STATE OF NEW JERSEY
NOTIFICATION OF ASSESTOS ARA

T	P	AM	NOTIFIC (PURS	CATION OF	ASBESTO	SABATEM	ENT /	1	1	101	062
Date of Notif	fication (1)		1, 2,,2	Name of US GY	of Building PSUM			CA		PO	no
Agencies No	21	f Notification			Address ARKLEY ST	REET		11.11.	E U		W E
	DEP	Initial		City, St	tate, Zip Co	de		1 No. 1			The same of
V	DOH	Amended Amendmen	t #		READING, I	NJ 07064		3// 2/3	EEL	0 2 2	2010
	DOL	Emergency	w/ justification		M ELSER			Teleph	one Nui	mbër 4	2019
		Cancellatio	n	FACILITY	/ INICODIA			732-726	£7208	and the second	1
No.				FACILITY	INFORMA	TION		£1-			
US GYPSUM	ility Where Abat	ement is Takin	g Place (3)		_	Facility (4)					* c+
Street Addres					- 	School	(K-12) oter 8 (Other	41			
300 MARKLE	Y STREET					Other (I.	e., private &	cmmercia) d		
City (5)	County	(6)	County Cod	0 (7)	C	bldgs., ł	nomes, etc.)				
PORT READI	NG MIDDLE		County Cou	e (1)	Square 1	Feet 00,000	# Of Floor	'S 1	Build	ling Age	
					Current	Use (Prior	if being dem	olished)	+	40) +
Name of Mon	itoring Firm Hir	ed by Bldg. Ow	ner (8)	ASCM N	OFFICE	/ MANUFA	CTURING				
EHI		,ug. 011	1101 (0)	ASCIVIN	10						
Street Addres	S				NORTHS	TAR CONT	RACTING G	ROUP, IN	Э.		
655 WEST SH	ORE TRAIL				Street A	ddress					
City, State, Zi	p Code				32 Willian	ms Parkway	t.):				
SPARTA, NJ (For Monitoring	Firm	I+		City, Sta	te, Zip Cod	е				
WILLIAM KIEF	RBIL	rım	Telephone N 973-729-5649	lumber	East Han	over, NJ 07	000				
Sheduled Star		Sched. Com	pletetion Date	(11)		ne Number	936	License	Mumbo		
$\frac{-03}{}$ //-	11 / 19	_ 03	<u> 29</u>	/19	.			License	Humbe	ı	
Occupancy St	atus During Ab	atement (Check	Only 1)			84-8682 OSHA Mon	itar			00860	
☐ Fac	ility Closed/Vac	ated During En	tire Period of		NORTHS	TAR CONT	RACTING GF	ROUP. INC	:		
	tement tement Perforn	ned Outside of I	Normal Essilia		Street Ac	dress					
Hot	ırs - Describe: _	MON-FRI		6	32 Willian	ns Parkway					
☑ Oth	er - Describe: _	7:00 AM-3:30	PM		City, Stat	e, Zip Code)				
Scope of Worl	(Check All Tha	t Apply)			East Hand	over, NJ 079	936				
☐ Den	nolition		_	223							
≥3s ⁻	f or <u>></u> 3lf	✓	Renovation		Full Cont Mini - End	ainment wi	th Negative I	Pressure			
	0 sf or ≥260 If				Glovebag	Procedure	16				
					Non-Exer	npted (*) ar	d Non-Friab	le Proced	ure		
	tion of	Is		Descript	tion of			lat d			
Asbestos	Containing	Location	A	sbestos - C	Containing			Abateme R	it Type	ľΕ	ĮΕ
TO BE	ABATED	Normally Used		Material .e., therma	(ACM)		Amount	E	R	N	N
in F	acility	Solely	insu	.e., merma ılation, sur	i systems facing, VA	r.	(Specify SF or LF)	M	E P	C	C
(13)	by Main-	or	other misc	ellaneous)	,	SF OF LF)	V	A	A	L O
		tenance/ Custodial						Α	1	s	s
		Staff (12)						L	R	U	U
ST FLOOR		YES NO N/A								+	R
			SHEETROCK	JOINT CON	MPOUND		200 SF	V			
ame of Regist	ered Waste Hau		N. Inc.							1 +	
ORTHSTAR C	ONTRACTING O	ROUP, INC	NJDEP Waste Hauler ID No.	Cubic Yards	Name of R FAIRLESS	egistered L	andfill				
ity, State				of Waste	- AIRCEOS	PUNDUILL					
ity, State AST HANOVEI	R, NJ		7	Disposal	City. State						
W-14, 79-34				Date	MORRISVI	LLE, PA					
ompleted by (I	Print or Type)		Title			Signature	1			Date	
eve Stiles			Project Manage	er		I Price	n 5	4			
SB-41	The second second	the state of the state of				wer well	in the	JUL 1		02	2/20/19

CK# 9485

State of New Jersey IOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 2/20/2019 PSE&G Agencies Notified Type Notification Street Address 4000 Hadley Road EPA Initial DEP Amended City, State, Zip Code × DOL Amendment # SOUTH PLAINFIELD, J 07068 Emergency (including × DOH Name of Contact justification) Telephone Number DCA JEFFREY GAZICK Cancellation 856-628-2477 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) × Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age N/A N/A N/A County (6) County Code (7) Current Use (Prior if being demolished) **ESSEX** (STATE USE ONLY) N/A Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ENVIRONMENTAL TACTICS 0045 UNIQUE SYSTEMS OF AMERICA, INC. Street Address Street Address 64 BROAD STREET 396 WHITEHEAD AVE. City, State, Zip Code City, State, Zip Code MATAWAN, NJ 07747 SOUTH RIVER, NJ 08882 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. TOM GEIGER 732-290-2217 732-432-8350 01111 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 3/4/2019 4/30/2019 UNIQUE SYSTEMS OF AMERICA Occupancy Status During Abatement (Check Only One) Street Address 396 WHITEHEAD AVE Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours
Other – Describe: OUTDOORS City, State, Zip Code x SOUTH RIVER, NJ 08882 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure × Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Normally Type Location of Description of Asbestos-Containing Material (ACM) Used Solely by Asbestos Containing Material (ACM) Maintenance/ Amount TO BE ABATED Encapsulate (i.e. thermal systems insulation. Custodial Staff? (Specify Enclosure Removal In Facility Repair surfacing, VAT, or SF or LF) (12)other miscellaneous) Yes No N/A **OUTDOORS** X PIPE SOMASTIC 200 LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. WASTE MANAGEMENTS of Waste **FAIRLESS** 1125 APPX 10 City, State Disposal Date City, State ELIZABETH, NJ TBD MORRISVILLE, PA

Completed by

CAROL RAIMO

Title

OFFICE MGR.

laumo

Date

2/20/2019

Signature /

CK# 9485

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

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		NC	(Pursi	TION OF A	SBESTO AC 8:60 a	OS ABATI and 12:12	EMENT 20)		CI	3	N	7 1
Date of Notification (1) 2/20/2019	,		Nan PS	ne of Buildin	ng Owne	er/Operato	er (2)					
Agencies Notified Type Notifical	ion		Stre	et Address				F	EB	22	201	9
EPA X Initial DEP Amendo				00 Hadley				1				
DOL Amendm	ent#		City,	State, Zip UTH PLA	Code	D 107	7000	F 1.		77	77-	
X DOH Emergen	cy (includ	ling		e of Contac			000		17		- Ja	
DCA Cancella	ion			FREY G				Telephone 856-628-				
Name of Facility Where Abatement is Ta	king Plac	e (3)	F	ACILITY IN	FORMA	TION	Tuna - 65 - 100					
	OCA		N á	R)			Type of Facility School (K-					
41 Euclis AV	10						Subchapte	er 8 (Other than k	(-12)			
City (5)	6.	-					etc.)	private & comme	ercial b	uilding	js, ho	mes,
NEWARK							Square Feet N/A	# of Floors N/A			. Age	
County (6) ESSEX			Coun	ty Code (7)				rior if being demo	lished)	N/A		
Name of Monitoring Firm Hired by Buildin	a Owner	/R)		CM No.	Υ)		N/A		norica)			
ENVIRONMENTAL TACTICS	9 0 111101	(0)	004			Name UNIC	of Abatement Co	intractor (9) IS OF AMERI	CA 11	VIC.		
Street Address 64 BROAD STREET						Street	Address		CA, II	NC.		
City, State, Zip Code							VHITEHEAD.	AVE.				
MATAWAN, NJ 07747						City, St	ate, Zip Code ΓΗ RIVER, Ν.	1 00000				
Project Manager for Monitoring Firm TOM GEIGER				none No.		Telepho		License	No			
Start Date (10)	School	ulad Ca		290-2217			32-8350	01111	110.			
3/4/2019	4/30/2	2019	mpietioi	n Date (11)		Name of	OSHA Monitor	S OF AMERIC	24			
Occupancy Status During Abatement (Che						Street A		OF AWERIC	JA			
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	Period of	f Abate	ment				/HITEHEAD A	AVE.				
Other - Describe: OUTDOORS	mar r aciii	ity i loui	5				ite, Zip Code H RIVER, NJ	1,00000		700	-	
Scope of Work (Check All That Apply)							TITLIVER, NO	00002				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renovi Demoli					Glovebag Proc	edure				
	1	s Locat	ion	1		X	Non-Exempted	(*) and Non-Fria	ble Pro	Partition Services		
Location of	1	Norma ed Sole	lly		Des	cription o					emen /pe	t
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	aintena	nce/	Asbest	os Conta	aining Mai	terial (ACM)	Amount			Е	
In Facility (13)	Cus	stodial ((12)	starr?	(surfaci	ing, VAT, iscellaned	or	(Specify SF or LF)	Removal	Repair	ncap	Enclo
	Yes	No	N/A		outer mi	iscellane	ous)		oval	air	Encapsulate	Enclosure
OUTDOORS		Х			PIPE S	OMAS	ГІС	200 LF	X		(D	
	-											
	-											
lame of Registered Waste Hauler			JDEP W		Cubic Y	ards	Name of P	egistered Landfill				
VASTE MANAGEMENTS			auler ID 25	100000	of Waste	е	FAIRLES					
City, State LIZABETH, NJ					Disposal TBD		City, State					_
ompleted by	Title					nature /	WIORKIS	VILLE, PA				
AROL RAIMO	OFFI	CE M	GR.		3.9	//	sal Va	Da	te /20/20	110		

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

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21/21/20/20/20/20	W-00-0	7 70 7	PICILIE	

Date of Notification (1) 2/20/2019			Nam	e of Buildir E&G	ng Owne	r/Operato	r (2)				1 .	- 0	010	
Agencies Notified Type Notifica	tion			et Address					F	EB 3	2 2	. 21	J19	1
EPA X Initial				0 Hadley				T.						
DEP Amende Amendm	ent#		City,	State, Zip I	Code	D 107	2000		f	* * *	-			
X DOH Emerger	cy (includi	ng		e of Contac		LD, J 07	068	- 1	1 4 30 4 4	a let	993		47	2.4
DCA Cancella			JEF	FREY G	AZICK				Telephon 856-628					
Name of Facility Where Abatement is Ta	king Place	(3)	FA	CILITY IN	FORMA	TION	Type of Facili	1. (4)						
PSE+G-(Street Address 43 Eucli City (5)	Loc	AT		3))		Type of Facili School (Subchap Other (i.e.	K-12) oter 8 (C	Other than te & comr	K-12)	hui	l din =		4.470000
City (5) NEWARK	0 /1	VE	J				Square Feet	#	of Floors				Age	nes,
County (6)			Count	y Code (7)			N/A		N/A		100	A/A		
Name of Monitoring Fire Winds & British			(STATE	E USE ONL	Y)		Current Use (I N/A	Prior if t	eing den	nolishe	d)			
Name of Monitoring Firm Hired by Buildir ENVIRONMENTAL TACTICS	g Owner (8)	004	CM No. 15		Name UNIC	of Abatement C	Contract MS Of	or (9)	RICA	INI			
Street Address 64 BROAD STREET						Street /	Address VHITEHEAD				11 4	·		
City, State, Zip Code MATAWAN, NJ 07747						City, St	ate, Zip Code							
Project Manager for Monitoring Firm TOM GEIGER			Teleph	one No.		Telepho		NJ 088	Licens	se No.	-100			
Start Date (10) 3/4/2019	Schedu	led Co		90-2217 Date (11)			32-8350 f OSHA Monito	or	0111	1				
Occupancy Status During Abatement (Ch	4/30/2					UNIQ	UE SYSTEM	MS OF	AMER	ICA				
Facility Closed/Vacated During Entire	Dorind of	0 la =4=	ment			Street A	ddress /HITEHEAD	AVE.						
Abatement Performed Outside of No Other – Describe: OUTDOORS	mal Facilit	y Hour	S		_		ate, Zip Code H RIVER, N	J.J. 088	182					
Scope of Work (Check All That Apply)	72						- "		-					-
≥3 sf or ≥3 if≥160 sf or ≥260 if		Renova Demoli				×	Full Contains Mini-Enclosu Glovebag Pro	re ocedure						
	Is	Locat	ion				Non-Exempte	eo (*) ar	nd Non-Fr	iable F			e ement	
Location of Asbestos-Containing Material (ACM)		Normal ed Sole			Des	scription o	f						pe	
TO BE ABATED In Facility (13)	Ma	intena todial 3 (12)	nce/	Asbest (i.e.	thermal : surfac	aining Mat systems in sing, VAT, siscellaneo	or	(Amount Specify F or LF)	TO TO TO	Damo	Repair	Encapsulate	Enclosure
	Yes	No	N/A							2	2	=	ulate	ure
OUTDOORS		X			PIPE S	SOMAS"	TIC	2	00 LF	Х				
											1			
Jame of Registered Waste Hauler		I N	JDEP W	asto	Cubic Y	/and					1			
VASTE MANAGEMENTS		H	auler ID i	No.	of Wast	e	FAIRLE		ered Land	fill		52		
City, State LIZABETH, NJ					Disposa TBD	al Date	City, State		E DA			The second		
Completed by	Title				CO-1710-1717	nature /	MORKI	JOVILL		Onto				
AROL RAIMO	OFFIC	CE M	GR.			/	aral	Lau		Date 2/20/	201	19		

CK# 9485 PAI

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

"OPEN	NOTIFICATION'
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AROL RAIMO	OFFIC	EM	GR.		Signature	Bral	2	Da	te 20/20	240		
LIZABETH, NJ	77.1			TBI		MC	r, State DRRISVIL	LE, PA				
/ASTE MANAGEMENTS ity, State			auler ID 1 25	No. of V API	Vaste PX 10	FA	IRLESS	cereu Landfill				
lame of Registered Waste Hauler		N.	JDEP Wa	aste Cut	oic Yards	No.	ne of Deet	tered Landfill				
OUTDOORS		X		PIP	E SOMA	STIC		200 LF	Х			
OUTDOODO	Yes	No	N/A						0		ate	re
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Locat Norma d Sole intena odial s (12)	lly ely by nce/	Asbestos C (i.e. therr su	Description ontaining Mal system rfacing, VA er miscellar	n of Material (AC s insulation, T, or	M)	Amount (Specify SF or LF)	Removal	Abat	emen Encapsulate	Enclosure
≥ ≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renova Demoli			2	Gloveba	iciosure ag Procedu	vith Negative re and Non-Fria			e ·	
Facility Closed/Vacated During Enti Abatement Performed Outside of N Other – Describe: OUTDOORS Scope of Work (Check All That Apply)	o Dorind of	06-6-	ment 's		396 City,	t Address WHITEH State, Zip C JTH RIVE	ode					
3/4/2019 Occupancy Status During Abatement (Cl	4/30/2	019	p. 20011	- 410 (11)	UNI	QUE SYS		F AMERIC	CA			
TOM GEIGER Start Date (10)	Schedu	led Co	732-2	one No. 90-2217 Date (11)	732	hone No. -432-8350 e of OSHA		License 01111	No.			
MATAWAN, NJ 07747 Project Manager for Monitoring Firm					SO	State, Zip C UTH RIVE	Code ER, NJ 08	3882				
64 BROAD STREET City, State, Zip Code					Stree	et Address WHITEH						
ENVIRONMENTAL TACTICS Street Address	ng Owner (8	3)	004	M No. 5	Nam UN	e of Abaten	nent Contra STEMS (ctor (9) OF AMERI	CA, II	VC.		
ESSEX Name of Monitoring Firm Hired by Build			(STATE	Code (7) USE ONLY)		N/A		f being demo	lished)			
NEWARK County (6)						Square N/A		# of Floors N/A		Bldg N/A	Age	
Street Address 65-75 Eu City (5)	OCAT CLi			7.) E.		Su	ner (i.e. priv	(Other than k	(-12) ercial b	uilding	ıs, ho	mes
Name of Facility Where Abatement is T				CILITY INFOR	MATION	Type of	Facility (4)					
DCA justifica Cancell	tion)		JEFI	of Contact FREY GAZI				Telephone 856-628-	Number 2477	er		
X DOL Amend ☐ Emerge	ment #_ ncy (includir	ng	SOL	JTH PLAINE	IELD, J	07068		<i>P</i> -			1. j	- (5)
EPA X Initial DEP Amend	ed			0 Hadley Ro State, Zip Code			1.	L. Marie		50. N		į
Agencies Notified Type Notific	ation		Stree	t Address				F	EB :	2 2	2019	}
Date of Notification (1) 2/20/2019			Name	e of Building O	wner/Opera	ator (2)						

"OPEN NOTIFICATION"

CK# 9485	5 P	AI	N	State of Name			"OF	PEN N	IOT	TFI(CAT	ΓΙΟ
		NO	TIFICAT (Pursu	State of New Jer TON OF ASBESTO ant to NJAC 8:60	OS ARAT	EMENT 20)		EO) [F	- Contractor	M	
Date of Notification (1) 2/20/2019			Nam PSI	ne of Building Owne	er/Operat	or (2)	الدالة	341-0				2.5
Agencies Notified Type Notific	ation			et Address			1 1 17	FE	B 2	2	2019	
EPA X Initial Amend	ed			O Hadley Road State, Zip Code				-uds.	4	40.45		
▼ DOL Afficient Amend Emerge instiffer	ency (includ	fing	SOL	JTH PLAINFIE	LD, J 0	7068		P				.,3
DOH justifica	tion)			e of Contact FREY GAZICK				elephone 1 56-628-2	Vumbe	er	Marie .	
Name of Facility Where Abatement is	Taking Plac	e (3)		CILITY INFORMA				00-020-2	24//			
PSE4 G - (2) Street Address	-OCA	Tio	N .	5)		Type of Facili						
- / -	cL;	٥	AV	E		Subchar	oter 8 (Oth	ner than K & comme	-12) rcial b	uilding	ıs, ho	mes
NEWARK County (6)	- Head					Square Feet N/A	# c	of Floors A		Bldg.	Age	
ESSEX			(STATI	y Code (7) E USE ONLY)		Current Use (I N/A	Prior if be	ing demol	ished)			
Name of Monitoring Firm Hired by Build ENVIRONMENTAL TACTICS	ing Owner	(8)	004	CM No. 15	Name UNI	of Abatement C QUE SYSTE	Contractor MS OF	(9) AMFRIC	:A II	NC		
Street Address 64 BROAD STREET					Street	Address WHITEHEAD		- WILLIAM	<i>></i> /	VO.		
City, State, Zip Code MATAWAN, NJ 07747					City, S	tate, Zip Code TH RIVER, N		<u> </u>				
Project Manager for Monitoring Firm TOM GEIGER			Teleph 732-2	one No. 290-2217	Teleph	ione No. 132-8350	10 0000	License	No.			
Start Date (10) 3/4/2019	Sched 4/30/	uled Co		Date (11)	Name	of OSHA Monito	or	01111				
Occupancy Status During Abatement (C	heck Only (One)				UE SYSTEM	AS OF A	AMERIC	A			
Facility Closed/Vacated During Enti Abatement Performed Outside of N Other – Describe: OUTDOORS	re Period o ormal Facil	f Abate ity Hour	ment 's		396 V	VHITEHEAD ate, Zip Code	AVE.					
Scope of Work (Check All That Apply)						TH RIVER, N	IJ 0888	2				
≥3 sf or ≥3 if ≥160 sf or ≥260 if	×	Renova Demoli	ation tion		×	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure					
Location of		s Locat Norma			W 53			TOTAL FIGURE	10110	Abate	emen pe	t
Asbestos-Containing Material (ACM) TO BE ABATED	M	ed Sole aintena	nce/	Asbestos Conta	cription of aining Ma	iterial (ACM)	Am	ount		1		
In Facility (13)	Cus	stodial ((12)	Staff?		systems i ing, VAT iscellane	, or		ecify or LF)	Remova	Repair	Encapsulate	Enclosure
A	Yes	No	N/A			ousy			oval	air	sulate	sure
OUTDOORS		X		PIPE S	SOMAS	TIC	200) LF	Х			
Name of Registered Waste Hauler		1.	IDES::								-	
NASTE MANAGEMENTS		H	JDEP Wa auler ID I 25		е	Name of FAIRLE		d Landfill				
City, State ELIZABETH, NJ				Disposa	A CANADA	City, State	Э	D.4				
Completed by CAROL RAIMO	Title		2000		nature /	MORRI	OVILLE	, PA	ρ.			
ANOL RANIO	OFFI	CE M	GR.		4	aral x	ain	2/2	e 20/20)19		

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Date of Notification (1)				Nome	of Duitelline	0 1		(4)	ly h	11 17	- Pre	n)	- 00	4.	111
02/19/2019				E.I. d	of Building u Pont d	le Nem	Operato IOUrs a	r (2) ind C	ompany	1. 12	FE	B 2	2 20	119	
Agencies Notified	Type Notification			100000000000000000000000000000000000000	Address Centre R	and D	O Bas	. 204					N-, -:	- T-	
EPA DEP				City, St	tate, Zip C	ode		(291	5	7.2	*	41.50		- 1	+1
▼ DOL	Amendment Emergency	#(including	<u> </u>		ington, D		05								
DOH DCA	justification) Cancellation				of Contact Mumini						lephone N 6-276-9				
Name of Facility May					ILITY INF		ION				70-270-3	7224			
Name of Facility Where A DuPont Chambers	Abatement is Takin Works - Buildin	g Place i g 706	(3)					Туре	e of Facility (
Street Address								H	School (K-1 Subchapter		er than K	-12)			
Canal Road								×	Other (i.e. petc.)	orivate	& comme	rcial bu	ildings	, hon	ies,
City (5) Deepwater								Squa 590	are Feet 0	# c	f Floors	199	Bldg. 50+	Age	
County (6) Salem				County (STATE	Code (7) USE ONLY)		Curr	ent Use (Priemical Pla	or if be	ing demol	ished)			
Name of Monitoring Firm Harvard Environmen	Hired by Building (Owner (8	3)	ASCI	M No.			of Aba	atement Cor ourg Indus	ntractor		~	2011		
Street Address 760 Pulaski Highwa							Street	Addre	ess		service (Compa	ariy		
City, State, Zip Code	У								Iman Driv	e 					
Bear, DE 19701									n, PA 180	15					
Project Manager for Moni JT Morrison	toring Firm			Telepho 302-3	one No. 26-2333		Teleph 610-	none N 691-1			License	No.			
Start Date (10) 03/04/2019		Schedu 03/14/		mpletion	Date (11)		100000000000000000000000000000000000000	of OS	HA Monitor						
Occupancy Status During	Abatement (Check	k Only O	ne)				Street	Addre	ss						_
X Facility Closed/Vacat Abatement Performe X Other – Describe: D	d Outside of Norm	al Facilit	v Hours	nent s			City, S	tate, Z	man Drive Lip Code						
Scope of Work (Check All		13/20/20	13			_	Beth	lehen	n PA 180	15					
≥3 sf or ≥3 lf	ттаг другу)		Renova	ation			×] Fu	II Containme	ant with	Mogotivo	Droco			
× ≥160 sf or ≥260 lf			Demolit				×	Mir	ni-Enclosure ovebag Proc	1	rivegative	riessi	ne		
		T			T		×		n-Exempted	(*) an	d Non-Fri	able Pro			
Location	of		Locati Normal	ly		Dec		- 6						emen ype	t
Asbestos-Containing N TO BE ABA	Naterial (ACM)	Ma	ed Sole aintena	nce/		tos Cont		aterial			mount			ш	
In Facility (13)		Cus	todial S (12)	Staff?	(i.e.		cing, VA	T, or	ation,		pecify or LF)	Remova	Repair	Encapsulate	Enclosure
(1.9)		Yes	No	N/A		other fr	niscellan	eous)				oval	air	ulate	sure
1st Floo	r			X		Pipe	Insula	tion		17	70 LF	X	-		
1st Floo	r			Х		Ga	lbesto	s			00 SF	X			
Througho	out			X		Floor	Tile/Ma	astic		75	0 SF	X			
Througho				X		Tı	ransite			27	5 SF	X			
Name of Registered Waste Waste Management of				JDEP W auler ID		Cubic \ of Was			Name of F	NAME THE					
City, State	UNU			7273		100			Salem C		y Improv	/emer	it Au	thori	ty
Camden, NJ						Dispos 3/11/1	al Date 9-3/21	/19	City, State Alloway						
Completed by Stephen Carne		Title Envir	onme	ntal Ma	anager	Si	gnature	<	1		110	ate 02/19/	19		

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Date of Notification (1) 02/05/2019			the same of the same of	of Building nty of Es		Operato	r (2)	1 1	i		- 4		J	N. E. S.
Agencies Notified Type Notification				Address Bloomfie	ld Aver	nue			Pas 2				- 10	ish.
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Emergency justification	(including	g		na, NJ of Contact					Te	lephone Nu	mher			
▼ DCA Cancellation				anjeev '						73-226-85				
Name of Facility Where Abatement is Takir	g Place ((3)	FAC	ILITY INF	ORMAT	ION	Typ	e of Facility	(4)					
Veterans Courthouse	,	- 2					П	School (K-						
Street Address 465-479 Dr. Martin Luther King Jr.	Blvd.						×	Subchapter Other (i.e. petc.)	8 (Oth	er than K-1 & commerc	2) ial bui	ldings	, hom	es,
City (5) Newark							100000	are Feet	# o	f Floors		Bldg. A	Age	
County (6) Essex				Code (7) USE ONLY)			rent Use (Pri urthouse						
Name of Monitoring Firm Hired by Building Mott MacDonald	Owner (8)	ASCI 0014	M No.			of Ab	atement Cor						E1154.53
Street Address			001			Street	Addre				volt. v			
111 Wood Avenue South City, State, Zip Code								ton Ave., I	PMB S	Suite 218				
Iselin, NJ 08830						Clifto	on, N	J 07012						
Project Manager for Monitoring Firm Kevin Herrighty				79-3400			389-	0089		License N 00693	lo.			
Start Date (10) 03/22/2019	Schedul 04/28/			Date (11)				SHA Monitor eral Const	ructio	n, Inc.				
Occupancy Status During Abatement (Chec						Street			240	2 11 040				
Facility Closed/Vacated During Entire R Abatement Performed Outside of Norm Other – Describe: Occupied. Weekends	al Facility	v Hours	5					ton Ave., F Zip Code	-MB S	Suite 218			2017	
Scope of Work (Check All That Apply)	5:00pm F	nday - 3	::00pm St	Inday		Clifto	on, N	J 07012						
≥3 sf or ≥3 if ≥160 sf or ≥260 if	processor.	Renova Demolit				×	Mi Gi	ull Containme ini-Enclosure ovebag Proc on-Exempted	edure				е	
Location of	100	Locati Normal			Doo	cription	of.					Abate Ty	ement pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intenar todial S (12)	nce/		tos Conta thermal : surfac	aining M	lateria insul T, or	ation,	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								1000		te	(D
SEE ATTACHED														
							Trees.com							
Name of Registered Waste Hauler Service Transport Group		Н	JDEP W auler ID 0990	17000 - 500	Cubic \ of Was			Name of F		red Landfill Ifill				
City, State New Castle, DE					Disposa 04/28			City, State		OH 4468	38			
Completed by Krutarth Jagad	Title Proje	ect Ma	ınager			gnature	N.			Da	te	2019		

Print Form

FEB 2 2 2019

List of Asbestos Containing Materials to be Removed from the Following Location:

Note: Is location normally used solely by maintenance/custodial staff: Yes

Veterans Courthouse 465 – 479 Dr. Martin Luther King Jr. Blvd. Newark, NJ

Location of ACM to be abated in facility	Description of ACM (i.e. thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify SF or LF)
Fifth Floor, Pipe Chase 506 & 508	Elbow, Valves and/or Tees	10 LF
Sixth Floor, Pipe Chase 608	Elbow, Valves and/or Tees	5 LF
Seventh Floor, Pipe Chase 706 and 708	Elbow, Valves and/or Tees	10 LF
Seventh Floor, Pipe Chase 706 and 708	Elbow, Valves and/or Tees	6 LF
Eighth Floor, Pipe Chase 802 and 808	Elbow, Valves and/or Tees	10 LF
Ninth Floor, Pipe Chase 906 and 908	Elbow, Valves and/or Tees	10 LF
Tenth Floor, Pipe Chase 1006 and 1008	Elbow, Valves and/or Tees	10 LF
Eleventh Floor, Pipe Chase 1103 and 1108	Elbow, Valves and/or Tees	10 LF
Twelfth Floor, Pipe Chase 1206 and 1208	Elbow, Valves and/or Tees	10 LF
Basement, Ballistic Room Above Drop Ceiling	Elbow, Valves and/or Tees	6 LF
Seventh Floor, Room 710D	Elbow, Valves and/or Tees	6 LF

CK 100005070	14 PA	OTIFICATIO	State of N ON OF AS nt to NJA	BESTOS	ABAT	EMENT 20)			C	E	7	V	
Date of Notification (1)			of Buildin			or (2)		3 4					-
02-19-2019			keye Pa	rtners L	LP.				FEB	2	20	119	
Agencies Notified Type Noti	fication		Address										
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500	nded ndment #	136.12	State, Zip ((f. 16)	* * 1.0 2 				-5
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DOH justif	ication)		of Contac						none Nu				
Z DCA	cellation	11. (0.3550)	hele Sm					732-	397-46	881			
Name of Facility Where Abatement	is Taking Place (3)	FA	CILITY IN	FORMAT	ION	Tuna	of F1114-7	4)					
Buckeye Partners LLP	· · · · · · · · · · · · · · · · · · ·					Туре	of Facility (1 55					
Street Address						-	School (K-1		L	01			
380 Maurer Rd						X	Subchapter Other (i.e. p	orivate & co	nan K-1. ommerci	2) ial bui	ldinas	. hom	ies.
City (5)							etc.)				85380		
Perth Amboy						800	are Feet	# of Flo	oors	- 1	Bldg. A	Age	
County (6)		County	y Code (7)					0		100	0		
Middlesex			USE ONL			Tra	ent Use (Prionsfer Pipe	or if being	demolisi	ned)			
Name of Monitoring Firm Hired by B	uilding Owner (8)	ASC	CM No.		Name		atement Con						
	()						d Specialt						
Street Address						t Addre		y Contia	Ciors		-		
					WW(00-2505)		n Street E	xtension	n Suite	10			
City, State, Zip Code					_		ip Code			-			_
					100000000000000000000000000000000000000		, NJ 0887	'2					
Project Manager for Monitoring Firm		Teleph	one No.		Telep	hone N	0.	Li	cense N	0.			
3: 12 112					732	-525-0	0100	0	0750				
Start Date (10) 03/05/2019	Scheduled		Date (11))			HA Monitor						
	03/29/20				Tige	er Env	ironmenta	al					
Occupancy Status During Abatemen	50 E0 15				100 May 120 May 1	t Addre	5.7						
Facility Closed/Vacated During	Entire Period of Aba	atement			234	20th	Ave						
Abatement Performed Outside of Other – Describe: Abatement in	of Normal Facility H	ours					ip Code						
Scope of Work (Check All That Apply					Bric	k, NJ	08724	100000000000000000000000000000000000000					
						27							
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		ovation nolition			7		l Containme	nt with Ne	gative P	ressu	re		
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			_			No	n-Exempted	(*) and No	on-Friab	le Pro	cedur	е	
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Location of Asbestos-Containing Material (AC	11-16	mally Solely by			scription					-	T I y	ре	
TO BE ABATED	Mainte	enance/	Asbes	stos Cont . thermal	aining I	Material	(ACM)	Amou (Spec		1 -		Ш	ш
In Facility (13)		ial Staff? 12)	, , , , ,	surfac	cing, VA	AT, or	adon,	SF or		Remova	Repair	cap	nclo
(13)			-	other n	niscella	neous)				oval	air	Encapsulate	Enclosure
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Transfer Pipe	×			Pipe	Insula	ation		800 L	_F	x			
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			-										
Name of Registered Waste Hauler		LNISS		1									
		NJDEP V Hauler ID		Cubic of Was			Name of R	egistered	Landfill				
Freehold Cartage		15939		90		9	Fairless	Landfill					
City, State				222	al Date		City, State			-5.1			
Freehold NJ				100000000000000000000000000000000000000	/2019		Morrisvi	lle, PA					

Signature

Date

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

02/19/2019

Completed by

Dan Baptista

Title

Safety Agent

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) FEB 22 February 15, 2019 Save Ellis Island, Inc. Agencies Notified Type Notification Street Address 31 US Highway 206, Suite 3E П **EPA** Initial DEP Amended City, State, Zip Code M DOL Amendment # Augusta, New Jersey 07822 Emergency (including DOH Name of Contact justification) Telephone Number П DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Recreation Shelter - Federal Property School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Statue of Liberty National Monument 1312 100 +County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Historic Use Name of Monitoring Firm Hired by KNINNESCANNESCAPO IMAX ASCM No. Name of Abatement Contractor (9) Sky Environmental Polmax Corporation Street Address Street Address 140 Boulevard 44 Koster Street City, State, Zip Code City, State, Zip Code Mountain Lakes NJ 07046 Wallington NJ 07057 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Leonid Shereshevsky 973-588-4821 973-809-1122 01361 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor March 1, 2019 March 18, 2019 Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other-Describe: vacant building Scope of Work (Check All That Apply) ≥ 3 sf or ≥ 3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Normally Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e. thermal systems insulation, surfacing, Custodial Staff? (Specify Rem In Facility VAT, or SF or LF) (12)(13)

(13)		, , ,			other miscellaneou	s)		oval)air	Sul	osure
	Yes	No	N/A					<u> </u>		sulate	Ire
roof			х	roo	f flashing		450 sf	x			
exterior elevation			x	win	dow caulk		21 1f	x			
exterior walkway		11.00	х	cei	ling plaster		745 sf	х			
Name of Registered Waste Hauler Century Waste		H	JDEP Wa auler ID N		Cubic Yards of Waste		Registered Landfill S Landfill				
City, State 623 Dowd Ave, Elizabeth				Disposal Date tbd	City, Sta						
Completed by	Title				Signature			Date			_

President

Kielczewski Slawomir

February 15,

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 2 15 Verizon Communications / Job #1902-5442 Check #11047 Agencies Notified Type Notification Street Address **⊠** EPA Assisted ☑ Initial 100 Greenwood Avenue ☑ DOLWD ☐ Amended City, State, Zip Code ☑ DHSS Amendment # Jenkintown, PA 19046 □ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Carol Soukup 609-314-0030 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Verizon Market CO School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) 95 William Street Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Newark County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Essex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **USA Environmental** AbateTech, Inc. Street Address Street Address 8436 Enterprise Ave. 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Philadelphia, PA 19153 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mark Jenkins 215-365-5810 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __3__ / __4__ / 19 3 / 22 / 19 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-___PM/__ City, State, Zip Code Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ≥3 sf or >3 If □ Renovation ≥160 sf or ≥260 lf □ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Location of Normally Description of Asbestos-Containing Material (ACM) Used Solely by Asbestos Containing Material (ACM) Remova Encapsulate Amount TO BE ABATED Maintenance/ nclosure (i.e., thermal systems insulation, Custodial Staff? IN Facility (Specify surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Exterior (West Elevation) Floor 2-10 \boxtimes Vent Caulking 466 LF X Exterior (North Elevation) Floor 2-10 X Vent Caulking 414 LF \boxtimes П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill AbateTech, Inc. Hauler ID No. Waste G.R.O.W.S. Landfill 18750 40 City, State Disposal Date City, State Lumberton, NJ 3/22/19 Tullytown, PA Completed By (Print or Type) Title Signature Gwendolyn Trumbetti **Operations Coordinator** ASR-41

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

MAY 11

State of New Jersey

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) 15 / 2 19 JCP&L/FirstEnergy Company / Job #1902-5441 Check #11050 Agencies Notified Type Notification Street Address ☑ Initial 10 Legion Place- Building A ☑ DOLWD ☐ Amended City, State, Zip Code **⊠** DHSS Amendment #_ Morristown, NJ 07960 □ DCA (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Irving Silverman 978-490-6930 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) JCP&I ☐ School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 914 Main Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age Belmar County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Monouth Substation Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) AbateTech, Inc. Street Address Street Address 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __2__/__19__/__19 2 / 22 / 19 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _____AM-___PM/___PM-__AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 If ☑ Renovation☑ Demolition ☐ Mini-Enclosure ≥160 sf or ≥260 lf ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Amount

Remova Encapsulate Asbestos Containing Material (ACM) Enclosure Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify **Custodial Staff?** IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Exterior Pole X Asbestos risers 16 LF M П П П Name of Registered Waste Hauler **NJDEP** Waste Cubic Yards of Name of Registered Landfill

Waste

Disposal Date

Signature

2/22/19

G.R.O.W.S. Landfill

Tullytown, PA

City, State

Gwen Trumbetti

MAY 11

City, State

AbateTech, Inc.

Lumberton, NJ

Completed By (Print or Type)

Hauler ID No.

Operations Coordinator

Title

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Date of Notification (1)	15 /	19	9		Nam J(ne of Buildir	ng C	Owner/Operator	(2) ny / Job #190	2-54	41 Chec	EB /	048	20	19	
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(NJAC 5:23-8)	justifica		iciuair	ıg		e of Contac				Te	elephone l	Numb	er			
	☐ Cancell	ation			Irv	ing Silve	rma	an			978-490					
					FA	CILITY IN	VFC	DRMATION								
Name of Facility Where A JCP&L Street Address	Abatement is	Taking	g Plac	e (3)					Type of Facility School (K-1 Subchapter	2) 8 (O						
900 Main Street									Other (i.e.,)		te and con	nmerc	ial bu	uildin	gs,	
City (5) Belmar									Square Feet	1	f of Floors		BI	dg. A	ge	
County (6)	Wy - Wall				Cou	nty Code (7	7/(\$7	TATE USE ONLY)	Current Use (P	rior if	heina der	molish	ed)			
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Name of Monitoring Firm	Hired by Bui	Iding C	Owner	(8)	ASCM	No.	Na	ame of Abateme	ent Contractor (9				_		-	-
NA							1	AbateTech, Ir		•						
Street Address							St	reet Address								
								30 Maple Ave	. PO Box 25							
City, State, Zip Code								ty, State, Zip Co Lumberton, N			890	9				
Project Manager for Monit	oring Firm			Tel	ephone	No.		elephone No.		IL	icense No).	-			-
0.00			·					609-265-2107			00529	200				
Start Date (10)		Sched	uled C	omple	etion Da	ate (11)	Na	ame of OSHA M	onitor							
_2 / _19 / .	19	2	/	_2	2_/	19	1	EMSL Analyti	cal							
Occupancy Status During	Abatement (Check	only	one)			Str	reet Address								
☐ Facility Closed/Vacated							2	200 Route 130) North							
Abatement Performed Time of Abatement:								ty, State, Zip Co								
						VIAI.	(Cinnaminson,	, NJ 08077							
Scope of Work (Check all \(\geq \geq 3 \) sf or \(\geq 3 \) If \(\geq \geq 160 \) sf or \(\geq 260 \) If	that apply)		⊠ Re □ De					☐ Mini-Encle ☐ Glovebag		•			,			
			Is	Loca	tion		-	Z4 HOH EXCH	inpica () and ive	11-1-11	abic i loci	Jaure	Δh	tem	ent T	vne
Location of				Norma				Description of								
Asbestos-Containing M <u>TO BE ABAT</u> IN Facility (13)	ED	1)	Ma	d Sole intena todial (12)			, the	Containing Mate ermal systems in surfacing, VAT, ther miscellaneo	nsulation, or		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
•			Yes	No	N/A				(30)						e	
Exterior Pole						Asbesto	s r	isers			16 LF					
			П	П						===				П	П	П
Name of Registered Waste	Hauler				JDEP V	Vaste	Cul	bic Yards of	Name of Regis	tered	Landfill		_	Ц	Ч	
AbateTech, Inc.	-controls-257571			1.77	auler ID	No.	Wa	ste	G.R.O.W.S							
City, State					18750		2 Dis	posal Date	City, State				_			
Lumberton, NJ								/22/19	Tullytown,	PA						
Completed By (Print or Typ			- 1	Signature	, , , , , , , , , , , , , , , , , , , ,	15 TO SE		Date		1	_	_				
Gwen Trumbetti	15	Title Op	erati	ons (Coordi	nator			N			Date	1-1	51	7	
CD 44								1 XV	/ 1			V	72 X	v i	1	

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Date of Notification (1)	15 /	1	9					Owner/Operator	(2) ny / Job #1902	-5441 Check	#1104	9 20	10	to be the second second
Agencies Notified EPA	Type Notif	fication	1		Stre	et Address		ce- Building A			٠٠٠٠ ال	2 20		
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⊠ DHSS	Amend			_		orristown				50 mas d	100	1		
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			17-11-1				- 15 0150	ORMATION						
Name of Facility Where A	batement is	Takin	g Plac	ce (3)		NOILITT II	141	ORMATION	Type of Facility	(4)		-		
JCP&L			-						☐ School (K-12					
Street Address									☐ Subchapter 8	(Other than K-		71.47		
807 Main Street									Other (i.e., pr homes, etc.)	ivate and comr	nerciai t	ullain	gs,	
City (5)									Square Feet	# of Floors	E	Bldg. A	ge	
Belmar									50.000	100 E00 000 - CARDO				
County (6)					Cou	inty Code (7)(S	TATE USE ONLY)	Current Use (Pri	or if being dem	olished)			
Monouth									Substation					
Name of Monitoring Firm	Hired by Bui	ilding (Owner	(8)	ASCN	1 No.	N	lame of Abateme	ent Contractor (9)					
NA								AbateTech, In	1C.					
Street Address							Si	treet Address						
								30 Maple Ave	. PO Box 25					
City, State, Zip Code							1 :	ity, State, Zip Co						
Droinet Manager for Marit				T= :			-	Lumberton, N	IJ 08048					
Project Manager for Monit	oring Firm			Tele	ephone	No.		elephone No.		License No.				
Start Date (10)		Cahad	ulad C	`ammle	tion D	ate (11)	-	609-265-2107		00529				
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Occupancy Status During							St	reet Address						
☐ Facility Closed/Vacated ☐ Abatement Performed (During Ent	ire Per	riod of	Abate	ment			200 Route 130) North					
Time of Abatement:	AM	PN	//	y Hou PM	rs - Des 	AM	100000	ty, State, Zip Co						
Scope of Work (Check all t	hat apply)						'	Cinnaminson	, NJ 08077					
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Asbestos-Containing M TO BE ABAT		n) -	Ma	intena	nce/			Containing Mate		Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility			Cus	todial (12)	Staff?			surfacing, VAT,	or	SF or LF)	Va.	7	sula	sure
(13)		Ì	Yes	No	N/A	1	Ot	ther miscellaneo	us)				ate	1000
Exterior Pole						Asbesto	os r	risers		16 LF				
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Name of Registered Waste	Hauler		ш		JDEP \	Nacto	C	bic Yards of	Name of Registe	and Landell			Ш	Ш
AbateTech, Inc.	naulei			1000	auler II 18750	O No.		aste	G.R.O.W.S.					
City, State								sposal Date	City, State					
Lumberton, NJ							2	2/22/19	Tullytown, F	PA				
Completed By (Print or Type	e)	Title	20.00					Signature	N	1	Date	_		
Gwen Trumbetti		Op	erati	ons (Coordi	inator		I UN	1		2-1	51	7	

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(Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 15 / 19 JCP&L/FirstEnergy Company / Job #1901-5435 Check #10934 Agencies Notified Type Notification Street Address **⊠** EPA ☐ Initial 10 Legion Place- Building A **⊠** DOLWD City, State, Zip Code X DHSS Amendment #1 ☐ DCA Morristown, NJ 07960 ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number □ Cancellation Keith Slansky 973-955-7602 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) NJ DOT School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, Route 71- MP538.53 homes, etc.) City (5) Square Feet # of Floors Bldg. Age Asbury Park, NJ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Monmouth Substation Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **ATC Associates** AbateTech, Inc. Street Address Street Address 3 Terri Lane 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Burlington, NJ 08016 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone-No. Telephone No. License No. John Lutz 609-571-7522 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __2 / __7 / __19 2 / 22 / 19 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-___AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure $\boxtimes \ge 3$ sf or ≥ 3 If □ Renovation ≥160 sf or ≥260 lf ☐ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Normally Abatement Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Repair Asbestos Containing Material (ACM) Encapsulate Enclosure Amount TO BE ABATED Maintenance/ (i.e., thermal systems insulation, Custodial Staff? (Specify IN Facility surfacing, VAT, or SF or LF) (12)other miscellaneous) Yes No N/A Exterior Pole #JC1037NT П X Asbestos risers 12 LF X П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill AbateTech, Inc. Hauler ID No. Waste G.R.O.W.S. Landfill 18750 2 City, State Disposal Date City, State Lumberton, NJ 2/2219 Tullytown, PA Completed By (Print or Type) Signature Gwen Trumbetti Operations Coordinator

NOCK			NOT	State of New Jersey IFICATION OF ASBESTOS ABATEM (Pursuant to NJAC 8:60 and 5:16)	ENT	E	CFI
ate of Notification (1)	15	/_	19	Name of Building Owner/Operator (2) JCP&L/FirstEnergy Company /	Job #1901-5	435 CI	EB 2 2

Date of Notification (1)				N	ame of Build	ing Owner/Operator	(2)					
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☐ Car	cellatio	n		F	Ceith Slans	sky		973-955				
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Name of Facility Where Abateme	nt is Tak	king Pl	ace (3)			W OKWATION	Type of Facility (4)				
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Street Address							☐ Subchapter 8	(Other than I	K-12)			
Route 71- MP539.16							Other (i.e., pri	ivate and con	nmercia	build	ings,	
City (5)							Square Feet	# of Floors		Dida	Λ	
Asbury Park, NJ							oqualo i cct	# 01 1 10015		ыug.	Age	
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Monmouth							Substation	n ii being der	nonsnec	1)		
Name of Monitoring Firm Hired by	Building	Owne	er (8)	ASC	M No.	Name of Abateme						
ATC Associates						AbateTech, I						
Street Address						Street Address						
3 Terri Lane						30 Maple Ave	PO Box 25					
City, State, Zip Code						City, State, Zip Co						
Burlington, NJ 08016				55055		Lumberton, N						
Project Manager for Monitoring Firm	n		Te	lephone	No.	Telephone No.		License No.				
John Lutz	- 3				1-7522	609-265-2107		00529				
Start Date (10)	Sche				ate (11)	Name of OSHA M	onitor					-
/ /19	1 -			2_/	19	EMSL Analyti	cal					
Occupancy Status During Abateme	Chec	ck only	one)			Street Address	\ \ \					
Facility Closed/Vacated During E	ntire-Pe	eriod-e	f-Abate	ement		200 Route 130	North					
Abatement Performed Outside on Time of Abatement:AM	Norma	al Facil	ity Hou	rs - De		City, State, Zip Coo	de					
			FIV		_AM	Cinnaminson,	NJ 08077					
Scope of Work (Check all that apply)						The second secon			-74		
⊠ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		⊠ R □ D	enovat emoliti	ion on			inment with Negati sure Procedure ipted (*) and Non-F		A. Constitu			
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(13)		V	(12)	T	-	other miscellaneou	is)	01 01 11)	=		ulati	Ire
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AbateTech, Inc.				auler ID	No. V	Vaste	G.R.O.W.S. La					
ty, State		- 10		18750		2 Pisposal Date	City, State					
Lumberton, NJ					ا	2/22/19	Tullytown, PA					
ompleted By (Print or Type)	Title					Signature	^ ^ /		ate		2000	
Gwen Trumbetti	O	oerati	ons C	oordi	nator	1 Chr.	///		2.	15.	19	Š

NOCK		N	OTIF	ICAT (Purs	ION OF A	ASBESTOS AB	ATEMENT :16)					
Date of Notification (1)	5 /	19		N	ame of Build	ding Owner/OperatorstEnergy Comp	or (2)	E	· [5	1	7	
Agencies Notified Ty	pe Notification	nn					ally 7 300 #190	1-5435 Ch	eck #1	1016		İ
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	Amended					Place- Building	Α	r r	D 4	2 20	13	100
	Amendment				ty, State, Zi							- 4
□ DCA (NJAC 5:23-8)	Emergency	(inclu	ding	_		n, NJ 07960		Estant.				
	justification) Cancellation			1	ime of Cont	37.330.		Telephone	Number		255	
	Oariociiation				Keith Slan			973-955	5-7602			
Name of Eacility Whore Abote				I	FACILITY	INFORMATION	production of					
Name of Facility Where Abate NJ DOT	ement is Taki	ng Pla	ace (3))			Type of Facility	(4)				
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Route 71- MP 568.66							Other (i.e., p homes, etc.)	rivate and co	mmercia	build	ngs,	
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County (6)				Co	ounty Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being de	molished	1)		
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Name of Monitoring Firm Hired	by Building	Owne	r (8)	ASC	M No.	Name of Abatem	ent Contractor (9)					
ATC Associates						AbateTech, I						
Street Address						Street Address						
3 Terri Lane						30 Maple Ave	e. PO Box 25					
City, State, Zip Code						City, State, Zip C						
Burlington, NJ 08016				and the second second		Lumberton, I						
Project Manager for Monitoring	Firm		Te	lephon	e No.	Telephone No.	10 00040	License No				
John Lutz	/		1	509-57	1-7522	609-265-2107		00529	J.			
Start Date (10)	/ Sched	duled	Compl	letion D	ate (11)	Name of OSHA M		00323				
_2 / _7 / _19	- \ _:	2	/ _2	2_ /	19	EMSL Analyti						
Occupancy Status During Abate	ment (Check	c only	one)			Street Address						
☐ Facility Closed/Vacated During	ng Entire Per	riod of	Ahate	ement		200 Route 13	n North					
☐ Abatement Performed Outsid	le of Normal	Facili	ty Hor	irs - De	scribe	City, State, Zip Co						
Time of Abatement:A	.MPN	Λ/	PM	l	_AM	Cinnaminson						
Scope of Work (Check all that as	oply)					Ommaninison	, NJ 08077					
≥3 sf or ≥3 If	10. 5.79	_				☐ Full Conta	ainment with Nega	tive Pressure				
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			monu	OII		☐ Glovebag	Procedure npted (*) and Non-	Erioble Deser				
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Location of			Norma			Description of				atem	_	ype
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IN Facility		Cus	todial	Staff?	(i.e.	, thermal systems in surfacing, VAT, of		(Specify	Vou	air	aps	Enclosure
(13)	-	NA-55	(12)	T	-	other miscellaneo	us)	SF or LF)	<u>a</u>		Encapsulate	ure
		Yes	No	N/A							6	
Exterior Pole #JC1568				\boxtimes	Asbesto	s risers		9 LF				
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Name of Decition										П	П	П
Name of Registered Waste Haule	r		1 839	JDEP V		Cubic Yards of	Name of Register	ed Landfill			-	
AbateTech, Inc.			110000	auler ID 18750		Waste 2	G.R.O.W.S. L					
City, State				10100			City, State					
Lumberton, NJ						2/22/19	Tullytown, PA	Δ				
Completed By (Print or Type)	Title					Signature	, cowii, F/					
Gwen Trumbetti	Ope	eratio	ons C	oordii	nator	Oignature)	1	[Date	- , ,	0	
SB-41							VA		2.13), [, c		

ASB-**MAY 11**

NOCK			N				AC 8:60 and 5			1	and the same of		
Date of Notification (1)					Na	me of Buildi	ng Owner/Operato	or (2)	FE	B 2	2	010	-
	12	/ _1	19					any / Job #1902	2-5438 Check	#	2 0	UIS	
Agencies Notified	Type Not		n		Str	eet Address			i's ant.	-	119	9 6	
⊠ EPA	☐ Initial				1	0 Legion F	Place- Building	Α					
☑ DOLWD ☑ DHSS		ided dment :	ш			y, State, Zip				-		-	
	☐ Emerg			ing.	N	/lorristown	, NJ 07960						
(NJAC 5:23-8)		cation)	iiiciuu	ing		me of Contac			Telephone Nu	ımher			
	☐ Cance	ellation			Ir	ving Silve	rman		978-490-6				
					F	ACILITY IN	NFORMATION		0.0 100 0.	-			
Name of Facility Where Ab	atement i	is Takir	ng Pla	ce (3)				Type of Facility	(4)				
JCP&L								School (K-12					
Street Address								☐ Subchapter 8	Other than K-	12)			
79 A Newark Pompto	n Turnp	oike						Other (i.e., property) homes, etc.)	rivate and comm	nercial	buildi	ngs,	
City (5)							**	Square Feet	# of Floors	- 1	Bldg.	Ane	
Riverdale, NJ								- -	" 01110013	- 1	Diag.	ige	
County (6)					Co	unty Code (7)(STATE USE ONLY	Current Use (Pri	or if being demo	lished			
Morris							,	Substation	or in boning donne	nonca,			
Name of Monitoring Firm H			Owne	r (8)	ASC	И No.	Name of Abaten	nent Contractor (9)			-		
1 Source Safety & He	alth, Inc	: .					AbateTech,						
Street Address				3.72.4			Street Address			-			
140 S. Village Ave. St	uite 130						30 Maple Av	e. PO Box 25					
City, State, Zip Code							City, State, Zip C						
Exton, PA 19341							Lumberton,						
Project Manager for Monitor	ing Firm			Tel	ephone	No.	Telephone No.		License No.				
Brian Hovendon				6	10-52	4-5525	609-265-210	7	00529				
Start Date (10)	1	Sched	uled (Comple	etion D	ate (11)	Name of OSHA I	Monitor	1			-	
_2 / _12 / _	19		2	2	8_ /	19	EMSL Analy	tical					
Occupancy Status During Al	patement	(Check	only	one)			Street Address						
☐ Facility Closed/Vacated [During Ent	tire Per	iod of	Abate	ment		200 Route 13	30 North					
Abatement Performed Ou	utside of N	Normal	Facilit	y Hou	rs - De	scribe	City, State, Zip C						
Time of Abatement:		PN	///	PM		_AM	Cinnaminsor						
Scope of Work (Check all that	at apply)												70.50
≥3 sf or ≥3 If			M Pa	novat	ion		Full Con	tainment with Nega	tive Pressure				
☐ ≥160 sf or ≥260 lf				molitic			☐ Mini-End	closure g Procedure					
						_	Non-Exe	mpted (*) and Non-	Friable Procedu	ıre			
				Local Vorma						Al	atem	ent T	уре
Location of Asbestos-Containing Mate	erial (ACN	Δ)		d Sole		Achoot	Description of				-	_	
TO BE ABATE	2	",		intena			tos Containing Ma thermal systems		Amount (Specify	Removal	Repair	nca	nclo
IN Facility (13)			Cus	todial : (12)	Staff?	,,,,,	surfacing, VAT,	or	SF or LF)	oval	=	Encapsulate	Enclosure
(13)		F	Yes	No	N/A	1	other miscellane	ous)				late	Ø
Exterior					N/A	Transite				_	_		_
				_		Transite			24 LF				
											П	П	П
Name of Registered Waste H	auler			20000	JDEP V		Cubic Yards of	Name of Register	red Landfill		_	_	
AbateTech, Inc.				/ H100A23	auler ID 18750	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Vaste 2	G.R.O.W.S. L					
City, State				-	.0700		Disposal Date	City, State					
Lumberton, NJ							2/28/19	Tullytown, P.	Α				
Completed By (Print or Type)		Title					Signature	1	Da	te		-	-
Gwen Trumbetti		Op	eratio	ons C	oordi	nator	()	1110	1	-17	_10	7	

ASB-41 MAY 11

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

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Date of Notification (1)		1.20				ing Owner/Operator		FF	B 2	2 2	niq	
	12 / _	19		P	SE&G /	Job i	# 1812-5426 CI	heck#	Б -	2 -	.VIJ	
Agencies Notified	Type Notifica	ation		Stre	eet Address			· ·	04 32	-	* 3	45
⊠ EPA	☐ Initial			4	000 Hadle	y Road		A	1			1
☑ DOLWD ☑ DHSS	Amended			City	, State, Zip	Code		***			A1.	
□ DCA	Amendme		lina	S	outh Plair	nfield, NJ						
(NJAC 5:23-8)	justification		illig	-	ne of Conta	10-07-000009-000000000000000000000000000		Telephone Nu	mher	_		
334.00.3314.00.3014.004.004.005.334.00	☐ Cancellati			J	ohn Cifelli	i		732-547-6				
					100000	NFORMATION		132-341-0	230			
Name of Facility Where A		aking Pla	ice (3)				Type of Facility	(4)				
PSE&G- Paterson G							School (K-1					
Street Address							Subchapter	8 (Other than K-	12)			
14 Broadway								private and comm	ercial	buildir	igs,	
City (5)						Constant of the second	homes, etc.	5)	- 1.		•	
Paterson, NJ							Square Feet	# of Floors	1	Bldg.	Age	
County (6)				Co	inti Cada /	7\/CTATE						
Passaic				Col	unity Code (/	7)(STATE USE ONLY)		rior if being demo	lished)			
Name of Monitoring Firm F	dired by Buildin	na Ouma	- (0)	1000	4.51	1	Substation					
Health & Safety Serv		ng Owne	r (8)	ASCN	/I No.	Name of Abateme)				
Street Address	ices					AbateTech, II	nc.					
PO Box 365						Street Address						
City, State, Zip Code						30 Maple Ave						
P 11.0						City, State, Zip Co						
Berlin, NJ 08009			_	G	-	Lumberton, N	IJ 08048					
Project Manager for Monito	oring Firm			ephone		Telephone No.		License No.	1000			
Jim Proctor					4-8850	609-265-2107		00529				
Start Date (10)		heduled				Name of OSHA M						
1/28/		3		9_/	19	EMSL Analyti	cal					
Occupancy Status During A						Street Address			77.55			
☐ Facility Closed/Vacated	During Entire	Period o	Abate	ment		200 Route 130	North					
Abatement Performed C	utside of Norn	nal Facili	ty Hou	rs - Des	- 10 10 10 10 10 10 10 10 10 10 10 10 10	City, State, Zip Co	de					
Time of Abatement:	AIVI	_PM/	PM		_AM	Cinnaminson,						
Scope of Work (Check all th	nat apply)									_		
≥3 sf or ≥3 lf						☐ Full Conta	ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf		-	enovat emolitic			☐ Mini-Enclo						
							npted (*) and Nor	n-Friable Procedu	ire			
		l:	s Locat	ion						atem	ent T	vne
Location of			Norma			Description of				1		
Asbestos-Containing Ma TO BE ABATE		150,200	ed Sole aintena			tos Containing Mate		Amount	(em	Repair	inc	inc
IN Facility	<u>.u</u>	3 Land 1985	todial		(I.e.,	thermal systems in surfacing, VAT, of		(Specify SF or LF)	Removal	air	aps	Enclosure
(13)			(12)	_	1	other miscellaneo		or or Er)	=		Encapsulate	re
		Yes	No	N/A							е	
Exterior				\boxtimes	White Ca	aulk		450 SF				
nterior					Black Wi	indow Caulk		200 LF				
Exterior				\boxtimes	Black Ta	r & Paper Roof I	_ayers	2,000 SF				
Exterior				\boxtimes	Vapor ba	rrier under roof	layers	2,000 SF	×			
Name of Registered Waste H			10000	JDEP V		Cubic Yards of	Name of Registe	ered Landfill				
Environmental Transp	ort Group, I	NC.		auler ID 00069		Waste 40	Grows- Fair	less Landfille				
City, State						Disposal Date	City, State					
Flanders, NJ					1	3/29/19	Morrisville,	PA 19067				
Completed By (Print or Type)) Tit	tle				Signature		Da	te		-	\dashv
Gwendolyn Trumbetti		Operati	ons C	oordi	nator		ANK)-1	7	9	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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Date of Notification (1)	12 /	19)		Nam	e of Buildin	g Owner/Operator tEnergy Compa	r (2) any / Job #190	2-5438 Check	2 2	201	9	
	Type Notific	cation				et Address			, junt.			4	150
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	Amende Am				City,	State, Zip	Code					4/1	- 1
□ DHSS	Amendm Emerger			-	Mo	orristown	NJ 07960						
(NJAC 5:23-8)	justificat		Guuii	9	Name	e of Contac	:t		Telephone Nur	nber			
	Cancella	tion			Irv	ing Silver	rman		978-490-69	30			
					FA	CILITY IN	IFORMATION						
Name of Facility Where Aba	atement is	Taking	Plac	e (3)	7.7.0			Type of Facility	(4)				
JCP&L								School (K-1					
Street Address								─ Subchapter	8 (Other than K-1				
79 A Newark Pomptor	n Turnpik	(e						homes, etc.	orivate and comme	ercial bu	ııldıng	s,	
City (5)								Square Feet	# of Floors	BI	dg. Ag	ne .	
Riverdale, NJ										-	-3	, -	
County (6)					Cou	ntv Code (7)(STATE USE ONLY)	Current Use (P	l rior if being demol	ished)			
Morris							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Substation	855	,			
Name of Monitoring Firm Hir	red by Build	dina C	wner	(8)	ASCM	No.	Name of Abatem	nent Contractor (9					
1 Source Safety & Hea		9					AbateTech,		,				
Street Address			VAE		-		Street Address						
140 S. Village Ave. Su	ite 130						30 Maple Av	e. PO Box 25					
City, State, Zip Code							City, State, Zip C						
Exton, PA 19341							Lumberton,	NJ 08048					
Project Manager for Monitori	ing Firm			Tele	phone	No.	Telephone No.		License No.				
Brian Hovendon	-			6	10-524	-5525	609/265-210	7	00529				
Start Date (10)	5	Sched	uled C	omple	tion Da	ite (11)	Name of OSHA	Monitor			1030		
_2 / _12 /	19		2 /	14	1_/	19	EMSL Analy	tical					
Occupancy Status During Ab	patemént (0	Check	only	one)_			Street Address						
☐ Facility Closed/Vacated D	During Entir	e Per	iod of	Abate	ment		200 Route 13	30 North					
Abatement Performed Ou							City, State, Zip C	ode		11200			G = 77
Time of Abatement:	AM	PN	1/	PM-	-	AM	Cinnaminso	n, NJ 08077					
Scope of Work (Check all tha	at apply)							es as Osso Mas Asas	42 453				
⊠ >3 sf or >3 lf			⊠ Re	novati	on		☐ Full Con	ntainment with Neg	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			☐ De					g Procedure					
						,	⊠ Non-Exe	empted (*) and No	n-Friable Procedu	ıre			
				Locat Norma						Aba	ateme	ent T	/pe
Location of Asbestos-Containing Mat	erial (ACM	,		d Sole		Ashes	Description of stos Containing Ma		Amount	Re	Re	E .	En
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City, State							Disposal Date	City, State		0.00			
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Completed By (Print or Type)		Title			-		Signature	^ A/	D	ate 1	~ 1		
Gwen Trumbetti		OF	erati	ons (Coordi	inator		M/N		7	H	14	1

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Date of Notification (1)	1 /	19	9		0794		ng Owner/Opera		(2) pital / Job #19	02-5437F@ho	2k#110	240		
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Ш	Cancel	lation			Kı	risten Bel	l			732-937-8	8701			
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Name of Facility Where Abate			g Plac	e (3)					Type of Facility	(4)				
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Street Address									Subchapter 8					
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Project Manager for Monitoring	ı ⊢ırm			1 233	ephone		Telephone No.			License No.				
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Scope of Work (Check all that a	apply)													
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Completed By (Print or Type)		Title					Signature	_	N		Date		10	
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☑ DHSS □ DCA	Amendment Emergency			•	n, NJ 07960										
(NJAC 5:23-8)	justification)		-	e of Conta	3/		Telephone Nu	mber							
	☐ Cancellation		Irv	ing Silve	rman		978-490-6								
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Name of Monitoring Firm I 1 Source Safety & H		Owner (8)	ASCM	No.	Name of Abatement Contractor (9)										
Street Address	eaiui, inc.				AbateTech, Inc.										
140 S. Village Ave. S	Suite 130				Street Address										
City, State, Zip Code	raite 150				30 Maple Ave. PO Box 25										
Exton, PA 19341					City, State, Zip Code Lumberton, NJ 08048										
Project Manager for Monito	oring Firm	Tele	phone	No	Telephone No.	13 06046	Lianna Na								
Brian Hovendon				-5525	200 007 0407										
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JU** 1							0	-60								

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 2 19 19 Our Lady of Fatima / Job #1902-2408 Chk. #5284 Agencies Notified Type Notification Street Address ☐ EPA 32 Exchange Place **⊠** DOLWD ☐ Amended City, State, Zip Code ☑ DHSS Amendment # Passaic, NJ 07055 ☐ Emergency (including □ DCA (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Father Rolands Uribe 973-668-2180 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Our Lady of Fatima School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 95 Park Place homes, etc.) City (5) Square Feet # of Floors Bldg. Age Passaic unknown 2700 SF 89 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Passaic Church Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Hillmann Environmental Asbestos and Mold Services, Corp. Street Address Street Address 1600 Route 22 East 3859 Sylon Boulevard City, State, Zip Code City, State, Zip Code Union, NJ 07083 Hainesport, NJ 08036 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mike Nehlsen 609-702-0400 00862 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __2__ / __28 / 19 3 / 1 / 19 EMSL Analytical, Inc. Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 200 U.S. Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-___AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure $\boxtimes \ge 3$ sf or ≥ 3 If □ Renovation ☐ Mini-Enclosure ≥160 sf or >260 lf □ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Repair Remova Encapsulate Asbestos Containing Material (ACM) Amount TO BE ABATED Maintenance/ (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Basement П \boxtimes Pipe Insulation 80 LF X П П П \boxtimes П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Waste Management **Grand Central** 17273 5 City, State Disposal Date City, State Lafayette, NJ 3/1/2019 Penn Argyle, PA Completed By (Print or Type) Title Sighature Date Kimberly A. Trumbetti Office Coordinator 2-19-19

Check # 25794

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Date of Notification (1)	9				g Owner/				1 32	E P	G	N	7	3 94	
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Name of Facility Where Abatement is Ta Residental	king Place	(3)	Y				Туре	of Facility	(4)						
Street Address								School (K-	12)		4.00				
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Name of Monitoring Firm Hired by Buildin MECS)	ASC	И No.				tement Co nvironm								
Street Address						Addres		entara	services	s, Inc.					
PO Box 341						30x 32	-								
City, State, Zip Code Chesterfield, N.					A TOTAL PROPERTY		p Code	24							
Project Manager for Monitoring Firm		Telepho	no No			and the same	NJ 0850	J1							
Bill Weisgarber			98-407	0	100000000000000000000000000000000000000	none No 259-9			License 00493	No.					
Start Date (10)	mpletion)			A Monitor				= 11000					
3/1/2019 Occupancy Status During Abatement (Ch		3/8/2019	9		MEC										
Facility Closed/Vacated During Entir	3.500	3553	mont				Addres 30x 34								
Abatement Performed Outside of No	ormal Facilit	y Hour	'S					p Code							
Other – Describe: 8 am to 4 pm			Chesterfield, NJ 085						3515						
Scope of Work (Check All That Apply)	_					_	7								
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City, State				Dispos	al Date		City, Stat)						
Allentown, NJ					3/8	/2019	/	Morrisv	ille, P	A					
Completed by Mahlon E. Stevens	Title Proie	ct Ma	anager		S	ignature	Mr	11/	327		ate 2/20	/2019	a		

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		L Cancellation			The School of the Lates	Barbara Siebert 9 FACILITY INFORMATION															
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Street Ad	dress								E	Subchapte Other (i.e. etc.)				build	lings,	home	es,				
City (5)									2500	quare Feet	# 0	f Floors		1555	dg. A						
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Street Ad	dress							Street	Ad	ldress											
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City, State							State, Zip Code dle Brook, NJ 07663														
Project Manager for Monitoring Firm					Telephor	ne No.		Teleph 201-		ne No. 00-3184		License 0130									
Start Date (10) Scheduled Co 2/22/19 2/26/19					pletion l	Date (11)		Name	of	OSHA Monito	r										
Occupano	cy Status Durin	g Abatement (Chec	ne)				Street	Ad	Idress												
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Name of Facility Where Abatement is Taking	Place	(3)	FAC	JILIT INFO	KWATI	N	Type of Fac	cility (4)								
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City (F)							etc.)	(i.e. priv	ate 8	k comi	nerci	al buil	idings,	hom	es,	
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County (6)												1 1 1 1 1	35 +/-	•		
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Project Manager for Monitoring Firm		Telepho	ne No			le Brook, one No.	NJ U/	503	Linna	M						
,		Гетерия	511C 140.			300-3184			Licen 0130		0.					
Start Date (10)			npletion	Date (11)		Name o	of OSHA Mo	nitor								
2/20/19	2/25/1															
Occupancy Status During Abatement (Check						Street A	Address									
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≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demolit	ition Mini-End Gloveba						ontainment with Negative Pressure nclosure pag Procedure xempted (*) and Non-Friable Procedure							
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Location of		Normall	у		Desc	ription (nf						Ту	ре		
Asbestos-Containing Material (ACM) TO BE ABATED		ed Solel intenar			Contai	ning Ma	aterial (ACM))		nount		_		щ	_	
In Facility	Cus	todial S (12)	taff?	1 2	surfacir	ng, VAT				oecify or LF)		Removal	Repair	ıcap	inclo	
(13)	7.00	(/		0	ther mis	scellane	eous)					oval	air	Encapsulate	Enclosure	
	Yes	No	N/A										1	te	LD.	
1st FL		Х			٧	/AT			549	9 SF		X				
2nd Fl		Х			V	/AT			328	8 SF		x				
									-							
Name of Registered Waste Hauler		1000	JDEP W	10000000	Cubic Ya		Name	e of Reg	ister	ed Lar	ndfill					
All Stages Abatement	1000	Hauler ID No. of Waste 036592 5 yd				Gra	nd Ce	ntral	San	itary	Lan	dfill				
City, State Saddle Brook, NJ				Disposal	Date	City,		<u> </u>								
Completed by	Title			1	BD	not	Pen	Argyl,	PA							
Richard Cristofol	Title President					nature	1/	//	-	>	2/1	9/19)			