iled Start Date (10)	02/04/2	2014			105 I	ate, Zip Co	ide				*
02/	03/2014 lancy Status During Abatement	(Check only o	ine) f ahatement.									
Occup	ancy Status During Abatement Facility closed/vacated during of Abatement performed outside	ntire period of	ity hours-			Lin	coln Park	, NJ 07035		□ wra	p & cut	
	Abatement performed outside	3) Holling				11					sahad Drocedure	e
-	Describe.				1	T Full Cor	ntainment '	w/negative p		☐ Nor	n-friable process	ETE
	- Flatork (check all that app	y) Renovation				Mini-er	nclosure				e e	n n
Sco	Demolition		aco if					\	Amou	int cify SF or	m P	c c
L	>3 sf or >3 lf	>160 St Gr	normally use	d solely	nescriptio	on of asbes	tos-contair	ning	LF)	City -	v i	P
		hy mainter	normally use	IIC.	material ((ACM)		1				무무
	-bactos-community	staff(12)	No	NIA					70 lf			井片
	material to be abated in facility (13)	Yes	L	Y	pipe insula	ation						##
	and floor											111
ī	throughout 1st & 2nd floo								-			144
			-		1	ALC: NO.		Registered La	andfill	C	enter	
			-		Cubic Yards	of Waste	Name of F	Registered La wn Resource	ce & Re	covery C	,0	
		IN.	JDEP Hauler	ID#	Cubic 1		Toin Sta	ite				
	Registered Waste Hauler		9563	751.000	al Date		Tullyt	own, PA			Date 01/31/2014	
	B & G Restoration		1890 ST	02	0/04/2014 Signatu	re	(0.1.	a Luna			01/31/20	
	City, State Lincoln Park, NJ 07035				Signate		Goraun					
	a repleted by (Print of 1)) Title Secr	etary/Treas	urer								
	Gordana Luna											
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Notification of Aspessor and (Pursuant to NJAC 8:60-7 and (Pursuant to NJAC 8:60-7)	d 12:120-1) Check # Common Check # Ch
(Pursuant to NIAC 8:60-7 at EMERGENC)	
-243 198	APPROVED Sorvices
8 & G proj. #: Owner/Operator (2)	Wanget of Health & Selling and
I MADING	TOW (Signature)
The section (1)	
Date of Notification Street Address San Claremont Road 380 Claremont Road	101101
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Agendies Notified EPA Initial City, State, Zip Code City, State, NJ 07924	Teluphian
T DEP Ramardo	
of Contact	
	Good Riv (4)
DOH George Acculation George ACCULTY INFORMATION	ON Type of Facility (4) (K-12) School (K-12)
D DCA FACILITY	
Name of facility where abatement is taking place (3)	Blags Human
Name of facility where	The state of the s
George Arsenis	Laine demolished)
140000	County Code (7) Current Uso (Prior if being dismollational) Current Uso (Prior if being dismollational)
Street Address	1 macing inter
street Addiction Road 380 Claramont Road County (8)	Abatamant Contractor
	B&G Restoration, Inc.
City (5) Bernardsville, NJ 07924 Somerset ASCM No.	B& G KESTATORS
Hired by Bidg, Owner (-)	Street Address 105 Ryerson Road To Code
Name of Monitoring Plant Hired by Blog, Owner (8)	City, State, Zip Code
	City, State, 20 Cook, NJ 07035 License Number
Strack Address	1
	Telephone 104.6869
City. State, Zip Code	Name of OSHA Monitor
ding Firm	I was to Kission
Project Manager for Monitoring Firm [Sched. Completion Date (11)]	
	Tanker Oli Account
02/04/2014	City, State, Zip Code
Scriedar	GIO, 5 mm
Occupancy Status During Abatement (Check only one) Occupancy Status During Abatement (Check only one) Facility closed/virented during entire period of abatement. Another ment performed outside of normal facility hours-	Lincoln Park, NJ 07035 Wrap & car
Occupancy Status During Abatement Facility closed/Attented during entire period of abatement Abatement performed outside of normal facility hours Describe:	California de Calone de Ca
A hotoment performed dulish	☐ Full Containment whogative pressure ☐ Non-fitable procedure ☐ R R E E
Describe.	Full Cornization
Describe: Other-Describe:	Ministrator
Scope of Work (check all that apply) Removation	Amerity SF or 0 a s c
Demonder 7 =160 at at a solely	Description of ashretos-containing (Specify SF or V i p. i
Location of shaff(12) N/A	170 11 11 11 11 11
ashesiosco.	pipe Insulation
material to be abstract in facility (13)	
0.4.9000	1000
throughout 1st & 2nd floor	
	Cubic Yards of Waste Name of Registered Landill Tullytown Resource & Recovery Center
	Cubic Yards of Waste Name of Regustroe & Recovery
NUDEP HOUSE ID#	
19303	Thilly sowith 1 This work
Registered Visite Hauler B & G Restoration, Inc.	12/04/2014
B&G National Control of the Control	Signature Gordona Tunto
Lincoln Park, NJ 07035 Lincoln Park, NJ 07035 True Lincoln Park, NJ 07035	
Lincoln Park, NJ 07035 Completed by (Print or Typo) Secretary/Treasurer Secretary/Treasurer	
Completed Luna	

K 10744

State of New Jersey - Notification of Asbestos Abatement

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

EMPER CIVE Name of Building Owner/Operator (2) New Jersey Turnpike Authority Date of Notification (1) January 31, 2014 Street Address 581 Main Street. PO Box 5042 Notification Type Agencies Notified Initial Notification City, State, Zip Code X EPA ☑Amended Certification # 1 Woodbridge, NJ 07095 DCA ■ Emergency (including Telephone Number x DOL Name of Contact justification) Mark Connors/ C/O AECOM X DEP ☐ Cancelled x DOH FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) NJTPK Exit 8 Etra Road Bridge ☐Subchapter 8 (other than K-12) Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: Unknown # of Floors: 1 Bldg. Age: 60 years Street Address NJTPK Interchange Exit 8 Current Use (prior if being demolished): County Code (7) County (6) (State Use Only) Mercer Hightstown NJ Name of Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) GREENWOOD ABATEMENT CONSULTANTS, INC. USA Environmental Management Street Address Street Address 268 MAIN STREET 344 West State Street City State, ZipCode Butler, NJ 07405 City, State, Zip Code License Number Trenton, NJ 08618 Telephone Number Telephone Number Project Manager for Monitoring Firm 00840 609-656-8101 973-492-0477 Bill Weisgarber Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) February 28, 2014 EMSL inc. February 17, 2014 Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 1056 Stelton Road Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe Other - Describe: 1st Shift Work Piscataway, NJ 08854 Full Containment with Negative Pressure Source of Work (Check all that apply) Mini-Enclosure Renovation Glovebag Procedure \geq 3 sf or \geq 3 lf Demolition x Non-Exempted (*) and Non-Friable Procedure Wrap & Cut □≥ 160 sf or ≥ 260
 Abatement Type Description of Asbestos Containing Material Amount (Specify SF Is Location Normally Used (ACM) (i.e. thermal systems insulation, surfacing, Remove Repair Encap Enclose Location of Asbestos-Containing Solely by Maint./Custodial or LF) Material (ACM) in Facility (13) VAT, or other miscell.) Staff? (12) NO 600 LF YES Transite Conduit X Bridge Underside Name of Registered Landfill Cubic Yards of Waste: 20 GROWS Landfill NJDEP Waste Hauler ID # Name of Reg. Waste Hauler See Below City, State See Hauler Below # 1 & 2 Disposal Date Route 2, Box 68 Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 February 28, Bridgeport, WVA 304-842-2784 2014 Hauler #2) Maumee Express Inc/ MXI Environmental Services LLC, 297 Zimmerman Lane, Langhorne, PA 19047 NJDEP # 50059 Signature January 31, 2014 Completed by (Print or Type) Maria Graure SENIOR PROJECT Marin Graure

State of New Jersey - Notification of Asbestos Abatement

X DEP justification Mark Connors/ C/O AECOM Mark Connors/ C/O	A COLOR									
X DEP justification Mark Connors/ C/O AECOM Mark Connors/ C/O	2									
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Name of Facility Where Abatement is Taking Place (3) NJTPK Exit 8 Etra Road Bridge Street Address NJTPK Interchange Exit 8 City (5) County (6) County (6) Cancelled FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (other than K-12) Subchapter 8 (other than K-12) Sq. Feet: Unknown # of Floors: 1 Bldg. Age: 60 Current Use (prior if being demolished):	*									
Name of Facility Where Abatement is Taking Place (3) NJTPK Exit 8 Etra Road Bridge Street Address NJTPK Interchange Exit 8 City (5) County (6) County (6) FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (other than K-12) Subchapter 8 (other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: Unknown # of Floors: 1 Bldg. Age: 60 Current Use (prior if being demolished):	8									
Name of Facility Where Abatement is Taking Place (3) NJTPK Exit 8 Etra Road Bridge Street Address NJTPK Interchange Exit 8 City (5) County (6) County Code (7) (State Use Only) Courrent Use (prior if being demolished):										
Street Address NJTPK Interchange Exit 8 City (5) Street Address County (6) County (6) County (6) County (6) County (6) County Code (7) (State Use Only) County (5) County (6) County Code (7) (State Use Only) Current Use (prior if being demolished):	3									
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NJTPK Interchange Exit 8 Sq. Feet: Unknown # of Floors. I Bidg. 7 (general Property of the County (6) County Code (7) (State Use Only) Current Use (prior if being demolished):										
City (5) County (6) County Code (7) (State Use Only) Current Use (prior if being demolished):	0 years									
City (5) County (6) County Code (7) (State Use Only) Current Use (prior if being demolished):										
Hightstown NJ Mercer										
Name of Contractor (9)										
Name of Manitoring Firm Hired by Bldg. Owner (8)	NC.									
Name of Monitoring Firm Hired by Bldg. Owner (8) USA Environmental Management GREENWOOD ABATEMENT CONSULTANTS, IN	12.									
USA Environmental Managora										
Street Address										
244 West State Street 268 MAIN STREET										
City State, ZipCode										
City, State, Zip Code Butler, NJ 07405 License Number										
Trenton, NJ 08618 Telephone Number										
Project Manager for Monitoring Firm										
D:U Maisgarber 973-492-04//										
Name of OSHA Monitor										
Scheduled Start Date (10)										
February 10, 2014 February 21, 2011	EMSL inc.									
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 1056 Stelton Road										
THE STEIL BUILDING FILLIE FOLIO OF A STEIL BUILDING FILLIE FI										
Abdicinon										
Describe Other - Describe: 1st Shift Work Piscataway, NJ 08854										
Other - Describe: 1 st Shift Work Piscataway, NJ 08854										
Source of Work (Check all that apply) Full Containment with Negative	Pressure									
Source of Work (Check all that apply) Full Containment with Negative Mini-Enclosure	2420-11									
Penovation										
≥ 3 sf or ≥ 3 lf Slovebag Procedure Demolition Wrap & Cut Wrap & Cut	N 50 POST NO.									
$\square \ge 160 \text{ sf or } \ge 260$	Friable Procedure									
Abatement Abatement	t Type									
Description of Aspestos Containing Material (Specify SF)	Repair Encap Enclose									
Location of Asbestos-Containing Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, or LF) or LF)										
Staff? (12)										
VES NO NA CONTE IX										
Bridge Underside	1) and su									
	red Landilli									
Name of Reg. Waste Hauler Name of Reg. Waste Hauler Name of Reg. Waste Hauler Soo Relow Soo Relow	1attii									
Name of Red. Waster Italian See Below See Below	ty, State									
See Hauler Below # 1 4 2	oute 2, Box 68									
Rid Creamwood Abatement Consultants, Inc Sunst, Inc Period Prior Period Prior	ridgeport, WVA									
Hauler #1) Greenwood Assessment	04-842-2784									
NJ DEP # 12561 NJ DEP # 12561 2014										
NJ DEP # 12561 NJ DEP # 12561 Noumee Express Inc/ MXI Environmental Services LLC, 297 Zimmerman										
NJ DEP # 12561 NJ DEP # 12561 Noumee Express Inc/ MXI Environmental Services LLC, 297 Zimmerman										
NJ DEP # 12561 Hauler #2) Maumee Express Inc/ MXI Environmental Services LLC, 297 Zimmerman Lane, Langhorne, PA 19047 NJDEP # 50059										
NJ DEP # 12561 Hauler #2) Maumee Express Inc/ MXI Environmental Services LLC, 297 Zimmerman Lane, Langhorne, PA 19047 NJDEP # 50059	2014									
Hauler #2) Maumee Express Inc/ MXI Environmental Services LLC, 297 Zimmerman Lane, Langhorne, PA 19047 NJDEP # 50059 Signature Date January 24,	, 2014									
NJ DEP # 12561 Hauler #2) Maumee Express Inc/ MXI Environmental Services LLC, 297 Zimmerman Lane, Langhorne, PA 19047 NJDEP # 50059	, 2014									

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Date of Notification (1)	2-4-14	1	Nam	e of Buil	ding Owner/Ope Da∩a.	$\operatorname{G}^{\operatorname{rator}(2)}$	ardi	rento	· _	1	SA		
Agencies Notified	Type Notification		Stre	et Addre	ss 346	5/10	1010	PSAUL	PA	10	0		
□ EPA	Initial Amended		City	State, Z	Zip Code	Shoop	N	7 C.	906	6	3		
DOL	Amendment # Emergency (incli	uding:	Nan	ne of Co	ntact (1 3 Delice	N		1.11	•	£ 91		
DCA DCA	justification) □ Cancellation		1	200	YINFORMATIO) ardren	- ` , 		.0	>,		£	-
Name of Facility Where	Abatement is Taking Pl	ace (3)			TINFORMATIO	Type of	Facility (4)		-	2			
Single	family 1)we	lling			T Su	hool (K-12) bchapter 8	(Other than	K-12)				
Street Address 3	Lincoln	AUE				St Ott	ner (i.e. pri	vate & comm	nercial b	uilding	js, ho	mes,	
City (5) (7)		1	Λ.	1066		Square	Feet	# of Floors	3		. Age		
	sboro 1	JJ		unty Coc		Current	Use (Prior	if being den	nolished	-	10	-	-
County (6)	coster			ATÉ USE									\dashv
Name of Monitoring Fire	m Hired by Building Ow	ner (8)		ASCM N		Name of Abate	Tec.	hool	legi	25	I	n	
Street Address	e rine ie	3			- 10-0	Street Address	2 1	227	J	70			
P.O.	Box 33	7			-0:0	City State, Zip	Code		l de	AF		99	9
City, State, Zip Code	evat /	N2		186	533	New	Egy	ot V	nse No.	UE	O	9:	
Project Manager for Mo	onit ri g Firm			elephone	No. 58-3365	Telephone No. 609 7.58			70	3	qu	4	
Start Date (10)	chenker	chedule	Comp	letion Da	ate (11)	Name of OSH	A Monitor	1				0	
1-41-6				1-14		Street Address	S	nnolog	ies	La	<u></u>		\dashv
	ing Abatement (Check			nt		6.0	BOX	337					
□ Abatement Perfo	acated During Entire Pe rmed Outside of Norma	l Facility	Hours			City, State, Zi		4) ~ 7	- 1	85	; ¬	2	
☐ Other – Describe			:			1000 2	SYPT	700		0~			
Scope of Work (Check	(All I nat Apply)	□ R	enovati	on				ent with Neg	ative Pr	essure	3		
□ ≥160 sf or ≥260 l	f	□ D	emolitio	on		The Glo	vebag Pro		n-Eriable	e Proc	:edure		
		1				□ Noi	n-Exemple	d () and No	11-1 11201	,	Abate	ment	
		N	Locatio	y	D	escription of					Тур	_	-
Asbestos-Contain	tion of ling Material (ACM)	Ma	d Solel intenan	ice/	Asbestos Co (i.e. therm	ntaining Materia al systems insula	I (ACM) ation,	(Spec	ify	Rer	Re	Encal	Encl
TO BE	<u>ABATED</u> acility	Cus	todial S (12)	itaff?	sur	facing, VAT, or r miscellaneous)		SF or	LF)	Removal	Repair	Encapsulate	Enclosure
	13)	Yes	No	N/A								е	
		X			Pipe	Insulat	icos	33	LF	X			
Basem	ert .	-				6.04				-	-	-	-
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						oic Yards	Name o	of Registered	Landfil				
Name of Registered			1	JDEP V lauler ID	No. of V	Vaste _		ste Ma			t.	F {	419
EPCT	echnologie	<u>S</u>		170	Dis	posal Date	City, St	ate					
City, State	<u>echnologie</u> Egypt	NJ			2	14-14	Morz	nisville		PA ate		/60/20	70
Completed DV	F 100 (100 (100 (100 (100 (100 (100 (100	Title	اے م	Pen+		Signature	Sch	eah		Z -	4	- 10	1
Steve Sc	nen nek	In	CSIC	ECA 1						100			



e of Notification (1)			Name Mag	of Buildingie Fler	ng Owner/ ming Pri	vate Hon	FEB 6							
encies Notified Type No	otification					ASS	355100	MA 12	?: 33					
DEP An	tial nended nendment #		Tuc		NJ 0808	7	ELICENS	ONTH	Talabho	ne Number				1
DOH ju	nergency (includ stification) ancellation	ing	Mag	e of Cont ggie					76					-
DCA L C	ariociidaeri		F	ACILITY	INFORMA	TION	Type of Faci	lity (4)						7
ame of Facility Where Abatems laggie Fleming Private H reet Address	ent is Taking Plac Iome	ce (3)		,			School Subcha Other ((K-12)	Other thate & co	an K-12) mmercial b	uildings	s, hon	nes,	
49 Heron Road			ži.				etc.) Square Fee		# of Flo	ors	Bldg. 35+	Age		
ty (5) Tuckerton NJ 08087			Cot	unty Code	(7) ONLY)		Current Use	(Prior i	f being (demolished	1)			
ounty (6) Ocean	M		1				Name of Abatement Contractor (9)							
lame of Monitoring Firm Hired	by Building Own	er (8)	1	ASCM No	i. •	Per	naco Inc.					•		_
N/A Street Address	reet Address						Street Address PO Box 329							
City, State, Zip Code					City, We	City, State, Zip Code West Berlin NJ 08091							_	
ADVICE SELECTION OF THE		Te	elephone	No.	Tele	Telephone No. License No. 00727							700	
	Project Manager for Monitoring Firm School					Nan	ne of OSHA M							
Start Date (10) 2/4/14	2.	/6/14					me eet Address							
Occupancy Status During Aba Facility Closed/Vacated I Abatement Performed O Other – Describe:	Ouring Entire Per	ind of Ab	ateme	ent		City	/, State, Zip C	ode						
Scope of Work (Check All The ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	at Apply)		novat			. G S	Mini-E	nclosure	e dure	Negative F	ole Proc	edure	I	
		le l	ocati	on			110112					Abate Ty	ment	
Location of Asbestos-Containing Ma TO BE ABATE In Facility (13)	terial (ACM) <u>D</u>	Used Mair	ormali Sole ntena odial S (12)	ly by nce/	Asbesto (i.e. t	os Containi hermal sys	otion of ing Material (A stems insulation g, VAT, or cellaneous)	cM) on,	(5	mount Specify or LF)	Removal	Repair	Encapsulate	
(.5)		Yes	No	N/A		Extorio	r Siding		12	200 SF	x	-	-	1
Exterior Sid	ing			X		Exterio	il Olding							1
		+		+							+	-	-	+
					1	Cubic Ya	ards	Name o	of Regis	tered Land	fill			1
Name of Registered Waste	Hauler			NJDEP V Hauler ID	vaste No.	of Waste								
United Containers		22459 3				3 City State				,				
		2/6/14				2/6/14 Morrisville PA 19067					_			
City, State Elm NJ		Title				1000000					Date 2/3/14			

West 1

Date of Notification	(1) tober 15, 20	142		Name of Building Owner / Operator (2) VERIZON COMMUNICATIONS Street Address 707 Sicklerville Road City, State & Zip Code									
Agencies Notified	Type Notifica			Address	MONICATIONS	2/	A PER CONTRACTOR			-			
⊠ EPA	K7	1		icklerville		- ·	Pro C	1,					
☐ DEP ☐ DOL	☐ Initial ☐ Amer	nded R#4-1/28/		State & Zip (7 4 4 2 2 2 2	, o ,	" On					
☑ DOH	- De-1992	gency		of Contact	11110	4	10- PA	, 1	Telepho	ne N	umb	er	
☐ DCA	☐ Cano	ellation	Alex	Baylor		</td <td></td> <td>e</td> <td>20</td> <td></td> <td></td> <td></td>		e	20				
				CILITY INF	ORMATION		TOMETO		1, 1,				
Name of Facility Wh			ace (3)		Type of Facil	ity (4)	0, 3.	2					
WILLIAMSTOWN Street Address	CENTRAL	OFFICE			School (Other than 🥰	6)					
707 SICKLERVIL	LE ROAD						te & commerc		as, hom	es, e	tc.)		
					Square Feet		# of Floors		Bldg. Age				
City (5)		County (6)	County C	Code (7)	20000	·	2						
WILLIAMSTOWN	l	Gloucester					being demolis	10.50					
Name of Monitoring	Firm Uirod b	y Building Oue	07 (0)	ASCM No			Carton cent		-				
USA Environme		y building Own	er (o)	ASCIVI NO			Contractor (9)						
Street Address					Street Addres	ss							
8436 ENTERPRIS					1123 BEAV								
City, State & Zip Co PHILADELPHIA F						City, State & Zip Code BRISTOL, PA 19007							
Project Manager for		irm	Telephone	Number		Telephone Number Lice							
MARK JENKINS			215-365-5			215-788-6040							
Scheduled Start Da 1/30/14		Scheduled Com	pletion Dat 2/6/14	e (11)	Name of OSH		itor ONMENTAL	INIC					
Occupancy Status I		ment (Check on			Street Addres		PINIMICINIAL	IIAC			11.77.45		
Facility Clos	sed/Vacated [During Entire Pe	eriod of Aba		1123 BEAV	ER ST	REET						
		utside of Norma	l Hours – 7	7am to 3pm									
	5:00 PM - upied During				BRISTOL, F	PA 190	07						
Scope of Work (Che													
		1-77				W	Full Containm		egative	Pres	sure	÷	
≥3 sf or ≥3 l			<u></u>	ovation			Mini-Enclosure						
≥160 sf ≥26	U IT		☐ Dem	nolition		_	Glove Bag Pro Non-Exempte		-Friable	Pro	cedu	ıre	
Lo	ocation of		Is Locati	on	Description			Amount	Aba				
	os-Containin	g	Normally U		Asbestos-Con	taining		Specify					
	erial (ACM) BE ABATED		Solely b Maintenand		Material (At (i.e., thermal s			F or LF)	Re	Z)	Enca	E	
	Facility	1	Custodial S		insulation, surfac	ing, VA	AT TA		Remova	Repair	Encapsulate	Enclsoure	
	(13)		Yes No	N/A	or other miscell	aneous	5)		<u>a</u>	7	late	ıre	
Basement- Emer	gency Pow				VAT/MAS	TIC		80 SF		П	П		
	goney i ou	01 1100111		Ħ	VAIMING			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Ħ	Ħ	Ħ	
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Name of Registered	Waste Haule		L L	DEP Waste	Cubic Yards	Name	of Registered	l I andfill			Ш		
,			Hai	uler ID No.	of Waste								
SERVICE TRANS	PORT GRO	UP, INC.	209	990	6	-	RVA LANDI	FILL					
City, State NEW CASTLE, DI	E 19720				Disposal Date TBD	City, S	State NESBURG,	OH 4468	8				
Completed By (Print			Title	e	Signature	1			Date				
PATRICK T. DeC.			Est	timator	Patrick !	P. K	Icare /	of the	10/15	/13	22		

Date of Notification (1)		N	lame	of Bu	ildina (Owner / Operato	or (2)	FA		EA	• _			-
	per 15, 2013	V	ERI	ZON	COM	MUNICATIONS	S (-)	450 CB.	6	· .	0			
	pe Notification		treet					45 EB.	PA	<u></u>				
		7	07 S	ickle	rville	Road		4 //Oc	1/4	S: =	,			
DEP		C	ity, S	tate &	Zip C	ode		TOE.	Car.	- 69	1			
	Amended R#3-1/24	/14 V	VILL	IAMS	WOT	LN N		1/2	MAIA	0				
☑ DOH [Emergency	1000			ontact				40	Tele	epho	ne N	umb	er
DCA [Cancellation	A	lex l	Baylo	or				INGTA	A				
			FAC	III IT	VINE	ORMATION			- 9	1/				
Name of Facility Where	e Abatement is Taking P	lace (3)		JILI I	1 1141-4	Type of Facil	ity (A)							
WILLIAMSTOWN CI	ENTRAL OFFICE	.000 (0)				School (
Street Address								Other than K-1	2)					
707 SICKLERVILLE	ROAD							ate & commerc		nne	hom	00 0	to)	
						Square Feet		# of Floors	iai bullul	Bldg		-	(6.)	_
City (5)	County (6)	Cou	nty C	ode /	(7)	20000		# 011 10015		blug	. Ay	5		
WILLIAMSTOWN	Gloucester	1000	, -	ouc ,	(•)			f being demolis	- h - d\					T CHUIT
WILLIAMO I OWIN	Giodicestei					The state of the s		Commence of the control of the contr						
Name of Monitoring Ein	m Hired by Building Owr)OF (P)		TACC	M No.			ication cent						
USA Environmenta		iei (o)		ASC	IVI INO.			t Contractor (9						
Street Address			_			Street Addres	INC							
8436 ENTERPRISE	AVE													
City, State & Zip Code						1123 BEAVER STREET City, State & Zip Code					_	-		
PHILADELPHIA PA	19153					BRISTOL, F								
Project Manager for Mo	onitoring Firm	Teleph	one	Numb	per	Telephone No	License	ense Number						
MARK JENKINS		215-3	65-5	810		215-788-6040						9		
Scheduled Start Date (10) Scheduled Cor	npletion	Date	e (11)		Name of OSH	IA Moi	nitor						
ON HOLD						BRISTOL E	NVIR	ONMENTAL	INC					
	ng Abatement (Check or					Street Addres			4554		100000	1000		
	Vacated During Entire P					1123 BEAV							_	
	formed Outside of Norma	al Hour	rs – 7	am to	3pm	City, State &								
	00 PM - 1:00 AM					BRISTOL, F	PA 190	007						
	ed During Abatement													
Scope of Work (Check	all that apply)							Full Contains		NI		_	_	
≥3 sf or ≥3 lf			Reno	nvatio	n		Ä	Full Containm Mini-Enclosure		nega	itive	Pres	sure	}
≥160 sf ≥260 lf		-		olition			H	Glove Bag Pro						
△ - 100 of -200 ii			00	Ontion			H	Non-Exempte			iable	Dro		
Locati	ion of	le l	ocatio	ממ		Description	of		Amount					
Asbestos-0	577/D117/Z/D11	Norma		00000		Asbestos-Conf			Specify	-	Aba	teme	#III I	Abe
Material		Sol	ely b	у		Material (AC		1 1	F or LF)				ш	_
TO BE A		Mainte				(i.e., thermal sy			2 102 100		Removal	20	Encapsulate	inc
in Fa	\$\text{\$\text{\$\sigma}\$}\$	Custoc		taff?		sulation, surfac					No.	Repair	psu	Enclsoure
(1:	3)		12) No	N/A		or other miscella	aneous	5)			<u>a</u>	7	ate	Fe
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Basement- Emergen	icy Power Room		片	H		VAT/MAST	IIC	6	80 SF	_	$ \Delta $	뷔	닏	ᆜ
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Name of Registered Wa		1000	ler ID	00000 2000	Cubic Yards of Waste	Name	of Registered	Landfill						
SERVICE TRANSPO	RT GROUP INC		209		140.	or overvenesen	MINE	RVA LANDE	:0 1					
City, State			203			Disposal Date			166					45.1
City, State NEW CASTLE, DE 19	720				100	rsposal Date	City, S		TH AAR	22				
Completed By (Print or 1	Title													
PATRICK T. DeCARO		44 12 W. 14 15	imate						112					
	5 00					Patrick '	11.6	I Caro 1	A.	100	# 1 J	10		
			1			/	, ,	1.5/	1					

Date of Notification (1) October 15, 2013	VE	Name of Building Owner / Operator (2) VERIZON COMMUNICATIONS Street Address 707 Sicklerville Road									0	
Agencies Notified Type Notification Reparation	1	eet Addre		lood		7	90%	17.	4	17		
		7 Sickles y, State &					- 19	6	20	-	-	
DOL Amended R	#2-1/23/14 WI	ILLIAMS	TOWN				J= .	Ċ,	10/			
☑ DOH ☐ Emergency ☐ DCA ☐ Cancellation		me of Cor ex Baylo					Tele	pnon	Nu	mbe	r	
Li DOA Li Cancellation				DHATION					cas'		_	
Name of Facility Where Abatement is To		FACILIT	YINFO	RMATION Type of Facilit	v (4)						-	
WILLIAMSTOWN CENTRAL OFFICE	CE	200	(4 (2)	School (K	(-12)	5#						
Street Address	*			Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, et								
707 SICKLERVILLE ROAD				Square Feet	, private & cor		Bldg.	Age	s, et	C.)	_	
City (5) Count	v (6) Cour	nty Code (7)	20000	# 01 110	2	Diug.	Aye				
	cester	, 5500 (Current Use (Prior if being demolished)								
				Verizon con	nmunication	center						
Name of Monitoring Firm Hired by Build USA Environmental	ing Owner (8)	ASC	M No.	Name of Abate BRISTOL El								
Street Address				Street Addres								
8436 ENTERPRISE AVE City, State & Zip Code				1123 BEAVE City, State & Z			-					
PHILADELPHIA PA 19153				BRISTOL, P								
Project Manager for Monitoring Firm MARK JENKINS		one Numb 55-5810	ber	Telephone Number License Number 215-788-6040 005								
	led Completion 2/3/14)	Name of OSH BRISTOL EI		NTAL INC						
Occupancy Status During Abatement (C	check only one)			Street Addres	s	***************************************						
Facility Closed/Vacated During	Entire Period of	Abateme		1123 BEAVE					_			
Abatement Performed Outside Describe: 5:00 PM - 1:00 A		s - /am to	o spm	City, State & Z BRISTOL, P								
Facility Occupied During Abate												
Scope of Work (Check all that apply)						ntainment wi	th Near	ativo	Pres	SIIFA		
≥3 sf or ≥3 lf	M	Renovation	on		ar rega	YU A.C.	. 163	Juit				
≥160 sf ≥260 lf	<u> </u>	Demolitio	700000	Mini-Enclosure Glove Bag Procedures								
					100	empted and	TO SUPPLY THE RESERVE	100000	11.0	100000000000000000000000000000000000000		
Location of Asbestos-Containing		ocation ally Used		Description Asbestos-Conf		Amour (Speci		Aba	teme	nt T	ype	
Aspestos-Containing Material (ACM)	Sol	ely by		Material (AC	CM)	SF or L		20		Ĕ	m	
TO BE ABATED		enance or dial Staff?	i.	(i.e., thermal synsulation, surfac				Removal	Repair	Encapsula	Enclsoure	
in Facility (13)	(12)		or other miscella				wal	air	ulat	ure	
•		No N/A					_				_	
Basement- Emergency Power Ro	om 🗵			VAT/MAS	TIC	680 S	F	X	H	片	H	
		+++	-			-		뉘	뮈	H	H	
	- 	HH	+					H	H	H		
					To		15"					
Name of Registered Waste Hauler		Hauler II	D No.	Cubic Yards of Waste		gistered Land	omu					
SERVICE TRANSPORT GROUP, I	NC.	20990	1	6 Disposal Date	MINERVA City, State	LANDFILL			_			
City, State NEW CASTLE, DE 19720			TBD		URG, OH 4							
Completed By (Print or Type)		Title		Signature	0.0	10	- 1	Date	112			
PATRICK T. DeCARO		Estimator Signature 10/15				, 19						

Date of Notification (1) ber 15, 20	113	N	Name of Building Owner / Operator (2) VERIZON COMMUNICATIONS Street Address 707 Sicklerville Road City State & Zin Code								,		<u> </u>			
	ype Notifica		S	treet	Addre	ess	Road	3		-		100	4.		1		
	☑ Initial					Zip C					N 0		6		2		
☐ DEP ☐ DOL	Initial	nded R#1-10/28/				TOW					4/0/	0.	~	2	1		
□ DOH □ DCA		gency			of Co						Te.	lepho	ne Ni	uroro	er		
□ DCA	☐ Cano	ellation	A	lex (Baylo	70					1	10%	3/		3		
				FAC	CILIT	Y INF	ORMATION					*(51	0,	-		
Name of Facility Whe WILLIAMSTOWN C			ce (3))			Type of Faci						-	`			
Street Address	FILLIANE	OFFICE					School (•) (Other than K	(-12)							
707 SICKLERVILLE	ROAD								vate & comme		ildinas	hom	PC P	la l			
							Square Feet		# of Floors			g. Ag					
City (5)		County (6)	Cou	inty C	ode (7)	20000		2								
WILLIAMSTOWN		Gloucester						115 N - 173-CC	if being demo)	-					
	10 15		(0)		1			Verizon communication center									
Name of Monitoring Fi		y Building Owne	r (8)	ASCM No. Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL II										E.07			
Street Address							Street Addre		KUNWENTAI	. INC							
	436 ENTERPRISE AVE						1123 BEAV										
City, State & Zip Code							City, State &										
PHILADELPHIA PA		ion IT	Coloni	2000	Numb		BRISTOL,	Te -	N								
MARK JENKINS	omtoning i			65-5		er	Telephone N 215-788-60	Licer	icense Number 00509								
Scheduled Start Date ON HOLD	(10)	Scheduled Comp	pletio	n Dat	e (11)		Name of OS	HA M	onitor RONMENTAL	INC		0000					
Occupancy Status Dui	ing Abater	ment (Check only	y one)	====		Street Addre		TOTAL ME	. 1140			-	-			
Facility Closed	Wacated [During Entire Per	riod o	f Aba			1123 BEAV	ER S	TREET								
		utside of Normal	Hou	rs – 7	am to	3pm	City, State &			180000							
Describe: 5:							BRISTOL,	PA 1	9007								
Scope of Work (Check													-				
8	3		_					\boxtimes	Full Contain	nent w	rith Ne	gative	Pres	sure	ı		
≥3 sf or ≥3 lf			×		ovatio	200			Mini-Enclosu								
≥160 sf ≥260 lf	i.		\sqcup	Dem	olition	ו		H	Glove Bag P				_				
Loca	tion of		Is I	ocatio	on l		Description	n of	Non-Exempt	Amou		Abs					
Asbestos-	-Containing	g 1	Norm	ally U	sed		Asbestos-Con	itainir	ng	(Spec		ADI	neme	nt i	ype		
	al (ACM)			lely b			Material (A			SF or I		1 70		m	m		
	ABATED acility	10	oran no Custo	enanc dial S	taff?	i	i.e., thermal s) nsulation, surfac					Removal	Repair	5	Enclsoure		
	13)			(12)			or other miscell					oval	air	Encapsulate	Our		
				No	N/A						4-200			6			
Basement- Emerge	ncy Powe	er Room	<u> </u>				VAT/MAS	TIC		680 S	3F	X					
			4	4	4												
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			+	╞╣┤	+							₩			H		
			$\dashv +$	H	H							₩		뷔	H		
Name of Registered W		NJC	DEP V	Vaste	Cubic Yards	Nan	ne of Register	d Lan	dfill	Ш.		<u>L</u> 1					
					ler ID		of Waste										
SERVICE TRANSPORT GROUP, INC.					90		6	_	ERVA LAND	FILL							
City, State NEW CASTLE, DE 19720							Disposal Date TBD		, State YNESBURG	OH 4	14688						
Completed By (Print or Type)					Title Si					-	- 1	Date			-		
PATRICK T. DeCARO					imate	OF	Patrick D. O. Cars/gl 101					10/15	5/13				

Date of Notification (1)				J.A.C. 8			11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Ch	# 2	50	7		
October 15, 2013		VED	TON BU	Iding Owne	r / Ope	erator (2	2)					_	_
Agencies Notified Type Notification	1	1 0 000 00	Addre		CATI	ONS	*				1)	
☐ DEP ☐ Initial		707 8	ickle	ville Road	4				7	2,	-		_
		City, S	tate &	Zip Code						PA	_		1
		AAILL	iams:	TOWN N I					UNA	5	3		4
DOH 999 Cancellat	cy io-	Name	of Cor	tact					TO CO		<u>``</u>		8
Caricellet	ion	Alex I	Baylo	r						elep	hone	MR	nb
No.		FAC	ארו ווי	INFORM	A 570 0 1				1	SO.	0-	1	Ć.
Name of Facility Where Abatement is	Taking Plac	æ (3)	201200	INFORM	ATION	4				()	1/2	_	<u>ج</u>
WILLIAMSTOWN CENTRAL OF	FICE			12	Scho	acility (4 ol (K-12)		-120		6	100	_
707 SICKLERVILLE ROAD								. 10 .00		33	_	4	â
101 SICKLERAILLE KOAD				肾	Other	rie o	(Other than	1K-12)	0.00AEW380.00		É	70	
City (5)				Sai	Jare Fe	(I.E. PII	vate & com	nercial b	uilding	s, ho	mes,	étc.)
1001 1 10 100	nty (6)	County Co	ode (7		200	10000	IN OI I-100	Ĭ.,	Bir	dg. A	ge		
WILLIAMSTOWN GIO	ucester			Cur			M hair a	2					
N				Ver	ioni Os	e (Prior	if being der	nolished)				
Name of Monitoring Firm Hired by Buil	ding Owner	(8)	ASCN	No Non	IZON C	both	nication c	enter					
USA Environmental Street Address					ICTOI		nt Contracto	W (8)			100		_
3436 ENTERPRISE AVE				Stre	et Add	CLAAL	RONMENT	AL INC					
City, State & Zip Code				1112	3 RFA	VER S	TOCET				1200		
PHILADELPHIA PA 19153				City	State	& Zip C	I NEE I					3	
Project Manager for Monitoring Firm				IRDI	STOL	PA 18	002 007						
IARK JENKINS	Tel	ephone N	umber	Tele	phone	Number	- 1001	100					
	216	5-365-58	10	215-	788-6	040		Licen	nse Nun				
10/29/13	uled Comple	tion Date	(11)	Nam	e of OS	SHA Mo	nitor			005	09		
ccupancy Status During Abatement (11/	17/13		BRIS	STOL	ENVIR	ONMENTA	AL IMA					
Facility Closed/Vacated During	neck only o	ne)		Stree	t Addn	888	01000E1417	AL INC					
Absternant Performed Outside	ciure Penoc	0 Of Abate	ment			VER ST	REET						
Abatement Performed Outside (Describe: 5:00 PM - 1:00 A	or Normal H	ours - 7ar	n to 3p	om City,	State 8	Zip Co	de						
Facility Occupied During Abater				BRIS	TOL.	PA 190	107						
cope of Work (Check all that apply)	nent				,		991						
ope of Work (Oneon all that apply)													
☐ ≥3 sf or ≥3 lf	[2]		034			X	Full Contain	ment with	th None	-A!		2	
≥160 sf ≥260 lf	쯷	Renova				$\overline{\Box}$	Mini-Enclos	iine	m raeds	anve	Press	ure	Š
Δ -100 0100		Demolif	lion			$\overline{\Box}$	Glove Bag F						
Location of						\Box	Non-Exemp	fed and i	Non Fri		_		
Asbestos-Containing	IS Non	Location mally Used		Des	cription			Amoun	4OII-FI	able	Proc	edu	e
Material (ACM)	14011	inally Used		Asbest	os-Con	taining		(Specifi		ADS	temer	nt Ty	/pe
TO BE ABATED	Main	itenance o	-	Mate	orial (A	CM)		SF or LF	<u>-</u>)		T	-	
in Facility	Custo	odial Staff	2	(i.e., the insulation,	mal s	ystems			'	20	20	8	9
(13)		(12)		or other	niecello	ang, va	ī			Remova	Repair	1 8	5
	Yes	No NA	\Box	0. 0	1110CS111	ai ieous)			- 1	EA .	=	Encapsulate	BINGSTAIN
sement-Emergency Power Room	m 🛛	ПП	_	MAT	MAAA	210						2	-
			+	VAI	/MAS1	ric		680 SF		XII	71	7	
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e of Registered Waste Hauler			1							╬	₩	44	1
o . Itogramme tracto rigules		Hauler II	Waste	Cubic Yan	ds	Name o	f Registere	d Landell		11		Ш	
VICE TRANSPORT GROUP, INC		20990	D No.	of Waste	- 1				I.S.				
State		40380		6		MINER	VA LAND	FILL					
CASTLE, DE 19720				Disposal D	ate	City, Sta	ite						
				TBD		WAYN	SBURG,	OH 440	-00				
pleted By (Print or Type) RICK T. DeCARO		Title		Signature			10-10-10-10-10-10-10-10-10-10-10-10-10-1						
NICK I. DECARO		Estimat	or	0.	1 1	a in	Carl	-0	Date				
· · · · · · · · · · · · · · · · · · ·		1		Talbert	E 6	1 14	1011	1	11014	RIA	9		

MO 357

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

D1432,	NOTIF	ICAT Pursu	TON OF	f New Jers ASBESTOS JAC 8:60 a	SABATE	EMENT		REC 2014 FEB -6 08ES 10S	E/W	· /		
pate of Notification (1)		Nan	ne of Buil	ding Owner	/Operato	or (2)		2014 FEB -6		CL)	
01/28/2014 Agencies Notified Type Notification		Stre	et Addre	ss			A	SESIN	MA /	2: 3	0	
		1		Street				& LICE.	1/4/7			-
DEP Amended Amendment	#	Blo		d, NJ 070	03			BBES 109 & LICENS	nhar P	101		4
DOH justification) Cancellation		Be	me of Co ert Petri	k						· •-		-
			FACILIT	Y INFORM	ATION	Type o	f Facility (4)					
Name of Facility Where Abatement is Takir Demarest School	ig Place (3)					X S	chool (K-12)					
Street Address							habantar 8	(Other than K-1) rate & commerci	2) ial buildir	igs, ho	omes,	
465 Broughton Avenue						ef	ic.)			g. Age		\dashv
City (5)						Square N/A	e Feet	# of Floors N/A	N/A		•	
Blomfield		T =	- 1 0-	da (7)		100000000000000000000000000000000000000	nt Use (Prior	if being demolis	hed)			
County (6)		(S	ounty Coo	e (/) E ONLY)		scho		34232 Ti	783			
Essex Name of Monitoring Firm Hired by Building	Owner (8)	1	ASCM N 0004	lo.	Na Da	me of Abat	ement Contr ement, Inc	actor (9)				
Briggs Associates					Str	eet Addres	s					
Street Address 3 Crosswicks Street							ren Avenu	ne		_		\dashv
City, State, Zip Code Bordentown, NJ 08505				11	Cit	y, State, Zi otowa, N	p Code J 07512					
Project Manager for Monitoring Firm		T	elephone	No.	Te	lephone N	0. CDF	License 00675	No.			
Michael Hoodak	Scheduled		09-298		Na		A Monitor			E 10.2 E 1.1.2		\neg
Start Date (10) 02/14/2014	02/16/20	14				&S Abat	ement, Ind). 				-
Occupancy Status During Abatement (Ch	eck Only One))					gren Aven	ue				
Facility Closed/Vacated During Entir Abatement Performed Outside of No Other – Describe:	e Period of Ab ormal Facility F	dours	ent			ity, State, Z otowa, N	Cip Code NJ 07512					
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	The state of the s	novat			32	× M	ini-Enclosure	redure				
2100 31 01 2200 11	_				120000000000000000000000000000000000000		on-Exempted	d (*) and Non-Fr	riable Pro	cedur	e	
	ls l	Locati	on								ement /pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	N Used Mair Custo	ormal d Sole ntena odial s (12)	ly by nce/ Staff?	(i.e. tl	s Contair nermal sy surfacir	ription of ning Materi ystems insung, VAT, or scellaneous	lation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		nine i	nsulation		50 LF	X			
crawl space	X				pipe ii	isulation						
												-
									odf"			
Name of Registered Waste Hauler			NJDEP V Hauler ID		Cubic Y		110100000011001100110000000	f Registered La		Δ		
D&S Abatement, Inc.			20996	, INU.	TBD		City, Sta	Management Management	III OI F	•		
City, State Totowa, NJ					TBD	Δ		own, PA	Date	/4 		
Completed by	Title	act N	lanage	r	51	griatuie	1		01/28	3/201	4	
		ect N	lanage	r	Si	gnature	1		1	3/201	4	

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19/2	NO		TION O	of New J F ASBES NJAC 8:6	TOS A	ABATEN				\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	974	PA.	18	
Date of Notification, (1)		15.02930400		Building Ow						100 C	``	8	,×	T)
01/28/2014	1	F	SIA	LEIG	H.	DIC	KINS	SOIN	UNIVE	2513	Y	5_	-	D
Agencies Notified Type Notification		100000000000000000000000000000000000000	eet Add		160	11	4.15	_		<,	10,	20	· .	1
☐ EPA ☐ Initial ☐ Amended				MA)			AUC	<u> </u>		-		A	11/1	, h.
DOLAmendment #		1	763	ISON		Γ \mathcal{O}	0	7921	0.	20	a . 4		16	Ta
Emergency (inclusion)	uding	Na	me of C	Contact					Talaster					
DCA Cancellation				G G			CA			•				
lame of Facility Where Abatement is Taking Pla	200 (3)		FACILI	ITY INFOR	MATI	ION	Type of	Facility (4)						
SCIENCE BUL		116	m.				District Control of State	hool (K-12						
treet Address							Su	bchapter 8	(Other than K-	12)				
285 MADISON	0	4VE					Ot etc		vate & commer	cial bu	ildir	ngs, h	nome	s,
Oity (5) MADISON							Square		# of Floors		Bld	lg. Ag	je	
County (6) MORRIS		Co (S	ounty Co	ode (7) SE ONLY)			Current		if being demoli	ished)				
Name of Monitoring Firm Hired by Building Own	g Firm Hired by Building Owner (8)					100000000000000000000000000000000000000		ment Cont any, Inc.						
Street Address							Address							
5434 KING AVE							Piaget.							
City, State, Zip Code	~	210	Q				State, Zip on, NJ (
PENUSAUKEN, NJ	O	210	lonh	o No	1		hone No.		License	No				\dashv
roject Manager for Monitoring Firm		17 200	elephon	ie No. -306-4	15/2	1-	none No. -253-88		00704					
Solution (10) Solution (10)	cheduled			ate (11)	לרער	>		A Monitor						-
01/29/2014	1		014		1	1775000000	Co.In							
Occupancy Status During Abatement (Check C					1	Stree	t Address	3						
Facility Closed/Vacated During Entire Peri Abatement Performed Outside of Normal Other – Describe:	iod of Al Facility	bateme Hours	nt			City,	State, Zip	Code						
Scope of Work (Check All That Apply)					+									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovatio emolitio					Mini	Containme -Enclosure /ebag Proc		e Pres	sur	е		
					4	لم			(*) and Non-Fr	riable F				_
		Location									,		ement pe	•
Location of Asbestos-Containing Material (ACM)	Used	lormally d Solely	by	Ashest		escription ntaining	n of Material	(ACM)	Amount				ш	
TO BE ABATED		ntenano odial St	200000000000000000000000000000000000000		therm	al syster	ns insula		(Specify	3	Ren	Re	Encapsulate	Enclosure
In Facility (13)	2300	(12)				facing, V r miscella			SF or LF)	1	Removal	Repair	sul	osur
	Yes	No	N/A							1	-	2000	ate	O.
A/=014	100			DIDC	1.	C . 1	[1.545	, ,,	8 LF		Ċ			
MECHANICAL ROOM	X			The second second				Pe COT						-
- II -	X VAT					ASTI			2556	-	χ.	17		-
11	X			TSI	-	RE	PALP		1000	F		X	-	
Name of Registered Waste Hauler		10000	IDEP W			ic Yards Vaste			Registered Lan	dfill				
Newark Carting, Inc		11.1	409	INO.	JI V	vasie		GROW	S					
City, State Newark, NJ								City, Stat Morrisv						
Completed by	Title						ine	A	1	Date	-Con-			
Voytek Roszkowski	Presi	dent				J.	&c-	sto	sla					

O Neck		NOTII		TION	OF ASE	w Jersey BESTOS ABAT C 8:60 and 5:16		20/4	1. EB . 6	Ce	`,	
Date of Notification (1)	16 /	13		Name o	1	Owner/Operator (2)	4585 C LIC	(6)	`.	M	5
-					Address				0	44		گور وا
Agencies Notified EPA	Type Notificati	on		15 E	ast Mon	tgomery Place,	Lower Level	1/2	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		1.3	·
☑ DOLWD ☑ DHSS		nt #4-2/4/1	4	The second second	ate, Zip C				Sil	1/2	, ,	,
☑ DHSS	☐ Emergency			100		PA 15212		Talaahaaa Nuu	ر) م	. 7	<u> </u>	
(NJAC 5:23-8)	justification	-		The same	of Contact			Telephone Nur	inde	6	4	9.
	☐ Cancellation	on			nony Por	**************************************		-		_ <	3	
7077			(0)	FAC	ILITY IN	FORMATION	Type of Facility ((4)				
Name of Facility Where Verizon Market CC		iking Place	(3)				School (K-12)	12)			
Street Address							Other (i.e., pr	rivate and comm	ercial buil	ldings	ś,	
95 William St							homes, etc.)		- 150		DOM:	_
City (5) Newark							Square Feet	# of Floors		g. Ag	е	
County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	ior if being demo	olished)			T-20 (1971)
Essex							Office				7.03	
Name of Monitoring Firm	n Hired by Buildi	ng Owner ((8)	ASCM I	No.		ent Contractor (9)					
USA Environment	al Manageme	nt					IVIRONMENTA	L, INC.				
Street Address						Street Address						
8436 Enterprise A	ve _					1123 BEAVE						
City, State, Zip Code Philadelphia, PA 1	9153					City, State, Zip C BRISTOL, PA						
Project Manager for Mo	nitoring Firm		Tele	ephone I	No.	Telephone No.		License No.				
Mark Jenkins			2	15-365	-5810	215-788-604	0	00509				
Start Date (10)		cheduled C	100			Name of OSHA I BRISTOL EN	Monitor IVIRONMENTA	L, INC.				-
Occupancy Status Durin						Street Address						-/
☐ Facility Closed/Vaca				ement		1123 BEAVE	R STREET					
Abatement Performe Time of Abatement:	ed Outside of No	rmal Facilit	y Hou	rs - Des	cribe //	City, State, Zip C BRISTOL, P.				10.00		28%
Scope of Work (Check	all that apply)						V22 400	5001 FEB				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			enova emolit				ntainment with Ne closure ag Procedure empted (*) and No					ø
		Is	s Loca	ation	Г				Ab	ateme	ent T	ype
Locatio Asbestos-Containing TO BE AB IN Fac (13)	g Material (ACM BATED illity) Use Ma	ainten	lely by ance/ I Staff?	Asbe (i.e	Description estos Containing M e., thermal systems surfacing, VA other miscellan	laterial (ACM) s insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(10)	/	Yes	No	N/A			777					_
11 th Fl. AC equipme	ent room	\boxtimes			Floor	ile and mastic		1820 SF				
10 th Fl. AC equipme	ent room	\boxtimes			Floor	ile and mastic		45 SF			Ш	L
9 th FI. AC equipmer	nt room				-	ile and mastic		35 SF				F
6 th Fl. AC equipmen	nt room					tile and mastic		85 SF				
Name of Registered Was		, INC.		NJDEP Hauler I 2099	D No.	Cubic Yards of Waste	MINERVA	istered Landfill				
City, State NEW CASTLE, DE	19720					Disposal Date		BURG, OH 44	688			
Completed By (Print or Brian Scafiro	Type)	Title Estima	ator	1.4		Signature	v Scalir	Lil	Date 2/4	1/14	1	

Date of Notification (1)			Name o	f Building C	Owner/Operator (2	2)	ري مي	n. 1	5		A STATE OF THE PARTY OF THE PAR
12 /16 /13	_		Veriz	on			*	O. '	5		
Agencies Notified Type Notification		\neg	Street A				,	50 Ch	7	1.	
☑ EPA ☑ Initial			15 Ea	ast Montg	jomery Place, I	Lower Level		700	4	3	
☑ DOLWD ☑ Amended	21414	.	City, Sta	ate, Zip Co	de			30	Po	,	1
☐ DHSS Amendment #4	ACCOUNT OF THE PARTY	<u>*</u>	Pitts	burgh, P	A 15212				4		
DCA Emergency (In justification)	Juding		Name o	of Contact			Telephone Num	ber			
☐ Cancellation			Anth	ony Porta	a				-		
			FAC	ILITY INF	ORMATION						
Name of Facility Where Abatement is Taking	Place	(3)				Type of Facility (4)				
Verizon Market CO		,				School (K-12)					
Street Address						☐ Subchapter 8 ☐ Other (i.e., pr			dinas		
95 William St						homes, etc.)	ivato and commo				
City (5)	- 3690.0					Square Feet	# of Floors	Bldg	. Age	9	
Newark											
County (6)			Count	y Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)	1384		
Essex				•		Office					
Name of Monitoring Firm Hired by Building (Owner (B) [ASCM N	No.	Name of Abateme	ent Contractor (9)					
USA Environmental Management					BRISTOL EN	VIRONMENTAL	_, INC.				
Street Address					Street Address						
8436 Enterprise Ave					1123 BEAVE	R STREET					
City, State, Zip Code					City, State, Zip C	ode			- E.V/		
Philadelphia, PA 19153					BRISTOL, PA	19007					
Project Manager for Monitoring Firm		Tele	phone N	No.	Telephone No.		License No.				
Mark Jenkins		57000	5-365-	1700074000000000	215-788-6040)	00509				
	duled C	omple	tion Dat	e (11)	Name of OSHA N	/lonitor					
,			_ / _		BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During Abatement (Chec	k only o	ne)			Street Address						
☐ Facility Closed/Vacated During Entire Pe			ment		1123 BEAVE	R STREET					
Abatement Performed Outside of Norma	I Facility	y Hou	rs - Des	cribe	City, State, Zip C	ode					
Time of Abatement:AM-3:00PM	/ <u>11:30</u>	PM	AN	1	BRISTOL, PA	A 19007					
Scope of Work (Check all that apply)							- di - Decembre				
	⊠ p _a	novat	ion			ntainment with Neg closure	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	-	molitic			□ Gloveba	a Procedure		1 000			
₩ _ 1,00 st st = 200 tt					☐ Non-Exe	empted (*) and No	n-Friable Proced				
		Loca Norma		- 20	5				ateme		
Location of		ed Sol		Ashes	Description stos Containing M		Amount	Removal	Repair	Encapsulate	Enclosure
Asbestos-Containing Material (ACM) TO BE ABATED		intena		(i.e.	, thermal systems	insulation,	(Specify	nov	ar	aps	losu
IN Facility	Cus	todial (12)	Staff?		surfacing, VAT other miscelland		SF or LF)	<u>a</u>		ulat	E E
(13)	Yes	No	* Contraction	1	Other miscelland	cous,				o .	
6th th Fl. AC equipment room	\boxtimes	\Box		Pipe fitt	ing insulation		5 LF				
5 th Fl. AC equipment room				Valve in	sulation		2 LF				
6 th Fl. Machine Rm (#4/5 Elevators)			10	VAT/Ma	stic		350 SF				
11 th Fl. Machine Rm (#7/8 Elevators		恄	1	VAT/Ma	stic		440 SF	\boxtimes			
Name of Registered Waste Hauler		1	NJDEP '	Waste	Cubic Yards of	Name of Regi	stered Landfill				
SERVICE TRANSPORT GROUP, IN	IC.	1	Hauler II 2099	Eller commence.	Waste		LANDFILL				
City, State					Disposal Date	City, State	DUDO 011 440	.00			
NEW CASTLE, DE 19720						WAYNES	BURG, OH 446			-	
Completed By (Print or Type)	le				Signature	O B	1.0	2/4	1/1	4	
Brian Scafiro	Estima	ator			Luca	sufero	K	0/1	//		
ASB-41						noted activities	0				
ASB-41 MAY 11 PO / 3 / 3 7	* Do no	t use	this form	n for asbesi	tos licensure exer	npted activities.					



Date of Notification (1)		N	lame o	Building	Owner/Operator (2	2)				0	
12 / 16 / 13	_		Veriz	on				20		4	
Agencies Notified Type Notification		5	Street A	ddress			-57	1	2		
⊠ EPA ⊠ Initial			15 Ea	st Mont	gomery Place, I	Lower Level	,	₹6. 1000 <u> </u>	6		1
☑ DOLWD ☑ Amended	01111		City, Sta	te, Zip Co	ode		ę	10x	(5	1
☑ DHSS Amendment #4-	1.0000		Pitts	burgh, P	A 15212			100	17	\$1	2
DCA Emergency (incl. (NJAC 5:23-8) ustification)	uaing	1	Name o	f Contact			Telephone Num	ber 🎧	C:-		1%
Cancellation			Anth	ony Por	ta			- (1/2	1	4
			FAC	LITY IN	FORMATION				6	10),
Name of Facility Where Abatement is Taking	Place (3)				Type of Facility (4)			-	
Verizon Market CO	. 1000 (~/				School (K-12))				
Street Address						Subchapter 8	Other than K-12 ivate and comme	!) roial buil	dinas	<u> </u>	
95 William St						homes, etc.)	ivate and comme	roiai buii	unigo	50	
	_					Square Feet	# of Floors	Bldg	g. Age	Э	
City (5) Newark											
.1 A.M. (12.701.00)			Count	v Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
County (6)			Count	y 0000 (//	((01/1/2 002 0112.)	Office					
Essex	unor /s	2) ^	SCM N	lo	Name of Abateme					-	
Name of Monitoring Firm Hired by Building O	wilei (c	" [IOCIVI I	10.		VIRONMENTA					
USA Environmental Management					Street Address		-,				
Street Address					1123 BEAVE	R STREET					
8436 Enterprise Ave					City, State, Zip C						
City, State, Zip Code					BRISTOL, PA						
Philadelphia, PA 19153		T-1	h 1	10	Telephone No.	10007	License No.				
Project Manager for Monitoring Firm			hone N 5-365-		215-788-6040	1	00509				
Mark Jenkins		_			Name of OSHA N	77				-	
Start Date (10) Schedi						IVIRONMENTA	LINC				
			_			WINOIMIENTA					_
Occupancy Status During Abatement (Check					Street Address	D OTDEET					
☐ Facility Closed/Vacated During Entire Per	iod of	Abaten	nent		1123 BEAVE					- 14	
Abatement Performed Outside of Normal Time of Abatement:AM-3:00PM/	Facility	Hours	S - Desc AM	cribe	City, State, Zip C						
Time of Abatement.	11.00				BRISTOL, PA	4 19007					
Scope of Work (Check all that apply)					⊠ Full Cor	ntainment with Ne	gative Pressure				
☐ >3 sf or >3 lf	⊠ Re	novatio	on		Mini-En	closure	9				
⊠ ≥160 sf or ≥260 lf		molitio			☐ Gloveba	ag Procedure empted (*) and No	n Eriable Proced	ure			
	1 1-	1 6			□ Non-Ex	empled () and rec	THE HADIC I TOOCG		ateme	ent Ty	vne
		Locati Normal			Description	of			_		
Location of Asbestos-Containing Material (ACM)	Use	d Sole	ly by	Asbe	stos Containing M	aterial (ACM)	Amount	Removal	Repair	nc	Enclosure
TO BE ABATED	0.0100000	intena todial S		(i.e	e., thermal systems		(Specify SF or LF)	JOV	ai-	sde	uso
IN Facility	Cus	(12)	Jian:		surfacing, VA other miscellan		31 01 11)	=		Encapsulate	ē
(13)	Yes	No	N/A	1	out of the outer	,				(D	
11 th Fl Machine Rm (# 6 Freight Elev				VAT/M	astic		220 SF	\boxtimes			
12 th FI Machine Rm (#2/3 Elevators)				VAT/M	astic		1,000 SF	\boxtimes			
12th Fl Machine Rm (#2/3 Elevators)				VAT/M	astic		200 SF				
Mechanical Room				Fitting	s		25				
Name of Registered Waste Hauler		0.000	JDEP !		Cubic Yards of		stered Landfill				
SERVICE TRANSPORT GROUP, IN	C.		20990		Waste	MINERVA	LANDFILL	7000 Mary 450 Feb.			
City, State			2000		Disposal Date	City, State					
NEW CASTLE, DE 19720						WAYNES	BURG, OH 446				
Completed By (Print or Type) Title	е				Signature	1 1	. /	Date 2	4//	4	
Brian Scafiro E	stima	tor			Mean	Scale	20/2	-	11	/	
					Now						

Pg 1 Ck# 2553

	Date of Notification (1)				Name	of Building	g Owner/Operator (2	2)		· Co		3	_
			3			izon			7		à	(.	
	Agencies Notified	Type Notification	n			Address	E)	40.000	C.	500	٠ ١	_	U.V.
	☑ EPA ☑ DOLWD	☐ Initial ☐ Amended					tgomery Place,	Lower Level	τ	10		-	
	☑ DHSS	Amendment	#3-1/3	0/14		tate, Zip C				Chu	a marij	3/30	
	DCA	☐ Emergency (PA 15212			120	0		$\dot{\cdot}$
	(NJAC 5:23-8)	justification)			0.000	of Contac			Telephone Nu	mber 🥳	1/	ò	ص'
		☐ Cancellation				hony Po					% 5	0,	
					FAC	CILITY IN	IFORMATION				6	_	
	Name of Facility Where A Verizon Market CO		ing Plac	e (3)				Type of Facility School (K-12	2)	40)	C	20	
	Street Address 95 William St								8 (Other than K- rivate and comm		ilding	s,	
	City (5)							Square Feet	# of Floors	Bl	dg. A	ge	
	Newark												
	County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	olished)		C925	
	Essex							Office					
	Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
	USA Environmenta	I Management					BRISTOL EN	VIRONMENTA	L, INC.				
	Street Address		===				Street Address						
	8436 Enterprise Av	e e					1123 BEAVE	R STREET					
	City, State, Zip Code						City, State, Zip Co						
	Philadelphia, PA 19						BRISTOL, PA	19007					
	Project Manager for Mon	itoring Firm		1000000	ephone		Telephone No.		License No.				
	Mark Jenkins				15-365		215-788-6040		00509				
	Start Date (10)	ACC10			etion Da	A	Name of OSHA N						
	1 / 2 /		2	/ _1	4_/-	14_	BRISTOL EN	VIRONMENTA	L, INC.				
	Occupancy Status During	T (1					Street Address						
İ	☐ Facility Closed/Vacate						1123 BEAVE						
	Abatement Performed Time of Abatement: 7			ity Hot PM-	ırs - Des AM	cribe	City, State, Zip C						
***	OFF SITE II	30/14-11	4/1	11 -	ETURN	2/5/14	BRISTOL, PA	19007		-12			
	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	i tilat apply)		lenova emolit			Mini-End Gloveba	g Procedure					
				Is Loc	ation	т	☐ Non-Exe	empted (*) and No	on-Friable Proced		-4		
	Location	of		Norm			Description of	of		-	-	ent T	T
	Asbestos-Containing	Material (ACM)		sed So lainten	lely by	Asbe	stos Containing Ma	aterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
	TO BE ABA		1	101 12 13 17	Staff?	(i.e	e., thermal systems surfacing, VAT		(Specify SF or LF)	lova	a-	sde	uso
	(13)	,	Yes	(12 s No			other miscellane			-		ilate	e
	11 th Fl. AC equipmen	it room				Floor ti	ile and mastic		1820 SF				
	10 th Fl. AC equipmen	it room				Floor ti	ile and mastic		45 SF	×			
	9 th FI. AC equipment	room	⊠			Floor ti	ile and mastic		35 SF				
	6 th FI. AC equipment	room				Floor ti	ile and mastic		85 SF				
	Name of Registered Was		NC.		NJDEP I Hauler II 2099(D No.	Cubic Yards of Waste	and the second s	stered Landfill LANDFILL				
	City, State NEW CASTLE, DE 1	19720			2000		Disposal Date	City, State WAYNESE	3URG, OH 446	588			
			itle				Signature			Date			
	Completed By (Print or T	ype)	Estim	ator			Brisa	Scapio/1	e	1/3	0/1	4	

1g L Ck# 2553

Date of Notification (1)	16 / 13				e of Building rizon	g Owner/Operator (2	2)		2	-)_	
Agencies Notified	Type Notification			Stree	t Address				37	- \	$\frac{O}{U}$	
⊠ EPA				15	East Mor	tgomery Place,	Lower Level	80 C.J.	φ'		157	
☑ DOLWD		4120	14.4	City,	State, Zip (Code		5	2 6	5	-	-
☑ DHSS	Amendment #≦ ☐ Emergency (in			Pit	tsburgh,	PA 15212		55	บ้า	7	,	17
☐ DCA (NJAC 5:23-8)	justification)	Guung		Name	e of Contac	t		Telephone Nun	nber.	7		
() = = = = = = = = = = = = = = = = = =	☐ Cancellation			An	thony Po	rta				$\vec{\cdot}$		
				FA	CILITY IN	FORMATION			0,20		(در	THEORY
Name of Facility Where		Place	(3)	CEO 11 -0 9400			Type of Facility		~			
Verizon Market C	0						School (K-12	?) 3 (Other than K-1	21			
Street Address							Other (i.e., p	rivate and comme	ercial bu	ilding	s,	
95 William St							homes, etc.)	and the second second second second				
City (5)							Square Feet	# of Floors	Bio	ig. Ag	je	
Newark												
County (6)				Cou	inty Code (7)(STATE USE ONLY)		ior if being demo	lished)			
Essex							Office					
Name of Monitoring Fire		Owner ((8)	ASCN	l No.	Name of Abatem						
USA Environmen	tal Management						VIRONMENTA	L, INC.				
Street Address						Street Address	D 07DEE7					
8436 Enterprise A	lve					1123 BEAVE						
City, State, Zip Code						City, State, Zip C						
Philadelphia, PA			T = 1			BRISTOL, PA	19007	License No.				
Project Manager for Mo	onitoring Firm			ephone		Telephone No. 215-788-6040		00509				
Mark Jenkins	Torke	dula d C			5-5810	Name of OSHA N		00303				
Start Date (10) 1 / 2					ate (11) 14		VIRONMENTA	L. INC.				
			4			Street Address						
Occupancy Status Dur Facility Closed/Vac				ement		1123 BEAVE	R STREET					
☐ Abatement Perform	ed Outside of Norma	l Facilit	y Hou	ırs - De	escribe	City, State, Zip C					- 0 (-2)	
Time of Abatement	7:00AM-3:30PM/	, P	M-	AN		BRISTOL, PA						
6FF SITE Scope of Work (Check	1/30/14 - 2/4	4/14	- R	ETUR	N 2/5/17							-
	an inat apply/						tainment with Ne	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		⊠ Re	enova emolit			Mini-End Gloveba	olosure ng Procedure					
⊠ ≥100 \$1 01 <u>≥</u> 200 11						☐ Non-Exe	empted (*) and No	on-Friable Proced	dure			
			Loca						Ab	atem	ent T	ype
Location			Normed So	ally lely by	Ach	Description estos Containing Ma		Amount	Re	Re	E	m
Asbestos-Containir TO BE A	BATED	100000		ance/	(i.	e., thermal systems	insulation,	(Specify	Removal	Repair	cap	Enclosure
IN Fac	cility	Cus	todia (12	Staff?		surfacing, VAT other miscelland		SF or LF)	/al		Encapsulate	ure
(13)	Yes	No			Other miscenane	eous)		1		õ	
6th th Fl. AC equipm	ent room	×			Pipe fi	tting insulation		5 LF				
5 th Fl. AC equipmen	nt room	×			Valve	insulation		2 LF				
6 th FI. Machine Rm	(#4/5 Elevators)				VAT/M	astic		350 SF				
11 th Fl. Machine Rn	n (#7/8 Elevators	\boxtimes			VAT/M	astic		440 SF				
Name of Registered W		C.	100		Waste ID No.	Cubic Yards of Waste		stered Landfill		/ 2650 T		
City, State NEW CASTLE, DI	19720			200		Disposal Date	City, State WAYNESI	BURG, OH 446	88			
Completed By (Print or		le				Signature		,	Date /		,	
Brian Scafiro	. , , ,	Estima	itor			Brian	Scalin	/il	Date 1/3	0//	14	

Date of Notification (1)	13				of Building izon	Owner/Operator (2	2)	go C	(V)	8		4
Agencies Notified Type Notifica	tion			Street	Address				6.0	,	14	- '\
⊠ EPA ☑ Initial				15 8	East Mon	tgomery Place,	Lower Level		CUS	ò	1	:
☑ DOLWD ☑ Amended					State, Zip C				TA.	1	_	25
□ DHSS	-					PA 15212			1	24	ò.	
DCA Emergence (NJAC 5:23-8) Instification		luding		1000000	of Contac			Telephone Nun	nber		7	
(NJAC 5:23-8) justification Cancellation					hony Po						, .	
						IFORMATION						
Name of Facility Where Abatement is T	aking	Place	(3)	FAC	JILIT IN	IFORMATION	Type of Facility ((4)				
Verizon Market CO	uning i	. 1000	(0)				School (K-12		21			
Street Address 95 William St							Other (i.e., pr	rivate and comme	ercial bui	ildings	S,	
City (5)	-						Square Feet	# of Floors	Blo	ig. Ag	e	
Newark							504 ⁵ 000 A 50			1500 ° 155		
County (6)				Cour	ty Code (7)(STATE USE ONLY)	Current Use (Pri	ior if being demo	lished)			_
Essex					150 (6)		Office					
Name of Monitoring Firm Hired by Build	ding Ov	wner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
USA Environmental Manageme							VIRONMENTAL					
Street Address						Street Address						
8436 Enterprise Ave						1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip Co	ode					
Philadelphia, PA 19153						BRISTOL, PA	19007					
Project Manager for Monitoring Firm			Tele	ephone	No.	Telephone No.		License No.				
Mark Jenkins			2	15-365	-5810	215-788-6040)	00509	*			
Start Date (10)	Schedu	iled C	omple	etion Da	ite (11)	Name of OSHA N	fonitor					
1 / 2 / 14	_ 2	/	14	4_/	14	BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During Abatement (0	Check	only o	ne)			Street Address					14-17-	-
☐ Facility Closed/Vacated During Entir				ment		1123 BEAVE	R STREET					
☐ Abatement Performed Outside of No	ormal F				scribe	City, State, Zip Co	ode					
Time of Abatement: 7:00AM-3:30P	M/		W	AM,	chul.	BRISTOL, PA						
Scope of Work (Check all that apply)	<u> </u>	EI	UKI) ap	7/17							-
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			novat moliti	MOTORNIC		Mini-Enc Gloveba	g Procedure	e				
			Loca	tion		∐ Non-Exe	mpted (*) and No	n-Friable Proced				
Location of		7.1	Norma			Description of	of.		-	ateme	1 80	-
Asbestos-Containing Material (ACM	1)			ely by		estos Containing Ma	iterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABATED				ance/ Staff?	(i.€	e., thermal systems surfacing, VAT		(Specify SF or LF)	NO.	≅.	aps	losu
IN Facility (13)	L		(12))		other miscellane		GF GF EF7	<u> </u>		ulat	6
		Yes	No	N/A							0	
11 th Fl Machine Rm (# 6 Freight E	-				VAT/M	astic		220 SF	⊠			
12 th FI Machine Rm (#2/3 Elevato	-				VAT/M			1,000 SF				
12th FI Machine Rm (#2/3 Elevato	+				VAT/M	astic		200 SF	×	Ш	Ш	
Mechanical Room					Fittings			25				
Name of Registered Waste Hauler SERVICE TRANSPORT GROUP	, INC		100	NJDEP Hauler II 2099	D No.	Cubic Yards of Waste		stered Landfill LANDFILL				
City, State NEW CASTLE, DE 19720				2000		Disposal Date	City, State WAYNESE	BURG, OH 446	88			
Completed By (Print or Type)	Title		-			Signature	1 1	, 1	Date /			
Brian Scafiro	Es	tima	tor			Die	Selia 1	il	1/30	/14	1	

	Pa I	
CP.	J	-
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Date of Notification (1)			26 - 26 - 2	Alom	a of Dudlet	-0.10	•,	OL.	7			2
12 /	16 / 1:	3			rizon	g Owner/Operator ((2)	6,0		6	, o	2
Agencies Notified	Type Notification			Stree	t Address			57	<u>a</u>	7		THE STATE OF THE S
⊠ EPA	☐ Initial			15	East Mor	ntgomery Place,	Lower Level	3	S	1	· · · · · · · · · · · · · · · · · · ·	المسيدة المسيدة
☑ DOLWD ☑ DHSS	Amended	12 4 F7 I	a		State, Zip (-	
□ DCA	Amendment a			Pit	tsburgh,	PA 15212		(1/2	>	دن	
(NJAC 5:23-8)	justification)	ricidani	9		e of Contac			Telephone Num	her .	_		
ii.	☐ Cancellation			An	thony Po	rta			2.2%			
				FA	CILITY IN	FORMATION			-	_		-
Name of Facility Where A	Abatement is Takir	g Place	e (3)				Type of Facility (4)				
Verizon Market CO							School (K-12)					
Street Address			,				Subchapter 8	(Other than K-12 ivate and comme)	.ildina		
95 William St							homes, etc.)	ivate and comme	ICIAI DI	mand	js,	
City (5)							Square Feet	# of Floors	В	dg. A	ge	
Newark										•		
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pric	or if being demolis	shed)		-	-
Essex						2	Office		100.5			
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
USA Environmental	Management					BRISTOL EN	VIRONMENTAL	., INC.				
Street Address						Street Address						
8436 Enterprise Ave	•					1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip Co	ode					
Philadelphia, PA 19	153					BRISTOL, PA	19007					
Project Manager for Monit	toring Firm		Tele	phone	No.	Telephone No.		License No.		_		
Mark Jenkins			2	15-365	-5810	215-788-6040	i	00509				
Start Date (10)	Sche	duled C	omple	tion Da	ite (11)	Name of OSHA M	lonitor		7.0			-
1 / 2 /	14	2 /	_ 14	<u> </u>	14	BRISTOL EN	VIRONMENTAL	INC.				
Occupancy Status During	Abatement (Chec	k only o	one)			Street Address		-				
☐ Facility Closed/Vacated	· · · · · · · · · · · · · · · · · · ·			ment		1123 BEAVER	RSTREET					1
☐ Abatement Performed						City, State, Zip Co						
Time of Abatement: 7:	<u>00</u> AM- <u>3:30</u> PM/_	P	М	AM		BRISTOL, PA						
Scope of Work (Check all	that apply)											
							ainment with Nega	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		⊠ Re □ De				Mini-Encl						
△ 2100 St 01 2200 II			111OIILIC	711		Glovebag □ Non-Exer	mpted (*) and Nor	-Friable Procedu	re			
			Locat				, , , , , , , , , , , , , , , , , , ,			atem	ant Tr	VDA
Location of			Normal			Description of				_	_	
Asbestos-Containing M TO BE ABAT			intena			stos Containing Mat		Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility		Cust	todial S	Staff?	(i.e.	 thermal systems in surfacing, VAT, 	nsulation, or	(Specify SF or LF)	l ova	air	aps	S
(13)			(12)	T	1	other miscellaned	ous)	0, 0, 2,)	=		ulat	- F
th -	and the second second	Yes	No	N/A								
11 th FI. AC equipment						e and mastic		1820 SF	×			
10 th FI. AC equipment						e and mastic		45 SF	×			
9 th FI. AC equipment re						e and mastic		35 SF	×			
6 th Fl. AC equipment ro						e and mastic		85 SF	×			
Name of Registered Waste		200	(2.00)	JDEP V auler IC	The second secon	Cubic Yards of	Name of Regist		•			
SERVICE TRANSPOR	RT GROUP, INC	; .	1.00	20990	1500 (SEE) 150	Waste	MINERVA L	ANDFILL				
City, State						Disposal Date	City, State					
NEW CASTLE, DE 19			1100				WAYNESBU	JRG, OH 44688	1			
Completed By (Print or Typ						Signature	10	/ 1 Da	te /	,	,	\neg
m ·	1 =	-A!A				1 12.	1 //	, ,,		್	T.	87

Date of Notification (1)				Name	of Building	Owner/Operator (2	2)	701.	2	\	1	
12 /	16 / 13	_		Veri	zon			Can Con	(%)		1	, -
Agencies Notified	Type Notification			Street	Address			110		19	-	T.
⊠ EPA	Initial			15 E	ast Mon	tgomery Place,	Lower Level	(20)	0	1/2		×
⊠ DOLWD	⊠ Amended	APIA	4	City, S	ate, Zip C	ode		(1)	O.	-	-	
⊠ DHSS	Amendment #2	2010 15 1005 12 10	4	Pitts	burgh, F	PA 15212				3	دل:	
☐ DCA (NJAC 5:23-8)	Emergency (in justification)	ciuaing			of Contact			Telenhana Alumb	AF (2		
(10010 0.20-0)	☐ Cancellation			Anti	nony Por	ta						
				FAC	ILITY IN	FORMATION			2			
Name of Facility Where A	batement is Taking	Place	(3)				Type of Facility	(4)				
Verizon Market CO							School (K-12					
Street Address							Subchapter &	(Other than K-12)	rial bui	dinge	í.	
95 William St							homes, etc.)		Jai Dui	unga	4	
City (5)							Square Feet	# of Floors	Bld	g. Age	е	
Newark												
County (6)		A. 6		Coun	ty Code (7	(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)			
Essex							Office				es 2000 2795	
Name of Monitoring Firm	Hired by Building (Owner (8)	ASCM I	No.	Name of Abatem	ent Contractor (9)					
USA Environmenta	l Management					BRISTOL EN	VIRONMENTA	L, INC.				
Street Address						Street Address						
8436 Enterprise Av	е					1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip C	ode .			-		
Philadelphia, PA 19	153					BRISTOL, PA	19007					
Project Manager for Mon	itoring Firm		Te	lephone l	No.	Telephone No.		License No.				
Mark Jenkins			1 2	215-365	-5810	215-788-6040)	00509				
Start Date (10)	Sched	luled Co	ompl	etion Dat	te (11)	Name of OSHA N	Aonitor					
1 / 2 /	14	2_/	_1	4 /	14	BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During	Abatement (Chec	k only o	ne)			Street Address				_		
☐ Facility Closed/Vacate				ement		1123 BEAVE	R STREET					
Abatement Performed	Outside of Normal	Facility	/ Ho	urs - Des	cribe	City, State, Zip C	ode					100.000
Time of Abatement: 7	:00AM-3:30PM/_	P	VI	AM		BRISTOL, PA	19007					
Scope of Work (Check al	I that apply)											
1		⊠ Re		dia.		☑ Full Con ☑ Mini-End	tainment with Ne	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		De				⊠ Gloveba	g Procedure					
⊠ ≥100 st ot _200 ti						☐ Non-Exe	empted (*) and No	on-Friable Procedu	re			
				ation					Ab	ateme	ent T	ype
Location			Norm	lely by	Anha	Description estos Containing Ma		Amount	R	Re	m	E
Asbestos-Containing TO BE ABA	Material (ACM)	Ma	inter	nance/		e, thermal systems		(Specify	Removal	Repair	Cap	Clos
IN Facili		Cust	10000	I Staff?		surfacing, VAT	, or	SF or LF)	<u> 20</u>	_	Encapsulate	Enclosure
(13)		Yes	(12 No		1	other miscellane	eous)				ate	"
**************************************	-4	+	-		Dine 616	ting insulation		5 LF	×			
6th th FI. AC equipmen		×		_	<u> </u>				_	-		+-
5th Fl. AC equipment				10		nsulation		2 LF	Ø		-	
6 th Fl. Machine Rm (#	4/5 Elevators)	Ø			VAT/Ma			350 SF	×			
11th FI. Machine Rm (VAT/Ma		TN 10	440 SF	×			
Name of Registered Was				NJDEP \ Hauler II	101 (170) 72	Cubic Yards of Waste		istered Landfill				
SERVICE TRANSPO	ORT GROUP, IN	C.		20990		1000	MINERVA	LANDFILL				
City, State						Disposal Date	City, State	SECRETARIST STATE OF THE SECRETARIST STATE OF		25. 100		harte.
NEW CASTLE, DE 1	19720						WAYNES	BURG, OH 4468	8			
Completed By (Print or Ty	ype) Titi	8				Signature	0 0	/ . D	ate /	_ /	.1	ě

Date of Notification (1)		N			Owner/Operator (2)	2000 2000	833		`		
12 /16 /13		Verizon										
Agencies Notified Type Notification	1	Street Address 15 Fast Montgomery Place, Lower Level										
⊠ EPA ⊠ Initial			15 East Montgomery Place, Lower Level								7	
☑ DOLWD ☑ Amended ☑ Amendment #2-1	17/14	0	CONTRACTOR CONTRACTOR	te, Zip Co			(1)		<i>-</i> :	٧.		
☑ DHSS Amendment #2- □ DCA □ Emergency (included)					A 15212		Telephone Numb	dr O	33		\dashv	
(NJAC 5:23-8) justification)		1		Contact			(Claphone recition	2	Car			
☐ Cancellation		XXXX 000 000	ony Port				Pil		_	\dashv		
			FACI	LITY INF	ORMATION	- 15 - 11 A . /		777			\dashv	
Name of Facility Where Abatement is Taking F	Place (3	3)				Type of Facility (
Verizon Market CO					School (K-12) Subchapter 8 (Other than K-12)							
Street Address						Other (i.e., pr	ivate and commer	cial buildi	ngs,			
95 William St						homes, etc.) Square Feet # of Floors Bldg. Age						
City (5)						Square Feet # of Floors Bldg. A						
Newark			100			(2)	- if haire domalis	hod\			\dashv	
County (6)			County	y Code (7)	7)(STATE USE ONLY) Current Use (Prior if being demolished)							
Essex						Office				_	\dashv	
Name of Monitoring Firm Hired by Building On	wner (8) /	ASCM N	lo.	Name of Abatem					- 3		
USA Environmental Management					BRISTOL ENVIRONMENTAL, INC.							
Street Address					Street Address							
8436 Enterprise Ave					1123 BEAVE	R STREET						
City, State, Zip Code					City, State, Zip Code							
Philadelphia, PA 19153					BRISTOL, P.							
Project Manager for Monitoring Firm		Tele	phone N	lo.	Telephone No. License No.						*	
Mark Jenkins		21	15-365-	5810	215-788-6040 00509							
Start Date (10) Sched	uled Co	mple	tion Date	e (11)	Name of OSHA Monitor							
1 / 2 / 14	/	_14	<u> </u>	14	BRISTOL ENVIRONMENTAL, INC.							
Occupancy Status During Abatement (Check	only o	ne)			Street Address							
ClosedN/acated During Entire Per	iod of A	Abate	ment		1123 BEAVER STREET							
Abstanced Performed Outside of Normal	Facility	Hou	rs - Desc	City, State, Zip Code								
Time of Abatement: 7:00AM-3:30PM/_	PA	A	AM		BRISTOL, P	A 19007						
Scope of Work (Check all that apply)							antina Deserves					
) L850					⊠ Full Co ⊠ Mini-Er	ntainment with No	egative Pressure					
≥3 sf or ≥3 lf	⊠ Rei	novai moliti	on .		☑ Gloveh	an Procedure		• 4453524				
\(\sigma \geq 160 \) sf or ≥260 lf					☐ Non-Ex	cempted (*) and N	Ion-Friable Proced				_	
	Loca							ateme	- 1	_		
Location of		d Sol	ally lely by	Ach	Description estos Containing N	Amount	Removal	Repair	Encapsulate	Enclosure		
Asbestos-Containing Material (ACM)	inten	ance/	(i.	e., thermal system	(Specify	Vou	air	aps	losi			
TO BE ABATED IN Facility		Staff?	1	surfacing, VA	SF or LF)	5		ula	ē			
(13)	Van	(12 No		1	other miscella	neous)				9		
	Yes	-					220 SF					
11th Fl Machine Rm (# 6 Freight Elev			VAT/M	lasuc		1,000 SF				E		
12th Fl Machine Rm (#2/3 Elevators)			VAT/N	lastic					-			
12th FI Machine Rm (#2/3 Elevators)			VAT/Mastic				200 SF	⊠ ⊠	분	-		
					0						L	
Name of Registered Waste Hauler			NJDEP		Cubic Yards of		gistered Landfill					
SERVICE TRANSPORT GROUP, IN	C.		Hauler I 2099		Waste	MINERV	A LANDFILL					
			2059	<u> </u>	Disposal Date	City, State						
City, State						WAYNE	SBURG, OH 44	688				
NEW CASTLE, DE 19720	<u> </u>				Signature			Date /	_ /	,		
Completed By (Print or Type) . Tit	le				1	le di	2	1/1	7/	14		

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT

		NOTIFICATI	ON OF AS		BATEMENT		heck	611	12	63		
Date of Notification (1)02/05/13		Name of Building Owner / Operator (2) NOVARTIS PHARMACEUTICALS CORPORATION Street Address 1 HEALTH PLAZA City, State, Zip Code EAST HANOVER, NJ 07936 Name of Contact KEN PIROZZI Telephone Number Telephone Number										
//		Street Add	dress				A.	ER	The			
Agencies Notified Type of Notificat			1 HEALTH PLAZA									
☐ EPA ☑ Initial ☐ Amen				e, Zip Code NOVER, NJ	راهي	Sy	PA					
☑ DOH Amen		Name of Contact Telephone Number										
☑ DOL ☐ Emer			KEN PIRO			CASO	17 P					
		FA	CILITY IN	FORMATIO	N				.(3.01		
Name of Facility Where Abatement is NOVARTIS	Taking P	Place (3)		Type of Fa	cility (4) School (K-	12)				8		
Street Address 1 HEALTH PLAZA			Subchapter 8 (Other than K-12) Other (I.e., private & cmmercial bldgs., homes, etc.)									
City (5) County (6)		County Code (7)	Square Feet # Of Floors			Buildin					
EAST HANOVER MORRIS				200,	2000-2000	2	A		40+			
		90		OFFICE/RI	e (Prior if I	oeing demo	olishea)					
Name of Monitoring Firm Hired by Blo	ig. Owne	er (8)	ASCM NO	Name of A		Contractor	(9)					
HILLMAN ENVIRONMENTAL		Sept.		LVI Demolition Services Inc.								
Street Address 1600 ROUTE 22 EAST				Street Add	ress							
City, State, Zip Code				32 Williams Parkway								
UNION, NJ 07083				City, State, Zip Code								
Project Mngr. For Monitoring Firm MIKE NEHLSEN		Telephone Nu 908-688-7800	100000000	East Hanover, NJ 07936								
	d. Comple 02	etetion Date (1	/	Telephone	Number		License I	Number				
$\frac{02}{2} / \frac{17}{2} / \frac{14}{2} - \frac{14}{2} = \frac{14}{2} - \frac{14}{2} = \frac{14}{2} - \frac{14}{2} = \frac{14}{2} $	14	973-88	4-8682			(00860					
Occupancy Status During Abatement	(Check C	Only 1)		Name of OSHA Monitor								
Facility Closed/Vacated Du	ring Enti	ire Period of			tion Service	s Inc.						
Abatement Abatement Performed Outs	eide of N	ormal Facility		Street Add	iress							
Abatement Performed Outs Hours - Describe:	siue or re-	Official i active		32 Williams Parkway								
Other - Describe:7:00ar	m-3:30pm	n		City, State, Zip Code East Hanover, NJ 07936								
Scope of Work (Check All That Apply))			Lastitani	701, 110 -							
 Demolition ≥3sf or ≥3lf >160 sf or >260 lf 		Full Containment with Negative Pressure Mini - Enclosure Glovebag Procedure										
			Non-Exempted (*) and Non-Friable Proced									
Location of	ls		Descripti	ion of			Abateme	nt Type		800		
	cation	As	bestos - C	ontaining			R		E	É		
Material (ACM) No		Material (Amount (Specify	E M	R	N C	N C			
TO BE ABATED U		e., thermal	i systems facing, VAT		SF or LF)	0	P	A	L			
(13) by			ellaneous)	,	/	V	Α	P	0			
ten						A	1	S	S			
Cus	-					L	R	L	U R			
The state of the s	nd N/A								+			
		MASTIC				20 SF	V					
BLDG 220-2ND floor	MASTIC				20 SF	<u> </u>						
									+	-		
Name of Registered Waste Hauler		NJDEP Waste	Cubic	Name of R	egistered l	andfill						
NEWARK CARTING	Hauler ID No. 4509	Yards of Waste	IESI									
City, State NEWARK, NJ		Disposal Date	City. State BETHLAH		1							
Completed by (Print or Type) STEVEN STILES	Title PROJECT MAI	NAGER		Signature	17	1		Date	100000000000000000000000000000000000000			

D 1 - (1) - (1)										10	19			-
Date of Notification (1) 12 / 16 / 13					Name of Building Owner/Operator (2) Verizon Street Address 15 East Montgomery Place, Lower Level									
Agencies Notified Type Notification					Chroni Address									
☑ EPA	⊠ Initial			Street Address 15 East Montgomery Place, Lower Level										
☑ DOLWD	⊠ Amende	79	41214		City, S	ate, Zip C								
☑ DHSS	Amendm Emerger			2	Pitte	burgh, F	PA 15212							
DCA (NJAC 5:23-8)	justificati		adding		Name	of Contact			Telenhan	ne Mumher				
(444.00.20-5)	☐ Cancella	tion			Anti	nony Por	rta	27.5						
					FAC	ILITY IN	FORMATION							
Name of Facility Where			Type of Facility			7.04								
Verizon Market CO						School (K-12) Subchapter 8 (Other than K-12)								
Street Address 95 William St							Other (i.e., private and commercial buildings, homes, etc.)							
City (5)				-				Square Feet # of Floors Bldg. Age				_		
Newark								•						
County (6)					Coun	ty Code (7)(STATE USE ONLY)	A CONTRACTOR OF THE STATE OF TH	Current Use (Prior if being					
Essex						1000 to 100 miles		Office				115		
Name of Monitoring Firm			wner (8)	ASCM	No.	Name of Abatem	7,17						
USA Environmenta	il Managem	ent						IVIRONMENTA	L, INC.					
Street Address							Street Address 1123 BEAVER STREET							
8436 Enterprise Av		City, State, Zip Code												
City, State, Zip Code Philadelphia, PA 19		BRISTOL, PA												
Project Manager for Mon	No.	Telephone No.		Licens	se No.									
Mark Jenkins	-5810	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			0509									
Start Date (10)	te (11)	Name of OSHA	Monitor						_					
								BRISTOL ENVIRONMENTAL, INC.						
Occupancy Status Durin		Street Address												
Facility Closed/Vacated During Entire Period of Abatement							1123 BEAVE	R STREET						
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement; 7:90AM-3:30PM PM-AM							City, State, Zip C							
ACE STEE 1/3	114			-			BRISTOL, PA	A 19007						
Scope of Work (Check a	ii that apply)						Full Cor	ntainment with Ne	gative Pre	ssure				
□ ≥3 sf or ≥3 lf ⊠ Renova												*		
⊠ ≥160 sf or ≥260 lf			∐ De	moiiti	on		☐ Non-Ex	ag Procedure empted (°) and N	on-Friable	Procedure	ì			
				Loca							Ab	ateme	ent T	ype
Location of Used So						١	Description			70	Z	m	m	
Asbestos-Containing	Material (AC	M)			ance/		estos Containing M e., thermal systems	Amount (Specify		1 3	Repair	2	100	
TO BE ABATED Custodia						1	surfacing, VA		or LF)	Removal	7	Encapsulate	Enclosure	
(13)				(12		1	other miscellan					late		
Yes				No	1	5 1	ile and mastic		400					-
11 th Fl. AC equipment room						1				0 SF	+			-
10 th FI. AC equipment room						+	ile and mastic			SF	X			
9 th FI. AC equipment room						-	ile and mastic		35 SF					
6 th Fi. AC equipment room						Floor tile and mastic		Messa -/B	SF	×				
Name of Registered Waste Hauler					NJDEP Waste Cubic Yards of Hauler ID No. Waste			Name of Registered Landfill MINERVA LANDFILL						
SERVICE TRANSPORT GROUP, INC.						0								
City, State							Disposal Date	City, State WAYNESBURG, OH 44688						
NEW CASTLE, DE	19720							WATRES	BUKG, C			ु	1000	
Completed By (Print of T	vne)	Title	3			98 E - 11 E - 12	Signature		,	Dat	e /	1		