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

Page 1 of 1 Check # 1497

Date of Notification (1) 02-13-2012				Name of Betty S	Building (	Owner/C	perator	(2)	16 15		Billi	1			
Agencies Notified	Type Notification			Street Ad					EB 16	2012					
DEP  DOL	Initial Amended Amendment		_	City, State Bernard			924	L	10 C T 10 C						
➤ DOH DCA	Emergency ( justification) Cancellation	including		Name of Betty S	nyder			7787-0	in Early,			nber			
Name of Facility Where	Abatament is Takin	n Place (3)		FACIL	ITY INFO	RMATI	ON	Type	of Facility (4						
Private Residence	Apatement is Taking	g i lace (o)							School (K-12	30		- 4			
Street Address									Subchapter of Subchapter of Subchapter (i.e. pr	8 (Other t			inas	home	s
111 Lloyd Road		e a Pagagggae			•				etc.)						
City (5) Bernardsville								2500		# of FI		40	dg. A )+	ge ——	
County (6) Somerset	Somerset  Jame of Monitoring Firm Hired by Building Owner (8)  Street Address  Sity, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10)  02-23-2012  Schedul 02-27-				ode (7) SE ONLY)				nt Use (Prio			ied)			
Name of Monitoring Firm	Somerset  Jame of Monitoring Firm Hired by Building Owner (8)  Street Address  Sity, State, Zip Code  Project Manager for Monitoring Firm  Start Date (10)  02-23-2012  Occupancy Status During Abatement (Check Only Owned Abatement Performed Outside of Normal Facility						The state of the s	of Aba Group	tement Con Inc	tractor (9)	)				
Street Address			William Co.			Addres Hamb	s urg Tpke								
City, State, Zip Code					***				p Code lale, NJ 0	7403		-33 to 20 to 10 to			
Project Manager for Mor	Project Manager for Monitoring Firm					<del></del>	Telep	hone No 710-9	D.		icense N	0.			
Start Date (10) Schedul				mpletion E	Date (11)				A Monitor					// ·	
02-23-2012	,						GL (	Group	Inc		ale espainance and				
Occupancy Status Durin	02-23-2012 02-27- Occupancy Status During Abatement (Check Only O						12/01/0	Addres	s urg Tpke						
Facility Closed/Vac	cated During Entire	Period of A	Abater Hour	ment s					p Code				100000		
Other – Describe:					B 197 12				dale, NJ 0	7403					
Scope of Work (Check A	All That Apply)	****				Western Name		_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enov emol					Mir Glo	I Containme ni-Enclosure ovebag Proc n-Exempted	edure				e	
		T 10	Loca	tion	-				LXCIIIpic	· ( / carrer )			Abate	ement	
Locatio	n of	1	Norma	ally		De	scriptio	n of				-	Ty	pe I	Γ.
Asbestos-Containing	g Material (ACM)		d Sol	ely by ance/			taining I I system		(ACM)		ount ecify	<sub>ZD</sub>		Enc	m
In Fac	ility	Cust	todial (12)	Staff?	(1.0.	surfa	cing, V	AT, or			r LF)	Remova	Repair	Encapsulate	Enclosure
In Facility (13)				_		otner	miscella	neous)				<u>a</u>	=	llate	лге
	Flori	Yes	No	N/A		NCM D	ipe In:	sulatio	n	3.5	1F	X			
Ground		-	X	-			ipe In:				LF	X			
Basement Boiler Room				-		CIVIT	ipo iri	Jaiau				+			
				-							-	T			
Name of Registered Wa	aste Hauler			NJDEP W		TATE OF STREET	Yards		Name of	Registere	d Landfil				
GL Group Inc		Hauler ID 0033034		of Wa			Cumbe		andfill						
City, State Bloomingdale, NJ					sal Date -2012	9	City, State Newbur								
Completed by Elena Solakov	Completed by Title						Signatu	e El	ru Stolle		V 0.007	ate 2-13-	2012		

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#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to <u>N.J.A.C.</u> 8:60 and 12:120)

Date of Notification (1)	1/30/20	42				REET, LLC	F VS V	1.6	2012		Contract of the Contract of th
Agencies Notified	1/30/20	Notification 7	Tyne		Street Address				900 T F C	i in a second	1
(X) EPA () DEP (X) DOL	-	( ) Initial Not ( X ) Amende Amendm	tification ed Notificat ent # _1	_TIV		ROAD SUITE	380 A.H.	CS GUNT GENSHAD	AUL &		Acres descriptions
(X) DOH				ng justification)	WEST HA	ARTFORD,	CT 06107				
( ) DCA		( ) Cancellat	поп	26	Name of Conta		Tel_N	lumber			(M)
				FACILITY IN							
Name of Facility Where Al 50 OAK	batement is Ta	aking Place (3	9)		Type of Facility ( ) School (K- ( ) Subchapte	12) r 8 (other than K-	·12)				
Street Address					(X) Other (i.e.	private & comme	erciai biogs., non	nes, etc.			
50 OAK STREET City (5)	County (6)		County C	ode (7)	Sq. Feet	100000	# of Floor	rs2			
EAST RUTHERFORD	BERGEN		(State Us	e Only)	Bldg. Age Current Use (p	30+ prior if being dem	olished)V	ACANT_			
Name of Monitoring Firm EHS INC			ASCM No	<u>).</u>	Name of Contr						
Street Address 9 MAIN STREET	<del></del>				Street Address 550 East Unio						
City, State, Zip Code MULLICA HILL, NJ					City State, Zip West Chester						
Project Manager for Monit JACK CARNEY	Scheduled Start Date (10)  Scheduled Completion Date (11)				Telephone Nu 610-701-9000	mber	00508	se Numb 3	<u>er</u>		
2/20/2012 4/27/2012				Date (11)	Name of OSH, EHS, INC	A Monitor					
Occupancy Status During Abatement (Check only one) (X) Facility Closed/Vacated During Entire Period of Abatement ( ) Abatement Performed Outside of Normal Facility Hours -				3	Street Address 9 MAIN STRE	ET .					
DescribeOther -	) Abatement Performed Outside of Normal Facility Hours - Describe				City, State, Zig MULLICA HIL						
Source of Work (Check al	I that apply)										
( ) Demolition ( ) Ren (X) Large Proj. (>160 SF () Full Containment with I	or >260 LF AC	CM)()SM Pr	oj. (>25<16 ni-Enclosur	50 SF or >10 <26	60 LF ACM) ( ag Procedure	) Minor Proj. (<	25 SF or <10 LF	ACM)			
Location of Asbestos-	Is Loca	ation Normally	Used	Description of	ACM (i.e.	Amount (Spec	ify SF or LF)	Abate	ment Ty	pe	
Containing Material (ACM Facility (13)	Staff?	by Maint./Cus	itodiai	thermal system surfacing, VAT							an ar
1 dominy (10)	YES	NO	NA	miscell.)				Rem.	Rep.	Encap	<u>Enclose</u>
2005			Х	ROOFING		92500sf		X		-	1
1 <sup>ST</sup> AND 2 <sup>ND</sup> FLOORS	-		X	PIPE INSULAT	TION	460LF		X			
1 <sup>ST</sup> AND 2 <sup>ND</sup> FLOORS			X	VAT&MASTIC		12110SF		X			
LOADING DOCK			X	TAR INCINERATOR	PACKING	27SF 100SF		X			
ROOM B1-46 ROOM B1-41			x	TRANSITE PA		670SF		x			
Name of Reg. Waste Hau	ıler	NJDEP Was	ste Hauler	ID #\	Cubic Yards o	f Waste	Name	of Reg.	Landfill	L	1
		17235			Approx. 1700	,	RELIE	nperial			
N.E.T.S. / Miners <u>City, State</u>			Approx. 1700		p. Date		City, Sta	<u>te</u>			
Hazelton, PA						ТВІ	)	1	mperial	, PA	
	/pe)	<u>Title</u>			Signature	/2 N	○ Date				
DEVIN BLOM							2/13/2	2012			

Mail to: NJDEP-DSHW-BRRTP

401 E. State St., PO 414 Trenton, NJ 08625-0414 Telephone 609-984-6620

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F. L. Stag & R. Miller and C. C. San American

#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1)	1/30/20	12				ding Owner/Operator (2)		CEVE
Agencies Notified		Notification '	Type		Street Addres	S	111 .	EB 1 6 2012
(X) EPA () DEP (X) DOL		(X ) Initial No ( ) Amended Amenda	d Notificati nent#	on ing justification)	City. State. Zi	L ROAD SUITE 380 D Code ARTFORD, CT		
(X)DOH ()DCA		( ) Cancella	tion	ing justilication)	WESTH	ARTFORD, CT	06107	FICENSING
( /20					Name of Cont		Tel: N	lumber
				FACILITY IN	IFORMATION	54		
Name of Facility Where Ab 50 OAK	atement is Ta	aking Place (3	3)		Type of Facilia ( ) School (K- ( ) Subchapte	12) er 8 (other than K-12)	ulaa baa	
Street Address 50 OAK STREET					(X) Other (i.e.	private & commercial b	ags., non	nes, etc.
City (5)	County (6)		County C		Sq. Feet	100000	# of Floor	rs2
EAST RUTHERFORD	BERGEN		(State Us	se Only)	Bldg. Age Current Use (	30+ prior if being demolished	i)V	ACANT
Name of Monitoring Firm EHS INC		200	ASCM N	<u>o.</u>		ronmental Systems		
Street Address					Street Addres			
9 MAIN STREET City, State, Zip Code					City State, Zin			
MULLICA HILL, NJ					West Cheste		1	
Project Manager for Monitor JACK CARNEY	oring Firm	Telephone N 8562230080			Telephone Nu 610-701-9000		00508	se Number 3
Scheduled Start Date (10) 2/13/2012 Scheduled Completion Date (12/13/2012 Scheduled Start Date (10) 4/27/2012				Date (11)	Name of OSH EHS, INC	A Monitor		
Occupancy Status During Abatement (Check only one)  (X) Facility Closed/Vacated During Entire Period of Abatement  ( ) Abatement Performed Outside of Normal Facility Hours -					Street Address 9 MAIN STRE	<u>ET</u>		
Describe					City, State, Zi MULLICA HIL			
Source of Work (Check all	that apply)							
( ) Demolition ( ) Reno (X) Large Proj. (>160 SF o () Full Containment with N	r >260 LF AC legative Pres	sure () Mir	ni-Enclosu	re () Gloveb	ag Procedure	( ) Minor Proj. (<25 SF		
Location of Asbestos- Containing Material (ACM) Facility (13)	in Solely Staff?	ition Normally by Maint./Cus (12)	Used todial	Description of thermal system surfacing, VAT	ns insulation,	Amount (Specify SF of	or LF)	Abatement Type  Rem. Rep. Encap Enclose
	YES	NO	NA	miscell.)				Kem. Kep. Encap Enclose
ROOF			Х	ROOFING		92500sf		X
1 <sup>ST</sup> AND 2 <sup>ND</sup> FLOORS 1 <sup>ST</sup> AND 2 <sup>ND</sup> FLOORS LOADING DOCK ROOM B1-46 ROOM B1-41			X X X X	PIPE INSULATION VAT&MASTIC TAR INCINERATOR TRANSITE PA	R PACKING	460LF 12110SF 27SF 100SF 670SF		X X X X
		NUDEDIA	4- 111	10.40	Cubia Varda -	f \\/\osto	Nome	of Pog. Landfill
Name of Reg. Waste Haul	<u>er</u>	NJDEP Was	te Hauler	IU #\	Cubic Yards o	i vvaste	ivame	of Reg. Landfill
N.E.T.S. / Miners					Approx. 1700		BFI Im	
City, State						Disp. Date		City, State
Hazelton, PA						TBD	T	Imperial, PA
Completed by (Print or Type	oe)	<u>Title</u>			Signature	RIN	<u>Date</u>	012
DEVIN BLOM		Estimator			Br.		1/30/20	012

Mail to: NJDEP-DSHW-BRRTP

401 E. State St., PO 414 Trenton, NJ 08625-0414 Telephone 609-984-6620

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N. F 7 (2 5) - MAIL IN HARD COPY NOTIFICATION OF ASBESTOS ABATEMENT (Purguant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) 1 5015 10 Francedy 2 Type Notification Street Address Agencies Notified 2201 (Z) EPA ☐ Initial Manded Amended DOLWD City, State, Zip Codo Amandmoni # ☐ DHSS Chevia Emargancy (Including Justification) ☐ DCA Telephone Number Name of Cyntact (NJAC 6:23-8) Muller ☐ Cancellation Bud FACILITY INFORMATION 1 6 2012 Type of Facility (4) Name of Facility Where Abalement is Taking Place (3) Kunedy Hosp - Cherry Hill Campus ☐ School (K-12)
☐ Subchapter 8 (Other than K-12) Cother (i.e., private and commercial buildings. ASBESTOS CONTROL Street Address sel ane Wust LICENSING 2201 homes, etc.) Square Fcel Blag. Ago # of Floore Cily (5) 40,000 Chine County Code (7)/STATE USE CML17 | Current Use (Prior If haling demolished) County (d) Name of Abatement Contractor (9) ASCM No. Name of Monttoring Firm Hired by Bullding Owner (8) Morrows ARU Street Address Progress 8486 3370 City Stale, Zip Code City, Stale, Zip Code Philadel Bensalem PA License No. Telephone No. Telephone No Project Manager for Monitoring Firm Panepresso 215-244-1300 215-365-5810 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 112 12012 111/12012 Emuron Street Address Occupancy Status During Abstement (Check only one) 8436 Facility Closed/Vacated During Entire Period of Abatement 区 Abatement Performed Outside of Normal Facility Hours - Describe
Time of Abatement: 7 20 AM-3 2 PM FM-\_\_\_AM City, State, Zip Code 19153 Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclosure
Glovebag Procedure
Non-Exempled (\*) and Non-Friable Procedure Renevation 1 23 af or >3 tf 2160 af or 2280 If Demoiii.on Abatement Type la Location Normaty Description of Repar Localian of Encapsulate Aebostos Conteining Maforial (ACM)
(i.e., thormal systems insulation, Asbesios-Conlaining Malanai (ACM)
TO BE ABATED Used Solely by Amount (Specify SF or LF) Maintenanco/ syrfacing, VAT, or syrfacing, VAT, or Custodial Statt? IN Facility (12)(13)N/A You No 7208 口 П Mashe Conding 1555P K П A Mastie Track Room M 2 Martie 528 SF Leven (My) profine П Name of Registered Landfill Cubic Yards of Name of Registered Weste Hauter NUDEP Waste Hauter ID No. Muneriva- Hard MACHINE 32616 Disposal Data City, Siate City. State Wallrusburg Signature 2 10 2012 Kuman ilio rogram Manago \* Do not use this form for asbesios licensure exempted activities. **WAY 11** 

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

Date of Notification (1)			1	Name of	Building	Owner/Operator (2	2)	4 1 171				
2 1	10 1 2018	<u> </u>		<u> Ho</u>	nne	dy Hea	lth Si	ptens	FE	В	16	201
Agencies Notified  EPA	Type Notification  ☐ Initial		8	Street A	ddress	Chapel	2 aver	ue We	st			
☑ DOLWD	Amended				te, Zip Co	ode ,		1	ASDI		G CCI	
☐ DHSS	Amendment #	udina	1 0	• 1)	vie.	Hill.	NJ	08602		LIU	LIVOIT	nu -
☐ DCA (NJAC 5:23-8)	Emergency (incli	uding		- 1 -	Contact		-	Telephone Numbe	r	estrette a -	AND DRIVE	ann a mi
(NJAC 5.23-6)	☐ Cancellation		- 1	Bu	od r	nuller						19
						ORMATION	***************************************					
Name of Facility Where A	hatement is Taking I	Place (	3)		Statement of the statem		Type of Facility (	4)				
K d . 1/a	S) - Chara		. 0	000	mal	15	☐ School (K-12)					
Street Address	Sp - Clur	41	···		750		☐ Subchapter 8	(Other than K-12)	al buil	dinac		
Street Address 2201 Ch	apel ave	~ \ \	Ju	st			homes, etc.)	ivate and commerci				_
City (5)							Square Feet	# of Floors		g. Ag	ь	
Cherry H.	ill						40,000	O	14	<u>U</u>		
County (6)				County	/ Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolish	eu)			
12 ming	2015						-1 O1 (0)					_
Name of Monitoring Firm		vner (8	) A	SCM N	0.	Name of Abateme		- to 0 i	7)9	n=	-	
Street Address	Labs			-		Street Address	wwwn	uniax 1	. ,0	10.		-
3370 Pn	gues Dr.	in				8436	Enterp	use your				
City, State, Zip Code	01 100	~ 7				City, State, Zip Co		A 1913	52			li li
Bensalem	190 AC.	120		h N		Philadel Telephone No.	pillo +	License No.				
Project Manager for Mon	itoring Firm	2		hone N	o. 44.13a		365-5810	License 146.				
	mepress Schedu		THE PARTY OF THE PARTY OF			Name of OSHA M				_		
Start Date (10) 2 / 1 / 1	The state of the s			_ / <u>2</u>				untal n	ve r	1	-	
						USA &	WUU ISI I	uriax 1.	170		_	
Occupancy Status Durin				nont		8436	8. to	Our				
☐ Facility Closed/Vacat ☐ Abatement Performed	ed During Entire Pen d Outside of Normal I	ou oi r Facility	Hours	s - Desc	ribe	City, State, Zip C	ode	the good				$\overline{}$
Time of Abatement:	7:00 AM-3 50 PM	/	_PM		M	Phla	A9	1915	3			
Scope of Work (Check a	II that apply)	.,	- e			☐ Full Con	tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf		Rei	novatio	on		☐ Mini-End	closure					
☐ ≥160 sf or ≥260 lf		☐ Dei	nolitio	n		☐ Gloveba	ig Procedure	n-Friable Procedure	9			
		lo	Locati	ion		EN HOIL-EXC	Silipica ( ) and its		T	ateme	ent T	vpe
Location	o of		Iormal			Description (	of					
Asbestos-Containing			d Sole		Asbe	stos Containing Ma	aterial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure
TO BE AB	ATED		intena odial (		(i.e	., thermal systems surfacing, VAT		(Specify SF or LF)	ova	=	psu	Sur
IN Faci			(12)			other miscellane		,			late	0
()		Yes	No	N/A					_			
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1	+ Track Room			X	ma			1555F	区			
	in low			30	M	ishie		528 SF	₩.	Ш	П	Ш
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Name of Registered Wa	ste Hauler		10,20	JDEP \		Cubic Yards of Waste	Name of Regi	stered Landfill		0:	0 (	2
USA Emm	mmental			324		Diamagal Data	City State	ma og	IU	gr		
City, State						Disposal Date	Wayn	stered Landfill  The fa  Sheng C  Da  2	H			
Phyla PA Gompleted By (Print or	Tvbe) Title					Signature	T. V	Da	te	76		
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ASB-41	June 1	.07	O( iv i	· Lav	a for		1		-			

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

**MAY 11** 

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) HONEYWELL CORP. 2 15 /12 Street Address Type Notification 101 COLUMBIA ROAD Agencies Notified Initial Notification EPA City, State, Zip Code DEP Amended Notification MORRISTOWN, NEW JERSEY 07962 Cancellation DOL DOH On Hold Name of Contact Telephone Number-EMERGENCY NOTIFICATION SUSAN STUCKER DCA **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) HONEYWELL School (K-12) Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 101 COLUMBIA ROAD, BUILDING AB PENTHOUSE C 360,000 50 County Code (7) Current Use (Prior if being demolished) City (5) County (6) MORRIS (STATE USE ONLY) MORRISTOWN COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) 17 PAR ENVIRONMENTAL CORPORATION CTSI Street Address Street Address 622 GEORGES ROAD 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code NORTH BRUNSWICK, NEW JERSEY 08902 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number License Number Telephone Number FRANK SELAMIE 732-729-1000 845-369-7500 460 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 25 30/ QUALITY ENVIRONMENTAL 21 3/ Day Year Month Month Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: MON. -SUN. 7AM-3:30 PM Other - Describe: City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclo:, >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Abatement\_Type Location of Is Location Description of Asbestos-Containing Material (ACM) Asbestos-containing normally used Amount ENCLOSURE ENCAPSULE REMOVAL REPAIR solely by (Specify Material (ACM) (ie. Thermal systems TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) Staff (12) or other miscellaneous) in Facility (13) Yes No N/A AB BUILDING , PENTHOUSE C PIPE INSULATION 10 LF Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste CUMBERLAND COUNTY LANDFILL EXPRESS WASTE LLC Hauler ID No. 804 City, State Disposal Date NEWBOR NEWARK, NEW JERSEY Date Completed by (Print or Type) Title Signature BENJAMIN SANCHEZ DIRECTOR OF OPERATIONS

State of New Jersey

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) HONEYWELL CORP. Street Address 2 15 /12 101 COLUMBIA ROAD Agencies Notified Type Notification **EPA** Initial Notification City, State, Zip Code DEP Amended Notification MORRISTOWN, NEW JERSEY 07962 DOL Cancellation Name of Contact Telephone Number On Hold DOH **EMERGENCY NOTIFICATION** SUSAN STUCKER DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) HONEYWELL Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Square Feet # of Floors Bldg. Age Street Address 101 COLUMBIA ROAD, BUILDING M6-EB12, A WING 360,000 50 Current Use (Prior if being demolished) City (5) County (6) County Code (7) MORRISTOWN MORRIS (STATE USE ONLY) COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) PAR ENVIRONMENTAL CORPORATION 17 CTSI Street Address Street Address 622 GEORGES ROAD 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 NORTH BRUNSWICK, NEW JERSEY 08902 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 732-729-1000 845-369-7500 460 FRANK SELAMIE Name of OSHA Monitor Expected State Date (10) Sched. Completion Date (11) QUALITY ENVIRONMENTAL 25 3/ 30/ 2/ Month Year Month Day Year Day Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MON. -SUN. 7AM-3:30 PM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Full Containment with Negative Pressure Scope of Work (Check all that apply) Demolition X Renovation Mini-Enclo:, >3SF OR LF Glovebag Procedure Non-Friable Procedure >160 SF OR Abatement Type Description of Asbestos-Location of Is Location Asbestos-containing normally used Containing Material (ACM) Amount ENCLOSURE ENCAPSULE REMOVAL REPAIR solely by (ie. Thermal systems (Specify Material (ACM) Maint/Custodial insulation, surfacing, VAT, SF or LF) TO BE ABATED Staff (12) or other miscellaneous) in Facility (13) Yes No N/A VAT 300 SF X BUILDING M6-EB12, A WING

NJDEP Waste

Hauler ID No. 804

DIRECTOR OF OPERATIONS

Title

Name of Registered Waste Hauler

EXPRESS WASTE LLC

NEWARK, NEW JERSEY

BENJAMIN SANCHEZ

Completed by (Print or Type)

City, State

Cubic Yards of Waste

Signature

Disposal Date

Name of Registered Landfill

City, State

EWBURG, PA

CUMBERLAND COUNTY LANDFILL

Date

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EPA DOL Amendod Amendod Amendod Amendod Amendod DOL Amendod Amendod Amendod Monticiair, New Jersey 07042 Nome of Facility Who o Apatement is Taking Place (s) Monticiair High School Monticiair High Monticiair High High Monticiair High Monticiair High Monticiair High High Monticiair High Monticiai	sted by
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EPA DOLP Initial Amended Amend	land Park No.
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EPA DEP Initial Amendod Amendod City, State, 2p Code City, State, 2p Code Amendod City State, 2p Code Amendod City State, 2p Code City, State	
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EPA   DeP   Initial   Amandod Amandod   City State, Zip Code   Montclair, New Jersey 07042   Name of Contact   Lenny Saponaro   WAME   Feliatione Number   Montclair High School   School (Kr.12)   School (Kr.1	IO BE AB
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EPA DEP DEP DOL Amendment # 22 Valley Road City. State, Zip Code Montclair, New Jersey 07042 Emergency (including justification) Cancellotion FACILITY INFORMATION  Name of Facility Whoj o Astement is Taking Place (3)  Montclair High School  Street Address 100 Chestnut Street  County (8)  Escox (STATE USE ONLY)  Detail Associates  Size Address Size Address 300 Grand Aveue  City, State, Zip Code Englewood, New Jersey 08831  Telephone No. 21 School Walter Period of Abatement (Check Only One)  Street Address 102 County Code (7)  Street Address 103 Code Walter Period of Abatement Contractor (9)  Lillich Corporation  Telephone No. 21 School Data Park, New Jersey 07424  Telephone No. 21 School Contact Lenny Saponaro  Telephone No. 21 School Contractor (9)  Lillich Corporation  Telephone No. 21 School Data Park, New Jersey 07424  Telephone No. 21 School Contractor (9)  Lillich Corporation  Telephone No. 22 School Contractor (9)  Lillich Corporation  Telephone No. 22 School Contractor (9)  Lillich Corporation  Telephone No. 373-225-8400  City, State, Zip Code	II Ex 10 lz Es
EPA   DEP   Amendment #   City State, Zip Code   Montclair, New Jersey 07042   WAPE   Telephone Numer of Contact Lenny Saponaro   WAPE   Telephone Numer of Contact   Wape	Onici + Doscipe.
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Initial   DEP   Amendod	nglewood, New
DEP DOL Amandod Amendment # Montclair, New Jersey 07042    Street Address   Dock   Street	00 Grand Aveus
EPA   DEP   DEP   DOL   Amended	etail Associates
EPA DEP DOL Amendod Montclair, New Jersey 07042    VARIET   College	
EPA DEP DOL Amendod Montclair, New Jersey 07042  Name of Contact Lenny Saponaro  FACILITY INFORMATION  School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings. no etc.)  City (5)  Square Feet  # of Floors Bldg Age	ounty (6)
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EPA DEP DOL Amendment # Emergency (including justification)  Initial 22 Valley Road City State, Zip Code Montclair, New Jersey 07042 Name of Contact  Name of Contact	
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EPA Initial 22 Valley Road ASELSTOS GOVERA &	DEP
WILLIAM DARFARE	] EPA
02/13/12 Ck:1848 \$200 Montclair Board of Education	
PEMEMBER - MAIL INVARIDATION OF ASSESTOR ABATEMENT  Date of Notification (1)  Name of Building Owner/Operator (2)  DOIL HOUSE	MIND OF THE

47.20mg

P.4/5

Print Form

REMEMBER -	M	AIL IN HARD C	OPX	מבור	ATIO	NOF	1 Now Jo ASBEST JAC 8:60	OS AB	ATEN 2:120	ENT	6 2012	र जन्म क्षा जन्म व	dhistoid da.		4277	e i	
Date of Notification (1) 02/13/12 Ck:1849	9	5200		[ N	ame i	of Bull	ding Own Board o	er/Opic	erator	(2)	COMPRO	OL	<u> </u>	) DA	Y		1 th
Agencies Notified	1	> Notification		S	treet	Addre		esmente	are a secondario	UCL:	SING	FH	11.3	28/12			
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Name of Facility Whore Mt. Hebron School	Abai	temont is Taking Pk	ace (3)							⊠ sc	Facility (4) Hool (K-12 Inchapter (	)	than K-	12)	200		
Street Address 173 Bellevue Aven	عد		-							Square	her (l.e. pri	vata &	Floors	BI	dg. A		
City (5) Montclair, New Jer	sey	07042					- /7\	~		20,00		2 If bein	g demoli	- 1	5+		
County (6) Essex				1	STAT		ONLY) .			School							
Name of Monitoring Firm Detail Associates	ı Hi	red by Building Own	ner (8)		AS	CM N	0.		Lilic	h Corpo	oration	I (IC.IOF					
Street Address 300 Grand Aveue	†								606		е Ачепи	е					
City, State, Zip Codo Englewood, New	0/0	ev 08631							City, Woo	State. Zip odland i	Code Park, Ne	w Jen	sey 074	124			
Project Manager for Mo	nio	ring Firm		1		-569-			Tolor 973	-225-84	100		Ucense 01104				
Stephen Jaraczew Stan Date (10)	241	S	201-569-6708 Scheduled Completion Date (11)							of OSH Enviro	A Monitor	Labs					
O2/15/12 Occupancy Status Duri	ng A		2/16/1: Only One		-				Strot	t Addres							
Casilly Clased NA	care	of During Entire Per	iod of A	bater	nent 5			_	City.	Stote Zi			3				
Scope of Work (Chack  3 sf or 23 if  2180 sf or 2280 if			X R	enov	ation Mon					Min	Containmi i-Enclosur vebag Pro n-Exemple	endure				ure	
	+		Is	Loca	tion	T									Aba	tome Type	u.
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Lilich Corporation					1872	er iD 1 24	vo.	1	sal D	nto	City Sta	ita -	Landfill				<b></b>
City, State Woodland Park, N	lev	Jersey 07424						02/2	0/12		Morris	ville, I	ennsy	Ivania Date			
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Date of Notification (1) 02/13/12 Ck:1850	\$200		Meme	of Building of Chair Boar	Owner/Op	erator (2) ucation	LICE	ISIRG		1	
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M COL	Amondment # Emergency (in		_ Mon	State, Zip Co tclair, New of Contact	A Telzeñ Age	07042	WAIVE	Telephone Num	JVE T	<b>D</b>	_
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Name of Facility Where Ab Watchung School Street Address	atement is Taking	Pinco (3)				Týo N	Other (i.o. p		?) ol build	inga;	nom
14 Garden Street City (5) Montclair, New Jerse	07042				190%		etc.) Jare Feet JOO	# of Floors		dg. A	gn
County (6) Essex			Coun	y Code (7) E USE ONLY	7	_ Sc	hool	or if being domolia	red)		
Name of Monitoring Firm F Detail Associates	led by Building O	lwnor (B)	AS	CM No.		Lilich Co	rporation	tractor (9)	,		
Street Address 300 Grand Aveun			2			Street Add 606 McB City, State	kride Avenu	le			
City, State, Zip Code Englewood, New Jen			Tolog	hono No.		Woodlar Tolephone	id Park, Ne	l licenso N			
Project Manager for Monitor Stephen Jaraczewsk Stan Date (10)		Schedule	201-	569-6708 on Date (11)		973-225 Name of O	-8400 SHA Monitor	01104		W	
02/15/12  Occupancy Status During	Abatement (Chock	02/16/1	2			Street Add	rironmental				11-500
Facility Closed/Vacate Abatoment Performed Other - Describe: 5F	of During Entire P	enod of A	batoment		_	City, State,	ute 22 Wes Zip Code Iew Jersey				
Scope of Work (Check All  23 sf or 23 if 2160 sf or 2280 if	That Apply)		onovation amolition			P !	Mini-Enclosun	ent with Negative I bedure d (°) and Non-Frial			e
			Location lornally		000	scription of				Abate	
Location ( Asbestes-Containing A TO BE ABA* In Facility (13)	epterial (ACM)	Mai	d Solely by ntenance/ odial Staff? (12)	0.0	stos Conti thermal surfac	nining Mate systems ind ling, VAT, on iscollaneou	r lolation.	Amount (Specify SF or LF)	Removal	Repair	Encapsulate
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Basement Coston	-	×		and the second		pe Insula		2 LF	ļ	X	
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Name of Registered Waste Lilich Corporation	Hauler			P Waste ID No 1	of Was		1	Registered Landfi W.S Landfill			
City, State Woodland Park, New	ersey 07424	2000			02/20		City, Ster Morrist	ville. Pennsylva			1
Completed by Tatiana Kalenikova		Title	Prosident		5	Ignature	milla		ete 2/13/	12	

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

CK#357

Date of Notification (1) 2-14-2012			T		Building (		perator	(2)	和配	re-	Pin n	7 🖂	Figure .		
Agencies Notified	Type Notification	¥	1	Street Ad	dress		Avo		UP-	U L			1	H	·
EPA DEP X DOL	Initial Amended Amendment		1	City, Stat	outh Livi e, Zip Co ston, NJ	de		1		EB	166 200	2			
DOH DCA	Emergency ( justification)  Cancellation		T	Name of David	Contact				IL AAS	E	ephone Nu	mber		154	
Name of Facility Where Chilton Towers - A		g Place (3)	11000	FACIL	ITY INFO	RMATIC	N		of Facility (4	1)	ENSING	ryshanstern a	-	_	, select
Street Address 220 West Jersey S	Street							×	ubchapter	8 (Oth	er than K-1: & commerci		dings	home	es,
City (5) Elizabeth								Squar		# 0	Floors		ldg. <i>A</i> 50+	\ge	
County (6) Union				County C (STATE U	ode (7) SE ONLY)		_		nt Use (Prio tment Ur		ng demolis	hed)			
Name of Monitoring Firm n/a	n Hired by Building	Owner (8)		ASCM n/a	No.		Jada	ar Con	ement Cont tracting,		(9)				
Street Address n/a								Addres roy La							
City, State, Zip Code n/a	W						- 3	state, Zip oln Pa	code rk, NJ 07	035					
Project Manager for Mon								none No -706-7			License N 01088	lo.			
Start Date (10) 2-23-2012	Start Date (10) Schedu				ate (11)		Name	of OSH	A Monitor		7				
Facility Closed/Vac	cated During Entire I	Period of Al	atem	nent i				Addres							
Scope of Work (Check / ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)		nova				E ×	Min Glo	i-Enclosure vebag Proc	edure	n Negative i			e	
			.ocati	15.0%				Decora-						emen /pe	t
Locatio Asbestos-Containing TO BE AE In Fac (13)	Used	Sole itenar	ly by nce/		tos Conta thermal	system sing, VA	Material s insula AT, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure	
Kitch	Kitchen					VAT (	no ma	astic)		7	4 SF	X			
Name of Registered Wa	aste Hauler		1,132,8	JDEP W		Cubic '			Name of F	Registe	ered Landfil	1			
Jadar Contracting,	10822	lauler ID 033137		of Was			G.R.O.	TELESTON DE LE LE	Landfill						
City, State Lincoln Park, NJ 07		9		Dispos TBD	al Date		City, State Morrisv		A 19067						
Completed by Lillie Lazarevich	tary			Si	igijature	lier	Paly	X	× 1	ate -14-2	012				

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L.			NOTH	FICATIO	tate of Ne N OF ASB t to NJAC	ESTOS	ABATE	MEN.	The state of the s		APPRO	VED			1
Date of Notification (1) 02/14/12 CK: 1858	3 \$200				of Building tic Health			(2)	- 4	BANE I	(signatu	ire)	1 Ser	rices	
Agencies Notified	Type Notification	1		Street	Address Madison		11111		FEB 1	te: 211	1/12	Time:	1:45		1
DOL DOL	Initial Amended Amendmen			City, St Morris	ate, Zip Co stown, N	ode ew Jen	sey 07	962	RECTOR OF	0 2012	Colomo:			_	
DOH DCA	Emergency justification Cancellation	)		Name (	of Contact elle DiGa	Ĺ	7 114		LICENSI	NG Tele	phone N	umber			
Name of Excelling Manage	Abstonactic Test	5	(0)	FAC	ILITY INFO	ORMATI	ON		-	- 10 mg	the .			-	
Name of Facility Where A Morristown Hospita Street Address	Aoatement is Takii	ng Place (	(3)	•				Typ	of Facility School (K-	-12)					
100 Madison Avenu	Je				er-green en en			×	Subchapte Other (i.e. etc.)	private &	r than K+ commer	12) cial bui	idings	, hom	65,
City (5) Morristown, New J	ersey 07962							10,0	are Feet 000	2	loors	1 5	3ldg. / 55÷	/ge	
County (6) Morris				County (STATE	Code (7) USE ONLY,		-	Hos	ent Use (Pr spital			shed)			
Name of Monitoring Firm Birdsall Services G	Hired by Building roup	Owner (8	)	ASC	M No.				atement Co poration	ntractor (	9)	***			
Street Address 65 Jackson Drive							Street 606 N	2000 0000000000000000000000000000000000	ss ride Aven	ue					
City, State, Zip Code Cranford, New Jers	ey 07016				-				Zip Code d Park, N	ew Jers	ev 074	24	-		
Project Manager for Mon Charles Shneekloth	itoring Firm		1	Telepho	one No. 97-8900		Teleph 973-2	one N	No.	- T	License 01104				0.00.
Start Date (10) 02/16/12		Schedu: 02/17/			Date (11)		Name	of OS	HA Monitor						
Occupancy Status During		k Only O	ne)				Street	Addre							
Facility Closed/Vaca Abatement Performed Other – Describe: 6	ed Outside of Norr	Period of nal Facilit	Abaten y Houn	nent s			City, St	ate, 2	Zip Code						
Scope of Work (Check Al	That Apply)						UTIO	1, 140	w Jersey	01083					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolii					GI	III Containm ni-Endosur ovebag Pro on-Exempte	e cedure					
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Franklin Level I	Hallway	Yes	No	N/A			TO				<del> </del>			ato	چ -
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ame of Registered Wast	e Hauler		H	JDEP W lauler ID 3724		Cubic Y of Wast				Registere W.S Lar		1			
ity, State loodland Park, New	Jersey 07424					Dispose 02/20/			City, Stat			nia		-	
ompleted by atiana Kalenikova		Title	Presid	dent		Şix	naturn	-	an Cas	50	Di	ete 2/14/1	2		*****

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

Check # 1298		(,	ursu	ance	o norto	0,00 4,14		15-7-18 6	O F I DA GO	)II	=	-	_
Date of Notification	(1)		8			ng Owner/Ope	arator	(2)		117	1		
02/13/2012			]		Snider					!	#		
Agency Notified	Type Notification				Address						1		
⊠ EPA	☐ Initial		ľ		kson St	And the second s		LL III FE	B 1 6 2012	11.1.8	4	10000	
☐ DEP	☐ Amended				State, Zip		į	1		Fred acces	4		
⊠ DOL	Amendment #	a			old, NJ			L The	Telephone Number	<u>}</u>	-		
⊠ DOH	justification)	3		Name	of Conta	ct	1	he E l	. I relephone Number		No.		
☐ DCA	☑ Cancellation			Dean	Snider					-			-
				FAC	ILITY INF	ORMATION		7 (2)49	no tire new selection in processing a classic separation.	*		1	-
Name of Facility Wh	nere Abatement is Taking Place	e (3)		177				Type of Facilit	y (4)	. 44	Mar.		
Private home								☐ School (K-1	2)				
Street Address									8 (Other than K-1 2)	.0.0			
75 Inches Street				30				homes, etc	orivate & commercial bu	allaings	5,		
75 Jackson Street							K Mineral - 1 (4)	Square Feet		Bldg. A	ge		
707 5	100												
Freehold, NJ 077	28		= 5	Count	v Code (7	7) (STATE US	SF.	Current Use (	Prior if being demolishe	ed)			-
County (6)				ONLY		7 (017112 00	-						
Monmouth		10	ASCN	1 No		Name of A	hater	nent Contractor	(9)		-	-	
Name of Monitoring	Firm Hired by Building Owner	r(8)	ASCIV	I NO.				Herit Contractor	(5)				
						Gr Tech L Street Add							
Street Address						100000000000000000000000000000000000000	Warth						
						576 Valle		and the state of t				-	
City, State, Zip Cod	le					City, State							
						Wayne, N		470	<del>-1</del>				
Project Manager for	r Monitoring Firm	Te	elepho	ne No.		Telephone			License No.				
						973-638-1			01127				
Start Date (10)	Scheduled Co	mplet	ion Da	ite (11)		Name of O							
02/19/2012	02/20/2012							Consultants,II	10				
Occupancy Status I	During Abatement (Check only	one)				Street Add							
□ Facility Closed/V	acated During Entire Period o	f Abat	temen	t				w Road, Bldg	g .# 34A				
☐ Abatement Perfo	rmed Outside of Normal Facili					City, State							
Other - Describe						Fair Lawr	ı, NJ	07410					
Scope of Work (Che	eck all that apply)					П	Full	Containment wit	th Negative Pressure				
≥ 3 sf or >3 lf				A 1991 CHESCHAR	novation		Mini-	-Enclosure					
☐ ≥160 sf or >260	If			☐ Der	molition			rebag Procedure	: nd Non-Friable Proced:	ure			
					T		14011	-Exemples ( ) a	i i i i i i i i i i i i i i i i i i i	T	Aba	atem	ent
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	ocation of		d Sole	Control of the Control of the Control	1	Descri							
	taining Material (ACM) BE ABATED		intena			stos Containi e., thermal sys		aterial (ACM)	Amount (Specify	1;	υ _	Enc	T.
(	N Facility	C	Staff?	The state of the s	(1.6	surfacing			SF or LF)	1	Am Ke	aps	Clo
	(13)		(12)			other misc	ellane	eous)	880	1	Removal	Encapsulate	Enclosure
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		Yes	No	N/A	n				110 1 5		-+	+	-
Basement				X	Pipe in	sulation			110 LF	X	-	+	+
					1							1	
							W. 200 (100 )						
Name of Registered	d Waste Hauler	514 C33330	DEP \	Waste I	Hauler	Cubic Yard Waste	is of	Name of Reg	stered Landfill	(2)			
Gr Tech LLC		003	3785	5				T.R.R.F. In	c			3001745	
City, State				100		Disposal Da	ate	City, State	11)02				
Wayne, NJ 07470	0							Tullytown, l	PA				
Completed by	Title					Signature	1	1	n , Da	te	- 50		
N. Jevtic	Owner					2			mad 02/	13/20	12		
ASB-41	* Do not	use th	is form	n for as	sbestos lic	ensure exem	pted				-	+	

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

Check # 1290		(Pu				0.00 and 12		and the book of the second	Cancellati	on			_
Date of Notification (1)	)			Name	of Buildin	g Owner/Opera	ator (2	) = (**		3			
2/13/2012					s Claire				1 1 1 1	1			
Agency Notified	Type Notification	-		Street	Address			V		- C - C - C - C - C - C - C - C - C - C			
	C) Initial					ge Street	111	H FED	-1 6 2012	111			-
XIEPA □ DEP	☐ Initial ☐ Amended		1	City, S	tate, Zip	Code	i U	TLL	1 0 2012	ana d			
⊠ DOL	Amendment #		N	lew E	Brunswi	ck, NJ 08901	1			Á			
	☐ Emergency (incl	uding	100		of Contac	The second second		AsDEST	Telephone Numbe	er 1		ACI-8105	
⊠ DOH	justification)  Stancellation		E	) am a	n Alayo	n							
□ DCA	& Calicellation		r				T BEACH	CHARLES CONTRACTOR OF THE PARTY					
				FACI	LITTINE	ORMATION		Type of Facilit	A CHARLEST AV A 1/2			-	-
Name of Facility Whe	re Abatement is Taking	Place (3)				4.		Type of Facility	y (4)				
Private home								☐ School (K-1					
Street Address			(delen)						8 (Other than K-1 2) private & commercial b	milding	2		
OC Talmadas Ct	root						1	homes, etc		,unumg	٠.		
8 S. Talmadge St	icet							Square Feet	# of Floors	Bldg. A	Age	SUTTERS	-
New Brunswick, N	NJ 08901			Carret	Code /7	VOTATE LISE		Current Hea /	Prior if being demolish	ed)		-	
County (6)				ONLY		) (STATE USE		Current Ose (i	rior il bellig delliolisti	cuj			
Middlesex													
A SECTION AND A	irm Hired by Building O	wner(8)	SCM	No.		Name of Aba	ateme	nt Contractor	(9)				
	militared by Editioning o				-	Gr Tech LL							
Street Address						576 Valley	1975.	£283					
City, State, Zip Code						City, State. Z						-	7
City, State, Zip Code						Wayne, NJ							
	Manitorina Firm	i Tel	enhor	ne No.		Telephone N		70	License No.		-		
Project Manager for I	widnitoring Firm	10	Срио	10 110.		973-638-17			01127				
		1.01-4	- Da	to (11)		Name of OS	3.55 A.	onitor	01127	4775			1000
Start Date (10)		d Completio	on Da	te (11)									
02/11/2012	02/12/20					Envirovisio		onsultants, II	10			-	_
Occupancy Status D	uring Abatement (Check	only one)				Street Addre							
ጃ Facility Closed/Va	cated During Entire Peri	od of Abate	ement			20-21 Wag	-		g .# 34A				
☐ Abatement Perform ☐ Other - Describe:	med Outside of Normal F	acility Hou	irs			City, State, Z Fair Lawn,	web bases						
Scope of Work (Chec	ck all that annly)		-			Tan Lawn,	143 0	7710					
Scope of Work (Cher	an that apply/			50.0					h Negative Pressure				
≥ 3 sf or >3 lf					novation molition	IVI		nclosure pag Procedure					
☐ ≥160 sf or >260 l	1								nd Non-Friable Proced	dure			
		le	Locat	ion.								atem	
		1	lorma							- 1	<b>-</b> T	Туре	2
	cation of		d Sole		Acho	Descript stos Containing			Amount	1		п	1
	ining Material (ACM) E ABATED	100-100-	ntena			e., thermal syste			(Specify		R .	nce	
	Facility		ustodi Staff?		,	surfacing,			SF or LF)		m de	sde	
	(13)		(12)			other miscel	llaneo	us)		-	Removal	Encapsulate	
				T -	+						-	O	
		Yes	No	N/A								-	-
Basement				x	Pipe ir	sulation			40 LF		X	1	1
									100000000000000000000000000000000000000				-
										i			1
				+	+						1		7
Name of Registered	Waste Hauler	10000000		Naste	Hauler	Cubic Yards	of	Name of Reg	stered Landfill				-
		ID				Waste							
Gr Tech LLC		003	3785	5		Disposal Car		T.R.R.F. In	<u>c</u>				_
City, State		200	-716			Disposal Dat		City, State	D.4				
Wayne, NJ 07470	75						7	Tullytown,	A CONTRACTOR OF THE PARTY OF TH				_
Completed by	Title					Signature	1	1		ate			
N. Jevtic	Owner					1/20	wic	Wen	02	2/13/20	012		20000
ASB-41	* Do	not use th	is for	m for a	sbestos li	censure exemp	oted a	ctivities.					

2393

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

Date of Notification (1) 2/13/12					f Building Realty		perator (2)				/ T#-+	Teu(E)		The second second
	ype Notification			Street A 222 G	ddress cand Av	enue			FEB	162	2012		ara"	
□ EPA □ DEP □					ite, Zip Co			1-6-			of the same	******		
M DOL	Amendment	t#					sey 076	31	Hossin.	S C A	JL ox			
7	Emergency	(including	_		f Contact	NEW DEL	Sey 010		Tele	phone Nu	mher		-	-
DOH DOA	justification)  Cancellation		.	1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (		a lanna		The State of	10.0	priorio (40	oci			
DCA C	Cancellation	<u> </u>			herry (			remark in NA,24.						
Name of Facility Where Ab	atement is Takin	n Place (3	0	PAU	LITTINE	UKMATI		pe of Facility	(4)					-
	1	ig i idoo (o	,											
Plaza Garden Apart Street Address	IIBILS									r than K-1	2)			
2165 Center Avenue	` .	7/4	-	8			K					lings,	home	es,
								etc.)	1 4 46	Floors	10	Ida A		_
City (5)					E (2)		5	quare Feet	# 01	1		ldg. A 60	ge	
Fort Lee, New Jers	ey 07024			1				300				00		
County (6)		10.000		County	Code (7) USE ONLY	3	1000	urrent Use (Pr			ined)		-	
Bergen				Description of the second			GENERAL SECTION OF THE SECTION OF TH	oiler Hou						
Name of Monitoring Firm H	ired by Building	Owner (8)	Mary M	ASCN	No.			Abatement Co				r.		
Omega Environmenta	al Inc.		50.00		22			ated Envir	oment	al Serv	/W.	uc.		
Street Address			8	7	*		Street Ad	dress uth River	Stroot	::::::::::::::::::::::::::::::::::::::				
280 Huyler Street	28 40			43			450 50	uui Mvet	Ducu		*			
City, State, Zip Code								, Zip Code				4.8		
South Hackensack,	New Jersev	07606		- 20			Hacken	sack, New	Jersey	07601				
Project Manager for Monito				Telepho	ne No.		Telephon	e No.		License 1	Vo.			
Anton Rezina				201_4	189-8700	0	201-931	-0313		00500		-		0
Start Date (10)		Schedule	ed Co	mpletion				OSHA Monitor		7				-
	700			77			Omrora	Environmer	ntal Tr	C	18			
2/12/12 Occupancy Status During A	hatament (Che	2/13	12.		***		Street Ad		icar is	<b>~</b> •		-		
							120000000000000000000000000000000000000	yler Stree	<u>at</u> .				1	
☐ Facility Closed/Vacate ☐ Abatement Performed	d During Entire	Period of A	Abate	ment				, Zip Code					- 3	_
☐ Abatement Performed ☐ Other — Describe:	Outside of 140ff	nai i aomity	1 loui				10 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Hackensad	NIT (	07601h	n 9			
Scope of Work (Check All 1	The Amely							een up.						
	riat Apply)		2:	1.		_					Denne	22		
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		A 100 A	Renov			13		Full Containn Mini-Enclosur		Negative	Pressu	re		
図 ≥160 sf or ≥260 lf		U .	Cilion	idoi.	7/26			Glovebag Pro	cedure					**
						- 16		Non-Exempte	ed (*) and	Non-Fria	ble Pro			
		Is	Loca	tion			516					Abate Ty		
Location o	•		Norma			Des	scription of				-	,,	pe .	
Asbestos-Containing M			id Sol	ely by	Asbes	tos Cont	aining Mat	erial (ACM)	20 0000	nount	_		ġ	1
TO BE ABAT				Staff?	(i.e.		systems in ling, VAT,			pecify or LF)	Remova	Repair	Encapsulate	Euclosure
In Facility (13)			(12)	)			niscellaneo		- t ,		100	pair	sut	Su
		Voc	No	N/A	1						=		ate	a
		Yes	ivo	INA	-		<u> </u>				1			-
Boiler Shed			14	х	Debri	s (ACM	)		300	-	Х			1
Boiler Shed				x	Boile	r Bree	ching		100	sq.	X			
Boiler Shed				x	Pipe	Insula	tian		50	lf.	X			L
										- T		2		1
Name of Registered Waste	Hauler			NJDEP V		Cubic				red Landfi				•
Tri-State Transfer				Hauler ID		of Was	ste	Miner	va Ent	erprise	s In	C.	12	
				12DEL	19551		-I Det-	1000						
City, State	74						al Date	City, Sta		Ohd -	11500			
Branx, New York 104	/4			ii exercenteris			13/12	wayne	surg,	Chio 4	44000			
Completed by	0	Title		Adminis		s	ignature	0 0	1 -		ate	13		

1312

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

Date of Notification (1) 02/09/2012			Building Thom	Owner/Op	erator	(2)	<u> </u>		WE							
Agencies Notified	Type Notification	ī		Street A		pson	, 1						the state of the s			
EPA  DEP  DOL	Initial Amended Amendmen	t #	C	City, Sta	Backus te, Zip Co		. 07/		FEB				RC-200ad makes			
➤ DOH DCA	Emergency (including justification)						y 0/4	+10	ASBESTO LIC	Te	ROL & èphone Nu	ımber	100		T-1	
Name of Facility Where Residential Street Address	· Abatement is Takir	ng Place (3)		FACII	LITY INFO	ORMATIO	N		of Facility (	12)	- NAME OF THE PARTY OF THE PART		\$			
10-15 Backus Roa					X	Subchapter Other (i.e. p etc.)	r 8 (Oth orivate	er than K-1 & commerc	12) cial buil	dings	, hom	es,				
City (5) Fair Lawn											dg. Age					
County (6) Bergen			ode (7) ISE ONLY	)	_	Curre	nt Use (Pri dential	or if bei	ng demolis	demolished)						
Name of Monitoring Fire TBD	m Hired by Building	Owner (8)		ASCM	No.				Abatement Contractor (9)							
Street Address				Site Maleri	-39-2-12-01			Address 5 Valley Road, Suite K								
City, State. Zip Code									ate, Zip Code ie, New Jersey 07470							
Project Manager for Mo	T	elephor	ne No.		Teleph	bhone No. License No. 3) 928-5040 00874										
Start Date (10) 02/20/2012	oletion [	Date (11)		Name of OSHA Monitor Sky Contracting, LLC						-	588850					
Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement							Street Address 1385 Valley Road, Suite K City, State, Zip Code									
Abatement Performed Outside of Normal Facility Hours Other – Describe:									ew Jerse	y 074	70		0			
Scope of Work (Check of the state of the st	on in			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							re					
			cation				Abar T							atement Type		
Location Asbestos-Containing TO BE AF In Fac (13	Solely enanc	olely by nance/ (i.e. thermal surface) 2) Asbestos Control (i.e. thermal surface) other m				scription of taining Material (ACM) I systems insulation, cing, VAT, or miscellaneous)			mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure			
Basen	nent	Yes I	10	N/A Floor			r Tile	es	300 SF		00 SF	×				
Name of Registered Wa	0.0000000000000000000000000000000000000	DEP Wa		Cubic Ya				I WALLE COMMISSION OF THE PARTY	ered Landfi		•	1				
Service Transport C	Froup, Inc.		209	990		2 Disposal	Date	Minerva Enterprises, LLC ate City, State								
City, State New Castle, Delawa	are					TBD	Date		Wayne:		Ohio					
Completed by Predrag Sarcev	eside	ent	1	Sign	nature		<u> </u>	- MA	804110010	Date 02/09/2012						

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

Date of Notification (1)	.2.10		T	Name of	Building	Owner/Op			M	E C	EI	W	ST	10									
	13.12			\	Jum	13	roidi	4	ILZr	***********	- U	hat [											
Agencies Notified	Type Notification			Street Ac		arryd	nulle	Aren		FFF	3 16 2	2012											
EPA DEP	Initial Amended			City, Stat	e, Zip Co	ode '			1	1 4	10/	(1)1/	- Van	-	7								
DOL	Amendment Emergency	(including	-	Name of		VISORC K	~ 1/1	10	IVOL	/Dag	ephone Nu	mhar	-	- [									
DOH DCA	justification) Cancellation			1.	Mach	Á	L			LIOTHE													
E	Ab atament in Takin	a Diago (2	\			ORMATIC		Type o	f Eacility	(4)	14 × 20												
Name of Facility Where	Abatement is Takir	,	Type of Facility (4)  School (K-12)																				
Street Address					Subchapter 8 (Other than K-12)  Other (i.e. private & commercial buildings, home																		
62 lam	plack sheet	104							c.)		f Floors		ldg. A		,,,								
City (5)	mck								20	1"0	2		59										
County (6)				County C	code (7)	1		Curren		ior if being demolished) S .													
Name of Monitoring Firm	Hirod by Building	Owner (8)		TASCM		,	Name	of Ahate	RE:		(9)												
Name of Worldoning Firm	i miled by building	Owner (0)		ACOM	110.				ntracting		(0)												
Street Address								Address															
City, State, Zip Code							City, S	tate, Zip	Code														
							N.J. 0	7452	r.,														
Project Manager for Mor		Telephone No.         Telephone No.         License I           201-262-5841         00156						NO.															
Start Date (10)	ed Con		Date (11)			11000	A Monitor																
2.13.12			Omega Environmental Services Inc.  Street Address																				
Occupancy Status Durin  X Facility Closed/Vac			nent					Street															
Abatement Perform Other – Describe:	Hours	) 				tate, Zip kensac	Code k, NJ 0	7606		•													
Scope of Work (Check A	All That Apply)						-	7						O. T. T. (C)									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renova Demolit				N.	Full Containment with Negative Pressure Mini-Enclosure																	
							Ž		ebag Pro Exempte		d Non-Fria	ble Pro	cedur	e									
4	Locati								Abatement Type														
Location Asbestos-Containing		Use	Normal ed Sole	ly by	Asbes	Des stos Conta	cription aining M		ACM)	Α.													
TO BE AB	ATED		intena todial S			. thermal:		s insulat			Specify or LF)	Remova	Repair	Encapsulate	Enclosure								
(13)	C-2 * () )		(12)	other miscellaneous)						CVG	air	sulate	sure										
		Yes	No	N/A		49		1 :				+.	<u></u>	(D									
basement				X	pu	pe u	nou	Icune	17)	85	LF	X	_		_								
	4			-								+ .		-									
								_				+ :	-										
Name of Registered Wa	ste Hauler			JDEP W		Cubic '			Name of	l Registe	ered Landfi	11	l										
Rovic Transport		lauler ID 20785	No.	of Was	ite		IESI P	A Betl	nlehem L	anrl"	l Cor	p.											
City, State Riverdale, New Jer	sev 07457				M-152729	Dispos	al Date		City, Sta Bethle		PA 1801	5	-										
Completed by	36y 07407	Title	-				ignatúre	-	c/	. 1	D	ate	7										
R. McDonald		Pres	sident				//	111	1-erl	1		3-17	3/1	1									

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

check#22682

ETS JOB # 3771/12	Name of the second second				entrales and the comment	AMENDM	ENT#								
Date of Notification (1)			ding Owner / Ope				****								
2/10/12		Anheuser B		THE PERSON IS		ME									
Agencies Notified Type Notificati	ion	Street Addres 200 Route 1				V In									
☐ DEP ☐ Initial N	Notification led Notification	City, State & 2	Zip Code 07114-2298	The second secon	FFR 16	3 1 6 2012									
		Name of Con		111 111	ILU IU										
DOH Cancel	ilation	Mr. Jasse G				TO SECURITION OF THE SECURITIO	o.op.io								
DOM				NI .	ASDECTOR CO	TROL &									
			INFORMATIO	the second second		******		1							
Name of Facility Where Abatemen Anheuser Busch, Inc.	it is Taking Pla	ace (3)		School (K-12)											
Street Address						29 / J. T	as. home	es. etc.							
200 Route 1 South			The second secon												
	County (6)	County Code (7)			3	774									
	Essex	County Cous (	A CONTRACTOR OF THE PROPERTY O	Facility (4) hool (K-12) bechapter 8 (Other than K-12) her (i.e., private & commercial buildings, homes, etc. Feet # of Floors Bldg. Age 5,000 3 50+ Use (Prior if being demolished)  of Abatement Contractor (9) contracting, Inc. Address ay Street ate & Zip Code lyn, NY 11222 her (Prior if being demolished)  of Abatement Contractor (9) contracting, Inc. Address ay Street ate & Zip Code lyn, NY 11222 hook Address and Street ate & Zip Code a											
Name of Monitoring Firm Hired by	Building Owne	er (8) ASCN	100000000000000000000000000000000000000												
Environmental Tactics, Inc.		0045													
Street Address			Street Ac			Carrier (1971)									
64 Broad Street															
City, State & Zip Code				City, State & Zip Code											
Matawan, NJ 07747															
Project Manager for Monitoring Fir	m				LICEIISE IV		1								
Tom Geiger Scheduled Start Date (10)	cheduled Com			nitor											
02/21/12		2/24/12	The state of the s	Environmental Tactics, Inc.											
Occupancy Status During Abatem		Street Address 64 Broad Street													
Facility Closed/Vacated Du Abatement Performed Out				City, State & Zip Code											
Describe:	250	Matawan, NJ 0774													
	k Area Vaca	ted - Working H		,	•										
	7:00am-3:3	Comment of the Commen	ou.o												
Scope of Work (Check all that app															
Demolition	Renovation	on		Full Con	tainment with	Negative P	ressure								
Large Project			$\boxtimes$												
Quantity is ≥ 3 SF or ≥ 3 L	F ACM		$\boxtimes$		g Procedure										
Quantity is ≥ 160 SF or ≥ 2	260 LF ACM			1											
Location of		Is Location			2		Abatement Type (Specify: Removal,								
Asbestos-Containing		Normally Used Solely by													
Material (ACM) TO BE ABATED		Maintenance or						psulation or							
in Facility		Custodial Staff?					Enclosure)								
(13)		(12)	or other mis	scellaneou	s)										
Stock House		Yes	Pipe In	sulation		12LF		emoval							
Power House		Yes		sulation		22 LF		emoval							
T OWE! HOUSE								•							
Name of Registered Waste Hauler		Yds. of Wa		e of Registe											
Vision Transport Inc.	8	3		oberland (	County	Landfill									
City, State			Disp	posal Date TBD		State pensburg	n PA								
South Kerny, NJ	T:41-		l Cia	nature	Sill	herianni	9, 1 7	Date							
Completed By (Print or Type) Richie Smith	Title Project I	Executive	3101	A	-1		_	02/10/12							
AOD 44 IIIN 05 04007				1	18	7									
ASB-41 JUN 95 G4667															

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

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

					D 111 0	10	(2)	- 1127 D				200				
Date of Notification (1)	February 13, 201		Name of	Building C		Associates	5厘個	OF 124	)個	13						
Agencies Notified  [ X ] EPA	1	tion Notification ded Notification		Street Ad		РОВо	x 3204		FR 1 5 20	12		A STATE OF THE STA				
[ ] DEP [x ] DOL [x ] DOH	Amen	dment # gency (including cation)		City, Stat	te, Zip Cod		leasant N	lew Jerse	y 08742		1	-				
[ ] DCA	Name of	ame of Contact Kathy  TY INFORMATION														
	<del>(100</del>		FAC	ILITY II	NFORMA	ATION				spakalter r	* - Andrews		3			
Name of Facility Where Re	Abatement is Taking sidence				Type of Fa		School (k-12) Subchapter 8 (ot	her than	1 (= 12)							
Street Address	4 Eastham Road						[x]	Other (i.e., priva homes, etc.)	te & co	mmerc	ial buil	dings,				
City County (6)					ode (7)		Square feet # of Floors Bldg. Age									
Point Pleas	ant	Ocean		(SIAIE)	JSE ONLY	, I			# of Floors 1 60  peing demolshed)  pe 99 n Contracting, Inc.  ute 9, Unit 61  ver, New Jersey 08755-1271  License Number 00624							
Name of Monitoring Firm		ASCM No	0.			Contractor ( Guardian	9) 1 Contracting,	Inc.		-						
Street Address						Street Add	dress	1889 Ro	ute 9 Unit 61							
City, State, Zip Code				e, Zip Code		ver, New Jers			271							
Project Manager for Monitoring Firm Telephone Number						732-349-9932 00624										
Scheduled Start Date (10 2/27/12	iled Completi 29/12	ion Date (1	1)	Name of OSHA Monitor E.M.S.L. Analytical Street Address												
[ ] Ab	Period of Ab nal Facility H			1056 Stelton Road  City, State, Zip Code												
[ ] Oti	her – Describe		11500					Piscataw	ay, New Jerse	y 088	54					
Scope of Work (Check a	ll that apply)					[ ]	Full Co Mini-Er		with Negative Pre	ssure						
L 1	sf or ≥3 lf 60 sf or ≥260 lf	[ x	Renova Demoli			[ X ] Glovebag Procedure [ X ] Non-Exempted (*) and Non-Friable Procedure										
										Abat	ement	Туре				
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)  Is Location Normally used Solely by Maintenance/Custodial Staff (12)					Asbo M (i.e., insu	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)  or LF)  R E E R E R E R E R E R E R E R E R E							E N C L O S U R			
YES NO N/A Exterior X					tos siding								Е			
							-	-								
Name of Registered Was Guardian C	Waste Hauler 20223	ID No.	Cubic Yar	ds of Waste	T.R	of Register C.R.F.	ed Landfill			55 je						
City, State			Dispos 3/01/	sal Date		City, Sta	te wn, Рели	sylvania	,							
Toms River, New Jersey 3/01/ Completed by (Print or Type) Title Nicholas Fernicola Project Manager					) North	cho	17	L	1	Date 2/13	3/12					
		*Do not	use this form	n for asbe.	stos licens	sure exemp	oted activit	ties.								