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Agencies Notified Type No  ☑ EPA ☐ Initia	tification			Street	Address			5 5 6	The second second	1.7751	-	energy and a	er or -	
☑ DOLWD ☐ Ame				011	7. 0									
	ndment #			10000	State, Zip Co		1.07004							
	gency (ir	ncluding	g		ex Fells,	, N	J 07021							
(NJAC 5:23-8) justif	ication)				of Contact				Telephone N	lumbe	r			
Cand	ellation				e McCa		,		- 3					
				FA	CILITY INF	FOR	MATION							
Name of Facility Where Abatemen	t is Takin	g Place	e (3)					Type of Facility						
Residence								☐ School (K-1) ☐ Subchapter		-12\				
Street Address								Other (i.e., p	rivate and com		al bu	ilding	s,	
								homes, etc.						
City (5)								Square Feet	# of Floors		1,570	lg. Ag	e	
Essex Fells								2,900	2	- %	13	0		
County (6)					35	(STAT	TE USE ONLY)	Current Use (P		nolishe	ed)			
Essex				070				Residence						8
Name of Monitoring Firm Hired by	Building (	Owner	(8)	ASCM	A-0.000			ent Contractor (9						
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						0 Rifle Ca								
City, State, Zip Code							State, Zip Co		0.4					
N/A			1.7-1-					ark NJ 074	and the same of th					
Project Manager for Monitoring Fire	n		235.50	phone			phone No.	20	License No					4
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Scope of Work (Check all that appl	(A)					VVC	ouland P	ark NJ 074	24					
	у)						☐ Full Conta	ainment with Ne	gative Pressure	:				
		-	enovati				Mini-Encl							
☐ ≥100 St 01 ≥260 II			emolitio	)[]			☐ Glovebag ☐ Non-Exer	npted (*) and No	n-Friable Proce	edure				
		Is	Locat	ion						T	Aba	ateme	nt Ty	vpe
Location of			Norma				Description of			t			-	-
Asbestos-Containing Material (A	ACM)		ed Sole intena				Containing Mat mal systems i		Amount (Specify		Removal	Repair	nca	nclo
IN Facility		Cus	todial	Staff?	(1.6.,		urfacing, VAT,		SF or LF)	1	val	=	Encapsulate	Enclosure
(13)			(12)	1	-	oth	er miscellaned	ous)					ate	(0
		Yes	No	N/A						-				
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Name of Decistored Wests Head			Ц.		Masta	CI-L:	a Vardo -f	Name of Deci	tored Landell			Ц	Ш	Ш
Name of Registered Waste Hauler			100	IJDEP \ lauler ID	A CONTRACTOR OF THE CONTRACTOR	Cubi	ic Yards of te	Name of Regi						
	Acme Professional Services Corp							Fairless L	andfill					
City, State					- 83	osal Date	City, State							
Woodland Park NJ						24/2020	Morrisvill	e PA						
Completed By (Print or Type)	Title	9					Signature	20 20 20 20 20 20 20 20 20 20 20 20 20 2		Date			-	
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Date of Notification (1) 02/03/20 CI	heck #3543			Name of St. Mar	Building C y & Eliz					FE	B 1	20	20	The state of the state of		
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DEP × DOL	Amendment		_		NJ 070					ACCOUNTS ON THE	Seller Com	- 11 · · · ·	entraria.	المندجينية	Sant Selection	
□ DOH □	Emergency ( justification)			Name of						(2000)	phone N		٢			
DCA L	Cancellation			Sandy	.ITY INFO	DAMAT	ION			973	3-951-2	3/3			-	-
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St. Mary & Elizabeth	Academy							×	School (K-12		- th 1/	40)				
Street Address 170 Hussa Street								H	Subchapter Other (i.e. p				uildii	ngs,	home	s,
City (5)								Sai	etc.) uare Feet	# of	Floors	1	Blo	lg. A	ge	-
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County (6) Union				County C	ode (7) SE ONLY)				rrent Use (Pric	or if bein	ng demol	ished)				
Name of Monitoring Firm H	ired by Building	Owner (8)		ASCM			Name		batement Con	tractor	(9)					
							EA S									
Street Address	*		7-2-				Street 426		Section 1							
City, State, Zip Code	-883								, Zip Code erg, NJ 070	93						
Project Manager for Monito	oring Firm		Т	Telephon	ne No.		Telepi				License					
ect. Mar:							( Care Co. 1)		5-8713	, l	01074					
Start Date (10) 02/17/20		Schedule 02/20/2		mpletion E	Date (11)				SHA Monitor s above						3- 6-0	
Occupancy Status During A	Abatement (Chec	k Only On	e)		17		Street	Add	ress			7-2-2-5				
Facility Closed/Vacate Abatement Performed Other – Describe: 8ar	Outside of Norn						City, S	State	, Zip Code					_	_	
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In Facility (13)		Cus	(12)	Staff?	. 320		acing, V/ miscella			SF	or LF)		Removal	Repair	Encapsulate	Enclosure
(10)		Yes	No	N/A								1	2		ate	re
New Boiler F	Room	X			P	CM F	Pipe Ins	sula	tion		4 LF	X				
New Boiler F		X			Sp	rayed	d on Fir	epr	offing	:	2 SF	Х				
Old Boiler R	Room	X			AC	M Fu	rnace l	Insu	lation		1 SF	Х				
Name of Registered Waste	e Hauler			NJDEP W		200000000000000000000000000000000000000	c Yards		Name of			dfill				
EA Services				Hauler ID 101278	NO.	of W			Minerva	a Entr	eprise					
City, State Guttenberg, NJ					Car and Charles	Disp TBD	osal Date	е	City, Stat Wayne		, ОН					
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2020-02-06 D8:59 Shada Environmental 1 >> 609 633 0664 P 2/4 Print Form FFR State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:920) Dale of Nollfication (1) Name of Building Owner/Operator (3 02/06/2020 Patrik Hellberg Agencies Notified Type Notification Street Address FEB FPA le Gni 22 23 DEP City. State, Zip Cods Amondod Amondment # Clinton, NJ 08809 X Emergency (Including PROVER WAIVER 图 DOH justification) Cancolistian Name of Contact Patrik Hellberg FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Hellberg Residence School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, City (d) mic.) Squara Foot # of Floors Clinton Bldg, Age 2,460 135 County (6) County Code (7) Current Use (Prior If being demolished) Hunterdon Residence Name of Monitoring Pirm Hired by Building Owner (8) ASCM No. Name of Absternent Contractor (9) Management & Environmental Consulting Serv Shade Environmental, LLC Street Address Street Address PO Box 341 623 Cutler Avenue City, State, Zin Code City, State, Zip Code Chasterfield, NJ 08515 Maple Shade, NJ 08052 Project Manager for Monitoring Firm slephone No. sisphone No. License No. Bill Weisgarber 609-298-4070 856-765-0099 00842 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 02/08/2020 02/10/2020 EMSL Analytical, Inc. Occupancy Status During Abatement (Check Only One) Stroot Address Facility Closed/Vacated During Entire Period of Abstement Abotement Performed Gutside of Normal Facility House Other -- Describe: 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077 Scope of Work (Check All That Apply) 23 sfor 23 lf Renovation Full Containment with Negative Pressure 2150 sf or 2260 if Dempillion Mini-Endogues Glovebag Procedure Non-Exampled (7) and Non-Friable Procedure is Legation **Abatement** Normally Location of Тура Description of Asbestos-Containing Material (ACM)
TO BE ABATED Used Bolely by Asbestos Containing Materiol (ACM) Maintenance/ Amount (I.o. thormal systems insulation, Encapaviate Custodial Starry in Facility Enclosuse Remova surfacing, VAT, or (12) (13) piner miscallantous) Yes No NA Basement around Boller X Pipe insulation 40 LF × Heater Area & Laundry Room X Pipe Insulation 68 LF x Name of Registered Waste House: NJOEP Waste Cubic Yards Name of Registered Landfill Heuler ID No. Freehold Cartage of Waste 15939 Fairless Landill City, State Disposal Date City. State Freehold, NJ 02/10/2020 Morrisville, PA Completed by Sjonsture Christina Fav VP of Operations 02/06/2020

ASB-47 (R-05-08)

\*Do not use this form for asbestoe Boansure exempted activities.

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Street Address Gity (5)						-	Subs Other	pol (K-12) phapter 8 (O If (I.e. private	ther than i	K-12) erdal b	ui)dings	s, hor	mos,
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Passaic Name of Monitoring Firm Hired by Building	-		the state of the	ty Code (7 E LUBE ON	la _		Current U	as (Frior if be	aing demo	(lished)			VIIII
Street Address	J CANUEL (	8)	AS	ON No.		Name A. M	of Abatemi ac Contra	nt Contracto	Fr (8)			-	
Gity, State, Zip Code						Streat	Address						
						City, S	tate. Zip Co						
Project Manager for Monitoring Firm	2.00		Teleph	YOU BUILD		Teleph	one Na.	NJ 0/432	License		-		
Start Date (10) D2/08/20	1 832/13	<i>1</i> 20	mpletion	n Date (11	)	Name	62-5841 0 OSHA M	onitor	00156		**************************************		
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Other - Describe:	mal Facili	y Hour	E			City, St	ala, Zip Con	de					
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Asbestos-Containing Meterial (ACM)		Vormal	ly		Den	origion a				110	Abate Typ	ment	r
TO BE ABATED In Facility (13)	Cus	ed Sole lintenes todial & (12)	hoe/ ball?	Asbe (Le	the Control : the mail :	Ining Ma	rterial (ACM insulation.	(8	mount pecify or LF)	Петема	Repair	Encapsulate	Enclosure
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Newark Carting, Inc.		Hs	wler ID 509	No.	of Wash	ê		of Register nd Central			dfill		
Newark, NJ 07105					O2/06/2	Dete 20 on	City,	State Argyl, PA					-
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Date of Notification (1) 02-05-20	100			f Building en Phar			(2)		E	GE		D		
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			FACI	LITY INF	ORMAT	ION		111-01-0						
Name of Facility Where Abatement is Takin Street Address 1000 Route 202	ng Place (3	3)						of Facility (4 School (K-12 Subchapter of Other (i.e. pretc.)	?) 8 (Other			dings,	hom	es,
City (5) Raritan								re Feet	# of F	loors	- 22	ildg. A 4 yrs	-	
County (6) Somerset				Code (7) USE ONLY	,	_		nt Use (Prio nmercial	r if being	demolis	hed)			
Name of Monitoring Firm Hired by Building Environmental Health Investigators			ASCN	/ No.				tement Cont Environme						
Street Address 655 West Shore Trail						0.000	Addres Broad	ss I Street						
City, State, Zip Code Sparta, NJ 07871								ip Code NJ 07072						
Project Manager for Monitoring Firm Bill Kerbel			Telepho (973) 6	ne No. 351-104	0		none N 939-6			License 1 00756	No.			
Start Date (10) 01-17-20	Schedule (1)03-3		npletion	Date (11)		A STATE OF S	of OSH n-Air II	HA Monitor						
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Name of Registered Waste Hauler Newark Carting, Inc.		Н	JDEP W auler ID 4509		of Wa	Yards ste		Name of R						
City, State Newark, NJ 07105					Dispo:	sal Date	)	City, State Morrisvil		19067				
Completed by Richard Doran	Title Proje	ct Ma	nager		8	Signature		1.0	D		ate 2-05-2	20		

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Project #			FICATIO	N OF ASE	BESTOS	ABATEN		С	heck# 4	817			
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DCA Cancel			Chris I	Klug			*		8-229 60	2	+2		
			FAC	ILITY INF	ORMATI	ON							-
Name of Facility Where Abatement is	Taking Place (	(3)				-	Type of Faci	lity (4)					
Residence Street Address							School						
Street Address									her than K-1 & commerc		ldinas.	hom	ies.
City (E)		-					etc.)						=
North Plainfield, NJ 07	062						Square Feet	# 0	of Floors	1	3ldg. A	\ge	
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Name of Monitoring Firm Hired by Buil	ding Owner (8	)	ASCI	M No.		100000000000000000000000000000000000000	of Abatement		r (9)				
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City, State, Zip Code	-					December 1	ate, Zip Code						
ony, outo, zip oodo							olph, NJ 07						
Project Manager for Monitoring Firm			Telepho	ne No.		Telepho		003	License I	No.		-	
			5000000			97393	3-2550		01358				
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02/16/2020	02/18/	2020				Nick R	estoration	LLC					
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Facility Closed/Vacated During En							okside Ro						
Abatement Performed Outside of Other – Describe:	Normal Facilit	y Hour	S		22		ate, Zip Code						
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		s Locat Norma			665							pe	i.
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City, State Randolph, NJ						al Date	City, S	4					
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Nikica Mrda	Presi	dent			3	gnature /	111 -	Ula		ate 1/06/2	กวก		

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 1 28 Verizon Communications 2020 FFB Agencies Notified Type Notification Street Address ☐ EPA 15 E. Montgomery St **⊠** DOLWD City, State, Zip Code UCENSING **⊠** DOH Amendment #1-2/7/20 Pittsburgh, PA 15212 ☐ Emergency (including ☐ DCA Name of Contact (NJAC 5:23-8) justification) Telephone Number ☐ Cancellation Anthony Porta 412-633-4021 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Verizon Barnegat Central Office School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 1001 West Bay Avenue homes, etc.) City (5) Square Feet # of Floors Bldg. Age Barnegat 6500 +-50 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Ocean County Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **USA Environmental** BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 8436 Enterprise Ave 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Philadelphia, PA 19153 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mark Jenkins 215 365 5870 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor \_\_2\_\_/\_\_18\_\_/\_\_20 2 / 21 / 20 BRISTOL ENVIRONMENTAL, INC Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_AM-\_\_\_PM/5:00PM-1:00AM BRISTOL, PA 19007 Scope of Work (Check all that apply)  $\boxtimes \ge 3$  sf or  $\ge 3$  If □ Renovation ☐ Mini-Enclosure ≥160 sf or >260 lf □ Demolition ☐ Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Used Solely by Encapsulate Removal 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 Generator Room П X Stack Insulation 29 I F  $\boxtimes$ Generator Room  $\boxtimes$ X Vibration Dampening Cloth 5 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste SERVICE TRANSPORT GROUP, INC. MINERVA LANDFILL 20990 City, State Disposal Date City, State Yardley, PA WAYNESBURG, OH Completed By (Print or Type) Title Signature 2-7-20 Dillan DeCaro Estimator

State of New Jersey

ASB-41 DD 19008

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

CM# 3671

Date of Notification (1)					Nam	ne of Buildir	ng Owner/Operator	(2)	FREI	W	[2	1	E
1/	28 /	2	0				mmunications	(2)		1000	lin-	dana da	A Company of the Comp
Agencies Notified ☐ EPA ☐ DOLWD 3251	Type Notifi		)		1 10000000	et Address E. Monto	gomery St	# 1		202	0		1
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DOH 3268	☐ Emerge			- -	Pi	ttsburgh,	PA 15212		/36.13.10h.(1)	diller diller	OLE	2	5
(NJAC 5:23-8)	justifica		noidan	19	Nam	e of Contac	ct	1-000	Tolon balan Nilas	C. C. C.		#774 . · ·	
	☐ Cancell	ation			Ar	nthony Po	orta		412-633-402				
					FA	ACILITY IN	NFORMATION						
Name of Facility Where Al	batement is	Takir	ng Plac	e (3)				Type of Facility	(4)		-		-
Verizon Barnegat Co	entral Offi	ce						School (K-12					
Street Address								Subchapter	8 (Other than K-12	)			
1001 West Bay Aver	nue							homes, etc.)	rivate and commer	cial b	ullain	gs,	
City (5)								Square Feet	# of Floors	В	dg. A	ae	
Barnegat								6500	102.000 (100		+-50		
County (6)					Cou	inty Code (7	7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)		0)	
Ocean County								Verizon	_				
Name of Monitoring Firm H	lired by Bui	lding	Owner	(8)	ASCN	1 No.	Name of Abateme	ent Contractor (9)					-
USA Environmental							BRISTOL EN	VIRONMENTA	L, INC.				
Street Address				101010	A		Street Address						
8436 Enterprise Ave							1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip Co	ode					
Philadelphia, PA 191							BRISTOL, PA	19007					
Project Manager for Monito	oring Firm			Tel	ephone	No.	Telephone No.		License No.				
Mark Jenkins					15 365		215-788-6040		00509				
Start Date (10)						ate (11)	Name of OSHA M	lonitor			-		
//					1_/	_20_	BRISTOL EN	VIRONMENTAI	L, INC				
Occupancy Status During A							Street Address						
☐ Facility Closed/Vacated	During Ent	ire Pe	riod of	Abate	ment		1123 BEAVE	RSTREET					
	Outside of N AM	ormal PI	Facilit VI/ <u>5:00</u>	y Hou PM- <u>1</u>	rs - Des :00AM	scribe	City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all the	hat apply)			11915			W						
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>			⊠ Re				☐ Mini-Encl	Procedure	ative Pressure	9			
				Loca						_	atem	ent T	vpe
Location of Asbestos-Containing Ma		41)		Norma	illy ely by		Description of			-	_		-
TO BE ABATI		1)	Ma	intena	ince/		stos Containing Mat , thermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility			Cust	todial (12)	Staff?	, ,	surfacing, VAT,	or	SF or LF)	oval	Ϊ	nso	Sur
(13)			Yes	No	N/A		other miscellaned	ous)				ate	(0)
Generator Room					N/A	Stack In	sulation		29 LF		П	П	П
Generator Room						Vibratio	n Dampening Cl	oth	5 SF			$\overline{\Box}$	
							, ,						
			$\overline{\Box}$		$\frac{1}{1}$				1				
Name of Registered Waste	Hauler				JDEP V	Naste	Cubic Yards of	Name of Regist	ered Landfill	ш	ш	Ц	
SERVICE TRANSPOR		, INC	<b>:</b> .	24 000	auler ID	O No.	Waste	MINERVA L					
City, State					20990		Disposal Date						
Yardley, PA							Dispusai Date	City, State WAYNESBU	JRG, OH				
Completed By (Print or Type	9)	Title					Signature	0 -	Date	9	-		
Dillan DeCaro		Es	stimat	or			Dilla	n DeCar	10/m 1.	-2	8-	Z	0

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

NOCK			1101	(Pı	ırsuaı	nt to NJA	VC 8	3:60 and 5:1	6)	EGE				VI
Date of Notification (1)					Name	of Buildin	g Ov	vner/Operator (	2)		200	mer / world	711	III
6/	21 /	19	_		HR	P Mercer	· LL(	С		FEB 1	7 202	Λ		M
Agencies Notified	Type Notific	ation			Stree	t Address					406	U	1 hours	7
⊠ EPA					401	N Michi	gan	Ave.					i i	F
⊠ DOLWD			0.0171	20	City, S	State, Zip C	Code	) 1		President of Children	Sec. 19	去位	2	- 1
☐ DCA	Amendm  Emergen				Ch	icago, IL	606	11		Livii)	tolivia.	Section		
(NJAC 5:23-8)	justificati		ciuuiiig	3	Name	of Contac	t			Telephone N	lumber			
*	☐ Cancella	tion			Ge	naro Holo	guin	1		312-796-				
					FA	CILITY IN	IFOI	RMATION		*				
Name of Facility Where A	batement is	Taking	Place	(3)					Type of Facility	(4)				
Former Mercer Gen	erating Sta	tion							☐ School (K-12	2)				
Street Address									Subchapter			71-11		
1366 Lamberton Ro	1								Other (i.e., p homes, etc.)		imercial b	ullaing	js,	
City (5)									Square Feet	# of Floors	В	ldg. A	ae	
Trenton									10		1	3	3-	
County (6)					Cour	nty Code (7	YSTA	ATE USE ONLY)	Current Use (Pr	ior if being den	nolished)			
MERCER						, , , , , , ,	M			ion in boning don				
Name of Monitoring Firm	Hired by Build	ding C	)wner (	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)					
WCD Group							E	BRISTOL EN	VIRONMENTA	L, INC.				
Street Address							Str	eet Address		// 50				
23 Rt 31							1	1123 BEAVE	R STREET					
City, State, Zip Code							Cit	y, State, Zip Co	ode				-	
Pennington, NJ 085	34						1	BRISTOL, PA						
Project Manager for Moni	toring Firm	-		Tele	phone	No.		lephone No.		License No	).			
Scott McDonald				5	9-730			15-788-6040		00509				
Start Date (10)	15	Sched	uled C			te (11)	Nai	me of OSHA M	lonitor					
_7_/_8_/					_ / _		STAN		VIRONMENTA	L, INC.				
Occupancy Status During	Abatement (	Check	only o	ne)			Stre	eet Address						
☐ Facility Closed/Vacate							1	123 BEAVER	R STREET					
☐ Abatement Performed	Outside of No	ormal	Facility	/ Hour	s - Des	cribe	City	y, State, Zip Co	ode				-	- 17
Time of Abatement: 7	:00AM- <u>3:30</u> F	PM/	PI	VI	AM			BRISTOL, PA						
Scope of Work (Check all	that apply)													
☐ >3 sf or >3 lf			Пъ-		212				ainment with Neg	gative Pressure	9			
≥160 sf or ≥260 lf			☐ Re	novati molitic										
5.0									mpted (*) and No	n-Friable Proce	edure			
				Locat							Ab	atem	ent T	уре
Location		.		lormal d Sole				Description of			R	R	ш	т
Asbestos-Containing N TO BE ABA		1)		intena				Containing Mar ermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facilit			Cust	odial S	Staff?	(,,,	S	surfacing, VAT,	or	SF or LF)	oval	=	nsd	Sur
(13)		-	\/	(12)	T	-	otl	her miscellaned	ous)				ate	O
			Yes	No	N/A									
Asphalt-Type Materia	l					North &	Sol	uth Stacks		TBD				
	11.11.00.20											П	П	П
Name of Registered Wast	e Hauler			N	JDEP V	Vaste	Cub	oic Yards of	Name of Regis	tered Landfill		1—	3 2	
SERVICE TRANSPO	RT GROUP	INC		Н	auler II 18706	500 8000000	Wa	ste		NORTH LA	NDFILL			
City, State					10/00	,	Disp	posal Date	City, State		-			
YARDLEY, PA							- CS 1982/4	and the second s	Constant of the Continue Control	LLE, PA 190	67			
Completed By (Print or Ty	pe)	Title						Signature			Date			
Brian Scafiro		Pr	oject	Mana	ager			Brian	Scrpino /	gu	2-	7-2	20	

ASB-41 BS 1908 (

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

Chutz: 3673

Data of Notice ties (d)				- 5						FI	1 W	(E	1 (
Date of Notification (1)  6 /	21 /	1:	9			ne of Buildi RP Merce	ng Owner/Operator			ta t	J U		Tares of the same
Aganaias Natified								4					
Agencies Notified  ⊠ EPA	Type Notifi	cation			100000000000000000000000000000000000000	et Address			FEE	] ] ]	202	0	l la
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DCA	☐ Emerge		-		CI	nicago, IL	. 60611	,	ARRES	. sac- (d. <u>IGERS</u> i	arkiri Nata	No En O	2
(NJAC 5:23-8)	justifica	tion)			Nam	e of Conta	ct		Telephone No	umber	- Contraction		<b>4</b> /31
	☐ Cancell	ation			Ge	enaro Ho	lguin		312-796-6	593			
					FA	ACILITY II	NFORMATION						
Name of Facility Where A				e (3)				Type of Facility	(4)				
Former Mercer Gene	erating St	ation						School (K-1	2)				
Street Address								Subchapter	8 (Other than K-	12)			
1366 Lamberton Rd								homes, etc.	private and comm	nerciai	oullain	gs,	
City (5)								Square Feet	# of Floors	F	Bldg. A	lae	
Trenton								•			-14911	.90	
County (6)					Cou	inty Code (	7)(STATE USE ONLY)	Current Use (Pr	rior if being dem	olished)	V.		
MERCER									•				
Name of Monitoring Firm I	Hired by Bui	lding (	Owner	(8)	ASCN	1 No.	Name of Abateme	ent Contractor (9)	)		-		
WCD Group							1	VIRONMENTA					
Street Address							Street Address						
23 Rt 31							1123 BEAVE	R STREET					
City, State, Zip Code							City, State, Zip Co						
Pennington, NJ 0853	34						BRISTOL, PA						
Project Manager for Monito	orina Firm			Te	ephone	No	Telephone No.	. 10001	License No.		_		
Scott McDonald	•					0-0007	215-788-6040		00509				
Start Date (10)		Sched	luled C			ate (11)	Name of OSHA M		00309				
_7_/_8_/_	40.00000				7 /	The state of the s	Equation was a series of the contract of the c	VIRONMENTA	L. INC				
Occupancy Status During	Abatement (	Chec					Street Address						
☐ Facility Closed/Vacated					ement		1123 BEAVER	STREET					
☐ Abatement Performed (	Outside of N	ormal	Facilit	у Ног	rs - Des	scribe	City, State, Zip Co						
Time of Abatement: 7:0	00AM-3:30	PM/_	P	M	AM		BRISTOL, PA						
Scope of Work (Check all t	hat apply)						DIGIOL, PA	19007					
								ainment with Neg	gative Pressure				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			☐ Re										
			□ D€	arronu	OII			npted (*) and No	n-Friable Proced	dure			
				Loca							batem	ent T	vne
Location of				Norma	ally ely by		Description of			-	-		1
Asbestos-Containing Ma TO BE ABAT	aterial (ACN FD	4)		inten:			stos Containing Mat		Amount	Rem	Repair	nca	ncl
IN Facility			Cus		Staff?	(1.6	<ul> <li>thermal systems is surfacing, VAT,</li> </ul>		(Specify SF or LF)	Removal	air	squ	Enclosure
(13)			200	(12)		1	other miscellaned		Of Or Er )	=		Encapsulate	Ге
			Yes	No	N/A							CD	
Asphalt-Type Material						North &	South Stacks		TBD	$\boxtimes$		П	
			П		П					1	1		
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Name of Registered Waste				14.00	JDEP \		Cubic Yards of	Name of Regist	tered Landfill				
SERVICE TRANSPOR	RT GROUP	INC		1	18706	P. (CO. (1975) - 1975 - 1975	Waste	G.R.O.W.S.	NORTH LAN	DFILL			
City, State					10100		Disposal Date	City, State					
YARDLEY, PA									LE, PA 19067	7			
Completed By (Print or Type	e)	Title					Signature						
Brian Scafiro		1	oject	Man	ager		Pai An.	SCHIM	m	Date 7 - J	2 -1	71	, 1
CD 44			5,500		-901		Moude	JUM	14/0	C	)	VV	

Date of Notification (1)				Nar	ne of Build	ing Owner/Operator	(2)		3	/4/	IG.	1
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	tification	n			et Address			FEB	4	2020	+	i l
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	nded ndment :	#1-11	/11/19	9	, State, Zip			A.S. [2] + (2)	T. * 17	1.5	75	100
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	ication)			1000000	ne of Conta			Telephone Nu	mber			
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Name of Equility Minate Abote				F	ACILITY I	NFORMATION						
Name of Facility Where Abatemen Former Mercer Generating			ce (3)				Type of Facility					_
Street Address	Station	1					School (K-12	) (Other then K a	12)			
1366 Lamberton Rd							Other (i.e., pr	rivate and comm	ercial	buildin	qs,	
City (5)							homes, etc.)					
Trenton							Square Feet	# of Floors		Bldg. A	\ge	
County (6)				Co	inti Code /	ZVOTATE HOE ONLY	0 111 15					
MERCER				Col	unity Code (	7)(STATE USE ONLY)	Current Use (Pri	or if being demo	lished)	)		
lame of Monitoring Firm Hired by I	Ruilding	Owner	(8)	ASCN	// N/o	Mana of Abeter	10 1 1 (0)					
WCD Group	Junumg	Owner	(0)	ASCI	/I NO.		ent Contractor (9)					
Street Address							VIRONMENTAL	., INC.				
23 Rt 31						Street Address	DOTORRE					
City, State, Zip Code						1123 BEAVE						
Pennington, NJ 08534						City, State, Zip Co						
roject Manager for Monitoring Firm	1		Tel	ephone	No	BRISTOL, PA	19007	1				
Scott McDonald			1		0-0007	Telephone No. 215-788-6040		License No.				
tart Date (10)	Scher	duled (			ate (11)	Name of OSHA M		00509				
<u>7</u> / <u>8</u> / 19		ON		OLD		Re-divide the resolution of the control of the cont	VIRONMENTAL	INC				
Occupancy Status During Abateme		-	-				TITORINEITAL	., INC.				
☐ Facility Closed/Vacated During E				ment		Street Address 1123 BEAVER	PETPET					
Abatement Performed Outside o	f Normal	I Facilit	ty Hou	rs - De	scribe							
Time of Abatement: 7:00AM-3:	30PM/_	P	M	AM	l	City, State, Zip Co BRISTOL, PA						
cope of Work (Check all that apply	)					DIGIOTOL, I'A	13007					_
] >3 sf or >3 lf				• 000000000			ainment with Nega	ative Pressure				
⊒ ≥3 \$1 61 ≥3 11 ☑ ≥160 sf or ≥260 lf			enovat emoliti									
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ame of Registered Waste Hauler			N	JDEP	Waste	Cubic Yards of	Name of Registe	ered Landfill				1
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ty, State				1870	0	Disposal Date	City, State					_
YARDLEY, PA								LE, PA 19067				
ompleted By (Print or Type)	Title					Signature			-4-			_
			Mana	ager		A -	- Scaler	1 .	ate /	1.	0	
Brian Scafiro		Olecr	an a met h a c			// 14 -						

Ck# 3593

Date of Notification (1)				Name	of Buildin	g Owner/Operator (	(2)	A F C F	-11-	1/7	F23	F =
	21 /	19		10000	P Mercei		(2)		<u>()</u>	. W	lla 	duce
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	<ul><li>Emergency justification)</li></ul>		g	U	of Contac			Telephone Numb			ં ભ	
(NJAC 5:23-8)	☐ Cancellation			N. September	naro Hol			312-796-6593		-	*****	
			-					312-730-0350	,			
Name of Facility Where Abo	atamant in Tak	ina Dian	- /21	FA	CILITYIN	IFORMATION	T	(4)				
Former Mercer Gener			3 (3)				Type of Facility (  School (K-12					
Street Address	aurig Statio		_		-			) 3 (Other than K-12)				
1366 Lamberton Rd							Other (i.e., pr	rivate and commerc	ial bu	uilding	s,	
City (5)							homes, etc.)	# - f El	- DI	-1 ^		
Trenton							Square Feet	# of Floors	BI	dg. A	ge	
County (6)				Cour	tu Cada /	VOTATE LIGE ONLY	Courset Head (Del	- 151				
MERCER				Cour	ity Code (/	()(STATE USE ONLY)	Current Use (Pri	or if being demolish	iea)			
Name of Monitoring Firm Hi	isad bu Duildina	0	(0) T	A CORA	Al-	Name of the state of	-101(0)					
WCD Group	red by building	Owner	(0)	ASCM	NO.	Name of Abateme		INO				
Street Address							VIRONMENTAL	_, INC.				
23 Rt 31						Street Address	DOTDEET					
City, State, Zip Code						1123 BEAVE						
	4					City, State, Zip Co						
Project Manager for Monitor			T-1-		M	BRISTOL, PA	19007	T1.				
Scott McDonald	nng riim			phone		Telephone No.		License No.				
Start Date (10)	Coh	eduled C		9-730		215-788-6040		00509				
	Contraction (Contraction)	12 /				Name of OSHA M	IONITOF VIRONMENTAL	INC				
Occupancy Status During A						Street Address	VINORWIENTAL	-, INO.				
☐ Facility Closed/Vacated				ment		1123 BEAVER	POTDEET					
☐ Abatement Performed O					cribe				_			
Time of Abatement: 7:0					75,535,475,	City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all th	at apply)					⊠ Eull Cont	rainmant with Non	ative Deserves				
≥3 sf or ≥3 lf		☐ Re	enovati	on		☑ Mini-Enc	ainment with Neg losure	alive Plessure				
≥160 sf or ≥260 lf		⊠ De	emolitic	n		☐ Glovebag						
			1			⊠ Non-Exe	mpted (*) and Nor	n-Friable Procedure	T			
Location of			Locat Norma			Description			Ab	atem	ent T	ype
Asbestos-Containing Ma	terial (ACM)	Use	ed Sole	ly by	Asbe	Description o stos Containing Mar		Amount	Rei	Repair	En	En
TO BE ABATE		#U	intena todial		(i.e	., thermal systems i		(Specify	Removal	pair	aps	Enclosure
IN Facility (13)		000	(12)	Jun:		surfacing, VAT, other miscellane		SF or LF)	al		Encapsulate	ure
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See attached sheet												
21												
		П				***************************************			П	П	П	П
Name of Registered Waste	Hauler	100000	10000	JDEP \	Naste	Cubic Yards of	Name of Regist	tered Landfill				
SERVICE TRANSPOR		C	Н	auler II		Waste		NORTH LANDS	11.1			
City, State				20990		Disposal Date	City, State					
YARDLEY, PA						Disposal Date		LE, PA 19067				
	, , , , , , , , , , , , , , , , , , , ,	ila.					INCLUSAI					
Completed By (Print or Type Brian Scafiro		tle Project	RA			Signature	1.0.	1. Dat	e/21	1.	G	
ASB-41		Project	. IVIAIT	ager		puan	Scafire	Je 6/	21	//	1	
100-41							11	//				

MAY 11 B 5 190 81 \* Do not use this form for asbestos licensure exempted activities.

Inv 18019

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)



Date of Notification 2/5/2020 Name of Building Owner / Operator (2) Type Notification Route 35 Wall Realty LLC Agencies Notified Street Address X **EPA Emergency Notification** 10 Centerville Road DEP Initial Notification City, State & Zip Code X DOL Amended Notification Holmdel, NJ 07733 DOH X Cancellation Name of Contact Telephone Number DCA Daniel Beerhalter 609-443-3500 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Vacant Garage School (K-12) Street Address Subchapter 8 (Other than K-12) 1726 Route 35 X Other (i.e., private & commercial buildings, homes, etc. Square Feet # of Floors Blda, Age City (5) County (6) County Code (7 6000 60+ Current Use (Prior if being demolished) Wall Monmouth Commercial Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Tactics, Inc. Global Abatement Services, LLC Street Address Street Address 64 Broad Street 443 Schoolhouse Road City, State & Zip Code City, State & Zip Code Matawan, NJ 07747 Monroe Township, NJ 08831 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Tom Geiger 732-290-2217 732-605-9062 00714 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 2/15/20 3/6/20 Global Abatement Services, LLC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 443 Schoolhouse Road Abatement Performed Outside of Normal Facility Hours -City, State & Zip Code Describe: Monroe Township, NJ 08831 Other - Describe: Scope of Work (Check all that apply) X Demolition Renovation Full Containment with Negative Pressure X Large Project Mini-Enclosure Quantity is ≥ 3 SF or ≥ 3 LF ACM Glove-bag Procedure Quantity is ≥ 160 SF or ≥ 260 LF ACM X Other: Non-friable Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify: Removal, (Specify Material (ACM) Solely by Material (ACM) Square Feet or Repair, (i.e., thermal systems TO BE ABATED Maintenance or Linear Feet) Encapsulation or in Facility Custodial Staff? insulation, surfacing, VAT Enclosure) (13)(12)or other miscellaneous) Roof N/A Roofing 6,600SF Removal Roof N/A Roof Flashing 60 LF Removal Name of Registered Waste Hauler NJDEP Waste Hauler ID# Cu. Yds. of Waste Name of Registered Landfill Freehold Carting 18693 30 Fairless Landfill City, State Disposal Date City, State Trenton, NJ Fairless Hills, PA 3/6/20 Completed By (Print or Type) Title Signature Date Dominick Tringali Manager 2/4/20 Dominick Tringali

CK 4009 PAI			ICATION	ate of New OF ASB to NJAC	ESTOS	ABATE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		E C			$\overline{\mathbb{W}}$	. Eu	
Date of Notification (†) 02/06/2020  Date of Notification (†)	210	5		f Building anagen		perator	(2)			general control of the control of th			det des c	- Service	A Community of the Comm
Agencies Notified Type Notification			Street A	ddress						FE	3 !	-1-	2020	-	Indian
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X EPA X Initial Amended Amendment #				te, Zip Co a, NJ 07					7.	5.60	12.	10	in.	1. 6.	
Emergency (ii				Contact	003				LT-1-			1011	Ų.	Service	
DOH justification)  DCA Cancellation				V & DOI	RHEE	YOUN	G		reie	phone	Num	per			
				LITY INFO				W							
Name of Facility Where Abatement is Taking Residence	Place (3	3)					Type of	Facility (4)							
Street Address								nool (K-12 ochapter 8		r than !	/ 12				
Officer Address								er (i.e. pri					lings,	home	es,
City (5)							Square I		# of	Floors		T BI	dg. A	ae	
Bogota							3,942		2	, ,00,0		94		9.	
County (6) Bergen			County (	Code (7) JSE ONLY	)		Current	Use (Prior	if beir	ng demo	olishe	ed)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM			Name	of Abaten	nent Contr	actor	(9)					
A. Seine Lighthouse Solutions				1000000				Services		(-)					
Street Address PO Box 354							Address Liberty	Avenue							
City, State, Zip Code South Orange, NJ 07079							state, Zip ( de, NJ (								
Project Manager for Monitoring Firm			Telepho			220000000	none No.	_		Licens					
Sarah Calandra			CONTROL STATE OF THE STATE OF T	9-2666			462-746	700		01316	3				
02/26/2020	03/04/2	2020	mpletion I	Date (11)			of OSHA eine Ligl	Monitor nthouse	Solu	tions					
Occupancy Status During Abatement (Check							Address Box 354								
Facility Closed/Vacated During Entire Po	eriod of all Facility	Abater	nent s			100 Miles	State, Zip (	Code							
Other – Describe:		6						je, NJ 0	7079						
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli	100000000000000000000000000000000000000			××	Mini-E Glove	ontainmer inclosure bag Proce	dure					9	
	Is	Locat	ion										Abate	ment	
Location of		Norma ed Sole				scription					8		Ty	pe	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intena	nce/				Material (A s insulatio			nount pecify		æ	_	Enc	щ
In Facility	Cus	todial (12)			surfa	cing, VA	T, or	,		or LF)		Remova	Repair	Encapsulate	Enclosure
(13)	Yes	No	N/A		othern	niscellai	ieous)					val	=	ulate	ure
BASEMENT	1000	X			PIP	E WR	AP		10	00 LF		Х			
BASEMENT		X			BOIL	ER W	RAP		4(	) SF		Х			
BASEMENT		Х			DUC	CT WR	RAP		40	0 LF		X			
Name of Registered Waste Hauler	-	11 833	NJDEP W		0.0000000000000000000000000000000000000	Yards	1	lame of R	egiste	red Lan	dfill				
Newark Carting		11 10000	Hauler ID 4509	INO.	of Was			Vaste M	anag	gemen	t La	ndfil	l		
City, State East Orange, NJ				20.00		sal Date	F	City, State Penn Arç	gyle,	PA					
Completed by Alison Lamers	Title Offic	е Ма	nager		S	Signature	MM	QN			Dat 02		2020		

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CK4003 PAIL		NOTIF (P	ICATIO	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE	MEN (0)	NT			<u>න</u> න		$\mathbb{W}$	E	The second
Date of Notification (1) 02/06/2020 11 V 18D1	7		Name o	of Building lence	Owner/0	Operator	r (2)			FE	ΞB	1 1	202	0	
Agencies Notified  Type Notification  X EPA  Initial	1		Street /	Address						Contract of the Contract of th				1 May 1 p	rich and a second
➤ DEP		ľ		ate, Zip C					8			3- (.f.) -1919		OL &	
Emergency (i		_		River, N	NJ 088	82		,	5 Se VS	No.	tan			*******	eru i rusu
DOH justification)  DCA Cancellation		, I		of Contact na Dosta	anich				Te	lenhone	Nun	nber	0		
				ILITY INF		ION									
Name of Facility Where Abatement is Taking Residence	Place (	(3)					Ту	pe of Facility	(4)						
Street Address	<u> </u>							School (K-			V 40				
							×	Subchapte Other (i.e.					dings,	hom	es,
City (5)							Sq	etc.) uare Feet	# 0	f Floors		В	ldg. A	ge	_
South River County (6)			0 1	0.1.6			- 35	758	3			- 1-2	14		
Middlesex				Code (7) USE ONLY	)		Cu	rrent Use (Pr	ior if be	ing dem	olish	ed)			
Name of Monitoring Firm Hired by Building C A. Seine Lighthouse Solutions	wner (8	)	ASCI	M No.				batement Co ank Service		(9)	111.211.21				
Street Address PO Box 354						Street 1256		ress perty Aveni	ue						
City, State, Zip Code South Orange, NJ 07079								, Zip Code NJ 07205							
Project Manager for Monitoring Firm Sarah Calandra			Telepho 201-3	ne No. 49-2666		Teleph 844-4		No. -7465		Licens 0131		).			
	Schedul 03/02/		pletion	Date (11)				SHA Monitor Lighthous		utions		-117			
Occupancy Status During Abatement (Check	Only O	ne)				Street	Add	ress							
Facility Closed/Vacated During Entire Po	eriod of	Abatem	ent			PO E		\$1000 DOMEST		5					a
Abatement Performed Outside of Norma Other – Describe:	ıı Facılıt	y Hours						Zip Code range, NJ	07079	)					
Scope of Work (Check All That Apply)							_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti				×	N C	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure						
	Is	Location	on					von-Exemple	u ( ) an	u INOII-I	Habit		Abate		
Location of		Normall ed Solel				scription							Тур	е	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	intenar todial S (12)	ice/		thermal surfac		s insi		(5	mount Specify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									<u>m</u>		ate	Ге
BASEMENT		Х			PIP	E WRA	AP		12	25 LF		X			
BASEMENT		X			EL	BOWS	S		3	0 LF		Х			
CRAWL SPACE		Х			PIP	E WRA	AP		2	0 LF		X			
Name of Registered Waste Hauler			IDEE:												
Newark Carting		Ha	JDEP W auler ID 509		Oubic of Was			Name of Waste				ndfill			
City, State East Orange, NJ					Dispos	al Date		City, Stat Penn A		PA					
Completed by Alison Lamers	Title Office	e Man	ager		Si	ignature	a	Mess	7.E)		Date 02/	e 06/2	020		

L4005 PAIL			CATION	ate of Nev I OF ASB to NJAC	ESTOS	ABATE			C			ĵ,	TO PI	to the same than	
Date of Notification-(1)- 02/06/2020	16		Name of Reside	f Building ence	Owner/C	Operator	(2)	1 1 1	FE	3 1 1	20	20	ALANCE OF SAL		
Agencies Notified Type Notification			Street A	ddress											
EPA Initial Amended				ate, Zip Co						rok-C Kalifia		Mark.	. Ö.	- 1	
DOL Amendmen Emergency		-	15/	wood, N	J 0704	10		- 1 (** ottage	T = .						
DCA justification			MaryL	f Contact ou Alter					Tel	ephone	Num	ber			
Name of Facility Where Abatement is Takir	ng Place (3	3)	FACI	LITY INFO	ORMATI	ON	Type	of Facility (4)	1						
Residence	9	,						School (K-12							
Street Address	1977							Subchapter 8 Other (i.e. pri	(Oth	er than	K-12) ercia	build	dings.	home	es.
City (5)								etc.) re Feet		Floors			ldg. A		acceptant and a second
Maplewood							3,80	0	3			9		.90	
County (6) Essex				Code (7) USE ONLY)			Curre	ent Use (Prior	if bei	ng dem	olishe	ed)			
Name of Monitoring Firm Hired by Building A. Seine Lighthouse Solutions	Owner (8)	)	ASCN	No.				tement Contr		(9)					
Street Address PO Box 354							Addre	ss rty Avenue							
City, State, Zip Code South Orange, NJ 07079				- Committee		City, S	State, Z	ip Code J 07205	2.000.000007.1100						
Project Manager for Monitoring Firm			Telephor			Teleph	none N	0.		Licens					
Sarah Calandra Start Date (10)	Schedul	ed Co		19-2666 Date (11)		i resource o	462-7	465 HA Monitor		0131	6				
03/06/2020	03/13/2	2020	inpiction	Date (11)		A. Se	eine L	ighthouse	Solu	itions					
Occupancy Status During Abatement (Cher X Facility Closed/Vacated During Entire						Street PO E	Addres  Box 35	0.774.cc					=		
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	nal Facility	Hour	s			City, S	tate, Z	ip Code inge, NJ 07	7070						
Scope of Work (Check All That Apply)						Oout		1190, 140 0	1013						-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				×	Mir Glo	I Containmen ni-Enclosure ovebag Proce n-Exempted (	dure						
	le	Locat	tion				I NO	II-Exempled (	) and	I NOTI-F	Паріє			ement	
Location of	1	Norma	lly			scription					-	-	Ту	ре	
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>	Ma	intena todial	ince/		thermal	aining N systems	s insula		(8	mount specify		Re	ਸ਼	Enc	En
In Facility (13)	Cus	(12)	Service and Control			cing, VA niscellar			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
122 - 53047	Yes	No	N/A									al		ate	Ге
CRAWL SPACE		Х			DUC	CT WR	AP		8	0 LF		X			
ATTIC		Х			DUC	CT WR	AP			LF.		X			
Name of Registered Waste Hauler			LIDEDIA	lasta	Cubic	Vand-		Name of D			16				
Newark Carting		F	NJDEP W Hauler ID 4509		Cubic of Was			Name of Re Waste M				ndfil	I		
City, State East Orange, NJ					Dispos	al Date		City, State Penn Arg	gyle,	PA					
Completed by Alison Lamers	Title Office	е Ма	nager		S	ignature	av	10/15			Date 02/		2020		

11/-	1792		PAI		(Pu	rsuan	nt to I	NJAC 8:6	0 and	12:120)	)									
Date of No 2/7/20	otification (1)		19015					uilding Ow Tank (		perator	(2)				FEB	-	20	20	1	-
Agencies	Notified	Туре	Notification		100	Street		ess th Main	Stree	<u></u>				L			. 1			
EPA DEP		M	Initial Amended		- 1 '			Zip Code						27.00	W					$\neg$
DOL			Amendment # Emergency (i				-	t NJ 08	005					Tolor	hone N	lumbe	r			-
DOH DCA	300		justification) Cancellation		1 3			ontact dam						1	-548-				70	
						FA	CILIT	Y INFOR	MATIC	ON	T	pe of Faci	liby (A)							
	Facility Where A Garage back			Place (3)							Г	School								
Street Ad		о. р										Subcha	pter 8	(Other	than K	-12) ercial b	uildir	nas. h	omes	š.
7745 N	laple Avenue	9		ā							X	etc.)	4 05%		Floors			g. Ag		$\dot{-}$
City (5) Pennsa	auken Towns	ship	NJ 08109								25	uare Feet 50		1	10013		35			
County (6	6)	-						de (7) E ONLY)				irrent Use arage	(Prior	if bein	g demo	lished	)			
Camde Name of	en Monitoring Firm	Hire	d by Building (	Owner (8)		AS	CM N	lo.		Name	17500	Abatemen	t Contr	actor (	9)					
N/A	Worldoning 1 in	,,,,,		- 111.55						F.1.14.5-3	-	o Inc.								_
Street Ac	ddress									Street		dress x 329								
City, Stat	te, Zip Code									City, S	State	e, Zip Cod								
												erlin NJ	0809	91	Licens	o No				_
Project N	lanager for Mor	nitorin	g Firm			Telep 609		No. 5-9984		Telepl 856		3-9800			0072					
Start Dat	te (10)			Schedule	d Con	Alternation of	W. Contract				200-100	OSHA Mo	nitor							
2/19/2				2/25/20						San		dress							-	_
[	ncy Status Durin					nent				Caroca		0.000								
Aba	atement Perforn ner – Describe:	ned O	outside of Norr	nal Facility	Hours	s			_	City, S	State	e, Zip Coo	ie							
Scope o	f Work (Check A	All Th	at Apply)							Г	_				NI 4"	0-		_		
	sf or ≥3 lf 60 sf or ≥260 lf				enova emoli							Full Cont Mini-End Gloveba	losure a Proce	edure						
							_			L	<u> </u>	Non-Exe	mpted	(*) and	Non-F	riable		Abate	ment	
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Asb	Locatio estos-Containin	g Mat	terial (ACM)		d Sole intena			Asbest	os Cor	ntaining	Mat	terial (ACI) nsulation,	(I)		mount Specify		Re	70	Enca	Enc
	TO BE A	ility	<u>D</u>	Cust	todial (12)		3	(1.0.	surfa	acing, V	AT,	or		SF	or LF)		Remova	Repair	Encapsulate	Enclosure
	(13	)		Yes	No	IN	I/A		outor			/					<u>a</u>		ate	o l
	Flat R	oof		100		-	x		F	lat Ro	of			2	50 SF		Х			
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									T			A1-	mc of	Dogio+	ered La	ndfill				
	of Registered W	aste l	Hauler			NJDE Haule	er ID		of W	c Yards aste		1	.R.O.			i i di iii				
	d Roll Off					224	59		3 Disn	osal Da	te		y, Stat							
City, St Elm N										5/20			•		A 190	67				
Comple				Title						Signate	are	7				Dai	te 7/20			
	ny T Perna			Pres	sider	nt				_(_	4	1			5537	21	120			

Jnv# 17881 CK3331PAID

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

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Date of Notification (1) 2-5-2020					f Building of Rose			(2)		FI	EB 1	1	2020			100
Agencies Notified	Type Notification			Street A	ddress				: 4	Name to the same of	is rewrite					
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⊠ DOH	Emergency justification)	10 TO			f Contact					Tel	ephone	e Nur	nber			
☐ DCA	Cancellation	1			e Basile		ON									
Name of Facility Where A	batement is Takir	ng Place (3	3)	FACI	LITY INFO	JRWAII	ON	Туре	of Facility (	4)						
Residential									School (K-1	2)						
Street Address								×	Subchapter Other (i.e. p etc.)					ings,	home	es,
City (5) New Milford, NJ 076	546								re Feet	# of 2	Floors	S	100.00	dg. A	ge	
County (6) Bergen				County (	Code (7) USE ONLY	)		Curre	nt Use (Pri	or if bei	ng den	nolish	ied)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.				tement Cor			: 11	С.			
Street Address							Street	Addres	SS		1 11000	, LL				
City Otala 7ia Oada									ia Avenu	e						
City, State, Zip Code									ip Code y, NJ 073	304						
Project Manager for Moni	toring Firm			Telephor	ne No.		120000000000000000000000000000000000000	none N			Licer 0117		0.			
Start Date (10)		Schedul	ed Cor	moletion (	Date (11)				HA Monitor		0117	4				
2-6-2020		2-6-20							vironmen	tal Se	rvices	s, LL	С			
Occupancy Status During	Abatement (Chec	k Only Or	ne)					Addres	200							
Facility Closed/Vaca Abatement Performe	ited During Entire	Period of	Abater	nent					ia Avenu ip Code	e 						
Other – Describe: _	outside of 14011	ilai i aoiit	, i ioui.			_	5246		y, NJ 073	304						
Scope of Work (Check Al	That Apply)							_							-	
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>			Renova Demoli				2	Mir Glo	l Containm ni-Enclosure ovebag Pro	e cedure						
		Τ.,						_ No	n-Exempte	d (*) and	d Non-	Friab	T		e ement	
Location	of		Locat Vorma	lly		De	scription	n of							ре	
Asbestos-Containing TO BE ABA	Material (ACM)		ed Sole iintena			tos Cont	aining N	<b>Material</b>			mount Specify		77		E	ш
In Facilit		Cus	todial (12)	Staff?	(1.6.	surfa	cing, VA	T, or	1011,		or LF		Remova	Repair	caps	Enclosure
(13)		Yes	No	N/A		other r	niscella	neous)					val	air	Encapsulate	sure
Baseme	ent	165	X	INA			VAT			4(	00 SF		x			
				+						****				-		
Name of Registered Was	te Hauler			NJDEP W		250000000	Yards		Name of	Registe	red La	ndfill	_			
Green Environmenta	l Services			Hauler ID 034889		of Wa	ste		Fairless	s Land	lfill					
City, State Jersey City, NJ						Dispo:	sal Date		City, Stat Morrisv		Λ					
Completed by		Title				1 1	020 Signatur	3	IVIOITISV	ille, P	A	Da	te			
Liliana Serrano			е Ма	nager				r	. No	1.9	,		5-202	20		

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 TOTAL A	"Differences.	NOT

9777						o 0.00 th	10 12.12	0)						
Date of Notification (1) 2-6-2020				Name The	of Buildin Avenir L	g Owner/ P	Operato	r (2)		FEB 1	1 20	)20		
Agencies Notified	Type Notification	1			Address		-					-	+	
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Ĭ DOH	Emergency justification		3		of Contac				T	elephone N	lumber			
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Name of Facility Where	Abatement is Taki	ng Place (	3)	FAC	CILITY IN	FORMAT	ION	Typo of E	acility (4)					
Commercial		5						Type of F						
Street Address 1075 Westside Ave	enue							Subo	ool (K-12) chapter 8 (O r (i.e private	her than K	-12) rcial bu	ildinas	hon	nes
City (5)								etc.) Square Fe						
Jersey City, NJ 073	806							50000	1	of Floors	100	Bldg. 80+	Age	
County (6) Hudson					Code (7)				se (Prior if b	eing demol				
Name of Monitoring Firm	Hired by Building	Owner (8	)	ASC	M No.		Name	of Abatama	ent Contracto	vr. (O)				
									mental S		LC			
Street Address								Address						
City State 7'- C							235	Virginia A	venue					
City, State, Zip Code								tate, Zip Co						
Project Manager for Mon	itoring Firm		- 1	Telepho	one No			ey City, N	3 07304	T 11				
							1 SANCHES S	333-8855		License 01174	140.			
Start Date (10) 2-17-2020		Schedul 2-24-2		mpletion	Date (11	)		of OSHA M	onitor imental Se	ervices I	10			
Occupancy Status During	Abatement (Che	k Only O	ne)				-	Address		- VICCS, L				
× Facility Closed/Vaca	ited During Entire	Period of	Abater	ment			235 \	/irginia A	venue					
Abatement Performe Other – Describe:	ed Outside of Norr	nal Facility	/ Hour	'S		and the same		ate, Zip Co						
Scope of Work (Check Al	That Apply)						Jerse	ey City, N	J 07304			-		
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		processing	Renova Demoli				×××××××××××××××××××××××××××××××××××××××	Mini-End Gloveba	g Procedure					
		le	Locat	ion				Non-Exe	mpted (*) ar	id Non-Fria	ble Pro		e emen	
Location		1	Vorma	lly		Des	scription	of					уре гре	
Asbestos-Containing I TO BE ABA			d Sole intena		Asbes	stos Cont	aining M	aterial (ACN	Л) /	Amount			E	
In Facilit		Cust	odial ( (12)	Staff?	(1.0	. tnermai surfac	systems cing, VA1	insulation, , or	10 205	Specify F or LF)	Remova	Re	ncar	Ench
(13)			(12)				niscellane			- 500 m 6	iova	Repair	Encapsulate	Enclosure
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First Flo	or		Χ			Gli	ue Dots	3	20	000 SF	Х			
Name of Desigtated Mark	- [] - [													
Name of Registered Wast Green Environmental				IJDEP W lauler ID		Cubic `of Was			ne of Registe		I			
	Jervices			034889		5	1945	Fai	rless Land	dfil				
City, State Jersey City, NJ						Dispos 2-24-2	al Date 2020		State rrisville, P	Α				
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_iliana Serrano		Office	Mar	nager			2)(	lla.	Servi		-6-202	20		

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Date of Notification (1) 2-7-2020			Name Rich	of Buildir	ng Owner	/Operato	r (2)			FEB	1 1	20	20	Company of the Company
Agencies Notified Type Notification  EPA Initial	tion		Street	Address						State	in (.	o Okti	wi.	da .
DEP Amende Amendm X Emerger	776			State, Zip oka Hart		08734					CERS		nertic sector	
DOH justificati	ion)	g		of Contact ard Mar	-				Tele	phone N	umber			
Name of Facility Where Abatement is Ta Residential	aking Place (	(3)	FAC	CILITY IN	FORMAT	ION	Тур	e of Facility	(4)					
Street Address					*			School (K- Subchapte	er 8 (Othe	r than K-	12)			
City (5)							Squ	Other (i.e. etc.) are Feet		Floors		ldings Bldg.		ies,
Bayonne, NJ 07002 County (6)		T	County	/ Code (7)			274 Curi	19 rent Use (Pr	2 ior if bein	a demolis	3	100+		
Hudson  Name of Monitoring Firm Hired by Buildin	ng Owner (8			M No.	Y)	Name		atement Co						
Street Address				79 F.JE		Gree	n Er	nvironmer	ital Ser	vices, L	LC			
City, State, Zip Code						235 \	Virgi	nia Avenu	ie					
Project Manager for Monitoring Firm						Jerse	ey Ci	Zip Code ity, NJ 07:	304					
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State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

D&S Proj. #: 20-39 Date of Notification (1) Name of Building Owner/Operator (2) 10 |2 |/|0 |6 |/|2 |0 | FEB Maya Manger Agencies Notified Type Notification Street Address ☐ EPA initial 🔀 Amended DEP Amendment #: City, State, Zip Code MUNICIPAL X DOL M Emergency perth amboy, NJ 08861 (including DOH. Name of Contact Telephone Number justification) ☐ DCA Maya Manger Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Residential Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet City (5) County (6) 1,900 SF County Code (7) (State use only) Current Use (Prior if being demolished) perth amboy Middlesex Residential Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Telephone Number License Number Project Manager for Monitoring Firm Phone Number 973-345-8020 01169 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. 02/08/2020 02/13/2020 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Normal Hours Other-Describe: Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure Mini-enclosure
Glovebag proce  $\times$  >3 sf or >3 lf □ Renovation Glovebag procedure Demolition \_\_\_ ≥160 sf or ≥260 lf Non-Exempted (\*) and Non-friable procedure Is location normally used solely Location of Ε e by maintenance/custodial e n Amount asbestos-containing Description of asbestos-containing n m p staff(12) C (Specify SF or material (acm) to be material (ACM) C 0 3 a abated in facility (13) Yes No N/A ٧ p Pipe Insulation 248 LF X basement NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler D & S RESTORATION, INC. 13506 2 yds. TULLYTOWN, RESOURCE RECOVERY Disposal Date City, State City, State TBD TULLYTOWN, PA PATERSON, NJ 07503 Signature Completed by (Print or Type) Title 02/06/2020 BOGDAN JOLDZIC PRESIDENT

Do not use this form for asbestos licensure exempted activities.

State of New Jersey

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Project Manager for Monitoring Firm Sarah Calandra		T	Telepho	one No. 49-2666		Teleph	ione No. 162-7465	L	icense N	lo.			
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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 02 07 Newark Beth Israel Medical Center 1 20 Agencies Notified Type Notification Street Address ☐ EPA 201 Lyons Avenue □ DOLWD ☐ Amended City, State, Zip Code ASEATION COMMON. A □ DHSS Amendment # Newark, NJ 07112 JUENSING ☐ Emergency (including □ DCA Name of Contact (NJAC 5:23-8) justification) Telephone Number □ Cancellation Ron Carvalho as agent 908-208-3060 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Newark Beth Israel Medical Center School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 201 Lyons Avenue homes, etc.) City (5) Square Feet # of Floors Bldg. Age Newark 300,000 6 68 + yrs. County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Essex Hospital Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Tactics, Inc. N/A MAK-B Pro, Inc. Street Address Street Address 64 Broad Street 104 Market Street City, State, Zip Code City, State, Zip Code Matawan, NJ 07747 Garfield, NJ 07026 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Tom Geiger 732-290-2217 973-931-3293 01365 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 02 / 20 / 20 5 / 10 / 20 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: 7:amAM-\_\_\_PM/3:30PM-\_ Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure □ Renovation 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 Used Solely by Encapsulate Removal 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 Basement Boiler Room  $\boxtimes$ **Duct Insulation** 220 SF П  $\bowtie$ П П Basement Pipe Insulation П  $\boxtimes$ Pipe insulation 10 LF  $\boxtimes$ П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Newark Carting, Inc. G.R.O.W.S., Inc. 11222 1 City, State Disposal Date City, State Newark, NJ various Morrisville, PA Completed By (Print or Type) Signature Kiril Nestorov 2-7-2020 Project Manager

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Print Form State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 02/07/20 Check # 3546 St. Luke/ECLC School Agencies Notified Type Notification Street Address ic due controlla 302 N Franklin Tpk LIGHNSHIE **EPA** Initial City, State, Zip Code DEP Amended × DOL Amendment # Hohokus, NJ, 07423 Emergency (including Name of Contact DOH Telephone Number justification) Mr. Peterson DCA Cancellation 201-741-2788 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) St. Luke/ECLC School School (K-12) Street Address Subchapter 8 (Other than K-12) 302 N Franklin Tpk Other (i.e. private & commercial buildings, homes, City (5) Square Feet # of Floors Bldg. Age Hohokus 10.000 +2÷ 50± County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Bergen School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **EA Services** Street Address Street Address 426 69th st City, State, Zip Code City, State, Zip Code Guttenberg, NJ 07093 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 201-295-1700 01074 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 02/18/20 02/21/20 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 City, State, Zip Code Other - Describe: 9am Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Normally Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, Enclosure (Specify Remova Custodial Staff? Repair In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Basement/Gym Area X ACM Pipes and Elbows 3 LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill

Guttenberg, NJ

Completed by
Michael Fajardo

Title
Office Clerk

Signature

Hauler ID No.

of Waste

Disposal Date

TBD

Waynesburg, OH

City, State

Date 07 2020

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State of New Jersey  PA NOTFICATION OF ASSESTOR BARTEMENT (Pursuant to NAZO 638 and 12:128)  Date of Notification (1)  OZ/07/20  Check # 3547  Trinity Academy  Agencies Notified  Type Notification  Street Address  DoL  Amended  Amended  Amended  Amended  Amended  Amended  Carcellation  DoL  Dotte Caldwell  Carcellation  Name of Facility Where Abelerent Is Taking Piace (3)  Trinity Academy  Street Address  Stree		뵈															
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Scope of Work (Check All	That Apply)	W - 27						_									
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>							E	d !	Mini-Enclosure	9		tive Pr	essur	е			
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Completed by Michael Fajardo		10.000	e Cler	·k		5	Signatur	e	my			77.55	e /07/2	20			

ASB-41 (R-08-08)

<sup>.</sup> Do not use this form for asbestos licensure exampled activities.

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N. C. III.				FA	CILITY IN	1FO	RMATION									
Name of Facility Where Abateme	nt is Taki	ng Place	e (3)					Type of Facility								
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Street Address									8 (Other than I private and com		uildin	as.				
C:+ (5)	homes, etc.)															
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	Building	Owner	(8)	ASCM	No.			ent Contractor (9								
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						5	923 Haws Av	enue								
I							ty, State, Zip Co									
						1	Norristown, F	PA 19401								
	rm		Tel	ephone	No.		lephone No.		License No	).						
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Scope of Work (Check all that app	ly)															
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	ACM)	Use	d Sol	ely by	Ashes	stos	Description of Containing Mat		Amount	Re	Re	En	En			
Name of Facility Where Abatement is  Street Address  City (5)  Phillipsburg  County (6)  Warren  Name of Monitoring Firm Hired by Butter Address  1253 North Church St.  City, State, Zip Code  Moorestown, NJ 08057  Project Manager for Monitoring Firm  Jim Guilardi  Start Date (10)  2 / 24 / 20  Occupancy Status During Abatement  Facility Closed/Vacated During Err  Abatement Performed Outside of Time of Abatement:AM  Scope of Work (Check all that apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf  Location of  Asbestos-Containing Material (ACTO BE ABATED IN Facility (13)  1st floor  basement  1st floor kitchen  Name of Registered Waste Hauler  Freehold Cartage  City, State  Freehold, NJ 07728				ance/ Staff?		., the	ermal systems i	nsulation,	(Specify	Removal	Repair	cap	Enclosure			
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1st floor kitchen					linoleun	100			800SF							
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Oity (3)									Square Fe	eet	# of Floors	Blo	dg. Ag	e				
Maplewood, NJ 07040																		
County (6)					Count	y Code (7)	STATE U	SE ONLY)	Current U	se (Pri	or if being demolis	hed)						
Essex Name of Monitoring Firm	Hired by Build	tina Owne	er (8)		ASCM	No	Namo	of Abotomo	ent Contrac	tor (0)				-				
		-, (-,	1	(OOIVI	140.	Gr Tec		on Contrac	101 (3)									
Street Address					////			Address										
576 Valley Rd #283																		
City, State, Zip Code			City, St	tate, Zip Co	ode													
5		, NJ 0747 one No.	70															
Project Manager for Mon	Project Manager for Monitoring Firm Telephone No.										License No.							
Start Date (10)	15	Scheduled	Con	nlet	ion Da	te (11)	973-35 Name	6-3511 of OSHA N	Ionitor		01127							
02 / 17 /					/					Ino								
Occupancy Status Durin	g Abatement (0							Address	Consultants, Inc									
							20-21	Wagaraw	Road, Blo	dg .# 3	55E							
Abatement Performed	d Outside of No AM-	ormal Fac	ility F	lours	s - Des	cribe AM		tate, Zip Co										
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Scope of Work (Check al	i that apply)						×				ation with negative ative Pressure	press	sure					
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County (6) Hudson			County (	Code (7) USE ONLY	j		Curren	t Use (Prior	if bein	g demolish	ned)			
Name of Monitoring Firm Hired by Buildin	ng Owner (8)		ASCN	No.				ement Contr			-			
Street Address							Address	ronmenta	al Sen	vices, LL	.C			2
					235	235 Virginia Avenue City, State, Zip Code								
City, State, Zip Code								Code , NJ 0730	)5					
Project Manager for Monitoring Firm		T	Telepho	ne No.		2,500,000,000	none No.			License N	0.			
Start Date (10) 2-6-2020	Schedule 2-6-20		mpletion	Date (11)		Name	of OSH	A Monitor ronmenta			С.			
Occupancy Status During Abatement (C	5/14/1/4554-010	0.00.00				Street Address								
Facility Closed/Vacated During Enti Abatement Performed Outside of N	re Period of A	Abater / Hour	ment s			235 Virginia Avenue City, State, Zip Code								
Other – Describe:						Jersey City, NJ 07305								
Scope of Work (Check All That Apply)	_					_	7							
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City, State Jersey City, NJ						sal Date		City, State Morrisvill						
Completed by	Title				1	Signature		7		Da	te			-

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(11) 0303/100/20020

Print Form

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 02/07/2020 26 Parsippany Road, LLC FEB Agencies Notified Type Notification Street Address 195 Morristown Road EPA Initial × DEP City, State, Zip Code Amended HOLKSING DOL Amendment # Basking Ridge, NJ 07920 Emergency (including Name of Contact DOH Telephone Number justification) DCA Dan Lacz Cancellation 973-765-0100 x4063 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) 26 Parippany Road School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, 26 Parsippany Road × etc.) City (5) Square Feet # of Floors Bldg. Age Whippany 172,000 2 110 years County (6) County Code (7) Current Use (Prior if being demolished) Morris (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Consulting Inc. **ELCON Environmental** Street Address 2002 Renaissance Boulevard, Suite 110 150 Glenwood Drive City, State, Zip Code City, State, Zip Code King of Prussia, PA 19406 Washington Crossing, PA 18977 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Andrew D. Hubley 610-279-7070 215-313-7427 01225 Start Date (10) Name of OSHA Monitor 2/24/2020 03/14/2020 same Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ Encapsulate (i.e. thermal systems insulation, (Specify Enclosure Remova TO BE ABATED Custodial Staff? Repair surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)Yes No N/A Conference room Floor tile 525 X X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Service Transport Group SW2117 TBD Minerva Enterprises City, State Disposal Date City, State New Castle, DE TBD Waynesburg, OH Completed by Title Signature Date Andre Gosek Project Manager 02/07/2020

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Date of Notification (1) 02/07/2020					of Building arsippany			r (2)				<u> </u>	4.00.000	1 beg	The area	Contraction of the Contraction o	
Agencies Notified	Type Notification			Street A	Address Morristow	n Ro	ad		A CONTRACTOR OF THE PARTY OF TH		-EB 1	1	202	0		<i>y</i>	
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☐ DCA	Cancellation			302200000000000000000000000000000000000	1900000	20114				97	3-765-	0100	) X4	003			
Name of Facility Where	Abatement is Taking	Place (	3)	FAC	ILITY INFO	JRIVIA	HON	Туре	of Facility	(4)			_				
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Street Address 20 Parsippany Ro	ad			Subchapter 8 (Other than K-12) Other (i.e. private & commercial etc.)													
City (5) Whippany								Squa	re Feet	# 0	# of Floors Bldg. Age 2 110 year						
County (6) Morris					Code (7) USE ONLY,	)	Current Use (Prior if being demolish								210000		
Name of Monitoring Firm Environmental Con		wner (8	)	ASC	Л No.		100000000000000000000000000000000000000		atement Co		(9)						
Street Address		110					Street	Addre	SS								
2002 Renaissance City, State, Zip Code	boulevaru, Suite	110	***	_					wood Dri	ve							
King of Prussia, PA	19406								on Cross	ina, P	A 1897	7					
Project Manager for Mon Andrew D. Hubley	itoring Firm			Telepho	ne No. 79-7070		Teleph		lo.	0,	License 01225	e No.			* 12 2 2 2		
Start Date (10)			- 17				Name	of OSI	HA Monitor						-		
2/24/2020			14/202	20			same	е									
Occupancy Status During					Street Address												
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire Pe ed Outside of Norma	eriod of I Facilit	Abatem y Hours	ent			City, S	State, Zip Code									
Scope of Work (Check A	II That Apply)						1	4-3									
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Service Transport G	No.	of W	)		Minerv		rprises										
City, State New Castle, DE						Disp TBD	osal Date	_	City, Stat Wayne		ОН						
Completed by Andre Gosek		Title Proje	ect Ma	nager			Signature										
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Date of Notification (1) 02/07/2020			(	Name	of Building operties	Owner/	Operator (2)	11-12-15 V 12-15-15-15-15-15-15-15-15-15-15-15-15-15-	Check No.	1582	0.0	City and a state of	A THE STREET, SALES
Agencies Notified	Type Notification				Address Madison	Ave				20	20_	and discount	Equation
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⊠ DOH	<ul><li>□ Emergency (in justification)</li><li>□ Cancellation</li></ul>	ncluding		100000000000000000000000000000000000000	of Contact Cordova		-25.51		Telephone Num 973-223-7212				
Name of Facility Where	Abatement is Takir	ng Place (	3)	FAC	CILITY INF	ORMAT	ION Type of Fa	acility (4)		188399			
Private Residence		.9 (	-,				☐ Schoo						
Street Address							☐ Subch	apter 8 (Other th (i.e. private & cor	an K-12) nmercial buildin	gs, hon	nes, e	tc.)	
City (5) Paterson, New Jerse	y 07504						Square Fe 2000	155500 C	# of Floors 2	50	lg. Ag	je	
County (6) Passaic				County (STATE	Code (7) USE ONLY	) <u>.</u>	Residenc						
Name of Monitoring Firm Lis Consulting service	n Hired by Building es, LLC	Owner (8)	)	ASC	M No.		Name of At Lilich Corp	patement Contraction	ctor (9)				
Street Address 134 Bennington Pkwy							Street Addr 246 Union	ess Boulevard					
City, State, Zip Code Franklin Park, New Je			City, State, Totowa, N	City, State, Zip Code Totowa, New Jersey 07512									
Project Manager for Mor Krysztof Lis	nitoring Firm			Telepho 732-9	one No 40-6207		Telephone 973-225-8		License No 01104	),	7,		
Start Date (10) 02/17/2020		02/21/2	2020	mpletion	Date (11)			SHA Monitor nmental Labora	atories, LLC				
Occupancy Status Durin  Facility Closed/Vaca		3	25				Street Addr 2333 Rout						
☐ Abatement Performe ☐ Other – Describe:	ed Outside of Norm	al Facility	Hours	ent		1	City, State, Union, NJ						
Scope of Work (Check A	II That Apply)	***************************************	225										
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			Renova Demoli				□ M □ G	ull Containment v lini-Enclosure love Bag Proced	ure / Limited Co	ntainm	ent &	Tent	r e
		Is	Locat	tion			⊠ No	on-Exempted (*)	Amount	Procedure Abatement			
Location	Millioner von - men word net	1	Norma ed Sole	lly			Description of		(Specify SF of LF)		Тур	е	_
Asbestos-Containing TO BE ABA In Facil (13)	ATED	Ma	intena todial (12)	ince/		rmal syst	ems insulation VAT, or er miscellaneo			Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A				,		al	T .	ilate	ure
Building Exterior	0		Х		Asbestos	Siding			2,500 SF	Х			
L <sup>st</sup> Floor	, F		Х		Joint Com	npound			1,000 SF	Х			
		1											
Name of Registered Was Lilich Corporation	te Hauler		H	IJDEP W lauler ID 18724		Cubic of Was		Name of Regi	stered Landfill				
City, State Totowa, New Jersey						Dispos 02/21	al Date /2020	City, State Morrisville, F	PA				
Completed by Adriana Olejarova		Title Pre	siden	t		O.C. CONSOCCIACIAN	ignature	102	Date	/07/20	20		
ASB-41 (R-06-08)	nerr manadisci					1	* Do not use	this form for asb	estos licensure	exemp	ted ac	tiviti	es.

Inv# 179137

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

$\mathcal{K}$	PAU		(P)	ursuant	to NJAC 8	5:60 and	12:120	וט						A CONTRACTOR	
Date of Notification (1) 2-7-2020					Building (ne Basile		perator	(2)			FEB 1	1 20	20		7
Agencies Notified	Type Notification			Street Ad	ddress					1		-110.000	- Selder	3	ţ
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DOH DCA	Emergency ( justification) Cancellation	including		Name of Jo Ann	Contact ne Basile	9				Tel	ephone N	umber			
				FACII	LITY INFO	ORMATIC	ON								
Name of Facility Where A Residential	Abatement is Taking	Place (3	3)	Type of Facility (4)  School (K-12)											
Street Address								×	Subchapte	8 (Oth			dings,	home	s,
City (5) River Edge, NJ				Square Feet # of Floors 1090 2									Bldg. Age		
County (6) Bergen				County C	Code (7) JSE ONLY)			Cı	urrent Use (Pri	or if be	ing demol	ished)			
Name of Monitoring Firm	Hired by Building (		ASCN	1 No.			Name of Abatement Contractor (9) Green Environmental Services, LLC								
Street Address						Street Address 235 Virginia Avenue									
City, State, Zip Code								e, Zip Code City, NJ 07:	304						
Project Manager for Mon	nitoring Firm			Telephor	ne No.		Teleph 201-		e No. 3-8855		License 01174	No.			
Start Date (10) 2-7-2020		Schedule 2-7-20		npletion (	Date (11)				OSHA Monitor Environmer		rvices, I	LLC			
Occupancy Status Durin	g Abatement (Chec	k Only Or	ne)				Street Address								
Facility Closed/Vac Abatement Perform	ed Outside of Norm						235 Virginia Avenue City, State, Zip Code								
Other – Describe:							City, NJ 07	J 07304							
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ll That Apply)		Renova Demoli				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
Location	n of	1000	Locat Norma			Des	scrintion	n of						ement /pe	
Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED lity	Ma Cus	ed Sole intena todial ( (12)	ince/ Staff?		tos Cont thermal surfac	systems insulation, (S			Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A								_	_	"	
Basem	Х			Duct	Insula	atio	on	1	00 LF	x					
Name of Registered Wa	ste Hauler			NJDEP W	/aste	Cubic	Yards		Name of	Regist	ered Land	Ifill			
Green Environment		;	1	Hauler ID 1034889	No.	Cubic Yards Name of Registered Landfill Fairless Landfill									
City, State Jersey City, NJ			anneral ma		AND THE PERSON NAMED IN	Dispos 2-7-2	sal Date 020	9	City, Sta Morris		PA				
Completed by Liliana Serrano		Title Offic	e Ma	nager		S	Signatur	e n 1	80 Pag	- C 10		Date 2-7-20	20		