Check# 2520

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

GAC# 314-12				***************************************			(1) In the second second							
Date of Notification (1)	5/12 //			T V	Name of Building Owner	Operator (2)	and the links							
Februa	ry 17, 2	012			MR. BERAN	HERE								
Agencies Notified		Notification Initial		ation	Street Address 145 KENT ROAD		-52 2 2 2 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1							
☐ EPA		□Amende			City, State, Zip Code									
□ DCA		□Emerge			TENAFLY, NJ 0767	0								
X DOL			cation I		Name of Contact		Telephone Number							
☑ DEP- No Longer REQUI	RED	□ Cance		ctter	GEORGE HALDEM									
⊠ DOH		L Cance	ileu		INC.)		The state of the s							
				FACILITY INF	ORMATION	L40	Control of the state of the sta							
Name of Facility Where Abater	ment is Tal	king Place (3)			Type of Facility (4)		* .							
BERAN RESIDENCE					☐ School (K-12)		\$40 (2000)							
Street Address			-		☐ Subchapter 8 (other than K-12)									
145 KENT AVENUE					☑ Other (i.e. private & commercial buildings, homes, etc.)									
145 KENT AVENUE					Sq. Feet: Unknown	# of Floor	s: 2 Bldg. Age: 60+ years							
<u>City (5)</u>	County (6			Code (7)										
TENAFLY	BEI	RGEN	(State	Use Only)	Current Use (prior if being	g demolished)	: RESIDENCE							
Name of Monitoring Firm Hired	by Bldg. (Owner (8)	ASCM		Name of Contractor (9)									
ENVIROVISION, INC.			0098	3	CREENINGOD ARA	TERRENIT CO	ONELII TANTE INC							
Observat Addresses					GREENWOOD ABA Street Address	I EINIEN I C	UNSULTANTS, INC.							
Street Address 20-21 WARGARAW RC	MD				Street Address									
20-21 WARGARAW RC	AD				268 MAIN STREET									
City State Zin Code		Executive outcomes			City State, ZipCode									
FAIRLAWN, NJ	City, State, Zip Code					BUTLER, NJ 07405								
Project Manager for Monitoring	Firm	Telephone N	Jumber		Telephone Number		License Number							
FRED LARSON	4 1 11111	973-636			TOTOPHOTIC TYAINISE!									
TREB EAROOM		370-000	0140		973-492-0477		00840							
Scheduled Start Date (10)	***	Scheduled (Completio	n Date (11)	Name of OSHA Monitor									
02/28/12		02/29/12												
					ENVIROVISION, INC	C								
Occupancy Status During Ab					Street Address									
☐ Facility Closed/Vacated D	Ouring Enti	re Period of A	Abateme	nt	20-21 WARGARAW	DOAD								
■ Abatement Performed Out	itside of N	ormal Facility	Hours -		City, State, Zip Code									
Describe				- 120 E	Oity, State, Zip Code									
☑Other – Describe: Work			it Durin	g Entire										
Period of Abatement 8:	00 AM -	- 8:00 PM			FAIRLAWN, NJ									
Comment of the second self-second					1									
Source of Work (Check all that	apply					Full Contain	ment with Negative Pressure							
≥ 3 sf or ≥ 3 lf	£			X Renovation	ā	Mini-Enclos								
≥ 3 st of ≥ 3 to ≥ 160 sf or ≥				Demolition	2000	Glovebag I								
<u>⊠</u> ≥ 160 \$1 01 ≥	200			Demoillion	N N	9	ted (*) and Non-Friable Procedure							
Location of Asbestos-Containing	na le La	cation Norma	lly Llsed	Description of As	bestos Containing Material	Amoun								
Material (ACM) in Facility (13)	Sole	ly by Maint./C	ustodial		nal systems insulation, surfac		v SF							
, , , , , , , , , , , , , , , , , , , ,		? (12)		VAT, or other mis		or LF)	Remove Repair Encap Enclose							
	YES	S NO	NA											
KITCHEN	X			VAT		240 S	F 🗵							
	CONTRACTOR OF THE CONTRACTOR O	THE STATE OF THE S												
Name of Reg. Waste Hauler		NJDEP Was		r ID#	Cubic Yards of Waste: 5 CY Name of Registered Landfill									
Newark Carting, Inc.		NJ DEP	# 4509		G.R.O.W.S. North Landfill									
Newark, NJ 04509														
						Disposal Da								
Notes: None						02/29/12	100 New Ford Mill Rd. Morrisville, Pa 19067							
							215-736-1700							
Completed by (Print or Type) Title					Signature		<u>Date</u>							
RAYMOND C. PEDAL	SUMPLY DESCRIPTION	SENIOR P	ROJEC	T		2	February 17, 2012							
		MANAGER		.6	2	1								
			72.		1	00/21	The state of the s							

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Onte of Notification (1)		Mama	of Building O	ипелОрегию	r (2)	DUL	- HU HA	1					
2/16/12		1	15, 5	DANNE	1	MATTA	14			4			
Agencies Notified Type Notif	**		Αφέτοςο	RUEN	7	, -tB	1 7 2012	1	52/1	D ≠	- 0		
D DEP D Ame	nded	City, St	ate. Zip Cod			5	ent.	1=	J VV	1.5			
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ar bow heath	cation) · .		of Combact 'S. MA	T. 41 A	VV,	ANER	Tolephone (Nu	Ulo Cat			100.00		
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lama of Facility Where Abatement	a Tolding Place (3)	1 //	when a holt man	and i lost	Турс	of Facility (()		, T				
HS. HAT	•					School (K-1)	2)						
troot Address			* 1	,	16.	Subchooker	8 (Other than K-1) rivato & commerci	e) of burs	Mirelia	hame	*5		
44 HARVEY	Dal				-20	other (i.e. p							
MIN SOUNT					2	mo Food ? උයට	\$ of Floors		3ldg. A	180 180	>		
County (6)		County	Codo (7)			ont Uso (Pric	or it being demolist	reid)			-		
NOIMU		STATE	USE OILY)	,		< 25	بحانهم حذ						
lame of Monitoring Firm Hared by D	ulding Owner (8)	ASC	M No,	,		otement Con				W. Wall			
					est Removal Inc								
treet Address	1				et Address								
					50 South River St								
Xty, State, Zip Code				1 -			и т о	760	1				
rotect Manager for Monstoring Firm		Telophe	nes No		hono N	nsack	Licante N	ů,	<u>.</u>		•		
roject manager for monstoring him		, mobut	JIAJ 190.	201	-32	9-7444		88					
tart Date (10)	Scheduled C	lemplation	Depa (11)	Morne	MOS	HA Monitor			•		-		
12/20/12	121		12	Ome	ga	Enviro	nmental :	ser	Vic	05			
ocupancy Status During Absternen	(Check Only One)				Addro		G+	7.000					
Facility Closed/Vacated During	Entire Period of Abat	ement	<u> </u>	280		uyler	ot .						
Abertament Parformed Outside Other - Describe: 200-	of Minmal Facility Hot	Lins				2p Code	to 07	₹	076	06			
				Sou	th	nacken	sack ,N.	١.	0/0	UU	-		
cope of Work (Check All That Apply		- / - L					nd sattle file-mather 15	bene de	-				
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723 - 724	in Loa North									po			
Location of Azhesina-Conteining Minister (Al	Lised St	stely by	Achestos	Dosoription Containing I	n of Maleria	(ACM)	Ameunt			Œ	m		
TO BE ABATED	Melnier Gustoffe			हम्ताधी ध्युक्तेदन	n inqui		(Specify GF or LF)	Ren	स्	15.	130		
In Facility (13)	(12			surfacing, V/ Thermiscolia	noorm)		Gr of Lr)	Remova	Rapel	Enerpsules	පිත්තා		
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GARAGE		7	THERMA	l y solat	CON	<u> </u>	A D C	1	-				
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											D: 5400		
Iamo of Registered Waste Hauter		NUDEPV		Cubic Yarda		Name of F	tegistored Landiill				1022		
MLANTIC WAS	TE SELLING	Hauter ID	No. 1	of Whiteho	-1	IESI	- LAND	F1 L					
City, Starts-		din din s		Disposal Date		City Shake	V-1-1018 - 1/2-			-			
Rochaut Paric.	13			2/21/	12	3=TH	CEHEM,	PA	18	QI.	5		
Completed by	Tale			Signatur	0/	TO A STATE OF THE	D=	223					
J. MAIORANC		ator		V	You	عسماد	5	2	116	13			
		The second second							-				

State of New Jersey APPROVED: PAUL HORNER, NJOOH NOTIFICATION OF ASBESTOS ABATEMENT

Ck# 2226 (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)	77	- 1			Owner/Operator (2		and the second of the second	Acres en a			16				
2 / 15 / 12		State of NJ Department of Corrections													
Agencies Notified Type Notification			Street A	ddress				1771							
□ EPA □ Initial			PO E	ox 1140	1		7.11011111111111111111111		į						
☑ DOLWD ☐ Amended		-	City, Sta	ate, Zip Co	ode	111 141		w! !!	E						
☑ DHSS Amendment #_	Victorial Control		Yard	ville, NJ	08620	ej Ui je Be	H X 3 2012								
DCA Emergency (inc. (N.IAC 5:23-8) justification)	cluaing	-	Name o	f Contact			Telephone Numb	er		E CONTRACTOR	-90.15				
(NJAC 5:23-8) justification)			Jose	ph May		Language	. —								
					ORMATION	P.7.4	UKEKTAKE		1		84				
Abstament is Taking	Dlace	(3)	FAC	LITT IIVI	ORMATION	Type of Facility (Control of the Contro		deve						
Name of Facility Where Abatement is Taking	riace	(3)				☐ School (K-12	AND DESCRIPTION OF		ě.						
Garden State Correctional						Subchapter 8	(Other than K-12)		٠						
Street Address						Other (i.e., prediction of the prediction) homes, etc.)	rivate and commerc	ciai buli	aings	,					
Highbridge Rd (off of Rt 130)						Square Feet	# of Floors	Bld	g. Age	Э					
City (5)						100000	2		5+						
Yardville, NJ			Count	· Codo (7)	(STATE USE ONLY)		or if being demolisi	hed)	100,000	_					
County (6)			Count	y Code (7)	(STATE USE UNLT)	Current Ose (i ii	or it being demone.	,							
MERCER					Name of Abateme	ant Contractor (9)					_				
Name of Monitoring Firm Hired by Building (Owner (8	3) <i>F</i>	ASCM N	10.											
Environmental Connection						VIRONMENTA	L, INC.		-		_				
Street Address					Street Address	DOTRET									
120 N Warren Street					1123 BEAVE		-				_				
City, State, Zip Code					City, State, Zip C										
Trenton, NJ 08608			54		BRISTOL, PA	\ 19007	I Liconec No.								
Project Manager for Monitoring Firm		Tele	phone N	10.	Telephone No.		License No.								
James Frisbee		60	9-392-	4200	215-788-6040		00509		_						
Start Date (10) Sched	duled C	omple	tion Dat	e (11)	Name of OSHA N										
2 / 15 / 12	2 /	16	_ / _	12_	BRISTOL EN	VIRONMENTA	L, INC.								
Occupancy Status During Abatement (Chec	k only o	ne)			Street Address										
☐ Facility Closed/Vacated During Entire Pe	eriod of	Abater	ment		1123 BEAVE	R STREET					0.000				
Abatement Performed Outside of Norma	I Facility	/ Hour	s - Des	cribe	City, State, Zip C	ode									
Time of Abatement:AMP	M/ <u>5:00</u>	PM- <u>1:</u>	30AM		BRISTOL, PA	A 19007									
Scope of Work (Check all that apply)	N														
	1222				☐ Full Cor	ntainment with Ne	gative Pressure								
≥3 sf or ≥3 lf	⊠ Re □ De				Mini-En Gloveba	a Procedure									
≥160 sf or ≥260 lf		Honus)II		☐ Non-Ex	empted (*) and No	on-Friable Procedu	re							
	Is	Locat	tion		1			Ab	ateme	ent T	/pe				
Location of		Norma			Description			R	Re	m	п				
Asbestos-Containing Material (ACM)		ed Sole		Asbe	stos Containing M ., thermal systems	aterial (ACM)	Amount (Specify	Remova	Repair	Encapsulate	Enclosure				
TO BE ABATED IN Facility		todial	Staff?	(i.e	surfacing, VA	Γ, or	SF or LF)	<u>a</u>	¬	lus	sure				
(13)		(12)			other miscellan					ate					
	Yes	No	N/A								_				
Vocational Building Classroom				Pipe De	ebris		9 LF								
Vocational Building Classroom				Pipe In	sulation (Patch	& Repair)	15 LF		\boxtimes						
			_					Tn							
Vocational Building Clares				1							Г				
Vocational Bananig Ciaco									П						
				Nonte	Cubic Varde of	Name of Rec	istered Landfill			Ш	_				
Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC.				D No.	Cubic Yards of Waste	G.R.O.W.	istered Landfill S. NORTH LAND								
Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC. City, State			NJDEP 1	D No.	The state of the s	G.R.O.W.		OFILL							
Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL, INC. City, State BRISTOL, PA 19007			NJDEP 1	D No.	Waste	G.R.O.W.	S. NORTH LAND	DFILL	15,						

State of them sersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)		-		-	Name of Buildin	Owner/On	erator (2)	IP no E	Townson			
	1/25/12 gencies Notified Type of Notification				, tame of seman.		Z Site Contractors	Inc.	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	20	03	
Agencies Notified [X] EPA [] DEP	[x] Initi	al Notifi	ication otification		Street Address		ark Avenue	FEB 23	2012	, 1		
[x] DOL	Ame	endment rgency (# (including		City, State, Zip C		wood, New Jersey	08701 ASSESTANCE	To our		المددد	
[x] DOH	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	fication) cellation			Name of Contact Irvin	g Perlsteii	Mark No. of Contract of Contra	Telephone Number	A	7		
				FAC	CILITY INFORI	MATION	Marine S	The same	#XXII - 24 -			
Name of Facility Where A	Abatement is Takin esidence	g Place	(3)				Type of Facility (4	School (k-12)			96	
Street Address	5 Leonard Stree	et					[x]	Subchapter 8 (o Other (i.e., priva homes, etc.)				ldings,
City		Cour	nty (6)		County Code (7) (STATE USE ON	LY)	Square feet 1500 sf	# of Floors	Bldg. Age			
Lakewood		Oce		-			Reside		i)			
Name of Monitoring Firm		g Owner	. (8)		ASCM No.	Name of	Abatement Contractor Guard	or (9) ian Contracting	Inc.			
Street Address						Street A	ddress	Route 9, Unit 61				
City, State, Zip Code				25-30-10		City, Sta	nte, Zip Code	River, New Jers	ev 08	755-1	271	
Project Manager for Monitoring Firm Telephone Number				Number			ne Number 9-9932	License N 00624				
Scheduled Start Date (10) 3/1/12			3/2/12		tion Date (11)	Name of	OSHA Monitor E.M.S	.L. Analytical				
Occupancy Status During [X] Fac	Abatement (Check cility Closed/Vacate			od of Al	batement	Street A		Stelton Road				
	atement Performed ner – Describe	Outside	of Normal F	acility I	Hours	City, Sta	te, Zip Code Piscata	away, New Jerse	ey 088	354		
Scope of Work (Check al	l that apply)					[]		nt with Negative Pro	essure			
	sfor≥3 lf		[]	Renova	100000000	[]	Mini-Enclosure Glovebag Proces		# 8			
[x] ≥16	60 sf or ≥260 lf		[x]	Demol	ition	[x]	Non-Exempted (*) and Non-Friable	Proced	ure		
									Aba	tement	Туре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Is Location Normally used Solely by Maintenance/Custodial Staff (12) YES NO N/A				(i.i	Description Descri	ntaining ACM) systems rfacing, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E	
Exterior			X	8	Asbestos sidi	ng		1500 sf	X			
	e Hauler ontracting, Inc.		NJDEP Waste 20)223	3	ards of Was	T.R.R.F.	ered Landfill				
City, State Toms River.	New Jersev				sal Date 2	City, St Tullvt	ate own, Penansylvani	a				
Toms River, New Jersey 3/5/12 Completed by (Print or Type) Title Nicholas Fernicola Project Manager				Signature	do	Pter	1	Date 1/25	5/2012	2		

Bitto of Now Jercoy HEMEMRER NOTIFICATION OF ASBESTOS ABATEMENT - MAIL IN HARD COPY (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) CUNTRUL & 2 12012 2012 Type Notfication Street Address Agencies Noutlad T initial X EPA **I**CDOLWD ☐ Amended City, State, Zip Code Amondmont # _ DHSS 0800 2 MEFF □ Emergency (including justification) □ DCA staphone Number (NJAC 523-8) B110 ☐ Concellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abstoment is Taking Place (3) School (K-12) Kenned Subchapter 8 (Other than K-12) DE Other (I.e., private and commercial buildings, Street Address homes, etc.) 2201 Bidg. Ago Square Feet # of Floors CIN (5) chevu County Code (7)(STATE USE ONLY) | Current Use (Prior If being demollchoo) County (d) Burlington Name of Abatement Contractor (8) ASCM No Name of Monitoring Firm Hired by Building Owner (8) USA Emouranne Steet Address Street Address 3370 Progress 8436 Enterprise City, State, Zip Codo City, Stale, Zip Code ensalem PA Philad Project Microgor for Monitoring Firm
Wike Panepres Telephone No. Telaphone No. 215-215-2441300 Scheduled Completion Date (11) Start Date (10) 18 , 2012 _1<u>20</u>12013 a Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe
Time of Abatement: 1.0AM-330 PMI__PM-_AM Cily, State, Zip Code Scope of Work (Check all that apply) ☐ Full Cordainment with Negative Fresette ☐ Minh Enclosure ☐ Glovebag Procedure Pa Renovation ☐ ≥3 ef or ≥3 lf ☐ ≥160 sf or ≥260 lf ☐ Demolition Non-Exempted (*) and Non-Friable Procedure Abalement Type le Lecation Normally Used Sololy by Description of Repair Endosure Encapsulate Locallon of Achaetoe Containing Material (ACM) Amount Asbestos-Containing Material (ACM) (i.o., thermal cycloms insulation (Specify SF or LF) Maintenance TO BE ABATED Custodial Staff? surfacing, VAT, or IN Facility (12)other miscellangous) (13) No N/A K B EUSting Crisis New Name of Registered Land III Cubic Yards of Namo of Rogisterod Waste Hauler NJDEP Waste 326 10 Whele USA Emmonuntal Piepoesi Date City, State City. State Sjanzuro Dolo rogram Me Do not use this form for beboalos licensure exempted activities.

MAY 11

Date of Notification (1)			Name o	of Building	Owner/Operator (2	2)						
2 117 1201	2		X	enne	du Hec	elth &	epterns	5		201	2	
Agencies Notified Type Notification			Street	Address	d ·	Λ. Λ	0					
☑ EPA ☐ Initial			2	106	Chape	& aver	rue -		AG.	11.1	W - 1844	
☐ DHSS ☐ Amended Amendment #			City, St	ate, Zip C	ode		- 0	LICE	Ski	1	.24	
□ DCA Emergency (in	cluding		Ch	erre	2- Hell	NJ	080	>'~			**************************************	
(NJAC 5:23-8) , justification)	· · · · · · · · · · · · · · · · · · ·		Name	of Contact	// //		Telephone Nu	mber	17.4.2	_		
☐ Cancellation			(2)	ua	Mill-e	<u>r</u>					L	
		الحرو	FAC	ILITY IN	FORMATION	r						
Name of Facility Where Abatement is Taking	Place	(3)	1)- 11	0	2 /	Type of Facility						
Kennedy Hosp-Cl	ner	ry.	HII	Car	77US	School (K-12	2) 8 (Other than K-1	12)				
Street Address		-					rivate and comm	ercial bu	Iding	s,		
2201 Chapel Our	C W	100	3C			homes, etc.	# of Floors	Blo	lg. Ag			
City (5)					X	Square Feet	# 01 F10015	Bic	ıy. Aç	ic.		
Cherry Hell			Count	Codo (7	(STATE USE ONLY)	Current Hea /Pr	ior if being demo	liched)			-	
County (6) Reurly atom			Court	y Code (r	JUSTATE USE ONET)	Current Ose (i i	ior ii beilig deriic	nisricu)				
Name of Monitoring Firm Hired by Building C	wnor (2)	ASCM N	do.	Name of Abateme	ent Contractor (9)						
	WITEI (٬ ۱٬	NOO!VI I	١٠.	129 4 8	Environmental Mant						
Cruterion Labs Street Address					Street Address	enous invented in inter						
3370 Progress Q	× 4 11	0				nterprise au						
City, State, Zip Code	7000	-	City, State, Zip Code									
	02	א	Ohiladilphia PA 19153									
Project Manager for Monitoring Firm	02		elephone No. Telephone No. License No.									
Mike Panepresso		0.00	15.244.1300 215-365.5810									
	luled C		letion Date (11) Name of OSHA Monitor									
			0 /2012 USA Enveronmental Mant									
Occupancy Status During Abatement (Check			Street Address									
☐ Facility Closed/Vacated During Entire Pe			ement B436 Exterorise Queril									
Abatement Performed Outside of Normal	Facility	y Hour	urs - Describe City State 7 in Code								175-	
Time of Abatement: 1:0 AM-330 PI	ν/	PM-	AM Phila PA 19153									
Scope of Work (Check all that apply)						1-11111111	thus Deserves					
≥3 sf or ≥3 lf	.⊠ Re	novati	on		☐ Full Con	tainment with Ne closure	gative Pressure					
□ ≥160 sf or ≥260 lf		molitic			☐ Gloveba	g Procedure		Sections:				
					₩ Non-Exe	empted (*) and No	on-Friable Proce			4 T.		
1	100	Locat Vorma			Description of	s.f			atem		1	
Location of Asbestos-Containing Material (ACM)	Use	d Sole	ly by	Asbe	stos Containing Ma		Amount	Remova	Repair	Enc	Enclosure	
TO BE ABATED		intena todial s		(i.e	 thermal systems surfacing, VAT 		(Specify SF or LF)	lova	air	apsı	uso	
IN Facility (13)		(12)			other miscellane		Si di Li y	-		Encapsulate	Е	
	Yes	No	N/A									
EUSTING Crisis New			2	Ma	stic		112	团				
					3							
				500			-		П			
] [-			-	1				
		Щ.		Vacto	Cubic Vords of	Name of Deal	stered Landfill		Ш	Ц		
Name of Registered Waste Hauler		Н	NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste				11.	11				
USA Emmonmental			326			There	va La	ndfi	1 (
City, State				Disposal Date	City, State	L .	211					
thula PA					Ways	uspery.	OTT					
Completed By (Print or Type)	-0.0000			Signature	-11	9	Date /		/			
Dilip Kumar Pr	un	Mar	C	(VIII)	& Xum	en	2/1	1/	20,	12		
ASB-41	T				tos licensure exemi	/			1			

Check# 3572

Date of Notification (1)			1	Vame of	Building C	wner/Op				777	-v		_	1		
2-14-12			Jakeu	p Akdem	iir	HIJ	fr				(1)					
Agencies Notified	Type Notification		- 1	Street A 323 Vi	ddress vian Cou	ırt		£7	- 6							
DEP X DOL	Initial Amended Amendment #				ite, Zip Coo		1			200		3				
☑ DOH □ DCA	Emergency (ir justification) Cancellation	ncluding	1	Name of	Contact p Akdem	j	6.	ASEE	STOS COM LICEPSINO		ephone	Nuṃb	er			
П всх	Caricenation				LITY INFO		N.	THE REPORT OF THE PARTY.	21001.3114	7 1	and the second	-	-	+		-
Name of Facility Where	Abatement is Taking	Place (3)		1 701	LITT IN O	156		Type o	f Facility (4)		and the st			-	
Residential Proper	ty							П ѕ	chool (K-12	2)	14					
Street Address				COLUMN TO THE REAL PROPERTY.		50.5%		St	ubchapter 8	(Oth						
323 Vivian Court									ther (i.e. pr c.)	ivate	& comme	ercial	build	lings,	nome	es,
City (5)		11				-310		Square		# 0	f Floors			ldg. A	ge	
Paramus								2,000	l'	2			5	+ 0		
County (6)					Code (7)			Current	t Use (Prio	r if be	ng demo	olishe	d)			
Bergen			(960	JSE ONLY)	3 1 1000										
Name of Monitoring Firm	n Hired by Building O	wner (8)		ASCN	l No.			e of Abatement Contractor (9) dar Contracting LLC								
n/a				n/a				et Address								
Street Address																
n/a					-	_		Troy State, Zip Code								
City, State, Zip Code n/a							Linco	oln Par	k, NJ 07	035						
Project Manager for Monitoring Firm n/a				Γelepho n/a	ne No.		1 100000	none No. 706-79			Licens 0108					
Start Date (10) 2/15/12		Scheduled 2/18/12	Com	Completion Date (11) Name n/a				of OSHA	A Monitor				-11.52			
Occupancy Status Durin	ng Abatement (Check	Only One)		Stree											-	
	cated During Entire P		atem	tement n/a												
Abatement Perforn	ned Outside of Norma	al Facility H	ours	OIIL			City, S	State, Zip	Code							
X Other – Describe:						-	n/a									
Scope of Work (Check A	All That Apply)	ad at				***		200								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat noliti				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
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12 1		100000000000000000000000000000000000000	cation mall												ре	
Locatio Asbestos-Containing		Used 8	Solel	y by	Asbest	Des os Conta	cription aining N		ACM)	A	mount				ш	
TO BE AE	BATED	Maint Custod				thermal s	system	s insulati		(Specify		Re	R	Encapsulate	Enclosure
In Fact (13)		\$25,400 miles (1.00)	12)			other m	ing, VA iscellar			51	or LF)		Remova	Repair	psu	losu
(.0)	,	Vac	No	N/A									<u>a</u>		ate	re
Property To Be Dis	Property To Be Disposed as ACM				2roperty	/ To Be	Disp	osed a	s ACIV		102	_				
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Name of Registered Wa	aste Hauler		TN	JDEP W	/aste	Cubic \	/ards		Name of F	Registe	ered Lan	dfill	-			
Rovic Transport				auler ID 0785	No.	of Was	te		ISEI Lai	SAMANAMA						
City, State Wayne, NJ						Disposa	al Date	ate City, State Bethlehem, PA								
Completed by		Title	11122			Si	gnature	e /		7.1	,]	Date		-		
Lillie Lazarevich	Secret	1.7 .00														

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

CK 3374

the not use this form for asbestos licensure exempted activities.

Date of Notification (1)	-100 - 110 lb .	N		Building Owner/Operato			Trif	5	(ri	1			
2/16/12				ILLAWN IN	SUSTRUES				111	1:			
Agencies Notified Type Notification		1 -	treet A			223			Ш				
□ EPA ☑ Initial	•	L	20-	21 WAGARAW	ras -	-44 4 5 2	17.2	- 1:	111	- 1			
□ DEP □ Amended				te, Zip Code	1			1 400	1				
DOL Amendment:				ZLAUN. NJ.	07410	La company and the second				4			
DOH justification)		100		f Contact		Telephone Numb	per						
□ DCA □ Cancellation		1	R. F	MALONE	+	1			1	-			
			FACI	LITY INFORMATION	No. 1			7		- 1			
Name of Facility Where Abatement is Taking	•		10		Type of Facility (4				Distant.	2 - 1 2 - 2			
Street Address					Subchapter	8 (Other than K-12)	الدائد رحا		h				
20-21 WAGARAW 6	2				etc.)	ivate & commercial	Dulla	ıı ıgs,	HOHIE	۵,			
City (5)					Square Feet	# of Floors		dg. A					
2007, W. W.					80,000	2 .		95	YR	5			
County (6)		T	County	Code (7)	Current Use (Prio	r if being demolishe							
BERCEN				USE ONLY)	WW	¥6							
Name of Monitoring Firm Hired by Building	Numar (8)		ASCI	4 No Name	e of Abatement Con		A)						
Name of Monitoring First Filed by Building	JWITET (O)		700		st Removal								
				The second secon	t Address								
Street Address				0000	50 South River St								
	, State, Zip Code				State, Zip Code								
City, State, Zip Code				ackensack ,N.J. 07601									
					ackensack	, N.J. U/	60.	<u></u>	_				
Project Manager for Monitoring Firm		Telepho	201	ohone No. L – 329 – 7444					•				
Start Date (10)	Schedule	d Com	pletion	Date (11) Name	e of OSHA Monitor	. 1 0		•					
2/29/12	3/9	7/12	Omega Environmental Service										
Occupancy Status During Abatement (Chec	k Only On	e)			et Address								
			ent	280) Huyler	St .							
Abatement Performed Outside of Normal	nal Facility	Hours	Cit	City,	State, Zip Code								
Other - Describe: 34M TO (274			Son	ith Hacken	sack .N.J	. 1	076	06				
Scope of Work (Check All That Apply)													
		enovat	lian.		☐ Full Containme	ent with Negative Pr	essu	ne.					
≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	1000	enovai emoliti	7 Chic. C.		Mini-Enclosure				ै				
					☐ Glovebag Proc	edure			200				
					□ Non-Exempted	(*) and Non-Friable	e Pro						
	Is	Locati	on					-	emení pe	1			
Location of	1	Normall	•	Description			_		i –	Г			
Asbestos-Containing Material (ACM)		d Solei intenar		Asbestos Containing		Amount (Specify	70		멸	l m			
TO BE ABATED In Facility	1	todial S		(i.e. thermal system surfacing, V		SF or LF)	em	Repair	Sap	Enclosure			
(13)		(12)		other miscell	aneous)	322	Remova	1	Encapsulate	SE			
	Yes	No.	N/A						ô	6			
Bao 35			×	THERMAR SPETELIS	+ N टा स्था पर 10 N	2054	×	_	_	-			
BLOC 35	THORMAL SURFACE	NO THUM SUN	40 SF	x									
									-				
			1			Danistani I aniën							
Name of Registered Waste Hauler			JDEP \		Name of	Registered Landfill							
ATLANTIC WASTE SERW	rces	"	225	92 50		LANDFILL							
City, State				Disposal Da	te City, Stat			. 0 -	15				
ROCHELLE PACIL. NJ.	076	62		3/4/1	S BETH	LEHEM, PI			13	-			
Completed by	Title			Signati	no /	Da	te .	,					
J. MAIORANO	Est	cima	tor		سمرضوان	3 1	41	6/1	2				

State of New Jersey - Notification of Asbestos Abatement

25/4

(Pursuant to <u>N.J.A.C</u>. 8:60-7 and 12:120-7)

Date of Notification (1) February 16, 2012					Name of Building Owner/O Michael O'Brien	Opera	tor (2)		IVER				
Agencies Notified		Notification Initi		fication	Street Address 6 West Shore Road	1		23					
x EPA		□Amende	ed Certi	fication	City, State, Zip Code	1		FEB 2	3 2012 11.//				
DCA		⊠ Emerg	iency (including	Bloomingdale, NJ	074	03		aura Light				
x DOL		justific		molacing	Name of Contact	1		lephone I	Vumber				
X DEP					Michael O'Brie	n Í	1 .1.0	repriorie i					
x DOH		□ Cance	ilea			1	i		STORY.				
				FACILITY INF				- managed	Early				
Name of Facility Where Abateme	ent is Takir	ng Place (3)			Type of Facility (4)		A SEC	ettinens in 164	Ores a property				
Residence					School (K-12)								
			110000 X		Subchapter 8 (other than	K-12))		0.40				
Street Address					Other (i.e. private &	comm	ercial buildir	ngs, home	s, etc.)				
6 West Shore Road					Sq. Feet: Unknown								
	ounty (6) Passaic			Code (7) Use Only)	Current Use (prior if being				-				
Name of Monitoring Firm Hired b	w Blda Ov	wper (8)	ASCM	No	Name of Contractor (9)	Sallage Section 2							
EnviroVision Consul			0007	NOTE THE PERSON NAMED IN COLUMN TO T	GREENWOOD ABAT	EME	NT CONS	SULTAN	NTS, INC.				
Street Address			-		Street Address								
20-21 Wagaraw Road, I	Bldg#3	34A			268 MAIN STREET								
City, State, Zip Code					City State, ZipCode								
airlawn, NJ 07410					Butler, NJ 07405								
roject Manager for Monitoring Firm Telephone Number					Telephone Number		Lic	ense Num	nber				
red Larson 973-636-9145					973-492-0477 00840								
Scheduled Start Date (10)		Scheduled 0	Completio	on Date (11)	Name of OSHA Monitor								
February 18, 2012		February	19, 20	012	EMSL inc.								
Occupancy Status During Aba	tement (C	heck only o	ne)		Street Address								
Facility Closed/Vacated	Durina Er	ntire Period	of Abate	ment									
Abatement Performed O	utside of	Normal Fac	ility Hour	rs -	1056 Stelton Road								
Describe Day Shift					City, State, Zip Code								
Other – Describe:		ti .			Piscataway, NJ 088	854							
Source of Work (Check all that a	pply)				L								
					3	x Ful	I Containme	ent with N	legative Pressure				
≥ 3 sf or ≥ 3 lf				Renovation		Mir	ni-Enclosure	•					
□≥ 160 sf or ≥ 260)			Demolition		Glov	ebag Proce	edure					
						Non	-Exempted		on-Friable Procedure				
Location of Asbestos-Containing	Is Loc	ation Norma	lly Used	Description of Asl	bestos Containing Material		Amount	Abate	ement Type				
Material (ACM) in Facility (13)		by Maint./C		(ACM) (i.e. them	nal systems insulation, surfaci	ng,	(Specify SF	Bomo	we Repair Encap Enclose				
	Staff?			VAT, or other mis	scell.)		or LF)	Kento	we Repail Citcap Citcose				
	YES	NO	NA										
Basement			X	Pipe & Fittin	g Insulation		50 LF	X					
				Flue Insulati	ion		5 SF	X					
				Boiler Insula	ation		12 SF	X					
Name of Reg. Waste Hauler		NJDEP Was	ste Haule		Cubic Yards of Waste:		Na	me of Rec	gistered Landfill				
		100 March 100 May 200			5 Meadowfill Landfill								
See Hauler Below # 1 & 2 See Below				:									
Hauler #1) Greenwood Abatement Consultants NJ DEP # 12561 Hauler #2) Newark Carting, Inc. – Newark, NJ 04							ruary 19	,	Route 2, Box 68 Bridgeport, WVA 304-842-2784				
Completed by (Print or Type)					Signature	26	Da						
Marin Graure							F	ebruar	ebruary 16, 2012				

MO#1980782573	- T	Name	of Building	g Owner/Opera	ator (2)				11					
Date of Notification (1	1)		n Dunla		11		:= -1 2 201 <u>2</u>	18.	/					
02/15/2012	Tune Notification		Address	<u> </u>				4	T					
Agency Notified	Type Notification	3 Aller			1	1								
⊠ EPA	⊠ Initial		ate, Zip (Code	T :	A.Sr	ESTOS CONTROL	<u>ķ</u>	A STATE OF THE PERSON NAMED IN		1			
☐ DEP ☑ DOL	Amended Amendment #			IJ 07960	- Carrie	314-7	The Figure	- THE STREET SHADOWS	Mary Miles Control		1			
A DOL	☐ Emergency (including		of Contac		ja sa		Telephone Num	iber		3				
₩ DOH	justification) ☐ Cancellation	Willia	n Dunla	av			1							
DCA				ORMATION							- 1			
	Abstract in Toking Plac				· T	ype of Facility	(4)							
Name of Facility Wh	ere Abatement is Taking Plac	e (0)				School (K-1	2)				1			
Private home						1 Subchapter	8 (Other than K-1 2	2)						
Street Address					2	Other (i.e. p homes, etc.	rivate & commercia	al building	IS,					
3 Allen Drive					5	nomes, etc.	# of Floors	Bldg /	Age					
City (5)						.00010101								
Morristown, NJ 0 County (6)	7960	Count) (STATE US	E C	Current Use (F	Prior if being demol	ished)						
Morris		ASCM No.		Name of Ab	batemer	nt Contractor	(9)		-					
Name of Monitoring	Firm Hired by Building Owne	r(8)		Gr Tech L		С								
and the second second				Street Addr										
Street Address				576 Valley	v Rd #	283								
				City, State.										
City, State, Zip Cod	е			Wayne, N.	J 0747	70		=						
Project Manager for	Monitoring Firm	Telephone No.		Telephone	No.		License No.							
Project Manager 101	Monitoring 1 in			973-638-1	1777		01127				8			
Start Date (10)	Scheduled Co	ompletion Date (11)		Name of O	SHA M	onitor								
	02/26/2012	**************************************		Envirovisi	ion Co	nsultants.I	ne							
02/25/2012	During Abatement (Check onl	y one)		Street Addr	ress									
				20-21 Wa	igaraw	Road, Bld	g .# 34A	4-1						
☑ Facility Closed/V	acated During Entire Period or frmed Outside of Normal Faci	of Abatement lity Hours		City, State,	, Zip Co	ode								
Other - Describe	2:	,		Fair Lawn	n, NJ 0	7410								
Scope of Work (Ch	eck all that apply)			П	E.II C	ontoinment wi	th Negative Pressu	ıre						
		⊠ Re	novation	X	Mini-E	nclosure	iii iiogaara							
≥ 3 sf or >3 lf ≥ 160 sf or >260) If	□ De	molition	H	Glove	bag Procedure	e nd Non-Friable Pro	ocedure						
					Non-E	xempled () a	III Non-I Habie 1 1	-	Aba	item	ent			
		Is Location								Туре				
1	ocation of	Normally Used Solely by		Descri	iption of	f					Î.			
Asbestos-Con	taining Material (ACM)	Maintenance/		estos Containi e., thermal sys			Amount (Specify		Re	nca	Enc			
	BE ABATED	Custodial	(1.	e., ulermar sys			SF or LF		Remova	psu	Enclosure			
	IN Facility (13)	Staff? (12)		other misc	cellaneo	ous)			va	Encapsulate	ure			
	****		1				ì							
		Yes No N/A			1		40 SF		x		+			
Basement		x	Paper	insulation-	auct		40.31		+	11.2				
									+		· k			
		1					-+							
									1	1	!			
Name of Registere	ed Waste Hauler	NJDEP Waste ID No.	Hauler	Cubic Yard Waste	ds of		g stered Landfill							
Gr Tech LLC		0033785		1	Nata	T.R.R.F. I	nc							
City, State			1919	Disposal L	Date	City, State	DA •							
Wayne, NJ 074	70			1	-1	Tullytown.	PA-	Date	<u> </u>					
Completed by	Title			Signature	11 /	1 ./	1	02/15/	2012					
N.Jevtic ASB-41	Owner Do no	ot use this form for	asbestos	licensure ker	mpted a	activities.	nad	02/13/	_012	-				

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Jav.	N/	TIPIC		N OF ACRESTOR ARATEMS	ENT								
	N			N OF ASBESTOS ABATEMI	LLEINZ.	F W FIT	T1 /7 /						
Date of Notification (1)		(Fu		to NJAC 8: 60 and 12: 120-) ame of Building Owner/Opera	itor (2)	EGE	WE	1	11				
0 2 / 1 6 / 1	2		1000	arbara De'Castro		Mark on Marks of the Control of the Control		-//	To America				
Agencies Notified Type of Notification	**			reet Address		FEB 118	gnsn	111					
[X] EPA				0 Schuyler Avenue	ا الحال	1 5.11 4 0	2012	Land	/ [
[] DEP [] Initial			C	ty, State, Zip Code	1 1			1	Disease				
[X] DOL [] Amended Amendment #			K	earny, NJ 07032	i	ASSESTOS CONTI	KOL &	B	Librio data				
[] DOH [] Emergency (inclu	ding		N:	ame of Contact	Ear, Hanney	Telephone	Number		1				
Justification) [] DCA				FF M		and the second		ON APPLICATION AND APPLICATION APPLICATION AND APPLICATION AND APPLICATION APPLICA	and a	3			
[] DCA [] Cancellation				ff Mace	All the same					*			
Name of Facility Where Abatement is Taking Place (3)			FACI	LITY INFORMATION	Type of Facilit	ty (4)							
Residence Street Address						School (K-12) Subchapter 8 (Othe	r than K-1	2)					
					[x]	Other (i.e., private &		33.33					
431 1/2 John Street City (5) County (6)			I Co.	inty Code (7)	Saurana Fast	buildings, homes, etc							
City (3)			10000000	ATE USE ONLY)	Square Feet	# of Floors	1 '	Bldg. Ag	ge				
					Current Use (I	Prior if being demolished	1)						
E. Newark Hudson Name of Monitoring Firm Hired by Building Owner (8)		ASC	M	Name of Abateme	nt Contractor (9)								
		100000			nent Contractor (9)								
Enviro Vision Consultants, Inc.			201-20		g & Environmental Consulting, Inc.								
Street Address				Street Address									
20-21 Wagaraw Road, Bldg. #34A		-		City, State, Zip Co	ode				_				
Fairlawn NJ 07410				Wayne NJ 07470									
Project Manager for Monitoring Firm	Tele	phone	Numb		r	License No.							
Willie Morales		-636-91		973 628-9500	00408								
Scheduled State Date (10) Scheduled 6		Date (Name of OSHA M									
0 3 0 1 / 1 2 0 Month / Day / Year Mon	3 0 th / I) Day	-	Year Enviro Vision Con	sultants, Inc.								
Occupancy Status During Abatement (Check only one)				Street Address									
[X] Facility Closed/Vacated During Entire Pe- of Abatement	riod			20-21 Wagaraw R	oad, Bldg. #34A								
Abatement Performed Outside of Normal	Facility Ho	urs		City, State, Zip Co	ode				- 100				
Other - Describe:				Fairlawn NJ 0741	0								
Scope of Work (Check all that apply)				1.1	Full Containm	ent With Negative Press	1170						
	[X]		vation				uic						
$[X] \ge 3 \text{ sf or } \ge 3 \text{ If}$ $[] \ge 160 \text{ sf or } \ge 260 \text{ If}$	1 1	Dem	olition	[X		edure *) and Non-Friable Pro	. and man						
	1		_	1	Non-Exemited (and Non-Friable Pro		bateme	nt T	ype			
		Is ocation		Description of					E	E			
Location of	0.000	ocanon ormally		Description of Asbestos-Containin	g	Amount	R	R	N C	N C			
Asbestos - Containing Material (ACM)	(1)	Used olely by		Material (ACM)		(Specify	M	E	A	L			
TO BE ABATED		ntenan		(i.e., thermal system insulation, surfacing		SF or LF)	o v	PA	S	o s			
in Facility (13)	1 2000	istodial aff (12)		or other miscellan	eous)		A L	I R	U	U R			
	Yes	No	N/A						E E	E			
Basement			X	Pipe Insulation		30 LF.	x		7.11.2.13				
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		-						\vdash	-				
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									1				
Name of Registered Waste Hauler	#235C070	EP Wa		Cubic Yards of Waste	Name o	f Registered Landfill							
J.R. Contracting & Environmental Consulting, Inc.	Han	ler ID ! 1781!		6-1-1	G.R.O.1	W.S							
City, State			,	Disposal Date	City, St			11-11-12-	116 =				
Wayne NJ 07470					Morrisv				100				
Completed by (Print or Type) Title				Signature	//	Date							
Jerry Bijelonic Project Man	ager				e e		2/16	/2012		1.5			
ASB-41					\sim		-,11	G4667	_				

Date of Notification (1	N		l Ma	arma c	of Buildin	g Owner/Operat	nr (2)	G 140 1 G		1 11	1	
21201	Y					icu a 20				A Party of the Par	display	
Agency Notified	Type Notification		-		Address	- 471, 6646	- 10 U F	EB 2 3 20	12. 1	- 1	1	
	-Er Initial			37	7 5	EWETT	AUE!		i	22232	000	
D EPA	D Amended		C	- 04		0 1		DESTAN ASSESSOR			T	
DOL	Amendment #				LAF		07-65	FERRING CONTKUL	. čt		To the last	
ær¹boн	☐ Emergency (including justification)	3	No	מתה	of Contac		-6	Telephone Nu	nber	ACCUPATION AND ADDRESS OF THE PARTY OF THE P	J	
DCA	Cancellation		IM	2-	LANG	Ε.	in Contract	1,			-	-
						OPMATION		-				-
Name of Facility Whe	re Abatement is Taking Plac	a (3)					Type of Facility	(4)				
	LANE	- (-)					1					
Street Address	- LANE						IN School (K-12	i) 3 (Other than K-1:	2) .			
	SUA Trows							ivate & commerci		ngs,		
City (5)							Square Feet	# of Floors	Bldg.	. Age		
TEN	t Flog						2700	2	1	94	0	
Coumby (C)			T C	o's lity	Code (7	TO A TUSE	Current Use (P	rior if being demo	iished)			
BEY	LGEN		O	NEX			2-	SIDENC	E			
	Firm Hised by Building Owner	AS	CM N	0.		Name of Abate	en unt Contractor (S			April 1975	2-10	
(8)						Best Re	emoval In	С				
Street Address						Suus . / irres	s ·			-		
				77		450 800	ilh Biver	St		22		
City, State, Zip Code						City, state, Ze	Code			GLIPSON I		
	(i)					Es Land	sack, N.J	.07601				
Project Manager for I	Monitoring Firm	Telep	onede	No.		Telephone No		License No.				
7						201-329	9 - 7444 -	00388				
Start Date (10)	Scheduled Cor	npletion	Date	(11)		Hara of USH	A Mentor			(A-100)		
3/2/12	31.	3 1:2	,			Comerca 1	Environme	ntal Ser	vice	S		
	uring Abatement (Check only		=	-	*************	Store: Notices	5		MAX		eWallstein.	
□ Escility ClosedNa	cated During Entire Period of	Ahatem	MORE!			280 911	ylor St					
☐ Abatement Perform	med Outside of Normal Facilit					Cay, State, Zi		k . N.J.	076	06		
Scope of Work (Chec	k all that apply)											
#23stor≥3#	1.000		L**	Son	ovation	M12000	ti Comaioment with Ni Pusik wa	Negative Pressu	re			
_a_23 sici 23 ii □ ≥ 160 sfor ≥ 260 l	f		-		nolition	44 (Š)	on assay Fresedure					
77						Date	<u>ா. சி. ரோ, மேர் (*) an</u>	Nón-Friable Pro	cedure	TAS	aten	
		157011770	cition	24 9						1 ~	Type	
. Lo	cation of	Non Used S	mally where			Limita	ກວີ			П	T	T
Asbestos-Contu	ining Mutorial (ACM)	Mainte				primaric solt	Macestal (ACM)	Amount		2	_	3 m
	E ABATEL) Facility		abodie!		(i.e			(Specify SF or LF		Removal	Repair	Enclosure
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		i						MATTIT				
City, State	Danie M T 076	60				10 10 + 10 m + 11 m 11.	Can state	DA 1	0015			
Completed by	Park, N.J.076	9.4				Era mer .	Taearie	iem, PA 1	Date			
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ASB-41	DO NOT	use uits i	14.相 15 1 1	VI 25	122502 B	~						

10663		IFICATION	ate of New Jerse OF ASBESTOS to NJAC 8:60 an	ABATEN	S. Programme	EGE	1 W	F	In	7		
Date of Notification (1) 2/21/2012			Building Owner/GRT J. AND YV				14	123	To be designed to the second	Mary or Particulary		
Agencies Notified Type Notification	1	Street Ad 368 W	ddress EST MILL RC)AD		FEB 2:	3 2012	2		Westernoon a		
EPA Initial Amended DEP Amended Amendmen			te, Zip Code VALLEY, NJ	07853	i l	ASSESTOS CO	NTROL &	S.		NO.		
☐ Emergency justification ☐ DCA ☐ Cancellatio)	Name of CARO	Contact LYN WATERS	S		Telephone N	umber	Maria da	552-51			
Name of Facility Where Abatement is Taki VACANT RESIDENCE Street Address	ng Place (3)	FACIL	LITY INFORMAT		=	2) 8 (Other than K-	-12)	S21.1.				
368 WEST MILL ROAD City (5)		200			etc.) Square Feet	# of Floors		iligs, Ildg. A		20		
County (6) MORRIS		County C	Code (7) ISE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCM	l No.		vo BROTHERS CONTRACTING							
Street Address					Address RUTHERFOR	D BLVD.						
City, State, Zip Code					ate, Zip Code TON, NJ 0701	4						
Project Manager for Monitoring Firm		Telephor	ne No.		956-8700	License 00494						
Start Date (10) 3/3/2012	3/10/2012		Date (11)		of OSHA Monitor E AS (9) ABO	VE						
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: VACANT RESIDEN	Period of Abat				Address ate, Zip Code					_		
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf					Mini-Enclosure Glovebag Prod			cedur				
Location of	Is Loc Norm	nally	De	escription	of				ement pe	_		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used So Mainte Custodia (1	nance/ al Staff?	Asbestos Con (i.e. therma surfa	taining M	aterial (ACM) insulation, Γ, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
EXTERIOR	Yes N	o N/A	TRAN	SITE SI	DING	2,605	X			_		
22												
Name of Registered Waste Hauler		NJDEP W	aeta Cuhic	Yards	Name of	Registered Land	Ifill					

Hauler ID No.

18743

Title

SECRETARY

of Waste

Disposal Date 3/10/2012

Signature

2

MORRISVILLE, PA

City, State

WASTE MANAGEMENT G.R.O.W.S.

Date

.2/21/2012

CLIFTON, NJ

VIVECA RAMOS

Completed by

City, State

TWO BROTHERS CONTRACTING

Date of Notification (1) 2/21/2012				Name of JADE	f Building HACKE	Owner/Op	erator (²⁾ SSOCIATES,	LLC	c/o MGM	T OF	FICE	====	
Agencies Notified EPA DEP DDP DOL	Type Notification Initial Amended Amendment	# 1		City, Sta			VAE	1	3 ?		7			
DOH DCA	Emergency justification) Cancellation				Contact		-	ASELSIUS HEE		lephone Nu	mber			
Name of Facility Where FORMER BERGE Street Address 91 MAIN STREET	EN MACHINE & T)., IN		LITY INF	ORMATIO	· v	Type of Facility School (K- Subchapte Other (i.e.	(4) 12) 8 (Ott	ner than K-1	2) ial bui	dings	, hom	es,
City (5) HACKETTSTOW								etc.) Square Feet	# 0	of Floors	1	3ldg. /	Age	N
County (6) WARREN					Code (7) JSE ONLY)		Current Use (Pri	or if be	ing demolis	hed)			
Name of Monitoring Fir WHITMAN COMF		Owner (8)	V	ASCM	l No.		TWO	f Abatement Cor BROTHERS			١G			
Street Address 116 TICES LANE	, UNIT B-1						250 F	Address RUTHERFOR	D BL	VD.				
City, State, Zip Code EAST BRUNSWI							CLIF	TON, NJ 070	14					
Project Manager for Mo KEVIN LOVELY	onitoring Firm				90-5858			56-8700		License N 00494	NO.			
ON HOLD Occupancy Status Dur	ing Abatement (Chec	Scheduled		ipietion t	Jale (11)		SAMI	f OSHA Monitor E AS (9) ABC	VE					
Facility Closed/Va	acated During Entire I rmed Outside of Norm VACANT BUILDING	Period of Ab	aten				City, Sta	ate, Zip Code				2		_
Scope of Work (Check	All That Apply)													
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		Yes	No	N/A							-		le le	
SEE ATT	FACHED													-
	ACS 100		25				22 - 11 - 1							
Name of Registered W		;	Н	JDEP W auler ID 8743		Cubic Ya of Waste		0.000		ered Landfil NAGEME		G.R.(D.W.	S
City, State CLIFTON, NJ	1					Disposal 4/30/20		City, Stat		LE, PA				
Completed by VIVECA RAMOS		Title SECR	ETA	ARY		Sig	nature	rea k	an		ate [21/2	012		

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Date of Notification (1) 211.12	Name HR		O()()	Pedict	INEIN			~~~	
Agencies Notified Type Notification		Address	× 515	8	7 - 27				
Amended DOL Amendment #	- 165	tate, Zip C	7.1	A THIS	3 2012 8 2	7			키
Emergency (includi X DOH justification) Cancellation	ng 1t-	of Contac		ASBESTOS	A THE STREET	11			
			ORMATION	HOULE		_	_		
Name of Facility Where Abatement is Taking Plan				Type of Facility	5050 A-04 - 100	Marine Marine			\dashv
Street Address EASION AV	Ē		1	Other (i.e., p	8 (Other than K-12) rivate & commercial	buildi	ngs,		
City (5) NEW BRONS W		CU		Square Feet	# of Floors	Bld	g. Ag	e	\dashv
County (6) Hidd ESEX	Cour	ity Code (r) (STATE	Current Use (P)	ior if being demolish	ed) (2E-	7		=
Name of Monitoring Firm Hired by Building Owne				ment Contractor (9)	140	/=		=
Street Address			Street Address	= CV) 10	<u>C</u>				=
City, State, Zip Code			City, State/Zip	Code _ N	10.0000	7		<u></u>	-
Project Manager for Monitoring Firm	Telephone	No	Telephone No.	VOCE I	License No.	<u>T</u>			_
			1377	38x 1500	0800	6			
	Completion Da	ite (11)	Name of OSHA NOVALE	CV) (NC	P. ^				
Occupaticy Status During Abatement (Check on A) Facility Closed/Vacated During Entire Period			Street Address	x 214					
Abatement Performed Outside of Normal Fac			City, State, Zip	Code	880 0,0	SA	_		==_:
Scope of Work (Check all that apply)			Det C	ontainment with Ne					
	Renovation Demosition		☐ NErè-E	nciosure bag Procedure	on-Friable Procedure	1			
	s Location Normally		~				bater Typ		
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility	ed Solely by aintenance/ Custodial Staff?		Description stos Containing M , thermal systems surfacing, VA	aterial (ACM) s insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13) Ye	(12) No N/A		other miscelland	eous)		val	=	ulate	ure
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	11								
Name of Registered Waste Hauter	NIDEP Hauter I	Waste D.No.	Cubic Yards of Waste	Name of Reg	istered Landfill				
City, State O O \ C = 1\ O	0885		Disposal Date	THURSE	MAPL		1		
Completed Ry A Title		1	Signature	TATAL.	Date 2	2	1	1	
MASSAI HARIDA M	FSIDEN	<u>]] </u>		11-7-12-1111	100		+	1	=

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

Check No. No Fee

Date of Notification (1)					Name o	of Buildin	g Owner/Operator	(2)	an and the contract of	7.700.70	F 1971			
February 20, 2012					PA o	f NY &	NJ, Newark L	iberty Intern	ational Airpoi	T C	T.	7		
Agency Notified	Type N	lotification			Street	Address				4 15		III	1000	
□ EPA	⊠ Initia	al			Build	ling 80	, 2nd Floor	上川以下	por mande mentre de la companya de la porte del 1900 de mande			STATE OF		
Not required per State Reg. 102004	☐ Ame				City, St	ate, Zip	Code		e-a a a a	012	1	11		
⊠ DOL	0.0000000000000000000000000000000000000	endment # ergency (includir	ng.		Newa	ırk, NJ	07114		FEB 23 2	UIZ	- 70°			
⊠ DOH		ification)	9			of Contac		1	Telephone Nu	mber	1	CHINA		
□ DCA	☐ Can	cellation			Ralpi	n Camp	pione							
					FACIL	ITY INF	ORMATION	-	LICENSING					j.
Name of Facility Where	Abateme	nt is Taking Pla	ce (3)					Type of Facilit	y (4)	ghapi ming kapata 1215 M	evenet;			3
Terminal B, B2 Ele	evator	Lobby Mid l	evel					☐ School (K-1	2)		164			
Street Address									8 (Other than K-1 private & commerci					
Terminal B, Newa	rk Libe	rty Internati	onal	Airp	ort			homes, etc		ai bullulli	gs,			
City (5)						-14-207-24-2		Square Feet	# of Floors	Bldg.	Age			
Newark								24000	2	40 -	-/ -			
County (6)						Code (7) (STATE USE	Current Use (F	Prior if being demo	lished)			117200	
Essex					ONLY)			Terminal						
Name of Monitoring Firm	Hired by	y Building Owne	r	ASCM	No.		Name of Abaten	nent Contractor	(9)					
A of NY & NJ				N/A			B&N&K Res	toration Co.	, Inc.					
Street Address							Street Address			20 V2 10 CHO 10 10 10 10		C. C. S.		
241 Erie Street, Ro	om 23	6					223 Randol	ph Avenue						
City, State, Zip Code							City, State, Zip	Code						
Jersey City, NJ 07	310						Clifton, NJ	7011						
Project Manager for Mon	itoring F	irm	Te	lepho	ne No.		Telephone No.		License No.	11				
Ralph Campione			9	73-62	24-689	8	973-478-468	1	00120					
Start Date (10)		Scheduled Co	mpleti	on Da	te (11)	a.	Name of OSHA							
March 01, 2012		February	0.000					vironmental	Services, L.L.	C.				540 S
Occupancy Status Durin	g Abaten	nent (Check onl	one)	1 5			Street Address							
☐ Facility Closed/Vacate	ed During	Entire Period o	f Abat	ement				Brook Avenu	e -				8	
	Outside	of Normal Facil	ity Ho	urs			City, State, Zip							
☐ Other - Describe:							Lyndhurst,	NJ 07071-19	98					-
Scope of Work (Check al	II that ap	ply)							h Negative Pressu	re				
					⊠ Ren		120000	Enclosure						
⊠ ≥ 160 sf or ≥ 260 lf					□ Dem	Olition	☐ Non	ebag Procedure -Exempted (*) ar	nd Non-Friable Pro	cedure				
			ls	Locat	ion						A	bate		nt
			P	lormal	ly		Description				-	Ту	pe	
Location Asbestos-Containing	50000500	al (ACM)		d Sole intena		Asbe	Description stos Containing M		Amount				ш	_
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IN Fac (13				Staff?	•		surfacing, VA other miscellan		SF or LF)	Removal	Repair	Encapsulate	Enclosure
(10	,		11	(12)							<u>a</u>	7	ate	6
			Yes	No	N/A						L,			
Terminal B, B2 Elevato	r Lobby	Mid Level	X			Firep	roofing	ē	1,80	00 sq ft	X			
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Name of Registered Was	ste Haule	er	1000	DEP V No.	Vaste H	auler	Cubic Yards of Waste	Name of Regi	stered Landfill					
Jimmy Byrne Truc	king		- CO-	9555			30	A SWINSON STREET	interprises, In	c.				
City, State							Disposal Date 12/10/2011 -	City, State						
Bronx, NY							01/31/2012	Waynesb	urg, OH			_		
Completed by		Title					Signature	11		Date	00.	^		
G. Roger Woodma	ın	Project Ma	inag	er		-	1110			2/20/	201	2		

Date of Notification (1	1)		TI	Name o	of Building	Owner/Operator	(2)		世民	100	11	1
	1/12					ABINGU	MCCAF	FERTY	andrones ve	7]]		
Agency Notified	Type Notificat	ion	- 15		Address		21111	cen no	0050	1 4	Salana Salana	Name and
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D DEP	☐ Amended		19	City, St	ate, Zip C	code .	15	02020		4		
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D DCA	☐ Cancellatio	n		1000		CAFFORT		An graine, Albandonia Angel	w_109000000	1	4-11.5	
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Name of Facility Who					•		Type of Facility	(4)				
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Street Address		_				. *	Other (i.e. p	8 (Other than K-12 rivate & commerci	al building	js,		
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City (5)			KOMMINERA.	Edither Live			Square Feet	# of Floors	Bldg.	nge 94	'n	
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County (6)				County ONLY)		(STATE USE		rior if being demo				
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Name of Monitoring	Firm Hired by Build	ing Owner	ASCM	No.		Name of Abatem						
(8)						Best Ren	loval III	C				
Street Address	Can V - (11938) - Can V - (119					Street Address 450 Sout	h Dittor	S+				
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City, State, Zip Code	•					City, State, Zip C		07601				
		· .		- Na		Hackensa Telephone No.	ick, N.J	License No.		-	-	
Project Manager for	Monaoring ritti	10	elephor	te No.		201-329-	7/1/4	00388				
Start Date (10)	I Sah	eduled Complet	ion Do	b (11)		Name of OSHA		1 00300				
3/5/1	1,000000	_ 1 . i	2	ω (· ·)				ntal Ser	vices	3		
Occupancy Status D			100000			Street Address	-					
						280 Huy	ler St					
☐ Facility Closed/Va ☐ Abatement Perfor ☐ Other - Describe:	med Outside of No	mal Facility Ho	urs			City, State, Zip C	ode	k . N.J.	0760	6		
Scope of Work (Che						I			Secretary States			
EN ≥3 stor≥3 W			8	2 Ren	novation		Containment wit Enclosure	h Negative Pressu				
2 2 3 S OF 2 3 W	ff		9		nolition	□ Glov	ebag Procedure	Int State De				
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	ocation of	Use	Normal ed Sole	ly by	l	Description of		Amount			1	m
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	N Facility		Staff?			surfacing, VAT	, or	SF or LF)	Removal	Repair	nso
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Name of Registered	i Waste Hauler	· I N	JDEP \	Naste I	Hauter	Cubic Yards of	Name of Reg	istered Landfill				
Atlantic		vices 2	259	2		Waste I/C/	IESI L	andfill				
City, State						Disposal Date	City, State					
	Park, N.	J.07662				3/6/12	Behtle	hem, PA	18015	- 1/1/-		
Completed by	Title					Signature _A			Date		1	_
J.Maioran	IO ES	timator				1 Hou	source		1 2/	21	112	4
O . LIGITOI GII		* Do not uso				manufactor avainated	activities					

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Date of Notification (1) 02-08-2012			Name of E	Building C	Owner/Opera	ator (2) , NA			1.5			
Agencies Notified Type Notification		1	Street Add	dress SHINGT	ON BLVD	14TH	FLOOR	ari 2 3 2012	1, 1			
☐ EPA ☐ Initial ☐ Amended ☐ DOL ☐ Amendment			City, State JERSEY	15%	de NJ 0731				į	Alexander of the last of the l		
□ Emergency justification) □ Cancellation			Name of O	O ALBA			A.	telephone Nin	har			
Name of Facility Whore Abstament is Takin	a Place (3)		FACIL	ITY INFO	RMATION	Tv	pe of Facility (4).		911 - CO-X		
Name of Facility Where Abatement is Takin FORMER WAWA CONVENIENCE STOR	g 1 lace (5)						School (K-1 Subchapter		2) al build	inas.	home	es.
744 LACEY ROAD City (5)					Owar - F	Sq	etc.) uare Feet	# of Floors	В	dg. A		
FORKED RIVER			County C	odo (7)			rrent Use (Pri	1 or if being demolish		0	C 642	
County (6) OCEAN COUNTY					-		MMERICAL	or it being demons	iou)			
Name of Monitoring Firm Hired by Building THE LOUIS BERGER GROUP	Owner (8)		ASCM	No.			batement Cor	ntractor (9) AL SERVICES				
Street Address 199 WATER STREET 23RD FLOOR						eet Add	ress Queens PLA	AZA SOUTH				0
City, State, Zip Code							, Zip Code	7, NY 11101				
NEW YORK, NY 10038 Project Manager for Monitoring Firm			Telephon		0.200	lephone	No. 9-0900	License N	lo.			
CRAIG NAPOLITANO Start Date (10)	Scheduled		212-61				SHA Monitor	00853		-		
2/21/2012	3/15/20	12	.,		RC	OLLANI	BARNHAR!	Γ				
Occupancy Status During Abatement (Che					100000000000000000000000000000000000000	eet Add	iress RINE AVENU	JE				
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	nal Facility F	lours	3		City	y, State OUTH 7	, Zip Code AMBOY, NJ	08879				
Scope of Work (Check All That Apply)												
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf	☐ Re ☐ De						Mini-Enclosur Glovebag Pro				0	
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tena	nce/ Staff?		tos Containir thermal syst surfacing, other misce	ng Mate tems in: , VAT, c	sulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
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		1000				an decident						
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Name of Registered Waste Hauler ATC ASSOCIATES	*	1	IJDEP Warder ID I 14644PF	No.	of Waste 40 CUBI		NAMES TO BE	Registered Landfi /A ENTERPRISE				
City, State SHIRLEY, NY				1	Disposal D 3-15-20		City, Sta WAYNE:	te SBURG, OH				100
Completed by ARIC DOMOZICK	Title VP BU	ISIN	IESS OP	ERATIC	NS Signa	ature	6		ate 2/15/	201	2	

10010

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

					0-7 and 12.120-7	1		2.00			
Date of Notificat	ion (1)				g Owner/Operator	(2) F	CEI	W B	[17]		10
2/16/12			Haro.	La V	. Garrity		W E I	W Ea		-	
Agencies Notified	Type Notific	ation	Street Add			THAT				No.	
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[]DEP	Notific	ation	City, Stat	e, Zi	p Code				trum to		
[X]DOL	[]Amended		Monto	clai	r, NJ 07043	3			Ì		
[X]DOH	Notific		Name of Co	ntact			ASBESTOS CONTR one Mamberia	RUL &		8	
[]DCA	[]EMERGENO				V. Garrity		One Etamoekid		*********	J	
[]DCA	[]Cancella	tion									
			FAC	ILITY	INFORMATION	<i>V</i>					
Name of Facility	Where Abatement	is Takir	ng Place (3)		Type of Faci	lity (4)				- 0.7
Private						[]School	(K-12)				
a						[]Subcha	apter 8 (Oth				
Street Address	Pond						(i.e., priv				
25 Aubrey F	Koad						buildings,				
City (5)		County ((6)	C	ounty Code (7)	Square Feet 2600	# of Flo	STREET, STREET,	1dg. 85	age	
Montclair		Ess		11 120	STATE USE ONLY)	Current Use	375		No. of the last of	hed	()
						Residen		erng de	MOTI	neu	,
Name of Monitoring	g Firm hired by	Building	ASCM No		Name of Abate				-		
Owner (8)		esta — v messen a	67		AZTECH M	ANAGEMEN'	T, Inc.				
N/A Street Address					Street Addres			-			
						stopher S	t.				
City, State, Zip	Codo				City, State,						
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		m. 1								SOME N	
Project Manager fo	or Monitoring Fi	N/	ephone Num	ber	Telephone Num (973)744			License		er	
								0037			
Scheduled Start Da	and the same of th		etion Date	(11)	Name of OSHA	Monitor	35				
2/27/12 Month Day		28/12	av Yea	~	N/A						
Occupancy Status I	100000000000000000000000000000000000000	S1119750000 20110	11.4		Street Addres	s					
	losed/Vacated D	uring En	tire Perio	d							
of Abatem []Abatement	ent Performed Outsi	de of No:	rmal Facil	ity	City, State,	Zip Code					-
	scribe: «OffHour			_	10204, 00000,						
The California Control	scribe: «Other O		Descript»							-	
Scope of Work (Che	eck all that app	ly)			(1m,11	Containment w	ith Nogative	Dross			
[X]>3 sf	or >3 lf	[X	[]Renovation	on		Containment w Enclosure	Tur Negative	e riess	ure		
[] <u>></u> 160 s:	f or ≥260 lf	1]Demolitic	on		bag Procedure		T.			
			Is	1	[]NON-F	riable Proced	ure	Aba	teme	nt T	rvne
Locati	ion of		ocation ormally		Description	on of		1 3		E	E
Asbestos-C Materia	Containing		Used Solely		Asbestos-Con Material (70 (20 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	Amount (Specify	R	RE	N C	C
TO BE		By	y Main-		(i.e., thermal	27. 3.	SF or	Ö	PA	A P	O
	cility	Cu	enance/ stodial	j	nsulation, surfa		LF)	V	I	S	S
(1	3)	Yes	No N/A		or other misce	IIaneous)		L	R	L	R
Basement			х	_	pe Insulat	ion	60 lf	x		·	-
	Hammilton Committee			-						-	-
		-		-							
Name of Boardan	Wasto Hamler	N. T	DEP Waste	1	ubic Yards	Name of Po-	istered Land	efill	ليا		
Name of Registered AZTECH MANA			uler ID No	100	f Waste .75	G.R.O.W		AL 111			
	······································	17	7040			7		THE C			
City, State	T 07040			P	isposal Date	City, State		1000	7		
Montclair, N	U 0 / U 4 2				2/29/12	MOTTISVI	ille, PA	TA06	7		
Completed By (Prin	nt or Type) Tit	le			Signature	4	1/	Date			4 7
Constantine		eside	nt		1	Jak 1.	1/2	2/16/			
					(00	stant and	Man				

Date of Notification (1)			Name	of Building O	wner/Operat	or (2)	Contract of the Contract of th	Total Section 1		-	1
2–16–12				Lak	ewood Pl	Laza Hou	sing, LLC	GEIW	E	1	7	
Agencies Notified	Type Notification	n		Street	Address		1157	1 1 M	I a		1	
IX EPA	図 Initial			326	3rd Str	reet	: 40				200	
□ DEP	☐ Amended				tate, Zip Cod		100	E6 2 3 2012		11	4	
□ DOL	Amendme □ Emergence	nt #		Lak	ewood, N	J 0870	1	As we sta		in the second	and the second	
DOH DOH	justification) 1)	3	Name	of Contact		l German	Telephone No	ımber		4	
DCA -	☐ Cancellation	n					į no	ECTIOS CONTROL S	ė.			
Name of Facility When	a Abatament is Tak	ing Diese	(2)	FAC	CILITY INFO	RMATION	T =		en en ruinean	Designes.		
Lakewood Pla		ing Place ((3)			- 1	Type of Facility	(4)				
Street Address	za nousing						☐ School (K	-12)	about.		Name of the last	
193 Alder St	root						☐ Subchapte	er 8 (Other than K- private & commerc	12) sial bu	ildina		
The second secon			12500-001				etc.)	private & commen	Jai Du	liding:	s, non	ies,
City (5)							Square Feet	# of Floors		Bldg.		-
Lakewood, NJ							5,000	2		50	yrs	
County (6)					Code (7) USE ONLY)			rior if being demolis	hed)			
Ocean							apartmen					
Name of Monitoring Fir		Owner (8)	ASC	M No.	Name	e of Abatement Co	ontractor (9)				
EHS Environm	ental, Inc.					Pl	ymouth Envi	ronmental (œ.,	Inc		
Street Address		. 26				Stree	t Address		•			
411 Southgat	e Court, Sui	ite E				92:	3 Haws Aver	nue				
City, State, Zip Code					8000000	City,	State, Zip Code			-		
Mickleton, N							rristown, E	PA 19401				
Project Manager for Mo	onitoring Firm				one No.		hone No.	License N	Vo.		-0.0	
Jack Carney					=224–008	0 610	0-239-9920		039	8		
Start Date (10)		Schedul	ed Cor	mpletion	Date (11)	1 00000	of OSHA Monitor					
3-5-12		3–12				Ply	mouth Envi	ronmental Co	o.,I	nc.		
Occupancy Status Duris	ng Abatement (Che	ck Only Or	ne)			Stree	Address		100000			
☐K Facility Closed/Vac	cated During Entire	Period of	Abater	nent		923	Haws Aven	ue				
☐ Abatement Perform☐ Other – Describe:	ned Outside of Non	mal Facility	/ Hour	S		City, S	State, Zip Code					
· · · · · · · · · · · · · · · · · · ·						- Nor	ristown, Pi	A 19401				
Scope of Work (Check	All That Apply)						15					
□ ≥3 sf or ≥3 lf		DX F	Renova	ation		X	Full Confainm	nent with Negative I	Pressi	ire		- 63
Dx ≥160 sf or ≥260 lf			Demoli	tion			☐ Mini-Enclosur	re ·	10000	110		
						122	Glovebag ProNon-Exempte		. I. D.			
		Τ.					1 Non-Exemple	d (*) and Non-Friat	DIE Pro			
1 #		20000	Locat Vormal			C.					emen /pe	1
Locatio Asbestos-Containing		Use	d Sole	ly by	Ashastas	Description Containing I	n of Material (ACM)	A		T	i –	
TO BE AB	BATED		intena		(i.e. the	ermal system	s insulation.	Amount (Specify	R	_	g	ш
In Faci		Cusi	odial 8 (12)	Stan?		surfacing, VA	AT, or	SF or LF)	em	Repair	cap	nclo
(13)			,		0	ther miscella	neous)		Removal	air	Encapsulate	Enclosure
	5.	Yes	No	N/A					1		ਰਿ	•
throughout uni	it		х		VAT			1,100 SF	x	1		
		1		-	VAI			1,100 51	1	-		
					, , ,			-			-	
Name of Registered Was	ste Hauler	1		JDEP W		ubic Yards	Name of	Registered Landfill				\vdash
Newark Cartino	1		Н	auler ID		f Waste		Service Landini				- 1
				4509		20	IESI					
City, State						isposal Date			() () () () () () () () () ()	071100		
Newark, NJ						3-12-12		ehem, PA	0			-
Completed by		Title				Signature		Da	te			
James Kelly		Pre	esid	ent		1 AT	moral	1/2 2	-16-	-12		

2998

Date of Notification (1)				Name	of Buildi	ng Owner/Operato	r (2)		127 14	, ,	1		4
2/20/2012				NJ De	pt. of M	ilitary and Veter	ans Affairs					- Parity	
Agency Notified	Type Notification				Address		111	FEB ± 3	2012	1	1	4024	
⊠ EPA	☐ Initial		9	101 Eg	ggert's C	crossing Road	11 [I LU Q U	Ct. 11.			007	
O DEP	⊠ Amended			City, S	state, Zip	Code				3		1	
⊠ DOL	Amendment #			Lawer	encevill	e. NJ	1	ASSESTOS COL	TROL &	3		200	
FA DOU	☐ Emergency (in	cluding			of Conta		L 2	Telephone No	mber			1	
⊠ DOH ⊠ DCA	justification) □ Cancellation			Mark I	2 amos			-	This .	di da di see	No.		201
						ORMAT10N	300.	-				94	- 3
		B! (6)		FAC	LIITIN	ORIVIATION	Turn of Facility	(4)					
Name of Facility When	e Abatement is Takin	g Place (3)					Type of Facilit	y (4)					
West Orange Nation	al Guard Armory				decircolar property		☐ School (K-1						
Street Address								8 (Other than K-1 private & commerce		nae			
1315 Pleasant Valley	Way						homes, etc		Jai Dulluli	ıyə,			
City (5)	way						Square Feet	# of Floors	Bldg.	Age	9		
							100,000+	1	50+				
West Orange, NJ 070)52			County	· Cada /	7) (STATE USE		Prior if being dem			_		-
County (6)				ONLY		() (STATE USE	Current Ose (Tion it being defin	onancaj				
Essex								(0)				_	
Name of Monitoring Fi (8) Whitman	rm Hired by Building	Owner	ASCN	No.		Name of Abater	ment Contractor	(9)					
(8) Whitman		(0110			RICI CORP							
Street Address						Street Address							
116 Tices Lane, Unit	B-1					41 LIBERTY S	STREET						
City, State, Zip Code						City, State, Zip	Code						
East Brunswick, NJ	08816					PASSAIC, NJ	07055						
Project Managerfor Me		Te	elepho	ne No.		Telephone No.		License No.			- 0.000		
		73	2_300)-5858		973-614-1266		00838					
Kevin Lovely Start Date (10)	Schedule	ed Complet				Name of OSHA	Monitor	100000	- 3230				
SC-2101/20 20 St 30	Programme and the second	3.	011 00	(1 .)		RICI CORP	HEROTAL CONT.						
02/27/2012	03/08/20				-	Street Address							
Occupancy Status Dur	ing Abatement (Chec	k only one,				The state of the s	TREET						
☐ Facility ClosecNaca	ited During Entire Per	riod of Abat	temen	t		41 LIBERTY S					-	_	-
☐ Abatement Perform ☑ Other - Describe	ed Outside of Normal	Facility Ho	urs										
						PASSAIC, NJ	07055				-		_
Scope of Work (Check	all that apply)					⊠ Full	Containment wit	h Negative Press	ure				
□ ~: 3 sf or ~: 3 lf					novation	☐ Mini	-Enclosure						
⊠ ~: 1 60 sf or ~: 260 lf				☐ Den	nolition	U Glov	relbag Procedure	e nd Non-Friable Pr	ocedure				
					T		Exomptod () a			TA	bate	mei	nt
			s Loca Norma				.4				Ту	ре	
	ition of		ed Sol			Description							
	ing Material (ACM)	Ma	intena	ance/	Asbe	estos Containing M e., thermal systems	laterial (ACM)	Amoun (Specif		Z	_	Enc	E
	ABATED acility	(Custoo		(1.6	surfacing, VA		SF or LF		em	₹ep	aps	clos
	13)	1	Staff (12)			other miscellan			2/3	Removal	Repair	Encapsulate	Enclosure
			1	1	-			La		-		e	
		Yes	No	N/A						-	_		_
2nd floor bathroom			x		PipeIns	ulation including	elbows & joints	100 LF		X	L		
2nd floor bathroom			x		Wall a	nd Ceiling plaste	er	2,300 SF		x			
				-						1			
Name of Registered W	lasta Hauler	I NI	IDEP	Waste H	Hauler	Cubic Yards of	Name of Ren	stered Landfill	-	L			
Maille of Registered W	raste Hautel	197358	No.	. 14315 1	lauloi	Waste							
RICI CORP			051			TBD	G.R.O.W.S	LANDFILL					
City, State		49	051			Disposal Date	City, State			-	4		
Company and the second						TBD	MORRISVI	IIF PA					
PASSAIC, NJ	Title		- 100			Signature	WIORGS VI	out, in	Date	-			
Completed by	1	PNIT				In My	9 6/2	9 La 21/20	2/20/20	112			
RISTO TRAJKOV	PRESID *D	o not use t	his for	m for as	shestos li	censure exempted	activities		2/20/20	012			1.00
ASB-41	D						STANDERSON SOMETRA						

6p861

Date of Notification (1)	4/12		Name	of Building	Owner/Operator (ellato	Tierenal	1	A JE		1
Agencies Notified	Type Notification		Street	Address					10	-	
☐ BPA	☐ Instial			1601	Palisi	ade Ai	<u> </u>				
□ 06P	Amended Amendment #		City, S	tate, Zip C	code _	1	(I) - 1 - 1 - 2 - 3	i 'Z.U	TL.		H
□ рон	Emergency (inc	luding			tont	lee 1	2/2			1	_
	justification) Cancellation			of Contac	1 /	42	Telephone Number	Patricia a trans	SEC.	oud.	
			FAC	ILITY INF	ORMATION				*******	Sa damina	
Name of Facility Where						Type of Facility	(4)				-
	Residen	l				School (K-12					-
Street Address	193-160) C	Pal.	sad	e Due	Other (i.e., pr	(Other than K-12) wate & commercial	build	ings,		
City (5)	t. Lee	NJ				Square Feet	# of Floors	Blo	ig. Aç	e	\dashv
County (6)	501 Ger		Cour	nty Code ('	7) (STATE	Current Use (Pri	or if being demolish	ned)			-
Name of Monitoring Firm			I ASCM		Name of Abatem	ent Contractor (9)			==		=
(8) EM	SL		C		F Gais	A .					
Street Address	1 2 24	\ S+			Street Address				_		-
3.01	$\omega > \ell$, 2)		513 E	32~1	ST				_]
City, State, Zip Code) у				City, State, Zip C		2				
Project Manager for Mo	onitoring Firm	1	Telephone		Telephone No.		License No.				-
mongo		_ 2		21-659			BOT 800	0 2	11		_
Start Date (10)	AC 120 14 14 14 14 14 14 14 14 14 14 14 14 14	uled Corr	pletion Da	ite (11)	Name of OSHA N	Monitor 5 (mo	Salk-da			
Occupancy Status Duri	ing Abatement (Chec	k only on	e)	~~~	Street Address						=-
Facility Closed/Vaca	and During Entire Per	riod of Ab	atement				V				
☐ Abatement Performs ☐ Other - Describe:			lours		City, State, Zip C	ode		-			
	Vemo	1.1.7								_	_
Scope of Work (Check					☐ Full Cor	ntainment with Ne	gative Pressure				
≥3 st or ≥3 lf ≥160 st or ≥260 lf		Réno Demo	vation bitton		Mini-End	ag Procedure	n-Friable Procedur				
		Is Loc	ation	Ι	I NOT-EX	empled () and No	IFFRable Procedur		bater	nent	
Location		Norm Used S			Description of				Тур	8	
Asbestos-Containing	Material (ACM)	Mainte	nance/	Asbes	tos Containing Mat	erial (ACM)	Amount			E	_
TO BE ABA		Cust		(i.e.	, thermal systems in surfacing, VAT,		(Specify SF or LF)	Ren	Re	2	Encl
(13)		. (1:	2)		other miscellaned			Removal	Repair	ncapsulate	Enclosure
		Yes I	No N/A					-		8	
exteria			X	T	RANS	it-e	1870SF	X			
Sid	ins				Siding						
	0			<u>. </u>							
			NUDEP		I C. L. V.	T None AB					
Name of Registered W			Hauter II	O No.	Cubic Yards of Waste	Name of Regi	A 1 A	0	1		
CASTEL~	· Corte		RTO	2)	Disposal Date	City, State	cry land	1.	V		_
City. State	ld NT	• 10			Dispusar Date	City, State	rice PA	7			
Completed By	Title	Λ	4		Signature	70	I Date	21	1//	T	2
Frank 6	ruce	ynes	ule	(1/ (21	14	1	

			1	NOTI	FICATI (Pursua	ON OF nt to NJA	ASBESTOS AB AC 8:60-7 and 12:1	ATEMENT		a de servicio de la compansión de la compa	Check #	6685			
Date of Notification (2/16/12		Nam	e of E	Building (Owner/O	perator (2) blic Schools		MEC		I W F	Ti-	$\sum_{i=1}^{n}$		
Agencies Notified [] EPA	Type of No		Stree	et Add				Mary and the South of the South		3 2 3	2012		A CANADA	-	_
[] DEP [X] DOL	[x] Emer	cation gency nded cation	City, Uni	State on,	, Zip Co NJ 07	de 083		To the state of th	L ASSE	וכענצווג	ETPAL 2		Total American		-
[X] DOH	[] Cance		100000000000000000000000000000000000000		Contact s Wigg	gins	- 27	L.	Telephone I	Number 11 Ener	NO TO DE				-0
					F.	ACILITY	INFORMATION	Dr					-		-
Name of Facility Who Livingston Scho Street Address		t is Taking	Place	(3)				Sub	ility (4) hool (K-12) ochapter 8 (Otl ier (i.e. private mes, etc.)	ner than and cor	K-12) mmercial b	uilding	s,		
960 Midland Bl	vd.					Cour	nty Code (7)	Square Fee	t # of F	loors	Bldg ~ 50	. Age			_
City (5) Union		Ur	unty (6) nion			(STA	TE USE ONLY)	Current Use educational	(Prior if being	demolis	shed)				_
Name of Monitoring	Firm Hired by	Building C	Owner	1 3 2 3 3 3 3	SCM No.		Name of Abatem	Jupiter Env	rironmenta	Serv	ices. Inc	:.			
Omega Enviror	nmental S	ervices,	, Inc	00)		Street Address	Jupiter Liv	HOIMICING	00.1	,000,				_
Street Address	STREET OF SIZE SIZE							3 Lynn Cou	urt						
280 Huyler St.							City, State, Zip (Code							
City, State, Zip Code	e Book NIO	7606				1		Lincoln Pa	ırk, NJ 070	35					
South Hackens Project Manager for	Monitoring Ei	rm	Teleph	one l	Number		Telephone Num	ber			License Nu		0.5	^	
Anton Rezin	Monitoring Fi				-8700			973-709-0	200			UC	85	2	_
Scheduled Start Dat 2/16/		Sched. C		tion [Name of OSHA	Monitor J & S Env	ironmental	Labo	ratories	LLC	;		
Occupancy Status D	Ouring Abatem	During En	tire Pe	rioa o	f Abaten	nent		2333 Rout	e 22 W						
[] Abatement De [] Other – De	Performed Ou scribe: ever scribe:	itside of N nings and v	weeker	nd	y Hours		City, State, Zip	Code Union, NJ	07083						_
Scope of Work (Che		ply)			rv1	Renova	ation	[x]	Full Containr Mini – Enclos	sure		Press	ure		
[] Demolition [] ≥3 sf or ≥3 [x] ≥160 sf or	If				[X]	Renove	20011	[]	Glovebag Pr Non – Friabl	e Proce	dure		76		
[x] ≥160 sf or			· Is I	ocat	ion							Ab		ment	
Asbestos - Materia	ation of Containing (ACM) ABATED		So Mainte				Asbesto Mate (i.e., the insulation,	cription of s – Containing erial (ACM) ermal systems , surfacing, VA	т,		Amount (Specify SF or LF)	REMOV	R E P A	N C A	ENCL
In F	acility 13)		Yes	No	N/A			miscellaneous				A	R	U	S
Classroom 114	7			X		Floor -	- light weight co	ncrete/cleanu	ıpqı	3 X 1782	0 SF LF	×	X	+	X
Crawlspace			x				nsulation			3				+	
Ciawispace										•					
Name of Registered Jupiter Enviro	d Waste Haul nmental S	er Services	На		Waste O No.	0	ubic Yards f Waste 3	Minery	Registered La va Landfill	ndfill					
City, State Lincoln Park,	N.I						isposal Date 2/23/12	City, Sta	te esburg, OF	1					
Completed By (Prin			Title Gen	eral	Mana	ger	Signature				2/16/	12			

State of New Jersey

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

3							III es	MANAGEMENT OF THE PARTY OF THE	- til diddele transcore	# 668	5	_	
Date of Notification (1)						Public Schools	III LE		APPROVED				
	2/16/12			ddress	stub L	ublic Schools		war to have the	Health & Sei		inici	- 25	_
Agencies Notified	Type of Notification			Morris	Ave	Į.	ASBE	STOP GRAND	- B. (eighature)	81		-	
[] EPA	[] Initial	1	000	14101110			and the second s	LIGENSING 1	119	118	S	M	
[] DEP	Notification (x) Emergency			ste, Zip C			المائنا دومتنان دسيميد ج	Dare: N	Tim.	e:	40	1	•
[X] DOL	[] Amended	-U	nion	, NJ 07	7083	Salt of							
[X] DOH	Notification	N	ame A	f Contact				Telephone Nun	nber		~~~	~~~~	_
[x] DCA	[] Cancellation			as Wig									
		١.	HOILS			YINFORMATION			3			~~	
***	Abstanced in Tale	ine Dia	on (3)		ACILI	TINFORMATION	Type of Faci	lify (4)			30723	-2507	-
Name of Facility When Livingston School		ing Pla	ce (3)				[x] Sch	100! (K-12)	than & 12\				
	JI		•••				Oth	noof (K-12) schapter 8 (Other er (I.e. private an	d commercia	buildir	gs,		
Street Address 960 Midland Blvd	4						hor	nes, etc.)					
900 Miniatio Divi	٦.						Square Feet	# of Floo	rs B	dg. Ag	3	E-115	
City (5)	70	County	(6)		Co	unty Code (7)	50000	3	The second second	50			
Union	1	Union			(ST	TATE USE ONLY)	Current Use educational	(Prior if being de	molished)				
Name of Monitoring Fig	m Hired by Building	Owne	r A	SCM No		Name of Abatem		(9)					
Omega Environn	The second secon		70	00	-		Jupiter Envi	ironmental S	ervices, l	nc.			
Street Address		,			7	Street Address	····						
280 Huyler St.						The state of the s	3 Lynn Cou	rt					_
City, State, Zip Code						City, State, Zip C		- NIO7025					
South Hackensa		,						rk, NJ 07035	License	Mumba	-		
Project Manager for Me	onitoring Firm			Number		Telephone Numl	973 - 709-02	200	Liverise		085	52	
Anton Rezin	40) F=L=d			1-8700 Date (11)		Name of OSHA		200			000	-	_
Scheduled Start Date (2/16/12			1/12			Teams of Corner	J & S Envi	ronmental La	boratorie	s, LL	0_		
Occupancy Status Dur	Ing Abatement (Ch	eck only	y one)			Street Address	200 0	22.14/					
[x] Facility Close [] Abatement Pe	d/Vacated During Enformed Outside of	nure P Normal	eriod (Facili	ot Abaten tv Hours	ient '	Annual Control of the	2333 Route	22 VV				166	
Descr [] Other - Descr	ibe: evenings and	d weeks	<u>end</u>	.,		City, State, Zip C	Union, NJ	07083					
Scope of Work (Check	all that apply)				-		00000						
	•			791	Renov	ration	[X]	Full Containment Mini – Enclosure		e Pies	sure		
[] Demolition [] ≥3 sf or ≥3 lf				[X]	Kenov	786011	וֹ זֹ	Glovebag Proces	dure				
(x) ≥160 sf or ≥26	60 If						[]	Non - Friable Pr	ocedure				
		ls	Locai	ion		···				1	ate	men	t
	_		mally				ription of - Containing	į	Amount	R	R	E	E.
Location Asbestos - Co			colely lenance	e/Cus			tai (ACM)		(Specify	E	E	N	N
Material (A	ACM)		al Stat				mal systems		SF or LF)			C	C
TO BE AB							surfacing, VAT. niscellaneous)	·/		V	A	P	L
In Facil (13)	rty	Yes	No	N/A		Of Other is	nazarane dua,			A	R	S	S
(10)									720 SF	- L		υ	U
Classroom 114			X			- light weight con	crete/cleanup)	3 LF	×	X	-	X
Crawlspace		x		-	Pipe I	nsulation			~	+^	+		
				1						-			
Name of Registered W	acta Heular	MI	DEP	Vaste 1	10	ubic Yards	Name of R	egistered Landfill					- 50
Jupiter Environm		2/2017	uler II			of Waste		Landfill					
			04782			3		<u> </u>		<u> </u>	-	-	
City, State						hisposal Date	City, State						
Lincoln Park, NJ						2/23/12 Signature / 2		burg, OH	Date		umer Ki H	-	
Completed By (Print or	(ype)	Title	oral	Manas	TOT.	Signature	(1	2/16	/12			
Pane Replc		GEII	ordi	Manag	101	1/2	💛						
10D 44					-				- 12		- 1	-	

	Form

Date of Notification (1) 2-17-2012		1000	ame of Bu	uilding Ow en	ner/Opera	ator (2)	则但	GE	IIV	E		,	
Agencies Notified Type Notific	ation		treet Addr I Yale T					FR 2 3	3-2012	The same			
DEP Amend	ment #			Zip Code ange, N		O'Compression of	1	Transfer to the same of		1200			
DOH justification DCA Cancel		1	ame of Co Rob Ade	en		L	The state of the state of	Teleph	one Num	nber 3			
Name of Facility Where Abatement is House	Taking Place (3)		FACILI	TY INFOR	MATION	In	of Facility (4) School (K-12)			• •	**	
Street Address 1 Yale Terrace		-112-528					Subchapter 8 Other (i.e. pr etc.)	ivate & co	ommerci	al buildir			۶,
City (5) East Orange						200	The second second	# of Flo		50	g. Ag +	е 	
County (6) Essex			County Co STATE US			- Hou				nea)			
Name of Monitoring Firm Hired by Bu	ilding Owner (8)		ASCM N	1 0.			atement Cont ntracting, I						Ê
Street Address			L			treet Addre 22 Troy L							
City, State, Zip Code						ity, State, Z Lincoln P	Zip Code Park, NJ 07	7035					
Project Manager for Monitoring Firm n/a			relephone	No.		elephone N 973-706-		93	icense 1 01088	40.			
Start Date (10) 2-28-2012	Scheduled 2-29-20		pletion Da	ate (11)			HA Monitor entracting,	LLC			_		
Occupancy Status During Abatement			ent		1 -	Street Addre 22 Troy I							
Facility Closed/Vacated During Abatement Performed Outside Other – Describe: 9am - 5 pm	of Normal Facility h	lours	CIL			City, State, Lincoln F	Zip Code Park, NJ 0	7035					
Scope of Work (Check All That Apply ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	× Re	enova		.0		H N	ull Containmo lini-Enclosure lovebag Prodon-Exempte	e cedure -		able Prod	edun	.	
		ocati									Abate Ty	ment	i -
Location of Asbestos-Containing Material (A TO BE ABATED In Facility (13)	CM) Used Mair	ormal I Sole ntena odial S (12)	ely by nce/ Staff?	Asbesto (i.e. t	os Contai hermal sy surfacir	ription of ining Mater ystems insi ng, VAT, or scellaneous	ulation,	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
-	Yes	No	N/A	Act	poetne F	Pipe Insu	lation	12	5 LF	×			-
Basement			×	ASI	1031031	ipe inou							F
								1					
Name of Registered Waste Hauler Jadar Contracting LLC		1	NJDEP W Hauler ID 0033137	No.	Cubic Y of Wast TBD	te		f Register).W.S. L					
City, State Lincoln Park, NJ 07035		The state of the s			Disposa TBD			sville PA		7 Date			_
Completed by Lillie Lazarevich	Title	etan	,		Sin	gnature	Pazzni	1		2-1	7-1	2	

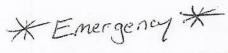
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Date of Notification (1) 2/20/12		Na B	ame of B	uilding Ow Ireotta /	ner/Ope Reside	rator (2)			-	A TOTAL STREET			
Agencies Notified Type Notification		St 5	treet Add	ress Long Be	ach Blv	/d	FEB 2	3 2	UIZ				
EPA Initial Amended Amendment		Ci	ity, State Brant Be	, Zip Code each NJ	08008		ASBESTUS	RICINIC					
■ DOH justification) ■ DCA Cancellation		1	ame of C Bob		1	D.44-1	THE PERSON NAMED IN COLUMN	Teler	ohone Nui	mber		T.	
Name of Facility Where Abatement is Takin	ng Place (3)	1000	FACILI	TY INFOR	MATION	Type of	Facility (4)					
Bob Andreotta / Residence						TT SI	hool (K-12 bchapter 8	(Othe	r than K-1	2)			
Street Address 5000 B Long Beach Blvd						⊠ Of et	her (i.e. pr c.)	ivate &	commerc	ial build	ings,		es,
City (5) Brant Beach NJ 08008						Square 1000-	•	2		3	5+ 	.90	
County (6) Ocean			County C	ode (7) SE ONLY)		House				ined)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.		Name of Abate Pernaco Inc		tractor	(9)				
N/A Street Address						Street Address							
City, State, Zip Code						City, State, Zip West Berlin	Code	91				****	
Project Manager for Monitoring Firm		T	Telephor	e No.		Telephone No			License 00727	No.			
	Scheduled	Com	nletion [) Date (11)		856-753-98 Name of OSH			00121		-		
Start Date (10) 3/2/12	3/8/12	Con	ipietion t	Jaile (11)		Pernaco In						_	
Occupancy Status During Abatement (Ch						Street Addres PO Box 32							
Facility Closed/Vacated During Entir Abatement Performed Outside of No Other – Describe:	e Period of Ab rmal Facility F	atem Hours	nent		_	City, State, Zi West Berli	Code)91					
Scope of Work (Check All That Apply)		-				PROPERTY.							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				Mir	Containm i-Enclosur vebag Pro n-Exempte	e cedure				ure	
				Γ		IN INO	I-Exemple	u () ai	id (tol) 1 i		Ab	teme	nt
	N		Ìly √		Des	scription of			**	-	Т	Туре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair	ntena	ely by ince/ Staff?	Asbes (i.e.	thermal surfac	aining Material systems insula cing, VAT, or niscellaneous)	(ACM) ation,	(Amount Specify F or LF)	Removal	Nepall Nepall	Encapsulate	Enclosure
	Yes	No	N/A			1 - Olding		2	000 SF	x	+	+	+
Exterior Siding			X		Exte	rior Siding		2	000 31	1	+	+	
								-		-	1	T	
										1611			
Name of Registered Waste Hauler			NJDEP \		of Wa	Yards	G.R.C		tered Lan	IUIIII			-:
United Containers City, State		2	22459	1.3		sal Date	City, St	ate	PA 1906	 7		٠.	-
Elm NJ	Title			- <u> </u>	3/8/1	2 Signature	IVIOTTIS	VIII C	7 1900	Date		- 1	-
Completed by Anthony T Perna	Presi	iden	t		l`	Ce				2/20/	12		

		NC	TIF	ICAT	State	e of Nev	w Jerse ESTOS	ey S ABA	TEMENT	A CONTRACTOR OF THE STATE OF TH	Parinet				
MO# 19807832070)					NJAC					= [17		- 22	
Date of Notification (1)				8	Name	of Building	Owner/	'Operator	r (2)	and the second s	- S-10(D)				2
02/21/2012				J	anet L	Lucas							1 9		
Agency Notified	Type No	tification		T	Street	Address				FEB = 3 2012			-		
	S2 1-141-1			17	05 Br	road Stre	et				ĺ		1		
⊠ EPA □ DEP		ded		1	City, S	tate, Zip C	ode		I I	AND THE RESERVE AND THE PROPERTY OF THE PROPER	1		1		
⊠ DOL	100000000000000000000000000000000000000	ndment #		F	Bloom	field, N.	1 07003	3	ì	ASSECTOS CONTROL &			1		
		gency (including	3	- 1		of Contact			Le exemple	Telephone Number	mann Sinte	-	-J		
⊠ DOH	justifi 🗆 Cance	cation)			anet I	11000				1					
□ DCA	U Canc	enation	-	J				011				-	-		-
					FACI	ILITY INFO	JRIVIATI	UN	Type of Facilit	h. (4)				_	_
Name of Facility Whe	re Abatemen	t is Taking Place	e (3)						Type of Facili	ly (4)					
Private home									☐ School (K-1						
Street Address										r 8 (Other than K-1 2) private & commercial bu	ildina	s.			
705 Broad Street									homes, etc			S#2			
City (5)									Square Feet	# of Floors B	idg. A	ige		11123	
Bloomfield, NJ 070 County (6)	003			. [2000 CO 000 CO	y Code (7)	(STATE	USE	Current Use (Prior if being demolished	٦)				
Газан					ONLY))									
Essex Name of Monitoring F	irm Hired by	Building Owner	(8)	ASCM	No.			of Abater	ment Contractor	(9)				001111	
Street Address				_			STREET, STREET	Address							
Oll Got / Idai - Go							576 Va	alley Ro	1 #283						
City, State, Zip Code						-		tate. Zip							
Project Manager for M	Assitating Fir	m	Te	elephoi	ne No		Wayne	e, NJ 07		License No.					
Project Manager for N	Notificining Fit	1416	1	reprior	ic ito.	i		88-1777	,	01127					
Ot- + D-4- (10)		Scheduled Cor	nnlet	ion Da	to (11)	1		47. 7. 7. 7. 7. 7. 7.	Monitor	01127			XOTO:	100	
Start Date (10)			ripiet	ion Da	te (11)		7010	1041.66	Consultants,I	na					
03/01/12 Occupancy Status Du		03/02/12	onol					Address	Consultants,	iic					
Occupancy Status Du	illing Abateini	ent (Check only	Une)						w Road, Bld	~ # 21A					
☑ Facility Closed/Vac ☐ Abatement Perform ☐ Other - Describe:	cated During ned Outside o	Entire Period of of Normal Facilit	Abat y Ho	tement urs			City, St	tate, Zip	Code	g .# J4A	-10-5-10				-0.0
	k all that ann	(v)					rair La	awn, N.	J 07410					1100	-
Scope of Work (Chec ≥ 3 sf or >3 If ≥ 160 sf or >260 If		ly)				novation molition		Mini	i-Enclosure vebag Procedure	th Negative Pressure					
								△ Non	-Exempted (*) a	nd Non-Friable Procedu	re	Aba	ter	ner	ıt.
				Locat									Гур		
Asbestos-Contai TO BE IN	eation of ining Material EABATED Facility (13)	(ACM)	Use Ma	Normal ed Sole intena Custodi Staff? (12)	ly by nce/ ial		tos Cont , therma surfa		laterial (ACM) s insulation. T, or	Amount (Specify SF or LF)		Removal	Lincapodiate	Encanculate	Enclosure
			Yes	No	N/A	VATE	log-Ti	los		350 SF	-	,	1	_	_
Basement					X	VAT F					_ X	-	-	-	
Basement					X	Pipe ins	sulation	1		110 LF	×	-	+	-	
	- 22												1	1	
Name of Registered \	Waste Hauler		- 733299	IDEP V No.	Vaste H	Hauler	Cubic \	Yards of	Name of Reg	stered Landfill		i_			
Gr Tech LLC			003	33785	5				T.R.R.F. In	c					
City, State		*					Disposa	al Date	City, State		2-C-12-0000	9K0.733 54		X=10	1
Wayne, NJ 07470			-						Tullytown,						
Completed by		Title	-c.v. 11/5500		192701	1	Signatu	ire	1	/ Dat	485				
N.Jevtic		Owner	ico ti	aic for	n for as	sbestos lice	oneuro o	T'e	activities	mad 02/2	21/20)12		(Garli	

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Date of Notification (1) 2/20/12			Name of Michae								W.	居	In	
	otification		Street Ad		Stree	t			(T) (m)	P*				- Contraction
DEP Ar	itial mended mendment #		City, State North E	e, Zip Co	de		08		i-j-	<u>R 23</u>	2012		11), Laure /	The MELLIN WATER
DOH Er	mergency (including stification) ancellation	1100	Name of Michae							ephone M				111111111111111111111111111111111111111
Name of Facility Where Abateme	nt is Taking Place (3)		FACIL	ITY INFO	ORMATI	ON	Type	of Facility (4	1)	emilik in	and commit			
Michael Baylor / residence								School (K-1		n in the Contraction	A State of the second	Appendix 1	AMESTICAN.	nts.
Street Address 107 North 14th Street							×	Subchapter Other (i.e. potc.)	8 (Oth	er than K- & commer	12) cial bui	ding	, hom	ies,
City (5) North Beach Haven NJ 08	008			3/2			1000	10	2	f Floors	3	31dg. 35+	Age	
County (6) Ocean			County C			_	Curre	nt Use (Prio se	r if be	ing demoli	shed)		35.0	
Name of Monitoring Firm Hired by	y Building Owner (8)		ASCM	No.				ement Con	tractor	(9)				
N/A						Perna								
Street Address						PO B								
City, State, Zip Code				-				p Code n NJ 080	91					
	roject Manager for Monitoring Firm					Teleph 856-7	753-9	800		License 00727	No.			
Start Date (10) 3/1/12	3/7/12	d Com	npletion D	ate (11)		Name Perna		IA Monitor						
Occupancy Status During Abater	nent (Check Only On	e)				Street A							75.	
Facility Closed/Vacated Dur Abatement Performed Outsi Other – Describe:	ing Entire Period of A de of Normal Facility	batem Hours	ent			City, S	tate, Zi	p Code n NJ 080	91					
Scope of Work (Check All That A	pply)			indaes ville					2000					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×	Mir Glo	I Containment- ni-Enclosure evebag Procen-Exempted	e edure				ıra	
	le.	Locati	oń.				I NO	n-Exempled	1 () ar	iù ivori-Fria	able Fit	Aba	teme	nt
Location of Asbestos-Containing Materia TO BE ABATED In Facility (13)	I (ACM) Use Mai Cust	lormalid Sole intenar odial S (12)	ly + ly by nce/ Staff?	Asbes (i.e.	tos Cont thermal surfa	scription taining M I systems cing, VA miscellar	faterial s insula T, or	(ACM)	(Amount Specify F or LF)	Removal	Repair	ype Encapsulate	Enclosure
	Yes	No	N/A			-1 01				200.05		+	+	+
Exterior Siding			X		Exte	erior Sid	aing		30	000 SF	x	+	+	
												-	+	
Name of Registered Waste Haule United Containers	er	H	IJDEP W lauler ID 2459		Cubic of Wa	Yards ste		G.R.O.	orthodologic Control	ered Land	fill			
City, State				EVENOW.		sal Date 2		City, State Morrisv		A 19067				
Completed by Anthony T Perna	Title Presi	dent			5	Signature				1.00	Date 2/20/1	2		



CK 2420

2/16/12		Carr	nden C	ity Publi	r/Operator (c School	District			/ 15		Table Comments	
gencies Notified Type Notification		201		nt Stree	t			<u> </u>	110	To all the second	Harrier P.	
EPA Initial Amended Amendment	#	City,	State, Zi nden N	ip Code IJ 08102		The Control of the Co			- CO-1007		The Control of the Co	1
DOH Emergency (in justification) Cancellation	ncluding		e of Con ve Nico			, versel	er eine waten	Telephone Number	er e.	*********]	
J DON E		FA	ACILITY	INFORM	ATION	÷	To allifu (4)	GARLEST PET TORS	٠٠٠			_
Name of Facility Where Abatement is Taking Davis Elementary School Street Address	Place (3)					Sch	acility (4) nool (K-12) ochapter 8 (ner (i.e. priv	Other than K-12) ate & commercial	buildin	gs, ho	mes,	
34th & Cramer Streets						etc.	.)	# of Floors		g. Age		
City (5) Camden NJ 08105						1000+		3				
County (6)		Cour (STA	nty Code	e (7) ONLY)				f being demolishe	u) ——			_
Name of Monitoring Firm Hired by Building N/A	Owner (8)	A	SCM No).		of Abater naco Inc	nent Contra	actor (9)	-			
Street Address						Address Box 329						
City, State, Zip Code					City, S	State, Zip	Code NJ 0809	1				
Project Manager for Monitoring Firm		Tele	ephone N	No.	Telep	hone No. -753-98		License No 00727				
Start Date (10)	Scheduled	Comple	etion Dat	e (11)	Name	of OSHA	Monitor	1 1 2 2	10			
2/17/12	2/18/12					naco Inc			-		-	-
Occupancy Status During Abatement (Che	ck Only One)					t Address Box 329						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: After 5 PM	Period of Ab mal Facility H	atement lours	t		City,	State, Zip	Carrier Commence	91				
tol Olioi Doddino.												
						0.000						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novation molition				Mini × Glov	-Enclosure	nt with Negative P edure (*) and Non-Friab			e	
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf		0.000				Mini × Glov	-Enclosure		le Prod	edure Abate	ment	:
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	De ls L	molition		•		Mini Glov Non	-Enclosure	edure	le Prod	edure	ment	t
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	Is L No Used Mair	molition	by e/	(i.e. th		on of Material ms insula	-Enclosure yebag Proc -Exempted (ACM)	edure	le Prod	edure Abate	ment	t
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Is L No Used Mair	ocation ormally Solely stenance	by e/	(i.e. th	Description of the control of the co	on of Material ms insula VAT, or laneous)	-Enclosure yebag Proc -Exempted (ACM)	edure (*) and Non-Friab Amount (Specify SF or LF)	le Proo	edure Abate Ty	ment pe	T
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Is L No Used Mair Custo	ocation ormally Solely stenance dial Sta (12)	by e/	(i.e. th	Description of the control of the co	on of Material was insula VAT, or laneous)	-Enclosure yebag Proc -Exempted (ACM)	Amount (Specify SF or LF)	Removal x	edure Abate Ty	ment pe	T
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is L No Used Mair Custo	ocation ormally Solely stenance dial Sta (12)	by e/	(i.e. th	Description of the control of the co	on of Material was insula VAT, or laneous)	-Enclosure yebag Proc -Exempted (ACM)	edure (*) and Non-Friab Amount (Specify SF or LF)	Removal x	edure Abate Ty	ment pe	T
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Room 210 A	Is L No Used Mair Custo	ocation ormally Solely stenance dial Sta (12)	by e/	(i.e. th	Description of the control of the co	on of Material was insula VAT, or laneous)	-Enclosure yebag Proc -Exempted (ACM) tion,	Amount (Specify SF or LF) 224 SF less then 8 lf	Removal x	edure Abate Ty	ment pe	T
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Room 210 A Music Room	Is L No Used Mair Custo	ocation ormally Solely stenance dial Sta (12)	by e/ aff?	(i.e. th	Description of the control of the co	on of Material ms insula VAT, or laneous) Tile	-Enclosure /ebag Proc -Exempted (ACM) tion,	Amount (Specify SF or LF) 224 SF less then 8 If	Removal x	edure Abate Ty	ment pe	T
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Room 210 A	Is L No Used Mair Custo	ocation ormally Solely stenance dial Sta (12) No	by e/ aff?	(i.e. th	Description of Cubic Yard of Waste 2	on of Material ms insular VAT, or laneous) Tile ulation	-Enclosure vebag Procu-Exempted (ACM) tion, Name of G.R.O.	Amount (Specify SF or LF) 224 SF less then 8 lf Registered Landfi	Removal x	edure Abate Ty	ment pe	T
Scope of Work (Check All That Apply) ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Room 210 A Music Room Name of Registered Waste Hauler	Is L No Used Mair Custo	ocation ormally Solely stenance dial Sta (12) No	by e/ e/ hff? N/A DEP Wauler ID N	(i.e. th	Description Cubic Yard of Waste	on of Material ms insular VAT, or laneous) Tile ulation	-Enclosure yebag Proc -Exempted (ACM) tion, Name of G.R.O. City, Sta	Amount (Specify SF or LF) 224 SF less then 8 If Registered Landfi W.S.	Removal x	edure Abate Ty	ment pe	T

1202-4448 Check #3857

Date of Notification				Na	ame	e of	Bui	lding	Owner /	Operat	tor::	(2) P @ 1	= n n n i	FF	ing 1			
Agencies Notified	2/21/12 Type Notific	action	-						ship BC	DE			<u> </u>					
EPA	туре моши	auon		18786		t Ac				4			THE CONTROL OF THE CONTROL OF THE PROPERTY.					
☐ DEP		al		_	_	-		Zip (Code	1	110	iii cco	A 2 0000	- 1	111			
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□ DOH		ergency		Na	ame	e of	Cor	ntact						Te	lepho	ne N	lumb	er
☐ DCA	☐ Can	cellation		M	arc	co F	err	nand	ez		í	ASBESTO.	S CONTECT &					
					FA	CIL	.ITY	INF	ORMAT	ION		i if	ENCHIG	California de Proposition de la California de la Californ				
Name of Facility Wh	nere Abatem	ent is Taking P	lace								ility	(4) · · · · · · · · · · · · · · · · · · ·	i ku anakhmanangari	1 ×2 1, 1	(-) and	1		
Reynolds MS	Laboratoria				Hite					School	1100					· 29		
Street Address		_										er 8 (Other than					N 14	
2145 Yardville-Ha	amilton Sq	uare Road									_	private & com					etc.)	
City (5)		County (6)	To	OUR	141	Cod	10 (7	7)	Squar	re Feet	τ	# of Floo	rs	Bia	g. Ag	е		
Hamilton Twp.		Mercer		Oui	ity	Cou	ie (7)	Curro	nt Lloo	/D	rior if being de	maliahad)					
namilion iwp.		Mercer							Scho		; (F)	nor ir being de	monsnea)					
Name of Monitoring	Firm Hired I	v Building Owr	ner (8	8)		ΙΔ	SCI	M No.			ato	ment Contract	or (9)			_	_	
Pars Environmen		by building own	101 (0	′,			013			eTech			01 (3)					
Street Address			-							Addre				-				
6 A South Gold D										ox 25				~				
City, State & Zip Co												p Code						
Robbinsville, NJ Project Manager for		Eirm	Tele	nh	one	NI	mh	~		hone N		NJ 08048	License	Nive	nh nr			
Roberto Feliz	wormorning i	11111	609					31		265-21			License		0052	g		
Scheduled Start Dat	e (10)	Scheduled Cor					_			Over the second		Monitor			2002		_	
3/5/12			22/12/2006	3/12			,		100000000000000000000000000000000000000	L Ana								
Occupancy Status D					4500					Addre	-							
		During Entire P				aten	nen	t		laddo						********		
	Performed O	utside of Norma	al Ho	ours	3							p Code						
Describe: Facility Occu	iniad During	Abatamant							West	mont,	, N.	J 08108						
Scope of Work (Che				-						-						-		-
Coope of Work (one	on an triat a	pp.3/										Full Conta	ainment with	Neg	ative	Pre	sure)
≥3 sf or ≥3 lf			\boxtimes	F	Rer	nova	ation	1			Ē	Mini-Encl						
≥160 sf ≥260) If			I	Der	nolit	tion					Glove Ba	g Procedure	s				
											\geq		npted and N					
	cation of					ion	٦			scriptio			Amount		Aba	tem	ent T	ype
	os-Containin erial (ACM)	ig		Sole		Use bv	a		Asbest Mate	os-Cor erial (A			(Specify SF or LF)				Ш	_
	E ABATED	N.7	Maii	nter	nán	ice o	5880530		(i.e., the	ermal s	syst	tems		,	Rer	Re	nca	Enc
in	Facility		Cus			Staf	f?	i	nsulation						Remova	Repair	Encapsulate	Enclosure
	(13)		Yes		(2) 10	N/	Α		or other	miscei	lian	eous)			<u> </u>		ate	6
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Freezer			H	+	半	╁┾	┽┼		wastic (noie	חט	illing)	>1 SF			H	ዙ	H
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Agencies Notified	Type Notification			Street Ad 4000 F	ddress	/ ROAI)	, /				112	laments 1	7	
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X DOH X DCA	Emergency justification) Cancellation	(including		Name of	and the second			đ .	· · · · · · · · · · · · · · · · · · ·	Tel	enhana Ni.	anh as	1		- Language St.
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Name of Monitoring Firm ENVIRONMENTAL		Owner (8)		ASCM 0045					tement Con		CONTRACTOR AND THE REAL PROPERTY.	Ą			
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City, State, Zip Code MATAWAN, NJ 077	47					7			ip Code IVER, NJ	0888	2				
Project Manager for Mon TOM GEIGER	itoring Firm			Telephor 732-29	ne No. 90-2217			hone N -432-8			License N 01111	lo.			
Start Date (10) 3/6/2012		Schedule 3/20/20		mpletion [Date (11)				HA Monitor SYSTEMS	S OF	AMERIC	Ą			
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MAIN FLO			Х				ING T				00 SF	X			
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Print Form

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D&S Proj. #: MS 12-72	J 1 6	-1				s Abatement and 12:120)		APPROV	50		7	
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			FAC	LITY INFORM	ACITA	1	- 41 H) HILLING	Sagar				
Name of facility where abatement	is taking pla	ace (3)					Type of Facili		5			-
A. ROBERT DILL								ool (K - 12)				
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					_	D & S RESTOR	RATION, INC.					
Street Address						Street Address						
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-wy vizio, zip void						City, State, Zip Code						
roject Manager for Monitoring Firm	n	I.P.	hone Numb	er		Paterson, NJ 0 Telephone Number		License	Alternal	101		
		1				973-345-8020			0159			
Start Date (10)	Sched	. Complet	ion Data (1	1)	-	Name of OSHA Mo	nitor				-	
02/23/12	02/29					D & S Restora	tion, Inc.	hus samulai Prijing			-	
Occupancy Status During Abateme						Street Address						
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Abatement performed outside Describe:		facility hou	176-			ony, orane, mp oom						
Other-Describe: NORMAL F	10URS				_	Paterson, NJ 0	7503					
Scope of Work (chack all that appl	y)						Full Containment	w/nogativa	proco	uno		
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≥160 sf or ≥260 lf	Demolition	1	:				Glovebag proced Non-Exempted (rishle	nmo	dura	
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abated in facility (13)	Yes	No	N/A	manner (ALAVI		(Specify LF)	J. U.	y	a	a	L C
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registered Wests Hauter D & S RESTORATION, INC.	NJDE 135	P Hauler		ubic Yards of V	Vaste	Name of Registered			,	1		
ity, State	1,13	,	Disposal D	YD	-	TULLYTOWN, City, State	, RESOURCE R	ECOVER	Y			
PATERSON, NJ 07503			02/24/1:			TULLYTOWN	. PA					
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ASB-41 '	Do not use	this form	for asbesto	s licensure exe	mpted	activities.						-

State of NJ

D&S Proj. #: MS 12-72

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

								(inc.)	C	e is in	J G	100			
Date of Notification (1)	Na	ame of Bu	ilding Owr	ner	Operator (2)	1103001111111			150		1 153	-11 111	-/	<i>(</i>)	
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Agencies Notified Type Notification	n St	reet Addre	ss			rine and			l F	EB 037	012	1 300	11		
		419 OAK	STREE	ET									9.7		34
DEP Amendment #:	Ci	ty, State, Z	Zip Code					T	L	BESTÚS CUMA	in Z	1			
DOL Emergency		GARWO	OOD, NJ	0	7027				- 11	LICENSING	101 9:		ī		
DOH (including	Na	me of Cor	ntact	_						Telepho	ne Numl	ber	edge. n	Sirina.	
justification)		A. ROB	ERT DII	LL									¥8		
Cancellation					ITY INFORMA	TION									
Name of facility where abatement is	taking play	ce (3)							TT:	Type of Facility	(4)				
Name of facility where abatement is	laking plat	<i>Je</i> (3)									ool (K - 1	12)			
A. ROBERT DILL										Subc	hapter 8	(Other th	an K	-12)	
Street Address		NA PLANTAGE		1000						Other Pldge	r (Private s./Homes	e/Comme	rcial		
419 OAK STREET									-	Square Feet	# of Fl		В	dg. A	ge
City (5)	Coun	ty (6)				Cour	nty Code ((7)	=						
, , ,					1	(Stat	e use only	y)		Current Use (Prior if b	eing dem	olish	ed)	
GARWOOD															
Name of Monitoring Firm Hired by Bl	e of Monitoring Firm Hired by Bldg. Owner (8) ASCM									ontractor (9)					
	ne of Morntoning Firm Filled by Blug. Owner (b)									ΓΙΟΝ, INC.			10000000		
Street Address							Street Ad								
				_			20 Ca	lifornia		<u> </u>					7.112
City, State, Zip Code										12					
5 M 1 T T		LDI	none Num	ho			Telephon	son, N.	Paragonal Strategy	J3	Licer	se Numb	er		
Project Manager for Monitoring Firm		P	ione num	ine	ile			345-80			Lioui	00159	,,,,		
			- 5 1 7	4.41		_	Name of	OSHA I	Monito	r					
Start Date (10)	Sched	. Completi	on Date (11)	7.		D & S	S Resto	ration	n, Inc.					
02/23/12	02/29						Street Ad	dress	1657						
Occupancy Status During Abatement							All Manual Control	lifornia		nue					
Facility closed/vacated during e Abatement performed outside of Describe:	of normal f						City, Stat								
Other-Describe: NORMAL HO	OURS			-		- 📙	Pater	son, N.							
Scope of Work (check all that apply)		-84							=	III Containment	w/negat	ive press	ure		
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Registered Waste Hauler D & S RESTORATION, INC.	NJDI 135	EP Hauler 506	IU#		YD	vasie				ESOURCE I	RECOV	ERY			
City, State			Disposal	_			City, S								
PATERSON, NJ 07503			02/24	/12			TUL	LYTO	WN, I	PA					
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESID	ENT			Signature						02/	e 17/12			
Δ C R_ Λ 1	Do not us	e this form	for asbes	sto	s licensure ex	empte	d activities	3.							

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D&S Proj. #: MS 12-69

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

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Date of Notification	on (1)	Nam	ne of Buildi	ng Owner	Operator (2)			1		and the state of t				
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DOL	Emergency	- N	MAYWO	DD, NJ	07670		And Montage	N. S. S. S. S. S. S.			a programma and the			
⋈ DOH	(including justification)	Nam	ne of Conta	ct				1000	Telepho	ne Nůmbei				
☐ DCA	Cancellation	F	PETER G	EOGHE	GAN		ASS.		_\					_
	·			FACIL	ITY INFORMA	ATION								
Name of facility	where abatement is t	aking place	e (3)					Ту	pe of Facility	(4) ol (K - 12)				
										hapter 8 (C		ın K-1	2)	
PETER GEO	GHEGAN							1	☑ Other	(Private/C	ommer		-,	
Street Address									Bldgs	./Homes, e	etc.		- Λα	
619 PALME	R AVENUE							S	quare Feet	# of Floo	rs	Bla	g. Age	,
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		BERG	GEN			(State	, use only)		Junein 030 (1 1101 11 2011	ig donne		,	
MAYWOOI	oring Firm Hired by Bl			-	ASCM No.		Name of Abateme	nt Con	tractor (9)				0257	
Name of Monto	7 mig 7 mm - m = 2 2 7 = 2	-3					D & S RESTO	RATI	ON, INC.					_
Street Address						-	Street Address							
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City, State, Zip C	Code						City, State, Zip Co							
							Paterson, NJ		3	II isana	e Numbe)r	_	
Project Manager	r for Monitoring Firm		Pho	ne Numb	er		Telephone Number 973-345-80			I Charleson A. Inc	e Numbi 00159	31		
							Name of OSHA M							
Start Date (10))	Sched.	Completion	n Date (11)		D & S Restor		Inc.					
02/28/12		03/09/	/12				Street Address	-						
	us During Abatement	(Check on	lly one)				20 California		ue					
☐ Facility clo	osed/vacated during e	entire perio	d of abaten	nent.			City, State, Zip Co	ode						
	nt performed outside of		acility hours	3-		_	D . NI	0750	2					
Other-De	scribe: NORMAL HO	OURS	and the second				Paterson, NJ							==
Scope of Work	(check all that apply								Containmer ni-enclosure	it w/negativ	e press	ure		
$\ge 3 \text{ sf or } > 3 $	<u>3</u> If ⊠	Renovation	n					Glo	vebag proce	dure				
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The second secon	N, NJ 07503	[02/29/	Signature		TOLLITO			Date)			
Completed by BOGDAN	(Print or Type)	Title PRESID	ENT							02/1	18/12			
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BOGDAN IULL	ZIC	PRESID		for ochest	na liconeuro ax	omptod	notivities		- July 1	.,,,,,			-
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≥3 sf or >3 lf		Renovatio						Mini-enclosur	codure				
Scope of Work (che								Full Containm	11 July 11 To	e press	ure		
Dascriba:	O: NORMAL I	OURS					Paterson, N	J 07503					
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02/18/12		02/20					Street Address						
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							973-345-8 Name of OSHA			00159			
roject Manager for	Monitoring Firm		PI	one Numb	or		Telephone Num	ber	Lloen	on Num			
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ity State, Zip Code		-	Oc				20 Californ			-	-		
troet Address					1		Street Address					7.11.	
								ORATION, INC				~	
Name of Monitoring	Firm Hired by				ASCM No.	-	Name of Abater	nent Confractor (9)			-		
GARWOOD		UN	ION			(Stat	a use only)	Current Us	e (Prior if be	ing dom	nolishe	(D)	
Cily (5)		Coun	ty (6)				ty Code (7)						,
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Street Address		If the same of the same			, 1			N X O	nor (Privale dgs./Homes	Committe	rcial	-2-	
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name of facility who	ero abatement l	s teking pla	C6 (3)			+		Type of Fac	hit (4)		TH.	Sind	10.27
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gencies Notified	Type Notificat	tion 3	troot Addre	005		- up-q-	80			THE PERSON NAMED IN	endiana.	the pro-	elaka bisar
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State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120)

D&S Proj.	#: <u>MS 12-73</u>		(Pursua	ant to	NJAC	5,00 an	u 12.120)	TE !		W 16		.*		
Date of Notification	. (1)	Name of E	Building Owne	er/Ope	rator (2)		11.7			2012		1		
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Agencies Notified	Type Notification	Street Add	iress		7.				and the same of the same					
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DOL	Emergency	GARV	VOOD, NJ	07027	7			IV-W	Tolophor	ne Number				-
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☐ DCA	justification) Cancellation	ANTO	ONIETTE I	OI FA	BIO				_ 1			_	_	_
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		1: -1 (2)						Тур	e of Facility	(4)				
Name of facility v	vhere abatement is ta	king place (3)								ol (K - 12)	ther the	V 12	ν.	
ANTONIETT	E DI FABIO							4		hapter 8 (O (Private/C			.)	
Street Address			144						Bldgs	./Homes, e	tc.			
242 SECONI	AVENUE							Sq	uare Feet	# of Floor	rs	Bldg	. Age	
	AVENCE	County (6)					Code (7)	-		- if hair	- domoi	ichod		_
City (5)						(State	use only)	Cı	urrent Use (Prior it bein	ig demoi	isneu		
GARWOOD)	UNION		1 40	CM No.		ame of Abateme	ent Contr	ractor (9)					_
Name of Monito	ring Firm Hired by Blo	lg. Owner (8)		AS	CIVI NO.	11	D & S RESTO							
						- 5	treet Address							
Street Address							20 California	Ave.					_	
	odo					c	ity, State, Zip Co							
City, State, Zip C	,ode						Paterson, N.			Lilianna	e Numbe	or		
Project Manager	for Monitoring Firm		Phone Nur	mber		- T	elephone Numb 973-345-80				00159	.,		
Project Manage.							Name of OSHA							
Start Date (10		Sched. Com	pletion Date	(11)			D & S Resto		Inc.					
	,	02/20/12					Street Address							
02/18/12	us During Abatement		e)				20 California	a Avenu	ie					
☐ Facility of	osed/vacated during 6	entire period of a	abatement.			10	City, State, Zip C	ode						
Abatemer	nt performed outside of	of normal facility	hours-					1 0750	•					
Describe:	escribe: _NORMAL HO	OURS				- 1	Paterson, N			-t/pagatis	o proce	ure		=
Scope of World	k (check all that apply)							Containme i-enclosure	nt w/negau	ve press	uio		
		Renovation						I Glo	vehag proc	edure		17.	J	
>160 sf o	or >260 lf	Demolition						☐ No	n-Exempted	(*) and No	n-friable	Proce	E	2000
		Is location nor	mally used so	olely					Amou	nt	e m	е	n	E n
Location	s-containing	by maintenand staff(12)	e/custodiai	_	Descrip	otion of a al (ACM)	sbestos-containi	ng	(Spec	ify SF or	0	p a	a	C
material	(acm) to be n facility (13)		No N/	/A	matorie	(,,			LF)		v e	l r	р	
, and the second				-	PIPE INS	TAJUS	ON		36 L FT					
BASEMEN'	Γ		X	4	III	, C D. 111							旦	빆
				+									빋	부
				=								빋	빆	부
			-	-									Ш	
Registered Wa	aste Hauler	INJDEP H	lauler ID#		bic Yards	of Waste	Name of Regi TULLYTO	stered La	andfill	RECOV	ERY			
D & S RES	TORATION, INC.				YD			WN, R	ESOURCE	RECO	D.C.			
City, State				sal Da 20/12			City, State TULLYTO	OWN, P	A					- 1
PATERSC	N, NJ 07503	T=		Z0/12	Signature		1			Dat				
Completed by	(Print or Type)	Title PRESIDEN	T							02/	17/12		-	
BOGDAN	JOLDZIC	* Do not use th	ie form for as	shestos	s licensure	exempte	ed activities.							

0 -1-0			Stat	te of NJ		112 U8:16a	m PU	01/0	U1
D&S Proj. #: MS 12-70		No (P)	itification of A	sbestos Abatement	the administration of appropriate and appropri	0.000			
		1, 0	Fandlif (D M/N	AC 8:60 and 12:120)	Nd Dent of	APPROVE Health & Si	D ania-	Comi	
Date of Notification (1)	Name	o of Duffding	Ownor/Operator (VICAN	Hu	100	361 VII	ces
10 12 1/11 16 1/11 12						(dignature)		(4)	
Agencies Notified Type Notifics	tion Street	RIH JERS	EY DEV. CEN	TER	Date; 2116	ell I	nė: 🧵	-102	MM.
☐ EPA ☐ Initial ☐ Amended				I DU LI FEB.	0 2 WILL TIME	Charge on Francisco		Marie Language	
Amondonaut #	City. 5	MINNISIN State, Zip Coo	K ROAD						
DOL Emergency		TOWA, NJ		ASELSTOS	CONTRUL &	1		- 627	
DOH (Including	1 Females	of Contact		1106	NSHIG	ļ			
DCA Justification)		IAN J. HO	BIG	4	Telephone	Number			
		F,	ACILITY INFORM	AATION					
Name of facility where abetement is	s taking place (3))		WAT TOTAL	1 /				
MAIN SCHOOL BUILDING					Type of Facility (4	(K - 12)			
Street Address						pter 8 (Othe	tla		σ,
	•				Other (F	rivate/Com	mothi i iliai	1 K-12	2)
169 MINNISINK ROAD					Bldgs./l-	lomes, etc.			
City (5)	County (6)			County Code (7)	Square Feet #	of Floors		Bldg	. Age
TOTOWA				(State use only)	Current Usa (Pric			-	
Name of Monitoring Firm Hired by B	PASSAI	C				or a perug d	errolt	ated)	į.
ENVIRONMENTAL CONNE	CTTON DIO		ASCM No.	Name of Absteme	mt Contractor (9)	-William or u	-		
Street Address	CHONING		N/A	D&S RESTO	RATION, INC.				
120 NORTH WARREN STRE	ET.			Street Address		mandation,:			
City, State, Zip Code	15 T			20 California					
TRENTON, NJ 08608				City, State, Zip Coo					
Project Manager for Monitoring Firm	to the second se	Phone Num	iber	Paterson, NJ e					
BRIAN J. HOLDIG		609-392-4		973-345-802		icense Nur			
Start Data (10)	Sched. Com	pletion Date (Name of OSHA Mo		0015	У.		
02/16/12	02/20/12			D & S Restora					
Occupancy Status During Abetement	Chack only	., ·····		Street Address		***************************************			. a
Facility closed/vacated during or	other period at -			20 California A					
Describe:	l normal facility i	hours.		City, State, 7ip Cod	8				
Other-Describe: NORMAL HO	URS			- Potornous NT o	7500				
Scope of Work (check all that apply)				Paterson, NJ 0					
	enovation			Ä	Full Containment w/ne Mini-englosure	gative pres	sure		
≥160 af or ≥260 lf D	emolition				Glovebag procedure				
Location of	location norma	lly used solel	(I		Non-Exempted (*) and	Non-friable	proc	odur	0
ashesine-containing Direction (acm) to be Si	y maintenance/d taff(12)	custodial	1	of asbestos-containing	Amount	R	R	E	E
abated in facility (13)			material (A	CM)	(Specify SF. o	r m	p	n	n
BASEMENT		N/A			LF)	V	2	a D	Ĺ
DASBMENT	e X		PIPE (WRAI	2 & CUT)	60 LFT	e ⊠	1	F	-
							片	片	1
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							1	H	#
legistered Waste Hauler	NJDEP Hauk	- M					H	H	#
D & S RESTORATION, INC.	13506		ibic Yards of Wa		Landfill		-	<u> </u>	11-1
Hy, State PATERSON, NJ 07503		Disposal D	ite ·	City, State	RESOURCE RECO	VERY			ا
Completed by (Date - T		02/17/12		TULLYTOWN.	ÞΔ	MIRCEO MARKETON			
DOVER ANT TOTAL	e ESIDENT		Signature	1		ite			-
11			licensure exemp		1	/15/12			
	דומד פורוז סעם זרוו	ii for asbestu:	licensure exemi	oted activities		120112	_		

D&S Proj. #: MS 12-70

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

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Date of Notificatio			Name of B	uilding Owr	ner/Operator (2	2)			L 0 L	1 11	厚	117%		
0 2 /1			NORTH	I JERSEY	DEV. CEN	ΓER								
Agencies Notified	Type Notificat	ion	Street Add	ress				11111	FED	0 000	ù.	17		
☐ DEP	Amended	- 11	169 MI	NNISINK	ROAD			ايوا الطال		- Z(2)				
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DOH	(including justification)	1	Name of Co						Telephor	ne Numbe	ŗ			
☐ DCA	Cancellation		BRIAN	J. HOLE	BIG		183				Assess			
				FAC	ILITY INFORM	MATION	L							
Name of facility w	vhere abatement i	s taking pl	ace (3)					Ty	pe of Facility	(4) ol (K - 12)				
MAIN SCHO	OL BUILDING									apter 8 (0		oon K	12)	
Street Address						*****			22.20	(Private/C			-12)	
										/Homes, e		loidi		
169 MINNISI	NK ROAD			-			-	_ 5	Square Feet	# of Floo	rs	В	dg. A	ge
City (5)		Cou	inty (6)				nty Code (7)	-						
TOTOWA		РА	SSAIC			(Sta	te use only)	110	Current Use (P	rior if beir	ng dem	olish	ed)	
Name of Monitori	ing Firm Hired by			-	ASCM No.	-	Name of Abater	ment Con	tractor (9)					
	ENTAL CONNI		530,177		N/A		D & S REST							
Street Address	ENTAL CONN	SCHON	INC		IVA	-	Street Address	TORATI	ion, nvc.					
	WARREN STR	FFT					20 Californ	ia Ave						
City, State, Zip Co						_	City, State, Zip C				offere		3,000	7
TRENTON, N							Paterson, N	JI 07503	}					
Project Manager for		<u> </u>	TF.	hone Num	ber		Telephone Num			License	Numb	er	_	
				500 202 4	200		973-345-8			0	0159			
BRIAN J. HOI Start Date (10)	CBIG	ISchei		509-392-4 tion Date (1			Name of OSHA	Monitor						
				tion Date (1	.,		D & S Rest	oration,	Inc.					
02/16/12			0/12				Street Address							
Occupancy Status		8		2			20 Californi		ie					
Abatement	ed/vacated during performed outside	of normal					City, State, Zip (Code						
Other-Desc	ribe: NORMAL H	OURS					Paterson, N	NJ 07503	3					
Scope of Work (d	check all that apply	y)						Full	Containment v	v/negative	press	ure		*****
\times >3 sf or >3	lf 🛛	Renovati	on					-	-enclosure					
≥160 sf or ≥	260 lf	Demolitio	n				*		vebag procedu n-Exempted (*)		friable	proc	edure	r:
Location of		Is location	on normally	used solel	у						R	R	E	
asbestos-co	ontaining		enance/cu	stodial	Descript	ion of a	sbestos-containii	na	Amount		e m	e	n	l E
material (ac abated in fa		staff(12)		1	- material	(ACM)			(Specify S	SF or	0	a	c a	C
abateu III ia	icinty (13)	Yes	No	N/A					_, _, _,		v e	i	р	-
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Registered Waste		NJD	EP Hauler	· ID#	Cubic Yards of	Waste	Name of Regis	tered Lar	dfill		-1		_	
D & S RESTO			506		2 YDS		TULLYTOV			ECOVE	RY			
City, State				Disposal			City, State						300-	
PATERSON,				02/17/			TULLYTO	WN, PA		T2				
Completed by (Pri BOGDAN JO		Title PRESID	DENT		Signature					Date 02/15	/12			
ASB-41		Do not us	se this forn	n for asbest	os licensure e	xempted	d activities.			-				

003459 State of NJ Nutification of Asbestos Abatement D&S Proj. #: MS 12-71 (Pursuant to NJAC 8:60 and 12:120) APPROVED MA Depth of Health & Senior Services Date of Notification (1) Name of Bullding Owner/Operator (2) 10 |2 |/ 1 |7 |/ 1 |2 | (signature) Agandes Notfled VICTOR PAREJA Type Notifluxtion 1112 Time 1:49 A Street Address ☐ EPA Initial Amended DEP 912 WESTMINSTER AVENUE 9019 Amendment #; City, State, Zip Code X DOL M Emergency HILLSIDE, NJ 07205 X DOH (including Name of Contact Justification DCA Telephone Number Cancellation VICTOR PAREJA FACILITY INFORMATION Nome of facility where abatement is taking place (3) Type of Facility (4) VICTOR PAREJA School (K-12) Street Address Subchapter 8 (Other than K-12) Other (Private/Commercial 912 WESTMINSTER AVENUE Bidgs./Homes, etc. City (5) Squaro Foet # of Floors County (6) Bidg. Age County Code (7) (State use only) HILLSIDE Current Use (Prior if being demolished) UNION Name of Monitoring Firm Hired by Bidg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Phone Number Telephone Number License Number 973-345-8020 00159 Start Date (10) Sched, Completion Date (11) Name of OSHA Monitor D & S Restoration, Inc. 02/25/12 03/05/12 Occupancy Status During Abatament (Check only one) Street Address Pacility closed/vacated during entire period of abatement. 20 California Avenue Abatement performed outside of normal facility hours-City, State, Zip Code Describe: Other-Describe NORMAL HOURS Scope of Work (check all that apply) Paterson, NJ 07503 ≥3 sf or >3 lf Full Containment winogetive pressure Renovation Mini-enclosure ☐ ≥160 sf or ≥280 if Demolition Glovehag procedure Non-Exempted (*) and Non-friable procedure is location normally used solely Location of asbestos-containing by maintenance/custodial material (acm) to be staff(12) Description of asbestos-containing ¢ Amount 0 n abated in facility (13) material (ACM) m n (Specify SF or P Yes C No NA 0 G а 8 V BASEMENT p BOILER INSULATION e BASEMENT 72 SQ FT PIPE INSULATION 85 L FT X Registered Waste Hauler NJDEP Hauler IO# 13506 Cubic Yards of Waste D&S RESTORATION, INC. Name of Registered Landfill 3 YDS TULLYTOWN, RESOURCE RECOVERY City, State Dispusal Date City, State PATERSON, NJ 07503 02/20/12 TULLYTOWN, PA Completed by (Print or Type) Signature BOGDAN JOLDZIC PRESIDENT Date A80-41 Do not use this form for aspessos licensure exempted activities. 02/17/12

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

			•			II-N		and the second second	This are	Statement of the			
Date of Notification (1) 0 2 / 1 7 / 1 2		VICTOR	PAREJA	er/Operator (2)		(5 Jb)			M	i		
Agencies Notified Type Notificat	ion S	treet Addre	ess				FFF	- 000	. //	H			
DEP Amended	- 1			ER AVEN	UE			~ P 2012		71			
Amendment #:	[ity, State,	Zip Code			į į			-	ğ :			
DOL Emergency		HILLSI	DE, NJ 07	7205		1	bast 1	1102 6	<u>-</u>	Ë			
DOH (including justification)	N	ame of Co	ntact				CONTRACTOR OF THE PERSON OF TH	Telephor	ne Numbe	rli			
DCA Cancellation		VICTO	R PAREJA	A				1		E s			
			FACI	LITY INFOR	MATION					· · · · ·			
Name of facility where abatement i	s taking pla	ace (3)		41-1-19		-100210-00-0	Ty	pe of Facility					
MICTOR DAREIA								=	ol (K - 12)				
VICTOR PAREJA			***************************************				-		napter 8 (0			-12)	
Street Address									(Private/C /Homes, e		rciai		
912 WESTMINSTER AVEN		1. (0)					= 5	quare Feet	# of Floo	rs	BI	dg. A	ge
City (5)	Cour	nty (6)			11	nty Code (7) te use only)	-	Durrant Llas (F	rios if bair		aliah	-d\	
HILLSIDE	UN	ION			(Otal	e use only)		Current Use (F	rior it beir	ig den	olisn	ea)	
Name of Monitoring Firm Hired by	Bldg. Owne	er (8)		ASCM No.		Name of Abater	ment Con	tractor (9)					
				v		D & S REST	ORATI	ON, INC.					
Street Address						Street Address							
_	- Contract					20 Californ							
City, State, Zip Code				0000000		City, State, Zip C							
						Paterson, N		<u> </u>					
Project Manager for Monitoring Firm	1	P	hone Numb	er		Telephone Num 973-345-8			License	Numb 0159	er		
						Name of OSHA				10139	-		
Start Date (10)	Sched	I. Complet	ion Date (11)		D & S Rest		Inc.					
02/25/12	03/0:	5/12				Street Address	,						
Occupancy Status During Abateme	nt (Check c	only one)				20 Californi	ia Aveni	ie					
☐ Facility closed/vacated during ☐ Abatement performed outside Describe:	e of normal					City, State, Zip (7:	1				
Other-Describe: NORMAL I	HOURS				_	Paterson, N	IJ 07503	3					
Scope of Work (check all that app	y)						=	Containment	w/negative	press	ure		
\boxtimes >3 sf or >3 lf	Renovation	on					terminal to the second	i-enclosure /ebag procedu					
≥160 sf or ≥260 lf	Demolitio	n						-Exempted (*)		-friable	proc	edure	
Location of	Is locatio	n normally	used solely	/						R	R	E	E
asbestos-containing	staff(12)	enance/cu	stodiai			sbestos-containii	ng	Amount (Specify	SE or	m	e p	n	n
material (acm) to be abated in facility (13)	Yes	No	N/A	materia	I (ACM)			LF)	31 01	0	a	a	L
	163	INO	IN/A			The state of the s				e	r	р	_
BASEMENT				BOILER				72 SQ FT			Ш		
BASEMENT		LX		PIPE INS	ULATI	ON		85 L FT					
										11			H
										1		Ш	닏
					Z1X/	TN	Anne d L	- IF:II		_ _ _	Ш	Ш	
Registered Waste Hauler D & S RESTORATION, INC.		EP Hauler 506		cubic Yards of YDS	vvaste	Name of Regis			ECOVE	RY			72
City, State	L_		Disposal D			City, State							
PATERSON, NJ 07503			02/20/1			TULLYTO	WN, PA						
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESID	DENT		Signature					Date 02/17	/12			
ΔSR_41		_	n for asbesto	os licensure	exempted	d activities.			1		EH. W		

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 12-71

135 1 15j <u>M3 12-71</u>			(Fulsi	Jant to NJA	C 0.0	J and 12.120)	1	The street of the street	er er og klige er skriverige	- a e, m	er Soome	región Georgia	Carrier Carrie
Date of Notification (1)	П	Name of	Building Owr	ner/Operator (2	2)			NEC	E I	17 5	21 6	711	, *
10 12 1/12 10 1/11 12		VICTO	R PAREJA	A			1 1 1		****	Y-10 44.4	-7/		
Agencies Notified Type Notifi	cation	Street Ad	dress					LI FEB	a 5 2	n:0	() i	711	
☐ DEP Amended				TER AVENU	JE					U.Z.	1.,		
DOL Amendment		City, State	e, Zip Code				1	ASLLSTO	i marija)1 0	J	1	
□ Emergen (including)	· 1L	HILLS	SIDE, NJ (7205			L	Lib	ENSING				
DCA justification								Telepho	ne Numb	er	the comments		
Cancellat	tion	VICT	OR PAREJ	A		100						on Astro	* -
			FAC	ILITY INFORM	OITA	1							
Name of facility where abatement	nt is taking pl	ace (3)					177	Type of Facility					
VICTOR PAREJA								=	ol (K - 12 napter 8 ((10)	
Street Address							7		(Private/				
912 WESTMINSTER AVE	ENUE						11-		/Homes, # of Floo	etc.			
City (5)	Cou	nty (6)			Cou	nty Code (7)	=	Square reet	# 01 1100	JIS	-	lldg. A	ige
THI LOUDE	1	TON				te use only)		Current Use (F	rior if bei	ng den	nolish	ned)	
HILLSIDE Name of Monitoring Firm Hired b		NION er (8)		ASCM No.	L,	Name of Abater	mont Co.	ntractor (0)			-		
		(-/,		ACON IVO.		D & S REST							
Street Address					-	Street Address	OKAI	ION, INC.					
						20 Californ	ia Ave.						
ity, State, Zip Code						City, State, Zip C	ode					11.00	
Project Manager for Monitoring Fi	rm.		Dhana Nasa			Paterson, N		3					
Toject Manager for Monitoring Fi		1	Phone Numb	er		Telephone Numl 973-345-8			License	9 Numi 10159			
Start Date (10)	ISche	d. Comple	etion Date (1	1)	_	Name of OSHA			1	,0,20,	-		
02/21/12	03/0			.,		D & S Resto	oration,	Inc.					
Occupancy Status During Abatem					-	Street Address							
Facility closed/vacated during	ng entire peri	od of aba				20 California City, State, Zip C	_	ue			-		
Abatement performed outsing Describe:		facility ho	urs-										
Other-Describe: NORMAL					-	Paterson, N	J 07503	3					
Scope of Work (check all that ap			- 28890				_	Containment w	/negative	press	ure		
≥3 sf or >3 lf								i-enclosure vebag procedu	e.				
≥160 sf or ≥260 lf	Demolitio		1 11					n-Exempted (*)		_	proc	edure	
Location of asbestos-containing	by maint	n normali enance/cu	y used solely istodial		on of o	sbestos-containin		Amount		R	R	E n	E
material (acm) to be abated in facility (13)	staff(12)			material (spesios-containin	g	(Specify S	F or	m	p	С	n c
abated in facility (15)	Yes	No	N/A					LF)		v e	i	a p	L
BASEMENT		X		BOILER IN				72 SQ FT		Ň	$\dot{\Box}$		
BASEMENT				PIPE INSU	LATI	NC		85 L FT		X			
					-								
										-			
egistered Waste Hauler	NJD	EP Haule	r ID# C	ubic Yards of V	Vaste	Name of Registe	ered Lan	ndfill		[L]	Ц	Ц	Ш
& S RESTORATION, INC	C. 135	06		YDS		TULLYTOW			COVER	Y			
ity, State PATERSON, NJ 07503			Disposal D 02/20/1:			City, State TULLYTOV	VNI DA						-Decition
ompleted by (Print or Type)	Title		-1	Signature		TOLLITOV	III, FA		Date		-		
BOGDAN JOLDZIC	PRESID	300000000000000000000000000000000000000							02/20/	12			
SB-41	* Do not us	e this forn	n for asbesto	s licensure exe	mpted	activities.							

2/5/

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1	1/2012			N	lame of Bui County of	Iding Owner/Opera	tor (2)					
Agencies Notified EPA	Type Notific	ation		S	treet Addre			FEB 2 3 2	4)17		7	
DEP DOL	Amende Amendm Emergen	ent #_	ding	C	ity, State, Z erona, N.	ip Code	1 1,000	L. C. C. C. C.		\hbride{\beta}	=	-
DCA	justificat Cancellat	ion) tion			ame of Con njeev Var		L	Telephone		,	- Same	4
Name of English Mark					FACILITY I	NFORMATION	247		- 570,000	_		
Name of Facility Where Hall of Records	B Abatement is T	aking Pla	ice (3)				Type of Faci	lity (4)	2000000			_
Street Address			_				School (K	-12)	E www.maney			
465 MLK Jr.Blvd							Other (i.e.	er 8 (Other than h , private & comm	(-12) ercial h	mildi	nae	
City (5)	All I						_ nomes, e	tc.)	Croidi t	Junun	iys,	
Newark							Square Feet 25,000 SF	# of Floors			J. Age	
County (6) Essex				C	cunty Code SE ONLY)	(7) (STATE	-	Prior if being den	nolishe	80-	_	
Name of Monitoring Fire	m Hired by Build	ing Owne	г	ASC	M No.	Name of Abates	ment Contractor			_		
(8) J& S Environm	nental Service	S		N/A	1	DIA Genera	al Construction	on Inc				
Street Address 2333 Rt 22 West		**************************************				Street Address	/					_
City, State, Zip Code Union, NJ 07083			_			City, State, Zip (Avenue, PM	IB Suite 218	200000	_	_	=
Project Manager for Mor	nitoring Firm		T			Clifton, NJ	07012					
Sherry Gelsomino	moning Firm			8-20	e No. 6-0073	Telephone No. 973-389-00	89	License No.				
Start Date (10)		heduled (etion [Date (11)	Name of OSHA		00693				
3/2/2012	3	/3/2012					Constructio	n. Inc.				
Occupancy Status Durin	g Abatement (C	heck only	one)			Street Address						
Facility Closed/Vacate Abatement Performed	Outside of Norr	Period of nal Facili	Abate	ement		1360 Clifton,	Avenue, PM	1B Suite 218				
Other - Describe: O	ccupied		,			City, State, Zip C Clifton, NJ 0						
Scope of Work (Check al	I that apply)			19-11		Olliton, 145 0	7012					
>3 sf or >3 lf 		-	enovat emol	W7/5/66		Goveba	g Procedure					
		1100000	ocatio		T	I_Non-Ex	empted (*) and	Non-Friable Pro		0.000 00		
Location o	f	Used	Sole!	v bv		Doggrinting of					emen pe	•
Asbestos-Containing Ma	aterial (ACM)	Main	tenan	ce/	Asbest	Description of os Containing Mate	erial (ACM)	Amoun!		T	T	
IN Facility	=0	10000	stodia taff?	ı	(i.e.,	thermal systems in surfacing, VAT,	sulation,	(Specify	20	70	Encapsulate	m
(13)			(12)			other miscellaneou	us)	SF or LF)	Remova	Repair	apsu	Enclosure
		Yes	Na						Va.	=	late	ure
oom 506		X	No	N/A	Radiator	Insulation		23 SF	X	-	-	
		-										
ome of Deal :									-			
ame of Registered Waste			-9 20023	IDEP V		Cubic Yards	Name of Regis	tered Landfill	4	L	-	
ervice Transport Gro	up			0990	110,	of Waste 1 CY	Minerva La	ndfill	4. 10.		2	
ty, State ew Castle DE			VICE CONTRACTOR			Disposal Date	City, State					
ompleted By	-					03/02/2012	Waynesburg	gh OH	8 <u>1</u>			
rutarth Jagad	Title	e esident			t and the second	Signature		Date		1		
41	110	Sidelli				1 1	~~	02/21/	2012			

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

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

□Ini ⊠A new □ E	start & merger	tificatio l Notific comple	n cation - #1 tion dates	Name of Building Owner/O CITY OF NEWARK Street Address 420 CITY HALL City, State, Zip Code NEWARK, NJ 07102		T T	0, 5			
Notifi □Ini ⊠A new □ E	itial Not mended start & merger	tificatio l Notific comple	cation - #1	Street Address 420 CITY HALL City, State, Zip Code		121 Er	1, 5	5		
new □ E	mended start & merger	Notific	cation - #1	City, State, Zip Code		7				2
new □ E ju	start & merger	comple)					
ΠE	merger		tion dates							
jı		TOWN LINE		Name of Contact		Teleph	one Nu	umber		
□ C		tion)	Jidding	MR. MEDHI MOHAMM	ADISH	-	······································	To the state of th		
	ancelle	ed	FACILITY INF	ODMATION			-			
- 1: DI:	(0)		FACILITY INF	Type of Facility (4)						
is Taking Pla EHOUSE	ice (3)			School (K-12)						
HOUSE				Subchapter 8 (other that	n K-12)					
				Other (i.e. private & com Sq. Feet: 15,000SF		ildings, hom Floors: 3	es, etc. Bldg.	.) . Age:	80+ ye	ars
				Current Use (prior if being	demolish	ed): FIRE	HOUS	E	1	
Ilda Owner	(8)	ASCM N	0.	Name of Contractor (9)	2012					
NC.		0004		ODEENIMOOD ABAT	EMENIT	CONSIII	TAN	TS. INC	: .	
					CINICIAI	0014301	- 1714	. 0, 1140	•	
				268 MAIN STREET					0/01	1
				City State, ZipCode			-		- 5	
3055				BUTLER, NJ 07405						
	phone Nu	umber		Telephone Number		Licens	e Numb	<u>oer</u>		
60	9-298-5	5520		070 400 0477		0084	0			
		1.65	D-4- (44)			0004				
		mpletion	Date (11)		C.					
-		e)		Street Address					5	
g Entire Per	riod of Ab	patement	t		ROAD					
				Oity, Otato, Lip Goog						
				FAIRLAWN, NJ					100000	
ly)					F 0		th Noa	ativa Dra	CCLIFA	
				_			iii ivey	alive i ie	33010	
				_	10000000		re			
0			☐ Demolition	Ä	Non-Eye	moted (*) a	nd Nor	n-Friable	Proced	dure
T	. Mannall	lu I land	Description of A				Abate	ment Typ	oe .	
Solely by	Maint./Cu	ustodial	(ACM) (i.e. ther	mal systems insulation, surfac			Remov	ve Repair	Encap	Enclos
Staff? (12	2)	NOW YOU	VAT, or other m	iscell.)	or	LF)				
YES		NA	MALL DIA	ETED	1	5.000SF	X		T	
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-					2		X			
	X						100000			\top
										1
			FLUE PATC	POWN ELOOP COVED	ING					_
				300 C	V Name	e of Rec	gistered L	andfill		
Se	e Below	v		Cubic Yards of Waste.		G.R.	O.W.S	City, St	Land	fill
nt Consulta	nts, Inc. –	Butler,	NJ 07405		Disposa 05/07	/2012			w Ford	
nt Consultai	NJ 04509							19067 215-73	6-1700	
	NJ 04509			Cimpatrice		Date				
, Newark, N	NJ 04509	DC 151	OT.	Signature	CP.	Date	Fe		6-1700	2012
	Sidg. Owner NC. 3055 1	Bidg. Owner (8) NC. Bidg. Owner (8) Scheduled Co 05/07/12 ment (Check only on g Entire Period of Ab e of Normal Facility F CCCUPIED Big. Bidg. Owner (8) Scheduled Co 05/07/12 Manual Co 15/07/12 Manual Co 15/07/12	ESSEX Bidg. Owner (8) NC. ASCM NOO04 Scheduled Completion O5/07/12 ment (Check only one) g Entire Period of Abatement of Normal Facility Hours - CCCUPIED ASCM NOO04 Scheduled Completion O5/07/12 Male Noon Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA ASCM NOO04 Scheduled Completion O5/07/12 MALE NOON NA ASCM NOO04 Scheduled Completion O5/07/12 MALE NOO04 ASCM NOO04 ASCM NOO04 ASCM NOO04 ASCM NOO04 Scheduled Completion O5/07/12 MALE NOO04 ASCM NO	Sidg. Owner (8) NC. ASCM No. 0004 ASCM No. 0004 Telephone Number 609-298-5520 Scheduled Completion Date (11) 05/07/12 ment (Check only one) g Entire Period of Abatement of Normal Facility Hours - CCCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hours - CCUPIED Signature Period of Abatement of Normal Facility Hou	Sq. Feet: 15,000SF Current Use (prior if being Current Use (prior if prior if prio	Sq. Feet: 15,000SF # of Current Use (prior if being demolish Sidg. Owner (8) ASCM No. 0004 GREENWOOD ABATEMENT Street Address 268 MAIN STREET City State. ZipCode BUTLER, NJ 07405 Telephone Number 609-298-5520 Telephone Number 973-492-0477 Scheduled Completion Date (11) Name of OSHA Monitor ENVIROVISION, INC. Street Address 20-21 WARGARAW ROAD City, State. Zip Code Telephone Number 10 of Normal Facility Hours - Demolition Demolition Gravity State. Zip Code Telephone Number 20-21 WARGARAW ROAD City, State. Zip Code Telephone Number 20-21 WARGARAW ROAD City State. Zip Code Telephone Number 20-21 WARGARAW ROAD City State. Zip Code Telephone Number 20-21 WARGARAW ROAD City State. Zi	Sq. Feet: 15,000SF # of Floors: 3	Sq. Feet: 15,000SF # of Floors: 3 Bidg Current Use (prior if being demolished): FIREHOUS	Sq. Feet: 15,000SF # of Floors: 3 Bldg. Age: Current Use (prior if being demolished): FIREHOUSE Sidd. Owner (8) NC. ASCM No. 0004 REENWOOD ABATEMENT CONSULTANTS, INC Street Address 268 MAIN STREET City State, ZipCode BUTLER, NJ 07405 Telephone Number 609-298-5520 Scheduled Completion Date (11) Scheduled Completion Date (11) O5/07/12 ment (Check only one) g Entire Period of Abatement of Normal Facility Hours CCCUPIED SIZE AND NA WIRE Renovation Demolition Demolition Demolition Demolition Demolition Description of Asbestos Containing Material Staff? (12) VAT, or other miscell.) WALL PLASTER Size I S,000SF # of Floors: 3 Bldg. Age: Current Use (prior if being demolished): FIREHOUSE Street Address 268 MAIN STREET License Number 00840 District Address 20-2447 Name of CSHA Monitor ENVIROVISION, INC. Street Address 20-21 WARGARAW ROAD City. State. Zip Code FAIRLAWN, NJ Full Containment with Negative Prescription of Asbestos Containing Material Staff? (12) VAT, or other miscell.) WALL PLASTER Sign PIPE INSULATION Signeric And Nor-Friable Signery Specify Sp	Sq. Feet: 15,000SF # of Floors: 3 Bldg. Age: 80+ yes Current Use (prior if being demolished): FIREHOUSE Sidg. Owner (8)

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

GAC Project # 2012-310 Name of Building Owner/Operator (2) Date of Notification (1) February 3, 2012 CITY OF NEWARK Notification Type Agencies Notified Street Address X EPA Initial Notification

In the state of the **420 CITY HALL** □Amended Notification City, State, Zip Code XDCA NEWARK, NJ 07102 X DOL ■ Emergency (including) Name of Contact Telephone Number X DEP- No Longer REQUIRED justification) MR. MEDHI MOHAMMADISH X DOH Cancelled **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) CHESTNUT STREET FIREHOUSE School (K-12) Subchapter 8 (other than K-12) Street Address ☐ Other (i.e. private & commercial buildings, homes, etc.) 87 - 89 ELM ROAD Sq. Feet: 15,000SF # of Floors: 3 Bldg. Age: 80+ years County Code (7) City (5) County (6) **ESSEX** (State Use Only) Current Use (prior if being demolished): FIREHOUSE NEWARK ASCM No. Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) 0004 BRIGGS ASSOCIATES, INC. GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 CROSWICKS ROAD **268 MAIN STREET** City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BORDENTOWN, NJ 08055 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 609-298-5520 MR. MIKE HOODAK 973-492-0477 00840 Scheduled Completion Date (11) Name of OSHA Monitor Scheduled Start Date (10) ENVIROVISION, INC. 02/21/12 04/30/12 Street Address Occupancy Status During Abatement (Check only one) □ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe Other - Describe: SUB 8 UNOCCUPIED FAIRLAWN, NJ Scope of Work (Check all that apply) Full Containment with Negative Pressure **X**Renovation Mini-Enclosure $\square > 3$ sf or ≥ 3 lf ≥ 160 sf or ≥ 260 Demolition Glovebag Procedure ■ Non-Exempted (*) and Non-Friable Procedure Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Location of Asbestos-Containing Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Material (ACM) in Facility (13) Remove Repair Encap Enclose or LF) Staff? (12) VAT, or other miscell.) YES NO 15.000SF X THROUGHOUT X WALL PLASTER X THROUGHOUT X PIPE INSULATION 525 LF THROUGHOUT X 2,000 LF X WIRE INSULATION X THROUGHOUT X **FIRE DOORS** 20 EA 790 SF X **BOILER ROOM** X **CEILING PLASTER** 5 SF X BOILER ROOM X **FLUE PATCH** MOTTLED BROWN FLOOR COVERING **BOILER ROOM** 4 LF X NJDEP Waste Hauler ID # 200 CY Name of Registered Landfill Name of Reg. Waste Hauler Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Disposal Date City, State Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 100 New Ford Mill 04/30/2012 NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 19067 NJ DEP # 4509 215-736-1700 Signature Date Completed by (Print or Type) SENIOR PROJECT February 3, 2012 RAYMOND C. PEDALINO MANAGER

OK#3582

Date of Notification (1) 2-17-2012)		1		Building O Manage	wner/Oper ement	rator (2)	ME	7)11 (1 17		ir man a rea	TE.	
Agencies Notified	Type Notification	200820		Street Add		ngston A	ve.		1.500					
DEP DOL	Initial Amended Amendment				e, Zip Cod ton, NJ			iller	8 23	2012	4.	1/4		
DOH DCA	Emergency justification) Cancellation		1	Name of O	Contact				Teleph	one Num	ber	1		
				FACILI	ITY INFO	RMATION		re 11: (4	1	F-1		1		
Name of Facility When Chilton Towers, A Street Address		ig Place (3)						of Facility (4 School (K-12 Subchapter	2) 8 (Other ti	nan K-12)	ad .	· velifierin	
220 Jersey Str.								Other (i.e. pretc.)	rivate & co	mmercia	l build	lings,	home	s,
City (5) Elizabeth				·····				re Feet	# of Flo	oors		dg. A 0+	ge	
County (6) Union				County Co				nt Use (Prio		demolish	ed)			- 10.400
Name of Monitoring Fi	irm Hired by Building	Owner (8)		ASCM	No.	1		tement Con			-			
n/a				n/a				ntracting,	LLC					
Street Address n/a						2	treet Addres 22 Troy L	ane						
City, State, Zip Code n/a							ity, State, Z _incoln Pa	ip Code ark, NJ 07		7 17				
Project Manager for M	Nonitoring Firm			Telephone n/a	e No.		elephone N 973-706-7		0.57	cense No 1088) .			
Start Date (10) 2-26-2012		Schedule 2-27-20			ate (11)		ame of OSI Jadar Cor	HA Monitor ntracting,	LLC					
Occupancy Status Du	ring Abatement (Che	ck Only On	e)			100	treet Addre							
Facility Closed/V	acated During Entire	Period of A	baten	nent			22 Troy L							
Abatement Perfo	ormed Outside of None: 9 am - 5 pm	mal Facility	Hours	3			ity, State, Z Lincoln P	ark, NJ 0	7035					
Scope of Work (Chec	k All That Apply)					-								
≥3 sf or ≥3 lf ≥160 sf or ≥260	lf		enova emolit				H Mi	II Containmoni-Enclosure ovebag Prod	e cedure					
							× No	n-Exempted	d (*) and N	ion-Friab	le Pro		e emen	t
			Locat									Ту	ре	
Asbestos-Contain TO BE In F	ntion of hing Material (ACM) ABATED racility 13)	Use Mai	d Sole intena	ely by ince/ Staff?		tos Contair thermal sy surfacin	iption of ning Materia stems insul g, VAT, or cellaneous)	ation,	Amo (Spe SF o	ecify	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A		\/AT /p	o mastic)		85	SF	×	-	-	-
Kite	chen			X		VAI (III	O masiic)			<u> </u>				
											16		14	
Name of Registered	Waste Hauler			AJDEP W		Cubic Ya		Programme and	Registere		2			
Name of Registered			H	NJDEP W Hauler ID 0033137	No.	of Waste	•	G.R.O	.W.S. La					
Jadar Contracting	g, LLC		H	Hauler ID	No.	of Waste	•	G.R.O	.W.S. La	andfill				
Jadar Contracting	g, LLC	Title	H	Hauler ID	No.	of Waste TBD Disposal TBD	•	G.R.O	.W.S. La	andfill 19067	ate			

State of New Jersey

		NO		CATION	OF ASB	ESTOS AI 8:60 and				1	4 3	35	71	,	
Date of Notification (1) 2-17-2012					Building n Prope	Owner/Op	erator	(2)		· · · · ·	7.7				
Agencies Notified EPA	Type Notification			Street Ad		se Road		;;. ;;		17					
DEP DOL	Amended Amendment		_	City, Stat King of		ode ia, PA 19	9406		DD a 3						
DOH DCA	Emergency justification) Cancellation		Ī	Name of David	Contact					Tele	ephone Nur	nber			
				FACIL	ITY INFO	ORMATIO	N			100		į.			
Name of Facility Where		g Place (3)				-	***	Type	of Facility (4)	era a como de la como	J			
Apartment Buildin	ig								School (K-12		or than V 1	2)			
Street Address 76 Market Street								X C	Subchapter of the control of the con				ings,	home	s,
City (5) Perth Amboy					<u></u>	-			etc.) re Feet	# of	Floors	100000	dg. A 0+	ge	
County (6)			-1	County C	ode (7)				nt Use (Prio	1					
Middlesex				(STATE U			-	Apa	rtment Blo	dg.		,			
Name of Monitoring Fir	m Hired by Building	Owner (8)		ASCM	No.				tement Cont		(9)	72			
n/a				n/a				Addres	tracting,	LLC		- CO			
Street Address n/a								roy La							
City, State, Zip Code							City, S	tate, Zi	p Code						-
n/a									ark, NJ 07	035					
Project Manager for Mo n/a	onitoring Firm			Telephon	e No.		- 50	one No 706-7			License N 01088	lo.			
Start Date (10) 3-5-2012		Scheduled 3-9-201		npletion D	Date (11)				IA Monitor itracting,	LLC					
Occupancy Status Duri	ing Abatement (Che	ck Only One)				Street	Addres	is			William St.			
	cated During Entire							roy La							
Abatement Perfor Other – Describe:	med Outside of Non 9am - 5pm	mal Facility I	lours			_			p Code ark, NJ 07	035					
Scope of Work (Check	All That Apply)							<u></u>							
≥3 sf or ≥3 if ≥160 sf or ≥260 if		and the same of th	nova molit				XXX	Mir Glo	l Containme ni-Enclosure ovebag Proc n-Exempted	edure				e	
	V. 19-					_		I NO	II-Exempleo	() an	u Non-i na	1	Abate		
		7/8	ocati ormal	5450		Doc	cription	of.					Ту	ре	
Locati Asbestos-Containir <u>TO BE A</u> In Fa (13	ng Material (ACM) <u>BATED</u> cility	Custo	tena	nce/		stos Conta thermal s surfaci other mi	ining N system ing, VA	Material s insula T, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							-	+-			
Base	ment			X		Asbest					Elbows	X			
Baser	ment		-	×	As	sbestos F	Pipe I	nsula	tion	2	40 LF	×			
			1.	JDEP W	lasta	Cubic Y	/arde		Name of	Regist	ered Landfi				
Name of Registered W Jadar Contracting			- 1	lauler ID 033137	No.	of Wast				107	Landfill		W. 100 0000		
City, State Lincoln Park, NJ 0	7035	2,				Disposa	al Date)	City, State Morrisv		PA 19067				

Signature

Title

Secretary

Date

2-17-2012

Lillie Lazarevich

Completed by

Ch#3581

Date of Notification (1) 2-17-2012					uilding Ow Managei		ator (2)	\ II	1			V		
Agencies Notified EPA DEP DEP DOL	Type Notification Initial		C	ity, State	Iress uth Livin , Zip Code on, NJ (ve.		1	1 160				
DOL DOH DCA	Amendment a Emergency (i justification) Cancellation		N	lame of C	Contact			f. 2(.)S.	Tele	ohone Numb	er			
Name of Facility Where A Center Grove Villag Street Address Quaker Church Ro	ge Apt. 5-6	Place (3)		FACILI	TY INFOR	MATION		Other (i.e. pr	2) 8 (Othe	r than K-12) commercial	buildir	ngs, l	iomes	5,
City (5) Randolph	au						Squar	etc.) e Feet		Floors	50	g. Ag	e	
County (6) Morris					SE ONLY)		- Apa	rtment Ur	nit	g demolishe	d)			
Name of Monitoring Firm n/a Street Address	n Hired by Building (Owner (8)		n/a	No.	S	lame of Aba Jadar Cor treet Addres	ntracting,		9)	-	1100		\dashv
n/a City, State, Zip Code n/a					:	C	22 Troy L city, State, Z Lincoln Pa	ip Code	7035					
Project Manager for Mo n/a	nitoring Firm	Scheduled		Telephon n/a			elephone N 973-706-	7950		License No 01088	-			
Start Date (10) 2-27-2012 Occupancy Status Duri	ng Abatament (Che	2-28-20	12	ipieuon L	vale (11)		Jadar Co	ntracting,	LLC					
Facility Closed/Va	cated During Entire med Outside of Non	Period of Al	atem	nent			22 Troy L City, State, 2 Lincoln F		7035		•			
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolii				× M	ni-Enclosur	e cedure	Negative P			e	
		Isl	Locat	tion								Abate	ement pe	t
Locati Asbestos-Containir TO BE A In Fa (1:	ng Material (ACM) BATED cility	N Usec Mair Custo	orma I Sole ntena odial (12)	illy ely by ance/ Staff?	Asbest (i.e.	os Contai thermal s surfaci	cription of ining Materia ystems insu ng, VAT, or scellaneous	lation,	(amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Kitcher	n Floor	Yes	No	N/A	VAT	(Multi la	ayer, no n	nastic)	2	50 SF	×			
						•								
Name of Registered V	Vaste Hauler			NJDEP V		Cubic Y		1		ered Landfil			<u> </u>	
Jadar Contracting			1.0	Hauler ID 003313		of Was TBD	al Date	City, Sta	ate	Landfill				
City, State Lincoln Park, NJ	07035					TBD		Morris	sville,	PA 19067	ate			
Completed by Lillie Lazarevich		Title Secr	etar	у		Si X	ignature 1001 e	Jazy	no	7	-17-2	2012	!	

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)	1/25/12 **				Name of Buildin			· · · · · · · · · · · · · · · · · · ·	- marketin	*********		1
Agencies Notified	1/25/12 Type of Notific	otion	***		Street Address	A to z	Z Site Contracto	rs, Inc.	2	00	56	
[x] EPA	[x] Initia	al Notifi	cation otification		Street Address	940 P	ark Avenue			+0-1 - F-		
[x] DOL	Ame	ndment			City, State, Zip C		wood, New Jerse	ey 08701	1 2	012	1	7
[x] DOH	justii	fication) cellation			Name of Contact	g Perlsteii		Telephone Number	farman.			
[] DCA	1 ,			EAC								
Name of Facility Where A	Abatement is Takin	g Place	(3)	FAC	CILITY INFOR	MATION	Type of Facility	(4)	101/2/4			
	sidence						[]	School (k-12)				
Street Address	41 Canterbury l	Road					[x]	Subchapter 8 (o Other (i.e., priva homes, etc.)		2000-00-00-00-00-00-00-00-00-00-00-00-00		ildings,
City		Cour	ity (6)		County Code (7) (STATE USE ON	LY)	Square feet 1500 sf	# of Floors	Bld	g. Age	60	
Lakewood		Oce	an				Current Use (Price	or if being demolished	d)		50	
Name of Monitoring Firm		g Owner	(8)		ASCM No.	Name of	Abatement Contrac		Inc			
Street Address	· •					Street A	ddress					
City, State, Zip Code						City, Sta	nte, Zip Code	Route 9, Unit 61		200		
Project Manager for Moni	itoring Firm		Telephone	Number		Telepho	ne Number	s River, New Jers			271	
Scheduled Start Date (10)	W 20				ion Date (11)	732-34	9-9932 OSHA Monitor	00624	-			
2/29/12			3/2/12		ion Date (11)		E.M.	S.L. Analytical				
Occupancy Status During . [x] Fac	Abatement (Check ility Closed/Vacate			od of Ab	patement	Street A		Stelton Road				
	atement Performed er – Describe	Outside	of Normal F	acility H	Iours	City, Sta	te, Zip Code	taway, New Jerse		254		
0 000 1 000 1 10						1				334		
Scope of Work (Check all	that apply)					[]	Mini-Enclosur	ent with Negative Pro e	essure			
	sf or ≥3 lf		[]	Renova		[]	Glovebag Proc					15
[x] ≥16	0 sf or ≥260 lf		[x]	Demoli	tion	[x]	Non-Exempted	l (*) and Non-Friable	Procedi	ure		
						122			Abat	tement	Туре	
Location	of		Is Location Normally us		As	Descriptionsbestos-Cor		Amount	R	R	E	E
Asbestos-Containing N	Material (ACM)		Solely by			Material (A	CM)	(Specify SF	E M	E P	N C	N C
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in facility (13)	У		Staff		ins	sulation, su VAT, c			V	I R	PS	O S
(13)			(12)		ot	her miscella			A	"	U	U
		YES	NO	N/A		ior impoon	arroous)		L		L E	R E
Exterior			Ιx		Asbestos sidi	ng		1500 sf	X		Б	12
Name of Registered Waste	Hauler entracting, Inc.		VJDEP Wast	e Hauler 0223	ID No. Cubic Y	ards of Wast	Name of Regi T.R.R.F.	stered Landfill	1 =			
City, State	mu acting, Inc.		20		al Date	City, Sta	ate					
Toms River,		TP:41		3/5/12	2	Tullyto	own, Pennsylvar	nia	D			
Completed by (Print or Ty Nicholas Ferr		Title Proje	ct Manage	er	Signature	chil	1/0.	1	Date 1/25	5/2012	2	

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

Nocheck

Date of Notification (1) 02/16/12			ı	Montcla	ir Board	vner/Operato of Educati	on			H-	- 11	7]	
Agencies Notified	Type Notification		1	Street Add 22 Valle	dress ey Road					-8			
EPA DEP X DOL	Initial Amended Amendment #1		. 1	City, State Montcla	e, Zip Code ir, New	Jersey 070)42					,	
DOH DCA	Emergency (indigent justification) Cancellation	cluding		Name of C	Contact Saponar	0		Au 	Telephone Num	ber			
				FACIL	ITY INFO	RMATION	1 =	of Facility (4)	A - 1 - 2 / 1 - 10				
Name of Facility Where Mt. Hebron School Street Address		Place (3)					×	School (K-12)		i) al buildi	nas h	omes	s
173 Bellevue Aven	ue							etc.)		Salar Salar			
City (5) Montclair, New Jer	sey 07042						20,0		# of Floors 2	55	dg. Ag 5+		
County (6) Essex				County C (STATE U	ode (7) SE ONLY)		Sch	ool	if being demolish				
Name of Monitoring Firm Detail Associates	m Hired by Building Ov	vner (8)		ASCM	No.			atement Contr poration	ractor (9)				
Street Address 300 Grand Aveue		W	- C - 1500			606		ide Avenue	•			77.0	
City, State, Zip Code Englewood, New J	lersey 08631					City	State, 2 odlano	Zip Code d Park, Nev	w Jersey 0742				
Project Manager for Mo Stephen Jaraczew	nitoring Firm		1	Telephor 201-56	ne No. 9-6708	Tele 97	phone N 3-225-	No. 8400	License N 01104	lo.		1	
Start Date (10) 02/15/12		Scheduled		mpletion I	Date (11)	Nan J&	ne of OS S Envi	SHA Monitor ronmental	LLC				
Occupancy Status Duri	ng Abatement (Check	Only One	e)				et Addr						
T Facility Closed/Va	cated During Entire Pe	eriod of At	oaten	ment s		City	, State,	ute 22 Wes Zip Code ew Jersey					
Scope of Work (Check													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoli	ation			H N	Mini-Enclosure	edure			0	
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			Loca			_					Ту	ре	т-
Locati Asbestos-Containir <u>TO BE A</u> In Fa (1:	ng Material (ACM) . <u>BATED</u> cility	Used Mair Custo	ntena odial (12)	ely by ance/ Staff?	Asbes (i.e.	Descrip tos Containin thermal syst surfacing, other misce	ig Mater ems insi VAT, or	ulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
		Yes	No	N/A	-	O&M Pipe	Inquist	ion	4 LF	-	X		+
Corridor/S		X		-		D&M Pipe			2LF	1	X		+
Ladies Bathroom	in Faculty Room	X		+-		Jaivi Pipe	Ilisulai					_	T
2				-	-				4.20	-			
Name of Registered V	Vaste Hauler			NJDEP \	Vaste	Cubic Yar	ds		Registered Land	fill .		-	27
Lilich Corporation	vasto i lauloi			Hauler II 18724		of Waste		G.R.O.	W.S Landfill				
City, State	lew Jersey 07424					Disposal Dis		City, Stat Morrisv	e ville, Pennsylv	ania			
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Print Form

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02/13/12 Ck;1849 \$2 Agencies Notified ypo							· 3		7 1	40.5	2.0	7	·' —	[
Agencies Notified ypo	200		N:	ame of Bi Nontclai	uilding Own r Board o	of Educat	ion i	<u>[]</u>	UL -	10 [JA	Y 		
	Notification		100.00	treet Add	NT (Section 1997)	•			S COLL NO.		f12			
	Initial Amanded Amandmont #		C	ity, Stato Montclai	Zip Code r, New Je	ersey 07	042		Toll		4.1 C		ew-	
DOH DCA	Emergency (Incl. justification) Cancellation	uding	N	ame of C			Ì	WAI	Telephon	S HU IPP	PK 23	`/E	D	
				FACILI	TY INFOR	MOITAR	- 1	Carlin (4)						
Name of Facility Whore Abster Mt, Hebron School Street Address	mont is Taking Pl	ace (3)					Si Si	Hacilly (4) Hool (K-12) Denaptor 6 Her (Lo. prh	Other tha	n K-12)				
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Montclair, New Jersey C County (6)	17042			County Co				Use (Prior	If boing de	moliaha	ď)		Ma 1922	
Essex Name of Monitoring Firm Hire	d by Building Own	ner (8)	1	ASCM I		Nar	ne of Abate	ment Contr	actor (9)					
Detail Associates							ch Corpo							\neg
Street Address 300 Grand Aveue						1	6 McBrid	e Avenue	·					
City, State, Zip Codo Englewood, New Jersey	y 08631					W	oodland I	Park, Nev						
Project Manager for Maniforth Stephen Jaraczewski				Talephone 201-569			3-225-84		(A) U.S. 400.00	nae No 104				
Stan Oate (10) 02/15/12	11 11 2 2 2 2	cheduled 2/16/1:		pletion D	ate (11)	J8		nmental	Labs					
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Facility Closed/Vacated Abatement Performed C Other – Describe: 5PM	Ismrow to objectud	Feelity	balem Hours	ient		CIT	y. Stote Zip							
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				NJDEPW	Insta T	Cubic Yo	rdo	Name of	Registered	Landfill	<u></u>		L	1
Name of Registered Waste I	Hauler		1	NJDEP W Høuler ID 18724		of Waste		G.R.O.	W.S Lan					
City, State Woodland Park, New J	ersey 07424					Disposal 02/20/1:		City State	ille, Pen	nsylvar	nia		- Marie 500	-
Completed by Tatiana Kalenikova		Title Vice	Pres	ident		Shar	Al-pr	alla	Re		ite 2/13/	12		

Norheck					to NJAC 8:60 a						THE	risa.	4				
Date of Notification (1) 02/16/12			Name of Building Owner/Operator (2) Montclair Board of Education														
	e Notification		Street Address 22 Valley Road														
DEP X DOL	Initial Amended Amendment #			City, State, Zip Code Montclair, New Jersey 07042										A CALLED			
Ď DOH DCA	Emergency (i justification) Cancellation	ncluding	1	Name of	Contact Saponaro	Telephone Number											
	Caricolation	-		FACII	**		end littings										
Name of Facility Where Abate Watchung School	ement is Taking	Place (3	3)			•	Тур	e of Facility (School (K-1	2)		K 40)			- 4			
Street Address 14 Garden Street								Subchapter Other (i.e. p etc.)	orivate 8	comm	ercial l				es,		
City (5) Montclair, New Jersey	07042			37				uare Feet # of Floors Bldg. Ag ,000 2 55+					ge				
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Name of Monitoring Firm Hire Detail Associates	d by Building C	wner (8)		ASCM	l No.	Tenth (1997)		patement Cor rporation	ntractor	(9)							
Street Address 300 Grand Aveue						ress Bride Avenu	de Avenue										
City, State, Zip Code Englewood, New Jerse	y 08631		17.0.				ity, State, Zip Code Voodland Park, New Jersey 07424										
Project Manager for Monitorin Stephen Jaraczewski		Telephor 201-56	ne No. 9-6708	1 0.5710.35	Telephone No. License No. 973-225-8400 01104												
Start Date (10) 02/15/12		Schedule 02/17/1		pletion [Date (11)		Name of OSHA Monitor J&S Environmental LLC										
Occupancy Status During Ab	atement (Check	Only On	ne)				et Address										
Facility Closed/Vacated Abatement Performed C Other – Describe: 5PM	utside of Norm	eriod of A al Facility	Abatem	ent		City, S	State,	ute 22 We Zip Code Iew Jersey		3		-					
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		la la	Lanatie										Abate	ment			
l ell- u ef		U.S.E.	Location Normall	5,000		Description of					1	Туре					
Location of Asbestos-Containing Mat TO BE ABATE In Facility (13)		Use Ma Cust	d Solel intenan todial S (12)	y by nce/ taff?	Asbestos Co (i.e. therm sur	ntaining f	Materi ns insu AT, or	sulation, (Sp r SF o		mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure		
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Basement Custodia		X				Pipe Ins				2LF	-		<u>х</u>				
Basement Corr	idor	X			U&IVI	Pipe ins	Sulati	ion			+	-	^				
	+								Da-1-1	- I boar	dell						
Name of Registered Waste H	auler			JDEP W auler ID		ic Yards /aste		Name of G.R.O.									
Lilich Corporation	lancer - confidence in the con			3724	1	S-000-0000				ariuliil							
City, State Woodland Park, New Je	ersey 07424					osal Date 20/12											
Completed by Tatiana Kalenikova		Title Vice	Presid	dent		Signatur	Signature Talehur Date 02/16/12										

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e te					NJAC 8:50			DOL	-11) DA	<u>Y</u>	# ;	17	
Date of Notification (1)	\$200		N	eme of E Iontria	luilding Owr ir Board c	er/operato of Educati	on		200.00	A	1			
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DEP	Amended Amendment #_		C	ity, State Aontola	. Zip Code ir, New Je	ersey 070	42	11/11/1	JU	PRO	IVE	$n \perp$		
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Name of Fadlity Where Ab	tement is Taking F	Placo (3)		PACIL	TY INFOR	MATION MA	Typ	oc of Facility (4)						
Watchung School					1		国	School (K-12 Subchapter 8	(Other It	nan K-12)				
Street Address 14 Garden Street								Other (i.g. pri	vate & co	mmercial	buildi	ngs, h	om	
City (5)				- '				uare Feet	# of Flo	aroc	Blo	ig. Ag	ŋ	
Montclair, New Jersey	07042		y		ada /7\			rent Use (Prior	1 -	domoliano				
County (6) Essex			6	county C	008 (1). SE ONLY) _		Sc	chool					-120	
Name of Monitoring Firm H	ed by Building Ov	vner (8)		ASCM	No.			batement Cont orporation	ractor (9)					
Detail Associates						Stree	reat Addrass							
Street Address 300 Grand Avello						F. 100 (1) 100		Bride Avenue	9				ener.	
City, State, Zip Code	00624			2 <u>-</u>		City,	State	. Zip Code nd Park, Ne	w Jerse	y 07424	1			
Englewood, New Jers Project Manager for Monito		,,	17	Folophor	o No.	Yok	phone	No	1	icenso No 1104).			
Stephen Jaraczewski			1		9-6708			SHA Monitor		1101			0.000	
Start Date (10) 02/15/12		Scheduk 02/16/1		pletion L	Date (11)	18	S En	vironmental	Labs					
Occupancy Status During	Abatement (Chock	Only On	a)			Stre 23	et Add	iress oute 22 Wes	it					
Facility Closed/Vacate Abatement Performed Other - Describe: 59	of During Entire Po I Outside of Norma M Start	enod of A	Hours	ent		Gity	State	o, Zip Code New Jersey						
Scope of Work (Check All												ms.		
≥3 sf or ≥3 if ≥160 sf or ≥280 if			Ronova Romolit				X	Full Containmo Mini-Enclosure	r	egalive r	10000			
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Location (Antodal (ACM)	Use	larmal d Sola	ly by	Aphesto	s Containin	Description of ontaining Material (ACM)			ount	20	_	1	
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(13)			(12)	1		other misco	llanco	ous)			9	1	20.00	
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Basement C	orndor	X	-	-	- 0	ANT TOPE		- ,			1			
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Nome of Registered Wast	e Hauler	1		JOEP V		Cubic Yard	8			ed Landfil	l			
Lilich Corporation				lauler ID 8724	NO	1			W.S La					
City, State	07404					Disposal D 02/20/12	ato	City, Ster Morris	ille, Pe	nnsylva	nia			
Woodland Park, New	Jersey 07424	Title			1	Signa		1	10	D	ete 2/13/	12		
Tatiana Kalenikova		Variety Control	Pres	Ident			In	confla	Cel-		21131	166	_	

Date of Notification (1)	1	720				g Owner/Operator	1 4		1.17	15	T	7			
2/17					VARD A	UERGUN			-	11	11				
Agency Notified	Type Notification		S		Address	NU AIHAN		FEB 2	7		//	H			
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as DOL	☐ Emergency (including		-	ıω	4 MEANS	FORD . A	77. 040	30							
夏DOH	justification)		1		of Contac		Bar (Niconal Control	Telephone Nur	riper,	7		1			
DCA	☐ Cancellation			Hr. Avengon											
				FACIL	LITY INF	ORMATION	*			***		j			
Name of Facility Where	Abatement is Taking Place	(3)	10 (Victor)				Type of Facility	(4)							
NA A	1000.11									-	****				
	15K60N						School (K-12) (Other than K-1:	٠.						
Street Address ろみ 手モル	LAW AINO							vate & commerci		js,					
City (5)				0.00			Square Feet		Bldg.	Age					
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O			To	ounty	Code (7) (STATE USE	Current Use (Pr	ior if being demo	lished)		980 F.M.				
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	m Hired by Building Owner	LAC	CM N	lo.		Nama of Abstra	ent Contractor (9								
Name of Monitoring his (8)	in nired by building Owner	ASI	CHI N	10.	(. . .)		noval Inc	•							
(4)							noval in								
Street Address						Street Address	. W. Sare 23								
				- 18		450 Sout	th River	St							
City, State, Zip Code		-				City, State, Zip C	ode					-			
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B		Total		N-		Hackensa Telephone No.	ack, N.J	License No.				-			
Project Manager for Mo	winning cittl	Telep	HONE	NO.			71.1.1								
	<u> </u>					201-329-7444 · 00388									
Start Date (10)	Scheduled Com														
2/28/12			2				nvironmen	ital Ser	vices						
Occupancy Status Duri	ng Abatement (Check only o	ne)	100000			Street Address									
D Facility Olean date-	tod During Entire Desired of S	A hoto	004			280 Huy	ler St	The second secon							
	ted During Entire Period of A ed Outside of Normal Facility					City, State, Zip C	ode								
Other - Describe:		.,					ackensac	c . N.J.	0760	16					
Scope of Work (Check	all that apply)										W 1150				
				-6			Containment with Enclosure	Negative Pressu	re						
.27 ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf			2000		ovation rolition		ebag Procedure		.0						
U 2 100 St 01 2 200 B			-	a Den	IONBOIT	□ Non-	Exempted (*) and	l Non-Friable Pro	cedure						
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	ing Material (ACM)	Mainte		135 m		stos Containing Ma thermal systems		Amount (Specify		2	Repair	ncapaulat			
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Atlantic Wa	aste Services					 	City, State			-					
	aste Services					Disposal Date	City, States								
Atlantic Wa		62						em. PA 1	8015						
Atlantic Wa	Park, N.J.076	62				2/28/12		em, PA 1	Date	_	1				
Atlantic Wa						2/23/12 Signature		em, PA 1	Date	11	2/1				

Date of Notification (1) 02/17/12 Ck: 1862 \$200	Name of Building Owner/Operator (2) Meuer Development, LLC														
Agencies Notified Type Notification		Street Address 9 Main Street													
EPA Initial DEP X Amended Amendment Emergency (City, State, Zip Code Annandale, New Jersey 08801												
DOH justification) Cancellation	including			anzone			Telephone Number								
Name of Facility Where Abatement is Taking	Place (2)		FACIL	LITY INFO	ORMATIO		Type of Facility	(4)							
Village Green at Annandale	g Flace (3)						-	(8) (8) (8)							
Street Address								er 8 (Other than K-1							
46 East Street						1	Other (i.e. etc.)	private & commerc	ial buil	dings	, hom	es,			
City (5)							Square Feet	# of Floors	E	Bldg. /	\ge				
Annandale, New Jersey 08801		-					20,000	2		5+					
County (6) Hunterdon			County C (STATE U	Code (7) ISE ONLY,			Current Use (Pr Housing	ior if being demolis	hed)						
Name of Monitoring Firm Hired by Building (Owner (8)		ASCM	No.			f Abatement Co Corporation	ontractor (9)							
Street Address			1			-									
		1					lcBride Aven	ss ide Avenue							
City, State, Zip Code							r, State, Zip Code codland Park, New Jersey 07424								
Project Manager for Monitoring Firm			Telephor	ne No.			Plephone No. License No. 01104								
Start Date (10) 02/20/12	Schedule 02/27/1		npletion [Date (11)			ne of OSHA Monitor S Environmental Labs L.L.C								
Occupancy Status During Abatement (Chec	k Only One	e)		******	1.00		et Address								
Facility Closed/Vacated During Entire F					Lane		Route 22 We	est 							
Abatement Performed Outside of Norm Other – Describe: 7am Start	al Facility	Hours	l. 				ate, Zip Code , New Jerse	y 07083							
Scope of Work (Check All That Apply)											-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	- Contractor Contracto	enova emolit					Mini-Enclosu Glovebag Pro	ocedure							
		re-called	180000				Non-Exemple	ed (*) and Non-Friat	Abatement						
l continue of		Locati ormal			Doco	ription o	,f								
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair	Sole ntenar odial S (12)	nce/		tos Contai	ining Ma ystems ng, VAT	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure			
	Yes	No	N/A							_	(b)				
Exterior		X				Shingl		1,140 SF	Х						
Interior		X			Transite			400 SF	Х						
Boiler Room	X					II Boile		50 SF	Х						
Boiler Room	X						n/Elbows 20 LF X								
Name of Registered Waste Hauler		JDEP Waller ID		Cubic Ya			Registered Landfil								
Lilich Corporation		18	3724		9		G.R.O.W.S Landfill								
City, State Woodland Park, New Jersey 07424			+		Disposa 02/28/1		City, Sta Morris	te ville, Pennsylva	nia						
Completed by Tatiana Kalenikova	Title							-///	ate 2/17/	12					

Date of Notification (1) 02/08/12 Ck:1819 \$200			Name of Building Owner/Operator (2) Meuer Development, LLC												
Agencies Notified Type Notification EPA X Initial	n		Street Address 9 Main Street												
DEP Amended Amendme		_	City, State, Zip Code Annandale, New Jersey 08801												
□ DOH				f Contact			Telephone Number								
Nome of Facility Where Abel	. 51. /		FACILITY INFORMATION												
Name of Facility Where Abatement is Tak Village Green at Annandale	ing Place (3)					Type of Facility				*	21.19			
Street Address 46 East Street			2) 8 (Other than K- private & commer		ldings	, hom	ies,								
City (5) Annandale, New Jersey 08801							etc.) Square Feet 20,000	# of Floors		Bldg. 55+	Age				
County (6) Hunterdon				Code (7) USE ONLY	y)		Current Use (Pri Housing	or if being demolis	shed)	(S) (3) (5)	-11.3-2245	amore inside a con-			
Name of Monitoring Firm Hired by Building	g Owner (8)		ASCN	I No.			Abatement Cor Corporation	ntractor (9)			**************************************				
Street Address					1		et Address 6 Mcbride Avenue								
City, State, Zip Code			·····				te, Zip Code and Park, Ne	, Zip Code nd Park, New Jersey 07424							
Project Manager for Monitoring Firm		Telepho	ne No.			pephone No. License No. 01104									
Start Date (10) 02/20/12	Schedul 02/23/	ed Cor 12	npletion I	Date (11)			OSHA Monitor nvironmental	Labs				702240340			
	Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abate						Street Address 2333 Route 22 West Dity, State, Zip Code								
Other – Describe: 7am start						10000	on, New Jersey 07083								
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renovation Full Containment with Nega Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-													
Location of		Locati								it					
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	ed Sole intena todial S (12)	ly by nce/ Staff?	Asbes (i.e		stems in	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure				
Exterior	Yes	No X	N/A		Roof S	Shinale		1,140 SF	X	-	-	ļ			
Exterior		X			Transite			400 SF	X	-	-	-			
Boiler Room	X					I Boile		700 01	X	-		ļ			
Boiler Room	X	0.020		P	ipe Insula			50 LF	X	-					
Name of Registered Waste Hauler		IN	JDEP W		Cubic Ya			Registered Landfi		7	<u></u>	Ŀ			
Lilich Corporation			auler ID 3724	No.	of Waste 5			G.R.O.W.S Landfill							
City, State Woodland Park, New Jersey 0742	4				Disposal 02/28/1		City, State Morrisvi	ile, Pennsylva	nia						
Completed by Tatiana Kalenikova	Title Vice	Presi	dent		Sign	ignature Date 02/08/12									