CK 5338

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		FEB	2	7	2017	
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Date of Notification (1) 2/21/17		(Cyril Ll		Owner/C	perator	(2)	V V	A-6	SBEST	00.7		NITS		
Agencies Notified Type Notification			treet Ac	ldress tlantic A	ve				A	LI	CEN	SI	VG.		α
EPA Initial Amended Amendment #				te, Zip Coo)1									
Emergency (in justification) DCA Cancellation	cluding	1 1 1 1 1	lame of rancir	Contact					Tele	ephone N	lum <u>be</u>	1			
Name of Facility Where Abatement is Taking	Diaco (3)		FACIL	ITY INFO	RMATI	ON	Tyne	of Facility (4)				-			
316 N New York Ave, Atlantic City	riace (3)						Emmont	School (K-12)							
Street Address 316 N New York Ave							×	Subchapter 8 Other (i.e. pri				uildi	ngs,	home	s,
City (5) Atlantic City								etc.) re Feet	# of	Floors		Blo	dg. Aq	ge	
County (6) Atlantic				Code (7) ISE ONLY)			Curre	nt Use (Prior //E	if beir	ng demol	lished)				
Name of Monitoring Firm Hired by Building On	wner (8)	-	ASCM	No.				tement Contr					-		
Street Address						Street 6 WH		SS DOVE CO	URT						
City, State, Zip Code						100000000000000000000000000000000000000		ip Code OD, NJ 08	701						
Project Manager for Monitoring Firm		Т	elephor	ne No.		Teleph		0.		License 1200	e No.				
	Scheduled 3/6/17	cheduled Completion Date (11) /6/17						HA Monitor PROFES	SIO	NALS					
Occupancy Status During Abatement (Check	Only One)					Street			LIDT						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	eriod of Aba Il Facility H	ateme ours	ent			City, S	tate, Z	DOVE CO	Sensoro			-			
Other – Describe:						LAKE	EWO	OD, NJ 08	701						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-		ovation					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
	le Le	catio	n l		Non-Exempted (*) and Non-Friable Procedure Abate						ment				
Location of Asbestos-Containing Material (ACM)	Nor	mally	/	Ashest		scription		L(ACM)	Α	mount	-		Ту		
TO BE ABATED In Facility (13)	Custodial Staff? (i.e. therm:					l systems cing, VA miscellar	s insula T, or	ation,		Specify or LF)		Removal	Repair	Encapsulate	Enclosure
80 100 N	Yes	No	N/A							- la u				te	CD
INTERIOR					Joint	Comp	ound		1	00SF	X	_			
							-								
Name of Registered Waste Hauler NEWARK CARTING		Ha	JDEP Wauler ID 509		Cubic of Wa	Yards iste		Name of R	egiste	ered Land	dfill				
City, State NEWARK, NJ		34				sal Date		City, State BETHLE	ity, State BETHLEHEM PA						
Completed by Title Signature JOSEPH PERLSTEIN OWNER						Date									

K 53075281-4

Type Notification

Initial

Name of Facility Where Abatement is Taking Place (3)

Name of Monitoring Firm Hired by Building Owner (8)

Occupancy Status During Abatement (Check Only One)

Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: occupied

Amended

Amendment #

justification)

Cancellation

Emergency (including

Date of Notification (1)

02/21/2017

EPA

DEP

DOL

DOH

DCA

House Street Address

City (5) Roseland County (6)

Eseex

Street Address

Start Date (10)

03/03/2017

≥3 sf or ≥3 lf

≥160 sf or ≥260 lf

City, State, Zip Code

Project Manager for Monitoring Firm

Scope of Work (Check All That Apply)

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Agencies Notified

State of New Jers NOTIFICATION OF ASBESTOS (Pursuant to NJAC 8:60 a

Scheduled Completion Date (11)

Renovation

Demolition

Is Location

03/04/2017

CATION OF A	New Jersey SBESTOS ABA AC 8:60 and 12:			EC	E		√ P	rint
Name of Buildi Carlo Morre	ng Owner/Opera	itor (2)		FEB	2	7_2()17_	
Street Address			1	ASBESTO				
City State 7in	0-1-		<u></u>	LIC	CENS	SING		
City, State, Zip Roseland, N								
Name of Conta Carlo Morre	173		Те	lephone Nu	ımber			
FACILITY IN	FORMATION							
,			-12) er 8 (Oth	er than K-1 & commerc		ildings	, hom	nes,
		Square Feet N/A	N/		1	Bldg. / N/A	Age	
County Code (7 STATE USE ON		Current Use (P House	rior if be	ing demolis	hed)			
ASCM No.		ne of Abatement Co		(9)				
		et Address Rosengren Ave	enue					
	City	, State, Zip Code towa, NJ 07512			- 10 PE 10 1			
elephone No.	1/2/1/2	phone No. 3-345-8685		License N 01311	10.			
pletion Date (1		ne of OSHA Monito S Abatement, I		V				
ent		et Address Rosengren Ave	enue					
	201	State, Zip Code towa, NJ 07512						
on on	·	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	re ocedure				e	
n							emen /pe	t
by Asbe	Description	on of Material (ACM)	Δ	mount		1	İ	
	e. thermal system surfacing, \ other miscell	ms insulation, /AT, or	(8	pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	ipe & Fitting	Insulation	11	0 LF	X		100-50	
	.pc a ritting				Α.			
DEP Waste uler ID No.	Cubic Yards of Waste	la l		red Landfill	E D A			
996	TBD			ement of	PA			
	Disposal Dat	e City Stat	e					

		-	Description of			Amount		.,,	-	_
Ma	intenar	nce/		stos Containing Mate a. thermal systems ins surfacing, VAT, o	sulation,	Amount (Specify SF or LF)	Remova	Repair	Encapsula	Enclosure
Yes	No	N/A					_		ate	·e
	Х		Pi	ipe & Fitting Insul	ation	110 LF	Х			
						767				
	N.	JDEP W	aste	Cubic Yards	Name of F	Registered Landf	ill			
	1		No.	of Waste TBD	Waste N	Management	of PA			
	X			Disposal Date TBD						
Title Proje	ct Ma	nager		Signature -	FW	1.3	The state of the s	2017		
	Yes Title	Used Sole Maintenar Custodial S (12) Yes No X N H 20	Yes No N/A X NJDEP W Hauler ID I 20996	Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A X P NJDEP Waste Hauler ID No. 20996	Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A X Pipe & Fitting Insul NJDEP Waste Hauler ID No. 20996 Title Description of Asbestos Containing Mate (i.e. thermal systems ins surfacing, VAT, of other miscellaneous) Asbestos Containing Mate (i.e. thermal systems ins surfacing, VAT, of other miscellaneous) Suppose Fitting Insul Cubic Yards of Waste TBD Disposal Date TBD Title Signature	Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A X Pipe & Fitting Insulation NJDEP Waste Hauler ID No. 20996 Title Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) NJDEP Waste Cubic Yards of Waste TBD Disposal Date TBD Signature Signature	Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A X Pipe & Fitting Insulation Asbestos Containing Material (ACM) (Specify SF or LF) Yes No N/A X Pipe & Fitting Insulation NJDEP Waste Hauler ID No. 20996 Disposal Date TBD Title Description of Asbestos Containing Material (ACM) (Specify SF or LF) Amount (Specify SF or LF) Name of Registered Landf Waste Management of City, State Morrisville, PA	Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A X Pipe & Fitting Insulation Amount (Specify SF or LF)	Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A X Pipe & Fitting Insulation Specify SF or LF	Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A X Pipe & Fitting Insulation Asbestos of Waste Hauler ID No. 20996 Title Disposal Date TBD Disposal Date TBD Date Date

1	P	HOTIFICATI	State of New Jers ON OF ASBESTO and to NJAC 8:60 a	SABATI		POE 11/394	₩ 1 S	B. The second se
Date of Notification (1)	17	Name HR	of Building Owne	r/Operato	or (2)	FEB 2 7 2	2017	
Agencies Notified Type Notifical	ion		t Address			SBESTOS CON	ITRO	1 &
☐ EPA X Initial ☐ Amende	4	City	State, Zip Code			LICENSIN		
DOL Amendm	ent#	1	IRRISON.	N	0, 0709	29		
DOH justificati		Name	of Contact			10)el	r
DCA Cancella	tion	1 He	CILITY INFORMA			_		
Name of Facility Where Abatement is Ta	king Place (3)		Participants the strange of the State of the		Type of Facility	/ (4)		
Street Address					School (K	(-12) er 8 (Other than K-	12)	
Ottot Marioso					Subchapt Other (i.e etc.)	. private & commerc	ial bu	ildings
City (5)					Square Feet	# of Floors		Bldg. A
	<u>0. g</u>	7029			2000	12		20
County (6)		(STATE	y Code (7) EUSE ONLY)		Current Use (P	rior if being demolis		
Name of Monitoring Firm Hired by Buildin	ng Owner (8)	ASC	OM No.	Name	of Abatement Co			
Ohr A D Marin				-	SUATECH	100		
Street Address				Street	Address Cox 8	14		
City, State, Zip Code				City, S	itate, Zip Code			
				010		The second secon		57.
Project Manager for Monitoring Firm		Teleph	one No.	Teleph	none No.	License M 500 00 7)
Start Date (10) 3 17	Scheduled	Completion	Date (11)	The second second	of OSHA Monito			-
Occupancy Status During Abatement (Ch	eck Only One)	~ · · ·		THE RESIDENCE OF THE PARTY OF T	VAIECH Address			
Facility Closed/Vacated During Entire	e Period of Ab	ι atement		1 P.O	1. 160x 8	14		
 □ Abatement Performed Outside of No □ Other = Describe; 	rmal Facility H	lours		1 .	tate, Zip Code	NO.05	195	7
Scope of Work (Check All That Apply)				1010	10 (100E	1010 - 02	0.0	-
2 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novation molition		口面面面	Mini-Enclosur Glovebag Pro			
	11.50	cation						Abate: Typ
Location of Asbestos-Containing Material (ACM)		mally Solely by	De: Asbestos Cont	scription of		Amount		
TO BE ABATED		enance/ ial Staff?	(i.e. thermal	systems	insulation,	(Specify	Reg	Re
In Facility (13)	(1	12)		cing, VAT niscellane		SF or LF)	Removal	Repair
	Yes N	lo N/A			and the second		_	
PIPE INSULATION / BASE	TOPM	X	PIPE 1005	OLATIO	No	21104F	X	

ame of Registered Waste Hauler		NJDEP W Hauler ID	No. of Was	- Contract of the Contract of	_	Registered Landfill		
NOVATECH INC		1850	1 Dispos	†	City, State	005,	^	
DID BRIDGE NO.	0885	7	3/3			SXHE PI	H.	
ompleted by	Title			gnature	0-10	7 Date		olia
PARIOS AIMEIDA	1 1765	NOENT		100	1) Blowle	1/	1/2	2/17

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Date of Notification (1) 2/22/17						g Owner/C cavating		r (2)		TUL			C	7 3	Uli	
Agencies Notified X EPA	Type Notification	1			Address Lincoln E	Bouleva	rd				ASSE	STO	S (DON Sint	TFI.) <u>L</u>
DEP X DOL	Amended Amendmer	nt#	C 15 U.S.		tate, Zip C	Code IJ 0884	6		HITELEST CONTRACTOR				-	******		
■ DOH	Emergency justification)		Name	of Contact	t				Tel	ephone	Numb	er			
DCA	Cancellatio	n			Sabatino	O FORMATI	ON				-					
Name of Facility Where	Abatement is Taki	ng Place (3	3)	IAC	VICTOR HAT	ORWIATI	ON	Туре	of Facility	(4)	Windows William					
Street Address									School (K-	12)	41	14.40				
1346 Route 23								×	Subchapte Other (i.e.	private	er than & comm	nercial l	ouil	dings	, hon	ies,
City (5)								Squa	etc.) ire Feet	# 0	f Floors		E	Bldg.	Age	
Wayne County (6)			- 1	County	Code (7)			310		1				3		
Passaic					Code (7) USE ONLY			Curre	ent Use (Pri	or if bei	ng dem	olished)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	M No.				tement Co			LLC				
Street Address								Addres								
City, State, Zip Code				-					83, 4 E G	Sate D	rive					
									l, NJ 074	118						
Project Manager for Moni	oject Manager for Monitoring Firm art Date (10) Schedule						Teleph 973-	none No 764-2			Licens	se No.				e Vientini
Start Date (10) 2/6/17	2/6/17 4/1/17					ompletion Date (11) Name of OSHA Monit					-					
Occupancy Status During	Abatement (Ched	k Only On	e)	Street Address									1			
Facility Closed/Vaca Abatement Performe Other – Describe:	ted During Entire ed Outside of Norn	Period of Annal Facility	Abaten Hours	nent s			City, S	tate, Zi	p Code							
Scope of Work (Check All	That Apply)							-					-			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		printers.	enova emolit				×	Min Glo	II Containment with Negative Pressure ni-Enclosure ovebag Procedure n-Exempted (*) and Non-Friable Procedure							
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Location	5000 m - 100 m	N	ormal	ly			cription							Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used S Mainte Custodia (1)				olely by nance/ al Staff? Asbestos Containi (i.e. thermal sys				insula T, or		(S	nount pecify or LF)	Nonlova		Repair	Encapsulate	Enclosure
		Yes	No	N/A											te	е
main build	ling			X		ro	ofing			30	0 SF	×				
				X		flo	or tile			50	000	×				
				X		m	astic			50	000	Х				
Name of Registered Waste	Hauler		l N	JDEP W	aste	Cubic Y	ards		Name of F	Penieter	ed Land	Hfill				
Tony's Cleanup & Ha			H	auler ID 7787	ID No. of Waste Chairs Breath and Consider											
City, State Bridgewater, NJ					Disposa TBD	Disposal Date City, State										
Completed by		Title	lent			Signature Date										
A. Scott Higgins President						2/22/17										

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Date of Notification (1) 2/21/17				Building (le Smith		perator	(2)					1		
Agencies Notified Type Notification	on		Street A		§ 			AS	BESTOS	CON	ITRO	L &		
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■ DOH justification □ DCA □ Cancellat				Contact le Smith				Te	iepnone ivi	Imner				
			110/07/2010/07	LITY INFO		ON								
Name of Facility Where Abatement is Ta	king Place (3)					Type of Faci	lity (4)						
house Street Address							School	(K-12) pter 8 (Oth	er than K-	12)				
							Other (etc.)	i.e. private	& commer	cial buil	1000		es,	
City (5) Woodridge							Square Feet 2000	2	of Floors	1186	3ldg. <i>1</i> 74	ge		
County (6)			County (Code (7)			Current Use		ina demoli					
Bergen				JSE ONLY)			ourient occ	(1 1101 11 00	ing domon	onou				
Name of Monitoring Firm Hired by Buildin	ng Owner (8)		ASCN	1 No.			of Abatement							
							Environme	ental Ser	vices, LL	.C				
Street Address							Address Box 483, 4	E Gate D	rive					
City, State, Zip Code							tate, Zip Code							
						Glen	wood, NJ	07418						
Project Manager for Monitoring Firm			Telepho	ne No.			one No.		License	No.				
Start Data (10)	Date (10) Schedul					20-20-20-20-20-20-20-20-20-20-20-20-20-2	764-2276 of OSHA Mor	itor	703			9929		
2/24/17	t Date (10) Schedule 24/17 3/15/17					OI OSI IA WOI	iitoi							
Occupancy Status During Abatement (Ch	neck Only Or	e)				Street	Address							
Facility Closed/Vacated During Entition Abatement Performed Outside of No. Other – Describe: basement						City, S	tate, Zip Code	9						
Scope of Work (Check All That Apply)	***************************************													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	promotern .	enova emolit				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
	le	Locati	on		<u> </u>		1 NOII-EXCIT	ipied () di	id Non i ne	abic i ic	Abat	emen	t	
Location of	1	Vormal	ly		Des	scription	of				T)	/pe		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used Solely b Maintenance/ Custodial Staff (12)				Asbestos Containing Material (ACN				(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A									(D		
basement			X		pipe	insula	tion	- 3	30 SF	×	-			
Name of Registered Waste Hauler Freehold Cartage		H	IJDEP W lauler ID 5939	CONTRACTOR OF THE PARTY OF THE	of Was		10000	e of Regist stern Bei						
City, State Freehold, NJ					Dispos	sal Date		State Isboro, P	'A					
Completed by A. Scott Higgins	Title Presi	dent			Signature Date 2/21/17									

Date of Notification (1) 2/22/17					of Building	Owner/	Operator	(2)	7	1		27	12	47	CIE
Agencies Notified	Type Notification			0.3130.4413.55	Address				-	A:	SBEST	OS C	TNC	ROL	. &
× EPA DEP × DOL	Initial Amended Amendmen		_		ate, Zip C beth, NJ		2		Marina			CENS			
X DOH DCA	Emergency justification Cancellation)			of Contact n Diaz					Te	lephone I	Number			
Name of Facility Where	Abatement is Taki	ng Place (3	()	FAC	ILITY INF	ORMAT	ION	Typo	of Facility	(4)					
House	r todiomonic to Takin	.g / 1400 (0	,					140000	School (K-	7000					
Street Address								×	Subchapte Other (i.e. etc.)	er 8 (Oth			ildinç	įs, ho	mes,
City (5) Linden								Squa 1,90	re Feet 00	2	f Floors		Bldg 70	. Age	
County (6) Union					Code (7) USE ONLY)		Curre	ent Use (Pr	ior if be	ing demo	lished)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	M No.				tement Co		000000	10			
Street Address							Street				71003, L				
City, State, Zip Code							225 3575		83, 4 E (Gate D	rive				
Oity, State, Zip Gode		California de la calcana de la					550000		ip Code I, NJ 07	418					
Project Manager for Mon					one No.		Teleph 973-	one N 764-2			License 703	e No.			
Start Date (10) 3/4/17	4/1/17				Date (11)		Name	of OSI	HA Monitor						
Occupancy Status During	g Abatement (Che	ck Only On	e)				Street	Addres	SS						
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norr	nal Facility	baten	nent			City, S	tate, Z	ip Code		-100				
Scope of Work (Check A	II That Apply)									×-1	***	ATT-2017	10.00		-
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		Property .		ovation polition					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
		Is	Locati	on			L	1 1401	i-Exemple	u () an	u Non-Fi	lable FI		ateme	nt
Location	of	N	ormal	ly			scription						_	Гуре	_
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used Maint Custod				nce/		thermal surface	aining M systems cing, VA niscellan	insula T, or		(8	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										(D)	
baseme	ent			X		460.000.000	insulat			-	0 LF	X			
garag	e 	+		X		pipe	insulat	ion		1	5 LF	×		-	
Name of Registered Was	te Hauler			JDEP Wauler ID		Cubic of Was			Name of Registered Landfill						
Freehold Cartage 15939				5939		TBD Western Berks Landfill									
City, State Freehold NJ					Dispos TBD	al Date		City, Stat Birdsbo		A					
Completed by A Scott Higgins		Title	Nent				ignature	Ni	1			Date	7		
A. Scott Higgins President					2/22/17										

D			-					8		MY		-60	4	4,6	0,7	1	
Date of Notification (1) 2/21/17					of Building outh Roc				Company o] LI of N.J		FED	2	/ (2017	ĺ	
Agencies Notified	Type Notification			Street /	Address		<u> </u>		,,,,	-	ASBE	STO	25.6	400	TDO	11 8.	
X EPA	× Initial				ox 902						AODL			ISIN)L α	
DEP X DOL	Amended Amendmen				ate, Zip Co oft, NJ 0												
⊠ DOH	Emergency justification)				of Contact		9)			Te	lephone	Num	ber	Weter.			
☐ DCA	Cancellation				ie Cairns						*		-57				
Name of Facility Where	Abatement is Takir	ng Place (3)	FAC	ILITY INFO	ORMA'	TION	Tvp	e of Facility	(4)							
house								П	School (K-								
Street Address									Subchapte Other (i.e.	r 8 (Oth	er than	K-12	l buil	dinas	hom		
City (5)								×	etc.)				3.27.30.3.2.42			ies,	
Bay Head								210	are Feet 00	2	f Floors		1.50	31dg. <i>1</i> 38	Age		
County (6)				County	Code (7)				rent Use (Pr		ing dem	olishe	- 150				
Ocean					USE ONLY)	_											
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASC	M No.				atement Co vironmenta		002 021	1.0					
Street Address							Street			al Selv	/ICES, I	LLC				-	
							POE	3ox 4	483, 4 E C	Sate D	rive						
City, State, Zip Code									Zip Code	440	- 10						
Project Manager for Mor	nitorina Firm			Telepho	ne No		Teleph	-	d, NJ 074	118	Licens	o No	un-				
	tt Data (10)				110 110.		1		2276		703	e NO					
Start Date (10)	N C TESTINATION				Date (11)		Name	of OS	SHA Monitor								
	/2/17 3/31/17 cupancy Status During Abatement (Check Only One						041	A -1-1-									
Facility Closed/Vac				nont	Street Address												
Abatement Perform Other – Describe:	ned Outside of Norn	nal Facility	Hour	nent S		Zip Code											
Scope of Work (Check A	II That Apply)												699000				
≥3 sf or ≥3 lf		× F	enova	ration Eull Containm					ment with Negative Pressure								
× ≥160 sf or ≥260 lf			emoli	tion				M	ini-Enclosure lovebag Pro	е	riogan		,,,,,				
									on-Exempte		d Non-F	riable					
12 15	120	10000	Locat	355,000										Abate	ement pe	t	
Location Asbestos-Containing	Material (ACM)	Use	d Sole	ly by	Asbest		escription Itaining M		al (ACM)	А	mount	Ì		ĺ			
TO BE ABA			odial S		(i.e. t		I systems		lation,		pecify or LF)		Ren	Re	ncar	Encl	
(13)			(12)	_			miscellan)	O.	0, 1,		Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A											te	(D	
kitche	n			X			ceiling			15	0 SF		X				
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Name of Registered Was	te Hauler		I NI	JDEP W	lacto T	Cubi-	Varda		Norse	e of Registered Landfill							
Freehold Cartage Hauler				auler ID		of Wa	: Yards iste		Wester								
15939			5939		TBD	aal Data				s Lan	41111						
City, State Freehold, NJ				TBD	sal Date		City, State Birdsbo		\								
Completed by		Title					Signature	1				Date					
A. Scott Higgins President						2/21/17											

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2/17/2017 Check # 2				Our La	dy Quee	en of P	eace		_	1	FOTO	2.001						
	e Notification		1 2		aywood /	Avenu	е			ASB	ESTO:	S CON ENSIN		L&				
DEP	Amended				e, Zip Cod													
☑ DOL	Amendment : Emergency (-21		od, NJ C	7607				+ (1 NI.							
□ DOH □	justification)	5		Name of	Contact Lameso	an.			1	rele	ohone N	ımber						
DCA L	Cancellation				ITY INFO		ON.											
Name of Facility Where Abate	ement is Taking	Place (3)		PAGIL	arr ini O	KINIATIK	JIV	Type of Fa	acility (4)									
South Bergen Jointure	School							Scho	ol (K-12)									
Street Address								Subc	hapter 8 (r (i.e. priv	(Other	than K-	12) cial build	linas	home	9			
400Maywood Avenue				W-07				etc.)							0,			
City (5)								Square Fe	eet		Floors	0.00	ldg. A 0+	ge				
Maywood								40,000	(D-ii	3	e domeli	-	UŦ					
County (6) BERGEN				County C (STATE U	ode (7) SE ONLY)			Current Us School				snea)						
Name of Monitoring Firm Hire	ed by Building (Owner (8)		ASCM	No.			of Abateme			9)							
N/A								ervices (Jorpora	tion								
Street Address								Address 39th Stre	ot.									
Oit Otata Zia Cada							,	tate, Zip Co	200 <u>. </u>									
City, State, Zip Code								enberg, N		3								
Project Manager for Monitorin	ct Manager for Monitoring Firm							one No.		T	License	No.						
. 10,000	or Manager for Monitoring 1 and						201-2	295-1700)		01074							
Start Date (10)	Date (10) Scheduled Co					Completion Date (11) Name of OSHA												
2/18/2017		2/20/20		Same as above							-10-7-12-12							
Occupancy Status During Ab	atement (Chec	k Only One)				Street	Address										
Facility Closed/Vacated Abatement Performed C Other – Describe: Starti	outside of Norm						City, S	tate, Zip Co	ode									
						- 0												
Scope of Work (Check All Th	at Apply)	557					_	1	II Containment with Negative Pressure									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				×	Mini-En Gloveba	closure ag Proced	dure	15							
								Non-Ex	empted (*) and	Non-Fri	able Pro						
		82000	Locati	8										ement rpe				
Location of			ormal I Sole		A a b a a+	9700000	scription	of laterial (AC	(1)	Δ-	nount		Т	_				
Asbestos-Containing Mat TO BE ABATEI	Asbestos-Containing Material (ACM) Maintenance/ Asbe					thermal	systems	s insulation		(S	pecify	Re	Z	Encapsulate	Enc			
In Facility							cing, VA niscellar			SF	or LF)	Remova	Repair	nsd	Enclosure			
(10)		Yes	No	N/A								8	,	ate	ře			
Ground Floor-Women'	s hathroom		X			Pipe Insulation 4 LF					LF	х						
Ground Floor-Women	o battiroom		*															
			-							- 10	100							
Name of Registered Waste H	lauler		253	JDEP W	Section and the section of the secti		Yards	Na	ame of Re	egiste	red Land	Ifill		100				
Freehold Carting			955	lauler ID 5939	No.	of Wa			umberl	and l	Landfill) 						
				100	Disposal Date City, State													
Freehold, NJ						TBD	Nanat		lewburg	, F/A		Date						
Completed by Gina Betances		Title Office	e Ma	nager		8	Signature		was	Y		2/17/2	017					
								-										

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

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e of Notification (1)	47		Nan	ne of Bu	ilding Ow	ner/Operator ry Academ	(2) y		FEB 2	7 2017			1
2 / 22	/								ASBESTOS (CONTRI	3 10	l Ç	1
encies Notified Type No	otification		Stre	eet Addr	ess	Mand at Tor	rill Ros	ad /	LICEN	SING	0		
EPA ⊠ Initia	I					Nest at Ter	TIII IXO		LUCILI	011			
DOLWD Ame	nded				Zip Code								
DOU Ame	ndment #	-	1		ıng, NJ (07069		Tel	ephone Number		5-15-1		
DCA LEME	ergency (includi fication)	ng		me of C				1 10	0,000				1
	cellation		1	Daniel	Stout				3 <u></u>				_
			F	FACILI	TY INFO	RMATION		(4)					-
21.1	et is Taking Pla	ce (3)						e of Facility (4)					
ame of Facility Where Abateme	III IS TAKING THE	(0)						School (K-12) Subchapter 8 (Ot	her than K-12)				
Mount Saint Mary Acaden	ıy							Other (i.e., privat	e and commerci	al building	gs,		
reet Address								homes, etc.)					
1645 Route 22 West at Te	rrill Road						Sq	uare Feet #	of Floors	Bldg. A	ige		
ity (5)							2	20,000	3	80			_
Watchung				County	Code (7)(S	TATE USE ON	LY) Cu	rrent Use (Prior i	f being demolish	ied)			
ounty (6)			1	County	0000 (1)(0			School					_
Somerset				2011 110		Name of Abat	tement (Contractor (9)					
Iame of Monitoring Firm Hired t	y Building Owr	ner (8)	AS	SCM No	.	Shade Fn	vironn	nental, LLC					_
TTI Environmental, Inc.						Street Addres							
Street Address						623 Cutle		iue					
1253 North Church Stree	t					City, State, Z							
City, State, Zip Code						Maple Sh	ada N	.1 08052					
Moorestown, NJ 08057									License No.				
Project Manager for Monitoring	Firm			hone No		Telephone N 856-755-			00842				
Mike Stocku			304-3		Name of OS		aitor	4					
Start Date (10)	Schedul	ed Con	npleti	on Date	(11)								
03 / 03 / 17	03	_ / _	04	_ / _	17	EMSL Ar		ai, iiio.					
Occupancy Status During Abat	ement (Check (only on	e)			Street Addre							
- INTted DIII	ring Entire Peril	DO OI MI	Jarell	nent		200 Rou							
 ☐ Facility Closed/Vacated Duty ☐ Abatement Performed Outs Time of Abatement: 					ribe M	City, State, Cinnami	Zip Cod inson,	e NJ 08077					_
Scope of Work (Check all that						⊠ Fu	II Conta	inment with Nega	ative Pressure				
		⊠ Ren	ovati	on		□ Mi	ni-Enclo	sure					
≥3 sf or ≥3 lf ≥3 sf or ≥3 lf		☐ Den	nolitio	n		GI	ovebag	Procedure npted (*) and Nor	-Friable Proced	ure			_
≥160 sf or ≥260 lf						□ NO)II-Exem	ipied () dire :		Aba	teme	nt T	y
		Is	Locat	ion		Deseri	iption of			72	Re	m	
Location of	ere e Kourosanous		orma	ely by	Ashe	octoe Contain	ing Mat	erial (ACM)	Amount (Specify	Remova	Repair	Encapsulate	1
Asbestos-Containing Mate	erial (ACM)	Mai	ntena	ance/	(i.e	a thermal sy	stems II	nsulation,	SF or LF)	val	7	Sul	1
TO BE ABATED	2	Cust	odial (12)	Staff?		surfacing other mis	g, VAT, cellaneo	ous)				ate	1
(13)		Van	No	N/A	1	Other mile					_	-	-
20 AC		Yes			Dino Is	nsulation			20 LF				
Main Office									10 LF				
Basement Maintenance	Shop			$\perp \square$		nsulation			20 LF				
Mercy Hall Basement Bl	ower Room					nsulation			4 SF	\boxtimes]
Saint Joe's Hall Art Roo	m		\boxtimes			Cubic Yar	rds of	Name of Regi	stered Landfill				
Name of Registered Waste I				NJDEP Hauler	ID No.	Waste		Cumberla	nd County La	ndfill			
Freehold Cartage				1593		1 Discool	Date	City, State					
City, State						Disposal		Newburg,	PA				
I I JULY COLOLO						3/4/20		1,101.20.9		Date			
										1 (100)			
Freehold, NJ Completed By (Print or Type) Tit	le				Sign	nature	7-8		2/20	71	7	

CK#4180

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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Andread Co. (Control of the Control	FEB	2	7	2017	7	

		1	(Pursua	nt to NJAC	8:60 and 12:120	"	100				
Date of Notification (1).	22-17		Nai	me of Buildir	ng Owner/Operator	(2) ECH CO	MAREATOR	MAN	ROL	&	
Agencies Notified FA DEP DOL DOL DCA	Type Notification Initial Amended Amendment f Emergency (i justification) Cancellation	#	City	ne of Conta	155 RT Code CELIMFIE	0 M.	7 08 7 Telephone Nur				_
			ᆜᆖ		FORMATION						=
Name of Facility Where	Abatement is Takir			ACILITY IN	ORMATION		12) r 8 (Other than K-		lings		
City (5)	V					homes, etc Square Feet	private & commer :.) # of Floors	Ble	dg. Aq	ge	-
	AW (17	14				2000	Prior if being demo		50	+	_
	MAY		_ US	ounty Code (SE ONLY)		VA	CAWT	onsned)			_
Name of Monitoring Firm (8)	Hired by Building	Owner	ASC	M No.	Name of Abatem	ent Contractor (
Street Address	VIA				Street Address	S SPIRI					
City, State, Zip Code					City, State, Zip C			080	252	_	
Project Manager for Mor	itoring Firm		Telephon	e No.	Telephone No. 856-77	9-0472	License No.	444			
Start Date (10)		duled Cor	1-17	Date (11)	Name of OSHA N	Monitor NA					_
Occupancy Status Durin Facility Closed/Vacate Abatement Performed Other - Describe:	ed During Entire Pe	eriod of Al	batement		Street Address City, State, Zip C	ode	=				=
Scope of Work (Check a ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Il that apply)	Reno	ovation olition		Mini-End	closure an Procedure	egative Pressure	dure			
			cation						bater Typ		
Asbestos-Containing M TO BE ABAT IN Facility (13)	faterial (ACM) ED	Used S Mainte Cust Sta (1	malty Solely by enance/ todial aff? (2)	(i.e.	Description of tos Containing Mat thermal systems in surfacing, VAT, other miscellaneo	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
61011	,	Yes	No N/A		RANSIT	F	1400 SE	X			\exists
SIDIN	<u>\rightarrow</u>	-	1	1	100/14 5 11						
								-			_
Name of Registered Was	te Hauler			Waste	Cubic Yards	Name of Reg	gistered Landfill	- _			
(Ltmco	INC		Hauler	10 No.	of Waste Disposal Date	City, State	4.C.M.L). A		_	_
	MOE N				Signature A	_ WOO	DB BINE			_	
Completed By	CMM	SU	₽.		Dyuil	WW.		-22	-(_	_

				Pursua	nt to N	JAC 8:60 and	12:120)		E Cons	ck#1	156		n
Date of Notification (1)	February 2 ebruary 1, 20					g Owner / Operato		and Division				The section of the se	Contractor of the Contractor o
Agencies Notified	Type Notifica			_	Address	, roman modrodi o	oricor marrin	100 mm and	FEB 2	7.2	017		划
□EPA □DEP ☑DOL	☐ Initia	Í			st Jimmie	Leeds Road		A	SBESTOS LICEI			L&	
	Ame				na, NJ 08			Total sales religions and an advantage of the sales	THE RESIDENCE OF THE PERSON NAMED IN	*****			
⊠рон	Ame	ndment # <u>1</u>	_										
DCA	Cano	cellation		Name	of Contac	t			Te	elephon	e Nui	nber	
				FAC	CILITY I	NFORMATIO	N						
Name of Facility When				.i.u		Type of F			N				
AtlantiCare Regional Street Address	wedical ceri	ter – Mairii	Ianu Divis	SIOII			ool (K-12) chapter 8 (Oth	or than K-12)					
65 West Jimmie Leed	ls Road						war in the same of the same	te & commer	cial huilding	e hon	10 0	(2)	
oo rrest ommine Leet	io rioud					Square Fe		of Floors		lg. Age		.0.)	
City (5)						- Joquaio i C	,			_	2 Yea	rs	
Pomona, NJ						Current U Hospital	se (Prior if bei	ng demolished)				
County (6) Atlantic		US	unty Code										
Name of Monitoring Fi Hillmann Consulting,		uilding Owr	ner (8)		ASCM N	Synatech		ntractor (9)	4				
Street Address 1600 Route 22 East, 5	Ste 107					Street Add							
City, State & Zip Code							& Zip Code		A-N				
Union, NJ 07083	.,		1-				Harbor, NJ	08087					
Project Manager for M Stephen Cherepany	onitoring Firm			lephone N 8-688-780		Telephone 609-296-6			License Num	0081	7		
Scheduled Start Date (February 13,		Scheduled	Completi		1)		OSHA Monitor		The strategies of the strategi				
Occupancy Status Dur Facility Close	ing Abatemer		nly one)			Street Add 829 Radio	dress						
Abatement Pe	erformed Outs	ide of Norn	nal Hours			City, State	& Zip Code						
Other - Descr						Little Egg	Harbor, NJ	08087					
Facility Occup													
Scope of Work (Check ≥ 3 sf or ≥ 50 lf ≥ 160 sf or ≥ 260)		Renovatio Demolition			Mini-Encl	ainment with Nosure Procedure	egative Press	sure			
								mpted(*) and N	Ion-Friable P				
Asbestos-Contair	ition of ning Material (ABATED	ACM)	Solely b	on Norma y Mainten dial Staff?	ance or	Asbestos	ription of s-Containing ial (ACM)		unt (Specify SF or LF)	Ab	ateme	ent T	ype
IN F	acility 13)		Yes	No	N/A	insulation,	mal systems surfacing, VAT iscellaneous)	г		Removal	Repair	Encapsulate	Enclosure
First Floor					X	Floor Tile	and Mastic		,600 SF	X		\dashv	_
Endo Suite					X		or Tile		,000 SF	$\frac{1}{x}$			
Name of Registered W	aste Hauler		NJDEP \	Nasta	Cubic Y	ards of Waste	Name of	Registered La	ndfill				
	asto Hautel		Hauler II	No.		aras or viasto			r sami				
Synatech, Inc.			27	429	30 Dianasa	I Data	Fairless						
City, State					Disposa	Date	City, Sta	le					
Little Egg Harbor, NJ	08087				April 11		Morrisvi						
Completed By		Title			Signatur	And Ala	2	Date	ebruary 22, 2	2017			

								III/ CI	neck #	1150	1	- 11
Date of Notification (1) ebruary 1, 20	017				ig Owner / Operator	(2) nter – Mainland Div		FR 2			
Agencies Notified	Type Notifica				Address	gioriai medicai oc	and best.	rn Z	1 21	117	-1-	
□EPA □DEP				65 W	est Jimmi	e Leeds Road			STOS C)L &
DOL				City, S	State & Zip	Code		-	LICENS	DIIVI-		
⊠ рон		ended endment #_	2	Pomo	ona, NJ 0	8240						
DCA		cellation		Name	of Contac	ct			Telepho	ne Mi	mho	
										-		
				FA	CILITY	INFORMATION	1					
Name of Facility When AtlantiCare Regional	re Abatement Medical Cer	is Taking l iter – Mair	Place (3) nland Divis	sion		Type of Fac	cility (4) I (K-12)					
Street Address						Subch	apter 8 (Other than I	K-12)				
65 West Jimmie Lee	ds Road					- Property	(i.e., private & cor				tc.)	
City (5)						Square Fee	et # of Floo	rs	Bldg. Age	e 2 Yea	re	
Pomona, NJ					2	Current Use Hospital	(Prior if being demo	olished)		1 100	13	
County (6) Atlantic			ounty Code									
Name of Monitoring Fi Hillmann Consulting					ASCM		patement Contractor	(9)				-
Street Address	, IIIC.					Synatech, Street Addr						
1600 Route 22 East, S City, State & Zip Code						829 Radio						
Union, NJ 07083						City, State of	& Zip Code Harbor, NJ 08087					
Project Manager for M Stephen Cherepany	onitoring Firm	1		ephone 1 3-688-78		Telephone 609-296-69	Number	License N		7		
Scheduled Start Date		Scheduled	d Completio	on Date (11)	Name of OS	SHA Monitor		0081	1		
February 13, 3 Occupancy Status Dur		ot (Check o		13, 201	7	Synatech, I Street Addr						
Facility Close	d/Vacated Du	ring Entire	Period of A		nt	829 Radio						
Abatement Pe		side of Nor	mal Hours			City, State 8	& Zip Code					
Other – Descri		patement				Little Egg I	larbor, NJ 08087					
Scope of Work (Check				-			X					_
							Full Containment	with Negative Pr	essure			
≥3 sf or ≥ 50 lf ≥160 sf or ≥260	ıé		=	Renovatio Demolitio		_	Mini-Enclosure					
2 2 100 St 01 2200				Jemondo	41		Glovebag Procedu Non-Exempted(*)		Drocodu			
	tion of		Is Location			Descri	otion of	and Non-Thable	_	atem	ent T	уре
Asbestos-Contain TO BE	iing Material (ABATED	ACM)		Mainten		Asbestos- Materia	Containing L(ACM)	Amount (Speci SF or LF)	fy			
IN F	acility				(12)	(i.e., therm	al systems	OI OI LI)			m	
C	13)		1 1			insulation, su or other mis	rfacing, VAT		Re	Z	nca	Enc
									Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A				<u>n</u>	7	ate	lre
First Floor					Х	Floor Tile	and Mastic	1,600 SF	X		П	
									\dashv			
Name of Registered W	aste Hauler		NJDEP V Hauler ID		Cubic Y	ards of Waste	Name of Register	red Landfill				
Synatech, Inc.				429	12		Fairless Hills					
City, State					Disposa	II Date	City, State					
ittle Egg Harbor, NJ	08087	T				14, 2017	Morrisville, PA					
Completed By		Title			Signatu	Vani alor	Da	ate			-	
Diane Aloia		Executiv	ve Adminis	trator	i	vani Wor	1 Fe	ebruary 1, 2017				-

te of Notification (1)	22 / 17				uilding Ow Demolif	vner/Operator (2) tion		3	1 Ba	07
			NJ - 22	et Add	5.5		ASBES	TOS CONTROL	&	
encies Notified	Type Notification		and the same	O Box				ICENSING		
EPA	☐ Initial ☐ Amended				, Zip Code	9				
DOLWD	Amendment #				quan, N.					
DOH DCA		ling	1		ontact			Telephone Number		
(NJAC 5:23-8)	justification)		1400		Ontact					
A contract of the contract of	☐ Cancellation		1 - 2	inda		TION			20-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-	
			F	ACILI	TY INFO	RMATION	Type of Facility (4	4)		
me of Facility Where	Abatement is Taking Pl	ace (3)				1	C School (K-12)	Y		
Residence							C. habantar 8	(Other than K-12)	. L. ildings	
reet Address							Other (i.e., pr	ivate and commercia	i bullairigs,	1
eet Address							homes, etc.)	# of Floors	Bldg. Age	9
/E\							Square Feet	1	65	
ty (5) Spring Lake							900 sf	or if being demolishe	ed)	
			C	ounty (Code (7)(S	STATE USE ONLY)		or il being derrionand	,)	
ounty (6)							Residence			
Monmouth	n Hired by Building Ow	ner (8)	AS	CM No	. 1		ent Contractor (9)			
ame of Monitoring Fill	fing Inc					Guardian Co	ntracting, Inc.			
Guardian Contrac	ung, mo.					Street Address				
treet Address	. 64					1889 Route 9	9, Unit 61			
1889 Route 9, Uni	[61					City, State, Zip C	ode			
City, State, Zip Code						Toms River,	New Jersey 08	3755		
Toms River, NJ 0	3/55	TT	elenh	one No)	Telephone No.		License No.		
Project Manager for Mo	onitoring Firm	1.		-349-9	1	732-349-993	2	00624		
Nicholas Fernico	a Cobado	iled Com				Name of OSHA	Monitor			
Start Date (10)	100000000000000000000000000000000000000	/	24	I Date	17	E.M.S.L. An				
_ 2 / _23						Street Address				
Occupancy Status Dur	ing Abatement (Check	only one	e)	200 2		1056 Stelton	1			
FI = Why Classed N/20	ated During Entire Per	IOD OT AD	ateme	Desc	rihe	City, State, Zip				
- I D-f	ned Outside of Normal	Facility F	louis	- 0000	M	Piscataway	, New Jersey 0	8854		
Scope of Work (Check	(all that apply)					□ Full Co	ntainment with N	egative Pressure		
		Reno	watio	n		☐ Mini-F	nclosure			
≥3 sf or ≥3 lf ≥3 sf or ≥3 lf		□ Rend □ Dem □	olition	1		Gloveb	pag Procedure	Non-Friable Procedu	re	
☐ ≥160 sf or ≥260 lf						□ Non-E	xempled () and .		Abaten	ment Ty
			ocatio			Description	o of			
Loca	tion of	Used	Sole	y Iv bv	Ache	etos Containing	Material (ACM)	Amount	Remova	Encapsulate
Asbestos-Contain	ing Material (ACM)	Main	tenar	nce/	(i.e	e. thermal system	ns insulation,	(Specify SF or LF)	ova	psu
	ABATED acility	Custo		Staff?	338	surfacing, Va	AT, or	31 01 11)	-	late
INF	13)		(12)	NIZA		other miscens	illeous)			3330
		Yes	No	N/A		1.1.1		10 yards		
		-	N		asbest	tos debris		10 7		1
(*			\boxtimes	100					_ _ _	
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(*								egiptered Landfill		
basement				JDEP		Cubic Yards o		egistered Landfill		
basement Name of Registered	Waste Hauler			J NJDEP Hauler I	D No.	Waste	T.R.R.F			
basement Name of Registered Guardian Contr	Waste Hauler			JDEP	D No.		T.R.R.F			
basement Name of Registered Guardian Conti	Waste Hauler racting, Inc.			J NJDEP Hauler I	D No.	Waste 10	T.R.R.F			
Name of Registered Guardian Contro City, State Toms River, Ne	Waste Hauler racting, Inc.			J NJDEP Hauler I	D No.	Waste 10 Disposal Date 2/27/17	T.R.R.F City, State Tullyto	wn, Pennsylvania	Date /	
basement Name of Registered Guardian Conti	Waste Hauler racting, Inc.			JUDEP Hauler I 2022	D No.	Waste 10 Disposal Date	T.R.R.F City, State Tullyto	wn, Pennsylvania	Date	12/1

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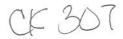
^{*} Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)			T	Name	of Building	Owner/Operator (2	2)	FEB 2 7 201	17	+1		
1 2.50 mm	/1	7			e Constru		The state of the s	100 21 20	13	04		
Agencies Notified Typ	e Notification	n	Street Address 49 Linden Avenue ASBESTOS CONTROL									
	nitial			49 L	inden A	venue	ASI	LICENSING	IOL			
	Amended Amendment #	#		City, S	tate, Zip C	ode	Louis		-			
2,0011	Emergency (i			Mar	ntua, NJ (08051						
	justification)	molading		Name	of Contact			Telephone Numb	ner			
	Cancellation			Nicl	k Salemo	0						
				FAC	CILITY IN	FORMATION						
Name of Facility Where Abate	ment is Takir	ng Place	(3)				Type of Facility	y (4)				
Residence							School (K-1					
Street Address							Subchapter Other (i.e.	r 8 (Other than K-12) private and commer) cial bu	ildina	S	
							homes, etc	:.)	olal ba	9	-,	
City (5)							Square Feet	# of Floors	Blo	lg. Ag	je	
Toms River							1600 sf	1	(65		
County (6)				Coun	ty Code (7)	(STATE USE ONLY)	Current Use (F	Prior if being demolis	shed)			
Ocean							Residence	:				
Name of Monitoring Firm Hired	d by Building	Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)			77	
N/A						Guardian Co	ntracting, Inc					
Street Address						Street Address						
						1889 Route 9	889 Route 9, Unit 61					
City, State, Zip Code						City, State, Zip Co						
- 34 11 44 3						Toms River,						
Project Manager for Monitoring	g Firm		Tele	phone I	No.	Telephone No.		License No.				
	- 33			732-349-9932	2	00624						
Start Date (10)	Sche	eduled Co	omplet	tion Dat	te (11)	Name of OSHA M	Monitor					
_ 03 / _ 03 / _ 17	7	03 /	06	1	17	E.M.S.L. Ana						
Occupancy Status During Aba	tement (Che	eck only o	ne)			Street Address		101				
☐ Facility Closed/Vacated Du				nent		1056 Stelton						
☐ Abatement Performed Outs	side of Norma	al Facility	Hour	s - Des		City, State, Zip Co	ode					
Time of Abatement:	_AMF	PM/	_PM-		AM	Piscataway,		8854				
Scope of Work (Check all that	apply)											
August W. Har Printers								egative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		☐ Re				☐ Mini-End	g Procedure					
23 _ 100 01 01 _ 200 11								Ion-Friable Procedu	re			
		55,000	Locat						Ab	atem	ent T	ype
Location of			lorma d Sole			Description of		A	Re	Re	m	ш
Asbestos-Containing Mate TO BE ABATED			intena			stos Containing Ma ., thermal systems		Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility		Cust	odial (12)	Staff?		surfacing, VAT	, or	SF or LF)	val	-	sula	sure
(13)		Yes	No	N/A	+	other miscellane	eous)				te	
exterior			×		ashesto	os siding		1600 sf		П	П	П
exterior					aspeste	73 Siding		10000.				
	one process		Ц				- N	-:-(Ш		
Name of Registered Waste Ha			1,030	JDEP \ auler II		Cubic Yards of Waste		gistered Landfill				
Guardian Contracting, I	inc.			20223		3	T.R.R.F.					
City, State						Disposal Date	City, State					
Toms River, New Jerse	У					3/7/17	Tullytow	n, Pennsylvania				
Completed By (Print or Type)	Ti	itle				Signature		V D:	ate		1	
Nicholas Fernicola		Project	Man	ager					21	7/	11.	7

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_F 00 !		(1	Pursuan	nt to NJAC	C 8:60 ar	nd 12:12	0)		Distriction of the last of the		FE	R	2 7	20	17
Date of Notification (1) 02/22/17				of Building	700						! L	U	<u> </u>	20	1
Agencies Notified Type Notification EPA Initial	n	Street Address ASBESTOS CON 154-156 Hackensack Ave, LICENSIN City, State, Zip Code												ROL	
DEP Amended Amended Amendem Emergenc justification Cancellation	y (includin	9	City, Si Hack		code , NJ 07 t		R-101		Te	lephone	Num	ber			
No. of the second			FAC	CILITY INF	FORMAT	ION								_	
Name of Facility Where Abatement is Tak LandMark Hackensack LLC	ing Place i	(3)					Ту	pe of Facility School (K-	12)						
Street Address 154-156 Hackensack Ave,							×	Subchapte Other (i.e. etc.)	er 8 (Oth private	er than h & comme	K-12) ercial	l buil	dings	, hom	es,
City (5) Hackensack, NJ 07601, USA							1	uare Feet 000	# 0	f Floors		E	Bldg.	Age	
County (6) Bergen County, New Jersey				Code (7)				rrent Use (Pr emo	ior if bei	ing demo	olishe	ed)			
Name of Monitoring Firm Hired by Building NJ Abatement Services, LLC	Owner (8)	ASC ?	M No.				batement Co tement Se		05 (5)					
Street Address 41 Wyckoff Avenue						Street 41 W		ress koff Ave	5-4-0.00						
City, State, Zip Code Wyckoff New Jersey 07481				9		100000000000000000000000000000000000000		Zip Code New Jers	sey 07481						
Project Manager for Monitoring Firm Nicole Intriago		Telepho 201-9	one No. 962-6500	0	Teleph 201-		No. 2-6500	-	License No. 01290						
Start Date (10) 03/06/17	Schedu 03/25		mpletion	Date (11)				SHA Monitor		atories					-0.00
Occupancy Status During Abatement (Che	ck Only O	ne)				Street									
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of mal Facilit	Abater y Hour	ment s			City, St	tate,	Zip Code	st						—
Scope of Work (Check All That Apply)						Unio	ПІ	j 07083							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renova Demoli		on Mini-Enclosure Glovebag Prod								e			
Location of		Locat Norma	lly		Dec	Description of			d (*) and Non-Friab				Abate	ement	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intena	ial Staff? (i.e. ther			Containing Material (ACM) ermal systems insulation, surfacing, VAT, or ther miscellaneous)				Amount (Specify SF or LF)			Repair	Encapsulate	Enclosure
<u></u>	Yes	No	N/A	-							-			te	
Roof/Flashing		X		Roo	f/Flashi	ing		4,800	SQ F	Т	x				
Roof/Flashing		X		Roo	f/Flashi	ing		2,600	SQF	T .	Х				
									10000						
Name of Registered Waste Hauler Newark Carting	Н	IJDEP W lauler ID 4509		Cubic of Was			Name of IESI BI				DFI	LL			
City, State 369 RAYMOND BLVD, NEWARK	NJ 0710	5			Dispos 03/24	al Date		City, Stat BETHL		1, PA 1	801	15			
Completed by NICOLE INTRIAGO	ERVI	SOR		S	ignature				100	Date	22/1	7			

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	Section of the sectio	of the same of the	FEB	2	7	201	
LICENSING							1
	7	ASBE	EST	OS (20	NTR	OL &

Date of Notification (1) 02/22/17					of Building			5,50,50,0	Destruction		ILU			311		
Agencies Notified	Type Notification	LandMark Hackensack LLC Street Address ASBESTOS CON 15-17 Kotte Place, LICENSING									ren	1 2				
₩						Place.				1.10					La	
EPA DEP	Initial Amended				ate, Zip C				1000							
DOL	Amendment				ensack,		601, US	A								
П рон	Emergency justification)		1	Name o	of Contact					Tel	ephone N	umber				
DCA	Cancellation			David	d Hellma	ın				8	3					
				FAC	ILITY INF	ORMAT	ION							-		
Name of Facility Where		g Place (3)					Туре	of Facility	(4)						
LandMark Hackens	sack LLC								School (K-							
Street Address									Subchapte Other (i.e.				ildin	e ho	mae	
15-17 Kotte Place,								<u> </u>	etc.)	private		ciai be	ilding	3, 110	11103,	
City (5)	7001 LICA							medical library	re Feet	10.555,51	f Floors		Bldg	. Age		
Hackensack, NJ 07	601, USA							5,00	277	2						
County (6) Bergen County, Ne	w Joreov				Code (7) USE ONLY	2		Curre	nt Use (Pr	rior if bei	ng demol	shed)				
Name of Monitoring Firm		Oumar (9)		ASC			I NI====				(0)					
NJ Abatement Serv		Owner (o	′	?	VI INO.		1		tement Co nent Se							
Street Address	1000, LLO			1.			Street A			IVICES	LLO		_			
41 Wyckoff Avenue							41 W		53							
City, State, Zip Code							City, Sta	•								
Wyckoff New Jerse	y 07481								ew Jers	sey 074	81					
Project Manager for Moni	T	Telepho	ne No.		Telepho	one No).	-	License	No.						
Nicole Intriago							201-9	962-6	500		01290					
Start Date (10)				mpletion	Date (11)		Name o	of OSH	IA Monitor	r						
02/23/17		03/12/	(150.5)				Iris E	nviro	nmental	Labor	atories					
Occupancy Status During	Abatement (Chec	k Only Or	ne)				Street A		50	-151	W.W.					
Facility Closed/Vaca	ted During Entire I	Period of	Abaten	nent					22 wes	st						
Abatement Performs Other – Describe:	ed Outside of Norm	nal Facility	/ Hours	S			City, Sta									
Scope of Work (Check All	That Apply						Union Nj 07083									
	тпат Арріу)						ভা									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demolit				Full Containment with Negative Pressure					ure				
							Mini-Enclosure Glovebag Procedure									
		1			1		Non-Exempted (*) and Non-Friable Prod				10.00					
		100	Locat Normal										ateme Type	nt		
Location Asbestos-Containing I		7.555	d Sole	-	Aches		scription of aining Ma		(ACM)	Α.	mount	-	T	T		
TO BE ABA	TED		intena todial S			thermal	systems	insulat		5100	pecify	R	1	Enc	回	
In Facilit (13)	У	Cus	(12)	otan:			cing, VAT niscellane			SF	or LF)	Remova	Repair	apsi	Enclosure	
(10)		Yes	NIE	NI/A		other n	iiscellarie	ious)				val	1 =	Encapsulate	ure	
		res	No	N/A								_	1	_		
Plaster W	'alls			X	PI	aster V	Valls 1-2	2 Floo	or	2,500	SQFT	x				
Plaster W	'alls			X	Pla	aster W	alls 1-	2 Flo	or	2,500	SQFT	X				
						7.00					+	+	+			
Name of Registered Wast	IN	JDEP W	aste	Cubic '	Yards	-1	Name of	Registe	red Landf	ill						
Newark Carting				lauler ID	No.	of Was	ste				HEM L		11.1			
Vigoriania de la Compania de C			0	4509		.5			20102030 23	801081160.0000	IL-IVI L	MINDI	11-1-			
City, State 369 RAYMOND BLV	D NEWARK	110710	5			03/10	al Date		City, Stat		I DA 40	01E				
Completed by	D, NEWARK I	Title							DEITH	LEHEIV	1, PA 18	2200				
NICOLE INTRIAGO			FBVI	SOR		5	ignature				100	ate 02/22	117			
JOZZZ MYTTIMOO		301	-1171	3011								12122	17			

			Stat	e of	New Jersey	TEMENT		The second secon	1		C			E	
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140 01		15	SET	JN F	ALL DIVIVE			1	الماا				_		
Date of Notification (1)		_	Stree	et Ad	dress ITH ORANGE A	VENUE		-	-	00	FCT	050	CONT	TROL	&
2 / 21 / Notification							79		F	155	L	ICEN	ISING	<u>}</u>	
Agencies Notified Notification	- #2		SOI	JTH	te, Zip Code ORANGE, NEV	JERSEY UTO	10	Number			-				
EPA X Amended Notification	1 #3				1.O-stact		Telenhon	A NITHWIS					\dashv		
La Carlochan	O A T I	ION	MIC	CTO	RIA PIVOVARIA	CK				_			7		
X DOH EMERGENCY NOT	IFICATI	1014	FA	CILIT		IN of Facilit	y (4)						1		
X DCA Laking Plac	e (3)				-	School ((-12)	er than K-12)			a \				
Name of Facility Where Abatement is Taking Plac	0000000				Ī	X Subchap	nrivale o	COLL	., home	Bldg	. Age				
				- 6		Square Fee	t # 01 1	100		4	0+		\rightarrow		
SETON HALL UNIVERSITY								3 demolished)						
Street Address 400 SOUTH ORANGE AVENUE - UNIVERSITY CE	ENTER		_	20110	ty Code (7)	Current Use	Prior if bei	ng demolished		_					
400 SOUTH ORANGE AVENUE - CHINA			(S	TATI	USE ONLT)_	UNIVERSIT	atement C	ontractor (9)	ION					1	
(=)		_	1		ASCM No.	PAR ENVIR	ONMENT	AL CORPORAT	10						
SOUTH ORANGE ESSEX Name of Monitoring Firm Hired by Building Own Name of MONIMENTAL INC.	(5)			_	3	Street Address	200				-			1	
TTI ENVIRONMENT											_			4	
Street Address Street Address			_			CHEFFRN	MEAN 10	RK 10901 License	Numbe	er					
City, State, Zip Code MOORESTOWN, NEW	JERSEY	Y 081	057			Telephone	Number	1101						7	
MOORESTOWN, NEX				nber		845-369-7	SHA Mon		-TION	c & T	ECH				
Project Manager for Monitoring Firm	856-8 hed. Co	89-5	etion	Dat	te (11)	Name of C	ENVIRON	itor IMENTAL SOL	JIION	5 W				\dashv	
Li Ctota Date (10)	ned. Co 11	/	30	interior and the second	Yea	22								1	
12 / Year Year	Month		_	Day		Street Ad	UTE 9							\dashv	
Month Day tament (Check of	nly one)	d of	Abat	eme	nt ::	1000		lo.			40500	1			
Occupancy Status During Abatement (Check of X Facility Closed/Vacated During Entity Abatement Performed Outside of N Abatement Performed MONDAY-S	ormal F	acilit	у Но	urs -	Describe:	City, Sta	te, Zip Coo	le VAPPINGERS	FALLS	, NY	12590	,		1	
Facility Closed Vaccor of N Abatement Performed Outside of N N Other - Describe: MONDAY- S	ATURD	Y 7A	M-3	30 F	- IVI	Containment w	ith Negativ	re Pressure							
X _Other - Description					X Pull	Enclo									
Scope of Work (Check all that apply)	Renovati	ion				vebag Proced -Friable Proce	ure dure				bater	nent T	ype		
Definition						of Ashestos-	1	Amount	R		ENCAPSULE	ENCLOSU			
>160 SF OR 200 LI	Is Lo	catio	on .)	(Specify	REMOVAL	REPAIR	CAP	10			
Location of Asbestos-containing	norma	lly u	sed	1				SF or LF)	MAI	P	SUL	SUR			
Material (ACM)	Maint/	ely b Cust	odia		insulation,	surfacing, VAT miscellaneous)			1	1	m	R			
TO BE ABATED	Sta	aff (1	2)	1	Of Other			15 LF	X	1	+	+			
in Facility (13)	Yes N	No	X	PI	PE FITTINGS			35 LF	X	+	+	+			20
	+-+	_	1x	T _D	DE FITTINGS			500 SF	X	+	+	+			
KITCHEN	1-1	-	1x	S	PRAY ON INSU	LATION			X	+	+	+			
BACK HALL	1	-	+	+				85 LF	X	+	+	+			
BACK HALL DISHWASHING AREA & ASSOCIATED	+-	+	X	F	PIPE FITTINGS			15 LF	×	+	+	-			
	+	+	T _X	1	PIPE FITTINGS			1,530 SF	×	+	-	-			
HALL RECEIVING AREA	+	+	Tx	-	SPRAY ON INS	ULATION		25 LF		-	-	-+			
RECEIVING AREA	+	+	1		PIPE FITTINGS			15 LF	- 1	4		-			
BOARD DINING	+	+	-	X	DIDE FITTINGS	3		760 SF		X		1			
SEVERY BAY 1	+	+	-	X	SPRAY ON IN	SULATION		15 LF		X	-	1		100	
/ 1	+	+	-	X	PIPE FITTING	S		15 LF		X	+-	+			
HALLWAY BETWEEN SEVERY BAYS	-	+	_	X	PIPE FITTING			40 SF	cu	X	1	1			\dashv
SEVERY BAY 2		1		x	FIRE WALL	of Waste	Name of R	egistered Land ENTRAL SANI	TARY	LANI	OFILL				
	- 1	AJDE	EP W	laste	Cubic Yards C	00 Masie	GRAND C	ENTRALOT		1				HT.)	
- Pagistered Wasto	1	Haul	er ID 913	No.	1		City, State	OF TOWNSHI	D DA		. 1		9		-
Name of Register NEWARK CARTING INC. 369 RAYMON BLVD.		_	91.		Disposal Dat	e 2017	PLAINFIE	TOWNSHI	Da Da	te	71	20	1/1	/	
City, State					12/23-11/30/	Signature /	/_X	XX		0	1				
City, State NEWARK, NEW JERSEY 07105 Completed by (Print or Type)	Title	CT	JR C	FO	PERATIONS	12	110	10			0	,			
BENJAMIN SANCHEZ	DIKE	-010		_		1									
District Control of the Control of t															

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110 CF		S	ETO	N H	ALL UNIVERSIT	Υ				M	F	EB	2/1	2017	-
		1					10.00		1	Laki					
ate of Notification (1)		7	100 5	SOU	TH ORANGE 711				Ì	L		-orc	18/00	NTRO	L &
1 Type Notification		t	City,	Stat	e, Zip Code ORANGE, NEW	JERSEY 0707	79		_	A	SBt	110	ENIS	NG	
gencies Notified Initial Notification EPA Amended Notification	#2	1	SOU	JTH (ORANGE,		Telephone	Number	1_						
DEP X Amended TO			Nan	ne of	Contact				_						
X DOL X On Hold	FICATI		line	TOF	RIA PIVOVARIANO	N							1		
TY IDCA L			FAC	ILIT	Y INFORMATIO		y (4)						1		
Name of Facility Where Abatement is Taking Place	(3)							r than K-12)	home	es, et	(c.)				
Name of Facility Where Abatement is					1	Other (ie.	private &	00	, 1101111	Bidg	. Age		1		
SETON HALL UNIVERSITY						Square Feet	1 # 01 1	3		4	10+		-		
SETON HALL UNIVERSE						60,000	Prior if beir	ng demolished)							
Street Address	NTER	_	C	oun		Current Use (UNIVERSITY	r iioi	(0)		_					
400 SOUTH ORANGE AT County (6)		1	(ST	ATE	ASCM No.	Name of Aba	atement C	ontractor (9) L CORPORAT	ION						
			10,5		ASCM No.	PAR ENVIRO	ONIVILIAN								
SOUTH ORANGE Name of Monitoring Firm Hired by Building Own Name of MONIMENTAL INC.	0.1 					Street Addre	ROCKING	DAD		_					
TTI ENVIRONMENT						City, State,	Zip Code	10901						7	
Street Address		_				CHEFFRN.	MEAN IO	License 1	Numbe	er					
City, State, Zip Code MOORESTOWN, NEW J	ERSEY	/ 080)57 Num	nher		Telephone 845-369-75	-00	1101						7	
A seitoring Firm		00 5	182			Name of 0	SHA Moni	tor	ITION	S&	TECH	١.			
Project Manager for Monitoring Firm	856-8 red. Co	mple	etion	Dat	e (11) 17	QUALITY	ENVIRON	tor MENTAL SOLL						7	
ated State Date (10)	11	1	201	Day	Yea									1	
12 / Vear	Month	_				1376 ROI	UTE 9							一 .	
Month Day Year Kenner (Check or Occupancy Status During Abatement (Check or Occupancy Status During Closed/Vacated During Entire Control of March 2017	e Perio	d of	Abat	eme	nt Nescribe:	Chai	te, Zip Cod	ie /APPINGERS I	-1115	: NY	1259	0		1	
Month Day Tech Occupancy Status During Abatement (Check or X Facility Closed/Vacated During Entir Abatement Performed Outside of No	ormal F	acility	y Hoi M-3:	30 P	M	City, Sta	V.	APPINGERS I	-ALLO	,,				1	
Abatement Ferror MONDAY- S/	ATURD	11 11			[v] Full C	Containment w	ith Negativ	e Pressure							
		8				Enclo									
Scope of Work (Check all that apply) Demolition X F	Renovat	tion			X Glov	ebag Proced Friable Proce	dure				Abate	ment T	ype		
3SF OR LF						- Achestos-	1	Amount	REMO	REPAIR	ENCAP:	ENCLOSURE			
>160 SF OR 200 LI	Is Lo	catio	n				,	(Specify	NO.	AIR	APS	SOJ			
Location of Asbestos-containing	norma	elv b	У	1		mal systems surfacing, VAT	G \	SF or LF)	VAL	1	SULE	도 문			
Material (ACM)	Maint/	Cust	odial	1	or other n	niscellaneous)			+-	+	1111	1	V		
TO BE ABATED in Facility (13)	Yes	aff (1	2)	1				15 LF	X	+	+	1			
in Facility (14)	Yes	140	X	PI	PE FITTINGS			35 LF	X	+	-	1			
WITCHEN	+		X	To	DE FITTINGS	· TION		500 SF	-X	+	+	1			
KITCHEN BACK HALL	+	1	X	s	PRAY ON INSUI	LATION			-X		-				
	+	1	1					85 LF	-X	\neg	-				1
DISHWASHING AREA & ASSOCIATED	+	1	×	F	PIPE FITTINGS			15 LF	-\x		-				1
HALL	+	1	×		PIPE FITTINGS	II ATION		1,530 SF	-	×					+
RECEIVING AREA	+	+	X		SPRAY ON INS	ULATION		25 LF	-	X	-				4
RECEIVING AREA	+	1	1	X	PIPE FITTINGS			15 LF		×	1	1			-
BOARD DINING	+	1	1	X	PIPE FITTINGS	NULATION		760 SF		X	1				4
SEVERY BAY 1	+	1		X	SPRAY ON INS	BULATION		15 LF		1×	+				-
	-+	1		X	PIPE FITTING	5		15 LF		1x	1				-
SEVERY BAY 1 HALLWAY BETWEEN SEVERY BAYS	+	1		X	PIPE FITTING			40 SF	fill						7
SEVERY BAY 2				X	FIRE WALL Cubic Yards of	f Waste	Name of F	Registered Land CENTRAL SAN	TARY	LAN	IDFIL	L			-
	-	NJDI	EP V	Vaste		00	GRAND	LITTIGE							
- Carictered Waste	- 1	Haul	er ID 91	3 NO.			City, Stat	TOWNSHI	P. PA				12	77	
Name of Registers NEWARK CARTING INC. 369 RAYMON BLVD.			31	-	Disposal Dat 12/23-11/30/	e 2017	PLATNEI	IND LONNINGLE	D	ate		1-	10-	11	
City, State					18	signature	X	Δ				-			
City, State NEWARK, NEW JERSEY 07105 Completed by (Print or Type)	Title	ECT	OR (OF C	PERATIONS										
BENJAMIN SANCHEZ	DIK														
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	IOTIFICA	TION	VOF	New Jersey ASBESTOS ABAT C 8:60-7 and 12:1	TEMENT (20-7)		War No.		區	(C)	E		<u>E</u>	
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IVO CP		SE	TON	HALL UNIVERSIT	TY					FE	B 2	7 20	111	-
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ate of Notification (1)		140	00 50	UTH ORANGE A	/ENOL				L		700	CON	TROL	8.
12 Type Notification						79		Opposite Sales	AS	BES	TICE	NSIN(3	
Lagrancies Notification	. #1	S	OUTH	ate, Zip Code I ORANGE, NEW	JLINO	Telephon	a Number				LUL	1		
EPA X Amended Notification Cancellation	,	1	1 0	of Contact		Telephon	6 110				_	-		
		1 10	JICTO	RIA PIVOVARINI	CK		-					7		
X DOL On Hold EMERGENCY NOT	IFICATIC	JIN I	ACILI		ype of Facilit	v (4)								
V IDCA I L			AOIL	I	School (K	(-12)	. V 12\							
Name of Facility Where Abatement is Taking Place	e (3)			5	X Subchap	ter 8 (Othe	commcl. bldgs.	hom	es, etc	2.)		-		
Name of Facility Williams				İ	Other (ie	. private d	Floors		Bldg.	Age)+				
SETON HALL UNIVERSITY					Square Fee		3							
SETON	TED				Current Use (Prior if bei	ng demolished)					\dashv		
Street Address 400 SOUTH ORANGE AVENUE - UNIVERSITY CE	ENTER	T	Cou		LINIVERSITY		tor (9)		37					
			(STAT	E USE ONLY) ASCM No.	Name of Ab	atement C	contractor (9) AL CORPORATI	ON				-		
City (5) ESSEX SOUTH ORANGE by Building Own	ner (8)			3	PAR ENVIR	ONMENT								
					Street Addres	ROCK R	OAD							
TTI ENVIRONMENT														
Street Address					CHEFFRN.	NEW 10	License N	Jumbe	er					
City, State, Zip Code MOORESTOWN, NEW	JERSEY	0805	7		Telephone	Number	1101					-		
City, State, 2-F MOORESTOWN, NE	Telepho	one N	lumbe	T	845-369-75 Name of C	SOU MOD	itor		COT	ECH.				
Project Manager for Monitoring Firm	856-88 ned. Com	9-518	ion Da	ate (11)	Name of C	ENVIRON	itor IMENTAL SOLU	HON	15 & 1					
CEAMAN ISCH	ned. Con	pier	30/	17 Yea	. 1									
Expected State Date (10) 23 /16	Aonth		Da	у	Street Ad	dress							1	
Month Day - Year (Check or	nly one)		ootem	ent	1376 RO									
Occupancy Status During Abatement (Check or X Facility Closed/Vacated During Entire Abatement Performed Outside of No. Abatement Performed Outside of No.	re Period	oi Ai	Hours	- Describe:	City, Sta	te, Zip Coo	de VAPPINGERS F	ALLS	, NY 1	12590			1	
Abatement Performed Outside of the	ATURDY	7AM	-3:30	PM		V Nogativ	ve Pressure							
X Other - Describe: MONDAT - 3				V Full C	Containment w	ith Negau	· Anna anna anna							
	_ tie			X Mini-	Enclo,	ure							_	
Scope of Work (Check all that apply) Demolition X F	Renovatio	,111		Non	-Friable Proce	duic					ent Tyr	e		
>3SF OR LF					of Ashestos-	. 1	Amount	REMOVAL	REPAIR	ENCAPSULE	ENCLOSURE			
>160 SF OR 200 ET	Is Loc	ation	4	O toining	Marchen	')	(Specify	NO	AIF	AP	100			
Location of Asbestos-containing	normall	y use v bv	"	and the second of	mal systems surfacing, VAT	Γ,	SF or LF)	P	1~	SUL S	H		_	
Material (ACM)	Maint/C	usto	ial	insulation, or other n	niscellaneous))		1	+-	m	m			
TO BE ABATED	Staff	f(12)	4	0.			15 LF	X	+-	+-	-			
in Facility (13)	Yes N			IPE FITTINGS			35 LF	X	1	+-	+			
	1	-	-	PIPE FITTINGS			500 SF	X		+	+-			
KITCHEN	1	-	-	SPRAY ON INSU	LATION		500 0	X	_	-	+			
BACK HALL		\dashv	X	SPRATO			85 LF	X		-	+			
BACK HALL ASSOCIATED			\vdash	PIPE FITTINGS			15 LF	X		1	+		-	
BACK HALL DISHWASHING AREA & ASSOCIATED			X	PIPE FITTINGS			1,530 SF)	<		-		$\overline{}$	
HALL			X	SPRAY ON INS	ULATION			1	X		1			
RECEIVING AREA			X	SPRAY ON INS	O'LL		25 LF	-	X					
RECEIVING AREA			X	PIPE FITTINGS			15 LF	-	X					1
BOARD DINING	\neg	T	X	PIPE FITTINGS	NOITA III		760 SF	_	X					1
SEVERY BAY 1	-		X	SPRAY ON INS	SULATION		15 LF		×					4
- 12/4	-	T	X	PIPE FITTING	8		15 LF		x					4
SEVERY BAY THALLWAY BETWEEN SEVERY BAYS	-	+	X	PIPE FITTING			40 SF	311						1
SEVERY BAY 2		+	X	FIRE WALL	of Waste	Name of F	Registered Landf	TARY	LAND	FILL				1
	N	JDEF	Was	te Cubic Yards o	00	GRAND C	ENTRAL SAM							
- Pagistered Wasto		auler	ID No).		City, Stat	e //				1		11-	-
NEW DK CARINO			913	Disposal Dat	e /	PLANFI	ELD TOWNSHIP	ID:	ate /	10	110	9//	16	
369 RAYMON BLVD.	78			140/23-11/30/	ignature	NV	X	100	/	0	11	11		
City, State NEWARK, NEW JERSEY 07105 NEWARK, NEW JERSEY 07105														
NEWARK, NEW JELL	Title				Night at a series	$//\Delta$	0			1				
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRE	CTO	R OF	OPERATIONS	1) (10	, ()	Nes		- 1				

NO CE.	1	NOTI (P	urcus	State of New Jersey TION OF ASBESTOS A ant to NJAC 8:60-7 and	12.120-7)				1	ECE		
100 01				Name of Building Ow SETON HALL UNIVER	ner/Operator (2)			700	31			All Property
Date of Notification (1)					(3111			111	111	FEB 2	7 20	17 1
12 / 9 /16				Street Address 400 SOUTH ORANGE	AVENUE			14	look	1 40 1		
Agencies Notified Type Notification				City, State, Zip Code				1				
X Initial Notificati				SOUTH ORANGE, NE	W JERSEY 0707	9		Ì	A	SBESTOS	CONT	ROL &
DEP Amended Noti	ncauon					Telephone Numbe	r	1		LICE	SING	
On Hold				Name of Contact		elephone Numbe		Tagasa one				
X DCA EMERGENCY	NOTIF	ICAT	ION	VICTORIA PIVOVARI				_]	
		(6)		FACILITY INFORMATI	Type of Facility ((4)						
Name of Facility Where Abatement is Taking	Place ((3)			School (K-1	2)						
- AND /EDGITY					X Subchapter	8 (Other than K-1 rivate & commol. I	12) bldas t	nome	s. etc	c.)		
SETON HALL UNIVERSITY					Other (ie. p	# of Floors	biugs., i	101110	Bldg.	Age	1	
Street Address					60.000	3			40)+		
400 SOUTH ORANGE AVENUE - UNIVERSIT	Y CEN	IER	_	County Code (7)	Current Use (Price	or if being demolis	shed)					
City (5) County (6)				(STATE USE ONLY)	UNIVERSITY				_		1	
SOUTH ORANGE ESSEX Name of Monitoring Firm Hired by Building	Owner	(8)		ASCM No.	Name of Abater	ment Contractor MENTAL CORPO	(9) RATIOÌ	N				
TTI ENVIRONMENTAL INC.				3	Street Address	WENTAL CON C	1011101					
Street Address					313 SPOOK RO	CK ROAD					_	
1253 NORTH CHURCH STREET			-		City, State, Zip C	Code						
City, State, Zip Code MOORESTOWN, NE	w.IFRS	SEY (8057		SUFFERN, NEV	W YORK 10901	se Num	hor	_		-	
Project Manager for Monitoring Firm	Tel	epho	ne Nu	ımber	Telephone Num	iber Licen	se Nun	ibei				
	856	6-889	-5182	2	845-369-7500 Name of OSHA					- di-	7	
Expected State Date (10)				n Date (11)	OUALITY ENVI	RONMENTAL SC	LUTIO	NS 8	TEC	CH.		
12 / 23 /16	Month	11/	30	Day Year				_	_		\dashv	
Month Day Year Check Occupancy Status During Abatement (Check	only on	e)			Street Address							
			Abat	tement	1376 ROUTE 9						_	
Abatement Performed Outside of I	VOITIION	aum	Ly 110	0.0	City, State, Zip	Code		S 10/	4050	20		
X Other - Describe: MONDAY -	FRIDA	Y /AI	VI-3.3	01 101		WAPPINGERS	FALLS	5, NY	1200	90		
Scope of Work (Check all that apply)					tainment with Neg	gative Pressure						
Demolition X	Renova	tion		X Mini-End	ag Procedure							
>3SF OR LF				Non-Fria	able Procedure				hata	ment Type	_	
X >160 SF OR 260 LF	Is Lo	catio	n	Description of	Asbestos-	Amount	70			m Type		
Location of Asbestos-containing	norma	lly us	ed	Containing Mate (ie. Thermal	erial (ACM)	(Specify	REMOVAL	REPAIR	ENCAPSUI	ENCLOSURE		
Material (ACM)		ely by		insulation, surfa	acing, VAT,	SF or LF)	18	R	PS	000		
TO BE ABATED	Maint/0	ff (12		or other misce	ellaneous)		F		ULE	DE		
in Facility (13)	Yes N		N/A			1.51.5	×					
WITOUFN				PIPE FITTINGS		15 LF	x					
KITCHEN				PIPE FITTINGS		35 LF			1			
BACK HALL			X	SPRAY ON INSULATION	N	500 SF	X		+			
BACK HALL DISHWASHING AREA & ASSOCIATED							X	-	+			
			X	PIPE FITTINGS		85 LF	X	-	+			
HALL			Х	PIPE FITTINGS		15 LF	X	+	+-			
RECEIVING AREA	1			SPRAY ON INSULATION	NC	1,530 SF	X	-	+			
RECEIVING AREA	+		X	PIPE FITTINGS		25 LF	X	+	+		\dashv	
BOARD DINING			X	PIPE FITTINGS		15 LF	X	-	+	-		
SEVERY BAY 1	+			SPRAY ON INSULATI	ON	760 SF	X	-	+			
SEVERY BAY 1	+		X	PIPE FITTINGS		15 LF	Х	_	_			
SEVERY BAY 2	-		X	PIPE FITTINGS		15 LF	X					
HALLWAY BETWEEN SEVERY BAYS	NJDE	ED W	X	Cubic Yards of Waste	Name of Re	gistered Landfill		חבוי י			-	
Name of Registered Waste Hauler	Haule			200	GRAND CE	NTRAL SANITAR	Y LAN	ULILI	_			
NEWARK CARTING INC. 369 RAYMON BLVD.	1,33,	913			City, State					50/		
City, State				Disposal Date 12/23-11/30/2017	PLAINFIELI	D TOWNSHIP, PA	٩			101		
NEWARK, NEW JERSEY 07105	le .			Signature	1/1/5		ate	,	1)	19/1	6	
Completed by (Print or Type) BENJAMIN SANCHEZ DI	RECTO	R OF	OPE	ERATIONS	1)0	Š			~	11		

MO'24463102863 State of New Jersey NOTIFICATION OF ASBESTOS ABA

2077 2011	0102040	Г		ursuant					-	l ee	B 2	20	117		$J \parallel$
Date of Notification (1) 02/22/2017					Building el Fano	Owner/C	perator	(2)	13	d Strausanous					
Agencies Notified	Type Notification	7-1-3		Street A	ddress				No.	ASBES	TOS C			. &	
× EPA × DEP × DOL	Initial Amended Amendment		_		te, Zip Co Caldwel				<u> </u>		NOL! W				
DOH DCA	Emergency (justification) Cancellation	including		Name of MICHA	Contact	NO				Teleph	one Nun	ber			
			1	FACI	LITY INFO	DRMATI	ON				7				
Name of Facility Where Private House	Abatement is Taking	g Place (3	3)					Type of F							
Street Address								Subo		Other th					
								Othe etc.)	r (i.e. pr	ivate & co	mmercia	l build	dings,	home	es,
City (5) West Caldwell						I have the		Square Fe	eet	# of Flo	oors		ldg. A I/A	ge	
County (6) essex				County C	Code (7) USE ONLY	0		Current U			demolish	ed)			
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCM	1 No.			of Abateme	ent Cont	ractor (9)		-			
N/A Street Address							1000000	/ ABATE Address	MENI	LLC					
Street Address							10-14030-00-00-00-00-00-00-00-00-00-00-00-00-	RANKLIN	N STRI	EET					
City, State, Zip Code								tate, Zip Co ERSON,I		til.					
Project Manager for Mor	nitoring Firm			Telephor	ne No.			one No. 333-4154	1	1 50	cense N 1274	ο.			
Start Date (10) 02/25/2017		Schedul 02/26/		mpletion (Date (11)			of OSHA M		LLC					
Occupancy Status Durin	g Abatement (Chec		FE (50)				1000000	Address							
Facility Closed/Vac	ated During Entire F	Period of	Abate	ment			1,000,01	RANKLIN	CO SONO ALLEGA	EET			1		
Abatement Perform Other – Describe:		al Facility	y Hour	'S			200	tate, Zip Co ERSON,		524					
Scope of Work (Check A	II That Apply)							-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renov Demol				×	Mini-Er Gloveb	closure ag Proce	nt with Ne edure (*) and N				e	
		Is	Loca	tion						A Cinaman			Abate	ement	
Location		1	Norma		50 20		scription			1 200000		-	1)	ре	
Asbestos-Containing TO BE AB In Faci (13)	ATED lity	Ma	aintena	ance/ Staff?		thermal surfa				Amo (Spe SF or	cify	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										(D	
BASEMI			X			1201011 - 12001	NSULA			15L		Х			
BASEMENT /	GARAGE		X			DEBR	IS CLE	N UP	-	TBI	D	-			
		-							-			-			
Name of Registered Wa	ste Hauler			NJDEP W	/aste	Cubic	Yards	l Na	ame of F	Registered	d Landfill				
TRY STATE TRANS		OTHER		Hauler ID 19551		of Wa		5550		VA ENT					
City, State 1199 RANDALL AV	E BRONX NY				0	Dispo TBD	sal Date		ty, State 00 MIN	NERVA _A	RD WA	YNE	SBU	JRG	ОН
Completed by VICTOR ESPIRITU		Title PRC	JEC	T MANE	EGER	5	Signature	Offer	WI	M.	Da	te 2/22/:	2017		

CK 3748

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M	action of the second	FEB	2	7	2017	7	1

21 / 17	_			Morton		1	1	THE STREET		
			Street Ac	droce			ASBESTOS C	ONTR	OL	&
Type Notification		1	Street At	Juless			LICENS	SING		
			0.1 Ct-	to Zin Co	ndo.					
		12								
- T				•	J 00002		Tolonhone Numbe	or		
justification)					2000		TEINIONE NUMBE	**		
☐ Cancellation			Pat -	Keller W	/illiams Realty					
			FACI	LITY INF	ORMATION					
Abatement is Taking	Place (3	3)								
7 (DOLOTHOTIC TO TELLING)		1897.				School (K-12)	(OI) - H K 12)			
		-				☐ Subchapter 8	(Other than K-12) wate and commerc	ial build	lings,	
						homes, etc.)	vato and seminar			
						Square Feet	# of Floors	Bldg	. Age	
							3	80)	
					OTATE LIGE ONLY		or if being demolish	ned)		
			County	/ Code (/)	(STATE USE UNLY)		, it coming demands			
m Hired by Building (Owner (8)	,	ASCM N	0.						
nental Consulting	Service	es			Shade Enviro	onmental, LLC				
					Street Address					
					623 Cutler A	venue				
					City, State, Zip C	ode				
					Court II In a Coll Charles The Coll Coll Coll Coll Coll Coll Coll Col					
			1 N				License No.			
onitoring Firm						a .	and the second s			
						Commence of the commence of th				
/ _ 17	03 /	_ 03	3_ / _	17		tical, inc.		-	-	
ing Abatement (Chec	k only or	ne)								
ated During Entire Pe	eriod of A	bate	ment		200 Route 1:	30 North				
ned Outside of Norma	I Facility	Hou	rs - Desc	cribe	City, State, Zip C	Code				
AMP	M/	_PM	F	MA	Cinnaminso	n, NJ 08077				
		-					55			
, all that apply)					Full Cor	ntainment with Ne	gative Pressure			
	☐ Der	noliti	on		☐ Non-Ex	empted (*) and No	n-Friable Procedu	ire		
	- ·		£1					Aba	ateme	ent T
	100000				Description	of	45	Z	D	Ш
				Asbe	estos Containing N	laterial (ACM)	Amount	em	epa	าเ
ABATED				(i.e	e., thermal system	s insulation,		ova	=	psu
	Cust			357	surfacing, VA	1, 01	SI OLLI J			Encapsulate
3)	Vaa			1	Other Hilscellar	10003)				
			IN/A	5	4:		20 I F		П	
				Pipe Ir	sulation		20 21		1	
		П							Ш	Ш
	+=	-	1=							
		Ш								
Naste Hauler			NJDEP	Waste	Cubic Yards of	Name of Reg	istered Landfill			
			Hauler I	D No.	Waste	Cumberla	ind County Lan	dfill		
6			15939	9		City. State				
						100000000000000000000000000000000000000	PA			
					3/3/2017	Hewburg		Date		
	Emergency (indiginal justification) Cancellation Abatement is Taking Taking	Amended Amendment # Emergency (including justification) Cancellation Abatement is Taking Place (3) The Hired by Building Owner (8) mental Consulting Service D8515 Conitoring Firm Scheduled Co J 17	Amended Amendment # Emergency (including justification) Cancellation Abatement is Taking Place (3) The Hired by Building Owner (8) Mental Consulting Services Scheduled Comple Joseph Jos	Amended Amendment # City, State Amendment # Cherr Name of Pat - FACI County County County Pat - FACI Abatement is Taking Place (3) County County Pat - FACI Abatement is Taking Place (3) County County Pat - FACI Abatement is Taking Place (3) County County Pat - FACI Abatement is Taking Place (3) County County Pat - FACI Abatement is Taking Place (3) County Pat - FACI AscM Nomental Consulting Services County Pat - Scheduled Completion Date One Pat - Gog-298- County Pat - Scheduled Completion Date One Pat - Facility Pa	Amended Amendment #	Amended Amendment # City, State, Zip Code Cherry Hill, NJ 08002 Name of Contact Pat - Keller Williams Realty FACILITY INFORMATION Abatement is Taking Place (3) County Code (7)(STATE USE ONLY)	Amended Amendment # Emergency (including justification)	Amended Amended City, State, Zip Code Cherry Hill, NJ 08002 Name of Contact Pat - Keller Williams Realty FACILITY INFORMATION	City, State, Zip Code	City, State, Zip Code Cherry Hill, NJ 98002 Name of Contact Part - Keller Williams Realty Telephone Number Part - Keller Williams Realty School (K-12)
State of NJ

Check # 8262

2017-20 B & G proj. #:

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

Date of Notification (1)	11	Name of Bu	ilding Own	ner/Operator (2)		[h:sex]	F A		П	n n	(F ² (
0 2 / 2 4 / 1 7		Seth Dia	- A	iciroperator (2	,			EG	L		\mathbb{V}	
Agencies Notified Type Notifica	tion	Street Addre	SS				11171	900 000				- 1
DEP Initial								FE	B 2	1 2	201/	1
DOL Amend		City, State, 2		400						200 200 2	42500000	
			d, NJ 07	436				ASBEST				OI &
DOH Cancel	1.1	Name of Cor					Telepho	ne Numble	(UEI)	4D:IV	<u> </u>	
DCA Cancer		Seth Di	amond								_	
			FAC	ILITY INFORM	IATIO	N						
Name of facility where abatement	is taking p	lace (3)					Type of Facility	(4) ol (K - 12)				
Seth Diamond								apter 8 (C		han K	-12)	
Street Address								(Private/C		ercial		
							Square Feet	# of Floo		BI	dg. A	ge
City (5)	Cou	inty (6)			F 10502763	unty Code (7)						
Oakland	Ве	ergen			(Sta	ate use only)	Current Use (F residential	rior if bein	g den	nolishe	ed)	
Name of Monitoring Firm Hired by	Bldg. Own	er (8)		ASCM No.		Name of Abatement (The second secon		-			
				n/a		B & G Restorati	on, Inc.					
Street Address						Street Address 105 Ryerson R	ood					
City, State, Zip Code					_	City, State, Zip Code	oau		-	-	-	
City, State, Zip Code						Lincoln Park, I	NJ 07035					
Project Manager for Monitoring Firm	1	Ph	one Numb	per	_	Telephone Number		License		per	_	
						(973)696-6869		00	378			
Scheduled Start Date (10)	Sche	d. Completio	n Date (1	1)		Name of OSHA Monit B & G Restorati						
03/06/2017		07/2017				Street Address						
Occupancy Status During Abateme						105 Ryerson Ro	oad ———————					
Facility closed/vacated during Abatement performed outside						City, State, Zip Code						
Describe:Other-Describe:					-	LincolnPark, NJ	07035					
Scope of Work (check all that appl	y)											
☐ Demolition	Renovation	on			X	Full Containment w/neg	ative pressure	Glove	oag pr	ocedu	re	
	≥160 sf or	≥260 If				Mini-enclosure		☐ Non-fr		oroce	dure	
Location of		n normally u enance/cust		28			Amount		R	R	E	E
asbestos-containing material to be	staff(12)	Г	1	Description material (sbestos-containing	(Specify S	F or	m o	p a	c	n c
abated in facility (13)	Yes	No	N/A				LF)		v e	i	р	L
Basement			X	VAT			250 sf		X			
											므	무
				1					1	님	屵	H
									H	H	H	計
Registered Waste Hauler		EP Hauler II)# C	ubic Yards of V	Vaste	Name of Registered			<u> </u>		_	
B & G Restoration, Inc. City, State		19563	Disposal D	3 Pate		l ullytown F	Resource & Re	covery	Cent	er		
Lincoln Park, NJ				8/2017		Tullytown, F	PA				÷	
Completed by (Print or Type)	Title	n/Trans	ror	Signature		Gordana Luna		Date	1204	7		
Gordana Luna	Secreta	ry/Treasu	lel			Junion Service		02/24	1201	1		

B & G proj. #: 2017-21

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

		Check # 8263 2 7 2017	Lan man	F	P	F		\//	K	F
	IK	Check # 8263 2 7 2017	11111,	_5_	(U)	L	L	U	L	Ш

В & С ргој. #.)						and the second	Check #	8263	2.7	20	117	_]]
Date of Notification (1)		Name of	Building Ow	ner/Operator (2	2)			-					but a
0 2 / 2 4 / 1 7			Cornett	, , , , , , , , , , , , , , , , , , , ,	1		and the same of th	ASF	BESTOS	3.0	ONE	TRO	1 &
Agencies Notified Type Notifica	ation	Street Ad	dress						Liu				
DEP Initial													
	dment	(2017)	e, Zip Code	07500						Albert.			
₩ DOH		Name of 0	horne, NJ	07506			I To	lephone	Number				
DCA Cance	11						116	ephone	Number				
		Frank	Cornett									_	
			FAC	CILITY INFORM	MATIO	N							
Name of facility where abatement	is taking p	place (3)					Type of F	acility (4) School (
Seth Diamond								Subchap	ter 8 (Oth	er th	nan K	(-12)	
Street Address								Other (Pr Bldgs./Ho			rcial		
							Square F		of Floors		В	dg. A	\ge
City (5)	Co	unty (6)			AL 0.0000000	unty Code (7)				_	_		
Hawthorne	Pa	assaic			(Sta	ate use only)	Current l	Use (Prio	r if being	dem	olish	ed)	
Name of Monitoring Firm Hired by	Bldg. Ow	ner (8)		ASCM No.	1	Name of Abatement		and of the last term in					
				n/a		B & G Restorat	tion, Inc.						
Street Address						Street Address 105 Ryerson F	Road						2 - HAVIER
City, State, Zip Code					_	City, State, Zip Code		1					
100000 *						Lincoln Park,							
Project Manager for Monitoring Fire	n		Phone Num	ber		Telephone Number (973)696-686	9	T	icense N 003		er		
	10.1		" - D //	-2\	_	Name of OSHA Mon			003	70	-		
Scheduled Start Date (10) 03/08/2017	- 1	50	etion Date (1	1)		B & G Restorat	tion, Inc.						
Occupancy Status During Abateme		/09/2017			_	Street Address 105 Ryerson R	lood						
Facility closed/vacated during		70 10	itement.			City, State, Zip Code	.oau						
Abatement performed outside Describe:													
Other-Describe:					=	LincolnPark, N	J 07035						
Scope of Work (check all that app	5.0												
	Renovati					full Containment w/ne Mini-enclosure	gative pressi	ure 🗶	Gloveba				
▼ >3 sf or >3 lf	≥160 sf o		y used solel	VI		wim-enclosure			Non-frial	R I	R	E	1
Location of asbestos-containing		tenance/ci			on of a	sbestos-containing	Am	ount		e m	e	n	E n
material to be abated in facility (13)	Yes	No	N/A	material (•	(Sp LF)	ecify SF of	or	0	a :	a	C
	100	140	N/A							е	r	р	<u> </u>
Basement	-		×	pipe insula	ation		120	lf		X	片	片	H
				1						╣	片	+	쓔
										5			百
Registered Waste Hauler B & G Restoration, Inc.		EP Haule 19563	r ID#	cubic Yards of V 2	Vaste	Name of Registered Tullytown		& Reco	overv C	ent	er -		
City, State Lincoln Park, NJ			Disposal D			City, State Tullytown,							
Completed by (Print or Type)	Title	200	-1	Signature				1	Date			3	
Gordana Luna	Secreta	ary/Treas	surer			Gordana Suna			02/24/2	201	7		

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (BURBLIANT TO NIAC 8:60 7 AND 12:120-7

				(PURSUAI	NT TO NJA	C 8:60-7 A	ND 12:120-7	7	~ /	17	K -	4 60
Date of Noțification (1	1)							rator (2)				
02 / 24	/17				Mondelez	z Internation	nal		* aur 24-	\ E	e e	
/ /					Street Ad	ddress			111			U U L
Agencies Notified	Type of N	lotificati	on		2211 Rou	ite 208 Nort	th		111	1		
☐ EPA	✓	Initial			City, Stat	te, Zip Cod	е	Will Constitute of the Constit	1117	1		
☐ DEP		Amen	ded		Fairlawn,	New Jersey	y, 07410			F	FR 2	7 2017
☑ DOH		Amen	dment	#	Name of	Contact			Telepho			7 7 111 7
☑ DOL		Emerg	ency v	v/ justification	JOSH MY	YLES						
									1 1	<u> </u>		
	04//			F	ACILITY IN	VEORMATI	ON			AGDE	3700 C	JON HOL (
							777.20			-	LICEN	SING
Name of Facility When	re Abaten	nent is	Taking	Place (3)		Type of F	acility (4)					
Mondelez International			5			1,750 011	domey (4)					
							School (K	-12)				
Street Address						⊣ =			than K 1	21		
2211 Route 208												
									Cililiercia	21		
City (5)	County (6	()		County Code	(7)	Sauara E		# Of Floor	re	Buildin	a Aao	
		,		County Code	(1)			The second of the second of the second	3	Dullulli	y Aye	
	zo.gon									+	40	
									ionsnea)		40 -	
Name of Monitoring E	irm Lirad	l by Dla	~ 0	a= (0)	TACCHI M		AREHOUSE					
ivalle of Worldoning F	iriii Hired	і ву віа	g. Own	er (8)	ASCM NO	1\						
AET						NODTUG	TAD CONTE	A OTINIO O	DOLID IN			
								RACTING	ROUP, IN	C.		
Street Address						Street Ad	dress					
907 Doolittle Drive							720 8					
City, State, Zip Code	Type of Notification Type of Notification											
Bridgewater, NJ 08807						City, State	e, Zip Code					
Project Mngr. For Mor	nitoring F	irm			mber							1
Eric Houseknecth						East Hand	over, NJ 079	36				
Sheduled Start Date (1	10)	Sched.	Comp	letetion Date (1	1)	Telephon	e Number		License	Number		
03 / 7 /	17		3	/10/	17							
// /			/	/		973-8	84-8682			0	0860	
						Name of (OSHA Moni	tor			W. Commercial Commerci	
Facility Clo	sed/Vaca	ted Dur	ing Ent	tire Period of		NORTHS	TAR CONTR	RACTING G	ROUP, IN	C.		
Abatement						Street Ad	dress					
Abatement	Performe	d Outsi	de of N	lormal Facility								
Hours - Des	scribe:					32 William	s Parkway					
Other - Des	cribe:	7:00 AM	Λ-3:30	PM		City, State	e. Zip Code					
Scope of Work (Check	All That	(vlaaA										
		,										
Demolition			7	Renovation	П	Full Conta	ainment wit	h Negative	Pressure			
≥3sf or≥3lf					$\overline{\Box}$							
>160 sf or >												
									ble Proce	dure		
Location of		l l	s		Descript	ion of			Abateme	nt Type		
Asbestos Contair	ning			As					R	1	E	E
	· ·	Norr	nally			_		Amount	E	R	N	N
TO BE ABATEI	D	100000000000000000000000000000000000000		0.				(Specify	M	E	C	c
in Facility	=.			1.4			г.	SF or LF)	0000	P	A	L
(13)		1,000						0, 0, 2, 7	v	A	P	ō
3.26		100000000000000000000000000000000000000			J.1.101 111100	onanooao,			À	î	s	s
		27.05							Ê	R	U	Ü
		Staff	(12)						·-	1.55	L	R
		YESIN	O N/A								+	-
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BAKERY 1ST FLOOR			H	PIPE & FITTIN	G			22 I F	7	H	1 1	1 1
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			11								1 -	+ + -
Name of Registered W	acto Have	lor.	11	N IDED Wasts	Cubia	Nome - 6 5	Pogleter 1	ondf:II				
NEWARK CARTING	aste naui	iei					kegistered t	_anuiiii				
TENVALLI CARTING						I.E.S.I.						
City, State				4509	-	City City						
VEWARK, NJ					- *:			0.5				
YLVVARA, NJ					Date	DEIHLEH	⊏IVI, PA 181	U5				
Completed by /Driet	T			T:41-			lo:				To :	
Completed by (Print or	(ype)			TITLE			Signature	_//			Date	
Steve Stiles				Denings Man-	-		1	571			1	2/24/47
STEVE OTHES				Project Manage	1		1 7				1 (1)	2/24/17

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

Check # 2819

Date of Notification	(1)			Name of RUSSO	Building Own DEVELOPMEN	ner / Oper	rator (2)	r			
	/	_		Street A		11 1110.		1177	TE (TW E
Agencies Notified		Notification			MERCE BLVD)				<i>y</i> 153	
☐ EPA DEP		Initial			te, Zip Code			1117) :		
☑ DOH		Amended Amendmen	+ #		ADT, NJ 07072	2				p 27	2017
☑ DOL		Emergency	w/ justification		Contact CK TUCCI			Teleph	one Num	ber "	2011
		Cancellation	n	EAGU ITO							
				FACILITY	INFORMATION	J		and the same of th		JOENS JOENS	ONTROL 8 NNG
Name of Facility Wh FORMER MERCK UN	ere Abate NON	ment is Taking	g Place (3)		Type of Faci	lity (4)			Printed the Control of Landson	The state of the s	
					□ s	chool (K-	12)				
Street Address					_ □ s	ubchapte	r 8 (Other				
1011 MORRIS AVE							private &	cmmercia	ıl		
City (5)	County (6)	County Code	2 (7)			mes, etc.)		15		
UNION	UNION	0)	County Code	= (1)	Square Feet 800,00		# Of Floor:	s /A	Buildir	ng Age	
					Current Use				+	40	+
					OFFICE / PR			ononou		40	(B)
Name of Monitoring	Firm Hire	d by Bldg. Ow	ner (8)	ASCM NO) I						
EHI					NORTHOTA						
Street Address					NORTHSTAR Street Addre		ACTING G	ROUP, IN	C.		
655 WEST SHORE T	RAIL				Street Addre	SS					
City, State, Zip Code					32 Williams P	arkway					
SPARTA, NJ 07871					City, State, Z						
Project Mngr. For Mo	nitoring I	Firm	Telephone N		1						
WILLIAM KIERBIL	(4.0)	10.1.1.0	973-729-5649		East Hanover		6				
Sheduled Start Date	/ 17	Sched. Com	pletetion Date (/	Telephone N	umber		License	Number		
 // /	/	12	/ /	/	973-884-8	8682				00000	
Occupancy Status Di	uring Aba	tement (Check	Only 1)		Name of OSH		or	1		00860	
Facility Cl	osed/Vaca	ated During Er	tire Period of		NORTHSTAR			ROUP, INC	Ο.		
Abatemen					Street Addres						
Abatement Hours - De	EPETTORMO	ed Outside of	Normal Facility		22 MEH D						
		7:00 AM-3:30	PM		32 Williams P. City, State, Zi						
		7.007111 0.00	1 141		East Hanover,		6				
Scope of Work (Chec	k All That	Apply)		and the second			T. (1				
Demolition	1	V	Renovation		Full Cantains	4 ::41		_			
≥3sf or >3l		[4]	Renovation		Full Containn Mini - Enclos	nent with	Negative	Pressure			
≥160 sf or				7	Glovebag Pro						
				V	Non-Exempte		Non-Friab	le Proced	lure		
Location of		ls		D	53700						
Asbestos Contai		Location	Δ.	Descript sbestos - C				Abateme	nt Type	l-	I-
	•	Normally	_	Material (- 1	Amount	R E	R	E N	E N
TO BE ABATE	D	Used	(1	.e., thermal			(Specify	М	E	C	C
in Facility		Solely	insu	ılation, surl	acing, VAT,		SF or LF)	0	P	A	L
(13)		by Main-	or	other misc	ellaneous)	- 1	•	V	Α	Р	0
		tenance/						A	1	S	s
		Custodial Staff (12)						L	R	U	U
		YES NO N/A	-						-	L	R
J1			PIPE FITTING	S		2	5 EA	V			
J1			VAT MASTIC				5,860 SF	7	1 1		
J1			MASTIC				7,175 SF	V		1 7	
J1	(==4 1°		CAULK			8	10 LF	V			
lame of Registered W IEWARK CARTING	raste Hau	ier	NJDEP Waste Hauler ID No.	Cubic Yards	Name of Regis	stered La	ındfill				
				of Waste							
ity, State				Disposal	City. State		1	1			
IEWARK, NJ				Date	BETHLEHEM,	PA 1810	5)			
ompleted by (Print o	r Type)		Title		Isia	nature	-			Date	
	83 (5)				0.19	3		-		Date	
teve Stiles			Project Manage	er			1			02	2/24/17
SB-41					NO - INTERNAL PROPERTY		,		and the later with the later of		MATERIAL STATE OF THE PARTY OF

Asbestos Containing TO BE ABLED In Recitify (13) Used In Recitify (13) We have transacted Custodial Staff (12) VE NM WA VE NM WA UT US US US US US US US US US	Location of	Is	Description of	I service in	Table 700		7.1	K. Marie
Normally Material (ACM) (Ex., thermal systems insulation, surfacing, VAT, Septist Oct. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. T. A. P. P. P. T. A. P. P. P. T. A. P. P. P. T. A. P. P. P. T. A. P. P. P. P. P. P. P. P. P. P. P. P. P.	그들은 이 아이들은 아이들은 아이들은 아이들은 아이들은 아이들은 아이들은		Description of				WE	
10 8	Aspestos Containing			[11]	- Annual Control of the Control of t	-		
In Facility	TO BE ABATED			700000000000000000000000000000000000000	200	5342	10.00	
(13) by Main- tenance/ Custodial Staff (12) 11		1,21,41,525,530,5			83.77	100-100 mm (mag)		C
Custodial Staff (12)	The state of the s				O E	P2 /		Contract of
Staff (12) VES NO NA VES	(13)		or other miscellaneous)		V	Α		
Steff (12)					Α		S	
VESINO NA				1	ACCITICA	Racco	Ugo	
U1					ASDES	00 000	L	R
					h-	W 1 - C		
U2	U1		WATER PROOFING	10,750 SF	V			
U2					n		n	T T
U2	U2		VAPOR BARRIER PAPER	3.000 SF				
U2	U2						H	H
12	U2					H H	H	H
U2						-	-	
1							<u> </u>	
U3								
U3	02		VAT MASTIC	1,080 SF	V			
103								
13			The state of the s	15 EA	V			
U3			LINOLEUM AND MASTIC	600 SF	V			
13	U3					H		H
13						- H		H
1						-	<u> </u>	
14								
14	03		ROUF FLASHING	3,120 SF	V			
14								
14			Particular de proprieta de la companya del companya del companya de la companya d		V			
14			2200000	7,450 SF	V			
14	1990 P.			480 SF	1			
U4	U4		DUCT INSULATION		[J]		П	
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U4	U4		The state of the s	(A) (A) (A) (A) (A)	1000			
U4	20010010							
U4	100000000							
U5 / 5A								
U5 / 5A	04		ROOF FLASHING	3,500 SF	V			
U5 / 5A	115 / 50		DIDE A FITTING					
U					- Constant			
U6	U5 / 5A		PIPE FITTINGS	4 EA	V			
U6								
U6	U6		PIPE & FITTING	382 LF	[J]			
U6	U6		PIPE FITTINGS		The second second second			
U6	U6				Name of the last o			
U6					Control of the Contro	-		
U6		THE RESERVE TO BE ADDRESS OF THE PARTY OF TH					[77]	
U6					-			
U6								
	30,000	and the latest designation of the latest des			V			
U7 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Ub		ROOF FLASHING	510 SF	7			
U7								
U7			PIPE & FITTING	295 LF	1			
U7 □ ✓ □ TANK INSULATIONS 435 SF ✓ □ □ □ U7 □ ✓ □ LAB TOP 12 SF ✓ □ □ □ U7 □ ✓ □ ROOFING 1,400 SF ✓ □ □ □ U7 □ ✓ □ PIPE FITTINGS 2 EA ✓ □ □ □ U9 / 9A □ ✓ □ VAT MASTIC 3,060 SF ✓ □ □ □ U9 / 9A □ ✓ □ CAULK 10 LF ✓ □ □ □ U9 / 9A □ ✓ □ ROOF TAR 10 SF ✓ □ □ □ U9 / 9A □ ✓ □ ROOF FLASHING 1,600 SF ✓ □ □ □ U10 □ ✓ □ TANK INSULATION 320 SF ✓ □ □ □ U10 □ ✓ □ TANK INSULATION 320 SF ✓ □ □ □ U10 □ ✓ □ CAULK 1,650 LF ✓ □ □ □ U10 □ ✓ □ ROOF TAR 5 SF ✓ □ □ □ U10 □ ✓ □ ROOF TAR 5 SF ✓ □ □ □ U10 □ ✓ □ ROOF FLASHING 6,385 SF ✓ □ □ □ U10 □ ✓ □ ROOF FLASHING 6,385 SF ✓ □ □ □ U12 □ ✓ □ TANK INSULATION 200 SF ✓ □ □ □ U12 □ ✓ □ TANK INSULATION 200 SF ✓ □ □ □ U12 □ ✓ □ TAN	U7		PIPE FITTINGS	7 EA	V			
U7	U7		TANK INSULATIONS		The second secon			
U7 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	U7				-			T
U7				0.000				
U9 / 9A	Except the second secon					-	-	
U9 / 9A □ □ □ □ PIPE FITTINGS 2 EA □ □ □ □ □ U9 / 9A □ □ □ VAT MASTIC 3,060 SF □ □ □ □ □ U9 / 9A □ □ □ ROOF TAR 10 LF □ □ □ □ □ □ U9 / 9A □ □ □ ROOF FLASHING 1,600 SF □ □ □ □ □ □ □ U10 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ U10 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □				1,400 35	~			
U9 / 9A	119 / 94		DIDE EITTINGS	12.54				
U9 / 9A		The second liverage of the second liverage of						
U9/9A	STATE OF THE PARTY							
U9/9A	Annual Control of the				~			
U9 / 9A □ □ □ □ ROOF FLASHING 1,600 SF ✓ □ □ □ □ U10 □ □ □ □ □ □ □ □ □ □ □ □ □ □ U10 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ U10 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ U10 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ U10 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □				10 SF	7			
U10 □	U9 / 9A		ROOF FLASHING		_			
U10 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □						H		
U10 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	U10		PIPE & FITTING	40 I F	77	-		
U10	U10							
U10					The same of the sa			
U10 □ □ □ □ ROOF TAR 5 SF □ □ □ □ U10 □ □ □ ROOF FLASHING 6,385 SF □ □ □ □ U12 □ □ □ □ TANK INSULATION 200 SF □ □ □ □ U12 □ □ □ □ LAB TOPS 655 SF □ □ □ □	1,000,000,000							
U10		Annual Contract of the Contrac						
U12								
U12	010		ROOF FLASHING	6,385 SF	V			
U12	1140					-		
000 01					V			
U12 U TRANSITE 1850 SF 77 77 77 77 77 77 77					V			
	U12		TRANSITE	850 SF	7		Ti	

U12		DUCT INSULATION	14 100 CF				
U12		ROOF FLASHING	1,100 SF	V	 		
U12			3,557 SF				
012		TANK FLASHING	100 SF	LEJ)		EDV	
11.13		DIDE & FITTING		111171		5 1 7	
U 13		PIPE & FITTING	1,550 LF	11-12			
U 13		PIPE FITTINGS	417 EA				
U 13		VAT MASTIC	4,780 SF		FER	2 11120	1/ 1/ 1/ 5
U 13		TRANSITE	1,500 SF				
U 13		FIREPROOFING	2,000 SF	V			
U 13		WATERPROOFING	10,760 SF	I JAS	BESTO	6 CONT	ROD&
U 13		CAULK	2,000 LF	1		ENGLIG	
	50-2-20-20-20-20-20-20-20-20-20-20-20-20-		338				
U 13		WINDOW GLAZING	WINDOWS				
U 13							
U 13		DUCT MASTIC	500 SF	V			
U 13		ROOFING	89,000 SF	\Box		H	
U 13		ROOF FLASHING	5,100 SF	V			
		11001 121011110	3,100 01				
U14		PIPE FITTINGS	150 50				
U14		VAT MASTIC	150 EA	V	<u> </u>		
U14	Total Control Control		500 SF	/			
		TRANSITE PIPE	115 LF	V			
U14		LAB TOPS	600 SF	7			
U14		TRANSITE	65 SF	7			
U14		SILL CAULK	200 LF	V			
U14		GLAZING	90 WINDOW	/S ☑			
U14		ROOF FLASHING	1,110 SF	V	П		
U15		VAT MASTIC	3,360 SF	1			
U15		TRANSITE	175 SF	7			
U15		ROOFING	400 SF	7		H	
U15		ROOF FLASHING	157 SF	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN			
0.0		ROOF I EASTING	137 35	7			
U18		PIPE INSULATION	450.1.5				
U18			450 LF	7			
		PIPE FITTINGS	130 EA	V			
U18		VAT MASTIC	1,725 SF	7			
U18		LAB TOPS	455 SF	7			
U18		TRANSITE	800 SF	V			
U18		TRANSITE DUCT	13,200 SF				
U18		DUCT MASTIC	1,200 SF	1			
U18		CAULK	845 LF	V	П		П
U18		ROOF FLASHING	4,740 SF	7			
U18		ROOFING	600 SF	7			
EXTERIOR RACKS		PIPE INSULATION	330 LF	V			-H
EXTERIOR TANK FARM		MASTIC / TAR	1,288 SF	7			-
EXTERIOR TANK FARM		TANK INSULATION PAPER					
- TELEVICITATION FAINT		WHIT INGOLATION PAPER	2,200 SF	V			
76 TANK SHED		ROOFING	200.05				
. o man ones		NOOFING	200 SF	<u> </u>			
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