

			,	100	4.5							
Date of Notification (1)	118/13.		Ма	-		Amer/Operator (		00.	LICTIGA	4		
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Agencies Nouned	Type Notification		30	4 81 YOU'	55	R+, 5	0	584	6 .0		1	
	⊠ Jnrial . □ Amended		Cir	y. State. 2					<del></del>		٠.,٥	=
	Amendment #_		0			EN 1-150	-D.	N.J.C	18230 -	, '		_
	Emergency (including justification)	gnibut	Na	me of Co					Pelephone Number	•	40	
☐ 00H	Cancellation					BREUN	10					
J			1=			HOTTAKE			Co.	Ó	_	-
	•		F	ACILITY	160-06	CATION	Type	of Facility (4	Cabe			-
Name of Facility Where	Abatement is Taking	Place (3)						chool (K-12)	<b>'</b>			
RES	DENCE	<del></del>					7	8 letoarrous	(Other than K-12)			
		= (					₽,	other (I.e., priv	ata £ commercial b			
125	ASBUNY. A	u _			==			are Feel	# of Floors	Bldg		
					15		10	00	. 2_		1	
UCEA	IN CITY		10	ounty Co	de (7)	ISTATE	Cun	eni Use (Prio	r I being demolished	1)		
County (6)			10	SE ONLY	7			VAC	DUT			
*				CM No.	-	Name of Abatem	rent C	onvacior (9)	,	W		
Name of Maniforma Fire	n Hired by Building C	MUB!	100	JM 110.	.	KLEM	00	IN	٥/			==
(8)	1/A		_		=+	Sveet Address		· .	- 1.0			
Sueer Aggress						369 5		> PRUC	E AVE.			==
			===		=+	City. State, Zip C	C∞de		· 11 T 15	05	L	
City State Zp Code						MAR	10	SHAD		-	==	==
		1 9	alechy	one No.	-	Telephone No.		01100	100nse No	4		
Project Manager for Mi	onitating Firm	\.\·\'		18	_	856-7	79	-09/2	001			
	T 0.55	uled Comy	delip	n Date (1	)	Name of OSHA	Monit	91/50	M			
Sian Daie 1101 - /		1/4	//3	3		JOSE	14/4	41.609		==		
2/25/1	3 1 1000	ck only me	0)			Sueel Address		PILUCE	=1,05,			
Occupancy Status Du	and applement (Che	ciad of An	atemé	ent		3695			-/: 0 -			
B Facility Closed Vac	aled During Entire Pe	Facility H	lours		t	City, State, Mip	Code	C	=, N, J, o	8 25	- 7	
Abalement Perform	AND CORRIGH OF HOME				_	MAP	تن ب	2 HV D	-,10,0,0			===
Ower - Descupe.						5.10	I sin	meni with Ne	gative Pressure			
Scope of Work (Chec	k all that apply)		89833			MIN.F	nclos	910	•			
723 51 01 23 11		Reno	valion dition	١.					on-Friable Procedur	-		
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		Is Loc	cation	-						-		
		Used S	pley	by		Description los Containing N	i of	al (ACM)	Amount	1 -1	-	7 4
Aspesios Containn	on of	Mainte	nano	2/	Asbes	INACTOR SYSTEM	12 11121	16101	(Specity SF & LF)	Removal	flag.w	f rat sees to de
TO BE A	BATED		aH?			suda ang. VA	11.01			100	E	- <del>1</del>
IN Fax	ally.	(1	12)			OWEL HASCOUR	1000	<b>'</b>		-		3
(1)	31	Yes	NO	NIA		a se like	APRIL 2003		ļ	X		
						TRANSI	TE	:	50004	X		-
SIPIN	NY			<u> </u>		710000						-
SIPINO				-								<u> </u>
NOOFI	20	+							-	1	1	
		=						10	opistered Landfill			
			TR	JOEP W.	ezie .	Cubic Yards		Name of K	1, C, M, U	, 1	,	
Name of Registered	Waste Hauler	2	۱ ۲	790	ю.	01 Waste			1,0,			
Kiem	co INCI		كسلـــ	THE REAL PROPERTY.		IEO IEZQAO	e	City. State	1	し、コ		3.1
Tip State		5,08	80:	52				Woo	DBINE, 1		=	
MAPLES	HADE, N	0,00				Signalu		, 1C	Date Z	118	11	3
Competed By	,	Tide 1.	ענ	ER		&	os	4013				
1355PH	LEMM						)		4			
		. De ==!	te Ih	s form fo	, asbe	sios licensure	exem	pled activitie	5			
458 H 1		· Do not u	se in	is form fo	1 9306							

04/0128

#### State of New Jersey - Notification of Asbestos Abatement

Data of Natification (1)						,	20		1	MA		
Date of Notification (1) February 7, 2013					Name of Building Ow The Valley Hos	vner/Ωn	erator (	27.50	H 11	1	A	
					The Valley Hos	nital	Crator (	21/6	910	0	<i>(</i> )	-
Agencies Notified		Notificati	on Type		Street Address	pital			13	PM 2:0		
_ EPA		X Ir	nitial N	otification	223 North Van F		-129.			14 2		
□ DCA				dment # 2	223 North Van E	Jien A	venue	1/5		<:1	0	
x DOL		1 ^ '	unenc	inent# Z	City, State, Zip Code		-2	610	* 17.		C.	
⊠ DEP		_			Ridgewood, N.	I 074	50-27	36	15 1	* /		
x DOH		Eme	ergenc	y (including	Name of Contact	0 1 1	30-21		14.	110.		
***		iusti	fication	n) `	William Stasiak			le	lephone	Number		
				,	William Stasiak							
	9 141			FACILITY	INFORMATION			1			ě	
Name of Facility Where Abate	ment is Ta	king Place (	3)	7710.277	Type of Facility (4)							
The Valley Hospital					School (K-12)							
Cheel 4 <sup>th</sup> Floor – Neu	ro/Orth	O Suppor	4 A FOO									
Street Address		Gappoi	LAICA	13	Subchapter 8 (other	than K-1	(2)					
223 North Van Dien A	venue				Other (i.e. priva	te & com	mercial	buildin	as. hom	es etc)		
Market and the second and the second					Sq. Feet: Unknow	wn <u>#</u>	of Flo	ors: 4	Blda.	Age:	50+ ve	are
City (5)	County (6	5)	Cour	nty Code (7)							, o . y c	ais
Ridgewood	Berger	1	(Stat	te Use Only)	Current Use (prior if b	eing der	nolishe	d): H	ospital			
			1		300.000							
Name of Monitoring Firm Hired	by Bldg. (	Owner (8)	ASC	M No.	Nome of Court of 191			* -				
Colden Corporation			1.00	<del></del>	Name of Contractor (9)			VIND UNPOSSE				
					GREENWOOD AB	BATEM	ENT (	CONS	ULTA	NTS, IN	C.	
Street Address			-									
28 Washington Street					Street Address			2000 - 1200-1200				
City, State, Zip Code					268 MAIN STREE	Τ						
Ballston Spa, NY 1202	20				City State, ZipCode							
Project Manager for Monitoring	Firm	Talask			Butler, NJ 07405							
Jim Miades	1 11111	Telephone	Number		Telephone Number		100	Lice	nse Nun	nher		
Scheduled Start Date (10)		347.435	.3567		973-492-0477			008		1001		
February 1, 2013		Scheduled	Completi	ion Date (11)	Name of OSHA Monitor			1 333				
Occupancy Status During At-		Februar	y 28, 2	2013	EMSL inc.							
Occupancy Status During Aba	tement (	Sheck only o	ne)	0	Street Address				-			
Facility Closed/Vacated	During E	ntire Period	of Abate	ement								
Abatement Performed ( Describe	Outside of	Normal Fac	ility Hou	ırs -	1056 Stelton Road	d						
					City, State, Zip Code		_					
Other - Describe: Week	ends- Fr	iday-Saturd	lay-Sun	day-	Piscataway, NJ 08	8854						
r nase 1- October 19, 2	012- Octo	hor 22 204	2 0	-1-4- 1	,,,,,	,,,,						
i nase 20- repruary 8.	2013 - F6	hriani 44	2042 0-	ompleted	All a							
Phase 3b- February 15, Source of Work (Check all that a	Z11713 - 1-	ebruary 18	2013		1.							
Starte of Work (Check all that a	pply)											
> 3 of or > 2 K						x Ful	Conta	inment	with Ne	egative Pr		
≥ 3 sf or ≥ 3 lf				Renovation	1 5 20	Min	i-Enclo	CUE	. WILLIAG	yauve Pr	essure	Ķ.
$\square \ge 160 \text{ sf or } \ge 260$	Y			Demolition								
ocation of Ashastas O						Non	ebag P	rocedu	ıre			
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Loc	ation Normal	ly Used	Description of As	bestos Containing Material		Amoun	ea (*)	and No	n-Friable I	Proced	ure
material (1014) in Facility (13)	Stoffs	by Maint./Cu	istodial	(ACM) (i.e. thern	nal systems insulation, surfa	icina	(Specif		Abate	ment Type	2	
	Staff? YES	(12) NO	ATA:	VAT, or other mis	scell.)	onig,	or LF)	y 31	Remov	e Repair E	Encap E	nclose
Chool 4th Fi	1.20	- NO	NA	An action of the			/					
Cheel 4th Floor												
Neuro/Ortho Support Areas			X	VAT & Mastic		- 1	4 000	.	****			
Phases 2b,2c & 3b							1,300 s	1	X			
Jame of Day 144						-+				+		
Name of Reg. Waste Hauler	1	NJDEP Wast	e Hauler	ID#	Cubic Yards of Waste:							
See Hauler Below # 1 & 2		See Below				20		Mame	of Regis	stered Lan	dfill	
lauler #1) Greenwood Aba	tement	Consultar	nts. Inc	- Butler N I o	7405	30			lowfill L			
110 DEF # 1200					1400		sal Date			City, State		
Hauler #2) Newark Carting,		owerl MI	04500	ALL DED # 4055			ruary -	28,		Route 2, B		
completed by (Print or Type)	Jitle Jitle	owark, NJ	04309, [	NJ DEP # 19551		2013	3			Bridgeport 304-842-2		
Marin Graure			0 100	_	Signature			Date		707 U4Z-Z	704	
	35	NIOR PR	OJEC	1	Marin Graure				uary 7	', 2013		2
AC#2012 255 N. 4 5 5	ard a	ANAGER			- graune	2			<i>,</i>	, 2013		
AC # 2012-355- Note: 2 &	3" Pha	se Note: P	ostpon	ed until the foll	owing weekend by			-				

#### State of New Jersey - Notification of Asbestos Abatement

Date of Notification (1)					A		201	` .	51,		Jag
January 3, 2013					Name of Building Owne The Valley Hospi Street Address	r/Operat	or (2) 15	58.			
Agencies Notified	the state of	Notification	n Type		Street Address		· · · · ·	-/3	PA 2.	*ur	
EPA		IXI Ini	tial Not	tification	223 North Van Die	n Ave	nue		Ma		
□ DCA		X A	mendn	nent # 1	City, State, Zip Code		<del>4</del> / ,	-	·	10	
x DOL		0.00	····o···a··			07450	2736	p. 00	F * - 5	6	
⊠ DEP		Emo	conou	(in alcoding	Ridgewood, NJ	0/450		11	8 - Marie		
x DOH			gency cation)	(including	Name of Contact William Stasiak		Tel	ephone N	lumber		
	-			FACILITY IN	NFORMATION	177	-				
Name of Facility Where Abate	ment is Tal	king Place (3)			Type of Facility (4)				19		
The Valley Hospital					School (K-12)						
Cheel 4th Floor - Neu	ro/Ortho	Support	Areas	es quinto d	Subchapter 8 (other th	an K-12\					
Street Address					Other (i.e. private	2 commo	roial buildin		-4-1		
223 North Van Dien A	venue				Sq. Feet: Unknown	1 # of	Floors: 4	gs, nomes Bldg. A	, etc.) .ge: 5	0+ yea	ars
City (5)	County (6	)	Count	ty Code (7)	-				as south		
Ridgewood	Bergen			Use Only)	Current Use (prior if beir	ng demo	lished): Ho	ospital			
Name of Monitoring Firm Hired	by Bldg. C	Owner (8)	ASCN	1 No.	Name of Contractor (9)						
Colden Corporation	1		1.00.		GREENWOOD ABA	TEME	NT CONS	ULTAN	TS, IN	<b>)</b> .	
Street Address					Street Address			-			
28 Washington Street					268 MAIN STREET						
City, State, Zip Code					City State, ZipCode						
Ballston Spa, NY 120	20				Butler, NJ 07405						
Project Manager for Monitoring	Firm	Telephone I	Vumber		Telephone Number		177				
Jim Miades		347.435			973-492-0477		008	nse Numb	<u>er</u>		
Scheduled Start Date (10)				on Date (11)	Name of OSHA Monitor		1 000	240			
February 1, 2013		February	/ 11. 2		EMSL inc.						
Occupancy Status During Ab	atement (	Check only o	ne)		Street Address						
Facility Closed/Vacate Abatement Performed	d During E	ntire Period	of Abate	ment rs -	1056 Stelton Road		4,				1.
Describe					City, State, Zip Code						
Other - Describe: Wee	kends- Fr	iday-Saturd	ay-Sund	day-	Piscataway, NJ 088	854					
Phase 1- October 19,	2012- Oct	ober 22, 201	2- Comp	pleted	E S						
Phase 2C- February 8	, 2013 – F	ebruary 11,	2013								
Phase 3b- February 1, Source of Work (Check all that	2013 - Fe	ebruary 11,	2013								
Source of Work (Check all that	apply)							W. Commission			
. 2 - 5 0.15						x Full (	Containmen	t with Ne	gative P	essure	g = j
≥ 3 sf or ≥ 3 lf				Renovation	1	Mini-	Enclosure				
$\square \ge 160 \text{ sf or } \ge 26$	50			Demolition		Glove	bag Proced	ure			
Location of Asharts O. J. L.	1					Non-E	xempted (*)	and Non	-Friable	Proced	ure
Location of Asbestos-Containin Material (ACM) in Facility (13)	•	cation Normal		Description of As	bestos Containing Material	A	mount		nent Type		
material (Now) in Facility (13)	Staff?	y by Maint./Cu	istodiai	VAT, or other mis	nal systems insulation, surfac	200	Specify SF	Remove	Repair	Encon I	Englace
	YES		NA	VAT, OF Other THIS	sceii.)	0	r LF)	Kemoye	Repail	Ciicap i	riciose
Chool 4th Flore							79.1				
Cheel 4th Floor			ner.			-			T	1	
Neuro/Ortho Support Areas			E	VAT & Mastic		1	,300 sf	X			
Phases 2b,2c & 3b						- 1					
Name of Box 1Maste Harts											
Name of Reg. Waste Hauler See Hauler Below # 1 & 2		NJDEP Was See Below		r ID#	Cubic Yards of Waste:	30		e of Regis		ndfill	
Hauler #1) Greenwood A	batemen	t Consulta	nts. Inc	Butler N.I.O	7405		al Date		City, Stat	0	
NJ DEP # 125	61		,		. 100		uary 11,		Route 2,		**
Hauler #2) Newark Cartin		Vowerly NI I	04500	NI DED # 10551		2013	, II,		Bridgepo		a a
Completed by (Print or Type)			04309,	NJ DEF # 19551	To:	2013			304-842-		
Marin Graure		tle	20 150		Signature		Date				
Mariji Graule		ENIOR PI		, l	Marin Graure	,	Jan	uary 3,	2013	-	
		IANAGER			7.2.00					35	
AC # 2012-355- Note: 2	& 3rd Ph	956					•		105-		

State of New Jersey - Notification of Asbestos Abatement

			(Pur	suant to <u>N.J.A.</u>	<u>C</u> . 8:60-7 and 12:120-	7)	2013	,_	3	٠.		
Date of Notification (1)  October	2 2012				Name of Building Own	ner/Oper	ator (2	(B)		1/2	`^	
Agencies Notified	3, 2012				The Valley Hosp	oital	57	/	3.	3.	9 .	
⊠ EPA		Notificatio		tification	Street Address 223 North Van D	ien Av	enije		17/	رم.		
□ DCA	į.				City, State, Zip Code	.011717	Citae	45 . 15		1.00		
x DOL		Emer	ency (	including	Ridgewood, NJ	0745	0.27	26		( ° 0		
⊠ DEP			cation)		Name of Contact	0743	0-47.		17.			
x DOH			/	**	William Stasiak			I I PIE	nnone	Numbe	ī	
Name of Facility Where Abate	mant in T	Li- DI (0)		FACILITY II	NFORMATION						-	
The Valley Hospital	ment is Ta	king Place (3)	-	**	Type of Facility (4)					+		
Cheel 4th Floor - Neu	ro/Orth	o Support	Areas		School (K-12) Subchapter 8 (other t	h K 40		92				
Street Address			711040						SUE	2.2		
223 North Van Dien A	venue				Sq. Feet: Unknow	n #o	of Floo	ors: 4	s, home <u>Bldg.</u>	es, etc.) <u>Age:</u>	50+ ye	ars
City (5) Ridgewood	County (6	-	Count (State	y Code (7) Use Only)	Current Use (prior if be	eing dem	olished	d): Ho	spital			
Nome of Marita in Einstein					3.24							
Name of Monitoring Firm Hired	by Bldg.	Owner (8)	ASCM	1 No.	Name of Contractor (9)							
Colden Corporation	l		1 1		GREENWOOD AB	ATEME	ENT C	ONSU	JLTAI	NTS, I	NC.	
Street Address					Street Address							
28 Washington Street					268 MAIN STREET							
City. State, Zip Code Ballston Spa, NY 120	20				City State, ZipCode							
Project Manager for Monitoring	ZU Firm	Tolophone	di ana b		Butler, NJ 07405	. 1			12			
Jim Miades	rum	Telephone 1 347.435	.3561		<u>Telephone Number</u> 973-492-0477			Licen 0084	se Num	nber		
Scheduled Start Date (10) October 19, 2012		Scheduled (	31. 20	on Date (11)	Name of OSHA Monitor EMSL inc.	100		1 000				
Occupancy Status During Ab	atement (	Check only o	ne)		Street Address		-		-			
Facility Closed/Vacated Abatement Performed	d During E Outside o	ntire Period f Normal Fac	of Abate	ment rs -	1056 Stelton Road	1						
Describe .			- 1		City, State, Zip Code				1	- 11		
Other – Describe: Wee Phase 1- October 19, 2 Phase 2- TBD Phase 3- TBD	kenas- Fi 2012- Oct	ober 22, 201	ay-Sund 2	lay-	Piscataway, NJ 08	8854						
Source of Work (Check all that	apply)						, i				- 1	
						x Full	Conta	inment	with Na	egativo	Pressur	
$\geq 3 \text{ sf or } \geq 3 \text{ lf}$		(9		Renovation			i-Enclo		AAILII I AG	cyalive	riessui	*
□≥ 160 sf or ≥ 26	0			Demolition		Glove	ebag F	rocedu	re			
Location of Asbestos-Containing	n I Is I o	cation Normal	h. Hood	Description of A			Exemp				le Proce	dure
Material (ACM) in Facility (13)		y by Maint./Cu	istodial	(ACM) (i.e. them	bestos Containing Material nal systems insulation, surfa	cina	Amoun (Specif		Abate	ment Ty	<u>rpe</u>	
	Staff	? (12)		VAT, or other mis	scell.)		or LF)	y or	Remov	e Repa	ir Encap	Enclose
	YES	NO	NA									
Cheel 4 <sup>th</sup> Floor			17									-
Neuro/Ortho Support Areas			X	VAT & Mastic			1,300	sf	X			
No. of D. W										_		$\vdash$
Name of Reg. Waste Hauler See Hauler Below # 1 & 2		NJDEP Wast See Below	e Hauler	ID#	Cubic Yards of Waste:	30				istered L Landfil		
Hauler #1) Greenwood Al	oatemen	t Consultar	nts, Inc	Butler: N.I O	7405		sal Dat		OWINI	City, St		-
NJ DEP # 1256	31				way and the search of			22, 20	12	Route 2	2, Box 68	
Hauler #2) Newark Cartin	g, Inc l	Newark, NJ	04509, 1	NJ DEP # 19551		1.0				Bridger 304-84	ort, WV	
Completed by (Print or Type)	Ti	tle	111111111111111111111111111111111111111		Signature	Contract Con		Date		307-04	-2/04	
Marin Graure		ENIOR PR		Т	Marin Graure	e			ober	3, 201	2	1
CAC # 2012 255	IA	IANAGER		1	700000							7

CK \$ 25065

Date of Notification (1)				l Man	f D.::145	0 10	(0)		3CD.			11.
	2/11/13			Nam	ie of Buildir	ng Owner/Operato	David Blacky	vell	15 6 	1,3		1
Agencies Notified	Type Notification	on		Stre	et Address			€ /	7		PH	_
EPA DEED	☐ Initial				4	The second secon	10 Madisn St	reet '	A 4		- 10 	<u>ج:</u> ہے
DEP  DOL	Amended Amendmen	#		City,	State, Zip				17	1/3	-	
<b>⊠</b> DOH	<b>Emergency</b>	(includir	ng				rinceton, NJ 0		-	W	11/1	7/
DCA	justification Cancellation			Nam	e of Conta		11	Telephone Nur	nber			
						vid Blackwe	11					
N				FA	CILITY IN	FORMATION		E4				
Name of Facility Where		ang Plac esiden					Type of Facility	VD (4)				ne or rec
Street Address	K	Siden	<u></u>				School (K-12	2) 8 (Other than K-1	2)			
	10 Ma	dison	Stree	t			Other (i.e., p	rivate & commerc	cial bu	lding	3,	
City (5)	Princeto	on, NJ	085	42			Square Feet 2500	# of Floors	E	Bldg. 7	Age 00	
County (6)				Cou		7) (STATE		ior if being demol	ished)		-	_
	Mercer			USI	E ONLY)		200	Residence	,			
Name of Monitoring Firm		Owner		ASCN	1 No.		ment Contractor (9)					
(8)	MECS						vens Environn	nental Service	es, I	nc.		
Street Address	DO D	41	18			Street Address			1 000			
0	PO Box 3	41						ox 322		62		
City, State, Zip Code	rosswicks, N.	10851	5			City, State, Zip (		NI 00501				
Project Manager for Mo		0031		ephone	No	Tolophone No	Allelitowi	ı, NJ 08501				_
50	eisgarber Jr.				98-4070	Telephone No.	59-9688	License No.	0049	2		
Start Date (10)		eduled (				Name of OSHA			3049	3		
2/13/13	0011		2/15/		uto (11)	Name of CortA		ECS	4			
Occupancy Status Durin	ng Abatement (Ch			15		Street Address	1711		_		_	
☐ Facility Closed/Vaca				ment			PO B	ox 341				
☐ Abatement Performe     Other - Describe:			ty Hou	rs		City, State, Zip C		s, NJ 08515				
Scope of Work (Check a						<del></del>	CIOSSWICK	8, NJ 00313			_	_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	,		enovat emolitio			☐ Mini-En	ntainment with Neg closure ag Procedure empted (*) and Nor		re			
			Locatio					II g la	P	bate		1.0
Location	of		ormally Solel			Description of	f	**		Тур	е	
Asbestos-Containing N		Mai	ntenan ustodia	ce/		os Containing Mat	terial (ACM)	Amount	٦	R	т	ш
IN Facility			Staff?		(I.e.,	thermal systems i surfacing, VAT,		(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)			(12)			other miscellaned	ous)		val	7	sul	sure
		Yes	No	N/A						i i	ate	
Basemo	ent			×	The	ermal Pipe Ins	sulation	165 lf	×			
			7			2-1						
Name of Registered Was	eta Haular			JDEP \	Masta	Cubic Yards	I Name of Basis					
Stevens Environr		ac Inc	1.1	auler ID	No.	of Waste	Name of Regist					
City, State	nemai Service	es inc.		182	292	2 CU	<del>                                    </del>	T.R.R.F., Ir	ic.			_
Oity, State	Allentown,	NI				Disposal Date	City, State	T.11-4-	D 4			
Completed By	Attentown,		-			2/15/13   Signatural	TY /	Tullytown,	A	_	_	11
Mahlon E. Ste		-	oject	Man	ager	Signatur		Date	2/11	/13		
CD 44			1000				1			. 4.0		

Date of Notification (1)				Nom	a of Buildin	ng Owner/Operator	(3)	()00				
	08	13			Thompso		2013/	EB 13 PM 2:	0		è	
Agencies Notified	Type Notification	on			et Address		#	-0/3 PM				2
☐ EPA	✓ Initial			480	Doremus	Avenue		' 17 2:	an.			
⊠ DOLWD '	Amended			Annual Contract	State, Zip			/C_//	.0	4	-	
□ DHSS     □	Amendment		_				- 6	CENTER OF	.,			
DCA (NJAC 5:23-8)	Emergency justification)		ng		Rock, N. e of Conta			Telephone Nun	l.			
(110/10/3.25-0)	Cancellation							Telephone Mun	ibei			
, , , , , , , , , , , , , , , , , , ,	LED GALLOGIACIO	-			Thompso					L		
None of Facility 118-				F/	CILITY	NFORMATION	12.7					
Name of Facility Where A	spatement is Tak	ing Plac	e (3)				Type of Facilit	781. A		11	222.00	
Private house							School (K-					
Street Address							Other (i.e.,	r 8 (Other than K-1 ; private and comme	z) rcial h	ouildir	ias	
480 Doremus Avenue							homes, etc	c.)	. O.u.	zanan	90,	
City (5)							Square Feet	# of Floors	T	3ldg.	Age	
Glen Rock, NJ 07452					10.							
County (6)				Cou	nty Code (7)	(STATE USE ONLY)	Current Use (	Prior if being demoli	shed)		-	
Bergen												
Name of Monitoring Firm	Hired by Building	g Owner	(8)	ASCN	No.	Name of Abatem	ent Contractor (	9)				
						Gr Tech LLC						
Street Address						Street Address				-		
						576 Valley Rd	#283					
City, State, Zip Code						City, State, Zip C						
						Wayne, NJ 074						
Project Manager for Monit	toring Firm		Tel	ephone	No.	Telephone No.	70	License No.	-			_
						973-638-1777						
Start Date (10)	Sch	eduled (	Comple	etion Da	ate (11)	Name of OSHA	Annitor	01127				
02 / 17 /	13				13							÷
Occupancy Status During	Abatement (Che					Envirovision Co	onsultants,Inc					
□ Facility Closed/Vacate	d Durina Entire E	Period of	f Abate	ment		Street Address						
Abatement Performed	Outside of Norm	al Facili	tv Hou	rs - De	scribe	20-21 Wagaraw	Road, Bldg .#	34A	21.00			
Time of Abatement:		PM/	PM		_AM	City, State, Zip C						
Scope of Work (Check all	that apply)					Fair Lawn, NJ 0						
	sidt appiy)					Full Con	and decontam	ination egative Pressure				31.03
>3 sf or >3 If 2 160 sf or 2260 If			enovat			☐ Mini-End	losure	egative Pressure				
		∐ D∈	emoliti	on			g Procedure	x				
			s Loca	ion	T	☐ Non-Exe	mpted (*) and N	on-Friable Procedu	re	-		
Location o	f		Norma			D			At	atem	ent T	уре
Asbestos-Containing M			ed Sole		Asbe	Description o stos Containing Ma		Amount	\Z	ZD.	四	m
TO BE ABAT IN Facility			aintena todial	William Co.	(i.e	., thermal systems i	nsulation,	(Specify	J. M.	Repair	cap	Iclo
(13)		000	(12)	Otali i		surfacing, VAT,		SIF or LF)	Remova	=	Encapsulate	Enclosure
N.57.E		Yes	No	N/A		other miscellane	ous)		-		ate	Φ.
		163	INO						+			
asement				$\boxtimes$	Pipe insu	lation		90 LF	X			
									П	П		
		TIT	П						분			
		1								Ш	Ш	Ш
Nome of D			Ш				-					
Name of Registered Waste	Hauler		NJE	EP Waste	Hauler ID No.	Cubic Yards of Waste	Name of Regi	stered Landfill	-			
r Tech LLC	*6		0	03378	5	TBD	T.R.R.F. Inc					
City, State	ATE A					Disposal Date	City, State		- Allenda	mann-2,000		
/ayne, NJ 07470					-	TBD						
Completed By (Print or Typ	e) Titl	e				Signature	Tullytown, P.	A Dat				-
.Jevtic	0,,	ner				1//	he Ven					4.
SB-41	Ow	TICI				flew	re Nen	02/0	08/20	13		

Check# 1566

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

			1120-11-11-11			AC 8.60-7 and 12	2.1	20-7)		3	Check	# 70	18		
Date of Notification (1) 2/7/13						Operator (2)		000	•						
Agencies Notified Type of Notifica			t Address		u or	Education		000	=/1	TEN					and the
[ ] EPA [x] Initial	2		/alley F		4	,		2013 FEB 13	י הי	Zan Edil					
[ ] DEP Notification		City, S	State, Zip	Code	)				PA	2:68	_				_
[] Amended	- 1	Mon	tclair, N	<b>VJ</b> 0	7042	2		<b>在</b> 自动情况下点。	9.						
[X] DOH Notification	1	Vame	of Conta	ct				C. I Felen	ione N	lumber				20	
[ ] DCA [ ] Cancellatio	1 1 1 1 1 1 1 1		Sapon	-				- reiebi	ione iv	umber	-				
		,			II ITV	INFORMATION	-	T							
Name of Facility Where Abatement is Ta	king Pla	ace (	3)	TAU	ILIT	INFORMATION	Т	Type of Facility (4)							_
Northeast School		,	-,					[x] School (K-1	2)						
Street Address		- 17 Line					4	Subchapter Other (i.e. p	8 (Otherivate a	er than K- and comm	12) ercial l	buildi	ngs		
603 Grove St.								homes, etc.	)						
City (5)	0	(0)			_				of Flo	oors		g. Ag	е		
Montclair	County					ty Code (7) TE USE ONLY)	+	80000 Current Use (Prior if I	eina d	lemolished	~ 7	0			
					(			educational	Jenig u	iemonsnec	''				
Name of Monitoring Firm Hired by Buildi Detail Associates, Inc	ng Own	er	ASCM N	lo.				nt Contractor (9)							
Street Address			00		4 1	Street Address	JU	ipiter Environme	ntal	Service	s, In	C.			
300 Grand Ave.							3	Lynn Court							
City, State, Zip Code					1 F	City, State, Zip C									_
Englewood, NJ 07631								incoln Park, NJ	0703	5					
Project Manager for Monitoring Firm			e Number			Telephone Numl			1	Lice	nse Nu	ımbei			
Stephen J. Scheduled Start Date (10) Sche			9-6708		4 1			73-709-0200				00	08	52	
2/16/13		)18tion 131/	n Date (11	1)	+1	Name of OSHA	0.855.0	4431313131	4-11	-1					
Occupancy Status During Abatement (C					+	Street Address	J	& S Environmer	itai L	aporato	ries,	LLC	<i>-</i>		_
[] Facility Closed/Vacated During	Entire P	eriod	of Abater	ment		4.	23	33 Route 22 W						1	
[] Abatement Performed Outside on Describe:	f Norma	I Fac	ility Hours	3 –	1 +	City, State, Zip C			-						
[x] Other – Describe: partially vaca	ted							nion, NJ 07083				-			
Scope of Work (Check all that apply)				-	11							-			
				_				[] Full Conta			ative F	ressi	ıre		
[ ] Demolition [x] ≥3 sf or ≥3 lf			[]	Ren	ovatio	n		[x] Mini – En		Constant of the second					
[] ≥160 sf or ≥260 lf								[] Non – Fri							
	THE R. P. LEWIS CO., LANSING, MICH. 49, 120, 120, 120, 120, 120, 120, 120, 120	Loca	2000 100 7 100 7 100 100									Aba	ater	ner	it
Location of	1 2	mally Solely	Used			Descr Asbestos		tion of			0000	Тур	_		
Asbestos – Containing			ice/Cus			Materia				Amou (Spec	000000	R	R	E N	E
Material (ACM)	todia	al Sta	ff (12)			(i.e., thern	ma	l systems		SF or		M	P	C	C
TO BE ABATED In Facility	-		(T			insulation, so or other mi	urf	facing, VAT,	- "			0	Α	A	L
(13)	Yes	No	N/A			or other mi	130	charicous)				V	R	P	0
Tunnel		Х		Dine		dation and alone				0515		L	1	U	U
various	1	X	1 1			lation and clear	nu	р	-	35 LF 120 LF		-	X		
				1 ipc	5 1115U	ilation				120 LF		$\vdash$	+		_
					-		-					$\vdash$	+	+	
Name of Registered Waste Hauler			Waste	1.0		Yards	T	Name of Registered I	andfill	Me -					
Jupiter Environmental Service	s Ha	uler I 04782	D No.	-	Of Wa	aste	1	Minerva Landfil	=			95			
City, State		-10/		-	Disno	sal Date	+	City, State						_	
Lincoln Park, NJ						8/13		Waynesburg, O	Н						
Completed By (Print or Type)	Title			1A		Signature /	A	/ 2		Dat	е				
Pane Repic	Gene	eral	Manag	ger		1	)	- Ce		10.000	/13				
						// -	0		1						

Note: Phased project. First phase is scheduled to start on 2/16/13 and be completed on/by 2/19/13. It involves repair and cleanup of 35 LF of pipe insulation at tunnel/crawlspace. Amendments will be sent for other phases.



Date of Notification (1) 2/7/2013	***************************************				of Building				ON!		13/2	À .		1	`^.
	Notification			Street A	Address		**	ATIC		950			P	,	- 60
DEP E N	nitial Amended	4		City, Sta	RACE Sate, Zip C	ode	:1			~ <			- '	ج.	ক
	Amendment Emergency ( ustification)		9		R, NJ C					Telonh		974	4	7	
DCA C	Cancellation				AM MU		ION			. —			<b>_</b>		
Name of Facility Where Abatem DOVER HIGH SCHOOL	ent is Takin	g Place (	(3)	140	ICITI IINI	OKWAT	ION	-	of Facility	**************************************	-	B		700	6
Street Address 100 GRACE STREET					. 52.7				Subchapter	8 (Other the			ldings	, hom	ies,
City (5) DOVER	2 0 53					12			re Feet	# of Flo	ors	E	3ldg.	Age	
County (6) MORRIS					Code (7) USE ONLY	)		Curre	ent Use (Pri	or if being d	emolisi	ned)	111.5		1
Name of Monitoring Firm Hired I KARL & ASSOCIATES, II		Owner (8	) .	ASC	M No.		100		tement Cor	ntractor (9) CONTRA	ACTIN	IG			
Street Address 20 LAUCK ROAD							Street 250		ss HERFOR	D BLVD.					U.E.
City, State, Zip Code MOHNTON, PA 19540	500						0.70		ip Code , NJ 0701	14					
Project Manager for Monitoring I MICHAEL KRISHER	Firm	6)		Telepho 800-52	ne No. 27-5581		Teleph 973-			10000	ense N 494	0.			
Start Date (10) 1/14/2013		Schedu 4/30/2		npletion	Date (11)				HA Monitor 5 (9) ABO	VE					
Occupancy Status During Abate Facility Closed/Vacated Du Abatement Performed Outs Other – Describe:	ring Entire P	eriod of	Abaten	nent			Street A		ip Code			, t			
Scope of Work (Check All That A	Apply)								1						-
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demolit				×	Mir Glo	ni-Enclosure vebag Prod					9	
		110	Locati	20		6.3		, ,,,,,,	Zxempte	Y June 140	TTHE		Abat	and the same of	t
Location of Asbestos-Containing Materia TO BE ABATED In Facility (13)	il (ACM)	Use Ma	Normal ed Sole aintena todial S (12)	ly by nce/	Asbes (i.e.	tos Cont thermal surfac	scription aining M systems cing, VAT niscelland	aterial insula Γ, or	(ACM)	Amour (Speci SF or L	fy	Removal	Repair	Encapsulate	Enclosure
WINDOWS EVED	IOD	Yes	No	N/A	10	//NDO	A/ O A I I	1 12151		2 2 4 2 4				te	
WINDOWS - EXTER	IUR	1 - 10	X		- V\	INDOV	N CAU	LKIN	G	3,810 \$	SF	X			
Telego za inco	Q :		- 10		11 14										
Name of Registered Waste Haule	or .	1	- N	JDEP W	acto	Cubic '	Varde		Name of I	Registered L	ondfill				
TWO BROTHERS CONTR			Н	auler ID 8743		of Was				E MANAG		NT G	.R.C	.W.S	S.
City, State CLIFTON, NJ		1		22.		Dispos 4/30/2	al Date		City, State	SVILLE, I	PA	10	11.2		
Completed by VIVECA RAMOS	1 11	Title	RETA	ARY .		Si	ighature		Pa	201 -2	Dat 2/7	e 7/201	3		П

Date of Notification (1) 1/10/2013					f Building R BOA				N 20/3	Err	13 PM	121	)	*	
Agencies Notified	Type Notification	×		Street A	ddress	STREET	Γ		A	CB.	13 PM	2			
EPA DEP DOL	Initial Amended Amendment		i		te, Zip Co R, NJ 0		ŧ		E. L	10 k	Op.	$\leq \hat{v}_{i}$	5		
☑ DOH DCA	Emergency ( justification) Cancellation				f Contact AM MUI	LINS		1		Te	léphone N	umber		V	
				FACI	LITY INF	ORMATIO	ON								
Name of Facility Where DOVER HIGH SC		g Place (3)						×	of Facility (4 School (K-1	2)					
Street Address 100 GRACE STRE	EET						VI.		Subchapter Other (i.e. p etc.)				ldings	, hom	es,
City (5) DOVER			8						re Feet	# 0	f Floors		Bldg.	Age	
County (6) MORRIS					Code (7) USE ONLY	)		Curre	ent Use (Pric	or if be	ing demoli	shed)	21. 21.0	3 7	
Name of Monitoring Fir KARL & ASSOCIA		Owner (8)		ASCN	I No.				atement Con		1	NG			
Street Address 20 LAUCK ROAD							Street 250		ss HERFORI	D BL	VD.		oce Plance		
City, State, Zip Code MOHNTON, PA 19	9540				1 1 1		City, S	tate, Z	ip Code , NJ 0701			<u> </u>	(a)		
Project Manager for Mc	onitoring Firm			Telepho	ne No. 27-5581		Teleph 973-	one N	0.	•	License 00494			T a	
Start Date (10) 1/14/2013		Scheduled 2/11/20					Name	of OSI	HA Monitor S (9) ABO	\/E	00434				
Occupancy Status Duri	na Abatamant (Chag						Street			<u> </u>				9.	
Facility Closed/Va	cated During Entire F med Outside of Norm	Period of Al	baten						ip Code			ant than the art flow			
Scope of Work (Check	All That Apply)									172-102					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Ан тнасарруу		enova emoli				X	Min	Il Containme ni-Enclosure ovebag Proc n-Exempted	edure	-			re	
			.ocat			8							Abat	emen ype	t
Locatic Asbestos-Containin <u>TO BE Al</u> In Fac (13	g Material (ACM) BATED cility	Used Mair	Sole Stena	ely by		tos Conta thermal:	systems ing, VA	lateria insula T, or		(3	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
WINDOWS -	EXTERIOR	Yes	No X	N/A	W	/INDOV	V CAU	ILKIN	IG .	3.8	310 SF	- x			
Willbotto	EXTERIOR	1			K 114 1						7	1			
				10-11-11-11			224	6							
					7 72					5F //	Te si				
Name of Registered Wa	aste Hauler	14.5%	10.00	IJDEP W		Cubic \ of Was			Name of F	Registe	ered Landf	ill	94, 1	-	
TWO BROTHERS	CONTRACTING		125	8743	NO.	40	le		WASTE	MA	NAGEM	ENT (	3.R.0	).W.	S.
City, State CLIFTON, NJ						Dispos 2/11/2		ā,	City, State		LE, PA	n dee		1	
Completed by VIVECA RAMOS		Title SECF	RETA	ARY		Si	ghature	40	Ra	m	100	ate /10/2	013		

dk, 7651

Date of Notification (1) 2/7/2013						ng Owner/Op		(2) O OF EDUC	ATION	A <sup>A</sup>		7	20		
	Type Notification	3		Street	Address			7, 2000		+	G.	<i>j</i> .	-	, ,	20.
EPA DEP DOL	Initial Amended Amendment			City, St	ate, Zip (		- 1				4	1		e e	<del>/ ?</del>
DOH DCA	Emergency justification) Cancellation		g	Name o	of Contac				Tel	ephone	e Numb	er	18	319	0/
			4.50	FAC	ILITY IN	FORMATIO	N					_			
Name of Facility Where Ab	atement is Takin MENTARY SO	g Place CHOOL	(3)		3			Type of Facility School (K	(-12)						
Street Address 100 DORCHESTER	ROAD							Subchapt Other (i.e etc.)	er 8 (Othe . private 8	er than & comn	K-12) nercial l	ouil	dings	, hon	nes,
City (5) WOODCLIFF LAKE					107			Square Feet	# of	Floors	3	E	3ldg.	Age	
County (6) BERGEN					Code (7) USE ONL		_	Current Use (F	rior if bei	ng den	nolished	)			
Name of Monitoring Firm H ENVIRONMENTAL C			)	ASC	M No.			f Abatement C BROTHER			TING				
Street Address 120 NORTH WARRE	N STREET							Address RUTHERFO	RD BLV	/D.				*	
City, State, Zip Code TRENTON, NJ 08608		100						ate, Zip Code FON, NJ 070	014				1		
Project Manager for Monito RYAN BROADWATE				Telepho 609-39	ne No. 92-4200		Telepho		1 0	Licen:	se No.				
Start Date (10) 2/18/2013		Schedul 4/30/2		mpletion	Date (11	0	Name o	f OSHA Monito				-	_		
Occupancy Status During A	batement (Check	Only O	ne)				Street A			,					
Facility Closed/Vacate Abatement Performed Other – Describe:	d During Entire P Outside of Norm	eriod of al Facilit	Abater y Hour	ment s		C	City, Sta	ite, Zip Code		•				-	
Scope of Work (Check All T	hat Apply)														
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	пат Арріу)	COMMON .	Renova Demoli				×	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure					0	
		Is	Locat	ion			377	THE EXOTIPE	/ / dire	140111	TIGDIC I		anarologia.	emen	t
Location of		1	Vorma	lly		Descr	ription o	f				_	Ту	ре	
Asbestos-Containing Ma TO BE ABATE In Facility (13)		Ma Cus	d Sole intena todial s (12)	nce/ Staff?	Asbes (i.e	stos Contair thermal sy surfacin other mis	ning Ma stems i g, VAT,	terial (ACM) nsulation, or	(Sp	nount pecify or LF)	Notice	Domonia	Repair	Encapsulate	Enclosure
EVTERIOR		Yes	No	N/A										Ф	
EXTERIOR	<		X			DOOR C				LF	X				
						TRANSIT			300	SF	Х				
					N	VINDOW			1,60	00 LF	Х				
Name of Registered Waste H	daulor		1	IDES			AZING								
TWO BROTHERS COI			Н	JDEP Wa auler ID I 8743		Cubic Ya of Waste 40			Registere E MAN			G.	R.O	.W.S	3.
City, State CLIFTON, NJ			1			Disposal 4/30/20/		City, Sta	le ISVILLI	 Е. РА					
Completed by VIVECA RAMOS		Title SEC	RETA	ARY		Sign	iature Live		nen		Date 2/7/20	013	3		

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

ype Notification [X]Initial Notificati		Jane H					. 1 .			
[X]Initial				11	20	712-	1 /1	· Po		
	on S	450 Fo		Dead	- KU	HIFEB 13		-		12
MOLIFICATI	07			y Road	. A	- 13	PMO	٠		
2 2 2 3 3 3 3	on c	ity, State				Regard Action		' দে		
[]Amended Notificati	on	Ridgew	ood,	NJ,07450-0	07452 👢	& Line		25		
		ame of Cor	tact		Telepho	one Number	1413	<del>8/.</del> -		
[ ]EMERGENCY		Jane H	arli	n			-11			
[ ]Cancellation	n				-					
				INFORMATION				8.1	7	
Abatement is	Taking	Place (3	)		Type of Faci	lity (4)				
					[ ]School	(K-12)				
				*						
				= 12	Square Feet					
Cou	nty (6	) Essex			2500	2		85	_	
			(ST	ATE USE ONLY)	Current Use	(Prior if be	eing d	emol:	ished	i)
				9 41		٧ , .				
m hired by Bui	lding	ASCM No.		I was a second s		STA 2011				
				AZTECH M	anagement	f, Inc.				
				Street Address	3	-				
				86 Chris	topher St					
				City, State, 2	Zip Code					
				Montclai	r, NJ 070	142				
nitoring Firm	Tele	phone Numb	er	Telephone Numb	per		Licens	e Nu	nber	
	N/A			(973) 744	-8800		003	71		
10) Sched. (	Complet	tion Date	(11)	Name of OSHA N	fonitor					_
2	-19-	2013		N/A				1		
Month	Day	Year Year								
/Vacated Durin	g Enti	ny one) re Period		Street Address	•					
rmed Outside o e:«OffHours De	f Norm	al Facilii »	ty	City, State, Z	ip Code					
e: «Other Occup	ancy D	escript»								
ll that apply)										-
16	[2]					ith Negative	Pres	sure		
>260 lf										
	7					ıre				
		Is ation		Donninki			Ah	atem	_	-
ning		mally sed		Description Asbestos-Cont		Amount	R		E	E N
	So	lely Main-		Material (A		(Specify	, E	E	CA	C
M)		ance/		(i.e., thermal		SF or	O	A	PS	0
<u>D</u>		odial I		ulation, surfa or other miscel	[설명명] (1980년 1985년 - 1980년 1987년 1987년 - 1987년 1987년 - 1987년 1987년 1987년 1987년 1987년 1987년 1987년 1987년 1987년 1 - 1987년 1987년 - 1987년 1987	LF)	A	L	U	U
72.5	Cust	£ (12)					L	S   1	L	R
7	Cust Staf	f (12) No N/A						-	_	100
<u>D</u>	Cust Staf	£ (12)		E INSULATI	ON	35 LF	х			
7	Cust Staf	f (12) No N/A		E INSULATI	ON	35 LF	x	1		
SPACE	Cust Staf	f (12) No N/A		E INSULATI	CON	35 LF	Х			
SPACE	Cust Staf: Yes 1	f (12) No N/A X P Waste	PIP	ic Yards	Name of Regi	stered Land				
SPACE	Cust Staf: Yes 1	f (12) No N/A X P Waste er ID No.	PIP			stered Land				
SPACE  SPACE  See Hauler ENT, INC.	Cust Staf: Yes 1	f (12) No N/A X P Waste er ID No.	PIP.	ic Yards	Name of Regi	stered Land				
SPACE	Cust Staf: Yes 1	f (12) No N/A X P Waste er ID No.	PIP Cub of	ic Yards Waste 1.5	Name of Regi	stered Land	fill	67		
SPACE  SPACE  Se Hauler ENT, INC.	Cust Staf: Yes 1	f (12) No N/A X P Waste er ID No.	PIP Cub of	ic Yards Waste 1.5 posal Date -20-2013	Name of Regi G.R.O.W.	stered Land	fill	67		
SPACE  SPACE  See Hauler ENT, INC.	Cust Staf: Yes 1	P Waste er ID No.	PIP Cub of	ic Yards Waste 1.5 posal Date	Name of Regi G.R.O.W.	stered Land	fill 190 Date			
1 1 1	m hired by Bui	County (6  BERG  m hired by Building  nitoring Firm Telep  N/A  10) Sched. Complet  2-19-  Month Day  g Abatement (Check or  /Vacated During Enti  rmed Outside of Norm e: «OffHours Descript e: «Other Occupancy D  1 that apply)  If [X]F	County (6) Essex  BERGEN  m hired by Building ASCM No.  mitoring Firm Telephone Number N/A  10) Sched. Completion Date 2-19-2013  Month Day Year gabatement (Check only one)  /Vacated During Entire Period research of Normal Facilities es (OffHours Descript)  es (Other Occupancy Descript)  1 that apply)  1 [X] Renovation	County (6) Essex County (5) EBERGEN  The hired by Building ASCM No.  Telephone Number N/A  County (6) Essex County (ST BERGEN)  The hired by Building ASCM No.  Telephone Number N/A  County (6) Essex County (ST BERGEN)  Telephone Number N/A  County (6) Essex County (ST BERGEN)  Telephone Number N/A  County (6) Essex County No.  It (ST BERGEN)  Telephone Number (11)  2-19-2013  Month Day Year (12)  Government (Check only one)  Abatement (Check only one)  Abatement (Check only one)  Telephone Number (11)  County (6) Essex County No.	County (6) Essex County Code (7) (STATE USE ONLY)  BERGEN  In hired by Building ASCM No.  Name of Abatem AZTECH M  Street Address 86 Chris  City, State, 1  Montclai  Telephone Number (973) 744  Name of OSHA N  (973) 744  Name of OSHA N  N/A  Street Address N/A  Street Address N/A  Street Address N/A  City, State, 2  City, State, 2	County (6) Essex   County Code (7)   [ ] Subcha [X] Other cial Square Feet 2500   Current Use    Mame of Abatement Contract AZTECH MANAGEMENT    Street Address 86 Christopher Street Address 86 Christopher Street Address    Initoring Firm   Telephone Number   N/A   City, State, Zip Code   Montclair, NJ 070    Initoring Firm   Telephone Number   (973) 744-8800    Initoring Firm   Telephone Number   (11)   Name of OSHA Monitor   (11)   (	Type of Facility (4)  [ ] School (K-12) [ ] Subchapter 8 (Oth [X] Other (i.e., priv. cial buildings,  Square Feet # of Flo 2500 2  Current Use (Prior if be  Name of Abatement Contractor (9)  AZTECH MANAGEMENT, Inc.  Street Address 86 Christopher St.  City, State, Zip Code Montclair, NJ 07042  Telephone Number (973) 744-8800  Name of OSHA Monitor  N/A  Street Address  Abatement (Check only one) /Vacated During Entire Period  rmed Outside of Normal Facility e: «OffHours Descript» e: «Other Occupancy Descript»  [ ] Full Containment with Negative   [ ] Mini-Enclosure	Abatement is Taking Place (3)    Type of Facility (4)	Abatement is Taking Place (3)    Type of Facility (4)     [ ]School (K-12)     [ ]Subchapter 8 (Other than K-12)     [ ]Subchapter 8 (Other than K	Type of Facility (4)  [ ] School (K-12) [ ] Subchapter 8 (Other than K-12) [ X] Other (i.e., private & commercial buildings, homes, etc.)  Square Feet # of Floors Bldg. Age 2500 2 85  Current Use (Prior if being demolished 2500 2 85  Current Use (Prior if demolished 2500 2 85  Current Use (Prior

Honor

Date of Notification (1	l) Amended Febres 5, 2013			ne of Building	Owner / Operator	r (2)	Check # 7394 (alre	Jauy,	7	<i></i>
Agencies Notified	Type Notification	n		et Address	-		168	12		
□EPA □DEP			580	Sylvan Avei	nue, Suite M-E		Check # 7394 (alre	J /	) A 2.	
DOL	Initial		City	, State & Zip	Code	*	· A	. 2,		Cop
⊠рон	Amende	ed ment # 1	Eng	lewood Cliff	fs, NJ 07632		· · · · · · · · · · · · · · · · · · ·	NO	TO	,
DCA	Cancella		Nam	ne of Contact			IT.	elepho	ne N	umbei
			2				(1)	cicpiic	ile iv	uiiibei
			F	ACILITY I	NFORMATION	-				
Name of Facility Whe US Post Office	re Abatement is T	Taking Place (3	)		Type of Fac					
Street Address		-				l (K-12) apter 8 (Other th	on K 12)			
360 Sylvan Avenue							commercial building	e ho	ma /	ata )
	3				Square Fee			ig. Age	_	eic.)
City (5)					30,0	00	1	.g. / igi	50	
Englewood Cliffs					Post Office	(Prior if being de	emolished)			
County (6) Bergen	402	County Co		ac y	T GST GITTLE	11.11				
Name of Monitoring Fi	irm Hired by Build			ASCM N	o. Name of Ab	atement Contrac	tor (9)			
Tiger Environmental	, Inc.				Synatech, I	nc.				
16 West Elizabeth Av	renue -				Street Addre					
City, State & Zip Code					City, State 8					
Linden, NJ 07036 Project Manager for M	onitoring Firm	1	Telephone	Number		larbor, NJ 0808				
Kelly Walton			908-862-4		Telephone N 609-296-691		License Num	ber 0081	7	
Scheduled Start Date		neduled Comple			Name of OS			0001		
February 15, 2 Occupancy Status Dur		heck only one	rch 1, 20	13	Synatech, In Street Addre					
Facility Close	d/Vacated During	Entire Period	of Abatem	ent	829 Radio F					
Abatement Pe	erformed Outside	of Normal Hou	ırs		City, State &	Zip Code				
Other – Desci					Little Egg H	arbor, NJ 0808	7			
	pied During Abate	ment								
Scope of Work (Check	all that apply)				-			(94)		
$\ge$ 3 sf or $\ge$ 50 lf		Г	Renova	tion		Full Containme	nt with Negative Press	ure		
☐ ≥160 sf or ≥260	If		Demoliti		F	Mini-Enclosure Glovebag Proce				
						The state of the s	edure l(*) and Non-Friable Pr	ocedu	ro	
	tion of	Is Loca		nally Used	Descrip	tion of	( ) and Holl Hable   I		_	ent Ty
Asbestos-Contain TO BE	ABATED		by Mainte todial Stat		Asbestos-C Material	ontaining (ACM)	Amount (Specify SF or LF)			2000
IN F	acility		1	1	(i.e., therma	l systems	SF OI LF)	$\vdash$		
(	13)				insulation, sur or other misc	facing, VAT		اي	20	E
			58		or other mise	elianeous)		Remova	Repair	ncapsulate
		Yes	No	N/A			- Keer	val	Ŧ	Encapsulate
irst Floor		- 10 2 002 54	-	x	Floor	Tiles	4.5 SF	X	-	-
		e e e e								- 1
ame of Registered W	note Unidea	NUDED		10.11.11	A Comment of the second					
and or negistered W	asie Haulef	NJDEP Hauler		Cubic Yar	ds of Waste	Name of Regis	tered Landfill			
ynatech, Inc.			7429	<1	ot i	Grows Landfil	1			
ity, State				Disposal D	Date	City, State				
ittle Egg Harbor, NJ			*	March 4,	2013	Morrisville, PA				
ompleted By	Titl	le	No.	Signature	· // :		Date			
iane Aloia	Ex	ecutive Admin	istrator	Win	in allora.	1	February 5 2013			

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) February 8, 2013		Name of Buildi	ng Owner/Op DeFo	erator (2) rest Dofffolition	THE P	,	) /	` -	 7
Agencies Notified  [ x ] EPA  [ ] DEP  [ x ] DOL  Type of Notification  [ ] Initial Noti  [ ] Amended  Amendment	Notification	Street Address  City, State, Zip	2406 Code	Herbertsville Roa	id ''' <: €	5	<del>)</del> [	<u>ي ر</u>	7,
[x] DOH [x] Emergency	(including	N CC		Pleasant, NJ 087	- 0				
[ ] DCA Justificatio		Name of Contact Dan			Telephone Number	r		=	
	FA	ACILITY INFOR	MATION						
Name of Facility Where Abatement is Taking Plac Residence	e (3)			Type of Facility (4	School (k-12)				
Street Address 2207 Middle Avenue				[x]	Subchapter 8 (of Other (i.e., prive homes, etc.)				aildings
City	inty (6)	County Code (7) (STATE USE ON		Square feet 800 sf	# of Floors	Blo	ig. Age		
Point Pleasant Oc	ean	(	.2.7	Current Use (Prior	The second secon	1)		60	
Name of Monitoring Firm Hired by Building Owner N/A	er (8)	ASCM No.	Name of	Reside Abatement Contracto Guard		Inc			
Street Address			Street Ac	ldress		-			
City, State, Zip Code		<del>,                                    </del>	City, Star	te, Zip Code	Route 9, Unit 6		755_1	1271	
Project Manager for Monitoring Firm	Telephone Numb	er	Telephon 732-349	ne Number	License 1 00624			12/1	
Scheduled Start Date (10) 2/11/13	Scheduled Comple 2/12/13	letion Date (11)		OSHA Monitor	L. Analytical				
Occupancy Status During Abatement (Check only of a Facility Closed/Vacated During Abatement Performed Outside Other - Describe	ng Entire Period of		Street Ad	ddress 1056 S te, Zip Code	telton Road way, New Jerso	ev 088	254		
Scope of Work (Check all that apply) $ \begin{bmatrix}       ] & >3 \text{ sf or } \ge 3 \text{ If} \\       [x] & \ge 160 \text{ sf or } \ge 260 \text{ If} $		vation olition	[ ] [ ] [ x ]	Full Containmen Mini-Enclosure Glovebag Proced	t with Negative Pro	essure			
		T			T	Abat	tement	Туре	
Asbestos-Containing Material (ACM)	Is Location Normally used Solely by ntenance/Custodia Staff (12) S NO N/A	l (i. in ot	Description sbestos-Cont Material (Ad e., thermal s sulation, sur VAT, or her miscellar	taining CM) ystems facing,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior	X	Asbestos sidi	ng		1000 sf	X		-	1.
							- 1		
			- 1						
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Haule		ards of Waste		red Landfill				
City, State Toms River, New Jersey		osal Date	City, Stat	T.R.R.F. e wn Aennsylvania					
Completed by (Print or Type) Title	ect Manager	Signature	class	Ja /		Date	2013		

		(Pu	rsuant t	o NJAC 8:60 an	a 12:120)		e Co ∫.	,0	2		1
Date of Notification (1) Q - 9 - 1	3	1	Name of	Building Owner/C	Operator (2		Care		5		1
Agencies Notified  Type Notification  EPA  DEP  Amended  Amendment			Street Ad	dress 	care to be the	Servoi	r Stree	f Col	2	3.00	
☐ Emergency (in pustification)	ncluding	1	Name of	Contact			Telephone Num	bor			
□ DCA □ Cancellation				Demo							9
Name of Facility Where Abatement is Taking	Place (3)		FACIL	ITY INFORMAT		Type of Facility (4	4)				
Old Water Pump Street Address (198 R Corner of Reserve	Blde	हेत्र)	Cal	houn St	nect )	School (K-1. Subchapter Other (i.e. p		) al build	lings,	home	es,
City (5) Trenton NJ	***	12				Square Feet	# of Floors	В	ldg. A	ge	
County (6) Mercer			County C	Code (7) ISE ONLY)	[		or if being demolish		le.		10.11.5
Name of Monitoring Firm Hired by Building C			ASCM	No.	Name o	f Abatement Con			٠,	In	
Street Address Roy 3	37		-11/10		Street A	ddress	337	166		294	
City, State, Zip Code	M.7	= (	09	5.33	City, Sta	ate, Zip Code	. 117	0	96	7.2	2
Project Manager for Monit ri gu Firm	146	11,000	Telephor			one No.	License N	3	10	u	
Start Date (10)	Schedule	d Com	pletion [		Name o	f OSHA Monitor		76	רנ	1	
Q - Q 1 - 13 Occupancy Status During Abatement (Chec			2-13		Street A	PC Tech	nologies			-	
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of A	; \batem	ent		P.City Sta	D. Box Cate, Zip Code	~	08	 53	3	
Scope of Work (Check All That Apply)		-					, , , , ,				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	<b>78</b> C 0	enovat emoliti			g = = =	Mini-Enclosure Glovebag Prod					
	Т.	1	_			. IVOII-Exemple	1 ( ) and reon-i nau	T	10.000	ement	t
Location of	1	Location Normall	у	Do	escription (	of			Т	ре	_
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Solel intenar todial S (12)	ice/	Asbestos Cor (i.e. therma surf	ntaining Ma	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	163		19//			CII CII	00000	-	-	-	-
Various Rooms		X		Floor	iles	9",9"	900 5	X			
					1 1 1 1 1						
Name of Registered Waste Hauler		1000	JDEP W		c Yards	Name of	Registered Landfill	1		1	
EPC Technologie	S	Н	l 70	00	osal Date		ste Manag		ent		
EPC Technologie City. State New Egypt Completed by Steve Schen Kerk	NJ			3-	99-13	3 Mon	misuille 1	PH			
Steve Schen Ken	Pittle	sid	ent		Signature Ste	w Sch	h Da	Z-	9-1	3	

Date of Notification (1)		7	Name o	of Building Owner/	Operator (2)						
2-4-1	3				arsi	cK	Builder		2	0	1
Agencies Notified Type Notification	nest entire of		Street A	Address			Asharing and a second second	FILEN ST	15	3170	<u> </u>
□ EPA □ Initial → Amended		4	City St	P.O.	DOX (	١٩_	er in the second	44	1	ed <sub>in the</sub>	
DOL Amendment			City, St		1500	TN	07760		.0	1	
DOH Emergency justification)		,		of Contact			Inlenhone A	umber		<u>س</u>	
□ DCA □ Cancellation			No	sah Kolo	ersick		. 4				
Name of Facility Where Abatement is Takin	g Place (	(3)	FAC	ILITY INFORMAT		e of Facility	-	- 30	tha .		.5
Single family			line			School (K-	0.3000	- 1	60		6
		222	-			Subchapte	er 8 (Other than K-	12)	**	9	
135 Hannisa	n t	AU E			100	Other (i.e. etc.)	private & commer	cial bui	ldings	, hom	es,
City (5)				7744	Squ	are Feet	# of Floors	1	Bldg.	Age	
County (6)	<i>l</i> V -			7 70 Y Code (7)					4	41	
Monamouth				USE ONLY)			family			, .	200
Name of Monitoring Firm Hired by Building (	Owner (8	)	ASC	M No.	Name of Al	patement Co	ontractor (9)	Va	2011	125	
EPC Technole	sie	5		MA	- CONTROL CONTROL	AND DESCRIPTION ASSESSMENT	chnole	aie	S	Ir	24
Street Address	성교				Street Addr	ess		J			
P.O. Box 3.	31				City, State,	<b>Box</b>	337				
New Equat	N.	7	08	533	New New		TIA SAS	70	9	5.3	3
Project Manager for Mobil ril g Firm	4		Telepho	ne No.	Telephone		License	No.	<u>U</u>	90	
Steve Schenker	2		609	758-3365	609 75	8-33	5	0.	39	4	
Start Date (10) 2-19-13				Date (11)		SHA Monitor				-0-	
Occupancy Status During Abatement (Chec	The state of the s		9-13	)	Street Addr	. Tech	<b>`</b>				
Facility Closed/Vacated During Entire F	-	15.5	ont			Box 3	337			2	
☐ Abatement Performed Outside of Norm	al Facilit	y Hours	ient		City, State,		27			-	
Other - Describe:		·			New	Egypt	NJ 08	4< 3	12		-
Scope of Work (Check All That Apply)						318	703	252 52			
So ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		Renova Demolit			□ F	ull Containm	nent with Negative	Pressu	ıre		
L 100 31 01 2200 11	/54. 1	Demont	1011			lini-Enclosur ilovebag Pro	ocedure				
					De N	on-Exempte	ed (*) and Non-Fria	ble Pro	****		
		s Locati Normali								emeni /pe	1
Location of Asbestos-Containing Material (ACM)	Use	ed Sole	ly by	Asbestos Con	scription of taining Materi	al (ACM)	Amount		T	m	
TO BE ABATED In Facility		aintenar stodial S			systems insucing, VAT, or		(Specify SF or LF)	Rer	R	nca	Enc
(13)		(12)			niscellaneous		SF OF LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A					=		ate	e,
2nd floor Bedroom	1	×		FloorTil	_		150 SF	V.	-		
- 114 0 1	1	X		Floor Ti			150 SF	X	1		
		7						X	-	-	-
2 Floor Bathroom	+			Flour	112		100 SF	×	-	-	
Name of Registered Waste Hauler		I N	JDEP W	/aste Cubic	Yards	Name of	Registered Landf	ill		L	
			auler ID	No. of Wa	ste f	200000					
EPC Technologies City: State	>	-1-	1700		sal Date	City, Sta	ste Mar	iage.	nc.	ſſ	
New Equat	NJ				20.13		misville	1	PA		
Completed by	Title	^			ignature	C 1		ate			
Steve Schen Kee	Hize	sid	ent		Sleep	) Sch	ohn!	2-	4-	13	)

Homel

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

Date of Notification (1)	23 / 1:	3		100000000000000000000000000000000000000		ng Owner/Operator (	2)	2013 FEB 13		C.L	7	
Agencies Notified  ⊠ EPA  ⊠ DOLWD	Type Notification  ☑ Initial				t Address 7 Road 1	Bldg 4086		& I I		?: (i	9	
☑ DHSS	Amended Amendment #	ATTENDED			State, Zip	Code , NJ 08854		& LICENOIN	61/	61		
☐ DCA (NJAC 5:23-8)	☐ Emergency (in justification)	ncludin	g		of Conta			Telephone Numb	200			
	☐ Cancellation			Mil	ke Smith			Total Training	001			,
257 #24	AL N			FA	CILITY I	NFORMATION			ST. ST.			
Name of Facility Where A	batement is Takin	g Place	(3)				Type of Facility	(4)				
15 Washington Stre	et						School (K-12					
Street Address 15 Washington Stre	et				- 4		☐ Subchapter 8 ☐ Other (i.e., potential homes, etc.)	3 (Other than K-12) rivate and commen	cial b	uildin	gs,	
City (5)		77		-			Square Feet	# of Floors	Тв	ldg. A	ae	7
New Brunswick							200,000÷	19		60+	3	
County (6) Essex				Cour	nty Code	7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme						L-3000
ATC			`	0009	98	AND AND AND ASSESSMENT OF THE PARTY OF THE P	VIRONMENTAL					
Street Address						Street Address						
3 Terri Lane						1123 BEAVE	R STREET					
City, State, Zip Code			W. Tes.//			City, State, Zip Co	ode					
Burlington Townshi						BRISTOL, PA	19007					
Project Manager for Monit	oring Firm		Tele	phone	No.	Telephone No.		License No.	1			
Brian Kearney			4 10 15 11	9-386	With the state of	215-788-6040		00509				
Start Date (10) ON / HOL	^		1.5	tion Da	te (11) 13	Name of OSHA M BRISTOL EN	onitor VIRONMENTAL	., INC.				
Occupancy Status During	Abatement (Chec	k only o	one)			Street Address	***				-	-
□ Facility Closed/Vacated	During Entire Pe	riod of	Abate			1123 BEAVER	RSTREET					
Abatement Performed Time of Abatement: 7:					cribe	City, State, Zip Co BRISTOL, PA				0.725		
Scope of Work (Check all	that apply)					-						
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		□ Re 図 De	novati molitic			☐ Mini-Encl ☐ Glovebag	Procedure	ative Pressure	e			
		Is	Locat	ion	100					atem	ent T	vpe
Location of Asbestos-Containing N TO BE ABAT IN Facility (13)	laterial (ACM) ED	Use Ma	Norma d Sole intena odial ( (12)	ely by nce/ Staff?		Description of estos Containing Mat e., thermal systems in surfacing, VAT, other miscellaned	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								
See attached												
8						ę.						
					1	2,577,022,530,032			П		П	
Name of Registered Waste SERVICE TRANSPO			N	JDEP V auler ID 20990	No.	Cubic Yards of Waste 1000 Cu Yds	Name of Regist		וט			
City, State NEW CASTLE, DE 19	720			6		Disposal Date 8/16/12	City, State WAYNESBU	JRG, OH 44688	3			
Completed By (Print or Typ Gino Pizzigoni		enera	l Man	ager	119	Signature Signature	Di sesoni	I el o	e 2/7	1/1-	3	
SB-41							1111	1 1	-	,		

ASB-41 MAY 11 GI 13006

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

PEOTWED

Throughout 2012 cm	TINIT	Floor Tile	07.000.07	163			
Throughout 2013 FEB	13 20 7		67,282 SF				IL
Throughout	7 8 9		8,230 SF			T	T
Throughout		Mastic	65,182 SF	X	n	T	Ħ
Doof	1 1 1	Transite Panels	214 SF		F	H	Ħ
Roof		Transite Panels	3,080 SF		H	H	H
Throughout		Built Up Roofing	1,584 SF	Ø	님	H	Ħ
7th Floor Mach Poom		Triple Layer Tile	3,184 SF	A	H	H	+
7th Floor March Daniel		AHU Cork Sealant	750 SF	A	뉘	H	H
Sub Racoment Mark D		White Electrical Wire	30 LF	A	H	片	H
Sub Pagament Mark D		Boiler Door Refractory	100 SF	A	片	H	H
Cub Because 4 88 1 m		Steam Drum Insulation	400 SF		片	님	H
Cub Decement March 19		Heat Exchanger Insulation	25 SF	HA	片	님	H
Sub Basement Mech Room		Duct/Boiler Insulation	800 SF	<del>                                     </del>	井	님	님
Sub Basement Mech Room		Ceiling Plaster	1,400 SF		片	님	닏
Sub Basement Mech Room		Pipe Insulation				Ш	
Throughout		Dine Inculation	1,480 SF	$\boxtimes$			
Throughout		Pipe Insulation	26,864 SF				
- J		Heat Shields	70 Ea	X		T	一
					Ti		Ħ

# NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Occupancy Status Du ☐ Facility Closed/Vac ☐ Facility Closed/Vac ☐ Abatement Perform Time of Abatement Scope of Work (Check ☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☐ Locatio Asbestos-Containing ☐ DBE AB ☐ IN Faci ☐ (13) ☐ Ree attached ☐ Locatio ☐ Asbestos-Containing ☐ Asbestos-Containing ☐ OBE AB ☐ IN Faci ☐ (13) ☐ Check ☐ Locatio ☐ Asbestos-Containing ☐ OBE AB ☐ IN Faci ☐ (13) ☐ Check ☐ In Faci ☐ (13) ☐ Check ☐ Locatio ☐ Asbestos-Containing ☐ In Faci ☐ (13) ☐ In Faci ☐ (14) ☐ In Faci ☐ (15) ☐ In	cated During Entimed Outside of No.: 7:00AM-4:00P all that apply) an of g Material (ACM) MATED lity  Te Hauler DRT GROUP, II	Period ormal Face M/  Use M/  Ves	of Abai cility Ho PM- Renova Demolit Is Loca Norma sed Sol laintena stodial (12) No	tement burs - Di All attion ion attion ally lely by ance/ Staff?	Asbes (i.e.,	Street Address 1123 BEAVE City, State, Zip C BRISTOL, PA  Full Con Mini-Enc Gloveba Non-Exe  Description of tos Containing Matthermal systems is surfacing, VAT, other miscellaned of the containing Matthermal systems in surfacing, VAT, other miscellaned the miscellaned of the containing Matthermal systems in surfacing, VAT, other miscellaned the containing Matthermal systems is surfacing, VAT, other miscellaned the containing Matthermal systems is surfacing, VAT, other miscellaned the containing Matthermal systems is surfacing, VAT, other miscellaned the containing Matthermal systems is surfacing to the containing to th	tainment with to closure g Procedure mpted (*) and I f terial (ACM) insulation,	Non-Fri	Amount (Specify SF or LF)		Repair	nent T Encapsulate	УР
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Start Date (10)		Schedule	d Com	pletion	Date (11)	215-788-604 Name of OSHA			00509				
Brian Kearney	Market 1				86-8800	Telephone No.			License No.				
Project Manager for I	Monitoring Firm		T	elepho	ne No	BRISTOL, F	PA 19007						
Burlington Tow	nship, NJ 0801	6				City, State, Zip							_
City, State, Zip Code							ER STREET						
3 Terri Lane						Street Address							_
Street Address				0	00098	BRISTOLE	ENVIRONME	NTAL	INC				
Name of Monitoring ATC	rım Hired by Bu	ilding Ov	mer (8)	4.000	CM No.	Name of Abate	Univers	or (O)					
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County (6) Essex				10	County Code	(7)(STATE USE ONL	200,000		19		6	0+	<i>69</i>
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Street Address			-				☐ Schoo	(K-12)					
15 wasningto	n Street	aking	Place	(3)			Type of F	acility (	4)				_
Name of Facility W	/here Abatement	e Takina	Dis	(6)	FACILITY	INFORMATION	٧				-		
		mation			Mike Smi				releptione	Numb	er		
(10/10/0.23-8)	justific ☐ Cance	cation)			Name of Cor	ntact			Telephone	Alum.'			
DCA (NJAC 5:23-8)	☐ Emer	gency (in	cluding		Piscataw	ay, NJ 08854	14 24 5 °	11/16	,				20
☑ DHSS 6345	Amer	dment #			City, State, 2	Zip Code	& Line	17.0X	-				
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DOLWD 633	". I⊠ Initial			-	Street Addre	uilding Owner/Oper University		o P	12				
Agencies Notified  ☑ EPA 6356  ☑ DOLWD 633	2 Dinitial	tification					-01	? ~					

Throughout Throughout Throughout Throughout Throughout Throughout Roof Roof Throughout Sub Basement Mech Room Throughout Throughout Throughout	ashington Street  Department  Department	Floor Tile  Mastic  Transite Panels  Transite Panels  Built Up Roofing  Triple Layer Tile  AHU Cork Sealant  White Electrical Wire  Boiler Door Refractory  Steam Drum Insulation  Heat Exchanger Insulation  Ceiling Plaster  Pipe Insulation  Pipe Insulation  Heat Shields	67,282 SF  8,230 SF  65,182 SF  214 SF  3,080 SF  1,584 SF  750 SF  30 LF  100 SF  400 SF  400 SF  25 SF  800 SF  1,480 SF
		Pipe Insulation Heat Shields	

Date of Notification (1) Name of Building Owner/Operator (2) 1 23 13 Rutgers University Agencies Notified Type Notification Street Address **⊠** EPA ☑ Initial #27 Road 1 Bldg 4086 **⊠** DOLWD City, State, Zip Code **⊠** DHSS Amendment #1-1/25/13 ☐ DCA Piscataway, NJ 08854 ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Mike Smith FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) 15 Washington Street School (K-12) Street Address Subchapter 8 (Other than K-12) 15 Washington Street Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bidg. Age New Brunswick 200,000+ 19 60+ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Essex University Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ATC 00098 BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 3 Terri Lane 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Burlington Township, NJ 08016 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. **Brian Kearney** 609-386-8800 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 2 / 6 / 13 5 / 31 / 13 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: 7:00AM-4:00PM/ PM-\_ BRISTOL, PA 19007 Scope of Work (Check all that apply) 
 ⊠ Full Containment with Negative Pressure
 ☐ Mini-Enclosure
 ☐ Glovebag Procedure
 ≥3 sf or ≥3 lf ☐ Renovation ≥160 sf or ≥260 lf □ Demolition Non-Exempted (\*) and Non-Friable Procedure Is Location Normally Abatement Type Location of Used Solely by Description of Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Remova Enclosure Encapsulate Maintenance/ Amount TO BE ABATED (i.e., thermal systems insulation, Custodial Staff? (Specify IN Facility surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes N/A No See attached П П П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill SERVICE TRANSPORT GROUP, INC. Hauler ID No. Waste MINERVA LANDFILL 20990 1000 Cu Yds City, State Disposal Date City, State **NEW CASTLE, DE 19720** 8/16/12 WAYNESBURG, OH 44688 Completed By (Print or Type) Signature Gino Pizzigoni General Manager MAY 11 GI 13006 \* Do not use this form for asbestos licensure exempted activities.

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT MO#20613900914 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) Diane Conboy Agencies Notified Type Notification Street Address EPA X Initial 25 Howard Street X,DOFMD Amended City, State, Zip Code X DHSS Amendment # DCA Emergency (including Verona, NJ 07044 (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation Diane Conboy FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house School (K-12) Street Address Subchapter 8 (Other than K-1 2) Other (i.e., private and commercial buildings. 25 Howard Street homes, etc.) City (5) Square Feet # of Floors Bidg. Age Verona, NJ 07044 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Essex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City. State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 13 02 / 17 / 13 Envirovision Consultants, Inc. Occupancy Status During Abatement (Check only one) Street Address X Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe 20-21 Wagaraw Road, Bldg .# 34A Time of Abatement: \_\_\_\_\_AM-\_\_\_PM/ City, State, Zip Code Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination Full Containment with Negative Pressure → 3 sf or >3 If → 3 lf → 3 lf → 3 lf → 4 lf → 5 lf → 5 lf → 6 lf → 6 lf → 7 lf Renovation Mini-Enclosure Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure ls Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Repair Asbestos Containing Material (ACM) Encapsulate Enclosure TO BE ABATED Amount Maintenance/ (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) No Yes N/A Utility room X Pipe insulation 20 LF Garage X Pipe insulation 55LF Name of Registered Waste Hauler NUDER Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Campieted By (Print or Type) Title

Owner

N.Jevtic

ASB-41 MAY 11 Signature

Date

02/07/2013

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Date of Notification (1 $2 - 7 - 201$			Name	of Buildin	ng Owner/Operato . SMYTH	r (2)	JEB 13				
Agency Notified	Type Notification		Stree	Address	LSIDE AVE	DUVE &	V	0/1 2.			
DEP DEP DOL	Initial Amended Amendment #		City.	State, Zip	Codo .		29 1	: <b>(</b>	क		
m DOH · ·	Q Emergency (including justification)	19		of Conta	ct '		Jointhan the				
D DCA	☐ Cancellation		15.	Smy	•					-	
Manage of English Manage	re Abatement is Taking Pla	(20	FAC	ALITY INI	FORMATION	Type of Facility	(40				-
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CRESSKILL	4 - ** **					2300	2	82	-	R	<u>S</u>
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ny, want, any would					Hacken	sack. N.	J. 07601				
roject Manager for h	Jonitoring Firm	Teles	shone No		Telephone No.		License No.				
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tart Date (10)	Scheduled Co			)	Name of OSHA	Monitor					
2-19-2013	2-20		13		Omega En	vironmen	ital Inc				ī
	rring Abatement (Check only				Street Address 280 Huy	ler:St				Acces to	1
Abatement Perform	ated During Entire Period of ned Outside of Normal Facil BAM · 5PM	ity Hours	ieta I		City, State, Zip C		k, N.J.	0760	6		
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Best Remov	val Inc	1D No	109		Waste 2 yps	Minerva	Enterpr	ises			
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Completed by	Table				Signature	1		Date	_	-	
	Estim	.+			RVeldran			2-7	7	. ,	0

Date of Notification (1) February 7, 2013				Name o	f Building s Techr	Owner/Opnical Mair	erator	(2) nce?///2 ~	Check	¢# 5714				
Agencies Notified	Type Notification			Street A	ddress edwood	d Avenue		(2) nc@0/3FEB	13 p	M 2. a				
EPA DEP DOL	Initial Amended Amendmen		<i>t</i>			ode eights, NJ		\$50 CONTRACTOR		. c. 0.8	). 		,	
Ŭ DOH DCA	Emergency justification) Cancellation		3	Name o	f Contact r Lacy				Te	lephone Nu	mber	<u> </u>		ide
Name of Facility Where	Abatement is Takir	ng Place (	(3)	FACI	LITY INF	ORMATIO	N	Type of Facility	(4)					
Residence Street Address								School (K-			0)			
330-338 Wenonah	Avenue							Other (i.e. etc.)	private	er than K-1 & commerc	2) ial bui	dings	, hom	es,
City (5) Mantua								Square Feet 4,200	3	f Floors		31dg. <i>i</i> 30	Age	
County (6) Gloucester					Code (7) USE ONLY	0		Current Use (Pr Residence	ior if be	ing demolis	hed)			
Name of Monitoring Firm MDG Environment		Owner (8	)	ASCN	/ No.			of Abatement Co le Environmer			-			
Street Address 1000 Maplewood D	Orive, Suite 207							Address Cutler Ave.						
City, State, Zip Code Maple Shade, NJ (							City, S	tate, Zip Code e Shade, NJ	08052	,				
Project Manager for Mo Tony Espisito				Telepho (856)7	ne No.		Teleph	ione No. 755-0099		License N	lo.			
Start Date (10)				mpletion	Date (11)	1	Name	of OSHA Monitor	-	00042				
February 16, 2013 Occupancy Status Durin			_	0, 2013			EMS	Address				110000		
	cated During Entire			ment		1.0		Haddon Ave						
Abatement Perform Other – Describe:	ned Outside of Norr	nal Facilit	y Hour	S		1		tate, Zip Code mont, New J	ersey	08108				
Scope of Work (Check A	All That Apply)							•						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demoli	53171135-1317-1			×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure					
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Asbestos-Containing TO BE AB		Ma	aintena	nce/				laterial (ACM) insulation,		mount Specify	70		Ē	ш
In Faci	lity	Cus	stodial (12)	Staff?	(,,,,	surfacin	ng, VA	T, or		or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A		other mis	scenan	eous)			val	Ŧ	ulate	ure
Basem	ent		XXX		As	bestos P	ipe Ir	nsulation	8	5 LF	xxx			
Name of Registered Wa Freehold	ste Hauler		ŀ	IJDEP W lauler ID 2253		Oubic Ya of Waste		Name of Grows		red Landfill				
City, State Mount Holly, New Je	ersey 08060					Disposal 2/20/20		City, Stat		(.				
Completed by		Title				Sign	nature			Da				
William Lynch		Own	er			1	ull	iam 1. Li	inn	Fe	ebrua	ry 7,	201	3

Check# 10126

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

GAC Project # 060-13 Date of Notification (1) Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ February 6, 2013 Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. ☑ Initial Notification ■ EPA 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS □ DCA ☐ Amended Notification X DOL ■ Emergency (including City, State, Zip Code 3 PISCATAWAY, NJ 08854 ☑ DEP- No Longer REQUIRED justification) Talanhana Number Name of Contact 1 X DOH Cancelled MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) ☐ School (K-12) KATZENBACH HALL, BLDG# 8331 Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) DOUGLASS CAMPUS # of Floors: 3 Bldg. Age: 60+ years Sq. Feet: N/A County (6) County Code (7) City (5) (State Use Only) Current Use (prior if being demolished): ACADEMIC **NEW BRUNSWICK ESSEX** Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Contractor (9) ASCM No. ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City State, ZipCode City, State, Zip Code **BUTLER, NJ 07405 BURLINGTON, NJ 08016** Telephone Number License Number Project Manager for Monitoring Firm Telephone Number 609-386-8800 **BRIAN KEARNY** 973-492-0477 00840 Scheduled Completion Date (11) Name of OSHA Monitor Scheduled Start Date (10) 02/18/13 02/15/13 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ■Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other - Describe: Shift Hours: 4:00 PM - 5:00 AM FAIRLAWN, NJ Scope of Work (Check all that apply) Full Containment with Negative Pressure ▼Renovation Mini-Enclosure ≥ 3 sf or ≥ 3 lf Demolition ≥ 160 sf or ≥ 260 ■ Non-Exempted (\*) and Non-Friable Procedure Abatement Type Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Material (ACM) in Facility (13) (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Solely by Maint./Custodial Remove Repair Encap Enclose or LF) Staff? (12) VAT, or other miscell.) YES NO B-16 MER X TSI (Breeching Insulation) 9 SF X Name of Registered Landfill Name of Reg. Waste Hauler NJDEP Waste Hauler ID # 5 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 City, State Disposal Date 100 New Ford Mill 02/18/13 NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Horizon Disposal Services, Inc., Trenton, NJ 08611 19067 NJ DEP# 22612 215-736-1700 Date Completed by (Print or Type) Signature Raymand C. Pedalins February 6, 2013 SENIOR PROJECT RAYMOND C. PEDALINO MANAGER

		(P	ursuant	to NJAC	8:60 and 1	12:120	)	D.	m 115			00	
Date of Notification (1)	11 H - 12 - 13 - 13 - 13 - 13 - 13 - 13 - 13		Name of	Building	Owner/Op	erator	(2)	2-		11,			
February 07, 201					tic / John	son 8	Johnson	2013 FEB	***	· 1/2			
Agencies Notified Type Notifica	ation		Street A		4- 000 1	DO D		40	13 6	)			
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Name of Facility Where Abatement is	Taking Place (	3)	FACI	LIT INF	ORMATIO	IN T	Type of Facility	(4)			.,		C-1.
Ortho Diagnostic / Johnson & Jo	hnson						School (K-	12)					
Street Address		+						r 8 (Other tha	n K-12	2)			
920 / 1001 Route 202							I/ VI	private & con	nmercia	al build	dings	hom	es,
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Somerset				JSE ONLY,	)	_		Fac		100			
Name of Monitoring Firm Hired by Buil	ding Owner (8	L	ASCM	l No.		Name	of Abatement Co		iiicy .				
Bulava Environmental, Inc.			41.2		Т	he M	ACK Group, I	LC.					
Street Address		-	-1				Address				-		
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City, State, Zip Code							tate, Zip Code					-	
Hillsborough, NJ 08844-3830					.	herry	Hill, NJ 0803	34	. 34				
Project Manager for Monitoring Firm			Telephor	ne No.			one No.		ense N	0.			
Edward J. Bulava		9	908-874	-6207	(9	973) 7	759 - 5000	007	81				
Start Date (10)	Schedul	ed Co	mpletion (	Date (11)		Name	of OSHA Monito		->				
2/23/13			2/23/14	4	Т	he M	ACK Group, I	LC.		1			
Occupancy Status During Abatement (	Check Only O	ne)				Street	Address		500000000	.+.			
Facility Closed/Vacated During Er					1	500 K	Kings HWY N	STE 209		15			
Abatement Performed Outside of Other - Describe:	Normal Facilit	y Hour	S			City, St	tate, Zip Code						
					— c	herry	Hill, NJ 0803	34			N.		
Scope of Work (Check All That Apply)													
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≥160 sf or ≥260 lf		Demoli	ition			Š	Mini-Enclosur Glovebag Pro						
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(13)		(12)	* * * * * * * * * * * * * * * * * * * *		other mis			0. 0. 2		Remova	Repair	Encapsulate	Enclosure
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	Yes	No	N/A					0.10	_	V		-	
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		1	Hauler ID	No.	of Waste	е							
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Michael Cooper	Presid	dent	20.507			A CONTRACTOR OF THE PARTY OF TH			2/7	/13			

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Date of Notification (1	)				uilding Owner/ mmerman	Operator (	(2)	- 4,		EB 13	<i>P</i>	6	þ	
2/06/13 Agencies Notified	Type Notification		St	reet Add		Ave			d'/	13	M 2.	0-		
× EPA × DEP × DOL	Initial Amended Amendment #		Ci	ty, State,	Zip Code range, NJ (					SHAN	May.	CO		
DOH DCA	Emergency (ir justification) Cancellation	ncluding	85.83	ame of C avid Zi	ontact mmerman		9		Tele	nhone Numb	or '	•		
		Dis (2)		FACILI	TY INFORMA	TION	Type o	f Facility (4)	)					
Name of Facility Whe house Street Address	ere Abatement is Taking	Place (3)	-				Sc Sc	chool (K-12	) 3 (Othe	er than K-12)	huildii	nas h	omas	
520 Wyoming A	ve						Square	c.)	# of	commercial Floors	Blo	lg. Ag		,
City (5) South Orange			10	ounty Co	ode (7)		N/A		N/A	ng demolishe	N/.	Α		
County (6) Essex				STATÉ US	SE ONLY)		Hous	e						0
Name of Monitoring N/A	Firm Hired by Building C	wner (8)		ASCM	No.			ment Cont ment, Inc		(9)			159	10
Street Address							Address	s ren Aven	ue					
City, State, Zip Code	е						State, Zip	Code J 07512						
Project Manager for	Monitoring Firm		Ī	elephon	e No.	973-	hone No -345-86	685		#00675	). -			
Start Date (10)		Scheduled 2/21/13	Com	pletion D	ate (11)	D&S	Abate	A Monitor ement, In	c.		9		12	
Occupancy Status I	During Abatement (Chec					U* 1979.0531011.000	t Addres	s Iren Aver	nue					
Facility Closed Abatement Pe Other – Descri	I/Vacated During Entire I rformed Outside of Norn ibe: Occupied	Period of Abanal Facility H	atem lours	ent		City,	State, Zi							
Scope of Work (Che	eck All That Apply)							-						
≥3 sf or ≥3 lf ≥160 sf or ≥26	60 If		novat moliti		ha news		× Mir	i-Enclosure	e cedure	h Negative P nd Non-Friab			e	
		1				-	NO	II-Exemple	J ( ) ai	10 140111 1100		Abate	ement	t -
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basement	t & crawl space	10.00	X		Р	ipe irisu	ation		-					
	The state of the s		-			10-10 ye		in the state		- 11 - 11				
1		e Paris I	electric control of the control of t				7/20	-						1
Name of Registere D&S Abatemer			F	JDEP W lauler ID 20996	No. of	ubic Yards Waste BD		Waste	Man	stered Landfil agement o				- 17
City, State Totowa, NJ				2 2		isposal Da BD	7	City, Sta						
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ate of Notification (1) 2/05/13			He	enrik Pa		Operator (	( <b>~)</b>	TISFE	B 13 PM				-
gencies Notified	Type Notification			eet Addre 5 Greer	ss ne Street	í		100	177	<u>ېن :</u>	)		-
EPA DEP DOL	Initial Amended Amendment #		Cit	y, State, Z ersey Cit	ip Code ty, NJ 073	302		-76	thomas	1891			4
DOH	Emergency (in justification) Cancellation	cluding		me of Cor enrik Pa				Tel	ephone Numb	er:			
DCA				FACILITY	Y INFORMA	ATION	Type of Fac	cility (4)					
louse	e Abatement is Taking	Place (3)					School Subch	ol (K-12)	ner than K-12) & commercial	building	as, ho	mes,	
Street Address 115 Beekman Ro	ad						Other etc.)  Square Fee		of Floors		. Age		_
City (5) Summit							N/A	N.		N/A			
County (6)			C	ounty Coc	de (7) EONLY)	-	House		eing demolishe				
	irm Hired by Building C	wner (8)		ASCM N	0.	Name D&S	e of Abateme S Abateme	nt Contractont, Inc.	or (9)				
N/A Street Address					· F	Stree 11 F	et Address Rosengren	Avenue					
City, State, Zip Code		at making w				City,	State, Zip Co owa, NJ 0	ode					
Project Manager for	Monitoring Firm		7	elephone	No.	Telep	phone No. 3-345-8685		License No #00675	).			
Start Date (10)		Scheduled	Com	pletion Da	ate (11)	Nam	ne of OSHA N	Monitor					
3/04/13		3/06/13		dia			et Address		·			100 market	- 5
Occupancy Status D	ouring Abatement (Chec	k Only One)	)				Rosengre	n Avenue					
Facility Closed Abatement Per Other – Descri	Vacated During Entire formed Outside of Norr be: Occupied	Period of Ab nal Facility F	dem	ient		City,	, State, Zip C towa, NJ C	ode )7512					
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		Yes	No	N/A		pipe ins	ulation	-	370 LF	X			
basemen	t & crawl space		X	+	7.02 = 2	pipe iris	ulation						
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	ed Waste Hauler		T	NJDEP V Hauler ID		Cubic Yar of Waste			egistered Land anagement				
Name of Register				#20996		TBD Disposal I		City, State	anayement	5,17,			
D&S Abatemen	The second second					Dishogal					100		
						TBD	ajuje na	Tullytown		Date			

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Date of Notification (1) 2/05/13		1 = 1 5		Name of Priscilla		wner/Operator	(2)	2013FE	8 13 PH	20			
Agencies Notified	Type Notification			Street Ac 21 Gat	ldress es Avent	ıe	4%	Person,	PA	2: 68	,		
EPA DEP DOL	Amended Amendment		_		e, Zip Cod Caldwell,	e NJ 07006		& L/0	Waller.	A)			
DOH DCA	Emergency ( justification) Cancellation	en en regionale <del>T</del> eo		Name of Priscilla					Telephone Nu	mber			
Name of Facility Where	Abatement is Takin	g Place (3)		FACIL	ITY INFO	RMATION	Type of Fa	acility (4)		3 3011			
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21 Gates Avenue City (5) West Caldwell	-	(415) 4 (41)					etc.) Square Fe	eet	# of Floors N/A	В	ldg. A		
County (6) Essex				County C	Code (7)				being demolis				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.		of Abateme		ctor (9)				
Street Address						Street	Address osengrer		)				
City, State, Zip Code	+ 10.000					- T - 1 2 (2) (2) (3) (3) (4)		ate, Zip Code ra, NJ 07512					
Project Manager for Mor	nitoring Firm			Telephor	ne No.		none No. 458685		License N #00675	lo.			
Start Date (10) 2/19/13	-	Schedule 2/20/13		mpletion [	Date (11)		of OSHA M Abateme		1				
	ated During Entire I	Period of A	bater			11 R	Address osengrer		•				
Other – Describe:		nai Facility	Hour	S	inguis -		state, Zip Co wa, NJ 0						
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)		enova emoli			>	Mini-Er Gloveb	nclosure ag Proced	with Negative I ure ) and Non-Frial			e	
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Locatio Asbestos-Containing TO BE AB In Faci (13)	g Material (ACM) <u>ATED</u> lity	Used	ntena	ely by ince/ Staff?		Description os Containing M hermal system surfacing, VA other miscellar	Material (AC s insulation T, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
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basem	ent		X		С	ontaminated	pipes		40 LF			Х	1
				1 51									
Name of Registered Wa	ste Hauler		1	NJDEP W	/aste	Cubic Yards	N:	ame of Re	gistered Landfi				
D&S Abatement, In	С.			Hauler ID 20996	No.	of Waste TBD			nagement o	of PA	eng.		
City, State Totowa, NJ						Disposal Date	) 1	ty, State ullytown					
Completed by Deanna Brkusanin		Title Proje	ct M	anager		Signatur	Read	Lill		ate /05/1	3		

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Date of Notification (1) 2/05/13				Building C Sarken	900	perator	(2)	J	124	8/3	1 6		i.	
Agencies Notified Type Notification		4.1	Street Ad								PM 2.	_		
EPA     DEP     DOL     DOH     DOA     DOA     DOA     DOA     DOA     DCA     Initial     Amended     Amendment #     Emergency (in justification)     Cancellation	cluding	- 1	City, Stat Dennis Name of	e, Zip Coo , MA 02	638				Tele	phone Nh	Mher 4	<del>('&amp;</del>		<del>(</del>
E cancellation				ITY INFO	1000	ON		- 5	76.2		7.7		- ;	
Name of Facility Where Abatement is Taking House  Street Address	Place (3)	7						of Facility (4 School (K-12 Subchapter (	2)	r than K-1	2)			
887 Summit Avenue						1	X G	Other (i.e. pr etc.)	ivate &	commerc	ial build	75,743,5		es,
City (5) Jersey City							N/A	e Feet	N/A		N	dg. A /A	ge	
County (6) Hudson			County C (STATE U	Code (7) ISE ONLY)	1 40		Curre	nt Use (Prio se	r if beir	g demolis	hed)			
Name of Monitoring Firm Hired by Building Ov N/A	vner (8)		ASCM	No.				tement Cont ement, Inc		9)				- 1
Street Address			-		- 1		Addres	s gren Aven	ue					
City, State, Zip Code						City, S	City, State, Zip Code Totowa, NJ 07512							
Project Manager for Monitoring Firm		T	Telephor	ne No.		Teleph	none No	o		License 1		- T	1	-
	Scheduled 2/19/13	Con	npletion [	Date (11)		Name	of OSH	IA Monitor ement, Inc					2	
Occupancy Status During Abatement (Check	CANCOL CONTRACTOR	)				a de la composition della comp	Addres					-		
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Occupied	eriod of Ab	atem			_	11 R City, S	oseng state, Z	gren Aven p Code J 07512	ue		* 1			
Scope of Work (Check All That Apply)				-		-						1		<u> </u>
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit	-	11745 - 108		×	Mir Glo	l Containme ni-Enclosure ovebag Proc n-Exempted	edure				•	
	le l					-	2 140	II-Exempled	( ) and	111011-1 110			ement	
Location of	No	ocati ormal	ly		Des	scription	n of					Ту	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used Mair Custo	itenai	nce/		tos Cont thermal surfac	aining N	Material s insula NT, or		(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
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crawl space		X			pipe	insula	ition		9	0 LF	Х			
	1	15	100						-					
Name of Registered Waste Hauler		IN	IJDEP W	/aste	Cubic	Yards		Name of I	Registe	red Landf				
D&S Abatement, Inc.		100330	lauler ID 20996	No.	of Was	ste		Waste I						
City, State Totowa, NJ		111.				sal Date		City, State						
Completed by Deanna Brkusanin	Title Projec	et Ma	anager		S	ignatur	No	ua Ri	/	. [	ate 2/05/13	3	· · ·	

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#### State of New Jersey - Notification of Asbestos Abatement

Date of Notification (1) February 6, 2013	***		4 1 3 2 3 3 3 3	Name of Building Owner/O Hess/ HA Fernot Inc		* 25.	S.A.	8/3	(Ca		
Agencies Notified  EPA	THE PARTY NAMED IN	nitial Noti		Street Address 32 Kulick Road		¢,	4	PH 2.			
DCA		ided Cert		City, State, Zip Code	0500	1	°<.	No C	8		
x DOL			including	Fairfield, New Jerse	y 07004			1975 A.			
X DEP x DOH	□ Can	fication)	KKIN LE	Name of Contact Randy Mitchell		I elepi	hone	Number /			
X DOIT	J L Can	ceneu	FACILITY IN	FORMATION		-		-			
Name of Facility Where Abatement	t is Taking Place	3)		Type of Facility (4)		3 1					
Hess Station # 30279				School (K-12)							
Street Address 1672 Route 88				Other (i.e. private & co	ommercial b				,		
The state of the s	ean		y Code (7) Use Only)	Current Use (prior if being o							
Name of Monitoring Firm Hired by	Bldg. Owner (8)	ASCM	l No.	Name of Contractor (9)			100				
<b>EnviroVision Consulta</b>	ints inc.	000	79	GREENWOOD ABATEMENT CONSULTANTS, INC.							
Street Address				Street Address							
20-21 Wagaraw Road, Bl	dg # 34A	***		268 MAIN STREET				· · · · · · · · · · · · · · · · · · ·			
City, State, Zip Code				City State, ZipCode	7						
Fairlawn, NJ 07410				Butler, NJ 07405							
Project Manager for Monitoring Fin Fred Larson		e Number 36-9145		<u>Telephone Number</u> 973-492-0477		00840		nber			
Scheduled Start Date (10)	Schedule	d Completio	on Date (11)	Name of OSHA Monitor							
March 12, 2013	March	18, 2013	3	EMSL inc.		201					
Occupancy Status During Abater Facility Closed/Vacated Do Abatement Performed Out Describe Other – Describe: Vacan	uring Entire Perionside of Normal F	d of Abate		Street Address  1056 Stelton Road City, State, Zip Code  Piscataway, NJ 0888	54						
Source of Work (Check all that app	ily)										
≥ 3 sf or ≥ 3 lf □≥ 160 sf or ≥ 260			Renovation Demolition	1	Mini-Enclo	sure Procedur	e	gative Pressure  Non-Friable Proce	edure		
Location of Asbestos-Containing Material (ACM) in Facility (13)	Is Location Non Solely by Maint Staff? (12) YES NO		Description of As (ACM) (i.e. them VAT, or other mis	sbestos Containing Material mal systems insulation, surfacing scell.)	(Speci or LF)	fy SF		ement Type ve Repair Encap E	Enclose		
1 <sup>st</sup> floor		X	VAT & Mast	ic	220 3	SF	X				
Roof		X	Built up Roo	ofing	120 9		X		2.		
Roof		X		Penetrations	235 9	000000	X				
Exterior	Luces	Transite	To the Wards of the co	420 \$		X	1-1				
Name of Reg. Waste Hauler See Hauler Below # 1 & 2	See Bel	eriu#	20 M				Name of Registered Landfill Meadowfill Landfill G.R.O.W.S Minerva Ent. Ohio				
Hauler #1) Greenwood Aba NJ DEP # 12561 Hauler #2) Newark Carting, I Hauler #3) Tri State-Bronx N	NY DEP # nc. – Newark, l	NJ 04509,	NJ DEP # 19551	07405	Disposal Da March 18	ite		City, State Route 2, Box 68 Bridgeport, WVA 304-842-2784 9000 Minerva Ro Waynesburg, OH	oad		
Completed by (Print or Type) Marin Graure	Title SENIOR MANAG		СТ	Signature Marin Graure		Date Feb	ruar	y 6, 2013			

ot, 51/

Date of Notification (1)	_	-	Name	of Building	g Owner/Operator (	2)	LUISFEB 1.			<u>~ 10</u>	
2 1 8 1 1.			CA	ALVAR	RY EPISCOI	PAL Chi	rch	P	11 2		<i>e</i>
Agencies Notified			Street	Address 7	54 AVEN	IVE C	LIGHT		9	<del>∰</del>	5
☐ DHSS Amendment #		J	BA	YON.	NE NJ	7 070	02	1/2	G	· .	
(NJAC 5:23-8) justification)  Cancellation			Name	of Contac	MACHN	9-2- in 1	Tala				_
			70000		IFORMATION						
Name of Facility Where Abatement is Takin			4,04,0			Type of Facility	(4)				
CALVARY EPISCOPAL Street Address 954 AVENU			CH_		The second second	Other (i.e., p	3 (Other than K-12) rivate and commerc	ial bu	iilding	s,	
BAYONNE NJ			2			homes, etc.) Square Feet 1200	# of Floors		19. A		06
County (6) HUDSON				ty Code (7	)(STATE USE ONLY)		ior if being demolish	ed)	15 1	CI	KJ
Name of Monitoring Firm Hired by Building AZ SOL UTTON	Owner	(8)	ASCM 1		Name of Abateme	ent Contractor (9)		C	Ť.	i li	
7007 60 <sup>th</sup> St.					Street Address	anley S.					
City, State, Zip Code RIDGEWOOD NJ/1.	700				City, State, Zip Co	ode	N7 62	07	2		
Project Manager for Monitoring Firm	500		phone I	No.	Telephone No.	KHORD	NJ 07	7			
ALEX ZIVANOV			-		201-438	-1188	License No.	54			
			tion Dat	e (11) /3	Name of OSHA M						i
Occupancy Status During Abatement (Chec	-		88		Street Address						
Facility Closed/Vacated During Entire Pe  Abatement Performed Outside of Norma				cribe	333 PATE		NE KO.			2-15000	
Time of Abatement:AMP	M/	_PM-	/	AM	CARLSTAL	OT NJ	07072				
Scope of Work (Check all that apply)					_						
<ul><li></li></ul>	⊠ Re ☐ De				☐ Mini-Enc ☐ Gloveba	g Procedure	gative Pressure in-Friable Procedure				
		Locat							atem	ent T	уре
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Use Ma	Norma d Sole intena todial (12)	ely by nce/		Description of stos Containing Ma , thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		other miscenarie	ousy				te	
BASEMENT			<b>Z</b>	VA	T		1200SF	M			
						-					
Name of Registered Waste Hauler			JDEP V		Cubic Yards of Waste 2	Name of Regis					
NEWARK CARTING			045	9	3	165	51				
City, State NEWARK, NJ				i Bagain	Disposal Date 3/4/13	City, State  BETLE +	HEM, PA				
Completed By (Print or Type) . Titl BORO ATANASOSKI	P. 1	u.			Signature	THE	Date	2/8	3/	3	1

CK 59812

Date of Notification (1) 02/06/2013					Owner/Op IAL INS		(2) CE COMPANY (	OF AME	RICAS	N	0	71	A to
Agencies Notified Type Notification		-	Street A 751 E		TREET I	FIFTH	FLOOR		201	3 FEB	10		4- /
区 EPA		-		ate, Zip Co	ode JERSEY	7 071	02		d d	3FEB		PM .	2:08
☐ DOH justification ☐ Cancellation	ricidaling			f Contact RICHARD	HUMMER	RS		Tele	phone N	lumber	100	lg'n	Ol.
			FAC	ILITY INF	ORMATIC	N						-51	
Name of Facility Where Abatement is Taking Street Address 683 BROAD STREET	Place (3)						Type of Facility ( ☐ School (K-¹ ☐ Subchapter ☐ Other (i.e. petc.)	12) 8 (Other			ildings	, hom	ies,
City (5) NEWARK		1,50	(6)				Square Feet 60,000	# of 1	Floors		Bldg.	Age	
County (6) ESSEX				Code (7) USE ONLY	)	_	Current Use (Pri VACANT (PRI		-		AL)		
Name of Monitoring Firm Hired by Building C ENVIRONMENTAL HEALTH INVESTIGE	wner (8) ATIONS	INC	ASCN 0010				of Abatement Cor ENVIRONMENTA				, E		
Street Address 655 WEST SHORE TRAIL					2		Address 2 QUEENS PLA	AZA SO	UTH				
City, State, Zip Code SPARTA, NJ 07871						City, S LONG	tate, Zip Code ISLAND CITY	Y, NY	11101				
Project Manager for Monitoring Firm BILL KERBEL			Telepho 973-7	ne No. 129-564	9		one No. 349-0900		License 00853				
Start Date (10) 02/21/2013	Schedule 05/21/2	d Con	pletion	Date (11)			of OSHA Monitor IN MCREA				1011		
Occupancy Status During Abatement (Check	Only One	9)				Street	Address						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Normal	al Facility	Hours			-		KENNEDY BLVE tate, Zip Code	)					
Other - Describe: BUILDING IS VA DEMOLITION Scope of Work (Check All That Apply)	CANT &	SCH	EDOPEI	) FOR		BAYO	NNE, NJ 0700	2			-		
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		enova				(X) (X) (X)	Mini-Enclosure Glovebag Prod	e cedure				re	100
	Isl	ocati	on								Abat	emen	t
Location of	No.	ormal	у		Desc	cription	of				T	уре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Mair Custo	(12)	taff?			ystems ng, VA		(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								1		
ROOF		Х		ROOF F	LASHIN	ط یک نی	ARAPET TAR	7	70 SF	X			
		E. S. I					41 2						
											-		
Name of Registered Waste Hauler		IN	JDEP W	l /aste	Cubic Y	ards	Name of	Registere	ed Landf	fill		L	-
ATC/TST		1000	auler ID 4310/:		of Wast	е		A ENT					
City, State SHIRLEY, NY 11967/BRONX, NY 1	0464				Disposa 5/21/2		City, State WAYNES		OH 44	688			
Completed by ANN ALI	Title ADMIN	ISTR	ATIVE		Sig	natur		-	100	Date 2/06/	2013		

			FICATION	OF ASE	ew Jersey BESTOS AE 8:60 and 1		)	DE	CEIVE		. k	7	4:	クマ
Date of Notification (1) 01/29/13					Owner/Ope		(2) 4 istric	2013 FEB	13 PH 2:		-/-	- 1	, ,	10
Agencies Notified Type Notification		9 - 1	Street A				*	April .	14 S:	GB.				
EPA Initial					nt Avenue	<del></del>		67/1	E /s	• 0	- 1	(		
EPA	Contract of the contract of th	-	100000000000000000000000000000000000000	ate, Zip C / City, N	ode NJ 07305			~/UE	No THE	71.		474		
DOH justification)			College Street	f Contact Petolin				6 1 6	Telephone 1	lumbe			0 - 0	
DCA Cancellation	1				ORMATIO						_			
Name of Facility Where Abatement is Takir	ng Place (3	3)	FAGI	LITT HAT	OKWATIO		Туре	of Facility (4	)					
William L. Dickinson High School						27		School (K-12						
Street Address									3 (Other than K ivate & comme		ildin	as.	hom	es.
2 Palisade Avenue								etc.)						
City (5) Jersey City							10,0	re Feet 00 +	# of Floors		Bldg 504		ge	
County (6) Hudson				Code (7) USE ONL	n	_		ent Use (Prior School	r if being demo	lished)				4
Name of Monitoring Firm Hired by Building USA Environmental Management,			ASCN 0011				of Abatement Contractor (9) amid Contracting Corp.							
Street Address 344 West State Street					1 2 2	Street .		ss eant Avenu	ie -					-
City, State, Zip Code Trenton, NJ 08618							State, Zip Code on, NJ 07013					10 mm		
Project Manager for Monitoring Firm Mr. William Weisgarber, Jr.			Telepho 609-65	ne No. 56-8101		Геlерh 973-6			License 01099					
Start Date (10) 02/15/13	Schedule 02/18/		ompletion	Date (11)				HA Monitor onmental	Laboratories	LLC				
Occupancy Status During Abatement (Che	ck Only Or	ne)				Street	Addres	ss						
Facility Closed/Vacated During Entire								e 22 Wes			,			
Abatement Performed Outside of Norr Other – Describe: 3:00 PM - 11:30 PM		/ Hou	ırs					ip Code 07081						
Scope of Work (Check All That Apply)	10					1000								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demo	ation lition			×	Mir Glo	ni-Enclosure ovebag Proce	nt with Negative edure (*) and Non-Fr			dure	e	
	Is	Loca	ation		100						11.7	ate	men	
Location of	1	Norma	ally		Desci	ription	of.			-		Ту	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	inten	lely by ance/ I Staff?		stos Contair thermal sy surfacin other mis	stems	insula T, or		Amount (Specify SF or LF)	Kemova	1 1000	Renair	Encapsulate	Enclosure
	Yes	No	N/A									20	ē	Ф
Rooms 325, 326, 329 and 330		×			VAT 8	& Mas	stic		1,385 SF	X			1	
		×	-		Glue	e Dot	S	4	704 SF	X				
C C C C C C C C C C C C C C C C C C C	1	х		1-11-2	Table	e Top	s	1 1	496 SF	Х				
		х		Company of the Company	Exhaus	st Ho	ods	+ 1	60 SF	x		1		
Name of Registered Waste Hauler		0.00	NJDEP W		Cubic Ya			Content viscous	egistered Land	Ifill				
Pyramid Contracting Corp.	Hauler ID No. of Waste 5					G.R.O.W.S., Inc.								
City, State Clifton, New Jersey					Disposal 02/1813		~	City, State Morrisvil	e-Pennsylv	ania				
Completed by	Title	E. 35 1818		14-16-	Sign	nature	11	1	11 / //	Date				11.1
Dimo Golcev	Gene	eral l	Manger			11	41	N CI	M	02/06	/13			

not use this form for asbestos licensure exempted activities.

01-6030H4

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Data dell'illa illa del								_ ////2			11 /	" P
Date of Notification (1) 02/11/						ding Owner/Opera Apartment & (		2013 FEL	9/3			4 /6
Agencies Notified	Type Noti	ification		-	Street Addre			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	- 0	P	10.	
EPA	Initial	,			1655 US	HWY 9		d	-			4.8
DOL DEP		ded dment # gency (incl	udina		City, State, Z Old Bridge	ip Code e, NJ 08857		16	W	This	778	77
DOH	justific	cation)	uaing	1 -	Name of Con			Telephone N		346		ξ.
☐ DCA	L Cance	llation		S/A	ernadette			.   _				
					FACILITY I	NFORMATION						
Name of Facility Where	Abatement is	s Taking F	Place (	3)			Type of Fac	ility (4)	1277			
Apartments Bldg.							School (		701700			
Street Address 15 Ironwood Lane								ter 8 (Other than K- e., private & comme		uildin	00	
							homes,	etc.)	i Ciai D	unum	ys,	
City (5) Old Bridge,						n	Square Fee 2000 SF	# of Floors		Bldg 60+	. Age	Ü
County (6)		207.00		T	County Code	e (7) (STATE	-	(Prior if being demi	—	-	-	
Middlesex					USE ONLY)		s Bldg.	Olisitet				
Name of Monitoring Firm	Hired by Bu	uilding Owi	ner	AS	CM No.	Name of Abate	A.O. 40.			119		
(8) N/A						DIA Gener	ion, Inc.		3		-	
Street Address						Street Address						
							PMB Suite 218					
City, State, Zip Code						City, State, Zip Clifton, NJ						
Project Manager for Mon	itoring Firm		or p.	Telepho	one No.	Telephone No.		License No.				_
				, c.cp.iic	J. 110.	그리는 학생이에게 없다. 하면 하면 이번째 때문	73-389-0089 00693					
Start Date (10)	T	Schedule	d Com	pletion	Date (11)	Name of OSHA		_   00093			-	_
02/21/2013		02/26/2					al Construction	on. Inc.				
Occupancy Status During	Abatement	t (Check o	nly on	e)		Street Address			-	_		-
X Facility Closed/Vacate	d During En	tire Period	of Ab	atemer	nt	1360 Cliftor	n, Avenue, P	MB Suite 218				
Abatement Performed	Outside of N	Normal Fac	cility H	lours		City, State, Zip	Code					
Other - Describe:					-	Clifton, NJ (	07012					
Scope of Work (Check all	that apply)											
>3 sf or >3 lf >160 sf or >260 lf			Renov	vation iolitior	1	Mini-Er Goveb	nclosure ag Procedure	Negative Pressure				
			Is Loca	ation		1   NOII-E	xempled ( ) and	Non-Friable Proc	200	MARK STATE	emen	+
1	,		Norm	- Table 1					-		ре	
Location o Asbestos-Containing Ma		2.0	lainten	lely by ance/	100	Description of tos Containing Ma		Amount		T	T	T
TO BE ABATE	ED		Custo	500		, thermal systems	insulation,	(Specify	Į "		Encapsulate	1
IN Facility (13)			staf (12		0	surfacing, VAT other miscellane		SF or LF)	Remova	Repair	aps	Eliciosure
		-	Ť		-		,		val	a i	ulati	ure
		Yes	s No	o N//	A						(0)	
Crawl Space				X	Pipe/E	bow Insulation		200 LF	X			
	-	-	+	-		THE RESERVE OF THE PARTY OF THE			-			
			-	-					+-	-	-	
Name of Registered Waste	e Hauler	-				Cubic Yards	Name of Reg	istered Landfill		L		L
	oup			NJDEP Waste Hauler ID No. 20970		of Waste	Minerva L	andfill		50		
Service Transport Gro	City, State					Disposal Data	City, State					
						Disposal Date	City, State					
City, State						02/26/2013	5.00	rg, OH 44688				
Service Transport Gro City, State New Castle, DE Completed By		Title					5.00	rg, OH 44688		_		_

UK 003045

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

303045		P		FICATI	ON OF AS	New Jersey SBESTOS ABATE C 8:60 and 12:12		2013 FEB	2	٥,			
Date of Notification (1	) 1/2013			1000000		ling Owner/Operato		- 7	3		4	)	
Agencies Notified	Type Notifi	cation			et Addres		ountry Club	<del>C</del>		10	-	_	
EPA	Initial	1			55 US F			Carl		<	00		
DEP DOL	Amende	7.672			State, Zij			1	25	1	-		
	☐ Emerge	ncy (includir	g	-		, NJ 08857			Ġ.	C.S.			
☑ DCA	justifica Cancella				ne of Cont nadette P			Telephone Nu	mber		-	-0000	
		-				NFORMATION			-				
Name of Facility Where	e Abatement is	Taking Plac	e (3)		NOILITT II	AT OKIMATION	Type of Facil	ity (4)	-				
Apartments Bldg.					66. s		School (K		20725				
Street Address					-			er 8 (Other than K- , private & commer		ildina	S.		
9 Cyprus Lane City (5)							homes, et	tc.)				_	
Old Bridge,							Square Feet 2000 SF	# of Floors	1.00	Bldg. 50+	Age		
County (6)						(7) (STATE		Prior if being demo	lished	)		_	
Middlesex					E ONLY)		Apartments						
Name of Monitoring Fir (8) N/A	m Hired by Bui	lding Owner		ASCN	No.	Name of Abaten	nent Contractor  I Construction			- 1			
Street Address						tion, inc.							
						Street Address 1360 Clifton,	Avenue, PN	PMB Suite 218					
City, State, Zip Code						City, State, Zip C	ode					_	
Project Manager for Mo	onitoring Firm		Те	lephone	No.	Telephone No.		License No.					
						973-389-00	00693				_		
Start Date (10) 02/21/2013		Scheduled C 02/26/20		etion D	ate (11)	Name of OSHA I		n Inc					
Occupancy Status Duri	ng Abatement				-	Street Address	Constituctio	II, IIIC.				=	
Facility Closed/Vaca			75550 OFF			1360 Clifton, Avenue, PMB Suite 218							
Abatement Performe	ed Outside of N	ormal Facilit	у Но	urs		City, State, Zip C							
Other - Describe:						Clifton, NJ 0	7012					_	
Scope of Work (Check	all that apply)					Full Cor	ntainment with N	egative Pressure					
>3 sf or >3 lf >160 sf or >260 lf		⊠ Re		tion Iition		Mini-End Goveba	closure g Procedure						
								Non-Friable Proc	edure				
		7.00	ocati rmall						,	2.00	ment pe	i	
Location Asbestos-Containing M		Used	Sole	ly by	A - b	Description of			-	Γ,	,		
TO BE ABA		Cu	tenai stodi	al		stos Containing Mat , thermal systems in	sulation,	Amount (Specify	Į D		Enc	E E	
IN Facility (13)	у		taff? (12)			surfacing, VAT, other miscellaneo		SF or LF)	Remova	Repair	Encapsulate	Enclosure	
()				Т			,		val	air.	ılate	ure	
C1 C		Yes	No	N/A	D: /E	11 Y 1.4		200 1 5	-	_			
Crawl Space		- $ $ $  $		X	Pipe/E	lbow Insulation		200 LF	X			_	
				-					+	2			
					-				+				
Name of Registered Wa	ste Hauler		1	NJDEP \		Cubic Yards	Name of Reg	istered Landfill	1				
Service Transport G	estitute in the control of the control			lauler ID 20970		of Waste	Minerva L						
City, State			-1-	20710		Disposal Date	City, State					_	
New Castle, DE						02/26/2013	A STATE OF THE PARTY OF THE PAR	rg, OH 44688		100			
Completed By		Title		N.		Signature 0	X	Date					
Krutarth Jagad		President				1	1	02/11/	2013				

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#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) 02/11/2013							Owner/Operator rtment & Co			S. Nacional	~	8/	p	i
☐ EPA 🔀 Initi	lotification	n		610000	et Addres 55 US H		9			1		i Xi	19	<i>'</i> ڪِ
DOL Am	ended endment ergency (		<u></u>		, State, Zip d Bridge,						**	14	,	
☑ DOH	tification) cellation			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ne of Cont nadette P	-	el		Telep	hone Nun	iber	- 4		ζ.
					ACILITY IN	NFOF	RMATION							0000
Name of Facility Where Abateme Apartments Bldg.	nt is Takii	ng Plac	e (3)					Type of Facil School (K Subchapte	-12)	than K 1	2)			
Street Address 34 Appletree Lane							1 2 1	Other (i.e. homes, et	, private &			ilding	s,	
City (5) Old Bridge,								Square Feet 2000 SF		Floors	1	3ldg. 50+	Age	
County (6) Middlesex					unty Code E ONLY)	(7) (	STATE	Current Use ( Apartments	(Prior if being demolished) s Bldg.					
Name of Monitoring Firm Hired by N/A	Building	Owner		ASCN	No.			nent Contractor I Construction		Inc.				
Street Address					3		treet Address 360 Clifton,	Avenue, PN	PMB Suite 218					
City, State, Zip Code						Ci	ity, State, Zip C Clifton, NJ C	ode 07012						
Project Manager for Monitoring Fi	m		Те	lephone	No.	Te	elephone No. 973-389-008			nse No.				
Start Date (10)							ame of OSHA N							_
Occupancy Status During Abatem		-					reet Address	Constructio	m, mc.					
Facility Closed/Vacated During Abatement Performed Outside	Entire Pe	eriod of	Abat	ement		4 3 5 5 6	360 Clifton, ty, State, Zip C	Avenue, Pl	MB Suite	218				
Other - Describe:	or reorma	r r doint	, 110			5000	lifton, NJ 0							
Scope of Work (Check all that app >3 sf or >3 lf =160 sf or >260 lf	ly)		nova	tion lition			Mini-End	stainment with N closure g Procedure rempted (*) and			dure			
		No	ocati rmall	ly		1000000	1 THOREX	empted ( ) and	Tron-i na	DIC 1 TOCC		Abate	ment	
Location of Asbestos-Containing Material (Ad TO BE ABATED IN Facility (13)	CM)	s		nce/ al		, ther	Description of containing Mater mal systems in irfacing, VAT, er miscellaneo	sulation, or	Amo (Spe SF or	cify	Remova	Repair	Encapsulate	Enclosure
Crowl Space		Yes	No	N/A	D:/EI	11	Y - 1-4'		200 1 1	-	_		Ф	
Crawl Space			X	Pipe/El	lbow	Insulation		200 LI		X				
· · · · · · · · · · · · · · · · · · ·							*							
Name of Registered Waste Hauler	- 1		1	AJDEP '	Waste	Cu	bic Yards	Name of Reg	istered La	ndfill	1	. , .		
Service Transport Group			F	lauler II 20970	No.	of \	Waste	Minerva L						
City, State New Castle, DE			-1-	20970 3   Dis		posal Date /26/2013	City, State Waynesbu	rg, OH 4	4688					
Completed By Krutarth Jagad					Signature	~	J.	Date 02/11/2	2013		- 27			

UK 003047

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1 02/1)	) . 1/2013			Name	of Buildin	ng Owner/Operator ergen Departme	(2) ent of Public W	Vorks 🕏	39	1		
Agencies Notified	Type Notific	cation		Stree	t Address Bergen	County Plaza -	4th Floor		D,			ι
DEP DOL	Amende	nent #	-		State, Zip ( kensack,	Code NJ 07601		The same	C.	?		Ţ,
☑ DOH DCA	justifica  Cancella			1,000,000,000	of Contac			Telephone Numb	er	<del>'6</del>		
				FAC	CILITY IN	FORMATION	11.7			_		
Name of Facility When Community Service	e Abatement is ce Building	Taking Place	(3)		- 0		Type of Facility School (K-1) Subchapter		)			
Street Address 327 East Ridgewo	od Avenue						Other (i.e., homes, etc	private & commercia	l build	dings		
City (5) Paramus	od 11 tondo			,			Square Feet 50,000	# of Floors	13000	dg. A	ge	
County (6) Bergen				Cour	nty Code ONLY)	(7) (STATE		Prior if being demolis Service Building				
Name of Monitoring Fi	rm Hired by Bui	ilding Owner	=	ASCM	No.		nent Contractor (					
(8) Saban Enginee		Te .		N/A		DIA Genera		_				
Street Address					1	Street Address	5000 (Managament	7.00 (ESS) 20 ESS(MOLE)			1-1-2-2-2	
171 Windsor Stree	et, Suite 210		-			Section 1997	Avenue, PM	B Suite 218				_
City, State, Zip Code Kearny, NJ 07032						City, State, Zip C Clifton, NJ						
Project Manager for M	onitoring Firm		Tele	phone	No.	Telephone No.		License No.				
Stephen Pharai			212	2-372-	0338	973-389-00	89	00693				
Start Date (10) 02/22/2012		Scheduled C 02/23/201		tion Da	ite (11)	Name of OSHA DIA Genera	Monitor I Constructio	n, Inc.			í	
Occupancy Status Du	ring Abatement	(Check only	one)			Street Address		10.0 11.010				
Facility Closed/Vac	ated During Ent	tire Period of	Abate	ment		-	, Avenue, PN	IB Suite 218			_	_
Abatement Perform Other - Describe:	ed Outside of N 6:00 PM - 2:	ormal Facility :00 AM	/ Hou	rs		City, State, Zip C						_
Scope of Work (Check >3 sf or >3 If >160 sf or >260 If	all that apply)		novat emol			Mini-Er Goveb	ontainment with N nclosure ag Procedure (xempted (*) and	egative Pressure  Non-Friable Proce	dure			
		0.0000	ocatio							Abate Ty		ĺ
Locatic Asbestos-Containing <u>TO BE AB</u> IN Fac (13)	n Material (ACM NATED Ility	Used Mair Cu	Solei tenar istodia taff? (12)	ly by ice/ al	Asbes (i.e.	Description of stos Containing Ma , thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A				OI F		-	-	-
1st Floor Office A	rea			X	Elbow	Insulation	-	8LF	X		-	-
Name of Registered V	Vaste Hauler			NJDEP		Cubic Yards	Name of Reg	gistered Landfill		-		
Service Transport			_   1	lauler II 20990	) No.	of Waste	Minerva L	andfill	M			-
City, State			les to			Disposal Date	City, State	irg, OH 44688			**	
New Castle, DE						02/23/2013	waynesou	Date	-	_	-	_
Completed By Krutarth Jagad		Title Project M	1ana	ger		Signature	In	02/11/	2013			