page 1

CK9130 PAUL

8 & G proj. #: 2019-30

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) ***Emergency Sub 8***

Check 6136 3- 20197

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Date of Notification (1)	Name of	Building Own	er/Operator (2)	10							
0 12 1/10 16 1/119		Ridge Scho	ol District						Ž		
Apencies Notified Type Notification	Street Ad	dross.		Comments.	To de la companya de	N. C.		7		j.	-
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☑ DOL ☐ Amendme	nt Park	Ridge, NJ	07656		A. CANCERS C. W. C. A. CANCEL .	Land Silver		•			
E DOH	Name of	Contact				Telephone	Number				
DCA Cancellati	Robe	ert Wright				201-573	3-6000				
			LITY INFORM	ATION	100 por 100 po	1				1000	_
Name of facility where obstament is	aules alons (3)					Type of Fecility (4	}				
						₹ Bchool	(K · 12)	(4			
Park Ridge High School (Su	φ \$ }			-			pter 6 (Other hivste/Comm)	
Street Address							iomes, etc.				
2 Park Avenue						Square Feet #	of Fleets	1	8ldg.	1000	
City (5)	County (6)			1	ty Gode (7)	Current Use (Pri	2	-)	50 y		=
Park Ridge	Bergen			(Oran	a use only	school	ខ្យ ៤ ២៨បេដី ៩៤	II NGRE	Harl	40	
Name of Monitoring Firm Hired by B	dg, Owner (8)		ASCM No.	1	Name of Abatement C	The state of the s			QUINO:		
Westchaster Environments	ILLC		127		B & G Restoration	on, inc.		-		-	-
Street Address					Street Address						
1248 Wrights Lane					105 Ryerson Ro	390					was to have
Cay, State, Zip Code West Chester, NJ 19380				ligrary.	Lincoln Park, P	U 07035					
Project Manager for Manitoring Firm		Phone Num	ber		Telaphone Number	•	License Nur				
Matthew Abraham		610-996-3			(973)896-6869 Name of OSHA Monit		0037		-	Towns.	
Scheduled Start Date (10)	Sched. Com	elstion Date (11)		B & G Restorati						
02/08/2019	02/10/20	19			Street Address						
Occupancy Status During Abatamen	(Check only on	e)			106 Ryerson Ro	oad	i i	4111.030			
Facility closed/vscaled during of Abstement performed outside	entice period of s	batement.		1	City, State, Zip Code			Jan 100 Jan	Carro Post		
Planethor					LincolnPark, N.	07035					
Other-Describe: Start work		<u> </u>									_
Scope of Work (check all that apply Demoition	Renovation	- 1		E F	uli Containment wines	rative pressure	Glovebag	Biac	edun	9	
	150 si or 2260	f			Aini-enciosure	Ī	Non-friab	e pro	ncedi	ıre	
	is tocation nom		ely			7	F	T		E ·	E
Location of asbestos-containing	by maintenance	s/custodiel			sbestos-containing	Amount	6			n c	п
material to be abated in facility (13)	s(aff(12)			I (ACM)		(Specify S	FCT C		a	a	5
mount of the state		io NA					e			P .	-
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B & G Restaration, Inc.	1956		3		Grand Central	Landfill			-	-	
City, State Lincoln Park, NJ		Disposa	1 Date /11/2019		City, State Pens Argyl, PA					2522	
Completed by (Print of Tyre)	Title		Signature		The second second second		Date		-	-	
Gordana Luna	Sacretary/T	TO SECTION			Grapus Lane		02/06/	201	4	- les	

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #:

2019-30

Emergency Sub 8

Check # 9130

Date of Notification	(1)	Nam	ne of Build	ling Owne	r/Operator (2)				EC	FI	<u>M</u>	77.		
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Agencies Notified	Type Notification		et Addres							. 1 -				T
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⋉ DOH		1.1	e of Conta	act				11	Telephon	e Number	ar Mareke			
☐ DCA	Cancellat	ion F	Robert V	Vright					201-57	73-6000				
	Lameatonia			FACI	LITY INFORM	ATION	1							
Name of facility wh	nere abatement is	taking place	(3)						of Facility (1
Park Ridge H	igh School (Su	ub 8)								I (K - 12) apter 8 (Ot	her th	an K-	-12)	
Street Address									Other	(Private/Co	mme		/	
2 Park Avenu	ie							C		Homes, et		Blo	ig. Ag	0
City (5)		County	(6)			Col	inty Code (7)	Squa	are Feet	# 01 F1001s	1		yea	8
							ate use only)	Curr	ent Use (P	rior if being	dem			٦
Park Ridge		Berge				<u> </u>		sch						_
Name of Monitorin	ng Firm Hired by B Environmenta		8)		ASCM No. 127		Name of Abatemen							
to the second se	Environmenta	al LLC			127	_	B & G Restora	ation, In	C.					-
Street Address 1248 Wright	rs I ane					105 Ryerson	Road							
City, State, Zip Coo						City, State, Zip Cod	e	***************************************					-	
	er, NJ 19380						Lincoln Park	, NJ 07	035					
Project Manager fo	or Monitoring Firm		1	ne Numb			Telephone Number (973)696-68			License	Numb 378	er		
Matthew Ab	raham		610)-996-35	515		Name of OSHA Mo				3/0			+
Scheduled Start Da	ate (10)	Sched. C	Completion	n Date (11)		B & G Restora		IC.					
02/08/2019		02/10	/2019				Street Address							
Occupancy Status							105 Ryerson							
	ed/vacated during erformed outside					1	City, State, Zip Cod	е						
Describe:	ibe: start work						LincolnPark,	NJ 0703	35					
	heck all that apply		O DITI								-			Ŧ
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>3 sf or >3 t		≥160 sf or ≥2	260 If				Mini-enclosure			☐ Non-fr	iable	proce	dure	
	·	Is location r		sed solely	/						R	R	E	Π
Location of asbestos-co	ntaining	by maintena staff(12)			Descript		asbestos-containing		Amount	SE	e m	e p	n	1
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B & G Restora	ation, Inc.		1563	Diapaga! 5	3 Date		Grand Centra	I Landf	HI					-
City, State Lincoln Park,	NJ		ļ.	Disposal Di	1/2019		City, State Pens Argyl, F	PA						
Completed by (Pri		Title			Signature		1			Date				
Gordana Luna		Secretary	/Treasu	rer			Gordana Luna	:		02/0	3/20	19_		

page 1

2019-30A

B & G proj. #:

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State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:50-7 and 12:120-7)

			_		***Emer	gency	425	Check	9132			_
Date of Notification	1 (1)	11	Name of Buil	ding Own	er/Operator (2)	1	;	F.04	- 10 D	λÝ.	1.0	
10 12 1/10 17	1/11/19/	- 11			ol District	0.2	8.5		IU D	111	7	- 1
Agencies Notified	Type Notifical	ion	Street Addres		(V) (S) (S) (V) (V)		- Lawrence				-	+
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☐ DEP	_		City, State, Z	p Code		-	the financial production of the same of th	1-1-	MAY	- N		-
E DOL	Amenda	ment	Park Rid	lge, NJ (07656		*	MANE		P. 1 1 1 1 1 1	4	;
X DOH		1 1	Name of Con	tact				Yelephone		A		
☐ DCA	Cancell	ation	Robert \	Aright				201-67	3-6000			
	,			FACI	LITY INFORM	ATION				- Andrews		1
Name of facility wi	hera sbatement i	is taking p	lace (3)					Type of Facility (4>			
Park Ridge H	igh School (N	ION-Su	b 8)				9	School School		- th 1		
Straet Address							The second second		apter 8 (Othe Private/Com			
2 Park Avent	je –							Bidge /	Homas, etc.	CONTROL DESCRIPTION	lidg. A	-
City (5)		Cou	inty (8)			Cou	nity Code (7)	Square Feet	# of Floors 2	1	0 ye	
Park Ridge		R	ergen			1992	te use only)	Current Usa (Pr	lor if being d	DELT	AND DESCRIPTION	
Name of Monitorin	Cine Olyand hu				ASCM No.	Ц,	Name of Abstement	school	Marine Marine			
	Environmen		ici (u)		127							
Street Address				and the latest and th		-	B & G Restorat	ion, inc.	Manager of Street, or other Designation of the last of			-
1248 Wright	is Lane						105 Ryerson P	łoad				
City, State, Zip Coo	er, NJ 19380				OF STATE OF		City. State, Zip Code		Militaria Vinal		-	
			160		-		Lincoln Park,	NJ 07035		alisita (and the second
Project Manager for Matthew Ab		n	1	one Numb 0-996-35			Talephone Number (973)696-686	9	License Nu 0037			
Scheduled Start Da		Ische	d. Completio				Name of OSHA Mon				A STATE OF THE PARTY OF THE PAR	-
02/11/2019			/13/2019	0018 (1.	• •		B & G Restorat	ion, Inc.	-pr			
Occupancy Status	Duron Abateme		404000000000		- William		Street Address 105 Ryerson R	nad				
	d/vacated during		4000000 000000 000000 0000000000000000	ment.			City, State, Zip Code					
Abatement p Describe:	erformed outside	of norma	t facility hours	5-			O., y , +, to to ,p oo to					
Otner-Dascri	ibe: start work	3:00 pr	n			_	LincolnPark, N.	J 07035	***	4764		-
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Location of asbestos-cor	ntaining	by main	on normally u tenance/cust		1	an ni a	sbestos-containing	Amount	6	R	U E	E
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abates in sec	anny 1141	Yes	No	N/A				LF)	V e	1	P	. -
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Room # 102, 10	Charles of the Lorentz Commission of the Commiss	-	X		pipe (wra		THE RESERVE AND ADDRESS.	4 If, 4 f. 6	THE R. P. LEWIS CO., LANSING, MICH.	The same	10	니므
Room Guidanc	e Middle Rm	1	X		pipe (wra	THE PARTY OF		2 lf	2	-	岩	111
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Registered Wester		NJC	EP Hauler II	, C	ubic Yards of	vasle	Name of Registered			با ن		.1-
B & G Restora	tion, Inc.		19553	Disposal D	2		Grand Central	Landfill			_	
Lincoln Park, I	NJ				3/2019	-	Pens Argyl, PA		7200			
Completed by (Prin		Title Secret	ary/Treasu	rer	Bignature		Gordona Lana		Data 02/07/2	019		

B & G proj. #: 2019-30A

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

Emergency Date of Notification (1) Name of Building Owner/Operator (2) 10 12 1/10 17 1/11 19 1 Park Ridge School District Agencies Notified Type Notification Street Address EPA X 2 Park Avenue Initial DEP City, State, Zip Code X DOL Amendment Park Ridge, NJ 07656 X DOH Name of Contact Telephone Number Cancellation ☐ DCA Robert Wright 201-573-6000 **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Park Ridge High School (NON-Sub 8) Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial 2 Park Avenue Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 50 years (State use only) Current Use (Prior if being demolished) Park Ridge Bergen school Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) Westchester Environmental LLC 127 B & G Restoration, Inc. Street Address Street Address 1248 Wrights Lane 105 Ryerson Road City, State, Zip Code City, State, Zip Code West Chester, NJ 19380 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Phone Number Telephone Number License Number (973)696-6869 Matthew Abraham 610-996-3515 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 02/11/2019 02/13/2019 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: start work 3:00 pm Scope of Work (check all that apply) Demolition X Renovation Full Containment w/negative pressure Glovebag procedure × >3 sf or >3 If Mini-enclosure ≥160 sf or ≥260 lf Non-friable procedure Is location normally used solely Location of by maintenance/custodial e asbestos-containing n Amount Description of asbestos-containing staff(12) m n p material to be C (Specify SF or material (ACM) C 0 a abated in facility (13) a LF) Yes No N/A L p Room # 18, 20, 101 pipe (wrap & Cut) X 4 If, 2 If, 5 If Room # 102, 103B, 104 pipe (wrap & Cut) X 4 If, 4 f, 6 If X Room Guidance Middle Rm X pipe (wrap & cut) X 2 If Room 106 4 If X pipe (wrap & cut) X Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# B & G Restoration, Inc. 19563 Grand Central Landfill City, State Disposal Date City, State Lincoln Park, NJ 02/13/2019 Pens Argyl, PA Completed by (Print or Type) Signature Gordana Luna Gordana Luna Secretary/Treasurer 02/07/2019

State of NJ Notification of Asbestos Abatement

D&S Proj. #: 19-26 (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 0 2 / 0 7 / 1 9 1 FEB 1 3 2019 danise white Agencies Notified Type Notification Street Address ☐ EPA Initial Amended DEP City, State, Zip Code Amendment #: DOL M Emergency union, nj 07083 DOH. (including Name of Contact Telephone Number justification) DCA danise white Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) danise white Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) union Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 01169 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. 02/08/19 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure \times >3 sf or >3 If □ Renovation Mini-enclosure Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of by maintenance/custodial E asbestos-containing е e Amount Description of asbestos-containing staff(12) m n material (acm) to be p C (Specify SF or material (ACM) C abated in facility (13) 0 a LF) а Yes No N/A L p P BASEMENT PIPE INSULATION 30 l ft X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 1 yd. TULLYTOWN, RESOURCE RECOVERY City, State Disposal Date City, State PATERSON, NJ 07503 02/09/19 TULLYTOWN, PA Completed by (Print or Type) Title Signature Date **BOGDAN JOLDZIC** 02/07/19 * Do not use this form for asbestos licensure exempted activities. ASB-41

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Date of Notification (1) 02/06/19				of Building Owne				FEE	3 1	3 2	019	
Agencies Notified Type Notification EPA Initial			280	Address Huyler St			Į.					-1
DEP Amended Amendment Emergency			Sout	tate, Zip Code h Hackensack	, NJ 076	306	4	12.00	i de la companya de l			*-
DOH justification) Cancellation			Vero	of Contact nica Kero			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	phone N -489-8				
Name of Facility Where Abatement is Takin Willowbrook Mall	g Place	(3)	FAC	CILITY INFORMA	TION	Type of Facilit		1 2				
Street Address 50 Route 46		15				Subchap	ter 8 (Othe e. private &	r than K- commer	12) cial bu	ildings	s, hon	nes,
City (5) Wayne						Square Feet N/A	# of I	Floors		Bldg. N/A	Age	
County (6) Passaic			(STATE	Code (7) USE ONLY)		Current Use (F Parking Lot			shed)			
Name of Monitoring Firm Hired by Building (N/A) Street Address	Owner (8)	N/A	M No.	WRS	of Abatement C Environmer	contractor (sontractor (sontractor)	9) ces, Ind	5 .			
N/A City, State, Zip Code					17 0	Address Id Dock Rd						
N/A Project Manager for Monitoring Firm			Telepho	one No.	Yaph	itate, Zip Code nank, NY 119 none No.		License N	la.			
N/A Start Date (10)	Schedul	ed Co	N/A	Date (11)	631-9	924-8111 of OSHA Monito	(01136	VO.			
02/19/19 Occupancy Status During Abatement (Check	04/19/ Only O				WRS	Environmen Address		ces, Inc).			
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Exterior / construction	al Facility	Abater / Hour	ment s	報		ld Dock Rd tate, Zip Code	100					
Scope of Work (Check All That Apply)	ii aica				Yaph	ank, NY 119	80		-02			111800
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	- Income	Renova Demoli			×	Full Containr Mini-Enclosu Glovebag Pro Non-Exempte	ire ocedure				e.	
Location of	1	Locat	lly	De	scription					Abate	ement rpe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Sole intena codial s (12)	nce/	Asbestos Con (i.e. thermal surfa	taining M	aterial (ACM) insulation, , or	Amo (Spe SF or	ecify	Removal	Repair	Encapsulate	Enclosure
Parking lot			×	Trai	nsite pip	pe	150) If	X			
Name of Registered Waste Hauler		0.00	JDEP W			Name of	Registered	d Landfill				
ATC City, State		10 B (COP)	W2431	0 10			ind Comp	oany				
Shirley, NY				Dispos TBD	al Date	City, Stat						
Completed by Raymond Tutiven	Title Super	visor		8	gnature eyme	nd Tut	 	- Dat 02	e /06/1	9		



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

CK# 6200

02-08-2019				Nam	e of Build	ing Owne	er/Operator		- 170 AT - 70 GA		CA	-77	02	, oc
Agencies Notified	Type Notificati	on		Stree	eport-M	3		rwich & Bayv	vay Open	atione)	W	E	t more
EPA DEP X DOL	Initial Amended			City,	94 Bayv State, Zip	Code			FE	B 1	3 2	010		
DOH DCA	Emergen justification	n)	ng	Name	abeth, Ne of Conta Christor	ict			/ Telepi	hone Nu	mbe		- !	
N					CILITY				908-	5584	313			
Name of Facility Where Freeport-McMorar	Abatement is Ta	king Place	(3)		.0.2	U OKWA	CHON	Type of Facility	(4)	And Andrews	11.5			-
Street Address 48-94 Bayway Ave	9							School (K-Subchapte Other (i.e.	-12) er 8 (Other t private & co	han K-1	2) ial bu	uildina	is ho	mes
City (5) Elizabeth								etc.) Square Feet	# of Flo		1		. Age	
County (6)				Count	Cada (7			50,000	1			50÷		
Union				(STATE	y Code (7 E USE ON	, ,		Current Use (Pr Copper Proc	ior if being o	demolish acility	hed)			
Name of Monitoring Firm	n Hired by Buildin	g Owner (8)	ASC	CM No.		Name o	f Abatement Co	ntractor (9)					
Street Address							Street A	at Diagnostic	ELLC					-
City, State, Zip Code								enwild Ave						
Project Manage Co.								ite, Zip Code ningdale, NJ (07403					
Project Manager for Mor	nitoring Firm			Teleph	one No.		Telepho		Lic	ense No	0.	-		
Start Date (10) 02-19-2019		Schedu	led Co	mpletion	Date (11)		OSHA Monitor	01	181				
Occupancy Status During	g Abatement (Che	03-19	-2019)				at Diagnostic	LLC					
Facility Closed/Vaca	ated During Entire	Pariod of	Aboto	ment			Street Ad	ddress nwild Ave						
Abatement Perform Other - Describe: \(\)	ed Utiliside of Nor	mal Facilit	V Laur				City, Sta	te, Zip Code						
Scope of Work (Check Al							Bloom	ingdale, NJ (7403					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		The same of the sa	Renova Demoli				×	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure					
Location			Locat Vormal						() and ivoi	I-I Habie	5 F10	Abat	emen	t
Aspestos-Containing I TO BE ABA	Material (ACM)	Use	d Sole	ly by	Asbes	tos Cont	scription of aining Mate	erial (ACM)	Amoun			1	/ре	I
In Facilit (13)		Cus	todial S (12)		(i.e.	thermal . surfac	systems in cing, VAT, on scellaneo	sulation, or	(Specif SF or Li	y	Remova	Repair	Encapsulate	Enclosure
Extrucion 6	26	Yes	No	N/A							3		ate	re
Extrusion S Exrerior near Extr				X			aulking /		200 LF	-	Х	X	Χ	
Exicitor flear Extr	usion Snop			X	Т	ransite	Stabiliza	ition	200 SF	=		Χ		
		1					-					_		
Name of Registered Waste				JDEP Wa		Cubic \	Yards	Name of Re	egistered La	andfill				
Hazmat Diagnostic LL City, State	_C			auler ID 1 35440	9.000	of Wast	te	1	nd Centra		fill			
Bloomingdale, NJ						Disposa TBD	al Date	City, State	5.					
Completed by		Title					gnature	Pen Argi	, PA	15				
atiana Rotaru						Ra	L		Date 02/0	8/2	019			



1311	i	6199
CR	.77	0111

Date of Notification (1) 2/7/2019				of Building							2	M	
Book of 1500, William 1853	T NI-1/5 1/-				Plank	LLC C/	O Wilson Asso	clates	3 ,	751 1	= U		1.022 p.m.y
Agencies Notified	Type Notification			Address	I Dlava	Suito 1	1200	1:77			21		1
EPA	X Initial			urray Hil		, Suite	1290		F	EB_	13	2019	- [
DEP X DOL	Amended Amendment #	1		ate, Zip C		07012			1				-
	Emergency (in			Rutherfo	No. 30 pt 10	0/013		1	Lames				
DOH DCA	justification) Cancellation		Lee N	of Contact					phone N 1-410-2				4.25
L DCA	Cancellation			ILITY INF	ODSEAT	101		20	1-4 10-2	./ 0.3,	- 1 10 - 10	141112	2 (
Name of Facility Where	Abatement is Taking	Place (3)	FAC	ILIT INF	ORMAT	ION	Type of Facility (4)					
Former Bank of An	_						PRINTER						
Street Address							School (K-1 Subchapter		er than K-	-12)			
192 Paterson Plan	k Rd.						Other (i.e. p				ildings	home	es,
City (5)							etc.) Square Feet	# of	Floors	-	Bldg. A	Age	
Caristadt							0	0	1 10013	- 4	0	.gc	
County (6)			County	Code (7)			Current Use (Price	or if heir	na demali	ished)	Š		
Bergen				USE ONLY)		Former Bank						
Name of Monitoring Firm	n Hired by Building O	wner (8)	ASC	M No.		Name o	of Abatement Con						-
N/A						The second second second	nat Diagnostic		New York				
Street Address							Address						-
						16 GI	enwild Ave						
City, State, Zip Code						City, St	ate, Zip Code						
						1 (2)	ningdale, NJ 0	7403					
Project Manager for Mor	nitoring Firm		Telepho	one No.		Telepho	one No.	T	License	No.			
						973 9	28 3995		01181				
Start Date (10)		Scheduled	Completion	Date (11)		Name o	of OSHA Monitor	-					
						Hazm	nat Diagnostic	LLC					
Occupancy Status Durin	g Abatement (Check	Only One)			Street A	Address						
Facility Closed/Vac	ated During Entire Pe	eriod of Ab	atement			Hazm	nat Diagnostic	LLC					
Abatement Perform	ned Outside of Norma					City, St	ate, Zip Code						
	exterior work of excav	ateu trans	te pipe	THE STATE OF		Bloor	ningdale, NJ (7403					
Scope of Work (Check A	All That Apply)												
≥3 sf or ≥3 lf		- manual	novation				Full Containme		Negative	Press	ure		
≥160 sf or ≥260 lf		× De	molition			-	Mini-Enclosure Glovebag Prod						
						×	Non-Exempted		Non-Fria	able Pr	ocedu	e	
		ls L	ocation									emen	t
Location	n of		rmally	į	De	scription	of				T	/pe	
Asbestos-Containing			Solely by tenance/		tos Con	taining Ma	aterial (ACM)		nount			m	E
TO BE AB			dial Staff?	(i.e.		systems cing, VAT	insulation,		pecify or LF)	Ren	Re	ıcar	ncl
(13)			(12)			miscellane		0,	0. 2. /	Remova	Repair	Encapsulate	Enclosure
		Yes	No N/A	7						=		ate	6
Exterior Transite Pi	ne staged onsite		X		Tra	nsite Pi	ne .	15	0 LF	X	+		+
Exterior Transito Fig	pe staged offsite	-		-	IIa	risite i i	Je	10	O LI	1	+		-
				1									
							77						
Name of Registered Wa	ste Hauler	-	NJDEP V	Vaste	Cubic	Yards	Name of F	Register	red Landi	fill		_	1
Newark Carting			Hauler ID	No.	of Wa		Fairless	ā.					
	14		4509		30 C.								
City, State						sal Date	City, State		٨				
Newark, NJ		Title			TBD		Morrisv	iile, PA					
Completed by Tatiana Rotaru			S	Signature	2/		119	Date	110				
ratiaria Rotaru				1	infer!			2/7/20	119				

CK1911 PATT			CATIO	tate of Ne N OF ASB t to NJAC	ESTO	ABATE		п			15	mentana.	W	Ē.	
Date of Notification (1) 2/8/19				of Building Clark	Owner	/Operator	r (2)	5.		FEB	1	3	2019		رديا
Agencies Notified Type Notification Initial			Street A	Address). S.	en in i					
DEP Amended Amendment #				ate, Zip Co ale, NJ (1 - 1 - A	i.s.i.		7		
DOH Emergency (ii justification) Cancellation	nciuding		Name of Dave	of Contact Clark					Tel	ephone N	Numb	er			
			FAC	ILITY INF	ORMA	TION									
Name of Facility Where Abatement is Taking	Place (3)					Тур	oe of Facility	(4)						
Residential Home Street Address							×	School (K- Subchapte Other (i.e.	r 8 (Oth			build	lings,	home	es,
City (5) Hillsdale								etc.) uare Feet '50	# 0	f Floors		0.000	ldg. A		
County (6)			County	Code (7)			- W.	rrent Use (Pr		na domoi	licho	18.00	5 +/-		-100
Bergen	-/-		(STATE	USE ONLY	_		Re	esidential I	Home	570	iisne	u)			
Name of Monitoring Firm Hired by Building O Project Manager	wner (8)	ASCI	VI No.			stage	batement Co es Abatem		(9)					
Street Address									e.						
City, State, Zip Code				100000000000000000000000000000000000000		Zip Code Brook, NJ	07663								
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 201-		No. -3184		License					
	Schedul 2/14/1		pletion	Date (11)		Name	of O	SHA Monitor							
Occupancy Status During Abatement (Check	Only O	ne)				Street	Addı	ress							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: 8 A.M to 4 P.M	eriod of	Abatem y Hours	ent			City, S	state,	Zip Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 If ≥ 160 sf or ≥260 If	_	Renovat Demoliti		,		×	N C	full Containm Ini-Enclosur Glovebag Pro Ion-Exempte	e cedure					e	
	20,00	Location										9		ment	
Location of		Normall ed Solel				escription					-		1 9	pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Cus	intenan todial S (12)	taff?		therma surfa	itaining iv il systems acing, VA miscellar	s insu T, or	9	(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											O .	
1st Floor		X				VAT				99 SF	>	(
1st Floor		X				Mastic			49	99 SF	+			X	
											+				
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic	Yards		Name of	Registe	red Land	fill				
All Stages Abatement		Ha	auler ID 36592	No.	of Wa			7707		al Sanita		Lan	dfill		
City, State Saddle Brook, NJ					Dispo	sal Date		City, Stat Pen Ar		Ą					
Completed by Richard Cristofol	Title Pres	ident			1	Signature			7]	Date 2/8/				

PAID

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

Ch#1173

Date of Notification (1)		Name o	f Building	Owner/0	Operator	r (2))++	-11_	/					
02/08/2019					field Hal		W			ini (FP	E	7 1	17	27 17
Agencies Notified	Type Notification			Street A	ddress					1/5			11 /		
□ EPA	X Initial			10 Te	ch Dr. N	1			1						
DEP	Amended			City, Sta	ate, Zip Co	ode					FEE	3 1 3	20	10	
₩ DOL	Amendment Emergency		_	Warre	en, NJ (7059			100			,	20	IJ	harmen a
⋈ DOH	justification)			Name o	f Contact					Tel	ephone I	Numbe	r		
DCA	Cancellation	ì		Charle						97	3-980-	2821			
Name of Facility Where	Abotomont in Tabia	- DI (O		FACI	ILITY INF	ORMAT	ION				*G = 1 F = 4	ige∳ _e) σ	1	group of a	
Private residence	Abatement is Takir	ig Place (3)					Туре	of Facility (4	4)					
Street Address									School (K-1	2)					
ou cet Address								×	Subchapter Other (i.e. p	8 (Oth	er than k	(-12) ercial h	uildina	is h	mes
City (5)									etc.)		1000	or order b			
Warren, NJ 07059	r.							Squa	re Feet	# 0	Floors		Bldg	. Age	
County (6)				0	0 1 (7)										
Somerset					Code (7) USE ONLY)		Curre	nt Use (Pric	r if bei	ng demo	lished)			
Name of Monitoring Firm	Hired by Ruilding	Owner (8)		ASCN	4 No		LMana	- F A L			(0)				
Traine of mornioning Fini	Thired by ballang	Owner (o)		ASCI	A NO.				tement Con		(9)				
Street Address								Addres	Safety LL	<u></u>		-7//			
							- management	rosby							
City, State, Zip Code									ip Code						
Control Contro						and the same of th		NJ 07502	2						
Project Manager for Mon	itoring Firm	T	Telepho	ne No.			hone No		-	License	a No				
Action Professor (Action to Company Control of Cont			Тогорию				-400-8			01332					
Start Date (10)		Schedule	d Cor	npletion	Date (11)		45.55.55		A Monitor		01002	-			
02/18/2019		02/21/2			,			ne as (
Occupancy Status During	g Abatement (Chec	k Only One	e)			_		Addres							
Facility Closed/Vac	ated During Entire I	Period of A	baten	nent											
Abatement Perform	ed Outside of Norn	nal Facility	Hours	5			City, S	State, Zi	p Code						
						_									
Scope of Work (Check A	II That Apply)														
≥3 sf or ≥3 lf		-	enova					Full	l Containme	nt with	Negativ	e Pres	sure		
× ≥160 sf or ≥260 lf		× D	emolit	tion			×	Min	i-Enclosure		-				
									vebag Proc n-Exempted		d Non-Fr	iable P	roceo	ure	
		Is	Locat	ion									USA	atem	ent
Location	of	N	ormal	ly		De	scription	n of						Туре	
Asbestos-Containing			l Sole ntena			tos Cont	taining N	Material		A	mount			ı	п 📗
TO BE ABA			odial S	Staff?	(i.e.	thermal	system: cing, VA		ition,		pecify or LF)	2			Encl
(13)			(12)				niscellar			Oi	OI LI)	Neillova	Keball	The second secon	Enclosure
		Yes	No	N/A								1 2	-	2	e e
First flo		x		El	oor tile			40	VE OF		+	+	_		
1 1101 110	701	+		^		1.1	oor the			42	25 SF	X	_	×	
							-								
Name of Registered Was	te Hauler	-		JDEP W		Cubic			Name of F	Registe	red Land	dfill			
Removal Safety, LL	C		5.0	lauler ID 037007		of Was	ste		Fairless	;					
City, State			10	03/00/			sal Date						_		
Paterson, NJ						TBD	odi Dale		City, State Morrisvi		Δ				
Completed by Title							ignature	-)	/ /	, F		Date			
Lasko Veskov	dent			10	(d)	1	Lest	UT	-	02/0	3/20	19			

State of NJ Notification of Asbestos Abatement (Pursuant to NIAC 8:60 and 13:130)

D&S Proj. #: 19-24	700 A	THE STATE OF THE S				os Abatement 0 and 12:120)		E	G E				
(V 74100	PA	ALL)								100 PC		
Date of Notification (1)		Name of	f Building Ow	ner/Operator (2	2)			- H	EB 1	3 20	19	-	111
0 2 / 0 8 / 1 9		jim de	rose					1					
Agencies Notified Type Notifica	ation	Street Ad	ddress					f and a second		14.	X-1-		
DEP Amended	- 11							10 10 10 10 10 10 10 10 10 10 10 10 10 1	1	12.00			
DOL Amendment #	ŧ [City, Sta	te, Zip Code										
Emergency	1.1.		tainside, nj	07092									
justification) 1	Name of	Contact					Telephor	ne Numb	er			
DCA Cancellatio	n	jim d	e rose										
			FAC	ILITY INFORM	IATIO	N							
Name of facility where abatement	is taking pl	ace (3)						Type of Facility	(4) ol (K - 12	1			
jim de rose									apter 8 (than k	(12)	
Street Address							٦		(Private/			(-12)	
								Bldgs.	Homes,	etc.	S-CHANGE ALCOHOLOGICA		
City (5)	Cou	inty (6)			Cor	unty Code (7)	=	Square Feet	# of Floo	ors	B	ldg. /	Age
mountainside						ate use only)		Current Use (P	rior if bei	ng der	nolish	ed)	
Name of Monitoring Firm Hired by	Bldg. Own			ASCM No.	Ц,	Name of Abatem	nen	t Contractor (9)					
		W. 3.		, 10 0 111 1101				RATION, INC.					
Street Address					-	Street Address		diffort, five.					
						20 California	a A	ve.					
City, State, Zip Code						City, State, Zip Co	ode)		A-W-118	W	-	
D.: 114						Paterson, NJ	_	7503					
Project Manager for Monitoring Firm	1		Phone Numb	er		Telephone Numb			License				
Ot-+ D-1 (10)						973-345-80 Name of OSHA M	_)1169			
Start Date (10)	Sched	I. Comple	etion Date (1	1)		D & S Resto							
02/13/19	02/28					Street Address		,					
Occupancy Status During Abatemer						20 California	A	venue					
Facility closed/vacated during Abatement performed outside	entire peri	od of aba	atement. nurs-			City, State, Zip Co	ode)					
Describe: NORMAL H		idoliity iit			_								
Scope of Work (check all that apply					-	Paterson, NJ	_						
\boxtimes >3 sf or >3 lf	Renovatio	.22						Full Containment w	/negative	press	sure		
							H	Mini-enclosure Glovebag procedur	e				
	Demolition		hiiinaad aalah					Non-Exempted (*)			_	edur	e
Location of asbestos-containing	by mainte		ly used solely ustodial			DECEMBER OF		Amount		R	R	E n	E
material (acm) to be	staff(12)			material (A	n of a ACM)	sbestos-containing	3	(Specify S	F or	m	р	С	n
abated in facility (13)	Yes	No	N/A					LF)		V	i	a p	L
GARAGE		X		duct INSUL	ATIO	ON		55 sq ft		e	r	П	\vdash
BASEMENT BOILER ROOM		X		duct INSUL	ATIO	ON		7 sq ft		×		Ħ	古
Registered Waste Hauler		DV		I-1- V- 1 211	, .								
D & S RESTORATION, INC.	NJDE 135	P Haule 06	1	ubic Yards of W yd	vaste	Name of Registe TULLYTOW		Landfill RESOURCE RE	COVER	RY			
PATERSON, NJ 07503			Disposal Di 02/14/19			City, State TULLYTOW							
Completed by (Print or Type)	Title		1	Signature		TOLLITOW	. 1,	,	Date			_	
BOGDAN JOLDZIC	PRESID								02/08/	19			
ACD 44 *	Do not use	a thin for	- for ash t -	- Carrer		1 17 111	_						

State of NJ

D&S Proj. #: 19-25		N A W	Not	ification of A	sbes	stos Abatement	A CONTRACTOR	Pot-separate	tellorene paragraphic		v. *	
CK7410	<u> </u>	FALL	(Pur	suant to NJA	C 8	:60 and 12:120)	Ē			M_{-}	Ē.,	
Date of Notification (1)	4	Name of	Building Ov	wner/Operator (2)						_	
10 12 1/10 17 1/11 19		0.000	rubenstein		,			FEB 1	3 2	019	1	
Agencies Notified Type Notifi EPA Initial	cation	Street Ac										F
DEP Amended							F			l ě	41.2	
DOL Amendment	#:	City, Stat	e, Zip Code								***	
L Emergend	су	SO. C	RANGE,	NJ 07079								
DOH (including justification		Name of (Contact				Teleph	none Numb	per			
DCA Cancellat	ion	philip	rubenstei	n			1					
N			FA	CILITY INFORM	/ATIO	NC						
Name of facility where abatemen	t is taking	place (3)					Type of Facilit	y (4)				
philip rubenstein							Sch	ool (K - 1	2)			
Street Address					_			chapter 8				?)
							Othe Bldg	er (Private/ s./Homes,	Comm etc.	ercia	i	
City (5)	Co	unty (6)			Co	ounty Code (7)	Square Feet	# of Flo	ors		3ldg.	Age
SO. ORANGE	Po	ssex				tate use only)	Current Use	Prior if be	ing der	nolis	hed)	
Name of Monitoring Firm Hired by				ASCM No.	L	Name of Abatement	Contractor (9)					
						D & S RESTOR						
Street Address				1		Street Address	TITION, INC.					
City, State, Zip Code						20 California A	ve.					
ony, otate, zip code						City, State, Zip Code					200 200	
Project Manager for Monitoring Fire	m	I	hone Numb			Paterson, NJ 07	503					
,g.			none num	ber	- 1	Telephone Number 973-345-8020		License		oer		
Start Date (10)	ISche	ed Comple	tion Date (1	1)	_	Name of OSHA Mon	itor)1169	_		
02/21/19			non Date (1	17		D & S Restorati						
Occupancy Status During Abateme	nt (Check	29/19 only one)			_	Street Address						
Facility closed/vacated during	entire pe	riod of abat	ement			20 California Av	enue					
Abatement performed outside Describe:	of norma	facility hou	ırs-			City, State, Zip Code						
Other-Describe: NORMAL I	IOURS				-	Paterson, NJ 07.	503					
Scope of Work (check all that appl	y)				_							
\boxtimes >3 sf or >3 lf	Renovati	on					Full Containment Mini-enclosure	w/negative	press	ure		
≥160'sf or ≥260 lf	Demolitio	n					Glovebag procedu					
Location of	Is location	n normally	used solely	/			Non-Exempted (*	and Non-	friable R I	proc R		е
asbestos-containing material (acm) to be	by maint staff(12)	enance/cus	stodial	Description	n of a	sbestos-containing	Amount		e	e	E n	E
abated in facility (13)	Yes	No	N/A	material (A	CM)	3	(Specify S	SF or	m o	p a	c a	n
BASEMENT		110	IN/A	DVDE D (OL)					v e	i r	р	L
2. TOBINDITI		X		PIPE INSUL	ATI	ION	195 1 ft		M			
					-				띧			10
									빒	닉	Ц	1
Registered Waste Hauler		EP Hauler I	D# Cu	ubic Yards of Wa	aste	Name of Registered L	andfill				Ц	
D & S RESTORATION, INC.	135	006		yds.		TULLYTOWN, F	RESOURCE RE	COVER	Y			
PATERSON, NJ 07503			Disposal Da 02/22/19			City, State						
completed by (Print or Type)	Title		02/22/19	Signature	_	TULLYTOWN, I	PA	T -				
BOGDAN JOLDZIC	PRESID	ENT						Date 02/07/1	0			
ASB-41 *	Do not us	e this form	for asbestos	s licensure exen	nnten	activities		02/07/	9			





							,	A THE PROPERTY OF THE PARTY OF	_					
Date of Notification (1) 02 /	04 /	19			ne of Buildi 'erizon	ing Owner/Operator	(2)	EG	E		7	3 !		
Agencies Notified	Type Notification	'n									0/44			
⊠ EPA	☐ Initial	7 11		1	et Address			FEB	1 :	200	10			
□ DOLWD	☐ Amended				Verizon V			TLD	1 ,	3 20	9	1 1		
□ DHSS	Amendment		_		, State, Zip			-				ż		
DCA (NJAC 5:23-8)	☐ Emergency justification)	(includi	ng	_	asking Ri			12.30		11.5	1	20		
(110/10/0.20-0)	☐ Cancellation					3707		Telephone Nur		1111	toprost.			
					rian Tiltor			301-802-51	12					
Name of Eacility Where A	hata			F.	ACILITY I	NFORMATION								
Name of Facility Where A	ibatement is Tak	ing Pla	ce (3)				Type of Facility							
Street Address							School (K-1	2)						
1206 Wesley Avenu	_						Subchapter	8 (Other than K-1 private and comme	2)	uildin	~~			
City (5)	e						homes, etc.)	erciar	Juliani	gs,			
							Square Feet	# of Floors	1	Bldg. A	ge			
Ocean City, NJ 0822	26						10,000	1		50	•			
County (6)				Cou	unty Code (7)(STATE USE ONLY)	Current Use (P	rior if being demol						
Cape May								, , , , , , , , , , , , , , , , , , , ,						
Name of Monitoring Firm			(8)	ASCN	I No.	Name of Abatem	ent Contractor (9)	tor (9)						
USA Environmental	Managaemen	t Inc.				JVN Restora		5						
Street Address						Street Address								
8436 Enterprise Ave	nue					47 Foster Ro	ad							
City, State, Zip Code						City, State, Zip Co	ode			in the second				
Philadelphia, PA 191						Staten Island								
Project Manager for Monit	oring Firm		Tel	ephone	No.	Telephone No.		License No.						
Mark Jenkins			2	15-36	5-5810	718-605-6256		00774						
Start Date (10)	Sche	duled (Comple	etion Da	ate (11)	Name of OSHA M		00/14						
02 /25 / _	19	03_	/ _ 3	1_ /	_19	Testor Tech								
Occupancy Status During	Abatement (Chec	ck only	one)			Street Address								
☐ Facility Closed/Vacated	During Entire Pe	eriod of	Abate	ment		10 59 Jackson	n Avonuo							
	Dutside of Norma	I Facili	v Hou	rs - Des	scribe	City, State, Zip Co								
Time of Abatement:	AMP	M/ <u>5:0</u> ()PM- <u>1</u>	:30AM		LIC NY 11101								
Scope of Work (Check all t	hat apply)					2.0 111 11101								
≥3 sf or ≥3 If		-				□ Full Conta	ainment with Neg	ative Pressure						
≥160 sf or ≥260 lf			enovati			☐ Mini-Encl	osure							
			, i i o i i ci c	,,,		☐ Glovebag	Procedure	n-Friable Procedu						
		12	Locat				1,5100 () 0.10 1(0)	Triable Flocedu	-					
Location of Asbestos-Containing Management	: 		Norma ed Sole			Description of				ateme		ype		
TO BE ABAT	ED		intena		Asbes	stos Containing Mat	erial (ACM)	Amount	Ren	Repair	Enc	Enc		
IN Facility		Cus	todial	Staff?	(1.6.	, thermal systems in surfacing, VAT,		(Specify SF or LF)	Removal	air	aps	Enclosure		
(13)		Vac	(12)	1	-	other miscellaneo	us)	or or Er)	<u>m</u>		Encapsulate	ıre		
Ground Floor A/C Equi	pment Room	Yes	No	N/A	Duct Ins	ulation		4 000 0=	-		ie _			
Ground Floor A/C Equi					Pipe Ins			1,000 SF						
Ground Floor A/C Equi						e and Mastic		100 LF				Ш		
	p		П		11001 111	e and wastic		100 SF						
Name of Registered Waste	Hauler	ш		IDED V	Vasta	0.1: 1. 1.								
Newark Carting	11/1/2001	JDEP Waste Cubic Yards of Name of Registered Landfill Waste					7		- 100					
City, State	1000000	NJ-56	6	20	G.R.O.W.S.,	, Inc.								
Newark, NJ						Disposal Date	City, State							
				03/15/19	Morrisville,	PA								
Completed By (Print or Type				Signature /	// //	Dat	e	-						
Ralph Barnhardt	P	roject	Mana	ager		1/1/h 1/2 -) 02-04-20								
SB-41							11-1-	0	pas .			- 1		

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7 Name of Building Owner / Operator (2) Date of Notification (1) 06 07 18 Mondelez International Street Address Agencies Notified Type of Notification 2211 Route 208 North 7 **EPA** Initial City, State, Zip Code DEP 1 Amended Fairlawn, New Jersey, 07410 1 DOH Amendment # 3 Name of Contact Telephone Number 1 DOL Emergency w/ justification PETER VILLANO 201-794-4000 Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Mondelez International School (K-12) Street Address Subchapter 8 (Other than K-12) 2211 Route 208 Other (I.e., private & cmmercial bldgs., homes, etc.) City (5) County (6) County Code (7) Square Feet # Of Floors **Building Age** Fairlawn Bergen 1,000,000 Current Use (Prior if being demolished) 40 + Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM NO NORTHSTAR CONTRACTING GROUP, INC. Street Address Street Address 907 Doolittle Drive City, State, Zip Code 32 Williams Parkway Bridgewater, NJ 08807 City, State, Zip Code Project Mngr. For Monitoring Firm Telephone Number Eric Houseknecth 908-218-1108 East Hanover, NJ 07936 Sheduled Start Date (10) Sched. Completetion Date (11) Telephone Number License Number 24 19 973-884-8682 00860 Occupancy Status During Abatement (Check Only 1) Name of OSHA Monitor Facility Closed/Vacated During Entire Period of NORTHSTAR CONTRACTING GROUP, INC. Street Address Abatement Performed Outside of Normal Facility Hours - Describe: __ MON-FRI 32 Williams Parkway 1 Other - Describe: __ 7:00AM - 3;30PM City, State, Zip Code East Hanover, NJ 07936 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Demolition Renovation >3sf or >3lf Mini - Enclosure ≥160 sf or ≥260 If 1 Glovebag Procedure

Location of	ls	Desci	ription of		Abatem	ent Type		
Asbestos Containing	Location	Asbestos	- Containing		R	I	E	E
	Normally	Mater	ial (ACM)	Amount	E	R	N	N
TO BE ABATED	Used	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mal systems	(Specify	M	E	С	C
in Facility	Solely		surfacing, VAT,	SF or LF)	0	P	Α	L
(13)	by Main-	or other m	iscellaneous)		V	A	P	0
	tenance/				Α	1	S	S
	Custodial				L	R	U	U
The state of the s	Staff (12)						L	R
0110 El 000 01 El 1110	YES NO N/A							
2ND FLOOR OVEN#7		ROLLER GASKETS		80 SF	7			
2ND FLOOR OVEN#7		TRANSITE		100 SF	7			
2ND FLOOR OVEN#7		GASKET		4,000 SF	7			
2ND FLOOR BAKE SHOP		PIPE & FITTING		60 LF	7			
Name of Registered Waste Ha	uler	NJDEP Waste Cubic	Name of Registe	ered Landfill				
NEWARK CARTING		Hauler ID No. Yards	GROWS					
NORTHSTAR CONTRACTING	GROUP, INC.	4509 of Was	te					
NORTHSTAR CONTRACTING City, State	GROUP, INC.		te	*/***				_
NEWARK, NJ		Date	Morrisville, PA 1	9067				

Signature

Date

02/11/19

Title

Project Manager

EAST HANOVER, NJ Completed by (Print or Type)

Location of Asbestos Containing TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff (12)	Description of Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abateme R E M O V A L	R E P A I	ENCAPSUL	E N C L O S U R
	YES NO N/A						1
MEZZANINE		PIPE & FITTING	4 LF	7			1
DC WAREHOUSE		PIPE & FITTING	6 LF	7			
1ST FLOOR BAKERY		PIPE & FITTING	5 SF	V	1		
BOILER ROOM		BOILER JACKET	10 SF	~			
DC CHARGING AREA		PIPE & FITTING	15 LF	V			



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u	21	m	M.	24	2	200	m	

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Date of Notification (1) 02/11/19			Atlar	of Building ntic Mana			(2)	100	F	EB	1 3	2019)	
Agencies Notified Type Notification EPA Initial				Address Paterso	n Plan	k Road	y W				-same			<u> </u>
DEP Amended Amendment				State, Zip C Iucus, NJ		4		1, 20 %						-0 G-1
■ DOH justification) ■ DCA Cancellation		g		of Contact Miller					Teleph 201-8			r		
Name of Facility Where Abatement is Takin	a Place	(3)	FAC	CILITY INF	ORMAT	ION			201		1210			
500 South Center Street	g i lace	(5)					Type of Fa	ol (K-12)						
Street Address 500 South Center Street							Subc X Other	hapter 8 (i.e. priv	(Other ti	han K	-12) rcial bu	uildings	s, hon	nes,
City (5) Orange							etc.) Square Fe	et	# of Flo	oors		Bldg.	Age	
County (6) Essex				Code (7))		Current Us	e (Prior i	if being o	demol	ished)			
Name of Monitoring Firm Hired by Building (Owner (8	3)	ASC	M No.		Name o	of Abateme	nt Contra	actor (9)	ı.s				
Street Address						Street	Address							
City, State, Zip Code				-		City, St	ate, Zip Co	de						
Project Manager for Monitoring Firm	Project Manager for Monitoring Firm							10 007	Lic	cense	No.			
Start Date (10) 02/21/19	Date (11)		Name o	668-9078 of OSHA Mo										
Occupancy Status During Abatement (Check	02/26/ Only O						LEAD PR	OFESS	SIONA	LS				
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of	Abaten	nent			-	ITE DOV		RT					
X Other – Describe:	ar r acint	y Hours	•		_		ate, Zip Coo WOOD, I	Code D, NJ 08701						
Scope of Work (Check All That Apply)			_											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Management of the last of the	Renova Demolit	lition Mini-Enclos											
Lance 6	1 55	Location Normall	7.55									Abate	ement /pe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Use	ed Solel	ly by	Asbest	os Conta	scription of aining Ma	aterial (ACM)	Amou	ınt		Τ,		
In Facility (13)	Cus	todial S (12)	Staff?	(i.e. 1	surfac	systems sing, VAT niscellane	insulation, , or eous)		(Speci SF or L		Remova	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A								<u> =</u>		ate	l e
INTERIOR				PIPE II			N BOILE	R	300L	F	х			
			RC	DOM D					+					
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Name of Registered Waste Hauler			JDEP Wauler ID		Cubic Y		Nam	e of Reg	istered l	Landfi				
NEWARK CARTING City, State			509		10			IESI						
NEWARK, NJ					Disposa 02/26/		The second second	ty, State ETHLEHEM PA						
Completed by JOSEPH PERLSTEIN		Się	gnature					ate 2/11/	19					

DATE

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check#3263 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 02 1 Firoz Patka Agencies Notified Type Notification Street Address ☐ EPA X Initial ☑ DOLWD Amended City, State, Zip Code Amendment #_ X DHSS ☐ DCA Morristown, NJ 07960 Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation Firoz Patka FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Private house School (K-12) Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings. homes, etc.) City (5) Square Feet # of Floors Bldg. Age Morristown, NJ 07960 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Morris 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 02 / 19 / 19 02 / 20 / 19 Envirovision Consultants, Inc Occupancy Status During Abatement (Check only one) Street Address X Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM- PM/ Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 lf = 160 sf or >260 lf Mini-Enclosure Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Repair Enclosure Remova Encapsulate Asbestos Containing Material (ACM) Amount TO BE ABATED Maintenance/ (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) No N/A Basement Pine inculation

		_		i ipe mis	ulation		200 LF				
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										П	П
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Name of Registered Waste Hauler		N.	IDEP Wast	e Hauler ID No.	Cubic Yards of Was	ste Name of Regis	tered Landfill				
Gr Tech LLC		8	003378	85	TBD	T.R.R.F. Inc					
City, State					Disposal Date	City, State					
Wayne, NJ 07470					TBD	Tullytown, PA	1				
Completed By (Print or Type)	Title				Signature /	1		Б.	_		-

Signature

Wenad

Date

02/08/19

Owner

N.Jevtic

Date of Notification (1) Agencies Notified Type Notification Type Notification Type Notification Initial Amended Amendment # Emergency (including justification) Cancellation Name of Facility Where Abatement is Taking Place (3) Street Address	Name of Contact Notes MA 0242
County (6) County (6) County (6) Cape Mas Name of Monitorine Firm Was	Square Feet # of Floors Bidg. Age
Street Address	ASCM No. Name of Abatement Contractor (9)
City, State, Zip Code Project Manager for Monitoring Firm Start Date (10) Cocupancy Seek Date (10) Occupancy Seek Date (10)	Telephone No. Telephone No.
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abateme Abatement Performed Outside of Normal Facility Hours Other — Describe: Scope of Work (Check All That Apply) 3 sf or \geq 3 if	4 / 4 Monitor
. ≥160 sf or ≥260 if Penova Demolii	Full Containment with Negative Pressure Mini-Enclosure Glaveboo P. Glaveboo P.
Lecation of Asbestos-Conmining Material (ACM) TO BE ABATED In Facility (13) Ves No Is Location Normally Used Solety Maintenance Custodial State (12) Yes No	by Description of Abateman
me of Registered Waste Hauler NJDEP Hauler I Zosse State De plant Title Nieted by Title Nieted by Title Nieted by Niete by Niet by N	Waste Cubic Yards Name of Registered Landfill Disposal Date City. State Signature Date Date Date Date
	* Do not use this form for asbestos licensure exempted activities.



CK 2002 PAI		NOT	IFICATIO	ON OF AS	SBESTOS C 8:60 ar	ABATE	EMENT (0)		EC	E		7			
Date of Notification (1) 2/8/19	- da				ng Owner/	Operato	r (2)						111		
Agencies Notified Type Notification				of Vine	land				FEB	13	20	19			
☐ EPA 🕱 Initial					Street										
DEP Amended				State, Zip				į.		1		1			
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DOH justification) Cancellation			1 2 2 2 2 2 2	of Contact				1000	lephone N 56 809-1		•				
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Name of Facility Where Abatement is Takir Vacant Building #10	ng Place	(3)					Type of Facility	y (4)							
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111 Highland Avenue							X Other (i.e	. private	& comme	rcial bu	ildings	s, hon	nes,		
City (5) Vineland							etc.) Square Feet	# 0	f Floors		Bldg.	Age			
County (6) Cumberland	Charles -			Code (7)			Current Use (P	rior if bei	ing demol	ished)	-				
Name of Monitoring Firm Hired by Building	<u> </u>	2)		USE ONL	.Y)										
	Owner (8	3)	ASC	M No.			of Abatement Co o Construction								
Street Address							Address	Road							
City, State, Zip Code							Creek Road								
							nawr, NJ 080	31							
Project Manager for Monitoring Firm			Telepho	one No.		1	one No. 931.3366		License 01339	No.					
Start Date (10) 2/18/19			mpletion	Date (11)		of OSHA Monito	г							
Occupancy Status During Abatement (Chec	5/13/						ew Ricco Address								
➤ Facility Closed/Vacated During Entire F	Period of	Abater	ment												
Abatement Performed Outside of Norm Other – Describe:	al Facilit	y Hour	S				Creek Road tate, Zip Code						7 7 7 7 7		
Scope of Work (Check All That Apply)		-				Belln	nawr, NJ 080	31							
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≥160 sf or ≥260 lf	_	Renova Demoli					Mini-Enclosur	inment with Negative Pressure sure							
							Glovebag Pro Non-Exempte	cedure	Non-Fria	hle Pro	radur				
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	Yes	No	N/A				•			/al	7	llate	ıre		
Interior-			Х	12X	12 VAT	& Blad	ck Mastic	300	00 SF	X					
Interior		Х	Gra	y/Tan N	lastic I	Linoleum		0 SF	X						
Exterior		Х			ow Cau			0 LF	X						
Name of Registered Waste Hauler		200	JDEP Wauler ID		Cubic Y	, ramo or regiotered Editum									
Ricco Construction Corp	Hauler ID No. of Waste 28909 TBD Cumberland County														
City, State Bellmawr, NJ			Disposa		City, Stat		Λ	X			\neg				
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DATE

State of New Jersey

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Date of Notification (1)							-		KŦ	50	30	7C
02-07-20	19		1 1	Acc	ding Owne	D'Operati	or (2)	E	0 F	П	no.	
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Name of Facility Where Abatement is Tal	ding Plac	æ (3)	- 1	-ACILITY	NFORMA	TION	Tona of Facility		1.000	J 5-11	W. 1925	
L Mesidential T			inc	-D	16		Type of Facil	,				
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City (5)		-	- 00 00 III II				Square Feet	# of Floors				
County (6)							1250		-	C	. Age	
Lamden		,	Cour	nty Code (TE USE ON	7) # 10		Current Use (Prior if being demo	lished)	V	TY	15
Name of Monitoring Firm Hired by Building	Owner	(8)	1				-140	esiden	ce.			
Quality Environmental Concepts	, Conne	(0)	- 2	SCM No. One		Name	or Abatement (Contractor (9)	THE STATE OF			
Street Address	F.2*					Stract	Address	ental Concepts	5			
1053 North Tuckahoe Road	THE CA						North Tuck	ahne Road				
City, State, Zip Code Williamstown, New Jersey 08094						.5.	tate, Zip Code					
Project Manager for Monitoring Firm						Willia	imstown, Ne	w Jersey 0809	4			
Edward Knorr				hone No.		Teleph	one No.	License				
Start Date (10)	Cabad	1-10		-629-116		1	329-1166	01086				
02-18-2019	Suled		ompletic	on Date (1	1)	Name o	of OSHA Monit	or .			-	
Occupancy Status During Abatement (Che	ck Only	One)	1 /	- CU	17			ental Concepts				
Facility Closed/Vacated During Entire	Dariad -	£ 81 .	amont				Address North Tucks	hoo Donal				
Abatement Performed Outside of Non Other – Describe:	nal Facil	ity Hou	#S	tent 1053 North Tuckahoe Road City, State, Zip Code								
						Willia	mstown. Ne	w Jersey 08094	ı			
Scope of Work (Check All That Apply)								Joiday 00032	r 			
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Asbestos-Containing Material (ACM)	Us	ed Sol	ely by	Acho	Des	cription o	ที	- Paragraphic Principles (Principles Principles Princip	-	T	ре	
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Basement		1 -	+	+	-		*				6	
HVAC ducturerK	-	-	1		<u>esto</u>				-			
A 73000000	THE GOLDON					loth	7 '	65 SF	V			
	-			line	suiat	ion	Wide		Ť			
Name of Registered Waste Hauler	Name of the last		Distance of the last of the la				1		1		-	
Quality Environmental Concepts	LIDEP V lauler ID	Vaste	Cubic Y		Name of	Registered Landfill						
					of Waste	70	Saie	m Count	41	CU.	df.	11.
City, State Williamstown, New Jersey					Disposa		City, State		<u> </u>			
Completed by			TE	BD		owau l	V .7	-				
	Tillo		111111111111111111111111111111111111111					- CUTTLY	1	J.		-

Edward Knorr

Title

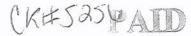
Vice President

Date

Signature

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Date of Notification (1)					Nam	e of Buildir	g Owner/Operator ((2)			20	13						
	08 /	19	_				Estate Group		- L	, S	6.	9.9	1					
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Name of Facility Where Aba	atement is	Taking I	Place	(3)				Type of Facility	(4)	7								
Residence								☐ School (K-12										
Street Address								Subchapter (i.e., p homes, etc.)	3 (Other than K-12 rivate and comme	cial bu	uilding	js,						
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County (6)					Cou	nty Code (7)(STATE USE ONLY)		ior if being demolis	hed)								
Morris Name of Monitoring Firm Hi	rod by Duile	dina Ou		0)	4001	NI.	The same	Residence										
Guardian Contracting		aing Ov	vner (8)	ASCM	No.	Name of Abateme											
Street Address	, 1110.						Street Address	ontracting, Inc.										
1889 Route 9, Unit 61								ss ute 9, Unit 61										
City, State, Zip Code				-8540			City, State, Zip Co											
Toms River, NJ 08755	i							New Jersey 08	755									
Project Manager for Monitor				Tel	ephone	No.	Telephone No.	tow ocisey oo	License No.									
Nicholas Fernicola					32-349		732-349-9932		00624									
Start Date (10)		Schedul	led Co	omple	etion Da	ate (11)	Name of OSHA M		00024									
02 /19 /						19	E.M.S.L. Anal	70000										
Occupancy Status During Al	batement (Check o	only o	ne)			Street Address											
☐ Facility Closed/Vacated [During Enti	re Perio	d of A	Abate	ement	nent 1056 Stelton												
Abatement Performed O	utside of No	ormal F	acility	Hou	rs - Des	c - Describe City, State, Zip Code												
Time of Abatement:	AM	PM/		_PM		_AM		New Jersey 08	854									
Scope of Work (Check all the	at apply)							-		42:5								
≥3 sf or ≥3 lf		Б	Rer	novat	ion		☐ Full Cont ☐ Mini-Encl	ainment with Neg	ative Pressure									
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TO BE ABATE	D				ance/ Staff?	(i.e	., thermal systems i	nsulation,	(Specify	Removal	Repair	cap	Enclosure					
IN Facility (13)			Oust	(12)			surfacing, VAT, other miscellaned	or or	SF or LF)	/ <u>a</u>		Encapsulate	ure					
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Name of Registered Waste H	Hauler				NJDEP '		Cubic Yards of	Name of Pegis	tered Landfill		Ш	ш						
Guardian Contracting,				128	lauler II	D No.	Waste TRRF											
City, State					20223	5	Disposal Date City, State											
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Completed By (Print or Type)	Title					Signature	1	// Da	te i	1							
Nicholas Fernicola		Pro	ject	Man	ager			4		1/8	5/1	9						

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Date of Notification (1) 2/5/19				of Building (or (2)	23.00 A 1.1 3.2 I		FE	В	1 3	2019	240	
Agencies Notified Type Notification				t Address					1027						
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DOH justification)		ıg		of Contact					Te	lephon	e Ni	ımber			
DCA Cancellation			Tony	У						32 68					
Name of Facility Where Abatement is Takin		(0)	FA	CILITY INFO	RMA	TION									
185 Morriss Plaza property	g Place	(3)					Туре	of Facility (4)						
Street Address								School (K-12							
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		2/27/1	-													
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ACE INSULATION CO. INC.					No.	of Was	te		Chrins							
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Date of Notification (1) 2/9/19					of Building O'Dea	Owner/	Operator	(2)				1 1			
Agencies Notified	Type Notification				Address					7/1 137 6 7	rtt	3 1 ;	3 20	19	111
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DCA □	justification) Cancellation			Dana						Tel	ephone N	umber			
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Project Manager for Monito	ring Firm			Telepho	ne No.		Teleph 7322				License 00029	No.			
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Project Manager for Monitoring Firm	00	7	Tale		1914	1/12 60	7 1817	A STATE OF THE PARTY OF THE PAR				
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2-19-19	7-	7,0) / C)	Name o	of OSHA Monito	or /		No.			
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PHILA PA 19116						City, St	ate, Zip Code	<u> </u>	2			
Project Manager for Monitoring Firm			1	one No.		Telepho	one No.	License	No.	6		
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check # 4553 Project # (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 02/06/2019 Andrew Bush Agencies Notified Type Notification Street Address Initial **EPA** City, State, Zip Code DEP Amended DOL Amendment # Westfield, NJ 07090 Emergency (including Name of Contact Telephone Number DOH justification) Cancellation DCA Andrew Bush FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) Westfield, NJ 07090 County Code (7) Current Use (Prior if being demolished) County (6) (STATE USE ONLY) Passaic Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Nick Restoration LLC Street Address Street Address 72 Brookside Rd City, State, Zip Code City, State, Zip Code Randolph, NJ 07869 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 01358 973933-2550 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor IRIS 02/18/2019 02/19/2019 Street Address Occupancy Status During Abatement (Check Only One) 2333 Rt 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Union, NJ 07083 Scope of Work (Check All That Apply) >3 sf or >3 lf Renovation Full Containment with Negative Pressure Demolition ≥160 sf or ≥260 lf Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e. thermal systems insulation, (Specify Removal Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)(13)other miscellaneous) Yes N/A No X × Basement area TSI 30LF NJDEP Waste Name of Registered Waste Hauler Name of Registered Landfill Cubic Yards Hauler ID No. of Waste Nick Restoration LLC G.R.O.W.S TBD 0033782 City, State Disposal Date City, State Randolph, NJ

TBD

President

Signature

Completed by

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Project Manager for Mo	nitoring Firm			elephon	e No.			none No. 295-17			License N 01074	10.			
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Lincoln Park, NJ 07035

Mini-encloşure

Description of aspestos-containing material (ACM)

VAT & mastic

02/09/19 - 04/30/19

Full Containment winegative pressure Coverag pro-

Grand Central Landfill

Pen Argyle, PA

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Amo unt

25 SF

(Specify SF or LF)

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Describe:

Demolition

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Location of sebestos-containing

Kcom 138

malerial to be

equipmed Weeks Hauler B & G Restoration, Inc.

Completed by (Print or Type)
Gordana Luna

City, Step Lincoln Park, NJ

mbalad in facility (13)

Other-Describe: Start Work 3:50 pm

Renovation

2150 sf or ≥280 F

ats#(12)

Yes

la location normally used solely

Na

NA

by maintenance/custodiel

EP Haute 19563

Secretary/Treasurer

Scope of Work (check all that apply)

B & G proj. #: 2019-32

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

*** EM E R G E N C Y ***

Check # 9133

Date of Notification (1) D 2 1/0 8 1/1 1 1				-										
Rependent Notification Street Address Street Address Section Street Address Str	Date of Notification	Nam	ne of Build	ling Owne	er/Operator (2)	F 0		Bhrash ray						
BPA DEP DOL Amendment	10 12 1/10 18	M												
DEP DIL Amendment New Providence City, State, Zip Code County Code (7) State, Zip Code Code (7) State,		Type Notification											i.	
DEP DOL Amendment Name of Contact Providence, N.J. 07974 Name of Contact Providence, N.J. 07974 Name of Contact Providence Provi		X Initial	340 0						FFR	1 2 201	a		and and the	
Name of facility where abatement is taking place (3) FACILITY INFORMATION	☐ DEP	City,	State, Zi	o Code		1 1		-	كصبواود	7				
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DCA Erick Hammerdahi FACILITY INFORMATION	X DOH		1	e of Conta	act				Telephone	Telephone Number				
Name of facility where abatement is taking place (3) Morris - Union Jointure, Developmental Learning Center (NON Sub 8) Sitest Address 3-40 Central Avenue City (3) New Providence Norris Name of Monitoring Firm Hired by Bidg. Owner (8) Name of Monitoring Firm Hired by Bidg. Owner (8) Street Address City, State, zip Code City, State	DCA Cancellation			Erick Ha	mmerda	ahi	908-464-7425							
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Name of Monitoring Firm Hired by Bidg. Owner (8) ASCM No. n/a Street Address City, State, Zip Code Lincoln Park, NJ 07035 Scheduled Start Date (10) 02/08/2019 Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. Abatemate periomed outside of normal facility hours- Describe: Other-Describe: Start Work 3:30 pm Scope of Work (check all that apply) Demolition E 28 of 92 stir 2160 sf or 2280 if Septication of sebestos-containing material to be shated in facility (13) Name of Abatement Contractor (9) B & G Restoration, Inc. Street Address 105 Ryerson Road City, State, Zip Code Lincoln Park, NJ 07035 City, State, Zip Code Lincoln Park, NJ 07035 City, State, Zip Code Lincoln Park, NJ 07035 Full Containment w/negative pressure Glovebag procedure E Non-friable procedure I Socribity State Code Lincoln Park, NJ 07035 City, State, Zip Code Lincoln Park, NJ 07035 City, State, Zip Code Lincoln Park, NJ 07035 City, State, Zip Code Lincoln Park, NJ 07035 City, State Cit														
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Project Manager for Monitoring Firm	City, State, Zip Coo													
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Occupancy Status During Abatement (Check only one) ☐ Facility closed/vacated during entire period of abatement. ☐ Abatement performed outside of normal facility hours- ☐ Describe: ☐ Other-Describe: ☐ Other-De														
Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Describe: Other-Describe: Start Work 3:30 pm														
Abatement performed outside of normal facility hours—Describe: Start work 3:30 pm Lincoln Park, NJ 07035 Cother-Describe: Start work 3:30 pm Lincoln Park, NJ 07035			(P											
Describe: Start work 3:30 pm Lincoln Park, NJ 07035							City, State, Zip Code							
Scope of Work (check all that apply) Demolition Renovation Solution of asbestos-containing material to be abated in facility (13) Registered Waste Hauler B & G Restoration, Inc. Description of asbestos-defined in part of the par	Describe:						Lincoln Park, NJ 07035							
Demolition								L 					-	
Location of asbestos-containing material to be abated in facility (13) Room 138 Sometimes Someti	199 <u>-199</u> 100 - 11 - 11 - 12 - 13 - 13 - 13 - 13 - 13						П	Full Containment w/ne	egative pressure	☐ Glovebag r	proced	ure		
Location of asbestos-containing material to be abated in facility (13) Room 138														
by maintenance/custodial staff(12) Yes No N/A Room 138 W VAT & mastic Description of asbestos-containing material (ACM) Description of asbestos-containing material							1							
material to be abated in facility (13) Yes No N/A Room 138 WAT & mastic 25 SF Registered Waste Hauler B & G Restoration, Inc. Disposal Date Disposal Date Date Date	ashestos-containing by m			maintenance/custodial				ashestos-containing	Amount	1000	е	п		
Room 138 W VAT & mastic 25 SF W	material to be		staff(12)	10000					100000000000000000000000000000000000000	- or	10.30		C	
Registered Waste Hauler B & G Restoration, Inc. Disposal Date Da	abated in ta	Clifty (13)	Yes	No	N/A				L.,		i	p		
B & G Restoration, Inc. 19563 1 Grand Central Landfill City, State Lincoln Park, NJ Disposal Date 02/09/19 - 04/30/19 Completed by (Print or Type) Title Signature Date	Room 138				X] VAT & m	astic		25 SF	X				
B & G Restoration, Inc. 19563 1 Grand Central Landfill City, State Lincoln Park, NJ Disposal Date 02/09/19 - 04/30/19 Completed by (Print or Type) Title Signature Disposal Date 02/09/19 - 04/30/19 Date												日	4	
B & G Restoration, Inc. 19563 1 Grand Central Landfill City, State Lincoln Park, NJ Disposal Date 02/09/19 - 04/30/19 Completed by (Print or Type) Title Signature Disposal Date 02/09/19 - 04/30/19 Date	2-					-	-				井	ዙ	H	
B & G Restoration, Inc. 19563 1 Grand Central Landfill City, State Lincoln Park, NJ Disposal Date 02/09/19 - 04/30/19 Completed by (Print or Type) Title Signature Disposal Date 02/09/19 - 04/30/19 Date						1					岩	H	干	
City, State Lincoln Park, NJ Disposal Date 02/09/19 - 04/30/19 Pen Argyle, PA Completed by (Print or Type) Title Signature Disposal Date 02/09/19 - 04/30/19 Pan Argyle, PA			NJDEF	Hauler II	D# C	Ubic Yards of	Waste					1	1-	
Lincoln Park, NJ 02/09/19 - 04/30/19 Pen Argyle, PA Completed by (Print or Type) Title Signature Date		ation, Inc.			Dienasal	1 Grand Central Landfill								
5011 potential 3 (1 miles 1) po ()	Lincoln Park,	NJ					0/19		le, PA					
Gordana Luna Secretary/Treasurer Gordana Zaria 102/00/2019	Completed by (Pri		retary/Treasurer				Gerdana Luna	Date 02/08/2019						