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APPROVED phol Health & Senior Services	NOTIFI (P	CATIC	ON OF AS	low Jersey BESTOS A C 8:60 and	12.120)		1,3			1 j	F. 1		1
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encles Notified Type Notification	1	7	855	JIK	Deste							.	
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1 DOH justification)	ing	Nam	e of Cont	act Aucs			٠.				P		-
] DGA		F	ACILITY	INFORMAT	ION	Type of Fac	iliv (4)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1
lame of Facility Where Abalement is Taking Place ROBELTS ilrest Address 7855 JFK BOLLEVALL	ie (3)	157	A	17. 27J	-	School	(K-12)	her than K- & common	CIER DE	- and distributed		ės,	-
7855 JFK BOULDING	g					Square Fee		of Floors		Bldg_/			1
City (5)						122.00	0	27		6			4
NOISTU BERGEN County (8) 11		Cor	unty Code	(7) ONLY)		Current Us	(Prior if b		ished)				
Name of Maniforing Firm Hired by Building Own	er (8)		ASCM NO		Nam A.	e of Abatemer Mac Contra	nt Contract	tor (8) 2.		5 3 6			
Marile of Measures and Control					Stre	et Address							
Street Address					10	5 Lowell Ro	de						Ŧ
City, Stale, Zip Code					GI	en Rack, N	.J. 0745	2					_
Project Manager for Monitoring Firm	<u> </u>	Te	elephone	No.	Telo 20	ephane Na. 01-262-584	1	Licens 0015					
							Annitor						
Start Date (10)	3/3	11/15	eletion Da	te (11)	0	mega Envir	onmente	al Service	s Inc.		<u>.</u>		
Occupancy Status During Abatement (Check C	Only One) .			2	80 Huyler S	treet						_
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal	AND OT AL	33118211.10	ent		Cit	y, State, Zip C łackensack	ode	06					_
Other - Describe: Scope of Work (Check All That Apply)					,			t with Negal	live Pro	Jasure			
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23 of or ≥3 if ≥160 of or ≥260 if	R	emoliti	ממ					dure (*) and Non-	Friable	Proc	edure		
254						Non-E	Kempusa	All los 4 vary		1	district.	Interior	
T-10	ls	Locati	ion .			-		2		-	Typ	08	_
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Use Ma	lormai d Sole intena todial ((12)	lly ely by ncel Staff?	(I.e. th	Contain crmsi sy	iption of hing Material (/ stems Insulating, VAT, or collancous)	ACM) on,	Amaun (Specif SF or Li	y	Removal	Repair	Encapsulate	
(13)	Yes	No	N/A	1						-	-	-	+
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KITCHEN & DINING ROOM	+	-	+							-	-	-	+
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Alien of Donkstead Waste Hauler				7 1401	7	1							
Name of Registered Waste Hauter Rovic Transport			20785	,	Distros	al, Date	City, Sta	te	4004	5			
	Title			,	Disposi	119/1900	City, Star Bethle	te hem, PA		ate	19/	14	_



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

. .		(Purs	uant to	NJAC 8:60	and 12:1	20)	CK3	91-	7	-)	\Box
Date of Notification (1) 2/18/14		Jo	oe Mac	uilding Own deria Priva	er/Operat ate Hom	tor (2) 1e					jî.		
Agencies Notified Type Notification			reet Add	lress ck Drive				ř	EB 25	201	1	,	
EPA Initial Amended Amendment #		Ci	ty, State	, Zip Code wkin NJ (08050		į.						· · · d references
DOH justification)		Na	ame of C					Telep	hone Num	ber			
DCA Cancellation				TY INFORM	MATION								
Name of Facility Where Abatement is Taking Joe Maderia Private Home	Place (3)					S S	of Facility (4) chool (K-12) subchapter 8	(Other	than K-12)			
Street Address 52 Patrick Drive						⊠ c e	other (i.e. printe.)	vate &	commercia	ıl buildir	gs, h		•
City (5) Manahawkin NJ 08050		11. 40.				1000		1	Floors	35	550		
County (6) Ocean	-	C	ounty C	ode (7) SE ONLY)		Currer	nt Use (Prior e	if bein	g demolish	ed)			
Name of Monitoring Firm Hired by Building C	Owner (8)	1	ASCM	No.	A 0.000	ime of Abate	ement Contr	ractor (9)				
N/A Street Address				•	Sti	reet Addres	is						
City, State, Zip Code					Cit	O Box 32 ty, State, Zi	p Code						230 1
		· · ·	Tolont -	no No		Vest Berli	n NJ 0809	91	License N	lo.	-		
Project Manager for Monitoring Firm		'	Telephor	ie No.	8	56-753-9	800		00727				
Start Date (10) 2/19/14	Scheduled 2/24/14		pletion [Date (11)	10000	ame of OSI Same	HA Monitor						
Occupancy Status During Abatement (Chec	k Only One	e)			St	treet Addre	ss						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of A nal Facility	batem Hours	ent		_ C	ity, State, Z	ip Code						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit				Mi	ill Containme ni-Enclosure ovebag Proc on-Exempted	e cedure		ble Pro	cedur	e	
	10000	Locati			Deser	iption of						ре	_
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intena todial ((12)	ly by nce/	(i.e. t	os Contair hermal sy surfacin	ning Materia estems insuring, VAT, or scellaneous	lation,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
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										-	-	-	+
			NJDEP V	Maste	Cubic Y	ards	Name of	Regis	tered Land	fill			
Name of Registered Waste Hauler United Containers		1	Hauler II 22459		of Waste 2	e	G.R.O	.W.S.					
City, State Elm NJ					Disposa 2/24/14		City, Sta Morris	_{ite} ville F	A 19067				
Completed by Anthony T Perna	Title Pres	sident	t		Sig	gnature				Date 2/18/1	4		

Feb 19 2014 07:47am

P001/001

FEB Check#48378

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:129)

Date of Notification (1)		Na	me of Bu	Ilding Ow	ner/Operator	A55	0, 12	TC. ADM	PIRION	rem		4
2/17/14			eet Addr		4/17/2			D-20 1			v Cos	
Agencies Notified Type Notification			95	RT	17 S			DRAN C	10	1001	1 001	Althe
DEP Amended		Cit	y, State, OAR,	Zip Code 子州 U.S	øUJ	. 0	7652	Date: 019 12	0	e) Tima:	1	26/
DOH justification)	neluding	Na	me of Co	1	*	-		Telephone Nhimbe				7
OCA Cancellation				YINFOR				: ———		-		
Name of Facility Where Abatement is Taking //WT6/LSTA-T6 SHE/PIPE CEA	THIC /	04	207	-170		☐ Sc	Facility (4) hool (K-12) hohaoter 8	(Olher than K-12)		G		
Street Address, FAST 259 M. FRA	tarei	N	TPKL	۶.		図 Ot etc	her (l.e. priv	ate & commercial b				
Street Address, FF81 / 259 N. FRA City (6) RAMSEY NJ (5745	46				Square 83. 6	200	# of Floors	6	g. Age	3	
County (8) BECGEN		1 6	ounty Co	45 (1)		Current	Him (Orlor	If being demolished)			
Name of Monitoring Firm Hired by Building C	wner (8)	1	ASCM N	No.	Name	of Abate	ment Contracting 1	actor (9)				
Street Address			-		Stree	Address		<u> </u>				
City Chair Tin Code					Gltv.	Lowell State, Zip	Code					\dashv
City, State, Zip Codc			-1	Na.		n Rock	N.J. 074	52 License No.	_			
Project Manager for Monitoring Firm			elephone		201	-262-58	341	00156				
Start Date,(10)) 2/17/17	Schedulet 2	D-1	oletion D	ate (11)	Nam On	e of OSH. nega En	A Monitor Vironmen	tal Services Inc				-
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23 af or ≥3 if ≥180 sf or ≥260 if		enovat emolitic				Min	i-Endosure					
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		Locatio		-0	_ 1		-			Ту	pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Use Mai Cust	1 Solel ntener odial S (12)	y by nce/ staff?	Asbeet (i.e.	Description Containing thermal system surfacing, alther miscell	Material ms insula VAT, or	(ACM) tion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
F-1 P	Yes	No	N/A		VAT	+ M	ASTIC	3.150 34	X			
FLOOR	+		X		1111	1,/.		0,,,				
						16-						_
NO NO. 1-1-100											J	<u>L</u>
Name of Registered Waste Hauler Rovic Transport		H	UDEP W lauter ID 10785		Cubic Yard of Waste	5		Registered Landfill A Bethlehem La	ndfil	Cor	p.	
City, State					Disposal D	ate	City, Stat	e nem, PA 18015				
Riverdale, New Jersey 07457 Completed by	Title				Signa	•	of d	De	ie /i	7/1	4	
R, McDonald	Pres	ident			1/	4-14	Drul		-J.	٠,٠	١	

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Date of Notification (1)			N	lame of	Building	Owner/Operato	or (2)			i.	//	ut 8	Π	
02 /	18 /	14	L	eah GI	icksman				Eñ.	1 7 / 981				
Agencies Notified	Type Not:ficati	ion		treet A					3	1/one			ľ	
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X DHSS	amendmer			7.596. N. A. C.	range, N.			VVAIN	EK	APPR(JAEN	- /2		
DCA	Emergency justification				f Contact		_		Tele	phone Num	ber		-	
(NJAC 5:23-8)	Cancellation		- A - L										2	
	J Cancellatio		<u> </u>		icksman			 ,		ile.	_			
		-Ura Diago	(2)	FACI	LITIM	FORMATION		Type of Facility (4)	ili.	FF	d 2	5	
Name of Facility Where	Abatement is 16	aking Place	; (3) 排					School (K-12			_	~ 2		
Private home			<u>H</u>				-	Subchapter 8	Othe	than K-1 2	2)			
Streat Address								Other (i.e., p	ivate	and comme	rcial built	dings.		
0 Crestwood Drive			11				-	homes, etc.) Square Feet	-T# -	Floors	I Bloc	; Age		_
City (5)			ii.				- 1	Square Feet	* 0	FICOIS	Dio.	, ng	*	
West Orange, NJ 0703	52		1						1,,,		ah adi			_
County (6)			(i)	County	Code (7) (STATE USE ON	LY)	Current Use (Pri	or it b	eing demoii	snea)			
Essex			1							#				_
Name of Monitoring Fire	n Hired by Build	ing Owner	(6) 4	SCM N	lo.	Name of Aba	teme	int Contractor (9)						
						Gr Tech LL	С							
Street Address						Street Addres	99			iļ.				
		85				576 Valley I	Rd#	283						
City, State, Zip Code						City, State, Z			. —	Ŀ				00
),. o						Wayne, NJ	0747	0						
Project Manager for Mo	ertorise Firm	-	: Teles	phone h	10.	Telephone N			Li	cense No.	_	- 100	100	
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Gi-10-1-713	1.9	Schadulad	Complet			973-638-17	77	onitor	01	127				
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Date of Notification (1) 2/14/14			Name	of Buildin	g Owner/C	perator	(2)			DOL -	TH	TIA	1	-
Agencies Notified Type Natification	119	-	_	a & Ray	mond C	Isyton					=	חע	1	_
	41			East Lav	en Drive	i			1	1			1	1
DEP Amended			City, 5	State, Zip C	Code			-	+-	FEB	14	2014		2
M DOL Amendme	et #	10		reck, NJ					L				M	,/
DOH Justification	n)			of Contact					NI TO	לב מסלפט	100 - 10		#	
	-	<u>. </u>		CILITY IN		ÓN			<u>-1</u>		-			_
Name of Facility Where Abdressen is Tale	ing Place	(3)	6M 80 2725				Typ	of Fadily	(4)	ŀ				_
Street Address		-					R	School (K- Subchapia	12) r 8 (Oth	then I.	121			
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City (5) Tenneck								are Feei	1000	Floors		Sidg. A	ge	
County (8)		<u> </u>	Catal	/.Code (7)			N/A		N/	*		N/A		223
Bergen			STATE	CODE (1)	N (N	_	Hou	ani Use (P.r	ior If ba	g demail	≥had)		-5504.0	
Name of Monitoring Firm Hired by Building N/A	Owner (3	A90	M No.		Name	of Ab	Element Co	ntractor	(8)			_	-
N/A Street Address						D&9	Aba	bement, Ir	1C.					
			e,		y.	Street .		gren Ave	DI IO					
City, State, Zip Code								ip Code	100					_
Project Manager for Monitoring Firm						Totov	wa, h	Ú 07512	2					
AND MAINTENANCE INCOMEDIATION PROPERTY.	ţ	1	Teleph	one No.		Talaph 973-3				#DDB75	355-75		-	
Start Date (10)	Schedu	led Co	mpletion	Date (11)	,			HA Monitor		W00013				
2/15/14 Compancy Status During Abetement (Che	2/16/1							ement, ir	ic.				la.	
2)		506-535-536	TO A DAVIDS			Street A		as gren Avei	2110					
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: Occupied	mal Fadili	y Hour	nani		ŀ			D Cods	100					
Scope of Work (Check All That Apply)				~		Totov	wa, N	IJ 07512						
≥3 of or ≥3 ≥160 of or ≥260 of		Renova Demail		Æ			Fu	ii Containm	ent with	Negative	Pressu	re		
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Location of Asbestse-Containing Material (ACM)	UE	Norma ed Sois Lintana	HA DA	Asbes	Desc stos Conta	cription i	of Blade	(ACM)	Á.	mouni	-	Typ		_
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(13)		(12)		1	מאושר ואו				3	OF LC)	Removal	Repair	DE S	Endosura
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48 Abatement, Inc.		H	auler ID	No.	Of Wast					ed Landilli ement o				
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otowe, NJ					TBD			City, State Tullytope	n, PA					
Ampleted by Benna Brkusenin	Thie				86	nglyda,	1	RU	9.50	Da			•	_
עוע פּערעפּשווא	Proje	ot Ma	nager			1/00	ALLA	K. Ul	ML	~ 21	14/14			

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

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

Date of Notification (1) 2/14/14					Building Ov Raymor			(2)			FES	25	20	Δ	
Agencies Notified	Type Notification		10000	Street Add	dress st Lawn I	Drive	7								
EPA DEP DOL	Initial Amended Amendment				e, Zip Code k, NJ 07										
DOH DCA	Emergency (justification)	including	183	Name of	Contact Raymo	nd				Tele	phone N	umber	-		
☐ DCA	Cancellation			HARRY N	ITY INFOR		ON			ــــــــــــــــــــــــــــــــــــــ		-	-	-	-
Name of Facility Where House	Abatement is Taking	g Place (3)		.,,,,,,,				□ s	of Facility (4 chool (K-12	2)	- 11 17	40)			
Street Address 129 East Lawn Driv	/e							⊠ c e	ubchapter (other (i.e. pr tc.)	ivate 8	commer	cial buil			es,
City (5) Teaneck								Square N/A	e Feet	# of N/A	Floors		ldg. A	ige	
County (6) Bergen				County C	ode (7) SE ONLY)			Currer	nt Use (Prio se	r if bei	ng demoli	shed)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.				ement Cont		(9)				
Street Address							Street	Addres	T						
City, State, Zip Code							City, S	state, Zi	p Code						
Project Manager for Mo	nitoring Firm			Telephon	e No.		Teleph	none No			License			-	
0.15.4.40		Scheduled	Com	nlation F)ato (11)		(T) (T) (T) (T)	345-86	A Monitor		#0067	5		X	
Start Date (10) 2/15/14		2/16/14		ipielion c	Jale (11)		D&S	Abate	ement, In	c					
Occupancy Status Durin							5 70 17 17 18	Addres	s Iren Aver	ue					
Abatement Perform Other – Describe:	cated During Entire ned Outside of Norr Occupied	nal Facility I	Hours	ient	And the	_		State, Zi wa, N	p Code J 07512						
Scope of Work (Check /	All That Apply)	Process .					-	7		755 8200			700		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		11	nova molit				3	Min Glo	Containme i-Enclosure vebag Prod n-Exempted	edure				re	
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Locatio	of		.ocati ormal			De	scription	n of						уре	
Asbestos-Containing TO BE AF In Fac (13	g Material (ACM) BATED illity		Sole itenar idial S (12)	nce/	Asbesto (i.e. t	os Con hermal surfa	taining I	Material is insula AT, or		. (mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A									_	ñ	
boiler r	room		Χ			pipe	insula	ation		2	20 LF	X	-	-	
			84									+	+	1	1
							6								
Name of Registered Wa	aste Hauler		1,7(3)1	JDEP W	1000	Cubic of Wa	Yards		Name of	0.00					
D&S Abatement, In	IC.			20996		TBD	28.05.05		Waste		gemen	OTPA			
City, State Totowa, NJ						Dispo TBD	sal Date		City, Stat		A				
Completed by Deanna Brkusanin		Title Projec	et Ma	anager		\$	Signatui	lille	a Rille	uil	in	Date 2/14/1	4		

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ED 10 2014 50					i di di	
B&@proj# 2014-24	(Pursu	Micetion of A Bent 10 NJAC EME	te of NJ Aspestos Abete 2 8:80-7 and 1 R G E N C	Mar 100 m . b	Check Plass?	,
Date of Notification (1) 0 2 / 1 7 / 1 A Agencies Notified Type Notification	Alex Lev Street Address 16 Princeton		r (2)		1/003	APPROVED
DEP Initial Amendment DOL Concellation	City, State, Zip Co Maplewood, Name of Contest	de			Telephone Numb	
DCA Cancellation	View FeA	FACILITY IN	FORMATION		Char Prival	(Cither then K-12) e/Commercial
Street Address		Ti.			Squara Feet 4 of F	6,000
18 Princeton Street City (5) Maplewood	County (6)		(State L	Code (7) see anly) ima of Abatament (Current Use (Prior If residential enracier (9)	being damelished)
Name of Montoring Fam Fired by Bldg N/A	Gwnar (8)		8	B & G Restoration rem Address 103 Ryptson Ros	n, Inc.	
Gily, Bastar, 219 Close Project Manager for Managering Firm	Pho	one Number		Lincoln Park, N alephone Number 973-696-6869 Name of OSHA Mon	niker C	conse Number 1378
Scheduled Start Date (10) 02/19/2014 Occupancy Status During Abstance Facalty closed/wasted during o	Sched. Completic 02/20/2014 (Chack only one)	nent		B&G Restorat Street Addicts 105 Ryerson Ru City, State, Zip Cod	oad	
Scope of West (check all that apply		70"		Liacoln Park,		Non-triable procedure
Lecation of substituting	2160 of or 2260 ff lis location normality matritional paint etaff(12)	MA had eclely		espeates-containing	SP)	Feet R B E E R R R R R R R R R R R R R R R R
photos in facility (13)	Yes No		pipe insulation		87 K	
	IN CONTROL		UDIO Yarda et Vyas	Name of Regis	lered Lundill esource & Recover	Center
Registered Wester Finance B & G Restoration, Inc. Chy, 8 ate Lincoln Park, NJ 07035	19563	Krieposal D	1	City, State Tullymwn,	PA	Dute 02/17/2014
Completed by (Print or Type)	Secretary/Tres	ISTUTOT		January -		

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) *** E M E R G E N C Y ***

2014-24 B & G proj. #:

Check #6397

Date of Notification (1))	H	Name of Bu	ildina Owne	er/Operator (2)		*		1.22	(i)	ij	F
0 2 / 1 7 /	114	11	Alex Lev	- 3	moperator (2)							
Agencies Notified	Type Notification	on §	treet Addre	ess					FEE	0 = 0	014	_
D DEP	Initial		alternate hospitals	eton Stre	et				FED	252	U14	7
DOL [Amendm		City, State,		27040			E)			THE SEC.	****
			_	rood, NJ	37040			(Tababaa	Number			<u> </u>
DOH □	Cancella	S 1 1 1 2 2 3	lame of Co					Telephone	Number			
☐ DCA			Alex Le	•V				4				
				FACI	LITY INFORMA	ATION		17				
Name of facility where	e abatement is	taking pl	ace (3)					Type of Facility (4	(K - 12)			
Alex Lev								1 =	pter 8 (Othe	r than K-	-12)	
Street Address								Other (F	Private/Com			
16 Princeton Str	reet	162							formes, etc.	T Bio	ig. Ag	e
City (5)		Cou	nty (6)			Cour	nty Code (7)	oqualo i soci			5 5	
Maplewood		E	ssex				te use only)	Current Use (Pri	or if being d	emolishe	ed)	
Name of Monitoring F	irm Hired by E	Bldg. Own	er (8)		ASCM No.	$\exists 1$	Name of Abatement (Contractor (9)			-	
	N/A						B & G Restoratio	n, Inc.				
Street Address						\neg	Street Address	****				
						_	105 Ryerson Roa City, State, Zip Code	ıd .				
City, State, Zip Code								07025				
Project Manager for M	onitorina Firm		I PI	none Numb	er .	-	Lincoln Park, NJ Telephone Number	07033	License Nu	mber		
, rojour managur ror m							973-696-6869	1, 1	0378			
Scheduled Start Date ((10)	Sche	d. Completi	on Date (11)	-	Name of OSHA Moni					
02/19/2014		02	/20/2014				B & G Restoration	on, Inc.				_
Occupancy Status Dur	ing Abatemen	t (Check	only one)		-	-	105 Ryerson Roa	nd				
Facility closed/va							City, State, Zip Code					_
Abatement perfo	rmed outside	of normal	facility hou	rs-		_						91
Other-Describe:						-	Lincoln Park, NJ	07035				
Scope of Work (check	· <u>144</u> 5							[wrap &		_	
Demolition		Renovati					ull Containment w/neg	gative pressure				
>3 sf or >3 lf		≥160 sf or			7	M N	Mini-enclosure		Non-friab		E	
Location of asbestos-contain	nina	by maint	enance/cus	used solely stodial	I	n of a	sbestos-containing	Amount	e	е	n	E n
material to be		staff(12)	т—	т —	material (sbestos-comanning	(Specify SI	or o	a	a	C
abated in facility	(13)	Yes	No	N/A				1 2.7	v e	1 . 1	р	
basement				X	pipe insula	tion		87 If	<u> </u>			무
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				-						+ -	片	H
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Registered Waste Hau	ler	INJO	EP Hauler	ID# I C	ubic Yards of V	Vaste	Name of Registered	Landfill				
B & G Restoration,			563		1		Tullytown Resou		Center			
City, State Lincoln Park, NJ 0	7035			Disposal D 02/2	ate 0/2014		City, State Tullytown, PA					
Completed by (Print or		Title			Signature		Gordana Luna		Date			
Gordana Luna		Secretar	y/Treasur	er			Yordana Zuna		02/17/20)14		

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* Emryncy *	U	(PL	ırsuant t	o NJAC 8:6	0 and 12:120	0)	C	K#0	2	14	8		
Date of Notification (1)			Chr	is L	ner/Operator	(2)	Wild I	roper	ty	U	C	7	5
Agencies Notified Type Notification			Street Ad		elrose	,	Aue						
EPA Initial Amended		Ī	City, Stat	e, Zip Code				-	ĒĒ.	25	, 20	14	
M Amendment # Emergency (in		- -	Name of	O+V	e, N	el	~ Jev	Telephone	Num	her		_	
DOH justification) Cancellation			0-	aia			9	1				6	
	DI (2		FACIL	ITYMFOR	MATION	TT	ype of Facility ((4)	an agrand Prod				
Name of Facility Where Abatement is Taking Worth Property Wild) -4a1	//0			-	School (K-1			447			
Street Address	192						Subchapter	8 (Other than private & comm			inac	nome	.
106 metrose Ave						6	etc.)				2,750,750		
City (5)						50	quare Feet	# of Floors	*	11 1132	dg. A	ge .	1
County (6)			County C	ode (7)		Ci	urrent Use (Pri		olishe		•		
Name of Monitoring Firm Hired by Building O	man (8)		ASCM		Name	of a	Abatement Co						\dashv
Name of Workoning First Fired by Building C	Wilet (0)		7,00,0				sulation Co.	• .					
Street Address			-/		Street		dress ntrose Road	,					
City, State, Zip Code	·						e, Zip Code					-	\dashv
(i), (ii)					Colt	s N	leck, N.J. 07	7722					
Project Manager for Monitoring Firm			Telephor	ne No.	Telepi 732-		e No. 4-1757	Licen 0002					
Start Date (10)	Schedul	a Con	npletion [Date (11)	Name	of (OSHA Monitor	9					
Occupancy Status During Abatement (Check	Only Or	1e)	111		Street	t Ad	dress	-		· ·			\neg
Facility Closed/Vacated During Entire P	eriod of	Abaten	nent		O'the 6	C1-6	- 7:- C-d-						
Abatement Performed Outside of Normal Other – Describe:	ai Facility	Hours			- City, s	State	e, Zip Code					-	
Scope of Work (Check All That Apply)	П	Renova	ition		· E	7	Full Containm	ent with Negat	ive Pr	ASSIIF	e e		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Demolit			F	7	Mini-Enclosur Glovebag Pro	e	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	00001	_		
						3	Non-Exempte	d (*) and Non-	Friable				
	1	Locati	777.50									ment pe	
Location of Asbestos-Containing Material (ACM)	Use	ed Sole	ely by		Description Containing I	Mate	erial (ACM)	Amount				<u>n</u>	Ш
TO BE ABATED In Facility		todial (12)	Staff?	1.00	ermal system surfacing, V/	AT,	or	(Specify SF or LF		Remova	Repair	Encapsulate	Enclosure
(13)	ļ.,		1	O	ther miscella	aneo	ous)			val	¥	ulate	sure
0.10/200	Yes	No	N/A	6.1.	- ^			1200	th	V			-
00+600			-	Sidin	'5	-		1200	7	_			\neg
													7
									Т				
Name of Registered Waste Hauler	*		JDEP W		Cubic Yards of Waste 2		100000000000000000000000000000000000000	Registered La	ndfill	28			
Ace Insulation Co., Inc.		4.000	2086)		G.R.O			-			
City, State Colts Neck, New Jersey					Disposal Date	9	City, Sta	te hem, PA					
Completed by	Title				Signatur	re	00 In A		Dat	e ,	. 1 .	. ,	
Bree McGuire	Secr	etary	Treasu	ırer	Bre	01	11:0		Lć	3/10	9/1	4	
ASB-41 (R-06-08)					* Do n	not u	use this form fo	r asbestos lice	nsure	exem	pted	activit	ies.

		Feb 20	2014 07:44am	P001/001
APPROVED of Health & Senior Services	NOTIFICATION OF	of Now Johnoy Agrestog arahement Agresiane 08:8 Daly	Check	8819
Sate of Notification (1)	/ Name of Bu	iliding Owner Operator (2)	or Renova	tions
Agencies Notified Type Notification	Street Add	ess 18 Winterberry	Rd	FEB 2.5
DEP Initial Amended	Clty, State.		1,200	
DOI. Aftendment # Emergency (In institution) DOA Cancellation	Name of C	ontact Lward Brownlee:		
Name of Facility Where Abatement is Taking	Place (3)	Type of Facility	S COME	
Single tarnily.	Durelling	School (k	er 8 (Other than K-12) b. private & commercial	buildings, homes,
City (5) Haddon Gold		3033 Square Feet	# of Floors	Bidg. Age
County (6)	County C		Frior if being demolisher	5)
Name of Monitoring Firm Hired by Building (No. Name of Abatement C		ies Inc
Streat Address	23	Street Address	x 337	SA BILL
City, State, Zip Code	NT 000	City, State, Zip Code	714 117	V0233
Project Manager for Monthly germ	Telephon		License No	2011
Steve Schenke	Scheduled Completion D	758-3365 604 758-37		דרכו
Start Date (10) 2-21-14	2-21-	Street Address	Lehnologies	Inc
Occupancy Status During Abatement (Cher Facility Closed/Vacuted During Entire		P.O. Bo		
Abatement Performed Outside of North	mal Facility Hours	Oity, State, Zip Code New Equa		8533
Scope of Work (Chack All That Apply)			, ith No adias D	
≥3 sf or ≥3 lf □ ≥180 sf or ≥280 lf	Renovation Demolition	Mini-Enclo	Inment with Negative Procedure Procedure opted (*) and Non-Edabl	
	Is Location			Abatement Type
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Nomally Used Solely by Maintenance/ Custodial Staff? (12)	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Encapsulate Repair Removal
(13)	Yes No N/A			<u> </u>
Kitchen ARea	X.	Wrapped Air Duct	s 30 UF	X
Name of Registered Weste Hauter	NJDEP I	Thate TTTT	ne of Registered Landfil	
EPC Technologi	es 170	OO	aste Manage	
Olty, States New Egypt	NJ	2-24-14 M	ornisuille !	PA
Completed by Schen Ken	President	Signature Signature	elecha!	2-19-1

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

Date of Notification (1)	N	ame of Building					77	19	/						
February 19, 2014				On Site	e Wa	ste Services	3.	23	P1-		·= -				
[] DEP [] Amend	Notification ded Notific			treet Address		st Ke	nnedy Street	t							
X DOL	dment # ency (inclu	ıding				nsac	k, NJ 07601		FEB	2 3	ZU14		7		
[] DCA justific			N	lame of Contact	Giaquinto			Telepho	ne Number		12	. 1			
[] Cance	nation										-	<u>- </u>	_		
		F	ACIL	ITY INFOR	MATION								V-1-4		
Name of Facility Where Abatement is Taking I Residence	Place (3)		- III		,	Тур	be of Facility (4	Scho	ol (k-12) hapter 8 (oth	er than	k-12)				
Street Address 101 W. Tarpon Wa	ıy						[x]	Othe	r (i.e., private es, etc.)			l buildii	ngs,		
City	County (6)		ounty Code (7) TATE USE ON	T V)	Squ	uare feet 500 sf	# o:	f Floors 1	Bldg.	Age 60)			
Toms River Twp.	Ocean		(3	TATE OSE ON	LI	Cu	rrent Use (Prior	- 1 Total	1						
Name of Monitoring Firm Hired by Building C N/A	Owner (8)		A	SCM No.	Name of	f Abat	ement Contract	or (9)	ntracting,	Inc.					
Street Address					Street A	ddress	3								
Cir. See. 7i- Code					City, Sta	ate Zi		9, Unit 61	_	$\overline{}$					
City, State, Zip Code						Toms River, New Jersey (
Project Manager for Monitoring Firm	iber		732-34				License N 00624	umber							
Scheduled Start Date (10) 2/20/14							IA Monitor E.M.	1.S.L. Analytical							
Occupancy Status During Abatement (Check of X) Facility Closed/Vacated Abatement Performed Of Check of Check of Check of X	During E	ntire Period of			Street A City, Sta		1056 p Code	Stelton	Road New Jerse	y 088	54				
Scope of Work (Check all that apply)]	Full Containm		Negative Pres	sure					
[] >3 sf or ≥3 lf [x] ≥160 sf or ≥260 lf	- W		enovatio emolitic		[[x]	Mini-Enclosur Glovebag Proc Non-Exempted	edure	Non-Friable	Procedu	re				
										Abat	ement '	Гуре			
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	odial V/A	· (Descripti Asbestos-Co Material (i.e., therma nsulation, s VAT, other miscel	ACM ACM l syst surfac or	ning f) ems ing,		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		Asbestos si	ding			50	00 sf	X					
					T 57		4CU	<u> </u>							
Name of Registered Waste Hauler Guardian Contracting, Inc.	Hauler I	3			Name of Reg		andiili								
City, State Toms River, New Jersey			Disposa 2/24/1		City, Tulk	state ytow	n, Pennsylva	ania/1							
Completed by (Print or Type) Nicholas Fernicola		Signature	chot	//	ten	/		Date 2/1	9/14		120				

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

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

Date of Notification (1)	February 19, 2014			Na	ame of Build	ding Own	er/Opera Semino	tor (2)	onstruction		7	36	9	<u></u>		
Agencies Notified [x] EPA	Type of Notification		ion	St	reet Address	S	128 Ba	rtlett	Avenue					15.		
[] DEP [x] DOL	Amend	ed Notifiment #_ ency (inc	fication	Ci	ity, State, Zi	ip Code	West C	reek,	, NJ 08092			2 5	2014	F	2	
[x] DOH	[X] Emergorial justific	ation)	ordanig	N	ame of Cont Jo	tact byce				Telepho	ne Number 4					
			F	ACIL	ITY INFO	ORMA'	TION		am 111. /	45					\neg	
	Abatement is Taking F Residence	Place (3)						Тур	e of Facility (Scho	ool (k-12) chapter 8 (other er (i.e., private	er than k	·12)	buildin	gs.	
Street Address	17 W. Bonita Wa	y							[x]		er (i.e., private nes, etc.)					
City		County	y (6)	Co (S	ounty Code (STATE USE	(7) ONLY)		853	are feet 700 sf		of Floors 1	Bldg.	Age 60			
Toms Riv	er Twp	Ocea	ın		(Se				Resi	dence	demolished)		8 			
Name of Monitoring Fir)wner (8	8)	A	SCM No.		Name of	Abate	ment Contrac Gua	rdian C	ontracting,	Inc.				
Street Address	N/A						Street A	ddress		9 Route	9, Unit 61					
City, State, Zip Code							City, Sta	ate, Zip	Code Toms River, New Jersey 08755-1271							
Project Manager for M	roject Manager for Monitoring Firm Telephone Nu						Telepho 732-34		Number License Number 00624							
	cheduled Start Date (10) Scheduled Cor 2/20/14 2/21/14						732-349-9932 00624 Name of OSHA Monitor E.M.S.L. Analytical									
Occupancy Status Duri	ing Abatement (Check Facility Closed/Vacate Abatement Performed Other – Describe	d During	g Entire Period of	Abate ty Hou	ment		Street A		n Code	6 Stelto	n Road , New Jers	ey 088:	54			
Scope of Work (Check	c all that apply) >3 sf or ≥3 lf		L J	enovati		×	[[[[x]]]	Mini-Enclos Glovebag Pr	ure ocedure	Negative Pre		re			
[x]	≥160 sf or ≥260 lf		[]		T			=		T		Abat	ement 1	Гуре		
Asbestos-Containi TO BE A	Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Is Location Normally used Solely by Maintenance/Cust Staff (12)					Material (ACM) (Specify SF M					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					Asbest	os sidir	ng				650 sf	X	Γ_		_	
200000												-	+-	-	-	
												+	-	-	+	
Name of Registered V	Waste Hauler an Contracting, Inc		NJDEP Waste	Hauler 223	ID No.	Cubic Y	ards of W	Vaste	Name of I		l Landfill					
City, State					sal Date /14		City, Tul	City, State Tullytown, Pennsylvania								
Completed by (Print	Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Title Project Manages						Chi	of	te	Date 2/19/2014						

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

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

Date of Notification (1)	bruary 19, 2014			Name of Building Owner/Operator (2) Seminole Construction 23689												
Agencies Notified [x] EPA	Type of Notificatio	n Notification		St	reet Address	200000000000000000000000000000000000000		Avenue			7 2		∩1 <u>Δ</u>			
[] DEP	Amend	ed Notific ment # ency (inclu		С	ity, State, Zip Cod		reek	, NJ 08092								
[x] DOH [] DCA	justific [] Cancel				lame of Contact Joyce				Telephon	e Number						
				FACIL	ITY INFORM	ATION	Tym	e of Facility (4)	`		-	-				
Name of Facility Where Ab Res	atement is Taking P idence	lace (3)				100	Тур	[] []	Schoo	ol (k-12) napter 8 (other	er than k	:-12)				
Street Address 773	Barberry Drive							[x]	Other	(i.e., private s, etc.)			buildir	igs,		
City		County (5)		ounty Code (7) TATE USE ONL	r)		are feet 1200 sf		Floors 1	Bldg.	Age 60				
Brick		Ocean						rent Use (Prior Resid	ence	lemolished)						
Name of Monitoring Firm I		wner (8)		A	SCM No.	Name of	Abate			ntracting,	Inc.					
Street Address						Street Ad		1889	Route 9	, Unit 61						
City, State, Zip Code						City, Stat	20 35	Toms	River,	New Jerse		55-12	71			
Project Manager for Monit	oring Firm	mber	Data (11)	732-34	9-99			00624								
Scheduled Start Date (10) 2/20/14 Occupancy Status During A		mpietion	Date (11)	Street Ac		E.M.	S.L. Analytical									
[X] Faci	ility Closed/Vacated tement Performed (er – Describe	During E				City, Sta	te, Zij	p Code		Stelton Road away, New Jersey 08854						
Scope of Work (Check all						<u></u>	<u> </u>									
[] >3 :	sf or ≥3 lf	12	F 1	Renovation Demolitic		[] [x	 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure 									
[X] ≥16	00 st or ≥260 II		[^]	Demonia	JII		,		Ť			ement 1	Tyne			
Asbestos-Containing N TO BE ABA	Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility Is Location Normally used Solely by Maintenance/Custo Staff					Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) Amount (Specify SF or LF) V R A						R E P A I	E N C A P S U L	E N C L O S U R		
		YES	NO	N/A	Asbestos sid	ing		1 	10	000 sf	L X	-	Е	Е		
Exterior X					Aspesios sia	g			10							
											-	-	-			
Name of Registered Waste Hauler Guardian Contracting, Inc. NJDEP Waste H					ID No. Cubic 3	Yards of Wa	ıste	Name of Reg		andfill						
City, State				Dispose 2/24/1	al Date	City, S Tully		n _{s'} Pennsylva								
Completed by (Print or Ty	Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Title Project Manager					the	/ [+e~	1		2/1	9/201	4			
		+1		Li- Cour	for ashestos lic	angura ava	mnte	d activities								

(1/4/1513)	(Pu	rsuan	t to NJA	C 8:60 and 5:1	6)							
Date of Notification (1)					Name	of Building	Owner/Operator	(2)							
	20 /	14			Divi	ision of F	Property Manag	ement & Const	ruction		17	E			
Agencies Notified	Type Notifica	ition			Street	Address									
□ EPA					33 \	Nest Star	te Street	1.20				100			
⊠ DOLWD	☐ Amended				City, S	state, Zip C	ode			2 5 20	114	F			
⊠ DOH	Amendme		_		Tre	nton, NJ	08608					50 0	70		
DCA (NJAC 5:23-8)	☐ Emergend justification		ng		Name	of Contact	t		Telephone Nu	mhor	4-3 45 +				
(110/10 0.20 0)	☐ Cancellat	(5))			Ric	k Ferrera	I,		4	The state of the state of	-	1			
	ET.				FAG	CILITY IN	FORMATION				200-10	-			
Name of Facility Where A	Abatement is T	aking Pla	ce (3	3)				Type of Facility	(4)						
Residential House								School (K-12							
Street Address						100	1 - 1 - 1		B (Other than K-1 rivate and comm		ildina				
50 MacArthur Aven	ue							homes, etc.)		erciai bu	liuling	ъ,			
City (5)								Square Feet	# of Floors	Bl	dg. A	ge			
Sayreville											8533	520			
County (6)					Cour	ty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	lished)					
Middlesex					150										
Name of Monitoring Firm	Hired by Build	ding Owne	r (8))].	ASCM	No.	Name of Abatem	ment Contractor (9)							
Environmental Con							First And Charles and Annual Persons and Control of the	ANAGEMENT L							
Street Address					- CT CT T		Street Address								
120 North Warren S	Street						27 Outwater	Lane							
City, State, Zip Code							City, State, Zip C						_		
Trenton, NJ							Garfield, NJ								
Project Manager for Mon	itorina Firm		1	Tele	phone	No	Telephone No.	0.020	License No.						
Ryan Broadwater	itoring r iiii				9-392		973-928-488	ρ	1188						
Start Date (10)	10	Scheduled	Con			15	Name of OSHA	7	1100						
03 /03 /	753855				/ _		LC								
Occupancy Status During	Abatement (0	Check onl	y one	e)			Street Address								
□ Facility Closed/Vacate	ed During Entir	re Period	of Ab	oater	ment										
☐ Abatement Performed							City, State, Zip C								
Time of Abatement: _	AM	PM/		PM-		AM	Garfield, NJ	07026							
Scope of Work (Check all	that apply)					W. 1	12 20 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	manipus and wide No metion De-							
N . 2 . f 2 lf			-		entra			ontainment with Negative Pressure							
≥3 sf or ≥3 lf ⇒160 sf or >260 lf				ovati			☐ Mini-En	ciosure ag Procedure							
								empted (*) and No	n-Friable Proced	lure					
				ocat						Ab	atem	ent T	уре		
Location		i ii		Sole	lly ely by	A-1	Description		A	Z	Z,	ш	Щ		
Asbestos-Containing TO BE ABA		' r	/lain	tena	nce/		stos Containing M		Amount (Specify	Removal	Repair	Encapsulate	Enclosure		
IN Facili	ty	C			Staff?		surfacing, VAT	Γ, or	SF or LF)	Va.	"	Sul	Sure		
(13)		Ye		(12) No	N/A	1	other miscelland	eous)				ate			
Basement			-			Floor T	ile and Mastic		100 SF						
Dasement					-	F1001 1	ile allu Mastic		100 31		1		무		
			L			<u> </u>						П	┞		
] [13	2-02							
The state of the s						NJDEP Waste									
ALL PRO MANAGE			Н	auler II 00348		Waste As Needed	IESI Landi	īll							
City, State							Disposal Date								
Garfield, NJ							TBD	Bethlehem	ı, PA						
Completed By (Print or Ty	/pe)	Title	-				Signature	,//		Date	_		. 1		
Zvonko Veskov		Presi	den	t			5.	Helal		Ž-	9	1-1	4		

ASB-41 JAN 13

* Do not use this form for asbesto Licensure exempted activities.

State of New Jersey

K# 1512						8:60 and 5:16)			-	E I	1	1
ate of Notification (1)	20 / 14		N	ame of I Divisio	Building Con of Pro	owner/Operator (2) Operty Manager	nent & Constru	uction				-
	Type Notification		S	reet Ad	dress			FEB 2 5 2	2014			
gencies Notified BPA	☐ Initial			33 We	st State	Street			10			1
DOLWD	☐ Amended		C	ity, Stat	e, Zip Co	de						
DOH	Amendment #_				n, NJ 0			. 1		_ :_	-	1
DCA	☐ Emergency (inc	cluding	N		Contact		4 - 1	Telephone Number		**************************************		ال
(NJAC 5:23-8)	justification) Cancellation				errera				m y 22			
	Cancellation			AND STREET		ORMATION					-	_
Name of Facility Where	Abatement is Taking	Place (3)	17,0			Type of Facility (4					
		,	3.5				School (K-12)	(Other than K-12)				
Residential House		-					Other (i.e., pr	ivate and commercial	buildi	ngs,		
Street Address							homes, etc.)					_
28 MacArthur Ave	nue		_				Square Feet	# of Floors	Bldg.	Age		
City (5)												_
Sayreville				County	Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolishe	d)			
County (6)												
Middlesex	D. ilding	Owner (3) [SCM N	0	Name of Abatem	ent Contractor (9)					
Name of Monitoring Fin	m Hired by Building	Owner ()		•	ALL PRO MA	NAGEMENT L	LC				
Environmental Co	onnection inc.					Street Address						
Street Address						27 Outwater						
120 North Warren	Street					City, State, Zip C						
City, State, Zip Code						Garfield, NJ						
Trenton, NJ			1= 1	- L N	la .	Telephone No.		License No.	-31174		n	
Project Manager for M	onitoring Firm		100000000000000000000000000000000000000	phone N		973-928-488	8	1188				
Ryan Broadwater	r		10700	9-392-		Name of OSHA						
Start Date (10)		eduled C	omple	tion Dat	e (11)	ALL PRO MANAGEMENT LLC						
03 /03		03		<u>- ' -</u>	14		7.10.102					
Occupancy Status Du	ring Abatement (Che	eck only	one)			Street Address	- Lano					
M Encility ClosedN/ac	ated During Entire F	Period of	Abate	ment	-1	27 Outwater			-			
Dat toward Dorforn	and Outside of Norm	ial Facili	y Hou	S - Des	Cride AM	City, State, Zip						
Time of Abatemen	t:AM	PW/	_FIV		- IVI	Garfield, N.	07026					
Scope of Work (Chec	k all that apply)	77.				⊠ Full Co	ontainment with Ne	egative Pressure				
, C.		ПВ	enova	ion		☐ Mini-E	nclosure					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		⊠ b	emolit	on		Glove	pag Procedure	Non-Friable Procedure	е			
△ ≥160 Si 0i ≥200 ii		(80-2-7)				⊠ Non-E	xempled () and i		Aba	teme	ent T	ype
			s Loca Norm			Description	n of		-			
Loca	tion of	U		lely by	Ash	estos Containing	Material (ACM)	Amount	Removal	Repair	Encapsulate	Lindoon
A-Lactor Contair	ning Material (ACM)		lainten		(i	e thermal system	ns insulation,	(Specify SF or LF)	ova	=	psu	1
ASDESIOS-COITAIN	mar 3 00 1 1 1 1 /	Cu	istodia (12	Staff?		surfacing, V	aneous)		-		late	1
TO BE	acility			500000	7	Othor Imeran	8		1			+
TO BE		Ye		N/A						П	\boxtimes	
TO BE	acility	Ye	s No	_		eum and Mastic	:	280 SF	\boxtimes	_	-	F
TO BE	acility		s No			eum and Mastic	:	280 SF				IT
TO BE IN F (acility		s No	_		eum and Mastic	:	280 SF				1
TO BE IN F (acility		s No			eum and Mastic	:	280 SF			001	1
TO BE IN F (acility		s No			eum and Mastic						
TO BE IN F	acility 13)		s No		Linole			280 SF				
TO BE IN F () Kitchen	acility 13) Waste Hauler		s No	U U		Cubic Yards o	f Name of Re	egistered Landfill				
TO BE IN F	acility 13) Waste Hauler		s No	D D NJDEF	Linolo	Cubic Yards o Waste As Neede	f Name of Re	egistered Landfill				
TO BE IN F () Kitchen	acility 13) Waste Hauler		s No	D D NJDEF	Linolo Waste ID No.	Cubic Yards o Waste As Neede Disposal Date	Mame of Red IESI Lar City, State	egistered Landfill				
TO BE IN F (Kitchen Name of Registered ALL PRO MAN.	acility 13) Waste Hauler		s No	D D NJDEF	Linolo Waste ID No.	Cubic Yards o Waste As Neede Disposal Date TBD	Name of Red IESI Lar City, State Bethleh	egistered Landfill ndfill nem, PA				
TO BE IN F (Kitchen Name of Registered ALL PRO MAN City, State	Waste Hauler		s No	D D NJDEF	Linolo Waste ID No.	Cubic Yards o Waste As Neede Disposal Date	Mame of Red IESI Lar City, State Bethleh	egistered Landfill ndfill nem, PA		8		1

ASB-41 JAN 13

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

State of New Jersey MENT

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

1/ #1514		NO					ESTOS ABAT 8:60 and 5:16							
Date of Notification (1)	20 /	14		I			Owner/Operator (2 roperty Manage		ruction		10			
Agencies Notified	Type Notificatio	on				ddress est State	e Street	*						
□ DOLWD	☐ Amended			-	City, St	ate, Zip Co	ode							
□ DOH	Amendmen					ton, NJ (
☐ DCA (NJAC 5:23-8)	☐ Emergency justification		ding	-	Name o	of Contact			Telephone Number	er			-	
(NJAC 3.23-0)	☐ Cancellation				Rick	Ferrera								
		-			FAC	ILITY IN	FORMATION				-			
Name of Facility Where	Abatement is Tal	king P	lace (3)				Type of Facility ((4)					
Residential Hous		J						School (K-12						
Street Address		_						Subchapter 8	3 (Other than K-12) rivate and commerc	ial hui	ldinas	rs.		
127 Weber Avenu	ie							homes, etc.)		iai bui	unig	,		
City (5)			-					Square Feet	# of Floors	Bld	g. Ag	е		
Savreville							/							
County (6)				-120	Count	y Code (7)	(STATE USE ONLY)	Current Use (Pri	ior if being demolish	ned)		1-1-1-1		
Middlesex														
Name of Monitoring Fin	rm Hired by Buildir	ng Ow	mer (8	3) /	ASCM N	No.	Name of Abateme	ent Contractor (9)		V				
Environmental C		5	,					NAGEMENT L						
Street Address							Street Address				3,000			
120 North Warrer	Street						27 Outwater	Lane						
City, State, Zip Code				_			City, State, Zip C	ode						
Trenton, NJ							Garfield, NJ	07026						
Project Manager for M	onitoring Firm		_	Tele	phone N	No.	Telephone No.		License No.			-		
Ryan Broadwater				110000000000000000000000000000000000000	9-392-		973-928-4888	3	1188					
Start Date (10)		chedul	ed Co	mplet	tion Dat	e (11)	Name of OSHA	Monitor						
03 /03	/ _14	_03	_ /	10	_ / _		ALL PRO MA	NAGEMENT L	LC					
Occupancy Status Dur							Street Address							
☐ Facility Closed/Vac													_	
☐ Abatement Perform Time of Abatement						AM	City, State, Zip C							
							Garfield, NJ	07026						
Scope of Work (Check	(all that apply)	г	J pa	novati	on		☐ Full Cor	ntainment with Ne	gative Pressure					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				molitic			Gloveba	ag Procedure	on-Friable Procedui	e e				
			Is	Locat	ion						atem	ent T	уре	
Locati				lorma			Description			Z.	ž	Щ	П	
Asbestos-Containi		1		d Sole intena		Asbe	estos Containing M e., thermal systems	aterial (ACM)	Amount (Specify	Remova	Repair	Encapsulate	Enclosure	
TO BE A			Cust		Staff?	(surfacing, VA	Γ, or	SF or LF)	<u>val</u>	7	sul	sure	
(1:		-		(12)	21/4	1	other miscellan	eous)				ate		
			Yes	No	N/A			10.0		57				
Exterior				\boxtimes		Siding	Shingle		2,150 SF			Ш		
9													E	
							22							
Name of Registered V	Vaste Hauler			183	JDEP '		Cubic Yards of	Name of Regi	istered Landfill		-		Acres	
ALL PRO MANA				F	lauler II		Waste As Needed	IESI Land	fill					
City, State			-		00040	,,,,,	Disposal Date	City, State						
Garfield, NJ							TBD	Bethleher	n, PA					
Completed By (Print of	or Type)	Title					Signature	1/	Da	ate	^	1 1	11	
Zvonko Veskov	, , , , ,	20060	eside	ent			5	1/101	1 2-21-19					
ZAOLIKO AESKOA					2000		1.	ino C			-	2000		

ASB-41 **JAN 13**

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

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

Check # 6404 2014-25 B & G proj. #: Name of Building Owner/Operator (2) Date of Notification (1) St. Francis Residential Community 10/2//2/01/114 FEB 2 5 2014 Type Notification Street Address Agencies Notified 122 Diamond Spring Road ☑ EPA Initial City, State, Zip Code DEP Denville, NJ 07834 Telephone Number Amendment DOL Name of Contact Perry Moreschi - ABM Facility Manager DOH Cancellation ☐ DCA FACILITY INFORMATION Type of Facility (4) School (K - 12) Name of facility where abatement is taking place (3) Subchapter 8 (Other than K-12) Other (Private/Commercial St. Francis Residental Community Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet Street Address 122 Diamond Spring Road County Code (7) Current Use (Prior if being demolished) County (6) (State use only) Health care facility (non-sub 8) City (5) Name of Abatement Contractor (9) Denville, NJ 07834 Morris ASCM No. Name of Monitoring Firm Hired by Bidg. Owner (8) B & G Restoration, Inc. 99-12482 Total Solution Environmental LLC Street Address 105 Ryerson Road Street Address City, State, Zip Code 22 Columbia Road Lincoln Park, NJ 07035 City, State, Zip Code License Number Telephone Number Morristown, NJ 07960 0378 Phone Number 973-696-6869 Project Manager for Monitoring Firm 973-998-9348 Name of OSHA Monitor Benjamin Waer B & G Restoration, Inc. Sched. Completion Date (11) Scheduled Start Date (10) Street Address 07/25/14 03/05/2014 105 Ryerson Road Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Lincoln Park, NJ 07035 wrap & cut Describe: Other-Describe: Glovebag procedure ☑ Full Containment w/negative pressure Scope of Work (check all that apply) Non-friable procedure Mini-enclosure Demolition E ≥160 sf or ≥260 lf E n $\square > \underline{3} \text{ sf or } > \underline{3} \text{ lf}$ Is location normally used solely n Amount m p C Description of asbestos-containing C by maintenance/custodial (Specify SF or 0 a а Location of material (ACM) asbestos-containing p staff(12) material to be N/A No abated in facility (13) Yes 256 lf Ipipe insulation 391 lf pipe insulation Storage Room 139 If pipe insulation Old kitchen area V 170 sqft / 5 lf tank insulation / pipe insulation Hallway by storage/old kitch 360 If Boiler Rm/Rear storage Rm pipe insulation Name of Registered Landfill Cubic Yards of Waste Tullytown Resource & Recovery Center Rear Boiler Rm Tunnel NJDEP Hauler ID# Registered Waste Hauler 16 yds 19563 City, State B & G Restoration, Inc. Disposal Date Tullytown, PA 03/7/14 - 07/25/14 City, State Lincoln Park; NJ 07035 Gordana Luna 02/20/2014 Signature Completed by (Print or Type) Secretary/Treasurer Gordana Luna

State of NJ

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

B & G proj. #:	2014-25		(Pursu	ant to N	IJAC 8:60-	7 and 1	12:120-7)	_	Check #6	404		_					
			D. 11-dines On	wper/One	erator (2)								7				
Date of Notification		Name of	Building O	wilel/Opt sidentia	l Commun	ity								į			
10121/1119	1/114			siderilla	ii Ooitiiiii			The state of the s			848		1				
Agencies Notified	Type Notification	Street Ad	idress	0	Dood					2 = 20	it h			-			
☑ EPA	1nitial		Diamond	The second secon	Roau				1 - 2	L 7							
☐ DEP		City, Sta	te, Zip Cod	le													
☑ DOL	☐ Amendment	Den	ville, NJ (7834					Telephone I	Vumber		y.		-			
	_	Name of	Contact						, C.Op.				۲.				
DOH	Cancellation	Dorr	v Mores	chi - AB	M Facility	Manag	er	4				=		-			
☐ DCA	- Carree	1 1011							_					_			
				FACILITY	INFORMATI	ION		Type o	f Facility (4)								
	where abatement is taki	ing place (3))				1	1" [School	(K - 12)		11					
Name of facility w	Wilele abatchion to	nit.					1		Subchap	oter 8 (Other	er than	K-12)					
St. Francis R	Residental Commu	Tilly						6	Other (P	rivate/Com	ımercia						
Street Address							1			of Floors		Bldg.	Age				
	d Spring Road							Squa	re Feet #	OI FIDUIS		-ondu s tiii					
122 Diamon	d Opring . term	County (6)			-	County (Code (7)		ent Use (Pri	or if being	demolis	molished)					
City (5)		County (o	'			(State us	se only)	Cum	alth care f	acility (no	on-sub	8)					
Denville, NJ	07834	Morris	25				me of Abatemen	Contrac	tor (9)								
	ring Firm Hired by Bldg	Owner (8)		A	SCM No.												
Name of Monito	N/A	,					3 & G Restorat	ion, Inc.									
	INA					11	reet Address	_									
Street Address	**					105 Ryerson Road											
							y, State, Zip Cod										
City, State, Zip C	ode					- 11	Lincoln Park, NJ 07035										
			Dhone	Number		Te	elephone Number	r		0378	- AUTTINO			1			
Project Manager	r for Monitoring Firm		Filone	, , , , , , , , , , , , , , , , , , , ,			973-696-6869 Name of OSHA Monitor										
	200			Sato /11\		- N											
Scheduled Start	Date (10)	1	ompletion I	Jale (11)		B & G Restoration, Inc. Street Address											
03/05/201		07/25	5/14	100000000000000000000000000000000000000													
	tus During Abatement	(Check only	one)			- 11	105 Ryerson I	Road									
	to the design of the	ntine nenoo	Ol apateine	ent.			ity, State, Zip Co	ide									
Facility C	nt performed outside o	f normal fac	ility hours-			_11		NIT 070	25			00-12		_			
Describe						=	Lincoln Park,	, NJ 070	33	C WEST	& cut			_			
Other-De	escribe:									1 1	bag pro		re.				
Scope of Wor	k (check all that apply)					 Fu	II Containment w	/negative	pressure		friable p						
☐ Demoliti		Renovation				M M	ini-enclosure			☐ Non-			-				
	> <u>3</u> If	160 sf or ≥2	260 lf	i lab							R	R	E	E			
Location		Is location r	normally us	ea solely dial		ion of ac	bestos-containin	g	Amount (Specify	SE or	m	Р	C	n			
asbesto	s-containing	staff(12)	21100700010		material	(ACM)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	(Spear)	31 01	O V	a	a p	L			
materia	I to be		No	N/A		••••••		- 1	/		е	نا	-	-			
abated	in facility (13)	Yes	140		pipe insul	ation			256 lf			닏	부	片			
Storage R	oom			X	pipe insu				391 lf			닏	쀼	#			
Old kitche	n area		7	X					139 lf		<u> </u>	븯	#	부			
Hallway b	y storage/old kitch			X	lipipe insulation					부	11						
Dailer Da	/Rear storage Rm			X	tank insulation / pipe interest												
Done Police	er Rm Tunnel	11		X													
Registered W	Vaste Hauler		P Hauler II	D# (Tally down Resource & Recovery Conton												
B & G Res	storation, Inc.	1950	63	Dioposal	10 700												
City State				U.S.\	posal Date City, State Tullytown, PA Date												
Lincoln P	ark, NJ 07035				Signature												
Completed b	Completed by (Print or Type) Completed by (Print or Type) Secretary/Treasurer						Gordana Luna										
Gordana 1	Luna	Secretary	y/ 1100001														

State of NJ

D&S Proj. #: 2014-67					and 12:120)	7	,	0.7	īE.					
(1/ # 005SIS)		35											
Date of Notification (1) 0 2 / 1 8 / 1 4	11		ding Owne	r/Operator (2)			FE	9 2 5	2014	!	;			
Agencies Notified Type Notification	_	eet Addre		AK					-					
☐ EPA ☐ Initial ☐ Amended		1731 WA	TCHUNC	AVENUE						:	•	1		
Amendment #:		y, State, Z	50						**		177			
Emergency			IELD, NJ	07061			Telephone	Number		_	-			
DOH (including justification)	Na	me of Con	tact				relepriorie	Number						
DCA Cancellation		MARIO	N GRZES		_		<u></u>			_	_	_		
			FACIL	LITY INFORMA	ATION	N .	Type of Facility (4	1)			-			
Name of facility where abatement is	taking plac	ce (3)						(K - 12)						
MARION GRZESIAK								pter 8 (Ot			12)			
Street Address							Other (F	Private/Co Homes, et		cial				
1731 WATCHUNG AVENUE								# of Floors	_	Blo	lg. Ag	je		
City (5)	Count	ty (6)				unty Code (7) ate use only)	Current Use (Pr	ior if being	demo	olishe	ed)			
PLAINFIELD	UNI	ON								300 P 1340 C C C C				
Name of Monitoring Firm Hired by E	Bldg. Owner	r (8)		ASCM No.	\neg	Name of Abatement	Contractor (9)				2			
						D & S RESTOR	ATION, INC.							
Street Address						Street Address								
						20 California A			License Number 01169					
City, State, Zip Code						City, State, Zip Code								
						Paterson, NJ 0'	7503	Hisanaa	Niumb	01	_			
Project Manager for Monitoring Firm		Ph	one Numb	er		Telephone Number 973-345-8020				ei				
						Name of OSHA Mor					_			
Start Date (10)	Sched.	Completion	on Date (11)		D & S Restorat								
03/03/14	03/26	/14				Street Address		****						
Occupancy Status During Abatemen	t (Check or	nly one)				20 California A	venue							
Facility closed/vacated during Abatement performed outside						City, State, Zip Code	•							
Describe: NORMAL H	OURS				_	Paterson, NJ 0	7503							
Scope of Work (check all that apply							Full Containment w	/negative	press	ure				
	Renovation	n					Mini-enclosure Glovebag procedu	ro.						
≥160 sf or ≥260 lf	Demolition						Non-Exempted (*)		friable	proc	edure			
Location of	Is location	normally	used solely	1					R	R	E	E		
asbestos-containing	by mainte staff(12)	nance/cus	todial			asbestos-containing	Amount (Specify S	E or	m	р	n c	n		
material (acm) to be abated in facility (13)		No	N/A	material ((ACM)	LF)	,, 01	o v	a	a	L		
= 3 8	Yes	No	IN/A				6016		e	r	<u> </u>	-		
BASEMENT LAUNDRY RM		$\square X$		PIPE INSU			60 l ft			片	片	뿎		
BASEMENT ABOVE ceiling		LX.		PIPE INSU			16 L FT		N N	片	片	╫		
GARAGE CRAWL SPACE		LX	-	PIPE INSU	LAI	TON	<3 L FT		卄	H	片	H		
								-	묶	片	片	計		
Registered Waste Hauler	INJDE	P Hauler	ID# I C	Cubic Yards of	Waste		d Landfill	-	<u></u>			1"		
D & S RESTORATION, INC.	135			l yd		TULLYTOWN	, RESOURCE RE	ECOVER	RY					
City, State			Disposal D			City, State								
PATERSON, NJ 07503			03/04/1	4 Signature		TULLYTOWN	N, PA	I Data			_			
Completed by (Print or Type) Title Sign BOGDAN JOLDZIC PRESIDENT								Date 02/18	/14					
ASB-41	cempt	ted activities.												

State of NJ

		Notific	cation of Asb	estos Aba	atement		- v /	E. I				
D&S Proj. #: 2014-70	- 51	(Pursu	ant to NJAC	8.00 and	1 12.120)				1			
(1)(*005513)	I I Nome	of Building Own	per/Operator (2)			FFA S	5 2014		-,/		_	
Date of Notification (1)	1	BERT HENN	ien oporator (=)) See 67				1_	_	
Agencies Notified Type Notification		Address				r,				1		
☐ EPA ☐ Initial	208	8 LENTZ AV	ENUE						- % **********		-	
DEP Amended Amendment #:		State, Zip Code										
DOL Emergency	- UN	NION, NJ 0708	33			Telephone	Number				-	
DOH (including justification)	Name	of Contact				Telephone	ramo.					
DCA Cancellation	RO	DBERT HENN	N			<u></u> Ł		=	_	_	_	
		FAC	CILITY INFORM	IATION		15 15 11 11		W.S.			_	
Name of facility where abatement is t	aking place	(3)				Type of Facility (4	(K - 12)					
							pter 8 (Othe			2)		
ROBERT HENN						Other (I	Private/Comi Homes, etc.	mercia	al			
Street Address							# of Floors	\top	Bldg	. Age		
2088 LENTZ AVENUE	County	(6)		County	Code (7)							
City (5)	County	(~)		(State u	ise only)	Current Use (Pr	ior if being d	emoli	shed)		
UNION	UNIO		Lagorania	IINa	ame of Abatement	Contractor (9)			_			
Name of Monitoring Firm Hired by Bl	dg. Owner (8	3)	ASCM No.	11	D & S RESTOR					New year		
					reet Address							
Street Address					20 California A							
City, State, Zip Code				Cit	y, State, Zip Code							
Oily, State, 24 Good					Paterson, NJ 0	7503	License N	umbe	r		_	
Project Manager for Monitoring Firm		Phone Nu	mber	Te	973-345-8020		011					
				N	ame of OSHA Mo							
Start Date (10)	Sched. C	Completion Date	(11)	- 11	D & S Restora	tion, Inc.			_			
02/22/14	02/28/1			S	treet Address							
Occupancy Status During Abatemen	(Check onl	y one)			20 California A			_				
Facility closed/vacated during Abatement performed outside	entire period of normal fa	of abatement. cility hours-			ene proposition of the second							
Describe:NORMAL H					Paterson, NJ					_	=	
Scope of Work (check all that apply						Full Containment Mini-enclosure	w/negative p	pressu	re			
	Renovation					Glovehag proced	ure					
≥160 sf or ≥260 lf	Demolition					Non-Exempted (*) and Non-fr	riable R	Proce	E	Process of	
Location of	Is location	normally used s nance/custodial	olely	. 20	haataa aantalalaa	Amount		e m	e p	n	E n	
asbestos-containing material (acm) to be	staff(12)	ianoc/odologia.		iption of asi ial (ACM)	bestos-containing	(Specify LF)	SF or	0	a	а	C	
abated in facility (13)	Yes	No N	/A			1 2.,		v e	r	р		
DAGEN CENT		X	PIPE IN	SULATIO	ON	32 L FT		M	부	片	ዙ	
BASEMENT								ዙ	片	片	ዙ	
								卄	H	片	恄	
								厅				
		D Harder ID#	Cubic Yards	of Waste	Name of Registe	ered Landfill		, <u> </u>				
Registered Waste Hauler D & S RESTORATION, INC.			1 yd		TULLYTOW	N, RESOURCE	RECOVER	(Y				
City, State			osal Date		City, State TULLYTOV	VN PA						
PATERSON, NJ 07503		02/	/24/14 Signatur	re	TULLTION	111,171	Date					
Completed by (Print or Type)	Title PRESID	ENT	Signatur				02/19/	/2014	1	_		
BOGDAN JOLDZIC	* Do not us	e this form for as	sbestos licensur	e exempted	d activities.							

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

(Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: 2014-71 Name of Building Owner/Operator (2) Date of Notification (1) FEB 2 5 2014 10 |2 |/|1 |9 |/|1 |4 | STEVE ALBIN Type Notification Agencies Notified Street Address ☐ EPA Amended 14 BURNSIDE STREET DEP City, State, Zip Code Amendment #: DOL Upper Montclair, NJ 07043 Emergency (including Telephone Number DOH. Name of Contact justification) ☐ DCA STEVE ALBIN Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) STEVE ALBIN Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Square Feet # of Floors 14 BURNSIDE STREET County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) **ESSEX** Upper Montclair Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Telephone Number License Number Project Manager for Monitoring Firm Phone Number 01169 973-345-8020 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. Street Address 03/05/14 03/20/14 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Full Containment w/negative pressure Scope of Work (check all that apply) Mini-enclosure \times >3 sf or >3 lf □ Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Ε Location of е е by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m P staff(12) C (Specify SF or material (acm) to be material (ACM) 0 a LF) abated in facility (13) L ٧ Yes No N/A e 95 L FT PIPE INSULATION X BASEMENT 15 L FT PIPE INSULATION BASEMENT CRAWL SPACE NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler 13506 TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 2 YDS Disposal Date City, State City, State 03/06/14 TULLYTOWN, PA PATERSON, NJ 07503 Signature Date Completed by (Print or Type) Title

02/19/2014

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

PRESIDENT

BOGDAN JOLDZIC

State of NJ Notification of Asbestos Abatement

D&S Proj. #: 2014-69,						and 12:120)				7	루 .!	
Date of Notification (1) O 2 / 1 9 / 1 4 Agencies Notified Type Notifica DEP Amended Amendment #	tion 3	TOM PA Street Address 50 OAK City, State,	RAGAN ess RIDGE I Zip Code	DRIVE)			EB 25	20)14		100
DOH Emergency (including justification) □ DCA □ Cancellation		lame of Co	T, NJ 079				Telephor	ne Number				
			FAC	ILITY INFORM	IATION							
Name of facility where abatement	is taking pl	ace (3)			3000		Type of Facility		-384			
TOM PARAGANO							=	ol (K - 12) apter 8 (Oth	ner ti	nan K	-12)	
Street Address								(Private/Cor/Homes, etc		rcial		
50 OAK RIDGE DRIVE								# of Floors		В	dg. A	ige
City (5)	Cou	nty (6)				nty Code (7) te use only)	Current Use (P			olish	ed)	
SUMMIT	UN	ION	25				Current Osc (i	nor ii being	ucii	Olioni	ou,	
Name of Monitoring Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of Abatement	Contractor (9)					
						D & S RESTORA	ATION, INC.					
Street Address						Street Address						
4						20 California Av	re.		- 2			
City, State, Zip Code						City, State, Zip Code						
						Paterson, NJ 07:	503					
Project Manager for Monitoring Firm	1	Ph	one Numb	per		Telephone Number 973-345-8020		License N 01	lumb 169	er		
Start Date (10)	Sched	d. Completion	on Date (1	1)		Name of OSHA Monit	tor					
02/21/14	02/2		•			D & S Restoration Street Address	on, Inc.			_		
Occupancy Status During Abatemen						20 California Av	enue					
Facility closed/vacated during Abatement performed outside						City, State, Zip Code						
Describe: NORMAL H	IOURS				-	Paterson, NJ 075	503					
Scope of Work (check all that apply		on				F	Full Containment w	/negative p	ress	ure		
≥160 sf or ≥260 lf	Demolition	า					Glovebag procedu		al-1-			
Location of	Is location	n normally	used solely	/			Non-Exempted (*)		R	Proc	E	'
asbestos-containing	by mainte	enance/cus			on of as	bestos-containing	Amount		e m	е	n	l E
material (acm) to be abated in facility (13)	staff(12)	Γ		material (g	(Specify S	For	0	p	a	c
abated in facility (10)	Yes	No	N/A				LF)		v e	į	р	
2nd floor (FOUR LOCATIONS)		X		PIPE INSU	LATI	ON	30 L FT		X	T		\Box
f 0.4												
									J			
Registered Waste Hauler		P Hauler I		ubic Yards of V	Vaste	Name of Registered				1.00		
D & S RESTORATION, INC.	135			yd		TULLYTOWN, I	RESOURCE RE	COVERY				
City, State PATERSON, NJ 07503			Disposal D 02/24/1			City, State TULLYTOWN,	ΡΔ					
Completed by (Print or Type)	Title			Signature		TOLLITOWN,	17	Date			_	
BOGDAN JOLDZIC	PRESID	ENT		************				02/19/20)14			

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

ASB-41

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: 2014-72 Name of Building Owner/Operator (2) Date of Notification (1) FEB 2 5 2014 0 2 / 1 9 / 1 4 MAURICE OPPENHEIMER Agencies Notified Type Notification Street Address Initial ☐ EPA **46 FAIR LAWN STREET** Amended DEP City, State, Zip Code Amendment #: DOL HO-HO-KUS, NJ 07423 Emergency (including Telephone Number ☑ DOH Name of Contact justification) DCA MAURICE OPPENHEIMER Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) MAURICE OPPENHEIMER Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Square Feet | # of Floors Bldg. Age 46 FAIR LAWN STREET County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) BERGEN HO-HO-KUS Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Phone Number Project Manager for Monitoring Firm 01169 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. 03/06/14 03/28/14 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure Mini-enclosure \times >3 sf or >3 lf Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely E Location of е n by maintenance/custodial Amount asbestos-containing n Description of asbestos-containing m p staff(12) C (Specify SF or material (acm) to be material (ACM) C 0 a a abated in facility (13) V No N/A Yes PIPE INSULATION 105 L FT X BASEMENT Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 2 YDS Disposal Date City, State City, State 03/07/14 TULLYTOWN, PA PATERSON, NJ 07503 Completed by (Print or Type) Signature Date Title 02/19/2014 BOGDAN JOLDZIC PRESIDENT

Do not use this form for asbestos licensure exempted activities.

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