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

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City, State							posal Date	City, State				- 1 2 - 3	
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Completed By (Print or Ty	rpe)	Title				-	Signature		Da	te/	T		
Nicholas Fernicola		Projec	t Ma	nager			1			1/5	1	D	

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

FEB 1 0 2020

Date of Notification (1) Name of Building Owner/Operator (2) 02 05 20 Monmouth County Park System Agencies Notified Type Notification Street Address ☐ Initial 805 Newman Springs Road □ DOLWD City, State, Zip Code Amendment #1 **⊠** DOH Lincroft, NJ 07738 ☐ DCA ☐ Emergency (including) (NJAC 5:23-8) Name of Contact justification) Telephone Number ☐ Cancellation John Eisemann 732-766-1929 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Imlaystown 1700 3 90 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Monmouth Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Environmental Tactics** 0045 Guardian Contracting, Inc. Street Address Street Address 64 Broad Street 1889 Route 9, Unit 61 City, State, Zip Code City, State, Zip Code Matawan, NJ Toms River, New Jersey 08755 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Tom Geiger 732-290-2217 732-349-9932 00624 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 02 / 06 / 20 02 / 21 / 20 E.M.S.L. Analytical Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 1056 Stelton Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _____AM-_ PM/ PM-Piscataway, New Jersey 08854 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure $\boxtimes \ge 3$ sf or ≥ 3 if $\subseteq \ge 160$ sf or ≥ 260 if □ Renovation ☐ Mini-Enclosure □ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Used Solely by Removal Encapsulate Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A 3rd floor П X П asbestos floor tile 150 sf X П П 1st floor \bowtie duct insulation 50 If X П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Guardian Contracting, Inc. T.R.R.F. 20223 3 City, State Disposal Date City, State Toms River, New Jersey Tullytown, Pennsylvania 02/21/20 Completed By (Print or Type) Title Signature Date Nicholas Fernicola Project Manager

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 01 23 County of Union Agencies Notified Type Notification Street Address **⊠** EPA Administration Building-Elizabethtown Plaza □ DOLWD ☐ Amended City, State, Zip Code **⊠** DHSS Amendment # COLLEGE CONTROLS Elizabeth, NJ 07207 ☑ DCA ☐ Emergency (including (NJAC 5:23-8) Name of Contact justification) Telephone Number ☐ Cancellation Owers Agent - Ryan Jones, C.M. 609-276-7382 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Union County Courthouse - (Tower Building) School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 2 Broad Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age Elizabeth 55.000 14 80 + yrs. County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Union Office Building Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) T and M Associates 00145 East Coast Haz Mat Removal, Inc. Street Address Street Address 1455 Broad St., Suite 250 494 East 41st Street City, State, Zip Code City, State, Zip Code Bloomfield, NJ 07003 Paterson, NJ 07504 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Kevin Burns 908-347-4396 973-345-0022 00507 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 02 / 10 / 20 02 / 03 / 21 Same as above Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time City, State, Zip Code of Abatement: ____AM-3:00PM/11:30pmPM-___AM Scope of Work (Check all that apply) □ Renovation ≥3 sf or ≥3 lf Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Asbestos-Containing Material (ACM) Used Solely by Removal Asbestos Containing Material (ACM) Amount ncapsulate nclosure Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A 1st Floor - Lobby \boxtimes Ceiling plaster 1,600 SF \boxtimes 3rd Floor - Lobby X Ceiling Plaster 1,100 SF \boxtimes 5th & 7th Floor - Lobby \boxtimes Ceiling Plaster 1,600 SF X 11th Floor - Court Room П X Ceiling Plaster 400 SF \boxtimes Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. East Coast Haz Mat Removal, Inc. Waste G.R.O.W.S., North W/M of PA 419 80 City, State Disposal Date City, State Paterson, NJ Various Morrisville, PA Completed By (Print or Type) Title Signature James Unger Sr. Estimator/Project Mgr. 1-23-20 ASB-41 **MAY 11** * Do not use this form for asbestos licensure exempted activities.

Check # 9444 For Additional work Area Freis

Check # 1094

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

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Environmental Tactics	s, Inc.				N/A			MAK-B Pro, I	nc.								
Street Address						1 2 2 2 2	St	reet Address								7/8	
64 Broad Street							1 9	104 Market S	treet								
City, State, Zip Code							Ci	ty, State, Zip Co	ode	200							
Matawan, NJ 07747								Garfield, NJ (7026								
Project Manager for Monitori	ng Firm	-27.7		Tel	ephone	No.	Te	elephone No.		L	icens	se No.					
Tom Geiger)-2217	1	973-931-3293		1	013	65					
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

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(NJAC 5:22 0) [L] E	mergency /i	nclua	lina	New Br	unswick, NJ 089						
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Tom Geiger			732 2	ne No.	Telephone No.		Ligare				
Start Date (10)	Scheduled	Cor	nnlotie :	90-2217	973-931-3293	3	License No.				
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

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Justifi	ication)		3	Name of Co	ntact						
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Name of Facility Where Abatement Saint Peter's University Hos	is Taking	Place	(3)	PACILIT	YINFORMATION	Type of Facili	tv (4)				
Street Address	pitai					School (K-	12)				
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City (5)							5.)	mercia	ii Duiic	ings,	
New Brunswick						Square Feet	# of Floors		Blda	. Age	-
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64 Broad Street					Street Address						
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Matawan, NJ 07747									-		-
Project Manager for Monitoring Firm			Teleni	ione No.	Garfield, NJ 0	7026					
Tom Geiger				-290-2217	Telephone No.		License No.				-
Start Date (10)	Schodul	40	132	-290-2217	973-931-3293						
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the state of the s	06	- / -	30	/ 20	Same as abov						
Occupancy Status During Abatement	(Check or	ly on	e)		Street Address						
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2 ≥ 3 st or ≥ 3 if ≥ 160 sf or ≥ 260 if	\boxtimes	Reno	vation		⊠ Full Conta ☐ Mini-Enclo	nment with Neg	ative Pressure				
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me of Registered Waste Hauler			NJDE	P Waste	Cubic Yards of	Name of Registe	ared Landell				Ш
lewark Carting, Inc.			Haule	r ID No.	Waste						
y, State			112	:22	20		North W/M of I	PA			
lewark, NJ					AND	City, State					
mpleted By (Print or Type)	771.1				Feb. 2020	Morrisville,	PA				
Ciril Nestorov	Title	20			Signature /	1.	Da	te			
	Projec	t Ma	nagei		15/1	Nester	Da				
41 11			1		Rend	1 lever	/ ر	-7	-2	020	0

Check # 1090

NOTIFICATION OF ASBESTOS ABATEMEN

C		Dawn 3	W	Call	
Otherwise engine e					And the same of th
FFR	1	1	2020	å	

Date of Notification (1)			(F	ursuant	TO NJAC 8:60 at	ABATEMENS	. 1111.	ii.	y	5	1
01											
	/ 2	0		Traine Of	Building Our			E	EB	Ta	20
Agencies Notified Type Not	-			Saint	Peter's Universit	erator (2)				. U	20
☐ EPA Type Not	ification			Stroot A.		y Hospital					
☑ DOLWD ☐ Initial ☑ Amend	1			J STICEL MOC	iress			Appropriate Co.	et ili		2001
□ DCA Amend	ied Iment #2		-	254 Eas	ston Avenue			1000		100	146
(NJAC 5:23-8) Emergi	ment #2	2	1	City, State,	Zip Code			J.J y flami	AND DESCRIPTIONS		
1	TIOI1	cludin	g	New Bru	unswick Allon	04					
☐ Cancell	ation			OI CO	ntact	J 1					
				Ron Car	valho as Agent		Telephone	Numb	0.5		
Name of Facility Where Abstance				FACILITY	/ INITION		(908) 20	18.300	e.		
Name of Facility Where Abatement is Saint Peter's University Hospit Street Address	Taking F	Place	(3)	THOILIT	Y INFORMATION		1 10/20	-300	U		
Street Address	al					Type of Facilit	ty (4)				
254 Easton Avenue						School (K-	12)	10	ii bumaker		
City (5)						1 Slibchanta	-0 (0	(10)			
				-				N-12) Imercia	al buil	dinas	
New Brunswick County (6)	v.			1/		homes, etc			ar Sulli	uniya	
						FOO OO-	# of Floors		Bldg	. Age)
Middlesex			C	ounty Code	(7)(STATE USE ONLY)		6			+ yı	
Name of Monitoring Firm Hired by Buildi Environmental Taction	200		_		- J. I.	1 000 (1	rior if being dem	olished	d)	-	
at later the	ig Own	er (8)	ASC	M No.	Name of Abatas	Hospital nent Contractor (9)					
Street Address			N/	A	MAK-B Pro,	Inc		Delivery of the second	-		
64 Broad Street					Street Address	inc.					
City, State, Zip Code					Section 1						
Matawan, NJ 07747					104 Market S						
Project Man					City, State, Zip C	ode					_
Project Manager for Monitoring Firm	-	TE	elephone	e No	Garfield, NJ	07026					
Tom Geiger				0-2217	Telephone No.		License No.				
Start Date (10)	eduled	Comp	lotion D	ate (11)	973-931-3293		01365				
01 / 23 / 20	06	/ :	30_ /	ate (11)	Name of OSHA M						
Occupancy Status During Abatement (Che		,	/		Same as above	ve					
- I acility Closed/Vacated During Entire F					Street Address						
of Abatement: 7:00AM-3:30pmPM/	II Facilit	y Hou 1	rs - Des	cribe Time	City, State, Zip Co	de					
Cone of Work (Oh)		-	AIVI	2							
cope of Work (Check all that apply)		-0.00									
≥3 sf or ≥3 lf	M R	enova	tion			ainment with Nega	tive Pressure				
☑ ≥160 sf or ≥260 lf		emoliti	ion		☐ Wilni-Encid	osure					
(# - H)						Procedure opted (*) and Non-	Friable Proced				
4		Loca				Trion () and (vol)	Trable Procedu				
Location of Asbestos-Containing Material (ACM)		Norma	ally ely by	E ANDREAS ASSESSMENT	Description of			200	atem		уре
10 BE ABATED	Ma	inten	ance/	Asbes	tos Containing Mate	erial (ACM)	Amount	Ren	Repair	Enc	Enc
IN Facility	Cus		Staff?	(1.6.,	, thermal systems in surfacing, VAT,	isulation,	(Specify SF or LF)	Removal	ੂ =	aps	Enclosure
(13)	Ver	(12)	T	-	other miscellaneo	us)	OI UILP)	<u>n</u>		Encapsulate	are
ing 1A	Yes	No								е	
		\boxtimes		Pipe Ins	ulation		750 LF		П	П	
ing 1A				Acoustic	cal textured Ceili	na matarial		-	1	1	
ing 1A			15				2,200 SF		Ш	Ш	Ш
			14	1" x 1" c	eiling tile glue d	ots	700 SF	\boxtimes			
				122					П		
me of Registered Waste Hauler	, il	N	JDEP V	Vaste	Cubic Yards of	Name of Registe	red Landfill		Ш		П
Newark Carting, Inc.		-	lauler IE	O No.	Waste		North W/M of	РΔ			
y, State			11222		20 Disposal Date	City, State					
Newark, NJ			84 (65)		Feb. 2020		3.4				
						Morrisville, F	A				
mpleted.By (Print or Type)	0										
ompleted By (Print or Type) Tit Kiril Nestorov	e Project	11/100	2005		Signature	Mer bour	Da	ate			

- in/#	M	4-	H				m E C	2 E	1	n _B Pr	ipt F
1×9425 10 41			ICATIO	tate of New Je N OF ASBEST t to NJAC 8:60	OS ABATI					<u>U</u>	lb [
Date of Notification (1)	I SI JF	Т	Name (of Building Own	er/Operato	or (2)	HIIII FE	B	0 /	2020	
3-5-2020						Opentie S					1
Agencies Notified Type Notification				Address	2	of the care	1.38.68	i e sa niee Statut (S	e - 2 :	2.5	<u>ئ</u> ىسىمىد ئىسىمىد
EPA Initial				Routo	4						in OL
DEP Amended Amendmen	. 44			ate, Zip Code		io 1	The state of the second	-			
DOL Amendmen Emergency		_			OM	to U7					
DOH justification Cancellation			Name o	of Contact	Mira.	loma	Telephone No		2. 1	7 79	
- Santellador			FAC	ILITY INFORM	ATION	11 11 1 1 -	201-5	11-	24	15	
Name of Facility Where Abatement is Takin	ng Place (3)	170	ALITY IN ORIN	ATION	Type of Facility	/ (4)				
Bunger (Cins Street Address						School (K	(-12)				
	- 11					Subchapt	er 8 (Other than K-	12)		40	
739 Rows 440 S	outh					etc.)	. private & commerc	cial bui	idings	, home	es,
Jersey City						Square Feet	# of Floors		Bldg. /	Age	
County (6)			County	Code (7)		Current Use (F	rior if being demolis	177	10		
Hudson			(STATE	USE ONLY)		Close					
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.	Name	of Abatement C	ontractor (9)	9	1)	
							nuironm	enti	al	/:-	
Street Address						t Address	1-11 11	8			
City, State, Zip Code					011		Cobb Md				
City, State, Zip Code					City,	State, Zip Code	irel PA	184	26		
Project Manager for Monitoring Firm		T	Telepho	ne No	Telen	hone No.	License	No	Υ	-	
						3834151			7)		
Start Date (10)	Schedul	ed Con	pletion	Date (11)		of OSHA Monito	1111	14		_	
2-18-3020			1-2	020		SCE E	nujvonn	en	tal		
Occupancy Status During Abatement (Chec	k Only O	ne)			Street	Address					
Facility Closed/Vacated During Entire							COOLD A	C U			
Abatement Performed Outside of Norm Other – Describe:	nai Facility	/ Hours			City, S	State, Zip Code	riel PA	167	121		
Scope of Work (Check All That Apply)		1 0				WICE M	THER ITT	100	108	2	
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demoliti				Mini-Enclosu Glovebag Pr				.	
	Is	Location	on			- Wolf External) and Horrina			ement	S0.
Location of	1	Vormall	У		Description	n of			Ty	уре	
Asbestos-Containing Material (ACM) TO BE ABATED		ed Solel intenar		Asbestos C	ontaining N	Material (ACM) is insulation,	Amount	77		g l	Ш
In Facility	Cus	todial S (12)	taff?	su	rfacing, VA	AT, or	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)		(12)		othe	er miscella	neous)	1	oval	air	sulat	sure
Time	Yes	No	N/A	n / 7	1 1		= 1 = -			,e	
200+			7	KOOL F	ashir	99	50 SF	_X	_		
Roof west side			X	Kao+ 1	Memb	rand	90 SF	1			
							19415				
Name of Registered Waste Hauler		2,000	JDEP W auler ID	No. of \	oic Yards Vaste	Name o	f Registered Landfi	II			
City, State					posal Date	City, Sta	ate				
Completed by	Title	/1			Signature	9 //	/ // 5	ate			Torre
Marin lineller	1	Tox	ed 1	Maria Xe4	Oignatur	21	411	2-6	-2)	O.F	0

Inv # 17883

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

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/ / /	-	11_	1	10	2
Chl	_	#	1	1 6	2

Date of Notification (1)			Namo	f Building	Owner	Operator	(2)	Ch	<u>_</u> 7	<u> </u>	((60		and the second	Section 1 a
02/05/2020			Jeff Jo	-	Owner	Operator	(2)	Comment of the Control		E	G		W	100	1
Agencies Notified Type Notification			Street A	ddress				-	141						7.103
☐ EPA 🗵 Initial								Tarana and a second		gan ,	im to	1			Autorities Autorities Autorities Autorities
DEP Amended				ate, Zip Co					U U	-	FB	. 0	2020	1	i i tien!
X DOL Amendment #		1000		-Ridge,	NJ 07	075	======================================	ļ.							6
DOH justification)			Name o Jeff Jo	f Contact					Te	lephon	e Nun	nber		H. As	
DCA Cancellation													43		
Name of Facility Where Abatement is Taking	Place (3	3)	FAC	LITY INFO	ORMA	TION	Type	of Facility	(4)						
Residential Property	(- 7					_	(*)							
Street Address								School (K- Subchapter		er thar	n K-12	2)			
							×	Other (i.e.	private	& comr	mercia	al build	lings,	home	es,
City (5)							Squa	etc.) are Feet	# c	f Floors	s	В	ldg. A	ge	
Wood-Ridge							1,30		1			1000	941		
County (6)				Code (7)			Curre	ent Use (Pri	or if be	ing den	nolish	ed)			
Bergen			STATE	USE ONLY											
Name of Monitoring Firm Hired by Building O	wner (8)	Ŵ.	ASCN	ΛNo.	1			atement Co		(9)					
						Danv	ric Co	ontracting	LLC						
Street Address						Street									
City Otata 7in Code						19.20.2000000000000000000000000000000000		5th St.							
City, State, Zip Code								Zip Code NJ 0720	6						
Project Manager for Monitoring Firm		- 1	Talenho	ne No					ann Ni						
1 Toject Manager for Worldoning 1 mm			relepilo	elephone No. Telephone No. 908-906-4123											
Start Date (10)	Schedule	ed Com	pletion	Date (11)		Name	of OSHA Monitor					0.5		-	
	02/17/2					Iris E	nviro	nmental	Labor	atorie	s, In	C.			
Occupancy Status During Abatement (Check	Only Or	ne)				Street	Addre	ss							
Facility Closed/Vacated During Entire Pe	eriod of A	Abatem	ent			2333	Rou	te 22 We	st						
Abatement Performed Outside of Norma	I Facility	Hours				150.0		ip Code							
Other – Describe:						Unio	n, NJ	07083							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renovat				×		II Containm		Negat	tive P	ressur	e		
≥160 sf or ≥260 lf		emoliti	on			×	Glo	ni-Enclosure ovebag Pro							
						×		n-Exempte		d Non-	Friabl	e Prod	edure		
	25000	Locatio											Abate Typ		
Location of		Normall d Solel				escription				- 40			1 91		-
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenan	ce/			ntaining M Il systems				mount Specify		Z	_	Enc	m l
In Facility	Cusi	todial S (12)	ап?		surfa	acing, VA	T, or	3600637598		or LF		Remova	Repair	aps	Enclosure
(13)		89. 15	2000000		otner	miscellan	eous)					val	¥.	Encapsulate	ure
	Yes	No	N/A											to	
Sunroom			X			VAT			Summa - 1990	0 SF		Х			
Basement			Х			VAT			38	30 SF		Х			
Basement			Х		Pipe	Insulat	tion		6	0 LF		Х			
Garage			Х			e Insulat	tion			0 LF		X			
Name of Registered Waste Hauler		146000	IDEP W		Cubic of Wa	Yards		Name of	Registe	red La	ndfill				
Danvic Contracting LLC			574	INU.	4	iste		Fairless	Lanc	lfill					
City, State Elizabeth, New Jersey					Dispo	sal Date		City, State		٨					
Completed by	Title				1000	<u> Anna anna anna anna anna anna anna ann</u>		Morrisv	iiie, P.	۸	D-1				
Jeymy Donneys	Owne	er			1	Signature	7				02	e /05/2	020		

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

<1143 PAI	D	(F		t to NJAC				"ch	k#	- 11	9	7			
Date of Notification (1) 02/04/2020				of Building a Snyder		Operato	r (2)				-		W		FN
Agencies Notified Type Notification EPA DEP Initial Amended			Street	Address tate, Zip Co				to the state of th	M	erg of the Children con	=R	10	202	هستند که ۱۵۰ د په	A section of the sect
X DOL Amendmen		_	Newa	ark, NJ 07				12.			L. S.	5-00	LO 1.		i de la companya de l
DOH justification Cancellation)			of Contact a Snyder				1	Te	tephor		mber		M.a	
Name of Facility Where Abatement is Takin	ng Place ((3)	FAC	ILITY INFO	ORMAT	ION	I Tour	F 1914	74)		gent, Test			، کتاب دورت	J. T. 1994.
Residential Property	ig i lace (.5)					l I	oe of Facility School (K-							
Street Address							×	Subchapte Other (i.e. etc.)	r 8 (Oth	ner tha & com	n K-1 merc	ial buil	31-4-10-6 (M. 34.) 4-7-6	101111111111111111111111111111111111111	es,
City (5) Newark							1 2 3 7	uare Feet 314	2	of Floor	rs		3ldg. / 957		
County (6) Essex			County (STATE	Code (7) USE ONLY)			Cui	rrent Use (Pr	ior if be	ing de	molis	hed)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.				batement Co Contracting		r (9)					
Street Address				9.00		Street 240		ress th 5th St.							
City, State, Zip Code								Zip Code)6						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph 908-		No. -4123		Lice 013	nse N	0.			
Start Date (10) 02/05/2020	Schedul 02/07/		mpletion	Date (11)		2000		SHA Monitor		atorie	s In	ıc.			
Occupancy Status During Abatement (Chec	k Only O	ne)				Street	Addr	ess							-
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: OCCUPIED	Period of nal Facilit	Abaten y Hours	nent S		_	City, S	tate,	ute 22 We Zip Code IJ 07083	st						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit				×	F N G	ull Containm fini-Enclosur lovebag Pro lon-Exempte	e cedure					e	
Lauren of		Locati Normal											Abate Ty	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cus	ed Sole aintenar todial S (12)	ly by nce/ Staff?	Asbest (i.e.	os Cont thermal surfa	scription taining M systems cing, VA niscellan	fateri s insu T, or	~*************************************	(5	mount Specify or LF		Removal	Repair	Encapsulate	Enclosure
Basement	Yes	No	N/A X		Dino	Insula	tion		6	015		17		Ф	
Dascment					ripe	IIISula	uon		0	60 LF		X			
Name of Registered Waste Hauler Danvic Contracting LLC		Н	JDEP W auler ID 7574		Cubic of Was			Name of Fairless			ndfill				
City, State Elizabeth, New Jersey					Dispos	sal Date		City, State Morrisv		A					
Completed by Jeymy Donneys	Title Owne	er			S	ignature	1	0			Dat 02	te /04/2	020		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

TA10.11.11			Sta	te of New	/ Jersey	,		Personal Property	T- 11	a [7 1	1 17	7 E	5 F
UK333D PAI			ATION	OF ASBE	STOS	ABATE		A Career			5	<u> </u>		Parking The State of the State
Date of Notification (1) 2-4-2020				Building C Develop					F	EB	1 0	20	20	State of St
Agencies Notified Type Notification		100	Street Ac					1						
☐ EPA 🔀 Initial				Street				<u>!</u>	Improvement -				rill.	de la
DEP Amended DOL Amendment #		10.00	Service of the servic	e, Zip Coo City, NJ					e e e e e e e e e e e e e e e e e e e	<u>L</u> (),	140	11111		
Emergency (in justification) DCA Cancellation	iciuairig	100	Name of Mike F	Contact erraro	69			VI (5.555.65	ephone 1 3-991-					
			FACIL	ITY INFO	RMATI	ON								
Name of Facility Where Abatement is Taking Residential	Place (3))					Type of Facility							
Street Address							School (K-		er than K	(-12)				
							Other (i.e. etc.)	private 8	& comme	ercial	buildi	ngs, l	nome	S,
City (5)							Square Feet		f Floors		1	dg. Ag	je	
Jersey City, NJ 07305							5000	2			75	+		
County (6) Hudson			County C STATE U	ode (7) ISE ONLY)			Current Use (Pr	ior if bei	ng demo	olished	۵)			
Name of Monitoring Firm Hired by Building Ov	wner (8)		ASCM	No.			of Abatement Co			LLC				
Street Address			L	-		Street	Address				25			-
City, State, Zip Code	111						Virginia Avenu state, Zip Code	16						_
Oity, State, Zip Oode						Jerse	ey City, NJ 07	304						
Project Manager for Monitoring Firm	2		elephor	ne No.			none No. 333-8855		License 01174					
- 19 19 2 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2	Schedule 2-18-20		pletion [Date (11)			of OSHA Monitor		rvices	LLC				
Occupancy Status During Abatement (Check		830000					Address	itai oc	1 11000,				10401	-
Facility Closed/Vacated During Entire Pe			ent			235	Virginia Avenu	ie						
Abatement Performed Outside of Norma Other – Describe:							state, Zip Code ey City, NJ 07	304						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf		Renovat Demoliti				× × ×	Mini-Enclosur	re ocedure						
	1	Lagatio					1 Non-Exemple	() an	Id NOII-I	Tiable		Abate		
Location of	1	Location Normall	y		De	scription	n of					Ту	oe -	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solel intenar todial S (12)	ice/	Asbest (i.e.	tos Con thermal surfa	taining N	Material (ACM) s insulation, T, or	(:	Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										(D	
Roof		Х				ing Ma	ACAMMAD COM		00 SF	_	X			
Wall to basement		X				Plaster	•		00 SF	-	X			
Bathroom		X				VAT			50 SF		X			
N		1 5.	JDEP W	laata	C.,L:	Yards	Nama	f Rogics	ered Lan	odfill				
Name of Registered Waste Hauler Green Environmental Services		Н	auler ID 34889	No.	of Wa		Fairles	2000		idiiii				
City, State Jersey City, NJ						sal Date -2020	City, Sta Morris		PΑ					
Completed by Liliana Serrano	Title Offic	e Mar	nager		5	Signatur		ill	25	Date 2-4	-202	20		

Inv#17950

NOTIFICATION OF ASBESTOS ABATEMENT Initial Notification

G4667

7]	PAI	D · 19	ursi				:60-7 an	d 12:12	20-7)	Check	#: 763	31			12.2-1.7-	سكمت ني
Date of Notification		101					g Owner/	Operato	or (2)		EC	; E		\mathbb{V}		- Transmitted
Agencies Notified		0.000		ounty		Hudso	on									
[X]EPA			11_								FE	B	0	2020		
[X] DEP	[X]Initi	al ication					e., 3rd Flo p Code	oor			1			_	-	
X1DOL	[]Amend		11							ř	1 Sec. 101		2 X S		1 /4	1
(X)DOH		ication	11	-	77-17-12-17	/, NJ	07306			1701	ephone l	Timbo	tyled† Salthigh Dagar	1 1 1 1 1 1	5 5 4 * OC	
	[]Cance	llation	11												ingless man or	
[]DCA	<u> </u>		R	lalph	Sax					201-	-369-277	77 x.2	2987			
Name of Facility W	here Aharem	ent is Ta	kin				INFORMAT I	ON	Mune o	FRACIL	ity (4)				-	
275				,		, , ,					1 (K-12)	Y				
William J. Brennan C	Courthouse								1 []Subcha	apter 8	(Oth	er t	han & co	K-12)
								1	Square	cial	building	gs, h	omes	. et	C.)	
583 Newark Avenue			-7						1	000	9	TOOLS	. Ipr	50	nge	
City (5)		County	(6)	,			INTY Code		Curren	t Use (Prior i	bei	ng d	-	ishe	d)
Jersey City, NJ 0730		Hudso							Admin	istration	Building	1				
Name of Monitoring Owner (8)	Firm Hired	by Build	ling	ASC	M No	٥.	Name of	Abate	ment Co	ntracto	r (9)					
Whitman Companies	s, Inc.						Four St	rong B	uilders, l	nc.						
Street Address							Street	Addres	s							
7 Pleasant Hill Rd.	-3-						180 Sa	rgeant /	Avenue							
City. State. 21p C	oge								Zip Cod							
Cranbury, NJ 08512 Project Manager to	r Monitorin	g Firm []	ele	phone	Nur	nber	Clifton,	NJ 070)13-1935)		Licen	se N	umbe	r	
Kevin Lovely		1) 390-			973-61				1	0807	7			
Scheduled Start Da	te (10) S	ched.Comp							Monitor			0000		-		
0 2 / 1 8 / Day	2 0 1	0 2 / 2 Month /	2 6	1/12	2 1 0	_1	Four St	rona Ri	uilders, I	nc						
Occupancy Status D	uring Abate	ment (Che	ck o	only	one)	Street	Addres	is	110.						
[]Facility Close of Abatement	ed/Vacated	During Er	tir	e Per	iod		180 Sa	rgeant .	Avenue							
[]Abatement Per Hours - Descr		ide of No	rma.	l Fac	111	ГŸ			Zip Cod	e						
XlOther - Descr	ibe: occupied	building					Clifton,	NJ 070)13							
Scope of Work (Che	ck all that	apply)			0.50						sab Non		n			-
[]Demolit	ion		\bowtie	Reno	vat	ion		Mini	-Enclos	ure	ith Neg	ative	Pre	ssur	e	
[]>3 sf o [X]∑160 sf	or >260 lf	jil .							ebag Pr Friable							
				Is									Abat	emen	t Ty	rpe
	ion of		No	catio rmall				riptio					R		E N	E
Materia			S	Used olely				rial (A	(CMI)		(Spec	ify	E	R E	CA	C I.
TO BE	ility		te	Main nance	:/	iı	(i.e., t) nsulation	. surf	acing.	VAT.	SF LF		0 V	P A	PS	0 5
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Date of Notification (1)					f Building Owne	r/Operato	r (2)		-	ED 10	0/	200	100	
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DOH DCA	Emergency justification		-	Name o	f Contact				Teleph	one Numi	ber			
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Name of Facility Where	Abatement is Taki	ng Place (3)	FACI	LITY INFORMA	TION	Tvr	e of Facility (4	1)					_
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Street Address							Ö	Subchapter 8	8 (Other t					
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City (5) Franklin NJ 07416							Squ	uare Feet	# of Flo	oors	В	ldg. A	ge	
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Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	И No.	Name	of Al	patement Cont	ractor (9)					
						MKI) Pro	operty Main	tenance	LLC				
Street Address				##		Street					20 sts			
City, State, Zip Code				-				Riper Ave, Zip Code						
Oity, State, Zip Gode						1927:00		NJ 07011						
Project Manager for Mon	itoring Firm			Telepho	ne No.	Telep	hone	No.		cense No.				
Ot- + D-+- (40)			10		B		2:000.00	8008	0	1336				
Start Date (10) 2/15/2020		3/12/20		npletion	Date (11)	Name	of O	SHA Monitor						
Occupancy Status During	Abatement (Che	ck Only On	e)			Street	Addr	ress						
X Facility Closed/Vaca Abatement Perform Other – Describe:						City, S	State,	Zip Code						
Scope of Work (Check Al	Il That Apply)													
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Baseme	ent		Х		wh	te duct	tape		20	lf ;	Χ			
2nd floor be	edroom		Х		gray p	aster /w	all jo	oins	160	sf :	Χ			
Roof			X		bla	ck flash	ing		78		X			
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Name of Registered Was	te Hauler		1	JDEP W	100000	ic Yards		Name of R	egistered	Landfill				_
MKD Property Maint	enance LLC			lauler ID 037991		aste		Waste N	/lanager	ment - F	airle	ess L	and	fill

Completed by

Clifton NJ 07011

Darko Ralosko

City, State

Date

2/4/2020

Morrisville, PA 19067

City, State

Disposal Date

Signature

N/A

Project Hanager

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Project Manager for Mon	itoring Firm			Telepho	one No.		Teleph 732-6	one N	lo.	701	Licen).			
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Other – Describe: _		nai Facilit	y Hour	s 		_			ip Code OD, NJ 08	3701						
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City, State NEWARK, NJ						Dispos 02/20/	al Date /20		City, State BETHLE		PA					
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Date of Notification (1) 02/07/20			Name o	of Building D E MA	Owner/ NAGE	Operato MENT	r (2)						Season design	Togogogo	
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DOH justification Cancellation)			f Contact IAN FR		AN			Te	ephone 1-759-	Numbe	r			
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Street Address				8		200000000000000000000000000000000000000	Addre HITE	ss DOVE CO	DURT						
City, State, Zip Code								ip Code OD, NJ 0	8701						
Project Manager for Monitoring Firm	2.00		Telephor	ne No.			none N 668-9			License 1200	e No.				
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TO BE ABATED In Facility	Maint Custoo	dial S		(i.e.	thermal	systems cing, VA	s insula	ation,		pecify or LF)	Kemova		Repair	incap	Enclosure
(13)		(12) No	N/A			miscellar					lovai	-	oair	Encapsulate	osure
Unit 49L, 27A					N	MASTIC	;		10	00SF				x	
					15 = 3										
*															
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City, State NEWARK, NJ					Dispos 02/19	sal Date 9/20		City, State BETHLE		I PA					
Completed by JOSEPH PERLSTEIN	Title OWNE	R			S	Signature					Date 02/07	/20			

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	ate of Notification (1)					of Buildin			r (2)			FEB	10	20	20		
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Na	ame of Monitoring Firm	Hired by Building	Owner (8	3)	ASCI	M No.		Name	of Aba	tement Co	entracto ESSIC	r (9) DNALS	 S				
Str	reet Address							Street	Addre								
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Pro	oject Manager for Moni	toring Firm			Telepho	one No.		Teleph 732-6	one N	0.		Licen 1200	nse No).			
	art Date (10) 2/20/20		Schedu 02/20/	led Cor	mpletion	Date (11)		Name	of OSH	HA Monitor							
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Sco	ope of Work (Check All	That Apply)						LAKE	-WO(OD, NJ 0	8701						
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	Unito EE	2711	Yes	No	N/A											ite	Ф
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NE	, State WARK, NJ			1			Dispos 02/20	al Date /20		City, State		1 PA					
	npleted by SEPH PERLSTEIN		Title OWN	IER			S	ignature					Date 02/0		0		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

TED	10	2020

K 14 19		(Pi	ursuant	to NJAC	8:60 an	d 12:120	0)		FE	EB 1	0 2	020	2	المسا
Date of Notification (1) 02/07/20				f Building inkelste		Operator	(2)					11.25		
Agencies Notified Type Notification			Street A	ddress					Full to the	TUCK!	v Sild	á		
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DEP Amended Amendment	#			ate, Zip Co ck, NJ	ode									
Emergency justification)	(including			f Contact					Telepho	one Nur	nber			
DCA Cancellation			Alan F	inkelste	ein					¥3				
Name of Facility Where Abatement is Takin	a Place (3)		FACI	LITY INF	ORMAT	ION	Tue	o of Facility	4					
Tank to Facility with Arabement is Taking	g Flace (3)						Тур	e of Facility (10.5					
Street Address							×	School (K-1 Subchapter Other (i.e. p	8 (Other th			dinas	hom	es.
City (5)							1000000	etc.) are Feet	# of Flo					
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County (6) Bergen				Code (7) USE ONLY)		Curi	ent Use (Pri ne	or if being o	lemolish	ned)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	I No.				atement Cor		1.5				
Street Address			<u> </u>			Street			.0010117					
City, State, Zip Code								DOVE CO	DURT					
City, State, Zip Code								Zip Code OOD, NJ 0	8701					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-6			1000000	ense N	0.			
Start Date (10) 02/12/20	Scheduled 02/13/20		pletion	Date (11)		Name	of OS	SHA Monitor D PROFE						
Occupancy Status During Abatement (Chec						Street		1924 304-04-020-04-04	SSIONA			-		
Facility Closed/Vacated During Entire I	Period of Aba	atem	ent					DOVE CO	DURT					
Abatement Performed Outside of Norm Other – Describe:	nal Facility H	ours						Zip Code OOD, NJ 0	8701					
Scope of Work (Check All That Apply)	to the co						_				111			
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INTERIOR	+	_			FLC	JOK 11	LE		150S) F	х			
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City, State NEWARK, NJ					Dispos 02/13	al Date /20	A	City, State	EHEM PA	Ą				
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Project Manager for Monitoring Firm			Telepho	one No.		Teleph	one		Li	cense 1	No.			
Start Date (10) 02/21/20	02/24/	20	mpletion	Date (11)		Name	of O	SHA Monitor AD PROFE						
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Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of nal Facilit	Abater y Hour	ment s			City, St	tate,	Zip Code		-	-			
Scope of Work (Check All That Apply)					-	LAKE	EW(DOD, NJ 0	8701					
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ity, State EWARK, NJ						posal Date 24/20		City, State BETHLE						
ompleted by DSEPH PERLSTEIN	Title OWN	ER				Signature				Dat	te /07/2	0		

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		200		F	ACILITY INFORMATION								-
Name of Facility Where Abatement	is Taki	na P	lace		ACIEIT IN CHWATION		e of Facility	(4)					_
•		5				- 31-	School (K						
RARITIAN BAY MEDICAL CENTER							Subchapte	er 8 (Other th	nan K-1	2)			
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	inty (6)				County Code (7)			ior if being d	emolisi	ned)			
	DLESE				(STATE USE ONLY)	III NOT THE OWN	SPITAL	ATT 8		117			
Name of Monitoring Firm Hired by	Buildin	g Ov	vner	(8)	ASCM No.			ment Contra					
ENVIRONMENTAL TACTICS, INC.								MENTAL CC	RPOR	ATI	NC	01	
Street Address							et Address						
64 BROAD STREET City, State, Zip Code							SPOOK RO						
MATAWAI	N NEW	IFF	SEV	0774	7			V YORK 109	201				
Project Manager for Monitoring Firm	v, 14LVV				Number		phone Num		Licens	in N	umho	r	
THOMAS GEIGER				290-2		0.572	369-7500	Dei	1101	C 14	uiiibe		- 1
Expected State Date (10)	10	1427	2010-0-0-0	14.7.	etion Date (11)		ne of OSHA	Monitor	1101				
2 / 17 /202		Julie		/	30 /2020	200000		ORATORIES	SINC		#*	1480	- 1
Month Day Year		Мо	nth		Day Year	1		01011011120	5 1110			1 100	
Occupancy Status During Abatement						Stre	et Address						
X Facility Closed/Vacated D						117	EAST 30TH	STREET					
Abatement Performed Out													
X Other - Describe: MO	NDAY -F	FRID	AY 7	AM-3	:30 PM	City	State, Zip		M MO	N/ 4	0040		
Scope of Work (Check all that apply)					X Full Con	tainma		YORK, NE	W YOR	in i	0016		
Demolition	X	Reno	vatio	n	Mini End		i it						
>3SF OR LF	<u></u>	10110	valio		Gloveba		edure						
X >160 SF OR 260 LF					Non-Fria								
Location of		ls!	Locat	ion	Description of A	Asbesto	s-			Ab	atem	ent T	vpe
Asbestos-containing		norn	nally	used	Containing Mate	rial (AC	CM)	Amoun	t [D	B	Щ	m
Material (ACM)			olely		(ie. Thermal s			(Specify	y	REMO	P	Į	ENCLO
TO BE ABATED	l.			todial	and the state of t			SF or LF	F) .	5	REPAIR	P	0
in Facility (13)	-		aff (1		or other miscel	laneou	s)		i	VΑΙ	.5000	ENCAPSUL	SUR
		res	No	N/A					-		\vdash	1	w
1st Floor -Old Surgery Section				x	VAT & Mastic			1,200 SF	×	(
						01 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
	-			-					-	_	-	-	\vdash
	\rightarrow	-	-	-					-	-	-	-	-
7)				_									
Name of Registered Waste Hauler	-	V.IDE	PW	aste	Cubic Yards of Waste	Marr	e of Regist	ered Landfill					\vdash
NEWARK CARTING	100		er ID		30			RAL SANITAI	RYIAN	VDF	ILI		
369 RAYMOND BLVD.	l'		913			"")					
City, State					Disposal Date	City,	State	<i>;</i>	1		-	,	
NEWARK, NEW JERSEY					2/17/20-05/30/2020	PLA	INFIELD TO	WNSHIP, P	ENMY	ŞYL	VANI	A	
Completed by (Print or Type)	Title)TO-		055	Signature	/	AI		Date/	2	1 :	10) [
BENJAMIN SANCHEZ	DIKE	101	1 UF	UPE	RATIONS /	///	لر ا	and a	17		1 -	0	



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

CKU433 TA				it to NJAC 8	:60 and 12:12				and a otherwise	المين بن برندانيدانيدان	One age	Trans.
Date of Notification (1)					wner/Operato	r (2)		FEB	10	202	n	The same of
02/06/2020				Easow				, 45		202	<i>U</i>	i har
Agencies Notified Type Notificatio	n		Street	Address			<u> </u>		A-7		er i	4
EPA Initial DEP Department			City S	tate, Zip Cod	2 :		* A	Still H.	er (A. Elitar	1.4.4.1	A. C	1
DEP Amended Amendmen	nt#		STATE OF STA	donfield, N			a series of the series of the	ansymptometry of	And in the later	PORPER		er in er co
☐ Emergence	(includin	g		of Contact	0 00000		To	lephone N	ımhar			
DOH justification □ DCA □ Cancellation			ANNUAL CONTRACTOR	Easow			(epriorie iv	umber			
100 March 100 Ma			FAC	ILITY INFOR	RMATION						-	
Name of Facility Where Abatement is Tak Easow Residence	ing Place	(3)				Type of Facili	5 31.53					
Street Address						☐ School (I		er than K-	12)			
						X Other (i.e	e. private	& commer	cial bu	ildings	, horr	nes,
City (5)						etc.) Square Feet	1#0	f Floors		Bldg. /	Δne	
Haddonfield						1,200	2	1110013		66	ngc	
County (6)			County	Code (7)		Current Use (ina demoli	- 1	-		
Camden				USE ONLY)		Residence		9 43111011				
Name of Monitoring Firm Hired by Building			11/10/10/10/10	M No.	Name	of Abatement C		(9)				
Management & Environmental Co	onsulting	g Sen	/			de Environm		30-20				
Street Address					Street	Address						
PO Box 341					623	Cutler Avenu	ıe					
City, State, Zip Code					City, S	State, Zip Code						- 100
Chesterfield, NJ 08515					Map	le Shade, No	J 08052					
Project Manager for Monitoring Firm			Telepho		P(C)() (C)() (C)()	none No.		License I	No.			
Bill Weisgarber				98-4070	856-	755-0099		00842				
Start Date (10)				Date (11)		of OSHA Monite						
02/21/2020	02/21					SL Analytical,	Inc.					
Occupancy Status During Abatement (Che	3/5					Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of North	Period of	Abater	nent		11 11500001 501-00	Route 130 N	orth				21	
 □ Abatement Performed Outside of Norr □ Other – Describe: 	nai Facilit	y Hour	S			tate, Zip Code						
Scope of Work (Check All That Apply)		-7-3:5			Cinr	aminson, No	08077					
	E											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	100000	Renova Demoli						Negative	Pressu	ire		
100 0. 0. 1200 1.		Demon	шон			, Glovebag Pr	ocedure					
					×	Non-Exempt	ed (*) and	Non-Frial	ole Pro	cedur	е	
		s Locat								Abate		t
Location of		Normal ed Sole			Description				-	Ту	pe	Т
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	aintena	nce/		Containing Mermal systems	laterial (ACM)	100000	nount pecify	70	500	Ē	ш
In Facility	Cus	todial 8 (12)	Staff?		surfacing, VA	T, or		or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		· · - /		ot	her miscellan	eous)			oval	=	sula	Sure
	Yes	No	N/A								б	10
Basement Laundry Room		X		1, 91	Floor Tile		35	5 SF	X			
Basement along Rear Wall		X			Floor Tile	9	18	3 SF	X			
Name of Registered Waste Hauler		N	JDEP W	aste	ubic Yards	Nome -	f Degister	ed Landfill				
Freehold Cartage		Н	auler ID	No. of	f Waste	2000	r Register ss Land					
City, State		1	5939	1								
Freehold, NJ					isposal Date 2/21/2020	City, Sta	ate sville, PA	۸				
Completed by	Title			0	Signature	IVIOITIS	ville, P	Da	ito			
Christina Fay	40000000	of Ope	rations		7118 F	A Hand		1,000	1.e 2/06/2	2020		
The state of the s	4 TO THE SEC.		A STATE OF THE PARTY OF THE PAR		1 2 /8 1/6/1/9	V W J - 4 2 W S J 1 J		, 0,				

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

, ,		NOTIF	St	ate of Nev	N	Jerse	y A D A TES		Participals participal	F,5.2		renounce.	waar tees	in the same	Name :
CK1294	PAID		ursuant	OF ASB to NJAC	8:	60 and	d 12:120))			GEI		E	Constant Con	Market Com
Date of Notification (1) 1/31/2020				f Building WOWK		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Operator	(2)		F	EB lo	2020	,	A CONTRACTOR	A Company of the Comp
Agencies Notified Type	Notification		Street A	ddress					:			-2026		hamis	
	nitial									Omean, N. J.	nta ser per				1
formed (Amended Amendment #			ite, Zip Co ouck He			N.J 076	604		Ershler E	LLUE CO LICERSII	riidel Ja	il. à		2
×	Emergency (includin ustification)	g		f Contact	100	,,,,,					ephone Nu	PRINCIPAL CO.	ميد مؤلد تعدد	(ATTORNAL)	
	Cancellation		MIKE	WOWK	U	IN				190					
N		(0)	FACI	LITY INFO	OF	MATI	ON								
Name of Facility Where Abatem MIKE WOWKUN'S PRI\								Тур	e of Facility	- 69					
Street Address	THE REGIDEN	1 17 VL			H			H	School (K- Subchapter		er than K-1	2)			
								×	Other (i.e. p				dings,	home	es,
City (5)					H			Squ	etc.) are Feet	# 01	Floors	В	ldg. A	ge	
Hasbrouck Heights				.,											
County (6) Bergen County			County (Code (7) USE ONLY				Cur	rent Use (Pri	or if bei	ng demolis	ned)			
Name of Monitoring Firm Hired	by Building Owner (8)	ASCN		L		Nama	of Ah	patement Cor	atractor	(0)				
Name of Monitoring Pilli Pilled	by Building Owner (»)	ASCIV	i NO.			2000-01/2015		ROPERTY			E, LI	_C		
Street Address							Street 105\		ess Riper Ave						
City, State, Zip Code									Zip Code IJ 07011				20.1-250		
Project Manager for Monitoring	Firm	Т	Telepho	ne No.	H		Teleph				License N	lo.			_
							100000000000000000000000000000000000000		-9008		01336				
Start Date (10) 02/01/2020	L.	iled Cor 0/2020	npletion	Date (11)			Name	of OS	SHA Monitor						
Occupancy Status During Abate	ement (Check Only C	One)			r		Street	Addr	ess	-	-				
Facility Closed/Vacated Du															
Abatement Performed Out Other – Describe:	side of Normal Facili	ty Hours			L		City, S	tate,	Zip Code						
Scope of Work (Check All That	Apply)				r										
× ≥3 sf or ≥3 lf	×	Renova					×	٠.	ull Containm		Negative I	ressu	re		
× ≥160 sf or ≥260 lf		Demolit	ion				×		lini-Enclosur llovebag Pro						
	- Т				H			N	on-Exempte	d (*) and	d Non-Friat	1			
		Is Locati Normal											Abate Ty	ement pe	
Location of Asbestos-Containing Materia		sed Sole	ly by	Asbes	to		scription taining N		al (ACM)	А	mount			Ш	
TO BE ABATED In Facility	IV	laintena stodial (ermal	systems	s insu	lation,		pecify	Rer	Re	nca	Enc
(13)		(12)			(cing, VA niscellan			SF	or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									=		ate	ō.
BASEMENT		X			PI	PE II	NSULA	ATIO	N	4	0 LF	X			
BASEMENT		X					VAT			48	80 SF	X			
												1			
							-1011 1/10/-					-			
Name of Registered Waste Hau	ler	9 (30)	JDEP W				Yards		Name of	Registe	red Landfil				
MKD PROPERTY MAINT	ENANCE, LLC	H	lauler ID	No.		of Was	ste		Waste	Mana	gement -	Fairle	ess L	.and	fill
City, State			-		Ш		sal Date		City, Stat	e					
Clifton, NJ 07011						N/A	31	<u> </u>	Morris	rille, P	A 19067				
Completed by DARKO RALOSKI	Title PR		MANA	AGER		S	Signature		=			ate /31/20	020		

MECEIVE,

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

Date of Notification (1) 02/04/2020					f Building t Durso		wner/Operator	(2)	A Control of the Cont	FEB	10	202)		Section of the sectio
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendment				ate, Zip C		le J 07095			THE STATE OF THE PARTY STATE	E (C Elvsii	11.00	. 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -		
▼ DOH DCA	Emergency (justification) Cancellation	_			f Contact t Durso					Telephon	e Num	ber			
Name of Facility Where A	Abatement is Takin	g Place (3)	FACI	LITY INF	OF	RMATION	[acility (4)					5450T0 5450T0	
Street Address								Sub	chapter 8 er (i.e. pri	Other than vate & com			lings,	home	es,
City (5) Woodbridge								Square F N/A	eet	# of Floor N/A	S	0.75000	ldg. A	ge	
County (6) Middlesex				(STATE	Code (7) USE ONLY)		House		if being der	molishe	ed)			
Name of Monitoring Firm N/A	Hired by Building (Owner (8)		ASCN	I No.		D&S	of Abatem Abatem							
Street Address							11 R	Address osengre	200000000000000000000000000000000000000	ıe					
City, State, Zip Code							Toto	tate, Zip C wa, NJ 0							
Project Manager for Mon	itoring Firm			Telepho	ne No.	-		one No. 345-868	5	Licer 013	nse No 11				
Start Date (10) 02/14/2020		Schedule 02/15/2		npletion	Date (11 <mark>)</mark>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	of OSHA N Abatem							
Occupancy Status During Facility Closed/Vaca		9.5 	879) 	nent			T. T	Address osengre	n Avenu	ie	1				
Abatement Perform Other – Describe: 9	ed Outside of Norm							tate, Zip C wa, NJ 0							
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ll That Apply)	SATES OF THE PARTY	enova emolit				×	Mini-Er Gloveb	nclosure ag Proce	it with Nega dure (*) and Non-				e	
Location	of	1	Locati				Deservation						euvi-m-	ment	
Asbestos-Containing TO BE AB/ In Facil (13)	Material (ACM) ATED	Mai	d Sole ntenar odial S (12)	nce/	Asbes (i.e.	. th	Description os Containing N hermal system: surfacing, VA other miscellar	laterial (A0 s insulatior T, or	CM)	Amount (Specify SF or LF	,	Removal	Repair	Encapsulate	Enclosure
Exteri	or		X				Transit Sid	ing		1000 S	F	Х			
Name of Registered Was	te Hauler		N	JDEP W	laste		Cubic Yards	l NI	ame of D	egistered La	ndfil				
Atlantic Carting	.c riduloi		Н	auler ID 3085		Н	of Waste TBD		Grand Ce		ai IUIIII				
City, State Wayne, NJ							Disposal Date TBD		ity, State en Argy	ıl, PA					
Completed by Oliver Hegedis	24	Title Proje	ct Ma	nager			Signature	Mr			Date 02/		2020		

(K 0015 15 PA	N			OF ASB to NJAC			BATEMENT 12:120)	TUN	# 1	10	U	ر		
Date of Notification (1) 02/04/2020		1	Name of		Ow	vner/O	perator (2)	Check	vo. 1575	C	5 1	V		N to W
Agencies Notified Type Notification			Street Ad 300 Gle		Ce	entre ("East" buildin	ıg -7 th Floor			1.0	000	0	Control of the contro
□ EPA □ Initial □ DEP □ Amended □ DOL □ Amendment #				te, Zip Co k, New J			666	12 1 12 2 12 2 13 2 13 2 13 2 13 2 13 2		EB	. 0	202	U	And the second
☑ Emergency (included)☑ DOH justification)☐ Cancellation	uding	1	Name of	Contact					Telephone 201-833-5	Numbe 508		Kili Ki	(L)	2
	DI (0)		FACI	LITY INF	OR	MATIC		t. (4)						
Name of Facility Where Abatement is Taking Teaneck High School	Place (3)	8					Type of Facili School (K-1	12)						
Street Address 100 Elizabeth Avenue							☐ Subchapt ☐ Other (i.e.		mmercial bu	ildings				
City (5) Teaneck, New Jersey 07666							Square Feet 15000		# of Floors 1		Bldg 50+	ı. Age	9	
County (6) Bergen				Code (7) JSE ONLY	2 -		Current Use (High School		demolished)				
Name of Monitoring Firm Hired by Building Ov Environmental Design, Inc	wner (8)		ASCN	1 No.			Name of Abate Lilich Corpor		actor (9)					
Street Address 5434 King Ave – Suite 101							Street Address 246 Union B							
City, State, Zip Code Pennsauken, New Jersey 08109			35				City, State, Zip Totowa, Nev		512					
Project Manager for Monitoring Firm Tom Pruno			Telephor 888-30	ne No 16-4545			Telephone No 973-225-840		Licens 01104					
	Schedule 02/10/20		pletion	Date (11)			Name of OSH Iris Environn		ratories, LL	.C				
Occupancy Status During Abatement (Check	Only One	e)					Street Address							
 ☐ Facility Closed/Vacated During Entire Per ☐ Abatement Performed Outside of Normal ☐ Other – Describe: 	riod of Ab Facility F	ateme Hours	ent				City, State, Zip Union, NJ 07	p Code			17			
Scope of Work (Check All That Apply)				VI-1- VI-1-							-			
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	2007	enovat emoliti					☐ Min ☐ Glo	Containmen i-Enclosure ve Bag Proce -Exempted (*	edure / Limite	ed Con	tainme		Tent	
	la	Locati	00					Excriptod	Amou	nt		oater		
Location of Asbestos-Containing Material (ACM)	N Used	lormai d Sole	iy Iy by	Asb	esto		Description of ntaining Materia	ıl (ACM) (i.e.	(Spec SF of I	_F) -		Тур		
TO BE ABATED In Facility (13)	50000000	ntenar odial S (12)		the	erm	nal syst	tems insulation, VAT, or er miscellaneou	surfacing,			Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										œ.	
Vestibule between Girl's LR & Cranford Gym		X		Asbesto	s pi	ipe/ In	sulation (wrap	cut)		54 LF	Х			
										150				
Name of Registered Waste Hauler Lilich Corporation		H	IJDEP V lauler ID 18724			of Was	Yards ste	Name of R	egistered Lar _andfill	ndfill				
City, State Totowa, New Jersey							sal Date 0/2020	City, State Morrisville	e, PA					
Completed by Adriana Olejarova	Title Pre	siden	it			Í	Signature	as		Date 02	/04/20	020		

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

State of New Jersey

page 1

	i	NOTIFICA	ATION OF	of New ASBE	31C	38	SABATEMENT
ate of Notification (1 2/04/2020)	I M	ame of Bu eaneck F	ilding C	WITE	∍r/C	riOperator (2)
gencles Notified	Type Notification	S 3	treet Addr 00 Gleng	reas pointe (Cent	tre	re ("East" building -71 Floor)
EPA DEP DOL	☐ Initial ☐ Amended Amendment#	Т	ily. State, eaneck. f	New Je	ie 158'	y 0	07666
a DOH	Emergency (including justification) Cancellation	N	lame of C				201-833-5508
	1		FACILI	LA IMPO	MAC	AT	Type of Facility (4)
eaneck High Sch	ers Abstoment is Taking Place 1901	(3)				_	©School (K-12)
Street Address 100 Elizabeth Ava	enue					L	O Other (I.e. private & commercial buildings, Indian Age
City (5) Teaneck, New Je	rsey 07666						15000 1 50+
County (8) Bergen	-		County Co	ode (7) Se onl'i) .		High School
	Firm Hired by Building Owne esign, Inc.	r (8)	ASCM	No.			Name of Abstement Contractor (9) Lillich Corporation
Street Address 5434 King Ave -						Г	Street Address 248 Union Boulevard
City, State, Zip Co. Pennsauken, No.	de					Γ	City, State, Zip Code Totowa, New Jersey 07512 License No.
Project Manager for Tom Pruho			Talephon 888-30	ne No 18-4545		Γ	973-225-8400 01104
Start Date (10) 02/08/2020	Sql 92	neduled Co /1 0/2020	mpletion	Date (1	1)		Name of OSHA Monitor iris Environmental Laboratories, LLC
Occupancy Statu	s During Abalament (Check O	nly One)			T		Street Address 2333 Route 22 West
Facility Class Abstament P Other - Desc	ed/Vacaled During Entire Period enformed Outside of Normal F ribe:	d of Abata acility Hour	ment rs				City. Stale, Zip Code Union, NJ 07083
Scope of Work (Check All That Apply)					ı	☐ Full Containment with Negative Pressure
@ ≥3 sf or ≥3 lf □ ≥160 sf or ≥2	280 ff		noisevi eilden			п	Mini-Enclosure Giove Bag Procedure : Limited Containment & Tent Disconsisted (1) and Non-Friable Procedure
		ia Lo	cation		t	T	Amount Abstement (Specify Type SF of LF)
Aebastos-C	Location of containing Material (ACM) SE ABATED In Facility (13)	Used 5 Maints Custod	mally Solely by enance/ itel Staff? 12)		the	isto rmi	Description of Store Constaining Material (ACM) (i.e. ma) systems insulation, surfacing. VAT, of other miscellaneous)
	i Sand Com	1,42	No NA	Asbe	esto:	g pi	pipe/ Insulation (weap cut) 54 LF X
vestibule betwe	en Girl's LR & Cranford Gym	-		+	۲	Г	
,							
				-	_	-	
	is and Minote Hauter		NJDE	P Wast	e	1	Cubic Yarda Name of Registered Landfill
Lilich Corpor	stered Waste Hauter		Haule 187	IT ID No			of Waste Fairless Landfill Disposal Date City State PA
City, State Totowa, Nev						L	02/10/2020 Morrisville, PA
Completed to Adriana Oli	3	Title Pre	sident				Do not use this form for sabastos licensure exempted activ
ASB-41 (R-06-	09)						- Do not use this tolly int samesing income

2K12094 PA	NO	TIFIC	CATIO		B	ESTOS ABA 8:60 and 5:1		DEGI		V	L.	The same of the sa
Date of Notification (1) 2 / 6 /	20		1		1865	Owner/Operator (y of NY & NJ/	1205 Ptopo5	1910-5540Eh] eck#1	2031)	
Agencies Notified ☐ EPA ☐ Initial ☐ DOLWD ☐ DHSS ☐ Amende	ed		20	et Address Colony I State, Zip	Ro	0.0		/35/35 (A)	E (E)		II.a	A CANADA
	ncy (includii	na	Je	rsey City	, N	l <mark>.</mark> j						
(NJAC 5:23-8) justificat		.9	Nam	e of Contac	ct			Telephone Nu	mber			
☐ Cancella	ation		Jo	hn Scott				201-744-92	200 ex	t. 24	7	
			F/	CILITY II	VF(ORMATION						
Name of Facility Where Abatement is	Taking Place	e (3)			ı		Type of Facility	(4)				
BMW Site							School (K-1					
Street Address							☐ Subchapter	8 (Other than K-1 private and comm	2) ercial h	wildin	as	
20 Colony Road							homes, etc.		Ci Ciai b	unum	95,	
City (5)					П		Square Feet	# of Floors	В	ldg. A	ge	
Jersey City												
County (6)			Cou	inty Code (7	7)(S	TATE USE ONLY)	Current Use (Pr	rior if being demo	ished)			
Hudson							Commercia	ıl.				
Name of Monitoring Firm Hired by Build			ASCM	l No.	N	lame of Abateme	nt Contractor (9)					
Environmental Health Investig	ations, In	c.				AbateTech, Ir	ic.					
Street Address					S	treet Address						
270 S Sparta Avenue #304						30 Maple Ave	. PO Box 25					
City, State, Zip Code					C	ity, State, Zip Co	de					
Sparta, NJ 07871						Lumberton, N	J 08048					
Project Manager for Monitoring Firm		127.7550.6	ephone			elephone No.		License No.				
JP von Doehren		1		9-5649		609-265-2107		00529				
2 / 15 / 20		1	etion Da			ame of OSHA Mo EMSL Analytic						
Occupancy Status During Abatement (0						treet Address		#1				
☐ Facility Closed/Vacated During Entir ☐ Abatement Performed Outside of No Time of Abatement:AM	ormal Facilit	y Hou	rs - Des	scribe AM	Çi	200 Route 130 ity, State, Zip Coo	de		-			
Scope of Work (Check all that apply)					Ш	Cinnaminson,	NJ 08077		4			
□ ≥3 sf or ≥3 if □ ≥160 sf or ≥260 if	⊠ Re					☐ Mini-Enclo	Procedure	native Pressure	ıre			
	1000	Loca	75 (T) (1 T) (1 T)						- 1	atem	ent T	ype
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)) Use Ma Cus	(12)	ely by ince/ Staff?		, th	Description of Containing Mate ermal systems in surfacing, VAT, of ther miscellaneo	erial (ACM) sulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Exterior	Yes	No	N/A	0 "					+-	-	_	
Exterior				Caulk				600 LF				
								32060 00		П	П	
		П										
Name of Registered Waste Hauler		_	JDEP V	Vaste I	Cu	bic Yards of	Name of Regist	tered Landfill				ш
AbateTech, Inc.		1.0	auler ID	ACCOUNT OF THE PARTY OF THE PAR	Wa	aste	Fairless La					
City, State			18750			12 sposal Date						_
Lumberton, NJ						3/1/20	City, State Tullytown,	DΛ				
Completed By (Print or Type)	Title						rully towil,	17.74.00	-1-			
Gwendolyn Trumbetti	Operati	one (`oord:	nator		Signature	\mathcal{N}	Di	ate	_	1/2	
ASB-41	Operati	UIIS (Joorul	παιθί			/	0	1-16	0		

State of New Jersey	1	F	C	E
OTIFICATION OF ASBESTOS ABATEMENT				L
(Pursuant to NJAC 8:60 and 5:16)	1175			

10	1#	_	79	State of		lama	Ţ.		G II	W	B	Tra.
CK 12095	1				BE	STOS ABA 3:60 and 5:1			<u> </u>		edi	Parished in
Date of Notification (1)			Ns	me of Buildi	na Os	vner/Operator	(2)	FEI FEI	Bla	202	7	111
	20	_	10000			The second secon	Commissioner	s/ Job #1805	-5313 C	heck	#12	095
Agencies Notified Type Notif	ication			eet Address				1 10 10 10 10	DE CA	kill tro	VL C	
☐ EPA ☐ Initial ☐ Amend	w at		(00 Wilson	Ave	nue		a could helperseason	JULY 1951	742	Million of the	- 00
☑ DHSS Amend	100000		Cit	y, State, Zip	Code							
□ DCA □ Emerge		udina	1	lewark, NJ	071	05						
(NJAC 5:23-8) justifica		3	Na	me of Conta	ct			Telephone I	Number			
☐ Cancell	ation		1	lex Ajith				716-536-	-6775			
			F	ACILITY II	VFO	RMATION						
Name of Facility Where Abatement is	Taking F	Place (3					Type of Facility	(4)				
PVSC							School (K-12					
Street Address					+	-	Subchapter	8 (Other than I				
600 Wilson Avenue							Other (i.e., p		nmercial b	uildin	gs,	
City (5)							Square Feet	# of Floors	IF	ildg. A	ne	1000
Newark, NJ							oqualo i oot	" 01110013	1	nag. r	.gc	
County (6)			Co	unty Code (7\/ST/	TE USE ONLY)	Current Use (Pr	ior if being der	nolished)			
Essex				-ant) 0000 (Д	TE OOL ONE I	Plant	ioi ii beilig dei	rionsileu)			
Name of Monitoring Firm Hired by Bui	ildina Owi	ner (8)	LASC	M No.	Na	ne of Ahatem	ent Contractor (9)		20			
M.E.C.S.	ionig Ow	1101 (0)	/100	W NO.		bateTech, I			53			
Street Address					_	et Address	iic.					
PO Box 341							e. PO Box 25					
City, State, Zip Code							And the contract of the contra					
Chesterfield, NJ 08515						, State, Zip Co						
Project Manager for Monitoring Firm		I T	elephon	o No		umberton, N	13 08048	11: 11				
Nora Pearse				e No. 98-4070		phone No.		License No).			
	Schedule					09-265-2107 ne of OSHA M		00529			-	
_ 2 / 18 / 20				20								
						MSL Analyti	cai					
Occupancy Status During Abatement					1	et Address						
☐ Facility Closed/Vacated During Ent☐ Abatement Performed Outside of N				ocoribo		00 Route 13						
Time of Abatement:AM						State, Zip Co						
	10013		-		С	nnaminson	, NJ 08077					
Scope of Work (Check all that apply)						□ Eull Cont	ainment with Neg	ativa Danasves				
≥3 sf or ≥3 If	\boxtimes	Renov	ation			☐ Mini-Encl		alive Plessure	•			
☐ ≥160 sf or ≥260 lf		Demol	tion			Glovebag						
		1. 1.		1	4	Non-Exer	npted (*) and Nor	n-Friable Proce				
Location of	1	Is Loc	Section of the sectio			Danasistis s			Al	_	ent Ty	уре
Asbestos-Containing Material (ACN	11 1	Jsed So	olely by	Asbes	stos (Description of ontaining Mat		Amount	Re	Repair	E	Ē
TO BE ABATED	71 776	Mainter Sustodia		(i.e.	, the	mal systems in	nsulation,	(Specify	Removal	pair	aps	Enclosure
IN Facility (13)	"	(12				rfacing, VAT, er miscellaned		SF or LF)	<u>a</u>		Encapsulate	ure
(,	Ye	es N	o N/A		Oth	er miscenanec	ous)				te	
Electric Room	×			Wire Ins	ulat	on		200 LF				
=iodaio itooiii			_	wile ills	ulat	1011		200 LF			ш	
										П	П	П
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Name of Registered Waste Hauler		- 14	-	Waste	Cubi	c Yards of	Name of Boolet	orod Landell			Ш	Ш
AbateTech, Inc.			Hauler		Was		Name of Regist					
			1875	12-02-04-04-05-07	40		G.R.O.W.S.	Lanunn				
City, State						osal Date	City, State	_ :				
Lumberton, NJ					2/:	28/20	Tullytown,	PA				
Completed By (Print or Type)	Title	ten e				Signature	1		Date	6	y/2=1	
Gwendolyn Trumbetti	Oper	ations	Coord	dinator			MU		2-1	2-	20	

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

NOCIC	_		NO				BE	Jersey STOS ABA 8:60 and 5:1			CE		V	
Date of Notification (1)	6 /	20	0		Nar	ne of Buildin CP&L/Firs	g O	wner/Operator ergy Compa	(2) ny / Job #1912	E-5569 Check	EB 1	0 2	020	and office of the other
Agencies Notified ☑ EPA ☑ DOLWD ☑ DHSS	Type Notif ☐ Initial ☐ Amend	ed ment #	4		Stre 10 City	et Address 0 Legion P , State, Zip (lac	e- Building A		7504	2 (05) UK. 18	To see	fatal	
DCA (NJAC 5:23-8)	☐ Emerge justifica ☐ Cancell	ation)	ncludii	ng	Nan	orristown, ne of Contac att Turner	t	07960		Telephone N				
						ACILITY IN	-	DMATION		213-221-	3333			
Name of Facility Where A	batement is	Taking	g Plac	ce (3)	Γ/	ACILITY IIV	FU	RIVIATION	Type of Facility	(4)		-		
Valiant/JCP&L Pole Street Address 44 South Wall Stree	.								☐ School (K-12 ☐ Subchapter ☑ Other (i.e., p	2) 8 (Other than K rivate and com	(-12) mercial t	ouildin	gs,	
City (5)	; L						1		homes, etc.)				00.5	
Neptune City									Square Feet	# of Floors		Bldg. A	Age	
County (6) Monmouth							(STA	TE USE ONLY)	Current Use (Pr Substation	ior if being dem	nolished)			
Name of Monitoring Firm	Hired by Bui	lding C)wner	(8)	ASCN	/ No.			ent Contractor (9)					
NA							1	bateTech, Ir	nc.					
Street Address								eet Address 0 Maple Ave	. PO Box 25					
City, State, Zip Code							City	, State, Zip Co	ode					
Project Manager for Monit	orina Firm			Tel	ephone	No		umberton, Nephone No.	IJ 08048	License No.				
								09-265-2107		00529				
Start Date (10)/					etion D	ate-(1.1) 20		ne of OSHA M MSL Analyti		2				
Occupancy Status During A Facility Closed/Vacated Abatement Performed Of Time of Abatement:	During Enti Outside of N	ire-Peri ormal l	ied-of Facilit	Abate y Hou	rs - De	scribe _AM	2 City	eet Address 00 Route 130 , State, Zip Co innaminson,	de					
Scope of Work (Check all t ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	that apply)			enovat emoliti				☐ Mini-Enclo						
				Loca			t		, , , , , , , , , , , , , , , , , , ,		- 1	atem	ent Ty	уре
Location of Asbestos-Containing M TO BE ABAT IN Facility (13)	aterial (ACN <u>ED</u>	1)	Use Ma	intena	ely by ance/ Staff?		the	Description of Containing Mate rmal systems in urfacing, VAT, er miscellaneo	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Exterior Utility Pole#J	C165NC		Tes		N/A	Asbesto	s rie	sers		16 LF				
, 2.5%						7.00000		5.0		TO LF				
		-					ı							
			П	П								П		П
Name of Registered Waste	Hauler				JDEP 1	Waste	Cub	c Yards of	Name of Regist	ered Landfill				Ц
AbateTech, Inc.				1.5%	lauler II 18750	D No.	Was	14 (15 th 16 th 16 th 17	G.R.O.W.S.					
City, State Lumberton, NJ					.5.00)isp	osal Date 21/20	City, State Tullytown,	ΡΔ				
Completed By (Print or Type	e)	Title						Signature	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Date			
Gwen Trumbetti		7.75	erati	ons (Coord	inator			/()	1)-(g –	21	0

ASB-41 MAY 11

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

1 ACE			NC					8:60 and 5:1		FEB	102	กวก	Mercent spelled as given	
Date of Notification (1)					Na	me of Buildi	ng (Owner/Operator	(2)	ILU	U	UZU.	- 1	
1 / _	31 /	2	0						val LLC Job Nu	mber: 16	12-2144	Che	k#N	Α
Agencies Notified	Type Not	ification	1		_	eet Address				* 181 5 7 8 7 7	A. 11 J.	t in some	20 GA	
☑ EPA ☑ DOLWD	☐ Initial				1	0 Wilsey S	Squ	ıare				19:50		
☑ DOLVVD	Amen	ded dment #	44		City	, State, Zip	Cod	de						
□ DCA	☐ Emerg		_	na	R	idgewood	N.	J 07450						
(NJAC 5:23-8)	justific	ation)	iloidai	ng .	Nar	ne of Conta	ct			Telephone	Number			
	☐ Cance	llation			R	obert Veri	en	gia		201-44				
					F	ACILITY II	VF(RMATION						
Name of Facility Where A		s Takin	g Plac	ce (3)			ı		Type of Facility (4)				
Commerical Proper	ty								School (K-12)	1				
Street Address					3		ı		Subchapter 8	(Other than	K-12)			
69 King Street									Other (i.e., pr homes, etc.)	vate and co	mmercia	build	ings,	
City (5)							ı		Square Feet	# of Floor	rs	Blda	Age	
Dover									219,388	4		11		
County (6)					Co	unty Code (7	7)(S	TATE USE ONLY)	Current Use (Price	or if being de	emolished)		
Morris									Warehouse/I			6		
Name of Monitoring Firm		uilding C	Owner	(8)	ASC	/I No.	N	ame of Abateme	ent Contractor (9)					
Horizon Environme	ntal						ı	Asbestos and	d Mold Services	, Corp.				
Street Address							-	treet Address						
PO Box 316								1835 Underw	ood Blvd					
City, State, Zip Code							Ci	ity, State, Zip Co	ode					
Thorofare, NJ 08086								Delran, NJ 08	075					
Project Manager for Monit	oring Firm			Tel	ephone	No.	Te	elephone No.		License N	lo.	-		
Dave Flanigan				8	56-84	8-0800		609-702-0400		00862				
Start Date (10)						ate (11)	Na	me of OSHA M	onitor					
2/10/_					2_/	_20_		EMSL Analyti	cal, Inc.					
Occupancy Status During							St	reet Address						
☐ Facility Closed/Vacated	During Ent	tire Peri	iod of	Abate	ement		1	200 U.S. Rout	e 130 North					
Abatement Performed (Time of Abatement:	Outside of N	Normal I	Facilit	y Hou	rs - De	scribe	Cit	ty, State, Zip Co	de				2770	
GV		PIV	1/	_PIVI		_AM	(cinnaminson,	NJ 08077					
Scope of Work (Check all t	hat apply)						ı	_		-	722			
≥3 sf or ≥3 If		1	⊠ Re	novat	ion				ainment with Nega	tive Pressur	e En	105	U. (>
≥160 sf or ≥260 lf		į		molitie				Glovebag						
							L	☐ Non-Exen	npted (*) and Non-	Friable Prod	cedure			
Location of	:	1		Locat							P	bater	nent 1	Гуре
Asbestos-Containing Ma		(N			ely by	Ashes	tos	Description of Containing Mate		Amount	R	R	I m	ū
TO BE ABAT		'		intena	ince/ Staff?			ermal systems in		(Specify	1 -2	Repair	cap	Clo
IN Facility (13)			Cusi	(12)	Olali !			surfacing, VAT, on the miscellaneous		SF or LF) <u>a</u>	7	Encapsulate	Enclosure
3.72			Yes	No	N/A		UL	nei miscellaneo	us)				ate	,,,
Basement			П			Asbesto	e E	loor tile		045.05		1-	-	-
						Aspesto	31	ioor ale		945 SF				
		1										1		
ame of Registered Waste	Hauler			N	JDEP \	Vaste	Cub	oic Yards of	Name of Register	ed Landfill				
Asbestos and Mold S	ervices			H	auler II	No.	Was	ste	Grand Centra					
ity, State			172.103		00035		5 Disr	osal Date	City, State	•				Contra
Delran, NJ								12/20	Penn Argyle,	DΛ				
ompleted By (Print or Type	1)	Title	51				E.1		reilii Argyle,	FA	-			
Kaysi Gruner	7	100000000000000000000000000000000000000	ice A	ssist	ant			Signature)	Date	10		
D.44		UIII	ICE A	33151	aill						217	12		

CK2382 NOTIFICAT

MAY 11

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

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Date of Notification (1)	_								ner/Operator (-						i	
/	7 / -	20	_		Ec	ho Lake	Co	un	ntry Club	1	/ Job #2	002-2	545 Chl	<. #22	82	51.7	ž.	
Agencies Notified	Type Notific	ation			Stree	t Address		T			1 - A	- Tulky Alas	· via	11.011		es en en en en en	***	
⊠ EPA	☐ Initial				51	5 Springf	iel	d /	Avenue									
⊠ DOLWD	Amende				City,	State, Zip	Coc	de										
☑ DHSS ☐ DCA	Amendm Emergen				We	stfield, N	IJ	07	090									
(NJAC 5:23-8)	justificati		ciuaing	3	_	of Contac					-	Tele	phone Nu	mber		0,557	_	
(**************************************	☐ Cancella	5.0			Jol	hn Leshe	r	ı					08-233-9°					
					25000			200	RMATION				70-200-0	147				
Name of Facility Where A	hatement is	Taking	Place	(3)	IA	CILITI			MATION	Type	f Engility	(4)						
Echo Lake Country		raking	1 1000	(5)				ı		3222	of Facility nool (K-12	51000						
Street Address			Since				+	+					er than K-	12)				
515 Springfield Ave	nue							ı					and comm	nercial	ouild	ings	,	
City (5)								+			nes, etc.)		f Floors		Old -	^-		_
Westfield								ı		200		# 0			-	Age	3	
County (6)					Cour	nti Cada /	7)/0	TA	TE USE ONLY)					<u> </u>		13		
Union					Cour	nty Code (/)(3	IA	TE USE ONLY)				eing demo	olished				
Name of Monitoring Firm	Llies of by Duile	din = 0		(O) T	10014	M					ntry Clu	1976-2						
		aing O	wner	(8)	ASCM	No.	N		ne of Abateme									
Hillmann Consultin	g, LLC							_	sbestos and	d Mold	Service	es, Co	rp.					
Street Address							S		et Address									
1600 Rte 22 East				no de					835 Underw		vd Suit	e 1						
City, State, Zip Code							C		, State, Zip Co									
Bordentown, NJ 08									elran, NJ 08	075	4-78-							
Project Manager for Moni	toring Firm				phone		T		ephone No.			Lic	ense No.					
Mark Perlmutter						-7800			09-702-0400			0	00862					
Start Date (10)	77.000 CC					ite (11)	N		ne of OSHA M	art comments.								
_2 / _17 /	_20_	2	/	_15	_ / .	20		E	MSL Analyti	cal, In	c.							
Occupancy Status During							S	tre	et Address									
☐ Facility Closed/Vacate								20	00 U.S. Rout	te 130	North							
Abatement Performed Time of Abatement:	Outside of No	ormal I	Facility	/ Hou	s - Des	scribe	C	ity	, State, Zip Co	de								
						AIVI		Ci	innaminson	, NJ 08	3077							
Scope of Work (Check all	that apply)							ı						Tool	01.1	<i>r</i> .		
☐ >3 sf or >3 lf			⊠ Re	novati	on			ı		ainment	-with Neg	gative I	Pressure	FIICH	SW	V		
≥160 sf or ≥260 lf			De					ı	☐ Glovebag	Proced								
								4	Non-Exer	npted () and No	n-Frial	ole Proced	lure				
			10.73	Locat Iorma	7.7			ı						A	bate	mer	nt Ty	ре
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TO BE ABA		"	1000	intena					mal systems i				Amount Specify	Removal	Kepair		Car	clo
IN Facilit	у		Cust	odial (12)	Staff?	,		sı	urfacing, VAT,	or	182		F or LF)	val	-		2	Enclosure
(13)		1	Yes	No.	N/A	1	9	oth	er miscellaned	ous)						1 8	ate	
		-		100	1773.500									-				
Exterior						Floor ti	le d	& I	Mastic			2	250 SF] [
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		-					+	+							-		=	_
N						<u> </u>] [L		
Name of Registered Wast				11000	JDEP \ auler II			ubi /as	ic Yards of	Control Section	of Regis		Landfill					
Asbestos and Mold	Services				00356			5		Gra	and Cen	tral						
City, State									osal Date	City, S	State							
Delran, NJ								21	19/20	Per	nn,Argy	le, PA						
Completed By (Print or Ty	pe)	Title							Signature	,	1	- 10	11	Date				
Kaysi Gruner		Of	fice /	Assis	tant				VIII	1				21-	11.	7~		
ASB-41								1	2000	/				W/	1/0	10	1	
MAY 11		* D	o not	use th	is form	for asbest	os	lice	ensure exemp	ted activ	vities.				1			

garetro a	T_W#		7	97	8								
CK1959	PAID	NOT		TION		ES	ersey TOS ABAT 60 and 5:10		ECE		$\overline{\mathbb{V}}$	E	
Date of Notification (1)	07 / 20						er/Operator (efilo-Israel	8 0 1	FEB () 2(020	throughther thurst	Comment of the last of the las
Agencies Notified ⊠ EPA ⊠ DOLWD	Type Notification ☑ Initial ☐ Amended			432	Address Scotland tate, Zip Co		ad		ASSESSION O	5411	10111		and the same of
☑ DOH ☐ DCA (NJAC 5:23-8)	Amendment #_ Emergency (in justification) Cancellation			Name	of Contact		J 07079	**************************************	Telephone Number	er			Patrobia.
				FAC	ILITY INF	OR	MATION			4 4			
Name of Facility Where of Commercial Street Address 432 Scotland Road	**************************************	J Place	: (3)		1.			Other (i.e., phomes, etc.	2) 8 (Other than K-12) private and commerc)				
City (5) South Orange County (6)			1000	Coun	ty Code (7)	'STA	E USE ONLY)	Square Feet Current Use (P	# of Floors rior if being demolish		dg. Aç	ge	
Essex Name of Monitoring Firm Mark Jovic Consul Street Address)wner ((8)	ASCM	No.	Α	LL PRO MA	ent Contractor (9 NAGEMENT L			<u>y.</u>		
4 Beaverbrook Roa City, State, Zip Code	A CONTROL OF THE CONT					27 City	et Address 7 Outwater I , State, Zip Co	ode					
Lincoln Park, NJ 0 Project Manager for Mon Mark Jovic	litoring Firm		97	phone 3-650	-0932	Tele	arfield, NJ phone No. 73-928-4888		License No.				
Start Date (10)		3_ /	31	tion Da	20 22	A	ne of OSHA M LL PRO MA et Address	Ionitor NAGEMENT L	LC				
☐ Abatement Performed Time of Abatement:	ed During Entire Per d Outside of Normal	riod of a	Abater	s - Des	cribe	27 City	Outwater I State, Zip Coarfield, NJ	ode					
Scope of Work (Check a □ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	ll that apply)		novati				☐ Full Cont ☑ Mini-Enc ☐ Gloveba	ainment with Ne losure g Procedure	gative Pressure	•			
Location Asbestos-Containing TO BE AB/ IN Facil (13)	Material (ACM) ATED	Use Ma	Locat Normal ed Sole intena todial s (12)	lly ely by nce/		ther	Description o Containing Ma mal systems urfacing, VAT, er miscellane	of terial (ACM) insulation, , or	Amount (Specify SF or LF)	_	ateme	ent Encapsulate	e Enclosure
Clasroom #28				\boxtimes	Plaster b	oase	on ceiling		36 SF				
Classroom #29					Plaster b	ase	on ceiling		100 SF				
Classroom #32						-	on ceiling		35 SF				
Classroom #28					VAT/ Ma	stic			3 SF	X			

ASB-41 JAN 13

City, State

Name of Registered Waste Hauler

Completed By (Print or Type)

Newark Carting

Newark, NJ

Allen Monchik

Cubic Yards of Waste

As Needed Disposal Date

TBD

Name of Registered Landfill

City, State

Allen Monchik

Grand Central Sanitary Landfill/ Fairless

Date

2/7/2020

Pen Argyl, PA / Morrisville, PA

NJDEP Waste Hauler ID No.

0283

Project Manager

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

11/1/4	+ 1	/ \	l / S	tate of New N OF ASBES	Jers	ey	NAC-1-	The same	TE	G		W	E
CKROYU PA	m	(F	ursuan	t to NJAC 8:	60 a	nd 12:120	NEN I	Control of the Contro		U	5 11	U	<u>l</u>
Date of Notification (1) 02/07/2020	A Same of Bush			of Building Ov			(2) any of New Yo	rkii		FEB	10	202	n
Agencies Notified Type Notification	Jacobson I II-		Street /	Address			any of New 10	IK I	15, 1			LVL	J
X EPA X Initial Amended Amendment				US Route)			1.16	ESTO	500	Kin	OLA
				ate, Zip Code sauken, N		3110		i.,	- 1, Day - JUSTICINA ME	<u> </u>	ENSI	166	. مدينه
☑ DOH Emergency justification) □ DCA Cancellation		9	Name o	of Contact as Bowen				200,5%	ephone N 6 661 4				
Name of Facility Where Abatement is Takir	na Place /	(3)	FAC	ILITY INFOR	MA	TION	T						
Warehouse	ig i idoc ((3)			Ш		Type of Facility (50 5 -C					
Street Address 88 Polifly Road					П		School (K-1 Subchapter Other (i.e. p	8 (Oth			ildings	, hom	es,
City (5) Hackensack					Н		etc.) Square Feet	# 0	f Floors		Bldg.	Age	
County (6) Bergen				Code (7) USE ONLY)			Current Use (Price	or if bei	ing demol	ished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8	3)	ASCI	M No.	Н		of Abatement Con		(9)				
Street Address					Н	AND THE PROPERTY.	Company Inc.						
		- 1			Ш		Piaget Ave						
City, State, Zip Code						City, S	tate, Zip Code n, NJ 07057	int.					
Project Manager for Monitoring Firm			Telepho	ne No.	Н	Teleph	one No. 253 8828		License 00704	No.			
Start Date (10) 02/16/2020	Schedu 02/22/		mpletion	Date (11)	H	Name	of OSHA Monitor Company, Inc		00704				
Occupancy Status During Abatement (Chec					Н		Address						
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: Occupied Warehous	nal Facilit	Abaten y Hours	nent s			City, St	tate, Zip Code						-
Scope of Work (Check All That Apply)					Н								
≥3 sf or ≥3 If × ≥160 sf or ≥260 If		Renova Demolii	200 200			×	Mini-Enclosure Glovebag Proc	edure					
	15	s Locat	ion		Ħ		Non-Exempted	(*) and	d Non-Fria	able Pr	11-12-11-11	re ement	
Location of		Normal ed Sole	ly		De	escription	of					уре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	aintena stodial s (12)	nce/	(i.e. the	erma surfa	ntaining M al systems acing, VAI miscelland	aterial (ACM) insulation, Γ, or eous)	(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A		Ш					<u>a</u>		ate	Гē
Warehouse	Х				Pipe	e insulat	ion	1	75lf	X	1		
Warehouse	×			F	Pipe	e Insulat	tion		50If		x		
Boiler Room	X			F	Pipe	e Insulat	tion	3	300lf	x			
Name of Registered Waste Hauler													
Newark Carting Inc.		H	JDEP Wauler ID 5409	(1) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	ubic f Wa	Yards aste	Name of F		red Landf	fill			
City, State Newark, NJ				D	ispo	sal Date	City, State Morrisvi		Δ				
Completed by Marek Wasiak	Title Vice-	-Presi	dent	1		Signature	1.10	// -	// [Date	2020		
						Ma	M MA	MO	181	2/07/	2020	100	

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(0)10313 PAI	D '		CATION	tate of Ne N OF ASB to NJAC	ES	TOS	ABATEME	NT	NE	CE		$\overline{\mathbb{V}}$		7
Date of Notification (1) 2/7/2020	Name of Building C LANXESS Solu							Mary Care of	V	EER I		000	The waster that the factor of the first	and the same of th
Agencies Notified Type Notification X EPA Initial			Street A		eo	rge F	Post Roa	d	77	FED	0 2	UZU -	Month and Market	<u> </u>
DEP Amended Amendment				ate, Zip Co , NJ 088			77.0		/19th	usinas Ligiti	CCA: VSHE	inc) i	. (32	14.7.7.
□ Emergency justification) □ DCA □ Cancellation				f Contact aniels	Ī					phone Nu 2-306-49				
Name of Facility Where Abatement is Takin	g Place (3	3)	FAC	ILITY INF	OR	MATI		pe of Facility	(4)		7			
LANXESS Solutions US Inc.	3	**						School (K-	2000					
Street Address 1020 King George Post Road							×	Subchapte Other (i.e. etc.)				dings	, hom	es,
City (5) Fords							Si	quare Feet	# of I	Floors	E	Bldg. A	\ge	
County (6) Middlesex				Code (7) USE ONLY	, .			urrent Use (Pri oiler house	200	-	2.5	lant	& tar	nks
Name of Monitoring Firm Hired by Building 6 Emilcott Associates, Inc.	Owner (8)		ASCN	ЛNo.				Abatement Co Demolition			tal Se	ervice	es, L	LC
Street Address 190 Park Avenue							Street Ad 992 Old	dress I Eagle Sch	ool Roa	ad, STE	910			
City, State, Zip Code Morristown, NJ 07960							The state of the s	e, Zip Code PA 19087						
Project Manager for Monitoring Firm David Tomsey	ne No. 38-1110	Ī		Telephone 484-58		- 1	License 1 01286	10.						
Start Date (10) 2/18/2020	Schedule		mpletion	Date (11)	İ			OSHA Monitor Demolition		ronmen	tal Se	ervice	es, L	LC
Occupancy Status During Abatement (Chec	k Only On	ne)			ı		Street Add				040			
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:							City, State	Eagle Sch e, Zip Code , PA 19087	001 R08	30, 515	910			
Scope of Work (Check All That Apply)							vvayrie	, FA 19001						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli					×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				· e	
		Locat			ı			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	7.077.770		Abat	emen vpe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal d Sole intena todial ((12)	ely by nce/		the	Contermal surfac	scription of aining Mate systems in cing, VAT, on niscellaneou	sulation, or	(Sp	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								1		ate	9
Ester -1 Roof		X			Sı	urfac	ing/Trans	site	21	SF	Х			
Ester-1 Tank (tops)		X					TSI		720) SF	X			
	+				-		*4(4)				X			-
Name of Registered Waste Hauler		100	JDEP W				Yards	Name of	Register	ed Landfil	1850	1		
Horwith Trucks, Inc.			Hauler ID W-199		3	of Was				County L	andfi	11		
City, State Northampton, PA							sal Date 2020	City, Stat Shippe		, PA		Pa		
Completed by Title Mark Klotzbach Vice President						S	ignature	1///			ate /7/20:	20		

	1_1	NV	#	17	1	7	5						L	rii	IIII FU
KUSIS PAID	1		CATION	ate of New I OF ASB to NJAC	ES	TOS A	BATEN			E C	EI	W			
Date of Notification (1) 1/14/20				f Building ay St LL			perator	(2)	IN				William Colors	No.	
Agencies Notified Type Notification	ddress				l		10 to 10 to	B 1 0 2	020		4				
EPA Initial Amended		-		ristophe ate, Zip Co			nbus E	IVd		90,000	COS CAN	Territ.	10	- 1	
DOL Amendment #		-	Jersey	City, N	11				e . v		10EMBIH6		estantes		
DOH justification) DCA Cancellation	olu ulli			f Contact Stroble						10000000	ephone Nur 1-217-66				
Name of Facility Where Abatement is Taking	Place (3	3)	FACI	LITY INF	OR	MATIC	NC	Type	of Facility (4)					
Former Manischewitz Factory	•								School (K-1	2)					
Street Address 143 Bay St.								×	Subchapter Other (i.e. p etc.)			al buile			es,
City (5) Jersey City, NJ								Squa 743	are Feet 852	# of	f Floors		ldg. A	ge	
County (6) Hudson				Code (7) USE ONLY	,				ent Use (Pri			ed)			
Name of Monitoring Firm Hired by Building Ov			ASCN	/I No.	Н			of Ab	atement Cor	ntractor	(9)				
Vertex Environment	-,1				Ц		Yann		Environn	nental	Services	inc.			
3322 US 22 City, State, Zip Code							135 H	Kinn	elon Rd. S	Suite 1	102				
1 0	08	8-79			П				Zip Code NJ 0740	5					
Project Manager for Monitoring Firm	ne No.			Teleph 908-4				License N 01228	0.						
Start Date (10)	Schedule	ed Con		- 479 - Date (11)	د د	228		50000	HA Monitor		01220				
Occupancy Status During Abatement (Check	Only On	1/2	24/20	² >					Environm	nental	Services,	Inc.	,		
Facility Closed/Vacated During Entire Pe		50.5. 5 0	nent		П		Street A		elon Rd. S	Suite 1	02				
Abatement Performed Outside of Norma Other – Describe:	l Facility	Hours	3				- TO CO.		Zip Code , NJ 0740	5	4				
Scope of Work (Check All That Apply)					П		_	,							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit					×	M Gl	ull Containm ini-Enclosure lovebag Pro	e cedure	3				
	lo	Locati	ion					I No	on-Exempte	d (*) an	d Non-Friab	le Pro	cedur Abate		t
Location of	1	Normal d Sole	ly		П		cription	on of				_	Ту	ре	_
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>	Ma	intena todial S	nce/		th	ermal	systems	insu	aterial (ACM) insulation,		mount Specify	Re	70	Enca	Enc
In Facility (13)	Ous	(12)	otan .				ing, VA)	SF	or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									_		ate	Ф
Crawl Space			х		F	oipe i	nsul &	soil		4	52 If	х			
cterior West & south Walls of structu			Х		Ц	Wal	I flashi	ng		4	140 If	Х			
			-		Н							-	-		
Name of Registered Waste Hauler		0.000	JDEP W			Cubic			Name of	Registe	ered Landfill				
Yannuzzi Group, Inc. Hauler ID No. 17467						of Was 30			GROW	'S Fai	rless				
City, State Kinnelon, NJ					1	/	al Date		City, Stat		Δ				
Completed by	Title						ignature		A/ A	me, r	Da	te			
John Mucha	Sr. P	rojec	t Mana	ger		1	th	- /	1/2/			/-	14-	20	
ASB-41 (R-06-08)					1	//	* Do no	t use	this form for	asbes	tos licensure	exer	npted	activ	ities.

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K1958 PAID	NOTI		TION	OF ASB	ES	TOS ABAT 60 and 5:10	A C Section of	EGI		\mathbb{V}_{-}						
Date of Notification (1) / / / /		ner/Operator (2)	FEB	0 2	020	e odnike e da sengerija	IJ								
Agencies Notified ☐ Type Notificat ☐ EPA ☐ Initial ☐ Amended		175	Address 5 Amwell tate, Zip Co		ad	1	ASASTOS LO	COKI NSING	ist.i.	da da	20 marin \$1/0.					
DOH Amendmer □ DCA (NJAC 5:23-8) Emergency justification	Son	of Contact	J 08	873		Telephone Nu				1-1-a 3						
Cancellation	on			on Szust		TATION.		201-602-7	301							
Name of Facility Where Abatement is Ta	king Place	(3)	FAC	CILITY IN	-OF	MATION	Type of Facility (4)	47/4							
Commercial Street Address 36 Conerly Road							School (K-12) Subchapter 8 Other (i.e., pri	(Other than K-		uilding	js,					
City (5) Somerset							Square Feet	# of Floors	В	ldg. A	ge					
County (6) Somerset			Coun	ty Code (7)	(STA	TE USE ONLY)	Current Use (Prid	or if being dem	olished)							
Name of Monitoring Firm Hired by Buildi Mark Jovic Consulting LLC	ng Owner (8) /	ASCM	No.			ent Contractor (9) NAGEMENT LL	C								
Street Address 4 Beaverbrook Road, Suite 130					Stre	et Address	0									
City, State, Zip Code					27 Outwater Lane City, State, Zip Code											
Lincoln Park, NJ 07035		T-1-	1	N.	Garfield, NJ 07026 Telephone No. License No.											
Project Manager for Monitoring Firm Mark Jovic		100000	phone I 3-650			epnone No. 73-928-488 8	3	License No.								
Start Date (10) So	cheduled Co	72 1				ne of OSHA N	Monitor	.c								
Occupancy Status During Abatement (C Facility Closed/Vacated During Entire			nent			et Address 7 Outwater	l ane									
Abatement Performed Outside of Nor Time of Abatement:AM	mal Facility	Hours	s - Des		City	, State, Zip Carfield, NJ	ode									
Scope of Work (Check all that apply) □ ≥3 sf or ≥3 If □ ≥160 sf or ≥260 If	⊠ Rei □ Dei					☐ Full Con☐ Mini-End☐ Gloveba	tainment with Neg									
	100000	Locati	307/51/53/7		T					batem	ent T	уре				
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Use Ma	d Sole intena todial S	ly by nce/	Asbes (i.e.	, the	Description of Containing Marmal systems urfacing, VAT her miscellane	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure				
Exterior- Windows	Yes	No	N/A	Window	Re	moval		76 Window	vs 🗵		°					
										-						
					ı					-						
Name of Registered Waste Hauler Century Waste, LLC		707.5	JDEP \ auler [32797	O No.	Wa	oic Yards of ste s Needed	Name of Regis Fairless La									
City, State Newark, NJ					Dis	posal Date	City, State Morrisville	, PA								
Completed By (Print or Type) Allen Monchik							Signature Date Allen Monchik 2/7/2020									

FVNI	+	\	19	72	-										Pri	nt Fo
K4825 PAU	D NO		CATION		BES	STOS	ABATEN 12:120				C		M			
Date of Notification (1) 02/07/20				f Building Chilens		wner/	Operator	(2)		promote laborate	-rn		200	^	A or to the second second	A CONTRACTOR OF THE PARTY OF TH
Agencies Notified Type Notification			Street A	ddress						ì	EB	U	ZUZ	U	and the second	1
EPA DEP DOL Amended Amendment # Emergency (in justification) Cancellation	cluding	-	Veron	ate, Zip C a, NJ C f Contact Chilens	70 t				1		Li(Li Ephone	Trull	Ġ.	01.6	i da	
Name of Facility Where Abatement is Taking	Place (3)		FACI	LITY IN	-01	RMAT	TON	Type	of Facility (4)						
Private Building Street Address		;							School (K-1 Subchapter Other (i.e. p	2) 8 (Oth	er than I & comm	K-12) ercial	build	ings,	home	es,
City (5) Verona		*****						Squar 6,00	e Feet 0	# 0	f Floors		1,555	dg. A)÷	ge	
County (6) Essex				Code (7) USE ONL					nt Use (Prio		ing demo	olished	i)			
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCN	/I No.			100000000000000000000000000000000000000		ement Cor			on. In	C.			
Street Address			L				Street	Addres								Ne stille
City, State, Zip Code									p Code J 07512					595		
Project Manager for Monitoring Firm		Telepho	ne No.			Teleph 973 2	one No 256 7			Licens 0066						
■ 1	Scheduled 02/23/20		pletion	Date (11)		1		IA Monitor struction	& Re	storatio	on, In	C.			
Occupancy Status During Abatement (Check							Street 265 l		s 46 Suite	3D						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe: Building is occupied / Basem	Facility I	Hours		. v ===================================		-	1		p Code J 07512							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	N Do	novat	ion					1	Containme	ont with	Megati	ve Dre	eeur	۵.		
≥160 sf or ≥260 lf		moliti					×	Min Glo	i-Enclosure vebag Prod n-Exempted	e cedure	3.50				9	
		ocatio		A Language Parket		D		-6							ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair Custo	Solel ntenan odial S (12)	y by nce/ taff?		e. th	s Con nerma surfa	escription ntaining IV Il systems acing, VA miscellan	laterial s insula T, or		(Amount Specify F or LF)	Accesses to the second	Removal	Repair	Encapsulate	Enclosure
Basement	Yes	No	N/A X			Pipe	e Insula	tion		18	85 LF		(
Name of Registered Waste Hauler		l N	JDEP W	/aste	T	Cubic	Yards		Name of	Registe	ered Lan	ndfill				
Bako Construction & Restoration, Inc			auler ID 0889	No.		of Wa			Fairles	s Hills			nag	eme	nt	
City, State Totowa, NJ						Dispo TBD	osal Date		City, Stat Morrisv		PA					
Completed by Goran Kojic	Title Projec	ct Ma	nager		1.11		Signature	'\ <u>\</u>	Res	(G)	7	Date 02/0		20		

	110 11				tate of Ne			Land Control of the C		0.0	n water	MARKET A	···				
K1028	PA	NOT					TOS ABAT :60 and 5:16		EGEU	\mathbb{V}		The second	procedure of the control of the cont				
Date of Notification (1)				Name	of Building	Ow	ner/Operator (2	2)			20.41	Anna and	The state of				
_01 / _3	0 / 2	020		Johr	Crimi				FEB 10	2020	V15/18	المما					
Agencies Notified T	ype Notificati	ion		A CONTRACTOR OF THE CONTRACTOR	Address						- C		Ť				
	☑ Initial							-	Tales das de	KirC	La		1				
☑ DOH	Amended Amendmen	ot #		City, S	State, Zip Co	de		V + 107	<u> </u>	2.24	tor the way	277.5	1				
DCA [☐ Emergency		а	Ken	vil, NJ C	78	347										
(NJAC 5:23-8)	justification	1)		Name	of Contact	ı			Telephone Num	ber							
	Cancellatio	n	Peters				9	-									
				FA	CILITY INF	OF	RMATION		•								
Name of Facility Where Aba	atement is Tal	king Place				Type of Facility	(4)										
House								School (K-12									
Street Address								Other (i.e., p	3 (Other than K-12 rivate and comme) rcial bu	ilding	IS.					
								homes, etc.)									
City (5)	-							Square Feet	# of Floors	BI	dg. A						
Wharton, NJ 0788	5			T-0		07.	TE 1/05 01/10	1800SF	2 floors		50-	+					
Morris				Cour	ity Code (7)(SIA	TE USE ONLY)		ior if being demolis	shed)							
Name of Monitoring Firm Hi	red by Buildin	a Owner	(8)	ASCM	No	Mar	ma of Abotomo	Residence ent Contractor (9)									
IAQ Guru LLC	rea by buildin	ig Owner	(0)	ASCIVI	NO.			Services L									
Street Address							et Address	services L	LC								
4 Beaverbrook Road	Suite 13	30						St, Second	floor								
City, State, Zip Code	, cuito io						y, State, Zip Code										
Lincoln Park, NJ 0	7035						lizabeth, NJ 07201										
Project Manager for Monitoring Firm Telephone No.							elephone No. License No.										
Mark Jovic 972-650-03							73-223-2391 02015										
Start Date (10)02/10/_2		heduled C				_	ne of OSHA M										
Occupancy Status During A	batement (Ch	A PERSONAL PROPERTY.			11-12-17	Stre	et Address						-				
☐ Facility Closed/Vacated [60	10.7	10.7	ment													
Abatement Performed O						City	State, Zip Co	de									
Time of Abatement:	AIVI	_PIVI/	PIVI		AIVI		20										
Scope of Work (Check all th	at apply)					Ī											
≥3 sf or ≥3 lf		□ Re	enovat	ion			Mini-Encl	ainment with Neg osure	jative Pressure								
≥160 sf or ≥260 lf		☑ De	emoliti	on			☐ Glovebag	Procedure									
		le	Loca	tion			iχi ivon-Exer	npted (*) and No	n-Friable Procedu				evicensise.				
Location of			Norma				Description of	f		7000	atem		T				
Asbestos-Containing Ma			ed Sole aintena				Containing Mat	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure				
TO BE ABATE IN Facility	<u>:D</u>	10 10 10 10 10 10 10 10 10 10 10 10 10 1	todial	Staff?	(I.e.,		rmal systems i urfacing, VAT,		(Specify SF or LF)	ova	air	nsde	uso				
(13)			(12)	_	-		ner miscellaned		,	-		ilate	e,				
		Yes	No	N/A		L											
Interior				\square	Wall p	las	ter		300 - 500 S	FX							
Exterior				X	Exterio	or	transite		1300 SF	X							
			П			Т				П	П	П	П				
												-	1				
Name of Registered Waste I	Hauler			JDEP /	Naste (Cub	ic Yards of	Name of Regis	tered I andfill		Ш	Ш					
NEWARK CARTING			7.55	lauler IE	No. V	Nas	ste .	GRAND C									
City, State				0450			40 C/Y osal Date	90.609.000.000.000.000.000	LINITAL								
						JIS	Josai Date	City, State	I DA								
Newark, NJ Completed By (Print or Type	, 17	Γitle					Cianat	Pen Argy									
	(c)		+ 1.1.	VD = =:	- K		Signature	1.	Da		122	20					
William Mawyin		Projec	LIVIZ	mage	=1		William	Maeny	M 0	1/30	/20	20					



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

Check \$ 3745

	1								8								
Date of Notification (1) 02/03/2020					of Building outh Stre				r (2)				G [5 1	V		In
Agencies Notified	Type Notification			Street	Address	Н					11/	E. E. Sanderson	- march a rise	7 a - 36 9 . 1 W	ed on his	er, Arenada	
□					aple Stre	et				VIII - A							Section 2
EPA X DEP	Initial Amended		ŀ		ate, Zip C					- 1		F	EB	10	202)—	
× DOL	Amendment	#			stown, N			0		1. 4		Ĩ			_		-
	Emergency		- F		of Contact		,, 00	,,,			-	Talanta			*	- materials	1
DOH DCA	justification) Cancellation				ichael J		lvin					Telepho (973) 9	ne Nu	nber	vi at	注点	
	Caricellation									1	2 .	(913) 8	250-2	094	14	ator v	
Name of Facility Where		g Place (3)		FAC	ILITY INF	OR	MAH	ION	Тур	e of Facility	(4)						
Wells Fargo Buildin	ig					Ш			П	School (K-	-12)						
Street Address										Subchapte	er 8 (0	Other tha	an K-12	2)			
21 South Street						Ш			×	Other (i.e. etc.)	priva	te & con	nmerci	al buil	dings,	home	es,
City (5)						Н			Squ	are Feet		# of Floo	ors	TE	Bldg. A	ae	
Morristown						Ш			10.70	500	100	4	357.0		30	3-	
County (6)			Т	County	Code (7)	Н				rent Use (Pr	rior if	heina de	moliet	°	250		
Morris				(STATE	USE ONLY) _				mmercial				icuj			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	/I No.			Name		atement Co			9	5/2-1			
TBD	,			,		Ш				tracting, L		101 (3)					
Street Address						Н		Street									
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City, State, Zip Code						Н					Oui	io it					
only orato, Elp oodo						Ш				Zip Code New Jerse	ω Ω.	7470					
Project Manager for Mon	itorina Eirm			Talaaba	N-	Н					зу О						
r roject manager for more	itomig Film			Telepho	ne No.	Ш		Teleph				7,000	ense N	0.			
Start Data (10)		0				Ш				3-5300		300	374				
Start Date (10) 02/17/2020		Scheduled 03/31/20		npletion	Date (11)	Ш				SHA Monitor							
										racting, L	LC						
Occupancy Status During	Abatement (Chec	k Only One)			П		Street			_						
Facility Closed/Vaca	ated During Entire F	Period of Al	atem	nent		Ш				ley Road,	Sun	te K					
Abatement Performe Other – Describe:	ed Outside of Norm	al Facility I	Hours	12		Ш				Zip Code		000000000000000000000000000000000000000					
_						Н		Wayı	ne, N	New Jerse	ey 07	7470					
Scope of Work (Check Al	II That Apply)					П		53,		0.5			0-0				
≥3 sf or ≥3 lf		× Re	nova	tion		Ш			Fu	ull Containm	nent v	vith Nea	ative P	ressu	re		
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IN# 17969

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

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County (6)					Code (7)	7,2			Curre	ent Use (P	rior if be	eing d	emolis			5	
Atlantic				(STATE	USE ONLY	2								>::			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASC	M No.			Name	of Aba	atement Co	ontracto	or (9)					
GZA								Pinna	icle l	Environn	nental	Cor	p.				
Street Address				-		Ī		Street									
55 Lane Road, Suite	e 407							200 E	Broad	Street							
City, State, Zip Code										ip Code							
Fairfield, NJ 07004								Carls	tadt,	NJ 0707	72						
Project Manager for Mon	itoring Firm			Telepho	ne No.	П		Teleph	one N	lo.		Lic	ense l	No.			
Ben Sallemi				973.7	74.3311			201-9	39-6	5565		00	756				
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Other – Describe: _			5076 5000) 						nd City, N	JY 11	101					
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DCA	Cancellation			Ricar	do Gut <mark>i</mark> e	erre	ez			-	-					
Name of Facility Where	Abatement is Taking	Place (3)	FAC	ILITY INF	OR	MATION	Tyr	oe of Facility	(4)						
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Name of Monitoring Firm Competent supervise		wner (8)	ASCI	VI No.	ı			batement Construction							
Street Address			-200			t	Street						218.000			
City Ct-ty 7' O I									te 46 Suite	e 14						
City, State, Zip Code						ı	10 2000		Zip Code NJ 07512							
Project Manager for Mon	itoring Firm		T	Telepho	ne No.	t	Teleph		scopping responsible desired		Licens	e No.				
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Start Date (10) 02/15/20		Schedul 02/22/		npletion	Date (11)		100000000000000000000000000000000000000		SHA Monitor s above							
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Facility Closed/Vaca Abatement Performe	ated During Entire P	eriod of	Abaten	nent		ı										
Other – Describe: _	ed Outside of North	ai raciiity	y nour:			1	City, S	state,	Zip Code							
Scope of Work (Check Al	l That Apply)					t										
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Academy Construction	on Inc		9.00	34422	140.	2			Fairles	s Land	dfill					
City, State Totowa NJ			•				isposal Date		City, Stat		^					
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

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Date of Notification (1) 02/03/2020					of Building outh Stre			r (2)			EC		V		
Agencies Notified	Type Notification				Address aple Stre	a ot			d. Brigading.	r	Windowski Warra	er de la desaria	ed crack &	Tels Hillians	The state of the s
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Wells Fargo Buildin	g	g Place	(3)					Тур	e of Facility	5000					
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County (6) Morris					Code (7) USE ONLY)		Cur	rent Use (Pri mmercial	or if be	ing demolis	hed)			
Name of Monitoring Firm TBD	Hired by Building	Owner (8	5)	ASCI	M No.			of Ab	atement Cor	ntractor					
Street Address						Sky		racting, LI	_C						
City, State, Zip Code								ley Road,	Suite	K					
								Zip Code Vew Jerse	y 074	70					
Project Manager for Moni	toring Firm			Telepho	ne No.		Teleph		No. 3-5300		License N 00874	lo.			
Start Date (10) 02/17/2020				npletion	Date (11)	-	Name	of OS	HA Monitor		00074				
Occupancy Status During	Abatement (Checi	03/31/ Only O					Sky (racting, LL	.C					
Facility Closed/Vaca	ted During Entire F	eriod of	Abaten	nent			1385	Vall	ey Road,	Suite	K				
Abatement Performe Other – Describe:	ed Outside of Norm	al Facilit	y Hours	8		_			Zip Code New Jerse	v 074	70				
Scope of Work (Check All	That Apply)							.0, .		, 01 1	-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demolit				×	Mi GI	ull Containme ni-Enclosure ovebag Proc on-Exempted	edure	<u> </u>				
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Name of Registered Waste Service Transport Gro			H	JDEP W auler ID	1977	Cubic of Was					red Landfill rprises, L	10			
City, State			120	990			al Date		City, State						
New Castle, Delaware		Title				TBD	ignature	1	Waynes	burg,		1-			
jiljana Sekularac			e Assi	stant		31	gnature	17		2	Da 02	te /03/2	020		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 02/06/2020 Rose Medlar FEB Street Address Agencies Notified Type Notification × Initial City, State, Zip Code Amended Amendment # Gloucester City, NJ 08030 Emergency (including Name of Contact Telephone Number justification) Rose Medlar Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Medlar Residence School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, × etc.) Bldg. Age Square Feet # of Floors 1,232 Gloucester City 3 120 County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Management & Environmental Consulting Serv Shade Environmental, LLC Street Address Street Address PO Box 341 623 Cutler Avenue City, State, Zip Code City, State, Zip Code Chesterfield, NJ 08515 Maple Shade, NJ 08052 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Bill Weisgarber 609-298-4070 856-755-0099 00842 Start Date (10) Name of OSHA Monitor Scheduled Completion Date (11) 02/17/2020 02/19/2020 EMSL Analytical, Inc. Occupancy Status During Abatement (Check Only One) Street Address 200 Route 130 North Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Cinnaminson, NJ 08077 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf × Renovation Full Containment with Negative Pressure

≥160 sf or ≥260 lf		Demolit	ion		Mini-Enclosur Glovebag Pro Non-Exempte		ble Pro	cedur	е	
Location of		Locati Vormal		Description of					ement pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole iintenar todial S (12)	nce/	estos Containing Mate e. thermal systems in surfacing, VAT, o other miscellaneo	erial (ACM) sulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A				-		ite	е
Kitchen, Bedroom No. 2, & Hallway		X		Floor Tile and Ma	astic	298 SF	X			
Name of Registered Waste Hauler Freehold Cartage		Н	JDEP Water ID ID 15939	Cubic Yards of Waste 3		Registered Landfills Landfill	II		l .	
City, State Freehold, NJ				Disposal Date 02/19/2020	City, Stat Morris	e ville, PA				
Completed by	Title			Signature	01	D	ate			

VP of Operations

Christina Fay

EPA

DEP

DOL

DOH

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City (5)

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County (6)

Camden

02/06/2020

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

FEB | 0 2020

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

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Agencies Notified	Type Notificat	ion		Str	reet Addres		RMON	ar.			-		
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M DOH □ DCA	justificatio	n)	3	Na	me of Cont	act			one Numb				
				F		FORMATION						_	_
Name of Facility Where A	batement is Tal	king Pla	ce (3)		AGIBITI	a ordination	Type of Faci	lity (4)					
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Street Address							Subchapt Other (i.e.	., private & c	than K-12) ommercia	l I buil	ding:	s,	
City (5)							homes, e		oors	TB	ldg. A	Age	
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County (6)	E MAY	 t			unty Code SE ONLY)	(7) (STATE	Current Use	Prior if being		ned)			
Name of Monitoring Firm I				ASCI	M No.	Name of Abate	ement Contractor	(9)		_			_
(8) W	/A					_ KL	tM(O)	MC					
Street Address						Street Address		RILE	IA LE				
City, State, Zip Code						City, State, Zip	Code) T				_
Project Manager for Monit	oring Firm		Tel	ephone	e No.	Telephone No.	PLE SH	ADE U		250	557	_	_
							19-047		013	7	L		
Start Date (10)	Sch			etion D	ate (11)	Name of OSHA	Monitor	۸					
Occupancy Status During		eck only	one)			Street Address	MI	4			-		=
Facility Closed/Vacated Abatement Performed 0						0: 0: 7:							
Other - Describe:		э гасни	y riou	15		City, State, Zip (20de	÷.					
Scope of Work (Check all t	hat apply)		1			□ Eull Co	ntainment with N	a setive D					
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Sity, State - WAPLE SH	ADE N	, J				Disposal Date	City, State	50 Diw	F	١١,	T:		
ompleted By	Title	SUP	Lini	50	0	Signature.	1001		late	3-	20	>	
MICHAEL LUM	un	JUP	LKV	12	10.	- 100	VIII-	<u> </u>		_			-

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NOTIFICATION OF ASSE

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

Date of Notification (1)	-3 -20				ding Owner/Operato	or (2)	(19/00)	. 11	1 1 1 1 1 1 1		
Agencies Notified	Type Notifica	tion		Street Addres	ARBAUG	+ DEV	ELOPTRS	-N-51	7€4 -7€4	.60.4.	
Agencies (400fied	I ype Notifica	oon				SSBORD	RD				
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DCA	Cancellatio			Name of Cont	ME.		Telephone Nu	mber			
					NFORMATION						
Name of Facility Where A			ce (3)			Type of Faci	lity (4)				-
	ESIDEN	CE				School (K	(-12) er 8 (Other than K-	120			
Street Address		Character Co.				Other (i.e	, private & comme	rcial b	uilding	ıs,	
City (5)		l.				homes, e Square Feet		- 1	Bldg	Age	
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County (6)	EMA	۲		County Code USE ONLY)		V	Prior if being demo	lished	d)		
Name of Monitoring Firm F	fired by Building	owner Owner	A	SCM No.	Name of Abatem						en Para
Street Address	NIA				Street Address	MICO .	INC				
ou ect Address					369	S. Sp	RUCE AL	1-			
City, State. Zip Code				*	City, State, Zip C	ode	ADE M.	T	7)8	-05	= ->
Project Manager for Monito	oring Firm		Telepi	hone No.	Telephone No. 856 719		License No.	1 3	7	1	
Start Date (10)	I Sch	eduted C	omoletic	on Date (11)	Name of OSHA N		1 0	1-	1	1	
2-13-70	.	2 -		-20		N/	A				
Occupancy Status During					Street Address						27
Facility Closed/Vacated Abatement Performed O				ent	City, State, Zip Co	vda.					_
Other - Describe:	ouside of Horris	SI I BOWIE	, 110010		City, State, 2p C	Me .					
Scope of Work (Check all the	hat apply)										
≥3 sf or ≥3 H ≥ 160 sf or ≥260 If			novation molition	*	☐ Mini-Encl	osure Procedure	egative Pressure on-Friable Procedu	ıre			
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KLEMCO II	uc_		Haule	ONO.	S VDS	_C,	M. C. M	. U	. 14		
ity, State MAPLE SHO	ADE	W.	7		Disposal Date	City, State 🕬	OBINE	N	. T		
ompleted By	Title				Signature 0	\bigcap_{a}	Date .	7 -	-7í)	
MICHAEL KUN	um	SUPT	K		Men	U M		<u>\</u>	u	_	

Inv# 17962

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

CK9144

Date of Notification (1)	,	-	Name	of Daile	ling Owner/Operato	-	TO E C	E	- [//	(5
2/6/20			MS	HA	YDEE M	1(2) ACTINE		<u> </u>	13	1	n Tour
Agency Notified Type Notification				Addres			Trail				-
□ EPA □ Initial							III FEE	10	202	0	Part of Not
□ DEP □ Amended			Cay,	Hatte, At	coge .	-					-
Amendment # D Emergency (inclu			N	EW	MILFOR	N D	J. 076	46			4
A DOH justification)	ruing		LACUITO	Of COURT	du		Telephone Num	ber	12.0	(;)	24
□ DCA □ Cancellation			1	S.	MARTINEZ	7	-4 -4	4.0			ا بيد جول
			FAC	ILITY IN	FORMATION						
Name of Facility Where Abatement is Taking F	tace (3)		•		Type of Facili	ity (4)				_
MS. HAY DEE M	AR	TIL) = 2	a_ ·		School (K-	12)				
Street Address	78.			0.15	,	☐ Subchapte	s 8 (Other than K-12) .			
				,		homes, et	private & commercia c.)	il busiding	5,		
City (5)	_		8		*19		# of Floors	Bldg. A	ge		
NEW MILFOR	7			14		2000	. 2	19	51	0	
County (6)			Count	y Code (7) (STATE USE	Current Use	Prior if being demoli	shed)			
BERGEN.			ONLY	· · ·	A-100	RE	SI DE NCE				
Name of Monitoring Firm Hired by Building Ow (8)	ner	ASC	A No.		Name of Abatem					_	-
					Best Rei	noval I	nc				
Street Address										-	-
	¥				450 Sout	th Rive	r St				
City, State, Zip Code					City, State, Zip C	ode	5 50		-		_
					Hackensa	ack, N.	J. 07601				
Project Manager for Monitoring Firm	T	elepho	ne No.		Telephone No.		License No.		-		
O					201-329-	-7444	00388				
Start Date (10) Scheduled (Name of OSHA I	rotinol			=	-	-
2/18/20 2/2	201.	20	2		Omega H	Invironm	nental				
Occupancy Status During Abatement (Check or					Street Address	J				1	
D Facility Closed/Vacated During Entire Period	of Aba	tement	t		280 Hu	yler St	•				
☐ Abatement Performed Outside of Normal Fac ☐ Other - Describe: 8:00 km To	Ho	urs O		33	City, State, Zip C		,				
Scope of Work (Check all that apply)	5.00	SP /7			S. Hac	kensack	,N.J. 07	606			
□≥3.sfor≥3 #				6	AT Full C	ontainment wit	h Negative Pressure				
22 160 st or ≥ 260 ¥		•	☐ Ren		□ Mgg-	Enclosure		18			
				CHOOL		bag Procedure Exempted (*) as	d Non-Friable Proce	dette			2000
	ls	Locati	ion						Abata	me	nt
Location of	1	Vormal	ly	:		_		-	Ty	pe	_
Asbestos-Containing Material (ACM)	Ma	d Sole	nce/	Asbe	Description o stos Containing Ma	terial (ACM)	Amount	-		-	
TO BE ABATED IN Facility		potan	al	(i.e	thermal systems	insulation.	(Specify	160	Repair	noa	Enclosure
(13)	ĺ	(12)			surfacing, VAT,		SF or LF)	Kemova	phi	nad	180
	-		Γ		•			2	- -	late	6
BASEMENT	Yes	No	N/A								
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N									T		
Name of Registered Waste Hauter			Vaste H	auder	Cubic Yards of	Name of Regi	stered Landilli				-
Best Removal Inc	in	No.	109		Waste 2 1 0 02	4				٠.	-
City, State		1/.	109		5.12/	CUMBERL	AND COUNTY	LAN	DFI	LL	
Hackensack , N.J. 07	601				Disposal Date	City, State					
Completed by Title	001				2/21/20 Signature	NEWBUR	6H, PA. 17	240		`	
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ASB-41 *Do 20					110	no perm	>	-/16	12	. ~	1

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Agencies Nutrited Type Notification		Colombia	Street A			- Familia				7	1	_	+
EPA Inital Amended		-	City, 8t	ete, Zip Code					AIVER	A rb	五	OVE	<u>-</u>
Amendment Emergency (Contact	' iL	1				-			-
BOA Justification) Cancellation			0	od emit				Tel	aphone_Nun	nd er_	•		d
Name of Facility Where Abstament is Taking	Place (3)	PAG	Bright Co. 1740		Type	Y Facility						
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an But-call					,	Squan		90	Floore	TE	lidg.	ge	
County (8)			County (\$7475	Code (7) UBS ONLY?		Andrews .		er II bel	ng demoilen	ed)			-
Name of Monitoring Firm Hired by Building C	Miner (5)		ASC	I No.	Name	of Abati	IMM Go	Niractor	de an	<i>y</i>			emain-plais
Great Address				Total Control	A. Carrier and Control of the Contro	Address	htractin ₍	j inc.					and and the
City, State, Zip Cods		-	-				nd Ave.						
					Midia	italo, 24 and Pe	o Godo Irk, NJ (7432			7		
Project Manager for Monitoring Pirm		T	Telepho	ne No.	Telaph	ione No 282-58	,		License No).	distance.		
Blant Date (10)	Schedul	of Con	not all an	Date (11)	Neme	of 03H	A Monitor			-	T-100 4500e	0.0000	-
Occupancy Status During Absternant (Check	5 To 10 To 1		100		PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS	Address		ntal 8	ervicer inc	3.			
Facility Closed/Vacated During Entire P Absternant Performed Outside of Normal	eriod of	Abster	teer		280	Huyler	Street					Division and the	
C Other - Desembe:	er Larendi	y PIONAPE			Heck	ieto, Zi conoac	Code k. NJ 6	7606					
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Looptian of	1	Locati Vormal	M	Day	artation						Abat	errent pe	
A4bestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Me	d Bals Interes IOdiel E (12)	nce/ Bts/17	Asbestos Cont (I.e. Itemas) surfe	alping N	interiei () inaulei T, er	ACM) lon,	A (8) 48	mount Ipsoilly or LF)	State of the last	Corpus	Encapacin	Endeame
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Name of Registered Waste Hauter Newark Carting Inc.		N	JOEP W Autor ID 1509	No. Gublo	Yerds			Registe	red Landilli I Sanitary		r440231		-
City, State Newark, NJ 07108	-	100	4646	Dispela	7 8) 10/15 4/20	-	City, Stel	9		tedil.	enië	-	
Completed by	Title				grielure	-	Pen An	O PA	08072	4 /	_	k (any granter	
R. MoDonald	Pres	dent				DC.	1118	Freeh	a a	1./4	1/2	0	



X14(e)	PA	10		CATION	ate of Ne I OF ASB to NJAC	ESTOS	ABATE		T),E	C E		$\overline{\mathbb{V}}$	0.8.0	1
Date of Notification (1) 02/05/20					f Building Constru		Operator	(2)			FEB	102	020	the same and the same of the s	
Agencies Notified Typ	e Notification			Street A	ddress							57 L	020	<u> </u>	_5 :
EPA X	Initial Amended			City, Sta	ite, Zip Co	ode				Approcum		1,520	1 a 1 4, 7 y	k -/4	- 1
X DOL	Amendment Emergency (ood, NJ		1		11 12		يابراليا	HILLING	ž meneralis		- 1
DOH DCA	justification) Cancellation	inologing			f Contact Constru	ıction				0.000	lephone 1 8-373-4				
Name of Facility Where Abate	ement is Taking	Place (3	3)	FACI	LITY INFO	ORMAT	ION	Type	e of Facility	(4)					
			· 						School (K-	12)					
Street Address								×	Other (i.e. petc.)	private (& comme	rcial bu	- 20		es,
City (5) Lakewood								Squ	are Feet	# 0	f Floors		Bldg.	Age	
County (6) Ocean			i	County (Coda (7) JSE ONLY			Curr	rent Use (Pri ne	or if bei	ing demo	lished)			
Name of Monitoring Firm Hire	d by Building (Owner (8)		ASCM	l No.				atement Co						
Street Address							Street 6 Wh		ess DOVE C	OURT	-				
City, State, Zip Code									Zip Code OOD, NJ 0	8701					
Project Manager for Monitorin	g Firm			Telephor	ne No.		Teleph 732-				License 1200	e No.			
Start Date (10) 02/06/2020		Schedule 02/07/2		mpletion (Date (11)		2500		SHA Monitor D PROFE		NALS				
Occupancy Status During Aba Facility Closed/Vacated				ment			Street 6 Wh		DOVE C	OURT	: :		7		
Abatement Performed O Other – Describe:						_			Zip Code OOD, NJ 0	8701					
Scope of Work (Check All Tha	at Apply)	2000					_				-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoli				×	M G	ull Containm ini-Enclosure lovebag Pro on-Exempte	e cedure				re	
			Locat	77.7.200									Aba	emen	t
Location of Asbestos-Containing Mate TO BE ABATED In Facility (13)		Use Ma	Vorma d Sole intena odial (12)	ely by ince/ Staff?		tos Cont thermal surfa	scription taining M systems cing, VA miscellar	Materia s insu .T, or		(5	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								<u>a</u>	"	late	lre
INTERIOR					CL	EANU	IP TSI	DEB	RIS	5	50LF	х			
															-
												-	-		-
Name of Registered Waste Ha	auler		1	NJDEP W	aste	Cubic	Yards		Name of	Registe	ered Land	Ifill			
NEWARK CARTING				Hauler ID 4509	No.	of Wa			IESI	1032					
City, State NEWARK, NJ				_			sal Date 7/2020	ž	City, Stat BETHL		/I PA				
Completed by JOSEPH PERLSTEIN		Title OWN	IER			S	Signature	;				Date 02/05/	20		

Inv# 1791

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

KI474 PAT	N		CATION	of New OF ASB to NJAC	ESTOS	ABATE		The state of the s		EC	EI	W	Pan T	And the second s
Date of Notification (1) 02/06/20				Building town Sh				.c		FEB	10	2020	41 11 11	
Agencies Notified Type Notification			Street Ad	ddress Cedar B	ridae A	venue	e. Suit	e 1	1	mann or a set of	x11 mm		1	
EPA Initial Amended Amendment Emergency			City, Sta	te, Zip Co ood, NJ	ode		,			Lic.	erfe⊈ik		<u></u>	
DOH justification) Cancellation			Name of Barbar	Contact a Bacio	or					Telephone 717-424-				
Name of Facility Where Abatement is Takir	g Place (3)		FACIL	LITY INFO	ORMATI	ON	Type	of Facility	(4)					
2695 Route 516	3							School (K	(-12)					
Street Address 2695 Route 516							×	Subchapt Other (i.e etc.)	er 8 (O . privat	ther than kee & comme	(-12) ercial bu	ildings	, hom	es,
City (5) Old Bridge								re Feet	#	of Floors		Bldg.	Age	
County (6) Middlesex			County C (STATE U	Code (?) ISE ONLY)			ent Use (Foping ce		peing demo	lished).			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	l No.				tement C		tor (9) IONALS				
Street Address			-				Addre:	ss DOVE (COUR	RT				
City, State, Zip Code								ip Code OD, NJ	0870	1				
Project Manager for Monitoring Firm			Telephor	ne No.		0.0000000000000000000000000000000000000	none N 668-9			License 1200	e No.			
Start Date (10) 02/16/20	Scheduled 02/18/2		npletion [Date (11)		F 25 25 25		HA Monito		ONALS				
Occupancy Status During Abatement (Chec			reso ²				Addres	ss DOVE (т				
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:						City, S	State, Z	ip Code OD, NJ		7.0				
Scope of Work (Check All That Apply)						LAN	LVVO	OD, NJ	0070	1				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova				×	Mir Glo	ni-Enclosu ovebag Pr	ure ocedur				re	
W		_ocati			12				T			Aba	temen ype	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair Custo	Sole	ly by nce/		tos Cont thermal surfac		Material s insula T, or			Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
W.T.F.D.O.D	Yes	No	N/A										te	
INTERIOR					TILE	& MAS	STIC		1	1,600SF	x	-	-	
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic	Yards		Name o	of Regis	stered Lan	dfill			
NEWARK CARTING			auler ID 4509	No.	of Was 8			IESI						
City, State NEWARK, NJ					Dispos 02/18	sal Date 3/20		City, St BETH		EM PA				
Completed by JOSEPH PERLSTEIN	Title OWN!	ER			S	Signature	9		36		Date 02/06	/20		

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

Check \$ 3745

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Date of Notification (1) 02/03/2020				of Building			r (2)	1		EC			W	Lin	I'm
Agencies Notified Type Notification				Address				¥7.	m	THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O	er visit and an dec		and the	No. will	A CONTRACTOR
EPA Initial Amended			Francisco Contractor	aple Streate, Zip C						FEE	} 1		020		
X DOL Amendmen				stown, N		60		į	.,			-	.020		الاستنداط ا
■ DOH Emergency justification)				of Contact					Te	elephone	Numbe	er .	1200	. 24	-
DCA Cancellation	1			ichael J				1	(9	73) 936	389	4146	2		
Name of Facility Where Abatement is Takir	g Place (3	3)	FAC	ILITY INF	ORMAI	ION	Туре	of Facility	(4)					5=	
Wells Fargo Building Street Address								School (K-	12)						
21 South Street							×	Subchapte Other (i.e.	r 8 (Otl private	her than he comme	(-12) ercial b	uildi	ngs, h	ome	es,
City (5)		-						etc.) re Feet		of Floors			lg. Ag		
Morristown							50,5		4			13		~	
County (6) Morris				Code (7) USE ONL)		Curre	nt Use (Pr nmercial	ior if be	ing demo	olished)				
Name of Monitoring Firm Hired by Building TBD	Owner (8)		ASC	M No.				tement Co acting, L		r (9)					
Street Address						Street	Addres			K		-			
City, State, Zip Code	State, Zip Code							ip Code	Suite	IX					_
	ject Manager for Monitoring Firm							ew Jerse	y 074	70					
Project Manager for Monitoring Firm		Telepho	ne No.			none No 928-			License 00874						
Start Date (10) 02/17/2020	Schedule 03/31/2		mpletion	Date (11)		Contraction of the Contraction o		A Monitor							
Occupancy Status During Abatement (Chec	k Only On	e)					Addres	-							
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm	Period of A nal Facility	baten Hours	nent s			City, S	tate, Zi	y Road, p Code							_
Other – Describe: Scope of Work (Check All That Apply)					_	Wayı	ne, Ne	ew Jerse	y 074	70					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If			41				1			0000 000					
≥160 sf or ≥260 lf	- Contracting	enova emolit				×	Min Glo	Containm i-Enclosure vebag Pro	е	n Negativ	e Press	sure			
						×	Nor	n-Exempted	d (*) an	d Non-Fr	iable P		dure batem		
Location of	N	Locati ormal	ly		Des	scription	of					A	Туре	ent	
Asbestos-Containing Material (ACM) TO BE ABATED		Sole		Asbes	tos Cont	aining M	laterial	(ACM)		mount				m I	ш
In Facility (13)	Custo	odial 9 (12)	Staff?	(1.6.		cing, VA	T, or	uon,		Specify For LF)	Kemova	-	Repair	caps	Enclosure
(13)	Yes	No	N/A		otner n	niscellan	eous)				oval	-	air	Encapsulate	sure
See Attached												+	+	+	\dashv
											+	+			\neg
											+	1			\neg
Name of Registered Waste Hauler		175000	JDEP Wauler ID		Cubic of Was			Name of							
Service Transport Group, Inc.		17.5	990		TBD			Minerva		rprises,	LLC				
City, State New Castle, Delaware					Dispos TBD	al Date		City, State Waynes		Ohio					
Completed by Ljiljana Sekularac	Title Office	Assi	stant		Si	gnature	17		2		Date 02/03	/20	20		

Wells Fargo Building 21 South Street Morristown, New Jersey) ECEIVE

FEB 10 2020

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
						Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A			B		ate	-G
Basement (Back Storage)	Х			9" Brown w/ Black Streaks Floor Tile	250 SF	Х			
Basement (Storage Hallway)	×			9" Orange Floor Tile	75 SF	Х			
Basement (Hallway)		Х		9" Maroon Floor Tile	500 SF	X			
Basement (Kitchen)		Х		12" x 12" Brown w/ Red Floor Tiles	800 SF	Х			
Basement (Closet)	×			9" Grey Floor Tile	30 SF	Х			
First Floor (Exit)		Х		Fire Door	1 each	Х			
Second Floor (Stairwell)		Х		9" Brown Floor Tile	40 SF	Х			
Third Floor (Room 3B)		Х		9" Tan w/ Brown Floor Tile	100 SF	Х			
Fourth Floor (Server Room)		Х		9" White Floor Tile	100 SF	Х			
Throughout (HVAC Rooms & Hallway)	×	Х		Pipe Fitting Insulation	103 each	Х			