

Date of Notification (1)	/ 14			Name PSE		g Owner/Operator (2	) / Job #1402-47		‡5925	2 [	7	
Agencies Notified Type  ☐ EPA ☐ In	Notification itial			COMMONWED	Address O Hadley	Road		=== 1.0	2014	71		
	mended		9		tate, Zip C			FEP 1 9	2014			
	mendment #1	- 10				field, NJ 07080					ļ	
	mergency (in stification)	cluding	]		of Contact			Telephone Nu	ımber		- 1	
	ancellation				nard Gib					7	أ	
				FAC	ILITY IN	FORMATION				-		
Name of Facility Where Abatem	nent is Taking	Place	(3)				Type of Facility (4	4)				
PSE&G Teaneck							School (K-12)					
Street Address		-			-		☐ Subchapter 8 ☐ Other (i.e., pri			ilding	IS.	
1085 Palisades Avenue 8	& Colonial	Court					homes, etc.)	ivate and comm	nerolal bi	anding	,	
City (5)							Square Feet	# of Floors	В	dg. A	ge	
Teaneck												
County (6)				Coun	ty Code (7	)(STATE USE ONLY)	Current Use (Price	or if being demo	olished)			
Bergen												
Name of Monitoring Firm Hired	by Building (	Owner	(8)	ASCM	No.	Name of Abateme	nt Contractor (9)					
Health & Safety Services	3					AbateTech, In	ıc.					
Street Address						Street Address						
318 12 <sup>th</sup> Street						30 Maple Ave.						
City, State, Zip Code						City, State, Zip Co						
Hammonton, NJ 08037						Lumberton, N	J 08048				34	
Project Manager for Monitoring	Firm			phone		Telephone No.		License No.				
Jim Proctor			- AVIS	09-704	1 -	609-265-2107	10001501	00529				
Start Date (10)02 /24 /14	X-1		(8)	etion Dar 4 / _	1	Name of OSHA Me EMSL Analytic						
Occupancy Status During Abate	ement (Chec	k only	one)			Street Address						
☐ Facility Closed/Vacated Dur						200 Route 130	North					
Abatement Performed Outsi Time of Abatement:						City, State, Zip Co						
			_' '''		- LIVI	Cinnaminson	, NJ 08077					
Scope of Work (Check all that a	apply)					⊠ Full Conta	ainment with Neg	ative Pressure				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			enovati emolitic			☐ Mini-Encl ☐ Glovebag	osure		dure			
		Is	Locat	tion		<del></del>				atem	ent T	ype
Location of			Norma		Memore	Description of	Charles and the contract of th	929 March 4 (1997)		_	_	-
Asbestos-Containing Materi TO BE ABATED	al (ACM)	52900000	intena	-		estos Containing Mat e., thermal systems in		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility		Cus		Staff?	(	surfacing, VAT,	or	SF or LF)	Va.	-	Sul	sure
(13)		Van	(12) No	N/A	-	other miscellaned	ous)				ate	
Exterior		Yes		N/A	Achaet	os Plaster		690 SF			П	
Exterior		100 90			ASDESI	US FIASIEI		030 31		12		-
											Ш	L
Name of Registered Waste Hau			1.	NJDEP V		Cubic Yards of Waste	Name of Regist		-			
Waste Mgmt. of NJ, Inc.	(Ave. A Ha	uling)		17273		40	G.R.O.W.S.	Landfill	VI			
City, State						Disposal Date	City, State	2000				
Newark, NJ						TBD	Tullytown,	PA				
				100000			The second second		Date			
Completed By (Print or Type)  Jennifer Piraine	Title		ione (	Coordi	inator	Signature	es Perain		A	1,1	111	

Su additional pages (4) for supe if with

11/2				
3486	Ç		1	
2480	Vage	-	6+	り
0 10	, ,			

101 300 1			_	NI	D. Ildiaa	Owner/Operator /2	1				
Date of Notification (1)	12 / 13					Owner/Operator (2 uities, LLC		1846 Chk. #3486	3		
Agencies Notified  EPA	Type Notification			Street A		enue, Suite 500		FFR	1 9 2	01/	1
⊠ DOLWD	Amended		-		ate, Zip Co			FEN	1 7 /	V14	
☑ DHSS	Amendment #_				Action of the second	NY 11101					*
☐ DCA	☐ Emergency (in	cluding	-		f Contact			Tolonh-			
(NJAC 5:23-8)	justification)				George V			•			
	L Cancellation									-	
		/	<u> </u>	FACI	LITIN	FORMATION	Type of Facility (	1)			
Name of Facility Where		g Place (	3)				School (K-12)				
Belleville Equities,	, LLC						Subchapter 8	(Other than K-12)			
Street Address							Other (i.e., pri homes, etc.)	vate and commerc	ial build	lings,	
520 Belleville Aver	nue				-		Square Feet	# of Floors	Blda	. Age	
City (5)							220.000	8		year	s
Belleville				To	0-1-7	VOTATE LICE ONLY	2000	or if being demolish		you.	
County (6)				Count	y Code (/)	(STATE USE ONLY)	Vacant	A II Deing demonsi	100)		
Essex			, ,	100:::		Name of All 1					
Name of Monitoring Firm		Owner (8	3)	ASCM N	10.	Name of Abateme		Corn			
Horizon Environm	nental						d Mold Service	s, Corp.			
Street Address						Street Address					
PO Box 336				0.000000		3859 Sylon B					
City, State, Zip Code						City, State, Zip C					
Thorofare, NJ 080	86					Hainesport, I	NJ 08036				
Project Manager for Mo	nitoring Firm		Tele	phone N	10.	Telephone No.		License No.			
Mr. Steve Flanigar	n		8	56-848-	0800	609-702-0400		00862			
Start Date (10)	Sche	duled Co	mple	tion Dat	e (11)	Name of OSHA N					
02 / 26	/ 14	03_ /	28	<u> </u>	14	EMSL Analys	tical, Inc.				
Occupancy Status Duri	ng Abatement (Chec	ck only o	ne)			Street Address					
☑ Facility Closed/Vaca	ated During Entire Pe	eriod of A	Abate	ment		200 U.S. Rou	ite 130 North				
Abatement Performe	ed Outside of Norma P	al Facility PM/	Hou_PM	rs - Desc /	cribe AM	City, State, Zip C					
Scope of Work (Check	all that apply)							-tiv- D			
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		⊠ Rei □ Dei				☐ Mini-End ☐ Gloveba	g Procedure	n-Friable Procedu	re		
		Is	Loca	ition	Γ		,			temen	t Type
Locatic Asbestos-Containin TO BE AI IN Fac (13	ng Material (ACM) BATED cility	Use Ma Cust	d Sol inten- todial (12	ally lely by ance/ Staff?		Description estos Containing M e., thermal systems surfacing, VA other miscellan	aterial (ACM) insulation, Γ, or	Amount (Specify SF or LF)	Removal	Repair	Enclosure Encapsulate
		Yes	No						K-7	<del>_</del> ,	<del></del>
SEE ATTACHED - 4	4 additonal pages	-			Pipe In	sulation		7,566 LF		=	
16											
						v				ЦΙ	
Name of Registered W	/aste Hauler		_	NJDEP	Waste	Cubic Yards of	Name of Regi	stered Landfill			700
Freehold Cartage				Hauler II	D No.	Waste	GROWS L	andfill.			
	-,		1	0226		20 Disposal Date	City, State				
City, State						3-29-14		e, PA 19067			
Freehold, NJ									ate		
Completed By (Print or Kimberly A. Trum	4	tle Office	Coo	rdinato	r	Signature	1		2/1	2	14
Access to the second se						1	· /		-		

Agencies Notified Tyr  EPA  DOLWD DHSS DCA (NJAC 5:23-8)	pe Notification Initial Amended Amendment # Emergency (in justification) Cancellation	<u></u>		Street 200	Address OO Horize			FEB 1	9 20	14		
□ EPA □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Initial Amended Amendment # Emergency (in justification) Cancellation	<u>•0</u>		200	SOURCE STORY			1. 54.00	- Jan			1
DHSS □ DCA (NJAC 5:23-8)  Name of Facility Where Abate 208 West 2 <sup>nd</sup> St.  Street Address 208 W. 2 <sup>nd</sup> St.  City (5)	Amendment # Emergency (in justification) Cancellation			Citv. S		on way, Suite 18	0					•
Name of Facility Where Abate 208 West 2 <sup>nd</sup> St.  Street Address 208 W. 2 <sup>nd</sup> St.  City (5)	Emergency (in justification) Cancellation				tate, Zip C	Code					2	- 3
Name of Facility Where Abate 208 West 2 <sup>nd</sup> St. Street Address 208 W. 2 <sup>nd</sup> St. City (5)	justification) Cancellation	nciuaing		35,28	Mt. Lau	rel, NJ 08054		1000	-21	20.		Ĺ
Name of Facility Where Abate 208 West 2 <sup>nd</sup> St. Street Address 208 W. 2 <sup>nd</sup> St. City (5)	Cancellation			Name	of Contac	t		Telephone Nur	nber			CDESCO.
208 West 2 <sup>nd</sup> St. Street Address 208 W. 2 <sup>nd</sup> St. City (5)	ement is Takin			Hen	ry Fey							
208 West 2 <sup>nd</sup> St. Street Address 208 W. 2 <sup>nd</sup> St. City (5)	ement is Takin				<u> </u>	IFORMATION			-			-
208 West 2 <sup>nd</sup> St. Street Address 208 W. 2 <sup>nd</sup> St. City (5)	citionic is ruidin	n Place	(3)	170	) LETT 1 11	II ORMATION	Type of Facility (	4)	/	7		
208 W. 2 <sup>nd</sup> St. City (5)		19 1 1400	(0)				School (K-12	)	منين: 2)			
				1			Other (i.e., pr homes, etc.)	ivate and comm	ercial bui	- 100 100 170		
Florence, NJ 08518							Square Feet	# of Floors		lg. Ag	е	
					_		1200	2		00÷		
County (6) Burlington			0	Coun	ty Code (7	()(STATE USE ONLY)	Current Use (Pri Vacant Resi	9-10-11-11-11-11-11-11-11-11-11-11-11-11-	lished)			
Name of Monitoring Firm Hire	ed by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Accreditted Environme			10000	NA		Alliance Env	ironmental Sys	tems				
Street Address						Street Address						
28 N. Pennell Rd.						550 East Uni	on St.					
City, State, Zip Code						City, State, Zip C	ode					
Media, PA 19063						West Cheste	r, PA 19382					
Project Manager for Monitorin	ng Firm		Tele	ephone	No.	Telephone No.		License No.				-
Dave Turotsy	•		6	10-891	-0114	610-701-9000	)	00508				
Start Date (10)	Sche	duled C	omple	etion Da	te (11)	Name of OSHA N	Monitor	<del>- 1</del>				
2 / 17 / 1	UCDA HUMBON SE	2 /				AET						
Occupancy Status During Ab		ck only	one)			Street Address					_	-
☐ Facility Closed/Vacated D				ment		28 N. Pennel	Road					
☐ Abatement Performed Ou	-				cribe	City, State, Zip C						
Time of Abatement: 7AM-		30PM		AM		Media, PA 19						
Scope of Work (Check all that	it apply)					□ Eull Con	tainment with Neg	etivo Proceuro				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		□ Re 図 De				☐ Mini-End ☑ Gloveba			lure			
		Is	Loca	tion						ateme	ent T	vpe
Location of		1	Norma	ally		Description of	of					
Asbestos-Containing Mat			ed Sol	ely by		estos Containing Ma		Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABATEI IN Facility	D			Staff?	(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	ova	=	ısqı	nsc
(13)			(12)	)		other miscellane		,			late	G.
V/ V		Yes	No	N/A								
Basement					Pipe In	sulation		150				
Kitchen					VAT / N	Mastic		200		П	П	П
Tatonon		_		-					15		$\overline{\Box}$	
- 18 - 19 - 19 - 19 - 19 - 19 - 19 - 19 - 19				$ \Box $					ᆜᆜ	Ш	Ш	
9												
Name of Registered Waste H N.E.T.S.	łauler	725	7.0	Hauler II	D No.	Cubic Yards of Waste	Name of Regis  Allied BFI			2		
City, State				18947	li .	30 Disposal Date	City, State					
Hazelton, PA			150	7.5.75		TBD	Imperial, F	Α				
Completed By (Print or Type)	\   Тн	tle	<u> </u>			Signature			Date 1		1	
Mark Griffin		Estima	tor			Oignature	All	-	2/1	2/	114	(
ASB-41 MAY 11		* Do no	1100 1	his form	for asher	stos licensure exem	nted activities		/	J		III

State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) or o Cato Agencies Notified Type Notification Initial Am □ BPA Amended Amendment # Emergency (including DOH DOA justification) Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) POCOL mass School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings, 00 homes, etc.) Square Feet # of Floors Bldg. Age 1957 00.000 Current Use (Prior if being demolished) County Code (7) (STATE USE ONLY) uning itoring Firm Hired by Building Owner ASCM No. RUILE 0 License No. Scheguled Completion Date (11) Start Date (10) Occupancy Status During Abatement (Check only ☐ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility, Hours City, State, Zip Code Other - Describe: Rebul Scope of Work (Check all that apply) Full Containment with Negative Pressure Renovation \_\_\_\_\_≥3 sf or ≥3 lf Mini-Enclosure Glovebag Procedure 160 sf or ≥260 lf Demolition Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Normally Type Used Solely by Location of Description of Asbestos-Containing Material (ACM) Maintenance/ Asbestos Containing Material (ACM) Amount Encapsulate TO BE ABATED Custodial (i.e., thermal systems insulation, (Specify Remova Staff? SF or LF) IN Facility surfacing, VAT, or (13)(12)other miscellaneous) Yes No N/A

Name of Registered Waste Hauler

WASTE MANASCMENT

City, State

Completed By

To the Waste Hauler

Disposal Date

Signature

Signature

Signature

Date

Dat

### 40Ch

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

$\sim$				F	Duilding O	wner/Operator (2	1	0-25				
Date of Notification (1)	12 / 14		1	North	vale Sho	pping Center A	Associates	FEB 1 9 20	14		-	
Agencies Notified	Type Notification		- 5	Street Ad			1				Marie Marie	
□ EPA	☐ Initial			1355	15th Stre	et Ste 130					- 1	$\dashv$
☑ DOLWD	☑ Amended	0	1	City, Sta	te, Zip Coc	ie		F.17%		· . · · · · · · · · · · · · · · · · · ·	ال	
☑ DHSS	Amendment #_3			Fort L	ee NJ 07	024						_
☐ DCA	☐ Emergency (inc	luding	H		Contact		J	elenhono Numb				
(NJAC 5:23-8)	justification)		1		Slater		•					
	☐ Cancellation					COMMITTON						
				FACI	LITY INFO	ORMATION	Type of Facility (4)			_		
Name of Facility Where	Abatement is Taking	Place (3	3)			10044	School (K-12)					
252 Livingston Str		ct Phas	e 2	4/01/20	14 - 4/02	/2014	Cubchanter 8 (	Other than K-12)		•		
Street Address							Other (i.e., priva	ate and commerci	al build	ıngs,		
252 Livingston Str	reet						homes, etc.)	# of Floors	Bldg.	Age	_	$\dashv$
City (5)							Oqualo		56			
Northvale						A-	15,380	1				
				Count	Code (7)(	STATE USE ONLY)		it being demolish	leu)			
County (6)							Commercial					_
Bergen	- Used by Duilding (	Dwner (8	T	ASCM N	lo.	Name of Abatem	ent Contractor (9)					
Name of Monitoring Fire	m Hirea by Building C	AMILE! (O	'	00117	17.0	Superior Ab						
Health & Safety S	ervices, Inc			0011		Street Address						
Street Address	munitive enterior for the field					2 Hendersor	n Drive					
318 12th Street						City, State, Zip C			*********		Weyle.	
City, State, Zip Code							ell, NJ 07006					
Hammonton NJ 0	8037							License No.				
Project Manager for Mo	onitoring Firm		15.00	phone N		Telephone No.	40	00411				
Jim Proctor				09) 704		(973) 808-16		00411				
Start Date (10)	Sche	duled Co	mple	etion Dat	e (11)	Name of OSHA						
09 / 09	/ 13	04/	02	2_/_	14	Superior Ab	atement inc					
Occupancy Status Dur		k only o	ne)			Street Address						
☐ Facility Closed/Vac	ested During Entire Po	eriod of A	Abate	ement		2 Henderso	n Drive					
Abatament Perform	ned Outside of Norma	al Facility	Hou	rs - Des	cribe	City, State, Zip	Code					
Time of Abatement	t:F	PM/	_PM	- <u></u>	AM		rell, NJ 07006		.03			
		-					70		Ø			
Scope of Work (Check	( all that apply)					☑ Full Co	ontainment with Neg	ative Pressure				
☐ >3 sf or ≥3 lf		☐ Re	nova	tion		Mini-E	an Procedure					
≥3 \$1 60 ≥5 ii     ≥160 sf or ≥260 lf		⊠ De	molit	ion		⊠ Non-E	xempted (*) and Nor	n-Friable Procedu	ге			
		1 10	Loca	ation	T				Aba	ateme	ent T	ype
	•		Norm			Description	n of	i i i i i i i i i i i i i i i i i i i	Ţ,	Re	Щ	m
Locat Asbestos-Containi	ion of ing Material (ACM)	Use	d So	lely by	Asbe	estos Containing I	Material (ACM)	Amount (Specify	Removal	Repair	ca	clo
Aspestos-Containi	ABATED			ance/ I Staff?	(i.e	e., thermal system surfacing, V	ns insulation,	SF or LF)	ova	=	Encapsulate	Enclosure
IN Fa	acility	Cus	(12			other miscella	neous)	octor stationary for	_		late	0
(1	3)	Yes	No								7.000	-
-					-	lashing	2 2	350 LF				
Roof		붐	旨			w Caulk		6 EA				
Exterior Windows		븝	H		VAT			2 SF	$\boxtimes$			
Interior		-	片		Mastic			300 SF				
Interior				NJDEP		Cubic Yards of	Name of Regis	stered Landfill				
Name of Registered \				Hauler		Waste	Minerva L					
Service Transpo	ort Group, Inc			SW2		Diamond Data				- 2		
City, State	75					Disposal Date 4/2/14	Waynesbu	urgh, OH	140			
New Castle, DE					-		1	/	Date			
Completed By (Print	or Type)	itle		1		Signature		1/1		2/1	21	14
Nick Petrovski		Presid	lent				///////////////////////////////////////	Mu		71		1
MICK F GUOTSKI							0000			200		

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



						(0)			_	
		TNa	me o	f Buildir	g Owner/Operator	r (2)	cintos			
e of Notification (1)	44	1	Norti	nvale S	Shopping Cente	er As	Sociales			
1_/_	09 / 14	1		Address						
encies Notified	Type Notification	S	reel	45th	Street Ste 130				.Ø:	
EPA	☐ Initial		1333	tate, Zip	Code		50 m		*	
DOLWD	⊠ Amended	10	ity, Si	ale, Al	J 07024				Number	
DHSS	Amendment #2	, L						Telepho	one Number	1
DCA	☐ Emergency (including justification)	, 1	lame	of Cont	401			1	The state of the s	
(NJAC 5:23-8)	Cancellation		Gre	gg Sla	TEI			200		
			FA	CILITY	INFORMATION	-T:	Type of Facility	(4)		V
	11 tomont is Taking Place	e (3)	0.5			1.0	C School (K-1	2)	u V 12)	
ame of Facility Where	Abatement is Taking Place	ase 2	2/18/	2014 -	2/19/2014	-	School (K-1) Subchapter Other (i.e.,	· 8 (Other	than (~12)	l buildings,
252 Livingston Str	eet (110)					- 1	M Other (i.e., homes, etc	private a. S.)		
Street Address	2000 <b>2</b> 0			/56760/I			Square Feet	# of	Floors	Bldg. Age
252 Livingston St	reet						4 = 200	1		56
City (5)						AII M	Current Use (	Prior if be	ing demolishe	ed)
Northvale			Cou	unty Co	de (7)(STATE USE O	INLY)	Commerc	ial		
County (6)	%						ent Contractor			
	= ii ii = Oum	or (8)	ASCI	M No.	Name of Ab	atem	ent Contractor	(0)		
Name of Monitoring Fi	rm Hired by Building Own	J. (J)		117			atement Inc			100-1026C
Health & Safety	Services, Inc				Street Add	ress	- Drive			
Street Address					2 Hend	erso	Drive			
318 12th Street					City, State	, Zip (	Code	3		
City State, Zip Code							ell, NJ 07006	TLi	cense No.	
Hammonton NJ	08037	TTG	lenho	ne No.	Telephone	e No.			00411	
Project Manager for N	Monitoring Firm	1,0	(609)	704-8	850 (973) 8	08-10	616			
Jim Proctor	Schedul	ed Comr	letion	Date (	I Name of	AHSC	Monitor			
Ctart Date (10)		_ / _	19	/ 1			batement Inc			
1 00 / 09					Street Ad	dress				
		only one	tome	nt	2 Hen	ders	on Drive			
Occupancy Status D	uring Abatement (Check o	only one od of Aba	) ateme ours -	nt Descri		ders	Code			
Occupancy Status D  Facility Closed/V	uring Abatement (Check of acated During Entire Period armed Outside of Normal F	only one od of Abaracility H	ateme ours - PM	nt Descri		ders	Code	06		
Occupancy Status D  Facility Closed/V  Abatement Performent of Abatement	ouring Abatement (Check of acated During Entire Periodermed Outside of Normal Function PM	only one od of Aba acility H	ateme ours - PM	nt Descril	City, Stat	derso te, Zip Cald	Code well, NJ 070		ve Pressure	
Occupancy Status D  Facility Closed/V  Abatement Performer of Abatement	ouring Abatement (Check of acated During Entire Periodermed Outside of Normal Function PM	only one od of Aba Facility H	ateme ours - PM	nt Descril AN	City, State	derse te, Zip Cald	well, NJ 070	th Negativ	ve Pressure	
Occupancy Status D  Facility Closed/V  Abatement Performe of Abatement  Scope of Work (Che	ouring Abatement (Check of acated During Entire Period Per	Facility H	ours -	A	City, State	derso te, Zip Cald Full (	code well, NJ 070 Containment wi Enclosure	th Negativ		dure
Occupancy Status D  Facility Closed/V  Abatement Performe of Abatement  Scope of Work (Che	ruring Abatement (Check of acated During Entire Period Per	only one od of Aba acility H	ours -	A	City, State	derso te, Zip Cald Full (	well, NJ 070	th Negativ		dure Abatement Tyr
Occupancy Status D  Facility Closed/V  Abatement Performe of Abatement  Scope of Work (Che	ruring Abatement (Check of acated During Entire Period Per	Rend	ours -	^	City, State West	te, Zip Cald Full ( Mini- Glov Non-	Code well, NJ 070 Containment wi Enclosure ebag Procedur Exempted (*)	th Negativ		
Occupancy Status D  Facility Closed/V  Abatement Performe of Abatement  Scope of Work (Che	ruring Abatement (Check of acated During Entire Period Per	Renc	ours -	on y	City, Star West	te, Zip Cald Full ( Mini- Glov) Non-	code well, NJ 070 Containment wi Enclosure ebag Procedur Exempted (*) a ion of	e and Non-F	riable Proced	
Occupancy Status D  ☐ Facility Closed/V ☐ Abatement Performent of Abatement Scope of Work (Cher	acated During Entire Periormed Outside of Normal Fent:AMPM eck all that apply)	Reno	ours - PM ovation olition ocation mall	on y	City, Star West  West	Full ( Mini- Glov Non- escript	code well, NJ 070 Containment wi Enclosure ebag Procedur Exempted (*) a ion of g Material (AC) ems insulation	e and Non-F	Amount (Specify	
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#### State of NJ Notification of Asbestos Abatement

D&S Proj. #: 2014-57	_	8:60	and 12:120)			2		1	5 1			
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Date of Notification (1)	Name	of Building Owner	er/Operator (2)	-0.41			FE	EB 19	201	4	7	Л
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DOL Amendment #: ☐ Emergency		LSIDE, NJ 0	7205									
DOH (including		f Contact	1203			-	Telephone	Number				-
justification)  DCA  Cancellation	ll <sub>MS</sub>	HEMMING	WAY				I.					
Caricolation			LITY INFORMA	ATIO	V				-			_
Name of facility where abatement is	taking place (3)					Ту	pe of Facility (4					
MS. HEMMINGWAY							=	(K - 12)		V	10)	
Street Address						11		pter 8 (Of Private/Co			12)	
						_	Bldgs./l	Homes, et	c.		dg. Ag	
1600 CLINTON PLACE City (5)	County (6)			Co	unty Code (7)	50	quare Feet	# of Floors	5	Di	ig. Ay	je
City (5)	County (o)				ate use only)	=	urrent Use (Pri	ior if being	dem	olishe	ed)	
HILLSIDE	UNION					Ц.	. (0)					
Name of Monitoring Firm Hired by B	ldg. Owner (8)		ASCM No.		Name of Abatemer		1425					
Street Address				_	D & S RESTO	RATI	ON, INC.					
Street Address				F.3	20 California	Ave.						
City, State, Zip Code				_	City, State, Zip Cod	de						
			F3		Paterson, NJ (							
Project Manager for Monitoring Firm		Phone Numb	er		Telephone Number 973-345-802			License 0	Numb 1169	er		
2: 12:1 (48)	Tophod Com	pletion Date (11	()	_	Name of OSHA Mo							
Start Date (10)		ipietion Date (1	1)		D & S Restora	ation,	Inc.					
02/24/14 Occupancy Status During Abatement	03/14/14	20)		_	Street Address							
Facility closed/vacated during	78 9ES				20 California A		e		_	_	_	_
Abatement performed outside Describe:				1	) (i), Olato, 2.p							
Other-Describe: NORMAL Ho	OURS			_	Paterson, NJ	07503						
Scope of Work (check all that apply						=	Containment w	/negative	press	ure	1000	
_ =	Renovation				D		enclosure ebag procedur	е				
≥160 sf or ≥260 lf	Demolition					Non	-Exempted (*)	and Non-	riable	proc	_	
Location of asbestos-containing	ls location norr by maintenanc	nally used solely e/custodial		n of	anhostos containing		Amount		е	e	E n	E
material (acm) to be	staff(12)		material (		asbestos-containing )		(Specify S LF)	F or	m o	p a	c a	c
abated in facility (13)	Yes N	lo N/A					Δ,		v e	i r_	р	
BASEMENT REC & BOILER RM			PIPE INSU	LAT	ION		53 L FT					
				_					ዙ	屵	H	쓔
			1						H	Η	片	#
									H	H		
Registered Waste Hauler	NJDEP Ha		ubic Yards of V	Vaste				001777	.— J			
D & S RESTORATION, INC.	13506	Disposal D	l yd Date	-	TULLYTOWN City, State	N, KES	SOURCE RE	COVER	Y			
City, State PATERSON, NJ 07503		TULLYTOW	N, PA									
Completed by (Print or Type)	Title		Signature					Date				
	PRESIDENT  Do not use this	emn*	ed activities			02/11/	14					
ACD 44	LATIOURSE HIS	TOTAL ROLL & SUESI	os nochadie ex	الاااات	ou douvillos.							

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

D&S Proj. #: 2014-58			Pursua	ant to NJAC	8:60	and 12:120)		. 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1	7	7 7	Z F	7
(1(#0055	71							bolt in				
Date of Notification (1)				er/Operator (2)			F	EB 1.9	3 20	)14		
Agencies Notified Type Notific	- Mari	ederico Cr et Address	istian									
☐ ☐ Amended	5	16 78th S7	REET			19		4 8				
Amendment	#: City	, State, Zip	Code				, and the s	. = "				
☑ DOL ☑ Emergend	y —    N	North Berg	en, NJ									
DOH (including justification		ne of Conta	ct			`	Telephone	Number	_			
DCA Cancellati	- 11 -	Federico C	ristian									_
*			FACII	LITY INFORMA	ATION							
Name of facility where abatemer	nt is taking place	∋ (3)					Type of Facility (4	) (K - 12)				
Federico Cristian							Subcha	pter 8 (Ot	her th	an K-	12)	
Street Address								Private/Co lomes, et		cial		
516 78TH STREET				. 11				of Floors	-	Blo	lg. Ag	je
City (5)	County	(6)				nty Code (7)		.,,		l'alaa	٠١١	
North Bergen	Hudse	on			(Stat	e use only)	Current Use (Pri	or it being	aem	olisme	u)	
Name of Monitoring Firm Hired b	y Bldg. Owner	(8)	T	ASCM No.		Name of Abatement	Contractor (9)					
					_	D & S RESTOR	ATION, INC.					
Street Address						Street Address						
					_	20 California A City, State, Zip Code	The second secon		-			
City, State, Zip Code					- 11	* PEA 2000000000						
Project Manager for Monitoring Fi	rm	Phon	e Numbe	ar	-	Paterson, NJ 0' Telephone Number	1303	License	Numb	er		
Project Manager for Monitoring 11	1111	111011	e radiiib	51		973-345-8020		A STREET OF STREET STREET	169		823	
Start Date (10)	Sched. (	Completion	Date (11	)	-1	Name of OSHA Mor						
02/13/14	03/18/		,	,		D & S Restorat	ion, Inc.					-
Occupancy Status During Abatem					-	20 California A	venue					
Facility closed/vacated duri			ent.			City, State, Zip Code			-	_	_==	
Abatement performed outsi Describe:						o.,,, _,						
Other-Describe: NORMAL	HOURS				-	Paterson, NJ 0						_
Scope of Work (check all that ap	ply)						Full Containment w	/negative	press	ure		
≥3 sf or ≥3 lf	Renovation					ř	Mini-enclosure Glovebag procedur	e				
≥160 sf or ≥260 lf	Demolition						Non-Exempted (*)		riable	proc	edure	
Location of	Is location i	normally us	ed solely						e e	R	E n	E
asbestos-containing material (acm) to be	by mainten staff(12)	ance/custo	ılaı			sbestos-containing	Amount (Specify S	For	m	р	C	n
abated in facility (13)	Yes	No	N/A	material (	(ACIVI)		LF)		0 V	a i	a p	Ľ
BASEMENT BOILER		X		BOILER II	NSUL	ATION	50 SQ FT		e X			
Registered Waste Hauler D & S RESTORATION, INC.		Hauler ID:		ubic Yards of V	Waste	Name of Registere TULLYTOWN	d Landfill , RESOURCE RE	COVER	Y.			12.5
City, State		Di	sposal D	ate		City, State						
PATERSON, NJ 07503			02/14/1			TULLYTOWN	I, PA					
Completed by (Print or Type)	Title			Signature				Date	1.4			
BOGDAN JOLDZIC	PRESIDE		r acheet	os licensure ex	empte	d activities.		02/12/	14	_		
AOD 44												

C/ 23/29

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

Date of Notification (1)				Mor	o of Buildi		(0)	The New York				
	12 / _	14		1	SE&G	ng Owner/Operator (	(2)	FEB 1	9 2	014		
Agencies Notified  EPA	Type Notificat	ion		1 1000	et Address 5 How L			TEU.				
⊠ DOLWD	Amended Amended			City,	State, Zip	Code		Transfer to		1975	- 04	-
☑ DHSS ☐ DCA	Amendmen			- F		wick , NJ 08901						A STORY
(NJAC 5:23-8)	☐ Emergency justification	y (inclua n)	ing	_	e of Conta			Telephone Numb	205		_	
,	Cancellation			Ke	eith S. Wi	ilson		1				
					CILITY	NFORMATION					_	
Name of Facility Where / PSE&G	Abatement is Ta	iking Pla	ice (3)				Type of Facility  School (K-1	2)				
Street Address 5000 Bordentown A	Avenue						Subchapter Other (i.e., p	8 (Other than K-12) private and commer	cial b	uilding	ıs,	
City (5) Old Bridge, NJ 088	57		T				Square Feet	# of Floors	- 1	ldg. A	ge	
County (6)			-6-	Cou	mb · O · d ·	(7) (OTATE LIGE ONL)	15000	1	- 1	25		
Middlesex			-	Col	inty Code	(7)(STATE USE ONLY)	Office/ War	rior if being demolis	hed)			
Name of Monitoring Firm	Hired by Buildin	ng Owne	er (8)	ASCN	No.	Name of Abateme						
Environmental Hea	Ith Investigat	tions, I	NC.			JVN Restora		1				
Street Address						Street Address					_	
655 West Shore Tra	ail		201			47 Foster Ro	ad					
City, State, Zip Code Sparta, NJ 07871						City, State, Zip Co						
Project Manager for Mon	itarias Fi					Staten Island	NY 10309					
William Kerbil	itoring Firm			973-72		Telephone No. 718-605-6256		License No. 00774				
Start Date (10)	Sc	heduled	Comp	oletion D	ate (11)	Name of OSHA M	lonitor					
02 /21 /	_14	_03	/ _	02_/	_14_	Testor Tech						
Occupancy Status During	Abatement (Ch	neck onl	y one)		_	Street Address					_	
☐ Facility Closed/Vacate	ed During Entire	Period	of Aba	tement		10 59 Jackso	n Avenue					
Abatement Performed Time of Abatement:	Outside of Nori	mal Fac _PM/ <u>3:</u> :	ility Ho	ours - De I- <u>12:00</u> /	scribe VM	City, State, Zip Co						
Scope of Work (Check al	that apply)											
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			Renov Demol	ation ition		☐ Mini-Enc	Procedure	gative Pressure on-Friable Procedure	e			
	V.28		Is Loc						Ab	ateme	ent T	ype
Location Asbestos-Containing I TO BE ABA IN Facility	Material (ACM)	l h	sed Sollainte	olely by nance/ al Staff?		Description o estos Containing Ma e., thermal systems surfacing, VAT,	terial (ACM) insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)		Ye				other miscellane	ous)				ate	(D)
1st Floor Office Area					Floor 1	Γiles		1,920 SF				
										П	П	П
Name of Registered Wast WM of New Jersey	te Hauler			NJDEP Hauler I	D No.	Cubic Yards of Waste	Name of Regis		1=		_	
City, State 208 Patterson Aven	ue, NJ 08610					Disposal Date 02/18/14	City, State Morrisville	e, PA		***		
Completed By (Print or Ty	/pe) 1	Title				Signature /	1. //	Dat	e			
Ralph Barnhardt		Proje	ct Ma	anager			phone	) 0:	2/1	2/2	201	Ч
10D-41						///						

**MAY 11** 

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

Date of Notification (1)  01 / 31			Na	me of Buil	ding Owner/Operator	(2)	,				1
Agencies Notified Type No	/ 14			SE&G		W-1-1-1		nnia		/L	-
⊠ EPA ☑ Initia	f			05 How			FEB 19	LUH			+
		- 5		, State, Z							9
1	ndment #_ rgency (includ	_			swick , NJ 08901						+
	ication)	ling	Nar	ne of Con	tact		9				. Â
Cano			K	eith S. V	Vilson		Telephone Nu	mber.			
Name of Facility Where Abatement	. = =		F	ACILITY	INFORMATION		3			-	-
PSE&G	is Taking Pla	ice (3)				Type of Facility	(4)				
Street Address						School (K-12	)				
5000 Bordentown Avenue						Other (i.e., p	Other than K-1	(2) ercial	buildi	nas.	
City (5)						nomes, etc.)			1000		
Old Bridge, NJ 08857						Square Feet	# of Floors	T	Bidg.	Age	
County (6)			Co	inty Code	(7)(STATE USE ONLY)	15000	1 ,		25		
Middlesex				anty Code	(1)(STATE USE UNLY)	Current Use (Pri Office/ Ware	or if being demo	lished)			
Name of Monitoring Firm Hired by E	Building Owne	r (8)	ASCA	/I No.	Name of Abateme		110436				
Environmental Health Inves	tigations, IN	IC.			JVN Restorat						
655 West Shore Trail					Street Address						
City, State, Zip Code					47 Foster Roa	ad					
Sparta, NJ 07871					City, State, Zip Co	ode					
Project Manager for Monitoring Firm				207	Staten Island	NY 10309					
William Kerbil		1	ephone		Telephone No.		License No.				
Start Date (10)	Ta .			9-5649	718-605-6256		00774				
_2 / _14 / _14	Scheduled				Name of OSHA M	onitor					
	_2_	/ _1	8_ /	14	Testor Tech						
Occupancy Status During Abatemen	t (Check only	one)			Street Address						
☐ Facility Closed/Vacated During El ☐ Abatement Performed Outside of	ntire Period of	Abate	ment	2 3	10 59 Jackson	1 Avenue					
Time of Abatement:AM	PM/3:3	ty Hou 0 PM-1	rs - De:	scribe M	City, State, Zip Coo						
Scope of Work (Check all that apply)					LIC, NY 11101		-				
□ ≥3 sf or ≥3 if					□ Full Conta	inment with Nega	tive Pressure				
⊠ ≥160 sf or ≥260 lf		enovat emolitic			☐ Mini-Enclo	osure	uve Flessure			dis	
		511101101	211		☐ Glovebag	Procedure pted (*) and Non-	Friable Procedu				
1 222		Locat				· · · · · · · · · · · · · · · · · · ·	Thable Flocedu				
Location of Asbestos-Containing Material (AC	na Use	Norma ed Sole			Description of				atem		уре
TO BE ABATED	Ma	intena	nce/	Asbe (i.e	estos Containing Mate	erial (ACM)	Amount	Rem	Repair	Enc	등
IN Facility (13)	Cus	todial (	Staff?		surfacing, VAT. o	or	(Specify SF or LF)	Removal	air	apsı	Enclosure
	Yes	No	N/A		other miscellaneou	ıs)		-		Encapsulate	ਰ
1st Floor Office Area				Floor T	iles		1,920 SF	Ø			
						1					
								-			
Name of Registered Waste Hauler			DEP V		Cubic Yards of	Name of Register	ed Landfill		Ш	Ш	Ш
WM of New Jersey			uler ID 17273	No.	Waste	G.R.O.W.S., I					
City, State			11213		20 Disposal Date	City, State					
208 Patterson Avenue, NJ 086	10				02/18/14	Morrisville, P	Δ				
Completed By (Print or Type)	Title				Signature	// 7					
Ralph Barnhardt	Project	Mana	qer		I Hist	111-	Date		10 -		
SB-41					in filler to		0,	1 - 3	(- 3	011	( )

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

### Ton

Date of Notification (1)		Name of	Building O	wner/Oper	rator (	2)						
2/18/14		P.S.E.	_			***						5
Agencies Notified Type Notification		Street Ac 4000 H	dress	ROAD			F	EB 1	9 201	4		
EPA Initial Amended Amendment #	,		te, Zip Cod		NI OZ	7080					15	
Emergency (in		Name of		111111111111111111111111111111111111111	10 07		Teler	abone Nu	mber			1
DOH justification)  Cancellation		Joi	HN			TTE						
Name of Facility Where Abatement is Taking	Place (3)	FACIL	LITY INFO	RMATION	+	Type of Facility (	4)			-		-
PSEXE	. 1000 (0)					School (K-1	20.00 E					
Street Address	a 17	,	,	011		Subchapter Other (i.e. p				inas.	home	s.
MANHOLE#9 B	ROOK	SIDE	ED	RIVE	E	etc.) Square Feet		Floors		dg. A		
Milh Burn						WA		UJA		N	1/A	
County (6)		County C	Code (7) JSE ONLY)			Current Use (Price	or if bein	g demolis	hed)	1.0		
ESSEX  Name of Monitoring Firm Hired by Building O	wner (8)	ASCN		IN	lame o	of Abatement Cor	ntractor (	9)		111-1		
ENVIRONMENTAL TACTICS	(-)	0045				UE SYSTEMS			:A			
Street Address 64 BROAD STREET				11 (7)		Address VHITEHEAD A	AVE.					
City, State, Zip Code						tate, Zip Code						
MATAWAN, NJ 07747  Project Manager for Monitoring Firm		Telephor	ne No			TH RIVER, NJ	08882	License	No			
TOM GEIGER			32-2217	100		132-8350		01111	140.			
Start Date (10)	Scheduled Co	mpletion I	Date (11)	1000		of OSHA Monitor		MERIC	A			
Occupancy Status During Abatement (Check		X///	<i>I</i>	100		Address						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma				1000		WHITEHEAD / tate, Zip Code	AVE.					
Other - Describe: OLT DOORS	ii raciiity 110u				0.95 25/25	TH RIVER, N.	J 08882	2				
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renov				E	Full Containm Mini-Enclosure		Negative	Pressur	е		<b>3</b>
					×	Glovebag Pro	cedure	Non-Fria	ible Pro	edur	9	
	ls Loca	ation				24 Hom Example	C ( / L			Abate	ment	
Location of	Norm Used So	ally		Descr			1		-	ıу	pe	
Asbestos-Containing Material (ACM)  TO BE ABATED	Mainten Custodial	ance/		thermal sy	stems	laterial (ACM) insulation,	(S	nount pecify	Re	70	Ence	Enc
In Facility (13)	(12	Same and a service of		surfacin other mis	<b>O</b> ,		SF	or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes No	N/A							=		ate	.e
outDoors	X	<u> </u>	ACM	PIPE	; 5	SOMASTIC	6	LF	X			
				1								
		-		1.					-			
Name of Registered Waste Hauler		NJDEP W	/aste	Cubic Ya	ards	Name of	Register	red Landi	ill			
WASTE MANAGEMENT		Hauler ID 1125	No.	of Waste	1	GROW						0
City, State ELIZABETH, NJ		au gh seolata		Disposal TB	Date	City, Stat		E, PA				
Completed by	Title	MCD		100-000	natore	al Ru	n. ·	2	Date /	·	1,11	,
CAROL RAIMO	OFFICE	WIGK.		1/	1/11	EL XI	un	0	7//	1	17	

Date of Notification (1)		Nai	me of B	uilding Owr	ner/Operator	(2)	13 (	9 15			7		
2/16/14			S.E.G.						1			_	
Agencies Notified			eet Add	ress ADLEY R	C AO		-	-n 1	9 201	A.	4		
EPA Initial	(a) 2 ° 5			, Zip Code			<u>_</u>	<u>-B_1</u>	9 /11	4			$\neg$
DEP Amended Amendment #		S	OUTH	PLAINF	IELD, NJ	07080						-	
Emergency (inclination)	uding	Na	me of C	Contact	100 1			Telep	hone Nu	nber .	-	1	
DCA Cancellation		<u> </u>	10/	TY INFOR	PILA	Ro	116			-		· fi	
Name of Facility Where Abatement is Taking Pl	ace (3)		FACILI	I I INFOR	MATION	Type o	f Facility (4)					H.P.	
PSE+G				8		☐ s	chool (K-12	)	. 11 12 3	0)			
Street Address				Α -		× o	ubchapter 8 other (i.e. pri	(Other vate &	commerc	2) ial buildi	ngs, h	omes	s,
Street Address  MANHOLE # 9 BRO  City (5)  M, LLBURN  County (6)	20/5	5,4	DE.	DR	NE	Square	tc.)		Floors		ig. Ag		
City (5) . 1 1 By Da 1	S.M	OUR	UTAI	N RESO	ERVATION	Joquan	NA		NA		N	/ .	
County (6)		C	ounty C	ode (7)		Currer	nt Use (Prior	if bein	g demolis	hed)			
ESSEX		(S		SE ONLY)		[ [ ]	n	1//	7				-
Name of Monitoring Firm Hired by Building Ow ENVIRONMENTAL TACTICS	ner (8)		ASCM 0045				ement Cont			A			
Sireet Address						et Addres							
64 BROAD STREET				*	4		EHEAD A	VE.					
City, State, Zip Code						State, Zi	p Code VER, NJ	0888	2				
MATAWAN, NJ 07747		17	elephon	e No		phone No		1	License	No.	11-2-31		-
Project Manager for Monitoring Firm TOM GEIGER		24 222		2-2217	732	2-432-8	350		01111				
Start Date (10)	cheduled (	Comp	oletion D	)ate (11)			A Monitor SYSTEMS	OF A	AMERIC	A			
Occupancy Status During Abatement (Check C	Only One)	7	//	7		et Addres							
Facility Closed/Vacated During Entire Per		ateme	ent		39	6 WHIT	EHEAD A	VE.					
Abatement Performed Outside of Normal	Facility Ho	ours				, State, Zi	p Code IVER, NJ	ness	2				
Other - Describe: authoris					-   30	אחוטנ	IVER, NO	0000					-
Scope of Work (Check All That Apply)	図 Bon	ovati	ion			☐ Ful	I Containme	nt with	Negative	Pressur	е		
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>		nolitic				☐ Mir	ni-Enclosure ovebag Proc						
						No.	n-Exempted	(*) an	d Non-Fri				
		catio										ement pe	
Location of	Nor Used S	mally Solely		Anhontr	Descript os Containin		(ACM)	А	mount			Е	
Asbestos-Containing Material (ACM) TO BE ABATED	Maint	enan	ice/		hermal syste	ems insula		(5	Specify or LF)	Ren	Re	ncal	End
In Facility (13)		12)			surfacing, other misce		1	Si	or Lr j	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A	_						1		le	
out DooRS		X		Ann	PipE	Sam	ASTIC	(	64	- X			
GUIDOOKS			1	11411		00111	,,,,,,						
					w <sup>24</sup>								
Name of Registered Waste Hauler		100	JDEP W	2011/04/2010/05	Cubic Yard	is	Name of	Regist	ered Land	lfill			
WASTE MANAGEMENT		1000	auler ID i 125	No.	of Waste	1	GROW	S NO	RTH				
City, State					Disposal D		City, Stat		LE, PA				
ELIZABETH, NJ Completed by	l Title				7 BJ Signa	h		,	<del></del> т	Date,	1	11	
					1 210119	lule//	al Kl	~ •		Dule, as	/		

Por "

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

Date of Notification (1)			ame of E	Building Ov	wner/Oper	rator (2	)	1	EED	1 0	1 20	1/	24	
Agencies Notified Type Notification			treet Ad	dress ADLEY	ROAD						- 20	14	11. 73	•
EPA   X Initial   Amended   Amendment #_		C	ity, State	e, Zip Cod	e	NJ 07	080	1	4. S 2.		. 945 1	*	a.	
□ Emergency (inc justification)	luding			Contact		25		7,-	Telephone	Numb	er			
			FACIL	ITY INFO	RMATION	I	OTI							
Name of Facility Where Abatement is Taking F	Place (3)						Type of Fa  School	ol (K-12)						
MANHOLE #9 BR	001	~e.`	ے ۸	Ne	·VE	-  [	Subcl Other etc.)	napter 8 (i.e. pri	(Other than vate & comm	K-12) iercial	buildi	ngs, l	nome	s,
City (5)	(S.1	MOR	NTA	DR NRES	ERVAT	(us)	Square Fe	et / A	# of Floors		Blo	ig. Ag	1 .	
MILLBURN County (6) ESSEX			County C	ode (7)				se (Prior	if being dem	•	d)	, ,	,,	
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCM	No.	N		f Abateme							$\neg$
ENVIRONMENTAL TACTICS  Street Address	_		004	5		Street A	Address	7	OF AMER	KICA 				-
64 BROAD STREET City, State, Zip Code	10°-			-			VHITEHE ate, Zip Co		VE.					$\dashv$
MATAWAN, NJ 07747					,	SOUT	TH RIVE			se No.				_
Project Manager for Monitoring Firm TOM GEIGER		7	1.410.00	2-2217	-	732-4	one No. 32-8350	101000000	011					
Start Date (10)	Schedule 2	d Com	pletion [	Date (11)			OSHA M UE SYS		OF AMER	RICA	9	77		
Occupancy Status During Abatement (Check				-			Address VHITEHE	EAD A	VE.				17	
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Norma Other – Describe: ould name	riod of A I Facility	Hours	ent		- 1	5.0	ate, Zip Co TH RIVE		08882				9	
Scope of Work (Check All That Apply)	men					П								
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City, State ELIZABETH, NJ					Disposa T &	32	M		SVILLE, P					
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Name of Facility Where Abatem	ent is Taking Place (3)	)	FACILI	IT INFOR	MATION	Тур	e of Facility (4)						
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64 BROAD STREET  City, State, Zip Code						City, State	, Zip Code RIVER, NJ						
MATAWAN, NJ 07747  Project Manager for Monitoring	Firm		Telephon	ne No.		Telephone		Li	cense No	-			$\neg$
TOM GEIGER			732-29	2-2217	1	732-432	2-8350 OSHA Monitor	0	1111				
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TO BE ABATED In Facility	<sup>2</sup> Cu	stodial (12)		(	surfac	ing, VAT,	or	SF c	r LF)	Removal	Repair	Encapsulate	Enclosure
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City, State ELIZABETH, NJ					Dispos	sal Date	City, Sta MORR	te ISVILLI					
Completed by CAROL RAIMO	Title OF		MGR.		S	Signature	el L	aine	Di	2//2	8/	14	1
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DEP DOL	Initial Amended Amendment#		City,	State	, Zip Code PLAINFI	ELD,	NJ 070	080	† K							
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City, State, Zip Code MATAWAN, NJ 07	7747						SOUT	TH RI	VER, NJ	0888		- Na				
Project Manager for Mo TOM GEIGER	onitoring Firm			ephon 2-29	ne No. 2-2217		100000000000000000000000000000000000000	32-83	50		Licens 011					
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out boo	RS	-	$\exists$		Acm	Fi	E	BITTE	5/10	•			- 2			
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City, State		e <sup>57</sup>	1				sal Date		City, Stat		LE, P	Α				-27.55
ELIZABETH, NJ Completed by		Title					Signature	1				Da	te.	Ti	11.	7
CAROL RAIMO		OFFIC	E MG	R.				fire	el Ka	ey	no	4	0/	1/2	17	. –

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Emergency ( justification)	including		Vame of						Telen	hone Num	her		-	
DCA Cancellation		_	Jo1	40		1Ax	تم	176	No.	•	AND THE REAL PROPERTY.			The same
Name of Facility Where Abatement is Takin	Place (3)	-	FACIL	ITY INFO	RIVIATIO		Type of	Facility (4)	)					
PSE+G								chool (K-12 ubchapter 8		than K 13	Λ.			
MANHOLE # 11 B	OOK	(5,	DE	DR	iVE	=	⊠ or et	her (i.e. pri c.)	ivate &	commercia	al buildi	200 DE	200	s,
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ENVIRONMENTAL TACTICS			004					YSTEMS	OF A	MERICA	4			
Street Address 64 BROAD STREET							Address WHITE	HEAD A	VE.					
City, State, Zip Code MATAWAN, NJ 07747		W <del></del>		72,000			tate, Zip TH RI	Code /ER, NJ	08882					
Project Manager for Monitoring Firm TOM GEIGER			Telephor	ne No. 32-2217		the delected to	one No.			License N 01111	0.			
Start Date (10) 2/14/14	Schedule	ed Com	pletion [	Date (11)				A Monitor YSTEMS	OF A	MERICA	A.			
Occupancy Status During Abatement (Chec	ck Only On	ie)	//	Z		10 - TOTAL TOTAL	Address					-		
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City, State	in the		1120	-	and the same	sal Date	,	City, State		E PA				
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CAROL RAIMO		ICE N	IGR.				Are	I Ka	in	0	2	14	19	

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Name of Monitoring Fire ENVIRONMENTA	m Hired by Building Ov	vner (8)		ASCM   0045	No.		Name UNIC	of Abater QUE SY	ment Cont /STEMS	OF A	MERICA	١			
Street Address 64 BROAD STREE								Address WHITE	HEAD A	VE.					
City, State, Zip Code								State, Zip	Code /ER, NJ	0888	2				
MATAWAN, NJ 07 Project Manager for Mo				elephon	e No. 2-2217	-		hone No. -432-83			License N 01111	lo.			
TOM GEIGER Start Date (19)		Scheduled	1			-	Name	of OSHA	A Monitor	OF	AMERICA	Λ			
2/2/ Occupancy Status Dur	ing Abatement (Check	Only One)	21	1/10	4		Street	t Address	1		AWILITIO		-		
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City, State ELIZABETH, NJ						Dispo	B A	>		RISVIL	LE, PA			-	
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Project Manager for Mo				elephon	ie No. 2-2217			hone No. 432-83			Licens 011	se No. 11				
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outboo	RS		$\times$	-	Acm	P. P	E.	SOMA	stic		66	_/	*			
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City, State ELIZABETH, NJ	_					1	BA		City, Stat MORR		LE, P	Α				
Completed by CAROL RAIMO		Title OFFI	CE N	igr.	in .		Signati	//	I K	Ein	no	Dat	2	14		4
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Date of Notification (1)	1		Building Own	er/Operator (	(2)		1	F		
Agencies Notified		P.S.E.C	ldress							
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DEP Amended Amendment #_		City, Stat	e, Zip Code H PLAINFII	ELD, NJ 0	7080					Tourse VV
□ Emergency (inc     □ justification)	luding	Name of	Contact			· Telephone Nur	nher		1,42,0	
DCA Cancellation		<u> </u>	40	MAS	COTTE	15		read-NL T		
Name of Facility Where Abatement is Taking F	Place (3)	FACIL	LITY INFORM	IATION	Type of Facility (4	4)				
PSE+G					School (K-12	2) 8 (Other than K-1	2)			
Street Address  MANUAL ENIN BR	2015	· AE	DRI	VE	Other (i.e. pretc.)	rivate & commerci	ial buildi	ngs, t	nome	S,
MANHOLE #10 BROWN (5) MiLLBURN	(S. M.	OUNTA	IN RESO	ERVATION	Square Feet,	# of Floors	Blo	ig. Ag	1 .	
County (6)			Code (7)			or if being demolis	hed)	10		
County (6) ESSEX	(0)	I ASCN		Name	of Abatement Con	tractor (9)		111	-	
Name of Monitoring Firm Hired by Building Ow ENVIRONMENTAL TACTICS	vner (8)	004		UNIC	QUE SYSTEMS	S OF AMERIC	Α			
Street Address 64 BROAD STREET					Address WHITEHEAD A	AVE.				
City, State, Zip Code MATAWAN, NJ 07747					State, Zip Code JTH RIVER, NJ	08882				
Project Manager for Monitoring Firm		Telepho		Telep	hone No. 432-8350	License I				
TOM GEIGER  Start Date (10)	Scheduled C		92-2217 Date (11)	Name	of OSHA Monitor				-	
2/14/14	2/1	4/1	4		QUE SYSTEMS	S OF AMERIC	Α			
Occupancy Status During Abatement (Check					Address WHITEHEAD	AVE.				
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: audasus	eriod of Abate I Facility Hou	ement urs		City, S	State, Zip Code JTH RIVER, N.					
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Scope of Work (Check All That Apply)	R Pana	vation			Full Containm	ent with Negative	Pressur	e		
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	Is Loc			100 E8 62	a T				pe	
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City, State		1125		Disposal Dat	te City, Sta		-			
ELIZABETH, NJ	Title			ア B ム Signatu		RISVILLE, PA	Date,	1	7	
Completed by CAROL RAIMO	OFFICE	MGR.			Arch K	Rinco	2	14	1	<u>/</u> -

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L BOA L	•		FACILI	TY INFORM	ATION				1		- 1072	-	$\dashv$
Name of Facility Where Abatement is Taking	Place (3)					1000	Facility (4) chool (K-12)						
Street Address	0 1			- \\ \	21.10	St.	ubchapter 8 ther (i.e. priv	(Other th	an K-12) mmercial	buildin	gs, h	omes	,
MANHOLE#9A B	ROOK	5	106	DK	-1VE	Square	c.) Feet	# of Flo	ors	Bldg	g. Age	9	$\neg$
City (5) MILL BURN				d= (7)		Curren	t Use (Prior	if being o	/A lemolishe	ed)	U/	A	-
County (6) FSSEX			ounty Co TATE US	ode (/) SE ONLY) _				N/	A				_
Name of Monitoring Firm Hired by Building O ENVIRONMENTAL TACTICS	wner (8)		ASCM   0045	No.	Nai Ul	me of Abate VIQUE S	ement Contr YSTEMS	OF AM	IERICA	8			
Street Address 64 BROAD STREET						eet Address 6 WHITE	S EHEAD A'	VE.					
City, State, Zip Code					Cit	y, State, Zip OUTH RI	Code VER, NJ	08882					
MATAWAN, NJ 07747  Project Manager for Monitoring Firm			elephon		Te	lephone No 32-432-83	).	Li	icense No	).	= 6= -00		
TOM GEIGER	Scheduled	1 1		2-2217 Date (11)	Na	me of OSH	A Monitor						
2/21/14	2,	21	1/10			NIQUE S	YSTEMS	OF AM	MERICA				
Occupancy Status During Abatement (Check			ont				EHEAD A	VE.					
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	al Facility F	lours				ty, State, Zi OUTH R	p Code IVER, NJ	08882					
Scope of Work (Check All That Apply)													
<ul> <li>≥3 sf or ≥3 if</li> <li>≥160 sf or ≥260 if</li> </ul>	- Indiana	novati				Mir	l Containme ni-Enclosure ovebag Proc	edure					
						Läx No	n-Exempted	(*) and (	VOII-FIIAU			ment	
	1	ocatio	200		Docori	ption of					Ту	ре	
Location of Asbestos-Containing Material (ACM)	Used	Solel	y by	Asbesto	s Contain	ing Materia	I (ACM)		ount	7		En	ū
TO BE ABATED In Facility	Custo	ntenan odial S		(i.e. th	nermal sys surfacing	stems insula g, VAT, or	ation,		ecify or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		(12)			other misc	cellaneous)	-			val	=	ılate	ure ure
	Yes	No	N/A		A :			<del>,</del>		1			-
outDooRS		X	-	ACM	PIPE	Som	AST:C	6	LF	\ <u>`</u>	-	-	$\vdash$
									T				
	+		1										
Name of Registered Waste Hauler			JDEP V		Cubic Ya				ed Landfi	11			
WASTE MANAGEMENT	8-84-52		lauler ID 1125	No.	1	<i>!</i>	GROW		TH 				
City, State ELIZABETH, NJ					Disposal TB	Date	City, Sta MORR	te ISVILLI	120		,		
Completed by	Title OFFI	CE N	IGR.		Sig	Aka	e L	ain		ate /	8/	14	1

I HITE I OTH



$\cup$			- (5	uilding Ow	mos!Oper	ator /2	2)			1					
Date of Notification (1)			S.E.G		/nei/Opei	2101 (2	-/			y 1		1	7		
Agencies Notified Type Notification			reet Add	ress DLEY F	(LAOS									18	
EPA Initial Amended		Ci	ty, State	, Zip Code PLAINF	FIFI D I	VJ 07	080		13	FEB	1	3 20	014	,	
DOL Amendment Emergency (	including		ame of C						Tele	phone i	Numbe	er		_	_
DOH justification)  DCA Cancellation			50F	TY INFOR	M	AF	207	7E	,		10. dil 5.0	-		- Carlling	
Name of Facility Where Abatement is Takin	g Place (3)	-	PACILI	IT INFOR	QUATION.		Type of F	acility (4)	)						
PSE+G							Sub	ool (K-12) chapter 8	(Othe	r than l	(-12)				
MANHOLE #9A B	POOK	5i.	DE	DR	IVE	-  i	Oth etc.				ercial l				ie:
	(=	5.1	поик	TA:N	RESEA	e (AT)	Square F	1 1		Floors	7	Bid	g. Ag		
0		10	ounty C	ode (7)		$\dashv$	Current l	1	1			i)			
ESSEX	Oumar (9)	1 (8	ASCM	SE ONLY)		Name o	of Abaten	nent Cont	tractor	<u>/</u> (9)			_		
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (o)		0045			UNIQ	QUE SY	STEMS	OF	AMER	RICA				
Street Address 64 BROAD STREET				81			Address NHITEH	IEAD A	VE.						
City, State, Zip Code MATAWAN, NJ 07747							tate, Zip ( TH RIV		0888	2					
Project Manager for Monitoring Firm TOM GEIGER			elephon	e No. 2-2217			one No. 432-835	50		Licen: 011	se No. 11				1885
Start Date (10)	Scheduled	Com	pletion D	Date (11)			of OSHA QUE SY		OF.	AMEF	RICA				
Occupancy Status During Abatement (Che	ck Only One	<u>/ 7</u>	//	7		Street	Address								
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	Period of Ab	atem	ent			City, S	WHITE	Code							_
Other - Describe: ouldserv						SOU	ITH RIV	ER, NJ	0888	32					
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 tf	₩ Re	novat	ion				Full C	ontainme	ent with	n Negat	ive Pr	essur	е		
25 \$1 01 25 11 ≥160 \$f or ≥260 If	-	moliti					Glove	Enclosure bag Prod	edure		F-1-1-1-	D	el. 16		
	1					12	S Non-E	Exempted	d (*) an	a Non-	Fnable		Abate	ment	
Location of		ocation or all	у			cription							Ту	1157.05	
Asbestos-Containing Material (ACM) TO BE ABATED		itenar	nce/	Asbest (i.e.	thermal s	system	Vlaterial (A	on,	(	Amount Specify F or LF		Ren	Re	Encap	Endo
In Facility (13)		(12)			other m	ing, VA iscellar		1	3	r OI LI	,	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							,		5. [		e	_
outbooks		$\times$	-	ACM	P); p	ES	SOMAS	Tic		66	1	X.			
	-														
	++	-													
Name of Registered Waste Hauler			JDEP W		Cubic of Was			Name of GROW			andfill				
WASTE MANAGEMENT		10000	1125		Dispos	al Data		City, Sta		N. C. L. L.					
City, State ELIZABETH, NJ					Jispos T			MORR	ISVIL	LE, P	7 -				
Completed by	Title	CF M	/IGR			ignatur	(A)	e Ki	1.	WA.	Dai	te. 2	14	//	1
CAROL RAIMO		10					your	- 14		تصار	1 (	14	Z.//	-/	_ •

· Or				. 1.1: 0		tor (2)			- 1			1
Date of Notification (1)			P.S.E.G		wner/Opera	itor (2)				VI.		
Agencies Notified Type Notification			treet Add	dress ADLEY I	ROAD			FEB 1	9 2	014		
□ EPA □ Initial □ Amended □ Amendment #		C	City, State	e, Zip Cod	e FIELD, N	J 07080					8	
■ DOL Amendment #     □ Emergency (ir     □ justification)			lame of					Telephone Num	ber			
DCA Cancellation			JO/ FACIL	ITY INFO	RIMATION	ARO	-024 DE					
Name of Facility Where Abatement is Taking	Place (3)	*	)			1	f Facility (4) chool (K-12					
Street Address				Λ.				(Other than K-12 vate & commercia	) al buildi	ngs, l	nomes	s,
Street Address  MANHOLE #9ABR  City (5)  MiLLBURN  County (6)	OOK	5,	DE	DR OTA: 10	RESER	Square	tc.) e Feet,	# of Floors	Blo	dg. Ag	/ .	
MILLBURN		~,,	County C	ode (7)		Curren	N / A	N/A	ied)	N	A	
ESSEX			(STATÉ U	ISE ONLY)		-	n	1/A				
Name of Monitoring Firm Hired by Building C ENVIRONMENTAL TACTICS	)wner (8)		ASCM 004			ame of Abate JNIQUE S		OF AMERICA	¥			
Street Address 64 BROAD STREET						treet Addres		VE.				
City, State, Zip Code		0.5				ity, State, Zip SOUTH RI		08882				
MATAWAN, NJ 07747  Project Manager for Monitoring Firm			Telephor		Te	elephone No	).	License N	0.			
TOM GEIGER  Start Date (10)	Schedule			2-2217 Date (11)	N	32-432-83 ame of OSH	A Monitor	01111				
2/14/14	2,	119	1/1	4		JNIQUE S		OF AMERICA	A	-		
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire F			nent			96 WHITI		VE.				
Abatement Performed Outside of Norm Other – Describe: ouldoors	nal Facility	Hours	3			ity, State, Zi SOUTH R		08882				
Scope of Work (Check All That Apply)						П						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolii				Min Glo	i-Enclosure				e	
	Is	Locat	ion			1201	Longies	( ) = = = =		Abate		
Location of		lormal d Sole		Achor		iption of ning Material	(ACM)	Amount		.,		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		intena odial ( (12)	Staff?	(i.e.	thermal sy surfacin	stems insula g, VAT, or cellaneous)	ation,	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
()	Yes	No	N/A						ļ_		ē	-
out DooRs		$\times$	-	ACM	PipE	Som	ASTIC.	6LF	X			
	+											
					T Carbin Ve	avda .	Name of	Registered Landfi	11			
Name of Registered Waste Hauler WASTE MANAGEMENT			NJDEP V Hauler ID 1125		of Waste			S NORTH				
City, State ELIZABETH, NJ					Disposal T &		City, Stat MORR	e ISVILLE, PA	,			
Completed by CAROL RAIMO	Title	ICE i	MGR.			1 //	el Ka	genta 6	ate,	14	1	-/
OALOL IVAINO						- Jou	7 90		-1/	11 11	- /	1.

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det	(Pursuant to NJAC 8	:60 and 12:120)			-		
Date of Notification (1)	Name of Building C P.S.E.G.	wner/Operator (2)	1 0 0	01 <i>l</i>			
Agencies Notified Type Notification	Street Address 4000 HADLEY	ROAD	FEB 192	UTI			
EPA I Initial Amended	City, State, Zip Co	ie					
□ DOL Amendment #     □ Emergency (including the control of		FIELD, NJ 07080	Telephone Num	ber	× •		3
DOH justification) Cancellation	TOHN	MAROTTE	3				
Name of Facility Where Abatement is Taking Place	FACILITY INFO	PRMATION Type of Facility (4	)		5		
PSE4G	(6)	School (K-12	2) 8 (Other than K-12)		7		
Street Address  MANHOLE #8-South	OPANCE AV	Subchapter of Other (i.e. pretc.)	ivate & commercia	l buildi	ngs, t	omes	s,
City (5)	OKA NOE 111		# of Floors	Blo	ig. Ag	1 .	
County (6)	County Code (7)	Current Use (Prio	r if being demolish	ed)	101	71	$\dashv$
ESSEX	(STATE USE ONLY		A-				_
Name of Monitoring Firm Hired by Building Owner ENVIRONMENTAL TACTICS	(8) ASCM No. 0045	Name of Abatement Con UNIQUE SYSTEMS					
Street Address 64 BROAD STREET		Street Address 396 WHITEHEAD A	AVE.				
City, State, Zip Code MATAWAN, NJ 07747		City, State, Zip Code SOUTH RIVER, NJ	08882				
Project Manager for Monitoring Firm	Telephone No.	Telephone No.	License N	0.			
TOM GEIGER	732-292-2217 duled Completion Date (11)		01111				
2/2//14	2/27/15	UNIQUE SYSTEMS	OF AMERICA	<b>\</b>			
Occupancy Status During Abatement (Check Only		Street Address 396 WHITEHEAD A	AVE.				
Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Fac Other – Describe: ouldreum	or Adatement bility Hours	City, State, Zip Code SOUTH RIVER, N.	08882				
Scope of Work (Check All That Apply)		C 5.41 Contains	ent with Negative F	)racei ir	-0		
	Renovation Demolition	Mini-Enclosure Glovebag Prod	3	i cooui	C		
	<u> </u>	Non-Exempter	d (*) and Non-Friab		edun Abate		
	Is Location Normally	Description of				pe	
Asbestos-Containing Material (ACM)	Maintenance/	stos Containing Material (ACM) thermal systems insulation,	Amount (Specify	고	D	Enca	Enc
In Facility (13)	Gustodial Staff? (12)	surfacing, VAT, or other miscellaneous)	SF or LF)	Remova	Repair	Encapsulate	Enclosure
	es No N/A					le	to
outside MANHOLE	X AC	m lipe somastic	6 LF	X			
				+-	-		
	+   -		4(0	-	-		
Name of Registered Waste Hauler	NJDEP Waste	-EVAL-aka	Registered Landfil	11		-	
WASTE MANAGEMENT	Hauler ID No. 1125		/S NORTH				
City, State ELIZABETH, NJ		Disposal Date City, Sta MORR	te ISVILLE, PA				
	tle FFICE MGR.	Signature Rice K	De la D	ate 2	1/8	1/	Y!

Date of Notification (1)	Name of P.S.E.	f Building Owner/O	perator (2)		FEB	1 9 2	014		1
Agencies Notified Type Notification	Street A		`	<u> </u>	1 L U				
EPA   Initial   Amended   Amendment #	City, Sta	ate, Zip Code H PLAINFIELD			· · · · · ·	- 4			
□ Emergency (inclusion)     □ DCA     □ Cancellation	Name o		14 fo 77	TE	Telephone No	ımher			
Name of Facility Where Abatement is Taking Pla		ILITY INFORMATI		of Facility (4)					-
Street Address					(Other than K-				
MANHOLE #8-South	4 ORANG	E AVE CE	510	etc.)	vate & commerc		0.000		s,
MAPLEWOOD			Squa	re Feet N/A	# of Floors	B	dg. Ag	1 .	
County (6)		Code (7) USE ONLY)	Curre	ent Use (Prior	if being demoli	shed)			
Name of Monitoring Firm Hired by Building Own ENVIRONMENTAL TACTICS	er (8) ASCI	M No. 45		itement Contr	actor (9) OF AMERIC	CA CA			
Street Address 64 BROAD STREET			Street Addre	ss EHEAD A	VE.				
City, State, Zip Code MATAWAN, NJ 07747			City, State, Z SOUTH R	ip Code	08882			120	
Project Manager for Monitoring Firm TOM GEIGER	Telepho 732-2	one No. 92-2217	Telephone N 732-432-8		License 01111				
Start Date (10) Sc	heduled Completion	Date (11)	Name of OS		OF AMERIC	A			
Occupancy Status During Abatement (Check Or	nly One)	17-	Street Addre	ss EHEAD A	VE				
Facility Closed/Vacated During Entire Perior Abatement Performed Outside of Normal F Other – Describe: oxldsers			City, State, Z						
Scope of Work (Check All That Apply)			_	<b>,</b>					$\neg$
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Renovation Demolition		Min Gle	ni-Enclosure ovebag Proce					
	Is Location	Γ	23 100	in-Exempled	(*) and Non-Fria		Abate	ment	
Location of	Normally Used Solely by		scription of				Тур	e	_
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Maintenance/ Custodial Staff? (12)	surfa	taining Materia systems insul- cing, VAT, or niscellaneous)	ation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes No N/A			<b>.</b>				0	
Outside MANHOLE		HCM !	PE SOM	457ic	6 LF	- X			
Name of Registered Waste Hauler	NJDEP V	Maste Cubic	Yards	Name of R	egistered Land	fill			_
WASTE MANAGEMENT	Hauler ID				NORTH				
City, State ELIZABETH, NJ		Dispo	sal Date	City, State MORRIS	SVILLE, PA				
	Title		Signature/			Date á	7		

CK 5081

THILLOHI

Date of Notification (1)		Name of I		wner/Opera	ator (2	2)		9	1 1	i.	1
Agencies Notified   Type Notification		Street Ad	dress	DO 4 8		· ·					
EPA   Initial   Amended		City, Stat	ADLEY e, Zip Cod	е			FER	0	2014		
DOL Amendment #		SOUTH Name of		FIELD, N	J 07	080	Telephone Num	nher		_	
□ DOH justification)     □ DCA     □ Cancellation	20.		HN	MA	Po	TTE	7 Cicphone Ivan	iboi			
Name of Facility Where Abatement is Taking	Place (3)	FACIL	ITY INFO	RMATION	1	Type of Facility (4	)			:454	lav.
PSE+G	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				_ [	School (K-12	2)	**			
MANHOLE #8-Sou	tu o	Paris	- A11A	Caper		Other (i.e. pr	8 (Other than K-12 ivate & commercia	al build	ings,	home	s,
City (3)	IA UK	CHIUO	C 77 10	(4)	1	etc.) Square Feet	# of Floors	BI	dg. A	- 1	
MAP/E W 00 D		County C	Code (7)		$\dashv$	Current Use (Prio	r if being demolish	ned)	$\sim$	A	$\dashv$
ESSEX		(STATE U	ISE ONLY)		-	W	/A		9		
Name of Monitoring Firm Hired by Building C ENVIRONMENTAL TACTICS	wner (8)	ASCM 004				of Abatement Conf UE SYSTEMS	Tractor (9) S OF AMERICA	A			
Street Address 64 BROAD STREET	-		(92	-		Address VHITEHEAD A	VE.				
City, State, Zip Code MATAWAN, NJ 07747						ate, Zip Code TH RIVER, NJ	08882				
Project Manager for Monitoring Firm TOM GEIGER		Telephor	ne No. 12-2217	Te	elepho	one No. 32-8350	License N	0.			
	Scheduled C			N:	ame o	of OSHA Monitor		^			
Occupancy Status During Abatement (Check	Only One)	13,	114			UE SYSTEMS Address	OF AMERICA	٦			
Facility Closed/Vacated During Entire P	eriod of Abate					VHITEHEAD A	VE.				
Abatement Performed Outside of Norm Other – Describe: aulaseus	al Facility Hou	ırs				ate, Zip Code ГН RIVER, NJ	08882				
Scope of Work (Check All That Apply)	TSF _										
≥3 sf or ≥3 lf ⇒160 sf or ≥260 lf	☐ Reno	vation olition				Mini-Enclosure Glovebag Proc	edure			2	
	ls Loc	ation				Non-Exempled	(*) and Non-Friab		Abate	ement	
Location of	Norm Used So	ally		Descri			Amount	-	ı y	pe	
Asbestos-Containing Material (ACM)  TO BE ABATED	Mainter Custodia	nance/	Asbest (i.e.	os Containi thermal sys surfacing	stems	aterial (ACM) insulation,	Amount (Specify SF or LF)	Ren	Re	Encapsulate	End
In Facility (13)	(12	2)		other misc			Si di Li j	Removal	Repair	sulat	Enclosure
	Yes No	o N/A		A		<i>F</i> .				е	
OUTSIDE MANHOLE	>		HCI	n Pipe	£ 5	SOMASTIC	6 LF	X,			
Name of Registered Waste Hauler		NJDEP W	/aste	Cubic Ya	rds	Name of	Registered Landfil	_			
WASTE MANAGEMENT		Hauler ID 1125	150 5 5 4 H	of Waste			S NORTH				
City, State ELIZABETH, NJ				Disposal		City, State	sVILLE, PA				
Gompleted by CAROL RAIMO	Title OFFICE	MGR.			nature	ard la	in Di	ate//	//	14	•
						,	-//	,01	1,24	1	

### CK#5115

Date of Notification (1)	,				Building O	wner/Op	perator (	2)							
2/18/19	1			P.S.E.G						-, :			_		
Agencies Notified	Type Notification		0/07	Street Ad 1000 H		ROAD	)						Ε.		
EPA X DEP	Personal Properties of the Control						5 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1				200		140	188	1
X DEP X DOL	Amended Amendment # Emergency (including justification)			SOUTH	PLAIN	FIELD	, NJ 07	7080	F.	EB 1	9 20	114			
□ DOH		ncluding				2 140	DENIO.		LIe	lenhone	Mumb	<u> </u>		- "	
DCA	Cancellation		1 -	•	AND STREET		10000								
Name of Facility Marca	Abstament is Taking	Diago (2)	-	FACIL	ITY INFO	RMATIC	ON	Type of Faci	lity (4)			_	-	- !	
P.S.E.G	Abatement is Taking	Place (3)													
Street Address	ity Where Abatement is Taking Place (3)  SERSITY AVE.  County Constant Using Firm Hired by Building Owner (8)  MENTAL TACTICS  SOURCET  P Code  N, NJ 07747  Ger for Monitoring Firm  GER  Scheduled Completion Date and Particular Performed Outside of Normal Facility Hours Describe: occupied by necessary operators only  K (Check All That Apply)  Sa If  Containing Material (ACM)  TO BE ABATED  In Facility  (13)  Location  Normally  Used Solely by  Maintenance/ Custodial Staff?  (12)  Yes No N/A  Hauler ID N  1125  H, NJ  Title				_	School Subcha	(K-12) pter 8 (Oti	ner than I	K-12)						
422 UNIVERSITY	ility Where Abatement is Taking Place (3)  SSERSITY AVE.    Continuing Firm Hired by Building Owner (8)							.e. private	& comme	ercial	build	ings,	home	s,	
City (5)	Part of the property of the p				535500		-	etc.) Square Feet	# (	of Floors		BI	dg. A	ge	
NEWARK								17291		3			YR		
County (6)								Current Use			olishe	d)			
ESSEX	Amended Armendment # Emergency (including justification)  Facility Where Abatement is Taking Place (3) G  ddress NIVERSITY AVE.  ARK  (6)  X  f Monitoring Firm Hired by Building Owner (8) RONMENTAL TACTICS  ddress OAD STREET  ate, Zip Code  WAN, NJ 07747  Manager for Monitoring Firm  GEIGER  ate (10)  Schedule  Sc		Ľ	3 200 S R			Namo	SWITCH :							
	Initial Amended Amendment # Emergency (including justification)  Cancellation  acility Where Abatement is Taking Place (3)  ress VERSITY AVE.  K  Ionitoring Firm Hired by Building Owner (8) PNMENTAL TACTICS ress AD STREET Zip Code AN, NJ 07747  nager for Monitoring Firm EIGER  (10) Scheduled Ci Schedul				NO.			UE SYST			ICA				
Street Address		al ended ended ergency (including iffication) (Incellation) (Incellation						Address	D 11/5						
64 BROAD STREE	ΞT		Telephone 732-292- Induled Completion Date (Ity State, SOUTH IF Name of County Coording State of County					VHITEHEA tate, Zip Code				00.0			
MATAWAN, NJ 07	747		County (STATE)  (8) ASC 004  Teleph 732-2  duled Completion / One)  of Abatement cility Hours erators only  Renovation Demolition  Is Location Normally Used Solely by Maintenance/ Custodial Staff?					TH RIVER		82					
	nitoring Firm	0						one No. 132-8350		Licens 0111					
Start Date (10)	•	Scheduled						of OSHA Mor	nitor	10111	<u>.</u>				
2/28/14				114	,,			UE SYSTI		AMER	ICA				
Occupancy Status Durir	ng Abatement (Chec	k Only One)						Address VHITEHEA	D AVE						
								The content of the second						7.7	
Abatement Perform  Solution    Other – Describe:	occupied by necessa	iry operators	ours			_	1550	tate, Zip Code TH RIVER		82					
Scope of Work (Check /	All That Apply)		-												-
≥3 sf or ≥3 lf	1.7,	X Rer	ovat	ion				Full Conta	ainment wi	th Negati	ve Pre	essur	е		
≥160 sf or ≥260 lf							×	Mini-Enclo	osure						
							×		Procedure (*) a		riable	Pro	edur	е	
		Isla	cati	nn										ment	
Locatio	n of	No	mall	y		Des	scription	of			-		Ту	pe	
Asbestos-Containing	g Material (ACM)				Asbest	os Cont	taining M	laterial (ACM)		Amount		71		En	т
		Custoo	ial S	NEW TOWNS 18 18 18 18 18 18 18 18 18 18 18 18 18	(i.e.		systems cing, VA	s insulation, T, or		(Specify SF or LF)		Removal	Repair	cap	nclo
		(	12)			other n	niscellan	eous)				oval	air	Encapsulate	Enclosure
	V-10-000-000-000-000-000-000-000-000-000	Yes	No	N/A								_		ē	
2nd & 3rd	Floors		X		. 1	WIRE	ACM S	SOCK	4	10 LF		x			
							2								
									- f David		- 4611				
			1			of Was		120000000000000000000000000000000000000	e of Regis		naill				
	NICIN I		1	1125		3			OWS NO						
City, State ELIZABETH, NJ						Dispos TBD	sal Date		State RRISVII	LE, PA	Ą				
Completed by	*	Title				S	Signature	1	1	,	Date	9 /		/	,
CAROL RAIMO		OFFIC	ΕN	IGR.			1	Wal	Xac	no	2	//	8/	14	-

CK #5126

Print Form

Date of Notification (1)	Name of E P.S.E.G	Building Owner/Ope	erator (2)				. (		
Agencies Notified Type Notification	Street Add 4000 H	dress ADLEY ROAD		T W	FEB 1	9 20	14		-
EPA X Initial Amended Amendment #_	SOUTH	e, Zip Code I PLAINFIELD,	NJ 07080						-
☐ DOH justification) ☐ DCA ☐ Cancellation	Name of	T 10 00000 100000 100000 100000 100000 100000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10	ROTT	n 1946	Celenhone Ni	ımhar			7
		ITY INFORMATIO	N	·					$\dashv$
Name of Facility Where Abatement is Taking P				f Facility (4) chool (K-12) ubchapter 8 (C	Other than K-	12)			
MANHOLE 20A - 113.	3 SPRING	FIELD P.	Square	ther (i.e. privat c.) Feet	# of Floors		ngs, ho		-
UNION			1	)/4	NIA	!	NI	A	_
County (6)	County C (STATE U	code (7) ISE ONLY)	Curren	t Use (Prior if	being demoli	shed)			
Name of Monitoring Firm Hired by Building Ow ENVIRONMENTAL TACTICS	ner (8) ASCM 0045		Name of Abate UNIQUE S'			CA			
Street Address 64 BROAD STREET			Street Address 396 WHITE		≣.				
City, State, Zip Code MATAWAN, NJ 07747			City, State, Zip SOUTH RIV		3882				٦
Project Manager for Monitoring Firm TOM GEIGER	Telephor 732-29	ne No. 02-2217	Telephone No. 732-432-83		License 01111	No.	_		
	cheduled Completion [	Date (11)	Name of OSHA		F AMERIC	CA			٦
Occupancy Status During Abatement (Check (	STREET, STREET		Street Address		Ē.				
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe: OUT DOOR	Facility Hours		City, State, Zip SOUTH RI	Code				10	7
Scope of Work (Check All That Apply)			0001111	12.1,1.00			-		$\dashv$
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	Renovation Demolition	196	Mini Glov	Containment i-Enclosure vebag Proced i-Exempted (*)	ure				
	la l'asstina		Z Non	-Exempled (	and Non-1		Abater	250000000000000000000000000000000000000	$\neg$
Location of	Is Location Normally	Des	cription of			-	Тур	e T	$\dashv$
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used Solely by Maintenance/ Custodial Staff? (12)	Asbestos Conta (i.e. thermal s surfac		(ACM) tion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes No N/A	1 - 0		. ,	-15			+	$\dashv$
OUTSIDE MANHOLE	×	ACM Pip	E SOM	IsTic	5 LF				
								-	
Name of Registered Waste Hauler	NJDEP V		COMPANIAN CONTRACTOR		gistered Land	dfill			- 3
WASTE MANAGEMENT	Hauler ID 1125		/	GROWS	NORTH				
City, State ELIZABETH, NJ		1	B B	City, State MORRIS\	VILLE, PA		,	<del>,</del> –	
Completed by CAROL RAIMO	Title OFFICE MGR.	S	ignature Octob	Lain	no	Date 2/	8/	14	İ

Date of Notification (1)		383	ame of B	Building Ov	wner/Ope	erator (2	2)							1	
Agencies Notified Type Notification			treet Ad 000 H	dress ADLEY	ROAD			*	FEB	1 9	201-	1	. ,	-	
EPA Initial Amended Amendment #_				e, Zip Cod I PLAINI		NJ 07	080		= 121		32 <sup>1</sup>	*	,,,		
DOH justification)  DCA Cancellation	cluding	N	lame of		MA	Ro	17	=	Tele	nhone !	Mumbo			i	
	21 (0)		FACIL	ITY INFO	RMATIO	N		Facility (4							-
Name of Facility Where Abatement is Taking F			3 ~ p	<i>エ</i> ノ	41		Sch	nool (K-12 bchapter liner (i.e. pr	2) 8 (Othe	r than k	(-12) ercial b	uildir	ngs, h	nomes	5,
MANHOLE 20A1-66, City (5) PRINCFIEL	\ \ \ \	-110	IEL	7 /	114	6, 5	etc Square		# of	Floors	1	Bld	g. Ag	e / A	
County (6)	. /			ode (7) ISE ONLY)			Current	Use (Prio	or if bein	ng demo	olished)		10/	//	
Name of Monitoring Firm Hired by Building Ov ENVIRONMENTAL TACTICS	vner (8)		ASCM 0045	No.				ment Con STEMS			ICA				
Street Address 64 BROAD STREET						Street A		HEAD A	VE.						
City, State, Zip Code MATAWAN, NJ 07747						City, Sta		Code ER, NJ	0888	2					
Project Manager for Monitoring Firm TOM GEIGER			elephor	ne No. 2-2217		Telepho 732-4	one No. 32-83	50		Licens 0111					
	Schedule	d Com	pletion [	Pate (11)				Monitor STEMS	S OF A	AMER	ICA				
Occupancy Status During Abatement (Check	Only On	e)	1	//		Street A									
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: Out Took	I Facility	batem Hours	ent		_	City, Sta	ate, Zip	HEAD A Code /ER, NJ		2	<del></del>				-
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				X	Mini- Glove	Containme Enclosure ebag Prod	edure						
							NON-	Exempted	ı ( ) and	1 NOTE-	Tiable			ment	
Location of		Location Location	у		Des	cription (	of				1		Ту	oe T	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma Cust	d Solel intenan odial S (12)	ice/ taff?		os Conta thermal s surfaci	aining Ma	aterial (/ insulati Γ, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	1	Λ.					, ,					
OUTSIDE MANHOLE		X		ACM	Pip	ES	onA	stic	5	LF	- /	X			
													-		
Name of Registered Waste Hauler		IN	JDEP W	/aste	Cubic \	Yards		Name of	Registe	ered La	ndfill				-
WASTE MANAGEMENT		Н	auler ID 1125		of Was			GROW	'S NO						
City, State ELIZABETH, NJ					Dispos	al Date		City, Stat MORR		_E, PA			,_		
Completed by CAROL RAIMO	Title OFF	ICE N	IGR.		Si	ignature ÜK	el	Lai	me	0	Date	1/1	8,	1/-	4

### CK#5124

Date of Notification (1)		Name of P.S.E.C	Building Owner/Op	perator (2		1.2				
Agencies Notified Type Notification		Street Ad	dress ADLEY ROAD	)	131 Avi	FEB 1	9 2014	,	أسا	T
EPA DEP Amended Amendment #_	+	City, Stat	e, Zip Code H PLAINFIELD		080		z gire-	= 5	-)16	1
DOH Sustification Cancellation	-luding L	Name of	Contact		TE			58 1		•
			ITY INFORMATION	ON		1				
Name of Facility Where Abatement is Taking F								lings	home	r
228 MEISELA	VE. G	CR.	509)		Other (i.e. p etc.) Square Feet	# of Floors.	-	ldg. A		5,
SPRINGFIELD	ላ			(	N/A	"D/	4	N	/A	
County (6)		County C	Code (7) ISE ONLY)	_ (	Current Use (Price	or if being demo	olished)			
Name of Monitoring Firm Hired by Building Ov ENVIRONMENTAL TACTICS	vner (8)	ASCM 0045			Abatement Cor JE SYSTEMS		ICA			
Street Address 64 BROAD STREET				Street A 396 W	ddress HITEHEAD <i>A</i>	AVE.				
City, State, Zip Code MATAWAN, NJ 07747					te, Zip Code H RIVER, NJ	08882				
Project Manager for Monitoring Firm TOM GEIGER		Telephor 732-29	ne No. 92-2217	Telepho 732-43	ne No. 32-8350	Licens 0111				
Start Date (10)	Scheduled Cor	mpletion I	Date (11)		OSHA Monitor JE SYSTEM	S OF AMER	ICA			
Occupancy Status During Abatement (Check				Street A	ddress HITEHEAD	AVE.				
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Norma Other – Describe: OUT DOOR	I Facility Hours	nent s		City, Sta	ite, Zip Code H RIVER, N.					
Scope of Work (Check All That Apply)				0001	11100010,100	7 00002			-	-
≥3 sf or ≥3 If	Renova Demoli				Mini-Enclosure Glovebag Pro				<b>a</b>	
	Is Locat	tion			Non-Exemple	a ( ) and reon	TIGDIC 1 10	Abate	ement	
Location of	Norma Used Sole	lly		scription o			-	T y	pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Maintena Custodial (12)	ince/ Staff?			insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
OUTSIDE MANHOLE	Yes No		ACM Pi	n- C	MASTA	10 4	ZX	1		
OWISIBE MANIE			17611 1 3 4		JUNS IIC					
Name of Registered Waste Hauler		NJDEP W	/aste Cubic	Yards	Name of	Registered Lar	ndfill			
WASTE MANAGEMENT	1	Hauler ID 1125	No. of Wa	este 2	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	S NORTH				
City, State ELIZABETH, NJ			Dispo	sal Date	City, Sta MORR	te ISVILLE, PA				
Completed by CAROL RAIMO	Title OFFICE N	MGR.		Signature	el Lai	me	Date	18	1%	4

### CK 5123

9					3 1				-	
Date of Notification (1)	P.S.E.G	Building Owner  3.	/Operator	(2)				• 1		
Agencies Notified Type Notification	Street Ad 4000 H	dress ADLEY ROA	AD	1,1	FEB	1 9 20	14	١	1	
EPA Initial Amended Amendment #_		e, Zip Code I PLAINFIEL	_D, NJ 0	7080					Art-ero.	
Emergency (inc			-	- 1	Tele	phone Num	her		12	
DOH justification) Cancellation	J61	HN M	TARO	TTE	,				9	
	FACIL	ITY INFORMA	TION			- 3				
Name of Facility Where Abatement is Taking P			_		(-12) ter 8 (Othe	r than K-12 commercia	!) al buildi	inas. I	nomes	s.
	MAIN ST.	CCR5	77)	Other (i.e etc.)  Square Feet		Floors		dg. Ag		_
MiLL BURN				N/A		N/A		N	1A	
County (6)	County C	Code (7) JSE ONLY)		Current Use (	Prior if beir	ng demolish	ied)			
ESSEA	mer (8) ASCM	l No	Name	of Abatement (	Contractor	(9)				-
Name of Monitoring Firm Hired by Building Ow ENVIRONMENTAL TACTICS	0045			QUE SYSTE			١			
Street Address 64 BROAD STREET				Address WHITEHEAI	D AVE.					
City, State, Zip Code		<del></del>		State, Zip Code		•				
MATAWAN, NJ 07747	Telephor	ne No		JTH RIVER,	NJ 0888	License N	0.			$\dashv$
Project Manager for Monitoring Firm TOM GEIGER		32-2217	5197529	-432-8350		01111				
Start Date (10) S	cheduled Completion I	Date (11)		of OSHA Moni QUE SYSTE		AMERICA	A			
Occupancy Status During Abatement (Check C	Only One)	, ,		t Address WHITEHEA	D AVE					
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal	riod of Abatement Facility Hours			State, Zip Code						
Other - Describe: OUT DOOR	2		7.000	JTH RIVER,		2			W. 65	
Scope of Work (Check All That Apply)			r	_						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renovation Demolition		-	Full Contai Mini-Enclos Glovebag	sure Procedure	•				
		Г	يا	Non-Exem	pted (*) an	d Non-Frial		Abate		
=,	Is Location			¥				Ty		
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A	Asbestos C (i.e. then		Material (ACM) ns insulation, AT, or	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
75: 001.11/15		10 mm	): 1 - 0	Somastic	, 6	LF	X	1		
Outside MANHOLE	X	17611	, PE	<del>30 (1),4</del> 5 (1).C		<u></u>				
	1,1055	Vente 12	hio Vard-	l Name	of Pogist	ered Landfi				
Name of Registered Waste Hauler WASTE MANAGEMENT	NJDEP V Hauler ID 1125		bic Yards Waste		OWS NO		•••			
City, State	1125	Dis	sposal Dat			1				
ELIZABETH, NJ			TBI		RRISVIL		ate	,	<i>i</i>	
Completed by CAROL RAIMO	Title OFFICE MGR.	8	Signatu	rel La	im		ate 4/	18	1/-	4

Print Form

### CK# 5127

Date of Notification (1)		Name of	f Building C .G.	)wner/Ope	erator	(2)		13	e 0					
Agencies Notified Type Notification		Street A	ddress	ROAD				F	EB 1	9 :	2014			
EPA Initial Amended Amendment #_	1		ate, Zip Coo H PLAIN		NJ 0	7080								
☐ DOH justification) ☐ DCA ☐ Cancellation	eluding	Name o	f Contact	7 M	M	ONTA	4GuE	Teler	ohone N	lumbe	AF_			0
		, FAC	ILITY INFO		N	Timo o	f Facility (4)			-				-
Name of Facility Where Abatement is Taking F		^				So So	chool (K-12)	) (Othe	r than K	-12)	nn	1		
71 LAFAYETTE	= 9	60		£3	_		ther (i.e. pri		Floors	rciai d		lg. Ag		5,
FORDS							NA	A	SIA		N	/A	34	
County (6) MIX X I E SE	~ ~	County (STATE	Code (7) USE ONLY)		_		t Use (Prior					ر		
Name of Monitoring Firm Hired by Building Ow ENVIRONMENTAL TACTICS	mer (8)	ASC 004	M No.			of Abate	ement Contr	ractor (	9)					
Street Address 64 BROAD STREET						Address	SHEAD A	VE.						
City, State, Zip Code MATAWAN, NJ 07747		1		1	City, S	State, Zip			2					
Project Manager for Monitoring Firm TOM GEIGER			one No.		Teleph	none No 432-83			License 01111					
	Scheduled 2	Completion	Date (11)				A Monitor YSTEMS	OF A	MERI	CA				
Occupancy Status During Abatement (Check	Only One)	Uj.			Street	Address								
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe: 647508	Facility Ho				City, S	State, Zip	Code			-				
The second secon					SOU	JIHRI	VER, NJ	0888						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		ovation olition				Mini	Containmer i-Enclosure vebag Proce i-Exempted	edure	·					
			T			- 1401	-Exempled	( ) 8110	TNON	Idolo			ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Non Used S Mainte Custodi	cation mally colely by enance/ al Staff? 2)		Des stos Conta thermal s surfac other m	system ing, VA	Material is insula AT, or		(S	mount pecify or LF)		Removal	Repair	e Encapsulate	Enclosure
		N/A				^.		Name of the last o		_				
OUTSIDE SUBSTATION	7	4	12	ANSIZ	E	Pip	6	10	061	-	×			
				4						-				
Name of Registered Waste Hauler		NJDEP	Waste	Cubic '	Yards		Name of F	Registe	red Lan	dfill		-		
WASTE MANAGEMENT		Hauler I 1125			0		GROWS		RTH	-				
City, State ELIZABETH, NJ	*)			Dispos	BI	<u>`</u>	City, State		E, PA					
Completed by CAROL RAIMO	Title OFFICE	E MGR.		S	ignatur	are	e Xa	in	10	Date	1/8	2/	of.	

Date of Notification (1)			Name of P.S.E.	Building (	Owner/O	perator (	(2)							
Agencies Notified Type Notification			Street A			12			_	FE- I	5 2	014	-	-
☐ EPA 🔀 Initial				IADLEY		כ					5555 1			
➤ DEP				te, Zip Co H PLAIN		NIO.	7080		65					
Emergency (in				Contact	IT IEEE				Telen	hone Nun	nhar			
DOH justification)  Cancellation		1	(1) / 6	1 / 1	7 M	M	NOTA	GuE	•					
			FACI	LITY INFO							,			
Name of Facility Where Abatement is Taking	Place (3	) -						Facility (4)						
PSE4G Street Address								nool (K-12) ochapter 8		than K-12	2)			
71 LAFAYETTE		P	, Ÿ					er (i.e. priv				lings,	home	es,
City (5)		/ \	0.				Square I		# of F	loors		ldg. A		
FORDS								i/A	N	111	1100	)/1	1	
County (6)	7.7		County (	Code (7) ISE ONLY				Use (Prior				١		
Name of Monitoring Firm Hired by Building Ov	mor (g)		LASCM			Name	of Abaton	Su B	S/	AL	101	$U_{\perp}$		
ENVIRONMENTAL TACTICS	wilei (o)		0045			I		STEMS	57.2	**************************************	A			
Street Address					. 5	330000000000000000000000000000000000000	Address		**************************************					
64 BROAD STREET					1000			IEAD A	/E.					
City, State, Zip Code MATAWAN, NJ 07747							tate, Zip ( TH RIV	Code ER, NJ (	8882					
Project Manager for Monitoring Firm TOM GEIGER			Telephor 732-29	ne No. 12-2217			one No. 432-835	50	11 0	icense N 1111	0.			
Start Date (10) / 14/14	Schedule	ed Con	npletion [	Date (11)		0.0000000000000000000000000000000000000	of OSHA	Monitor STEMS	OF AI	MERICA	<u> </u>			
Occupancy Status During Abatement (Check	Only On	/ <u>/</u> e)	5//	7_			Address	OTEIVIO	O1 74	VILITIO				
☐ Facility Closed/Vacated During Entire Pe	-		nent					HEAD A	/E.					
Abatement Performed Outside of Norma Other - Describe: 6 4 7 5 0 0 R	I Facility						tate, Zip (							
					_	SOU	TH RIV	ER, NJ (	)8882					
Scope of Work (Check All That Apply)	E7 _					Г	1				Maria wayayayaya			1
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit						ontainmen Inclosure	t with N	egative P	ressur	e		
	-					×		bag Proce exempted (		Non-Friah	le Pro	cedur	a	
·	İs	Locati	on				11011 2	J. S.	<i>)</i> u.u.,	10// / / / / /		Abate	ment	
Location of	N	lormal	ly		Des	scription	of				-	Ту	pe	$\dashv$
Asbestos-Containing Material (ACM) TO BE ABATED	Mai	d Sole intenar	nce/				laterial (A s insulatio			ount ecify	70		Ē	ū
In Facility	Cust	odial S (12)	Staff?	(	surfa	cing, VA	T, or	.,,		r LF)	Remova	Repair	Encapsulate	Enclosure
(13)	V	144.5	1		otnern	niscellan	ieous)				val	=	ulate	ure
	Yes	No	N/A				Λ	_						
OUTSIDE SUBSTATION		$\times$		121	PNSI	TE 1	Pipé	=  -	100	LF	X			
Name of Registered Waste Hauler			JDEP W		Cubic of Was	Yards ste		lame of Re	-					
WASTE MANAGEMENT		1	1125		1	10		GROWS	NOR.	ΓH				
City, State ELIZABETH, NJ				34	Dispos	B A		City, State MORRIS	VILLE	, PA				
Completed by	Title				s	ignature	P	- /	•		ite /	/	./	
CAROL RAIMO	OFFI	CE N	IGR.			11	aras	Xa	M	3 3	te //2	41	4	

### 404

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Date of Notification (1)			ne of B	uilding Owr	ner/Ope	rator (	(2)							
Agencies Notified Type Notification			eet Add 00 HA	ress ADLEY R	<b>Q</b> AO				1	FEB	19	201	1	
EPA		City	y, State	, Zip Code PLAINFI	ELD,	NJ 0	7080	ν,					10	
Emergency (inc	cluding	Na	me of C	Contact					Telep	hone Numbe	er			.
DOH justification)  Cancellation	48. 45		Sot	7N			eo:	ME						-
Name of Facility Where Abatement is Taking I	Place (3)	-	FACILI	TY INFORI	MATIO	N	Туре о	f Facility (4)						
PSE+G							☐ S	chool (K-12)	Otho	than K 12\				
Street Address MANHOLE # // BR	00/	s: /	ستر ۱	DR	VE	-	×	ubchapter 8 ther (i.e. pri tc.)	vate &	commercial l				
City (5)		<i>-</i> 1 - 3-						NA	,	U/A		g. Ag		
County (6) ESSEX			ounty Co	ode (7) SE ONLY)			Currer	nt Use (Prior	if bein	g demolished Z	<b>d</b> )			
Name of Monitoring Firm Hired by Building On ENVIRONMENTAL TACTICS	wner (8)		ASCM 0045			Name UNI	of Abat	ement Contr	ractor (	9) MERICA				
Street Address				940			Addres	s EHEAD A	VE.					
City, State, Zip Code	ATAWAN, NJ 07747 ject Manager for Monitoring Firm Teleph						State, Zi			2				
Project Manager for Monitoring Firm	State, Zip Code (TAWAN, NJ 07747) ect Manager for Monitoring Firm M GEIGER Telepho 732-29					Telep	hone No 432-8	).		License No.				
TOM GEIGER Start Date (10)	Telephone No. 732-292-2217  Scheduled Completion Date (11)					Name	of OSH	IA Monitor SYSTEMS	OF A					
Occupancy Status During Abatement (Check	Only One)	14	11	4	-+		t Addres			WILL WO		-		-
Cocupancy Status During Abatement (Check			nt					EHEAD A	VE.		-			
Abatement Performed Outside of Normal Other – Describe: ouldoor	al Facility H	ours			- [	City,	State, Zi JTH R	ip Code IVER, NJ	0888	2				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		novatio		W.			Mir	ni-Enclosure ovebag Proc	edure	Negative Pr			÷	
	Τ					-	23 140	II-Excinpted	( ) (			Abate	ment	
Location of	No	ocatio rmally				criptio					- 1	Ту		
Asbestos-Containing Material (ACM)  TO BE ABATED  In Facility  (13)	Custo	tenandial St (12)	ce/ :aff?	Asbesto (i.e. t	hermal surfac	syster cing, V	Materia ns insula AT, or aneous)	ation,	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	10.1	-0.1		_	T: 4		6LF	~			
outbooks		$\leq$		ACM	Pip	ε.	Som	ASTIC		04	~			
														_
Name of Degistered Waste Hauler		T N	JDEP V	Vaste	Cubic	Yards	-	Name of	Regist	ered Landfill				
Name of Registered Waste Hauler WASTE MANAGEMENT		Ha	auler ID		of Wa	ste /	/	GROW		RTH				
City, State ELIZABETH, NJ						BA	) ,	City, Stat MORR		LE, PA	to :	,		
Completed by CAROL RAIMO	Title OFFIC	CE M	IGR.			Signati	ure/	al K	Ein	700 Da	te;	4	19	1

### 200

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

~		NOTIFIC	OITAC	N OF A	AC 8:60 an	d 12:120	I)		Kett.		'	1		1
of Notification (1)	1		Name P.S.I		ling Owner/O	Operator	(2)			0014	2			-
encies Notified Typ	e Notification		Street	Addres	s LEY ROA	A D		FE	B 1	9 2014				
EPA 🗵	Initial Amended	+	Ciby 9	State 7	in Code		7000				- 4			
DEP U	Amendment # Emergency (include	ding		JTH PI	LAINFIEL				Telenh	nne Number		1-0/		
DOH DCA	justification) Cancellation			aH	10 /	MA	207	16.					-	
me of Facility Where Abat	ement is Taking Pla	ce (3)	.FA	ACILITY	INFORMA"	TION	Type of F							-
me of Facility Where Abar	G							ool (K-12) chapter 8 (	Other t	han K-12) ommercial b	ildinas	s hom	es,	1
eet Address	10 Bon	2/5	. A	E	DRIV	IE	区 Oth	)	# of F		Bldg.			4
PANHOLE #1	O DRO	(S. M.	OUR	ITA: N	DRIV	LUATION	Square F	JA	A	1/A	٨	SA		
MILLB	URN		Cou	inty Cod	e (7)		Current	Use (Prior i	f being	demolished	)			
ounty (6) E55 &	X			SCM N		Nar	ne of Abater	nent Contra	actor (S	3)				
ame of Monitoring Firm Hi NVIRONMENTAL T	red by Building Own ACTICS	ier (8)	10000	0045	ř.	UN	IIQUE SY	STEMS	OF A	MERICA				
treet Address					9	39	eet Address 6 WHITEI		/E.					
4 BROAD STREET						City	State, Zip OUTH RIV	Code /ER, NJ 0	08882	2				
MATAWAN, NJ 0774			Tel	lephone	No.	Tel	ephone No.		T	License No. 01111		282		
Project Manager for Monito			73	32-292	-2217	No	me of OSHA	Monitor						_
Start Date (10)	1,4 8	cheduled (	comple	etion Da	ite (11)	U	NIQUE S'	YSTEMS	OF A	MERICA			-	
Occupancy Status During	Abatement (Check (	Only One)		1-1		Str 35	reet Address 96 WHITE	HEAD A	VE.		275-02		-11	
Facility Closed/Vacat Abatement Performe Other – Describe:	ed During Entire Pe d Outside of Normal	rind of Aba	atemer	nt		. Ci	ty, State, Zir OUTH RI	Code VER, NJ	0888	2				
Scope of Work (Check All ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novatio				Min	i-Enclosure	e dura	Negative Pr				_
		1-1-	ocatio				123 1401	Lkomp			1	Abaten Typ		
Location Asbestos-Containing TO BE AB/ In Facili (13)	Material (ACM) TED	No Used Main Custo	solely Solely itenand idial St (12)	y by ce/	(i.e. th	s Contair nermal sy surfacin	iption of ling Material stems insula g, VAT, or cellaneous)	(ACM) ation,	(	Amount Specify F or LF)	Removal	Repair	Encapsulate	Cilorona
(13)		Yes	No	N/A						6LF	~		-	
outboo	RS		$\times$	-	ACM	P.PE	Som	ASTIC.		04				
		+ +									-			+
		+				Cubic Y	'ards	Name o	f Regis	stered Landfi	11	L		1
Name of Registered Wa			H	JDEP V	Vaste ) No.	of Wast		GROV						_
WASTE MANAGEN	MEN I			1125		Disposi	al Date	City, Sta	ate	LLE, PA				
City, State ELIZABETH, NJ						7	//	MORE X	-		ate.	10	1.	
		Title										C F 11	0 11. 1	61

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

1°4	NOTIF	CATIO	ON OF int to N	of New Jerse ASBESTOS JAC 8:60 an	ABATE d 12:12	20)	FI S			1.7	P.		1		
Date of Notification (1)			of Bui	lding Owner/	Operato	or (2)			== 1 ()	2014					
Agencies Notified Type Notification		Stree	t Addre	ess DLEY ROA	A.D			F	EB 19	2014			1		
EPA Initial Amended Amendment #_		City,	State, :	Zip Code PLAINFIEL	D, NJ	07080	0	ř		de or			1		
Emergency (in justification)	cluding		e of Co		28/75/50	120		Telen	hone Numbe	r		1			
	Di (2)	F	ACILIT	Y INFORMA			e of Facility (4	)					1		
Name of Facility Where Abatement is Taking  Street Address						×	School (K-12 Subchapter Other (i.e. pr	o inthat	than K-12) commercial	ouilding	js, ho	mes,			
MANHOLE #9A BR	00/5	SiA	E	DRIV TA:NR	IE ESERU	(47) Sqi	etc.) uare Feet	# of	Floors N/A	T 50.1.			$\dashv$		
MILLBURN			inty Co				rrent Use (Pric	10	, .	d) /	0 //				
County (6) ESSEX		(ST	ATE US	E ONLY)		me of A	batement Cor	tractor	9)				$\dashv$		
Name of Monitoring Firm Hired by Building C ENVIRONMENTAL TACTICS	wner (8)	1 5	0045		UI	NIQUE	SYSTEM	S OF A	MERICA				-		
Street Address 64 BROAD STREET				ii.	Str 39	eet Add	iress IITEHEAD /	AVE.							
City, State, Zip Code		City, State, Zip Code SOUTH RIVER, NJ 08882						2							
MATAWAN, NJ 07747 Project Manager for Monitoring Firm	Te	Telephone No. Telephone No. License No. 732-292-2217 732-432-8350 01111													
TOM GEIGER	Scheduled				N:	ame of (	OSHA Monitor	C OF	AMERICA						
Start Date (10) 2/14/14	2/	14	11	4	St	reet Ad	E SYSTEM		AMENTOA			_	_		
Occupancy Status During Abatement (Chec	Period of Ab	atemer	nt		3	96 W	HITEHEAD	AVE.			_				
Abatement Performed Outside of Norm Other – Describe: outland	mal Facility H	lours			5	ity, Stati SOUTI	e, Zip Code H RIVER, N	J 0888	32						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X Re □ De	novatio	on n	N		XI I I	Full Contains Mini-Enclose Glovebag Pr Non-Exempt	re ocedure				·			
	te I	ocatio	n				TWOIT EXCHIP			Abatement Type					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	No Used Mair	ormally Solely ntenano odial St (12)	by ce/	(i.e. the	Contair	stems i	terial (ACM) nsulation, , or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
	Yes	No V	N/A	11111	D'0-	- 0	omasTic		6LF	X					
outbooks	-	$\triangle$		HUMI	1.45	- 7	عارات الاسان						_		
										+-			-		
- Land Waste Haules		IN	JDEP \		Cubic Y		1		stered Landf	ill	<u> </u>	1			
Name of Registered Waste Hauler WASTE MANAGEMENT		H	auler II 1125		of Wast	/	GRC City, S		ORTH						
City, State ELIZABETH, NJ					TA	BD	MOF	RRISV	ILLE, PA	Date,	/	:/	-		
Completed by CAROL RAIMO	Title	ICE N	IGR.		Si	ignature	aral 1	au	no	2	14	1	7		

### 10x

		(Fut:	Suaiit it	, NOAO 0.00	, and 12.12	91		13 13 15	1						
Date of Notification (1)			ame of E	Building Owr											
Agencies Notified Type Notification			treet Add	dress ADLEY R	0AO		1	FEB 1	9 2	014	*				
EPA				e, Zip Code I PLAINFI	ELD, NJ	07080					1				
		N	ame of	Contact	11.0.0			elephone Num	nar		*	1.			
DCA Cancellation	1		10/	ITY INFORI		20T/	6					- 1			
Name of Facility Where Abatement is Takin	ng Place (3)	10	TACIL	III INI OIG	IIA I I OLL	Type of Fac	ility (4)								
P56+G					100	Subch	(K-12) apter 8 (C	other than K-12)							
MANHOLE # 9 B	Pank	-Si	15	DRI	VE	= Other	(i.e. priva	te & commercia	buildi	ngs, t	omes	,			
City (5) MILLBURN	(S.	MOU	NTA	DRI NRESC	RVATION	Square Fee	A	# of Floors $N/A$	Blo	D. Ag	1 .				
County (6) —	-		county C			Current Use	(Prior if	being demolishe	ed)						
County (6) ESSEX		16		SE ONLY) _		<u> </u>	NI	A				$\dashv$			
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (8)		ASCM 004		UN	e of Abatemer IQUE SYST	EMS O	OF AMERICA							
Street Address 64 BROAD STREET				ad ave	Ξ.										
City, State, Zip Code MATAWAN, NJ 07747					te R, NJ 08	3882									
Project Manager for Monitoring Firm TOM GEIGER		Telephone No. Telephone 732-292-2217 732-432					License No. 01111								
Start Date (10)	Schedule					e of OSHA Mo		F AMERICA		10 - 1700					
Occupancy Status During Abatement (Che	eck Only On	<u>//</u> e)	//	7	Stree	et Address			-						
Facility Closed/Vacated During Entire	Period of A	batem	ent			State, Zip Co		<b>2.</b>							
Abatement Performed Outside of No Other – Describe: auldoars		100000000000000000000000000000000000000	SOUTH RIVER, NJ 08882												
Scope of Work (Check All That Apply)	150					П = по-		with Negative D	roccur	-2					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				Mini-End	dosure	with Negative P	ressur	C					
						Non-Exe	g Procedi mpted (*)	ure and Non-Friab				_			
Will the second	10.000		Location							Abatement Type					
Location of Asbestos-Containing Material (ACM)	Use	ormall d Solel	y by	Asbesto	Descripti s Containing	on of Material (ACI	M)	Amount			ш				
TO BE ABATED		intenar todial S			ms insulation, VAT, or		(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure				
In Facility (13)		(12)			other miscel				oval	air	sulati	sure			
	Yes	No	N/A						_		ю				
out Doors		$\times$	-	Acm	PipE	Somas7	ic	6LF	X						
	-														
Name of Registered Waste Hauler WASTE MANAGEMENT		Н	IJDEP V lauler ID 1125		Cubic Yard of Waste			gistered Landfil NORTH	Ľ.						
City, State ELIZABETH, NJ					Disposal Da		y, State ORRIS	VILLE, PA							
Completed by	Title				Signal	)		10	ate. 7	lii	1.	,			
CAROL RAIMO							are Laino 3/4/14								

	NOTIF	ICAT (Purs	ION C	F ASBE	ESTOS ABATI 8:60 and 5:16	EMENT )	Cl4	t .	20	56	5				
Date of Notification (1)		N			Owner/Operator (2			30 20							
//	14		Trust	ees of Pi	rinceton Univer	Sity					1				
Agencies Notified Type Notification	on	5	Street A	ddress			FEB 19	2014		+	11				
☐ EPA ☐ Initial		S 5	E.A N	1acMillar	n Building	<u></u>				+ •	$\perp$				
☑ DOLWD ☐ Amended		C	City, Sta	te, Zip Co	de						9				
□ DHSS Amendmen     □ Emergency	100 Tests		Princ	eton, NJ	08544		6		20	3	i				
DCA Emergency justification		1	Name of	Contact			Telephone Numb	er			1				
☐ Cancellation			Robe	rt Ortego	0										
			FACI	LITY INF	ORMATION				000000		_				
Name of Facility Where Abatement is Tal	king Place (	3)				Type of Facility (									
Princeton University- Walter Lov	vrie Hous	е				School (K-12)	(Other than K-12)								
Street Address	-					Other (i.e., pri	vate and commer	cial build	dings	,					
83 Stockton St						homes, etc.)									
City (5)						Square Feet	# of Floors	1,000,000	g. Age	9					
Princeton						7,500	2	100	0+						
County (6)		-	County	y Code (7)(	(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)							
MERCER															
Name of Monitoring Firm Hired by Buildin	ng Owner (8	3) A	SCM N	lo.	Name of Abateme	ent Contractor (9)	100000								
Pennoni Assoicates, Inc.	,		00102	2	BRISTOL EN	VIRONMENTAL	, INC.								
Street Address	_	_			Street Address										
515 Grove St., Suite 1B					1123 BEAVE										
					City, State, Zip C	ode					-8				
City, State, Zip Code					BRISTOL, PA										
Haddon Heights, NJ 08035		Tolor	ohone N	lo l	Telephone No.		License No.								
Project Manager for Monitoring Firm	100000000000000000000000000000000000000	6-547-		215-788-6040	0	00509									
Alan Lloyd	Mary Comment	eletion Date (11) Name of OSHA Monitor													
Start Date (10) So	2/				Law metals the cause our course of a season and of	IVIRONMENTA	AL, INC.								
Occupancy Status During Abatement (C	heck only o	ne)			Street Address										
☐ Facility Closed/Vacated During Entire	Period of	Abater	nent		1123 BEAVE	R STREET									
Abatement Performed Outside of No	rmal Facility	Hour	s - Desc	cribe	City, State, Zip C	ode									
Time of Abatement: 7:00AM-3:30P	M/P	Λ- <u></u>	AM		BRISTOL, PA	A 19007									
Scope of Work (Check all that apply)							native Property								
	Ø 0-				☐ Full Cor ☑ Mini-En	ntainment with Neg	gative Pressure								
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	⊠ Re □ De				⊠ Gloveba	ag Procedure	Transpers and the contract of								
☐ ≥180 St 01 ≥200 II					☐ Non-Ex	empted (*) and No	n-Friable Procedu								
		Locat				N		-	ateme						
Location of	11	Norma		Acho	Description stos Containing M	ot laterial (ACM)	Amount	Remova	Repair	Ē	Enclosure				
Asbestos-Containing Material (ACM)	Ma	intena	nce/	(i.e	e, thermal systems	s insulation,	(Specify	Vou	pair	aps	los				
TO BE ABATED IN Facility	Cus	todial	Staff?	(	surfacing, VA	T, or	SF or LF)	'al		Encapsulate	ure				
(13)	- V	(12)	N/A	1	other miscellan	eous)				ē					
and my to the	Yes	No 🖂	N/A	Pine In	sulation		7 LF	$\boxtimes$							
2 <sup>nd</sup> Floor bathroom	$-\frac{1}{6}$		H		sulation		10 LF	$\boxtimes$							
3 <sup>nd</sup> Floor Bedroom		-	+					П	П	П	П				
				-				늄							
						- (5)	1 41 4611			ш					
Name of Registered Waste Hauler	10	100	JDEP I		Cubic Yards of Waste		stered Landfill  S. NORTH LAN	DFILL							
BRISTOL ENVIRONMENTAL, IN	NC.		1870												
City, State BRISTOL, PA 19007					Disposal Date	City, State MORRISV	ILLE, PA 1906	7							
THE THE PARTY OF T	Title				Signature	1		Date	9	/	/				
Completed By (Print or Type)  Brian Scafiro	Estima	tor			Bria	n Scofer	0/1	2/	14/	14	5				

ASB-41 MAY 11 13514009-0

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

Cx #25396

Date of Notification (1)			TN	lame of	Building	Owner/Operator	(2) quare Manage	ement, LLC		1.1				
Agencies Notified	Street Address  40 Nassau Streef EB 1 9 2014													
EPA DEP DOL	Initial Amended Amendment #		-	City, Stat	e, Zip Co									
DOH DCA	☐ Emergency (incl justification) ☐ Cancellation	uding	1	Name of	Contact Jir	n Elkington	Telephone Number							
				FACIL		ORMATION								
Name of Facility Where	Abatement is Taking Office E	Place (3 Buildir	) ig				Type of Facility  School (K-12 Subchapter	2) 8 (Other than K-12)	buildi	age				
Street Address	One Palm	er Squ	ıare				other (i.e., p homes, etc.)	rivate & commercial ) # of Floors		g. Ag	9			
City (5)	Princ	eton			50000	5	_	60		_				
County (6)	Code (7 NLY)	(7) (STATE Current Use (Prior if being demolished)  Commercial Office Building												
Name of Monitoring Firm		wner	7	ASCM N	0.	Name of Abater Ste	nent Contractor (9 vens Environ	) mental Service	s, Inc					
Street Address	PO Box 341	n = 1 p. 20 . = 1	=1=			Street Address		30x 322						
City, State, Zip Code	rosswicks, NJ 0	2515	===			City, State, Zip Code Allentown, NJ 08501								
Project Manager for Mo		phone N 9) 298		Telephone No. License No. 00493										
Start Date (10)	Weisgarber Sched	uled Cor	400	tion Date		Name of OSHA Monitor MECS								
2/12/14 Occupancy Status Dur		Street Address PO Box 341												
Facility Closed/Vaca Abatement Perform Other - Describe:	ed Outside of Normal	Facility	bater Hour	ment rs		City, State, Zip	Code	ks, NJ 08515				= =		
Scope of Work (Check  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		Ren	novati			Mini-E	had Procedure	egative Pressure	re					
		5/24/25	ocatio									Abatement Type		
Location Asbestos-Containing TO BE AB IN Faci (13)	Solel tenan stodia taff? (12)	y by nce/ al	Asbes (i.e.	Description tos Containing M , thermal system: surfacing, VA other miscellan	laterial (ACM) s insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure				
4th floor					P	ipe Fitting Ir	sulation	25 lf	×					
-									+		_	-		
									1					
Name of Registered Waste Hauler NJDEP Waste Hauler ID No.						Cubic Yards of Waste		gistered Landfill Γ.R.R.F., Inc. I	and	fi11				
	nmental Service	s, Inc.		182	292	1 CU Disposal Date		1 .K.K.F., IIIC. I	Janu	1111		-		
City, State	Allentown,	NJ				2/24/14/		Tullytown,	PA	_				
Completed By Mahlon E. S	Title	9	oje	et Mar	nager	Signature	1	Date	2/1	1/14		_		