

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

D&S Proj.	#: MS 13-58				nt to NJAC		and 12:120)	to i	TOP IN	one pro	6:			
Date of Notification	(1)	Na	me of Build	ding Owner	r/Operator (2)		<del> </del>	OIJFF	B 26 PM 2	- 100				
10 12 1/12 10	1/1/1/3		MARY CO	INITAC					o so PM ?	2:68				
Agencies Notified	Type Notification		reet Addres		,			in the street of				7		
EPA	Initial Amended		51 UNION	N STREE	Т			& L	icen de	101.				
. DEP	Amendment #:	11 -	ty, State, Zi						342					
DOL     DOL	Emergency		Hawthorn	ne, NJ, 07	506				-0-					
☑ DOH	(including justification)	Na	me of Cont	act					Telephone	Number	-			11
☐ DCA	Cancellation		MARY C	CONTINI				S)						
				FACIL	ITY INFORMA	ATION								
Name of facility wh	nere abatement is	s taking place	ce (3)			-		Ту	pe of Facility (4					152
55-2019 (C. 10-05) (West 1900) (C. 10-05)										(K - 12)				
MARY CONT	INI						1000	-		pter 8 (O Private/Co			12)	
Street Address										Homes, e		Ciai		50
51 UNION ST	REET							_  s	quare Feet	# of Floor	s	Ble	dg. A	ge
City (5)	id.	Coun	ty (6)				nty Code (7) e use only)	-		! f la . ! .		-0-6-	-11	
Hawthorne		PAS	SSAIC		=	(Stat	e use only)	11,	Current Use (Pri	or it bein	g aem	olisne	ea)	
Name of Monitorin	ng Firm Hired by I			T	ASCM No.	П	Name of Abater	nent Con	tractor (9)		-			
		2/ 1					D & S REST	ORATI	ON, INC.					
Street Address						-11	Street Address				-			
							20 Californ	ia Ave.						
City, State, Zip Coo	de ·						City, State, Zip C	ode						
	î.						Paterson, N							
Project Manager fo	or Monitoring Firm	1	Pho	one Numb	er		Telephone Num 973-345-8			License 0	Numb 1169	er		
							Name of OSHA			<u> </u>	1107			
Start Date (10)		Sched	. Completio	n Date (11	)		D & S Rest		Inc.					
03/13/13	5.20	03/26	/13				Street Address							
Occupancy Status				21.			20 Californi		ie					
Abatement p	ed/vacated during performed outside	of normal f	od of abater facility hour	ment. s-			City, State, Zip (							
Other-Descr	ribe: NORMAL F	IOURS				_	Paterson, N	IJ 07503	3					
Scope of Work (c		y) Renovatio	n					Min	Containment w i-enclosure vebag procedur		press	ure		
≥160 sf or ≥	260 lf	Demolition	1						-Exempted (*)		friable	proc	edure	<del>)</del>
Location of			n normally u			11.11					R	R	E	Е
asbestos-co		staff(12)	enance/cust	todiai			sbestos-containi	ng	Amount (Specify S	F or	m	р	n c	n
material (ac abated in fa		Yes	No	N/A	material (		<		ĹF)		o v e	a i r	a p	Ľ
BASEMENT			X		PIPE INSU				60 L FT			Ц		닏
BASEMENT					BARE HEA	ATING	G PIPES(REC	LEAN)	50 L FT			ᆜ	닏	井
											뷰	닏		뷰
											-	片	片	井
Davidson West	Hauler	IN US	CD Haulas I	D# 10	ubic Yards of V	Waste	Name of Regis	tered Lar	ndfill		<u></u>	Ш		1—
Registered Waste D & S RESTOR				2	YDS		TULLYTO	WN, RE	SOURCE RE	COVER	RY			
City, State	NI 07502	<b>X</b>		Disposal D 03/14/1			City, State TULLYTO	WN. PA			75			
PATERSON, I		Title		05/1-1/1	Signature		1 1000110	,		Date				
BOGDAN JO		PRESID		El .				2 7d	7	02/21/	/13			
ASB-41		* Do not us	e this form	for asbest	os licensure ex	empte	d activities.							

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

B & G proj. #: 2013-41

Date of Notification (1) Name of Building Owner/Operator (2) 2013 FEB 26 PM 2: 68 Leonardo Malave 10 |2 |/|2 |2 |/ |1 |3 | Agencies Notified Type Notification Street Address EPA 614 Lee Street X Initial DEP City, State, Zip Code Amendment Perth Amboy, NJ 08861 X DOL Telephone Number Name of Contact X DOH Cancellation Leonardo Malave ☐ DCA FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) Leonardo Malave Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age 614 Lee Street # of Floors Square Feet County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) Middlesex residential Perth Amboy Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. N/A B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Project Manager for Monitoring Firm Phone Number 00378 (973)696-6869 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 03/07/2013 03/06/2013 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) Full Containment w/negative pressure Demolition **X** Renovation Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf >3 sf or >3 lf E Is location normally used solely E n Location of by maintenance/custodial Amount n m Description of asbestos-containing p C asbestos-containing (Specify SF or staff(12) 0 material (ACM) a a material to be abated in facility (13) p No N/A X 25 lf pipe insulation furnace room Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# 19563 Registered Waste Hauler Tullytown Resource & Recovery Center 1/2 yards B & G Restoration, Inc. Disposal Date City, State Tullytown, PA 03/07/2013 Lincoln Park, NJ Signature Gordana Luna Title Completed by (Print or Type) 02/22/2013 Secretary/Treasurer Gordana Luna

## CX 424

Date of Notification (1)			$\neg$	Name o	f Building	Owner/0	Operator	r (2)			1/5	m 200		-	
02/22/2013				Mary :	Scarpor		8		2013 F	ER 2	S 5.				
Agencies Notified  EPA	Type Notification  X Initial	1			ute 206				E.J.		5 PM 2	?: 68	1 11		
DEP DOL	Amended Amendmen				ate, Zip C n, NJ 0				& [	./83 ./83		(JL			ſ
DOH DCA	Emergency justification Cancellation	)	1		f Contact Scarpor					Tel	ephone Nu	umber	ì		
Name of Facility Where A	batement is Taki	ng Place (	3)	FACI	LITY INF	ORMAT	ION	Туре	of Facility	(4)					
Residence Street Address									School (K-						
15 Route 206 South								×	Subchapte Other (i.e.   etc.)	r 8 (Oth private	er than K- & commerc	12) cial bui	ldings	, hom	ies,
City (5) Raritan								Squa	re Feet	,# o	f Floors	T	3ldg.	Age	
County (6) Somerset	***************************************				Code (7) USE ONLY	,			ent Use (Pri	or if bei	ng demolis	shed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8	)	ASCN	I No.				atement Co		(9)				
Street Address							Street	Addre			-				
City, State, Zip Code						-	City, S	State, Z	ip Code	-					
Project Manager for Monit	toring Firm		T	Telepho	ne No.		Teleph	none N			License	No.			
Start Date (10)		Schedul	led Cor	nnletion	Date (11)	14	973-		3828 HA Monitor		00704				
03/04/2013		03/05/	2013	ripiedori	Date (11)		VMC								
Occupancy Status During			2.5				Street	Addre	SS ;		***			7	
X Facility Closed/Vacat Abatement Performe Other – Describe:	d Outside of Norr	nal Facilit	Abaten y Hours	nent			City, S	tate, Z	ip Code	-					
Scope of Work (Check All	That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	Mir Glo	II Containm ni-Enclosure ovebag Prod n-Exempted	e cedure					
		Is	Locati	on				110	II-Exemple	J ( ) and	i Non-Fila	Die Più	32 45 2 20	ement	t
Location of Asbestos-Containing N	of		Normaled Sole				scription		11				T	уре	Τ
TO BE ABA In Facility (13)	<u>TED</u>	7/07/07/07	intenar todial S (12)	307379	Aspes (i.e.	tos Cont thermal surfac other m	aining M systems sing, VA niscellan	insula T, or	(ACM)	(8	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A										fe	(D)
Kitcher			Х				noleun			12	5 SF	х			
Baseme	nt		Х			Pipe	insula	tion		11	0 LF				
		-													
Name of Registered Waste	e Hauler	4	IN	JDEP W	aste	Cubic `	Yards		Name of	Pagista	red Landfil				
Newark Carting, Inc.	4		Н	auler ID I 5409		of Was			GROW		eu Lanum	82			
City, State Newark, NJ						Dispos	al Date	4	City, State Morrisvi		4	7	******		
Completed by Voytek Roszkowski		Title Presi	dent			Si	gnature	>	ika	1.	100000	ate 2/22/2	2013		

### CKYYY

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

Date of Notification (1) 02/19/2013			Na Fr	me of Bu	ilding Owr	ner/Operator en Charter	(2) r School		2010	17	r r		
Agencies Notified	Type Notification			reet Addre 32 Willo	ess w Avent	ue #17			2013 FFR 2	_	Luca i	2	
EPA DEP DOL	Initial Amended Amendment #				Zip Code , NJ 070	30			2013 FFB 2	o PM	2:	ିନ	
DOH DCA	Emergency (Inc. justification) Cancellation	luding	200	ame of Co arold B		II .			Telephone Nur	nb <b>er</b>	THE	1.	
				FACILIT	Y INFOR	MATION	Time of I	Facility (4)					-
Hoboken Charter	Abatement is Taking P School	rlace (3)	in .				Sch	nool (K-12)	) (Other than K-1	2)			2
Street Address 713 Washington S	Street		0.5				Oth etc	ner (l.e. pri .)	vate & commerci	al buildir	gs, h		_
City (5) Hoboken	1 14 <b>2</b>				3 -		Square		4	50			
County (6) Hudson			C	ounty Co	de (7) E ONLY) .		Schoo	1	r if being demolis	nea)			
Name of Monitoring Fin	rm Hired by Building Ov Bultants, Inc.	vner (8)		ASCM N 0079	No.		of Abater C Compa			,-			
Street Address 20-21 Wagraw Ro	oad					1 1000000000000000000000000000000000000	t Address Piaget /	Ave.		H P	i di		
City, State, Zip Code Fair Lawn, NJ 07	410						State, Zip on NJ 0		18 <u>2.</u> 2				
Project Manager for M Fredric Larson	Monitoring Firm			elephone 973-636			ohone No. -253-88	28	License 00704	No.		A.	
Start Date (10) 03/11/2013		Scheduled 03/29/20		pletion Da	ate (11)		e of OSHA C Co. In						21
Facility Closed/V Abatement Perfo Other – Describe		eriod of Al	batem	ent			et Address State, Zip		7. E				
Scope of Work (Chec ≥3 sf or ≥3 lf × ≥160 sf or ≥260			enova emolit				X Glov	-Enclosure				e	
			Locati								Abate	ement pe	
Asbestos-Contair TO BE In F	ation of ning Material (ACM) ABATED Facility (13)	Use	lormal d Sole intena odial s (12)	olý by nce/ Staff?	Asbest (I.e.	Descripti os Containing thermal syste surfacing, ' other miscel	g Material ems insula VAT, or	(ACM) tion,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A					1000 05		-	-	-
	t (East end)		X			Wall pla			1000 SF 2000 SF	×	-	-	-
	r (East end)		X	-		Wall/Ceilin			45 LF	×	-	-	-
	sement		X		F	Pipe/fitting i		11	3000 SF	X	-		-
	sement		X		1	VAT/M VAT/M			2000.SF	X	-	-	
	Floor		X	-		VAT/M			100 SF	X	-	-	
	d Floor	-	X			VAT/M			100 SF	X	-	-	-
Name of Registered	d Floor I Waste Hauler		X	NJDEP W	Vaste	Cubic Yard		Name of	f Registered Land				
Newark Carting,	Inc.	71		Hauler ID )5409		of Waste		GROV	VS	-		\$	
City, State Newark, NJ			-			Disposal D 03/29/13		City, Sta Morris	ville, PA				5 I
Completed by Voytek Roszkow	vski	Title Pres	ident			Signa	ure>	2 liter	esko	Date 02/19/	2013	3	

### State of New Jersey 1301-4596 NOTIFICATION OF ASBESTOS ABATEMENT Check #4991 (Pursuant to N.J.A.C. 8:60 and 12:120)

D ( (N ()) ()		2000	1				20	1/2.	1100			
Date of Notification (1) 2/20	/13					Owner / Operat	or (2)	13FEB 26 PM	100	7		
	Notification	- 100	+		ddress	iumcations		50 P	1 2		_	-
⊠ EPA			100		enwoo	d Ave.	el!		<: 6x	)		
DEP DEP	Initial		City,	Sta	te & Zip	Code		4/00 To	. 0		- (	
□ DOL □	Amended #2		Jen	kint	own, P	A 19046		LICENCY 16	11881			
□ DOH □	Emergency		Nam	e of	Contact	8)	0.00	770	Teleph	one	Num	ber
DCA DCA	Cancellation		Alex	c Ba	ylor							
			F/	ACIL	ITY IN	FORMATION						
Name of Facility Where Ab	atement is Taking F	Place	(3)			Type of Fac						
Verizon						School						
Street Address							pter 8 (Other th					
218-220 Amber Street							.e. private & co		ngs, hor	nes,	etc.)	)
City (5)	County (6)	10		0	1- (7)	Square Feet	# of Flo	oors	Bldg. A	ge		
Beach Haven	County (6)		ounty	Coc	ie (7)	0 (11	<u> </u>					
Beach Haven	Ocean						(Prior if being of	demolished)				
Name of Manitoring Firm U	irod by Duildin a O	(0		TA	001411	Offices						77
Name of Monitoring Firm H USA Environmental	rea by Building Ow	ner (8	5)	IA	SCM No		atement Contra	ctor (9)				
Street Address						AbateTech Street Addre						
8436 Enterprise Ave.						PO Box 25	\$15.45°					
City, State & Zip Code						City, State &						
Philadelphia, PA 19153							n, NJ 08048					
Project Manager for Monito	ring Firm				mber	Telephone N	lumber	License	Number	-		
Mark Jenkins			365-	22.79.101925		609-265-21			005	29	200000	
Scheduled Start Date (10) 1/29/13	Scheduled Cor		ion Da <b>8/13</b>	ate (	11)	Name of OS EMSL Ana		×				
Occupancy Status During A	batement (Check o	nly or	ne)			Street Addre				i		
Facility Closed/Vac				oater	nent	108 Haddo	n Ave.					
Abatement Perform	ed Outside of Norm	al Ho	ours			City, State &	Zip Code				- 12	
Describe:						Westmont,	NJ 08108					
Facility Occupied D												
Scope of Work (Check all the	iat apply)						D = " •					
≥3 sf or ≥3 lf			р.		.4:			ntainment with I	Vegative	Pre	ssur	е
≥160 sf ≥260 lf		M		nova			Mini-En					
∑ =100 31 =200 II			De	molit	uon		ACCUSED TO STATE OF THE PARTY O	ag Procedures		_	) ::::::::::::::::::::::::::::::::::::	
Location of	of	le	Loca	tion		Description		empted and No			-	
Asbestos-Cont			mally		d	Asbestos-Con		Amount (Specify	Abi	atem	ent	Туре
Material (AC	(M)		Solely		7	Material (A	CM)	SF or LF)	₽ R		П	, _
TO BE ABAT			ntena	22210	293	(i.e., thermal s		•	Removal	굕	าса	l in
in Facility (13)		Cust	odial (12)		r?	insulation, surfa- or other miscell		300	<u>a</u>	Repair	Encapsulate	Enclosure
(10)		Yes	No	N/	A					,	ate	. 6
First Floor		П		T	7	Floor tile & I	Mastic /	3,580 SF	X	$\vdash$		$\vdash$
First Floor Engine Roon	n	×	Ħ	卞	1	Floor tile &N		450 SF		H	H	ዙ
First Floor Engine Roon		$\overline{\boxtimes}$		T	i v	ibration Dam	State and the state of the stat	4 SF		H	H	怈
First Floor Foyer			X	-		Floor tile & I		150 SF	N	Ħ	H	Ħ
First Floor Rear Room			X			Floor tile & I	Vlastic	150 SF		Ħ	H	Ħ
						41 =					П	T
Name of Registered Waste	Hauler		1000		Waste	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	Name of Regi	stered Landfill				
AbateTech, Inc			Ha		ID No. <b>750</b>	of Waste TBD	TRRF Landi	fill				
City, State						Disposal Date	City, State	***				
Lumberton, NJ	3-2					2/28/13	Tullytown, F	PA				11
Completed By (Print or Type Gwen Trumbetti	) 5.		Tit		Coord.	Signature	t.		Date 2/20/	42		
			1-1		J. u.	////			21201	13		

Nock

## State of New Jersey 1302-4606 NOTIFICATION OF ASBESTOS ABATEMENT Check#

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

Date of Notification (1)		Nar	ne of E	Buildin	g Owner / Opera	tor (2)	1/5 <sup>8</sup> 26 PM	10	<b>}</b>	- 4	- 11
2/20/13		Res	sorts	Interr	national Casin	os	<6 p	,			67
Agencies Notified Type Notification EPA			et Ado		.II.e	ď	11100	2:00			
DEP   Initial	i		, State				C/200 /- K	4.0	_		
☐ DOL ☐ Amended #1		12000000		100	NJ 08401-7329		1900	181			
□ DOH     □ Emergency     □ Cancellation			ne of C				*0	Telen	none	Num	her
☐ DCA ☐ Cancellation		Wa	yne E	. Dori	rell						9
Name of Equility Where Abstract is Table	DI	F	ACILI'	TY IN	FORMATION		1	N.			
Name of Facility Where Abatement is Taking Resorts Hotel & Casino	Place (	(3)			Type of Fac						
Street Address			_		School		K 40)				
1133 Boardwalk						apter 8 (Other th i.e. private & co		nas ho	mes	etc.)	
10			*		Square Fee			Bldg. A		Cio.j	
City (5) County (6)	Co	ounty	Code	(7)					3		
Atlantic City Atlantic	\	_	\		Current Use	(Prior if being o	demolished)				
					Hotel & Ca				22 8		
Name of Monitoring Firm Hired by Building O Synertech, Inc.	wner (8)	)	AS	ÇM N	<ul><li>Name of Ab AbateTech</li></ul>	atement Contra	ctor (9)				
Street Address		_			Street Addre						
2208 South Broad Street				-	PO Box 25	0.502		40			
City, State & Zip Code				T	City, State 8						30 a
Philadelphia, PA 19145 Project Manager for Monitoring Firm	1= 1		/			n, NJ 08048					
Andrew McMahon	215-	755	e Nym -2305		Telephone N 609-265-21		License I	Numbe <b>005</b>			
Scheduled Start Date (10) Scheduled C	ompletic 2/28		ate (11	)	Name of OS					-7	
Occupancy Status During Abatement (Check	only on	e)			EMSL Ana Street Addre						
Facility Closed/Vacated During Entire	Period	of Al	oateme	ent	108 Haddo						
Abatement Performed Outside of Nor	mal Ho	urs -	-		City, State &						
Describe:					Westmont,	NJ 08108					
Facility Occupied During Abatement Scope of Work (Check all that apply)				11.5	- 0			VI	1		
ocope of work (Check all that apply)						☐ Full Con	tainment with N	logativ	. Dro	ooura	
≥3 sf or ≥3 lf	$\bowtie$	Re	novatio	on		Mini-End		vegativi	Fre	SSUIE	<b>3</b>
≥160 sf ≥260 lf		De	molitio	n			ag Procedures				
					80 (B)		empted and Nor	n-Friabl	e Pro	cedu	ire
Location of Asbestos-Containing		Loca			Descriptio	n of	Amount	Ab	atem	ent T	уре
Material (ACM)		olely	Used by		Asbestos-Cor Material (A		(Specify SF or LF)			_	Π
TO BE ABATED			nce or		(i.e., thermal s		Si ti Li-)	₽ Pe	70	Encapsulate	Ē
in Facility (13)	Custo		Staff?		insulation, surfac			Remova	Repair	psc	Enclosure
(13)	Yes	(12) No	N/A		or other miscell	aneous)		<u>a</u>	=	late	Пе
Basement		П		Pipe	e Insulation (pa	tch & repair)	200 LF	+			
		Ī	П			, , , , , , , , , , , , , , , , , , ,	200 Li	ΗH	H	H	H
					E SHOULD BE			H	H	Ħ	H
								IFI	H	Ħ	Ħ
							5 5				
Nome of Devistors J.M. J. 14		Ц									
Name of Registered Waste Hauler			IDEP V auler ID		Cubic Yards of Waste	Name of Regis	stered Landfill				
AbateTech, Inc.		1116	1875		TBD	TRRF Landf	iii				
City, State		1		75,112	Disposal Date	City, State					
Lumberton, NJ			1		TBD	Tullytown, P	Α				
Completed By (Print or Type)  Gwen Trumbetti		Tit			Signature			Date			
Swell Humbett	# 1 m g	Op	ps. Co	oord.		WU		2/20	/13		

Honor

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

1302-4604 Check #

Date of Notification	(1)			Tax.					-	<0/3	77	06	n		
Date of Notification	2/20/13			Na	me	of E	Buildir le 8 1	g Owner / Opera	itor (2)		E8 26	۸.	627		
Agencies Notified	Type Notific	ation		Str	eet	Add	dress	xposition Aut	nority			PM 2.	_		- 19
								e 120		ď /	As a	ζ.	ିନ		
DEP	☐ Initia	500 to 100 months						Code		<u> </u>	4CN C	2-7			
□ DOL		nded #1		Ea	st	Rut	herfo	rd, NJ 07073			11 11/4	6 101			
⊠ DOH		rgency		Na	me	of C	Contac	:t				Telepl	one	Nur	nhor
☐ DCA	☐ Cand	ellation		Da	vic	Fo	rti				A	1.0.00			
	*		-	F	-Δα	1111	TVIA	FORMATION	-	11 HVV					
Name of Facility Wi	here Abatem	ent is Taking Pl	ace	(3)	71	) I L I	1 1 115	Type of Fac	cility (4)						
Monmouth Park	Racetrack	3		(-)				School	(K-12)						
Street Address				le de la companya de		VIII Z				Other than K-	.12)				
175 Oceanport A	venue							Other (	i.e. priv	ate & commer	cial buildi	nas ho	mes	etc	)
								Square Fee	t	# of Floors	Jan Bana	Bldg. A		, CiO.	.,
City (5)		County (6)	C	ount	y C	ode	(7)	NA NA		1		Bidg. /	N	Α	
Oceanport		Monmouth							and the same of th	f being demol	ished)		14.		
								Vacant	(	. Zomig domio	ioneuj				
Name of Monitoring	Firm Hired b	y Building Owne	er (8	3)		AS	CM N		atemen	t Contractor (	9)	-	-		
Environmental C	onnections	, Inc.				10.95		AbateTecl	n. Inc.	t contractor (	<i>.</i> ,				
Street Address	1000000 USA							Street Addre						_	
120 North Warrer								PO Box 25							
City, State & Zip Co								City, State 8	Zip Co	de					
Trenton, NJ 0860		-						Lumberto		8048					
Project Manager for Rick Beach	Monitoring F			phor			ber	Telephone I			License	Numbe			
Scheduled Start Dat	- (40) To			-392				609-265-21	100-01-01-01-01			005	29		
2/20/13	e (10)	Scheduled Com				(11	)	Name of OS		nitor					
Occupancy Status D	uring Abatan	ant (Charle à al	312	9/13		_		EMSL Ana							
Facility Close	ed/Vacated F	oring Entire Pe	y or riod	ie)	hat	omo	nt	Street Addre							
Abatement F	Performed Ou	tside of Normal	LI	UI A	Dai	eme	erit.	108 Haddo							
Describe:	onomica oc	itside of Normal	H	urs				City, State 8							
Facility Occu	pied During	Ahatement						Westmont	, NJ 08	108					
Scope of Work (Che	ck all that an	nly)			. 76	See Leaf					-			.55	
,	and app									Full Containm	ont with I	logotiv	Des		20
≥3 sf or ≥3 lf			X	Re	eno	vatio	on			Mini-Enclosur		vegative	PIE	ssur	е
≥160 sf ≥260	If		Ħ	De	emo	litio	n			Glove Bag Pr					
			_							Non-Exempte		n_Friahl	o Dr	acad	luro
	cation of		Is	Loca	atio	n		Descriptio	-		Amount				Type
Asbesto	s-Containing			mally			1 =	Asbestos-Cor	ntaining		Specify	710	T	T	Type
TO BI	rial (ACM) E ABATED			olely				Material (A		S	F or LF)	_		[	
	Facility			itena odial			16	(i.e., thermal sinsulation, surfa				em	Re	Cap	100
	(13)		uoi	(12		AII :		or other miscel				Remova	Repair	Encapsula	Enclosure
		Y	'es	No		N/A		o. oo	ancous	,		1 2		ate	-   a
118 Dorms			T		1			Transite Sh	ooting	40	ECO CE			-	
126 Dorms		i	Ħ	X	H	=	-	Floor tile &			,560 SF		H	님	HH
Stable Office			Ħ	X	ti	╡		Floor tile & I	CLOSE ALEXANDER		,600 SF		님	H	H
*			=	H	+	=		1 loor tile & l	Mastic	1,	000 SF		H	屵	H
				H	H	=			-	1 100 20 1	6 0 0	니님	H	H	111
			=	뉘	+		_		2.50		- 10.00 0	닉님	H	님	井
Name of Registered V	Vaste Hauler			TN.	JDF	PV	) Vaste	Cubic Yards	Namo	of Registered	Londfill	للابا	Ц		
			84	H	aule	er ID	No.	of Waste	Ivallie	or Registered	Landilli				
Service Transport,	Inc.	1				099		TBD	Miner	va Landfill					
City, State			717		4			Disposal Date	City, S					-	
lew Castle, DE								3/29/13		esburg, OH					
ompleted By (Print o			-	Tit	tle			Signature		3,		Date	_		
Swen Trumbett	i			01	ffice	e Co	ord.	1000	1			2/20	/12		Į.
		10 10 10 10 1						( /V VI	LA F		- Lo	LIZU	110		e

1302-4603 Check #4946

Date of Notification	(1) 2/22/13			Na	ime	of E	Building	g Owner / Opera	tor 2(2)3	FEB 26					
Agencies Notified  EPA	Type Notific			00		MIK I	1020		A Street		PM 2: 08				
☐ DEP ☐ DOL ☐ DOH		al ended #1 ergency		Ne	ewa	ark,	& Zip NJ 07 Contact	101	Q	LICEN	AG GL	Teleph	one	Num	her
☐ DCA	☐ Can	cellation		1000000		Sh					#	1 4.2			
					FA	CILI	TY IN	FORMATION							
Name of Facility WI	nere Abatem	nent is Taking I	Place	(3)			-	Type of Fac							
Street Address	Kell Ouber								30	Other than I	K-12)				
7272 N. Crescen	t Blvd.	\$*************************************									ercial buildin	gs, ho	mes,	etc.)	)
O't - (F)		To . (0)	- 10					Square Fee	t	# of Floors	E	Bldg. A	ge		
City (5) Pennsauken		County (6)	C	oun	ty (	Code	(7)	Comment Hand	(D-1)6						
Peririsauken		Camden						Current Use Substation			olished)				
Name of Monitoring	Firm Hired	by Building Ow	vner (8	3)		AS	CM No			TAT.	(9)				
M.E.C.S.							1 Sec.	AbateTech	n, Inc.		(-)				Acres -
Street Address 1224 Hamilton Av	/a PΩ Bα	22004						Street Addre							
City, State & Zip Co		. 33007		_	-	-	7,500	PO Box 25 City, State 8		le .					
Trenton, NJ 0862								Lumbertor	n, NJ 08						
Project Manager for William Weisgark		-irm				Num 140		Telephone N			License N				
Scheduled Start Dat		Scheduled Co						609-265-21 Name of OS		tor		005	29	_	
2/25/13			3/1	1/13		٠,,	')	EMSL Ana		loi					
Occupancy Status D Facility Clos	uring Abate	ment (Check o During Entire F	only or	ne)	۸ha	4ami		Street Addre	ess						
Abatement F	Performed O	utside of Norm	ral Ho	OURS	∖Da	terne	ent	108 Haddo City, State &		^					
Describe:		410140 01110111	iai i i	Juis	9.			Westmont,	85						
Facility Occu								Trootinont,	, 110 00 1						
Scope of Work (Che	ck all that ap	oply)													000
≥3 sf or ≥3 lf				R	lend	ovati	on			full Contair /lini-Enclos	nment with N	egative	e Pre	ssur	е
≥160 sf ≥260	) If					olitio					Procedures				
7		-/									ted and Non	-Friabl	e Pro	ocedi	ure
	cation of os-Containin	a		Loc		on Ised		Descriptio Asbestos-Cor	n of		Amount	Ab	atem	ent 7	Туре
	erial (ACM)	9		Solel				Material (A		.	(Specify SF or LF)			m	
	E ABATED Facility					e or		(i.e., thermal s	systems			Ren	Re	nca	Encl
	(13)		Cusi	todia (12		taff?		insulation, surfaced or other miscell	cing, va laneous)			Removal	Repair	Encapsulate	Enclosure
	e de la companya de l	100	Yes	No	0	N/A						-		ite	Ф
Exterior					1			idoned pipe end nastic covering			400 LF				
					]										
			H	┼╞	4	뷰	-		-						
	2, 12		H	H	╁	ዙ	-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				井	H	H	ዙ
			H	十	$\dagger \dagger$	十						井	H	H	ዙ
Name of Registered	Waste Haule	er .					Waste D No.	Cubic Yards of Waste	Name o	of Register	ed Landfill				
Waste Manageme	nt		9-1		lau	112		TBD	GROV	/S North	Landfill				
City, State Camden, NJ			×					Disposal Date 3/1/13	City, St Morris	ate ville, PA					
Completed By (Print					itle		10.2	Signature	1			Date		-	
Gwen Trumbet	CI				offic	ce C	oord.	CA	M		*	2/22	/13		= 1

120 ord

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

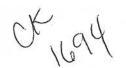
1209-4551 Check #4987

Date of Notification (1) 2/19/13						Owner / Operat		E 75 26			ě	4
Agencies Notified Type Notific	ation				ress	0011113011 1103	Jitai	n 2.5	PHA			-
Ĭ EPA						ood Johnson I	Place	4/1	' <	a.		
DEP Initia	I .				& Zip			· CANA	1	0'		
	nded #4	P	New	Bru	nswic	k, NJ 08901		×114	\$ 17m	,		
□ DOH □ Eme	rgency				Contact		ii .	ĺ9	eleph	one N	lumb	er
DCA Cand	cellation	(	Geis	er F	ajardo	ř		1				
			FΔ	CILI	TY IN	FORMATION	400					
Name of Facility Where Abateme	ent is Taking Pla	ce (3	)	OILI	1 1 1141	Type of Faci	ility (4)					
Robert Wood Johnson Hos		(-	′			School						
Street Address			- 100				pter 8 (Other	than K-12)				
One Robert Wood Johnson	Place							commercial building	s, hor	nes, e	etc.)	
						Square Feet			ldg. Ag			
City (5)	County (6)	Cou	unty (	Code	(7)			1 27		-		
New Brunswick	Middlesex		-		- 38.5.6.	Current Use	(Prior if being	demolished)				
						Hospital		,				
Name of Monitoring Firm Hired b	y Building Owne	r (8)		AS	CM No		atement Cont	ractor (9)				
Omega Environmental	, ,	. ,				AbateTech						
Street Address	7.	11				Street Addre						_
280 Huylar Street						PO Box 25	r i					
City, State & Zip Code						City, State &	Zip Code					
South Hackensack, NJ 0760							n, NJ 08048					
Project Manager for Monitoring F Geiser Fajardo	103	elepl 201-4				Telephone N 609-265-21		License N	umber 005			
Scheduled Start Date (10) 9/28/12	Scheduled Comp	oletion 2/28/		te (1	1)	Name of OS EMSL Ana				V.		
Occupancy Status During Abater				)		Street Addre	-	<del></del>				
Facility Closed/Vacated I				/ atem	ent	108 Haddo						
Abatement Performed Ou						City, State &						
Describe: 3:30 PM- 11	:30 PM					Westmont,						
Facility Occupied During	Abatement					1						
Scope of Work (Check all that ap	ply)					- I militare			-			
							Full C	ontainment with Ne	egative	Pres	sure	)
≥3 sf or ≥3.lf		$\times$	Ren	ovati	ion		Mini-E	nclosure				
≥160 sf ≥260 lf			Den	nolitio	on			Bag Procedures				
					0			xempted and Non-	Friable	e Pro	cedu	re
Location of			ocati			Descriptio		Amount	Ab	atem	ent T	ype
Asbestos-Containing Material (ACM)	j   r	Norm				Asbestos-Con		(Specify				
TO BE ABATED	Λ.	/lainte	lely b			Material (A (i.e., thermal s		SF or LF)	N Z	77	Enc	E E
in Facility		usto				insulation, surface			Removal	Repair	aps	CO
(13)			(12)	10-00		or other miscell			oval	활	Encapsulate	Enclosure
	Y	'es	No	N/A					75- 37		6	
<b>Tower Building Ground Floo</b>	or [					Linoleum &	Mastic	4,250 SF		П	П	
Supervisor's Office	me si		$\boxtimes$			Pipe Insula	ation	6 LF	X	Ħ	T	一
IT Closet			Ø	F		Pipe Insula		100 LF	Ħ	Ø	Ħ	H
2 <sup>nd</sup> Floor Lab			X	Ħ	1	Linoleum &		560 SF	d	H	H	Ħ
		Ħ	Ħ	Ħ	1					Ħ	Ħ	H
		十	Ħ	Ħ			1 F .		H	H	Ħ	片
Name of Registered Waste Haule	er		NJ	DEP	Waste	Cubic Yards	Name of Re	gistered Landfill				ш
			7-27		D No.	of Waste	, turno or res	giotor ou Landini				
AbateTech, Inc.				187	50	25	TRRF Lan	dfill				
City, State		45.00	T. Inc.			Disposal Date	City, State					
Lumberton, NJ					street,	2/28/13	Tullytown	, PA				
Completed By (Print or Type)		-	Title	е		Signature	1		Date		-	_
Gwen Trumbetti			Off	ice C	coord.	(MIL	1			2/19/	113	
			-			11/						

# Notifica (Pursua

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

&S Proj. #: 2013			(Purs	uant to NJA	C 8:	60 and 12:120)			A.			
						,		2013/		'n	*	
Date of Notification (1)		Name of	Building Ow	ner/Operator (2	)			10/3/	Ep	-	1	7
0   2   /   2   2   /   1   3     Agencies Notified   Type Notif	ication		DUYGU		22			d y	,0 S	5 ,		
☐ EPA ☐ Initial		Street Ad	(					£1.	e e		12.	_
☐ DEP ☐ Amended			LCOX PLA	ACE				4/6			٠,٠	6
DOL Amendmen			e, Zip Code						157	VA:	400	
DOH Emergen	11	FAIR Name of 0	LAWN, N.	J 07410						O	~1	Ly or
DCA justification	on)						Telepho	ne Numb	er			
Cancella	tion	ONA	T DUYGU				f			_		
Name of facility where the			FAC	ILITY INFORM	IATIC	DN						
Name of facility where abateme	nt is taking pl	ace (3)					Type of Facility	(4) ol (K - 12	1			
ONAT DUYGU							=	hapter 8 (		than	K-12)	
Street Address							Other	(Private/0	Comm			
12 WILCOX PLACE							Bldgs Square Feet	./Homes,		т.	714-	^
City (5)	Cou	nty (6)			Co	ounty Code (7)	Square reet	# 01 F100	ors	'	3ldg. /	Age
FAIR LAWN	DE	RGEN			(S	tate use only)	Current Use (F	Prior if bei	ng der	nolisi	ned)	
Name of Monitoring Firm Hired b				ASCM No.		Name of Abatement (	ontractor (0)					
						D & S RESTORA	35500000000000000000000000000000000000					
Street Address					-	Street Address	TION, INC.				_	
			1			20 California Av	e,					
City, State, Zip Code						City, State, Zip Code						
Project Manager for Monitoring Fi	rm		Phone Numb		_	Paterson, NJ 075						1
,		- [	r none numb	ei	- 1	Telephone Number 973-345-8020		License	Num 1169			
Start Date (10)	ISched	. Comple	tion Date (1	<u> </u>	_	Name of OSHA Monito	or		71109			
03/05/13	03/20			.,		D & S Restoratio	n, Inc.					
Occupancy Status During Abatem					_	Street Address					6	
Facility closed/vacated during	ng entire peri	od of aba	tement.	211		20 California Ave	nue					
Abatement performed outside Describe:		facility ho	urs-			City, State, Zip Code						
Other-Describe: NORMAL					-1	Paterson, NJ 075	03					
Scope of Work (check all that ap						F	ıll Containment v	//negative	press	ure	_	
	Renovatio	n	28				ini-enclosure					
<u>≥</u> 160 sf or <u>≥</u> 260 lf	Demolition						lovebag procedu on-Exempted (*)		friable	proc	edure	<b>.</b>
Location of asbestos-containing	by mainte		used solely stodial						R	R	E	ĪΕ
material (acm) to be	staff(12)			Description material (A	n of a	asbestos-containing	Amount (Specify S	F or	m	e p	n	n
abated in facility (13)	Yes	No	N/A				ĹF)		o v	i	a. p	L
BASEMENT		X		Boiler Insula	ation		50 SQ FT		e	ń	П	$\vdash$
BASEMENT		X		CHIMNEY T	ТНП	MBLE PACKING	2 SQ FT				H	怙
			4			7 7 7 7 7						
Registered Waste Hauler	INJDE	P Hauler	ID#   Cu	bic Yards of W	aste	Name of Registered La	- dEll					
D & S RESTORATION, INC	. 135	06	realization of the second of t	YD -	uoto	TULLYTOWN, R		COVER	Y			
City, State PATERSON, NJ 07503			Disposal Da 03/06/13			City, State						
Completed by (Print or Type)	Title		03/00/13	Signature	_	TULLYTOWN, P.	A	I D :				
BOGDAN JOLDZIC	PRESIDE	ENT						Date 02/22/1	3			
ASB-41	* Do not use	this form	for asbestos	licensure exen	npted	activities.			_			



Date of Notification (1)	25 / 2	2013		Name	of Building	g Owner/Operator er National	29/13 E.E.B 26	Dw o -				
Agencies Notified	Type Notifica		H	Suce	t Address Water	,			8		-	
■ DOLWD ■ DHSS □ DCA	■ Amended Amendme	ent # 1	ng		State, Zip ( KSONVIII	e, FL 32202	à Lièli	ไอเห่รู้	<b>l.</b>			
(NJAC 5:23-8)	justification   Cancellat	on)	.5		of Contac n Gron	t nert, Facilitie	s Proj. Mgr.	Telephone N	lumher			
			3	FA	CILITY IN	IFORMATION				-		
Name of Facility Where	Abatement is T	aking Plac	e (3)				Type of Facility	(4)				_
CSX Intermodel		-5700	200	s Mod	dular Bu	uilding	☐ School (K-12 ☐ Subchapter 8	) 3 (Other than K				
26 Pennsylvania	Avenue						Other (i.e., property)				50	
City (5) Kearny							Square Feet 8000	# of Floors		ldg. / 5+	\ge	
County (6) Hudson				Cour	nty Code (7	)(STATE USE ONLY)	Current Use (Pri	or if being den	nolished)			
Name of Monitoring Fire	n Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
Shaw Environm	percent of the office of the profession of the percent of the perc					Prism Resp						
Street Address						Street Address					-	
128 S. Tryon Str	reet - Inters	state To	ower			102 Techno	logy Lane					
City, State, Zip Code						City, State, Zip C						
Charlotta, NC 28	3202					Export, PA	15632					
Project Manager for Mo Roy Stancil	nitoring Firm		100000000000000000000000000000000000000	ephone 4-33	No. 1-6334	Telephone No. 724-325-33	30	License No				
Start Date (10) 3 / 18	2013	Scheduled 3	Comple		ite (11) 2013	Name of OSHA N	<sup>lonitor</sup> ironmental,	Inc.				
Occupancy Status Durin	ng Abatement (0	Check only	one)			Street Address						2000
Facility Closed/Vaca	•			ment		128 South 7	ryon Street,	Interstate	e Towe	er		
Abatement Performe Time of Abatement:					cribe AM	City, State, Zip C Charlotte, N	ode					197
Scope of Work (Check a	all that apply)					onanotto, n	0 20202				-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	*Abatement		enovat emoliti lition by	on		☐ Mini-End ☐ Gloveba	tainment with Neg closure g Procedure empted (*) and Nor					
	22		s Loca	tion					At	atem	ent T	уре
Location Asbestos-Containing			Norma ed Sol	ely by	Asbe	Description of stos Containing Ma	of Iterial (ACM)	Amount	Rei	Repair	E	Ē
TO BE AB	ATED lity	.   M	aintena stodial (12)	Staff?	(i.e	., thermal systems surfacing, VAT	insulation, , or	(Specify SF or LF)	Removal	pair	Encapsulate	Enclosure
(13)		Yes	T	N/A	1	other miscellane	ous)				fe	
Roo	f			×		Roofing		800 SF	×			
Exterior of S	Structure			×	Glazing	Compound from	om Windows	9 SF	×			
							7					
							X					
Name of Registered Wa Waste Manage			F	JDEP V		Cubic Yards of Waste	Name of Regist		nitarv	La	ndfi	ill -
City, State  Camden, New				W1724		Disposal Date 3/20/20/13	City, State Penn Arg				<del></del>	
Completed By (Print or		Title		-	51	Signature	1 5111719	y 1, 1 /\	Date			
Jessica Busch		111111111111111111111111111111111111111	nistr	ative	Supp	ort less	rea Ru	Joh !	2/25/	201	3	

ASB-41

MAY 11

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



Date of Notification (1)  2 / 13 / 2	013		S	me of Build chneic	ing Owner/Operato	or (2) AF,BIA6. PM	2: 68				_
Agencies Notified Type Notificat	ion	t	Str 50	eet Address 00 Wate	r Street	Nijek Kepa	4.831				
■ DOLWD Amended Amendmen			Cit	y, State, Zip	Code &	LICENCH	G				
DCA Emergency justification		ling		ne of Conta		•	Telephone No	umber			
Cancellation	7.5		1000000		nnert, Faciliti	es Proj. Mgr			_		
			F	ACILITY	NFORMATION						
Name of Facility Where Abatement is Ta						Type of Facility	(4)				
CSX Intermodel - Schneide	r Nat	iona	al's Mo	odular E	Building	School (K-1	2) 8 (Other than K-	12)			
Street Address 26 Pennsylvania Avenue						Other (i.e., phomes, etc.	orivate and comm	nercial			
City (5)						Square Feet	# of Floors	2.6	Bldg. 25+		,
Kearny			10-		CONTATE LICE ONLY	8000	or if being demo	- 10		1// 	-
County (6) Hudson			100	unty Code	(7) <i>(STATE USE ONLY)</i>	Industrial	for it being demo	onsnea	)		
Name of Monitoring Firm Hired by Buildin	a Owne	r (8)	ASCI	M No	Name of Abaten	nent Contractor (9)				-	
Shaw Environmental, Inc.	g Cwiic	1 (0)	7.00	vi ivo.	Prism Resp		223				
Street Address					Street Address		A. C. Santa				
128 S. Tryon Street - Interst	ate T	owe	er		102 Techno	ology Lane					•
City, State, Zip Code					City, State, Zip C		THE WOOD TO STATE OF THE STATE				
Charlotta, NC 28202					Export, PA	15632					
Project Manager for Monitoring Firm			elephone		Telephone No.	-00	License No.				
Roy Stancil				31-6334	18025 10		01121				
[BOND DESCRIPTION OF THE PROPERTY OF THE PROPE	The second second	Comp	oletion D	ate (11) 2013	Name of OSHA		Inc :				
		3 3-11-				ironmental,	IIIC.	015 PS			
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire F				3	Street Address	Γryon Street,	Interstate	Tow	er		
☐ Abatement Performed Outside of Norm	al Facili	ty Ho	urs - De	scribe	City, State, Zip C		morotato	1011		77	
Time of Abatement:AM	PM/	P	M	_AM	Charlotte, N						
Scope of Work (Check all that apply)											
≥3 sf or ≥3 lf     ≥160 sf or ≥260 lf	■ R	emoli	tion		☐ Mini-End	g Procedure					
*Abatement prior			ation	т—	☐ Non-Exe	mpted (*) and Nor	-Friable Procedu	1	oaten	ont 7	Tuno
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Us:	Normed Scale	nally blely by nance/ il Staff?		Description of stos Containing Ma , thermal systems in surfacing, VAT, other miscellane	terial (ACM) insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						_	1000	_
Roof			x x		Roofing		800 SF	×			
Exterior of Structure			×	Glazing	Compound fro	m Windows	9 SF	×			
						XIII X					
lame of Registered Waste Hauler Vaste Management		·   i	NJDEP V Hauler ID		Cubic Yards of Waste	Name of Register Grand Ce		ary	Lar	ndfi	II
ity, State	1.4		771124		Disposal Date	City, State			1		
Camden, New Jersey					2/15/20/13	Penn Argy	ıl, PA				
ompleted By (Print or Type) Title		istr	ative	Suppo	Signature	ica Bus	Da	te 13/2	201	3	14

ELDS 3-22-13

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	~ CC	7.0	5
	050	, ,	
			6

Date of Notification (1)				Name	e of Buildir	ng Owner/Operator	(2)		7.	19		_
	25 /					PROPERTIES L		2013 FEB	ີ າ -		E	1
Agencies Notified ☑ EPA	Type Notification	on			t Address 01 N. 31 <sup>S</sup>	T.STREET	1	2013 FEB	6	PM 2	2.0	•
☑ DOLWD ☑ DHSS	Amended Amendmen	+#		City,	State, Zip	Code	-	Ge LIVE	On.			;
☑ DCA	Emergency	1000	- ig			PHIA, PA 19021		12%	1078	34	91	
(NJAC 5:23-8)	justification	)			e of Contac		at N	Telephone Num	ber	7	٠,	
	☐ Cancellation	1			CK CAR			5				
N		. 5:	(6)	FA	CILITY II	NFORMATION	T-					
Name of Facility Where A ALEXANDER HAM		ing Plac	e (3)				Type of Facility ( ☐ School (K-12					
Street Address	ILTON	Lucia .	L.,				Subchapter 8	) (Other than K-12	2)			
EAST 31 <sup>ST</sup> STREET	T AND 23 <sup>RD</sup> ST	REET					Other (i.e., pr homes, etc.)	ivate and comme	rcial b	uildin	gs,	
City (5)							Square Feet	# of Floors	IB	ldg. A	00	
PATERSON, NJ							>50,000	2	ا	51		
County (6)			1	Cou	nty Code (	7)(STATE USE ONLY)	Current Use (Pri		shed)	<u> </u>		
PASSAIC									/			50
Name of Monitoring Firm	Hired by Buildin	g Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)	-				-0
EHS						DELTA/BJDS	, INC					
Street Address				20		Street Address						
411 SOUTHGATE	COURT					1345 INDUST	RIAL BLVD.					
City, State, Zip Code MICKLETON						City, State, Zip C	ode ON, PA 18966					
Project Manager for Mon	itoring Firm		Tel	ephone	No.	Telephone No.		License No.		199		-
JACK CARNEY				56 224		215 322-2900		00783				
Start Date (10)		eduled (				Name of OSHA M						
03 /08 /		N W Black-te		2_/.	13	CRITERION I	ABS					
Occupancy Status During	70 (0)	270				Street Address						
<ul><li>☐ Facility Closed/Vacate</li><li>☐ Abatement Performed</li></ul>					cribe	3370 PROGR						
Time of Abatement: 7					SCIDE	City, State, Zip Co BENSALEM,						
Scope of Work (Check a	Il that apply)		-			DENOALLIN,	FA 13020					100
	71 77	Мъ					ainment with Nega	ative Pressure				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			enovat emoliti			☐ Mini-Enc ☑ Gloveba	losure g Procedure					
							mpted (*) and Non	-Friable Procedu	re			
			s Loca Norma						Ab	atem	ent T	yp
Location Asbestos-Containing		Us	ed Sol	ely by	Asbe	Description o estos Containing Ma	terial (ACM)	Amount	Re	Repair	E	11000010
TO BE ABA	ATED		aintena	ance/ Staff?	(i.e	e., thermal systems	insulation,	(Specify	Removal	pair	caps	1 8
IN Facili (13)	ty	Out	(12)			surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	
200.5		Yes	No	N/A			,				ē	
ROOF			$\boxtimes$		ROOF	FLASHING		100 SF		П	П	
									-	1		+-
	-		-		-				12			
Name of Desistered W	to Univers			LIDEDA	0/	To be ver	TM- 75	11 12"		Ш	Ш	L
Name of Registered Was SERVICE TRANSPO			11.50	NJDEP \ lauler II 20990	O No.	Cubic Yards of Waste	Name of Registe MINERVA L				9	
City, State			-			Disposal Date	City, State				otati e	
58 PYLES LANE, NI	EW CASTLE, [	E 1972	0:0				WAYNESBU	JRG, OH 44688	1		- 1	
Completed By (Print or Ty	ype) T	itle		*		Signature -		Da	te .	-	i .	_
DAMIAN LAVELLE		PROJE	CTM	IGR.		7 3 . '		2 A	71.		1	7

## U 181288

1812		(F	ursuan	t to NJAC 8:60 a	nd 12:120	0)			10	/ h	٠	
Date of Notification (1) February 25, 2013				of Building Owner - Bayonne	/Operator	(2)		20	1350			27
Agencies Notified Type Notifica	tion			Address ast 22nd Stre	et		4		13FE	3 26	P	12
	nent #003			ate, Zip Code nne, New Jers	ev 0700	02		<u>ري</u>	ê Î j	72.		
□ Emerge     justificat     □ Cancella			Name o	of Contact ey Hotard				Telephone N	lumber	5.73	1181	
N			FAC	ILITY INFORMA	TION							
Name of Facility Where Abatement is T IMTT - Bayonne	aking Place (3	)				Ту	pe of Facility (			/1	60-40000	
Street Address						H	School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, hom					
250 East 22nd Street							Other (i.e. p etc.)	rivate & commer	rcial bu	ildings	, hom	es,
City (5) Bayonne, New Jersey 07002				*		Sq	uare Feet	# of Floors		Bldg. 30+	Age	
County (6) Hudson	24			Code (7) USE ONLY)		Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Build EnviroVision Consultants, Inc.	ing Owner (8)		0007	M No. 79		ulations, Inc.						
Street Address 20 - 21 Wagaraw Road, Bldg. 3					et Address 01 Edwards Avenue							
City, State, Zip Code Fair Lawn, New Jersey 07410				City, S	ity, State, Zip Code Iarahan							
Project Manager for Monitoring Firm Guillermo Morales		T	Telepho	ne No. 36-9145		none No. License No. 733-5033 01120						
Start Date (10) 03/04/2013	Schedule 03/15/2		npletion	Date (11)	Name	me of OSHA Monitor nviroVision Consultants, Inc.						
Occupancy Status During Abatement (C Facility Closed/Vacated During Ent Abatement Performed Outside of N	ire Period of A	baten	nent		Street / 20 - 2	Addı 21 V	ess	oad, Bldg. 34	A			- 4
Other – Describe: area unoccupied	-						n, New Jer	sey 07410				
Scope of Work (Check All That Apply)	_											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Besteven	enova			×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
Location of	1000000	_ocati					lon Examples	( ) and Hon-i he	ible i ic	Abat	ement pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Custo	ntenar odial S (12)	nce/ Staff?	Asbestos Con (i.e. therma surfa		ateri insu r, or	ılation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
5th Street Truck Loading Dock	Yes	No	N/A								te .	æ
Sur Street Truck Loading Dock	X		Iran	site she	ets		4000 sf	X	_			
Name of Registered Waste Hauler		I N	IDEP W	asta Cubic	Varde		Nome of D	ogistored Lands				
reehold Cartage	H	Hauler ID No of Waste				Name of Registered Landfill IESI						
City, State Dunmore, PA				Dispo	sal Date	1	City, State	m. DA				
Completed by Title				ate Safety Director				Bethlehem, PA				
	aic	Jaiety	DIFFCIO	Al	02/25/2013						3	



1,61				to NJAC 8:60 ar			•	9	" Pag 1 .			
Date of Notification (1) February 25, 2013				f Building Owner/ - Bayonne	Operator	r (2)		2013 FED		San J		
Agencies Notified Type Notifie	cation		Street A	ddress ast 22nd Stree	et,		,	2013 <sub>FEB 2</sub>	5 PM	2:	GB	
X DEP Amen Amen	dment #			nte, Zip Code ne, New Jers	ey 070	02		à Lice	1000		_ <del></del>	
DOH justific	gency (including cation) cllation			f Contact y Hotard	77			Telephone I				
Name of Facility Where Abatement is	Taking Place (	3)	FACI	LITY INFORMAT	TION	Тур	e of Facility (	4)				
IMTT - Bayonne							School (K-1					
Street Address 250 East 22nd Street						H		8 (Other than K rivate & comme		ldings	, hom	ies,
City (5) Bayonne, New Jersey 07002						Squ	uare Feet	# of Floors	4.0	Bldg. 30+	Age	
County (6) Hudson				Code (7) USE ONLY)		Current Use (Prior if being demolished)						
Name of Monitoring Firm Hired by Bu EnviroVision Consultants, Inc		)	ASCN 0007			lame of Abatement Contractor (9) nsulations, Inc.						
Street Address 20 - 21 Wagaraw Road, Bldg.					Street Address 1101 Edwards Avenue							
City, State, Zip Code Fair Lawn, New Jersey 07410				City, State, Zip Code Harahan								
Project Manager for Monitoring Firm Guillermo Morales		- [	Telepho 973-63	ne No. 36-9145	Telephone No. License No. 504-733-5033 01120							
Start Date (10) 02/25/2013	Schedul 03/11/2		npletion	Date (11)	Name of OSHA Monitor EnviroVision Consultants, Inc.							
Occupancy Status During Abatement	(Check Only Or	ne)	****		Street			DI 0	4.4		***************************************	
Facility Closed/Vacated During E Abatement Performed Outside o Other – Describe: area unoccup	f Normal Facility	Abaten y Hour	ement 20 - 21 Waga City, State, Zip City, State, Zip City, New York City, State, Zip City,						+A			
Scope of Work (Check All That Apply)	)				1 all	Law	ii, ivew sei	Sey 07410				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	Renova Demoli			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure					re		
4 2 2		Locat								Abat	emen ype	t
Location of Asbestos-Containing Material (AC <u>TO BE ABATED</u> In Facility (13)	M) Use	ed Sole intena todial ( (12)	ely by nce/	Asbestos Cor (i.e. therma surfa	Description of ontaining Material (ACM) nal systems insulation, rfacing, VAT, or er miscellaneous)			Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure
5th Street Boiler House	Yes	No	N/A	<u> </u>	-634	47 -		4500 6		_	in in	"
5th Street Boiler House		X			oof Mastic			4500 sf 600 sf	X	-		-
Name of Registered Waste Hauler		NJDEP Waste Cubic Yards Name of Registered Landfill					<u></u>	<u></u>				
Freehold Cartage	Hauler ID No. S-2265 of Waste IESI											
City, State Dunmore, PA				sal Date 5/2013		City, State						
Completed by Aubrey Hotard	orate	Safety	Director	Signatur	1	(1)		Date 02-25-	2013			

	1				8:60 and 12:1		201s	ED OF		CK	C#	46	14
Date of Notification (1) 02/21/13					Owner/Operate ement, LLC	or (2	2013 F	EB 26	PH 2	2: 66	,		
Agencies Notified Type Notification			Street Ad 43 Sar		Road		* A		1	Sierra.			
EPA Initial Amended Amendment	#		City, Sta				00 1	- IULIY	TING	· Cit.			
Emergency ( justification)  DCA  Cancellation		-	Name of	Contact		88 V		Telep	hone Nu	mber			
DCA Cancellation					ORMATION						<u>.                                    </u>		
Name of Facility Where Abatement is Taking			FAGI	LITT HAT	OKWATION	T	ype of Facility (	4)					
Felician College - Milton Court Res Street Address	idence	Hall					School (K-1 Subchapter		than K-1	2)			
21 Milton Court						ľ	Other (i.e. p				dings,	home	es,
City (5) Rutherford						100	Square Feet 30,000 +	# of F	loors	5587	ldg. A 0+	ge	
County (6)			County C		^	+	Current Use (Pri		demolis		-		
Bergen Name of Monitoring Firm Hired by Building	Owner (8)		ASCM				School Abatement Cor	ntractor (9	)				
Accredited Environmental Technol			0002		Pyr	am	id Contractin			11			N.
Street Address 907 Doolittle Drive					1 7 7 7 7 7	-	<sup>ddress</sup> argeant Aven	ue					
City, State, Zip Code Bridgewater, NJ 08807							te, Zip Code , NJ 07013						
Project Manager for Monitoring Firm			Telephor		Tele	phor	ne No.		icense N	10.			
Mr. Eric Houseknecht Start Date (10)	Schedule		908-21				9-6281 OSHA Monitor		1099				
03/06/13	03/22/		iipicaoii t	Jule (11)		J&S Environmental Laboratories LLC							
Occupancy Status During Abatement (Chec					1070,700,000	Street Address 2333 Route 22 West							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Occupied Building			tement ours Cit				te, Zip Code NJ 07081						
Scope of Work (Check All That Apply)						_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
	T le	Locati	ion				Non-Exempted	d (*) and I	Non-Friat	ole Pro		e ement	1
Location of	1	Locati Normal d Sole	ly	li Jogannes	Description			302000		-	Ту	/pe	Г
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>	Ma	intena todial S	nce/		stos Containing thermal system	ms i	nsulation,	(Sp	ount ecify	Re	Z.	Enca	Enc
In Facility (13)	Ous	(12)	Z.MIII i		surfacing, \ other miscell			SF	r LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A	20								te	æ
Garage - Phase III		Х		Ce	mentitious F	irep	oroofing	3,70	0 SF	X			
					***				20.2	1			
Name of Registered Waste Hauler		TN	JDEP W	aste	Cubic Yards		Name of	Registere	d Landfil				
Service Transport Group, Inc.		H	lauler ID 0990		of Waste		Minerva	•		201	1		
City, State New Castle, Delaware				Disposal Date City, State Waynesburg, Ohio									
Completed by Dimo Golcev	eral M	ral Manger Signature				11.	W	10000	ate 2/21/	13			
		eneral Manger 02/21/13											

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)
| Name of Building Owner/Operator 2P6 Emergency Notification MO#20613907473 PH 2: Clay Dept. Date of Notification (1) 02 Stephen Wilson Street Address Type Notificetion Agencies Notified Initial TEPA 41 Morningside Road Amended DOLWO. City, State, Zip Code Amendment # DO DHSS Verona, NJ 07044 Emergency (including T DCA Telephone Number Name of Contact justification) (NJAC 5:23-8) Cancellation Stephen Wilson FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Private house Subchapter & (Other than K-1 2) Street Address Other (i.e., private and commercial buildings. homes, etc.) 41 Morningside Road Bldg. Age Square Feet # of Floors City (5) Verona, NJ 07044 Current Use (Prior if being demolished) County Code (7) (STATE USE ONLY) County (6) Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 02 / 22 / 13 1 24 Envirovision Consultants, Inc. Street Address Occupancy Stalus During Abatement (Check only one) ☑ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg # 34A Abatement Performed Outside of Normal Facility Hours - Describe
Time of Abetement AM- PM/ FM\_ AM City, State, Zip Code Time of Abstement Fair Lawn, NJ 07410 Clean up and decontamination Scope of Work (Check all that apply) Full Conference with Negative Pressure Mini-Enclosure 150 >3 sf or >3 if 2 160 sf or ≥260 if Renovation Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Type Is Location Normally . Description of Location of Repair Removal Encapsulate Used Solely by Amount Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Maintenance/ (Specify (i.e., thermal systems insulation, TO BE ABATED Custodial Staff? surfacing. VAT, or SIF or LF) IN Facility (12)other miscellaneous) (13) Yes No N/A X 15 LF Pipe insulation Basement П NIDEP Waste Hauler ID No.! Cubic Yards of Waste Name of Registered Landfill Name of Registered Waste Hauler T.R.R.F. Inc 0033785 TBD Gr Tech LLC City, State Disposal Date City. State Tullytown, PA TBD Wayne, NJ 07470 Dale Signature Completed By (Print or Type) Title 02/22/2013 Owner

. Do not use this form for ashestos ticensile exempted activities.

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#### MO#20613907462

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Date of Notification (1)				Nam	e of Buildin	ng Owner/Operator	(2)					
	_ /	13		Don	Thompso	n o	_					
Agencies Notified Type	Notificatio	n			et Address	7	HJFFR 20					
☐ EPA 🔀 II	nitial						, rp < 6	PM 2.50				
	mended				Iain Stree State, Zip	Code	OIJFEB 26	. c. (18)				
	mendment		_			Code	WINDS TO ME					
	mergency (	includir	ig		on, NJ 07		W LIBRN	LILL NOL			-5-0-2000	
	stification) ancellation				e of Conta			·/ (ilelephone	Number			
	ancellation			Don	Thompso	n_						
				F	CILITY I	NFORMATION	,					
Name of Facility Where Abatem	nent is Taki	ng Plac	e (3)				Type of Facilit	ty (4)				- 100
Private house							School (K-					
Street Address							Subchapte	r 8 (Other than I	K-1 2)			
86 Main Street							Other (i.e.,	private and cor	mmercial	buildi	ngs,	
City (5)							homes, etc					
Califon, NJ 07830							Square Feet	# of Floors	3	Bidg.	Age	
County (6)				То-								
1000000 P. 2000				Cou	nty Code (7)	(STATE USE ONLY)	Current Use (	Prior if being de	molished)		2000	
Hunterdon	bu Butter	_	(6)				**					
Name of Monitoring Firm Hired	by Building	Owner	(8)	ASCN	No.	Name of Abateme	ent Contractor (	9)				
-				¥15		Gr Tech LLC						
Street Address				10e) - 18b)		Street Address						
						576 Valley Rd #	283					
City, State, Zip Code						City, State, Zip Co						
							and the second					
Project Manager for Monitoring	Firm		Tele	ephone	No	Wayne, NJ 0747	0					
			1000	prioric	NO.	1 1		License No	D.			
Start Date (10)	Cobe	olula d /	<u></u>	t' - 0	ate (11)	973-638-1777		01127				
03 / 03 / 13						Name of OSHA M	onitor					
		03		<u>+</u> /	13	Envirovision Con	nsultants.Inc		11 2 6			
Occupancy Status During Abate	ment (Ched	ck only	one)			Street Address						
Facility Closed/Vacated Durin	ng Entire P	eriod of	Abate	ment		20-21 Wagaraw	Road Bldg #	3/1/4				
Abatement Performed Outsic Time of Abatement: A	le of Norma					City, State, Zip Co	de	34A				
Time of Abatement.	""—— <sup>-</sup>	PM/	PIVI_		_AM	Fair Lawn, NJ 07						
Scope of Work (Check all that ar	(ylac						and decontami	nation				
						H 5.110	and decontain	madon	<u>.</u>			
V - 2 - 4 2 1/	F-27	242000				Full Conta	ainment with Ne	MAINA Praceira				
>3 sf or >3 lf			novati			Mini-Encl		egative Pressure	7.0			
>3 sf or >3 lf ≥ 160 sf or ≥260 lf	,		enovati emolitic			Mini-Encl	osure Procedure					
>3 sf or >3 If ≥ 160 sf or ≥260 If		De	emolitic	n		Mini-Encl	osure			1_		
≥ 160 sf or ≥260 lf  Location of		De	emolitic Locat	on ion Ily		Mini-Enclo Glovebag Non-Exen	osure Procedure npted (*) and N		edure	patem	ent T	ype
≥ 160 sf or ≥260 If  Location of Asbestos-Containing Materia		De Use	Locat Normal	ion ly ly by	Asbes	Mini-Enclor Glovebag Non-Exen	osure Procedure npted (*) and N	on-Friable Proc	edure At	_	Т	T .
≥ 160 sf or ≥260 If  Location of Asbestos-Containing Materia TO BE ABATED		Use Ma	Locat Normal ed Sole intena	ion lly ly by		Mini-Enclosing Mini-E	osure Procedure npted (*) and N erial (ACM)	on-Friable Proc	edure At	_	Т	T .
≥ 160 sf or ≥260 If  Location of Asbestos-Containing Materia  TO BE ABATED  IN Facility		Use Ma	Locat Normal d Sole intena	ion lly ly by		Description of stos Containing Mate, thermal systems in surfacing, VAT,	osure Procedure npted (*) and No erial (ACM) nsulation, or	on-Friable Proc	edure At	pater Repair	Т	т-
≥ 160 sf or ≥260 If  Location of Asbestos-Containing Materia TO BE ABATED		Use Ma Cus	Locat Normal ed Sole intena todial (	ion ly ly by nce/ Staff?		Mini-Enclosing Glovebag Non-Exem  Description of stos Containing Mate to the containing Mat	osure Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify	edure At	_	Т	ype
≥ 160 sf or ≥260 If  Location of Asbestos-Containing Materia  TO BE ABATED IN Facility (13)		Use Ma	Locat Normal ed Sole intena todial ( (12)	ion lly lly by nce/ Staff?		Description of stos Containing Mate, thermal systems in surfacing, VAT,	osure Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify	edure At	_	ent Encapsulate	т-
≥ 160 sf or ≥260 If  Location of Asbestos-Containing Materia  TO BE ABATED IN Facility (13)		Use Ma Cus	Locat Normal ed Sole intena todial (	ion ly ly by nce/ Staff?		Description of stos Containing Mate, thermal systems in surfacing, VAT, other miscellaneo	osure Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify SIF or LF)	edure At Removal	_	Т	т-
≥ 160 sf or ≥260 If  Location of Asbestos-Containing Materia  TO BE ABATED IN Facility (13)		Use Ma Cus	Locat Normal ed Sole intena todial ( (12)	ion lly lly by nce/ Staff?	(i.e	Description of stos Containing Mate, thermal systems in surfacing, VAT, other miscellaneo	osure Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify	edure At	_	Т	т-
≥ 160 sf or ≥260 If  Location of Asbestos-Containing Materia  TO BE ABATED IN Facility (13)		Use Ma Cus	Locat Normal d Sole intena todial ( (12)	ion lly lly by nce/ Staff?	(i.e	Description of stos Containing Mate, thermal systems in surfacing, VAT, other miscellaneo	osure Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify SIF or LF)	edure At Removal	_	Т	т-
Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)		Use Ma Cus	Locat Normal ed Sole intena todial ( (12)	ion lly lly by nce/ Staff?	(i.e	Description of stos Containing Mate, thermal systems in surfacing, VAT, other miscellaneo	osure Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify SIF or LF)	edure At Removal	_	Т	т-
Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)		Use Ma Cus	Emolitics  Locat Normal  d Sole intena todial (12)  No	ion lly lly by nce/ Staff?	(i.e	Description of stos Containing Mate, thermal systems in surfacing, VAT, other miscellaneo	osure Procedure npted (*) and No erial (ACM) nsulation, or	Amount (Specify SIF or LF)	edure At Removal	_	Т	т-
Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)  assement	(ACM)	Use Ma Cus Yes	B Locate Normal ded Sole intena todial (12)  No	ion lly lly by nce/ Staff?	Pipe insu	Description of stos Containing Mate, thermal systems ir surfacing, VAT, other miscellaneo	osure Procedure Inpted (*) and Notes Institute (ACM) Insulation.	Amount (Specify SIF or LF)	edure At Removal	_	Т	т-
Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)  assement	(ACM)	Use Ma Cus Yes	S Locati Normal d Sole intena todial S (12) No	ion ily ily by nce/ Staff?  N/A	Pipe insu	Description of Stos Containing Mate, thermal systems ir surfacing, VAT, other miscellaneo	osure Procedure Inpted (*) and Notes  Procedure Inpted (*) and Notes  Private (ACM) Insulation, Insula	Amount (Specify SIF or LF)	edure At Removal	_	Т	T .
Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)  assement  Location of Asbestos-Containing Materia (13)  In Facility (13)  assement	(ACM)	Use Ma Cus Yes	S Locati Normal d Sole intena todial S (12) No	ion lly lly by nce/ Staff?	Pipe insu	Description of stos Containing Mate, thermal systems ir surfacing, VAT, other miscellaneo	Name of Regis	Amount (Specify SIF or LF)	edure At Removal	_	Т	T .
Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)  assement  lame of Registered Waste Haule T Tech LLC Eity. State	(ACM)	Use Ma Cus Yes	S Locati Normal d Sole intena todial S (12) No	ion ily ily by nce/ Staff?  N/A	Pipe insu	Description of Stos Containing Mate, thermal systems ir surfacing, VAT, other miscellaneo	osure Procedure Inpted (*) and Notes  Procedure Inpted (*) and Notes  Private (ACM) Insulation, Insula	Amount (Specify SIF or LF)	edure At Removal	_	Т	T .
Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)  assement  lame of Registered Waste Haule T Tech LLC City. State  'ayne, NJ 07470	(ACM)	Use Ma Cus Yes	S Locati Normal d Sole intena todial S (12) No	ion ily ily by nce/ Staff?  N/A	Pipe insu	Description of stos Containing Mate, thermal systems ir surfacing, VAT, other miscellaneo	Name of Regis T.R.R.F. Inc	Amount (Specify SIF or LF)	edure At Removal	_	Т	т-
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Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)  assement  Name of Registered Waste Haule r Tech LLC City. State 'ayne, NJ 07470	(ACM)	Use Ma Cus Yes	S Locati Normal d Sole intena todial S (12) No	ion ily ily by nce/ Staff?  N/A	Pipe insu	Description of Stos Containing Mate, thermal systems in surfacing, VAT, other miscellaneo	Name of Registrance City, State Tullytown, P.	Amount (Specify SIF or LF)	edure At Removal	Repair	Т	т-

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Date of Notification (1)	1. 24-	160	i watue of F	JULIER HANDEL FAMILIER THE TOR BE TO	min - 2013		
Agency Notified	والمستعدد المستحدث والمستحدد والمستحدد	73	and and an analysis	Building Owner/Oper	aw (4)	JARY A	IN Finna
Dallah Maniell	Type Notificati	กก	Street Add			min attifmoileation	IN TING
Q EPA	D'initial		.	7	17 =	. 1	- 8
O DEP	☐ Amended		City, State,	7in Cada	1.100	is Ane	
	Amendment		onj, witte,	Zip Code .	1 . 1 . 1	111	7
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O DCA	□ Cancellation		Marine or Co		111	Talankee	
			1	MARY	ANN	A	The sale
Name of Facility Where	Altahoment in Tut-		FACILITY	INFORMATION			
	Talo	ng Place (3)			Type of Faci	in (d)	9.5
Street Address	RESID	regit	100		1		. 60%
The state of the s	0 11	17	11	7)	School (K	-12)	6
. 7	North	PARILYOU	of A	tao	D Charte	of 8 (Other than h	(-12)
City (5)	.2	5-10-10-10-10	JIN I	77 C	homes of		voisi buildings
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County (6)	) / (	11/	00			a of Liddiz	Bldg. Age
3 (-7		. 1	County Code	(7) (STATE USE	Carrie (1)		1.
Name -CIA		- 1	ONLY)	200 2000	Current Use (I	not if being dem	follshed)
Name of Monitoring Firm (8)	Hired by Sullding C	Amer ASCM	No	Tal-			-1000 a 700
			- 430-1	Name of Abatem	ent Contractor (	9)	· · · · · · · · · · · · · · · · · · ·
Street Address				I Atri-	100 21	-6	
				Street Address			
City, State, Zip Code				12/2	Birali	The As	91
	38	62		City, State, Zip Co	da	1/201/1/2	
roject Manager for Monito	ring Firm				unco.	JUT.	B-A
	. Marani	Telephone	No.		7		0001
			140.	lelephone Na			
art Dala 1470				Telephone No.	F6871	License No.	<del></del>
bart Date (10)	* Scheduled	Completion Date		856824	0971	License No.	70
3-2-13		Completion Date			CC371	License No.	70
3-2-13 Coupency Status During Al	patoment (Check or	Con-13	(11) : 1	856 824 Name of OSHA Mo	0971 nitor	License No.	70
3-2-13 coupency Status During At	patoment (Check or	my one)	(11) : 1	856824	0971 nitor Se/	License No.	70
3-2-13 coupancy Status During Ale Facility Closed/Vacated Di	patoment (Check or	my one)	(11)	856 SZY Name of OSHA Mo Street Address	· Se/	License No.	70
3-2-13 Coupancy Status During Ale Facility Closed/Vacated Dr. Abatement Performed Out Other - Describe:	patement (Check or uring Entire Period side of Normal Fac	my one)	(11)	856 824 Name of OSHA Mo	· Se/	License No.	70
3-2-13 Coupancy Status During Ale Facility Closed/Vacated Dr. Abatement Performed Out Other - Describe:	patement (Check or uring Entire Period side of Normal Fac	my one)	(11)	856 SZY Name of OSHA Mo Street Address	· Se/	License No.	70
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Coupency Status During Ale Facility Closed/Vacated Dr. Abatement Performed Out Oxfor - Describe:  Oxfor - De	patoment (Check or uring Entire Period side of Normal Fac t apply)	of Abstement of Ab	Renovation Pernolition  Aspestos (i.e., the standard Waste Waste Waste )	STE SZ + Name of OSHA Mo Street Address City, State, Zip Code City	ACM)	gative Pressure  R-Friable Proced  Amount (Specify SF or LF)	ure Abatement Type
Coupancy Status During Alternant Performed Out Other - Describe:  Ope of Work (Check all that 150 of or ≥ 3 if  160 of or ≥ 260 if  Location of Asbestos Containing Marter In Facility (13)  OUTSICO  Of Registered Waste Haute  Registered Waste Haute  Action Containing Marter In Facility (13)	patoment (Check or uring Entire Period side of Normal Fed t apply)	of Abstement of Ab	Aspestos (i.e., the off  Auler Cubic Waste	STE SZ F  Name of OSHA Mo  Street Address  City, State, Zip Code  City, State, Zip City, State  City, State, Zip Code  City,	ACM)	gative Pressure  R-Friable Proced  Amount (Specify SF or LF)	ure Abatement Type
Facility Closed/Vacated Dr. Abatement Performed Out Other - Describe: Ope of Work (Check all that 3 af or ≥ 3 if 160 sf or ≥ 260 if  Location of Asbestos Containing Mate TO BE ABATED IN Facility (13)  Of Registered Waste Hattle	extorment (Check of uring Entire Period side of Normal Fact tepply)	of Abstement of Ab	Renovation Pernolition  Aspestos (i.e., the standard Waste Waste Waste )	STE SZ F  Name of OSHA Mo  Street Address  City, State, Zip Code  City, State, Zip City, State  City, State, Zip Code  City,	ACM)	gative Pressure  R-Friable Proced  Amount (Specify SF or LF)	ure Abatement Type
Coupancy Status During Alternant Performed Out Other - Describe:  Ope of Work (Check all that 150 of or ≥ 3 if  160 of or ≥ 260 if  Location of Asbestos Containing Marter In Facility (13)  OUTSICO  Of Registered Waste Haute  Registered Waste Haute  Action Containing Marter In Facility (13)	Patoment (Check of uring Entire Period side of Normal Factor (ACAI)	Is Location Normally Used Solely by Maintenance Custodial Staff? (12)  (28) No N/A  NJDEP Waste He	Aspestos (i.e., the south AC)  Aspestos (i.e., the South AC)  Dispos Signatu	STE SZ F  Name of OSHA Mo  Street Address  City, State, Zip Code  City, State, Zip City, State  City, State, Zip Code  City,	ACM)	gative Pressure  R-Friable Proced  Amount (Specify SF or LF)	Abatement Type Enclosure Removal

## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)	NOTIFIC/ (Pur	State of New Jersey ATION OF ASBESTOS A suant to NJAC 8:60 and	BATEMENT 12:120)	רבאטו נמסומס חבחמה
The measure of the same of the	12-13	Name of Building Owner/Op	erator (2) (1)	
Agency Notified Type No	bilication	The order of the state of the s	minimum to the state of the sta	Rankey
DEP DANGE		Street Address	1.1.11.1	The second second second second second
Drong   Lament	ied dment#	City, State, Zip Code	Wastenheust	Blue on
I I Dou	Bitter Construction	Noone	town for	CUOL
D DCA justific	ation)	Name of Contact	Telani	110/6
Marrie ne line its		EACH PROPERTY.		Constanting Constanting
Name of Pacifity Where Ababagent is	Taking Place (5)	FACILITY INFORMATION		7,000
Street Address	1dent		Type of Facility (4)	
11 2715- 1	h.12: 1		U School (K-12)	6.0
City (5)	aven Ane	, 	U Subchapter 8 (Other th U Other (Le. private & cor homes, etc.)	an K-12)
Cheisn C	to MY		C.	
County (6)	100		2609 7	Bidg. Age
Name of Man 2	O	ounty Code (7) (STATE USE	Current Use (Priet if being	amollah n
Name of Monitoring Firm Hired by Build (8)	Ing Cwner   ASCM No	Alerma of At		rent.
Street Address		And of Abaten	tent Contractor (9)	
-		Street Address	THE EST CC	
City, State, Zip Code		1212	Burkniten	New
Project Manager for Monitoring Fam	. •	City, State, Zip C		724
L	. Telephone No	Telephone No.	Delanco NT	08028-
Start Date (10). " Sched	uled Completion Date (11	1 / -	CS 7/ License No.	
Designation 3	-12 -12	Name of OSHA Mo	nitor	270
Occupancy Status During Abstoment (Che		Street Add	· Self.	
Pacifity Closed/Vacated During Entire Polyage Attatement Performed Outside of Normal Other – Describe:	riod of Absternent	Street Address		
r	recitly Hours	City, State, Zip Gode		
Scope of Work (Check all that apply)				-
Q ≥ 160 sf or ≥ 260 ff	· O Rono	varion	linment with Negative Pressure	
	O Dem	LI Gimiohaa	P4	1 1 1
100	Is Location	O Non-Exem	Procedure pled (*) and Non-Friable Proc	1.11
Asbestos-Containing Material (ACM)	Normally Used Solely by		/	Abatoment
TO BE ABATED IN Facility	! Waintenance! (	Description of Aspestos Containing Material (i.e., thermal surface)		Type
(12)	Custodia! Staff?	Surfacine Way	ACM) Amount (Specify	
* •	(12)	other miscellaneous)	SForLE	Enclosure Encapsulate Ropair Removal
OUTSIDE	Yes No N/A		1.	Alla Alla Alla Alla Alla Alla Alla Alla
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			25005	51411
rne of Registered Waste Hattler			-	
	NJDEP Waste Hauler	Cati		
State	Z3867	Cubic Yards of Name of Waste	f Registered Landfill	
State Bellmaun A	1200/		WHOL	1 1 11
toleted by	15	Disposal Data City, Stal		14
Title .		1/13/	Tillit.	2:
		Signature	10/1/1/20/10	JE
41 Planet	•	Signature  censure exampled activities.	Date	4

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Date of Notification (1) 06/29/12					g Owner/ gement		r (2)	VIJFEB 2	6	۸.	× (		-
Agencies Notified Type Notification			Street /	Address				& // h	/	4	Co		
EPA Initial  DEP Amended  DOL Amendmen	# 04			ate, Zip o				1000	Air.	11,0	, ,		
Emergency justification)  DCA  Cancellation	(includin	g	Name o	of Contac				Telepho	ne Nu	umber			
					FORMAT						_		8 -
Name of Facility Where Abatement is Takin Felician College - Milton Court Re	g Place sidence	(3) Hall	***		ORMAI	ion	Type of Facility						
Street Address 21 Milton Court							Other (i.e	(-12) er 8 (Other tha . private & com	n K-1	12) cial bui	ldings	s, hon	nes,
City (5) Rutherford				-			Square Feet 80.000 +	# of Floo	rs		Bldg.	Age	
County (6) Bergen				Code (7)			Current Use (P		molis		50+		
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASCN	И No.	.,	Name	School of Abatement C	ontractor (9)					
Accredited Environmental Technol Street Address	ogies, i	inc.	0002	21		10000	mid Contracti Address	ing Corp.					
907 Doolittle Drive City, State, Zip Code							Sargeant Ave	enue					
Bridgewater, NJ 08807						Clifton, NJ 07013							
Mr. Eric Houseknecht			Telephone 908-21	ne No. 18-1108	3	Telephone No. License No. 973-689-6281 01099							
Start Date (10) 07/16/12	Schedu 03/08/		mpletion l	Date (11)	) :	Name of OSHA Monitor  J&S Environmental Laboratories LLC							
Occupancy Status During Abatement (Chec	k Only O	ne)				Street Address							
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: Occupied Building	Period of al Facilit	Abateı y Hour	ment s			City, St	Route 22 We tate, Zip Code	est		1			
Scope of Work (Check All That Apply)						Union	n, NJ 07081				2.		
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Emmod	Renova Demoli				×	Mini-Enclosu Glovebag Pro						
	Is	Locat	tion				Tion Exempte	and Non-	TilaL	JIE FIO		emen	t
Location of Asbestos-Containing Material (ACM)		Norma ed Sole				scription				-	Ту	ре	_
TO BE ABATED In Facility (13)		intena todial (12)	Staff?		. thermal surfac			Amount (Specify SF or LF		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A		outer in	nochan	eous)	8		val	air .	ulate	sure
Bathrooms-ThroughOut Building		X		Ce	mentitio	us Fire	proofing	35,700 S	F	Х			
Floors and In Pipe Chases													
										$\vdash$			
Name of Registered Waste Hauler Service Transport Group, Inc.	-1	H	IJDEP Wa lauler ID 1 0990		of Wast			Registered La a Landfill	ndfill			,	
City, State New Castle, Delaware					Disposa	al Date	City, Stat						$\dashv$
Completed by	Title				Sig	gnatyre	Wayne	Jany, Onio	Dai	te			
Dimo Golcev	Gene	ral M	langer			1//	N.C.	W	10000000	/21/1	3		
ASB-41 (R-06-08)					de	Do not	use this form for	r asbestos licer	nsure	exem	pted a	activit	ies.
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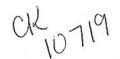
Date of Notification (1) 06/29/12				Owner/O jement,		(2)	10 m	4.7	41004	26	٥,,	44		
Agencies Notified Type Notification			Street A 43 Sar	ddress nworth	Road				ď	4/00	13,	7 6	68	)
EPA Initial DEP Amended Amendment				te, Zip C , NJ 07							37/16	, reg	7	
Emergency ( justification)  DCA  Cancellation	including			Contact	DeBlasio				Tel	enhone Nu	mber			V 15 A
			FACI	LITY INF	ORMATIC	ON		-	-					
Name of Facility Where Abatement is Taking Felician College - Milton Court Res								of Facility School (K-		*	i.		34.1	
Street Address 21 Milton Court	81.						Ħ	Subchapte Other (i.e. etc.)				dings	, hom	ies,
City (5) Rutherford	b .	,e.					Squa	re Feet 000 +	# of	Floors		3ldg. /	Age	
County (6) Bergen			County C	Code (7) ISE ONLY	0		Curre	ent Use (Pr	ior if bei	ng demolis	ned)			
Name of Monitoring Firm Hired by Building C Accredited Environmental Technology			ASCM 0002				me of Abatement Contractor (9) rramid Contracting Corp.							
Street Address 907 Doolittle Drive		163					et Address 3 Sargeant Avenue							
City, State, Zip Code Bridgewater, NJ 08807						ty, State, Zip Code lifton, NJ 07013								
Project Manager for Monitoring Firm Mr. Eric Houseknecht		Telephor 908-21		В		ephone No. License No. 3-689-6281 01099								
	Start Date (10) Scheduled						ne of OSHA Monitor S Environmental Laboratories LLC							
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P		100	ment				eet Address 33 Route 22 West							
Abatement Performed Outside of Normal  Other – Describe: Occupied Building	al Facility	Hour	city, State, Z					ate, Zip Code n, NJ 07081						
Scope of Work (Check All That Apply)			-											77.7
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	- Commence	Renova Demoli				×	Full Containment with Mini-Enclosure Glovebag Procedure Non-Exempted (*) and						9	
	l le	Local	tion	-			110	II Exemple	u ( ) und	nd Non-Friable P		able Procedure Abate		t
Location of	1	Norma	lly		Des	cription	of					Ту	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED  In Facility  (13)	Ma Cusi	intena todial (12)	Staff?		stos Conta . thermal s	ining M systems ing, VA	Material (ACM) s insulation, (T, or			mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Bathrooms-ThroughOut Building	Yes	No	N/A	Cor	mentitio	ue Eir	oproc	fina	25.7	700 SF	x		LD.	
Floors and In Pipe Chases			1 1	Cei	mentitio	us rii	eproc	ning	35,7	00 SF	^		_	$\vdash$
-														
Name of Registered Waste Hauler			JIDED W	aeto	Cubic V	/arde		Name of	Dogieto	rod Landfill				Щ
Pyramid Contracting Corp.	1	NJDEP Waste Hauler ID No. 32613 Cubic Yards of Waste 50			G.R.O.W.S., Inc.									
City, State Clifton, New Jersey	Disposal Date City, State Memisvill				ate sville, Pennsylvania									
Completed by Dimo Golcev	eral N	langer .	*	Sig	nature	10	il	4	Da 01	te /15/1	3			
ASB-41 (R-06-08)			<b>20</b>	Ø.	* Do no	t use t	his form for	asbesto	os licensure	e exem	pted	activi	ties.	

Date of Notification (1) 06/29/12	2	<i>E</i>	Name	of Buildir Mana	ng Owner/	Operator , LLC	(2)	9 26 PH 2:	60	Fuggi			
Agencies Notified Type Notificat	ion	- 17-25	Street	Address			& 11	English					
EPA	ent # 02		City, St	tate, Zip n, NJ 0	Code		- 1.70	ich mg	1			= !	
□ Emerger     □ justificati     □ Cancella		ig	Name	of Contac		0		Telephone I	Numbe	er			
			1		FORMAT			4					
Name of Facility Where Abatement is Ta Felician College - Milton Court F	king Place Residence	(3) e Hall			ETC.		Type of Facilit				- 4		
Street Address 21 Milton Court				* 1		21	Subchapi Other (i.e etc.)	ter 8 (Other than K private & comme	(-12) ercial b	uilding	s, hor	mes,	
City (5) Rutherford		el H	31 24 4				Square Feet 80,000 +	# of Floors		Bldg 50+	Age		
County (6) Bergen			County (STATE	Code (7)	) n		Current Use (F	Prior if being demo	lished)			-	
Name of Monitoring Firm Hired by Buildin Accredited Environmental Techr	ng Owner (8 nologies,	B) Inc.	ASCI 0002	M No.			me of Abatement Contractor (9) vramid Contracting Corp.						
Street Address 907 Doolittle Drive						Street	Street Address 163 Sargeant Avenue						
City, State, Zip Code Bridgewater, NJ 08807					City, St	ate, Zip Code n, NJ 07013	e						
Project Manager for Monitoring Firm Mr. Eric Houseknecht		Telepho	ne No. 18-110	ρ.	Telepho	one No. 889-6281	License No.						
Start Date (10) 07/16/12	tart Date (10) Scheduled 0					Name o	me of OSHA Monitor S Environmental Laboratories LLC						
Occupancy Status During Abatement (Ch	The section of the		-				eet Address						
☐ Facility Closed/Vacated During Entir	e Period of	Abate	ment				33 Route 22 West						
Abatement Performed Outside of No Other – Describe: Occupied Building	rmal Facilit	y Hou	s				State, Zip Code ion, NJ 07081						
Scope of Work (Check All That Apply)				10,0						-			
≥3 sf or ≥3 if  ≥160 sf or ≥260 if		Renov Demoli				×	Full Containment with Negative P Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable						
	Is	s Local	tion				Non-Exempte	ed (*) and Non-Fria	able Pr	Aba	emen	ıt	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Norma ed Sole aintena stodial (12)	ely by nce/ Staff?		stos Conta thermal surfac		iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Remova	T	e Encapsulate	Enclosure	
	Yes	No	N/A						l a	=	late	ure	
Bathrooms-ThroughOut Building	1	X		Ce	mentitio	us Fire	proofing	35,700 SF	Х				
Floors and In Pipe Chases													
Name of Decisional Waster U. I.					,								
Name of Registered Waste Hauler Pyramid Contracting Corp.	H	NJDEP Waste Cubic Ya Hauler ID No. of Waste 32613 50					Registered Landfi W.S., Inc.	ill			10000		
City, State Clifton, New Jersey	Disposal Date				City, Sta	te ville, Pennsylva	ania						
Completed by Title Dimo Golcev General M				Signature Signature				11/10	ate 0/12/	12			
ASB-41 (R-06-08)		***************************************	- 1	So not	use this form for	r asbestos licensu	re exe	mpted	activit	ties.			

Date of Notification (1) 06/29/12		Name of Building Owner/Operator (2) Sharp Management, LLC Street Address								<u>_</u> 1							
Agencies Notified	Type Notification			Street A	ddress mworth	Road	· Vig				(100)	( 1	7	G <sub>G</sub>			
EPA DEP DOL	Initial  Amended  Amendment				ate, Zip Co , NJ 07							ing	riv	,			
Ď DOH ☑ DCA	Emergency (i justification) Cancellation	ncluding			f Contact chael D		D			Te	ephone Nu	mber					
				FACI	LITY INF	ORMATI	ON						-	101			
Name of Facility Where A Felician College - N									e of Facility ( School (K-1	0.05							
Street Address 21 Milton Court			NO.					×	Subchapter Other (i.e. p etc.)				dings	, hom	es,		
City (5) Rutherford					34.   [1			10000000	are Feet 000 +	# o	f Floors	100	lldg. /	Age	7 2		
County (6) Bergen	7				Code (7) USE ONLY	)		11/2007	rent Use (Pri hool	or if be	ng demolisi	hed)					
Name of Monitoring Firm Accredited Environs				ASCN 0002		7.30 E.S.S.		ame of Abatement Contractor (9)  lyramid Contracting Corp.						****			
Street Address 907 Doolittle Drive							eet Address 33 Sargeant Avenue										
City, State, Zip Code Bridgewater, NJ 08						ity, State, Zip Code Clifton, NJ 07013											
Project Manager for Mon Mr. Eric Housekned		Telepho 908-21	ne No. 18-1108			phone No. License No. 8-689-6281 01099											
Start Date (10) 07/16/12	Start Date (10) Scheduled					, , , ,					me of OSHA Monitor &S Environmental Laboratories LLC						
Occupancy Status During	Abatement (Check	Only On	e)				Street	3.032.523.									
Facility Closed/Vaca Abatement Perform Other – Describe: 0	ed Outside of Norma	eriod of A al Facility	Abate Hou	2333 Route 22 West  City, State, Zip Code  Union, NJ 07081						-							
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≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		and the same of th	lenov emol				×	M	ull Containme lini-Enclosure llovebag Proc on-Exempted	e cedure				11			
Y W			Loca											Abatemen Type			
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Pathrooma Throug	hOut Duildin	Yes	No	N/A	0		<b>-</b>		- f:	05	700.05	ļ.,					
Bathrooms-Throug			X		Cer	mentitio	ous Fir	epro	oring	35,	700 SF	X					
1 loois and in Fi	pe Glases						**********										
Name of Registered Was Pyramid Contracting		NJDEP Waste Cubic Yards Hauler ID No. of Waste 32613 50															
City, State Clifton, New Jersey		Dispos			Disposal Date City, State 11/16/12/7 Morrisville, Pennsylvania												
Completed by Title Dimo Golcev General						5	grature	1	Gl	4	Da 07	ite 7/10/1	2				
ASB-41 (R-06-08)		to a		d	* Do no	ot use	this form for	asbest	os licensure	e exen	pted	activi	ties.				

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Agencies Notified	Type Notification			Street Ad		Daged		· Alega		36 p	4		
EPA DEP DOL	Initial Amended Amendment		1	City, Stat	nworth I te, Zip Co NJ 070	ode			L10	B 26 P/	12:	िह	-
DOH DCA	Emergency (in justification) Cancellation	ncluding		Name of Mr. Mic		eBlasio		-	Tel	ephone Nur	nher//		
				FACIL	LITY INFO	ORMATIO						,	
Name of Facility Where Felician College - N Street Address							Type	of Facility School (K- Subchapte	12) r 8 (Oth	er than K-12	2)	<i>e</i>	
223 Montross Aver	nue				1927=			Other (i.e.   etc.) are Feet		& commerci	11	lings,	
City (5) Rutherford							2 EXC	)00 +	4	i Floois		0+	ge
County (6) Bergen				County C	Code (7) ISE ONLY	,	Cum — Sch		ior if bei	ing demolisl	ned)		y y
Name of Monitoring Firm Accredited Environ			ıc.	ASCM 0002			Name of Ab Pyramid (				1		
Street Address 907 Doolittle Drive						1.00	Street Addre 163 Sarge		nue				
City, State, Zip Code Bridgewater, NJ 08	3807					1	City, State, Z Clifton, N			-	-		
Project Manager for Mo			- 1	Telephor 908-21	ne No. 8-1108		Telephone N 973-689-6			License N 01099	lo.	82	
Mr. Eric Housekne													
Start Date (10) 07/16/12		Schedule 11/16/1		npletion [	Date (11)	1 2 2 2	Name of OS J&S Envi			ratories L	LC		
Start Date (10)		11/16/1	2	npletion [	Date (11)		J&S Envi	ronmenta ess	l Labo	oratories L	LC		
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Start Date (10) 07/16/12 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe:	ng Abatement (Check cated During Entire P ned Outside of Norma Occupied Building	11/16/1 Only Oneriod of A	e) Abatem	tion	Date (11)	1	J&S Envi	ronmenta ess tte 22 We Zip Code J 07081 ull Containm ini-Enclosur lovebag Pro	est est	n Negative I	Pressu		e
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Start Date (10) 07/16/12 Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe: Scope of Work (Check // ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location Asbestos-Containing TO BE AE In Fac (13)  Bathrooms-Throu	ng Abatement (Check cated During Entire P ned Outside of Norm Occupied Building All That Apply)  on of g Material (ACM) BATED illity  or of ghout Building  Pipe Chases  aste Hauler g Corp.	11/16/1 Conly Oneriod of Fall Facility  Is R Use Ma	Abatem Hours Renova	tion on ly ly by nce/ Staff?  N/A	Asbes (i.e.	Description of Wast 50  Disposa 11/16/	J&S Envi Street Addre 2333 Rou City, State, i Union, N.  Fi M G N  cription of ining Materia ystems insu ng, VAT, or scellaneous us Firepro	ronmental ess vite 22 We Zip Code J 07081  Uill Containm ini-Enclosur lovebag Pro on-Exempte  al (ACM) lation, )  offing  Name of G.R.O  City, Sta	nent with recorded (*) and (5) Si	n Negative I	Pressur Die Pro Removal	cedur Abate Ty	emen pe



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Date of Notification (1) 2/20/2013					wner/Opera		2)	POIBFE	B 26 PM	2,44	101		
Agencies Notified Type Notification		17/05	Street Ad 954 Ave	dress enue C		,	.43	Die Mo	"Do y	2:	ିନ		
EPA Initial  DEP Amended  Amendment #	<u> </u>	C		e, Zip Cod ne NJ 07				& L/	CLNSING		1/		
DOH Emergency (i justification)  Cancellation	ncluding	1.00	lame of Jerome	Contact Machni	ik				ephone Num	ber			
<u> </u>			FACIL	ITY INFO	RMATION								
Name of Facility Where Abatement is Taking Calvary Episcopal Church	Place (3)	)					Type of Facility  School (K	-12)					
Street Address 954 Avenue C							Subchapt Other (i.e etc.)	er 8 (Oth private	er than K-12) & commercial	build	ings,	home	s,
City (5) Bayonne NJ 07002							Square Feet 1200	# o	f Floors		dg. A	500	
County (6) Hudson			County C	ode (7) SE ONLY)			Current Use (P	rior if be	ing demolishe	ed)			
Name of Monitoring Firm Hired by Building C AZ Solutions	wner (8)		ASCM	No.	200	70000	of Abatement C Environmen		(9)				
Street Address 7007 60th Street			51		St	treet	Address Stanley St						
City, State, Zip Code					Ci	ity, S	tate, Zip Code Rutherford,	N I 070	73				
Ridgewood NJ 11385 Project Manager for Monitoring Firm			Γelephor		Te	eleph	one No.	143 070	License No				
Alex Zivanov Start Date (10)	Schedule	00000		2-1572 Date (11)			138-1188 of OSHA Monit	or	854				-
2/25/2013 ** Occupancy Status During Abatement (Chec	3/4/201			*	1	0.0703(207)	Atanasoski Address		1				
Facility Closed/Vacated During Entire F	Period of A	Abatem	ent		1		Paterson Pla	nk Roa	d				
Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours				000	tate, Zip Code stadt NJ 070	72					
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 If  ≥160 sf or ≥260 If		Renova Demoliti				×	Mini-Enclos Glovebag P	ure rocedure	h Negative P			е	
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D	Yes	No	N/A X			AT		12	200 S.F.	Х	-		$\vdash$
Basement			^			A I		12	.00 0.1 .	A .			-
			JDEP W	lasta	Cubic Ya	arde	Nama	of Regis	tered Landfill		_	1	
Name of Registered Waste Hauler Newark Carting		H	lauler ID 4509		of Waste		IESI	J. T. Oglo	and the state of t		4		
City, State Newark, NJ					Disposal 3/4/201		City, S Beth	itate lehem,	PA		34		(SE
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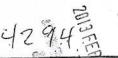
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Date of Notification (1)				Name of Bu	ilding Owner/Oper	er en agres en er 🖷 e	2013 -		****	• ;	1
	/3	_		CALV	ARY EPIS	coop, C	huarh	3/3	P	A9 .	-+
Agencies Notified	i ent# cy (incl	uding		City State 2  BAYO  Name of Cor  JEROM	1954 AV LIP CODO NNE X NOCI E MACI	ENUE C 17 07 INIK	& L/6	ć <sub>i</sub>	11.0	7 2	12.55 12.55 13.55
Name of Facility Where Abatement is T	akina C	N=	/21	FACILITY	INFORMATION	l			C	47	
CALVARY EpiSCOPI Street Address 954 AVEN	96 (	7 4	URC	H		Type of Fac	K-12) iter 8 (Other than K-	12) nercia	) build	dings	1707
BAYONNE NJ	0	70	02			Square Feet	# of Floors		Bidg	Age 57 t	- 0.1
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Name of Monitoring Firm Hired by Buildi AZ SOL UTTON Street Address 7007 60 <sup>th</sup> St.	ng Öwr	8) 161		4105	Street Address	ENVIRON	(9) MENTAL /	we			
RIDGEWOOD NJ/	100	) £			City, State, Zip						
TO Sci Date (10)	neduled Z	Com	pletion 28	Date (11)	201 - 43 Name of OSHA	ERFORI 8-1188 Monitor ATANASO	l icense No	75		3	
Coupancy Status During Abatement (Che Facility Closed/Vecated During Entire I Abatement Performed Outside of Norm Ime of AbatementAM-  ope of Work (Check all that apply)	Davind .			nt Describe AM	333 PATE	ERSON R		<b>.</b>			1
≥3 sf or ≥3 if ≥180 sf or ≥280 if		Senov Demoi			☐ Gloveb	ag Procedure	egative Pressure				
Location of		Is Loc	cation		-	ombiga ( ) and is	ion-Friable Procedu		MAN	ent 7	-
Asbestos Containing Material (ACM) TO BE ABATED IN Facility (13)	M	ed Selainte	olely by nance/ al Staff	Lone	Description stos Containing M. thormal systems surfacing. VAT other miscelland	aterial (ACM) Insulation:	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	chclosure
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	la	أأ		+			1200 SF	+-	П	П	
			13								
c of Registered Waste Hauler								H	-	片	<u> </u>
EWARK CARTING			NJOEP Hayles	Waste ID No.	Cubic Yards of Waste 3	Name of Regis		IHI		<u> </u>	П
FWARK, NJ  Interest By (Print or Type) . Interest					3/4/ <i>1</i> 3	City, State	0.1				-
RO ATANASOSEI	COR.	u.	2/2		Signature	K	Date	18	11:	3	
	o not i	use th	nis form	olsedse tol	s licensure exempt	ed activities.		, -			

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Check# 1580		NOTI		renan	to M.IA	C 8-60	and 5:16	EMENT.		gency N	lotifi	catio	ภ
Date of Notification (1)		-		Name	of Building	Owner/C	क्रिकीली (2	EB 26 PM	7.7-1:75.45.50			<del></del> .	
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₩ EPA	Initial			21 She	lborne L	Anc	å	LIGHT	(Sigliature)	-		1	
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Ø ohss	Amendment #		į	Willin	gboro, N	J 08046				- 5	3 300	2	
DCA (NJAC 5:23-8)	( justification)	cinaing	1		of Contac				Telephone Nun	nber	-		-
(1107.10 31.20 4)	Cancellation		i	Valeri	e Smith								
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Name of Facility When	e Abatement is Takin	o Piace	(3)				••	Type of Facility	(A)				
Private house		70	3.00					School (K-12					
Street Address				-				Subchapter (	3 (Other than K-1 private and comme	2) ercial but	ildina		
21 Shelborne Lane								homes, etc.)		cour pu	iding.	**	
City (5)								Square Feet	# of Floors	Blo	ig. Ag	je	
Willingboro, NJ 080	46												
County (6)				Coun	ly Code (7)	(STATE U	SE ONLY)	Current Use (Pr	for if being demol	ished)			
Burlington							24						
Name of Monitoring h	rm Hired by Building	Owner (	B)	ASCM	No.	Name	of Abatems	ent Contractor (9)	j	****			
						Gr Tec	h LLC						
Street Address		-					Address						
						576 Va	lley Rd #	283				7002 L	
City, State, Zip Code							tate, Zip C						
**						Wayne	NJ 074	70					
Project Manager for M	fonitoring Firm		Tele	phone	No.	Teleph	one No.	The state of the s	License No.				
			;				8-1777		01127				
Start Date (10)	The second secon				te (11)	Name	of OSHA A	Acnitor :					1
02 /22	1 _13 _	02 ;		4 / .	13_	Enviro	vision Co	onsultants, Inc			7222	55.67	
Occupancy Status Du	ring Abatement (Chec	k only	пе)			Streat	Address	7,					
Facility Closed/Vac						20-21	Wagaraw	Road, Bldg .#	34A				
Abatement Perform		al Facilit PM/	y Hou PM		AM	City, S	tate. Zip C	ode					
Time of Abatement	·'	Link1		-	AM	Fair La	wn, NJ 0					- 52	
Scope of Work (Check	ell that apply)							p and decontami					
Ø >3 ±f or >3 If		₩ Re	novat	ion		. Н	Mini-Eng	itainment with Ne closure	deniae presente				
S ≥ 160 af or ≥260 (f			rpoliti			日	Gloveba	a Procedure					
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Gr Tech LLC				00337	<b>\$</b> 5	TF	BD	T.R.R.F. Inc					
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Wayne, NJ 07470 Completed By (Print	or Type)	itle		-			Signalus	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	a me a je te i	Date			,
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by Building Owner		ONLY)	Code (7		STORE	STORAGE				
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Fam				Street Address	•					
Firm					River St					
Firm			-	City, State, Zip	code sack, N.	.t. 07601				
E mans	Telephon	na No		Telephone No.		License No.				_
	1 Coopies			201-329-		00388				
Scheduled Compl		to (11)		Name of OSHA	Monitor	tal Inc				
3-8-1				Omega EI	vironmen	tal Inc				
ement (Check only on				280 Huy						
ing Entire Period of Ab de of Normal Facility F	patement Hours			City, State, Zip	Code			;		re-classe.
n 5 pm		٠.,		South I	lackensac	k, N.J.	0/60	6		
apply)			-			Negative Pressur				
				C) Gio	rebaa Procedure		#2 #2			
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	Ised Sole	ely by	Ache	Description estes Containing M	of fatorial (ACM)	Amount		_		F
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	(12)							Val	air	
Ye	s No	I N/A								
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	OUL				1.3,200.		Date			
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The section	e this for	m for as	sbestos l							
	M 5 PM apply)  brial (ACM) Ye  HALL  valor Inc  ck, N.J. 0:  Title Estimat  Do not us	Is Local Normal Used Self Maintents Custod State (12) Yes No HALL NJEEP ID No. 1710 Ek, N.J. 07601 Estimator	M 5 PM apply)  B Ren □ Den  Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  HALL  MJDEP Waste I 10 No. 17109  ck, N.J. 07601  Title Estimator	Aspety)  B. Renovation Demotition  Is Location Normally Used Solety by Maintentance/ Custodial Stati? (12)  Yes No N/A  HALL  NUDEP Waste Hauler Inc  17109  ck, N.J. 07601  Title Estimator	South I Brenovation Demolition	South Hackensac  Apply)  B-Renovation Demolition  B-Renovation Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Yes No N/A  HALL  X-ROOF SEALAWI FLASHIWG  NJDEP Waste Hauler Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Yes No N/A  HALL  X-ROOF SEALAWI FLASHIWG  Minerval Disposal Date City, State Waynes  B-13  Signature Rullwan  * Do not use this form for asbestos licensure exempted activities.	South Hackensack, N.J.    Pull Containment with Negative Pressur   Infinite Enclosure   Demolition   Demolition   Description of Glovebus Procedure   Normally Used Solely by Maintenance/ Custodial Staff: (12)   Yes   No   N/A   Roof SEALAWI FLASHING   25    HALL   X Roof SEALAWI FLASHING   25    Waste   17109   124 YO   Minerva Enterprice   City, Stafe   Waynesburg , Oh   Talle   Estimator   Roberts   R	South Hackensack, N.J. 0760  Brenovation Demotition  Brenovation Demotition  Brenovation Demotition  Brenovation Demotition  Brenovation Demotition  Brenovation Demotition  Brenovation Description Description of Asbestos Containing Mathematic (ACM) Amount (Specify Serial (ACM) Amount (Specify Serial (ACM)  Yes No N/A  HALL  NUDEP Waste Hauler Disposal Date Disposal Date Ck, N.J. 07601  Ck, N.J. 07601  Brenovation Description of Asbestos Containing Mathematic (ACM) Amount (Specify Specify Specify Specify Minerva Enterprises Ck, N.J. 07601  Ck, N.J. 07601  Ck, N.J. 07601  Ck, N.J. 07601  Ck Signature Cubic Yards of Waynesburg Amount Specify Minerva Enterprises Ck, N.J. 07601  Ck Signature Ck Waynesburg Date Ck Signature Character Characte	South Hackensack, N.J. 07606  Brenovation Demolition  Brenovation Glovebus Procedure Non-Exempted (*) and Non-Friable Procedure    Association   Associa	South Hackensack, N.J. 07606    South Hackensack, N.J. 07606   Pull Containment with Negative Pressure   Mini-Enclosure   Giovebag Procedure   Non-Exempted (*) and Non-Friable Procedure   Non-Exempted (*) and Non-Exempted (*)

Date of Notification (1) 2/22/13						ner/Operato idential Pr		y Fund	FEL	326	7.5	· An		
Agencies Notified	Type Notification		100	Street Ac	idress x 2032			d.		50 P	M 2:	ିନ		
DEP X DOL	Amended Amendment				te, Zip Code City, NJ			8	<102	N. IN.	140/			
× DOH □ DCA	Emergency justification) Cancellation		100	Name of Dan Ba	Contact ailey				Tele	phone Ni	imber *		Át.	
Name of Facility Where A	Abatement is Takir	g Place (3)		FACIL	ITY INFOR	MATION	Тур	e of Facility (4					1941	
Street Address 625 36th Street		-					×	School (K-12 Subchapter 8 Other (i.e. pretc.)	(Othe	r than K-1	12) cial build	dings,	home	es,
City (5) Union City	1000		.8				Squ 200	are Feet	# of 2	Floors	100	ldg. A	ge	
County (6) Hudson		1		County C STATE U	Code (7) ISE ONLY)	er operation		rent Use (Prior			shed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	l No.			atement Cont rironmental			С			
Street Address							et Addr Gate	ess Drive, PO	Box 4	183		X		
City, State, Zip Code			509000					Zip Code d, NJ 0741	8			12.10		
Project Manager for Mor	nitoring Firm	1		Геlерhог	ne No.	2,000,000	ohone -583-	No. -8500		License 703	No.			
Start Date (10) 3/6/13	-	Schedule 3/11/13		pletion I	Date (11)	Nam	e of O	SHA Monitor						
Occupancy Status Durin	g Abatement (Che	ck Only On	e)			Stree	et Addr	ess	930					
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire ned Outside of Nor	Period of A mal Facility	batem Hours	ent		City,	State,	Zip Code						
Scope of Work (Check A	All That Apply)							7	0					
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf			enovat emoliti				× C	ull Containme Ini-Enclosure Blovebag Proci	edure				e	
		le	Location	on					17			Abat	ement	
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Asbestos-Containing TO BE AB In Faci (13)	n Material (ACM) NATED Lity	Mai	d Solel ntenar odial S (12)	ice/	(i.e. th	s Containing nermal syster surfacing, V other miscell	ms ins /AT, or	ulation,	(8	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
basem	ent -	103	140	X		pipe insu	lation		9	0 LF	x			
													-	
Name of Decision of Ma	ata Hauler		I NI	JDEP W	laste I	Cubic Yards		Name of F	Registe	red Landi	<u> </u>			
Name of Registered Wa Tri-State Transfer	ste Hauler		Н	auler ID 2325	No.	of Waste 10		Minerva	Ente					3 =
City, State Bronx NY		The same				Disposal Da TBD	te	City, State Waynes		ОН				
Completed by Andrew Scott Higgin	ns	Title Presi	dent/	Owner		Signatu	ire	en	\		Date 2/22/1	3		

State of New Jersey APPROVED: APPROVED 2/32/13
ON OF ASBESTOS ABATEMENT DOH

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

Name of Registere  Bristol Environn  City, State  Bristol, PA				H		er ID N	W. 201	of Waste 1/2 Cu yd Disposal Date 2/22/13	Grows Lan City, State Morrisville	dfill			4-1	
Name of Registere	ed Waste Hau	iler		100			W. 201		. Committee of the committee of the		- 1			
				14		ED W	aste	Cubic Yards	Name of Reg	gistered Landfill				
		enter o men	H	1		-					H	H	H	H
- 10								4				H	님	ዙ
									44 T			P		H
LODDY Hallway		***************************************	H											
Lobby Hallway					_			Textured C	eiling	20 SF				
Ma <u>TO</u>	stos-Containir Iterial (ACM) BE ABATED in Facility (13)	ng	S Mair	mally solely ntena codial (12 No	by bince Sta	or		Asbestos-Con Material (A (i.e., thermal s nsulation, surfac or other miscell	CM) ystems cing, VAT	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclsoure
	ocation of			Loca			- 21 - 21 - 22 - 23 - 23 - 23 - 23 - 23	Description	n of	Amount		atem		
Scope of Work (Ch  ≥3 sf or ≥3  ≥160 sf ≥26	neck all that a		$\boxtimes$	1125202	ran and ma	vation lition			Mini-En	ntainment with aclosure Bag Procedures cempted and No	•			
Facility Clos Abatement Describe:	sed/Vacated	During Entire Polytside of Norma 30 AM	eriod	of Al			pm	1123 Beave City, State & Bristol, PA	r Street Zip Code	3				- Korldo
2/22/13 Occupancy Status	3	ment (Check or	100000000000000000000000000000000000000	2/13 e)				Bristol Env	ironmental li	nc.				-
Project Manager for Brian Holbig Scheduled Start Da		Scheduled Con	609-	392- on Da	420			Telephone Nu (215)788-60 Name of OSH	40 A Monitor	00509	Number			
City, State & Zip Co Trenton, NJ 0860	08							Bristol, PA	19007	li innere	Numbor			
120 N. Warren St								1123 Beave City, State & 2	r Street					
Environmental C Street Address	Connection							Street Addres	ironmental, l	inc.				
Name of Monitoring	g Firm Hired b	J by Building Own	er (8)		1	ASCM	No.	Name of Abat	tement Contrac					-
City (5) Yardville, NJ		County (6) Mercer	Co	unty	Cod	de (7)	82	100000 Current Use ( Correctiona	Prior if being d	1 demolished)		30+	l)	
Street Address Highbridge Rd. (								Subchap	ter 8 (Other tha	nmercial buildir	ngs, hom Bldg. Age		1	
Name of Facility Wi		ent is Taking Pla	ace (3					Type of Facility School (N			1		7	0
☐ DCA		cellation			ØS	E. Ma		RMATION			63.		15	_
☐ DEP ☐ DOL ☐ DOH	☐ Amei	nded rgency				le, NJ Conta		20	- W. H.	<u> </u>	Telepho	he Nu	ımbe	<u>ر ا</u>
☐ EPA ☐ DEP	│	Ĩ	-			te & Zi		ode & Z	· Tell Marian	· · · · · · · · · · · · · · · · · · ·	60	<u> </u>	3	
Agencies Notified	Type Notifica	ation	1	Stree	t Ac	ddress		irunent of co	PM	2:08		4	2	
Date of Notification				Vame	e of	Buildin	ng O	wner / Operator rtment of Co	(2)					

CK 23590

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

State of NJ Dept. of Environmental Confedition

Street Address

Box 420

Telephone (Pursuant to NJAC 8: 60 and 12: 120-) Date of Notification (1) 0 2 / Type of Notification Agencies Notified [X] EPA DEP [X] Initial [] [X] DOL [ ] Amended Amendment # [X] DOH **Emergency (including** Justification) [ ] Cancellation IX | DCA Al Payne FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Round Valley Recreation Area (Shed) [] [ X ] Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial [] buildings, homes, etc.) 44 North Avenue County Code (7) Square Feet # of Floors Bldg. Age City (5) County (6) (STATE USE ONLY) Current Use (Prior if being demolished) Bridgewater Township ASCM Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) USA Environmental Management Inc J.R. Contracting & Environmental Consulting, Inc. Street Address Street Address 344 West State Street 1141 Route 23 City, State, Zip Code Wayne NJ 07470 Trenton, NJ 08618 Project Manager for Monitoring Firm Telephone Number Telephone Number License No. 00408 609-656-8101 973 628-9500 Willie Weisgarber Scheduled State Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 0 3 1 5 0 4 / 1 1 Enviro Vision Consultants, Inc. Month Month Day / Year Day Year Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period 20-21 Wagaraw Road, Bldg. #34A of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours 11 Fairlawn NJ 07410 | | Other - Describe: Scope of Work (Check all that apply) Full Containment With Negative Pressure [X] Renovation Mini-Enclosure  $[ ] \ge 3 \text{ sf or } \ge 3 \text{ lf}$ Demolition 11 Glovebag Procedure  $[X] \ge 160 \text{ sf or } \ge 260 \text{ lf}$ [X] Non-Exemted (\*) and Non-Friable Procedure Abatement Type E Is E Location N Description of R N E R C Location of Normally Asbestos-Containing Amount C M E Asbestos - Containing Used Material (ACM) (Specify A Material (ACM) Solely by (i.e., thermal systems SF or LF) 0 P P 0 V S Maintenance / insulation, surfacing, VAT, A TO BE ABATED Custodial or other miscellaneous) I U U A in Facility (13) L R Staff (12) L R Yes No N/A 144 SF X X Linoleum 1st Floor - Changing Room X 108 SF Transite 1st Floor - Sauna NJDEP Waste Name of Registered Landfill Cubic Yards of Waste Name of Registered Waste Hauler Hauler ID No. J.R. Contracting & Environmental Consulting, Inc. 17819 G.R.O.W.S Disposal Date City, State City, State Morrisville PA Wayne NJ 07470 Completed by (Print or Type) Title Date Signature 2/20/2013 Jerry Bijelonic Project Manager

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

•	NO				BESTOS ABATI		IT	£ 1	dir in				
Date of Notification (1)		(Pu	11		8: 60 and 12: 12: uilding Owner/O		r (2)		9 26 P	18 10	**		
0 2 / 2 0 / 1	3		11		Dept. of Enviror		al Protection	201350		1			
Agencies Notified Type of Notification			S	treet Add	ress			10//	8 26 0			-	
[X] EPA			P	O. Box 42	20		-12"	Deer .	-0 P	M 2.	-		
[ ] DEP [X] Initial				City, State,	Zip Code			2 7			1.0		
[X] DOL [ ] Amended			1	renton NJ	08625			OK 1/6			<b>.</b>		
Amendment # [ X ] DOH [ ] Emergency (include	ing		N	ame of Co	ontact	7		Т	elephone Nur	nber	1_		
Justification) [X ] DCA [ ] Cancellation				I Payne				. 1					
			Ш		ORMATION			_			_		
Name of Facility Where Abatement is Taking Place (3)			PAC	ECKLE IIVI	ORMATION	Г	Type of Facility	y (4)					
Pigeon Swamp State Park								Sahaal (V	12)				
Street Address		-	i.			$\neg$	[ ] [X]	School (K- Subchante	-12) er 8 (Other th	an K-1	2)		
248 Deans Rhode Hall Road							[1]	Other (i.e.	, private & co				
City (5) County (6)			T Co	unty Code	(7)	$\dashv$	Square Feet		of Floors	_	DIA.		
			11.000	FATE USI	Stand 1 5 (1 5 to 1	- 1	Square reet	"	OI FIGORS		Bldg.	Age	
South Brunswick Middlesex							Current Use (P	rior if being	lemolished)				
Name of Monitoring Firm Hired by Building Owner (8)		ASC	CM		Name of Abat	ement	Contractor (9)			-		_	
							(,,						
USA Environmental Management Inc Street Address							Environmental Co	onsulting, Inc					
344 West State Street					Street Address								
west State Street		- 1	4		City State 7in	_						7/2	34
Frenton, NJ 08618					City, State, Zij Wayne NJ 074		•						
Project Manager for Monitoring Firm	Tele	phone	Numb	er	Telephone Nu			Lie	ense No.		_	_	
Willie Weisgarber	609-	656-81	01		973 628-9500			1000	408				
Scheduled State Date (10) Scheduled Co	mpletion I	Date (	11)		Name of OSH	A Mon	nitor	100				-	
0 3 0 4 / 1 3 0 Month / Day / Year Month	3 1	5 ay	L	1 3 Year	Enviro Vision	Consu	ltants, Inc.						
[X] Facility Closed/Vacated During Entire Perio of Abatement [] Abatement Performed Outside of Normal Face of Work (Check all that apply)		irs			20-21 Wagarav City, State, Zip Fairlawn NJ 0	Code 07410							
$[X] \ge 3 \text{ sf or } \ge 3 \text{ if}$	[X]		ovation olition		i	[ ] [ ] [X]	Full Containment Mini-Enclosure Glovebag Proces		tive Pressure				
[ ] ≥ 160 sf or ≥ 260 lf	_					[X]	Non-Exemted (*	) and Non-F	riable Proced	-			
Location of Asbestos - Containing Material (ACM) TO BE ABATED	Lo Noi U Sol	Is cation rmally Used lely by			Description of Asbestos-Contai Material (AC (i.e., thermal sys insulation, surface	M) stems	/AT	(S	nount pecify or LF)	R E M O V	R E P	E N C A P	E N C L
in Facility (13)	Cus	stodial ff (12)			or other miscel					A	I	U	U
of Plane Patrones	Yes	No	N/A	1						L	R	L E	R E
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R. Contracting & Environmental Consulting, Inc.		17819					G.R.O.W	.s	45 300				
ity, State				Disposal	Date		City, Stat		1,00				5
ayne NJ 07470 completed by (Print or Type) Title			7	Sig	nature	2	Morrisvil	le PA	Date		1		E
rry Bijelonic Project Manag	er									2/20	/2013		
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	Date of Notification (1)		. <u></u>				2017-		4. 2	M.
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		ency.(including		10	in Hil	60 /	V		CEG.	W.
	Q DOH justific	ation)	Na	me of Con	tact		Telephone Nu	mber	-	
	D DCA D Cancel	aeon		\	<u> </u>					
	•			acility in	FORMATION -	£				
	Name of Facility Where Abatement is	a Taking Place (3)				Type of Fadil	ty (4)			******
	+ Kezident			140		Dan-100		*		
ı	Street Address	<del></del>	-	***************************************		☐ School (K-	12) 18 (Other than K-1)	21		
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ŀ	City (5)	2,				homes, etc	:)			
ı	T D: -					Square Feet	# of Floors	Bldg.	Age	
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1	Name of Monitoring Firm Hired by Bu	77 6	ASCM No.	-	T					
1	(8)	Manual Assumet	Macini No.		Name of Abater	nent Contractor (	9)			
F	Street Address				An. to	JOY. 11	6			
ŀ	DE301 (120:000	2			Street Address		1		-	
1	City, State, Zip Code				12127	oud not	on Ave			٠.,
1	ony, dam, zip dada		2		City, State, Zip C		·			
H	Project Manager for Monitoring Firm				Delan	co: M	J . 08	307	5	
1	to be a morning to the morning that	161	ephone No	)_	Telephone No.		License No.			-
-	Start Date (10)	ل_نيني			856-829		0/070	>		
1	7 /4-17	heduled Completio	n Date (11	): ··	Name of OSHA N	Monitor		2.	•	
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ŧ	Occupancy Status During Abatoment (				Street Address			<del></del>		
15	☐ Facility Closed/Vacated During Entit	ro Period of Abster	nnent :			· .				
16	Abatement Performed Outside of No Other - Describe:	ormal Facility Hour	5		City, State, Zip Co	ode .		100000000000000000000000000000000000000		
1	Scope of Work (Check all that apply)			i						
	J≥3 sf or ≥ 3 ff	•			' . O Full Co	alisimment with I	legative Pressure			
16	1 ≥ 160 sf or ≥ 260 ff	2		nolition	□ Mini-E	nclosure	edanse Lieszmä			1
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		lale	cation		- Non-L	Countries ( ) Sing !	AOU-LISTIN LACED		l hada	ment
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	Location of Asbestos-Containing Material (ACI		olely by	l	Description of			Г		
	TO BE ABATED .	. I taserittife	enance/ todiał	fi.e.	os Containing Mate thermal systems in	inal (ACM)	Amount	20		F 5
	IN Facility (13)	St	aff?	20 10	surfacing, VAT, o	or	(Specify SF or LF)	19	를.	De lo
•	(12)	[ . (1	2)		other miscellaneou	13)		Removal	Repair	Enclosure
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Gity, State Robinson . 2

VVaste Hauler

Cubic Yards of Waste

Disposal Data

Signature

amo of Registered Landfil

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Jullytow.

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ASS-41

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

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

Date of Notification	on (1)		Name of Bui	lding	Owner/Operator	(2)		7			
2-23-13			Troy Wa			$P_{1}$	SOE/W				
Agencies Notified	Type Notifica	tion	Street Addre	288		20	- 1 × 12/12	in In			
[ ]EPA	[X]Initial	ation	11 WINT	HRO	OP PLACE	2013 FE	B 26 PH 2	4. IS			40
[ ]DEP		acion	City, State,			S + 30 8	- PH 2	2:00			
[X] DOL	[ ]Amended Notifica	tion	MAPLEWO	OD,	NJ,		~3~ . · ·	e.P.			
[X] DOH	f 1mmnamen		Name of Cont	act		Teleph	one Number	·			
[ ]DCA	[ ]EMERGENCY		Troy Wa	116	er				-		
Name of Facility Wh	ere Abstement	ie Wakin		LITY	INFORMATION						
Same as above	9	LO LUNII	ig Flace (3)			Type of Faci					
Street Addres						[ ]Subcha [X]Other	pter 8 (Oth (i.e., priv buildings,	ate & c	comme	r-	
City (5	·	'ounter (	6) Essex	b-		Square Feet	# of Flo	ors B	ldg.	Age	•
		ouncy (	o) Essex		unty Code (7)	2100 Current Use	(Prior if b	eing de	75 moli	shed	d)
Name of Monitoring	Firm hired by F	hilding	ASCM No.		Mana of Nest		ii				
Owner (8) N/A		· annual in	Fiber No.		Name of Abatem AZTECH M						
Street Address					Street Address			44			-
City Chata Gia C					86 Chris		t.			33	
City, State, Zip Cod	ae				Montclai:		042				
Project Manager for	Monitoring Fir	m Tele	ephone Numbe	r	Telephone Numb	er		License		ber	
Occupancy Status Dur [X]Facility Clo	ear Mon ring Abatement sed/Vacated Dur	5-13 th Da	only one)	11)	Name of OSHA M N/A Street Address		3				,
of Abatemen [ ]Abatement Pe Hours - Desc [ ]other - Desc	rformed Outside	Descrip	t»	r	City, State, Z	ip Code					
Scope of Work (Check	all that apply	γ)			Ш	**	2				
[X]>3 sf or [ ]>160 sf o	≥3 lf or ≥260 lf		Renovation Demolition		[ ]Mini-E	ontainment winclosure ag Procedure iable Procedu	156	Pressu	ıre		
Location	of	Los	Is cation				T	Aba	teme	nt I	Гуре
Asbestos-Con Material TO BE AB In Facil (13)	taining (ACM) ATED	So By ter Cus	rmally Used blely Main- nance/ todial ff (12) No N/A	in	Description Asbestos-Conta Material (A (i.e., thermal: sulation, surfac or other miscell	nining CM) systems sing, VAT,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	ENCAPSUL	ENCLOSUR
Basement			х	Pi	pe insulat	ion	115	X			E
ame of Registered W	aste Hauler	M·ID	EP Waste	Cub	oic Yards		L				
AZTECH MANAGE		Hau	ler ID No.	1		Name of Regi G.R.O.W.		till			
ity, State			N 1921	Dis	posal Date	City, State	- 1			-	
Montclair, NJ	07042					Morrisvi	lle, ÆA	1906	7		
ompleted By (Print	or Type) Title	1			Signature	1	7/_				
Constantine Vi		siden	t		1 1011	Mankey	1/2-	Date 2-23-	13		
		-			1000	Hombron	how				

VOCATURO

MO 20439771647

Date of Notification (1) 2/20/13		+	T		f Building Ow na Builders	ner/Operator	(2)		-	- 20/j	FEB	20	9 1	40
Process .	ype Notification			Street A	ddress ommercial	Avenue					77.0	<u> </u>	PH	2.
× EPA × DEP × DOL	Amended Amendment		_		ite, Zip Code des Park, l			2 0		- Sect	10/		Z A	es.
Ď DOH DCA	<ul><li>Emergency justification)</li><li>Cancellatior</li></ul>		- 1	Name of	Contact Omana				Tel	ephone Nu	mber	157	<del>()</del> '	<del>- 1,</del>
N				FACI	LITY INFOR	MATION								
Name of Facility Where Aba House	itement is Takir	ig Place (3)	9					of Facility (4	500					
Street Address 2423 1st Street								School (K-12 Subchapter & Other (i.e. pr	(Oth			dings,	home	es,
City (5) Fort lee								etc.) re Feet	# o	f Floors	0.000	Bldg. A	\ge	
County (6) Bergen		477			Code (7) USE ONLY)		Curre	nt Use (Prio	r if bei	ng demolis	ned)			
Name of Monitoring Firm His N/A	red by Building	Owner (8)		ASCN	No.			tement Cont ement, Inc		(9)	9.			
Street Address						100000000000000000000000000000000000000	Addres	s ren Aven	ue					
City, State, Zip Code						City, S	tate, Zi	p Code J 07512					20	
Project Manager for Monitor	ing Firm		T	Telepho	ne No.	Teleph	one No 345-8	).		License N #00675	0.			
Start Date (10) 3/07/13		Scheduled 3/08/13	Com	npletion I	Date (11)			A Monitor ement, Inc	 ;.					
Occupancy Status During Al	batement (Chec	k Only One	)			Street	Addres	s		1			-	
Facility Closed/Vacated	d During Entire	Period of Ab	oatem	ent		11 R	oseng	ren AVen	ue					
Abatement Performed  Other – Describe: Occ	upied	nal Facility I	Hours					p Code J 07512						
Scope of Work (Check All Ti	hat Apply)				- 7		-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova moliti			×	Min Glo	Containmer i-Enclosure vebag Proce	edure					
		Τ					J Nor	n-Exempted	(*) an	d Non-Friat	le Pro		e ement	10
Location of			ocati ormal			Description							pe	2.1
Asbestos-Containing Ma	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility  NUsed Mai Custo					Description Containing Marmal systems surfacing, VA ther miscellan	laterial s insula T, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A									te	
basement			X			oipe insula	tion		19	90 LF	Х			
									, Jacq					
Name of Registered Waste I	Hauler		52.814	JDEP W	200	ubic Yards		Name of R	egiste	red Landfill		-		
D&S Abatement, Inc.				auler ID 20996		f Waste BD				gement o				
City, State Totowa, NJ				- 31	D	isposal Date		City, State Tullytown		\				
Completed by		Title	2017/2017			Signature		7/	`	Da	ite			-
Deanna Brkusanin		Projec	t Ma	nager		1/1/00	lelgi)	Selle	M	2/	20/13	3		

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Date of Notification (1) 2/20/13			- 1		Building eth She	Owner/Opera	ator (	(2)		28/3 <sub>FEB</sub>			64	
Agencies Notified	Type Notification  X Initial			Street A 3 Colg	<sup>ddress</sup> ate Roa	ıd			o a		6	د الم		( )
EPA  DEP  DOL	Amended Amendment #				ite, Zip Co wood, N	ode IJ 07040		<del></del>		VICEN,		<del>' ج:</del>	(Ps)	
DOH DCA	Emergency (ir justification) Cancellation	ncluding			Contact eth She	il			Te	lephone Nur	nber	10/		
Name of Facility Whose A	hatament in Takina	Diese (2)		FACI	LITY INFO	ORMATION		T						
Name of Facility Where A House	Abatement is Taking	Place (3)						Type of Facility (						
Street Address			0111d-114	-					8 (Oth	ner than K-12			107	
3 Colgate Road								Other (i.e. p etc.)	rivate	& commerci	al build	dings,	home	es,
City (5)	£ 8:	1,21						Square Feet	100000000	of Floors		ldg. A	ge	
Maplewood County (6)				County (	2 ada (7)			N/A Current Use (Prid	N/			I/A		
Essex				(STATE	JSE ONLY	)	.	House	or ii be	ing demolisi	iea)			
Name of Monitoring Firm N/A	Hired by Building O	wner (8)		ASCN	1 No.			of Abatement Cor Abatement, In		r (9)				
Street Address			-	L.,				Address	G.				J	
Oli doc / Addi dod								sengren Aver	nue					
City, State, Zip Code								ate, Zip Code va, NJ 07512						
Project Manager for Mon	itoring Firm			Telepho	ne No.	00000	2.03	one No. 345-8685		License N #00675	0.			
Start Date (10) 3/14/13		Schedule 3/15/13		npletion	Date (11)			of OSHA Monitor Abatement, In	c.					
Occupancy Status During	Abatement (Check	Only One	e)		-	1.000		Address				-		
Facility Closed/Vaca Abatement Performe	ated During Entire Pe					h = 10000		sengren Aver	nue					
Other - Describe:		ii raciiity	nouis			4	C. C.	ate, Zip Code va, NJ 07512						
Scope of Work (Check A	Il That Apply)	W-1-1-1			-							-	_	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit	CO.			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure	•			•	
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Location	of	N	ormal	ly		Descrip	otion	of				Ту	ре	
Asbestos-Containing TO BE ABA		Mair	l Sole	nce/		tos Containir thermal syst		aterial (ACM)		Amount Specify	72	222	m	m m
In Facili		Custo	odial 9 (12)	Staff?	(1.0.	surfacing,	, VAT	Γ, or		F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		Vos	No	N/A		Other inisce	enane	eous)			Va Va	=	ulate	ure
utility ro	om	Yes	No X	N/A		floor tile 8	& m:	astic	1	40 SF	X			
dunity 10						11001 1110 1	<u>α 1111</u>	uotio		40 01	A		-	
								-46						
Name of Registered Was	te Hauler		1	IJDEP W	(C) (C) (C) (C)	Cubic Yard	ds	Name of	Regist	ered Landfill				
D&S Abatement, Inc				lauler ID 20996	No.	of Waste		Waste I	Mana	gement o	f PA			
City, State Totowa, NJ						Disposal D	1	City, State		A	1 1 1 2 2 2 2			
Completed by		Title		92*		Signa	a re		1	Da				
Deanna Brkusanin	- N	Projec	ct Ma	anager	¥11-1-1		110	Muy Du	we	'ee 21	20/13	3		

CK 835701	N		ICATION	ate of New Je OF ASBEST to NJAC 8:60	OS ABATE			A3)						
Date of Notification (1) 2/20/13	7 '	Name of Building Owner/Operator (2) Don Boyle  Street Address 13 Hoffman Street  City, State, Zip Code  Maplewood, N.I. 07040												
Agencies Notified Type Notification	-	Street Address 13 Hoffman Street												
EPA : Initial		City, State, Zip Code												
DEP Amended Amendment		_	City, State, Zip Code Maplewood, NJ 07040											
DOH justification)  DCA Cancellation	including		Name of Contact Don Boyle											
DCA Cancellation		_		LITY INFORM	ATION		P.							
Name of Facility Where Abatement is Taking House	Place (3	i)		1.00		Type of Facility	(4)							
Street Address 13 Hoffman Street	2 ,						er 8 (Othe	er than K-12 & commercia		dings,	home	es,		
City (5) Maplewood				: 1		Square Feet N/A	uare Feet # of Floors			Bldg. Age N/A				
County (6) Essex			County C	Code (7) USE ONLY)		Current Use (Pi House	rior if bei	ng demolish	ed)	7				
Name of Monitoring Firm Hired by Building (N/A	Owner (8)		ASCN	I No.		of Abatement Co Abatement, I		(9)						
Street Address						eet Address Rosengren Avenue								
City, State, Zip Code					City,	State, Zip Code	de once.							
Project Manager for Monitoring Firm		T	Telephor	ne No.	Telep	phone No. License No. 3-345-8685 #00675								
Start Date (10) 3/05/13	Schedule 3/06/13		mpletion I	Date (11)		ne of OSHA Monitor &S Abatement, Inc.								
Occupancy Status During Abatement (Chec	1 2		**************************************			t Address Rosengren AV	enue	7						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Occupied					City,	State, Zip Code owa, NJ 07512								
Scope of Work (Check All That Apply)						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov				Full Containn  Mini-Enclosu Glovebag Pro  Non-Exempto	re ocedure	J			е	vw: 525 800.0		
		Loca						Abatement Type						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Norr Used S Mainte Custodi (1			ely by ance/ Staff?	(i.e. the		Material (ACM) ns insulation, AT, or	(5	Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure		
	Yes	No	N/A								TO .			
basement		Х		ı	oipe insul		-	1 LF	Х					
boiler room		Х			floor til	е	2	0 SF	Х	X				
r, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,														
Name of Registered Waste Hauler		1.59	NJDEP W		ubic Yards	Name o	fRegiste	ered Landfill		7		1000		
D&S Abatement, Inc.			Hauler ID ‡20996		f Waste BD			gement of	PA	1.				
City, State Totowa, NJ		CT.			isposal Dat BD		ate own, PA	1						
Completed by Deanna Brkusanin Project Manager Signature								Da 2/:	te 20/13	3				

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Date of Notification (1)					The second second	Name of Building Owner/Operator (2) HESS CORPORATION Street Address 1 HESS PLAZA City, State, Zip Code											
2 / 21 /13					Stree	Street Address											
Agencies Notified Typ	e Notification			7 7 10	1 HE	1 HESS PLAZA											
EPA	Initial Notifi					City, State, Zip Code WOODBRIDGE, NEW JERSEY 07095  Name of Contact  I Telephone Number  (1)											
DEP X	Amended N Cancellatio		ation	#1	woo	WOODBRIDGE, NEW JERSEY 07095											
X DOL	On Hold	n			Nam	e of C	Contact		Telephone Nur	aber /	100	173	1	68			
DCA	EMERGEN	CYN			P. C.		RULO		; \		.0		Z.				
				-	FACIL	LITYI	NFORMAT	ION		7	-	177	10	01			
Name of Facility Where Abater	ment is Takir	ng Pla	ace (3	3)			2 1 5 4 5	Type of Facility					· ·	•			
HESS PLAZA									(K-12) pter 8 (Other than K-12) e. private & commcl. bldgs., homes, etc.)								
Street Address			-					Square Feet	# of Floors	T Diag	15., 110		dg. Ag	e · ·			
1 HESS PLAZA								187,000	13			1,000,00	42	A see a			
City (5)	County (6)	14.4		de .	Cour	nty Co	ode (7)	Current Use (Pr	ior if being demo	lished	)		3.7	devices a state			
WOODBRIDGE	MIDDLESE				(STATI		ONLY)	COMMERCIAL	27-55 1-2 E-1 Park (1995)								
Name of Monitoring Firm Hire	d by Building	g Ow	ner (8	3)		A.	SCM No.		ment Contracto		011						
HILLMANN ENVIRONMENTAL Street Address		-	-				17	Street Address	MENTAL CORP	JRATI	UN	-					
1600 ROUTE 22								313 SPOOK RO	OCK ROAD		- 24						
City, State, Zip Code				-				City, State, Zip	Code	11	176						
	NION, NEW	JERS						SUFFERN, NEV						-			
Project Manager for Monitoring I	Firm				Number	191		Telephone Num	1	ense N	umbe	r					
MIKE NEHLSEN				377-56				845-369-7500	460	Section 2	-	14					
Expected State Date (10) 1 / 12 /	/13	Sche			tion Date (		/13	Name of OSHA QUALITY ENVI									
	/13 Year	Mo	12 nth	1	30 Day		Year	QUALITY ENVI	NOMINICIAL								
Occupancy Status During Abate	ment (Check	only	one)			-		Street Address	<del>200-00-00</del>		HELL CA						
Facility Closed/Vaca								1376 ROUTE 9	W								
Abatement Performe						cribe:		City State 7in	Codo		-	100					
X Other - Describe: addittional hours:	Monday - F 02/23/13 7a				am			City, State, Zip	WAPPINGER	S FAI	IS N	Y 125	90				
Scope of Work (Check all that a		aiii-J.	oopiii			X	Full Conta	। ainment with Neg		01712	20,11						
Demolition		Reno	vation	1			Mini-Encl										
>3SF OR LF		100.00						Procedure									
X  >160 SF OR	0.7.1							ole Procedure	1				100				
Location of			Locat				iption of As		Amount	77			ment	Type			
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TO BE ABATED			100	todial	insulation, surfac				Ö	À.	AP	6					
in Facility (13)			taff (1				ner miscella		SF or LF)	A	1~	ENCAPSUL	ENCLOSUR				
		Yes	No	N/A		3 1	12 14 10	at a series and a series		-	-		70				
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4th FLOOR -ENTIRE		-	_	x	JOINT CO	-			12.180 SF	X	+-	+	+				
4th FLOOR -ENTIRE				x	COVE BA				495 SF	X		1	1				
5TH FLOOR -ENTIRE				Х	VAT & MA	STIC			8,005 SF	Х			1				
5TH FLOOR -ENTIRE	41.			X	TAR				25 SF 75 LF	X	-		-	47 1 4 7			
5TH FLOOR -ENTIRE				X	PIPE INSU				X	-	-	-					
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JIH FLOOR -ENTIRE		-		^	OVE BA	JL IVI	70110		1435 51	1	1	1	1				
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6TH FLOOR-ENTIRE				Х	JOINT CO		-		12,180 SF	X			1				
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DOWN TRANSPORT, LLC		- 1.5 A	er ID I 26981			200		OKOWS LA	7					F-91 _ 40 _ 11			
City, State					Disposal D	Date	-	City, Syne			*********						
KEARNEY, NEW JERSEY	-				1/15/13-12			MODRISVILLE		251.0	1						
Completed by (Print or Type) BENJAMIN SANCHEZ	Title	CTO	3 OE	OPE	RATIONS	Sign	ature	11/5	Dat	e /	1	21	11	13			
DEINOMININ SANCHEZ	DIKE	UIU	VOF	OFER	MILIONS	1		1/1/		V	manufaction in		_	1			

		Pursuant to NJAC 8:60-7 an Name of Building O	wner/Operator (2	1 3/3/			%						
ate of Notification (1)			HESS CORPORATION Street Arithmese										
12 / 27 /12 gencies Notified Type Notification			Street Address  1 HESS PLAZA  City, State, Zip Code										
EPA   x Initial Notif		City, State, Zip Code											
DEP Amended X DOL Cancellation	Notification	WOODBRIDGE, NE	WOODBRIDGE, NEW JERSEY 07095										
X DOH On Hold		Name of Contact	<u>-</u>	Telephone Nun	ber	7.1							
DCA EMERGE	ICY N	DAVID CERULO			3	9 13	7						
me of Facility Where Abatement is Taki	ng Place (3)	FACILITY INFORMAT	Type of Facility	(4)			`						
	de la la		School (K		( 10)								
SS PLAZA				er 8 (Other than I private & commo		s., hom	es, etc.	)					
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ESS PLAZA v (5) County (6	)	County Code (7)		ior if being demo	lished	)	42		-				
ODBRIDGE MIDDLESI	X	(STATE USE ONLY)	COMMERCIAL	OFFICE									
me of Monitoring Firm Hired by Buildir LMANN ENVIRONMENTAL	g Owner (8)	ASCM No.		ment Contracto MENTAL CORPO		ON							
eet Address	1200 1000		Street Address						-				
00 ROUTE 22 y, State, Zip Code			City, State, Zip			-							
UNION, NEW	JERSEY 07083		SUFFERN, NE	W YORK 10901									
oject Manager for Monitoring Firm KE NEHLSEN	Telephon 908-377-5	And the Control of th	Telephone Num 845-369-7500	iber Lice	nse N	umber							
pected State Date (10)		etion Date (11)	Name of OSHA	Monitor				-					
1 / 12 / /13 Aonth Day Year	12 / Month	30 /13 Day Year	QUALITY ENVI	RONMENTAL									
cupancy Status During Abatement (Check	only one)		Street Address										
Facility Closed/Vacated During E			1376 ROUTE 9	W									
Abatement Performed Outside of	Normal Facility	Hours - Describe:	1										
	1/12/13 7am-3:3	0 pm	City, State, Zip		CEAL	C NV	12500						
X Other - Describe: Saturday, Monday -		0 pm 0 am	City, State, Zip	WAPPINGER	S FAL	_S, NY	12590						
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X Other - Describe: Saturday, Monday - Ope of Work (Check all that apply)  Demolition - SSF OR LF: X > 160 SF OR  Location of Asbestos-containing Material (ACM)  TO BE ABATED in Facility (13)  IFLOOR -ENTIRE  IFLOOR -ENTIRE  IFLOOR -ENTIRE  IFLOOR -ENTIRE  H FLOOR -ENTIRE	Interest   Interest	D pm D am  X Full Cont Mini-Encl Glovebag Non-Frial Description of A Containing Mater (ie. Thermal si insulation, surfac or other miscell  VAT & MASTIC TAR PIPE INSULATION JOINT COMPOUND COVE BASE MASTIC  VAT & MASTIC TAR PIPE INSULATION JOINT COMPOUND COVE BASE MASTIC  VAT & MASTIC TAR PIPE INSULATION JOINT COMPOUND COVE BASE MASTIC  VAT & MASTIC TAR PIPE INSULATION JOINT COMPOUND  VAT & MASTIC TAR PIPE INSULATION JOINT COMPOUND	ainment with Negrico, procedure sbestos-ial (ACM) ystems sing, VAT,	## Amount (Specify SF or LF)  ## 8,005 SF  ## 12,180 SF  ## 495 SF  ## 12,180 SF	REMOVAL X X X X X X X X X X X X X X X X X X X	At	mateme INCAPPAGE		*				
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Other - Describe: Saturday, Monday - Ope of Work (Check all that apply)  Demolition  > 3SF OR LF.  X > 160 SF OR  Location of Asbestos-containing Material (ACM)  TO BE ABATED in Facility (13)  OFLOOR -ENTIRE	I/12/13 7am-3:3 Friday 6pm - 2:3 Renovation  Is Location normally used solely by Maint/Custodia Staff (12) Yes No N/A  X  X  X  X  X  X  X  X  X  X  X  X  X	D pm D am  X Full Cont Mini-Enci Glovebag Non-Frial Description of A Containing Mater (ie. Thermal si insulation, surfac or other miscell  VAT & MASTIC TAR PIPE INSULATION JOINT COMPOUND COVE BASE MASTIC  VAT & MASTIC TAR PIPE INSULATION JOINT COMPOUND COVE BASE MASTIC  VAT & MASTIC TAR PIPE INSULATION JOINT COMPOUND COVE BASE MASTIC  VAT & MASTIC TAR PIPE INSULATION JOINT COMPOUND COVE BASE MASTIC  COVE BASE MASTIC  TAR PIPE INSULATION JOINT COMPOUND COVE BASE MASTIC	ainment with Negrico, procedure sbestos-ial (ACM) ystems sing, VAT,	## Amount (Specify SF or LF)  8,005 SF 25 SF 75 LF 12,180 SF 495 SF	REMOVAL X X X X X X X X X X X X X X X X X X X	At	mateme INCAPPAGE						

Date of Notification (1)	Name of Building Owner/Operator (2)																	
Febru	J	Jacobus Pharmaceutical Co.										<u> </u>						
Agencies Notified	- 5	Street Address																
⊠ EPA	Initial .		C	County Road 683								4	_					
□ DEP.	Amended	4		City, Stat	e, Zip Co	de			12	1155		(	$\sigma_{G}$	C)				
DOL	Amendment #		— P	lainsbo	ro Tow	nship, NJ	Carried Co.											
<b>⋈</b> DOH	justification)	Cidding	F	Name of	Contact				Tele	ephoneNu	noneNumber							
DCA	Cancellation		T	om Sa														
				FACIL	ITY INFO	ORMATION	-							-				
Name of Facility Where		Place (3	)				Тур	e of Facility (4	)									
Jacobus Pharmaceu	itical Co.				1 1		$-\Box$	School (K-12			10)							
Street Address								Subchapter 8 Other (i.e. pr				bliu	inas.	home	es.			
County Road 683		- 1					$\boxtimes$	etc.)				. di						
City (5)							Squ	are Feet	# of	Floors		BI	dg. A	ge	8			
Plainsboro Township	o, NJ				1													
County (6)	E-1 - 19178		100	County C	ode (7) SE ONLY)		Cun	ent Use (Prio	r if bei	ng demolis	shed)							
Middlesex				(STATE O	SE ONLI)				201 2000 1000	rmaceut	ical			13.06				
Name of Monitoring Fire	n Hired by Building O	wner (8)		ASCM	No.	Nan	ne of Ab	atement Cont	ractor	(9)					: "I			
Sabre Health			t 650			The	MACK	Group, LL	.C									
Street Address						Stre	et Addr	ess										
1015 Zucksville Roa	nd e					1500	) King	s HWY N, S	STE 2	209	cya i				2 1			
City, State, Zip Code		F. T. T. S. C. T. S.				City	, State,	Zip Code										
Easton, PA 18040						Che	Cherry Hill, NJ 08034											
Project Manager for Mo	nitoring Firm			Telephon	Telephone No. License No.													
Brent Altemose, CIF	I, CSP		. 8	66.734	.0127		(973) 759 - 5000 00781											
Start Date (10)		Schedule	ed Con	pletion [	Date (11)	Nan	ame of OSHA Monitor											
2/27/1	3			2/27/14	1	The	MACK Group, LLC.											
Occupancy Status Durin	ng Abatement (Check	Only Or	ne)			Stre	Street Address											
Facility Closed/Vac	cated During Entire Pe	eriod of	Abaten	nent		1500	) King	s HWY N, S	STE 2	209								
Abatement Perform	ned Outside of Norma 2nd shift	I Facility	/ Hours	•		City	, State,	Zip Code										
Other - Describe:			40.00			Che	rry Hill	, NJ 08034										
Scope of Work (Check /	All That Apply)						-											
≥3 sf or ≥3 lf		The same of the sa	Renova					ull Containme	nt with	Negative	Pres	sur	е		- 2			
≥160 sf or ≥260 lf			Demolit	ion				lini-Enclosure llovebag Proc	adura									
							Non-Exempted (*) and Non-Friable Procedure											
		le	Locati	ion									Abatement					
Locatio	on of	0.00	Normal	20		Descripti	ion of					Туре						
Asbestos-Containing		100000000000000000000000000000000000000	d Sole		Asbes	tos Containing		al (ACM)	Amount					ш	_			
TO BE A	Contraction of the Contraction o	(2,25,25,25)	intena todial S		(i.e.	thermal system			370	Specify	1	0	IJ	nca	Enc			
In Fac			(12)	Child Colon pages 1 The last		surfacing, other miscel			SF	or LF)	C	3	Repair	Encapsulate	Enclosure			
X.7				1		0.0					2	3	₹	late	е			
		Yes	No	N/A								,						
Pentho	ouse		X			8" pipe ins	sulatio	n		4lft								
Corrie	dor		X			4" pipe ins	sulatio	n		4lf		<			254			
COITI	401		/	75 6.	-	r pipe iii	Juluuo				_	`			1			
			-	-							-		+-		-			
Name of Registered Wa	aste Hauler		100	IJ DEP W lauler ID		Cubic Yards of Waste												
Freehold / Newark	Carting / Rovic			450		0.1												
City, State	Carting / Novic	7,1,2		730	10	Disposal Da												
Freehold / Newark	/ Riverdale N.I	1. P. 1.				2/27/												
Completed by	, Attordato, 140	Title					Signature Date					,,,,,	-					
Mike Cooper	76	Presid	dent			Ma	2/22/13											
		1	20-50-00 Tr 11					4	****	-								

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

		100				7				12 4 13							
Date of Notification (1)		Name of Building Owner/Operator (2)  Jacobus Pharmaceutical Co.															
February Notified		Jacobus Pharmaceutical Co.															
Agencies Notified		Jacobus Pharmaceutical Co.  Street Address  County Road 683  City, State, Zip Code															
EPA DEP	Initial Amended	3333 (1)	City, Sta		Y34Y7	4			70	_	t						
DOL	Amendment			1000 0 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1		vnship, NJ			(	6/10	0		6.8				
DOH.	Emergency (i	including		Name of	MANAGEMENT AND ADDRESS OF THE PARTY OF THE P			at the	Te	lephoneNur	nber	i Pro		-			
DCA	Cancellation	19	- "	Name of Contact  Tom Santoli  TelephoneNumber													
			FACILITY INFORMATION														
Name of Facility Where	Abatement is Taking	Place (	3)				T	Type of Facility (	4)		100						
Jacobus Pharmace	utical Co.							School (K-1	2)								
Street Address								Subchapter	8 (Ot	ner than K-12							
County Road 683									rivate	& commerci	al buil	dings	, home	es,			
City (5)								etc.) Square Feet	# /	of Floors	TE	Bldg.	Ane				
1 1 2 2 2 2 2 2 2 4 1 4 1 4 1 4 1 4 1 4	in All							Oquare reet	" '	71 1 10013	١,	nug. /	,gc				
Plainsboro Townshi	p, NJ		-	County C	20do (7)		-	Compant Up a /Dri	- if h	laa damalial				-			
			, 8	(STATE U		)	400	Current Use (Pri									
Middlesex	- History		- 44	1 40014				(1)		armaceutio	al	-					
Name of Monitoring Fir	m Hired by Building (	Owner (8)	)	ASCM	No.			of Abatement Cor		r (9)							
Sabre Health			81 H	1.	715			ACK Group, L	LC			-51					
Street Address								Address	+1:	****							
1015 Zucksville Roa	ad					1000000	1500 Kings HWY N, STE 209										
City, State, Zip Code						Cit	ty, St	tate, Zip Code									
Easton, PA 18040		306				Ch	Cherry Hill, NJ 08034										
Project Manager for Mo	onitoring Firm			Telephor	ne No.	Те	Telephone No. License No.										
Brent Altemose, CII	H, CSP			866.734	.0127	(97	(973) 759 - 5000 00781										
Start Date (10)		Schedul	ed Co	mpletion [	Date (11)	Na	Name of OSHA Monitor										
2/23/	13			2/23/14	1	The	е Мл	MACK Group, LLC.									
Occupancy Status Duri	ng Abatement (Check	k Only O	ne)			Sti	Street Address										
Facility Closed/Va	cated During Entire F	Period of	Abate	ment		150	1500 Kings HWY N, STE 209 City, State, Zip Code										
Abatement Perform	med Outside of Norm																
Other - Describe:			_			— Ch	errv	ry Hill, NJ 08034									
Scope of Work (Check	All That Apply)				-			,		5							
		$\boxtimes$	Renov	ation			Full Containment with Negative Pressure										
≥160 sf or ≥260 lf		- Inches	Demol				₽	Mini-Enclosure		ii regulive r	10000						
		_					K	Glovebag Prod	edure	l Mar Frieble	D						
						Non-Exempted	(") and	Non-Friable	0.000	Abatement							
		01 SE2	s Loca	27522300							Abatement						
Location			Norma	ely by		Descrip					<b>—</b>						
Asbestos-Containin TO BE Al		2000	inten				ontaining Material (ACM) nal systems insulation, rfacing, VAT, or			Amount Specify	77		Ē	m			
In Fac		Cus	100000000000000000000000000000000000000	Staff?	(1.6					F or LF)	Remova	Re	сар	Enclosure			
(13	)		(12)	)		other misce					10/	Repair	Encapsulate	Sur			
A 15.14		V		1110							<u>m</u>	1	te	Ф			
		Yes	No	N/A							\/	+					
Pentho	ouse			<b>,</b>	100	8" pipe ir	nsula	ation	1.5	4lft		-	-				
Corri	dor	1	X		ile ren	4" pipe ir	nsula	ation	0.3	8lf	X	_					
	5 5 m - 5 5 5			20 L = 1													
N				NUDERW		T C Lie Ve			D		-		L				
Name of Registered W	aste mauler			NJ DEP W Hauler ID I		Cubic Yard of Waste	us	Name of	of Registered Landfill								
Freehold / Newark	Carting / Rovic			450	21 1 1 1 1 1 1 1 1 1 1	- According to the Control of the Co	Cumberland Co./ BFI / GROWS / TRRF										
City, State				.50		Disposal D											
Freehold / Newark	/ Riverdale N.I	***************************************		The let		2/23											
Completed by		Title	261 P	Sign aturi													
Mike Cooper President					The	2/14/13											
Cooper	107.00	1. 10010						-		- 41							