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Date of Notification (1) $2 - l_0 - l_0$					f Building Owne Mrs. Denser		r (2)	ECF	1 N/	P.	Extract	7	Note: u
	ype Notification			Street A 105 Ho	ddress oward Stree	t			- U U	5/	M	15	
EPA DEP X DOL	Initial Amended Amendment	#			te, Zip Code nt NJ 07628	3 \$		FEB -	9 2012				
Ĭ DOH	Emergency justification)	(including		Name of	Contact	-	1 -		lephone N	has	1	1 1	
DCA L	Cancellation				Mrs. Denser			THEM	HALL OF		\dashv	4	
Name of Facility Where Ab	atement is Takin	g Place (3)		FACI	LITTINFORM	ξ.,	Type of F	acility (4)	ext standard - CALAST -	ir signer		774640	
Street Address		<u> </u>					Subo	ool (K-12) chapter 8 (Other (i.e. private			idinas	hom	00
105 Howard Street							etc.)	i (i.e. private	a comme	Ciai bui	lulliys	, 110111	cs,
City (5) Dumont					4		Square Fe 2500	eet # c	of Floors	3.0	31dg. <i>i</i> 50	Age	
County (6) Bergen					Code (7) USE ONLY)		Current U	se (Prior if be	ing demoli	ished)			
Name of Monitoring Firm H	ired by Building		ASCM	l No.			ent Contracto nental Serv		.C				
Street Address				Street Address 4 E Gate Drive, PO Box 483									
City, State, Zip Code	City, State, Zip Code						City, State, Zip Code Glenwood NJ 07418						
Project Manager for Monito	Project Manager for Monitoring Firm					Telep	Telephone No. License No. 703						
Start Date (10)		Scheduled	d Com	pletion [Date (11)	Name of OSHA Monitor							
2/20/17		2	10	110	- ** **								
Occupancy Status During A	batement (Chec	k Only One	∍)			Street	Address						
Facility Closed/Vacate Abatement Performed Other – Describe:						City, S	State, Zip Co	ode		-			
Scope of Work (Check All T	hat Apply)								-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf				novation molition			Mini-En Gloveba	ntainment wit closure ag Procedure empted (*) ar				re.	
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furnace roo		×		floor tile	9	2	30 SF	x					
bathroom	1			х		floor tile	9		5 SF	x			
cedar clos	et						floor tile 15 SF x						
Name of Registered Waste	Hauler		I N	JDEP W	aste Cut	oic Yards	Na	Name of Registered Landfill					
Nowark Corting				auler ID I		of Waste Cumberland County Landfill			11				
City, State Newark NJ							Disposal Date City, State Newburg PA						
Completed by Title						Signature	11		[Date /			
Andrew Scott Higgins Title President						1	M			26	7	}	

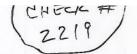
MAC Contracting, Ir	IC.
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	NL Sept. of Health & Semor Services
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ate of Notification (1)	:/12-		1	KE	ilding Owner/O	oerafor (2	2)	b	ate: 8	612	Time:	6.0	1	
gencies Notified	Type Notification		St	reet Addr		DF T	Dont		_					-
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DOL	Emergency (in	ncluding	-	ame of Co	ontact			6.17	Telep	hone Numbe	37			Name of
DOH	justification)		1		E KEK	F.2	Į,	of whitemanian						L
DCA	☐ Cancellation			FACILIT	YINFORMAT	ON			-			-	Contract of	
and English Milhors	Abatement is Taking	Place (3)	~	(Adia)			Type of Fa	acility (4)		ALL MILLION	alm ne	Talan Jesama	more, and	
RESIDEV Street Address	thal prope	erty					School Subcl	nonter R	Other	than K-12) commercial b	váklira	os. he	wres	
AIO PAC	2VIEW STR	FET					etc.)			1 1				
City (5)	=VICV 4 C			-			Square F		# of	Floors		g. Ag	용	
RIDGE!	GOON					1	200	0		4		50	-	
	7		10	County Co	de (7)		Current L	lse (Prior	if being	demolished)			
County (6) BERG	EN		10	STATE US	EONLY)		124	3101	vitio	71 :		-		-
Name of Monitoring F		Dwner (8)		ASCM	No.		of Abatem		actor (g	3)				
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Street Address				A STATE OF THE PERSON NAMED IN			Address							
Off OCC LIDER COM						105	Lowell Ros	d			4		-	-
City, State, Zip Code						City,	State, Zip C	ode						,
						Gler	Rock, NJ	07402						-
Project Manager for N	donitoring Firm			Telephi	one No.		hone No.			License No.				
			1			201	1-262-5841			00156				
Start Date (14)	100	Schedule	d Con	Ipletion D	ate (11)	Name	of OSHA rega Enviro	Monitor onnental	Servio	es inc.		-		
Start Date (16) / L		Schedule	-	ipletion D	ate (11)	On	rega Enviro	Monitor	Servio	es Inc. ,				_
Occupancy Status D	ouring Abatement (Che	ck Only On	8)		ale (11)	Orr Street 280	nega Environ Address Huver Stre	omental	Servio	es Inc. :				
Occupancy Status D El Facility Closed D Abatement Perfo	/acated During Entire armed Outside of Non	ck Only On Period of Al	e) satenx		ate (11)	Street 280 City,	nega Environ Address Huver Stre State, Zip (ormental let	Servio	es inc.				
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Occupancy Status D E Facility Closed Abatement Perfo Cother - Describe Scope of Work (Che	/acated During Entire armed Outside of Non	ck Only On Period of Al	e) satema tours	ent	ate (11)	Orr Street 280 City, Hac	nega Eaviron Address Huver Stre Stats, Zip (kensack, N	ormental let Code J 07606		es Inc.	essure			
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Date of Notification (1) 02/06/12	\$200.00			Building C Burlingto	wner/Ope	erator (2)		No IE II W				100	
	Notification	1 3	treet Add	dress h Stree	t			FER - 9 20	12	la se	1	7	
DEP A	nitial kmended kmendment #	C	ity, State	e, Zip Coo		08016		ASBESTOS CLIMINO			a contract of contract of		
☑ DOH ☐ ju	mergency (including ustification) Cancellation	1	lame of C Cindy A	Contact Crivar	o			Telenhone Num	L		.co.aco.	J. O. T.	
Name of Facility Where Abatem Residence	ent is Taking Place (3)		FACIL	ITY INFO	RMATIO	Туре	of Facility (١		same a		
Street Address 318 1/2 Jones Avenue						×	Other (i.e. petc.)	orivate & commercia	l build	_		s,	
City (5) Burlington, New Jersey 0	8016					10,0		# of Floors	5	ldg. A 5+	ge 		
County (6) Burlington			County C	ode (7) SE ONLY)		Current Use (Prior if being demolished) Home							
Name of Monitoring Firm Hired I	by Building Owner (8)	ASCM No.				Name of Aba Lilich Corp		ntractor (9)					
Street Address						Street Addre		ne					
City, State, Zip Code	The second secon					City, State, Z Woodland		ew Jersey 0742	4				
Project Manager for Monitoring	Firm	Т	elephon	e No.		Telephone No. License No. 973-225-8400 01104							
Start Date (10) 02/17/12	Scheduled 02/18/12		pletion D	ate (11)		Name of OS							
Occupancy Status During Abate						Street Addre		st					
Facility Closed/Vacated Du Abatement Performed Outs Other – Describe: 8AM Sta	side of Normal Facility H	ateme	ent			City, State, Z Union, Ne	ip Code						
Scope of Work (Check All That	Apply)					П	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novat molitic				H Mi							
						△ No	n-Exempte	d (*) and Non-Friad	T		ement	t	
Location of Asbestos-Containing Materi TO BE ABATED In Facility (13)	al (ACM) No Used Main Custoo	tenan	y y by ce/		tos Conta thermal s surfaci	cription of ining Materia ystems insul ng, VAT, or scellaneous)	ation,	Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure	
	Yes	No	N/A			01:1		1 000	v	-	-	_	
Exterior	X			Transit	e Shingles	3	1,000	X					
Name of Registered Waste Hau	iler				Cubic Y	[2007A41241] [1.154.4 #41.7 20.7 21.1541							
Lilich Corporation	18724 3						G.R.O.W.S Landfill						
City, State Woodland Park, New Jersey 07424				Disposal Date City, State Morrisville, Pennsylvan									
Completed by Tatiana Kalenikova Title Vice President						gnature Tes	1		ite 2/06/	12			

									Prince Parage	· Commence	Mana skenu			Prir	nt Fo	
		N	OTIFIC	CATION	OF ASBI	w Jersey ESTOS A 8:60 and	BATEN 12:120)	IENT	Mil			V/7 /E	- K	77	- Pries	
Date of Notification (1) 02/06/12	1-40-					Owner/Op Manage						17/11			-	
Agencies Notified Ty	ype Notification		- 1	Street Ad	dress	Bouleva		- 1	10 47	FEB	- 9 20)12	I has	拼		
EPA DEP DOL	Initial Amended Amendment #		1	City, Stat	e, Zip Co				William .	S8ES10.	CONTRO	8	j	-		
DOH DCA	Emergency (in justification) Cancellation	cluding		Name of Mike	Contact		15	2.	+6		hone Nun	her		j		
		-	FACILITY INFORMATION					- 44		-			•	OTHE:	n u C	
Name of Facility Where Aba Private Residence	tement is Taking	Place (3)						П :	of Facility (4 School (K-1) Subchapter	2)	than K-12	2)	1.63-6	Marie of the second		
Street Address 510 Paterson Plank R	oad					A Section		×	Other (i.e. p etc.)	rivate &	commercia	al build	14000000		s,	
City (5) Union City							2,50		2	loors	50	dg. A(je			
County (6) Hudson				County C (STATE U	·		Curre	ent Use (Pric	or if being	g demolish	ed)					
Name of Monitoring Firm Hi	red by Building O	wner (8)		ASCM	No.		Name of Abatement Contractor (9) Pyramid Contracting Corp.									
Street Address				-			Street 1		ss eant Aven	enue						
City, State, Zip Code					H			, State, Zip Code Íton, NJ 07013								
Project Manager for Monitor	ring Firm			Telephon	ne No.			Pephone No. License No. 01099							201 - 200	
Start Date (10) 02/18/12		Schedule 02/19/1		npletion E	Date (11)		Name of OSHA Monitor J&S Environmental Laboratories						s LLC			
Occupancy Status During A							Street 2333		ss te 22 Wes	st						
Facility Closed/Vacate Abatement Performed Other – Describe:	Outside of Norma	al Facility	Hours	ient			City, State, Zip Code Union, NJ 07081									
Scope of Work (Check All T ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	hat Apply)		enova emolit				X X	Mi Gl	ni-Enclosure ovebag Prod	ontainment with Negative						
		1	Locati	60									Abate Ty		Ĺ	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Location of Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normaly Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A								lateria s insul T, or	ation,	(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure	
Basemen	ıt	Yes	No	X		Pipe	Insula	tion		30) LF	x				
			2754		100		±					-				
Name of Registered Waste Pyramid Contracting C			H	JDEP W lauler ID 2613		Cubic of Was			Name of G.R.O.		ed Landfil nc.	1				
City, State Clifton, New Jersey							al Date		City Stat	e ville / Pe	nnsylva	nia				



Date of Notification (1)	17/12		Nai	me of Buildi	ng Owner/Operato	(2) CONTI	rset i Na	<u>.</u>	\mathbb{W}	ES	1
Agencies Notified	Type Notification	n	Str	eet Address	5 RT, E	50 11	JIII FFB .	- 9	2012		Total State of the last of the
Ø DOL Ø DED Ø BY	Amended Amendment	-	City	, State, Zip			5/		11/4	-	
□ 00H	Emergency (justification) Cancellation		Nar	me of Conta	e Breun	116	Telephone Numb	er 11.	ÜL &	-	
	1		F		FORMATION		-	+ strains on		- 1	
Name of Facility Where	Abatement is Takii	ng Place (3		70.011		Type of Facility	(4)			7	٠.,
RES IDE	FNCE .		•	*************************************			2) 8 (Other than K-12 private & commercia		ngs,		
19 GAR	BENS Ro.	00				homes, etc.			g Age		\dashv
City (5) 0 CEO	n CITY				10	Square Feet	.		y nyc		_
County (6) CAPE	MAX			SE ONLY)	(7) (STATE	V A	nor if being demolis	ned)			_
Name of Monitoring Fin	m Hired by Building	Owner	ASC	M No.	1	ment Contractor (S					_
Street Address			- 1		Street Address	S,SPRUC					
City, State, Zip Code					City State Zin (Code	DE, N.J.	080	57		
Project Manager for Mo	onitoring Firm		Telephor	ne No.	. Telephone No.	9-0472	License No.				
Start Date (10)		eduled Con			Name of OSHA	Monitor	EMM				
2 /2/ / Occupancy Status Dur	ring Abatement (Che	2/2	ne)		Suppl Address		10c= 10c.			,	
Facility Closed/Vaca	ated Dunng Entire P ed Outside of Norm	eriod of At al Facility I	atement Hours		0: 0 7:	0:40		T /	2 8 2		=
Other - Describe					M.	APLES	HODE N.			ــــــــــــــــــــــــــــــــــــــ	=
Scope of Work (Check ≥3 st or ≥3 lt ≥160 st or ≥260 lt	all that apply)	Reno	ovation olition		Mini-Er	ontainment with No nclosure pag Procedure	egative Pressure on-Friable Procedu	re			
		Is Loc		T	THOILE	xempled () and			batem Type		
Asbestos-Containing TO BE AB IN Facil (13)	Matenal (ACM) ATED lity	Used S Mainte Cus Sta	olely by nance/ odial aff? 2)	Asbe	Description stos Containing M , thermal systems surfacing, VA other miscelland	aterial (ACM) insulation, I, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	``	Yes	No N/		PANSITE		18004	X			
<u> 51D</u>	INC	++	X	1=	TLA NYTTE			Ť			
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'ame of Registered W	/aste Hauler			P Waste	Cubic Yards of Waste	The second second second second	gistered Landfill	Δ.			
K LEMCO			17	904	Disposal Date	Car Chata					
	SHADE	, N, J	-		Signature	- Wo	Date Z	1-	1		
Completed By JOSEPN	KLEMM -	V	18		Jour	ra Kely	m 2/	11	12		=

NO 1170505425

Date of Notification (1) 1/30/12					Building w Sova	Owner/O	perator	(2)		9 10		16	Th	77	- 4
Agencies Notified	Type Notification			Street A	ddress	d		ĮŪ.	II FF	'A -	9 201,				
EPA DEP DOL	Initial Amended Amendment		_		te, Zip Co a, NJ 0				L		3 Z()[,	2	1 1 1		
DOH DCA	Emergency justification) Cancellation	_		Name of Andrey	Contact v Sova		2	i		Tele	ephone N	umhér			
N		DI (0)		FACI	LITY INF	ORMATIC	N			1999.00	- MARTINE LAND	Argo.		6	
Name of Facility Where House	Abatement is Takin	g Place (3)							of Facility (4 School (K-12					4.63	
Street Address 80 Mahar Avenue								×	Subchapter 8 Other (i.e. pri etc.)				ldings	, hom	ies,
City (5) Clifton	E								re Feet	# of N/A	Floors		Bldg. N/A	Age	
County (6) Passaic	ssaic)	Current Use (Prior if being demolished) House								
Name of Monitoring Fire	m Hired by Building	97-91	ASCM	l No.				tement Cont		(9)					
Street Address	t Address					Stree									
City, State, Zip Code	, State, Zip Code						11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512								
Project Manager for Mo	nitoring Firm			Telephor	ne No.		Teleph		0.		License #00675				
Start Date (10) 2/10/12		Scheduled	d Cor	mpletion [Date (11)		Name of OSHA Monitor D&S Abatement, Inc.								-
Occupancy Status Duris	ng Abatement (Chec	k Only One	1				Street Address								
				mont					gren avent	ıe					
Abatement Perform Other – Describe:	cated During Entire I med Outside of Norm Occupied	nal Facility I	Hour	nent s	7		City, S	tate, Z	ip Code IJ 07512						
Scope of Work (Check	All That Apply)						1010	wa, 1	007012						-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	767	and the same of th		novation molition				Mir	Il Containmer ni-Enclosure ovebag Proce n-Exempted	dure				re	
		ls l	ocat	tion	-					//				emen	t
Locatio	on of	No.	rma	lly .		Desi	cription	of					Т	уре	
TO BE AB	Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used Main Custor					stos Conta thermal s surfaci other mi	ining N systems ing, VA	Material s insula T, or		(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes													Ф	937/
basen	basement					pipe i	nsula	tion		15	0 LF	x			
crawl s	Х			pipe i	nsula	tion		40) LF	Х					
Attic							floor tiles			70 SF x					
Name of Registered Wa	ete Hauler		NJDEP Waste Cubic				'ordo	rds Name of Registered Landfill							
D&S Abatement, Inc.				NJDEP Waste Hauler ID No. #20996 Cubic Yard of Waste TBD				aste Management of DA							
City, State Totowa, NJ						Disposa TBD	al Date		City, State Tullytown	n, PA					
Completed by Title				oncas		91/	hature	. 6	11			ate.	_		
Deanna Brkusanin Project mai						1	Mille	WIN	lucu	_	1	/30/1	4		

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Date of Notification (1) 1/30/12			Name of E		wner/Operato	or (2)		5 E	J W		M				
Agencies Notified	Type Notification		0.000	Street Add	dress child Ave	enue		III EE	:D -	9 2012	The state of the s				
EPA DEP DOL	Initial Amended Amendment	#			e, Zip Cod Plains, N	e IJ 07950	1		.1.)		The same of the sa	and I			
DOH DCA	Emergency (justification) Cancellation	including		Name of C			ļ	RODE	Tele	phone Num	ber'				
		- Di (0)		FACIL	ITY INFO	RMATION	Type	of Facility (4	-w/22, c	ex logs to solve			1		
Name of Facility Where House	Abatement is Takin	g Place (3)						School (K-12	2)	- 4b IZ 40	,	V.P.W	e was		
Street Address 37 Fairchild Avenu	ıe						X	Subchapter (Other (i.e. pretc.)			al build			s,	
City (5) Morris Plains							Squar N/A	e Feet	# of N/A	Floors		dg. A /A	ge		
County (6) Morris				County Co			Current Use (Prior if being demolished) House								
Name of Monitoring Fir	Name of Monitoring Firm Hired by Building Owner (8)							ement Con ement, Inc		(9)					
Street Address							et Addres Roseng	s gren Aver	iue	-					
City, State, Zip Code			1		City, State, Zip Code Totowa, NJ 07512										
Project Manager for Mo	onitoring Firm		1	Telephon	e No.	Tele	ephone No. License No. #00675								
Start Date (10) 2/09/12		Scheduled 2/10/12	Com	pletion D	ate (11)	100000000000000000000000000000000000000	Name of OSHA Monitor D&S Abatement, Inc.								
Occupancy Status Dur	ing Abatement (Chec	ck Only One)				Street Address 11 Rosengren avenue								
Abatement Perfor	acated During Entire rmed Outside of Norr	Period of Ab nal Facility I	atem Hours	ent		City	11 Rosengren avenue City, State, Zip Code Totowa, NJ 07512								
Scope of Work (Check						_ 10									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova				Mir Glo	ll Containme ni-Enclosure ovebag Proc	e cedure						
		Т		Т			L No	n-Exempled	1 () an	u Non-Friat	able Procedure Abateme			t	
Locati	ion of	No	ormal			Descript	ion of				-	T	/pe	Ι	
Asbestos-Containi TO BE A In Fa (1:	ntena dial S (12)	Staff?		tos Containing thermal system surfacing, other misce	ems insula VAT, or	ation,	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure			
base	No X	N/A		pipe insu	ulation	+	- 7	75 LF	X		-				
- 5436				Pipi											
									1						
Name of Registered Waste Hauler				0.0000000000000000000000000000000000000			Yards Name of Registered Landfill								
				20996	110.	TBD									
City, State Totowa, NJ						Disposal D TBD	ate	City, Star		Α					
Completed by Deanna Brkusanin Title Project ma				anager	Porti	Signa	lure WWW	Mille		1.70%	ate /30/1	2			

MO 174584360

Date of Notification (1) 1/26/12					Building Ow d Kinder	ner/Operator	(2)	BIWI		1	200		
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendment	#		City, Stat	ldress mingdale / e, Zip Code ield, NJ 01		FEI L	R - 9 2012					
DOH DCA	Emergency (justification) Cancellation	including		Name of Richard	Contact d Kinder		Carling and an arrangement of the contract of	Telephone Nu	mber				
Name of Facility Where A house Street Address 34 Martin Street	batement is Taking	g Place (3)		FACIL	LITY INFOR	MATION	Type of Facility (School (K-1 Subchapter			dings,	home	es,	
City (5) Bloomfield							Square Feet N/A	# of Floors N/A	1,333	ldg. A	ge		
County (6) Essex				County C (STATE U	ode (7) SE ONLY) _		Current Use (Prior if being demolished) house						
Name of Monitoring Firm N/A	Hired by Building (Owner (8)		ASCM	No.	512 55 55 55 55 55	of Abatement Cor Abatement, In						
Street Address						100000	Address losengren Ave	nue					
City, State, Zip Code							State, Zip Code wa, NJ 07512						
Project Manager for Mon	toring Firm			Telephon	e No.	365-110-10	Telephone No. License No. 973-345-8685 #00675						
Start Date (10) 2/08/12		Scheduled 2/09/12	Cor	mpletion D	Date (11)	1000000	Name of OSHA Monitor D&S Abatement, Inc.						
Occupancy Status During Facility Closed/Vaca Abatement Perform	ited During Entire F	Period of Al	oaten			11 R	Address Losengren Avel State, Zip Code	nue					
Scope of Work (Check Al		uni-ani-				Toto	wa, NJ 07512						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	, ,,,,,,,	-	Renovation Demolition				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
	*		deat							Abate	ement	1	
Location Asbestos-Containing TO BE AB/ In Facili (13)	ntena	ely by ince/ Staff?	(i.e. the	Description Containing I ermal system surfacing, V ther miscella	Material (ACM) is insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure			
baseme	ent		X			pipe insula	ntion	50 LF	Х				
basaem	ent		X		floo	or tile and	mastic	250 SF	х				
Name of Registered Was	to Hauler			NJDEP W	aste I C	Cubic Yards	Name of	Registered Landfil					
D&S Abatement, Inc			H	lauler ID 20996	No. o	f Waste BD		Management o					
City, State Totowa, NJ						Disposal Date	City, Stat						
Completed by Deanna Brkusanin		Title Projec	t ma	anager		Signatur	Com h lui		ate /26/12	2			

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

GAC Project # 312-12					Name of Building Owner/0	Operator (2)		11 11	/ [6]	17	.		
Date of Notification (1) February	6 201	2			NJ TRANSIT HEAD	QUARTE	RS			Ш	21		
Agencies Notified	0, 201	Notification	Type	n de la companya de l	Street Address ONE PENN PLAZA		FR -	9 20	12		<u> </u>		
□EPA		□ Amend			City, State, Zip Code			 	12		Araba co.		
☐ DCA		⊠ Emerg			NEWARK, NJ 0710) {	Tolon	hone Nu	mher	-+			
X DOL			cation att		MR. RUSSEL SAMA	NPOO AC	ja releu	HOHE NO		9	j		
DEP- No Longer REQUIRE	D	☐ Cance			MR. RUSSEL SAIVIA	ANOU	-	-	B		40		
X DOH		. Company		FACILITY IN	FORMATION	5a	150	energy and the	Commence (see property	and,	i		
The state of the s	nt in Taki	ing Place (3)		PACIEITIN	Type of Facility (4)					nedame.	- (1) - 1		
Name of Facility Where Abateme MARKET STREET BUS	GARA	GE			School (K-12) Subchapter 8 (other than	n K-12)							
Street Address 16 MARKET STREET					Other (i.e. private & cor	mmercial buil of Floors:	dings, ho 2 <u>Bldg.</u>	mes, etc Age:	.) 60+ yea	ars			
City (5) PATERSON	ounty (6)	SAIC		Code (7) se Only)	Current Use (prior if being	g demolishe	d): BUS	GARA	GE				
Name of Monitoring Firm Hired b	y Bldg. C	Owner (8)	ASCM N 00003		Name of Contractor (9) GREENWOOD ABA	TEMENT (CONSU	LTAN	rs, inc				
				_	Street Address								
Street Address 1253 NORTH CHURCH	ET		268 MAIN STREET										
City, State, Zip Code	-	100000000000000000000000000000000000000			City State, ZipCode								
MOORESTOWN, NJ	08057	•			BUTLER, NJ 07405		11	a a Niverale					
Project Manager for Monitoring		Telephone			Telephone Number		Licen	se Numb	<u>jei</u>				
JIM GUILARDI		856-84 Fax 856	0-8800 6-840-881	15	973-492-0477 00840								
Scheduled Start Date (10) 02/07/12	******	Scheduled 02/08/1	Completion 2	n Date (11)	Name of OSHA Monitor ENVIROVISION, IN	C.				4.24-200			
A STATE OF COLUMN ASSESSMENT OF THE STATE OF		(Ob a also ambi	anal		Street Address				- 12				
Occupancy Status During Aba Facility Closed/Vacated During Aba	itement (iro Poriod o	f Ahatemer	nt									
☐ Abatement Performed Out	eide of N	lormal Facili	ity Hours - I	Describe	20-21 WARGARAW	ROAD	V			-			
SOther – Describe: Work	area V	acated a	nd isolat	ed from	City, State, Zip Code								
remainder of building 5:00 PM	throug	hout aba	atement.	8:00 AM -	FAIRLAWN, NJ		1 10 10 10 10 10 10 10 10 10 10 10 10 10						
Source of Work (Check all that	apply)				IX	Full Contai	nment w	ith Nega	itive Pres	sure			
				X Renovatio	-	Mini-Enclos							
\ge 3 sf or \ge 3 lf				Demolition		Glovebag F		е					
	60 If			Demoillo		Non-Exemp	oted (*) a	nd Non-	Friable P	rocedu	ire		
The Containing	a lel	ocation Norr	nally Used	Description of A	sbestos Containing Material	Amo	ount	Abate	ment Typ	<u>e</u>			
Location of Asbestos-Containin Material (ACM) in Facility (13)	Sol	ely by Maint.	/Custodial	(ACM) (i.e. the	rmal systems insulation, surfa	cing, (Spe	ecify SF	Remov	ve Repair	Encap	Enclose		
Material (view, in the sylvanian)	100,000	ff? (12)	NIA	VAT, or other m	niscell.)	0, 2	. ,						
STORAGE ROOM	YES NO NA				LASTER	<23	3 SF	X					
STORAGE ROOM _													
		I NIDED V	Vaste Haule	r ID#	Cubic Yards of Waste:		Nam	e of Rec	istered La	andfill			
Name of Reg. Waste Hauler See Hauler Below #1 &	2	See Bel		110 #	5 CY		IES	I – Bet	hlehem,	PA			
See Hauler Below #1 &	See naulei Below #1 & 2						G.F	R.O.W.S rrisville	S. Landf e, PA	111			
		1	oulto-to To	Rutler NI 07	105	Disposal	Date		City, Sta		Will D4		
Notes: Hauler #1) Greenwood Abatement Consultants, Inc. – Butler, N. NJDEP # 12561 Hauler #2) Newark Carting, Inc., Newark, NJ 04509				e. – Butter, 143 07-	103	02/08/1	12		100 Nev Morrisvi 215-736	lle, Pa 1			
NJ DEP # 4509				~- **	Signature		Date						
Completed by (Print or Type) RAYMOND C. PEDALINO SENIOR PROJECT MANAGER				10	12	Fel	bruary	6, 201	2				
9)		MANAG	EK						~				

V2/V1/2014 14.10 FAA

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Print Form	0.00
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Date of Notification (1) 02/07/12 Ck#: 181	8 \$200		Na Fa	me of 8 airleigh	uilding Ow Dickins	mer/Operator	(2) sity			signature		مرده	00	
Agencies Notified	Type Notification			reet Add	ress ver Road	d E			Date:	V E	me: 5	.0	<u> </u>	
EPA DEP DOL	Initial Amended Amendment		Cit	v. State	Zip Code		56	FFD	_ 0	2010				
DOH DCA	Emergency (in justification) Cancellation	nctuding		ame of C	ontact orszyca	A.	1,1	FEB	⊃Te	leahone Num	bet			
LI DOA	a danosiano.				70	MATION		AST LCT	ne nere	101 0	+			
Name of Facility Where A FDU, Madison Can	Atlatement is Taking nous, Florence T	Pisœ (3) wombley	Don	ทร		L.		Subchen	K-12)	ner than K-12)		-		
Street Address 285 Madison Avenu	ue					W	X		e. private	& commercial of Floors	l buildin	ngs, h		š.
City (5) Madison, New Jers	ey 07940						20	0,000	2		55			
County (6) Morris				OUNTY CO	ode (7) SE ONLY)		U	niversity		eing demollah	ea)			
Name of Monitoring Firm Environmental Des		Owner (8)		ASCM	No.	Lilio	ch C	Abatement of Corporation		or (9)				
Street Address 5434 Kings Avenue	e Suite 101					608	Mo	dress Bride Ave	alter bearing					
City, State, Zip Code Pennsauken, New	Jersey 08109		~			Wo	odla		New J	ersey 0742				
Project Manager for Mo Tom Pruno	nitoring Firm		1 2	elephon 09-74	e Ne. 4-7462	973	3-22	ne No. 5-8400		License N 01104	0.		~~	
Start Date (10) 02/15/12		Scheduled 02/16/12		plation D	ate (11)			OSHA Mon ovironmer		os				
Occupancy Status Duri								ldress Route 22 \	Vest					
Facility Closed/Va Abatement Perfor Other – Describe:	cated During Emire mec Outside of Norr 8PM Start	Period of Ac mail Facility H	eteme fours	ent				te, Zip Code New Jer)83				
Scope of Work (Check 3 st or 23 ff 2160 st or 2260 lf			enovat enoliti					Mini-Endo	osure Procedu	vith Negative F re and Non-Frist	ole Pro			ıt
		10000	ocatio	90000		Descript	inn n	d.			_		pe	1
Locati Asbestos-Containir TO BE A In Fa (13)	ng Material (ACM) BATED cility	Mair Custo	(12)	nice/ staff?	Asbest (i,e.	tos Containin thermal systi surfacing, other misce	g Ma ems i VAT	iterial (ACM insulation, , or)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A		rsi Wet W	ran	& Cut	-	30 LF	X	1	<u> </u>	\dagger
Boiler	Kodm	+												上
											+-	-	-	+
Name of Registered W	/aste Hauler		H	JDEP V lauler ID 8724		Cubic Yard of Waste	is	G.F	R.O.W.	pistered Landf S Landfill	all .	1		<u> </u>
City, State Woodland Park, N	ew Jersey 0742	4				Disposal D 02/17/12		Mo		, Pennsylva				
Completed by Tatiana Kalenikov		Title Vice	Presi	ident		Signa	ture	coul	ale		ate)2/07/	12		

Cubic Yards Name of Registered Landfill NJDEP Waste Name of Registered Waste Hauler Hauler ID No. of Waste G.R.O.W.S Landfill Lilich Corporation 18724 Disposal Date City, State City, State Morrisville, Pennsylvania 02/17/12 Woodland Park, New Jersey 07424 Date Signature Completed by

Vice President

ASB-41 (R-05-08)

Tatiana Kalenikova

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

02/07/12

Date of Notification (1)				Jame of F	Building O	wner/Opera	tor (2)	AE C	1.00	11 7/7 1		100	- 32	\neg
1/26/12			1	A Molly	Compa		101 (2)	XI	7 LD	u v L	-11			
	ype Notification			Street Add PO Box			The Distriction of the Control of th	FE FE	В -	9 2012		M	i.	
EPA DEP DOL	Amended Amendment				e, Zip Cod Orange,	e NJ 07079		L	STOP OF	Withou a				
DOH DCA	Emergency (justification) Cancellation	including .	140.6	Name of C				5-16-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		hone Num			39	
Name of Facility Where Ab	atement is Takin	g Place (3)		FACIL	ITY INFO	RMATION		of Facility (4		The Secondary	- V - V - V/AL	no suite		
Street Address 18 Vernon Ave			2029					School (K-1) Subchapter Other (i.e. p	8 (Other	than K-12 commercia) Il build	ings, l	nome	s,
City (5) Hamburg	,		1					etc.) e Feet	# of I	Floors		dg. Ag	je	
County (6) Sussex				County Co	ode (7) SE ONLY)		2000	nt Use (Prid		Anaryon	ed)			
Name of Monitoring Firm H	lired by Building	Owner (8)		ASCM	No.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	me of Abat	ement Con ement, In		9)			4050000	
Street Address						Str	eet Addres	Chromosop and the						
City, State, Zip Code						Cit	y, State, Zi	p Code						
Project Manager for Monito	oring Firm			Telephon	e No.	Te	ephone No 73-345-8	o		License N	0.		199	
Start Date (10) 2/13/12		Scheduled 2/14/12	Com	pletion D	ate (11)	Na	me of OSH	A Monitor ement, In	c.					
Occupancy Status During		ck Only One		100		Str	eet Addres							
Facility Closed/Vacate Abatement Performe Other – Describe:	d Outside of Norr	Period of Ab nal Facility F	atem lours	ent	West and a second	Cit	y, State, Zi							
Scope of Work (Check All		W-12-12-12-12-12-12-12-12-12-12-12-12-12-					olowa, N	0 0 0 1 2			-		V-25-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	777		nova molit				× Mir	l Containmoni-Enclosure ovebag Produces n-Exempte	e cedure				9	
		1.1	ocati				140	II-Exemple	u () and	THOTI-THE		Abate	ement	
Location of Asbestos-Containing Machine TO BE ABA In Facility (13)	//aterial (ACM) TED	Used Main Custo	ormal Sole itenai	ly ly by nce/		Descriptos Containion thermal sys surfacing other misc	ng Materia tems insula , VAT, or	ation,	(S	mount pecify or LF)	Removal	Repair	e Encapsulate	Enclosure
baseme	nt	163	X	107		pipe ins	sulation		9	9 LF	Х			
Dustine														
			-		Control of the Contro									
		1				OHE							10	
Name of Registered Wast	e Hauler			JDEP W		Cubic Yar	ds	PERSONAL SECTION	3550	red Landfil				
D&S Abatement, Inc.	,			lauler ID 20996	NO.	of Waste TBD				gement o	f PA			
City, State Totowa, NJ						Disposal I	1	City, Sta						
Completed by Deanna Brkusanin		Title Projec	t ma	anager		Sign	Mille	Weep la	lui		ate /26/1:	2		

Date of Notification (1) 1/23/12		-			Building Sturchic	Owner/Ope	erator	(2)		1 9	<u> </u>	<u>VI 1</u>			
	ype Notification		7-7-3	Street A		Street, A	APt 6	6C	111	FEB	- 9 2	2012	L	刘	
DEP DOL	Amended Amendment				te, Zip Co ork, NY	ode 10009			i i i	48BE33	US CONTR	ÚL &		-	
DOH DCA	Emergency (i justification) Cancellation	ncluding		Name of Larry S	Contact Sturchio			i in	***		ephone Nu	ımber			Market .
Name of Facility Where Aba	atement is Taking	Place (3)	FACII	LITY INF	ORMATION	N		of Facility (4	950 200					r' 4,5
Street Address 646 Norman Place								×	School (K-1: Subchapter Other (i.e. pletc.)	8 (Othe			dings	, hom	es,
City (5) Westfield									re Feet	# of N/A	Floors		Bldg. /	Age	
County (6) Union				County C)	_	Curre Hou	ent Use (Prio se	r if bei	ng demolis	shed)			
Name of Monitoring Firm Hi N/A	red by Building C	wner (8)		ASCM	No.				tement Con ement, Inc		(9)				
Street Address			0.000				11 R		gren Aven	ue					
City, State, Zip Code							Toto	wa, N	ip Code J 07512						
Project Manager for Monitor				Telephor		(973-	none N 345-8	685		License #00675				
Start Date (10) 2/03/12		2/04/12	!	mpletion [Date (11)				HA Monitor ement, Inc	c.					
Occupancy Status During A Facility Closed/Vacate Abatement Performed Other – Describe: Occ	d During Entire P Outside of Norm	eriod of A	bater	ment s		0	11 R City, S	tate, Z	gren Aven ip Code	ue			OO 7 TE		
Scope of Work (Check All T			- 10				loto	wa, N	J 07512	77					20000
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emoli				×	Mir	I Containme ni-Enclosure ovebag Proc n-Exempted	edure			(3)	re	
			Locat										Abat	emen ype	t
Location of Asbestos-Containing Ma TO BE ABATE In Facility (13)	aterial (ACM)	Used Mai	d Sole ntena	ely by ance/ Staff?		Descr stos Contair thermal sy surfacin other mis	ning M stem: g, VA	Material s insula T, or		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
basemen	•	Yes	No X	N/A		pipe in	- Ila	tion		0	5 LF	v	-	е	
basemen			X				or tile				00 Sf	X	-		
Name of Registered Waste	Hauler		TN	NJDEP W	aste	Cubic Ya	ards		Name of F	Registe	red Landfi	II			
D&S Abatement, Inc.			H	lauler ID I 20996		of Waste TBD			Waste N						
City, State Totowa, NJ						Disposal TBD	Date		City, State Tullytow						
Completed by Deanna Brkusanin		Title Projec	ct Ma	anager		Sigr	nature	· /	(1)		1000	ate /23/1:	2		

NO 19308525985

Date of Notification (1) 02/06/2012					f Building ry City A		Operator (ates	2)		9		V ji	3	P	1	
Agencies Notified	Type Notification			Street A	ddress	nue	*****		F	: D -	- 9 2	010				
EPA DEP DOL	Initial Amended Amendment #				ite, Zip Co yn, NY					. 0	3 4	UIZ	1	and J	The second second	
DOH DCA	Emergency (in justification) Cancellation	ncluding			Contact Hovan			<u></u>	4000	Te	lephone	Numbe	r		NAC THE PARTY	
		******		FACI	LITY INF	ORMAT	ION		100 A. A.C.	158	Ale Take				1	
Name of Facility Where Empty Building Street Address	Abatement is Taking	Place (3))					☐ Scl	Facility (4 hool (K-1) bchapter	2)	or than l	K-12\			•	
891 Newark Avenu	ie .							× Oth	ner (i.e. p .)	rivate	& comm	ercial b	uild	lings	, hom	es,
City (5) Elizabeth								Square 500,00		5	f Floors		1000	ldg. <i>F</i> 0+-	Age	
County (6) Union				County (Code (7) JSE ONLY	,			Use (Prio Buildin		ing demo	olished)			
Name of Monitoring Firm	n Hired by Building O	wner (8)		ASCN	No.				nent Con							
Street Address	- p			1			Street A	ddress								
City, State, Zip Code		Mar -	*****			City, Sta	te, Zip (Code								
Project Manager for Mor	nitoring Firm		Telephor	ne No.		Telepho	ne No.			Licens		- 345				
Start Date (10)		Schedule		mpletion i	Date (11)		973-86 Name of	f OSHA			0113					
02/17/12		02/21/1					Ameri	7								
Occupancy Status Durin		51 10 10 10 10 10 10 10 10 10 10 10 10 10					Street A		h Stree	t						
	cated During Entire Pened Outside of Norma						City, Sta	ite, Zip (
Scope of Work (Check A	All That Apply)		-								rage or more			-		-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Toronto .	enova emoli				XX	Mini-E Glove	ontainme Inclosure bag Proc	edure						
				1				Non-E	xempted	(*) an	d Non-F	riable F				
		2,750	Locat orma										1		emen pe	i
Location Asbestos-Containing TO BE AB In Faci (13)	g Material (ACM) <u>IATED</u> lity	Used Mair	l Sole	ly by	Asbes (i.e.	tos Con thermal surfa	scription of taining Ma I systems i cing, VAT, miscellane	terial (A insulatio , or	CM) n,	(5	mount Specify or LF)	. Comover	Domousi	Repair	Encapsulate	Enclosure
North side of the blo	ding-ground floor		x	lii .	pr	eclean	ing unde	er pipe		40	0 S.F.	x	1			
North side of the blo	ding-ground floor		х			pipe	insulation	on		12	0 L.F.	x	1			
												+	+			
Name of Registered Wa	ste Hauler	1	10000	JDEP W		4	Yards	N	lame of R	Registe	red Lan	dfill				
Atlantic Carting			7 (57)	lauler ID 6085	No.	of Wa		0	a.R.O.V	v.s.						
City, State Wayne, NJ						A PROCESSION OF	sal Date impletion		ity, State Norrissy		PA					
Completed by Marko Stankovic		Title Presio	dent			S	Signature 1014	0/1	Tour	vcu	0	Date 02/06	6/20	012		

Date of Notification (1)				Name of	Building (Owner/Opera	tor (2)			1-1	3-1	1	1	
	ary 07, 2012							ewal, LLC					1	
Agencies Notified	Type Notification	0. 1 00 10. 10. 10.		Street Ac		DOTO OTDA	TI I CII		EB - 9 20	110		111	 	
53	-			433 Rive			1		ED 3 AL	IIZ		and .	- ACESTA A S.	
EPA DEP	Initial Amended		-		te, Zip Co	de					-		1	
DOL	Amendment	#2	_	110000000000000000000000000000000000000		NJ 08904	1	ASE ASE	staros comad	LX	~1		C STATE OF S	
	Emergency	(including	-	Name of		10 00001		E	Telephone	lumbe	er		j	
DOH DCA	justification) Cancellation			Jason K			E.		-	-			5	
						RMATION	\$40		-			2	-T_ 425 E	
Name of Facility Where	Abatement is Takin	g Place (3)	- 171011		71	Тур	oe of Facility (4)					
Entron Industries								School (K-12	0					
Street Address		ASSESSED RESIDENCE						Subchapter 8	(Other than K					(%)
418 State Highway 7	'Ω							Other (i.e. pr etc.)	ivate & comme	rcial t	build	ings,	home	es,
City (5)	9		-	353////			Squ	uare Feet	# of Floors	_	В	dg. A	ge	
	NI I											_		
Marlboro Township, I County (6)	NJ			County C	ode (7)		Cu	rrent Use (Prior	r if being demo	lished	1)			
					ISE ONLY)		0		busines					
Monmouth Name of Monitoring Firm	Hirod by Building	Owner (9)		ASCM	No	Na	me of A	batement Cont	11 or 5 or 5	-		-	-70-53	
Control of the Contro	i mired by building	Owner (o)		ASCIVI	NO.	1000000								
EHS Environmental				1			eet Add	K Group, LL	.0.					<u> </u>
Street Address							2200000	A V	OTE 000					
411 Southgate Court	, Suite E							gs HWY N, S	STE 209					
City, State, Zip Code								, Zip Code						
Mickleton, NJ 08056	direction of the second of the							II, NJ 08034						
Project Manager for Mon	itoring Firm			Telephor			ephone		License	No.				
Jack Carney				856-223				- 5000	00781					
Start Date (10)	5	Schedule	ed Co	mpletion [100000		SHA Monitor						
12/26/1				4/30/12	2		minetary services	K Group, LL	.C.			برورون	100-100	8 - 12 11000
Occupancy Status Durin	g Abatement (Ched	ck Only On	ne)				eet Add							
Facility Closed/Vac	ated During Entire	Period of	Abate	ment				gs HWY N,	STE 209			-		
Abatement Perform	ed Outside of Norn	nal Facility	Hour	's		Cit	y, State	, Zip Code						
Other - Describe:						— Che	erry H	ill, NJ 08034						
Scope of Work (Check A	II That Apply)						Pagament							
>3 sf or ≥3 lf			Renov	ation				Full Containme		e Pre	ssur	е		
≥160 sf or ≥260 lf			Demol	ition				Mini-Enclosure						
								Glovebag Proc Non-Exempted		ble Pr	oceo	dure		
		Т.							`				emen	t
		0.000	Loca Norma									T	/pe	
Location Asbestos-Containing				ely by	Ashesi	Descrip tos Containir		rial (ACM)	Amount				m	
TO BE AB		100000	intena			thermal syst			(Specify		R	ת	nca	Ē
In Facil	lity	Cus	todiai (12)	Staff?		surfacing, other misce			SF or LF)		Remova	Repair	sqe	Enclosure
(13)			, , ,	-i		other misce	enaneou	15)			val	air.	Encapsulate	Le Le
		Yes	No	N/A					T.					
see attac	ched		X			see att	ached		see attache	ed \	X			
SCC alla	Crica	+	/ `	\						- /				
		-					-					_		
			W Z Z											
Name of Registered Was	ste Hauler			NJ DEP W Hauler ID		Cubic Yard of Waste	ds	Name of F	Registered Land	dfill				
Farabald Marris O	artina			Hauler ID		TB	D	GROWS						
Freehold / Newark C	arting			139	39	Disposal D		City, State		-		-		n . 4 m
City, State	EE					4/30		Morrisvill						
Freehold / Newark, N	1J	Title				Signe		IVIOTISVIII	C, FA	Date		-		
Completed by		Title				Siglie		/						
Mike Cooper		Presid	ent							2/7/1	۷	los serios		

Date of Notification (1)			T	Name of E	Building O	wner/Operator	(2)		E C E	Wi	Si		
Decer	mber 02, 2011		C	Camelot	at Marlb	oro Urban I	Renev	val, LLC			79/		i i
Agencies Notified	Type Notification			Street Add	dress				A			4	
	Initial		4	33 Rive	r Road			10 11	FEB - 9 2	2012	1	21	
EPA DEP	Amended			City, State	e, Zip Cod	е		1			1	deline	
DOL	Amendment		- F	Highland	Park, N	IJ 08904		-	ASDESTOS CONTR		·	- Aller	
D POU	Emergency (i	ncluding		Name of 0					Telephone Nun	nber		1	
DOH	Cancellation			ason Ka	aplan			*Cons	4		Charge Street,	الـــــا	
						RMATION	***				Trace:		Ť
Name of Facility Where	Abatement is Taking	Place (3))				Туре	of Facility (4)	7	F 40 - 864	Children	
Entron Industries							П:	School (K-1	2)				
Street Address								Subchapter	8 (Other than K-12				
440 Ctata Highway	70								orivate & commercia	al build	lings,	home	es,
418 State Highway	79				- 11 - - 2 11			etc.) re Feet	# of Floors	В	ldg. A	ae	_
City (5)							Oqua	0 1 001	61 / 16616			.5-	
Marlboro Township,	NJ			Carratic C	ada (7)		Curro	nt Lleo (Pri	or if being demolish	ned)			
County (6)				County Co			Curre	iii USE (Fii		ieu)			
Monmouth									business				
Name of Monitoring Fire	m Hired by Building (Owner (8)		ASCM	No.			tement Cor	DESCRIPTION OF THE PROPERTY OF				
EHS Environmental						100000000000000000000000000000000000000	-	Group, L	LC.				
Street Address						Street	t Addres	SS					
411 Southgate Cour	rt, Suite E					1500	Kings	HWY N,	STE 209				
City, State, Zip Code			OF HELDING	1200000		City, S	State, Z	ip Code					
Mickleton, NJ 08056	3					Cherr	y Hill,	NJ 0803	4				
Project Manager for Mo				Telephon	e No.	Telep	hone N	0.	License N	ο.			
Jack Carney	•		2	356-223-	-0080	(973)	759 -	5000	00781				
Start Date (10)		Schedule		npletion D				HA Monitor					
12/19/	11			3/31/12		The N	JACK	Group, L	LC				
Occupancy Status Durin		k Only On	6)	0/0 1/ 12			t Addre			-			
									STE 209				
Facility Closed/Va	cated During Entire F ned Outside of Norm	Period of A	Abater	ment				ip Code	O1L 203		-	-	
Other - Describe:	nea Outside of North	al Facility	Hour	•					4				
						Cherr	у пііі,	NJ 0803	4				
Scope of Work (Check	All That Apply)	_											
≥3 sf or ≥3 lf		The same of	Renova						ent with Negative F	ressu	re		
≥160 sf or ≥260 lf			emoli)	tion				ni-Enclosur ovebag Pro					
							X No	n-Exempted	(*) and Non-Friable	Proce	dure		
		le le	Locat	ion					P2012-202-1-022-02-1-0-1			emen	t
V = 0.		100	Norma	2000		Descriptio	n of				т.	pe	
Location	on of	10.50	d Sole		Asbesto	os Containing		L(ACM)	Amount			m	
Ashestos-Containin	g Material (ACM)						Matchia				1000	nce	Liciosara
Asbestos-Containin TO BE Al		Ma	intena	S1400000113-1		thermal system	ns insul		(Specify	Re	70		0
TO BE AL	BATED cility	Ma		Staff?		thermal system surfacing, V	ns insul AT, or	ation,	(Specify SF or LF)	Remo	Repa	nsde	
TO BE A	BATED cility	Ma	todial	Staff?		thermal system	ns insul AT, or	ation,		Removal	Repair	Encapsulate	l e
TO BE AL	BATED cility	Ma	todial	Staff?		thermal system surfacing, V	ns insul AT, or	ation,		Removal	Repair	psulate	ure
<u>TO BE Af</u> In Fac (13	BATED Cility)	Ma Cust	todial (12)	Staff?		thermal system surfacing, V other miscella	ns insul AT, or aneous)	ation,		Removal	Repair	psulate	ure
TO BE AL	BATED Cility)	Ma Cust	todial (12)	Staff?		thermal system surfacing, V	ns insul AT, or aneous)	ation,	SF or LF)	Removal	Repair	psulate	ure
<u>TO BE Af</u> In Fac (13	BATED Cility)	Ma Cust	todial (12)	Staff?		thermal system surfacing, V other miscella	ns insul AT, or aneous)	ation,	SF or LF)	Removal	Repair	psulate	
<u>TO BE Af</u> In Fac (13	BATED Cility)	Ma Cust	todial (12)	Staff?		thermal system surfacing, V other miscella	ns insul AT, or aneous)	ation,	SF or LF)	Removal	Repair	psulate	d
TO BE AI In Fac (13	BATED cility) ached	Ma Cust	No	Staff?	(i.e. t	thermal system surfacing, V other miscella	ns insul AT, or aneous)	ation,	SF or LF)	X	Repair	psulate	a
<u>TO BE Af</u> In Fac (13	BATED cility) ached	Ma Cust	No	Staff?	(i.e. t	thermal system surfacing, Vo other miscella see attac	ns insul AT, or aneous)	Name of	SF or LF) see attached Registered Landfil	X	Repair	psulate	a
TO BE AI In Fac (13 see atta	BATED cility) ached aste Hauler	Ma Cust	No	N/A NJ DEP W	(i.e. t	thermal system surfacing, Voother miscella see attace Cubic Yards of Waste TBD	ns insul AT, or aneous)	ation,	SF or LF) see attached Registered Landfil	X	Repair	psulate	
TO BE AI In Fac (13 see atta	BATED cility) ached aste Hauler	Ma Cust	No	N/A NJ DEP W. Hauler ID I	(i.e. t	thermal system surfacing, Vo other miscellands see attack Cubic Yards of Waste	ns insul AT, or aneous)	Name of	SF or LF) see attached Registered Landfil	X	Repair	psulate	
Name of Registered Wark (City, State	BATED cility) ached aste Hauler Carting	Ma Cust	No	N/A NJ DEP W. Hauler ID I	(i.e. t	cubic Yards of Waste TBD Disposal Date 3/31/1	ns insul AT, or aneous) ched	Name of	SF or LF) see attached Registered Landfil	X	Repair	psulate	
TO BE AI In Fac (13 see atta Name of Registered Wa	BATED cility) ached aste Hauler Carting	Ma Cust	No	N/A NJ DEP W. Hauler ID I	(i.e. t	thermal system surfacing, Voother miscella see attace Cubic Yards of Waste TBD Disposal Date	ns insul AT, or aneous) ched	Name of GROWS	see attached Registered Landfil Ste	X	Repair	psulate	

Date of Notification (1)				Name of	Building	Owner/Opera	ator (2	2)	M 1	3 1 1/1	F.		1	
Decer	mber 16, 2011		(Camelo	t at Mar	Iboro Urba	an R	enewal, LLC	(a) [= U V	15			200300
Agencies Notified	Type Notification			Street Ad	dress			1 1 1 1			1			
⊠ EPA	Initial		4	133 Rive	er Road				FFR	- 9 2012				
DEP	Amended	1		City, Star	te, Zip Co	ode			L. LJ	0 4012	1	ermed.		
☑ DOL	Amendment Emergency (— t	Highland	d Park,	NJ 08904		1 1	w		1		<u> </u>	
DOH DOH	justification)	including		Name of	Contact			A.	Tele	ephone Nun	ber		Control of the Contro	
DCA	Cancellation			Jason K	aplan			ter enteringence	1	1			ال	-
		DI (0		FACII	LITY INFO	ORMATION		Tues of Facility /	4)	* 48 %	· · · · ·		- 5	
Name of Facility Where	Abatement is Taking	g Place (3)					Type of Facility (and the second second		, to e	AG.	
Entron Industries				-	-			School (K-1 Subchapter		or than K 12	100			
Street Address			¥:				1	Other (i.e. p				dings	, home	es,
418 State Highway City (5)	79		260	<u> </u>				etc.) Square Feet		Floors		ldg. /		
Marlboro Township,	NI I													
County (6)	113			County C	code (7)			Current Use (Pric	or if bei	na demolish	ed)			
Land State of the					SE ONLY)					usiness				
Monmouth Name of Monitoring Firm	n Hired by Building (Owner (8)		ASCM	No	Na	ame o	f Abatement Cor			11.000/00			
	in timed by building t	Swiler (6)		7.00	140.			ACK Group, L		\ -/				
EHS Environmental Street Address			70/12	1				ddress	LU.					
T. T. T. T. (1) (1) (1) (1) (1) (1)	4 Cuite E					Towns or		ings HWY N,	STE 1	200				
411 Southgate Cour	t, Suite E							ate, Zip Code	SILZ	-03				******
City, State, Zip Code							20	Hill, NJ 0803	1					
Mickleton, NJ 08056 Project Manager for Mon	ACC. 100 CO. 1			Telephor	ne No	1000		ne No.	+	License No)		-	2-1-1-1
	ilitoring i ilili			356-223				59 - 5000		00781	- 1			
Jack Carney Start Date (10)		Schedule		npletion [-	f OSHA Monitor		00701		-		
12/26/	1.1	Concau	Ju 501	3/31/12				ACK Group, L	LC					
Occupancy Status Durin		k Only Or	ne)	3/3 1/ 12				Address				-		
57								ings HWY N,	STF 2	209				
Abatement Perform	cated During Entire I ned Outside of Norm	al Facility	Abatei Hour	nent s		1000000		ate, Zip Code	0.2.	.00	3500000			-
Other - Describe:				700 100 100 100 100 100 100 100 100 100				Hill, NJ 0803	4					
Scope of Work (Check A	All That Apply)					Oli	City	11111, 140 0000	•					
		\Box		ation			\triangleright	Full Containm	ant with	Negative P	racen	ro		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		personal contracts	Renova Demoli				×	Mini-Enclosure		Negative P	16220	е		
							8	Glovebag Pro	cedure	Non Edeble	D	J		
							Z	Non-Exempted	(*) and	Non-Friable	Proce		emen	
		111	Locat	200								W. C.	ype	ı
Locatio			Norma d Sole			Descrip		9,8				Г		
Asbestos-Containing TO BE AE		1	intena			tos Containii . thermal sys		aterial (ACM)		mount Specify	ת		E	m
In Fac	Martin Committee	Cus	todial	September 1	(1.0.	surfacing				or LF)	em	Rep	ap	00
(13)			(12)			other misc	ellane	eous)			Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							_		e e	
	1	165	V	INA		222.0#	tach	ad	000	attached	V		1	
see atta	icned		\triangle	+		see att	lacin	eu .	See	allacheu		-		
PARTITION OF THE PARTIT														<u> </u>
Name of Registered Wa	este Hauler	1		NJ DEP W	laste	Cubic Yard	ds	Name of	Registe	red Landfill	1	1	1	
Name of Registered Wa	iste Hauter			Hauler ID		of Waste		1,000						
Freehold / Newark C	Carting			159	39	TE		GROWS	3	- Acribertus de				
City, State		M 1		1		Disposal D	Date	City, Stat	е	1001				
Freehold / Newark, I	NJ					3/31		Morrisvi	lle, PA					
Completed by		Title				Signa	ature	17/2		Da	te		11000	11
Mike Cooper		Presid	dent		Alexander .	1/2	-1/	1		12/	16/1	1		

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

SCRVICES INC.

Date of Notification (1) 2/7/12			Nan	ne of Buildin	ng Owner/Opera	tor (2) Mrs. Telfair	Steele C	虐		V	匠
Agencies Notified	Type Notific	ation		Stre	et Address		36 Princeton A	Avenue rr	p –	0 1	012	17
DEP DOL	Amender Amendm	nent #		City,	State, Zip	Code	Princeton, NJ		17	V 6	Vic	
☑ DOH □ DCA	☐ Emerger justificat ☐ Cancella	tion)	ıg	Nam	ne of Conta			Telephone Ni	ımher	u Vin	ok å	
				F/		FORMATION		1===	21,000	1 2	in- es	ing it is now
Name of Facility When		Taking Plac Residence			- 40,		Type of Facili					- 103
Street Address		inceton A		ne			Subchapte Subchapte	er 8 (Other than K- private & comme		ilding	s,	
City (5)		Princeto					homes, et Square Feet	# of Floors		3ldg.	Age	
County (6)	Mercer	Filliceto	11		unty Code (7) (STATE	Current Use (Prior if being demo				
Name of Monitoring Fi		ding Owner		ASCN	/ No.	Name of Abate	ement Contractor					_
(8)	MECS	ang e mile		, 10011				imental Servi	ces, I	nc.		
Street Address	PO Box	341				Street Address	S	Box 322				
City, State, Zip Code	Crosswicks,	NJ 0851	5			City, State, Zip		vn, NJ 08501				
Project Manager for M				phone	No.	Telephone No.		License No.			_	
William V	Veisgarber Ji	r	(60	9) 29	98-4070	(609) 2	259-9688		0049	3		
Start Date (10) 2/16/12	S	Scheduled C	2/17/		ate (11)	Name of OSHA		ÆCS				
Occupancy Status Du	ring Abatement (Street Address						
☐ Facility Closed/Vac.☐ Abatement Perform ☐ Other - Describe:	ed Outside of No	ormal Facili				City, State, Zip	Code	Box 341 ks, NJ 08515				
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	all that apply)		enovati emolitio			☐ Mini-Ei Glovet	ontainment with No nclosure bag Procedure					
		N	ocatio						1	Abate Typ		
Locatior Asbestos-Containing TO BE AB/ IN Facili (13)	Material (ACM) ATED	Mair Cu	Solely ntenandustodia Staff? (12)	ce/		Description of os Containing Mathermal systems surfacing, VAT other miscellane	aterial (ACM) insulation, Γ, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
1		Yes	No	N/A		• • •		220 I F	-		e e	
basement/cr	awispace			×		pipe insular	tion	320 LF	×		-	
Name of Registered Wa	aste Hauler			JDEP \		Cubic Yards	Name of Regi	stered Landfill				-
Stevens Environ	mental Serv	ices Inc.	_ Ha	auler ID 182	No. 292	of Waste 2 CU		T.R.R.F., I	nc.			
City, State	Allentown	ı, NJ				Disposal Date 2/17/12 /	City, State	Tullytown,				
Completed By		Title				Signature	Y 1//	Date				=
Mahlon E. St	evens	Pre	oject	Man	ager	1/1/	_/		2/7/	12		_

SERVICES INC CHECK # 0 1663

										W	1	D
Date of Notification (1) 2/7/12			Nam	e of Buildir	ng Owner/Operato	Scott Ullr	ich i				
Agencies Notified	Type Notification	n		Stree	et Address		706 River R	oad FEB -	9 2	2012	1	Ü
EPA DEP	Initial Amended			City,	State, Zip (10	1		ZII VOSE	-	
⊠ DOL	Amendment Emergency		ng			Pi	scataway, NJ	08854.5	CONT	01.8		
M DOH DCA	justification Cancellation)		Nam	e of Contac	Scott Ullrich	£	Telephone Nur	nber			******
	17					ORMATION	3,					
Name of Facility When	e Abatement is Tak	ing Plac	e (3)	ГА	CILIT IN	ONWATION	Type of Facilit	y (4)			-	
		siden					School (K-	12)				
Street Address	427 Ma	gnolia	a Stre	et			Subchapte Other (i.e., homes, etc.)		cial bui			
City (5)	Lligh	land l	Park			1 1000/2000	Square Feet	# of Floors	E	Bldg. /	\ge	
County (6)	IIddlesex	Ianu i	aik	Cou	inty Code (7) (STATE	Current Use (F	rior if being demo		8		_
Name of Monitoring Fi		Owner		ASCN	I No.	Name of Abater	ment Contractor (
(8)	MECS	, o mio		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				mental Service	es, I	nc.		
Street Address	PO Box 3	41				Street Address		Box 322				
City, State, Zip Code	Crosswicks, NJ		5			City, State, Zip		n, NJ 08501				
Project Manager for M				ephone	No.	Telephone No.		License No.				
William V	Veisgarber Jr.		_		<u>98-4070</u>		59-9688		0049	3		_
Start Date (10)	Sch		Comple 2/20/		ate (11)	Name of OSHA		MECS				
2/17/12 Occupancy Status Du	ring Abatement (Ch			12		Street Address						_
☐ Facility Closed/Vac								Box 341				
☐ Abatement Perform Other - Describe:			ity Hou	ırs		City, State, Zip (ks, NJ 08515				
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	all that apply)		enovat emolitio		5	☐ Mini-En	entainment with Ne nclosure leag Procedure empted (*) and N	egative Pressure	ure			
			Locati			and the state of t				Abate		
Location		Use	lormally d Solel	y by		Description o			-	Тур	Je I	
Asbestos-Containing TO BE AB IN Facil (13)	ATED	C	ntenar ustodia Staff? (12)			thermal systems surfacing, VAT other miscellane	insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A				2015	-	_		_
basement/cr	awlspace			×		pipe insulat	tion	80 LF	×	-		
Name of Registered W	aste Hauler			JDEP V		Cubic Yards	Name of Reg	stered Landfill				
Stevens Environ		es, Inc	<u>.</u> +	lauler IC 182	0 No. 292	of Waste 2 CU		.R.R.F., Inc. I	andi	ill		
City, State	Allentown,	NJ				Disposal Date 2/20/12/	City, State	Tullytown,	PA			
Completed By	Titl	е	•		1	Signature	(1)	Date		/12		
Mahlon E. St	evens	Pı	roject	Man	ager	$- \mathcal{I} $			2/7	112		_

SERVICES INC

Date of Notification (1) 2/7/12			Nan	ne of Buildi	ng Owner/Operato	or (2) n Bednar/Jen	nifer Gustin	Ē I	W	E	Tr
Agencies Notified	Type Notificat	tion		Stre	eet Address		30 Cleveleand	Lane		-		111
DEP DOL	Amended Amendmen Emergence justificatio	y (includir	ng		, State, Zip	Code P	rinceton, NJ	08540	- 9	2012	•	1
DCA	Cancellatio			Nam	ne of Conta Jo	cı ennifer Gustir	1	Telephone Nu	imber	1971	8.	-
				F/	ACILITY IN	FORMATION		the second page.	- four Carty	· Allegia		
Name of Facility When							Type of Facilit	y (4)				100
	R	esiden	ce	4			School (K-	12) r 8 (Other than K-	12)			
Street Address	80 CI	eveland	l I an	0			Other (i.e.,	private & comme	rcial bu	uilding	s,	
City (5)	80 CR	everanc	Lan				homes, etc	# of Floors		Dida	Λα0	-
Oily (O)	P	rinceto	n				1500	2		Bldg.	60	
County (6)	Mercer	Interio	**		unty Code (E ONLY)	7) (STATE		Prior if being demo			00	
Name of Monitoring Fir		ng Owner	_	ASCN	/I No.	Name of Abater	ment Contractor (-		
(8)	MECS		-				vens Environ		ces,	lnc.		
Street Address				11		Street Address						
	PO Box 3	341						30x 322				
City, State, Zip Code		1.0051/				City, State, Zip 0						
	Crosswick, N.	08513					Allentow	n, NJ 08501				
Project Manager for M	onitoring Firm Veisgarber Jr.			phone	98-4070	Telephone No.	59-9688	License No.	0049	12		
Start Date (10)		heduled C	-			Name of OSHA		1	0045	25		_
2/20/12	00		2/24/		atc (11)	Name of Ool IA		ECS		20		
Occupancy Status Dur	ing Abatement (C					Street Address						
☐ Facility Closed/Vaca							PO E	341		171		
Abatement Perform			y Hou	rs		City, State, Zip C						
Other - Describe:		M					Crosswick	cs, NJ 08515				
Scope of Work (Check 23 sf or ≥3 lf 2160 sf or ≥260 lf	all that apply)		enovati emolitio			☐ Mini-End Gloveba	ntainment with Ne closure ag Procedure empted (*) and No		ura.			
			ocatio				ompled () and ite	in nable i roccu		Abate	933990199	
Location		Used	Solely	by	10000000000000000000000000000000000000	Description of				Тур	Je -	
Asbestos-Containing TO BE ABA IN Facili	TED	Cu	itenano istodia staff?			os Containing Mat thermal systems in surfacing, VAT,	nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A		other miscellaneo	ous)		/al		sulate	ure
1st flo	or	_		×		floor tile/mas	stic	670 SF	×			
baseme				×		pipe insulate		80 LF	×			_
Name of Registered Wa	ste Hauler			IDEP V		Cubic Yards	Name of Regis	tered Landfill		-		
Stevens Environ	mental Service	es Inc.	_ Ha	182	292	of Waste 3 CU -		R.R.F., Inc. I	andf	ĭll		
City, State	Allentown,	NJ				Disposal Date 2/24/12	City, State	Tullytown,	РΔ	gar :		
Completed By	Tit					Signature	# }	Date	1/1			_
Mahlon E. Ste			oject	Man	ager		1		2/7/	12		_
SR-41						/ /	1				-	

D&S Proj. #: MS 12-53

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

					PM - 24032241M					W E				
Date of Notification		Na	me of Bu	ilding Owne	er/Operator (2)	1114					-		
0 1 1/13 11				RINE COP	ELAND					0010		A special of		
Agencies Notified EPA	Type Notification Initial	Str	eet Addre	ess				FE	3 - 3	LUIL				
☐ DEP	Amended			CHARD P	LACE						1	D) G		
	Amendment #:	_ Cit	y, State, 2	Zip Code			ų d	ASLE	CA CON MOUNTAIN	TRUL &		i.		
☑ DOL	Emergency			WOOD, N	J		L.	and the second section is a second						
DOH	(including justification)	Na	me of Co	ntact			- n v.	and the second second	Telepho	ne Numbe	r 			
☐ DCA	Cancellation		CATHE	ERINE CO	PELAND		• • •							
				FACI	LITY INFORM	MATION								
Name of facility w	here abatement is to	aking plac	e (3)			7.15.4.1		Туре	of Facility					
C. THEN DID	CODELAND								=	ol (K - 12)				
CATHERIND	COPELAND									hapter 8 (0 (Private/0			-12)	
Street Address								1		./Homes, e		lciai		
295 ORCHAR	D PLACE							Squa	re Feet	# of Floo	rs	BI	dg. A	ge
City (5)		Count	y (6)				ty Code (7)						onton	
2 AD CDM10 0		DED	CEN			(State	e use only)	Curr	ent Use (I	Prior if beir	ig dem	olishe	ed)	
RIDGEWOO!	D ng Firm Hired by Blo	0.0000000	GEN		ASCM No.	.l	Name of Abatemen	t Contrac	tor (9)		- 07%	_		
Name of Monitori	ig Filli Hiled by Bio	ig. Owner	(0)	- 1	ASCIVI NO.									
							D & S RESTOR	CATION	, INC.					
Street Address							20 California A	ve						
City, State, Zip Co	de						City, State, Zip Code							
oity, State, Zip 00	ue						Paterson, NJ 0							
Project Manager fo	or Monitoring Firm		P	hone Numb	er		Telephone Number			License	Numb	er		
Tojout manago.	3						973-345-8020)		(0159			
Start Date (10)		ISched.	Complet	ion Date (11	1)		Name of OSHA Mo		-0					7//85-2
							D & S Restora	tion, Inc						
03/01/12		03/09				_	Street Address							
	During Abatement ed/vacated during er			omont			20 California A							
	performed outside of						City, State, Zip Code	9						
Describe:	ribe: NORMAL HO	URS					Paterson, NJ 0	7503						
The second secon	check all that apply)				-			Full Cor	tainment	w/negative	press	ure	-	
>3 sf or >3		Renovatio	n					Mini-en						
≥160 sf or ≥		Demolition					×		ag proced	ure ') and Non	-friahle	nroc	edure	ρ.
		Is location	normally	used solely	/	2000000	<u>L</u>	1	p(,	R	R	E	TE
Location of asbestos-co	ontaining	by mainte	nance/cu	stodial		tion of as	bestos-containing		Amount	0.5	e m	e p	n	'n
material (ac	m) to be	staff(12)		T	material				(Specify LF)	SF or	0	a	a	C
abated in fa	icility (13)	Yes	No	N/A						100	v e	 r_	p	
BASEMENT T	WO ROOMS		X		PIPE INS	ULATI	ON	42	LFT					JE
BASEMENT			X		BARE HE	EATING	G PIPES		0 L FT				X	
BASEMENT			X		VERMIC	JLITE		5.5	SQ FT					
														T
														IL
Registered Waste	Hauler	NJDE 135	P Hauler		Cubic Yards of 2 YDS	Waste	Name of Registere TULLYTOWN	d Landfil	IIRCE P	ECOVE	RY			
D & S RESTO	KA HUN, INC.	_ 133	00	Disposal I			City, State	, 10.50	ORCE N	ECO VE	-	A CONTRACTOR OF THE PARTY OF TH		
City, State PATERSON,	NI 07503			03/02/1			TULLYTOWN	N, PA						
ITILITIOUI,	0,000									Tai		_	-	
Completed by (Pr	int or Type) T	Title			Signature					Date 01/31				

003415 D&S Proj. #: MS 12-55

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

							200		2010 H (100 m)					
Date of Notification	$\frac{1}{2}$		ame of Bu GENE K		er/Operator (2)					1 1/1				
Agencies Notified EPA DEP	Type Notificati Initial Amended			ST CHES	TNUT AVE	NUE	To a section of		FEB - 9	2012	The same of the sa			
☑ DOL	Amendment #:	Ci	ity, State,	Zip Code			į	- The second			- Harrison -			
_	Emergency			CHEN, NJ	08840		<u> </u>	74000	ASSESTING FOR		3	1		
□ DOH	(including justification)	Na	me of Co	ntact			L.	Managaran a (Telepho	ne Numbe	er 	_[
☐ DCA	Cancellation		GENE I	KIRK		100		- 20			11/200			
				FAC	ILITY INFORM	ATION						9	f	
Name of facility w	here abatement is	taking plac	ce (3)					T	ype of Facility	(4) ol (K - 12	,			
GENE KIRK									Subc	hapter 8 (Other th		-12)	
Street Address										(Private/0./Homes,		rcial	85	
305 WEST CH	HESTNUT AVI	ENUE						_	Square Feet	# of Floo	ors	BI	dg. Ag	ge
City (5)		Coun	ty (6)				ty Code (7)							
) . m	NDI EGE	37		(State	e use only)		Current Use (F	Prior if bei	ng dem	olishe	ed)	
METUCHEN Name of Monitori		_	DDLESE:	X	ASCM No.	Н	Name of Abaten	nent Co	ntractor (9)					
Name of Monitori	ing t illittilled by t	olug. Owne	. (0)		AGGINI NO.		D & S REST		20.0					
Street Address							Street Address	OKAI	ION, INC.					
Street Address							20 Californi	ia Ave						
City, State, Zip Co	de					-	City, State, Zip C	-		Well to				
ony, orato, zip oo	40						Paterson, N		3					
Project Manager fo	or Monitoring Firm		P	hone Numb	er		Telephone Num			Licens	e Numb	er	ASIN PRO	
,							973-345-8	020			00159			
Start Date (10)		ISched	Completi	ion Date (1	1)		Name of OSHA							
							D & S Rest	oration	, Inc.					
02/16/12		02/24					Street Address							
Occupancy Status				-mont			20 Californi		ue			1112311		
Abatement p	ed/vacated during performed outside	of normal f					City, State, Zip C		2					
Other-Descr	ribe: NORMAL H	OURS		-			Paterson, N							
Scope of Work (c		()						=	l Containment	w/negativ	e press	ure		
≥ 3 sf or >3 l	f 🛛	Renovatio	n						ni-enclosure ovebag proced	ure				
≥160 sf or ≥	260 If	Demolition	1		West - De la constant	1920			n-Exempted (*		-friable	proc	edure	
Location of		Is location	normally	used solel	у						R e	R	E	E
asbestos-co		by mainte staff(12)	enance/cu	Stoulai			bestos-containin	ng	Amount (Specify	SF or	m	p	n c	n
material (ac abated in fa		Yes	No	N/A	material	(ACIVI)			LF)	ATTAC STATE	O V	i	a	L
				, ,,,	T DIES TO	11 1 500	OM		110 L PT		e	r		
BASEMENT			LX		PIPE INSU	LAII	JN	-	110 L FT			片	片	H
													片	H
											井		片	H
						-14					- - -			
	Tlaulas	L L	DU- 1	ID# 17	Lubic Yards of	Wasta	Name of Regis	tered La	andfill			Ш	Ш	Щ_
Registered Waste D & S RESTO		NJDE 135	P Hauler 06		2 YDS	vvasie	TULLYTO	WN, RI	ESOURCE R	ECOVE	RY	-		
City, State	NIT 07502			Disposal I 02/17/			City, State	WAI D	٨					
PATERSON, I				02/1//	Signature		TULLYTO	WN, P.	A	Date				
Completed by (Pri BOGDAN JO		Title PRESID	10000000000000000000000000000000000000							02/06	5/12			
ASR-41		Do not use	e this form	for asbest	os licensure ex	cempted	activities.							

D&S Proj. #: MS 12-52

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

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Date of Notificatio	$\frac{1}{1} / \frac{1}{1} \frac{1^2}{1^2}$			uilding Own PAPOUCI	er/Operator (2 HIS)			W E []	1 15				
Agencies Notified EPA DEP	Type Notificat Initial Amended	ion	63 PRO	FEB - 9 2	012	L/J servasi		18						
	Amendment #:		City, State,	Zip Code			1	L-	CRECEDS CONTRO	11 0				
☑ DOL	Emergency			CLAIR, N	J 07042	-		r	SBESTOS CONTRU LICENSINO					
■ DOH	(including justification)	N	lame of Co	ntact			Telephone			14				
DCA	Cancellation		JANET	PAPOUC	CHIS		agen or a							
				FACI	LITY INFORM	IATION								
Name of facility w	vhere abatement i	s taking pla	ace (3)					7	ype of Facility (4	(K - 12)				
JANET PAPC	UCHIS					west was the			Subcha	pter 8 (O	ther th	an K-	12)	
Street Address		74				30 4400				Private/Co Homes, e		cial		
63 PROSPEC	T AVENUE							_		# of Floor		Blo	dg. Ag	je
City (5)		Cour	nty (6)				nty Code (7)							
MONITOI AT	n	EC	SEX			(Stat	State use only) Current Use (Prior if being demolished)							
MONTCLAI Name of Monitori	C207			T	ASCM No.	1	Name of Abaten	nent Co	ntractor (9)			_	-0367.	
nume of monitor.		9.	(-)		Tioom Tio.	- 11	D & S REST							
Street Address						-	Street Address	Oldin	1011, 1110.					
							20 Californi	a Ave.						
City, State, Zip Co	ode						City, State, Zip C	ode						
							Paterson, N	5-100 pt 1000)3					
Project Manager f	or Monitoring Firm	1	P	hone Numb	er		Telephone Num 973-345-8			License	Numb 0159	er		
							Name of OSHA			L	0137			
Start Date (10)		Sched	Complet	ion Date (11	1)		D & S Rest							
03/03/12	alv 1994	03/1	9/12				Street Address							
Occupancy Status							20 Californi		nue					
Abatement	ed/vacated during performed outside	of normal					City, State, Zip C		12					
	ribe: _NORMAL F					- 1	Paterson, N			, ,			7.4	
Scope of Work (c >3 sf or >3 >160 sf or >	If 🖂	y) Renovatio Demolitio						☐ Mi	Il Containment w ni-enclosure ovebag procedur on-Exempted (*)	е			edure	
		Is locatio	n normally	used solely	/						R	R	Е	E
Location of asbestos-co	ontaining		enance/cu		Descript		sbestos-containii	ng	Amount		e m	e p	n	n
material (ac abated in fa		Yes	No	N/A	material	(ACM)			(Specify S LF)	r Oi	O V	a i	a p	L
		103	110	19//4	1 pype pys	17 4 75	OM		COLPT		е	-		1
BASEMENT 3	The state of the s		LX		PIPE INSU				60 L FT 62 L FT			님	ዙ	ዙ
BASEMENT R	10.000.000.000		X		PIPE INSU				100 L FT			片	片	卅
BASEMENT ABOV	E CEILING	-	X	-	JEILE INSC	LAII	OIN		100 111			H	片	旨
		-		-					+		H	Ħ	i	愩
Registered Waste			EP Hauler		Ubic Yards of	Waste	Name of Regis			001111	1		_	1
D & S RESTO	RATION, INC.		506		2 YDS			VN, R	ESOURCE RE	COVE	(Y			
City, State PATERSON,	NI 07503			Disposal D 03/05/1			City, State TULLYTO	WN P	A					
Completed by (Pri		Title			Signature		1 1000110		n -	Date				-
BOGDAN JO		PRESID	COLORO DE CONTRA DE LA COLORO DE COL			V2				01/31	/12			
ΔSR-41		* Do not us	e this forn	n for asbest	os licensure e	xempted	d activities.							

Date of Notification (1)				Name	of Buildin	g Owner/Operator (2)		7 3	Pre	1					
	6 / _	12				Wedical Center		*	12.9							
Agencies Notified EPA	Type Notifica			Street Address 601 Hamilton Ave FEB - 9 2012												
⊠ DOLWD	☐ Amended Amendme			City, State, Zip Code												
☑ DHSS □ DCA	☐ Emergend			Tre	nton NJ	08629	*	ASBESTOS CORTROL	. 8	.1	STATE AND					
(NJAC 5:23-8)	on)	9	Name	Name of Contact Telephone Number												
	☐ Cancellati	on		Bob	Field		K .	and the second								
				FAC	CILITY IN	NFORMATION					2.00	1				
Name of Facility Where Al	batement is T	aking Place	(3)				Type of Facility	(4)								
St Francis Medical C	Center				☐ School (K-12)											
Street Address						<u> </u>		3 (Other than K-12 rivate and commer		ilding						
601 Hamilton Ave							homes, etc.)		ciai bu	manig	, S,					
City (5)	-		Square Feet	# of Floors	Bl	dg. A	ge									
Trenton							70,000	3		60+						
County (6)	Reflective years		-	Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pr	or if being demolis	shed)		3V//					
MERCER							Hospital									
Name of Monitoring Firm I	Hired by Build	ling Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)									
Environmental Connection						BRISTOL EN	VIRONMENTA	L, INC.								
Street Address						Street Address										
120 North Warren S	treet					1123 BEAVER STREET										
City, State, Zip Code		City, State, Zip Code														
Trenton, NJ 08010		BRISTOL, PA 19007														
Project Manager for Monit		Telephone No. License No.														
Brian Holbig		215-788-6040 00509														
Start Date (10)	cheduled (Name of OSHA Monitor														
_ 2 / _ 16 /	12	2		16 /	12_	BRISTOL ENVIRONMENTAL, INC.										
Occupancy Status During	Abatement (C	Check only	one)			Street Address										
☐ Facility Closed/Vacate				ement	1123 BEAVER STREET											
☐ Abatement Performed					cribe	Cribe City, State, Zip Code										
Time of Abatement: 8:	00AM-8:00P	PM/F	M- <u>1:</u>	30AM		BRISTOL, PA	19007									
Scope of Work (Check all	that apply)															
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		⊠ R	enova emoli													
					,	☐ Non-Exe	mpted (*) and No	n-Friable Procedu	re							
			s Loc Norm	ation				Ab	Abatement Type							
Location (Lla		olely by	Ash	Description o estos Containing Ma		Amount	Re	Repair	m	E				
Asbestos-Containing N TO BE ABA		M	ainter	nance/		e., thermal systems		(Specify	Removal	oair	ap	Enclosure				
IN Facility		Cus	stodia (12	al Staff?		surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure				
(13)		Yes	N	1		Other miscellane	ous)				te					
Basement Mechanica	I Room	\boxtimes			Pipe In	sulation										
									TIT	П	П	П				
Name of Degistered West		Cubic Yards of	Name of Regis	tered Landfill												
Name of Registered Waste Hauler NJDEP Waste Hauler ID No.						Waste		NORTH LAND	FILL							
BRISTOL ENVIRONMENTAL, INC. 18706						1 Cu Yd	City, State					_				
City, State						Disposal Date 2/16/12		LLE, PA 19067								
BRISTOL, PA 19007							MORRISVI		to /		-					
Completed By (Print or Ty Gino Pizzigoni	rpe)	Title Estima	ator			Signature	Pinnaon	. 1 1	ite / (2	/10	2					
and the same of th						1000	111-10-00		-	-		_				

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Date of Notification (1)	1	Name o	Manager A			(2)	\Box	E C	5 1	11/7	Ē					
Agencies Notified Typ		Street Address							W	15	1					
□ EPA □ DEP □ DOL	Initial Amended Amendment#		ō	City, Sta	ate, Zip Co		00001:	Street 1		- FEB	- 9	201	<u>-</u>			
☑ DOH ☐ DCA ☐	-	Name of Contact. Name of Contact. Telephone Number Tools								D	-					
				FAC	ILITY INF	ORMATI	ION	Caura as to the Article Course		Mark to the second of the seco			111			
Name of Facility Where Abate	ment is Taking I	Place (3)						Type of Facility,(4)							
Street Address	St							☐ School (K-1☐ Subchapter☐ Other (i.e. petc.)	8 (Oth	er than K-12 & commerci	2) al buil	dings,	home	es,		
City (5) Kear Ney		******				Square Feet	quare Feet # of Floo			Bldg. Age						
County (6) J	(:	County Code (7) (STATE USE ONLY)				Current Use (Prior if being demolished)										
Name of Monitoring Firm Hired by Building Owner (8)					M No.			e of Abatement Contractor (9) AC Contracting Inc								
Street Address				Street Address 105 Lowell Road						which the safety manner with a standard and the same who are a second as a second seco						
City, State, Zip Code			-	AUTHORISON DOSE				State, Zip Code Rock, NJ 07452								
Project Manager for Monitorino						none No. License No. 262-5841 00156										
Start Date (10) 2:17 10		Scheduled	Comp 18-1	ompletion Date (11) Name				e of OSHA Monitor nega Environmental Services Inc.								
Occupancy Status During Aba Facility Closed/Vacated D	During Entire Pe	riod of Aba	temer	nt			280 H	Address uyer Street						100000		
☐ Abatement Performed Ou☐ Other - Describe:	****	racility Ho	ours			_		ate, Zip Code nsack, NJ 07606		-						
Scope of Work (Check All Tha ≥3 sf or ≥3 If ≥160 sf or ≥260 If	ovatio				Q	☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure										
I continue of			ocatio	nally				n of Material (ACM) And the insulation, (SAT, or SF				Abatement Type				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used Main Custo				œ/	Asbes (i.e	tos Con thermal surfa	escription taining M I systems icing, VAT miscelland			Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure		
		Yes	No	N/A							-		ŧ	40		
basement			-	Х	PIP	L UN	isula	inon	2.	5 LF	V					
	- 7					Alexander and										
E C					NJDEP Waste Cubic Yards Hauler ID No. of Waste 20785			Name of Registered Landfill IESI PA Bethlehem Landfill Corp.								
City, State, Zip Code Riverdale, NJ 07457						Dispos	al Date	City, State Bethleher								
Completed by R. McDonald		Title President	*Common (0/1			ignature	ntel	~	Dat	te ?	7 1	2				