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

AMENDMENT # 1 ETS JOB #\3909/13 Date of Notification (1) 1/25/2013 Agencies Notified Street Address Type Notification **EPA** 241 ERIE STREET, ROOM 236 City, State & Zip Code DEP Initial Notification DOL X Amended Notification JERSEY CITY, NJ 07310 Telephone Number DOH Cancellation Name of Contact DCA MR. RALPH CAMPIONE FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) TERMINAL B , B-3 SATELLITE DEPARTURES LEVEL-LUFTHANSA LOUNGE Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings, homes, etc. NEWARK INTERNATIONAL AIRPORT Square Feet # of Floors Bldg. Age 50+ City (5) County (6) County Code (7) 1.2 MIL. Current Use (Prior if being demolished) NEWARK ESSEX AIRPORT Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. ETS CONTRACTING, INC. OMEGA ENVIRONMENTAL SERVICES INC. 00120 Street Address Street Address 160 CLAY STREET 280 HUYLER STREET City, State & Zip Code City, State & Zip Code **BROOKLYN, NY 11222** S. HACKENSACK, NJ 07606 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 00511 (201) 489-8700 718-706-6300 MR. ANTON REZIN Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) TESTOR TECH., INC. 5/31/2013 2/8/2013 Occupancy Status During Abatement (Check only one) Street Address 10 59 JACKSON AVE Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours -City, State & Zip Code X Describe: Monday - Friday from 7:00 AM - 3:30 PM L.I.C., NY 11101 Other - Describe: Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Mini-Enclosure Large Project Glovebag Procedure Quantity is ≥ 3 SF or ≥ 3 LF ACM Other: Quantity is ≥ 160 SF or ≥ 260 LF ACM Abatement Type Description of Amount Location of Is Location (Specify (Specify: Removal, Asbestos-Containing Asbestos-Containing Normally Used Square Feet or Repair, Material (ACM) Solely by Material (ACM) Encapsulation or Maintenance or (i.e., thermal systems Linear Feet) TO BE ABATED insulation, surfacing, VAT Enclosure) Custodial Staff? in Facility or other miscellaneous) (13)(12)REMOVAL 395 LF FIREPROOFING TERM#B CONNECTOR, DEPT LEVEL NO LUFTHANSA LOUNGE **ENCAPSULATION** 4.685 SF NO **FIREPROOFING** TERM#B CONNECTOR, DEPT LEVEL LUFTHANSA LOUNGE Name of Registered Landfill Cu. Yds. of Waste NJDEP Waste Hauler ID # Name of Registered Waste Hauler MINERVA ENTERPRISES, INC. 120 TRI-STATE TRANSFER 2A-456 Disposal Date City, State City, State 9000 MINERVA ROAD, TBD 1199 RANDALL AVENUE, BRONX, NY 10474 WAYNESBURG, OH 44688

Signature

Sr. Project Executive

Completed By (Print or Type)

Richie Smith

Date

2/7/2013

Noneck

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

ETS JOB # 3909/13	3						AMENDIN	ENLO# 2	-
Date of Notification (1) 2/7/2013				r / Operator (2)	ORK & NEV	V JERSEY	(/LUFTH	ANSA
Agencies Notified 1	ype Notification		Street Addre		ROOM 236		Sec.	6	5
DEP	☐ Initial Not	ification	City, State &				- 6	21.32	
☐ DOL	Amended	Notification	n JERSEY C	ITY, NJ 07	7310		;		PH
DOH DOH	☐ Cancellati	ion	Name of Cor	ntact			1	relephone	Number
☐ DCA			MR. RALPI	H CAMPIC	NE			Y .	
			FACILIT	Y INFORM	MATION			0	
Name of Facility Whe TERMINAL B , B-3 LUFTHANSA LOU	SATELLITE [Ту	pe of Facility (4) School (K-12)				
Street Address	NGE				Subchapter 8	(Other than K-	12)		
NEWARK INTERN	ATIONAL AIR	PORT			Other (i.e., priv			as. home	s. etc.
THE TOTAL THE PERSON	A HONAL AIR	· Oiti			uare Feet	# of Floors		ldg. Age	
City (5)	Cou	inty (6)	County Code (7		1.2 MIL.	2		- 25 TO 15 TO 1	50÷
NEWARK	20000	SEX			rrent Use (Prior		ished)		
2.				AI	RPORT		ii.		
Name of Monitoring F					me of Abatemer		9)	W	
OMEGA ENVIRON Street Address	MENTAL SER	WICES IN	IC. 0012		reet Address	ING, INC.			
280 HUYLER STR	FFT				O CLAY STRE	ET			
City, State & Zip Cod					ty, State & Zip Co				
S. HACKENSACK,					ROOKLYN, NY				
Project Manager for MR. ANTON REZI			Telephone Numb (201) 489-8700		lephone Number 8-706-6300	r	License N	umber 00511	
Scheduled Start Date		duled Cor	npletion Date (11)	Na	ame of OSHA Mo	onitor			
2/11/2013			5/31/2013	TE	STOR TECH.,	INC.			
Occupancy Status Do			nly one) eriod of Abatemer	TOTAL VI	reet Address 59 JACKSON	AVE			
Abatement P	erformed Outsid	e of Norma	al Facility Hours -		ty, State & Zip Co	ode		TA.	
Describe: Nother - Describe:		ay from 7	:00 AM - 3:30 P	M L.	I.C., NY 11101				
Scope of Work (Chec	k all that apply)						voir	***	
☐ Demolition		Renovat	ion			ntainment with	Negative P	ressure	
Large Project					Mini-En				
	3 SF or ≥ 3 LF /					ag Procedure			
	160 SF or ≥ 260	LF ACM			Other:				
	cation of	100	Is Location Normally Used		Description of bestos-Containing		Amount Specify		ment Typ y: Remov
	s-Containing rial (ACM)		Solely by		Material (ACM)		are Feet or		epair,
994.00.00.00	EABATED		Maintenance or	(i.e.	, thermal system	is Lin	ear Feet)	Encap	sulation of
in	Facility		Custodial Staff?		tion, surfacing, \			En	closure)
	(13)		(12)	or ot	her miscellaneou	is)			
TERM#B CONNEC	TOP DEPTI	EVEL	NO	FI	REPROOFING		395 LF	REI	MOVAL
LUFTHANSA LOU						15			
TERM#B CONNEC		EVEL	NO	FIRE	PROOFING	4,	685 SF	ENCAP	SULATION
Name of Registered TRI-STATE TRANS	Waste Hauler		NJDEP Waste Ha		Cu. Yds. of W		e of Regist		
City, State	J. 613		47.40		Disposal Date		State		
1199 RANDALL A	/ENUE, BRON	IX, NY 10	474		TBD	9000	MINERV NESBUR		7. T
Completed By (Print	or Type)	Title			Signature	1 /6		.,	Date
Richie Smith	na radio de la compania de la compa	Sr. Proi	ect Executive		1/2	オノハ	U -	_	2/7/201



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

RECEIVED

Date of Notification (1)				Name	of Building	Owner/Operator (2	2)	00		the ease		
	11 / _	13		GIN	A MACD	ONALD		2013 FEB 12	DIA	^ .		
Agencies Notified	Type Notificat	tion		Street	Address		7.	4	117	2. (8	
	Initial	- 1		82 C	OLUMB	IA STREET		& 1100706 & 11624	9.00 m	Nes		i
	☐ Amended			City, S	tate, Zip C	ode		& LIGEN	tell.	NO	L	
☑ DHSS ☐ DCA	Amendmer Emergency			JER	SEY CIT	Y NJ 07030	Berton Williams	1.5-5-1.	e. 1.1.4 (
(NJAC 5:23-8)	justification			Name	of Contac	L a		Telephone Numb	er			
	☐ Cancellation	on ,		GIN	A MACD	ONALD			_			- 2
				FAC	ILITY IN	FORMATION			2 000			1
Name of Facility Where Ab	atement is Ta	aking Place	(3)				Type of Facility (
							School (K-12)	(Oth 4h 1/ 12)				
Street Address						K	☐ Subchapter 8	(Other than K-12) wate and commerce	ial bui	ldings	5,	
82 COLUMBIA STRE	ET						homes, etc.)			9-57	10	
City (5)		W. M. T					Square Feet	# of Floors	Bld	g. Ag	е	
JERSEY CITY							500	3	4	0+		
County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolish	hed)			
HUDSON							RESIDENTIA	\L				
Name of Monitoring Firm I	lired by Buildi	ing Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)	n = 2 - 1		1		
GL ENVIRONMENTA	L SERVICE	S	li li			PRESTIGE D	EVELOPMENT	SERVICES INC				
Street Address			7.7			Street Address						
PO BOX 753042						199 ;INCOLN	AVENUE SUIT	E 204				
City, State, Zip Code						City, State, Zip Co	ode				-0.150700	
BRONX NY 10475						BRONX, NY	10451					7272 20
Project Manager for Monito	oring Firm		Tele	phone	No.	Telephone No.		License No.				
GREGORY BROWN			37	43930	791	7184012744		01083				
Start Date (10)	S	cheduled C	omple	tion Da	te (11)	Name of OSHA N	Monitor		50.67		1000	
2 / 25 /	13	8 /	25	_ / _	13_							
Occupancy Status During		Check only	one)			Street Address	*		***			
☐ Facility Closed/Vacated				ment								
					cribe	City, State, Zip C	ode		-	7		
Time of Abatement: 7/	AM- <u>7P</u> PM/_	PM	A	VI								
Scope of Work (Check all	that apply)					0.000						
	,					☐ Full Con	tainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			enovat emoliti				g Procedure					
						☐ Non-Exe	empted (*) and No	n-Friable Procedu				
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Location		11.	Norma		Ach	Description estos Containing Ma		Amount	Re	Repair	Ē	E
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Name of Registered Wast	e Hauler		17	JDEP	Waste	Cubic Yards of	Name of Regis	stered Landfill	1		-	
ATC WASTE HAULI			100	lauler I		Waste 2	MINERVA	ENTERPRISES				
City, State						Disposal Date	City, State					
2 MORICHES MIDDL	E ISLAND	DRIVE SH	IIRLE	Y NY		2/26/13	WAYNESE	BURG, OHIO			- 4	
Completed By (Print or Ty	rpe)	Title				Signature	MIN	Da	ate	1		,
CLAUDIA FITZPATE		PRESI	DENT	. 5 . 5		1. (()/	MW		1/11	12	017	2

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

Date of Notification (1)	19 , 201	2	IN	lame of I	Building O	wner/Operator (2	EB 12:57	L.P Eagle P	oint	Fac	ilit	v
	19 / 201		5	Sunoco	Partner	s Marketing a	ind Texminats	S - Fagle F	<u> </u>	ruc		- 1
Agencies Notified IX EPA	Type Notification Initial		18	Street Ad	aress	int Road	LIECHOINE	: Si				
☑ DOLWD	Amended Amendment #		C	City, Stat	e, Zip Cod	e 08093-1000	CENCHNG	-01				
☑ DHSS ☑ DCA	☐ Emergency (inc	cluding				08093-1000		Talankana Number				4
(NJAC 5:23-8)	justification)			Name of			I.	Telephone Number				
	☐ Cancellation				y Rurak							\dashv
				FACIL	ITY INFO	ORMATION	Type of Facility (4	1				\dashv
Name of Facility Where A Sunoco Partners Ma	Abatement is Taking	Place (3) т.	D - E	agle Poi	nt Facility	School (K-12)					
	erkecing and re-	- Intriduction				_	Subchapter 8	(Other than K-12)	l build	inac		
Street Address 1240 Crown Point	Road						homes, etc.)	vate and commercia		. Age		\dashv
City (5) Westville, NJ 080	93-1000						Square Feet N/A	# of Floors N/A	N	/A		
County (6) Gloucester				County	Code (7)(5	STATE USE ONLY)	Current Use (Price Tank Farm	r if being demolishe	d)			
Name of Monitoring Firm Kenny Atlantic Inc	n Hired by Building (Owner (8)	. F	ASCM No). I	Name of Abateme	ent Contractor (9)	Services, LLC.				
Street Address		VO. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10				Street Address						\neg
800 Billingport R	oad					800 Billingpo	ort Road					_
City, State, Zip Code						City, State, Zip C		42				
Paulsboro, NJ 080	86					Paulsboro, N	J 08086					\dashv
Project Manager for Mo	nitoring Firm			phone N		Telephone No.	4	License No.				
Tom Kennedy			2	5)491-5	-	(856) 491-593		00037				\dashv
Start Date (10) 01 / 01		duled Cor 12 /	mplet 31	tion Date	013	Name of OSHA! Kenny Atlant	Monitor ic Industrial	Services, LLC.				
Occupancy Status Duri	ng Abatement (Chec	ck only on	e)			Street Address						
☐ Facility Closed/Vaca	ated During Entire Pe	eriod of A	bater	ment	. 1	800 Billing					-	
Abatement Performe	ed Outside of Norma :F	al Facility PM/	Hour _PM-	s - Desc A	ribe M	City, State, Zip C						
Scope of Work (Check	all that apply)					Пеле	ntainment with Ne	native Pressure				
						☐ Mini-Er	ntainment with Ne nclosure ag Procedure	ganverrossaro				
≥160 sf or ≥260 lf		M Del	Юш	UII		☐ Non-Ex	cempted (*) and No	n-Friable Procedure				_
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Locati	on of		orma	ally ely by	Acho	Description stos Containing N		Amount	Removal	Repair	Encapsulate	Enclosure
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IN Fa	cility	Cust	(12)	Staff?		surfacing, VA other miscellar		Si Gi Li /	-		late	œ
(13	3)	Yes	No	N/A					-	rear .		
Various outdoor	areas	X			Thermal	L systems ins	ulation	3000LF/1500SF		X		
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Name of Registered V	Vaste Hauler		1.0	NJDEP		Cubic Yards of Waste		istered Landfill	i11			
Waste Management				Hauler II		800 (estimat	ea)	er County Landf	***			
City, State						Disposal Date	City, State Swedesbox	o NIT				
Camden, NJ						Various			ite			
Completed By (Print of Dorothy Rurak	Ji 1990)	litle Environ	nent	al Spe	cialist	Signature	XA XI	/ //	2/19	/201	2	- T
DOLOCHY KULAK		TITA TT OIL					W/J /ha	- t		101100		

ASB-41 MAY 11 * Do not use this form for asbestos licensure exempted activities.

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

Check #1411

Date of Notification (1) 2-8-2013				Building O Hills Req			2013 FED						
Agencies Notified Type Notification			Street Ad 18 Kno	dress Il Drive			2013 FEB	15 b	M 2: 01	?			
EPA Initial Amended Amendment				e, Zip Cod vay, NJ		-4024	& Lio	ÉHZII	17 × 61	í			
Emergency justification) DCA justification Cancellation		1000	lame of Steve A	Contact A. Terno	sky			Teler	Mône Nim	har		7	
Name of Facility Where Abatement is Takin	a Place (3)		FACIL	ITY INFO	RMATIC		Type of Facility (4)			-		
Morris Hills High School	g Flace (5)					١.	School (K-1						
Street Address		-					Subchapter Other (i.e. p	8 (Other			linge	home	96
520 West Main Street							etc.)						,5,
City (5) Rockaway					(4) (-)		Square Feet 229,760	2	Floors	5	ldg. A 3	ge	
County (6) Morris			County C STATE U	ode (7) SE ONLY)			Current Use (Pri	or if bein	g demolish	ed)			
Name of Monitoring Firm Hired by Building Westchester Environmental	Owner (8)		ASCM	No.			f Abatement Cor roup, Inc	ntractor (9)	1			
Street Address 307 North Walnut Street						Street A	Address amburg Tpke)			= 0		
City, State, Zip Code West Chester, PA 19380							ate, Zip Code ningdale, NJ (7403					
Project Manager for Monitoring Firm Paul F. McCaa			Felephon	ne No. 1-7545		Telepho (201)	one No. 710-9725		License No 01084	Э.			
Start Date (10) 02/19/2013	Scheduled 02/20/20		pletion [Date (11)			of OSHA Monitor						
Occupancy Status During Abatement (Che-						Street A	Address						
Facility Closed/Vacated During Entire			ent				lamburg Tpke)	-3.0				
Abatement Performed Outside of North Other – Describe:	mal Facility F	lours			_	The state of the s	ate, Zip Code ningdale, NJ (07403					
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova moliti				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				'e	
	T la l	ocati					1 Non-Exemple	d / Jana	HOIT-I HOL		Abat	emen	t
Location of	No	rmal	y		Des	scription	of .			-	T	/pe	T
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Custo	tenar	nce/	Asbest (i.e.	thermal surface	aining M systems cing, VA niscellan		(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Stage	103	X	1477		AC	M Wirir	na	40) LF	X			
Stage									17.				
						7							
Name of Registered Waste Hauler			JDEP W		100000000000000000000000000000000000000	Yards	1,300,000,000	- 1477	red Landfill		4.1		
GL Group, Inc			133034		of War		GROW					157	
City, State Bloomingdale, NJ					TBD	sal Date	City, Sta Morris	ville, PA	4	id (
Completed by Elena Solakov	Title Presio	ent			8	Signature	Eleran S	Lulla		ate 8/20	13		

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m Heed by Building	Owner (8	<u> </u>	ASCA	NoL	Name					_		
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	September 1	the state of					1000	REVIEW COMPANY	100			
	NATION AND ADDRESS.										<u>, , , , , , , , , , , , , , , , , , , </u>	
					City, S	Male, Zip Code	7.4555					
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All That Apply)					1,	7	1.18	71 - 7	V			*
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	Amended Amended Amended Amended Amended Amended Amended Amended Amended Conscillation Conscilla	Type Notification Littles Amendment Amendment Entergency forchaling Testing Place (AMKEL COURT Councilation Abstract by Building Denner (6) That Apply) That Apply) That Apply) That Apply) To of Matter (ACM) Matter Court Light Matter Court Matt	Type Modification Type Modification	Type Modification Type Modifica	Proposes to NAC (Proposes to NAC) Type Notification Supple Attending January Scientists So City, Steel Attended So City, Steel Attended City, Steel Attended Daylor Education of Charlest Little Contact Daylor FACE ITY SHET Contact Daylor Face Daylor Daylor Contact Daylor Contact Daylor Contact Daylor Face Daylor Daylor Contact	Processes to MAG Scho and 12-12 Type Modification	PROTESTANCING SET ASSESSED SET ACTIONS PROTESTANCE OF ASSESSED SET ACTIONS PROTESTANCE OF ASSESSED SET ACTIONS I stilled ASSESSED ACTIONS SUPER ARCHITY SET DOME ADJUST ASSESSED ACTIONS SUPER ARCHITY SET DOME ADJUST LITTLE FOLLY N. J. School (N. STEEL ACTIONS) CONCENTRATE USES DOWN CONCENTRATE USES DOWN CONCENTRATE USES DOWN ASSESSED ACTIONS SUPER ARCHITY SET DOME ADJUST LITTLE FOLLY N. J. School (N. STEEL ACTIONS) FOR ACTION SET ACTIONS CONCENTRATE USES DOWN CONCENTRATE USES DOWN CONCENTRATE USES DOWN ASSESSED ACTIONS TORROCK N. J. O TORROCK PROCK, N. J. O TORROCK PROCK N. J. O TORROCK	PERSONANCE OF ASSESSION AND STREET AND STREE	Note the Appendix of the Appendix of Appen	ROTH-RECATION OF ASSESSION AND ASSESSION AND PROPERTY Processions to NARGE Schild and 12:1200 NADDERS AND PROPERTY Processions to NARGE Schild and 12:1200 NADDERS AND PROPERTY Processions of Schild And Party Procession	State of State Large State of State Large State	Processor to Nation Street Assessing From Part 1999 Processor to Nation of Grinding Continues procedure (G) AULEL LIA Type Notification Super Advances Finished Amendment Amendment

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- I AN	BERTALD BACKET		Cay, Size Zp C	oda			Louis,		11.3	Time:
TO STATE OF THE PARTY OF THE PA			Manue of Contact	er, N.J	0701	5			*	
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Name of Facility Vinene Absterney	is falling Place	(3)	FACILITY IN	MUSATRON		!				
Street Annual Robus	UES				Type of F	ocally (4)		-		
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D&S Proj. #: MS 13-45

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

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Date of Notification (1)		PA			Operator (2) CO ASSOC	CIATES	2013 F	EB 12 PM	2: 68				
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			4 9	FACIL	ITY INFORM	ATION							
Name of facility where ab	atement is	taking place	e (3)					Type of Facility ((4) ol (K - 12)				
PATERSON FIDELO	O ASSO	CIATES						Subch	apter 8 (Ot			12)	
Street Address								Other Bldgs.	(Private/Co /Homes, et	mmer c.	cial		
85 5TH AVENUE								Square Feet	# of Floors	3	Bld	g. Ag	е
City (5)		County	y (6)				y Code (7)						
						(State	use only)	Current Use (P	rior if being	demo	olishe	d)	
PATERSON	=	PASS			1001111-	L	Name of Abatement	Contractor (9)	-	_	-		
Name of Monitoring Firm	Hired by B	lidg. Owner	(8)		ASCM No.								
	187						D & S RESTORA	ATION, INC.		_	-		_
Street Address							20 California Av	ie.					
						$= _{c}$	City, State, Zip Code						
City, State, Zip Code							Paterson, NJ 07	503					
Project Manager for Monit	toring Firm		TPh	one Numbe	er		Telephone Number	303	License	Numb	er		
Project Manager for Morni	torning i mini		1110	one rumo			973-345-8020		0	1169			
		ICahad	Completie	n Date (11	\		Name of OSHA Moni	itor					
Start Date (10)		Scried.	Completio	III Date (11	,		D & S Restorati	on, Inc.					
02/19/13		02/28/				- (Street Address						
Occupancy Status During							20 California Av	renue		_	_		
Facility closed/vaca	ted during	entire period	d of abater	nent. s-			City, State, Zip Code						
Describe:			toliky flour			-11	Paterson, NJ 07	503					
Other-Describe: _N						$- \bot$		Full Containment	w/negative	nress	ure		
Scope of Work (check a	Company of the Compan							Mini-enclosure	Willegauve	ріссс			
≥ 3 sf or >3 If	\boxtimes	Renovation	1					Glovebag proced	ure				
≥160 sf or ≥260 lf		Demolition						Non-Exempted (*) and Non-	friable R	Proce	E	
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D & S RESTORATION	ON, INC.	135	06	2	YDS		TULLYTOWN,	KESOURCE R	ECOVER	(1	-		7
City, State	1	1,7308		Disposal D 02/19/1			City, State TULLYTOWN	PA	*				
PATERSON, NJ 0		1		02/19/1	Signature		TOLLFIOWN	, 111	Date				
Completed by (Print or T BOGDAN JOLDZIO		Title PRESIDI	ENT				-10.00		02/05	/13			
ASB-41		* Do not use	this form	for asbest	os licensure e	xempted	activities.						

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